

SCOTTISH STROKE ALLIED HEALTH PROFESSIONALS FORUM

CONSTITUTION

1. GENERAL

This constitution adopts the format set out in NHS Circular GEN (1992) 17 and NHS Circular GEN (1992) 26 relating to committee constitutions.

This document shall be called the constitution of the Scottish Stroke Allied Health Professionals Forum and any member can have a copy.

Any member disregarding the conditions set out in this constitution shall be subject to action by the committee.

The constitution shall supersede any formal rules of the Forum, which were in force prior to the acceptance of the constitution by a majority of the membership.

2. TITLE

The group shall be called the Scottish Stroke Allied Health Professionals Forum.

For the purposes of this constitution, unless otherwise indicated, Forum means Scottish Stroke Allied Health Professionals Forum.

3. FUNCTIONS

To promote highest quality of rehabilitation for people with stroke.

- a. To promote awareness of the essential role of AHPs in stroke
- b. To share and develop knowledge and expertise in stroke
- c. To promote education, training and best practice for AHPs working in stroke
- d. To promote, facilitate and disseminate stroke research and to encourage implementation of research findings
- e. To influence decision making on local/national policies and guidelines
- f. To facilitate networking, support and mentorship

4. MEMBERSHIP

The membership of the Forum is for AHPs, AHP support staff and AHP students (final year undergraduates and postgraduates) working/studying in Scotland. Members are required to update the directory details regularly to renew their membership.

Any AHP with an interest in stroke who works in the private sector in Scotland may join the Forum on an individual non commercial basis. The Forum's committee members shall be representative of AHPs working in stroke in their NHS Board area, University or Stroke Charity.

The composition of the Committee shall be as follows:

There shall be one representative from each of the 14 Scottish NHS Board areas, 1 from each of the Scottish AHP Universities, 1 from each of the Scottish stroke charities who employ AHP staff, 1 from the Scottish NMAHP research unit, the Scottish Stroke AHP Consultants and undefined general committee members from any area, to ensure that each allied health profession working in the stroke arena is represented.

In future, if NHS Boards reconfigure, the committee can amend the composition to ensure adequate representation.

5. METHOD OF APPOINTMENT OF COMMITTEE MEMBERS

In any year where the term of office of committee members is either due to expire or becomes vacant, the Secretary shall seek nominations from the appropriate NHS Board area, University, Research Unit, Stroke charity or specific profession of any individual who meets the criteria for membership.

All members will be advised by the Secretary of the opportunity to self nominate or nominate an individual with the consent of the individual nominated. To aid information, notices on the committee and the membership arrangements shall be circulated to members no later than 2 months before appointments are due to take effect.

6. TERMS OF OFFICE OF COMMITTEE MEMBERS

The terms of office of members of the committee shall be 3 years. One third of the membership of the committee shall be considered for re-election every 3 years in a staggered membership cohort. Committee members shall be eligible for re-appointment to serve for one further consecutive term but thereafter, unless approved by the committee, shall be required to demit office for at least one term. To enable staggering of the first committee appointments, lots will be drawn to determine which members commence with a 1, 2 or 3 year term of office.

7. ELECTION OF OFFICERS

At its first regular meeting the committee shall elect from its members a Chair and Vice Chair, Secretary and Treasurer to serve an agreed term of office 3 years.

8. CASUAL VACANCIES

Where a member of the committee has been absent from 3 consecutive meetings, of which appropriate notice has been given, the committee may, unless they are satisfied that the member's absence was due to illness or other reasonable cause, declare that his or her seat has been vacated, and a casual vacancy shall be declared. Members of the committee may, at any time, by notice in writing signed by them and delivered to the Secretary of the committee, resign their seat.

A casual vacancy shall be filled at the discretion of the committee by appointment of a new representative from the appropriate area, following consultation with that area. New representatives shall hold office for the remainder of the term of office of the member in whose place they are appointed.

9. VOTING

Each member of the committee shall possess one vote. Where there is equality of votes, the Chair shall, as well as having a deliberate vote, also have the power to use a casting vote.

Where a decision is put to a vote, the Secretary should ensure that the minutes of the meeting record the decision fully, including dissenting views, and the result of the vote.

10. MEETINGS

The committee shall meet at least twice yearly and, in addition, hold an annual general meeting.

11. NOTICE OF MEETINGS

The Secretary shall send an agenda, minutes and notices of meetings to every member of the committee seven clear days before the day of the meeting. Failure of one or more members to receive papers will not invalidate the proceedings. A calendar of meetings will be prepared annually.

12. QUORUM

33% of committee members plus 2 office bearers of the committee shall be deemed a quorum.

13. MINUTES

Minutes of all meetings shall be prepared by the Secretary and circulated to the committee. Once the minutes have been agreed, committee members can circulate the minutes for information to members they represent if requested.

14. REQUESTING MEETINGS

Two committee members may, by writing to the Chair and secretary, request an extraordinary meeting of the committee, and should specify the business to be discussed at such a meeting. The chair's decision on whether to accede to the request will be final, and must be reported to the next ordinary meeting of the committee.

15. APPOINTMENT OF DEPUTIES

The Secretary may accept the nomination of a deputy from a committee member, when the committee member cannot be in attendance. The deputy should be a current member of the Forum.

16. ACTION TEAMS

Ad hoc action teams of members may be appointed to consider specific issues, with a representative chairperson to action and report back. Action teams will have delegated to them such powers as agreed by the committee.

17. ALTERATION TO CONSTITUTION

The constitution shall be altered only by a majority of votes passed at a special meeting of the committee called for the purpose, or at the annual general meeting of which at least 21 days notice shall be given, setting out the proposed alteration or amendment. Such alterations or amendments so approved shall be intimated to each member of the Forum. Committee members unable to attend the special meeting or Forum members unable to attend the annual general meeting, where there is a proposed alteration or amendment to the constitution, shall be given the facility of a postal vote.

18. CONFIDENTIALITY

The Chair shall rule, where necessary, to advise on the confidentiality of documents.

19. FINANCES

The Treasurer will produce a financial statement for the annual general meeting, and an independent examiner, agreed by the Committee and who is not a member of the Forum, will check this financial statement prior to the meeting.

In the event of the Forum winding up and there are surplus assets, these will be used for charitable purposes.

There will be no charge for membership. However, there will be a charge for attending some events/conferences. Any financial support received in any given year from a third party shall be set out in the Forum's financial statement. A copy of the statement shall be provided to any Forum member on request.

20. CONFLICT OF INTEREST

Committee members are appointed to act objectively, and shall declare any possible conflicts of interest.

21. PARTNERSHIPS AND AFFILIATIONS

The Forum acknowledges the value that partnerships offer and supports the principle of partnership working. The partnership with Chest Heart & Stroke Scotland shall be deemed an informal affiliation. The Forum may also engage with corporate companies, but these shall not be exclusive and shall be in accordance with the guidance set out in NHS legislation.

The Forum recognises and values the contribution of Chest Heart & Stroke Scotland in the formation, development and support of the Forum.

22. INFORMAL GUESTS

The Forum supports the attendance of invited guests and observers at committee meetings.

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