

# Operating Guidelines

## Louisiana Commission on Perinatal Care and Prevention of Infant Mortality

Adopted: Nov 13, 2014 Revised & Adopted: Nov 8, 2018

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### **The Name of the Commission**

The name of the Commission is the: Louisiana Commission on Perinatal Care and Prevention of Infant Mortality.

### **Commission Responsibilities**

The Commission will undertake all of its responsibilities assigned by Louisiana Legislative Resolution RS 40:2018. Subsection F. outlines the functions of this Commission to:

1. Research and review all state regulations, guidelines, policies, and procedures that impact perinatal care and, when appropriate, make recommendations to the secretary of the Department of Health and Hospitals.
2. Research and review all state laws that impact perinatal care and, when appropriate, make recommendations to the legislature.
3. Accept grants and other forms of funding to conduct maternal and infant mortality studies
4. Contract, in accordance with the applicable provisions of state law, for the performance of maternal and infant mortality studies

Subsection G. outlines the goals of this Commission, within the confines of available resources, as striving to:

1. Provide, through comparison of available data and research, a plan that the state of Louisiana can adopt to reduce the number of teenage pregnancies, sick infants, and infant mortalities.
2. Propose a plan for an equitable system of financing comprehensive health and social services for indigent pregnant women and infants that incorporates the Medicaid program in the most efficient and cost-effective manner available to public and private hospitals in the state of Louisiana.
3. Compile and analyze information on existing infant mortality education programs and make recommendations for the implementation of public policies, for proposed legislation, and for a statewide program to combat the problem of infant mortality to coordinate and improve the services of the state, local governments, private and voluntary agencies, community organizations, and schools which serve to educate high risk candidates and their families.
4. Reduce the infant mortality rate to not more than nine deaths per one thousand live births.
5. Reduce the number of babies born with low birth weight to not more than five percent of all live births.
6. Reduce the infant mortality for each parish and for each racial or ethnic group of the population to not more than twelve deaths per one thousand live births.

7. Educate women of child-bearing age to be able to choose food wisely and understand the hazards of smoking, alcohol, pharmaceutical products, and other drugs during pregnancy and nursing.

## Membership

Designating and appointing Commission members:

As required by Subsection B. of RS 40:2018, there shall be sixteen members of the Commission, fourteen of whom shall be appointed by the governor and two of whom shall be appointed by the legislature.

1. The fourteen members appointed by the governor are to serve at his or her pleasure and shall be subject to Senate confirmation. This group shall be comprised of:
  - a. Two neonatologists, one of which shall be actively engaged in medical education and one of which shall be actively engaged in private practice.
  - b. One obstetrician.
  - c. One family practitioner.
  - d. One pediatrician.
  - e. One female health nurse practitioner.
  - f. One representative from a family planning clinic in the state.
  - g. One neonatal nurse specialist.
  - h. Two health care administrators representing the public and private sector respectively.
  - i. One social worker.
  - j. One nutritionist.
  - k. Two perinatologists.
2. The two members appointed by the legislature are to serve at the pleasure of the presiding officer of the respective legislative body and be comprised of:
  - a. One member of the Louisiana House of Representatives appointed by the Speaker of the House of Representatives, and
  - b. One member of the Senate appointed by the President of the Senate.
3. Participation and Attendance Requirements:
  - a. *Maintaining "active" member status:* Commission members who are not legislators may not miss more than three consecutive meetings. If physical presence is impossible, members may call in to meetings or select a proxy to attend meetings in their stead, but the proxy may not attend more than two consecutive meetings.
  - b. If a member is absent for more than three consecutive meetings, the Commission may act to request the appointment of a new representative and the member may be removed at a subsequent meeting by a majority vote of voting members present. The Commission will provide notice to any member subject to a removal vote at least 14 days in advance of the vote.

#### 4. Commission Leadership:

As required by Subsection C. of RS 40:2018, the chairman of the Commission shall be elected annually by the Commission members and shall serve as chairman without a salary. The chairman must be approved by a majority vote of the voting Commission members. The chairman shall report directly to the governor.

### **Commission Meeting Procedures**

As required by Subsection D. of RS 40:2018, the Commission shall hold at least six regular meetings each year at a place designated by the chairman.

#### 1. Meetings

- a. Every meeting of the Commission shall be open to the public, unless it is determined that an executive meeting is required. Guidelines for executive meetings are included in this document. Ad hoc work groups may be assigned and shall meet as needed and report to Commission meetings.
- b. The Commission shall give written public notice of their regular meetings at the beginning of each calendar year. Any special or rescheduled meetings require notice no later than twenty-four hours before the meeting.
- c. Notice of a meeting should include the agenda, date, time, and location of the meeting.

#### 2. Voting

- a. All votes should be made viva voce and recorded in the Commission's official minutes.
- b. Decisions will be made by a majority vote of a quorum of the Commission, where quorum is defined as simple majority of members.
- c. Proxy voting is prohibited

#### 3. Executive Sessions

- a. The Commission may hold executive sessions upon an affirmative vote taken at an open meeting. Executive sessions are limited to matters including discussions of character, professional competence, or physical or mental health of a person, provided that such person is notified in writing at least twenty-four hours before the scheduled meeting time. However, no final or binding action shall be taken during an executive session. The vote of each member on the question of holding such an executive session and the reason for holding such an executive session shall be recorded and entered into the minutes of the meeting.

#### 4. Meeting Notes/Minutes

- a. The Commission's meeting minutes serve as a public document. All minutes should include (but are not limited to):
  - (1) The date, time, and place of the meeting
  - (2) The members of the Commission recorded as either present or absent
  - (3) The substance of all matters decided, and a record, by individual member, of any votes taken

(4) Any other information that the public body requests be included or reflected in the minutes

5. Staff Support

The Department of Health and Hospitals – Office of Public Health -Bureau of Family Health shall provide infrastructure and logistical support for the work of the Commission. Such support includes, but is not limited to:

- a. Preparation of agendas
- b. Setting up conference calls and other ad hoc meetings,
- c. Providing the minutes or notes from such meetings and conference calls,
- d. Assisting with analyses of data collected and facilitating communication, and
- e. Recording and distributing meeting minutes

6. Commission Representation

The Chair of the Commission shall sign letters representing the Commission.

7. Travel Reimbursement

*Travel compensation.* The Commission members shall be compensated for travel in connection with the Commission meetings and official Commission business as approved by the chairman of the Commission. Reimbursement shall be in accord with the travel regulations of the Department of Health and Hospitals.

### **Rules of Order**

It is essential to the maintenance of a democratic society that public business be performed in an open and public manner and that citizens be advised of and aware of the performance of public officials and the deliberations and decisions that go into the making of public policy. Towards this end, the meetings of the Commission shall adhere to Open Meetings Law (RS 42:11-28). No part of the rules below should be construed to require that any meeting be closed to the public, nor shall executive session be used as a subterfuge to defeat the purposes of the Open Meeting Laws.

The conduct and actions during deliberations of this Commission shall be governed by the parliamentary usage as contained in the most current edition of *Robert's Rules of Order Newly Revised*.

### **Amendments**

Revision of these Operating Guidelines may be made at the discretion of the Commission. These Operating Guidelines may be amended by a two-thirds vote of Commission members, provided that a copy of such amendment has been sent to each member of the Commission, at least thirty (30) days in advance of the designated voting date at which final action is to be taken and that they are not in conflict with RS 40:2018. Voting may be accomplished via hard copy mail, through e-mail or at a Commission meeting.