

GHA RURAL HEALTH COUNCIL CHARTER

- **Purpose:** To provide strategic, policy, and educational guidance on rural health care in the state of Georgia. The GHA Rural Health Council will work with various internal and external stakeholders to explore challenges for rural hospitals and rural health care, identify future trends, raise awareness of rural health issues, and recommend to the GHA Board of Trustees public policy strategies to support rural hospitals.
- **Objectives:** Promote and enhance the practice of hospital administration in a small rural hospital setting.

Serve as the executive committee for GHA's Center for Rural Health affinity group, including the development of eligibility criteria for participation in the Center for Rural Health.

Work with the State Office of Rural Health and other state agencies or partners on rural initiatives.

Provide recommendations for education and other activities for Center for Rural Health members that will help develop skills in administration, quality and safety improvement, community engagement and rural health network development.

Provide a forum on rural health care issues and explore and explain the impact of these issues to GHA for purposes of advocacy and education.

Provide GHA with advice and counsel regarding ways to protect rural Georgians' access to patient-centered, quality care.

Work with GHA, the American Hospital Association, and the National Rural Health Association, as appropriate, to provide input and guidance on federal rural health issues.

Members: Composition

The Rural Health Council shall consist of six (6) to nine (9) at large members who represent the Center for Rural Health's diverse institutional membership including, but not limited to, consideration of ownership structure, hospital type, size, and geographic perspectives. The Council shall have a diversity of individual experience and perspectives, including diversity with respect to race, gender, and areas of expertise.

Qualifications

To serve as a member of the Rural Health Council individuals shall be a chief executive officer (CEO) of a hospital eligible to participate in the Center for Rural Health or an individual who is designated by the CEO and who is in a position to represent the entire organization.



Nomination and Election

The chair of the Rural Health Council shall appoint a nominating committee to nominate candidates for the open at large seats on the Council. The Center for Rural Health shall elect the members to fill each available position on the Rural Health Council. Elections shall be held at the Center for Rural Health annual meeting or via written ballot.

Term

At-large Council members may serve two consecutive terms of two (2) years. If an at-large Council member is appointed to serve an unexpired term of another Council member, the at-large Council member may still serve 2 additional full terms.

Vacancies

Any vacancy in the Rural Health Council, except chair or chair-elect, arising at any time and from any cause may be filled for the unexpired term at any meeting of the Rural Health Council by a majority of the Council members then in office, or, failing such election, at a meeting of the Center for Rural Health called for that purpose.

Number of Officers

Officers:

The officers of the Rural Health Council shall include a chair and chair-elect.

Nomination and Election

The Rural Health Council shall nominate and elect an active Council member in good standing to serve as chair-elect of the Council. The chair-elect shall automatically be nominated to accede to the position of chair at the end of the chair's term.

Term

The chair and chair-elect shall serve for a term of two (2) years beginning at adjournment of the GHA annual meeting of the Center for Rural Health during the year in which he or she is elected by the Center and ending at the adjournment of the annual meeting of the Center during the second (2nd) year following his or her election, or upon his or her earlier resignation or removal. Any officer elected by the Center for Rural Health may be removed at any time by action of the Center for Rural Health taken at a meeting called for that purpose.

Vacancies

In the event that the chair is unable for any reason to fulfill his or her term, the chair-elect shall automatically accede to the position of chair and shall fulfill both the chair's unexpired term and the following term. In the event that the chair is unable for any reason to fulfill his or her term and the chair-elect is unable to accede to the position of chair, the Rural Health Council shall be authorized, at any meeting of the Rural Health Council by a majority of the trustees then in office, to select from among its members a chair of the Rural Health Council to serve until the end of the chair's unexpired term. In the event of a vacancy in the office of chair-elect, either because the chair-elect has acceded to the position of chair or for any other reason, the Rural Health Council may present its



nomination for the office of chair-elect to the Center for Rural Health which may then elect the chair-elect at a meeting called for such purpose or by written ballot.

Duties

In addition to the duties normally associated with such office, the chair of the Rural Health Council shall serve as an ex officio member of the GHA Board of Trustees and represent the views and priorities of the Center for Rural Health to the GHA Board of Trustees.