



HEALTHCARE COALITION

MEETING PROVISIONS & CHARTER

Revised 2/4/2022

1. Purpose of Healthcare Coalition

- 1.1. The purpose of the Healthcare Coalition is to build regional disaster preparedness capabilities.

2. Mission of Healthcare Coalition

- 2.1. Through the use of assessments, planning, training, and exercises the members of the Healthcare Coalition will collaboratively build the regional disaster preparedness capabilities that are determined by but not limited to grant agreements between the Illinois Department of Public Health, the Federal Government, and other entities.
- 2.2. The Healthcare Coalition will also undertake activities it determines necessary to improve the disaster preparedness of the region it serves and the individual entities that are a part of the Healthcare Coalition.

3. Healthcare Coalition Membership

3.1. Voting Members

3.1.1. Standing Voting Members

- 3.1.1.1. Standing Voting Members are identified in statutes or grants which fund the Healthcare Coalition. A Standing Voting Member is afforded the right to vote on items during General Committee meetings.
- 3.1.1.2. Standing Voting Members of the Healthcare Coalition are as follows:
 - 3.1.1.2.1. OSF Saint Francis Medical Center
 - 3.1.1.2.2. Carle BroMenn Medical Center
 - 3.1.1.2.3. Carle Eureka Hospital
 - ~~3.1.1.2.4. Galesburg Cottage Hospital—closed~~
 - 3.1.1.2.5. Genesis Health Illini Campus
 - 3.1.1.2.6. Genesis Health Mercer County Hospital
 - 3.1.1.2.7. Graham Hospital
 - 3.1.1.2.8. Hammond Henry Hospital
 - 3.1.1.2.9. Hopedale Medical Center
 - 3.1.1.2.10. McDonough District Hospital
 - 3.1.1.2.11. OSF Saint Paul Medical Center
 - 3.1.1.2.12. OSF Holy Family Medical Center
 - 3.1.1.2.13. OSF Saint Elizabeth Medical Center

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- 3.1.1.2.14. OSF Saint Luke Medical Center
- 3.1.1.2.15. OSF Saint James Medical Center
- 3.1.1.2.16. OSF Saint Joseph Medical Center
- 3.1.1.2.17. OSF Saint Mary Medical Center
- 3.1.1.2.18. Unity Point Pekin
- 3.1.1.2.19. Peoria Region Public Health Emergency Preparedness Member
- 3.1.1.2.20. Perry Memorial Hospital
- 3.1.1.2.21. Region 2 Emergency Management Member
- 3.1.1.2.22. Region 2 EMS Advisory Council Member
- 3.1.1.2.23. Region 2 Trauma Council Member
- 3.1.1.2.24. St. Margret's Health- Peru
- 3.1.1.2.25. St. Margaret's Health- Spring Valley
- 3.1.1.2.26. Unity Point Methodist
- 3.1.1.2.27. Unity Point Proctor
- 3.1.1.2.28. Unity Point Trinity

3.1.1.3. Additional Standing Voting Members can be added to the Healthcare Coalition utilizing the following process:

- 3.1.1.3.1. A Healthcare Coalition Voting Member will nominate a potential Standing Voting Member at a General Committee meeting.
- 3.1.1.3.2. A notice of a vote to approve the potential Standing Voting Member must be provided to all members in writing (electronically or by mail) 14 days before the vote at a General Committee Meeting.
- 3.1.1.3.3. Healthcare Coalition Voting Members present at the General Committee meeting shall approve the potential Standing Voting Member by a 2/3rds vote (67%).

3.1.2. Rotating Voting Members

- 3.1.2.1. A Rotating Voting Member votes on behalf of the Organizational Workgroup it represents at General Committee meetings.
- 3.1.2.2. Each Rotating Voting Member is afforded one vote per item during General Committee meetings.
- 3.1.2.3. The Rotating Voting Member is the Chair of the Organizational Workgroup it represents.
 - 3.1.2.3.1. In the absence of a functioning Organizational Workgroup, the Healthcare Coalition Chair will appoint a Rotating Voting Member to represent the non-functioning Organizational Workgroup.
 - 3.1.2.3.1.1. The appointed Rotating Voting Member will be immediately replaced by the Organizational Workgroup's Chair once selected.

3.2. Non-Voting Members

- 3.2.1. Any organization that is deemed to be of assistance to the Healthcare Coalition and is determined to be interested in participating but is not required to be a Voting Member by statute or a grant in which funds the Healthcare Coalition may apply for membership as a Non-Voting Member.
 - 3.2.1.1. In order to apply the organization will verbally request Non-Voting Membership at any General Committee meeting.
 - 3.2.1.2. Non-Voting Membership is approved by a simple majority (50% +1) of the General Committee meeting's present Voting Members.

3.3. Removal of Healthcare Coalition Membership

- 3.3.1. Any organization that is required by grant or statute to be a member of the Healthcare Coalition cannot have its membership removed.
- 3.3.2. The approval to remove membership from an organization within the Healthcare Coalition requires a formal vote from the Healthcare Coalition.
 - 3.3.2.1. A notice of a vote to remove membership from an organization within the Healthcare Coalition must be provided to all members in writing (electronically or by mail) 14 days prior to the vote. Additionally, the name and reason for the removal of the organization's membership must be provided.
 - 3.3.2.2. In order for the vote to pass 2/3rds (67%) of all voting Healthcare Coalition Members must vote in favor of the removal of membership from the proposed organization at a General Committee meeting.

4. Conducting Healthcare Coalition Business

4.1. General Provisions

- 4.1.1. All Healthcare Coalition meetings shall follow consensus and collaboration.

4.2. Challenging Votes on the Grounds of Organizational Bias

- 4.2.1. Any Voting Member may challenge any vote on the grounds of an organizational bias.
 - 4.2.1.1. An organizational bias is described as the unfair use of votes by multiple organizations shared by an owning entity.
 - 4.2.1.2. Immediately following the vote in which the organizational bias is alleged a Voting Member will:
 - 4.2.1.2.1. Verbally challenge the vote's results on the grounds of an organizational bias.
 - 4.2.1.2.2. Call for an Organizational Bias Validity Challenge Vote.

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- 4.2.1.3. The Healthcare Coalition Chair will then oversee an Organizational Bias Validity Challenge Vote. During an Organization Bias Validity Challenge Vote the following restrictions apply:
 - 4.2.1.3.1. Voting members whom are owned by the same entity will be afforded only one vote.
 - 4.2.1.4. An Organizational Bias Challenge Vote will be considered successful if simple majorities (50% +1) of those allowed to vote agree with their being an organizational bias.
 - 4.2.1.5. If the Organizational Bias Challenge Vote was successful then a re-vote will immediately occur over the vote in which the organizational bias was acknowledged. The following restrictions will apply to the re-vote:
 - 4.2.1.5.1. Voting members whom are owned by the same entity will be afforded one vote for every two voting members it represents.
 - 4.2.1.5.2. Percentages for approval of the vote in which the organizational bias was acknowledged remain the same.

4.3. General Consent Items

- 4.3.1. The following is a list of General Consent items:
 - 4.3.1.1. The acceptance of previous meeting minutes.
 - 4.3.1.2. The acceptance of meeting schedules.
 - 4.3.1.3. The acceptance of any other activity, document, member, or financial transaction that is not specifically outlined in this Healthcare Coalition Charter.
- 4.3.2. General Consent items are approved with a simple majority (50% +1) of present Voting Members. In the event of a tie, the Chair of the meeting will vote to break it.

4.4. Healthcare Coalition Charter

- 4.4.1. The initial approval and any revisions to the Healthcare Coalition Charter requires a formal vote from the Healthcare Coalition prior to its implementation.
 - 4.4.1.1. A notice of a vote to approve or revise the Healthcare Coalition Charter must be provided to all members in writing (electronically or by mail) 14 days prior to the vote. Additionally, the proposed charter and/or revisions must be included with the notice.
 - 4.4.1.2. In order for the vote to pass 2/3rds (67%) of all Voting Healthcare Coalition Members must vote in favor of the proposed charter and/or revisions at a General Committee meeting.

4.5. Healthcare Coalition’s Training and Exercise Plan

4.5.1. The initial approval and any revisions to the Healthcare Coalition’s Training and Exercise Plan requires a formal vote from the Healthcare Coalition prior to its implementation.

4.5.1.1. A notice of a vote to approve or revise the Healthcare Coalition’s Training and Exercise Plan must be provided to all members in writing (electronically or by mail) 14 days prior to the vote. Additionally, the proposed plan and/or revisions must be included with the notice.

4.5.1.2. In order for the vote to pass 2/3rds (67%) of all Voting Healthcare Coalition Members must vote in favor of the proposed plan and/or revisions at a General Committee meeting.

4.6. Healthcare Coalition’s Strategic Capability Improvement Plan

4.6.1. The initial approval or revision of the Healthcare Coalition’s Strategic Capability Improvement Plan requires a formal vote from the Healthcare Coalition prior to its implementation.

4.6.1.1. A notice of a vote to approve or revise the Healthcare Coalition’s Strategic Capability Improvement Plan must be provided to all members in writing (electronically or by mail) 14 days prior to the vote. Additionally, the proposed plan and/or revisions must be included with the notice.

4.6.1.2. In order for the vote to pass 2/3rds (67%) of all present Voting Healthcare Coalition Members must vote in favor of the proposed plan and/or revisions at a General Committee meeting.

4.7. Healthcare Coalition’s Regional Disaster Plan

4.7.1. The initial approval or revision of the Healthcare Coalition’s Regional Disaster Plan requires a formal vote from the Healthcare Coalition prior to its implementation.

4.7.1.1. A notice of a vote to approve or revise the Healthcare Coalition’s Regional Disaster Plan must be provided to all members in writing (electronically or by mail) 14 days prior to the vote. Additionally, the proposed plan and/or revisions must be included with the notice.

4.7.1.2. In order for the vote to pass 2/3rds (67%) of all Voting Healthcare Coalition Members must vote in favor of the proposed plan and/or revisions at a General Committee meeting.

4.8. Healthcare Coalition's Regional Assessments

- 4.8.1. The approval of any of the Healthcare Coalition's Regional Assessments requires a formal vote from the Healthcare Coalition prior to its implementation.
 - 4.8.1.1. A notice of a vote to approve of any of the Healthcare Coalition's Regional Assessments must be provided to all members in writing (electronically or by mail) 14 days prior to the vote. Additionally, the assessment to be voted on must be included with the notice.
 - 4.8.1.2. In order for the vote to pass 2/3rds (67%) of all present Voting Healthcare Coalition Members must vote in favor of the assessment at a General Committee meeting.

4.9. Healthcare Coalition's Financial Transactions

- 4.9.1. The approval of any financial transactions partaken on behalf of the Healthcare Coalition requires a formal vote from the Healthcare Coalition prior to its implementation.
 - 4.9.1.1. A notice of a vote for financial transactions partaken on behalf of the Healthcare Coalition must be provided to all members in writing (electronically or by mail) 14 days prior to the vote. Additionally, details of the proposed financial transaction must be included with the notice.
 - 4.9.1.2. In order for the vote to pass 2/3rds (67%) of all Voting Healthcare Coalition Members must vote in favor of the proposed financial transaction at a General Committee meeting.
 - 4.9.1.3. The Illinois Department of Public Health's REMSC can veto any financial transaction that will utilize funds provided by the State of Illinois or the Federal Government that does not comply with the agreement in which those funds were provided to organizations of the Healthcare Coalition or the Healthcare Coalition itself.
 - 4.9.1.4. An Illinois Department of Public Health's EMS Division Chief veto can be overridden with a 3/4ths (75%) vote from all voting healthcare coalition members.
 - 4.9.1.4.1. Once the veto is overridden the proposed transaction will be sent to the REMSC Division Chief for a final ruling.

5. Meetings

5.1. General Committee Meetings

- 5.1.1. The General Committee shall be comprised of all members of the Healthcare Coalition.
- 5.1.2. The General Committee will meet at a minimum of once each quarter or as often as mandated by statute or grant agreements in which fund the Healthcare Coalition.
- 5.1.3. General Committee meetings have a quorum requirement of half (50%) of all Voting Members plus one (+1).
 - 5.1.3.1. In the absence of a quorum, the General Committee Meeting will be rescheduled. All Healthcare Coalition Members must receive at least seven days (7) notice (electronically or by mail) prior to the meeting.

5.2. Organizational Workgroup Meetings

- 5.2.1. The Organizational Workgroup shall be comprised of all members of the Healthcare Coalition in which are of a similar function as that of the Organizational Workgroup.
- 5.2.2. The Organizational Workgroup will meet at a minimum of once each quarter or as often as mandated by statute or grant agreements in which fund the Healthcare Coalition.
- 5.2.3. There are no quorum requirements for Organizational Workgroups.
- 5.2.4. **Organizational Workgroup Chair**
 - 5.2.4.1. Organizational Workgroup Chair Selection
 - 5.2.4.1.1. A notice of a vote to select the Organizational Workgroup's Chair must be provided to all workgroup members in writing (electronically or by mail) 14 days prior to the vote. Additionally, the candidates for the chair must be included with the notice.
 - 5.2.4.1.2. The candidate who receives the greatest number of votes will be selected to serve as the Organizational Workgroup Chair.
 - 5.2.4.1.2.1. In the case of a tie, a re-vote will occur immediately with only the candidates that received the highest vote total during the previous vote on the ballot.
 - 5.2.4.2. Organizational Workgroup Chair General Provisions
 - 5.2.4.2.1. The length of a term for a Workgroup Chair is one year.
 - 5.2.4.2.2. A new Workgroup Chair must be selected prior to the expiration of the current Sub-Committee Chair's term.

5.2.5. Required Organizational Workgroups

- 5.2.5.1. Continuity
- 5.2.5.2. Healthcare Response
- 5.2.5.3. Medical Surge
- 5.2.5.4. Strategic Planning

5.3. Ad-Hoc Sub-Committee Meetings

- 5.3.1. Ad-Hoc Sub-Committees will be formed and dissolved as determined by the Healthcare Coalition Chair.
- 5.3.2. The Ad-Hoc Sub-Committee Chair and other Sub-Committee members will be appointed by the Healthcare Coalition Chair.
- 5.3.3. Ad-Hoc Sub-Committees will meet as many times as determined necessary by the Ad-Hoc Sub-Committee Chair.
- 5.3.4. There are no quorum requirements for Ad-Hoc Sub-Committees.

6. Healthcare Coalition Official Positions

6.1. Healthcare Coalition Chair

- 6.1.1. The Healthcare Coalition Chair is the RHCC hospital appointed by the State of Illinois' Department of Public Health.

6.1.2. Job Duties

- 6.1.2.1. Chair all Healthcare Coalition General Committee meetings.
- 6.1.2.2. In the absence of a functioning Organizational Workgroup appoint a rotating voting member for the Organizational Workgroup.
- 6.1.2.3. Develop and Dissolve Ad-Hoc Sub-Committees.
- 6.1.2.4. Identify Ad-Hoc Sub-Committee Chairs.
- 6.1.2.5. As dictated by the Illinois Department of Public Health, Federal Government and their corresponding grant agreements review the annual work plan and budget of all necessary parties.
- 6.1.2.6. Propose a General Committee meeting schedule annually.
- 6.1.2.7. Ensure the development of the Healthcare Coalition's Training and Exercise Plan annually.
- 6.1.2.8. Ensure the development of the Healthcare Coalition's Strategic Capability Improvement Plan annually.
- 6.1.2.9. Ensure the conduct of the Healthcare Coalition's Regional Assessments annually.
- 6.1.2.10. Shall not vote at General Committee meetings.
 - 6.1.2.10.1. In the event of a tie, the chair may cast the deciding vote.
- 6.1.2.11. May veto any item voted on at a General Committee meeting.

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- 6.1.2.11.1. This veto may be overridden by a 3/4ths (75%) vote of the attending Voting Members at the next General Committee meeting.

6.2. Healthcare Coalition Co-Chair

- 6.2.1. The Healthcare Coalition Co-Chair is determined by the Healthcare Coalition's Chair.

6.2.2. Job Duties

- 6.2.2.1. Assist the Healthcare Coalition Chair in fulfilling their duties.
- 6.2.2.2. In the absence of the Healthcare Coalition Chair fulfill their duties.

6.3. Healthcare Coalition Secretary

- 6.3.1. The Healthcare Coalition Secretary is determined by the Healthcare Coalition's Chair.

6.3.2. Job Duties

- 6.3.2.1. Record minutes for all Healthcare Coalition General Committee meetings.
- 6.3.2.2. Provide a report at each General Committee meeting of the minutes from the previous General Committee meeting for approval by the General Committee.
- 6.3.2.3. Maintain a list of all Standing Voting, Rotating Voting, and Non-Voting members of the Healthcare Coalition.

6.4. Illinois Department of Public Health REMSC

- 6.4.1. The REMSC is determined by the State of Illinois' Department of Public Health.

6.4.2. Job Duties

- 6.4.2.1. Veto any financial transaction that will utilize funds provided by the State of Illinois or the Federal Government that does not comply with the agreement in which those funds were provided to entities of the Healthcare Coalition or the Healthcare Coalition itself.

6.5. Healthcare Coalition Organizational Workgroup and Ad-hoc Sub-Committee Chairs

- 6.5.1. The Healthcare Coalition's Ad-hoc Sub-Committee Chairs are determined by the Healthcare Coalition Chair.
- 6.5.2. The Healthcare Coalition's Organizational Workgroup Chairs are determined by the Organizational Workgroup in which they represent.

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- 6.5.2.1. In the absence of a functioning Organizational Workgroup, the Healthcare Coalition Chair will appoint a Rotating Voting Member to represent the non-functioning Organizational Workgroup.
- 6.5.2.1.1. The appointed Rotating Voting Member will be immediately replaced by the Organizational Workgroup's Chair once selected.

6.5.3. Job Duties

- 6.5.3.1. For the appropriate Organizational Workgroup or Ad-hoc Sub-Committee; chair all Workgroup or Sub-Committee meetings.
- 6.5.3.2. For the appropriate Organizational Workgroup or Ad-hoc Sub-Committee; develop the Workgroup or Sub-Committee meeting schedule.
- 6.5.3.3. Identify an individual within the appropriate Workgroup or Sub-Committee to record the Workgroup or Sub-Committee meeting minutes.
- 6.5.3.4. For the appropriate Organizational Workgroup or Ad-hoc Sub-Committee; provide an overview of the activities undertaken by the Workgroup or Sub-Committee at General Committee Meetings.

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Quick Reference Guide

To:	You Say:	Interrupt Speaker:	Second Needed:	Debatable:	Amendable:	Vote Needed:
Adjourn	“I move that we adjourn”	No	Yes	No	No	Majority
Recess	“I move that we recess until...”	No	Yes	No	Yes	Majority
Complain about noise, room temp., etc.	“Point of privilege”	Yes	No	No	No	Chair Decides
Suspend further consideration of something	“I move that we table it”	No	Yes	No	No	Majority
End debate	“I move for previous question”	No	Yes	No	No	2/3
Postpone consideration of something	“I move we postpone this matter until...”	No	Yes	Yes	Yes	Majority
Amend a motion	“I move that this motion be amended by...”	No	Yes	Yes	Yes	Majority
Introduce business (a primary motion)	“I move that...”	No	Yes	Yes	Yes	Majority
The above-listed motions and points are listed in the established order of precedence. When any one of them is pending, you may not introduce another that is listed below, but you may introduce another that is listed above it.						
Object to procedure or personal affront	“Point of order”	Yes	No	No	No	Chair Decides
Request Information	“Point of information”	Yes	No	No	No	None
Ask for vote by actual count to verify voice vote	“I call for a division of the region”	Must be done before new motion	No	No	No	None unless someone objects
Object to considering some undiplomatic or improper matter	“I object to consideration of this”	Yes	No	No	No	2/3
Take up matter previously tabled	“I move we take from the table...”	Yes	Yes	No	No	Majority
Reconsider something already disposed of	“I move we now (or later) reconsider our action relative to...”	Yes	Yes	No	No	Majority
Consider something out of its scheduled order	“I move we suspend the rules and consider...”	No	Yes	No	No	2/3
Vote on a ruling by the Chair	“I appeal the Chair’s decision”	Yes	Yes	Yes	No	Majority
The motions, points, and proposals listed above have no established order of preference; any of them may be introduced at any time except when the meeting is considering one of the top three matters listed from the first chart (Motion to Adjourn, Recess or Point of Privilege).						

PROCEDURE FOR HANDLING A MAIN MOTION

NOTE: Nothing goes to discussion without being a motion on the floor.

Obtaining and assigning the floor

A member raises hand when no one else has the floor

1. The Chair recognizes the member by name

How the Motion is brought before the Region

1. The member makes the motion: *I move that (or "to")*...and resumes his seat.
2. Another member seconds the motion: *I second the motion* or *I second it* or *second*.
3. The chair states the motion: *It is moved and seconded that...Are you ready for the question?*

Consideration of the Motion

1. Members can debate the motion.
2. Before speaking in debate, members obtain the floor.
3. The maker of the motion has first right to the floor if they claim it properly.
4. Debate must be confined to the merit of the motion.
5. Debate can be closed only by order of the assembly (2/3 vote) or by the chair if no one seeks the floor for further debate.

The chair puts the motion to a vote

1. The chair asks: *Are you ready for the question?* If no one rises to claim the floor, the chair proceeds to take the vote.
2. The chair says: *the question is on the adoption of the motion that...As many as are in favor, say 'Aye'.* (Pause for response.) *Those opposed, say 'Nay.'* (Pause for response.) Those abstained please say 'Aye'.

The chair announces the result of the vote

1. The ayes have it, the motion carries, and...(indicating the effect of the vote) or
2. The nays have it and the motion fails

When debating your motions, remember to listen to the other side, focus on issues not personalities, avoid questioning motives, and be polite!

HOW TO ACCOMPLISH WHAT YOU WANT TO DO IN MEETINGS

MAIN MOTION

You want to propose a new idea or action for the group:

1. After recognition, make a main motion.
2. Member: “Mr. Chairman, I move that _____.”

AMENDING A MOTION

You want to change some of the wording that is being discussed:

1. After recognition, “Mr. Chairman, I move that the motion be amended by adding the following words _____.”
2. After recognition, “Mr. Chairman, I move that the motion be amended by striking out the following words _____.”
3. After recognition, “Mr. Chairman, I move that the motion be amended by striking out the following words, _____, and adding in their place the following words _____.”

REFER TO A COMMITTEE

You feel that an idea or proposal being discussed needs more study and investigation:

After recognition, “Mr. Chairman, I move that the question be referred to a committee made up of members Smith, Jones, and Brown.”

POSTPONE DEFINITELY

You want the membership to have more time to consider the question under discussion and you want to postpone it to a definite time or day and have it come up for further consideration:

After recognition, “Mr. Chairman, I move to postpone the question until _____.”

PREVIOUS QUESTION

You want the membership to have more time to consider the question under discussion and you want to postpone it to a definite time or day and have it come up further consideration:

After recognition, “Mr. Chairman, I move to postpone the question until _____.”

LIMIT DEBATE

You think the discussion is getting long, but you want to give a reasonable length of time for consideration of the question:

After recognition, “Mr. Chairman, I move to limit discussion to two minutes per speaker.”

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POSTPONE INDEFINITELY

You want to kill a motion that is being discussed:

After recognition, “Mr. Chairman, I move to postpone the question indefinitely.”

You are against a motion just proposed and want to learn who is for and against the motion:

After recognition, “Mr. Chairman, I move to postpone the question indefinitely.”

RECESS

You want to take a break for a while:

After recognition, “Mr. Chairman. I move for a ten-minute recess.”

ADJOURNMENT

You want the meeting to end:

After recognition, “Mr. Chairman, I move to adjourn.”

PERMISSION TO WITHDRAW A MOTION

You have made a motion and after discussion, are sorry you made it.

After recognition, “Mr. Chairman, I ask permission to withdraw my motion.”

CALL FOR ORDERS OF THE DAY

At the beginning of the meeting, the agenda was adopted. The chairman is not following the order of the approved agenda:

Without recognition, “Call for orders of the day.”

SUSPENDING THE RULES

The agenda has been approved and as the meeting progressed, it became obvious that an item you are interested in will not come up before adjournment:

After recognition, “Mr. Chairman, I move to suspend the rules and move item 5 to position 2.”

POINT OF PERSONAL PRIVILEGE

The noise outside the meeting has become so great that you are having trouble hearing:

1. Without recognition, “Point of personal privilege.”
2. Chairman: “State your point.”
3. Member: “There is too much noise, I can’t hear.”

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COMMITTEE OF THE WHOLE

You are going to propose a question that is likely to be controversial and you feel that some of the members will try to kill it by various maneuvers. Also, you want to keep out visitors and the press:

After recognition, "Mr. Chairman, I move that we go into a committee of the whole."

POINT OF ORDER

It is obvious that the meeting is not following proper rules:

Without recognition, "I rise to a point of order," or "Point of Order."

POINT OF INFORMATION

You are wondering about some of the facts under discussion, such as the balance in the treasury when expenditures are being discussed:

Without recognition, "Point of information."

POINT OF PARLIAMENTARY INQUIRY

You are confused about some of the parliamentary rules:

Without recognition, "Point of the parliamentary inquiry."

APPEAL FROM THE DECISION OF THE CHAIR

Without recognition, "I appeal the decision of the chair."

Rule Classification and Requirements

Class of Rule	Requirements to Adopt	Requirements to Suspend
Charter	Adopted by majority vote or as proved by law or governing authority	Cannot be suspended
Bylaws	Adopted by membership	Cannot be suspended
Special Rules of Order	Previous notice & 2/3 vote, or a majority of entire membership	2/3 Vote
Standing Rules	Majority Vote	Can be suspended for session by a majority vote during a meeting
Modified Roberts Rules of Order	Adopted in bylaws	2/3 Vote