

NEUROCRITICAL CARE SOCIETY
POLICIES AND PROCEDURES

Table of Contents

Title	Number	Approved
Annual Meeting and Scientific Sessions	09-01	11/10/2009
Board of Directors	09-02	11/10/2009
Election of Officers	09-03	11/10/2009
Code of Ethics	09-04	11/10/2009
Non-payment of Dues	09-05	11/10/2009
Committees	09-06	11/10/2009
Use or sale of membership lists, logo, and endorsements of meetings of other groups.	09-07	11/10/2009
Liaisons for NCS to Other Organizations	09-08	11/10/2009
Liability Insurance	09-09	11/10/2009
Requests for survey of the membership with research intent	09-10	11/10/2009
Retaining Consultative or Legal Services	09-11	11/10/2009
The Neurocritical Care Journal	09-12	11/10/2009
Management Company	09-13	11/10/2009
NCS-sponsored Regional Course of Neurocritical Care	09-14	11/10/2009

This policies and procedures incorporates Policies and Procedures from: Minutes from Board of Directors:

11/13/09, 11/10/09, 4/29/09, 2/2/09, 10/22/08, 4/13/08, 10/31/07, 2/7/07, 2/17/06, 4/12/05, 2/24/05, 4/27/04 and Executive committees where noted.

11/10/2009

Policies and Procedures of The Neurocritical Care Society

Subject: **The Annual Meeting and Scientific Sessions**

Purpose: To create a template whereby the Annual meeting will be conducted.

1. Annual Meeting committee
 - 1.1. The committee chair is the Vice-President of the Society
 - 1.2. The meeting committee is comprised of at least 3 Board members and up to 10 members chosen by the committee chair and approved by the President.
 - 1.3. To maintain continuity, at least a quarter of the committee will have served from the previous year.
 - 1.4. Changes and additions are at the discretion of the committee chair.
2. Annual Meeting
 - 2.1. Will be held per Bylaws once a year in the Fall.
 - 2.2. The Annual meeting will be at least 2 full days
 - 2.3. A pre-session meeting may be held as decided that may be 1 day and no more than 2 days
 - 2.4. Meeting theme can be decided by the program committee and approved by the Executive Committee
 - 2.5. Will offer Continuing Medical Education
 - 2.6. Location and Dates of the meeting:
 - 2.6.1. The meeting locations will be determined at least 3 years in advance.
 - 2.6.2. The program meeting committee will determine options with the management company.
 - 2.6.3. The Board of Directors will make the final decision by majority vote.
 - 2.6.4. The Board has requested evaluating the possibility of a future meeting held in Europe with another society [2/09]
 - 2.7. Budget:
 - 2.7.1. Will be predetermined by the Finance Committee and Approved by the Board of Directors.
 - 2.7.2. As noted below and by BOD resolution April 2009, the speakers' travel and honoraria annual expenses will be capped at \$20,000 annually.
 - 2.8. Format of the meeting:
 - 2.8.1. The format of the meeting will be decided by the Annual meeting committee. Significant deviations from the current format should be discussed with the Board of Directors.

3. Invited Speakers

3.1. As the program is decided by the program committee, speakers will be invited by the program chair the template letter (Exhibit 1)

3.2. Speakers Reimbursement

3.2.1. Members: are not paid for travel or honoraria, but meeting registration fees are waived for the portion of the meeting in which they speak. [2/07]

3.2.2. Non-members:

3.2.2.1. Reimbursement

3.2.2.1.1. International speakers will cover airfare, hotel and honoraria. Registration fees will be waived.

3.2.2.1.2. US speakers: will cover airfare, hotel and honoraria. Registration fees will be waived.

4. Scientific Sessions

4.1. The Chair of the Scientific Sessions will be determined by the President

4.2. A call for abstracts will

4.2.1. Only original work will be accepted

4.2.2. A call for abstracts should be sent out earlier with no deadline extensions. (10/31/07)

5. Evaluations

5.1. Will be collected for CME purposes as well to help determine speakers and lectures for the following years

6. External Endorsements of the Annual Meeting:

6.1. The annual meeting committee will seek endorsements that do not cost money (10/31/2007)

11/10/2009

Rules and Regulations of the Neurocritical Care Society

Subject: **Board of Directors**

Purpose: To clarify the election process and duties of the Board of Directors.

1. Board of Directors: Definition as per the Bylaws Article III:
 - 1.1.1. The Society shall be managed by the Board of Directors. Each Director shall be at least 18 years of age.
 - 1.1.2. The Board of Directors shall consist of not less than seven nor more than 30 members. The number of directors to be determined from time to time by resolution of the Board of Directors or by action of the full members, provided that no decrease in the number of directors shall shorten the term of any incumbent director.
 - 1.1.1. At each Annual meeting of the members, directors shall be elected to hold office until the next Annual Meeting and until their successors have been elected and qualified.
 - 1.1.2. By resolution of the Board February, 2005, the Immediate Past President will serve on the Board of Directors.
2. Term of Directorship:
 - 2.1. The term of a director shall be four years.
3. Requirements of Office
 - 3.1. All directors must be full members in good standing of the society.
 - 3.2. Board members must attend at least 50% of meetings per calendar year [10/2007]. Attendance will be reviewed annually by the Executive Committee. Members who do not meet these requirements, will be removed as per majority vote by the Board [11/10/09]
 - 3.3. Upon election, directors should familiarize themselves with the American Bar Association handbook, "Guidebook for Directors of Non-Profit Corporations" This as well the Bylaws and Policies and Procedures will be provided by the society to all new Board members [11/10/09]
 - 3.4. Primary duties of a Member of the Board include: 1) Duty of Care: that includes attending meetings, exercising independent judgment, with legal responsibilities of directors and providing oversight of the organization . The second is 2) Duty of Loyalty that the first loyalty of directors in the room is the organization and all other business and institutional relations take secondary importance.
 - 3.5. A Conflict of Interest Form will be completed by each director at the beginning of each Calendar Year. [2/05] [2/07]

1. Process of Election for Members-At-Large

- 1.1. For the four years starting with the annual meeting in 2006, one-quarter of the positions on the board of directors will turn over each year.
- 1.2. Since the by-laws call for the election of all directors each year, we will present a pro-forma slate of the directors to be retained, to be voted up or down as a group.
- 1.3. For the ¼ or the directors to be chosen anew, the nominations committee will first solicit the membership by email for potential nominations of themselves or other members.
- 1.4. A primary election will be held with these individuals presented to the membership for vote.
- 1.5. The top vote-getters for the number of positions available will be chosen for the next ballot with an equal number of individuals chosen by the nomination committee to be placed on the ballot such that there will be a slate of twice as many candidates as open positions. The candidates chosen by the nominating committee do not necessarily need to have participated in the primary election. Letters of support may be provided.
- 1.6. The nominations committee will ensure that everyone on the list is willing to serve.
- 1.7. The candidates will be asked to present a platform or statement as to their qualifications and positions that will be distributed to the membership at the time or before the final vote.
- 1.8. A final email ballot will be distributed with the names of the candidates as an aggregate. Those receiving the most votes will become directors. In the event of a tie for the last position, the executive committee will vote among those tied by secret ballot.
- 1.9. Directors whose terms are expiring may stand for election.
- 1.10. No one shall serve more than three consecutive terms.

2. Process of Election for Nursing, Pharmacy and International [4/08]

- 2.1. The process of election will be similar to members at large. The membership will be solicited for candidates with backgrounds required by the dedicated seat. A primary vote will be held and the top vote-getter will be chosen for the ballot.
- 2.2. The nominating committee will chose a second candidate for the ballot.
- 2.3. The membership will vote as a separate election for the specific BOD at the same time as the member-at-large vote. The top vote-getter in this category will be elected.

3. Conduction of elections

- 3.1. All elections will be conducted by email in time for announcement of results at the annual meeting.
- 3.2. Provisions will be made for any member who does not have email. A web-based process will be utilized as soon as practical.

4. Board Meetings:

4.1. Frequency and Location

4.2. Board meetings will occur at the annual meeting of the Society and in conjunction with the meetings of other organizations as determined by the president. There will be at least four meetings per year.[11/10/09]

4.3. Conference calls or electronic meetings with email votes may also be held as determined by the president. Each of these will be considered a legitimate board meeting. For the purposes of conducting business, a majority of the board members will be considered a quorum.

5. Admixed meeting with teleconferencing: Attempts had been made to accommodate Board members who were unable to attend the meeting. It was determined that teleconferencing capabilities are technically suboptimal and disruptive and call-in capabilities will no longer be supported. [4/2009]

11/7/2009

Rules and Regulations of The Neurocritical Care Society

Subject: **Election of Officers**

Purpose: To clarify the roles and process of election and nomination of the Officers of the Society

1. Officers: As per the bylaws are elected by the Board of Directors at its Annual Meeting. The length of term is not delineated in the bylaws, but by Board of Directors.

1.1. Duration of Officer Terms and succession: (2004)

1.1.1. President: 2 year term in succession from the Vice Presidency

1.1.2. Vice President: 2 year term as nominated by the Nominating committee.

1.1.3. Treasurer: 2 year term as nominated by the Nominating committee.

1.1.4. Secretary: 2 year term as nominated by the Nominating committee.

1.1.4.1. The Secretary will be responsible for maintaining the Policies and Procedures manual following each Board meeting

1.1.4.2. The Secretary is responsible for maintaining a database of all members including specialties [10/08]

1.1.4.3. The Secretary will accept and approve applications for membership and determine the level of membership based on the criteria listed in Article III, section 1 of the Bylaws.

1.1.4.4. The Secretary shall serve as the liaison to the membership to determine appropriate areas for member involvement in working groups or committees of the society. The Secretary shall work with committee chairs and the NCS leadership to determine these roles and shall be chiefly responsible (or appropriately delegate) for communication with these members. (EC 11/18/2009)

1.1.4.5. The Secretary shall with the Executive Committee nominate individuals for Honorary membership in the society as delineated in the Bylaws and keep this list current:

1.1.4.5.1. Current list: Allan Ropper, Werner Hacke and Daniel Hanley

1.2. Requirements of office:

1.2.1. All nominees for officers will have served at least one full term on the Board of Directors (2004)

2. Composition of the **Nominating Committee** (also see Policy 09-04)

- 2.1.1. 2.1 The Chair of the nominating committee will be the Immediate Past president
- 2.1.2. 2.2 Committee members: as per bylaws require at least 3 board members and others as appointed by the Chair

3. Process:

- 3.1. Nominating Committee will propose a slate of officers to the Board for its approval at the board meeting prior to the annual meeting.
- 3.2. One candidate for each of the positions will be proposed
- 3.3. Except in exceptional circumstances, the President-elect will become President.
- 3.4. The slate of officers will be presented to the membership for comment, but its actual approval will be by vote of the Board of Directors.

11/10/2009

Policies and Procedures of The Neurocritical Care Society

Subject: **Code of Ethics**

Purpose: To outline a code of conduct and ethics for the Society

1. Conflict of Interest

- 1.1. Conflict of Interest forms will be updated annually at the beginning of each calendar year (January 1) [2/09] for:
 - 1.1.1. The Officers
 - 1.1.2. Executive Committee
 - 1.1.3. Board of Directors
 - 1.1.4. Fund-raising committee members [2/07]

2. Litigation and expert witnesses: The Board agreed that further discussion was needed re: testimony and evaluation of whether the testimony is given in good faith or financial gain. Other organizations have adopted criteria. It was resolved that a task force be created to adopt guidelines [10/08]

10/6/2009

Policies and Procedures of The Neurocritical Care Society

Subject: **Non-payment of dues.**

Purpose: To delineate the process and consequences of non-payment of society annual dues.

1. Procedure

- 1.1. In the event that a member does not pay dues, a monthly reminder letter will be sent for three months.
- 1.2. If the member does not pay the delinquent dues within three months, that person's membership will be terminated.
- 1.3. The member may petition the Executive Committee in extenuating circumstances.

4/1/2011

Policies and Procedures of The Neurocritical Care Society

Subject: **Membership Types**

Yearly membership dues are pro-rated beginning September 1st. Full year rates are as follows:

- Physician - \$250/year
- Healthcare Professional, Pharmacist, Physician Assistant, Nurse - \$150/year
- *Resident, Fellow, Student - \$100/year
- **Industry - \$250/year

*Residents, fellows, and students must submit verification from the Program Director.

**Member type does not include complimentary job postings on the NCS website.

11/10/2009

Policies and Procedures of The Neurocritical Care Society

Subject: **Committees**

Purpose: To support the mission of the Society, the Bylaws in Article IV support the designation of an Executive committee and other standing committees consisting of three or more directors by resolution adopted by the majority of the Board.

- 1.1. The President will annually evaluate the Committees and make recommendations to the Executive Committee and Board
- 1.2. New standing committees may be formed or dissolution of a committee may be carried out by majority vote of the Board
 - 1.2.1. Chairs: The chair of each committee will be nominated by the President of the Society and approved by the Directors of the Society with the exception of the Nominating Committee which is chaired by the Immediate Past-President, and the Annual Meeting Committee which is chaired by the Vice-President. Committee chairs shall serve a minimum term of two years, with no maximum limit
 - 1.2.2. Committee membership: Members of each standing committee will be appointed by the committee chairperson.
 - 1.2.3. Committee responsibilities:
 - 1.2.4. Each committee will keep a written record of all actions taken by it, copies of which shall be filed with the Secretary
 - 1.2.5. Each committee chair is responsible to provide a written update to the Board at each Annual meeting
2. Standing Committees:
 - 2.1 Executive Committee
 - 2.1.1 The Executive Committee shall consist of the President, President-elect, Treasurer, Secretary, Immediate Past-President and three other Board members chosen by the President and confirmed by the Board.
 - 2.1.2 The Executive committee shall have all the authority of the Board except for that set for the in the provisions of the Bylaws, article IV, Section 1.
 - 2.2. Finance Committee
 - 2.2.1 The Finance Committee shall consist of a chair and at least three Board [11/13/09] members, one of whom shall be the Treasurer, chosen by the Executive Committee and confirmed by the Board.
 - 2.2.2 Will evaluate the budget as proposed by the management company before presentation to the Board at the Annual Meeting

- 2.2.3 Will make recommendations regarding dues which will be approved by the Board
- 2.2.4 Will work with the Annual Meeting Committee to determine the meeting fees which can be approved by the Executive Committee
- 2.2.5 Will work with the fundraising committee to determine future fundraising priorities [2/05]
- 2.3. Nominating Committee
 - 2.3.1 The Nominating Committee shall consist of a chair who is the immediate past-president, 3 other members of the Board, and two society members not on the Board; all to be confirmed by the Board.
 - 2.3.2 No member of the Nominating Committee can stand for election while they are a member of the Nominating Committee
- 2.4. Annual Meeting Committee
 - 2.4.1 Purpose: will plan the annual NCS meeting by coordinating the scientific program, review course, and obtaining speakers for all programs. The committee will work with the Fundraising Committee in an effort to raise funds, which will support the annual meeting.
 - 2.4.2 The Annual Meeting Committee shall consist of the President-Elect (Chair of the committee), at least 3 members of the Board of Directors and four other members chosen by the President-Elect and confirmed by the Board.
 - 2.4.3 The Annual Meeting committee is also responsible for evaluating the cities and appropriate dates in the Fall for the annual meeting and presenting the options to the Board where it will be determined by majority vote by the Board at the Annual meeting. Location and dates shall be determined for no fewer than 3 years in advance.
- 2.5. Scientific Committee subcommittee of the Annual Meeting Committee
 - 2.5.1 The Scientific committee shall consist of a Chair, a co-chair who will assist with the Chair and will most likely progress to the Chair of the Scientific committee to maintain continuity and other members numbers as determined by the Chair. [11/10/09]
- 2.6 Fund-raising Committee
 - 2.6.1 Purpose: to promote excellence in patient care, education, research, multidisciplinary professional collaboration, and to foster the growth of our specialty by seeking support for the Annual Meeting from vendors.
 - 2.6.2 The Fund-raising Committee shall consist of a Chair, chosen by the President and three Board members and two other members of society. [11/13/09]
- 2.6 Accreditation Committee
 - 2.6.1 The purpose is to develop specific guidelines for fellowship and detailing necessary required skill sets. UCNS has assumed responsibility for fellowship program review and accreditation based on those guidelines.

- 2.6.2. The committee will review those skill sets and begin to plan any modifications and additions. The Committee has been charged with facilitating more uniform structure among fellowship programs specifically related to application and acceptance issues.
- 2.6.3. The committee will consist of 3 Board members, and an additional 3 members who will include fellowship program directors or program directors
- 2.6.4. Shall create a taskforce to assess whether joint fellowships with a single ACGME test shall be administered. [2/09]
- 2.7 Fellowship Match Subcommittee of the Accreditation Committee [4/2008]
 - 2.7.1 The committee will consist of a Chair who is program director appointed by the President and at least 2 other members of the Board. Fellows-in-training are eligible to be members of this committee. [11/10/09]
- 2.8 Certification Committee:
 - 2.8.1 Committee members shall consist of ten members that represent neurology, neurosurgery, anesthesia, internal medicine. The members are also approved by the Certification Council of the United Council of Neurological Subspecialties (UCNS) and serves as the writing committee for the UCNS Neurocritical Care Certification Examination.
 - 2.8.2 The UCNS requested that no changes or turnover in the committee be made in the initial few years due to continuity and training [10/2007]
 - 2.8.3 The committee works with the UCNS staff and its vendors who provide metric support for the test (currently, Measurement Research Associates, Inc of Chicago (MRA)). Utilizing the core curriculum, the committee writes test items for the examination using the test specifications as set by the UCNS and MRA.
 - 2.8.4 The committee also supplies to the UCNS supporting documentation and rationale for answers based on basic knowledge or current guidelines/literature support.
 - 2.8.5 The committee assists the UCNS to determine the norm or standards utilized to interpret tests. The committee amends and revises the test and the test items as determined by the performance of that item on the previous examination and as new knowledge is generalized in the literature and by published, established professional guidelines.
 - 2.8.6 The committee will evaluate other residency specialty training programs that include some in-folded training in critical care (e.g. neurosurgery and anesthesiology) and propose curricula for a one-year fellowship. This information will be proposed to the Board and if approved, the Society may petition the UCNS for a one year accredited fellowship for these individuals. The NCS will also petition that those who are able to demonstrate competency be allowed to sit for the UCNS certification examination [11/13/09]

- 2.9 Publications Committee
 - 2.9.1 Works directly with the Publisher in the development and maintenance of the Neurocritical Care journal
 - 2.9.2 The Publication Committee shall consist of a Chair, appointed by the President, the Editor-In-Chief of the journal and at least 3 Board members chosen by the Chair and other members at the discretion of the Chair and approval of the President.
 - 2.9.3 The publication committee with the Education committee shall explore the possibility of a Society endorsed textbook [2/09] [11/13/09]
- 2.10 Website/Newsletter Committee
 - 2.10.1 Purpose: will oversee and maintain the content of the NCS website.
 - 2.10.2 The Website/Newsletter Committee shall consist of a Chair who is appointed by the President and at least 3 Board members. [11/13/2009]
 - 2.10.3 The members of the committee will act as section editors of the website and add/revise content as they see appropriate and necessary. The committee is also responsible for the content of the NCS newsletter, which is distributed four times per year and is posted on the website.
- 2.11 Website Subcommittee: Interactive Services: Discussion Forum/Care Presentations/Protocols page
 - 2.11.1 The Board approved the use of the website for a discussion forum and to present protocols with the condition that liability issues are addressed by a legal consultant [2/09] and it undergo a 2 year trial period. (Note: Legal consultant as of 4/2009: Gray, Plant & Moody with counsel: Jennifer C.Debrow)
- 2.12 Nursing Committee: [10/07]
 - 2.12.1 Purpose: The committee will represent neurologic nursing perspective to the Neurocritical Care Society by participating in board and annual meetings
 - 2.12.2 The Nursing Committee shall consist of a chair, selected by the President, the Nursing representative Board member, 2 other Board members and other society members without limit. Each of the standing committees where appropriate will have a least one nursing representative.
- 2.13 International committee: [10/07]

- 2.13.1 Purpose: The mission of the International Committee is to help improve the care of neurocritically ill patients throughout the world by facilitating the development of individual country's neurocritical care organizations and forming formal ties to the Neurocritical Care Society. This endeavor includes medical education, organizational support and practice guidelines.
- 2.13.2 The chair will be appointed by the president and the committee will have an international representation.
- 2.13.3 The Board has resolved that the Society shall not support Visa applications for individuals [11/10/09].
- 2.14 Clinical Guidelines committee: [10/07]
 - 2.14.1 Purpose: to determine topics suitable for guideline development, identify key experts in the chosen topic, facilitate the development of 'best practice' clinical management guidelines, and review the final document. The committee will organize expert panels to address controversial issues as needed to direct the development of specialty appropriate clinical management guidelines. The committee will strive to obtain diversity among the identified topic experts to facilitate a thorough review of the available evidence. Guidelines produced through the efforts of this committee will be based on the best current medical evidence and expert opinions.
 - 2.14.2 The committee shall consist of a Chair appointed by the President and at least 3 members of the Board. Other members will be chosen by the chair.
 - 2.14.3 Subcommittees to evaluate topics will be chosen by the chair formed and approved by the President. Subcommittees should be multidisciplinary whenever possible.
 - 2.14.4 Guidelines and any final document will be approved by the Board by majority vote before publication.
 - 2.14.5 Decisions to endorse clinical guidelines from other organizations will be determined by the Board.
- 2.15 Clinical Trials/Research committee: [10/07]
 - 2.15.1 Purpose: The main goal is the development and implementation of clinical research network of neurocritical care units in North America to facilitate clinical research in the field. This is in line with the NIH roadmap effort to reengineer the clinical research enterprise (Zerhouni E. Medicine. The NIH Roadmap.Science 2003; 302:63-72). [2/07, 08]
 - 2.15.2 The Clinical Trials/Researchcommittee shall comprise of a Chair who is appointed by the President with at least 3 Board members and other members of the Society as selected by the chair with research experience and multidisciplinary background.

- 2.16 Advocacy committee [2/09]
 - 2.16.1 Purpose: To evaluate and recommend action to the Board and membership re: public policy initiatives
 - 2.16.2 The Advocacy Committee shall comprise of a Chair appointed by the President and at least 3 members of the Board and other members of the Society
 - 2.16.3 Advocacy issues that require policy statements by the Society will be approved first by the Executive Committee then the Board.
 - 2.16.4 The Advocacy committee will also investigate methods to improve mentorship for members-in-training [2/09]
- 2.17 Liaison committee: [2009]
 - 2.17.1 Purpose: to enhance the communication between societies and organizations that are involved in the care of the neurologically critically ill patients. Although previously proposed to be non-voting members of the BOD (4/2005), it was determined that a separate committee be formed
 - 2.17.2 The committee shall consist of the Chair who is the President, and the Executive Committee and liaisons as appointed from other professional organizations whose practitioners are involved in the critical care of neurologically ill patients: as of 11/2009, these organizations include:
 - 2.17.2.1 Society of Neuroscience in Anesthesiology and Critical Care,
 - 2.17.2.2 American Association of Neurological Surgeons and Congress of Neurological Surgeons from the Joint Sections of
 - 2.17.2.2.1 Neurotrauma & Critical Care,
 - 2.17.2.2.2 Cerebrovascular
 - 2.17.2.2.3 Pediatrics
 - 2.17.2.3 Society of Critical Care Medicine sections of
 - 2.17.2.3.1 Neurology
 - 2.17.2.3.2 Pediatrics
 - 2.17.2.3.3 Pharmacy
 - 2.17.2.3.4 Nursing
 - 2.17.2.4 Academy of Neurology section of Critical Care and Emergency Neurology
 - 2.17.2.5 American Academy of Emergency Medicine,
 - 2.17.2.6 American College of Physicians,
 - 2.17.2.7 American College of Chest Physicians,
 - 2.17.2.8 American Thoracic Society,

- 2.17.2.9 Society of Academic Emergency Medicine,
- 2.17.2.10 Society for Neurointerventional Surgery
- 2.17.2.11 Society of Vascular and Interventional Neurologists.
- 2.17.2.12 American Association of Critical Care Nurses
- 2.17.2.13 American Association of Neurological Nurses
- 2.17.2.14 Brain Attack Coalition
- 2.17.2.15 American Stroke Association
- 2.17.2.16 American Heart Association [11/10/2009]
- 2.17.2.17 National Stroke Association
- 2.17.2.18 National Neurotrauma Society

2.17.3 Meeting time: will be annually at the Annual Meeting

2.17.4 Agenda/Format: a round-table discussion with agenda items as per the President of the NCS and with adequate time for open agenda items as presented by the liaisons.

3. Ad-Hoc Committees- Ad-Hoc Committees will be constituted as needed by the President, announced to the Board by email, and confirmed by the Board at the next regular meeting as per the Bylaws.

11/10/2009

Policies and Procedures of The Neurocritical Care Society

Subject: Use or sale of membership lists, logo, and endorsements of meetings of other groups.

Purpose: Many requests are made to the Society requesting the use of the logo, and to endorse other meetings and to provide access to our membership. By Board resolution, the Executive Committee shall review all requests for membership lists, logo use or endorsement of a meeting to determine the appropriateness of the request as it pertains to the mission of the Society. [2004]

1. Logo:
 - 1.1. The use of the logo indicates a sign of endorsement by the NCS. The use of the logo will first be evaluated by the appropriate committee of the petitioner requesting the use of the logo and will be approved by the NCS Executive committee. (2/2/09)
2. Membership list/Mailing list:
 - 2.1. The board decided that mailing lists would not be provided.
 - 2.2. Requests to email material to members will be referred to the Executive committee, which will decide whether the material is appropriate. (2004)
 - 2.3. In general, requests from academic or non-profit groups would be emailed to the membership without charge. Material from for-profit groups would be sent for a \$500 charge. (2004)
3. Endorsement of other organizations' meetings
 - 3.1. The Board agreed that the Society should be as inclusive as possible as long as the meeting furthers the Society's mission and the program is of high quality. [2/07]
 - 3.2. The NCS will require from the course directors: topics, speakers and their sponsors, date and location, target audience (4/2005) (2/07)
 - 3.3. Endorsement is determined by the Executive Committee, with the understanding that its use would include a statement that an activity was endorsed by the society to distinguish it from those being sponsored by the society. (2004 & 2/2005)
 - 3.4. The Executive committee would set the fee, but in general \$500 seemed an appropriate amount. (2004); in lieu of the fee, the NCS should request one free registration and a booth at the meeting if applicable. [Exec 3/09]

11/10/2009

Policies and Procedures of The Neurocritical Care Society

Subject: Liaisons from NCS to other organizations

Purpose: Other organizations request liaisons of the NCS to their committees or organizations. Examples include the Joint Section of the AANS/CNS Neurotrauma & Critical Care, the consortium for Carotid Stenting, the writing committee for guidelines. A process needs to be formalized.

1. Process:
 - 1.1. The request should be directed to the President who after evaluating its merits will submit to the Executive committee. An appropriate individual as a liaison is identified and confirmed by majority vote of the Executive committee.
2. Reporting
 - 2.1. The liaison will update the Board annually as to the progress and need for continued association.
3. Updating a list:
 - 3.1. Through these policies and procedures as an addendum, as a new request is accepted, the secretary shall be responsible for updating a list of individuals.
 - 3.1.1. Brain Attack Coalition: Daryl Gress
 - 3.1.2. Carotid stenting facility accreditation program: Intersocietal Accreditation Commission for Carotid Stenting Facilities: John Terry, [2007] (with AAN, AANS, American College of Radiology, American Society of Neuroradiology, American Society of Neuroradiology, Society for Vascular Surgery, Society of Interventional Radiology and Society of Neurointerventional Surgery.) [Exec 6/13/08] [10/08] \$25,000 for initiation with plan for return on investment when adopted.
 - 3.1.3. Brain Death Writing Committee requested by AANS: Eelco Widjicks, Thomas Bleck, and David Greer [2008] (SCCM, CNS, etc.)
 - 3.1.4. Post-Cardiac Arrest with ACLS: Romer Geocadin, Michael Diringer [2008]
 - 3.1.5. INTCAR: David Seder [2009]
 - 3.1.6. Medical Director's Council of the Association of Organ Procurement Organizations: Michael Souter [2008]
 - 3.1.7. NIH Center for Scientific Review Volunteer Reviewers [2009] contact Diane Stassis and Toni Scarpa @earthlink.net and @csr.nih.gov

11/10/2009

Policies and Procedures of The Neurocritical Care Society

Subject: Liability Insurance

Purpose: To provide coverage for the Society [2/2006]

1. Process

- 1.1. The management company would research and solicit bids for coverage and present this to the Board

11/10/2009

Policies and Procedures of The Neurocritical Care Society

Subject: Requests for survey of the membership with research intent

Purpose: Multiple requests are received each year of surveys requested of the membership

Process: The Chairman of the Clinical Trials and Research Committee will evaluate the requests for validity and redundancy. If appropriate, the request will be evaluated by the research committee and if approved, final approval will be by the President [Exec and 4/30/08]

10/6/2009

Policies and Procedures of The Neurocritical Care Society

Subject: Retaining Consultative or Legal Services

Purpose: Various activities require outside consultants or legal counsel to evaluate the liability to the Society and discuss, suggest and provide strategies and the mechanism to reduce this liability. (e.g. journal evaluation of publishers, website guidance, copyright issues)

Procedure:

1. When an issue arises that may require legal counsel, the Executive committee will work with the Executive director of the NCS to identify an appropriate firm.
2. Costs of counsel/billing structure will be presented formally and approved by the Executive committee

NEW

11/6/2009

Policies and Procedures of The Neurocritical Care Society

Subject: The Neurocritical Care Journal

Purpose: **Neurocritical Care** is the official journal of the society. This policy is to help direct the goals of the journal and the relationship between the Society and the publisher of the journal.

1. All members **shall receive** the journal [4/2004]
2. The Society shall maintain a contract with the publisher.
3. The Publications Committee with the Editor-in-Chief evaluates the contract with the publisher and makes recommendations to the Board
 - 3.1. Evaluates the progress/growth and revenues of the journal and makes recommendations
 - 3.2. Evaluates the access of members to the journal
 - 3.3. Current situation and any changes of this is to be addressed with the Board (10/07)
 - 3.3.1. 10 year agreement with Humana-Springer
 - 3.3.2. 50/50 partnership
 - 3.3.3. Guaranteed minimum annual royalty and then a tiered royalty structure
 - 3.3.4. Increased editorial office budget support
 - 3.3.5. Publisher to hold a strategic planning meeting annually
 - 3.3.6. Publisher will publish abstracts at their expense
 - 3.3.7. Publisher will maintain the weblinks, e.g PubMed link[4/2008]
 - 3.3.8. Allows for growth in the number of pages and number of issues/year
 - 3.3.9. Five year review period within the 10-year contract to ensure success
4. Editor-in-Chief
 - 4.1. Shall be a 5-year term (10/07)
 - 4.2. Shall select the editorial board with changes as he deems necessary.
5. Participation in programs: shall be decided with the publisher and the Society. For example:
 - 5.1. HINARI is a Health InterNetwork Access to Research Initiative introduced by the United Nations and set up by WHO and major publishers that provides free or very low cost online access to major journals in biomedical and related social sciences to local, not-for-profit institutions in developing countries. The Neurocritical Care journal is part of this initiative.

10/6/2009

Policies and Procedures of The Neurocritical Care Society

Subject: **Management Company**

Purpose: To delineate the needs of the Society of a management company to help direct a contract between the Society and a management company.

1. To assist in the day to day running of the Society. Examples include but are not limited to with the respective committees and members:
 - 1.1. Managing membership
 - 1.2. Maintaining and updating the website
 - 1.3. Proposing an annual budget
 - 1.4. Annual meeting support: including: site-evaluation, preparation, management of the meeting, assisting with speaker arrangements, collating and distributing to Board the evaluation of the speakers and meeting
 - 1.5. Assist in obtaining CME credit for the annual meeting [4/2008] (Currently using Minnesota Medical Association)
 - 1.6. Retaining an auditor to keep with fiscal compliance with regard to the Sarbanes Oxley law [2/2007] (Currently retaining: Olsen Thielen & Co)

2. Process:
 - 2.1. The Board will annually evaluate and approve the number of hours budgeted
 - 2.2. The Executive Committee will annually evaluate the performance of the management company and make recommendations to the Board

11/7/09

Policies and Procedures of The Neurocritical Care Society

Subject: NCS-sponsored regional course of Neurocritical Care

Purpose: To support the mission of the Society, outreach or regional courses of neurocritical care will be developed. The two-fold purpose is improvement in patient care and also to support the financial health of the organization. [2/07]

Development: [Proposal to board for an education committee 11/09]