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3 Below you will find the Wisconsin Oral Health Coalition’s Rules of Operation. The Rules of Operation
 4 describe the leadership and operational structure of the Wisconsin Oral Health Coalition. If you have any
 5 questions, comments or suggestions related to the Rules of Operation, please contact Lindsay
 6 Deinhammer at Children’s Health Alliance of Wisconsin, (414) 337-4563 or
 7 ldeinhammer@childrenswi.org.

8

9 Rules of Operation

10 Section 1. NAME:

11 This organization will be known as the Wisconsin Oral Health Coalition (WOHC).

12 Section 2. MISSION:

13 The Wisconsin Oral Health Coalition, consisting of diverse public and private partnerships, works to create
 14 meaningful change to improve oral health and access to care in Wisconsin.

15 Section 3. WISCONSIN ORAL HEALTH COALITION MEMBERSHIP:

16 The Wisconsin Oral Health Coalition is comprised of individuals representing themselves and individuals
 17 representing institutions, agencies or organizations. All of these individuals share a common interest in
 18 oral health and access to care.

19 Becoming a Member of Wisconsin Oral Health Coalition:

20 Individuals who are interested in becoming members can apply for membership by completing an
 21 application, either [online](#) or by paper. In requesting membership, the individual must provide information
 22 indicating:

- 23 • The name of the institution, agency or organization the applicant represents, if any
- 24 • The address, phone number and email through which the applicant can be contacted
- 25 • That the applicant has read and understands the mission and Rules of Operation of the
- 26 Wisconsin Oral Health Coalition
- 27 • That the applicant has read and agrees to abide by the Wisconsin Oral Health Coalition Conflict of
- 28 Interest Policy

29 Wisconsin Oral Health Coalition staff will process and review all requests for membership and will respond
 30 to interested individuals with coalition orientation materials.

31 The steering committee may alter committee membership as necessary, with a majority vote of the
 32 steering committee.

33 **Wisconsin Oral Health Coalition Membership Dues:**
34 The Wisconsin Oral Health Coalition does not charge membership dues although contributions are
35 encouraged.

36 **Section 4. STEERING COMMITTEE:**
37 The steering committee will manage overall planning and organizational policy setting for the Wisconsin
38 Oral Health Coalition.

39 **Steering Committee Membership and Elections:**
40 The steering committee's membership will consist of, at a minimum, one representative from each of the
41 following categories: dentist, dental student, dental hygienist, dental hygiene student, public health,
42 dental hygiene education, dental education, advocacy, parent/consumer, community dental health clinics,
43 funding, legislation, medical care and social services. All of the steering committee members, as
44 mentioned above, must be/become members of the Wisconsin Oral Health Coalition. The size of the
45 steering committee shall not be less than seven (7), not including non-voting observers such as Wisconsin
46 Oral Health Coalition staff members, ex-officio members and invited advisors. The steering committee
47 shall consist of no greater than 25 members.

48 At its own discretion, the steering committee may invite advisors to attend meetings. These advisors are
49 not members of the steering committee and will not have any rights or responsibilities associated with
50 being a steering committee member.

51 **Steering Committee Membership Terms:**
52 Steering committee members serve for two years, except the positions of Fund Development, Public
53 Health, Prevention/Health Promotion, Dental Student and Dental Hygiene Student. After serving in a
54 given position for two years, the steering committee member is eligible for reelection. There is a two
55 consecutive term limit for steering committee members. This rule does not apply to chair positions. A
56 person who has served as vice-chair or chair may serve on the steering committee for three consecutive
57 terms.

58 Steering committee members serving in the Fund Development, Public Health and Prevention/Health
59 Promotions positions do not have term limits. Steering committee members serving in the dental student
60 position will have a term limit of one year and are eligible for reelection, if he or she will remain a student
61 for the totality of the upcoming year. Steering committee members serving in the dental hygiene student
62 position will have a term limit of one year and are not eligible for reelection.

63 **Student Steering Committee Positions:**
64 The dental student position will be held by a Marquette University School of Dentistry student. Marquette
65 University School of Dentistry will share the application with students. Preference will be given to second
66 and third year dental students. The dental hygiene student position will be held by a student at one of the
67 eight dental hygiene schools in Wisconsin. An application will be sent to all dental hygiene schools.
68 Preference will be given to second year dental hygiene students.

69 **Steering Committee Representative Vacancies:**
70 The Wisconsin Oral Health Coalition membership will be informed of all steering committee vacancies.
71 Any Wisconsin Oral Health Coalition member can apply for membership to the steering committee by
72 submitting a statement of intent and a short biography to the chair of the steering committee. Steering
73 committee members can recommend an individual member of the Wisconsin Oral Health Coalition to fill
74 vacant positions on the steering committee.

75 **Steering Committee Member Resignation or Removal:**

76 When a steering committee member is unable to complete their term, a letter of resignation should be
77 provided to the committee chairperson so that the committee is aware of the upcoming vacancy.
78 Similarly, Wisconsin Oral Health Coalition staff reserves the right to remove inactive members from the
79 steering committee if a member has missed more than 50% of scheduled steering committee meetings.
80

81 **Steering Committee Member Responsibilities:**

82 The steering committee sets administrative policies and oversees the general planning for the Wisconsin
83 Oral Health Coalition. Its responsibilities include, but are not limited to:

- 84 • Approving the formation of workgroups
- 85 • Establishing regulations for the administration and operation of the Wisconsin Oral Health
86 Coalition
- 87 • Approving the use of the Wisconsin Oral Health Coalition name and logo
- 88 • Approving fund-generating activities
- 89 • Approving the annual budget
- 90 • Approving staff-related activities
- 91 • Electing a chairperson and vice-chairperson
- 92 • Planning the agenda and activities for the annual meeting
- 93 • Policy development and approval
- 94 • Strategic planning
- 95 • Giving overall direction to Wisconsin Oral Health Coalition efforts and activities
- 96 • Guiding Wisconsin Oral Health Coalition priorities
- 97 • Reporting all coalition activities to the membership at annual meeting

98 **Steering Committee Leadership:**

99 The chairperson of the steering committee will serve as the Chair of the Wisconsin Oral Health Coalition.
100 The chairperson will be elected every two years by a majority vote of the steering committee. The
101 chairperson term will be for two years and may be renewed for a second two year term by majority vote
102 of the steering committee. The chair will preside at all meetings of the steering committee and will
103 facilitate the annual meeting.

104 The Vice-Chairperson of the Steering Committee will serve as the vice-Chair of the Wisconsin Oral Health
105 Coalition. The vice-Chairperson will be elected every two years by a majority vote of the steering
106 committee. The vice-Chairperson term will be for two years with the option to renew for an additional
107 two years, if the Chairperson serves a second term. It is the intent that the vice-Chairperson will then
108 transition into the chairperson role for a two-year term which may be renewed for a second two-year
109 term by majority vote of the steering committee.

110 Only current members of the steering committee will be eligible to be elected as chairperson or vice-
111 Chairperson.

112 On behalf of the Wisconsin Oral Health Coalition steering committee, Children’s Health Alliance of
113 Wisconsin staff will fulfill the following responsibilities:

- 114 • Manage membership database
- 115 • Record and maintain meeting minutes
- 116 • Provide public relations services
- 117 • Fundraise and manage the budget
- 118 • Coordinate steering committee meetings
- 119 • Coordinate the annual meeting
- 120 • Coordinate legislative activity

- 121
- Maintain regular communication with members

122 At the steering committee’s discretion, it may assign other members to coordinate other key functions of
123 the Wisconsin Oral Health Coalition.

124 **Steering Committee Meetings:**

125 The steering committee will meet a minimum of four times each year. Special meetings of the steering
126 committee may be called at any time by the chairperson or at the request of a majority of members of the
127 steering committee. The chairperson or vice-chairperson will preside at all meetings of the steering
128 committee unless the chairperson designates someone else on the steering committee to serve as the
129 facilitator. Agendas and other meeting information are issued via email to steering committee members
130 at least 3 days prior to meetings.

131 **Steering Committee Quorum:**

132 For the purposes of voting, the presence in-person or via conference call of 51% of the voting-eligible
133 steering committee membership will constitute a quorum at any given steering committee meeting.. The
134 chair reserves the right to reschedule meetings that do not meet quorum.

135 **Steering Committee Voting:**

136 Decisions will be made by consensus when possible. In the event of inability to reach consensus, the
137 majority vote of the voting-eligible steering committee members attending a meeting will be the action of
138 the committee. Proxy voting will be permitted only when the proposed action has been presented to the
139 steering committee prior to the meeting.

140 **Steering Committee Staff:**

141 The Wisconsin Oral Health Coalition staff members will serve as non-voting ex-officio members of the
142 steering committee.

143 **Section 5. WORKGROUP FORMATION:**

144 In this section, the term workgroup is used in similar context as the term Ad Hoc. The formation of
145 workgroups may be initiated by the steering committee or any other group and must be approved by the
146 steering committee. Preferred workgroup size is 5 members; however, workgroups can be formed with
147 fewer members.

148 **Workgroup Membership:**

149 Any Wisconsin Oral Health Coalition member may participate in a workgroup. It is the responsibility of the
150 workgroup to inform the steering committee which members are active participants in the workgroup.
151 General members may also participate in workgroups by contacting WOHC staff.

152 **Workgroup Responsibilities:**

153 Each workgroup is responsible for:

- 154
- Developing a plan of activities
 - 155 • Implementing the planned activities
 - 156 • Reporting progress at general membership meetings
 - 157 • Submitting regular notices and updates to the steering committee
 - 158 • Obtaining approval from steering committee at large if needed

159 **Workgroup Leadership:**

160 The steering committee will confirm the workgroup chair elected by the workgroup for each of the
161 workgroups formed.

162 **Workgroup Accountability:**
163 All workgroups, whether standing or ad hoc, are accountable to the steering committee and ultimately, to
164 the general membership.

165 **Workgroup Vacancies:**
166 When a vacancy occurs in positions of committee chair, the standing committee must replace the
167 individual in the vacant position within 60 days.

168 **Workgroup Meetings;**
169 Workgroups will hold meetings, with the frequency and location determined by each committee. Notices
170 for these meetings will be sent to all members of each committee via email. Minutes of the committee
171 meetings must be kept and sent to the Wisconsin Oral Health Coalition staff for the official records of the
172 Wisconsin Oral Health Coalition.

173 **Workgroup Decision Making:**
174 Each workgroup is authorized to establish its own methods for and rules of decision-making. Standing
175 committees are welcome to use the consensus or quorum and majority rules designated for the steering
176 committee, but they are not required to do so.

177 **Section 6. GENERAL MEMBERSHIP ANNUAL MEETINGS:**
178 The Wisconsin Oral Health Coalition will conduct one general membership meeting called the Wisconsin
179 Oral Health Conference. The meeting will include updates and information sharing among the general
180 membership.

181 **General Membership Meeting Notice:**
182 Notices for these meetings will be sent to all members no less than 21 days prior to the meeting.

183 **General Membership Meeting Agenda:**
184 Creating the agenda for the annual meeting will be the responsibility of the steering committee. All
185 general membership meetings will include progress reports from the workgroups.

186 **General Membership Meeting Recording:**
187 Wisconsin Oral Health Coalition staff will be responsible for keeping records of the General Membership
188 Meeting and for disseminating general membership meeting proceedings.

189 **Section 7. REPRESENTING THE WISCONSIN ORAL HEALTH COALITION:**
190 It is the responsibility of the Wisconsin Oral Health Coalition chairperson, or chairperson designee, to
191 speak on behalf of and distribute written information about the Wisconsin Oral Health Coalition to the
192 press, government officials and to any other person seeking information about the Wisconsin Oral Health
193 Coalition for official and/or public purposes. No member shall speak on behalf of the Wisconsin Oral
194 Health Coalition without prior approval from the chairperson.

195 **Section 8. AMENDMENTS TO THE RULES OF OPERATION:**
196 Recommendations for amendments to the Rules of Operation may arise from the steering committee or
197 from a majority vote at the General Membership Meeting. Such recommendations will be distributed to
198 the general membership 21 days prior to General Membership Meeting for review and comment before
199 final vote by the steering committee. Any approved changes become effective immediately.

200 **Section 9. EFFECTIVE DATE OF RULES OF OPERATION:**
201 The Wisconsin Oral Health Coalition Rules of Operation were approved and adopted on February 19,

202 2003. The Rules of Operation may be reviewed and revised as recommended by the Wisconsin Oral
203 Health Coalition steering committee in accordance with the most current adopted Rules of Operation.

204 **Section 10. POLICY STATEMENTS:**

205 ***Policy Statement #1***
206 ***Committee Meeting Attendance***

Policy #1 Approved 4-09-03

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209 As an active member of the Coalition, and as a member of a committee, the member is expected to
210 attend a minimum of 50% of the committee meetings, either in person or via conference call.
211 Commenting to the committee chair regarding the agenda or sending proxy votes on issues identified in
212 the meeting agenda will fulfill the meeting attendance policy.

213
214 In the event of member inability to fulfill active membership, it is requested that the member resign their
215 membership from the committee.

216
217 The steering committee chair will contact the committee member to clarify the membership intent, if the
218 member does not contact the steering committee chair.

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221 ***Policy Statement #2—***
222 ***Procedure for Establishing Coalition Policy Statements***

Policy #2 approved 4-29-03

Revision approved 9-23-04

Revision approved 9-15-05

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226 The Coalition exists to educate and advocate for improved oral health for all Wisconsin citizens and will
227 recommend changes and program improvements to fulfill its mission:

228
229 **“The Coalition, consisting of diverse public and private partnerships, works to create meaningful change
230 to improve oral health and access to care in Wisconsin.”**

231
232 The following procedure will be used to establish policy statements that represent the Wisconsin Oral
233 Health Coalition.

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235 1. *The Coalition member interested in seeing an improvement in a particular policy or programmatic*
236 *issue will provide a written description of the issue to the steering committee chair in order for*
237 *the issue to be considered. The chair will then include the issue on the next steering committee*
238 *meeting agenda.*

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240 2. *After discussion, the steering committee chair will recommend that the issue be considered by the*
241 *steering committee in its current form. Approval by a majority of the steering committee*
242 *members will establish the issue as Wisconsin Oral Health Coalition policy effective that same*
243 *day.*

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245 3. *The steering committee, acting in good faith, will report new policy statements to the general*
246 *membership coalition at the General Membership Annual Meeting.*

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248 4. *Coalition members are encouraged to use the information provided by the coalition to advance*
249 *their efforts to improve the delivery of oral health services throughout Wisconsin.*

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**Policy Statement #3—
Online Voting on Issues**

Policy #3 Approved 4-09-03
Revision Approved 9-15-05

Online surveys will be an acceptable format for voting on issues that are too urgent to wait for steering committee meetings.

The online survey will be sent via Wisconsin Oral Health Coalition staff, which will announce the issue with the day and time deadline for response to the voting.

Votes will be tabulated by name in the minutes of the next steering committee meeting.

Contact Person:

Lindsay Deinhammer, Wisconsin Oral Health Coalition Project Manager
Children’s Health Alliance of Wisconsin
6737 W. Washington St., Suite 1111, West Allis, WI 53214
(414) 337-4563, phone ldeinhammer@childrenswi.org

*Cultural Competence refers to a set of attitudes, skills, behaviors and policies that enable organizations and staff to work effectively in cross-cultural situations. It reflects the ability to acquire and use knowledge of the health-related beliefs, attitudes, practices, and communication patterns of clients and their families to improve services, strengthen programs, increase community participation, and close the gaps in health status among diverse population groups. Cultural competence also focuses attention on population-specific disease prevalence and treatment efficacy. (Provider’s Guide to Quality & Culture, <http://erc.msh.org>)