



CATRAC

CAPITAL AREA OF TEXAS REGIONAL ADVISORY COUNCIL

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**Capital Area of Texas Regional
Advisory Council
(CATRAC)**

Organization Bylaws

Approved _____

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61 **ORGANIZATION BYLAWS**
62

63
64 **Article I - Name**
65

66 These Bylaws govern the operations of the Capital Area Trauma Regional Advisory Council
67 d/b/a Capital Area of Texas Regional Advisory Council (CATRAC). CATRAC is a 501(c)3, non-
68 profit organization in accordance with the Texas Administrative Code, Title 25, Part 1, Chapter
69 157.
70

71 **Article II - Mission / Vision**
72

73 **Mission –**

74 To facilitate coordination amongst trauma and emergency healthcare providers within TSA-O to
75 ensure the most efficient, consistent, and expedient care of each patient, by developing and
76 maintaining integrated quality processes in patient care, transportation, education, and prevention.
77

78 **Vision –**

79 We will be the model regional trauma, disaster, and emergency healthcare system in the United
80 States that results in the lowest risk-adjusted mortality for emergency healthcare conditions.
81

82 **Article III - Purpose**
83

84 **Section 1.** The purpose of this organization is to:
85

- 86 A. Serve as the lead agency for the coordination and oversight of the healthcare
87 preparedness program in Trauma Service Areas (TSA) L, M, N, and O and the
88 Emergency Medical Task Force-7.
89 B. Advance the state of health care and emergency preparedness within the counties
90 of TSA-O, which includes Bastrop, Blanco, Burnet, Caldwell, Fayette, Hays,
91 Lee, Llano, San Saba, Travis, and Williamson Counties.
92
93 C. Decrease morbidity and/or mortality that result from injury and illness.
94
95 D. Assist its member organizations and the CATRAC region to achieve the highest
96 level of health care and emergency preparedness.
97
98 E. Encourage activities designed to promote cooperation between member
99 organizations.
100
101 F. Improve funding of trauma care providers within the counties served by this
102 Council.
103
104 G. Provide a forum to discuss regional health care issues and emergency
105 preparedness.
106
107 H. Provide ongoing education regarding regional health care issues and emergency
108

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109 preparedness to our stakeholders.

- 110
- 111 I. Improve public awareness of the methods of accessing the trauma and health care
- 112 system and preventing injury.
- 113
- 114 J. Support the process for inter-facility transfers from stabilization through
- 115 rehabilitation.
- 116

117

118 **Article IV - Membership Qualifications**

119

120 **Section 1. General**

121

- 122 A. Members: A person or organization, in good standing with membership dues,
- 123 that represents hospitals, emergency medical services providers, first responder
- 124 organizations, fire departments, long-term care facilities, nursing homes, dialysis
- 125 centers, government agencies, educational institutions and organizations that
- 126 serve in enhancing the emergency and acute health care systems planning or
- 127 disaster preparedness.
- 128
- 129 1. Membership dues are determined by the Board of Directors with
- 130 approval by the General Membership.
- 131 2. Annual membership dues will be sent within 60-days of the fiscal
- 132 year beginning. Annual membership dues must be paid by the
- 133 beginning of the fiscal year and an updated Member Representative
- 134 Information Form completed. New members joining during the
- 135 fiscal year must pay dues in accordance with membership standards,
- 136 3. Failure to pay dues will result in loss of membership until such time
- 137 as all delinquent fees or dues are fully paid, and all fees and dues are
- 138 current.
- 139
- 140 B. Each member organization has a designated representative selected by:
- 141 1. Healthcare organization leadership (e.g., Vice President, CEO,
- 142 CFO, COO)
- 143 2. Pre-hospital provider leadership (e.g., Chief, Director or County
- 144 Judge)
- 145
- 146 C. No person shall be denied membership based on race, national origin, disability,
- 147 gender, sexual orientation, age, or religious preference.
- 148

149

150 **Section 3. Member Participation**

151

- 152 A. All members are encouraged to be active participants. CATRAC reports
- 153 participation of pre-hospital providers, hospitals and first responder organizations
- 154 to the Texas Department of State Health Services (DSHS) annually. Participation
- 155 may be used to determine eligibility for funding and other regulatory functions.
- 156 Active membership is defined as:
- 157 1. Payment of annual membership dues.

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- 158 2. Member representative attendance of 75% of Board of Director
- 159 meetings.
- 160 3. Committee Chairs must attend 75% of all Board of Director
- 161 meetings.
- 162 4. Representation at 75% of meetings, of at least two committees
- 163 a. Healthcare Facility – Emergency Healthcare System
- 164 committee plus one other committee
- 165 b. Pre-hospital provider agency – Pre-hospital committee plus
- 166 one other committee
- 167 5. Respond to all queries (e.g., requests for data, survey responses,
- 168 etc.) within the specified timeline Submission of data to the Texas
- 169 Trauma registry and CATRAC, as defined in committee
- 170 expectations.
- 171

172 **Section 4.** Resignation of Membership

173
174 A member who resigns in good standing may reapply for membership.

175
176
177 **Article V -- Board of Directors**

178
179 **Section 1.** Directors

180
181 The Board of Directors shall consist of the following member representatives:

- 182
- 183 A. One (1) pre-hospital senior clinical representative from each county grouping below
- 184 that either resides or works in the county they represent and has a nomination by the
- 185 County Judge or any County Commissioner.
- 186 1. Travis
- 187 2. San Saba / Llano
- 188 3. Burnet / Williamson
- 189 4. Hays / Blanco
- 190 5. Caldwell / Bastrop
- 191 6. Lee / Fayette
- 192
- 193 B. One (1) system/division level clinical executive from each of the following
- 194 healthcare systems:
- 195 1. Ascension Healthcare
- 196 2. HCA St. David's Healthcare
- 197 3. Baylor Scott & White
- 198 In the event of a merger, acquisition, dissolution, or other action of
- 199 one or more healthcare systems, the Board of Directors will change
- 200 the allocation of hospital representation resulting in a Bylaw
- 201 revision.
- 202
- 203 C. One (1) senior clinical representative from independent hospitals (not listed above) or
- 204 other healthcare facilities (e.g., long-term care facilities, dialysis centers, nursing
- 205 homes).
- 206

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- 207 D. One (1) senior clinical representative from the air medical providers.
208
209 E. One (1) representative from the Healthcare Preparedness Coalition representing the
210 geography of the Emergency Medical Task Force Region 7.
211
212 F. Five (5) Executive Officers, as defined in Article VI.
213
214

215 **Section 2. Board of Director Expectations**
216

- 217 A. Directors shall have one vote on action items. No proxy votes will be accepted.
218 Executive Committee shall break tie votes of the Board of Directors.
219
220 B. Electronic voting may be utilized at the discretion of the Executive Director for items
221 of a time sensitive and urgent nature. This means of voting requires a quorum and
222 will only be used for urgent matters that require a vote outside of the regularly
223 scheduled Board of Directors meetings.
224
225 C. Elected Directors and Executive Committee must comply with DSHS requirements.
226
227 D. Resignations from the Board of Directors must be submitted in writing or be given
228 verbally in person at a Board of Director's meeting. A de facto resignation from the
229 Board of Directors automatically and immediately occurs when a Director no longer
230 meets the requirements for membership (Article IV, Section 1).
231
232 E. Attend a minimum of 75% of Board of Directors meetings. Attendance will be
233 reviewed by Board of Directors at each meeting.
234
235 F. Participation via conference call may be utilized due to unforeseen circumstances.
236 Frequent use of conference calls are discouraged.
237
238 G. Vacancies filled mid-term will be up for election at the October General Membership
239 meeting prior to the scheduled expiration term of that position.
240

241 **Section 2. Board of Directors Duties**
242

- 243 A. The regular business of the organization shall be handled during a meeting of the
244 Board of Directors.
245
246 B. The Board of Directors shall direct the activities of ad-hoc committees and shall
247 approve the proposals brought from Committees.
248
249 C. The Board of Directors shall make recommendations to the General Membership.
250
251 D. The Board of Directors, no less than quarterly, reviews and approves the operating
252 budget(s) and presents a financial report, which includes funds expended, planned
253 expenditures, and remaining balance.
254
255 E. The Board of Directors contributes to and publishes the annual report.

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256
257 F. The Board of Directors reviews the Internal Audit annually and acts, as needed.
258

259 G. The Board of Directors selects a bank for CATRAC to use which must be federally
260 insured and located within the Trauma Service Area O.
261

262 **Section 3. Quorum**
263

264 A quorum for conducting the business of the Board of Directors shall be not less than
265 nine of the seventeen members physically present. A quorum must include two (2)
266 Executive Committee Officers. Executive Committee meeting should a quorum of at least
267 three (3) Officers.
268

269 **Section 4. Standards of conduct.**
270

271 A. **Liability.** An Directors shall discharge the duties of their position in good faith, in a
272 manner the Board of Directors reasonably believes to be in the best interest of the
273 organization, and with the care an ordinary prudent person in a like position would
274 exercise under similar circumstances. A person who so performs those duties is not
275 liable by reason of being or having been an a Director of the organization.
276

277 B. **Reliance.** Directors are entitled to rely on information, opinions, reports, or
278 statements, including financial statements and other financial data, in each case
279 prepared or presented by:

- 280 1. One or more officers or employees of the organization whom the
281 Board of Directors reasonably believes to be reliable and competent.
- 282 2. Counsel, public accountants, or other persons as to matters that the
283 Board of Directors reasonably believes are within the person's
284 professional or expert competency.
- 285 3. A committee of the board that has been duly appointed whom the
286 Board of Directors reasonably believes the committee to merit
287 confidence.
288

289 C. **Assent/dissent.** Directors present at a Board of Directors meeting when an Action is
290 approved by the affirmative vote of a majority of the Directors present is presumed to
291 have assented to the action approved, unless the Director:

- 292 1. Objects at the beginning of the meeting to the transaction of business
293 because the meeting is not lawfully called or convened and does not
294 participate thereafter in the meeting.
- 295 2. Votes against the action at the meeting; or
- 296 3. Is prohibited from voting on the proposal or elects to abstain from
297 voting
298

299 D. **Limitation of liability.** A Directors personal liability to the organization for
300 monetary damages for breach of fiduciary responsibility is limited to the scope of the
301 articles. However, the following actions do constitute reasons for liability on the part
302 of the Director:

- 303 1. Breach of the Director's duty to the organization.
- 304 2. Acts or omissions not in good faith or that involve intentional

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305 misconduct or a known violation of law.

306 3. For any transaction from which the Director derived an improper
307 personal benefit.

308 4. For any act or omission occurring prior to the date when provision in
309 the article eliminating or limiting liability becomes effective.

310
311 E. Directors whom do not comply with assigned responsibilities may be relieved of
312 office by a majority vote of the Board of Directors, in accordance with Vernon's
313 Texas Civil Statute Title 32 Chapter 9. The Chair, with the approval of the Board of
314 Directors, shall make appointments for a replacement.

315
316 **Article VI – Executive Committee Officers**

317
318 There shall be the following elected Officer positions of the Board of Directors, known as the Executive
319 Committee:

- 320
321 A. Chair
322 B. Vice Chair - Pre-hospital
323 C. Vice Chair - Hospitals
324 D. Secretary
325 E. Treasurer
326

327 **Article VII. Elections**

328
329 Elections will be held as the final business action in the last meeting of the fiscal year. Should both Board
330 of Directors and Officer positions have elections, the Officer elections shall occur first.

331
332 **Section 1. Board of Director Elections**

- 333
334 A. Nominations for Board of Director positions shall be made by the General
335 Membership representatives, who are in good standing.
336
337 B. Election shall be by ballot. A simple majority vote shall be required for election to
338 the Board of Directors.
339

340 **Section 2. Officer Elections**

- 341
342 A. Officers, as defined in Article VI, Section 1, shall be appointed and elected by the
343 Board of Directors.
344
345 B. A simple majority vote shall be required for election to Office.
346

347 **Section 3. Terms of Office**

- 348
349 A. Directors shall serve a minimum term of 3-years and terms shall be staggered.
350
351 B. Directors shall be elected for a 3-year term.

352 - Rotation A:
353

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- 354 a. Pre-hospital positions for Travis County, and Hays/Blanco County
- 355 b. Healthcare System position for Ascension Healthcare
- 356 c. Independent hospitals or other healthcare facilities position
- 357 - Rotation B:
- 358 a. Pre-hospital positions for San Saba/Llano County, and
- 359 Caldwell/Bastrop County
- 360 b. Healthcare System position for HCA St. David's Healthcare
- 361 c. Air Medical Provider position
- 362 - Rotation C:
- 363 a. Pre-hospital positions for Burnet/Williamson County, and
- 364 Lee/Fayette County.
- 365 b. Healthcare System position for Baylor, Scott & White
- 366 c. Healthcare Preparedness Coalition position
- 367
- 368 C. Term Limit: Directors may succeed themselves. Directors serving more than 50% of
- 369 a term shall be considered as having served a full term for that position.
- 370

Section 4.

Transition of Administration. There shall be a meeting of the Board of Directors following installation of the Officers. It should include the outgoing and incoming officers.

Article VIII. Duties of Officers

Section 1. The Chair shall:

- 381
- 382 A. Preside at meetings of the Board of Directors of the organization and at any special
- 383 called meetings.
- 384
- 385 B. Appoint Committee chairs for standing committees and ad-hoc committees or
- 386 workgroups and consider recommendations from Committees and the Executive
- 387 Director / Chief Executive Officer.
- 388
- 389 C. Make interim appointments, as needed.
- 390
- 391 D. Review contracts signed by the Executive Director.
- 392
- 393 E. Is permitted to sign checks along with the signature of one other Officer.
- 394
- 395 F. Assist with the transition of the new Chair during succession to maintain continuity
- 396 of the position.
- 397

Section 2. The Vice Chairs shall:

- 398
- 399
- 400 A. Perform the duties of the Chair, during absence.
- 401
- 402 B. Perform such duties as are assigned by the Chair.

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403
404 C. Is permitted to sign checks along with the signature of one other Officer.
405

406 **Section 3.** The Secretary shall:
407

408 A. Determine if a quorum is present.
409

410 B. Record, review, and present the minutes of all proceedings of the Board of Directors.
411

412 C. Handle the correspondence of the organization in absence of agency staff.
413

414 D. Is permitted to sign checks along with the signature of one other Officer.
415

416 **Section 4.** The Treasurer shall:
417

418 A. Monitor collection and disbursement of funds of the organization as directed by the
419 Board of Directors.
420

421 B. Present monthly budget and financial reports to the Board of Directors.
422

423 C. Treasurer must be bonded upon receipt of funding.
424

425 D. Is permitted to sign checks along with the signature of one other Board of Directors
426 Officer.
427

428
429 **Article IX. Committees**
430

431 **Section 1.** It is recommended that each Standing Committee have at least one physician
432 representative, one emergency medical service representative, and one hospital
433 representative.
434

435 **Section 2.** No member organization shall have more than one vote per action item in
436 standing committee meetings, ad-hoc committee meetings, or workgroup
437 meetings.
438

439 **Section 3.** Committee Chairs will be appointed by the Board of Directors Chair. The
440 committee chairs may select additional members of their committees.
441 Committee Chairs are encouraged to attend GETAC meetings which correlate
442 with their respective committee. Committee Chairs shall provide a committee
443 report quarterly at the CATRAC Board of Directors meetings.
444

445 **Section 4.** A Committee Chair who does not comply with assigned responsibilities may be
446 relieved of office by a majority vote of the Board of Directors in accordance with
447 Vernon's Texas Civil Statute Title 32 chapter 9.
448

449 **Section 5.** CATRAC Committees will driver stakeholder engagement and participation
450 towards the goals and deliverables of the organization, as outlined in program
451 deliverables, programmatic contract objectives, DSHS RAC Assessment

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guidelines, and Board of Director taskings. The Standing Committees are:

A. Data Committee

Responsibilities of the committee include:

- Focus on performance improvement through data standards in collection, analysis, and outcome education
- Develop and maintain data governance process and framework intended to guide data usage and quality
- Establish and promote minimal membership data submission requirements that promote regional healthcare priorities
- Analyze data to provide stakeholder feedback on established regional minimal standards

B. Education / Injury Prevention

Responsibilities of the committee include:

- Facilitate educational opportunity for members based upon committee and Board goals, as well as DSHS RAC Assessment Criteria
- Receive and review educational and training opportunities presented to the committee
- Provide a resource/calendar of educational offerings for members
- Provide education scholarships/sponsorships/subsidizations for members based on application, need and funding availability
- Plan, organize and implement training programs based organizational goals and funding availability
- Collect and review injury data and literature to support evidence based/informed prevention strategies
- Establish, monitor, and effectively communicate an approach to address injury risks
- Communicate availability and/or host training and professional development opportunities
- Develop recommendations for allocation of resources/funds to support evidence based/informed injury prevention and education strategies
- Collaborate with staff to ensure responsible stewardship of evidence based/informed injury prevention

C. Pre-hospital Committee

Responsibilities of the committee include:

- Focus on performance improvement of prehospital response, treatment, and transport, as well as DSHS RAC Assessment Criteria
- Monitor and develop regional systems for patient care and transport among pre-hospital care providers (including ground and air medical providers)
- Enhance relationships with regional healthcare partners to efficiently maintain continuity care for patients
- Develop common communications criteria, including patient report and handoff
- Develop and review annually regional guidelines for pre-hospital care

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- Development of plans for pre-hospital care using Whole Blood

D. Capital Area Public Health & Medical Preparedness Coalition

Responsibilities of the committee include:

- Coordinate regional disaster / emergency preparedness and response through collaboration with regional HPP stakeholders and state partners
- Facilitate and promote disaster / emergency planning, training, and education with regional HPP partners and stakeholders
- Promote consistency throughout the HPP region regarding equipment and response needs
- Identify opportunities to leverage funding among regional partners to maximize preparedness and response efforts
- Establish and promote 7-RMOC-Austin/Central Texas Standard Operating Guidelines

E. Trauma & Emergency Health Systems Committee

Responsibilities of the committee include:

- Review regional process and make recommendations to accomplish DSHS RAC Assessment Criteria
- Focus on regional performance improvement for trauma, stroke, cardiac, perinatal, and emergency healthcare operations
- Provide ongoing performance assessment and improvement activities designed to optimize patient care (i.e., education, injury patterns, and specialty care).
- Create and document (as written the Emergency Healthcare Systems Plan) an organized emergency healthcare system to provide optimal care and outcomes
- To optimize patient outcomes and system efficiencies for field transport and inter-facility transfers.
- Develop system performance standards through shared quality and improvement data and processes
- Enhance and maintain regional and state relationships for collaboration, updates, and advances on optimal patient care
- Advise and promote consistency and best practices
- Distribute and communicate pertinent information to other committees
- Oversee Trauma Workgroup
- Oversee STEMI Workgroup
- Oversee Stroke Workgroup
- Oversee Emergency Department Operations Workgroup
- Oversee Perinatal Workgroup

Section 6. Ad-hoc committees/workgroups shall be appointed, as needed, by the Chair of the Board of Directors.

Article X. Meetings

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548 **Section 1.** Meetings of the Board of Directors will be held quarterly. Notice of such
549 meetings shall be given to the General Membership not less than 30-days prior to
550 the meeting.

551
552 **Section 2.** Any Officer may call a special meeting of the Board of Directors. Upon written
553 notice of all Board of Directors members, the Chair or an Officer shall call a
554 meeting. Notice of special meetings shall be provided to the General Members at
555 least 7-days in advance.

556
557 **Section 3.** All meetings will be conducted according to Robert's Rules of Order.

558
559

560 **Article XII. Alternative Dispute Resolution**

561
562 Any actual entity, be that a provider or individual representing a provider, service or hospital that
563 is aggrieved in connection with any CATRAC rule(s) in accordance with its Bylaws, emergency
564 healthcare system plan, guidelines, or protocols; action(s) or any situation or circumstance
565 causing dissention or aggravation, may formally protest to the CATRAC.

566
567 **Section 1.** A formal protest must be written, with date and signature of protestor(s),
568 addressed and delivered to the Chief Executive Officer.

569
570 **Section 2.** Copies of the protest will be mailed or delivered by the Chief Executive Officer
571 upon receipt of the written protest for the purpose of establishing full disclosure
572 of the situation or circumstance, and for preparing for a formal hearing to address
573 such protest for resolution if deemed necessary. A formal protest must contain:

- 574
575 A. A specific and objective identification or statement of the aggravating situation or
576 circumstance that the protested action is alleged to have been or is in violation of.
577
578 B. A specific and objective description of each act alleged to have been violated or
579 aggravated the protestor(s).
580
581 C. The aggrieved party's argument(s) and authorities on support of the protest.
582
583 D. Describe the relief/decision to resolve the matter.

584
585 **Section 3.** The Chief Executive Officer shall have the authority to settle and resolve the
586 dispute to the Board of Directors or Committee with ample and appropriate
587 selection of all parties necessary to resolve the dispute.

588
589 **Section 4.** The Board of Directors or Committee may solicit written responses to the protest
590 from the interested parties. If the protest/dispute is not resolved by mutual
591 agreement, the Committee will issue a written determination of the protest,
592 within thirty (30) days of receipt of all the pertinent data.

- 593
594 A. If the Committee determines that no violation of rule(s) in accordance with its
595 Bylaws, emergency healthcare system plan, guidelines, or protocols; action(s) or
596 inactions(s), or any situation or circumstance causing dissention or aggravation has

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597 occurred, it shall so inform the protesting party or parties by letter, which sets forth
598 the reasons for the determination.
599

- 600 B. If the Committee determines that a violation of the rule(s) on accordance with its
601 bylaws, trauma system plan, guidelines, or protocols; action(s) or inaction(s), or any
602 situation or circumstance causing dissention or aggravation has occurred, it shall so
603 inform the protesting party or parties by letter, which sets forth the reasons for the
604 determination and the appropriate remedial action(s).
605

606 **Section 5.** An aggravated party or parties may appeal the determination by the Committee.
607 An appeal must be submitted to A party or parties may appeal the determination
608 by the group and ask for the issue to be brought before the Members for final
609 determination. The party or parties have no later than ten (10) working days after
610 the determination to submit the request for secondary review. The request must
611 be submitted to the following address or to such other address posted on the
612 Organization’s website:
613

Capital Area of Texas Regional Advisory Council
4100 Ed Bluestein Blvd
Suite 200
Austin, Texas 78721

614
615
616
617
618
619 **Section 6.** The appeal to the Members will be limited to the original determination. The
620 appeal must be mailed or delivered in a timely manner. I the event the appeal is
621 not timely in delivery, it will not be considered. If not considered, the parties will
622 be notified in writing.
623

624 **Article XIII. Other Provisions**

625
626 **Section 1. Staff**

627 **A. Executive Director / Chief Executive Officer** – The Board shall be responsible
628 for appointing a qualified individual to serve as the Chief Executive Officer of
629 the organization. The Chief Executive Officer shall serve at the will of the Board
630 and shall receive such compensation as may be fixed by the board from time to
631 time. The Chief Executive Officer shall be responsible for the general and active
632 management of the business and affairs of the organization and shall see that all
633 orders and resolutions of the Board of Directors and Executive Committee are
634 carried into effect. The Chief Executive Officer shall perform such other duties
635 and have such other authority and powers that are not expressly reserved to the
636 Board, Executive Committee, or other committee as necessary to fulfill the
637 purposes of the organization. The Executive Committee, acting through the
638 chairman, shall be responsible to perform the evaluation of the Chief Executive
639 Officer.
640

641 **B. Other Staff** - The Chief Executive Officer shall have the authority to appoint
642 staff members as necessary for the efficient operation of the organization and
643 may provide for temporary appointments to the staff if warranted by
644 circumstances, subject to the annual budget.
645

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Section 2. Miscellaneous

- 646
647
648 A. **Legal Authorities Governing Construction of Bylaws** - These bylaws will be
649 construed in accordance with the laws of the state of Texas. All references in the
650 bylaws to statutes, regulations, or other sources of legal authority shall refer to
651 the authorities cited, or their successors, as they may be amended from time to
652 time.
653
- 654 B. **No Cumulative Voting** - Cumulative voting is prohibited.
655
- 656 C. **Legal Construction** - If any provision of these bylaws is held to be invalid,
657 illegal, or unenforceable in any respect, the invalidity, illegality, or unenforceable
658 it shall not affect any other provision, and these bylaws shall be construed as if
659 the invalid, illegal, or unenforceable provision had not been included in these
660 bylaws. In the event of a conflict among the provisions of these bylaws, these
661 bylaws shall be interpreted in a manner that allows the organization to maintain
662 its status as a recognized Regional Advisory Council.
663
- 664 D. **Limitation of References** - All references to corporations, partnerships,
665 associations, organizations, entities, bodies politic, institutions, facilities, and the
666 like shall be to one representative designation by such person or entity, or two
667 one representative selected in accordance with these bylaws.
668
- 669 E. **Fiscal Year** - The fiscal year of the organization shall be the first day of January
670 and end on the last day of December of each year.
671
- 672 F. **Proxies** - Voting by proxy is prohibited
673
- 674 G. **Headings** - The headings and paragraph numbers used in these bylaws are used
675 for the convenience only and shall not be construed in constraining the terms of
676 the bylaws.
677
- 678 H. **Gender** - Whenever the context requires, all words in the bylaws in the male
679 gender shall be deemed to be include the female or neutral gender, all singular
680 word shall include the plural and all plural words shall include the singular.
681
- 682 I. **Seal**- the board may provide for a corporate seal.
683
- 684 J. **Power of Attorney** - The person may execute any instrument related to the
685 organization by means of a power of attorney if any original executed copy of the
686 power of attorney is provided to the secretary of the organization to be kept with
687 the official records.
688
- 689 K. **Parties Bound** - These bylaws shall be binding upon and then nearer to the
690 benefit of the organization, directors, officers, and members

Article XIV. Amendments

691
692
693 Proposed amendments and revisions must be submitted to the Executive Director for
694 consideration and recommendation to the Board of Directors. Copies of proposed amendments

**Capital Area of Texas Regional Advisory Council
(CATRAC) Bylaws**

695 shall be given to the Board of Directors in writing prior to the next quarterly meeting. The
 696 Bylaws may then be adopted, amended, or revised by an affirmative vote of two-thirds (2/3) of
 697 the members of the Voting Membership present at the next quarterly meeting designed for that
 698 purpose.
 699

700 The Bylaws and system plan shall be reviewed, amended, and/or revised annually.
 701

New:	Reviewed:	Revised:	Approved:	By:	Reference:
10-1993				General Membership	
		10-26-06		General Membership	
	10-2007			Bylaws Committee	
		01-24-08	01-24-08	General Membership	
	10-23-08	10-23-08		Bylaws Committee	
			10-23-08 with approved revisions pending	General Membership (GM)	
		10-27-08 per GM	10-23-08	Executive Director	
	03-01-09			Executive Director	
	07-22-10			Bylaws Committee	
		10-28-10	10-28-10	General Membership	Art.III Sec.1 A(2)
	June-October 2011	June-October 2011		Bylaws Committee	
	10-27-11		10-27-11	Board of Directors/General Membership	
	10-02-2012	10-02-2012		Bylaw Committee	
	1-24-2013		1-24-2013	Board of Directors/General Membership	
	9-9-2013	9-9-2013		Bylaws Committee	
			10-24-2013	Board of Directors/General Membership	
	September 2015			Executive Director & Board of Directors Members	
	9-21-2016	9-21-2016		Board of Directors	
			10-27-2016	Board of Directors/General Membership	
		10-26-2017	10-26-2017	Board of Directors/General Membership	
	11-29-18		11-29-18	Board of Directors/General Membership	
		10-31-19	10-31-19	Board of Directors/General Membership	GM meeting minutes
	10-22-2020		10-22-2020	General Membership	
	10-28-2021			General Membership	Entire Document

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