



## **Kansas Maternal and Child Health Council (KMCHC) Council Member Code of Ethics and Professional Conduct**

The Kansas Maternal and Child Health Council (hereinafter "Council") was formed as a state-level group to help advise and monitor progress addressing specific MCH population needs. The Council encourages the exchange of information about women, infants, children, and adolescents, and helps focus efforts among partners and recommends collaborative initiatives.

### **As a member of the Council, I will:**

#### *General*

- a. Support the Council's work and serve as an ambassador for the Council to my own organizations and constituents.
- b. Respect and support the majority decisions of the Council.

#### *Responsibilities: Attendance and Participation*

- a. Attend meetings. I will respond promptly regarding my availability. If I am unable to attend in person, I will make every effort to attend by conference call and/or review meeting notes. I understand that, if I have more than two unexplained meeting absences in one year, I will be subject to removal from the Council.
- b. Volunteer to actively participate in at least one Council activity, committee, or initiative during my tenure on the Council. I understand that the work and success of the Council in improving women, infants, children, and adolescent health in Kansas is dependent upon actively engaged Council members.
- c. Keep well-informed of research and developments relevant to issues that may come before the Council. Be alert to pertinent issues that I believe will have positive or adverse effect on the health of women, infants, children and adolescents in Kansas and share opportunities for making an impact with the Panel leadership.

#### *Scope of Work*

Assemble to perform the following tasks:

- a. Identify, in cooperation with KDHE, priority issues to be addressed by the Council.
- b. Assist KDHE in the identification and collection of available and new data and/or research required to study selected priorities.
- c. Study existing processes and methods utilized to assess/monitor:
  1. State and regional needs assessments and resource allocation, to identify duplication or gaps in maternal and child health services.
  2. Access to health care before, during and after pregnancy for women of childbearing age including preconception, prenatal, birthing, transport, postnatal and follow-up services.
  3. Access to coordinated, family centered care and health services from birth to adult life (21 years) including ambulatory, inpatient, transport and follow-up services.
  4. Health promotion messages related to health education and outreach efforts.
  5. Data and documentation procedures that support service integration, quality improvements and outcome evaluation.
  6. Comprehensive continuing education programs for professionals, services providers, and care providers including schools and day care providers.
- d. Provide recommendations to KDHE regarding data needs, report format development, and dissemination of maternal and child health data, issue briefs, fact sheets, and other reports to partnering organizations, the public, and other interested parties across the state.

- e. Make service/system recommendations for utilization by KDHE to address maternal and child health priorities, allocation of funding, and potential for specialized service/project grant applications.
- f. Facilitate the identification of consultants to provide on-site consultation to maternal and child health care providers across the state.
- g. Analyze pending legislative and existing women/maternal, prenatal/infant, child, and adolescent health related statutes, including those applicable to children and youth with special health care needs.
- h. Review the MCH Manual for relevancy to current practice guidelines and standards and make recommendations for revisions/updates.

*Conflict of Interest*

- a. Declare any conflict to the best interests of the Council, be it real, potential, or apparent. If a conflict of interest exists, I will appropriately modify my participation based on the recommendation of the Chair, including voting abstention.
- b. A conflict of interest can occur when a Council Member is involved in multiple interests, one of which could possibly influence the Member's motivation or interests. Conflicts of interest include, but are not limited to situations such as:
  - 1. A Council Member makes a decision or does an act motivated by considerations other than the best interests of the Council,
  - 2. A Council Member puts his/her personal interest ahead of the best interests of the Council, or
  - 3. A Council Member takes advantage of an opportunity to inappropriately benefit or profit from his/her membership in the Council.

*Representing the Council*

- a. Represent the Council, formally and informally, in such a way as to leave a positive impression of the Council and an accurate impression of its official positions.
  - 1. I understand that I may not utilize my Council affiliation publicly in connection with taking a position on a matter that falls within the mission of the Council unless the Council has already taken an official position on said matter.
  - 2. I understand that my advocacy for official Council positions is encouraged.

I hereby agree to abide by this code of ethics and professional conduct and understand that a violation of a provision could lead to removal from the Council.

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Signature

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Date