BYLAWS OF

**THE CLINICAL COORDINATION PARTNERSHIP**

ARTICLE I – NAME & PURPOSE

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| Section 1: | *Name:* The name of the organization shall be The Clinical Coordination Partnership (TCCP). It shall be organized in compliance with the laws of Minnesota. |
| Section 2: | *Mission:* To maximize the ability of our healthcare and educational partners to coordinate resources to meet experiential learning needs. |
| Section 3: | *Vision:* Through vibrant partnerships and innovation, experiential learning needs are secured and tracked to help meet future healthcare workforce demands. |
| Section 4: | *Values:* Increase and improve healthcare experiential learning activity utilization, efficiency and capacity through:* Committed Partnerships
* Sustained Communication
* Data and Data Process Standardization
* Transparency & Technology
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| Section 5: | *Statement of Purpose:* TCCP is funded by, managed and led by its members with the goal to fulfill the cooperative needs and aspirations of healthcare facilities and healthcare programs to request, schedule, track and report clinical student experiences. TCCP main members include (1) Clinical Partners (CPs) – representatives of the clinical facilities in which students complete their clinical experiences and (2) Education Partners (EPs) – representatives of healthcare programs that requires students to complete clinical experiences within a healthcare facility. TCCP operates independently of any member or membership category to provide mutual aid that is orientated in collaboration and service.The purpose of TCCP is:* Establish an active and collaborative partnership between members – healthcare clinical sites and healthcare programs.
* Create a neutral environment in which partners commit to improve the student clinical experience process and environment.
* Improve the process of scheduling, tracking and reporting healthcare student clinical experiences amongst programs and clinical sites. Collaboratively simplify and develop enhancements.
* Transform clinical student data and collection methods amongst all members into one, standardized data language and collection method.
* Provide staffed assistance for all members to utilize during their assigned responsibilities within the TCCP scheduling process, tracking and reporting. Healthcare programs are provided assistance to submit their clinical student experience requests to designated clinical site representatives. Clinical sites are provided assistance to develop their master schedules of multi-school requests and technology means to enter decisions, track student data and create reports.
* Foster dialogue between healthcare programs and clinical sites to problem-solve issues that negatively affect the process of scheduling, tracking and reporting clinical student experiences.
* Provide networking opportunities for healthcare programs and clinical site representatives/members that conduct related work.
* Evaluate members to identify common needs and implement solutions for the mutual benefit of the partners.
* Expand partner numbers as a means of increasing clinical placement opportunities, sharing resources, plus creative approaches to student clinical experiences.
* Continually seek additional solutions to other, related healthcare education and provider clinical student experience issues (i.e., onboarding, additional programs, student requirement tracking, etc…). Supports efforts that streamline healthcare education and provider relations.
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ARTICLE II – MEMBERSHIP

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| Section 1: | *Eligibility and membership – Clinical Partner (CP):* any healthcare provider institution that schedules, tracks and is required to develop reports regarding college or university student experiences. Clinical provider eligibility is based on interest to participate within the TCCP processes and services not a geographical location. Membership is granted after receipt of annual dues, the first year dues will fund the CP’s orientation, software set-up and training of their clinical experience programs. |
| Section 2: | *Eligibility and membership – Education Partner (EP):* any healthcare program institution that is invited by a Clinical Partner (CP) member to participate within the TCCP processes and services. Not confined to a geographical location. Membership is granted with a one-year forgiveness of annual dues; after the first year membership is granted after receipt of annual dues. |
| Section 3: | *Annual dues:* The formula utilized to determine membership annual dues is determined by the TCCP Advisory Committee. This formula determines dues by the total amount of approved student experience placements that took place for an EP or CP within the previous calendar year. The dollar amount of the membership rate structure at each tier level will remain frozen for a period of three years.Annual dues amounts will be communicated within an annual report to the respective CP or EP member at least six months prior to the membership fee due-date. After the initial communication the CP or EP will have two months time to file an appeal. Continued membership is contingent upon being up-to-date on membership dues. Increases of membership dues – members who increase their scale of membership – will be allowed one year to remain at the previous annual due rate until the next annual due cycle. |
| Section 4: | *Annual dues appeal process:* Any member may submit a formal appeal in response to their annual membership due rate. This appeal must be submitted within two months of receiving notice of the annual due amount. The member may request a committee of the advisory committee to review the appeal or (in times then the appeal is in regards to only one or two other members) plus the EP or CP that the member primarily works with for student clinical experiences. |
| Section 5: | *Rights of members:* Each member shall be eligible to participate in any TCCP committee or task force. Each member shall be contacted and consulted for feedback regarding TCCP strategic and large scale initiatives as such efforts occur. |
| Section 6: | *Resignation and termination:* Any member may resign by providing written or electronic notice to the TCCP staff, who then passes such notification onto the TCCP Advisory Committee. Resignation shall not relieve a member of unpaid dues, or other charges previously accrued unless otherwise determined by the advisory committee. A member can have their membership terminated by a majority vote of the membership. |
| Section 7:Section 8: | *Non-voting membership:* A non-dues paying member.*Voting membership:* A dues paying member. |
| Section 9: | *Turnover:* It is the responsibility of the EP or CP institution to notify TCCP staff of their representation turnover, when it will occur and who will take their place. |

ARTICLE III – MEETINGS OF MEMBERS

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| Section 1: | *Regular meetings:* Regular committee and task force meetings of the members shall be held at a time and place designated by the staff and members. |
| Section 2: | *Bi-annual all partner meetings:* Twice a year TCCP will coordinate a large meeting for all partners to participate and network. One meeting will take place in January and the second will take place in either May or August. During the annual meeting all partner timelines and process for data collection will be agreed upon, strategic direction feedback will be collected and an opportunity for dialogue to foster improvement of the clinical student experience environment. |
| Section 3: | *Notice of meetings:* Electronic notice of each meeting shall be delivered to each member, by email, not less than one month prior to the meeting. Usually the next meeting is scheduled at the end of the current meeting. |
| Section 4: | *Quorum:* The members present at any properly announced meeting shall constitute a quorum. |
| Section 5:Section 6: | *Voting Operational:* Normal business issues to be voted on shall be decided by a simple majority of those present at the meeting in which the vote takes place. When Education and Clinical Partners are represented by more than one individual, it is expected that these members will present one opinion (i.e., annual timeline).*Large Scale Decision Voting:* The TCCP Advisory Committee will identify issues that result in major decisions that have a large-scale effect on TCCP voting members. The Advisory Committee will provide information on the decision at hand and provide opportunity for member input. The TCCP members will have the opportunity to provide their vote via a weighted scale related to the TCCP membership scales. The TCCP Advisory Committee will determine the best format for the TCCP member vote (i.e., electronic, in-person meeting).The weighed scale will be related to the membership fee scales. Votes must all be in the same decision and may not be broken up.Scale A – 6 votesScale B – 5 votesScale C – 4 votesScale D – 3 votesScale E – 2 votesScale F – 1 vote |
| Section 7: | *Meeting format:* Depending on the meeting content and purpose, meeting may be held in-person, via conference call, web forum or a combination of formats. Member representatives serving in the meeting or TCCP staff may recommend which format will be utilized. |

ARTICLE IV – ADVISORY COMMITTEE

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| Section 1: | *Advisory committee role, size and compensation:* The advisory committee is responsible for the overall policy and direction of the organization, and delegate’s responsibility of day to day operations to the staff and committees. This includes but is not limited to:* Defining the TCCP mission
* Establish TCCP priorities
* Craft TCCP strategies
* Ensures TCCP plans are implemented
* Approved annual TCCP budget and membership rates
* Approves TCCP policies
* Identifies and addresses other TCCP membership needs
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| Section 2: | *Size and compensation:* The advisory committee shall have no fewer than 10 members. The advisory committee receives no compensation, all participation in voluntary. |
| Section 3: | *Advisory committee member representation mix:* The mix of membership representation to the TCCP Advisory Committee is determined by that committee. This mix may be amended by the advisory committee at any time. A balance between Education and Clinical Partners, along with metro and rural members will always be attempted.The current advisory committee is comprised of representatives from:* Healthcare systems
* Standalone hospitals
* 2-3 private colleges
* University of Minnesota
* 3-5 MnSCU colleges (2 associates degree, 1-2 baccalaureate degree and one representative group such as HealthForce MN)
* 1 proprietary college
* 1 physician assistant program

Within this mix, the following groups are usually represented; however each group may designate an additional member to serve on their behalf for the advisory committee – each group is responsible to identify and communicate who their advisory committee representative is:* Minnesota Associates Degree/Practical Nursing DirectorsGroup
* Minnesota Association of Colleges in Nursing
* Physician Assistant Programs
* APRN Programs
* In the event that TCCP expand to serve additional disciplines, the TCCP may amend this list for additions at any time.
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| Section 4: | *Terms:* Advisory committee members may select to fill unexpired terms. A member may select to serve unlimited successive terms or they may select to have term limits. Members that select to serve for period of time/term are usually an education partner selecting to represent their representative school group (i.e., associate colleges, baccalaureate colleges, and/or specific programs) – that group is responsible for determining and communicating when and who will serve on their behalf for the advisory committee. |
| Section 5: | *Meetings and notice:* The advisory committee shall meet at least quarterly, at an agreed upon time and place. An official advisory committee meeting requires that each advisory committee member receive electronic notice at least four weeks in advance. |
| Section 6: | *Quorum:* A quorum must be attended by at least seventy five percent of the advisory committee members for business transactions to take place and for motions to pass. |
| Section 7:Section 8:Section 9: | *Chair Committee:* A committee of the Advisory Committee’s officers. This committee develops the draft of the TCCP budget and revenues for the TCCP Advisory Committee to annually review and approve. It is also responsible for developing and reviewing fiscal procedures, annual budget and staff. Quarterly reports are required to be submitted to the Advisory Committee showing income, expenditures and pending income. The financial records of TCCP shall be public information and shall be made available to the membership, Advisory Committee members and interested public.The Chair committee shall have all the powers and authority of the Advisory Committee, and is subject to the direction and control of the full Advisory Committee.*Chair Committee Terms:* Every even year or during times of turnover. Chairs may serve as many terms as they are elected by the TCCP Advisory Committee.*Chair officers and duties:* There shall be five officers/chairs of the advisory committee consisting of a Clinical Partner Chair, Clinical Partner Vice-Chair, and three Education Partners that represent the University of Minnesota, private colleges and MnSCU colleges. All must be TCCP dues paying members. The list of chair representatives will be listed on the TCCP informational website.*The clinical partner chair* shall convene the regularly scheduled board meetings, approve the agenda and provide staff direction on organization inquiries and day-to-day decisions. Provides guidance on clinical partner activities. Convenes the chair committee. Is elected by the advisory committee members.*The clinical partner vice-chair* shall serve in place or support of the clinical partner chair. Shall participate in the chair committee. Is elected by the advisory committee members.*The education partner University of Minnesota chair* shall provide guidance on education partner activities. Shall participate in the chair committee.*The education partner private college chair* shall provide guidance on education partner activities. Shall participate in the chair committee. Is elected by the advisory committee members.*The education partner Minnesota State Colleges & Universities (MnSCU) chair* shall provide guidance on education partner activities. Shall participate in the chair committee. Is elected by the advisory committee members. |
| Section 10: | *Vacancies:* No person may continue as an advisory committee member who is no longer involved with that institution or member group that selected him/her, and their membership shall terminate immediately. Any vacancy occurring at the advisory committee for any reason shall be filled by the institution or group that the member represented. TCCP staff will inquire to the member institution or group for the replacement name and contact. It is the responsibility of the member institution or group to determine who should represent them on the advisory committee. |
| Section 11: | *Special meetings:* Special meetings of the advisory committee shall be called upon the request of the chairs or members. Notices of special meetings shall be sent out by TCCP staff to each advisory committee member at least two weeks in advance. |

ARTICLE V – SUPPORTING COMMITTEES

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| Section 1: | *Committee formation:* The advisory committee may create committees as needed, such as special projects, and/or specific programs or projects. Committees are led by TCCP staff and have specific goals and objectives. Outcomes of committees are reviewed, discussed and moved forward by the TCCP Advisory Committee. |
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| Section 2: | *Advanced practice professional committee:* Comprised of interested hospitals, healthcare systems and advanced practice professional education programs. Develops recommendations for improvements to the advanced practice professional clinical coordination environment to the advisory committee. Oversees special projects related to advanced practice professional clinical coordination. |
| Section 3: | *Membership rate committee:* Every three years of an actualized budget the membership rates of the TCCP will be evaluated. Members of this committee are open to the entire membership. Recommendations will be taken into consideration by the advisory committee as they determine changes to the TCCP membership rate structure. Recommendations must provide a membership fee scale structure that meets the TCCP advisory committee approved annual budget. |

ARTICLE VI – EXECUTIVE DIRECTOR & STAFF

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| Section 1: | *Executive director:* The executive director is hired upon final recommendation of the advisory committee. The executive director has the day-to-day responsibilities of the organization, including carrying out the organization’s goals, strategies and policies. The executive director will attend all advisory committee meetings, report on the progress of the organization, answer questions of the advisory committee members and carry out the duties described in the job description. The advisory committee can designate other duties as necessary. |
| Section 2: | *Staff:* The supporting staff of the TCCP are approved by the advisory committee and are overseen by the executive director. TCCP staff will carry out their duties as described in their job description. The advisory committee and executive director can designate other duties as necessary. |

ARTICLE VII – FUNDS & CONTRACTS

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| Section 1: | *Deposits:* All funds of the TCCP shall be deposited by Winona State University (WSU) to a designated account or cost center to be used specifically for TCCP business and operations. |
| Section 2: | *Checks, drafts, POs, etc:* All checks, drafts or order for the payment of money, notes or other indebtedness in the name of TCCP shall be handed by the WSU business office, following government guidelines, drawing from the TCCP cost center monies. |
| Section 3: | *Contracts:* The organization, through the advisory committee and the WSU business office may enter into contracts such as for the development of software or hosting web services. |
| Section 4: | *Property:* Any property developed or acquired and funded by the organization – including intellectual property – shall be devoted exclusively to the purposes of the organization. This property and premises may not be devoted to any use contrary to the interests of the organization and should this organization cease to function, the advisory committee shall use the assets to satisfy the expenses and obligations of the organization and shall distribute any excess to one or more non-profit entities devoted to similar purposes. |

ARTICLE VIII – RECORDS & FISCAL YEAR

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| Section 1: | *Records:* The organization shall keep complete records and accounts and shall also keep minutes of the proceedings of the organization and of its advisory committee and of any committees having any of the authorities of the advisory committee. Furthermore, the organization shall prepare and publish an annual report and financial statements which shall be distributed electronically to all members. Said report and statements shall be prepared and emailed prior to the January all partner meeting prior to the end of the fiscal year. These reports will be developed for a calendar year of activity. |
| Section 2: | *Fiscal year:* The fiscal year of this organization shall begin the first day of July and end on the last day of June in each year. |

ARTICLE IX – PROCESS GUIDELINES

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| Section 1: | *Limitation of activities:* The organization, or anyone acting on its behalf, shall in no event engage in any activity which is intended, either directly or indirectly, to influence the outcome of a student clinical experience requests by an education program to a clinical site/partner. |
| Section 2: | *Education partner affiliation agreements:* If an education partner does not have an existing relationship/affiliation agreement with a Clinical Partner, the EP should not request placements through the TCCP software and processes. Affiliation agreements must be completed prior to utilizing the TCCP software and processes. |
| Section 3: | *Student clinical experience approvals:* All requests for student clinical experiences submitted to a Clinical Partner by an Education Partner decisions are determined by the respective Clinical Partner representative. |

ARTICLE X – AMENDMENT TO BYLAWS

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| Section 1: | *Amendments:* These bylaws may be amended when necessary by two-thirds majority of the advisory committee. Proposed amendments will be discussed and voted upon during advisory committee meetings. |

CERTIFICATION

These bylaws were last approved or amended at a meeting of the advisory committee by unanimous during the December 2015 advisory committee meeting.

ADDENDUMS

Addendum 1: Membership Fee Scales (included next to bylaws on the TCCP informational website).