Diversity, Equity & Inclusion
Council Charter

Sponsor: Toby Marsh, Chief Patient Care Services
Office Chair: Carter Todd, CNII
Co-Chair: Kywaita Keys, CNII

Meeting Logistics:

<table>
<thead>
<tr>
<th>Date</th>
<th>3rd Thursday of the month</th>
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<tbody>
<tr>
<td>Time</td>
<td>1200 – 1300</td>
</tr>
<tr>
<td>Location</td>
<td>TBD</td>
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</tbody>
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Council Mission:
The Diversity, Equity & Inclusion (DEI) Council implements and maintains standards of nursing practice consistent with evidence-based practice. Aligning with the Principles of Community and the University of California Davis Health mission and vision, DEI Council is committed to advancing the strategic goal of supporting diversity, equity and inclusion as being integral to the care of ourselves, our colleagues, and our patients and their families. The DEI Council will direct and facilitate the journey toward anti-racism. As stated in the Principles of Community, “We confront and reject all manifestations of discrimination, including those based on race, ethnicity, gender and gender expression, age, visible and non-visible disability, nationality, sexual orientation, citizenship status, veteran status, religious/non-religious, spiritual, or political beliefs, socio-economic class, status within or outside the university, or any of the other differences among people which have been excuses for misunderstanding, dissension or hatred.” We support learning that optimizes cultural humility, caring and compassion.

Council Purpose:
The Diversity, Equity & Inclusion (DEI) Council incorporates diversity and inclusion into the professional practice model (PPM) while providing evidence-based structure to:

1. Advance a culture of diversity that integrates patient care, education, research, and community partnerships as key stakeholders
2. Facilitate leadership of the anti-racist work of diversity and inclusion education by aligning with UC Davis’ Betty Irene School of Nursing, Office of Health Equity, Diversity and Inclusion, and other UC Davis academic communities
3. Explore the relationship between our diverse workplace and the outcomes of patient care
4. Examine and document effective methods to understand the intersectionality of a diverse nursing staff and healthcare outcomes
5. Embody a culture of curiosity, cultural humility, caring and compassion for diversity, equity and inclusion within Patient Care Services (PCS) Department

Membership Shall Include the Following:

1. Registered Nurses
2. Advance Practice Nurses
3. Respiratory Care Technicians
4. Lift Team members
5. Patient Care Technicians including mental health workers
6. Ad Hoc members: Nursing Representatives of non-PCS areas who are employed by UC Davis. Representatives will attend those meetings when their materials and requests are being reviewed for approval or when relevant content is being provided to the council.
Current Council Membership: (first name, last name, title):

Carter Todd, RN, MS, CCRN (Chair)
Kywaita Keys, RN, BSN (Co-Chair)
Aron King, RN, BSN
Calene Roseman, RN, MSN
Marcus Christian, CSPHA
Troy Taylor, Manager, Materials Management
Darrell Desmond, RN, MSN, NE-BC
Floreece Johnson, RN, BSN
Greg Woods, RN, BSN
Theresa Pak, RN, MS, NEA BC
Annie Tat, RN, MS
Arthur Hernandez, RN, FNP
Cynthia Romero, RN, BSN
Joseph Reguindin, RN, BSN, MSN (c), CCRN, PHN
Kristina Balneg, RN, BSN, MSN (c), CCRN, PHN
Michelle Linenberger, MSN Ed, RN, CCRN-K, NPD-BC
Nicole Vance RN, BSN
Mercedes Pidra MS EdD (c)
Neil Oppenheimer, RN, MS, CCRN
Tyler Melhalff, RN, BSN

Council Membership Privileges:

1. Each Council member shall have only one vote.
2. Ad Hoc members will have no voting privileges.
3. Appointments to the DEI Council will be for a minimum of a one (1) year commitment period for the first year that the Council is in existence; thereafter the period of appointment will be a two (2) year commitment. No more than 50% of the Council will be rotated off each year, including the first year of existence.
4. Election of members shall occur by June of each year; the term of membership will begin in July.
5. Members will be responsible for coordinating meetings or reporting activities and disseminating minutes/information to their respective units/work locations

Officers:

1. The Chair and Co-Chair shall be elected from within the membership of the Council. Each will serve one year in the respective position for a total of two years (one as Co-Chair, one as Chair). The Chair and Co-Chair of the Council will be elected in a non-supervisory position.
2. An outside PCS employee may serve as a resource to the council on issues that impact the goals and objectives of the Council’s mission/vision and UCD Health.
3. The Chair will be responsible for the development and submission of an annual report due each June to the Professional Governance Council.

Duties of Officers:

1. The Council Chair/Co-Chair is responsible for reporting to the Professional Governance Council on a monthly basis.
2. Schedule and facilitate regular meetings and ad hoc forums
3. Ensure the direction of work is aligned with mission/vision of the Council
4. Develop and disseminate an agenda for each meeting
5. Ensure that meeting minutes are maintained and disseminated
6. Coordinate the writing of the Council’s annual report
7. Select DEI Council Committee Chairs on an annual basis
### Committees:

1. Patient Care Services (PCS)
2. Communication/branding
3. Collaboration (across Davis/Health Equity, Diversity and Inclusion systems)
4. Community
5. Accountability (working with Operations Division)

### Meetings:

1. Councils will meet on the 3rd Thursday of each month
2. Members must attend at least 75% of yearly meetings to retain their Council membership
3. If a member expects to be absent from a meeting, the Chair is to be made aware before the date of meeting
4. It is the responsibility of the absent member to obtain and share within their respective work group any information discussed and materials disseminated within a missed meeting

### Quorum:

1. 51% of the voting members of the Council shall constitute a quorum for all meetings. A consensus decision making process is preferred; when necessary, a motion will be considered approved when passed by a minimum of 51% majority vote.

### Amendments:

1. Council charters may be amended at any meeting of the Council with a quorum of 2/3 attendance and by a 2/3 majority vote
2. Members shall be notified in writing (14) fourteen days in advance of proposed change.
3. Notification shall include present article and section citation and proposed amendment.
4. The Governing Council shall review proposed amendments for final approval.