

Interhealth Regulations & By-Laws

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Reviewed 2011; Justin Winters and Erica Parker

Reviewed 2012; Rebecca McCracken and Samuel Ogenis, with the 2012 Interhealth Executive and Committee

Reviewed 2013; Katherine O'Shea and Laura Buters with the 2013 Interhealth Executive and Committee

Reviewed 2014; Merredith Cully and Jayna Garratt with the 2014 Interhealth Executive and Committee

Reviewed 2015; Rhiannon Hicks, Alexander Shivarev and Kiran Narula with the 2015 Interhealth Committee

1. Definitions

- 1.1. WAMSS is the Western Australian Medical Students' Society (WAMSS).
- 1.2. AMSA is the Australian Medical Students' Association.
- 1.3. AMSA Global Health is the global health committee of the Australian Medical Students' Association.
- 1.4. IFMSA is the International Federation of Medical Students Associations.
- 1.5. Chair and Co-Chairs shall be used interchangeably through this document.
- 1.6. Ex-officio means to automatically hold a position on the Interhealth Committee due to holding a position on WAMSS.

2. Name and Governance

- 2.1. The name of the Western Australian Medical Students' Society (WAMSS) Global Health Group shall be "Interhealth".
- 2.2. Interhealth is a subcommittee of the Western Australian Medical Students' Society (WAMSS), ABN: 44 172 133 231.
- 2.3. Interhealth is subject to all the rules, regulations, by-laws, and resolutions that govern WAMSS. In the event that any WAMSS rules, regulations, by-laws or resolutions contradict those set out in this document, the WAMSS rules shall take precedence.
- 2.4. These rules may be modified by the Interhealth Committee through a motion gaining two-thirds majority by show of hands at any Interhealth meeting. It must then be ratified by the WAMSS Committee by Special Resolution at a WAMSS General Meeting.
 - 2.4.1. Quorum required for changes to the Rules and By-Laws is half the executive and half the total of all committee members as stated in (10.7).



- 2.5. The Interhealth Chair is a member of the WAMSS Committee, and is therefore subject to all the expectations and responsibilities of a WAMSS Committee member.
- 2.6. No organisation may be approached by Interhealth or its affiliated projects for sponsorship without prior consultation with the WAMSS Vice President External.
- 2.7. Upon request from the WAMSS Executive, any information regarding the activities and functions of Interhealth shall be made available to persons nominated by WAMSS for audit or other purposes.

3. Interpretation of this document

- 3.1. Where possible, the interpretation of this document shall be made by consensus of the current Interhealth Committee.
- 3.2. If the Committee cannot come to a consensus, the interpretation of this document by the Interhealth Chair shall be final.

4. Availability of this document

- 4.1. An electronic form of this document will be made available by the Interhealth Administrative Officer upon request from any UWA medical student.

5. Vision, Mission and Objectives

- 5.1. Vision
 - 5.1.1. Sustainable, universal and equitable health for all.
- 5.2. Mission
 - 5.2.1. To promote effective action on global health issues through engagement, education and empowerment of students.
- 5.3. Objectives
 - 5.3.1. Support the activities of medical students in the pursuit of global health equity.
 - 5.3.2. Educate medical students on global health issues.
 - 5.3.3. Commit to sustained advocacy and support on issues of global health.
 - 5.3.4. Create a global health community that facilitates collaboration.
 - 5.3.5. Consult and represent the views of medical students on global health issues.
 - 5.3.6. Provide and promote internal and external training opportunities for the upskilling of medical students.
 - 5.3.7. Promote the opportunities for medical students to engage in AMSA Global Health, IFMSA and the international global health arena.

6. The Committee

- 6.1. The Interhealth Committee shall be made up by the Interhealth Executive Committee and the Interhealth General Committee.
- 6.2. The Interhealth Executive committee shall consist of the:

- 6.2.1. Chair;
- 6.2.2. Administrative Officer;
- 6.2.3. AMSA Global Health Representative(s);
- 6.2.4. Education and Advocacy Officer(s); and
- 6.2.5. Promotions Officer.
- 6.3. The Interhealth General committee shall consist of:
 - 6.3.1. Teddy Bear Hospital Coordinator(s);
 - 6.3.2. Crossing Borders for Health Coordinator(s)
 - 6.3.3. ZONTA Coordinator(s);
 - 6.3.4. Local and International Needs Contribution Scheme Coordinator(s);
 - 6.3.5. Institute for Indian Mother and Child Coordinator(s);
 - 6.3.6. Global Health Short Course Coordinator(s);
 - 6.3.7. Events and Logistics Officer(s);
 - 6.3.8. Additional members as deemed to be necessary to fulfil certain roles by the Interhealth Chair at the time.
- 6.4. WAMSS' Red Party Coordinator(s) will be an ex-officio member of the Interhealth General Committee.
- 6.5. WAMSS' Code Green Officer(s) will be an ex-officio member of the Interhealth General Committee.

7. Appointment of the Interhealth Chair

- 7.1. A call for written applications for the position of Interhealth Chair shall be made by the 1st October each year, with a new Chair to be appointed within 2 weeks of the application's closing date.
- 7.2. Only current WAMSS members who have previously served on the Interhealth Committee or an Interhealth sub-committee are eligible to apply for the position of Chair.
- 7.3. Joint applications, of two people, will be accepted for the position of Chair.
- 7.4. The Chair shall be appointed by the outgoing Interhealth Chair and approved by the outgoing and incoming WAMSS Presidents.

8. Appointment of the Interhealth Committee

- 8.1. The Interhealth Chair shall call for written applications for the remaining Interhealth Committee positions, within 6 weeks of the appointment of the incoming chair.
- 8.2. These remaining positions on the Interhealth Committee shall be appointed by the incoming Interhealth Chair, in consultation with the outgoing Chair if needed, and approved by the incoming WAMSS President.
- 8.3. Multiple positions on the Interhealth Committee may be held by a single person when deemed necessary.

- 8.4. Multiple people may hold a single position on the Interhealth Committee when deemed necessary.
- 8.5. The application process for Interhealth project sub-committees will be coordinated and streamlined by the Chair. Positions on sub-committees will be appointed by project coordinators and approved by the Chair.

9. Voting

- 9.1. Every position on the Interhealth Committee has one (1) vote.
- 9.2. Votes will be cast by way of show of hands. If there is a tied vote, resolution will be attempted by discussion. If resolution is not possible, the Chair/s will hold a single casting vote.

10. Committee Meetings

- 10.1. Committee Meetings will be held, at a minimum, every eight weeks, and should occur monthly when possible.
- 10.2. The time and location of Committee Meetings will be determined by the Chair in consultation with the committee.
- 10.3. The Administrative Officer will call for agenda items and reports via email no less than 7 days before a scheduled Ordinary Committee Meeting. A final agenda along with any relevant reports will be sent no less than two days before a scheduled Committee Meeting.
- 10.4. All Committee members are required to attend every Committee Meeting during their term unless doing so would represent an unreasonable burden.
 - 10.4.1. When it is not possible for a Committee member to attend a Committee Meeting, that person must send apologies at the time that reports and agenda items are due except in exceptional circumstances.
 - 10.4.2. A minimum of one coordinator for every project is expected to attend every meeting. In the event that none can attend, a proxy must be allocated.
 - 10.4.3. Missing a maximum of three Committee Meetings per Committee member will be accepted. Apologies or absences for more than three meetings will lead to reconsideration of their position on the Committee by the Chair.
- 10.5. Guests may be invited by the Committee to attend meetings as appropriate. Guests may speak to inform the Committee on issues which require a Committee vote, but will not be allowed to vote on any decisions.
- 10.6. Any business discussed at any Committee Meeting which could be reasonably deemed sensitive shall not be shared to external parties except where provisions elsewhere in this document may allow.

- 10.7. At Committee Meetings where decisions that will impact the committee are to be made, including changes to Rules & By-Laws, a quorum of at least half the executive and half the total number of committee members is required.

11. Roles and Responsibilities of the Interhealth Executive

- 11.1. In addition to responsibilities outlined elsewhere in this document, the specific roles and responsibilities of the Interhealth Executive include;
- 11.2. Organising and running of Interhealth events which are not project specific, e.g Projects night and Electives and Exchange night.
- 11.3. Liaise with selected project coordinator(s) about their specific project.
- 11.4. Offer support to entire committee in performance of duties.
- 11.5. Have intimate knowledge and understanding of overall running of Interhealth.
- 11.6. Be able to represent Interhealth externally wherever required.

12. Role and Responsibilities of all Committee Members

- 12.1. In addition to responsibilities outlined elsewhere in this document, the role and responsibilities of all committee members include;
- 12.2. Performing tasks outside their designated portfolio when required to assist other committee members in the performance of their duties.
- 12.3. Maintain and update the Interhealth website with information relevant to their position through the Promotions Officer.
- 12.4. Providing adequate written record of their role and any suggestions to future committee members for handover.
- 12.5. Remaining as available as can reasonably be expected to provide guidance to their successor for at least one year after the conclusion of their term.
- 12.6. Maintain regular contact with their Interhealth Executive liaison and Interhealth Chairs

13. Finances

- 13.1. The Interhealth Committee shall abide by all WAMSS rules, regulations, resolutions and by-laws governing the appropriate use and handling of money.
- 13.2. No payments shall be made on behalf of, or in the name of Interhealth unless it has been authorised by the Administrative Officer and WAMSS Treasurer.
- 13.3. The Interhealth Committee shall not transmit any monies or grants to any person by way of gift.
- 13.4. All payments due to Interhealth shall be received by the appropriate Interhealth committee member who will lodge them to the WAMSS banking account if appropriate, or store the payment securely.
- 13.5. All expenditures incurred on behalf of the committee must be reported to the Administrative Officer and WAMSS Treasurer. Adequate evidence of said expenditures

shall be provided to the Administrative Officer and WAMSS Treasurer as soon as it is practicable.

- 13.6. All contracts, financial or otherwise, must bear the signature of a WAMSS Executive Member in order to be valid.

14. Projects

- 14.1. Any UWA medical student may submit a written project proposal for Interhealth to adopt.
- 14.2. For a project to be adopted by Interhealth it must:
- 14.2.1. Be sustainable. Projects which are designed to be a one off event may be exempt from this criterion.
 - 14.2.2. Demonstrate a need or deficit which can be met by the project.
 - 14.2.3. Address global health inequity.
 - 14.2.4. Produce measurable outcomes.
- 14.3. The project shall be adopted and receive the full support of Interhealth if it receives a majority vote by show of hands at an Interhealth Committee Meeting. In the event of a tied vote, the Interhealth Chair shall have the casting vote. The adoption of this project is subject to approval from the WAMSS Committee at the next WAMSS Committee Meeting.
- 14.4. Any student who produces a successful project proposal is automatically entitled to the position of Project Coordinator. If the student chooses not to invoke this right, the position of Project Coordinator shall undergo the normal selection process outlined in Section 8.
- 14.5. Sponsorship agreements for individual projects may be vetoed by the Interhealth Committee on the basis that the proposed sponsor is inappropriate due to social, moral or environmental irresponsibility of the organisation or the industry it represents.

15. Commitments to AMSA Global Health

- 15.1. Interhealth is a member of AMSA Global Health and consequently must conform to the expectations set by AMSA Global Health.
- 15.2. Interhealth and WAMSS will endeavour to send its AMSA Global Health Representative and the Interhealth Chairs to each AMSA Global Health Council meeting.
- 15.3. Interhealth will promote and support AMSA Global Health projects at its discretion.
- 15.4. The AMSA Global Health representative will be free to discuss the activities of Interhealth and the contents of Interhealth meetings unless explicitly instructed otherwise by the Interhealth Chair or the WAMSS President.

16. Commitments to the Social Justice Collaborations



- 16.1. Interhealth may become a member of any social justice collaboration it is invited to, at the discretion of the Interhealth Chairs. Its participation in such collaborations' discussions, activities or actions will be at the Interhealth Chair's discretion.
- 16.2. The Interhealth Chair, or their appointed delegate, will act as Interhealth's representative on any such social justice collaboration.
- 16.3. Representatives to any such social justice collaborations will execute the responsibilities defined by the collaboration as required to fulfill the representative role.
 - 16.3.1. The representative will be free to discuss the activities of Interhealth and the contents of Interhealth meetings unless explicitly instructed otherwise by the Interhealth Chair or the WAMSS President.

17. Commitments to the UWA Guild Enviro Department

- 17.1. Interhealth is a member of the Enviro Department, or any of its equivalent successors, at the University of Western Australia.
- 17.2. The Interhealth Chair, or their appointed delegate, will act as Interhealth's representative, and will carry out the responsibilities of being its representative accordingly.
- 17.3. Representatives will execute the responsibilities as required to fulfill the representative role.
 - 17.3.1. The representative will be free to discuss the activities of Interhealth and the contents of Interhealth meetings unless explicitly instructed otherwise by the Interhealth Chair or the WAMSS President.
- 17.4. Interhealth will participate in Enviro Department discussions, activities or actions wherever possible at its discretion.