PURPOSE

To provide the North Carolina Hospitals Emergency Management stakeholders a networking forum that results in the strengthening of the hospitals and their healthcare systems' Emergency Management Programs. The strength of the network is accomplished through leadership, advocacy, communications, the sharing of information, and training programs.

MISSION

The mission of the North Carolina Hospitals Emergency Management Council is to identify the prevention, protection, mitigation, response, and recovery strategies that will improve the ability of North Carolina hospitals to effectively manage emergency/disaster events.

EXPECTED IMPACT:

Develop standard work and best practice models. This information may be used to developed policies, plans, protocols, and training programs.

Improve consistency and standardization in achieving the meeting of emergency management related accreditation and regulatory standards and laws.

Strengthen the ability of hospitals to provide mutual aid to each other during disaster events.

Strengthen understanding of the hospitals relationship with state healthcare coalition partner organizations and agencies.

SCOPE:

The North Carolina Hospitals Emergency Management Council is affiliated with the North Carolina Hospital Association, and through this relationship, serves as an Advisory Council to multiple stakeholders that include, but are not limited to: Hospital Emergency Management Program Leaders, Hospital Executive Leadership, Hospital Governmental Liaisons, and multiple North Carolina state government agencies, such as the North Carolina Office of Emergency Medical Services, North Carolina Department of Public Health, North Carolina Emergency Management, and the North Carolina General Assembly.

The scope for the Hospital Emergency Management Council includes all licensed hospitals; inclusive of Critical Access, Acute, Psychiatric, and Veterans Hospitals.

CRITERIA FOR MEMBERSHIP:

Membership

Members are those individuals assigned the responsibility for the hospital's or hospital system's Emergency Management Program.

Affiliated Partners

The North Carolina Hospital Association has a representative on the Council.

State agencies employees and others whose positions impact hospital emergency management may attend at the approval of the Council's Executive Committee.

Affiliated partners may be invited by the members as appropriate to the topic of presentation.

COUNCIL LEADERSHIP:

The following members constitute the North Carolina Hospitals Emergency Management Council Executive Committee: Chair, Secretary, Education/Training Officer, and Public Information Officer.

In the effort to have knowledgeable replacement individuals for each role, persons are identified for each of the Executive Committee leadership positions. These positions include: Chair-Elect, Secretary-Elect, Education/Training Officer-Elect, and a Public Information Officer-Elect.

Should an individual resign or otherwise be unable to fulfill the leadership role, the individual in the Elect position, will assume the assigned Leader's role, and another member will be selected to fill the Elect role.

Three Representatives at Large will be identified to participate in the Executive Council Leadership activities. The selection should be made with consideration to provide the Council with representation from the three geographical areas (West, Central, and East), as well as consideration for system and independent facilities, as well as for both urban and rural representation.

Council Executive Committee Membership will be reviewed in December of each year, and changes will be made by using the survey consensus process.

Responsibilities:

Chair:

Facilitate North Carolina Hospitals Emergency Management Council meetings.

Provide oversight to North Carolina Hospitals Emergency Management Council activities, including the annual measurable deliverables.

Form Sub-Committees and Task Forces; appoint members to the identified groups.

Delegate other persons to represent the Council at requested functions or other activities.

Chair-Elect & Liaison

Facilitate North Carolina Hospitals Emergency Management Council meetings when the Chair cannot be present.

Assist the Chair with oversight to the North Carolina Hospitals Emergency Management Council activities, including the measurable deliverables.

Represent the North Carolina Hospitals Emergency Management Council in facilitating and coordinating the North Carolina Hospitals Emergency Management Council liaison activities with North Carolina Office of Emergency Medical Services and other healthcare coalition partners.

Secretary

In collaboration with the Chair, prepare the meeting packets and records the meeting minutes.

Develop and provide the meeting packet documents to the Public Information officer to store on the North Carolina Hospitals Emergency Management Council's designated website.

Maintain the North Carolina Hospitals Emergency Management Council member list serve, updating at a minimum of every six months.

Secretary-Elect

Assist the Secretary with preparing the meeting packets and managing other assigned documents. Record the meeting minutes when the Secretary is not present at meetings.

Assist with maintaining a current North Carolina Hospitals Emergency Management Council member list serve.

Public Information Officer (PIO)

Facilitate and coordinates all North Carolina Hospitals Emergency Management Council business communications to the North Carolina Hospitals Emergency Management Council members, including the distribution of meeting communications.

Confirm arrangement for the meeting webinar communications.

Maintain the North Carolina Hospitals Emergency Management Council's website, which includes placement of current documents and/or archiving of all North Carolina Hospitals Emergency Management Council associated documents.

In collaboration with the North Carolina Hospital Association, maintain and facilitate communications for hospitals compliance with documents or initiatives, such as memorandums of agreement. On behalf of North Carolina Hospitals Emergency Management Council, communicate with North Carolina Hospitals Emergency Management Council members, external agencies, and others in emergency / disaster events that may or have impacted multiple healthcare facilities or systems.

Public Information Officer-Elect

Assist the Public Information Officer with assigned activities.

Education/Training Officer

Facilitate training/education programs for the meetings. Topics may include information on projects that are developed by the North Carolina Hospitals Emergency Management Council and the identification of local, regional, state, national, and international best practices.

Education/Training Officer-Elect

Assist the Education/Training Officer.

DECISION MAKING PROCESS

Decisions are made by consensus of the members. The Executive Council Leaders determine if the decisions are made by those present in meetings (in person and/or webinar) and/or through another electronic survey process. The decision(s) is determined by the choice selected by the majority of responders.

QUORUM

A quorum consists of a minimum of eight attendees at a meeting (combined physical presence or webinar presence).

TASK FORCES

The formation of Sub-Committees or Task Forces and their membership appointments will be approved by the Chair.

DELIVERABLES

Each year, the North Carolina Hospitals Emergency Management Council, develops and prioritizes the measurable deliverables for the calendar year. This is a standing agenda for the first meeting of the calendar year. At the last meeting of the year, the progress of the deliverables is reported to the members of the group.

MEASURE OF SUCCESS:

Completion of deliverables.

TIMELINES:

Timelines to be established for the deliverables.

CHARTER AMMEDMENTS

The North Carolina Hospitals Emergency Management Council Charter may be amended at regular or special called meetings by the Executive Council that meets the quorum requirements. The changes must be distributed per the electronic North Carolina Hospitals Emergency Management Council method to all members on the North Carolina Hospitals Emergency Management Council list serve in thirty days of advance of the meeting in which the proposed changes to the charter are approved. All changes to the Charter will become effective immediately upon approval.

MEETING SCHEDULE

Meetings are scheduled at a minimum of a quarterly basis.

Meeting packets will be distributed at least three days in advance of the meeting.

Members are to read the meeting documents prior to the meeting and come prepared for active participation in the meeting discussions.

Regularly scheduled meetings are scheduled for a period of a minimum of six hours; with at least one hour of each meeting dedicated to business, the other portion may be committed to an educational topic.

GROUND RULES:

Start and end on time.

Keep on track.

Each member hospital is welcome to provide a primary hospital representative/contact to serve on the Council.

Commit to consistent and active participation at meetings; send a representative if member cannot attend.

Timely completion of action items as assigned.

Meeting Hosting: Responsibility for hosting will be shared on a rotational basis amongst hospital member.