

**EDUCATIONAL CONSORTIUM  
BYLAWS  
STATEWIDE CAMPUS SYSTEM  
of  
MICHIGAN STATE UNIVERSITY  
COLLEGE OF OSTEOPATHIC MEDICINE**



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**Amended**

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**STATEWIDE CAMPUS SYSTEM  
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COLLEGE OF OSTEOPATHIC MEDICINE  
BYLAWS**

## **ARTICLE I. NAME**

The name of this consortium shall be the Statewide Campus System (SCS) of Michigan State University, College of Osteopathic Medicine.

## **ARTICLE II. MISSION**

The Statewide Campus System will unite the resources of MSUCOM and member health care institutions to support quality in medical educational programs, responsive to the health care needs of Michigan and compliant with state and federal regulations and accreditation standards for undergraduate, graduate, and continuing medical education.

### **Goals**

- To promote and foster SCS as a center of excellence for the continuum of medical education, scholarly activity, professional development, and osteopathic recognition.
- To provide an organizational mechanism for statewide planning and policy decision-making to respond effectively as a consortium to opportunities, challenges, and issues affecting medical education and health-care delivery in community-based programs.
- To form and maintain an organizational structure incorporating representation of all members and non-members and establish procedures for the operation of SCS.
- To improve the quality of postdoctoral medical education affiliated with Michigan State University, College of Osteopathic Medicine through the collaboration of members in the planning, implementation, and evaluation of educational programs.

### **Member Relationship**

Members of SCS are independent organizations working together to achieve their mission. Accordingly, the SCS Bylaws are not intended to change the authority or responsibility of MSUCOM, or the educational partners as described by each organization's respective Articles of Incorporation and/or Bylaws.

## **ARTICLE III. SCS MEMBER DEFINITIONS**

### **SECTION 1. SCS Members**

Each Member shall appoint a designee to represent its institution at Membership meetings. One person may not represent more than one institution.

- Members are expected to meet applicable institutional training standards.

- Members have the right of free association with other educational consortia and institutions.

## SECTION 2. Membership

Michigan State University College of Osteopathic Medicine (MSUCOM) teaching hospitals that conduct accredited training programs and/or serve as a base site for MSUCOM student rotations are eligible to be Members of SCS. Members include institutions that seek the support of educational resources for their residency programs and faculty. All SCS members will be assessed membership dues for central administrative and educational services based on the number of residents and faculty participating in those services. Core services (Professional Development, Faculty Development, Scholarly Activity Education and Consultation, and Osteopathic Recognition support) will be extended to those faculty and residents from the aforementioned member programs as well as non-member individuals seeking to advance their professional development. Core services may be paid for through membership dues, program subscriptions or non-member requests for consultation.

## SECTION 3. Membership and Non-Member Options

The SCS has two primary membership levels: the Full-Program Membership, and the CORE Services Membership. These membership levels are available on a per resident fee and grant additional access to core faculty at no additional charge. For those non-members interested in seeking advancement or professional development, the SCS offers non-member subscription options, consulting or individual fee-based programs for Faculty Development, Osteopathic Recognition, CORE only Resident Education.

**Full-Program Membership:** Access to a full supplemental curriculum for hospital Residency Programs, Scholarly Activities, Faculty Development, and Core Resident programs. NOTE: This membership option is currently available for the following specialties (availability is subject to change based on programming needs): Cardiology, Diagnostic Radiology, Emergency Medicine, ENT – Otolaryngology and Facial Plastic Surgery, Family Medicine, General Surgery, Internal Medicine, Neurology, Obstetrics and Gynecology, Ophthalmology, Orthopaedic Surgery, Psychiatry, and Urologic Surgery.

**Core Services Membership:** We offer a core service-only option for those programs that do not require the supplement residency education OR for which we do not have a supplemental curriculum. This option grants access to Scholarly Activities, Faculty Development, and the Core resident programs.

**Non-Member Subscription Only Options:** The SCS offers subscriptions for Faculty Development, Osteopathic Recognition, or CORE only Resident Education. These options grant access only to the education programs but will also allow for discounted rates on consulting, custom programs, etc.

## SECTION 4. Membership Application

- Prospective member institutions must fill out a member pledge form indicating the number of residents and faculty by specialty the institution wishes to be included in their membership. Members are expected to meet the expectations outlined in Section 1. Upon receipt of a member pledge form, SCS will provide prospective members with an SCS Membership Agreement, outlining fees for service, terms, and conditions.
- Non-member subscription holders are not considered members for voting and meeting purposes. They are, however, encouraged to uphold the spirit of the expectations outlined in Section 1.

## SECTION 5. Membership Responsibilities

As an SCS Member, each institution will:

- Abide by the bylaws, uphold the policies, and adhere to the terms and conditions outlined in the SCS Membership Agreement;
- Pay fees as outlined in the SCS Membership Agreement in accordance with the terms and conditions outlined in the SCS Membership Agreement;
- Notify SCS of any substantial change that impacts membership participation or postdoctoral training.

## SECTION 6. Membership Termination

SCS Membership may be terminated by:

- Resignation pursuant to the terms and conditions outlined in the SCS Membership Agreement.

## SECTION 7. Membership Meetings

- Each Member is entitled to one representative vote at SCS Member meetings in person or via video or audio conferencing at the meeting time;
- The SCS Membership will meet once a year, time, and place to be determined.

## SECTION 8. Voting Member Rights at the SCS Membership Meetings

- Approve the Advisory Board Members.
- Review annual allocations for SCS educational activities
- Review annual SCS activities including Scholarly Activity, Faculty and Professional Development, and Resident Education.

# ARTICLE IV. SCS ADVISORY BOARD

## SECTION 1. Description

The SCS Advisory Board is comprised of medical education experts elected from SCS Member programs. These GME professionals provide strategic guidance with a focus on innovation and collaboration to drive the SCS vision.

## SECTION 2. Advisory Board Members

The SCS Advisory Board shall be composed of eleven (11) voting members, including the Chair, Vice-Chair, and Secretary (currently filled via SCS clerical support). No member organization, other than MSUCOM may have more than one voting member on the Advisory Board. An exception may be permitted if no other viable candidate from member institutions can be identified. The optimal composition of the SCS Advisory Board is:

- MSUCOM Dean and Assistant/Associate Dean (SCS Leadership - non-voting)

- Three (3) Designated Institutional Officials (DIOs), Directors of Medical Education (DMEs), or Associate DIOs
- Four (4) Program Directors, representing different programs and institutions.
- Two (2) representatives recommended by MSUCOM Leadership

Terms of office for the Advisory Board are two years.

## **ARTICLE V. ELECTION OFFICERS, TERM**

The Chair, Vice-Chair, Secretary, and remaining members-at-large will be elected by the SCS Members via an electronic ballot system following the SCS Membership meeting. A call for nominations will be sent in the early fall. All Advisory Board members shall hold office for two years and may succeed themselves for an additional year pursuant to the Advisory Board election process.

## **ARTICLE VI. CHAIR**

The Chair shall preside at all SCS Advisory Board and SCS Member meetings and carry out such other actions necessary to the performance of the duties of this office. The Chair has one vote at SCS Advisory Board and Membership meetings. The Chair shall be given notice of all SCS committee meetings and shall have the right to attend such meetings and speak.

## **ARTICLE VII. VICE-CHAIR**

The Vice-Chair shall perform the duties of the Chair during the absence of the Chair and such other duties as assigned by the Chair.

## **ARTICLE VIII. ADVISORY BOARD VACANCIES**

In the event of a vacancy in the office of the Chair, the Vice-Chair shall succeed to the vacant office for the unexpired term. The office of Vice-Chair vacancy shall be filled by the SCS Advisory Board, and any officer so appointed shall hold office at the pleasure of the SCS Members until the Membership Meeting. In the event of a member-at-large mid-term vacancy, the SCS Advisory Board Chair, in consultation with the MSUCOM Assistant/Associate Dean, shall have authority to appoint an interim to fill the vacancy until the next scheduled election. Members appointed outside of scheduled elections due to an unexpected vacant position may serve for the unexpired term of the vacating Member. Any interim role should be filled by a member in good standing of the Statewide Campus System

### **SECTION 1. Responsibilities**

The Advisory Board shall serve in an advisory capacity for all SCS governance activities regarding participating 'Members' and non-member 'fee for service' graduate medical education programs. Regarding pre-doctoral issues, the Advisory Board may be called upon to serve in an advisory capacity by MSUCOM. The Advisory Board's responsibilities and powers are:

- To ensure appropriate mechanisms and standards are in place to guide the development of graduate medical education programs and to support them;
- When appropriate, to participate with MSUCOM in selecting and evaluating SCS leadership;

- To advise and counsel the SCS Dean and Associate/Assistant Dean in developing policies to sustain general academic activities across the system;
- To advise on appropriate mechanisms to keep SCS Members informed of the activities of SCS on a regular basis

## ARTICLE IX. MEETINGS

Meetings will be held quarterly.

### SECTION 1. Advisory Board Members Absence

If an Advisory Board member is unable to participate in a Board meeting, that Member will communicate to the Chair and Secretary. Any Advisory Board member who is absent from three successive Board meetings or fails to participate in good faith shall be deemed to have resigned due to non-participation, and his/her position shall be declared vacant, unless the Board affirmatively votes to retain that individual as a member of the Board with probationary provisions. Probational provisions include the Advisory Board Member's renewed commitment to the attendance of Advisory Board meetings and/or associated committees in accordance with roles and responsibilities outlined in the Bylaws.

A quorum of the Board may vote out a member of the Board if that officer does not fulfill his or her responsibilities, leaving the position vacant. Vacancy provisions are outlined in Article VIII.

## ARTICLE X. COMMITTEES

### SECTION 1. SCS Osteopathic Principles and Practices Committee

Members: A minimum of five (5) voting members, including:

- One (1) member from the MSUCOM Department of OMM
- One (1) DME/DIO/ ADIO
- One (1) Program Director
- One (1) OMM Resident
- One (1) SCS Administrative Staff

### SECTION 2. COMMITTEE RESPONSIBILITIES

- To advise SCS graduate medical education programs accredited by ACGME in meeting the requirements of osteopathic recognition.
- To advise on educational activities that will enhance faculty competence in the teaching of OMM.
- To assess the integration of Osteopathic Principles and Practices across the continuum of medical education.

Meetings are held Quarterly

### SECTION 3. Faculty and Professional Development Advisory Committee

Members: A Minimum of Eight Voting Members Including:

- One (1) GME Coordinator
- Two (2) DIOs, ADIOs, or DMEs
- One (1) Program Director
- One (1) SCS Director of Faculty Development
- One (1) COM Faculty
- One (1) Clerkship Administrator
- One (1) Pre-Clerkship Administrator

#### **Responsibilities:**

- To perform a regular needs assessment across the continuum of medical education to inform the development of educational programs to equip faculty, medical education professionals, and residents.
- To monitor educational trends, external challenges confronting medical education, and accreditation requirements for educational programs.
- To assess educational program effectiveness and provide regular reports to the Educational Committee

Meetings are held at least twice per year

#### **SECTION 4. Scholarly Activity Committee**

Members: A Minimum of Five (5) Voting Members Including

- SCS Director of Research
- MSU COM Assistant/Associate Dean of Research
- SCS Assistant/Associate Dean
- One (1) DIO, ADIO, DME
- One (1) MSUCOM Faculty Member
- One (1) SCS Administrative Staff Member

#### **Responsibilities:**

- To perform a regular assessment across the continuum of medical education to inform the development of scholarly activity educational programs to equip faculty, medical education professionals, and residents;
- To oversee the Spartan Medical Research Journal (SMRJ) through strategic planning, review of budgeting, policy revisions, marketing initiatives, and assessment as an advisory group to meet PubMedCentral ID requirements;
- To provide strategic planning to encourage scholarly activity across SCS affiliate systems, assisting residency program faculty and residents to meet accreditation requirements;
- To assess scholarly activity effectiveness and provide regular reports to the Educational Committee.

Meetings are held at least twice per year or more as needed to meet SMRJ advisory board requirements.



## **ARTICLE XI. CHIEF EXECUTIVE OFFICER (CEO)**

The Dean of the College of Osteopathic Medicine at Michigan State University is the Chief Executive Officer for the Statewide Campus System. The Dean's authority for the Statewide Campus System derives from the Bylaws and policies of MSUCOM and the Bylaws and policies established through the SCS.

Responsibilities include, but are not limited to:

- To establish an organizational plan for operating SCS
- To work in counsel with the SCS Assistant/Associate Dean and the Advisory Board and SCS Members to implement general policies
- To maintain and enhance medical education activities across the system
- To develop organizational structure
- To maintain ongoing communication
- To develop appropriate reporting mechanisms
- To ensure ongoing financial reporting, including financial and budget details
- To represent the organization to external constituents
- To provide direction for planning and development

## **ARTICLE XII. ASSOCIATE/ASSISTANT DEAN FOR THE STATEWIDE CAMPUS SYSTEM**

The Assistant/Associate Dean for the Statewide Campus System will be appointed by a joint decision of the Chief Executive Officer and the Advisory Board. The Assistant/Associate Dean will report to the Chief Executive Officer and will be evaluated annually by the Chief Executive Officer with feedback from the Advisory Board as outlined in the Bylaws.

Responsibilities include, but are not limited to:

- To attend and participate in meetings of the SCS Advisory Board, and other committees as assigned.
- To create strategic plans for program development to meet member needs.
- To participate in the development of quality assurance and evaluation systems.
- To assist in SCS remediation initiatives to help low performing postdoctoral programs.
- To direct strategic planning initiatives for SCS.
- To propose academic policies that enhance the quality of educational services of SCS.
- To monitor the quality of educational programs within SCS.
- To promote the continuum of medical education within the SCS consortium.
- To provide educational consultation for SCS Members.
- To supervise and evaluate all SCS staff, resources, and activities and provide regular reports to the SCS Advisory Board and Membership Committee on educational challenges for members and how SCS might assist in meeting those needs.
- To review program proposals and make recommendations to the CEO.

- To evaluate the quality of SCS educational programs and personnel and make recommendations for improvements.
- To develop and implement measures to assess the competency of SCS residents and fellows participating in the educational programs.
- To recommend educational policies to the SCS Advisory Board and SCS Membership.
- To develop plans for shared resources, educational programs, and strategic innovation across SCS specialties.

## **ARTICLE XIII. RULES ADVISORY MEETINGS OF SCS MEMBERS, SCS ADVISORY BOARD AND COMMITTEES**

### **SECTION I. Meetings, Notices**

Meetings of all SCS Committees may be called by the Chair of the SCS Members, the Chair of the Committee, or by request in writing of any three (3) members of the Committee. A notice giving the time and place of the meeting shall be given to each Member of the Committee at least five (5) days prior to the date of the meeting. SCS Membership meetings require fifteen (15) days prior notice. Written notice is effective upon mailing. Meetings shall follow Robert's Rules of Order.

### **SECTION 2. Quorum, Voting**

One-half of the committee members plus one Member shall constitute a quorum for the transaction of business and the affirmative vote of a majority of voting members present shall be necessary for the approval of any action unless otherwise specified in these bylaws.

## **ARTICLE XIV. AMENDMENTS TO BYLAWS**

These Bylaws may be amended by the SCS Advisory Board Committee upon the affirmative vote of two-thirds majority of board members. Written notice of the meeting or electronic vote and the proposed amendment shall be provided at least fifteen (15) days prior to the vote.