

Consumers United for Evidence-based Healthcare (CUE) Bylaws Summary

ARTICLE I Mission & Objectives

Section 1.

Consumers United for Evidence-based Healthcare (CUE), formally referred to as the US Cochrane Center Consumer Coalition, is a national coalition of health and consumer advocacy organizations committed to empowering consumers to make the best use of evidence-based healthcare.

Section 2. Mission Statement

The mission of CUE is to promote the health of populations and the quality of individual health care by empowering consumers, public health policy makers, and health care providers to make informed decisions based on the best current evidence through research, education, and advocacy.

Vision Statement: All consumers, policy makers, and providers will use evidence in making health decisions.

Section 3. Goals

Specific goals include:

1. Establishing universal access to evidence-based healthcare information that is produced in a format and language useful to consumers.
2. Disseminating the tools to utilize that information including a means by which consumers can analyze evidence in order to evaluate the harms and benefits of specific healthcare interventions.
3. Demanding research to fill existing gaps with the recognition that the research should be relevant to minority and vulnerable populations.
4. Ensuring the validity and integrity of research by consumer involvement in framing research questions and reviewing research protocols.
5. Insisting that the way research is conducted and reported promotes the public (as opposed to commercial) interests.

Section 4. Definitions

Consumer: Any individual who interacts with and/or is impacted by formal and informal systems of public health or individual healthcare. Such individuals represent a diverse array of characteristics including age, race, culture, language, gender, sexual orientation, disability status, geographic location, socioeconomic status, and national origin.

Best Current Evidence: The most recent, relevant, and comprehensive review of research relating to prevention, screening, diagnosis, and treatment, performed in a scientifically and ethically sound manner.

Evidence-based Healthcare: Healthcare based on a collaborative decision-making process between physicians and consumers, which takes into account the best research evidence, clinical expertise, and patient values.

ARTICLE II Structure

Section 1. Diversity

CUE will be diverse and inclusive by seeking member organizations that serve one or more of the following groups:

- (a) Constituents who share common interests by virtue of age, race, culture, language, national origin, gender, sexual orientation, disability status, geographic location, socioeconomic status.
- (b) Constituents affected by a specific health condition, disease, or groups of diseases.
- (c) Constituents who share common interests that cross diseases, health conditions, and populations, e.g., caregivers, unions and other community organizations, complementary health advocates.

CUE will also seek to include organizations of various sizes including smaller organizations as well as larger coalitions or umbrella organizations that have grass roots participation. CUE may also include some organizations that advocate primarily to affect policy.

Section 2. Steering Committee

A Steering Committee of 7 members will be responsible for the overall direction of CUE. Members (original and subsequent) may be re-elected for contiguous or non-contiguous terms.

The Steering Committee will not include any more than one person representing a particular member organization or constituency. Member organizations must appoint a representative and alternate who are accountable to their organizations as well as to CUE. Member organizations must grant their representatives authority to act on behalf of their organization.

The Steering Committee will conduct business by quarterly conference calls and devise procedures for interim communications by e-mail and other appropriate means. The Committee may elect a Chair, Co-Chair, or other officers, as it deems appropriate. Elections (e.g. for Chair) will be conducted by a means agreed to by the Steering Committee. Candidates who receive the largest number of votes will be elected to fill the positions. Vacancies may be filled by the Steering Committee pending an election at the next annual meeting.

All Steering Committee members will serve as Co-Chairs on the project committees and provide quarterly progress reports for the Steering Committee and general membership. Five members will constitute a quorum. Decisions (other than elections) require agreement by a minimum of 2/3 of the Committee.

Section 3. Other Committees

The Steering Committee may create other committees or working groups as the need arises.

Committees may include participants (other than CUE members) to supplement the expertise and experience of committee members. These participants are not eligible to vote but their contribution will be taken into account by voting members of the committee.

Section 4. Membership

Membership in CUE is open to any health advocacy organization that is not dominated by pharmaceutical companies, providers, or any other vested interests in any way that could cause the organization to compromise or be viewed as possibly compromising, its commitment to consumers.

The Steering Committee will determine the means by which potential members may apply for membership or be nominated by current Coalition members. It will also develop criteria to ascertain whether potential member organizations have conflicts of interest (due to funding sources, Board members, etc.) that compromise, or appear to compromise, their ability to represent consumers' interests. All nominations or applications will be considered by the Steering Committee (or another specified body) and must be approved by at least 2/3 of the Committee.

ARTICLE III Annual Meetings

The annual meeting of CUE will be held at a place and time determined by the Steering Committee. All member organizations will be eligible to cast one vote on any issues under consideration. Other participants at the meeting will not be eligible to vote.

All decisions (other than elections) require agreement by 2/3 of the member organizations present at the annual meeting.

The Steering Committee may implement a means by which members can be polled or otherwise have input into decisions made during the period between meetings. The Steering Committee will also devise a plan for all committees to report to CUE membership between meetings.

ARTICLE IV Staff and Resources

CUE is a project within the US Cochrane Center (USCC). The USCC provides a full-time Consumer Coordinator to manage CUE's activities. Other Cochrane personnel (Director, Coordinator, Conference Planner and Web Developer) contribute a portion of their time.

Within financial and substantive parameters, CUE is free to make decisions regarding its mission, infrastructure, and activities. USCC staff members are a resource for CUE and will collaborate with CUE to help it define and implement its goals.