Policies and Procedures Manual

(Last Revised: June 2019)

**PURPOSE OF MANUAL**

THE NCS POLICIES AND PROCEDURES MANUAL HOUSES THE SOCIETY’S BEST PRACTICES, CORE BUSINESS PROCESS DESCRIPTIONS, METHODS AND STANDARDS FOR WHY AND HOW WORK IS PERFORMED. IT EXISTS TO ENSURE CONSISTENCY AND EFFICIENCY IN THE EXECUTION OF THE SOCIETY’S MISSION.
# TABLE OF CONTENTS

## SECTION I: STRUCTURE & PURPOSE ................................................................................................................................................................................................. 6

A. NCS Board Organizational Chart ................................................................................................................................................................................. 6

B. Mission, Vision, and Goals ............................................................................................................................................................................................ 8

C. NCS Professional Code of Conduct (Updated June 2, 2015) ............................................................................................................................................. 9

D. Leadership Code of Conduct ...................................................................................................................................................................................... 14

E. NCS Disciplinary Policy ............................................................................................................................................................................................ 16

## SECTION II: MEMBERSHIP ................................................................................................................................................................................................. 22

A. Membership Types ........................................................................................................................................................................................................ 22

B. Dues and Renewal .................................................................................................................................................................................................. 23

C. The Process for Soliciting Membership Renewals ............................................................................................................................................ 24

D. FNCS Credential ...................................................................................................................................................................................................... 25

E. Global Partners ............................................................................................................................................................................................................ 26

F. Honorary Membership and Lifetime Achievement Awards Process .................................................................................................................... 27

G. Meeting Endorsements .................................................................................................................................................................................................. 29

H. Past Presidents at Board Meetings ................................................................................................................................................................. 30

## SECTION III: BOARD OF DIRECTORS .............................................................................................................................................................................. 31

A. Definition as per the Bylaws Article III ........................................................................................................................................................................ 31

B. Term of Directorship .................................................................................................................................................................................................. 32

C. Performance Expectations/Requirements of Office .................................................................................................................................................. 33

D. NCS BOD Nomination Process/Election and Timeline ........................................................................................................................................... 35

E. Board Positions and Descriptions ............................................................................................................................................................................... 42

## SECTION IV: COMMITTEES, SECTIONS, TASK FORCES, EDITORIAL BOARD ........................................................................................................ 47

A. Committees ...................................................................................................................................................................................................................... 47

B. Sections ....................................................................................................................................................................................................................... 63

C. Task Forces ............................................................................................................................................................................................................ 66

## SECTION V: FINANCE ..................................................................................................................................................................................................... 67

A. Finance Committee ................................................................................................................................................................................................... 67

B. Budget, Financial and Monitoring System Policies ........................................................................................................................................... 68

C. Financial Reserve Policy .................................................................................................................................................................................................. 69

D. Investment Policy ...................................................................................................................................................................................................... 70

E. Investment Changes .................................................................................................................................................................................................... 73

F. General Reimbursement Policy Statement ......................................................................................................................................................... 74
G. Annual Meeting Invited Speaker, Guests, Planning Reimbursement Policy ........................................... 76
H. Board of Director Reimbursement Policy ............................................................................................... 78
I. Director/Officers Insurance/Conference Cancellation Policy ................................................................. 80
J. Management Company: Needs and Contract Review ........................................................................... 81
K. Whistleblower Policy ............................................................................................................................ 82

SECTION VI: THE NEUROCRITICAL CARE JOURNAL .................................................................................. 83

SECTION VII: ANNUAL MEETING .............................................................................................................. 84
A. General Policies and Procedures ........................................................................................................ 84
B. Sessions/Format: Scientific, Leadership Development, Workshops, and General Sessions including Keynote .......... 87
C. Joint Sessions with other organizations ............................................................................................... 88
D. Awards Ceremony ................................................................................................................................ 89
E. Fundraising social events (Fun Run, Golf, Soccer, etc.) ...................................................................... 90
F. Specialty Focus Corners ....................................................................................................................... 91
G. Access for Disabled Persons at the Annual Meeting ........................................................................... 92

SECTION VIII: NCS WEBSITE/SOCIAL MEDIA AND EMAIL BLAST .......................................................... 93
A. NCS Website .......................................................................................................................................... 93
B. Social Media Best Practices and Guidelines ....................................................................................... 94
C. NCS Email Blast/SPAM Policy ........................................................................................................... 97

SECTION IX: EXTERNAL RELATIONS- AMBASSADORS FOR NCS TO OTHER ORGANIZATIONS and BOARD REPRESENTATIVES ..... 98
A. Purpose – External Ambassadors ....................................................................................................... 98
B. Definitions ............................................................................................................................................ 99
C. Process ................................................................................................................................................ 100
D. Reporting ............................................................................................................................................ 100
E. Maintaining a current list .................................................................................................................... 101
F. Endorsements of meetings of other groups ....................................................................................... 104
G. NCS-Sponsored Regional Course of NCS ......................................................................................... 105

SECTION X: REGIONALS CHAPTERS ....................................................................................................... 106
A. Middle East/Africa Chapter (Established 2018) ............................................................................... 106
B. Asia/Oceanian Chapter (Established 2017) ........................................................................................... 109
C. North/Central America Chapter (Established 2019) .......................................................................... 112
D. South American Chapter (Established 2017) ..................................................................................... 114

SECTION XI: EDUCATION PRODUCT DEVELOPMENT ........................................................................... 116
A. Educational Product Development Approval Process ......................................................................... 116
SECTION I: STRUCTURE & PURPOSE

A. NCS Board Organizational Chart

Board of Directors

President*
Jose l. Suarez, MD, FNCS

Vice President*
Mary Kay Bader, RN, MSN, CCNS, FNCS, FAHA
(Annual Meeting)

Treasurer*
Wade Smith, MD, PhD, FNCS
(Finance)

Secretary*
Panos Varelas, MD, PhD, FNCS
(Membership)

Immediate Past President*
Gretchen Brophy, PharmD, BCPS, FCCP, FCCM, FNCS
(Nominated)

Board Members at Large
Yasser Abulhasan, MBchB, FRCPC
Jordan Bonomo, MD
Julian Bösel, MD, FNCS
Marion Buckwalter, MD, PhD
W. David Freeman, MD, FNCS
Theresa Human, PharmD, PhD, BCPS, FNCS
David Hwang, MD, FAAN, FCCM, FNCS
Sayona John, MD, FNCS, FAAN
Narissa Ko, MD, FNCS
Sang-Bae Ko, MD, PhD
Pedro Kurtz, MD, PhD
John Lewin III, MBA, PharmD, FNCS*
Sarah Livesay, CNS, NP, RN*
Chad Miller, MD, FNCS
Paul Nyquist, MD, MPH*
Kristine O’Phelan, MD
Soojin Park, MD, FNCS
Gisele Sampalo Silva, MD, MPH, PhD
Susan Yeager, NP, RN, MS, CCRN, ACNP, FNCS

Past Presidents (Ex-Officios)
Thomas P. Bleck, MD, FNCS
Cherylee Chang, MD, FNCS
Michael Diringer, MD
Romer Geocadin, MD, FNCS
J. Claude Hemphill III, MD, FNCS
Ed Manno, MD, FNCS
Stephan Mayer, MD
Gene Sung, MD
Michel Torbey, MD, MPH, FAHA, FCCM, FNCS

*Denotes Executive Committee Member
NCS Leadership

NCS MEMBERS

Board of Directors

NCS Officers & Executive Committee

Sections
1. Advanced Practice Providers*
2. Ethics
3. Fellowship Directors
4. Global Members
5. NCS Members
6. Non-Neurologists
7. Nurses*
8. Pediatric Neurocritical Care
9. Pharmacists
10. Physicians
11. Trainees
12. Women in Neurocritical Care*

Committees
1. Advocacy
2. Annual Meeting
3. Development
4. Educational Products
5. ENLS Certification Subcommittee
6. ENLS
7. ENLS Protocols Subcommittee
8. Ethics
9. Executive Committee
10. Fellowship Directors Section Leadership
11. FNCS
12. Global Section Leadership
13. Guidelines
14. Marketing & Communications
15. Membership
16. Nominating
17. PONS Subcommittee
18. Quality
19. Research Operations Subcommittee
20. Translational Science Subcommittee

Global Partners
1. Brain R.E.S.C.U.E., Philippines
2. Canadian Neurocritical Care Society
3. Colegio Mexicano de Medicina Critica A.C.
4. College of Intensive Care Medicine of Australia and New Zealand
5. Colombian Association of Intensive and Critical Care Medicine
6. German Society for Neurointensive and Emergency Medicine
7. Guatemalan Chapter of Neurocritical Care Society
8. Indian Society of Critical Care Medicine
9. Indian Society of Neuroanaesthesiology and Critical Care
10. International Pan Arab Critical Care Medicine Society
11. Korean Neurocritical Care Society
12. Nepalese Society of Critical Care Medicine
13. Neurocritical Care Committe of the Chinese Society of Neurology, Neurocritical Care Committe of China Neurologist Association
14. Neurointensive Care Brazilian Association
15. Panama Chapter of the Caribbean and Centroamerican Soieties of Critical Care
16. Philippine Neurocritical Care Society
17. Sociedad Argentina de Terapia Intensiva
18. Sociedad Chilena de Medicina Intensiva
19. Society of Intensive Care Medicine Singapore
20. Society of Neurocritical Care
21. Swedish Acute Neurology Society
22. The Japan Society of Neurological Emergencies and Critical Care
B. Mission, Vision, and Goals

1. Preamble: The medical profession has long subscribed to a body of ethical statements developed primarily for the benefit of the patient. As a member of this profession, neurocritical care personnel must recognize responsibility to patients first and foremost, as well as to society, to other health professionals, and to self. The following Principles adopted by the Neurocritical Care Society are not laws, but standards of conduct which define the essentials of honorable behavior for our members. As members, all are expected to exhibit the highest standards of honesty and integrity.

2. Mission Statement: The NCS is a multidisciplinary, international organization whose mission is to improve outcomes for patients with life-threatening neurological illnesses.

3. Our mission is to promote:
   i. **Quality Patient Care** by identifying and implementing best medical practices for acute neurological disorders that are consistent with current scientific knowledge, and that promote compassionate care and respect for patient-centered values.
   ii. **Professional Collaboration** by providing a forum for communication, collaboration, and exchange of ideas between physicians and allied health-care professionals within different specialties who care for critically-ill neurological patients.
   iii. **Research** by fostering clinical, experimental, and outcomes research focused on developing innovative and cost-effective medical and surgical interventions for acute neurological disorders.
   iv. **Training and Education** by developing standards for advanced fellowship training, program accreditation, and physician certification in the subspecialty of neurological intensive care.
   v. **Advocacy** by making the case to patients, the public, policy makers and other healthcare professionals that complex, life-threatening neurological diseases are best cared for by a multidisciplinary team with special expertise in neurocritical care.

4. The vision of the NCS is to provide and advocate for the highest quality of care for patients with critical neurological illness throughout the world.
C. NCS Professional Code of Conduct (Updated June 2, 2015)

1. **GENERAL STATEMENT OF PURPOSE**

   The Code of Professional Conduct (COPC) of the Neurocritical Care Society (NCS) is a guideline for ethical behavior for professionals practicing the subspecialty of Neurocritical Care and for the performance of duties and activities associated with the NCS. The primary goal of this document is to promote the highest quality of Neurocritical Care framed by traditional and modern ethical standards and to reinforce the importance of professionalism in interpersonal behavior expected of all NCS members.

   The COPC may be used to evaluate qualifications for NCS membership, as well as to evaluate member’s maintenance of good professional standing. Violations of these provisions may serve as the basis for action as provided by the Disciplinary Policy of the NCS. The need to have a member’s behavior evaluated should depend on the egregiousness of a violation and must follow a due process as outlined in the Disciplinary Policy.

   NCS is not a regulatory body nor does it adjudicate legal claims brought by patients, families, or any person. The COPC is not appropriate for third parties seeking redress for alleged malpractice. Such matters should be addressed through the civil court system, just as licensing matters should be addressed by the appropriate licensing agency. Finally, if any provision of the COPC conflicts with applicable local, state or federal laws, those laws will supersede the tenants of this document. The COPC does not define or establish a community standard. The COPC is not intended, nor should it be used, to support a cause of action, create a presumption of a breach of legal duty, or form a basis for civil liability.

2. **PERSONAL BEHAVIOR**

   Members shall be dedicated to achieving the standard of care within the purview of their skill set and will not engage in activities that are inconsistent with a balanced approach to accepted ethical principles\(^1\), especially any activity that may not be in the best interest of their patient. Members of the NCS shall restrict their practice to what they are competent to deliver based on training, experience, and reasonably attempt to practice evidence-based medicine. Members shall be involved in continuing education activities in order to keep current with new technology and scholarship in neurocritical care. Additionally, they should pursue, obtain and maintain formal credentialing relevant to their area of practice.

   Members shall only provide care if they are in a state of physical and mental well-being such that they would not be considered impaired by their local health care employer. This includes, but is not limited to, the abuse of alcohol or other substances. Should this occur, he or she should participate in appropriate treatment and should accept the recommendations of his or her institution’s process for evaluating impaired professionals.

---

\(^1\) Autonomy, beneficence, nonmaleficence, and justice (Beauchamp TL, Childress JF. Principles of Biomedical Ethics. New York: Oxford University Press; 2009)
If a member has concerns about the professional competence of a colleague, he or she is encouraged to raise such concerns with the individual. All members are also expected to follow the reporting requirements of their state’s or local jurisdiction’s professional practice standards. Members should observe applicable jurisdictional laws including cooperating with lawful requests from local, state, or federal agencies; insurance companies; and other government agencies within the constraints of patient privacy and confidentiality. Members should conduct their duties and maintain professional conduct regardless of a patient’s or colleague’s gender, race, ethnicity, religion, nationality, or sexual orientation.

3. THE PROVIDER-PATIENT RELATIONSHIP

The provider-patient relationship forms the foundation of the practice of Neurocritical Care. This is a fiduciary relationship, and as such, the provider must take upon themselves the medical concerns of the patient as if they were their own. The patient entrusts their well-being to the provider and consequently he or she has an obligation to endeavor to be worthy of that trust. This includes the obligation to obtain the uncoerced informed consent of the patient or their appropriate surrogate decision maker to support the right of self-determination in health care (autonomy). Knowledge or authority gained during a patient interaction may not be used for the benefit of the provider if it is also to the detriment of the patient.

If a provider and patient (or their surrogate) cannot agree on an appropriate course of action, the local institution’s policy on resolution of potentially inappropriate care should be followed and care should be continued until a consensus has been reached. If a transfer of a patient is requested or required, the provider shall continue to provide care to the patient until another provider has taken responsibility.

Appropriate communication with the patient, their family, and consultation with colleagues is expected from members of NCS. If a medical issue requires the expertise of another provider, the assistance will be pursued as appropriate. In case of an unanticipated resource crisis, care should be provided based on immediacy of need. Members ought to do their utmost to ensure dignity in dying including providing relief of pain and suffering.

4. RELATIONSHIPS WITH OTHER MEMBERS

Members shall respect all other members as equal colleagues regardless of their background or achievements. This includes accepting the validity of different opinions and the commitment to growing through active listening and consensus building. When we disagree it should be our arguments that conflict and not our personalities. Ad hominum attacks will not be permitted. Perpetuating rumors that have no foundation is unworthy of a member of the NCS.

Sexual harassment is unacceptable. Unwelcome sexual advances, requests for sexual favors and other verbal or physical conduct of a sexual nature may create an intimidating, hostile or abusive environment that is antithetical to the vision and mission of NCS. This includes behavior that may occur in the context of an official NCS function or at other 3 times. Examples might include sexual pranks, jokes or innuendo whether in person or via e-mail (especially when this may involve a senior member or have active or potential formal or
informal mentor-mentee relationship). Intoxication which raises the risk of sexual harassment is to be avoided. Should a member have the opportunity to constructively work with colleagues to help avoid or defuse interactions that might constitute sexual harassment, each member is encouraged to do so.

NCS strives to provide mentor-mentee relationships as part of its educational mission. These relationships must be treated with respect and solemnity. Explicit agreements between mentors and mentees are encouraged. A mentor should not ever exploit the work or talent of a mentee nor represent a mentee’s work as his or her own.

Members are encouraged to participate in peer-review activities to promote the best care for their patients. Members should not unjustifiably criticize a colleague’s judgment, training, knowledge, or skills; however, members should not knowingly ignore a colleague’s incompetence or professional misconduct. To this end, members shall be responsible for helping their colleagues maintain a high level of performance and integrity in their delivery of health care.

5. **EXPERT TESTIMONY**

In keeping with established standards of expert testimony, a member called upon to provide expert medical testimony should testify only about those subjects of which the member is qualified as an expert.\(^2\) Before providing testimony, the member should carefully review the relevant records and facts of the case, as well as the prevailing standards of practice as available in applicable and/or local guidelines. In providing testimony, the member should provide scientifically correct and clinically accurate opinions, and the testimony shall be consistent with standards of care within the field of neurocritical care. A member shall not represent their personal opinion as reflective of the position of the NCS when this opinion differs from position statements of the NCS. Members shall cooperate with members of the legal profession in order that justice with mercy and compassion shall prevail in accordance with the law. Members should recuse themselves from cases in which they feel an ethical or moral conflict of interest or if it is found that they are not the appropriate expert in a given case, even if this realization occurs during the course of the case when not initially apparent. Compensation for testimony should be reasonable and commensurate with the time and effort spent and must not be contingent upon outcome. In the event that members of the NCS serve as experts on opposing sides of legal action, every attempt to ensure that there are no personal conflicts of interest should be undertaken and members are encouraged to reach out to the board of the society if advice is required.

6. **RELATIONSHIPS WITH INDUSTRY AND OTHER CONFLICTS OF INTEREST**

Collaboration between healthcare professionals and the pharmaceutical and biotechnology industry can help develop Neuro Critical Care education and scientific knowledge. Multiple motivations are present in these relationships; therefore, a clear policy is needed to ensure ethically appropriate behavior. In addition to conflicts of interest that affect professional practice outside of NCS, a conflict of interest may exist whenever

\(^2\) (Sanders J. Expert Witness Ethics. Fordham L Rev. 2007;76(3):1539. 4)
a member is in a position to directly or indirectly benefit himself or herself, a family member(s), other individuals, or another organization with which the individual is affiliated through the use of their role in the NCS. To this effect, members who are not company employees shall refrain from publicly endorsing a company’s products or services if they may be construed as representing the opinion of the NCS.

Members should not represent themselves to the public in an untruthful, misleading, or deceptive manner. Members who make written or oral public statements concerning a company’s product from which they receive compensation or support or in which they hold a significant equity position have a duty to disclose their financial relationship with the company in that public setting. In all professional settings in which an appropriate request is made to the member to disclose conflicts of interests, all actual or potential conflicts of interest shall be disclosed, whether they are financial or otherwise and whether or not they are deemed by the member to be relevant to that interaction.

The NCS requires that all personnel involved in relevant society activity will disclose any and all potential conflicts of interest. The BOD may also choose to not appoint an individual as a member of a committee or subcommittee if a significant conflict exists relevant to that group’s function. The relationships that will be assessed include: having stock or stock ownership, compensation for expert testimony, being a pioneer or having any direct or indirect compensation or financial support. If an individual refuses or otherwise fails to disclose conflicts of interest, he or she may be recused from the participation in activities within the NCS.

The Ethics Committee may act in an oversight manner to help determine whether a conflict exists, resolve conflicts of interest, or organize its own subcommittee to review and resolve conflicts of interest that arise and are not resolvable at the committee level. The NCS President may assign additional members to such a subcommittee that do not have any relationship with the potential source of the conflict of interest.

Every member has a duty to report to the NCS BOD or the Ethics Committee if they suspect unresolved violations of conflict of interest on the committee on which he or she serves. This conflict of interest policy is intended to encourage and enable members to raise concerns related to conflict of interest within the organization for investigation and appropriate action. With that goal in mind, no member who in good faith reports a concern shall be subject to retaliation and anyone believed doing so is subject to corrective action per the Disciplinary Policy. A conflict of interest may also arise whenever a covered member’s activities are in opposition to, detract from, or in some manner might become detrimental to the purposes of the NCS as described in its articles of incorporation, bylaws, mission statement, or policies and/or procedures.

7. ETHICS OF RESEARCH

Members engaged in research must abide by the Federal Code of Regulations for the Protection of Human Research Subjects. Members must obtain appropriate approval for their research protocol through the local Institutional Review Board (IRB) or another comparable body and must comply with their oversight. Members conducting research on behalf of sponsoring entities and who receive payment for enrolling or treating subjects in a clinical research project should inform the subject of any compensation received or to be received for the subject’s participation.
8. ETHICS OF SCHOLARLY PRODUCTION

Members should publish research results truthfully, completely, and without distortion, including studies resulting in negative or unexpected findings. In reporting research results to the news media, members should make statements that are clear, understandable, and supportable by the facts. Members should disclose if results of research are being released before appropriate peer review. Members should claim authorship as defined by standard published and accepted guidelines. Scholarly work includes, but is not limited to, work that presents research findings or carries recommendations for diagnosis, treatment, or prevention of medical conditions. In addition, the NCS encourages the members to participate in the creation and development of creative and useful works in connection with their service to the NCS. Scholarly work produced to represent the consensus opinion or on behalf of the NCS shall be owned by the NCS.

9. INCOME AND REIMBURSEMENT DURING THE PRACTICE OF NEUROCRITICAL CARE

A member shall only receive compensation for services he or she actually delivers or directly supervises. Division of income among members of an organized group of members, based on the value of the services performed by each member, as determined by group members, is appropriate. Members shall be honest in financial dealings with patients, insurance agencies, and health care financing agencies and shall provide accurate, complete, and timely information to those agencies. Members shall respond appropriately to requests for medical reports from private and governmental agencies involved in reimbursement and compensation for medically related services with the consent of the patient or the patient’s agent or as otherwise provided by the law. Note: Portions of this Code were modified or adapted from the following codes of professional ethics and professional conduct:

- American Academy of Neurology
- American Academy of Neurological Surgeons
- American College of Physicians
- American Medical Association
- Society of Critical Care Medicine
- Council of Medical Specialty Societies

Revised in July 2, 2015: Contributors: Michael Rubin, MD, MA; Jordan Bonomo, MD; Barak Bar, MD; Edward Collins, NP; Salvador Cruz-Flores, MD; Rachel Garvin, MD; Scott Glickman, PhD, DO, MPH; Jonah Grossman, MD; Galen Henderson, MD; Tom Lawson, NP, NCC; Dea Mahanes, CCNS, CCRN, CNRN, RN, MSN; Jessica McFarlin, MD; Sarah Monchar, PA; Harry Peled, MD, FACC; James Szalados, MD, JD, MBA.

Original Authors (2013): Fred Rincon, MD, MSc, MBE; Eliahu Feen, MD; Ed Manno, MD; David Greer, MD; Michael Rubin, MD; Ludo Vanopdenbosch, MD; James Riviello, MD; Owen Samuels, MD; Edna Costa-Freitas, MD; Eric Bershad, MD; Kevin Sheth, MD; Ann Helms, MD; William Kofke, MD; Jordan Bonomo, MD; Kathryn Beauchamp, MD
D. Leadership Code of Conduct

All NCS Officers, Board Directors, Committee Chairs and members agree to abide by the NCS Leadership Code of Conduct and are expected to sign the Leadership Code of Conduct form on an annual basis. Violations of the Leadership Code of Conduct (LCOC) may warrant evaluation per the Disciplinary Code depending on the egregiousness of the action.

1. Virtues of Leadership
   
   i. My role as a leader is not a right that I have earned, but a privilege bestowed by my colleagues to allow me to serve them and our mission. I am the servant of the NCS members, not their master. I pledge to advocate for the welfare of our Society and its members.
   
   ii. I will lead by example knowing that the Society’s staff and other volunteers will be affected by the culture I help create. I pledge to always be an example of dedication, integrity, professionalism, and frugality for staff and other volunteers.
   
   iii. In order to fulfill my fiduciary responsibility to the membership, I must be fully knowledgeable about the Society. I pledge that I will read and understand the bylaws, policies, financial reports, committee reports, meeting agendas and supporting documents pertaining to my role in the NCS leadership. I will devote the time necessary to contribute to meetings and conference calls.
   
   iv. I understand that it is a violation of my fiduciary responsibility to the membership to appropriate to myself opportunities that rightfully belong to the Society as a whole or to other members of the Society.
   
   v. In performing my responsibilities for NCS and in all NCS activities in which I participate, I shall conduct myself in such a manner that brings respect and honor to our Society. I pledge I will be an enthusiastic advocate, cheerleader and booster of the NCS.
   
   vi. Much of the success of the NCS will depend on group dynamics. As such, I shall welcome diverse points of view and feel free to disagree without being disagreeable. I will discuss issues, not personalities and I will avoid ad hominem attacks on my colleagues.
   
   vii. I understand that a leadership position is my opportunity to make a lasting contribution to my Society, to the Neurocritical care community it represents and to the membership. I pledge that I will work to leave the Society better, stronger and more fiscally sound that I found it at the start of my service.
   
   viii. I will avoid interactions with other members or NCS guests that might constitute sexual harassment and will use my leadership position to promote equanimity and collegiality among NCS members, guest and colleagues.

2. Conflict of Interest
   
   i. I agree to annually disclose in writing any potential or actual conflict of interest or any financial relationship exceeding $500 to the Secretary of the Society.
ii. In the event a Leader’s NCS duties come into conflict with such interests, they must so declare to the Committee or other body on which they are serving and recuse themselves from voting on the relevant matter.

iii. I understand that the President and the Chair of the NCS Ethics Committee will jointly review all disclosures of potential and actual conflicts of interest at the annual meeting. If in their view a Leader has not adequately recused themselves voluntarily from a situation in which there is a conflict of interest, they will first bring it to the attention of the Leader and if still unresolved will follow the process described in the Disciplinary Policy.

3. Self-Reporting
   i. I agree to self-report any significant sanction or violation of law to the President that they believe may violate the Code of Professional Conduct or the Leadership Code of Conduct.
   ii. I understand that voluntary self-reporting will be taken into account if the Disciplinary Policy is activated.

4. Board Members and Officers Only
   i. I have a fiduciary responsibility to the membership to oversee the finances of the NCS. I pledge that I will make myself aware of Society non-profit accounting principles, read and understand the Society’s financial reports, and obtain any information I need from the staff to fulfill this obligation.
   ii. I understand that funds contributed to NCS through the dues of members and by other donors shall be used to further the mission of NCS, and not for personal benefit of the members of the Board. I understand that the expenditure of funds on luxuries for Board Members for travel, meals, accommodations, gifts and other special perks is not permitted.
   iii. Meetings of the BOD shall presume transparency and full disclosure; however, there may be issues discussed at Board meetings, which could be damaging to individuals or the Society if publicly disclosed. These items will be discussed in a confidential executive session. If clarification is required, I will seek the counsel of the President or other BOD member; alternatively, I will seek the confidential advice of the Chairs of the NCS Ethics Committee regarding the ethics of disclosure.
   iv. I understand that antitrust violations could cause great harm to the Society and to individual Board members. I pledge that I will not participate in any action, meeting or discussion that I believe could, or have been advised by staff or Society counsel give the appearance of being a potential anti-trust violation.
   v. It is the Board’s responsibility to set the strategic direction for the NCS, to establish policies relating to ends, means and executive limits, to allocate resources and monitor financial performance, and to hire and oversee the chief staff executive. I pledge I will devote myself to helping the Board fulfill these strategic responsibilities.

Contributors: Michael Rubin, MD, MA; Jordan Bonomo, MD; Barak Bar, MD; Edward Collins, NP; Salvador CruzFlores, MD; Rachel Garvin, MD; Scott Glickman, PhD, DO, MPH; Jonah Grossman, MD; Galen Henderson, MD; Tom Lawson, NP, NCC; Dea
E. NCS Disciplinary Policy

This policy and membership actions taken pursuant to it are binding upon the NCS (NCS) and its members and applicants pursuant to NCS Bylaws, Article II, Section 7(c).

**INTENT OF POLICY:** This disciplinary policy is intended to provide a means of enforcing the standards of professional conduct that are expected of members of the NCS. Use of this policy must be done with an extreme amount of caution and generally only when other attempts to help reform the behavior of members of the NCS have failed. Use of this policy for minor infractions will not be tolerated and will be protected against by the multiple stakeholders involved in the process before a final action can be taken.

1. **GROUNDS FOR DISCIPLINARY ACTION**
   Members of and applicants to the NCS shall be subject to disciplinary action as set forth in this Policy on any of the following grounds: A. Violation of the NCS Articles of Incorporation or Bylaws; B. Willful falsification of information supplied to the Society for election to membership; C. Professional or personal misconduct that has the potential for negative impact on the NCS as delineated in the Code of Professional Conduct and the Leadership Code of Conduct; D. Conviction of, or entering a plea of guilty or no contest to, a felony or with respect to any crime involving the practice of medicine, nursing, pharmacy or allied health care; E. Failure to cooperate with this disciplinary process.

2. **INITIATION OF DISCIPLINARY ACTION**
   Secretary of the Investigation. Any person may provide information to the NCS about the professional or personal conduct, performance or competence of any of its members. While all claims are subject to close scrutiny by the President, anonymous claims will be handled with due prejudice. All matters which may constitute grounds for disciplinary action shall be referred to an ad hoc investigation committee appointed by the President comprised of 5 impartial NCS members, including a member identified as the Secretary of the Investigation. Each matter that is preliminarily substantiated through information obtained by the ad hoc investigation committee shall be subject to further full course investigation. If the Vice President is informed of information that may constitute grounds for disciplinary action in regards to the President, then he/she shall create the ad hoc committee.

Investigation. Promptly upon preliminary substantiation, the ad hoc investigation committee shall conduct an initial investigation. The member against whom a claim has been made shall be formally notified, with proof of receipt of notice, that an investigation is being conducted. The member in question shall be afforded the opportunity to provide any information that they wish to the ad hoc investigation committee in a manner that the committee deems appropriate. The ad hoc investigation committee may, but is not obligated to, conduct interviews with persons involved; however, such investigation shall not constitute a “hearing” as
that term is used in this policy, nor shall the procedural rules with respect to hearings or appeals apply. The ad hoc investigation committee may seek outside assistance if they deem it necessary to formulate a recommendation. The investigation and subsequent recommendations must be based on a reasonable amount of evidence and should continue until the members of the investigation committee believe an adequate amount of information has been obtained.

Recommendation Following Investigation. Expeditiously after the conclusion of the investigation, the committee shall provide both the Executive Committee and the involved NCS member with a written position and recommendation for action, which may include, without limitations:

i. Determining that no disciplinary action be taken and, if it determined there was no credible evidence for the initial complaint, removing any reference to the event from the member’s file

ii. Deferring action, for a reasonable period of time, when specific circumstances warrant a delay, such as if further follow up information is needed to produce a final recommendation

iii. Issuing letter(s) of censure, to which the affected member may make a written response which shall be placed in the member’s file

iv. Recommending the imposition of terms of probation or special limitation upon continued membership including, without limitation, requirements for monitoring

v. Recommending suspension, denial or expulsion of membership

vi. Taking other actions deemed appropriate under the circumstances

3. HEARING ON ADVERSE RECOMMENDATION

i. Notice of Proposed Action. If the recommendation of the ad hoc investigation committee is other than no required action on the part of the NCS; formal notice of proposed action shall include the following elements:

1. The accusation against the member
2. That membership in the society may be jeopardized as a result of the accusation
3. That the member has the right to request a hearing before a panel to be designated by the President as described below
4. The time limit within which he or she must request a hearing on the accusation, which may not be less than thirty (30) days from the date of the notice of investigation review;
5. A summary of the member’s rights in the hearing
6. That action affecting membership, if taken, may be reported to relevant state medical boards and licensing authorities and the National Practitioner Data Bank.

ii. Notice of Hearing. If a member requests a hearing in a timely fashion, the NCS shall give the member notice of the hearing stating:

1. The place (including via conference telephone or similar means), time and date of the hearing which date shall not be fewer than thirty (30) days or more than sixty (60) days after the notice of the hearing
2. The names of any witnesses expected to testify against the member
3. A request that the member provide a list of witnesses testifying on their behalf at least ten (10) days prior to the hearing
4. That the member’s failure to appear for the hearing shall constitute waiver of hearing rights, but not an admission of wrongdoing, if the member’s failure to appear was without good cause

iii. Conduct of the Hearing

1. The hearing shall be conducted before a panel of no less than 5 members to be designated by the President, and shall be comprised of NCS members who have not participated in any process involving the allegations and who have no relevant conflict of interest with the process or involved parties. The determination of relevant conflict of interest will be made by the President. The hearing will be closed to media, press and the general public. Members of the board, the Chairs of the NCS Ethics committee and parties relevant to the process may be present. The President may elect to appoint an independent attorney, who shall be neither the member’s nor the NCS’s counsel, to serve as hearing officer without vote, or may appoint a hearing officer with vote from NCS membership. The allegations against the member shall be brought forward by a representative of the ad hoc investigation committee. The member shall respond to the allegations. In the case that the President is the member undergoing the Hearing, the Vice President shall perform the functions described herein that are otherwise of the President. At the hearing, the member has the following rights:
   a. To representation by an attorney or other person of his/her choosing
   b. To have a record made of the hearing and to have copies of the record available upon payment of reasonable charges
   c. To call, examine and cross-examine witnesses
   d. To present evidence determined by the hearing officer to be relevant even if such evidence would not be admissible in a court of law; and
   e. To submit a written statement to the hearing panel at the close of the hearing. The standard of proof to sustain a charge shall be a preponderance of the evidence.

iv. Hearing Panel Decision. After the hearing is concluded, the member has the right to receive the hearing panel’s written report and recommendation(s) of action to the Executive Committee, including the hearing panel’s basis for its recommendation(s), within twenty (20) days of the decision.

1. NCS cannot mandate the presence or participation of any particular witness, and the failure of a witness to appear for examination or cross examination shall not be deemed a violation of rights of the member or a basis to challenge the outcome of the process. In the case of a member physician who has been found to have carried out an action of concern with relevance to a medical or licensing board, or the ethical and/or legal practice of medicine,
the text of the report to the National Practitioner Data Bank and to the relevant state medical board or licensing entity, if any, shall accompany each copy of the decision. The member shall simultaneously be notified of the opportunity to appeal the hearing panel decision to the Council within thirty (30) days of the date of the hearing panel.

v. Final Action in the Absence of Appeal.

1. The hearing panel decision is not the final action of the NCS. The Executive Committee may adopt or reject the hearing panel recommendations, but only after all rights to appeal are exhausted or waived.

2. Upon notice to the Secretary that the member waives the right to appeal to the Executive Committee or upon the thirty-first day following the date of the hearing panel’s decision, the decision of the hearing panel shall be forwarded to the Executive Committee for final action at its next scheduled meeting.

3. The Executive Committee’s decision shall be in writing, shall state the basis therefore, and shall be the final action of NCS. The written decision shall be immediately sent to the member by certified mail. The text of the NCS’s proposed reports to the National Practitioner Data Bank and to the relevant state medical boards, if any, shall accompany each copy of the decision.

4. APPEAL

Appeal of Hearing Panel Decision. The member may appeal a decision of the hearing panel by filing an appeal with the Secretary of the NCS within thirty (30) days of the hearing panel decision.

Notice of Hearing on Appeal. The Secretary shall notify the member of the time, place and date of the hearing on appeal, which date shall not be fewer than thirty (30) days nor more than sixty (60) days after the date of the notice of hearing on appeal.

Conduct of Hearing on Appeal.

i. The appeal shall be heard by the Executive Committee; however, any member of the Council who has a relevant conflict of interest, perceived or real, with the member or has participated in any process involving the allegations against the member shall not be entitled to participate in the appeal hearing, deliberations or decisions. Further, the fact that one or more members of the Council are unable to attend the hearing shall not invalidate, or be a basis to challenge, the decision of the Council.

ii. Both the member and the ad hoc investigation committee shall have the right to be represented by counsel, to present arguments, and to submit written statements at the close of the hearing on appeal. No new evidence may be presented by either party unless the evidence could not have been
presented at the original hearing, as determined by the hearing officer. A hearing may be held in-person, by conference telephone, or other means as determined by the Council.

Council Decision On Appeal. Within thirty (30) days of the conclusion of the appeal hearing, the Council shall issue a written decision, stating the basis therefore, which shall be immediately sent to the member by certified mail or other means deemed effective by the Society. In these cases where the action concerned by a physician, would be of interest to a medical board, the Society’s proposed reports to the National Practitioner Data Bank and to the relevant state medical and licensing boards, if any, shall accompany each copy of the decision.

5. REPORTING FINAL ACTIONS
NCS’s action shall not be considered to be final until all appeal rights have been either exhausted or waived.

The applicant or member shall receive notice of an opportunity to meet with the NCS President, or his or her designee, and the Legal Counsel of NCS at the discretion of the NCS’s President to review and discuss the text of the reports (from section IV D above) before the reports are filed. The applicant or member shall be informed, where applicable, that the National Practitioner Data Bank report shall be sent to the Minnesota Board of Medical Practice and any state report required shall be sent to the relevant state board no later than fifteen (15) days after the date the report became final.

6. SUSPENSION OF INVESTIGATIVE OR APPEAL PROCESS
NCS may decline to initiate the process described in this Policy, or the process described in this Policy may be suspended at any time by NCS if the matter at issue in this process is pending in another forum, or if NCS believes the matter should instead be pursued in another forum, including, but not limited to, any court, state licensing board or other governmental agency, until the matter is resolved in the other forum.

7. CONFIDENTIALITY AND INDEMNITY
Absent exigent circumstances as determined by NCS, investigations and proceedings prior to final disposition, as well as information made available to NCS during the course of an investigation review or hearing shall be confidential and shall not be disclosed except as necessary to conduct of an effective investigation, hearing, and appeal. All NCS members serving on an ad hoc investigating committee and Executive Committee shall act in good faith, and, to the extent that their obligations are carried out in good faith, shall be fully indemnified, held harmless by NCS, and supported legally by the NCS should the member decide to pursue legal action against an individual member of the ad hoc investigating committee or Executive Committee.

8. AMENDMENT TO THE INVESTIGATIVE REVIEW POLICY
This policy shall be subject to amendment by action of the Board of Directors.

9. DEFINITION OF TERMS
The following terms appear in this Disciplinary Policy:
i. NCS: The Neurocritical Care Society

ii. Ad hoc investigation committee: an ad hoc committee of 5 members of the Society appointed by the President of NCS to investigate and substantiate and claim brought against a member.

iii. Secretary of the Investigation: appointed by the President of the Society to lead the ad hoc investigation committee

iv. President: the President of the NCS

v. Member: the member against whom a claim is being brought

vi. Hearing Officer: Legal counsel, appointed by the President, to serve on the hearing committee and ensure compliance with relevant procedures and the conduct of the hearing

10. MISCELLANEOUS

All time periods and time limits set forth in this Policy are aspirational and may adjusted by the Society in the interests of due process.

All notices to be provided by the Society may be provided in any reasonable manner that the Society determines, including email.

Any matters that arise that are not addressed in this Policy shall be within the discretion of the Society.

Adopted by the NCS BOD: June 2, 2015
Amended by the NCS BOD: October 9, 2017
Contributors: Jordan Bonomo, MD; Michael Rubin, MD, MA; Barak Bar, MD; Edward Collins, NP; Salvador CruzFlores, MD; Rachel Garvin, MD; Scott Glickman, PhD, DO, MPH; Jonah Grossman, MD; Galen Henderson, MD; Tom Lawson, NP, NCC; Dea Mahanes, CCNS, CCRN, CNRN, RN, MSN; Jessica McFarlin, MD; Sarah Monchar, PA; Harry Peled, MD, FACC; James Szalados, MD, JD, MBA
SECTION II: MEMBERSHIP

A. Membership Types

The NCS shall have three classes of members, designated as full, junior, and honorary members.

1. Full members. For eligibility as a full member of the Society an individual must be a physician, nurse, pharmacist, advanced practitioner, or other professional who has an interest in neurocritical care and/or participates in the management of critically-ill neurological patients.

2. Junior members. For eligibility as a junior member in the society an individual must be a physician, nurse, pharmacist, advanced practitioner, or other professional holding a residency or training position in neurocritical care setting who has demonstrated an interest in neurocritical care.

3. Honorary members. Honorary Members are those who, by reason of professional qualifications and contributions to the field of neurocritical care are deemed worthy of such selection to membership of the Society.
B. Dues and Renewal

Yearly membership dues are prorated beginning June 1st. Full year rates are as follows:

1. Physicians who:
   i. Reside in the US and countries not listed on the International Rate Guide - $325/year
   ii. Reside in Group A countries on the International Rate Guide - $215/year
   iii. Reside in Group B countries on the International Rate Guide - $50/year

2. Healthcare Professionals, Pharmacists, Physician Assistants, Nurses who:
   i. Reside in the US and countries not listed on the International Rate Guide - $160/year
   ii. Reside in Group A countries on the International Rate Guide - $120/year
   iii. Reside in Group B countries on the International Rate Guide - $35/year

3. Residents, Fellows, and Students who:
   i. Reside in the US and countries not listed on the International Rate Guide - $130/year
   ii. Reside in Group A countries on the International Rate Guide - $95/year
   iii. Reside in Group B countries on the International Rate Guide - $20/year

4. Industry Professionals: $315/year. Member type does not include complimentary job postings on the NCS website

5. Military personnel receive a 20% discount with proof of service.

6. Global partners receive a 40% discount excluding those residing within a Group B country.

4 Note to all residents, fellows, and students: You must submit verification from your Program Director to the NCS office by email at info@neurocriticalcare.org.
C. The Process for Soliciting Membership Renewals

1. Last week of April, email is sent to members alerting them to watch for dues renewal invoices next week.
2. May 1 – Renewal invoices are sent via email.
3. Monthly reminders are sent via email to those who have not yet renewed dues.
4. In addition, invoices are sent by mail to those who have not yet renewed on June 1 via US mail requesting remittance by June 30. If dues are not received by June 30, website access and journal mailing will be suspended.
5. Non-Payment of Dues:
   i. Follow-up letters are sent to members who have not renewed letting them know that journal access will be removed and their membership will be discontinued if they do not renew.
   ii. If the member does not pay the delinquent dues within two months, that person’s membership will be terminated.
   iii. The member may petition the Executive Committee in extenuating circumstances.
D. FNCS Credential

1. **FNCS**
   The NCS offers a program that denotes “letters” to recognize exceptional service, academic excellence, and leadership in the field of Neurocritical care. This program is called Fellow of NCS (FNCS). Individuals who meet the requirements of this Fellowship will add the letters, FNCS, to their respective titles.

2. **REQUIREMENTS/Criteria**
   i. Applicant must be an active member of the NCS for a minimum of 5 years.
   ii. Applicant must have participated in at least 5 national or international medical society based conferences with a neurocritical care focus, with a minimum of 2 of these being the NCS Annual Meeting. Meetings attended must be detailed on the application.

3. **FORMS TO BE COMPLETED**
   i. Completed application form
   ii. Current curriculum vitae
   iii. A personal statement outlining the applicant’s reasons for applying.
   iv. Three written letters of recommendation, one of which must be from a professional that is not your specialty (i.e. Nurse, Physician, Pharmacist, etc.). All letters must be from active NCS members outlining why the applicant should be accepted as a fellow. It is the responsibility of the applicant to ensure these letters are sent to the NCS Executive Office in a timely manner.
   v. Global Partners

---

5 See Appendix II
E. Global Partners

The NCS has 5 International Regional Chapters in the following regions: Asia (1), Europe (2), Mid-East/Africa (3), North & Central America (4), and South America (5). Each Regional Committee will be comprised of representatives from partnering organizations.

1. APPLICATION PROCESS
A letter of intent is written by the respective society. The letter along with the required criteria below can be submitted via email to the Executive Office at info@neurocriticalcare.org. The request is submitted to the NCS Executive Committee for review. The average turnaround time is 2-3 weeks. Upon approval, the NCS will issue a letter of acceptance and a certificate of the partnership.

2. CRITERIA
   i. Comprised of International partnered Societies who have a focus on Neurocritical Care.
   ii. Society has a minimum of 25 members.
   iii. At least 5 members must be active NCS members. If the society has more than 50 members, than 10 members must be active NCS members.

3. LIST OF CURRENT GLOBAL PARTNERS
   i. A list of current global partners will be maintained by the executive office and posted on the NCS website

4. REPORTING
The NCS Executive Committee may require regular reporting from the Regional Chapters and Global partners in order to facilitate communication and inform the membership on the activities.

---

6 Refer to Appendix III for Application
F. Honorary Membership and Lifetime Achievement Awards Process

1. HONORARY MEMBERSHIP

In the Policy and Procedure Manual, Honorary Members are defined as: those who, by reason of professional qualifications and contributions to the field of neurocritical care are deemed worthy of such selection to membership of the Society (page 24). It also states that it is the Secretary’s responsibility to Nominate individuals for Honorary membership in the society as delineated in the bylaws (page 37). Honorary members may elect to receive complementary Annual Meeting Registration (page 68). Current Honorary Members include: Allan Ropper, Matt Fink, Dan Hanley, Tom Bleck, Nino Stocchetti, Werner Hacke, Claudia Robertson and David Menon.

i. Proposed Process. The NCS identifies up to one person annually who meets the following criteria:
   1. Has extensively published original manuscripts, book chapters or other documents pertinent to NCC, or
   2. Has extensively improved the quality or standards of NCC delivery and improved the outcomes of NCC patients, or
   3. Has extensively advocated for NCC to the patients, the public or the policy makers, with tangible results.

ii. The Secretary presents a slate of candidates to the Membership Committee for a vote. If approved by majority, the Secretary contacts this person and gets his/her approval. Then the candidate’s name is presented to the Executive Committee and after that in the March BOD meeting. If approved by more than two thirds majority, the candidate becomes Honorary Member of the NCS and is presented with a Certificate at the Awards ceremony of the Annual Meeting.

2. LIFETIME ACHIEVEMENT AWARD

The LTAA may represent the highest honor bestowed by NCS.

i. Proposed Process: We propose a Lifetime Achievement Award which should be given to particularly remarkable candidate in recognition of his or hers outstanding contributions to the mission of the Neurocritical Care Society or to the advancement of its goals, with work that spans decades and is widely acknowledged as above the usual devotion to the advancement of the field.

ii. The Board of Directors identifies not more than 1 person every 1 to 3 years that meets the following criteria:
   4. Has contributed to the field of NCC for more than 30 years

iii. The Secretary may identify the candidate through a process that includes 1) a letter of nomination from a BOD member detailing the nominee's qualifications for the award and describing the individual’s accomplishments relative to the award criteria and 2) the nominee's current curriculum vitae (which might be requested directly from the candidate). This nominating BOD member must be practicing outside the nominee's current practice site/institution. Self-nominations are not permitted.

iv. The Secretary presents this candidate to the Membership Committee. If approved by majority, the candidate’s name is presented to the Executive Committee and after that in the March BOD meeting.
If approved by more than two-thirds majority, the candidate is presented with a LTAA Certificate at the Awards ceremony of the Annual Meeting.

v. An Award named by this LTAA awardee is presented every 3 years to a member of the Society meeting criteria similar to the Cristanne Wijman Award.
G. Meeting Endorsements

1. An NCS member, external society, or global partner requests endorsement
2. Staff sends the endorsement application
3. Requester returns completed application
4. Staff vets meeting to ensure it does not compete with NCS AM, Regional meetings and aligns with requirements for quality a meeting by using the checklist below:

Meeting Endorsement Checklist:

- Conference/society is too broad in scope. Example: Association for Development of Teaching, Education and Learning
- Titles mimicking genuine meetings but are off in a way. Example: Tissue Conference instead of Tissue Engineering Conference.
- The registration fees are higher than typical in the field or presenter fees are higher than regular participation fees
- Abstracts are accepted within a week, with limited or no review
- Nonsense or hoaxed abstracts are accepted
- Contact details are missing, contact with phone is impossible, no name/surname listed as contact person
- Great amount of spelling/grammar mistakes, unnatural use of English
- Presence of ads unrelated to the meeting or field

5. Staff inputs information from application into the Endorsed Meetings Tracking Sheet
6. Staff sends an email to the officers to provide feedback vote to approve the meeting. NOTE: All endorsement requests received by staff within a 30-day period will be sent to the EC at the end of each month to limit the volume on emails the EC receives. There will be an exception to this rule if a meeting request needs a response inside of 30 days.
7. The EC will provide a response within three business days.
8. Staff tallies vote on each meeting endorsement to determine whether endorsement is approved.
9. Staff prepares a letter under the name of the board president with the results of the vote and sends to requester, whether approved or rejected.
10. If approved, staff posts endorsement on website
11. Staff uses social meeting to discuss approved meetings (i.e., Twitter, Facebook, Instagram, NCS Online Community)

Recommended Change:
Eliminate letters f – h and simply notify the EC when a new meeting is endorsed

Rationale: 1) The requester receives a response much faster and 2) Frees up staff time to work on other activities
H. Past Presidents at Board Meetings

1. Email the BOD agenda to all Past Presidents in advance for review and comments.
2. Move the Past Presidents Dinner to the night before the Fall in-person BOD meeting. This means that the dinner will take place on Sunday evening prior to the Annual Meeting.
3. Have the EC vote for five Past Presidents to attend the in-person BOD meeting based on the content of the agenda and who has the most knowledge to contribute to the conversation.
   i. The vote will be anonymous. Having the entire EC vote rather than leaving this up to the President should make it more objective and less of a popularity contest.
   ii. NOTE: The Bylaws remain in effect because they state that BOD meeting attendance is discretionary for Past Presidents.
SECTION III: BOARD OF DIRECTORS

A. Definition as per the Bylaws Article III

1. The Society shall be managed by the BOD. Each Director shall be at least 18 years of age.
2. The BOD 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 BOD or by action of the full members, provided that no decrease in the number of directors shall shorten the term of any incumbent director.
3. By resolution of the Board February, 2005, the Immediate Past President will serve on the BOD.
4. Quorum
   i. A majority of the BOD shall constitute a quorum for the transaction of business.
   ii. A majority of the directors present, whether or not a quorum is present, may adjourn any meeting to another time and place without notice to any director.
5. All Past-Presidents (except the Immediate Past-President) will be ex officio (non-voting) members of the BOD and will have the right to attend BOD meetings at their discretion.
B. Term of Directorship

1. The term of a director shall be four years.
2. Terms for Directors will begin at the conclusion of the Annual Meeting and last until the end of the Annual Meeting of the final year of their term and until their successors have been elected and qualified.
C. Performance Expectations/Requirements of Office

1. All directors must be full members in good standing of the society.
2. Upon election, directors should familiarize themselves with the Bylaws and Policies and Procedures will be provided by the society to all new Board members.
3. Board members must attend at least 50% of meetings/conference calls per calendar year. 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.
4. Subject to the limits set by the Bylaws, manages the affairs of the NCS and the Executive Council between regular meetings of the Executive Council. Primary duties of a Member of the Board include:
   i. Adopting Resolutions and Policy statements representing the position of the NCS
   ii. Setting the amount of dues and meeting fees for members of the NCS
   iii. Amending the Bylaws of the NCS subject to ratification by the membership
   iv. Requesting special duties and responsibilities for NCS’ officers
   v. Adopting the annual budget
   vi. Determining authorized signers of checks and drafts and limits.
5. Duty of Care: that includes attending meetings, exercising independent judgment, with legal responsibilities of directors and providing oversight of the organization.
   i. Attends orientation meeting upon election to the board.
   ii. Participates actively in Board meetings (regular and special) and the governance of the society through formulation, review and execution oversight of the business decisions guiding the overall direction of NCS
   iii. Leads by example and is representative of the society’s membership.
   iv. Represents NCS to other key stakeholders including federal policymakers, other organizations/associations, etc.
   v. Serves as a liaison as assigned on behalf of the society
   vi. Serves as a leader (point person) to provide insight on Neurocritical care issues to the society’s membership as a whole.
   vii. Assists the Executive Committee in providing oversight on NCS’ future direction in meeting the goals of the organization and membership growth.
   viii. Knows the issues before the Board. Looks for sound and innovative solutions on behalf of the organization.
   ix. Works in partnership with all NCS leaders and national office staff members.
   x. Submits board reports related to activities, problems/solutions, and desired board actions.
   xi. Answers all association-related correspondence in a timely manner.
   xii. Provides necessary information and input to national office on assigned activities/ initiatives for annual budget preparation. Utilizes national office staff to assist in preparing fiscal impact statement.
   xiii. Submits reimbursement form and receipts according to the reimbursement policy.
   xiv. Informs national office and board of address or phone changes promptly.
   xv. Participates in the performance appraisal of the management office.
xvi. Identifies and recruits new members to strengthen the Society.

6. 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
   i. Accepts assignment of specific initiatives/projects from President
   ii. Copies all correspondence relative to association matters to the President, national office, and other appropriate board members.
   iii. Commits appropriate time to accomplish assigned responsibilities.
   iv. Completes full term of office.
   v. Seeks and respects the opinions of other Board members and members of the Executive Staff.
   vi. Works to develop consensus

7. Duty of Obedience that NCS obeys applicable laws, acts in accordance with ethical practices, and adheres to its mission.
   i. Maintains confidentiality
   ii. Keeps informed of policies, position statements, and resolutions supported by NCS.
   iii. Discloses any potential conflict of interest to the President and/or Executive Director. Conflict of Interest and Code of Conduct) annually.
   iv. Represents the best interests of the membership in Board deliberations.
D. NCS BOD Nomination Process/Election and Timeline

1. **2018 PROCESS IMPROVEMENTS**
   At the conclusion of the 2018 nominating process, the committee held a meeting to discuss lessons learned. While the committee felt the process was very efficient, a few recommendations were developed.
   i. Start the process sooner to allow more time for candidates to submit their materials.
   ii. Receive all required materials from the candidates at the beginning of the process to avoid making two separate requests.
   iii. Only allow one member vote for board member candidates to ensure original intent of the members is achieved.
   iv. Maintain the interview phase for the final secretary candidates so they can fully explain his/her vision for becoming a Secretary and subsequently President of the NCS BOD.

**Execution of Process Improvements**
   i. The Nomination Committee will send a membership request for nomination
   ii. The committee will review all the names submitted by members, add names if needed, and make sure all nominees listed are members in good standing. The committee will also ensure that the list is representative of the multidiscipline strategy.
   iii. The committee will send a notification to those nominated asking for two letters of references (similar to what has done for the secretary position), personal statement and a CV.
   iv. Only those who submit all the requirements will be considered.
   v. The committee will then finalize the list of names and submit it to the membership for voting.
      1. The candidates with the highest votes will be elected to the board.

2. **NOMINATING COMMITTEE PROCESS**
   The nominating process described below is based upon the description outlined the NCS Policy and Procedure Manual and has not been changed. However, the committee has made a few changes to the execution timeline to align with the process improvements outlined above. These changes are marked in orange.

**NOMINATING COMMITTEE**
   The Nominating Committee shall consist of a Chair who will be the Immediate Past President along with two members of the Board and two members-at-large. The two members of the Board will be identified and selected by the Board of Directors. The two members-at-large positions will be selected as follows:
   i. A Call for Volunteers is distributed to the NCS membership;
   ii. The Board of Directors reviews applicants and votes on the two members-at-large. The Committee must have multidisciplinary representation and include at least one non-physician. No member of the Nominating Committee can stand for election while they are a member of the Nominating Committee. Terms for members of the Nominating Committee will be two years, and individual
terms will be staggered so that a full rotation does not occur each year. In the first year, the rotation Directors-At Large

### 2019 NOMINATING COMMITTEE

<table>
<thead>
<tr>
<th>First Name</th>
<th>Last Name</th>
<th>Designation</th>
<th>Position</th>
<th>Term Start</th>
<th>Term End</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gretchen</td>
<td>Brophy</td>
<td>PharmD, BCPS, FCCP, FCCM, FNCS</td>
<td>Chair and Board Liaison</td>
<td>2015</td>
<td>2019</td>
</tr>
<tr>
<td>Susan</td>
<td>Yeager</td>
<td>NP, RN, MS, CCRN, ACNP, FNCS</td>
<td>Board of Director Representative</td>
<td>2015</td>
<td>2019</td>
</tr>
<tr>
<td>Ines</td>
<td>Koerner</td>
<td>MD, PhD</td>
<td>Member Representatives</td>
<td>2014</td>
<td>2019</td>
</tr>
<tr>
<td>David</td>
<td>Hwang</td>
<td>MD, FAAN, FCCM, FNCS</td>
<td>Board of Director Representative</td>
<td>2019</td>
<td>2021</td>
</tr>
<tr>
<td>Chethan</td>
<td>Venkatasubba Rao</td>
<td>MD, FNCS</td>
<td>Member Representatives</td>
<td>2019</td>
<td>2021</td>
</tr>
</tbody>
</table>

#### 3. BOARD SECRETARY NOMINATING PROCESS

The current process to elect the board secretary has multiple steps that are illustrated below.

i. Secretary Election Process:
   1. Board of Directors submit recommendations to the Nominating Committee
   2. Secretary candidates must be currently serving on the Board or have previously served
   3. The Nominating Committee selects the top three candidates
   4. Top candidates are asked to indicate their interest in serving and submit a CV, two letters of recommendations and vision for the future
   5. The Nominating Committee reviews and ranks the top three candidates.
   6. Two final candidates are selected to be interviewed by the committee
   7. The Nominating Committee presents one candidate for approval by the Board
   8. Once approved, the new secretary is ratified at the board meeting during the Annual Meeting

### SECRETARY ELECTION TIMELINE

<table>
<thead>
<tr>
<th>Deadline</th>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>March 18 – 29</td>
<td>Call for Nominations Period</td>
</tr>
<tr>
<td>March 29</td>
<td>Nominations Close</td>
</tr>
<tr>
<td>April 1 – 5</td>
<td>Inform candidate of nomination and await acceptance</td>
</tr>
<tr>
<td>April 8 – April 26</td>
<td>Submission period for candidate to submit their materials: 1) vision statement, 2) CV and 3) two letters of recommendation from those who accept the nomination. Due to questions from the candidates about</td>
</tr>
</tbody>
</table>
specific content in the vision statement and the types of references to submit; coupled with the committee’s need to assess the vision statement with consistent content areas and the same level of references, criteria was developed for both.

The vision statement should include the following:

1. Vision statement (500 words or less) and address the following:
   a. What have you contributed to the board while servicing? For example, innovations, guidelines, strategies, new programs, etc.
   b. Did you chair any committees that yielded outcomes favorable to the NCS strategic plan? Please explain.
   c. Provide examples of your multi-discipline collaborations.
   d. Identify your strengths and weaknesses and how you are working to improve your weaknesses.
   e. State your vision for NCS if selected to the position.

2. Letters of recommendation: one from an NCS board member and one from a leader in their own institution describing the candidate ability of working with others in a multidisciplinary team.

<table>
<thead>
<tr>
<th>Date Range</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>April 29 – May 3</td>
<td>Nominating Committee selects and ranks top Secretary candidates based upon submitted materials</td>
</tr>
</tbody>
</table>
| May 6 – 10          | • Invite top two ranked candidates to interview  
                       • Send letter of regrets to those candidates who were not selected |
| May 13 – 17         | Nominating Committee conducts interviews with top two candidates             |
| May 20 – 24         | Nominating Committee selects candidate to be presented to the Board          |
| June 11             | Nominating Committee chair presents secretary candidate at the June Board of Director Meeting |
| June 12 – 14        | Send letter of congratulations to new secretary and invite to next board meeting |
| July 31             | Conduct new board member orientation and invite the new secretary            |
| October             | New secretary ratified at board meeting                                      |

i. Directors are elected by a plurality

ii. Board Size – no less than 7 and no more than 30

iii. Current size of the Board = 31

iv. Need to assess the board members who expire at the end of 2019 and replace the positions accordingly
DIRECTOR ELECTION TIMELINE

<table>
<thead>
<tr>
<th>Date</th>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>April 1 – 19</td>
<td>Period for Call for Nominations from the members</td>
</tr>
<tr>
<td>April 19</td>
<td>Nominations Close</td>
</tr>
<tr>
<td>April 22 – 26</td>
<td>Executive Office informs nominees and if they accept, requests candidatematerials (CV, personal statement, two letters of recommendation)</td>
</tr>
<tr>
<td>April 29 – May 17</td>
<td>Submission period for candidates to submit their materials: 1) CV, 2) personal statement, 3) one letter of recommendation must come from department head – Rationale: due to the level of commitment as a board member, the committee wants confirmation that the candidates’ boss supports their work.</td>
</tr>
<tr>
<td>May 20 – 31</td>
<td>Nominating Committee reviews candidates’ materials, confirms qualifications and prepares the ballot for the vote</td>
</tr>
<tr>
<td>June 3 – 14</td>
<td>Election is open to vote on candidates <em>(this will be the only election)</em></td>
</tr>
<tr>
<td>June 14</td>
<td>Voting Closes</td>
</tr>
<tr>
<td>June 17 – 21</td>
<td>Nominating Committee reviews results of the election and on that basis, selects the final candidates (number selected is based on open seats to be filled)</td>
</tr>
</tbody>
</table>
| June 24 – 28    | • Send letters of congratulations to the new board members  
|                 | • Send letters of regret to those who did not make it                    |
| July 31         | Conduct new Board Member Orientation and invite the new secretary         |
| October         | New directors announced at Business Meeting                               |

5. NOMINATING COMMITTEE

The Nominating Committee shall consist of a Chair who will be the Immediate Past President along with two members of the Board and two members-at-large. The two members of the Board will be identified and selected by the BOD. The two members-at-large positions will be selected as follows: a) a Call for Volunteers is distributed to the NCS membership; and b) the BOD reviews applicants and votes on the two members-at-large.

   i. The Committee must have multidisciplinary representation and include at least one non-physician.
   ii. No member of the Nominating Committee can stand for election while they are a member of the Nominating Committee. Terms for members of the Nominating Committee will be two years, and individual terms will be staggered so that a full rotation does not occur each year. In the first year, the rotations will be that half are assigned one year and the other half two years based on total votes.

6. ELECTION OF OFFICERS

   i. The process for the selection of Officers of The NCS is outlined in the Bylaws which states: “Open Officer seats will be filled using the following succession plan: Secretary to Treasurer; Treasurer to Vice President; Vice President to President.
   ii. All Officers must have previously served on the BOD or have served at least one full term on the BOD.
iii. Unless a shorter term is provided in the resolution of the Board electing such officer, the term of office of each officer shall begin at the conclusion of the Annual Meeting and until the officer’s successor is elected or appointed and qualified.”

iv. Duration of Officer Terms and Succession: Officer terms are for one year. Officers include the Past President, President, Vice President, Treasurer and Secretary. There will be a succession from Secretary to Treasurer to Vice President to President

1. President: 1-year term in succession from the Vice Presidency
2. Vice President: 1-year term in succession from the Treasurer
3. Treasurer: 1-year term in succession from the Secretary
4. Secretary: 1-year term as nominated by the Nominating Committee.
5. Immediate Past-President: 1-year term in succession from the President. Serves as a voting member of the Executive Committee and the BOD

v. Selection of Secretary:
1. The BOD will be asked to forward their recommendations to be considered as a part of the process. The Nominating Committee will review the CVs, candidate’s statement on their vision for NCS, letters of support, and past experience in determining the top candidates. The top candidate will be presented to the BOD for a vote of affirmation.
2. Simple majority of Board vote results in selection or non-selection of nominated candidate. If candidate is not approved, the Nominating Committee will take all comments from the Board into consideration and introduce a new candidate.

7. ELECTION PROCESS FOR AT-LARGE DIRECTOR SEATS

i. The NCS accepts nominations for open at-large seats.7

ii. One quarter of the positions of the BOD will turn over each year.

1. No BOD member who is rotating off may stand for re-election to the BOD that same year. There must be at least a 1-year hiatus before being re-elected to the BOD. Total lifetime BOD terms are limited to 2 (total of 8 years). No Past-President can be elected to the BOD.

iii. Process for identifying and electing candidates of open at-large director seats.

1. The Nominating Committee will follow agreed-upon processes for the identification and selection of Board of Director At-Large seats.
2. The Nominating Committee will ensure the process of election for the Nursing and Pharmacy seats (elected for 4 year terms).
3. During the voting process of At-Large Director seats, the Nominating Committee has the option to consider two designated Board seats among those that are currently open, one for advanced practice providers and one for nonneurologist physicians.

4. Timeline/Activities
   a. Send Call for Nominations to membership (See Appendix II for Nominations forms) (April)

---

7 Refer to Appendix III for Nomination form
b. The Nominating Committee will meet to review the nominations and identify any additional candidates to add to the list. Any member in good standing may run in the primary. (Second Week of June) Note: the Nominating Committee should make special note to ensure advanced practice providers and non-neurologist physicians are included on the ballot.

c. The Executive Office will contact the nominees to verify that individuals accept the nomination. (Immediately following Nominating Committee Approval)

d. The preliminary ballot including all nominations approved by the Nominating Committee will be sent to membership for a vote (Second Week of May with deadline of forth Week of May)

e. The Nominating Committee will review the results and select two candidates for each open seat (i.e., if there are five open seats, 10 candidates will be selected – if there are six open seats, 12 candidates will be selected). (Fourth Week of May) Note: The Nominating Committee should make special note to ensure advanced practice providers and nonneurologist physicians are included on the final ballot.

   i. Half of the final candidates will be based on the top votes (i.e., if 10 candidates are needed, the top five candidates based on votes will automatically be placed on the ballot; if 12 candidates are needed, the top six candidates based on votes will automatically be placed on the ballot).

   ii. The remaining half will be selected by the Nominating Committee taking into consideration the number of votes, profile of those already serving on the Board and other factors as deemed important by the Nominating Committee. No additional candidates may be added at this point in the process. (TO BE ENFORCED AT MAY MEETING) Note: The Nominating Committee should make special note to ensure advanced practice providers and nonneurologist physicians are included on the final ballot.

f. Each candidate (chosen by the Nominating Committee or standing in the primary election) will prepare a brief statement regarding their qualification and positions. Letters of support may be provided. (Refer to Appendix III for example of letters of reference) (Send notifications immediately following Nominating Committee meeting with deadline of the Second Week of June)

g. The names of all at-large candidates will be presented to the membership as an aggregate via an email ballot which will include the names of the candidates and their statements. Those receiving the most votes from membership will become directors. In the event of a tie for the last at-large position, the Executive Committee will vote among those tied by secret ballot. (Send final ballot the Third Week of June with votes due within two weeks.) 3.3.4.9 The new directors will be contacted prior to the annual meeting and an announcement will be made at the Business Meeting during the Annual Meeting.

iv. Conduction of elections:
1. All elections will be conducted by email.
2. Provisions will be made for any member who does not have email. A Web-Based process will be used as soon as practical.

8. PROCESS FOR ELECTION OF GLOBAL REGIONAL CHAPTER
   
i. In addition to the election of the Directors, one Global Regional Chapter chairperson will be elected from each of the five regions (Asia, Europe, Central/Caribbean and North America, Mideast/Africa and South America) who will hold the BOD office for a two-year term and until their successors have been elected and qualified.
   
ii. Each regional chapter will hold their own election for the individual to serve as Chair of their International Regional Chapter
   
iii. The Chair of the International Regional Chapter will become the nominee for the open BOD seat for their region
   
iv. The Chairs will be presented to the membership for ratification during their annual election process
   
v. These Chairs have full voting rights
   
vi. NOTE: The goal is secure three seats for 2017 and then the remaining two in 2018
E. Board Positions and Descriptions

1. OFFICER ROLES AND RESPONSIBILITIES, TO CLARIFY THE ROLES OF OFFICERS OF THE SOCIETY

i. President

1. Description: Provides leadership for the NCS by directing the ongoing activities of the association in collaboration with the NCS BOD and association management staff.
2. Reports to: Membership
3. Responsibilities:
   a. Oversees board and executive committee meetings.
   b. Works in partnership with the chief executive to make sure board resolutions are carried out.
   c. Calls special meetings as necessary.
   d. Assists chief executive in preparing agenda for board and executive committee meetings.
   e. Works with the nominating committee to recruit new board members.
   f. Acts as the spokesperson for the organization.
   g. Assists chief executive in conducting new board member orientation
   h. Periodically consults with board members on their roles and help them assess their performance
   i. Works with chief executive to oversee and monitor strategic planning and organizational goals
   j. Represent the organization to outside entities
   k. Provides general supervision, direction, and control of the business
   l. Slates NCS volunteers through the Get Involved Campaign with input from the current committee chairs and board liaisons and approved from the Executive Committee.
   m. Serves as ex-officio member on all committees
   n. Assures that orders and resolutions of the BOD are carried into effect
   o. Signs and deliver in the name of the corporation deeds, mortgages, bonds, contracts, or other instruments pertaining to the business of the corporation, except in cases in which the authority to sign and deliver is required by law to be exercised by another person or is expressly delegated by the articles or bylaws or by the Board to another officer or agent of the corporation
   p. Implement and monitor strategic planning process and organizational goals
   q. Forms ad hoc committees and task forces
   r. Performs other duties prescribed by the Board

ii. Immediate Past President

1. Description: Serves as a support role to the President and as a member of the Executive Committee and to the association as a member of the BOD in the administration of the ongoing activities of the association.
2. Reports to: President
3. Responsibilities:
   a. Chairs the Nominating Committee to recruit new board members and selection of the Secretary.
   b. Serves as the Chair of the Global Committee (lead of International recruitment efforts)
   c. Serve on the Executive Committee
   d. Perform other duties as prescribed by the BOD or by the President
   e. Attend all BOD meetings

iii. Vice President
1. Description: Collaborates closely with the President in the administration of the ongoing activities of the association and in collaboration with the NCS BOD and association management staff.
2. Reports to: President
3. Responsibilities:
   a. Serve as the Chair for the Annual Meeting and Annual Meeting Committee.
   b. Assists President with selecting NCS volunteers through the Get Involved Campaign with input from the current committee chairs and board liaisons and approved from the Executive Committee.
   c. Appoints all committee chairs and chairs-elect for the year the VP is President
   d. Assists chief executive in conducting new board member orientation
   e. Serve on the Executive Committee.
   f. Maintain knowledge of the organization and personal commitment to its goals and objectives
   g. Assume responsibilities in the absence of the Board President
   h. Understand the responsibilities of the Board President as chair of Board meetings and be able to perform these duties in the chair’s absence.
   i. Has other powers and performs such duties as from time to time may be requested by the President or by the Board
   j. Oversee annual fundraising activities, social events, and travel grants related to meeting

iv. Treasurer
1. Description: Maintains financial activities of organization. Reviews fiscal records in collaboration with the Executive Director of NCS.
2. Reports to: President
3. Responsibilities:
   a. Chair of the Finance Committee.
   b. Chair Elect of the Annual Meeting and serves on Annual Planning Committee
   c. Work with the chief executive and the chief financial officer to ensure that appropriate financial reports are made available to the board on a timely basis.
d. Assist the chief executive or the chief financial officer in preparing the annual budget and presenting the budget to the board for approval.
e. Review the annual audit, as required by law, and answer board members' questions about the audit.
f. Approve all invoices for payment/reimbursement to vendors, staff and members.
g. Serve on the Executive Committee.
h. Assume responsibilities in the absence of the Board President and President-Elect.
i. Maintain knowledge of the organization and personal commitment to its goals and objectives.
j. Understand financial accounting for nonprofit organizations.
k. Perform other duties prescribed by the Board or by the President.

v. Secretary
1. Description: Maintains continuity of association projects, activities, and direction through documentation and record keeping of information including all board meetings.
2. Reports to: President
3. Responsibilities:
   a. Works with the chief executive to ensure accurate minutes of board meetings.
   b. Maintain knowledge of the organization and personal commitment to its goals and objectives.
   c. Maintains all Board records and ensure their accuracy and safety.
   d. Assumes responsibilities in the absence of the Board President, President-Elect, and Treasurer.
   e. Provides notice of meetings of the Board and/or of a committee when such notice is required.
   f. Reviews and proposes changes to the bylaws and Policy/Procedure manual annually.
   g. Chair of the Membership Committee.
   h. Serves on the Executive Committee, Finance Committee and AMC.
   i. Nominate individuals for Honorary membership in the society as delineated in the bylaws.
   j. Serve as Liaison to FNCS Credentialing Committee.
   k. Perform other duties prescribed by the Board or the President.

vi. Director-At-Large
1. Description: Collaborates closely with the President and Officers in the administration of the ongoing activities of the association using the initiatives of the strategic plan as the framework.
2. Reports to: President
3. Responsibilities:
   a. Attends all board meetings and board conference calls.
   b. Reviews association documents and publications related to NCS.
c. Assures and oversees development and maintenance of NCS products and publications
d. Supports the production of the annual meeting and other educational events
e. Assures that all current publications meet the standards of the association
f. Coordinates activities related to the development of the resources of the organization
g. Facilitates, collaborates with and acts as a board advisor to assigned committees or workgroups
h. Develops and mentors future NCS leaders
i. Increases the visibility of the association by collaborating with other organizations or groups at the direction of the President
j. Collaborates with the executive director to develop, implement, and evaluate marketing strategies to maintain and increase membership, improve member benefits and services
k. Identifies opportunities for learning and educational activities for the association
l. Recommends development of position statements, guidelines, standards when needed
m. Examines legislative and research issues relevant to NCS practice
n. Supports the NCRB in developing research activities
o. Supports activities to provide funding to support and advance improvement in patient outcomes through research
p. Acts as a liaison to other health care organizations promoting the work of NCS

2. PAST PRESIDENTS AT NCS BOARD MEETINGS

This policy was enacted to control the expense of board meetings and manage the level of influence on decisions by past presidents. It applies to in-person and virtual board meetings.

i. For In-Person Board Meeting:
   1. The NCS staff will email the agenda for the Board of Directors meetings to all past presidents approximately two weeks in advance of the meeting date for review and comments.
   2. So that all past presidents have an opportunity to share agenda comments with all board members, the Past Presidents Dinner will be held the night before the board meeting that is held at the NCS Annual Meeting.
   3. The EC vote for five Past Presidents to attend the in-person BOD meeting. This is based on the content of the agenda and who has the most knowledge to contribute to the conversation.
      a. The vote will be anonymous. The entire EC will vote.
      b. Rationale: Having the entire EC vote rather than leaving this up to the President should make it more objective and less of a popularity contest.
c. NOTE: The Bylaws remain in effect because the state that BOD meeting attendance is discretionary for Past Presidents.

ii. For Virtual Board Meeting:

1. The NCS staff will email the agenda for the Board of Directors meetings to all past presidents approximately two weeks in advance of the meeting date for review and comments.

2. The EC vote for five Past Presidents to attend the virtual BOD meeting. This is based on the content of the agenda and who has the most knowledge to contribute to the conversation.
   a. The vote will be anonymous. The entire EC will vote.
   b. Rationale: Having the entire EC vote rather than leaving this up to the President should make it more objective and less of a popularity contest.
   c. NOTE: The Bylaws remain in effect because the state that BOD meeting attendance is discretionary for Past Presidents.

iii. Ensuring Balance: The staff will keep a record of the past presidents who attend each meeting to ensure a balanced rotation of members. The agenda will be taken into consideration when making this determination.
SECTION IV: COMMITTEES, SECTIONS, TASK FORCES, EDITORIAL BOARD

A. 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. NCS COMMITTEE STRUCTURE

   i. The Chair (or co-chairs) and Chair-Elects of a Standing Committee shall be appointed by the President. Chairpersons of all Standing Committees, except the Nominating Committee or otherwise stated in the approved charter, shall be appointed by the President to serve a two-year term. Chair-Elects will serve a two-year term and succeed the outgoing Chair. Outgoing committee chairs are free to continue to serve as a committee member at the discretion of the new incoming committee chair.

   ii. Members of standing committees shall be subject to re-approval as each new committee chair takes office. With the exception of the Executive Committee, committee member terms are four years unless approved by the Executive Committee. Committee members may only serve one term unless they have been appointed as a committee Chair or Chair-Elect. Committees should have a nursing and pharmacy representative.

   iii. Ad hoc committees may be appointed as the need arises by the President to carry out a specific task that is not the assigned function of an existing standing committee of NCS. The ad hoc committee’s charge should be specified by the President. The ad hoc committee and members of all ad hoc committees shall be appointed at the discretion of the President.

   iv. Committee Longevity: Standing committees will continue to exist indefinitely at the discretion of the BOD. When, in the judgment of the Board, a standing committee is no longer necessary, it may discharge the standing committee by majority vote of all BOD members. Ad hoc committees are discharged automatically 1) upon the acceptance of their final report by the Executive Board or 2) upon completion of the current President's term of office. Ad hoc committees may be discharged at any time by the President.

   v. Eligibility Requirements for Committee Members and Representatives. All members of NCS committees and NCS representatives to organizations shall be active members.

   vi. Board Liaisons: A Board liaison will be appointed to each committee. The individual is responsible for bringing committee matters to the BOD and reporting committee activities at the Board meeting. A new BOD liaison will be appointed when the liaison rotates off the BOD.

   vii. The President and Vice President will annually evaluate the Committees and make recommendations to the Executive Committee and Board.

   viii. New standing committees may be formed or dissolution of a committee may be carried out by majority vote of the Board.

   ix. Committee responsibilities:
1. Each committee will keep a written record of all actions taken by it, copies of which shall be filed with the Secretary.

2. Each committee chair is responsible to provide a written update to the Board at each Annual Meeting.

2. STANDING COMMITTEES

i. Executive Committee

1. Committee Charge: To support the governance of NCS as outlined in Section One of the NCS Bylaws.

2. Committee Composition: The Executive Committee shall consist of the President, President-elect, Treasurer, Secretary, Immediate Past-President and three or more Board members chosen by the President and confirmed by the Board.

3. Committee Authority: 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.

ii. Advocacy Committee

1. Committee Charge: To plan and conduct advocacy endeavors to promote the work of neurocritical care professionals, and to improve the general public’s knowledge and recognition of neurocritical care in fulfillment of the NCS’s mission and vision. To evaluate and recommend action to the Board and membership re: public policy initiatives.

2. Committee Composition: The Advocacy Committee shall comprise of one Chairs and Chair-Elect elect, appointed by the President, one BOD Director-at-large liaison, and other members of the Society.

3. Committee Responsibilities:
   a. Advocacy issues that require policy statements by the Society will be approved first by the Executive Committee then the Board.
   b. The Advocacy committee will also investigate methods to improve mentorship for members-in-training.
   c. Obtain a mailing (or emailing) list of residency directors in neurology, emergency medicine, and neurosurgery for purposes of outreach for ENLS, potential, membership, and external rotations
   d. Roll-out of ENLS availability at reduced price to residents, pending industry approval
   e. Develop an outreach program to the lay community and media and others stakeholder
   f. Create a “library” of media articles and events by NCS members that can be archived and made available
   g. Increase collaboration between Advocacy and Communications Committees for purposes of NCS outreach and engagement of members, non-member organizations, and public
   h. Develop media contact process for NCS

iii. Annual Meeting Committee
1. Committee Charge: The Annual Meeting Committee (AMC), working in cooperation with NCS leadership and the Executive Office, is responsible for planning the NCS annual meeting (AM) by coordinating the scientific program, and obtaining speakers for all programs. The committee will work with the Development Committee in an effort to raise funds, which will support the Annual Meeting. The Scientific and Translational Science Subcommittee (see NCRC committee section) will assist in developing the translational science session, abstract reviews and poster session(s), and best abstract awards. A Workshop Subcommittee shall consist of a Chair, a chair-elect who will assist the Chair and will most likely progress to the Chair of the subcommittee to maintain continuity as determined by the AMC Chair/NCS President. This subcommittee will oversee workshop development, director assignments, and industry device support in collaboration with the AMC Chair.

2. Committee Composition: The AMC shall consist of the Vice President (Chair of the committee) and a Co-Chair (general member), at least 3 members of the BOD, at least 5 at-large members, Workshop Chair/Co-Chair, Officers and Liaison members, including one co-chair of the Scientific and Translational Science Subcommittee, Development Committee, WINCC Committee, Pharmacy Section, Nursing Section, APP Section, Resident/Fellows Section, Guidelines Committee, and ENLS Committee.

3. Committee Responsibilities:
   a. The AMC is responsible for the following strategic initiatives:
   b. Continue to consider how AM can be leveraged for strategic advancement of the society and member benefits for education and science.
   c. Identify new initiatives or programs to consider as satellite programs around AM.
   d. Invite members, fellows, and residents to submit abstracts for the NCS AM.
   e. Review travel grant applications, score applications and select awardees.
   f. Link with other organizations for strategic AM collaboration.
   g. Make existing materials from the AM easily available to meeting attendees after the meeting and identify ways to market these existing materials to those who did not attend the meeting.
   h. Continue the Professionalism and Leadership Day, Research and Leadership Mentoring Programs, and WINCC at the AM.
   i. Develop clinical practice updates session, ENLS, and workshops for the AM.
   j. Continue to support research fundraising events, such as the Run for Research, and soccer and golf tournaments at the meeting.

4. Chair Responsibilities
   a. Development and finalization of AM scientific/clinical sessions
   b. Development of social events (receptions/banquet) at AM
   c. Oversight of logistics at AM (site inspection, food/beverage, receptions, etc.) to keep within approved budget
   d. Appoints and oversees the following:
   e. Scientific program Chair/Chair-Elect and subcommittee
5. Annual Planning Committee Structure

Note: Liaisons- These individuals represent their respective committees during their co-chair year of leadership and rotate as the committee leadership transitions. The liaisons from these committees will be one Chair-Elect of the Scientific and Translational Science Subcommittee, Development Committee, WINCC Committee, Pharmacy Section, Nursing Section, APP Section, Resident/Fellows Section, Guidelines Committee, and ENLS Committee Development Committee, WINCC Section, Resident/Fellows Section, Guidelines Committee, and ENLS committees.

1. Social Fundraising Events: Members from the AMC will work with the Development Committee liaison and NCS staff to organize the fundraising events. Each event will consist of a AMC lead and co-lead, as well as other member volunteers who are interested.

2. Travel Grant: An AMC member Lead and Co-lead will collaborate with a group of 5 AMC members to objectively evaluate the travel grant applications and select awardees annually.

3. The Executive Committee is responsible for evaluating potential sites and dates for the annual meeting. The process will start with a survey of the Board for potential sites.
NCS staff will vet these sites based on rank order of the Board recommendations, dates available and historical knowledge of acceptability of the site for the meeting. Location and dates shall be determined no fewer than 3 years in advance.

iv. Marketing and Communications Committee:

1. Committee Charge: The Communications and Marketing Committee, working in cooperation with NCS leadership and the Executive Office, is responsible for developing marketing strategies for NCS products and communication tools as well as disseminating news that is relevant to NCS members through the official NCS website, Facebook page, Twitter feed, email communications, and Currents – the quarterly news magazine of the NCS.

Subcommittee: Currents Editorial

2. Committee Composition: One Chair and one Chair-Elect, are appointed by the President of NCS. The President, in consultation with the Chairs of the committee, appoints the remaining members of the committee. The composition of the Committee is intended to reflect as broadly as possible those constituencies that are well-represented in the Society's membership as well as those that are underrepresented.

3. Committee Responsibilities:

a. Provide input and recommendations for new content on the website to ensure we are continually providing value to our members and informing other site visitors about the value of NCS.

b. Assist staff in developing promotional campaigns, including membership, Annual Meeting, ENLS and other educational products.

c. Provide input on the development, enhancement or updating of content for NCS’s internal communications and messaging (may include e-newsletters, member and nonmember communications, other NCS publications, social media, etc.).

d. Assist staff in monitoring engagement with specific NCS communications, website and marketing products and services.

e. Provide ongoing input on NCS' internal and external communication vehicles to ensure we are consistently incorporating our brand messages and member value proposition.

f. Producing and publishing Currents – the quarterly news magazine of the NCS

g. Regularly communicating with the NCS Secretary to disseminate news items from the NCS leadership to the members via the website and social media

h. Regularly communicating with chairs of the NCS committees to determine news items for dissemination to the NCS membership

i. Regularly communicating with the Editor-in-Chief of the Neurocritical Care journal to advertise upcoming study results to NCS members via the website and social media

j. Provide input on the development, enhancement or updating of content for NCS’s internal communications and messaging (may include e-newsletters, member and non-member communications, other NCS publications, social media, etc.).
k. Assist staff in monitoring engagement with specific NCS communications, website and marketing products and services.

l. Provide ongoing input on NCS' internal and external communication vehicles to ensure we are consistently incorporating our brand messages and member value proposition.

v. Development Committee

1. Committee Charge: The Development Committee, working in cooperation with NCS leadership and the Executive Office and under the Finance Committee, is responsible for exploring financial support opportunities for the Annual Meeting and beyond.

2. Committee Composition: One Chair and one Chair-Elect, are appointed by the President of NCS. The President, in consultation with the Chairs of the committee, appoints one BOD Director-at-large liaison, and the remaining members of the committee. The composition of the Committee is intended to reflect as broadly as possible those constituencies that are well-represented in the Society's membership as well as those that are underrepresented.

3. Committee Responsibilities:
   a. The Fundraising Committee is responsible for the following:
   b. Create year-round fundraising opportunities with industry sponsors
   c. Undertake a member fundraising drive to provide startup funds for research programs
   d. Explore Philanthropic support opportunities
   e. Through Industry sponsorship, explore Industry interest of conducting Research and refer them to the NCRN and Research Committee

vi. Educational Products Committee

1. Educational Products Committee Charge: The Educational Products Committee, working in cooperation with NCS leadership and the Executive Office, is responsible for the supervision of the development and dissemination of publications and educational products of various types which are produced the NCS. Subcommittee includes Neurocritical Care Live Editorial Board.

2. Committee Composition: The Educational Products Committee shall consist of two co-chairs and two co-chairs elect, chosen by the President, one BOD Director-at-large liaison, and up to 10-15 appointed members. Additional members could be invited to serve in a committee related specific task force or subcommittee as deemed necessary by the Educational Products Committee.

3. Committee Responsibilities:
   a. Define a viable method of publishing educational material from NCS, including a market review, ROI, and membership needs assessment to strategically identify new projects;
   b. Develop and distribute educational products in various formats (print, webinars, podcasts, e-books) for sale to NCS members and non-members;
   c. Increase the NCS revenue by commercialization of educational products;
d. Develop other revenue generating or non-generating programs such as webinars and industry-supported monographs;

e. Make educational material from the annual meeting (such as syllabi and videotaped talks) easily available to meeting attendees after the meeting and identify ways to commercialize these materials to NCS members and nonmembers who did not attend the meeting;

f. Help develop the content of NCS On Demand;

g. Work with the Executive Office to find the best way to commercialize NCS On Demand

vii. ENLS Committee
1. Committee Charge: The Emergency Neurological Life Support (ENLS) Committee, working in cooperation with NCS leadership and the Executive Office, is responsible for expanding the usage of the ENLS program, updating and setting up ENLS protocols, ensuring the ENLS Moodle course exam questions are updated, and certification eligibility and compliance of ENLS.

2. Committee Composition: The Educational Products Committee shall consist of one Chair and one Chair-Elect, chosen by the President, one BOD Director-at-large liaison, and appointed members. Additional members could be invited to serve in a committee related specific task force or subcommittee as deemed necessary by the ENLS Committee. There are 24 people identified to assist with the protocols and 5 people assisting with Certification.

3. Committee Responsibilities:
   a. Update the content of the ENLS manuscripts
   b. Sanction a supplement of the Neurocritical Care Journal for the ENLS manuscripts
   c. Based on manuscript updates, the Moodle rooms site and all corresponding courses (ENLS, Train-the-Trainer and Slide Decks) will be updated
   d. Broaden ENLS roll-out with hard launch, courses, and outreach to residency training programs in Neurology, Emergency Medicine, Neurosurgery and Anesthesia
   e. Integrate pediatric neurocritical care, pharmacy and prehospital phases into ENLS
   f. Diversify the ENLS committee by conducting outreach to nursing and emergency medicine members
   g. Develop a process and pricing structure for co-located ENLS live courses at national conferences
   h. Create a recertification process for ENLS and Train-the-Trainer courses
   i. Create an ENLS certification card for when training is completed
   j. Create an independent financial unit for ENLS, complete with pro-forma revenue/costs reports to the Executive Committee quarterly

viii. Ethics Committee
1. Committee Charge: The Ethics Committee, working in cooperation with NCS leadership and the Executive Office, is responsible for broadly engaging the ethical needs of the NCS and its membership, making recommendations regarding appropriate ethical behavior, identifying
areas of ethical complexity which require additional research or debate to clarify the ethical implications, selecting appropriate ethics related content for inclusion in the Annual Meeting, educating members about ethical principles and practices within Neurocritical care through the development of guidelines and position statements when necessary, and to address all other ethical issues referred by the President, Executive Committee, and the BOD. In this role, The Ethics committee will serve as the conscience of the NCS and its membership.

2. Committee Composition: One Chair and one Chair-Elect, are appointed by the President of NCS. The President, in consultation with the Chair of the committee, appoints one BOD Director-at-large liaison and the remaining members of the committee. The composition of the Committee is intended to reflect as broadly as possible those constituencies that are well-represented in the Society's membership as well as those that are underrepresented. The Ethics Committee consists of 9-12 appointed members. Additional members could be invited to serve in a committee related specific task force or subcommittee as deemed necessary by the Ethics Committee.

3. Committee Responsibilities:
   a. Review any potential conflicts of interest that exist when gathering disclosures for key NCS Leaders, Board members, Committee appointed positions, and nominations for FNCS
   b. Provide the NCS leadership with advisory opinions in regards to a) violations of the COPC by members of the society, and b) disciplinary actions
   c. Provide advisory opinions to members of other committees (i.e. finance committee, etc.).
   d. Seek opportunities to educate the membership about ethics in the practice of Neurocritical care
   e. Developing (or at minimum reviewing) sessions at Annual Meeting pertaining to Medical Ethics
   f. Review and provide advisory opinions on position statements from the NCS that could potentially raise ethical discussion among members, media, or the public.
   g. Review and participate in guideline development when substantial ethical considerations are included
   h. The Ethics Committee could develop guidelines in relation to ethical issues at the request of the President, the EC, or the Guideline Committee or propose the development of such guidelines, which relate to ethical implications of standard practices of the Neurocritical Care profession
   i. Maintain, through a designated liaison, ties with Ethics Committees from other societies, and the Council of Medical Specialty Societies (CMSS)

ix. Finance Committee

1. Committee Charge: The Finance Committee will assist the BOD in discharging its responsibilities related to financial management, budgeting, and oversight.
2. Committee Composition: The Finance Committee shall consist of the Treasurer as Chair, the four officers, five members-at-large, and three Board members chosen by the President in consultation with the Treasurer.

4. Committee Responsibilities:
   a. Evaluate the budget as proposed by the management company before presentation to the Board at the Annual Meeting.
   b. Oversee the annual audit.
   c. Make recommendations regarding dues which will be approved by the Board.
   d. Work with the Annual Meeting Committee to determine the meeting fees which can be approved by the Executive Committee.
   e. Work with the Development Committee to determine fundraising priorities.
   f. Review monthly financial statements.

x. FNCS Credentials Committee:
   1. Committee Charge: The FNCS Credentialing Committee, working in cooperation with NCS leadership and the Executive Office, is responsible for reviewing all applications for Fellow of the NCS (FNCS) and deciding if applicants meet criteria for this designation. Subcommittees include: Selection of Candidates and Leadership/Professional Development.
   2. Committee Composition: The FNCS committee shall consist of a One Chair and one Chair-Elect, and 1 BOD Director-at-large liaison appointed by the President and will consist of 4-8 other appointed members. Additional members could be invited to serve in a committee related specific task force or subcommittee as deemed necessary by the Credentialing Committee.
   3. Committee Responsibilities:
      a. Reviewing all applications for FNCS
      b. Objective evaluation of applications and determination of applicants’ qualifications.

xi. Guidelines Committee
   1. Committee Charge: The NCS Guidelines Committee is 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. Committee Composition: The committee shall consist of two Co-Chairs and two co-chairs elect, appointed by the President, one BOD Director-at-large liaison, and 8-12 appointed members plus the chairs. Additional members could be invited to serve in a committee-related specific task force or subcommittee as deemed necessary by the Guidelines Committee.
   3. Committee Responsibilities:
      a. Determining topics suitable for guidelines development
      b. Identifying key experts in the chosen topic
      c. Facilitating the development of ‘best practice’ clinical management guidelines
d. Managing the review process

e. Organizing expert panels to address controversial issues as needed

f. Determining the appropriate means of distribution to society members through publications, the annual meeting, journals, and other electronic communications

i. The following outline should be used to review projects or programs for imprimatur:

4. Subcommittees to evaluate topics will be chosen by the chair formed and approved by the President. Subcommittees should be multidisciplinary whenever possible.

5. Guidelines and any final document will be approved by the Board by majority vote before publication.
6. Decisions to endorse clinical guidelines from other organizations will be determined by the Board.

xii. Membership Committee

1. Committee Charge: The Membership Committee, working in cooperation with NCS leadership and the Executive Office, is responsible for recruitment of society members and ensuring the retention of these members through the offering of services that meet their needs. The committee advises the President and the board on membership policies and oversees programs for the recruitment of new members and retention of existing members. The committee assists in interpreting, informing and implementing board policy as it relates to membership. The committee provides advice and recommendations relating to the development of each year’s operating plan and budget on matters related to the committee’s jurisdiction.

2. Committee Composition: Chaired by the Secretary of the Society and includes one BOD Director-at-large liaison, and at least 8 members of the society

3. Committee Responsibilities:
   a. Developing tools and strategies for increasing NCS’s membership in key areas as identified by the NCS leadership.
   b. Establish and implement goals of membership recruitment and retention plan.
   c. Recommending the means for making prospective and current members aware of the resources, services, and membership benefits available through NCS.
   d. Providing acknowledgement to new members and encouraging their participation in NCS activities.
   e. Engaging members in conversation through utilization of social media.
   f. Identifying members' and nonmembers' needs and perceptions, analyzing them, and making recommendations to the NCS leadership.
   g. Ensuring the successful outcomes as outlined in NCS’ strategic plan.
   h. Respond to disgruntled members' calls and solicit feedback for improvement.
   i. Greet and introduce new members and prospective members at the annual NCS meeting.
   j. Contact lapsed members to evaluate and respond to needs not being met by the Society.
   k. Determine and implement methods to recognize and reward members

xiii. Neurocritical Care Research Central Committee (NCRC)
1. NCRC Leadership Committee
   a. Committee Charge: The NCRC will establish research priorities and coordinate all research activities on behalf of NCS. NCRC reports to the NCS executive committee and the NCS BOD.
   b. Committee Composition: The NCRC leadership will have a NCRC Executive chairs (senior persons) with the co-chairs from each subcommittee. The NCRC Executive Chairs (two) will be appointed by the President and include two co-chairs from Research Operations Subcommittee, one chair from Grants Subcommittee, two co-chairs from the NCRN Operations Subcommittee, and one chair from the Annual Meeting Translational Science Session Subcommittee (liaisons to Annual Meeting Committee).
   c. Responsibilities:
      i. General oversight of all research related activities within the NCS
      ii. External Diplomat for research via the NCS

2. Research Operations Committee
   a. Composition: Will consist of two co-chairs and two co-chairs elect appointed by the NCRC Executive Chairs. General membership as nominated by incoming NCRN Chair for a four-year term in consultation with the NCS President. Terms will be two-years as chair-elect and two-years as co-chair. Committee reports to the NCRC Leadership and the NCS BOD.
   b. Responsibilities:
      i. Oversee operations of the NCRC
      ii. Recommend Annual Research Budget
      iii. Participate in 1 or more Subcommittee (Grants, NCRN, Annual Meeting)
      iv. Promote Research:
1. The chairs and members of this committee assume responsibility to promote neurocritical care research. A specific aim of this committee is to promote research within the membership of the NCS.

2. A key aspect of promoting research is the ability to mentor trainees and junior faculty. The members of this committee will be tasked to develop and promote active research mentorship within the NCS.

v. Representation of NCS to other scientific/professional societies, and promote collaboration and NCS representation in these other societies.

vi. Vetting of any and all surveys

1. This committee will develop a plan to vet research proposals and provide feedback when requested.

2. This committee will develop a plan to vet requests to reach out to the NCS membership for the purposes of research. This includes, but is not limited to requests to solicit members to participate as clinical research sites, solicit members to participate in or distribute surveys or questionnaires for the purpose of research.

3. Grants Sub-Committee

a. Composition: The sub-committee shall consist of a Chair (chair the review panel) and chair-elect appointed by the NCRC Executive Chairs. Chair/chair-elect will have a two-year term and will chair the review panel. Additionally, membership includes six to eight committee members with two year terms appointed by the NCRC Executive Chairs. The subcommittee reports to the NCRC and the NCS BOD.

b. Responsibilities:

i. Issue Research Funding Announcements (RFA)

1. Fellowship Grant and INCLINE grants (see Appendix IX)

ii. Create and manage a standardized application review process

iii. Conduct reviews of applications for all NCS research funding

1. Select additional ad-hoc reviewers, if necessary

2. Select Awardee(s), announced at annual meeting

iv. Review progress report

v. Determine quality of progress and recommend continued funding or recommend ending funding.

4. NCRN Operations Sub-Committee

a. Composition: The sub-committee shall consist of two Chairs and two chair-elects appointed by the NCRC Executive Chairs, and consist of two committee members of the NCRC Operations Committee. Chair reports to NCRC Executive Chairs.

b. Responsibilities:

i. Externally facing proponent for collaborative research
ii. Official Endorsements:
   1. Conduct reviews of external collaborations and issue a
      recommendation to the NCRC Executive Chair
   2. Write formal letters of endorsement that are signed by the NCRC
      Executive Chair

iii. Create a repository and sharing system for study protocols and IRB forms
    that facilitate multicenter research studies

iv. Create a data coordinating center for pilot trials

v. Conduct point prevalence multicenter studies similar to PRINCE

5. Annual Meeting and Translational Science Session Sub-Committee
   a. Composition: The sub-committee shall consist of a Chair and Chair-Elect appointed
      by the NCRN Executive Chairs, and four members of the Research Operations Sub-
      Committee. Chair reports to NCRC Executive Chair and NCS Vice President. Chair
      and Chair-Elect will serve as annual planning committee translational research
      liaisons.
   b. Responsibilities:
      i. Solicit ideas from the NCS Research Operations committee for scientific
         agenda
      ii. Create the annual scientific agenda for the annual meeting
      iii. Solicit invitations of speakers at the annual meeting, in collaboration with
           the NCS Vice President
      iv. Identify topics for translational sessions to be offered at the Annual
           Meeting
      v. Identify and invite speakers for translational science sessions
      vi. Identify process improvements for poster presentations
      vii. Select abstract reviewers
      viii. Select Poster Professors
      ix. Work with Annual Meeting committee to develop scoring criteria for travel
          grant and select grant awardees
      x. Perform final review of graded abstracts and select those to be
         accepted/rejected
      xi. Select winners of the Cristanne Wijman Young Investigator Award and Best
          Scientific Abstract Award
      xii. Work with Executive Office to draft instructions for: abstract submissions,
           late breaking submissions, and poster upload and poster professors.

6. NCRC Growth and Development Plan:

   Committee members will progress along a multi-year growth pathway:
This plan seeks to construct a cohesive structure for research and to make best use of research committee members through assigning them to specific sub-committees. In addition, this effort creates a position for a senior leader that can coalesce all of the activities for research and be the externally facing point of contact of the society. This organization seeks to formalize the role of the NCRN and to bring this entity into the formal structure of the NCS, with specific goals and responsibilities.

Each research committee member will be part of the new research operations subcommittee, and also part of one other sub-committee in order to perform the work necessary for each subcommittee. This will consolidate the activities and avoid having adhoc task forces performing important research related activities for the society.

The career development plan seeks to create an orderly succession plan that ensure institutional memory while simultaneously providing career growth for dedicated members who are making contributions to the society. Not all members will proceed to be a subcommittee chair or executive care, but this progression is open to all members and advancement based on merit and commitment.

d. Nominating Committee (refer to Section II BOD)
   1. Committee Charge: The Nominating Committee, working in cooperation with NCS leadership and the Executive Office, is responsible for ensuring the NCS BOD has multidisciplinary representation.
   2. Committee Composition: The Nominating Committee shall consist of a Chair who will be the Immediate Past President along with two members of the BOD (BOD) and two members-at-large. The two BOD members will be identified and selected by a BOD vote. The two members-at-large positions will be selected as follows: a) a Call for Volunteers is distributed to the NCS membership; and b) the BOD reviews applicants and votes on the two members-at-large.
      a. The Committee must have multidisciplinary representation and include at least one non-physician.
      b. No member of the Nominating Committee can stand for election while they are a member of the Nominating Committee. Terms for members of the Nominating Committee will be two years, and individual terms will be staggered so that a full rotation does not occur each year. In the first year, the rotations will be that half are assigned one year and the other half two years based on total votes.
   3. Committee Responsibilities:
      a. Identifies candidates for the Secretary position each year;
      b. Identifies seats open for nomination on the BOD each year;
      c. Ensures Board members serve four-year terms;
d. Oversees a Call for NCS BOD to solicit nominations from the membership;

e. Ensures that one candidate for each seat is nominated by the Nominating Committee;

f. Ensures one candidate for each seat is selected by the membership in a primary election;

g. Ensures that a slate and position statements of two candidates for each seat will be presented to the membership for a final vote; and

h. Announces new Board members during the NCS Annual Meeting.

xv. Quality Committee

1. Committee Charge: The Quality Metrics Committee will work with the NCS leadership and Executive Office to identify areas of potential improvement for delivery of quality healthcare for the neuro critically ill patient population, and means by which to measure progress in such areas.

2. Committee Composition: The committee shall consist of two Co-Chairs appointed by the Vice President, 1 BOD Director-at-large liaison, and other members will be chosen by the chair.

3. Committee Responsibilities

   a. Identify existing quality metrics that may be applicable to neurocritical care
   b. Develop strategies for development and application of Quality Metrics specifically targeted to neurocritical care
   c. Interface with the Guidelines Committee to advance development of evidence based guidelines including quality metrics
   d. Explore strategies for national standardization of neurocritical care quality care metrics
B. Sections

Sections are developed to serve NCS members with similar interests related to neurocritical care. Sections serve to advance the specialty through unique projects, advocacy, and educational programming. Chair-Elect of each section are appointed by the President for a 1year term with maximum of two terms. NCS members can choose to join any of the sections annually when renewing membership. One BOD Director At-Large will be assigned by the President on annual basis to serve as the Board Liaison.

Forming a Section: Members wishing to form a new section will complete an application including the development of a charge and gain signatures of 20 NCS members interesting in participating in the Section. Applications are approved by the BOD.

1. ADVANCED PRACTICE PROVIDERS SECTION
   i. Section Charge: The Advanced Practice Providers (APP) Section, working in cooperation with NCS leadership and the Executive Office, is to address the needs of Advanced Practice Providers within the Society and help them strengthen their positions at their institutions and enhance the education experience and quality of training.
   ii. Section Responsibilities:
       1. Coordinate the APP resources within NCS to improve quality patient care, contribute to meaningful research to improve clinical outcomes, and to advocate for the needs of patients and families affected by critical neurologic illness.
       2. Create opportunities for APP networking and communication.
       3. Facilitate APP collaboration with physician and nursing groups in the society.
       4. Develop educational forums and materials focused on the needs of APPs caring for neurocritical care patients.

2. FELLOWSHIP DIRECTORS SECTION
   i. Section Charge: The Fellowship Directors Section, working in cooperation with NCS leadership and the Executive Office, is to address the needs of fellowship directors and fellowship programs within the Society in order to help them strengthen their positions at their institutions as well as enhance the educational experience and quality of training for their fellows.
   ii. The Fellowship Directors Section, working in cooperation with NCS leadership and the Executive Office, is to address the needs of fellowship directors and fellowship programs within the Society in order to help them strengthen their positions at their institutions as well as enhance the educational experience and quality of training for their fellows.
   iii. Section Responsibilities:
       1. Create and maintain a current list of Fellowship programs, directors and other data such as the number of fellows in training, their backgrounds, etc.
       2. Develop a national educational program(s) or course(s) to help meet some of the fellowship milestones.

3. NURSING SECTION
i. Section Charge: The Nursing Section, working in cooperation with NCS leadership and the Executive Office, is responsible for growing, strengthening, and diversifying the nursing voice within NCS.

ii. Responsibilities:
   1. Better engaging current nursing members
   2. Diversifying membership
   3. Increasing nursing membership
   4. Encouraging nursing involvement in annual meeting
   5. Developing educational program for nurses
   6. Hosting successful nursing program during annual meeting

4. PHARMACY SECTION

i. Section Charge: The Pharmacy Section, working in cooperation with NCS leadership and the Executive Office, is responsible for growing, strengthening, and diversifying the pharmacy voice within NCS.

ii. Responsibilities:
   1. The Pharmacy Section is responsible for the following:
   2. Better engaging current pharmacy members
   3. Diversifying membership
   4. Increasing pharmacy membership
   5. Encouraging pharmacy involvement in the Annual Meeting
   6. Developing educational program and webinars for pharmacists
   7. Hosting successful pharmacy program during the Annual Meeting

5. RESIDENT/FELLOW SECTION

i. Section Charge: The Resident/Fellow Section, working in cooperation with NCS leadership and the Executive Office, is to promote active participation of residents and fellows, as well as trainees from all other fields, in all aspects of the NCS and to enhance the resources targeted towards trainees who will go on to work in neuro-ICUs, thereby enhancing exposure to the field of neurocritical care and the growth of the NCS.

ii. Section Responsibilities:
   1. Develop an outreach program to physician, pharmacy and nursing trainees
   2. Set up a mentorship program to enable trainee members to get guidance from experienced neuro intensivists for career planning, research and other interests
   3. Increase awareness of the trainees’ section of the neurocritical care journal, solicit more article submissions
   4. Increase outreach at conferences of other societies, such as the AAN and SCCM, via small group session, mentoring luncheons and social events.
   5. Continue to organize events at the NCS meetings targeted at trainees
   6. Improve trainee experiences on the NCS website, by providing information about RFC events, fellowship, rotation and job information and links.
   7. Identify ways to make it more affordable for trainees to attend the NCS meetings
   8. Assess awareness about ENLS and the brain death toolkit among non-neurology trainees
6. **WINCC (WOMEN IN NEUROCRITICAL CARE) SECTION**
   
i. **Charge**: To discuss how women can succeed in this emerging medical subspecialty.
   
   ii. **Section Responsibilities**:
   1. Organize an educational activity at the NCS Annual Meeting each year to explore and identify personal and professional issues related to succeeding in the specialty of neurocritical care.
   2. Coordinate year-round activities to meet the specific needs of women in neurocritical care.

7. **NCC DIRECTOR SECTION (TBD)**

8. **NON-NEUROLOGISTS/INTENSIVISTS SECTION (TBD)**

9. **GLOBAL PARTNER SECTION**

   i. **Charge**: The goal of the Global Partnership program is to enhance communication between all societies of the world interested in Neurocritical Care. The purpose of the Global Partner Section is to foster communication and idea sharing.

   ii. **Composition**: The Global Partner Section Chair is the NCS Past President. All Global Partners are encouraged to select one representative to the section.

   iii. **Responsibilities**:
   1. Foster communication with and among the Global Partners.
   2. Assess the needs of the Global Partners.
C. Task Forces

Task Forces may be developed to work on a specific task or project. Task Force charges will define scope, tenure, and composition will be defined to meet the specific task. The Executive Committee will approve the formation and charges for all Task Forces. Note: Current Task Forces are listed in the Appendix and updated annually.
A. Finance Committee

1. COMMITTEE CHARGE

i. The Finance Committee will assist the Board of Directors in discharging its responsibilities related to financial management, budgeting, and oversight.

See full details regarding the Finance Committee composition and responsibilities in Committee Policy.
B. Budget, Financial and Monitoring System Policies

1. POLICY STATEMENT
   i. NCS will maintain a solid and diversified financial base. Financial procedures will include, but not be limited to, the procedures listed below.

2. PROCEDURE
   i. The Treasurer will review all Society invoices over $2,500 on a weekly basis. Once approved, the management company will submit payment.
      1. The Treasurer and Executive Director will be authorized to sign checks or approve wire transfers of the Society.
      2. A budget will be formulated annually. NCS will operate with an annual budget in which operating revenues equal or exceed operating expenditures.
         a. Each officer, committee chair, and the Journal Editor will submit a budget request annually to the Finance Committee for consideration for inclusion in the budget.
         b. The budget may modify the budget during the year. The Executive Committee has the authority to approve budget exceptions less than $10,000.
   ii. Budget exceptions over $10,000 will be submitted in writing to the Board of Directors. Modifications will appear in the minutes of the respective meeting.
   iii. An annual audit will be performed at the end of each fiscal year. A report of the audit will be made to the general membership at the Annual Business Meeting (copies will be available to members upon request).
   iv. The management company will prepare monthly financial statements and financial documents to the NCS leadership as follows:
      1. Annual Audit Board of Directors, Finance Committee
      2. Full Monthly Statement & Analysis Board of Directors, Finance Committee
      3. Budget Updates Board of Directors, Finance Committee
   v. Board members will address their questions to the Treasurer and Executive Director.
C. Financial Reserve Policy

1. PURPOSE
   i. To explain the importance of financial reserves and provide guidelines for maintaining adequate association reserves.

2. DEFINITION OF RESERVES
   i. Reserves are defined as the accumulated net surpluses of the Society, i.e., the unrestricted net assets as reported on the audited financials. The primary purpose of the reserve is to ensure that the Society has adequate funds available in the event of an unanticipated catastrophic event or business situation that reduces reserves and threatens the financial viability of the Society. A secondary purpose of the reserve is to support special projects in the event a single or multiple strategic initiatives should surface outside of the annual budgeting process. This means that should a strategic initiative surface during the course of the year, a Board member may make a motion to the full Board of Directors to fund such an initiative. An initiative is defined as a chance for the Society to invest in an action that will benefit the Neurocritical Care Society membership.

3. FUNDING REQUIREMENTS
   i. The Society shall have a goal of maintaining reserves of no less than sixty five percent (65%) of annual budgeted expenses averaged over a three year period. In the event the goal of 65% of annual operating expenses is not achieved and reserves are less than 60% of average annual operating expenses, the Treasurer shall notify the Executive Committee of a variance. Where reserves are below 60%, the Neurocritical Care Society’s Executive Committee may direct the Executive Director to put a cap on any new-project funding or special initiative funding through the reserves. Also, this occurrence would trigger a process through which the Finance Committee would convene to recommend necessary and sufficient corrective actions to pursue a recovery plan by 1) using the next-year’s budget surplus sufficient to rebuild the reserves’ floor to a minimum of 60% of annually budgeted expenses, or 2) using a two-year budget cycle to rebuild the reserves’ floor to a minimum of 60% of annually budgeted expenses. In either case, the recommendations shall be presented to the Executive Committee for immediate action.

4. OPERATING BUDGET HISTORY OVER PAST FIVE YEARS (need to add last two years)

<table>
<thead>
<tr>
<th>Year</th>
<th>Budget</th>
<th>Note</th>
</tr>
</thead>
<tbody>
<tr>
<td>2013</td>
<td>$1,472,929</td>
<td>AVERAGE OPERATING BUDGET OVER PAST THREE YEARS: $1,596,967.67</td>
</tr>
<tr>
<td>2014</td>
<td>$1,728,278</td>
<td>RESERVES BASED ON 65% OF OPERATING BUDGET OVER THREE YEARS: $1,038,028.99</td>
</tr>
<tr>
<td>2015</td>
<td>$1,589,696</td>
<td>CURRENT INVESTED FUNDS PER 10/31/16 PRELIMINARY BALANCE SHEET: $1,553,723.24</td>
</tr>
<tr>
<td></td>
<td></td>
<td>STRATEGIC USE OR LONG RANGE INVESTMENT FUNDS: $515,694.25</td>
</tr>
</tbody>
</table>
D. Investment Policy

1. OPERATING RESERVE OBJECTIVE

The primary Operating Reserve Investment Objective is to optimize yield on NCS’s (NCS) short-term assets while maintaining adequate liquidity and without taking excessive principal risk. To achieve these objectives, NCS’s Operating Reserves will be allocated into three tiers designed to meet the specific safety, liquidity, and yield criteria. Those categories are: Operating Funds, Liquid Assets, and Fixed Income Assets, each of which is defined below.

i. Tier 1 — Operating Funds

The purpose of this tier is to assure adequate cash for operations. To achieve this goal, the Committee (acting through its designated agents) will match Tier 1 investment maturities to the organization’s cash flow and draw-down requirements. In no event, however, will Tier 1 maturities exceed 180 days.

ii. Tier 2 — Liquid Assets

The purpose of this tier is to provide a liquidity reserve above and beyond the cash for operations maintained in Tier 1. When investing liquid assets, the Advisor will emphasize safety, liquidity, and yield, in that order, utilizing investment grade securities with staggered maturities of 1 to 5 years to a maximum of 60 months. The weighted average duration of Tier 2 assets shall be in the 1.5-3-year range.

iii. Tier 3 — Fixed Income Assets

This portion of the operating reserve portfolio is designed to maximize return, consistent with safety of principal. Liquidity is a secondary objective utilizing investment grade securities. Maturities should be reasonably laddered out to a maximum of 120 months. The weighted average duration of Tier 3 assets shall in the 3 to 5-year range. It is acceptable for there to be some principal fluctuation and risk in this tier in an effort to earn a greater total return.

iv. Maintenance of Tiers

The Committee will periodically determine the allocations to each tier based on prior years’ cashflow and reserve levels as well as anticipated future spending. In making these allocations, they may rely on the cash flow projections of the designated financial officer. The initial amounts to be maintained in each tier are as follows:
OPERATING RESERVE TIERS

<table>
<thead>
<tr>
<th>Tier</th>
<th>Description</th>
<th>Primary Purpose</th>
<th>% of Account</th>
</tr>
</thead>
<tbody>
<tr>
<td>3</td>
<td>Fixed Income Assets</td>
<td>Incremental total return with safety</td>
<td>55%</td>
</tr>
<tr>
<td>2</td>
<td>Liquid Assets</td>
<td>Incremental yield with liquidity</td>
<td>25%</td>
</tr>
<tr>
<td>1</td>
<td>Operating Funds</td>
<td>Ready cash for 2.0 months of operations</td>
<td>All $’s in excess of Tiers 2 and 3, but never less than $300,000</td>
</tr>
</tbody>
</table>

2. CASH FLOW MANAGEMENT
   NCS’s designated financial officer will be responsible for managing NCS’s cash-flow and for communicating anticipated distributions and liquidity requirements in a timely manner to NCS’s Consultant and/or Investment Advisors who are managing the Tiers.

3. ASSET QUALITY
   Within the three tiers described previously, investments shall be made exclusively with the following securities, each of which shall conform to the stated quality requirements:

<table>
<thead>
<tr>
<th>INSTRUMENT</th>
<th>TIER TARGETS</th>
<th>QUALITY AND DIVERSIFICATION GUIDELINES</th>
<th>PERMITTED MATURITIES</th>
</tr>
</thead>
<tbody>
<tr>
<td>U.S. Treasury Securities</td>
<td>Tiers 1, 2, and 3</td>
<td>$500,000 per issue maximum; Treasuries and agencies should comprise at least 50% of portfolio</td>
<td>120 months or less, subject to more restrictive Tier Requirements</td>
</tr>
<tr>
<td>U.S. Government Agency Securities</td>
<td>Tiers 1, 2, and 3</td>
<td>$500,000 per issue maximum; Treasuries and agencies should comprise at least 50% of portfolio</td>
<td>120 months or less, subject to more restrictive Tier Requirements</td>
</tr>
<tr>
<td>U.S. Corporate Debt</td>
<td>Tiers 1 and 2</td>
<td>Minimum investment grade rating $500,000 per issuer maximum;</td>
<td>60 months or less, subject to more restrictive Tier Requirements</td>
</tr>
</tbody>
</table>

Approved March 2017
<table>
<thead>
<tr>
<th>Asset Type</th>
<th>Tier</th>
<th>Requirements</th>
</tr>
</thead>
<tbody>
<tr>
<td>U.S. Corporate Debt</td>
<td>Tier 3</td>
<td>Minimum investment grade rating $500,000 per issuer maximum; 120 months or less, subject to more restrictive Tier Requirements</td>
</tr>
<tr>
<td>Commercial Paper</td>
<td>Tiers 1 and 2</td>
<td>Rated P-1/A-1 $500,000 per issuer maximum; 270 days or less</td>
</tr>
<tr>
<td>Certificates of Deposit</td>
<td>Tiers 1 and 2</td>
<td>Institution rated A or better $100,000 per issuer maximum; FDIC insured 12 months or less (except for negotiable CD’s which are subject to the U.S. Corporate Debt restriction)</td>
</tr>
<tr>
<td>Money Market Funds</td>
<td>Tier 1</td>
<td>Government Only, No Retail or Institutional funds permitted. Daily demand</td>
</tr>
</tbody>
</table>
E. Investment Changes

1. POLICY STATEMENT

A solid and diversified financial base will be maintained by NCS. Reserve funds will be kept to assure fulfillment of obligations and to offset the effects of an operating reversal. These funds will be invested to maximize returns subject to prudent levels of risk.

i. The Treasurer and Executive Director, in consultation with the Society's selected investment manager, are responsible for managing investments consistent with the BOD-approved investment policy. It is the responsibility of these two individuals to keep the Executive Committee and the full BOD informed of all financial decisions and provide them with all information relative to the Society's financial health.

ii. All investments shall be reviewed 1) monthly by the Treasurer, Finance Committee, and Executive Director; and 2) quarterly by the Executive Committee. Any changes in the fund account investments must be authorized by at least two officers. The investment policy will be re-evaluated at least annually. Quarterly and annual reports should include comparisons to appropriate benchmarks.
F. General Reimbursement Policy Statement

The BOD may provide for the reimbursement of any director, officer or member for reasonable expenses incurred in carrying out the business of the Society. Expenses that have been budgeted will be reimbursed. Non-budgeted expenses must be approved by the NCS Executive Committee or BOD based on policy Budget, Financial and Monitoring System Policy.

1. PROCEDURE
   i. Committee chairs and members may be reimbursed for expenses associated with their respective committee meetings as determined through the Society’s annual budget process.
   ii. The Society will reimburse expenses incurred by any NCS member expressly related to Society business, given that such activity has been at the request of the BOD.
   iii. Questions about eligibility for funding/reimbursement should be directed to the Treasurer. If a dispute arises regarding reimbursement, the issue will be brought to the Executive Committee for decision.
   iv. Approved expenses incurred on behalf of the Society will be reimbursed as submitted using the NCS Reimbursement Request Form.
      1. All requests for reimbursement and receipts for expenses incurred during the approved travel should be submitted to NCS Headquarters within 30 days of the occurrence of the expense.
      2. NCS Headquarters will review requests and prepare reimbursement checks for the appropriate signature within one month of receipt of the completed form.
      3. In accordance with IRS requirements, original receipts for expenses of $25 or more must be submitted with the reimbursement request form.
   v. Miscellaneous Expenses (Postage, supplies, printing and copying)
      1. The receipts for each item submitted should be included with the reimbursement request form to NCS Headquarters. Copies of the receipts should be retained for personal records.
      2. Personal expense items will not be reimbursed.
   vi. Travel Expenses (Airfare, ground transportation and personal auto usage)
      1. Air transportation must be booked at coach class. Every attempt should be made to book reservations as early as possible. Volunteers will be responsible for any additional cost incurred for flights not booked by the advance reservation cut-off date set for the event and for flight changes after original booking.
      2. Ground transportation will be reimbursed only for travel to and from the airport of the departure city and between the airport and hotel of the city where the meeting is being held. Limousine type of service will not be reimbursed. All other cab fare is included in per diem.
      3. Personal auto use will be reimbursed at the IRS-established mileage rate and will be reimbursed only after the travel has been completed.
   vii. Hotel Expenses
1. Whenever possible, NCS will establish a master account with the hotel where a meeting is being held. Charges for room and tax, based on double occupancy, will be billed directly to NCS.

2. Board and committee members will be responsible for all additional charges to their rooms. The established per diem should be used to cover all other eligible expenses.

viii. Per Diem Expense

1. Board members, committee chairs and members will be reimbursed a per diem up to $75 per day unless otherwise determined by the Board

2. The number of days that NCS will reimburse a per diem for each meeting will be determined during the budgeting process.
G. Annual Meeting Invited Speaker, Guests, Planning Reimbursement Policy

1. PURPOSE
Define the stratified levels of financial support and procedures for administering such support for the invited speakers and professional volunteers of NCS. Volunteers give their time and talent for the benefit of NCS and thus should be supported. Provision of this support will inspire new leadership and volunteer involvement.

2. NCS VOLUNTEERS AND INVITED GUESTS
   i. Complimentary Registration: The Annual Meeting Planning Committee Co-Chair, Workshop directors and Honorary Members may elect to receive complimentary registration (not including pre-conference workshops and extra cost events). Note: NCS Officers reimbursement is covered in the BOD section.
   ii. Registration Discounted to 50%
       1. Annual Planning Committee Members (must participate in >50% of conference calls and attend the face-to-face meeting)
       2. Workshop Chairs, Scientific Committee Chairs, Practice Update Chairs, Session Moderators (Chairs) (must moderate at least two sessions), liaisons from the Development Committee, Nursing Committee, Pharmacy Committee, Research Committee, Resident and Fellows Committee, and the WINCC Committee.
   iii. Specialty Focus Corner chairs/faculty: No discounts or reimbursement

3. INVITED SPEAKER POLICY REIMBURSEMENT AND ANNUAL MEETING PLANNING PURPOSE
The NCS Executive Committee requests adherence to the budget when making faculty decisions. The NCS prohibits faculty or planning committee members from accepting additional payments or reimbursements, other than the guidelines outlined below, from any commercial interest for presentations during NCS CME activities. The NCS does not provide honoraria for member faculty. This portion defines the speaker reimbursement policy of NCS.
   i. Keynote: 100% off meeting registration, reimbursement of coach airfare, 2 nights at host hotel and $2,500 honorarium (only provided if requested), and transportation to and from hotel. Air transportation must be booked at the lowest available coach or economy rates through the NCS travel agent unless prior approval is provided. Air transportation maximum spending will be sent on an annual basis based on location. Allow for $1500 honorarium for one additional invited speaker.
   ii. Member speakers: 50% off meeting registration, no honorarium (anticipated participation: 50). EXCEPTION: Special consideration will be given to active members who reside in Group B countries for some assistance towards their travel expenses (not to exceed $500).
   iii. Workshop Faculty (speakers): 50% off meeting registration, no honorarium.
   iv. Non-Member speakers: Non-member speakers may be invited to present because of his/her unique expertise and experience in a specific topic. 100% off meeting registration, reimbursement of coach airfare 2 night’s hotel, no honorarium. Air transportation must be booked at the lowest available coach or economy rates 30 days in advance through the NCS travel agent unless prior approval is provided. Air transportation maximum spending will be sent on an annual basis based on location. Non-member speakers must be scheduled to speak in more than one session.
v. Non-Member International Speakers: 100% off meeting registration, reimbursement of coach airfare, 2 night’s hotel, unless additional needed due to speaking schedule with a maximum of three nights. Air transportation must be booked at the lowest available coach or economy rates through the NCS travel agent unless prior approval is provided. Air transportation maximum spending will be sent on an annual basis based on location. Nonmember speakers must be scheduled to speak in more than one session.

vi. Oral Session Speakers: No discounts or reimbursement

vii. NOTE: No other gratis meeting registration will be provided unless the request has been reviewed and approved by the Executive Committee.
H. Board of Director Reimbursement Policy

1. **PURPOSE**
   To define eligibility for NCS funding and guidelines for reimbursement of expenses incurred by the BOD on behalf of NCS.

2. **POLICY STATEMENT**
   The BOD may provide for the reimbursement of any director, officer, and Past Presidents for reasonable expenses incurred carrying out any business of the Society by giving of their time and talents in the governance of the Society. Expenses that have been budgeted will be reimbursed. Non-budgeted expenses must be approved according bylaws and policies.

3. **EXPENSES FOR IN-PERSON BOD MEETING OUTSIDE OF THE ANNUAL MEETING**
   Board Directors, Officers and Past Presidents will be reimbursed for the expenses delineated under Section III below for Board Meetings occurring outside of the Annual Meeting in accordance with the NCS travel procedures.

4. **ANNUAL MEETING REIMBURSEMENT**
   i. NCS Officers may elect to receive complimentary registration, round trip coach airfare, ground transportation, lodging, and per diem in accordance with the NCS travel procedures.
   ii. NCS Board Directors and Past Presidents will receive complimentary registration not including pre-conference workshops and extra cost.

5. **TRAVEL EXPENSE PROCEDURES**
   i. Air transportation must be booked at the lowest available coach or economy rates through the NCS travel agent unless prior approval is provided. Every attempt should be made to book reservations as early as possible. Volunteers will be responsible for any additional cost incurred for flights not booked by the advance reservation cut-off date set for the event and for flight changes after original booking.
   ii. Ground transportation will be reimbursed only for travel to and from the airport of the departure city and between the airport and hotel of the city where the meeting is being held. Limousine type of service will not be reimbursed. All other ground transportation fares are included in per diem.
   iii. Personal auto use will be reimbursed at the IRS-established mileage rate and will be reimbursed only after the travel has been completed. Rental autos will not be reimbursed.
   iv. Hotel occupancy expenses for the evening(s) when an in-person meeting occurs will be paid via the NCS master account. Consideration for an additional night will be given to Board members traveling over four hours. Whenever possible, NCS will establish a master account with the hotel where a meeting is being held. Charges for room and tax will be billed directly to NCS. Board members will be responsible for all additional charges to their rooms. The established per diem should be used to cover all other eligible expenses.
   v. Per Diem Expenses
      1. Board members will be reimbursed a per diem up to $75 per day unless otherwise determined by the Board.
2. The number of days that NCS will reimburse a per diem for each meeting will be determined during the budgeting process.

3. An expense report with itemized receipts must be completed to receive reimbursement.
I. Director/Officers Insurance/Conference Cancellation Policy

1. SUBJECT
   Liability, Directors and Officers, and Conference cancellation Insurance Policies

2. PURPOSE
   NCS will maintain insurance coverage at a level that protects the assets of the organization and the volunteer leaders.
   i. Process: The management company will research and solicit bids for general liability, Director and Office and conference cancellation coverage and present this to the Executive Committee and the Board.
J. Management Company: Needs and Contract Review

1. SUBJECT
Management Company

2. PURPOSE
i. To delineate the needs of the Society of a management company to help direct a contract between the Society and a management company.

ii. 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. Managing membership
   2. Maintaining and updating the website
   3. Proposing an annual budget
   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
   5. Assist in obtaining CE credit for the annual meeting that is in compliance with ACCME, ANCC and ACPE.
   6. Retaining an auditor to keep with fiscal compliance with regard to the Sarbanes Oxley law

3. PROCESS
i. The Board will annually evaluate and approve the annual fees

ii. The Executive Committee will annually evaluate the performance of the management company and make recommendations to the Board
   1. General Services Agreement should reviewed every three years
   2. Annual Fees - Annually
   3. Scope of Services – Annually
K. Whistleblower Policy

1. POLICY STATEMENT

NCS prides itself on its adherence to federal, state, and local laws and/or regulations, including business ethics policies. As such, even though it is not obligated to do so, the Organization has decided to voluntarily adopt a whistleblower protection policy. Pursuant to this policy, any employee who becomes aware of any violation of federal, state, or local law or regulation, including any financial wrongdoing, should immediately report the violation to the Executive Director to allow the organization to investigate and, if applicable, correct the situation or condition.

If the Executive Director is involved or is believed to be involved in the matter being reported, employees may, in the alternative, make a report to NCS’s legal counsel. NCS will conduct an investigation and take appropriate action within a reasonable period of time. Such complaints will be held in confidence to the extent the needs of the investigation permit.

“Financial wrongdoing” may include, but is not limited to:

i. questionable accounting practices;
ii. fraud or deliberate error in financial statements or recordkeeping;
iii. deficiencies of internal accounting controls;
iv. misrepresentations to company officers or the accounting department (including deviation from full reporting of financial conditions).

If any employee reports in good faith what the employee believes to be a violation of the law and/or financial wrongdoing to NCS, its legal counsel, or to a federal, state, or local agency or assists in an investigation concerning financial wrongdoing, it is NCS’s policy that there will be no retaliation taken against the employee.

Employees are reminded of the importance of keeping financial matters confidential. Employees with questions concerning the confidentiality or appropriateness of disclosure of particular information should contact the Executive Director.
SECTION VI: 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 electronically. Members may elect to receive a printed edition for a nominal cost.
2. The Society shall maintain a contract with the publisher. The current contract is for 2018-2020.
3. The Executive Committee with the Editor-in-Chief evaluates the contract with the publisher and makes recommendations to the BOD.
   i. Evaluates the progress/growth and revenues of the journal and makes recommendations
   ii. Evaluates the submission process and supports the Editor-in-Chief in increasing quality submissions.
4. Editor-in-Chief
   i. Shall be a 5-year term with an annual contract will be established and approved by the BOD.
   ii. Shall select the editorial board with changes as he/she deems necessary.
   iii. Shall submit an annual budget to NCS to support the operations and growth of the Journal.
5. Associate Editors
   i. The Editor-in-Chief may select associate editor(s) as he/she deems necessary within the budgetary guidelines.
   ii. Shall be a 1-year term with an annual contract established by the Editor-in-Chief.
SECTION VII: ANNUAL MEETING

A. General Policies and Procedures

1. PURPOSE
   To create a template whereby the Annual meeting will be conducted.
   i. The committee will ensure Continuing Medical Education, Nursing Education Credits, and Pharmacy Education Credits are offered to attendees
   ii. Location and Dates of the meeting:
       1. The meeting locations will be determined at least 3 years in advance.
       2. The BOD will be consulted regarding location and location rotation.
       3. The Executive Committee will determine options with the management company and make the final determination on the location.
   iii. Format of the meeting:
       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 BOD.
       2. Will be held per Bylaws once a year in the Fall.
       3. The Annual meeting will be at least 2 full days
       4. A pre-session meeting may be held as decided that may be 1 day and no more than 2 days 
       5. Meeting theme can be decided by the program committee and approved by the Executive Committee
   iv. Budget:
       1. Will be predetermined by the Finance Committee and Approved by the BOD.
       2. As noted below and by BOD resolution April 2009, the speakers’ travel and honoraria annual expenses will be capped at $20,000 annually.
   v. Invited Speakers
       1. As the program is decided by the program committee, speakers will be invited by the program chair the template letter
   vi. Speaker Reimbursement (see Annual Meeting Reimbursement Policy)
   vii. Speaker Stipends: Annual Meeting keynote note speakers will be paid an honorarium of $2500 and allow for a $1500 honorarium for one additional invited speaker.
   viii. Scientific Sessions
       1. The Chair of the Scientific Sessions will be determined by the President
       2. A call for abstracts will occur
          a. Only original work will be accepted
          b. A call for abstracts should be sent out earlier with no deadline extensions.
   ix. Evaluations
       1. Will be collected for CME purposes as well to help determine speakers and lectures for the following years
   x. External Endorsements of the AM:
1. The annual meeting committee will seek endorsements that do not cost money.

2. **ANNUAL MEETING COMMITTEE**
   
   Refer to Committee Section

3. **NCS INVITED SPEAKER POLICY FOR ANNUAL MEETING**
   
   See Finance Operations Section

4. **ROLES AND RESPONSIBILITIES**
   
   i. *Annual Meeting Committee Chair*
      
      1. Determine AMC members
      2. Lead/Facilitate AM Calls
      3. Accept/Reject session proposals from outside sources and committee
      4. Participate in discussions around theme, keynotes, types of programming and content
      5. Decide or delegate the selection of workshop chair/directors and session moderators and speakers
   
   ii. *Executive Office*: Logistics, contracts and execution is facilitated by Executive Office Staff.
   
   iii. *Moderator/Workshop Director/Speaker*: A session will have either a moderator, or workshop director depending on what has been previously determined by the Annual Meeting Committee Chair. Some of these roles may overlap.
   
      1. **Moderator**:
         
         a. Introduction of speakers
         b. Make sure speakers are starting/ending on time during the meeting presentation
         c. Additional point of contact for speakers regarding content
      
      2. **Workshop Director**:
         
         a. Responsible for suggesting speakers (no more than 4 and they must be NCS members)
            
            i. Please note: speakers must first be vetted and approved and will be invited by the Executive Office
         b. Responsible for creating timing/flow/schedule
         c. Responsible for communicating learning objectives and workshop description for program to AMC Chair, Workshop Chairs, speakers and Executive Office
         d. Point of contact for speakers regarding content, schedule, goals
         e. Responsible for finding workshops sponsors/in kind donations as needed
         f. Responsible for communicating any needs (AV, room set, materials, etc.) to the Executive Office by set deadlines.
         g. Responsible for providing any requested materials/info for Executive Office
      
      3. **Speaker**:
         
         a. Responsible for delivering an engaging, non-biased presentation on the topic selected
         b. Provide slides to Executive Office IN ADDITION to the speaker upload site
         c. Must fill out appropriate paperwork by communicated due dates
iv. **Member submitted session proposals:** A call for proposals from the general membership will occur in November. These session proposals will be ranked by members of the annual meeting committee. One session will be selected and slated for presentation at the annual meeting.

v. **Travel Grants:** Travel grant monies, when available, will be used to fund travel for residents, nurses, and pharmacists. A call for applications will occur in the spring. Applications will be reviewed by the Annual Meeting Committee.

vi. **Annual Business Meeting:** Reports and Standing Rules

vii. **Annual Report (Bylaws):** The Treasurer shall present at the Annual Meeting of members a report certified by a firm of independent public accountants selected by the board or verified by a majority of the directors, showing in appropriate detail the following:

1. A summary of the assets and liabilities, including the trust funds, of the Society as of the end of the last fiscal year.
   a. Any significant changes in assets and liabilities, including trust funds, during said fiscal period.
   b. A summary of the revenue or receipts of the Society, both unrestricted and restricted to particular purposes during said fiscal period.
   c. A summary of the expenses or disbursements of the Society for both general and restricted purposes, during said fiscal period.

2. For admission to the annual business meeting, members shall be required to wear the official badge issued at registration. Non-members of the Association may attend the meeting.

3. Members may speak and debate at the meeting (limited to 2 minutes).
   a. Limited to speak and debate no more than twice to the same question
   b. Members who have spoken once must wait to speak again until another member who wishes to address the meeting has spoken.
   c. All main motions offered by an individual shall be in writing, signed by the Person, have second motion, and then shall be sent to the President at the podium who will recognize the speaker.
B. Sessions/Format: Scientific, Leadership Development, Workshops, and General Sessions including Keynote

1. Template for meeting: See Appendix
   i. Preconference workshops over 1-2 days
   ii. Preconference educational sessions, such as Practice Update, Professionalism and Leadership, Research Mentorship and ENLS
   iii. General meeting sessions over 2-3 days, which will include the following designated sessions annually: translational science, guidelines (when appropriate), pro/con debate, women in neurocritical care (WINCC) and at least one member-submitted session.

2. Session Descriptions: Workshops, Lectures, pro/con debates, and research oral abstracts
C. Joint Sessions with other organizations

1. A request for a special session made to annual meeting chair to host a session at the NCS meeting and then reciprocate at the other organization’s annual meeting. These may or may not occur on an annual basis.
D. Awards Ceremony

1. *Best Abstract Award:* One award will be given at the Annual Meeting for the outstanding scientific abstract submitted by a member of the society.
   i. One must be a current member of the NCS at the time the abstract is submitted.
   ii. Previously presented abstracts will not be considered for the award.
   iii. The recipient is required to attend the AM.

2. *Cristanne Wijman Young Investigator Award:* One award will be given at the AM for the outstanding abstract submitted by a junior member of the society (student, resident, or fellow).
   i. One must be a current member of the NCS at the time the abstract is submitted.
   ii. One must be a high school, college, or health professional school student, resident or fellow at the time of submission to qualify for the award.
   iii. Only abstracts that are designated for consideration for the Young Investigator Award by the author during the submission process will be considered.
   iv. The recipient is required to attend the Annual Meeting.

3. *FNCS Awards:* awarded at the AM

4. *Fellowship Grant, Research Grant, and other Scholarly Awards:* awarded at the AM
E. Fundraising social events (Fun Run, Golf, Soccer, etc.)

1. Fundraising events will be held in conjunction with the AM for the purpose of raising funds for the NCS research program. All events will comply with local, state, and federal laws.
F. Specialty Focus Corners

1. Specialty group or section meetings held to provide an opportunity for members to gather and discuss issues related to practice.
G. Access for Disabled Persons at the Annual Meeting

1. PURPOSE
The NCS is committed to providing full and reasonable access to persons with disabilities at all of the Associations educational, business, and meeting sessions, and taking into consideration the limitations of the facilities where the meetings are held.
SECTION VIII: NCS WEBSITE/SOCIAL MEDIA AND EMAIL BLAST

PURPOSE

The NCS website, www.neurocriticalcare.org, NCS social media accounts, and email are a communication medium utilized by the Society for reaching out to members and nonmembers. The purpose of the NCS website is to provide information about the Society’s products and services, and to provide content and resources on the specialty of neurocritical care. Content posted to, contained within, linked to, or from the NCS website must always meet the standards of practice and ethics as defined in the NCS bylaws.

A. NCS Website

1. WEBSITE OVERSIGHT AND MAINTENANCE
   i. General content for the website and social media is monitored and updated by the Executive Office staff, volunteers and contracted employees as determined by project scope, need and status of various website sections.

2. EXECUTIVE OFFICE STAFF RESPONSIBILITIES
   i. Individual staff members will update content and maintain the site on a regular basis.
   ii. Staff will conduct an overall site effectiveness review annually. This will include a review of website optimization, site navigation links and flow between content management pages.

3. CONTENT GUIDELINES
   i. The NCS website is to provide information about the Society’s products and services, and to provide content and resources on the specialty of neurocritical care.
   ii. Practice-related content should relate to current neurocritical care issues and interests and should be primarily informational or service oriented.
   iii. Content related to meetings, conferences, and products not hosted or produced by NCS is limited that of NCS partners including endorsed conferences.
B. Social Media Best Practices and Guidelines

1. POSTING
   i. Only NCS staff and designated volunteer members can use social media to speak on behalf of NCS. NCS posts should not be posted from personal social media profiles. Each social media community has a designated administrator and is overseen by the NCS community manager. Posting approval is not required for these administrators.

2. MONITORING
   i. Social media community administrators should monitor communities daily to ensure that any SPAM or sales related posts are removed in a timely fashion, and that any comments or messages requiring a response are attended to promptly.

3. RESPONSE
   i. If a question is posted on a social media channel, the NCS community administrator or staff member should make every effort to respond to the inquiry within 24 hours. If the question is content-specific, the inquiry should be referred to an appropriate subject matter expert and the inquirer should be advised that an answer will be forthcoming.

4. CONNECTIONS
   i. NCS community administrators and staff should use discretion when accepting connection requests on social media channels. Staff and volunteers representing NCS are not obligated to connect or participate in groups on their personal networks.
   ii. When doing outreach through NCS social media channels (liking other pages, following Twitter accounts, etc.), every effort should be made to ensure that the organization or individual being reached out to is aligned with NCS and its mission.

5. FREQUENCY
   i. Content should be posted frequently enough to keep followers engaged and active, but not too often to become overwhelming or obnoxious to the community.
   ii. Frequency guidelines:
      1. Twitter: Posting several times a day is acceptable, but posters should refrain from repeating the same content or posting several times within a short time period (unless participating in a Twitter chat or other real time conversation).
      2. Facebook: Daily posts and shares are optimal but posting three times a week will show consistent activity and engagement.

6. CONTENT
   i. Content should seek to engage users, rather than simply broadcast the organization’s promotions. Following NCS’s plan, postings should be applicable to our target audience (but not exclusionary) and feature “hard” news and relevant content. Existing content owned by NCS will be repurposed as appropriate for social media outposts. NCS encourages community administrators and staff to repost information or respond to followers to encourage interaction on social media channels.

7. RESPONDING TO NEGATIVE POSTS
i. NCS community administrators should use good judgment when deciding if and how to best respond to negative comments. In general, negative comments (unless they are offensive or violate privacy laws) should not be removed. If a response is required, the NCS community administrator should respond to the comment or inquiry within 24 hours. If the question is content-specific, the inquiry should be referred to an appropriate subject matter expert and the inquirer should be advised that an answer will be forthcoming. If an administrator is uncertain of a response, the community manager and/or executive director should be consulted.

8. SOCIAL MEDIA GROUP ADMINISTRATION
i. Administrative or moderator rights to NCS social media platforms will be granted to staff or volunteers at the organization’s discretion. Administrators and moderators are expected to abide by the code of conduct outlined in this document. Status may be revoked by the community manager or executive director.

9. SOCIAL MEDIA PASSWORDS
i. Password and login credentials on all social media channels are to be managed by the NCS community manager. This information will be shared with staff or volunteer community administrators or those asked to post for a specific event, campaign or announcement. Passwords should be changed periodically to avoid being compromised. When a password is changed, it is the responsibility of the community administrator or community manager to notify others. The NCS community manager will maintain a document containing all passwords.

10. PROHIBITED CONTENT
i. Confidential/Proprietary: Any confidential or proprietary information of NCS should not be shared on social media platforms. This includes, but is not limited to, financial information, organization strategy or official announcements yet to be made (embargoed information).
ii. Copyrighted Information: Photos and content that NCS does not own may be shared but should not be shared or copied without proper acknowledgement. Third party copyrighted content should not be posted without written or legal permission.
iii. Administrators can refer directly to copyrighted material on websites or social media profiles that belong to the copyright holder.
iv. Personal Information: It is not advised to share any personal or contact information. If a volunteer or staff member chooses to do so, it is at their own discretion.

11. DISCLAIMERS
The following are proposed disclaimer messages to protect NCS in the social media space.

Facebook and Twitter: The purpose of this Facebook/Twitter page is to actively share information and engage in conversations around issues related to Neurocritical care healthcare delivery. NCS welcomes and encourages participation in discussions. However, we also reserve the right to remove inappropriate or offensive posts, along with those that may violate patient privacy laws. We ask you to use the following guidelines:

1. Please do not use offensive or hurtful language. Be respectful of other points of view, even if they differ from your own.
2. Do not mention names of patients, doctors or colleagues. All HIPAA regulations must be followed.

3. Refrain from posting self-promotional products or services.

4. NCS intends to share information that is useful to professionals in healthcare with specific interest in neurocritical Care. Content should not substitute for medical advice. If you are concerned about your health or have medical questions, please consult with your healthcare provider regarding your individual situation.

5. The information shared on the NCS page contains personal opinions and views of individuals. It is not necessarily condoned, approved or reflective of the official views of the NCS. NCS reserves the right to remove inappropriate or offensive posts, along with those that may violate privacy guidelines.
C. NCS Email Blast/SPAM Policy

1. The NCS has multiple options available for the distribution of information. These options include:
   i. Quarterly newsletter, the Currents
   ii. Bi-monthly journal, the Neurocritical Care Journal
   iii. Monthly President’s Message
   iv. Social media including Twitter and Facebook
   v. Publication on NCS website
   vi. Email Blasts

2. This Email Blast Policy has been developed to gain control over the large number of requests NCS receives for email distribution and to ensure NCS members do not opt out of receiving future email communication. It pertains only to those email blasts intended for distribution to the entire membership.

3. EMAIL BLAST POLICY
   i. Emails blasts are only allowed for Society-approved activities or those that are deemed necessary to help fulfill the mission of the Society. Whenever possible, alternate distribution formats should be utilized.
   ii. No email blasts will be considered for competing lines of business, i.e., educational products, publications/print media, lectures/symposia/webinars/meetings, etc.
   iii. Only meetings that are endorsed by the NCS AND provide ENLS, On-demand or publication purchase component will be considered for email blast distribution. NCS will consider providing exposure for other meeting requests using alternative distribution channels such as the Future Medical Meetings link on the NCS website.
   iv. Survey requests will be included in a monthly email prepared and approved by the Research Committee; NCS will provide exposure through alternative distribution channels including the monthly President’s Message and an Active Surveys link on the NCS website.
   v. Paid email blast requests received from non-profits and for-profits will be considered on a case-by-case basis and will be allowed only if the information does not compete with NCS’ mission or lines of business.
   vi. Society-approved activity email blasts do not require prior approval. All other requests must receive written authorization by the President or his/her designee in advance of sending the email blast if it is not directly related to an NCS approved activity.
   vii. No more than two email blasts will be sent in any given week. The Executive Office will be responsible for scheduling email blasts so they do not overlap. Preference will be given to time-sensitive and Society-approved activity emails.
   viii. Email blasts are one-time only; no reminder emails will be sent. Reminders will occur using alternate distribution channels. On occasion, reminders regarding NCS’ Annual Meeting or products may be sent.
SECTION IX: EXTERNAL RELATIONS - AMBASSADORS FOR NCS TO OTHER ORGANIZATIONS and BOARD REPRESENTATIVES

A. Purpose – External Ambassadors

1. NCS will need to develop and enter into external relationships with other organizations in order to fulfill the mission and vision. NCS may seek the relationship or other organizations may request liaisons of the NCS to their committees or organizations.
B. Definitions

1. TYPES OF RELATIONSHIPS BETWEEN NCS AND EXTERNAL SOURCES

Ambassador:

i. "The Ambassador program offers NCS leaders an opportunity to further the mission and vision of the society. Ambassadors may be appointed to develop relationships on behalf of the society with other organizations, or to serve as the NCS representative in the development of position statements, standards and other documents, participate in workshops or summits, research activities and work with regulatory agencies at the federal or state level.

ii. Ambassadors are appointed by the President. At the time of the appointment, the Ambassador will receive written communication outlining the Ambassador role, expected term of responsibility and any background information related to the appointment from the executive committee.

iii. NCS Ambassadors are expected to provide formal written updates to the Executive Committee annually or more frequently depending on scope of work or if critical issues arise.

iv. The ambassador will be provided a guide outlining the NCS Mission, Vision, structure (management and committees), strategic plan overview and summary of other key initiatives.

v. Ambassador terms will vary depending on appointment, and should not exceed 4 years. Ambassadors may be re-appointed if appropriate.

vi. The Ambassador role may require a memorandum of understanding (MOU) or some other documentation of scope and responsibilities between the partnering organizations. This will be evaluated on an ongoing basis by the President and Executive Director"

vii. Strategic Alliance: Ongoing, close relationship between NCS and another Professional society or organization that helps fulfill the mission and vision of NCS. Resources may be committed to this type of alliance

viii. Affiliation: A limited relationship, time or project in nature, between NCS and another organization that serves to benefit NCS members. Resources may be committed to this type of alliance

ix. Corporate Partnership: Complementary relationship between NCS and a Commercial organization that contributes to meeting the mission and vision of NCS.

2. LIAISON

i. Liaison: A representative appointed by the NCS President to establish ongoing communication and work between NCS and the other organization.

ii. Member Liaison: Must be a NCS member in good standing at the time of the appointment and throughout the terms of the service. Member liaison must submit annual reports to the BOD.

iii. Term: The term of NCS liaisons will be two years.
C. Process

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.

D. Reporting

Content for Ambassador Report

i. Neurocritical Care Society Ambassador Report
ii. Date:
iii. Name:
iv. NCS Ambassador to:
v. Description of Meeting/Event/Ongoing work: (what was the purpose and/or structure?)
vi. Approximate number of Attendees (if applicable):

vii. General attendee or society demographics:

viii. Were there key themes that emerged during the Ambassador activity?
ix. Were there any discussions that link to NCS mission, vision, strategic plan or other key initiatives? (Eg. list out strategic plan categories, committees)
x. Were there any key discussion or emerging trends that NCS should be aware of and monitor?
xii. Based on what you heard and/or learned as a liaison, do you recommend any follow-up or further work?
xiii. Did you come across any potential collaborative or advocacy opportunities for NCS?
xiv. In addition to what is discussed above, are there any other implications for NCS?
xv. Any additional comments?
E. Maintaining a current list

Review of Current External Liaison Spreadsheet

i. 47 organizations, reviewed to identify existing Ambassador Relationships, high priority organizations for Ambassador role or not needed at this time
ii. 3 current active Ambassadors
iii. Paul Nyquist (previously Daryl Gress) for the Brain Attack Coalition
iv. Unclear status of MOU
v. Sarah Livesay (previously Susan Yeager) for the WFCCN/WFNN
vi. No MOU needed, communication between NCS Executive Director and external organization
vii. Luke James to the UCNS
viii. Position becomes voting member of UCNS
ix. World Federations of Societies of Intensive and Critical Care Medicine
x. NCS has 4 votes at the bi-annual meeting. President and past-president attend, 2 additional representatives determined each meeting year

Review of Current External Liaison Spreadsheet

i. Priority organizations – to explore Ambassador Roles
ii. American Academy of Neurology (including multiple sections)
iii. AANS/Congress of Neurological Surgeons, Joint Section on Neurotrauma and Critical Care
iv. American Heart/Stroke Association
v. European Society of Intensive Care Medicine (ESICM)
vi. Society of Critical Care Medicine (including multiple sections)
vii. Recent meeting between leadership, expressed interest in appointing Ambassador
viii. American College of Critical Care Medicine
ix. American Association of Critical Care Nurses v. AANN
x. Recommend adding several organizations to the overall list to maintain contacts and prominent member list
xi. UCNS
xii. ABPN/ABMS/ACGME
xiii. The Joint Commission (including multiple Technical Advisory Panels/Committees)
xiv. American College of Clinical Pharmacy
xv. Center for Medicare and Medicaid Services (CMS)
Ambassador Operationalization

i. Continue to be appointed by the President
ii. Executive Committee may take an active role in communicating with Ambassador if delegated by the President
iii. Communication between organizations
iv. Scope of Ambassador role, deliverables
v. MOU or other written communication as needed
vi. This process should not duplicate or substitute for work done by Guidelines Committee to appoint writing members

Development of Ambassador Guide

1. Through these policies and procedures as an addendum, as a new request is accepted, the President and Executive Director shall be responsible for updating a list of individuals.
   i. Brain Attack Coalition
   iii. Brain Death Writing Committee requested by AANS:
   iv. Post-Cardiac Arrest with ACLS
   v. International Cardiac Arrest Registry (INCAR)
   vi. Medical Director’s Council of the Association of Organ Procurement Organizations:
   vii. World Federation of Critical Care Nurses:
   viii. United Council for Neurologic Subspecialties:
   ix. NIH Center for Scientific Review Volunteer Reviewers
   x. European Society of Intensive Care Medicine

2. SOCIETIES
   i. Society of Neuroscience in Anesthesiology and Critical Care,
   ii. American Association of Neurological Surgeons and Congress of Neurological Surgeons from the Joint Sections of
   iii. Neurotrauma and Critical Care,
   iv. Cerebrovascular
   v. Pediatrics
   vi. Society of Critical Care Medicine sections of
      1. Neurology
      2. Pediatrics
      3. Pharmacy
BOD Representatives to NCS Committees

A. Definition and Roles
   a. The NCS BOD representative to NCS committees is a supportive role to ensure committee work is in alignment with NCS mission, vision, priorities and strategic plan.
   b. The NCS BOD representative should meet with co-chairs at least every 6 months to determine the appropriate support for the committee.
   c. May include attending regular committee meetings, available for consultation as needed when issues arise, etc.
   d. The NCS BOD representative in coordination with chairs should make the BOD aware of any concerns that cannot be resolved at the committee level.
   e. The NCS BOD representative should provide chairs and committee guidance (along with NCS executive office staff) on key NCS processes (eg. proposing a new product, annual budgeting, goal setting, updating committee dashboard, etc.)
   f. The NCS BOD representative will support committee chairs in budgeting and navigating budget process. The BOD representative on should be able to speak to committee-related budget requests during BOD budget discussions.
   g. Continue to be appointed annually by the President, close involvement of secretary.
   h. Process to be managed by the NCS staff and the membership committee.
F. Endorsements of meetings of other groups

1. **PURPOSE**
   i. Requests are made to the NCS for endorsement of a meeting. This policy is to determine the appropriateness of the request as it pertains to the mission of the Society.

2. **PROCESS:** Endorsement of other organizations’ meetings
   i. 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.
   ii. The NCS will require from the course directors: topics, speakers and their sponsors, date and location, target audience
   iii. 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.
   iv. The Executive committee would set the fee, but in general $500 seemed an appropriate amount; in lieu of the fee, the NCS should request one free registration and a booth at the meeting if applicable.
G. NCS-Sponsored Regional Course of NCS

1. PURPOSE
   i. 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. PROCESS FOR SPONSORSHIP
   i. Proposals for regional meetings must be submitted to the Executive Committee. Proposals must include meeting date, location, description of educational content, involvement of NCS members, and resources requested from NCS. Proposals must be submitted at least six months prior to the meeting.
SECTION X: REGIONALS CHAPTERS

A. Middle East/Africa Chapter (Established 2018)

Selection of Regional Chair (NCS BOD Representative for the Chapter)
1. The Chair will be chosen by the Neurocritical Care-Middle East/North Africa (NCC-MENA) Chapter and the name will be forwarded by the International Pan Arab Critical Care Medicine Society (IPACCMS), which represents all countries of the region, to the NCS.
2. The next Chair shall be proposed by IPACCMS, as forwarded by the NCC-MENA Chapter. If more than one member is proposed to the NCC-MENA Chapter for IPACCMS by the various country members in the Chapter, all members from the chapter will vote to determine the Chair.
3. If there are no objections by the regional chapter leaders, the proposed Chair’s name will be forwarded to the NCS office to be reviewed by the Executive Committee and then placed on the ballot for approval by the BOD in June each year.
4. The Chair will serve a 2-year term (renewable) beginning at the NCS Annual Meeting that year.
5. The NCS BOD Chair representing the Middle East/Africa can serve two consecutive terms.
6. The policies of selecting the Regional Chair will be reviewed every 5 years to ensure sustainability.

Selection of Annual NCS Regional Meeting Location
1. The location of the annual NCS Regional Meeting will be chosen during the annual open meeting of the NCC-MENA Chapter for IPACCMS using the criterion of number of NCS members in each country.
2. The next location shall be defined by the country having the largest number of members. Countries may decline to host the meeting.
3. The host country’s leaders will determine the most appropriate location within their country when there are multiple organizations within one country.

Regional Chair Responsibilities:
1. Compilation and updating the e-mail list of regional chapter global partner members.
2. Establish regular contact by e-mail/NCS Global Section member portal and consider having an audio or videoconference every month or every 2 months.
3. Assist the country hosting the annual regional chapter meeting with logistics.
4. Update the regional chapter global partner leaders’ contact information annually and as new organizations become partners.
5. Oversee the process for Chair selection and proposal to the NCS BOD.
NCS Responsibilities:

1. The NCS President and Past President, or their representatives, will be present at each regional meeting and sponsored by NCS (up to $5000).
2. The Global Section Chair(s) will work with the Regional Chairs to develop the program and identify sponsorship for the meeting, if needed.
3. The Neurocritical Care Journal editorial staff encourage publication of “proceedings articles” from each meeting. These manuscripts would be peer-reviewed, potentially citable, and highlight key material presented, keynote addresses, pro-con session, etc. There are two additional options for publication now available, Brief Communications and Special Articles, which can be considered for these manuscripts.

Chair Designee based on above policy: Regional Chair will officially begin their term at the NCS Annual Meeting each year:

3. Any new partners added based on size of organization

NCS Regional Chapter Meeting Locations (may be declined by host country/partner) Meetings must not conflict with the Annual NCS meeting.

1. 2019 - Dubai
2. 2020 - Dubai
3. Any new partners added base on size of organization
<table>
<thead>
<tr>
<th>Organization Name</th>
<th>Abbreviation</th>
<th>Location</th>
<th>Website</th>
<th># of Chapters Members</th>
<th>President Email</th>
<th>Organization Contact Name</th>
<th>Year Founded</th>
<th>Membership Code</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>International Pan Arab Critical Care Medicine Society</td>
<td>PMCCMS</td>
<td>Middle East &amp; North Africa</td>
<td>No website currently</td>
<td>N/A</td>
<td>JI Al-Hussain Al-Rahim</td>
<td>Dr. Nasir Al-Rahim</td>
<td>2011</td>
<td>N/A</td>
<td>complete</td>
</tr>
<tr>
<td>--------------------------------------------------------</td>
<td>--------------</td>
<td>-----------------</td>
<td>--------------------------</td>
<td>-----------------------</td>
<td>----------------------------------</td>
<td>--------------------------</td>
<td>--------------</td>
<td>-----------------</td>
<td>---------</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>


B. Asia/Oceanian Chapter (Established 2017)

Selection of Regional Chair (NCS BOD Representative for the Chapter)
1. The Chair will be selected using the criterion of date of global partnership for organizations within the same country.
2. The next Chair shall be proposed by the country (not society) having the largest number of NCS members, without repeating it, until all countries have rotated. If more than one member is proposed by the country, all members from the chapter will vote to determine the Chair.
3. If there are no objections by the regional chapter leaders, the proposed Chair’s name will be forwarded to the NCS office to be reviewed by the Executive Committee and then placed on the ballot for approval for BOD in June each year.
4. The Chair will serve a 2 year term beginning at the NCS Annual Meeting that year.

Selection of Annual Regional Chapter Meeting Location
1. The location of the annual regional chapter meeting will be chosen using the criterion of date of global partnership for organizations within the same country.
2. Subsequent meeting locations will be selected based on the country in which NCS global partnerships were established first, and then sequentially, without repeating the country. Countries may decline to host the meeting.
3. The host country’s leaders will determine the most appropriate location within their country when there are multiple organizations within one country.
   a. If a decision cannot be made among the organizations, then the date of global partnership will determine which organization will host the meeting.
   b. There will be equal number of official representatives from each partner assigned to the organizing committee.
4. A partner may request to change their assigned meeting year. This will be discussed with the chapter chair and leadership committee to determine if all are in agreement with the change. The leadership committee will decide how the location order will change based on each individual request.

Regional Chair Responsibilities:
1. Compilation and updating the e-mail list of regional chapter global partner members.
2. Establish regular contact by e-mail/NCS Global Section member portal and consider having an audio or videoconference every month or every 2 months.
3. Assist the country hosting the annual regional chapter meeting with logistics.
4. Update the regional chapter global partner leaders’ contact information annually and as new organizations become partners.
5. Oversee the process for Chair selection and proposal to the NCS BOD.

NCS Responsibilities:
1. The NCS President and Past President, or their representatives, will be present at each regional meeting and sponsored by NCS (up to $5000).
2. The Global Section Chair(s) will work with the Regional Chairs to develop the program and identify sponsorship for the meeting, if needed.
3. The Neurocritical Care Journal editorial staff encourage publication of “proceedings articles” from each meeting. These manuscripts would be peer-reviewed, potentially citable, and highlight key material presented, keynote addresses, pro-con session, etc. There are two additional options for publication now available, Brief Communications and Special Articles, which can be considered for these manuscripts.

Chair Designee based on above policy: Regional Chair will officially begin their term at the NCS Annual Meeting each year:

3. Nepal: 2021-2023 (needs confirmation)
4. India: 2023-2025 (needs confirmation)
5. Australia: 2025-2027 (needs confirmation)
6. Philippines: 2027-2029 (needs confirmation)
7. Singapore: 2029-2031 (needs confirmation)
8. China: 2031-2033 (needs confirmation)
9. Any new partners added based on date of joining NCS

NCS Regional Chapter Meeting Locations (may be declined by host country/partner) Meetings must not conflict with the Annual NCS meeting.

1. Korea – 2018
2. Japan – 2019
3. Nepal - DECLINED
4. India – 2020 – ISCCM will host and partner with ISNACC and SNCC-I; stand alone meeting – date TBD
5. Australia – 2021 (needs confirmation)
6. Philippines - 2022 (needs confirmation)
7. Singapore - 2023 (needs confirmation)
8. China - 2024 (needs confirmation)
9. Any new partners added base on size of organization
<table>
<thead>
<tr>
<th>Organization Name</th>
<th>Abbrev.</th>
<th>Location</th>
<th>Website</th>
<th># of Chapter Mbrs</th>
<th># NCS Mbrs</th>
<th>Society President</th>
<th>Society President Email</th>
<th>Organizational Contact</th>
<th>Organizational Contact Email</th>
<th>Year Added</th>
<th>Mbr Dis Code</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Korean Neurocritical Care Society</td>
<td>KNCS</td>
<td>Korea</td>
<td><a href="http://www.neurocriticalcare.or.kr">www.neurocriticalcare.or.kr</a></td>
<td>18</td>
<td>583</td>
<td>Jaehyun Park</td>
<td><a href="mailto:sangbae1378@naver.com">sangbae1378@naver.com</a></td>
<td>Gentile Shrestha</td>
<td><a href="mailto:gentileshrestha@korea.org">gentileshrestha@korea.org</a></td>
<td>11/3/2011</td>
<td></td>
<td></td>
</tr>
<tr>
<td>The Japan Society of Neurological Emergencies and Critical Care</td>
<td>JNE</td>
<td>Japan</td>
<td><a href="http://icne.umin.ne.jp/">http://icne.umin.ne.jp/</a></td>
<td>33</td>
<td>350</td>
<td>Hiroyuki Yokota</td>
<td><a href="mailto:nagay001@lxsw.npa.jp">nagay001@lxsw.npa.jp</a></td>
<td>Masao Nagayama</td>
<td><a href="mailto:nagay001@lxsw.npa.jp">nagay001@lxsw.npa.jp</a></td>
<td>2013</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Nepalese Society of Critical Care Medicine</td>
<td>NSCC</td>
<td>Nepal</td>
<td><a href="http://www.nscmc.org">www.nscmc.org</a></td>
<td>14</td>
<td>106</td>
<td>Gentile Shrestha</td>
<td><a href="mailto:glesunder@hot.com">glesunder@hot.com</a></td>
<td>Subhal Dixit</td>
<td><a href="mailto:yatinmehta@hot.com">yatinmehta@hot.com</a></td>
<td>3/27/2015</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Indian Society of Critical Care Medicine</td>
<td>ISCC</td>
<td>India</td>
<td><a href="http://www.isccm.org/">http://www.isccm.org/</a></td>
<td>80</td>
<td>80</td>
<td>Subhal Dixit</td>
<td><a href="mailto:yatinmehta@hot.com">yatinmehta@hot.com</a></td>
<td>Kapil Zirpe</td>
<td><a href="mailto:yatinmehta@hot.com">yatinmehta@hot.com</a></td>
<td>7/29/2015</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Indian Society of Neuroanaesthesiology and Critical Care</td>
<td>ISNACC</td>
<td>India</td>
<td><a href="http://www.isnacc.org/">http://www.isnacc.org/</a></td>
<td>80</td>
<td>624</td>
<td>Shashi Srivastava</td>
<td><a href="mailto:ponniah_vmgm@healthcare.in">ponniah_vmgm@healthcare.in</a></td>
<td>Ponniah Vanamoorthy</td>
<td><a href="mailto:ponniah_vmgm@healthcare.in">ponniah_vmgm@healthcare.in</a></td>
<td>LOI 11/20/15</td>
<td></td>
<td></td>
</tr>
<tr>
<td>College of Intensive Care Medicine of Australia and New Zealand</td>
<td>CICM</td>
<td>Australia</td>
<td><a href="https://www.cicm.org.au/">https://www.cicm.org.au/</a></td>
<td>33</td>
<td>33</td>
<td>Raymon Raper</td>
<td><a href="mailto:andrew@udy.com">andrew@udy.com</a></td>
<td>Andrew Udy</td>
<td><a href="mailto:andrew@udy.com">andrew@udy.com</a></td>
<td>LOI 4/5/17</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Philippine Neurocritical Care Society</td>
<td>PNCS</td>
<td>Philippines</td>
<td>under construction</td>
<td>36</td>
<td>36</td>
<td>Geraldine Siena L</td>
<td><a href="mailto:gsmmariano@gmail.com">gsmmariano@gmail.com</a></td>
<td>Geraldine Siena L</td>
<td><a href="mailto:gsmmariano@gmail.com">gsmmariano@gmail.com</a></td>
<td>9/15/2017</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Society of Intensive Care Medicine Singapore</td>
<td>SICM</td>
<td>Singapore</td>
<td><a href="https://sicm.org.sg/">https://sicm.org.sg/</a></td>
<td>161</td>
<td>8</td>
<td>Jensen Ng</td>
<td><a href="mailto:Jensen_NG@ttsh.com.sg">Jensen_NG@ttsh.com.sg</a></td>
<td>Jensen Ng</td>
<td><a href="mailto:Jensen_NG@ttsh.com.sg">Jensen_NG@ttsh.com.sg</a></td>
<td>11/30/2018</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Society of Neurocritical Care</td>
<td>SNCC</td>
<td>India</td>
<td><a href="http://www.sncc.co.in">www.sncc.co.in</a></td>
<td>34</td>
<td>34</td>
<td>Harsh Sapra</td>
<td><a href="mailto:harshsapra@hotmail.com">harshsapra@hotmail.com</a></td>
<td>Harsh Sapra</td>
<td><a href="mailto:harshsapra@hotmail.com">harshsapra@hotmail.com</a></td>
<td>8/17/2018</td>
<td></td>
<td></td>
</tr>
<tr>
<td>The Neurocritical Care Committee of the Chinese Society of Neurology Neurocritical Care Committee of China Neurologist Association</td>
<td>China</td>
<td>China</td>
<td></td>
<td>12</td>
<td>12</td>
<td>Su Yingying</td>
<td><a href="mailto:suyingying@fwhc.ccmu.edu.cn">suyingying@fwhc.ccmu.edu.cn</a></td>
<td>Su Yingying</td>
<td><a href="mailto:suyingying@fwhc.ccmu.edu.cn">suyingying@fwhc.ccmu.edu.cn</a></td>
<td>2019</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
C. North/Central America Chapter (Established 2019)

Selection of Regional Chair (NCS BOD Representative for the Chapter)
1. The Chair will be chosen using the criterion of number of members in each country.
2. The next Chair shall be proposed by the country (not society) having the largest number of NCS members, without repeating it, until all countries have rotated. If more than one member is proposed by the country, all members from the chapter will vote to determine the Chair.
3. If there are no objections by the regional chapter leaders, the proposed Chair’s name will be forwarded to the NCS office to be reviewed by the Executive Committee and then placed on the ballot for approval for BOD in June each year.
4. The Chair will serve a 2 year term beginning at the NCS Annual Meeting that year.

Selection of Annual Regional Chapter Meeting Location
1. The location of the annual regional chapter meeting will be chosen using the criterion of number of NCS members in each country.
2. The next location shall be defined by the country having the largest number of NCS members, without repeating it. Countries may decline to host the meeting.
3. The host country’s leaders will determine the most appropriate location within their country when there are multiple organizations within one country.

Regional Chair Responsibilities:
1. Compilation and updating the e-mail list of regional chapter global partner members.
2. Establish regular contact by e-mail/NCS Global Section member portal and consider having an audio or videoconference every month or every 2 months.
3. Assist the country hosting the annual regional chapter meeting with logistics.
4. Update the regional chapter global partner leaders’ contact information annually and as new organizations become partners.
5. Oversee the process for Chair selection and proposal to the NCS BOD.

NCS Responsibilities:
1. The NCS President and Past President, or their representatives, will be present at each regional meeting and sponsored by NCS (up to $5000).
2. The Global Section Chair(s) will work with the Regional Chairs to develop the program and identify sponsorship for the meeting, if needed.
3. The Neurocritical Care Journal editorial staff encourage publication of “proceedings articles" from each meeting. These manuscripts would be peer-reviewed, potentially citable, and highlight key material presented, keynote addresses, pro-con session, etc. There are two additional options for publication now available, Brief Communications and Special Articles, which can be considered for these manuscripts.
Chair Designee based on above policy. Regional Chair will officially begin their term at the NCS Annual Meeting each year:

1. Canada: 2019 – 2021: Jeff Singh
2. Panama: 2021 - 2023
3. Mexico: 2023 - 2025
4. Guatemala: 2025 - 2027
5. Any new partners added based on size of organization

NCS Regional Chapter Meeting Locations (may be declined by host country/partner) Meetings must not conflict with the Annual NCS meeting.

1. 2019 - Canada
2. 2020 – Panama (annual meeting will be in Orlando this year)
3. 2021 - Mexico
4. 2022 - Guatemala
5. Any new partners added base on size of organization

<table>
<thead>
<tr>
<th>Organization Name</th>
<th>Abbreviation</th>
<th>Location</th>
<th>Website</th>
<th># of Chapter Members</th>
<th>NCS Men</th>
<th>Society President</th>
<th>Society President Email</th>
<th>Organization Contact Name</th>
<th>Organization Contact Email</th>
<th>Year Added</th>
<th>Member Discount Code</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Canadian Neurocritical Care Society</td>
<td>CNCS</td>
<td>Canada</td>
<td><a href="http://www.neurocritica.org">http://www.neurocritica.org</a></td>
<td>100</td>
<td>40</td>
<td>Jeffrey Singh</td>
<td><a href="mailto:jeffrey.singh@gmail.ca">jeffrey.singh@gmail.ca</a></td>
<td></td>
<td></td>
<td>2019</td>
<td>CNCS</td>
<td>complete</td>
</tr>
<tr>
<td>CMMIACCDMCC</td>
<td>CMMIACCDMCC</td>
<td>Mexico</td>
<td><a href="http://www.cmmiacc.org.mx">http://www.cmmiacc.org.mx</a></td>
<td>100</td>
<td>7</td>
<td>Dr. E. Luis Ruiz-Cruz</td>
<td><a href="mailto:luisruiz@urfcc.org">luisruiz@urfcc.org</a></td>
<td><a href="mailto:drluisruiz@urfcc.org">drluisruiz@urfcc.org</a></td>
<td></td>
<td>2015</td>
<td>CMMIACCDMCC</td>
<td>complete</td>
</tr>
<tr>
<td>Guatemala Chapter of Neurocritical Care Society</td>
<td>Guatemala</td>
<td>Guatemala</td>
<td>no website currently</td>
<td>50</td>
<td>4</td>
<td>Oscar Sanchez</td>
<td><a href="mailto:oscar.sanchez@gmail.com">oscar.sanchez@gmail.com</a></td>
<td></td>
<td></td>
<td>2012</td>
<td>Pending</td>
<td>new contact</td>
</tr>
<tr>
<td>Pacifica Chapter of Neurocritical Care Society</td>
<td>Panama</td>
<td>Panama</td>
<td>no website currently</td>
<td>0</td>
<td>0</td>
<td>Guadalupe Castillo Almago</td>
<td><a href="mailto:guadalupecastillo@gmail.com">guadalupecastillo@gmail.com</a></td>
<td></td>
<td></td>
<td>2012</td>
<td>Pending</td>
<td>new contact</td>
</tr>
</tbody>
</table>
D. South American Chapter (Established 2017)

Selection of Regional Chair (NCS BOD Representative for the Chapter)
1. The Chair will be chosen using the criterion of number of NCS members in each country.
2. The next Chair shall be proposed by the country (not society) having the largest number of NCS members, without repeating it, until all countries have rotated. If more than one member is proposed by the country, all members from the chapter will vote to determine the Chair.
3. If there are no objections by the regional chapter leaders, the proposed Chair’s name will be forwarded to the NCS office to be reviewed by the Executive Committee and then placed on the ballot for approval for BOD in June each year.
4. The Chair will serve a 2 year term beginning at the NCS Annual Meeting that year.

Selection of Annual Regional Chapter Meeting Location
1. The location of the annual regional chapter meeting will be chosen by the chapter members.
2. The host country’s leaders will determine the most appropriate location within their country when there are multiple organizations within one country.

Regional Chair Responsibilities:
1. Compilation and updating the e-mail list of regional chapter global partner members.
2. Establish regular contact by e-mail/NCS Global Section member portal and consider having an audio or videconference every month or every 2 months.
3. Assist the country hosting the annual regional chapter meeting with logistics.
4. Update the regional chapter global partner leaders’ contact information annually and as new organizations become partners.
5. Oversee the process for Chair selection and proposal to the NCS BOD.

NCS Responsibilities:
1. The NCS President and Past President, or their representatives, will be present at each regional meeting and sponsored by NCS (up to $5000).
2. The Global Section Chair(s) will work with the Regional Chairs to develop the program and identify sponsorship for the meeting, if needed.
3. The Neurocritical Care Journal editorial staff encourage publication of “proceedings articles" from each meeting. These manuscripts would be peer-reviewed, potentially citable, and highlight key material presented, keynote addresses, pro-con session, etc. There are two additional options for publication now available, Brief Communications and Special Articles, which can be considered for these manuscripts.
Chair Designee based on above policy: Regional Chair will officially begin their term at the NCS Annual Meeting each year:

2. Chile: 2019 – 2021: Danilo Fischer
3. Colombia: 2021 – 2023
4. Argentina: 2023 – 2025
5. Ecuador: 2025 – 2027 (dependent on partnership)
6. Any new partners added based on size of organization

NCS Regional Chapter Meeting Locations (may be declined by host country/partner) Meetings must not conflict with the Annual NCS meeting.

1. 2017 - Ecuador
2. 2018 – Brazil
3. 2019 - Argentina
4. 2020 – Colombia
5. 2021 – Chile
6. Any new partners added based on size of organization
A. Educational Product Development Approval Process

1. Requesting committee or author completes and submits the “Request for New Educational Product” form to the Director of Education (Appendix A)

2. Director of Education submits the “Request for New Educational Product” form to the Educational Product Committee (EPC) Co-Chairs for review and approval

3. Upon approval, EPC members review the “Request for New Educational Product” form during standing monthly call
   i. If available, a representative from the requesting committee, or author, joins the EPC call to discuss the proposal in detail

4. The EPC votes to approve the development of the product

5. The EPC sends product details, including the initial proposal, to the EC for approval to move forward with the development of a detailed proposal

6. Upon approval, the Co-Chairs and Director of Education put together a draft “Publishing and Distribution Agreement” (Appendix B) for the author(s) of the product. (This contract is eventually signed by the authors and NCS Executive Director after EC approval.)
   i. Any proposed compensation needs approval by the EC
   ii. The Agreement will also clearly state what, if any, complimentary copies of the product the creator(s) of the new education product are entitled to, upon project completion

7. The proposal and draft Publishing and Distribution Agreement is sent to the Executive Committee (EC) with full financial details
   i. Proposed product price and author compensation is initially suggested by the requesting committee or author with recommendations from the EPC; however, all plans for pricing and author payments/complimentary copies require EC approval.
   ii. Based on the timing of the request, the EC may either approve a variance in the current year’s budget to begin development immediately or request product development be delayed until the next budget cycle. If the product is approved to begin development in the middle of the budget cycle, and the cost is greater than $5000, then the Board of Directors must approve the product as well. If the product is proposed around the time of the annual budget special request submission, the proposal budget request will be added into the budget request with a copy of the development proposal that has been approved by the EPC. All items identified within the annual budget proposal will then be approved by the Board of Directors annually.
B. Development

1. Authors, primary task force, EPC Liaison, editorial board, and/or editor are identified to oversee the development of the educational product
   i. The Task Force is independent of the EPC
   ii. If product is ongoing and published annually, an EPC subcommittee may be formed to lead the development of new content and update of existing material

2. Primary editors are identified and, in collaboration with the EPC Liaison, are responsible for the following:
   i. Topic selection
   ii. Identification of chapter authors (print or digital)/presentation speakers
   iii. Development of chapter/presentation template and detailed author instructions
   iv. Completion of the product’s primary description, introduction, dedication (as appropriate), and disclaimer
   v. Final review and approval of content prior to publication

3. Upon finalization of topics and authors/speakers, the following items are distributed to authors/speakers:
   i. Formal NCS invitation to participate
   ii. NCS Publication and Distribution Agreement (for authors/speakers to sign)
   iii. Chapter/presentation template and detailed author instructions
   iv. Link to primary document sharing platform (i.e. Dropbox)
   v. Where appropriate, request for bio, photo, and CV

4. Where appropriate, the following professional services may be solicited for as budgeted:
   i. Copyeditor
   ii. Typesetter
   iii. Graphic designer

5. Content development process will be submitted as part of the initial proposal and target dates for the timeline will be approved by the EPC and managed by the overseeing requesting committee, editorial board, or author.
   i. Content is submitted to the EPC for review;
      1. The EPC maintains a queue of members assigned to review, edit, and approve educational content
      2. When appropriate, products are reviewed by multiple disciplines
      3. The members in queue to review have 2-4 weeks (or appropriately allotted time) to submit their edits based on length of content
   ii. Content is returned to the authors for edit integration
      1. Authors are given two weeks (or appropriately allotted time) to re-submit a second draft based on feedback from reviewers
   iii. Primary editors are responsible for conducting a final review of content and final edits prior to publication, in collaboration with the EPC
   iv. Content is submitted to the copyeditor if required or requested
   v. Final draft is submitted to the typesetter if required or requested
6. Necessary copyright permissions or transfer agreements are secured

7. For products designated and budgeted for continuing education credit, an application for appropriate boards will be completed and submitted a minimum of two months prior to publication

8. For print products and e-books, applications for a Library of Congress Control Number and ISBN are submitted

9. Where appropriate, trademark and copyright applications are submitted;
   i. Copyright application approval is an eight-month process

10. The NCS Marketing Team is consulted for graphic design, which includes the development of original figures, logo, book covers, etc.

11. Marketing plan is developed in conjunction with the Marketing/Communication Committee and the NCS Executive Office, and includes;
   i. Digital outreach (member emails, social media digital advertising, inclusion in educational products video, etc.)
   ii. Print pieces where appropriate (flyers, inclusion in Educational Products brochure,
   iii. Annual Meeting posters, etc.)
   iv. Author kits
C. Publication

1. INITIAL PRICING
   i. Upon its initial release, each NCS educational product is assigned a time period after which the product undergoes a review by the Educational Products Committee (EPC) for content updates. At the time that content is being reviewed, the EPC and the NCS Executive Office will evaluate the pricing of the reviewed product, taking into consideration the following factors:
      1. Economic inflation
      2. Production costs
      3. Prices of similar products in the market
      4. Profit margin
      5. Target audience
      6. Accuracy of content in relation to current evidence / guidelines / best practice
   ii. For products that have only a one-time release or that are updated continuously, pricing will be evaluated using the factors listed above, on an annual basis, with release of new pricing around the time of the NCS Annual Meeting.
   iii. Differential pricing for various target audiences (e.g., various regions of the world, trainees) and bulk pricing discounts will be determined on a product-to-product basis.

2. PRINTING
   i. Bids are solicited for printing vendors
   ii. Selected vendor prints product based on quantity allowed via budget
   iii. Printing vendor ships product to NCS fulfillment vendor

3. The product is incorporated into the NCS store and integrated for purchase

4. A product webpage is developed on the NCS website and OnDemand platform

5. AUTHOR/PRESENTER FOLLOW-UP
   i. Complimentary access to product, one copy of print or digital access, is provided if outlined in the Publishing and Distribution Agreement
   ii. Author marketing kits distributed
   iii. In the event that compensation will be provided, the agreed-upon Publishing and Distribution Agreement will outline the financial details of this arrangement

6. Marketing Plan Implemented

7. Evaluation of potential market for translated or digital/print versions of product
   i. Requires approval of the EC
D. Product Updating/Pre-Pricing

1. Product content update schedule and re-pricing is identified prior to publication, as agreed upon by author and approved by EPC.

2. Standard timeline includes (but is not restricted to):
   i. Print products updated once every three years
   ii. Digital products updated annually

3. The dates of all product review and any updates are documented and maintained for the life of each product in a spreadsheet maintained by the Director of Education. This includes the dates of product review that are completed and require no updates. This document will be reviewed each year by the Educational Products Committee at the annual in-person meeting.

4. Changes to pricing of products will occur at the same time as product content update review, with principles outlined in Appendix C. Any change in pricing requires EC approval.

5. All reviewed product prices (regardless of whether changes are made), once approved by the EPC, will be submitted to the Executive Committee for final approval before implementation.
E. Compensation Options for NCS Educational Product Contributors

1. The following compensation options for contributors are available for consideration by the Educational Products Committee and Executive Committee:
   i. Discounted registration rate for the NCS Annual Meeting
   ii. One-time honorarium
   iii. Discounted NCS membership dues
   iv. At-cost purchase of product
F. Approving Requests to Reproduce NCS Product Content

1. The Neurocritical Care Society (NCS) Educational Products Committee will consider written requests for reproduction of NCS Product Content on an individual basis. The material requested should be reproduced for educational purposes and not used for a commercial or for-profit activity. The NCS copyright statement must be included on the reproduction.

2. If the NCS product is free and the request is coming from an NCS author, there will be no charge for reproduction. If the request is coming from an author who is not a member of NCS or from a publishing company, the fees will be as follows:
   i. Print only - $30
   ii. Electronic only - $60
   iii. Electronic and Print - $90

3. Inquirers must complete the written permission request form detailing the exact material requested and the intended use of the material.
G. ENLS Live Course Global Partner Policy

In an effort to preserve NCS’s relationship with its Global Partner organizations, the following notification system is required in the scheduling of all live ENLS courses outside of the United States:

1. NCS REGIONAL MEETINGS

   All ENLS Host Agreements will include a mechanism for verifying that the location of each proposed course does not occur within one month prior to a previously scheduled NCS Regional Meeting.
   
   i. If a proposed ENLS course is scheduled one month prior to an NCS Regional Meeting, the Immediate Past President and/or regionally appropriate member of leadership, will reach out to the Global Partner to notify them of this conflict.
   
   1. If the Global Partner requests, NCS may ask the proposed course organizer to either:
      
      a. Combine the attendees from their proposed course with attendees of the ENLS Course at the NCS regional meeting, or
      b. Reschedule their course to a date that occurs after the NCS Regional Meeting

2. NCS GLOBAL PARTNERS

   i. If a proposed ENLS course is scheduled one month prior to a previously scheduled ENLS course that is hosted by an NCS Global Partner, the Immediate Past President and/or regionally appropriate member of leadership, will reach out to the Global Partner to notify them of this conflict.
   
   1. If the Global Partner requests, NCS may ask the proposed course organizer to either:
      
      a. Combine the attendees from their proposed course with attendees of the ENLS Course hosted by the Global Partner, or
      b. Reschedule their course to a more favorable date

   ii. If an NCS Global Partner submits a Host Agreement for an ENLS course after a competing course has already been approved by the Executive Committee, it is at the Executive Committee’s discretion to notify the Global Partner and/or allow the Global Partner to request scheduling changes to the original course.
SECTION XII: GENERAL

A. Project Proposal

1. PURPOSE
   To develop a process for new proposals and projects
   i. Proposals for new projects and/or additional resources needed for approved projects will need to be reviewed by the Executive Committee and the BOD. Included in the proposal shall be a purpose (impact/benefit for NCS), resources needed, budget considerations, projected timeline and impact of initiative including sales/marketing analysis. It is vital that the board have all necessary information with each request to be able to determine if the project fits within the context of the strategic and operational plans of NCS. NCS Staff will work with the NCS committee or task force to develop the proposal and budget.
   ii. Project request must include the following format:
       1. Background of information about the issue
       2. Statement of intent
       3. Rationale for NCS support
       4. Budget/Resources
       5. Sales/Marketing analysis

B. Use of the NCS Logo and Stationery, and Membership Lists

1. PURPOSE
   i. 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]

2. LOGO
   i. 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.

3. MEMBERSHIP LIST/MAILING LIST
   i. The board decided that mailing lists would not be provided.
   ii. Requests to email material to members will be referred to the Executive committee, which will decide whether the material is appropriate. (2004)
   iii. 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.
C. Code of Ethics

1. **PURPOSE:** To outline a code of conduct and ethics for the Society

2. **CONFLICT OF INTEREST**
   i. Conflict of Interest forms will be updated annually at the beginning of each calendar year (January 1) for:
      1. The Officers
      2. Executive Committee
      3. BOD
      4. Development committee members [2/07]

D. Role of Consultants/Legal Services in the Work of NCS

1. **PURPOSE**
   i. 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)

2. **PROCEDURE**
   i. 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.
   ii. Costs of counsel/billing structure will be presented formally and approved by the Executive committee

E. Policy and Procedures Manual Review

1. **PURPOSE:** To define the periodic review of the Policy and Procedure Manual
   i. The secretary of the NCS will review and update the Policy and Procedure Manual on an annual basis
   ii. After review, any revisions will be sent to the Executive Committee for approval.
   iii. Following the Executive Committee approval, the P and P manual will be sent to the BOD for approval at the Annual BOD meeting.

F. No Smoking Policy

1. The NCS prohibits smoking in its educational, business and meeting sessions, consistent with statutory restrictions, ordinances, and policies of the sites/venues where meetings are conducted.
G. Request for Survey of the Membership with Research Intent

1. **PURPOSE**: Multiple requests are received each year of surveys requested of the membership
   i. The Chairman of the Research Operations 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 NCRN Chair.

H. Procedures for Conducting NCS-Approved Surveys

1. **POLICY**
   i. The co-chairs of the Research Operations Subcommittee (ROSC) will select members of the ROSC to review and evaluate survey requests for clarity, brevity and feasibility. After completing their review, these individuals will provide constructive feedback within 1-week with the final decision to the investigator. NCS Staff will forward incoming surveys within 3 days to the appointed ROSC members for review, release the surveys if approved by the ROSC, and collect quality improvement information at the end of the survey.

2. **PURPOSE**
   i. Multiple requests are received each year of surveys requested of the membership

3. **PROCEDURES**
   i. Submission Process
      1. All surveys should be developed based on the requirements set forth by the NCS; however due to its current work-in-progress, members are referred to SCCM survey guide and a reference temporarily.
      2. The following survey information must be submitted by the investigator:
         a. Investigator contact information: name, e-mail, title, institution, phone number
         b. Describe background and goals of the survey (max 250 word count)
         c. Specify impact and importance of the survey
         d. Provide IRB approval date and upload approval letter from the investigator’s institution
         e. Specify target audience (all members, or restricted to MD, AP, RN, pharmacists, US only or international)
         f. Provide word document or pdf file of the survey questions, in addition to a link to the online survey
         g. Specify average duration of survey (minutes)
h. List other route of survey dissemination in the past and in the future
i. Specify any conflict of interest
j. List source of funding, if applicable
k. It is recommended for the investigators to offer an incentive to participants to encourage participation. Therefore, the following clause will be available to be seen on the survey online submission form, “Based on our experience, it is highly recommended for investigators to put forward incentive. This should be done as a lottery where participants will have the opportunity to voluntarily provide their contact information.”
l. List any collection of protected health information or other identifiers

3. Investigators should pay the following fees to the NCS office for their surveys:
   a. NCS Members Free
   b. Non-NCS members, Non-Industry $500
   c. Industry $2500

4. All surveys will be closed 2 months after its initial dissemination date

5. Investigators will submit surveys to the NCS Research operations subcommittee coordinator (Tissy Greene via info@neurocriticalcare.org).
   a. Submit questions/comments to info@neurocriticalcare.org

6. Submission deadline is on 1st day of every month

ii. Review and Approval Process

7. NCS ROSC coordinator will forward incoming surveys within 3 days to the appointed ROSC members for review.
   a. NCS ROSC co-chairs will select ROSC members to review and evaluate surveys.

8. Minimum of 2 clinical reviewers will be chosen from the survey taskforce per survey

9. A standardized form will be used by the reviewers to evaluate surveys on their scientific validity, novelty, impact, and interest to the NCS

10. Timeframe for reviewing a survey: 1 week

11. A final recommendation (accepts, revise, or reject) with comments/questions will be provided via E-mail to the investigator by the reviewers.

iii. Distribution Process

1. NCS survey notification via E-mail distribution monthly (stand-alone email)

2. Monthly E-mail of approved surveys with a reminder in 1 month; surveys will be taken off the mailing list/NCS website after 2 months

3. Social Media distribution

4. Investigators are encouraged to disseminate the survey link on the NCS webpage themselves as well.

iv. Post-Distribution Data Collection

1. Investigators must provide a brief progress report and a final report after the closing date and 1 year after the closing date, respectively
   a. Progress report on the number of participants upon closing of the survey
b. Final report on the impact of the survey 1 year later (e.g., grant, publication, presentation, and/or process improvement)

2. List of surveys, status, and contact information will be published on the NCS website
I. Record Retention

1. PURPOSE
   
   i. It is the policy of the NCS that its records be retained only so long as they are (1) necessary to the current conduct of the Association's business; (2) required to be retained by statute or government regulation; or (3) relevant to pending or foreseeable investigations or litigation. In furtherance of this policy, the association has adopted the record retention schedule which shall be observed by the association, its officers, BOD, staff and committee members.

2. PROCEDURE
   
   ii. The responsibility for administering the Association's Record Management Program in accordance with this policy is designated to the Executive Director

3. RECORD RETENTION SCHEDULE

<table>
<thead>
<tr>
<th>Type of Record</th>
<th>Retention Period</th>
</tr>
</thead>
<tbody>
<tr>
<td>ACCOUNTING</td>
<td></td>
</tr>
<tr>
<td>Auditor’s reports/work papers</td>
<td>Permanent</td>
</tr>
<tr>
<td>Bank deposit slips</td>
<td>3 years</td>
</tr>
<tr>
<td>Bank statements, reconciliations</td>
<td>7 years</td>
</tr>
<tr>
<td>Budgets</td>
<td>2 years</td>
</tr>
<tr>
<td>Canceled checks, generally</td>
<td>7 years</td>
</tr>
<tr>
<td>Cash disbursements journal</td>
<td>Permanent</td>
</tr>
<tr>
<td>Cash receipts journal</td>
<td>Permanent</td>
</tr>
<tr>
<td>Depreciation records</td>
<td>3 years</td>
</tr>
<tr>
<td>Dues and assessment schedules</td>
<td>2 years</td>
</tr>
<tr>
<td>Financial statements (annual)</td>
<td>Permanent</td>
</tr>
<tr>
<td>Financial statements (interim/internal)</td>
<td>3 years</td>
</tr>
<tr>
<td>General journal or ledger</td>
<td>Permanent</td>
</tr>
<tr>
<td>Inventory lists</td>
<td>3 years</td>
</tr>
<tr>
<td>Invoices</td>
<td>3 years</td>
</tr>
<tr>
<td>Payroll journal</td>
<td>4 years</td>
</tr>
<tr>
<td>Petty cash vouchers</td>
<td>3 years</td>
</tr>
<tr>
<td>CORPORATE RECORDS</td>
<td></td>
</tr>
<tr>
<td>Annual Reports</td>
<td>Permanent</td>
</tr>
<tr>
<td>Articles of Incorporation</td>
<td>Permanent</td>
</tr>
<tr>
<td>Bylaws</td>
<td>Permanent</td>
</tr>
<tr>
<td>Category</td>
<td>Retention Period</td>
</tr>
<tr>
<td>-------------------------------------------------------------------------</td>
<td>--------------------------------</td>
</tr>
<tr>
<td>Application for Recognition of Exemption (Form 1024 or 1023)</td>
<td>Permanent</td>
</tr>
<tr>
<td>Qualifications to do business</td>
<td>Permanent</td>
</tr>
<tr>
<td>Minutes and resolutions (Board and Committees with Board authority)</td>
<td>Permanent</td>
</tr>
<tr>
<td>Minutes (Committees without Board authority)</td>
<td>3 years</td>
</tr>
<tr>
<td>Authorizations and appropriations for expenditures</td>
<td>3 years</td>
</tr>
<tr>
<td>Policies and procedures, generally</td>
<td>For life of policy/procedure</td>
</tr>
<tr>
<td>Policies and procedures, employment practices</td>
<td>10 years*</td>
</tr>
<tr>
<td>Conflict of Interest Forms</td>
<td>2 years</td>
</tr>
<tr>
<td><strong>CONTRACTS</strong></td>
<td></td>
</tr>
<tr>
<td>Contracts, generally</td>
<td>10 years*</td>
</tr>
<tr>
<td>Contracts, government</td>
<td>4 years*</td>
</tr>
<tr>
<td>Contracts, sales (UCC)</td>
<td>4 years*</td>
</tr>
<tr>
<td><strong>INSURANCE</strong></td>
<td></td>
</tr>
<tr>
<td>Accident Reports</td>
<td>6 years</td>
</tr>
<tr>
<td>Insurance Claims</td>
<td>6 years*</td>
</tr>
<tr>
<td>Insurance Policies</td>
<td>6 years*</td>
</tr>
<tr>
<td><strong>INTELLECTUAL PROPERTY</strong></td>
<td></td>
</tr>
<tr>
<td>Copyright registrations and unregistered copyrightable materials</td>
<td>Permanent</td>
</tr>
<tr>
<td>Trademark registrations</td>
<td>Permanent</td>
</tr>
<tr>
<td>Patent</td>
<td>Permanent</td>
</tr>
<tr>
<td>Domain name registration</td>
<td>For life of domain name</td>
</tr>
<tr>
<td><strong>STATEMENTS OF POLICY/POSITION</strong></td>
<td>For the life of the document</td>
</tr>
<tr>
<td>Policy statements</td>
<td></td>
</tr>
<tr>
<td><strong>MEMBERSHIP</strong></td>
<td></td>
</tr>
<tr>
<td>Terminations and resignations</td>
<td>1 year</td>
</tr>
<tr>
<td>Member surveys</td>
<td>For the life of the document</td>
</tr>
<tr>
<td><strong>TAXES</strong></td>
<td></td>
</tr>
<tr>
<td>Annual information and/or income tax returns and canceled checks</td>
<td>Permanent</td>
</tr>
<tr>
<td>(federal, state and local)</td>
<td></td>
</tr>
<tr>
<td>Payroll tax returns</td>
<td>4 years</td>
</tr>
<tr>
<td>Property tax returns</td>
<td>Permanent</td>
</tr>
<tr>
<td>Sales and use tax returns</td>
<td>4 years</td>
</tr>
<tr>
<td><strong>LEGAL</strong></td>
<td></td>
</tr>
<tr>
<td>Claims and litigation files where Association is a party</td>
<td>10 years*</td>
</tr>
<tr>
<td>Documents related to third-party subpoenas</td>
<td>30 days after final resolution of underlying action</td>
</tr>
</tbody>
</table>
Appendix I: FNCS Forms

J. NCS FELLOW APPLICATION

To apply for Fellow of NCS (FNCS) status, applicants must meet the following criteria and provide the following items.

- Completed application form
- Current curriculum vitae
- A personal statement outlining the applicant’s reasons for applying
- A copy of the applicant’s primary certification which must be completed and up to date, i.e., Board certification in medical, nursing, pharmacy, respiratory therapy specialty.
- Three written letters of recommendation, one of which must be from a professional that is not your specialty (i.e. Nurse, Physician, Pharmacist, etc.) from active NCS members outlining why the applicant should be accepted as a fellow. It is the responsibility of the applicant to ensure these letters are sent to the NCS Executive Office in a timely manner.
- Applicant must be an active member of the NCS for a minimum of 5 years.
- Applicant must have participated in at least 5 national or international medical society based conferences with a neurocritical care focus, with a minimum of 2 of these being the NCS Annual Meeting. Details for these are required on the application.

PLEASE PRINT OR TYPE

Date of application: ________________________________

Name: _____________________________________________________

Designation: ________________

Affiliation/Institution: _________________________________________

Address: ______________________________________________________

City: _______________________ State/Prov: ______ Zip: ______ Country: _____________

Telephone: ____________________________ Email: _________________________________

I am Board Certified in (specialty): ____________________ Date of Board Certification ______________

I have been active member of NCS since (date): ___________________________________

I have attended the following NCS annual meetings (years): ___________________________

Please list the complete names and email addresses of the three individuals who have agreed to provide letters of recommendation for you. These letters must be sent directly to the NCS Executive Office and not to the applicant.

_______________________ ______________________ Name Email
Address

_______________________ ______________________ Name Email
Address

_______________________ ______________________ Name Email Address
Payment Information

First time FNCS applicant fee: $100.00. FNCS members are required to pay $50 in addition to their annual membership dues to maintain their “letters.” Please pay online here or mail a check to 330 N. Wabash Ave. Suite 2000 Chicago, IL 60611.

RETURN THE COMPLETED APPLICATION TO: NCS EXECUTIVE OFFICE, 330 N. WABASH AVE. SUITE 2000 CHICAGO, IL 60611 OR SEND VIA EMAIL TO INFO@NEUROCRITICALCARE.ORG OR FAX AT (312)673-6759.
K. NCS FELLOW RECOMMENDATION FORM

Date: ________________________________

Applicant’s Name: ____________________________________________

Recommender’s Name: __________________________________________

Recommender’s Email: __________________________________________

Recommender’s Phone: __________________________________________

FNCS Current members of the FNCS Credentialing Committee cannot provide letters of recommendation for applications in order to avoid any potential conflict of interest. Current committee members can be found here: http://www.neurocriticalcare.org/Membership/Fellow-of-Neurocritical-Care-FNCS

Please detail reasons why you believe the individual is qualified for Fellow of NCS (FNCS). Contributions to the field of neurocritical care must meet all 3 areas.

Program Development:
Page 2 Letter of Recommendation for FNCS

**Scholarly Activities related to Neurocritical Care:**

**Leadership in the field of Neurocritical Care**

By signing below, I am recommending the above applicant for FNCS status within NCS

__________________________________________

Recommender Signature
L. FELLOW OF NEUROCRITICAL CARE SOCIETY PERSONAL STATEMENT

Date: ______________________________

Applicant’s Name: ______________________________

Applicant’s Email: ______________________________

FNCS applicant must provide evidence that they participate in a multidisciplinary team dedicated to the care and management of acutely ill neurological patients. Their participation must include daily rounding with a multidisciplinary team and the assumption of a leadership role (director of the unit, fellowship director, pharmacy director, etc.). Documentation of personal improvements to a previous or development of a de-novo team of activities is required. Applicants must have dedicated at least 50% of their time to neurocritical care for the last two years. Contributions to the field of neurocritical care must meet all 3 areas.

Program Development
Scholarly activities related to neurologic critical care

Leadership in the field of neurocritical care

Please return completed personal statements along with all other required information to info@neurocriticalcare.org or by fax to 312-673-6759.
Appendix II. Global Partner Application

M. Global Partner Application

The Neurocritical Care Society is a multidisciplinary, international organization whose mission is to improve outcomes for patients with life-threatening neurological illnesses. NCS aims to recognize, support, and partner with developing neurocritical care sections, chapters, or interest groups within existing national societies, or as newly founded societies in order to advance the mission of improving care for critically-ill patients with neurological diseases.

The goal of the Global Partner Program is to enhance communication between all societies of the world interested in Neurocritical Care. Each Regional Committee Chair will hear and discuss firsthand all NCS proposals and activities, which can then be distributed throughout the respective regions.

Please submit the letter of intent and required information below to the NCS Executive Office at info@neurocriticalcare.org.

Organization/Society Name: ____________________________

Contact Name: ____________________________ Email: ____________________________

Total Number of Members: ____________________________ Country: ____________________________

To be eligible as a Global Partner, please provide the following requirements:

☐ Submit Letter of Intent

☐ Society has Neurocritical Care focus

☐ Submit Society membership listing including email addresses.

☐ Society has a minimum of 25 members

☐ At least 5 individuals are current NCS members. If the society has over 50 members, 10 must be NCS members. Please list them below:

1. ____________________________ 6. ____________________________
2. ____________________________ 7. ____________________________
3. ____________________________ 8. ____________________________
4. ____________________________ 9. ____________________________
5. ____________________________ 10. ____________________________
APPENDIX III. NCS Nomination Forms

N. NEUROCRITICAL CARE SOCIETY NOMINATING COMMITTEE CANDIDATE NOMINATION FORM

Name of Candidate: ________________________________

Current Work Position (include title, name, and address of institution):

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

Designations: ____________________________________________________________

Email Address: __________________________________________________________

Telephone Number: (cell) ________________ (work) _________________________

Number of Years as NCS Member: __________________________________________________________________

Educational Preparation (include degree, date, place): __________________________

Past Participation in NCS meetings, committees and activities: ____________________
Position Statement: State why you wish to run for the NCS Board and a description of your qualifications. (200 words or less):

Name of individual nominating this candidate: __________________________________________________________

I have confirmed that this candidate is willing to serve:

    Yes________ No _________

Provide two references (name, title and email address)

___________________________________________________________________________________________

___________________________________________________________________________________________

The Nominating Committee will contact these individuals only if they feel additional information is needed. Please attach a copy of the applicant’s bio sketch.
A. Letter of Reference

NAME OF CANDIDATE: ________________________________

BOARD SEAT: Neurocritical Care Society – Director-At-Large

The above name has been nominated for an open seat on the Board of Directors for the Neurocritical Care Society. This individual has given us your name as a reference. Please complete the following questionnaire and return it to the individual listed below no later than Month Day, Year.

I. In what capacity did the candidate serve while interacting with you?

II. What was your office/position/function with respect to the candidate at that time?

III. What was the candidate’s major contribution(s) to the project and/or committee or organization? If chairperson, what did the committee or organization accomplish under the candidate’s leadership?

IV. How would you rate the above person in the following areas? (Please circle the appropriate number; 1 = Poor, 5 = Excellent.)

A. Attends scheduled meetings:
   1  2  3  4  5  Not Observed

B. Expresses self well regarding ideas, issues, etc:
   1  2  3  4  5  Not Observed

C. Uses chain of command in communicating issues, keeps appropriate individuals informed of decisions, problems or policies:
   1  2  3  4  5  Not Observed

D. Ability to identify and propose alternative solutions to potential problems:
   1  2  3  4  5  Not Observed

E. Support group decisions:
   1  2  3  4  5  Not Observed

F. Demonstrates initiative and self-direction:
   1  2  3  4  5  Not Observed
H. Completes assigned tasks, meets deadlines.
   1 2 3 4 5 Not Observed

L. Completes task(s) as outlined by committee (does not change to suit his/her ideas only).
   1 2 3 4 5 Not Observed

J. Quality of completed task(s).
   1 2 3 4 5 Not Observed

K. Demonstrates accountability for actions.
   1 2 3 4 5 Not Observed

V. Would you want to work with the candidate again? Why or Why not?

VI. Comments:

PLEASE RETURN THE COMPLETED REFERENCE TO THE NCS EXECUTIVE OFFICES AT INFO@NEUROCARE.CARE.ORG NO LATER THAN Month Day, [year].

Thank you for your assistance and cooperation.
Appendix IV. - Leadership Code of Conduct

Form to be signed by BOD/Leader members

Having been selected by my peers to serve as an Officer, on the Board of Directors (BOD) or as a Committee Chair or Committee member of the NCS (NCS, also referred to as Society) and being fully aware of the high honor bestowed upon me, I am designated as a Society “Leader” and pledge to adhere to the following Code of Conduct. Violations of the Leadership Code of Conduct (LCOC) may warrant evaluation per the Disciplinary Code depending on the egregiousness of the action.

VIRTUES OF LEADERSHIP

1. My role as a leader is not a right that I have earned, but a privilege bestowed by my colleagues to allow me to serve them and our mission. I am the servant of the NCS members, not their master. I pledge to advocate for the welfare of our Society and its members.

2. I will lead by example knowing that the Society’s staff and other volunteers will be affected by the culture I help create. I pledge to always be an example of dedication, integrity, professionalism, and frugality for staff and other volunteers.

3. In order to fulfill my fiduciary responsibility to the membership, I must be fully knowledgeable about the Society. I pledge that I will read and understand the bylaws, policies, financial reports, committee reports, meeting agendas and supporting documents pertaining to my role in the NCS leadership. I will devote the time necessary to contribute to meetings and conference calls.

4. I understand that it is a violation of my fiduciary responsibility to the membership to appropriate to myself opportunities that rightfully belong to the Society as a whole or to other members of the Society.

5. In performing my responsibilities for NCS and in all NCS activities in which I participate, I shall conduct myself in such a manner that brings respect and honor to our Society. I pledge I will be an enthusiastic advocate, cheerleader and booster of the NCS.

6. Much of the success of the NCS will depend on group dynamics. As such, I shall welcome diverse points of view and feel free to disagree without being disagreeable. I will discuss issues, not personalities and I will avoid ad hominem attacks on my colleagues.

7. I understand that a leadership position is my opportunity to make a lasting contribution to my Society, to the Neurocritical care community it represents and to the membership. I pledge that I will work to leave the Society better, stronger and more fiscally sound that I found it at the start of my service.

8. I will avoid interactions with other members or NCS guests that might constitute sexual harassment and will use my leadership position to promote equanimity and collegiality among NCS members, guest and colleagues.
CONFLICT OF INTEREST

1. I agree to annually disclose in writing any potential or actual conflict of interest or any financial relationship exceeding $500 to the Secretary of the Society.

2. In the event a Leader’s NCS duties come into conflict with such interests, they must so declare to the Committee or other body on which they are serving and recuse themselves from voting on the relevant matter.

3. I understand that the President and the Chair of the NCS Ethics Committee will jointly review all disclosures of potential and actual conflicts of interest at the annual meeting. If in their view a Leader has not adequately recused themselves voluntarily from a situation in which there is a conflict of interest, they will first bring it to the attention of the Leader and if still unresolved will follow the process described in the Disciplinary Policy.

SELF-REPORTING

1. I agree to self-report any significant sanction or violation of law to the President that they believe may violate the Code of Professional Conduct or the Leadership Code of Conduct.

2. I understand that voluntary self-reporting will be taken into account if the Disciplinary Policy is activated.

BOARD MEMBERS and OFFICERS ONLY

1. I have a fiduciary responsibility to the membership to oversee the finances of the NCS. I pledge that I will make myself aware of Society non-profit accounting principles, read and understand the Society’s financial reports, and obtain any information I need from the staff to fulfill this obligation.

2. I understand that funds contributed to NCS through the dues of members and by other donors shall be used to further the mission of NCS, and not for personal benefit of the members of the Board. I understand that the expenditure of funds on luxuries for Board Members for travel, meals, accommodations, gifts and other special perks is not permitted.

3. Meetings of the BOD shall presume transparency and full disclosure; however, there may be issues discussed at Board meetings, which could be damaging to individuals or the Society if publicly disclosed. These items will be discussed in a confidential executive session. If clarification is required, I will seek the counsel of the President or other BOD member; alternatively, I will seek the confidential advice of the Chairs of the NCS Ethics Committee regarding the ethics of disclosure.

4. I understand that antitrust violations could cause great harm to the Society and to individual Board members. I pledge that I will not participate in any action, meeting or discussion that I believe could, or have been advised by staff or Society counsel give the appearance of being a potential anti-trust violation.

5. It is the Board’s responsibility to set the strategic direction for the NCS, to establish policies relating to ends, means and executive limits, to allocate resources and monitor financial performance, and to hire and oversee the chief staff executive. I pledge I will devote myself to helping the Board fulfill these strategic responsibilities.
Contributors: Michael Rubin, MD, MA; Jordan Bonomo, MD; Barak Bar, MD; Edward Collins, NP; Salvador CruzFlores, MD; Rachel Garvin, MD; Scott Glickman, PhD, DO, MPH; Jonah Grossman, MD; Galen Henderson, MD; Tom Lawson, NP, NCC; Dea Mahanes, CCNS, CCRN, CNRN, RN, MSN; Jessica McFarlin, MD; Sarah Monchar, PA; Harry Peled, MD, FACC; James Szalados, MD, JD, MBA.

Name (printed): _____________________________________________
Signature: __________________________________________________
Dated: ___________________
Appendix V. Current Task Forces 2017-2019

1. Quality Metrics White Paper
2. Accreditation Task Force (Charge – Obtain ACGME Board Certification)
3. Neurocritical Care Journal
APPENDIX VI. LIST OF GLOBAL PARTNERS

2019: Neurocritical Care Committee of the Chinese Society of Neurology, Neurocritical Care Committee of China Neurologist Association

2018: Canadian Neurocritical Care Society

Society of Intensive Care Medicine Singapore

Society of Neurocritical Care

2017: College of Intensive Care Medicine of Australia and New Zealand (CICM) 1

Philippine Neurocritical Care Society 1

BRAIN RESCUE (Philippines) 1

2016: Colombian Association of Intensive and Critical Care Medicine 5

German Society of Neurocritical Care (DGNI) 2

Sociedad Chilena de Medicina Intensiva (SOCHIMI) 5

2015: Indian Society of Critical Care Medicine 3

Indian Society of Neuroanesthesiology and Critical Care Medicine 3

Nepalese Society of Critical Care Medicine 1

Mexican College of Critical Care Medicine 4

Neurointensive Care Brazilian Association (ABNI) 5

2013: Sociedad Argentina de Terapia Intensiva 5

Japanese Congress on Neurological Emergencies 1

2012: Acute Neurology Group (Malmo Sweden) 2

Panama Chapter of the Caribbean and Centroamerican Societies of Critical Care 4

2011: Guatemala Chapter 4

Korean Neurocritical Care Society 1

Neurocritical Care Middle East and North Africa Chapter of the International Pan Arab Critical Care Medicine Society 3
Appendix VII. ANNUAL MEETING TEMPLATE GRID

DAYS 1-2 Preconference Days

<table>
<thead>
<tr>
<th>700 - 730</th>
<th>DAY 1 - Set up day</th>
<th>DAY 2 - Pre-day</th>
</tr>
</thead>
<tbody>
<tr>
<td>730 - 800</td>
<td></td>
<td></td>
</tr>
<tr>
<td>800 - 830</td>
<td></td>
<td></td>
</tr>
<tr>
<td>830-900</td>
<td>Workshops 8am - 9:30a TCD Course Part I: Physics &amp; Background</td>
<td>TCD Part 3: 50 cases 8am - 9:30am</td>
</tr>
<tr>
<td>900-930</td>
<td></td>
<td>Leadership Day 8am - 9:30am</td>
</tr>
<tr>
<td>930-1000</td>
<td>Break</td>
<td>ENLS Practice Update 8:30 - 9:30 am</td>
</tr>
<tr>
<td>1000-0130</td>
<td>Workshops TCD Course Part I: Physics &amp; Background Continued 10am-12am</td>
<td></td>
</tr>
<tr>
<td>1030-11</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1100-1130</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1130-1200</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1200-1300</td>
<td>Lunch (on own)</td>
<td>Committee Meetings 12pm - 1pm</td>
</tr>
<tr>
<td>1300-1330</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1330-1400</td>
<td>Workshops TCD Part 2: 50 cases 1pm - 3:00pm</td>
<td></td>
</tr>
<tr>
<td>1400-1430</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1430-1500</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1500-1530</td>
<td>(Break) 3:30-3:30pm</td>
<td></td>
</tr>
<tr>
<td>1530-1600</td>
<td>Workshops TCD Part 2: 50 cases 3:30pm - 5:00pm</td>
<td></td>
</tr>
<tr>
<td>1600-1630</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1630-1700</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1700-1730</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1730-1800</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1800-1930</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1930-2030</td>
<td>Pharmacy Reception 7:30pm - 8:30pm</td>
<td>Residents and Fellows Reception 7:30pm - 8:30pm</td>
</tr>
</tbody>
</table>

Break 9:30 - 10:00 am

AM Workshops continued 9:00am - 11am
TCD Part 3: 50 cases Continued 10:00am - 12pm
Leadership Day continued 10:00am - 12pm
ENLS Practice Update continued 10:00 - 12pm

PM Workshops 1 - 3pm
1. US Echo 202
2. EEG 301
3. Applied Hemodynamics
4. Advanced Practice Providers
5. Prognostication & Shared Decision Making
TCD Part 4: Hands on Skills 12pm - 2pm
Leadership Day 1 - 3pm
ENLS Practice Update 12 - 2pm

Board of Director Meeting 2pm - 6pm
Break (3pm-3:30pm)
PM Workshops continued 3:30pm - 5pm
TCD Part 4: Hands on Skills Continued 3:30pm - 5pm
Leadership Day continued 3:30pm - 5pm
ENLS Practice Update continued 3:30pm - 5pm (& Committees if needed)

Awards Ceremony (FNCS/Poster/Honorary) 5pm - 6:00pm
Welcome Reception 6p-7:30pm
General Meeting Days 3-5

Day 3—1st Full Day

600-700
Committee Meetings/Special Focus Corners, 7am-8am

700-800
Industry Breakfast/Continental Breakfast

730-800
Open workshops (if needed) 8am-9:30am

800-830
Guideline Update 8am-9:30am

830-900
Clinical Trials Update 8:30am

900-930
Committee Meetings 8:30am

930-1000
Break 9:30-10:00

1000-1030
Workshops continued

1030-1100
Session 2 hours 1000-1200

1100-1130
Session 2 hours 1000-1200

1130-1200
Conference Meetings 1200-1230

1200-1230
Industry Lunch 1200-1300

1230-1300
Industry Lunch 1200-1300

1300-1330
Business Meeting, Business Address 2pm-2pm

1330-1400
Keynote Speaker 2pm-3pm

1400-1430
Break (1pm-3:30pm)

1430-1500
Session 1 hour

1500-1530
Session 1 hour

Day 4—2nd Full Day

600-700
Shark Tank 800-1000

700-800
Clinical Trials Update 8:30am

800-930
Committee Meetings 8:30am

900-930
Break 9:30-10:00

930-1000
Session 1 hour

1000-1030
Session 1 hour

1030-1100
Conference Meetings 1030-1200

1100-1130
Conference Meetings 1030-1200

1130-1200
Conference Meetings 1030-1200

1200-1230
Industry Lunch 1200-1300

1230-1300
Industry Lunch 1200-1300

1300-1330
Business Meeting, Business Address 2pm-2pm

1330-1400
Keynote Speaker 2pm-3pm

1400-1430
Break (1pm-3:30pm)

1430-1500
Session 1 hour

1500-1530
Session 1 hour

1600-1630
Oral Presentations 1 hour

1630-1700
Oral Presentations 1 hour

1700-1730
Posters

1730-1800
Posters

1800-1830
Industry Dinner 1830-2000

1830-1900
Industry Dinner 1830-2000

1900-1930
Industry Dinner 1830-2000

1930-2000
Industry Dinner 1830-2000

Day 5—3rd Full Day

600-700
Fun Rain 600-700

700-800
Industry Breakfast/Continental Breakfast

800-830
Clinical Trials Update 8:30am

830-900
Committee Meetings 8:30am

900-930
Break 9:30-10:00

930-1000
Session 1 hour

1000-1030
Session 1 hour

1030-1100
Conference Meetings 1030-1200

1100-1130
Conference Meetings 1030-1200

1130-1200
Conference Meetings 1030-1200

1200-1230
Industry Lunch 1200-1300

1230-1300
Industry Lunch 1200-1300

1300-1330
Business Meeting, Business Address 2pm-2pm

1330-1400
Keynote Speaker 2pm-3pm

1400-1430
Break (1pm-3:30pm)

1430-1500
Session 1 hour

1500-1530
Session 1 hour

1600-1630
Oral Presentations 1 hour

1630-1700
Oral Presentations 1 hour

1700-1730
Posters

1730-1800
Posters

1800-1830
Industry Dinner 1830-2000

1830-1900
Industry Dinner 1830-2000

1900-1930
Industry Dinner 1830-2000

1930-2000
Industry Dinner 1830-2000

Dinner 6p-10p
## Appendix VIII – Committee and Section Leadership

<table>
<thead>
<tr>
<th>First Name</th>
<th>Last Name</th>
<th>Designation</th>
<th>Position</th>
<th>Committee/ Section</th>
<th>Current Chair/Chair-Elect Term</th>
</tr>
</thead>
<tbody>
<tr>
<td>James</td>
<td>Szalados</td>
<td>MD, JD, MBA</td>
<td>Chair</td>
<td>Advocacy Committee</td>
<td>Chair 2018-2020</td>
</tr>
<tr>
<td>TBD</td>
<td>TBD</td>
<td></td>
<td>Chair-Elect</td>
<td>Advocacy Committee</td>
<td>Chair 2020-2022</td>
</tr>
<tr>
<td>Mary Kay</td>
<td>Bader</td>
<td>FNCS, RN, MSN, CCNS, FNCS, FAHA</td>
<td>Chair</td>
<td>Annual Meeting Committee</td>
<td>Chair 2018-2019</td>
</tr>
<tr>
<td>Lori</td>
<td>Shutter</td>
<td>MD, FNCS</td>
<td>Co-Chair</td>
<td>Annual Meeting Committee</td>
<td>Co-Chair 2018-2019</td>
</tr>
<tr>
<td>Sarah</td>
<td>Livesay</td>
<td>CNS, NP, RN</td>
<td>Chair</td>
<td>APP Section</td>
<td>Chair 2017-2019</td>
</tr>
<tr>
<td>Megan</td>
<td>Brissie</td>
<td>ACNP</td>
<td>Chair-Elect</td>
<td>APP Section</td>
<td>Chair 2019-2021</td>
</tr>
<tr>
<td>Jennifer</td>
<td>Frontera</td>
<td>MD, FNCS</td>
<td>Chair-Elect</td>
<td>Development Committee</td>
<td>Chair 2019-2021</td>
</tr>
<tr>
<td>Ryan</td>
<td>Hakimi</td>
<td>DO, MS</td>
<td>Chair</td>
<td>Development Committee</td>
<td>Chair 2017-2019</td>
</tr>
<tr>
<td>Theresa</td>
<td>Human</td>
<td>BCPS, FNCS, PharmD</td>
<td>Co-Chair</td>
<td>ED Products Committee</td>
<td>Co-Chair 2017-2019</td>
</tr>
<tr>
<td>Joshua</td>
<td>Levine</td>
<td>MD</td>
<td>Co-Chair</td>
<td>ED Products Committee</td>
<td>Co-Chair 2018-2020</td>
</tr>
<tr>
<td>Zahar</td>
<td>Safar</td>
<td>MD</td>
<td>Chair-Elect</td>
<td>ED Products Committee</td>
<td>Co-Chair 2019-2021</td>
</tr>
<tr>
<td>George</td>
<td>Lopez</td>
<td>MD</td>
<td>Chair-Elect</td>
<td>ENLS Committee</td>
<td>Chair 2020-2022</td>
</tr>
<tr>
<td>Chitra</td>
<td>Venkatasubramanian</td>
<td>MD</td>
<td>Chair</td>
<td>ENLS Committee</td>
<td>Chair 2018-2020</td>
</tr>
<tr>
<td>Michael</td>
<td>Schneck</td>
<td>MD</td>
<td>Chair</td>
<td>Ethics Committee</td>
<td>Chair 2018-2019</td>
</tr>
<tr>
<td>TBD</td>
<td>TBD</td>
<td>MD</td>
<td>Chair-Elect</td>
<td>Ethics Committee</td>
<td>Chair 2019-2020</td>
</tr>
<tr>
<td>Matthew</td>
<td>Maas</td>
<td>MD</td>
<td>Chair</td>
<td>Fellowship Directors Section</td>
<td>Chair 2018-2019</td>
</tr>
<tr>
<td>Wade</td>
<td>Smith</td>
<td>MD, PhD, FNCS</td>
<td>Chair</td>
<td>Finance Committee</td>
<td>Chair 2018-2019</td>
</tr>
<tr>
<td>Maxwell</td>
<td>Damian</td>
<td>MD, PhD, FNCS</td>
<td>Chair-Elect</td>
<td>FNCS Committee</td>
<td>Chair 2019-2021</td>
</tr>
<tr>
<td>Wendy</td>
<td>Wright</td>
<td>MD, JM, FCCM, FNCS</td>
<td>Chair</td>
<td>FNCS Committee</td>
<td>Chair 2017-2019</td>
</tr>
<tr>
<td>Gretchen</td>
<td>Brophy</td>
<td>PharmD, BCPS, FCCP, FCCM, FNCS</td>
<td>Chair</td>
<td>Global Section</td>
<td>Chair 2018-2019</td>
</tr>
<tr>
<td>Herbert</td>
<td>Fried</td>
<td>MD</td>
<td>Chair-Elect</td>
<td>Guidelines Committee</td>
<td>Co-Chair 2019-2021</td>
</tr>
<tr>
<td>Mona</td>
<td>Kumar</td>
<td>MD</td>
<td>Co-Chair</td>
<td>Guidelines Committee</td>
<td>Co-Chair 2017-2019</td>
</tr>
<tr>
<td>Lori</td>
<td>Madden</td>
<td>CNS, NP, PhD, RN, ACNP-BC, CCRN, CNRN</td>
<td>Chair-Elect</td>
<td>Guidelines Committee</td>
<td>Co-Chair 2019-2021</td>
</tr>
<tr>
<td>First Name</td>
<td>Last Name</td>
<td>Designation</td>
<td>Position</td>
<td>Committee/ Section</td>
<td>Current Chair/Chair-Elect Term</td>
</tr>
<tr>
<td>------------</td>
<td>---------------</td>
<td>------------------------------------</td>
<td>---------------</td>
<td>------------------------------------------</td>
<td>-------------------------------</td>
</tr>
<tr>
<td>Molly</td>
<td>McNett</td>
<td>RN, PhD</td>
<td>Co-Chair</td>
<td>Guidelines Committee</td>
<td>Co-Chair 2017-2019</td>
</tr>
<tr>
<td>Abhay</td>
<td>Kumar</td>
<td>MD</td>
<td>Chair</td>
<td>Marketing Communications Committee</td>
<td></td>
</tr>
<tr>
<td>Audrey</td>
<td>Paulson</td>
<td>NP, DNP, CCRN, CNRN, SCRN</td>
<td>Chair-Elect</td>
<td>Marketing Communications Committee</td>
<td></td>
</tr>
<tr>
<td>Panos</td>
<td>Varelas</td>
<td>MD, PhD, FNCS</td>
<td>Chair</td>
<td>Membership Committee</td>
<td>Chair 2018-2019</td>
</tr>
<tr>
<td>Gretchen</td>
<td>Brophy</td>
<td>PharmD, BCPS, FCCP, FCCM, FNCS</td>
<td>Chair</td>
<td>Nominating Committee</td>
<td>Chair 2018-2019</td>
</tr>
<tr>
<td>Brianna</td>
<td>Witherspoon</td>
<td>NP</td>
<td>Chair</td>
<td>Nursing Section</td>
<td>Chair 2017-2019</td>
</tr>
<tr>
<td>Karen</td>
<td>March</td>
<td>RN, MN, CCRN, CNRN</td>
<td>Chair-Elect</td>
<td>Nursing Section</td>
<td>Chair 2019-2021</td>
</tr>
<tr>
<td>Jason</td>
<td>Makii</td>
<td>MBA, PharmD</td>
<td>Chair</td>
<td>Pharmacy Section</td>
<td>Chair 2018-2020</td>
</tr>
<tr>
<td>Aaron</td>
<td>Cook</td>
<td>PharmD</td>
<td>Chair-Elect</td>
<td>Pharmacy Section</td>
<td>Chair 2020-2022</td>
</tr>
<tr>
<td>Navaz</td>
<td>Karanjia</td>
<td>MD</td>
<td>Chair-Elect</td>
<td>Quality Committee</td>
<td>Chair 2019-2021</td>
</tr>
<tr>
<td>Asma</td>
<td>Moheet</td>
<td>MD</td>
<td>Chair</td>
<td>Quality Committee</td>
<td>Chair 2017-2019</td>
</tr>
<tr>
<td>Susanne</td>
<td>Muehlschlegel</td>
<td>MD, FNCS</td>
<td>Co-Chair</td>
<td>Research Committee</td>
<td>Chair 2016-2019</td>
</tr>
<tr>
<td>Chethan</td>
<td>Venkatasubba Rao</td>
<td>MD</td>
<td>Co-Chair</td>
<td>Research Committee</td>
<td>Chair 2016-2019</td>
</tr>
<tr>
<td>Alexis</td>
<td>Steinberg</td>
<td>MD</td>
<td>Chair</td>
<td>Resident Fellow Section</td>
<td>Chair 2018-2019</td>
</tr>
<tr>
<td>Alexandra</td>
<td>Yakhkind</td>
<td>MD</td>
<td>Chair-Elect</td>
<td>Resident Fellow Section</td>
<td>Chair 2019-2020</td>
</tr>
<tr>
<td>Raj</td>
<td>Dhar</td>
<td>MD</td>
<td>Chair</td>
<td>Science Sub Committee</td>
<td></td>
</tr>
<tr>
<td>Diana</td>
<td>Greene-Chandos</td>
<td>MD</td>
<td>Chair</td>
<td>WINCC Section</td>
<td>Chair 2019-2021</td>
</tr>
<tr>
<td>Deipa</td>
<td>Malayandi</td>
<td>MD</td>
<td>Chair Elect</td>
<td>WINCC Section</td>
<td>Chair 2021-2023</td>
</tr>
</tbody>
</table>
Appendix IX. Bylaws of the Neurocritical Care Research Network (NCRN)

The NCRN will be a sub-committee of the Neurocritical Care Society (NCS) committed to supporting and fostering the mission of the Society and will be accountable to its Board of Directors. The NCRN will be composed of neurocritical care units and passionate neurointensivists who are motivated to carry out excellent clinical research in neurocritical care and collaborate with colleagues around the world.

Mission

The mission of the NCRN will be to serve as a conduit for the design and execution of high quality, multi-center studies in the neurocritical care setting, intended to enhance the understanding of neurocritical care disorders and to improve outcome of the neurocritically ill patient. NCRN also will be committed to foster investigator-initiated collaborative studies and promote and promulgate neurocritical care research internationally.

Vision

1. To promote neurocritical care research.
2. To enhance and facilitate high-quality investigator-initiated studies.
3. To investigate clinically-relevant questions drawing from both bedside and laboratory observations.
4. To advance the understanding and development of research methods. Core values
   1. Collaboration and collegiality.
   2. Innovation.
   3. Promotion and development of scientific thought.
   4. Integrity.
   5. Accountability to our scientific community and our patients.

Structure

NCRN (the Network), will comprise of an executive committee, a group of scientific advisors, and the participating sites (Figure 1). Below is a description of the duties and obligations of each component of the Network.

Executive Committee

The Executive Committee will manage and control the Network and will abide by and enforce the mission and the core values of the Network. This committee also will provide for all the administrative management of the Network. The members of the Executive Committee will consist of the following: Chair, the immediate past-Chair, the Vice-Chair, members of the NCS research committee, and ten members elected from the participating sites. Each of these officers will hold their positions for a period of 2 years. They may be re-elected for a maximum of 2 more years if the membership believes it is in the best interest of the Network. The Chair will be elected by the Board of Directors of NCS. Any member of the society can nominate themselves for consideration. All other officers will be elected by the members of the Network.

The Chair’s duties shall include the outside representation of the Network and its interests, the general direction of the affairs of the Network, chairing the meetings of the Executive Committee and chairing all the General Meetings of the Network. The
Chair also will present an annual report to the Board of Directors of NCS. The Vice-Chair will be in charge of coordinating all the Network meetings, correspondence on behalf of the Network, and the minutes and agenda for every meeting. The other members from the NCS research committee and those elected from the participating sites will assist with the review of research proposals submitted to the Network. Such reviews will include critiques about the scientific validity of the proposals, possible grant funding mechanisms, and publications. In addition, these officers will assist the Chair, and Vice-Chair with execution of their duties.

**Network Administrator**

The Network financial administration will be carried out by the Administrative Office of the Neurocritical Care Society. Such administrative duties shall include the maintenance of the database of participating sites, maintenance of the Network website, the arrangement of teleconferences and face-to-face meetings, and disseminating the correspondence to all members. In addition, these duties shall include keeping a record of all funds paid and received by the Network, arranging for the auditing of accounts and their presentation to the Network meetings, and advising the Executive Committee in matters pertinent to the financial status of the Network. The Network website will be part of the website of the Neurocritical Care Society.

**Scientific Advisors**

The number of scientific advisors will vary depending on the needs of the Network. Such advisors will consist of individuals with expertise in the following areas: biostatistics and biometry, medical ethics and health policy, basic science research, clinical trials, translational research, human genetics and metabolomics, and neuroimaging. Individuals with expertise in other areas not mentioned also can be added if deemed necessary. These members will be selected from nominations presented by members of the Network or the NCS and there will be no fixed term limit. These members will be retained provided they contribute to the development of the scientific mission of the Network. The Executive Committee shall have the right to terminate the membership of any individual at any time if they consider that the member no longer contributes to the mission and core values of the Network.

The Scientific Advisors’ duties shall be to offer honest and transparent advice to the Executive Committee in matters of development and implementation of research protocols including ideas for innovative studies that could be executed using the Network. The Executive Committee also will seek the help of these members in the review of research proposals submitted by investigators to the Network.

**Participating Sites**

All participating investigators and sites will be chosen from recommendations by members of the NCS. Both academic and privately-run neurocritical care units will be considered. Each potential site will be given a questionnaire to fill out and the Executive Committee will review the responses and make the final recommendations as to whether a particular site has been accepted (Appendix A). Once accepted the participating site will be notified and asked to subscribe to the Network. The annual subscription to the Network will be determined by the Executive Committee and revised yearly as necessary.
The benefits of membership to participating neurocritical care units include opportunities to participate in well-conducted clinical trials and other research projects, access to a large population of neurocritically ill patients, international representation and reputation, professional collaboration with other neurocritical care units, access to expert academic advice from members of the Network, participation in all general meetings of the Network, and possibility of membership in the Executive Committee.

The participating sites’ duties shall include honest and transparent participation in clinical trials or research projects that they are deemed well-suited for. The Principal Investigator of the research proposal being considered along with the Executive Committee will determine which Network sites will and can participate in a particular research project. These sites will pledge to uphold the principles of Good Clinical Practice and follow all the necessary regulatory requirements.

Once sites are accepted they will be entered into the Network database and will be eligible to participate in research studies. Not all Network sites will participate in all available studies at any given time since some of them may not have the adequate population. For instance, if the Network supports a study intervention in patients with subarachnoid hemorrhage the sites that treat these patients, particularly those with adequate volumes to allow trial enrolment, will be chosen to participate rather than those sites that primarily treat patients with traumatic brain injury or have low volumes of patients with subarachnoid hemorrhage.

The Executive Committee shall have the right to terminate the membership of any person or site at any time if they consider that the member no longer contributes to the mission and core values of the Network.

**Studies Categories**

Characteristics of studies to review

The Executive Committee will consider studies that comply with the mission and core values of the Network and will preferentially endorse protocols submitted prospectively (i.e., before any study activities are undertaken). However, the Executive Committee will make exceptions if special circumstances preclude that (i.e., timelines for grant applications or funding). The Executive Committee will review investigator-initiated protocols. However, industry-sponsored studies will be considered provided that the Executive Committee deems them to be in compliance with the mission and core values of the Network and that they will contribute to its future development.

All study protocols must be developed in accordance with Good Clinical Research Practice Guidelines and in compliance with the regulations and ethical guidelines for the protection of human subjects. In general the protocol format should include the following:

1. Cover letter addressed to the Executive Committee that details expectation from the review process.
2. Name of Principal Investigator and affiliated institution.
3. Study aims, hypotheses, and rationale.
4. Background and significance.
5. Preliminary data.
6. Study population: inclusion and exclusion criteria with justification, protocol for intervention and standard treatment, measurements and methodology of data collection, masking and randomization (if applicable), timelines (including patient accrual plan), and statistical analysis (including sample size calculations and analysis of outcome measures).

7. Human subject protection: data and safety monitoring, safety-related stopping rules, interim analyses, and reporting of adverse events.

8. Plan for monitoring and compliance: sample consent form, IRB submission or equivalent, and study monitoring plan (including protocol deviations and violations and data quality).

Application Process

Any investigator can submit a proposal for consideration by sending an e-mail to info@neurocriticalcare.org. The Executive Committee will review the proposal and nominate two of its members, who are not principal investigators on the study, to serve as anonymous reviewers. Principal Investigators will formally present their protocols to the Executive Committee via teleconferencing and to the entire Network membership during one of the face-to-face meetings. This will allow for exposure and feedback of all Network members to the protocols and identification of potential participating sites.

Three possible outcomes are expected: two recommendations for endorsement, two conflicting recommendations, or two recommendations for rejection. If two recommendations for endorsement are received notification of the pending endorsement will be sent to all Executive Committee members who are offered one week to voice any comments or concerns. If there is agreement, a letter that advises Network endorsement will be sent to the applicant. If two conflicting recommendations are received, the President may consult with the Executive Committee to decide the course of action. Once a consensus is reached, a notification will be sent to the applicant. If both reviewers recommend that the application be rejected, the President will personally notify the applicant. If appropriate, the Principal Investigator will have the opportunity to respond to reviewers’ comments and suggested amendments and to resubmit the proposal. In addition, Principal Investigators may appeal in the event that endorsement is rejected. Appeals will be reviewed by the Executive Committee, and where appropriate by one of the Scientific Advisors.

Conditions of endorsement

The Network will endorse proposals based on merit taking into account whether the study is in compliance with its mission and core values. Investigators who apply for federal or industry funding sponsorship may not mention the Network in the application until the Executive Committee has formally endorsed the proposed study. The Principal Investigators’ duties include becoming a member of the NCS and the Network (if not already), remaining as the liaison with the Network for the duration of the sponsored study, submission of all potential conflicts of interest to the Network Administrator for review by the Executive Committee, and preparing and presenting a study progress report (including patient accrual rate, funding, and adverse events) during one of the Network face-to-face meetings. The Executive Committee reserves the right to withdraw study endorsement at any time should the study deviate from the mission and core values of the Network or unmanageable conflicts of interest arise or are discovered. The study data remain the ownership of the Principal Investigator but it is expected that he/she presents a data
sharing plan. The Network endorsement does not entail funding; rather it will facilitate high-quality scientific feedback and access to participating sites and thus enhance the chances for securing such funding. The Network is not a funding source.

**Network Funding**

Funds will be needed to support the Network Administration as described above and the meetings planned by the Network. The administration of the Network will be supported by subscriptions received from all participating sites and from NCS funds. The Executive Committee will determine the annual subscription cost to join the Network. The Executive Committee will also seek NIH funding to support the Network meetings.

All funds raised by or on behalf of the Network will be applied to further the mission and core values of the Network and for no other purpose. The administrative office of NCS will keep the accounting records and prepare the reports annually or at such other intervals as the Executive Committee or the Board of Directors of the NCS may require. The Network accounts will be examined or audited at least once a year.

**Data Ownership**

The Principal Investigator and the Data Management Centers will retain ownership of the data for the duration of the study.

**Publications**

All publications that result from Network-endorsed studies must include its name. The preferred authorship should be as “Listed investigators and the NCRN Investigators”. A list of the NCRN Investigators must be provided as an appendix at the end of each publication. All publications and presentations stemming from Network-endorsed studies must be prospectively approved by the Executive Committee. The procedures for review and approval are similar to those described above under conditions of endorsement for proposed studies. Investigators must not refer to the Network in those studies not sponsored by it.

**Meetings**

The Executive Committee will meet quarterly via teleconferencing and the Network membership will meet bi-annually in conjunction with the NCS annual meeting and with either the Society of Critical Care Medicine annual meeting or the International Stroke Conference. The Network meeting will be planned before or after the scientific gatherings mentioned above. The Vice-Chair, in consultation with the Chair, will organize the meetings, keep and disseminate the minutes to the Network membership not later than 1 week after their occurrence. The minutes will include a list of meeting attendees, the general organization of the conference and the discussions and voting that were undertaken. The quorum for the Executive Committee meetings will be 5 and for the bi-annual Network meetings will be 20. All questions or decisions that arise at any of the meetings will be decided by a majority vote. In case of equality of ballots, the Chair will cast the deciding vote. The Vice-Chair can also call for an emergency meeting to discuss issues that cannot be postponed until the regularly-scheduled meetings.

The business for the Executive Committee meetings will include discussions on proposals submitted by investigators, decisions about membership applications, the general status of the Network, and financial reports prepared by the Research
Administrator and the Treasurer. The business of the general Network meetings will include presentations of the general status and Network updates by the Chair, research proposals by the Principal Investigators, updates on ongoing studies already endorsed by the Network, financial reports presented by the Administrative Office of NCS, minutes discussions chaired by the Vice-Chair, and any other order of business deemed necessary for discussion by either the Executive Committee or any other Network members. Even though the election of officers will be done electronically the general meetings also will serve for ratification of those positions.
Appendix X. NCRN Grants

A. NCS Research Training Fellowship Grant

1. NCS is pleased to announce a training fellowship for physicians, nurses, pharmacists, and other neurocritical care providers. This program was envisioned due to the high demand for clinical services, struggle for departmental support, and difficulty establishing mentorship relationships for young practitioners that makes the pursuit of research careers difficult. The direct goal of this program is to foster the development of close mentorship ties, protection of research time, pursuit of research training, and generation of preliminary data necessary to apply for additional scientist development training grants. This program is therefore aimed at promising applicants who are seeking a career in clinical or translational research in neurocritical care and ultimately wish to become independent investigators. Unlike longer training programs, this program is focused on identifying a single year that will allow the time and support to compete effectively for longer training opportunities. It is expected that at the end of the project, the trainee will be in the process of submitting applications for national, peer-reviewed funding mechanisms to continue the research and research training.

2. NCS has the stated mission to foster clinical, experimental, and outcomes research focused on developing innovative and cost-effective medical and surgical interventions for acute neurological disorders. Although any research pertaining to acute central nervous system (CNS) injuries or critical care will be considered, special weight will be given to projects that relate directly to issues important to patients with neurological critical illness.

3. Requirements
   a. An identified mentor who is an established investigator with independent funding.
   b. Protected research time by the applicant’s department of at least 75%.
   c. Career training/development program with specific goals
   d. Identified research project
   e. Clear evidence of institutional support to cover salary gap and research costs.

4. Eligibility
   a. For the purpose of this fellowship, research is defined as patient-oriented research conducted with human subjects, or translational research specifically designed to develop treatments or enhance diagnosis of neurocritical care illnesses. These areas of research include epidemiologic or behavioral studies, clinical trials, studies of disease mechanisms, the development of new technologies, and health services and outcomes research.
   b. The applicant must be an NCS member in good standing (regardless of nationality or country of residency)) interested in an academic career with independent research funding. The award is available for members in all disciplines (physicians, nurses, pharmacists, PhD researchers, etc.) but is meant for early career individuals (within 5 years of completion of terminal degree or training). For physicians, this is best suited to add a supplemental year to fellowship training before entering the first academic position. For other applicants, this award may more likely be used to remove clinical responsibilities for an existing position.

5. Award
   a. The fellowship will be awarded to one (1) applicant for one (1) post-graduate year. Although applicants in-training may apply, the award year is not to be used during years of training (NCC fellowship, NP school, PharmD residency, etc.). $70,000 of support for the applicant including salary and research +10% indirect cost to the institution will be awarded. The award is not intended to cover all the costs for the fellowship year. It is expected that the sponsoring institution contributes time and additional research/salary support. Supplementation of the stipend with other grants or by the sponsoring institution is permissible, but fellows may not accept other fellowships, similar awards, or have another source of support for more
than 50 percent of their salary. The stipend cannot be used to support clinical fellowship, graduate school or residency training. Funding initiation is flexible to begin from January 1, 2018 to July 1, 2018 depending on the applicant’s situation.

6. Application and Evaluation Procedure

a. In order to limit applicant effort, the applicants are asked to submit a two (2) page letter of intent by January 1, 2017. The letter should include:

   • A description of the applicant’s goals for a research career and their qualifications for beginning training in research.
   • A concise description of the project and a strategy for completing the proposed project.
   • Identification of a mentor(s) including the mention of the mentor’s qualifications and area of expertise. A description of how the mentor’s expertise will tie into the project should be included if the mentor’s area of research is dissimilar from the project. Mentors can be located at any institution as along as a clear mentorship plan is outlined.
   • A strategy for transitioning this work to a longer training grant opportunity.

b. A letter of support (1 page) from the applicant’s department chair expressing support for the terms of fellowship should accompany the applicant’s letter-of-intent.

c. Letters of intent will be reviewed by a Research Training Task Force to select applicants who will be invited to submit a full proposal.

d. All letters must be submitted to the Neurocritical Care Society at 330 N Wabash Ave. Suite 2000, Chicago, IL 60610 or emailed to info@neurocriticalcare.org
Neurocritical Care Society Research Study Funding Opportunity Announcement

FOA Number: NCS 2017 – RP1

Funding Opportunity Purpose: The purpose of this FOA is to develop pilot research strategies regarding enhancing clinical care in the Neuroscience intensive care unit. The award is intended to enable creation of pilot data that will facilitate the awardee to develop a future grant application to a national funding agency. This FOA encourages the understanding of mechanisms of diseases across the spectrum of neurocritical care, translational research and collaborative research. A separate training fellowship FOA exists and should be directed to the NCS Research Fellowship Training Award RFA.

Posted Date: November 1, 2017

Letter of Intent Due Date: December 15, 2017

Notice of Invitation for full proposal: January 15, 2018

Application due date: March 1, 2018

Scientific Merit Review: April 15, 2018

Award date: May 1, 2018

Earliest start Date: June 1, 2018

Funding Period: June 1, 2018 – May 31, 2019

Required Application Instructions:

LOI:

1. Specific Aims (1 page)
2. Outline of research plan (including impact, innovation, brief outline of preliminary data, and future directions) (2 pages).
3. Biosketch(es) of PI or co-PI’s (new NIH biosketch format).

Full application (by invitation only after review of LOI):

Table of Contents:

1. Full Opportunity Description
2. Award information
3. Eligibility information
4. Application and submission information
5. Application review information
6. NCS contacts for NCS Research Committee
1. Full Opportunity Description:

The Neurocritical Care Society (NCS) seeks to foster research in neurocritical care through providing grant support to investigators, the creation of the Neurocritical Care Research Network, and through funded fellowships. The NCS has now created a new research grant opportunity for members in order foster promising and innovative research.

This scope of this FOA is to provide 1 year of funding for pilot studies that will enable the awardee to develop pilot data that furthers research in neurocritical care and enables the awardee to submit a formal proposal to national funding agencies such as the NIH, Department of Defense, PCORI, etc.

**Research Objectives:** The objectives of the research for this FOA are to promote creative and collaborative research to enhance clinical outcomes in neuroscience critical care. The NCS has adopted a leadership position in nurturing enhanced quality of care through innovative care strategies, translational science, use of technology, development of evidence-based medicine, study of point prevalence models of care, population science, and many others. There is a distinct clinical focus to the objectives of this research; however, translational science which have direct application to clinical care is also broadly within scope. The NCS wishes to foster longitudinally meaningful scientific projects that will be competitive for future funding from NIH, DOD or similar; and which serve to create a pipeline of research and enhance one of more scientific lines of research. The NCS desires to enhance collaborative research and team science, and enhance the rigor and visibility of neuroscience intensive care among existing and future team science collaborations. The NCS desires to foster studies within the NCRN but also enable members to be competitive for participation in other national and/or international networks.

Types of studies include, but are not limited to:

1) Point prevalence studies which describe a fundamental clinical care intervention and/or practice in a neuroscience intensive care unit
2) Informatics studies, which describe the fundamental aspects of data acquisition, monitoring, storage, analysis or processing in the neuroscience intensive care unit.
3) Translational interventions, which foster novel treatment for common diseases seen in the neuroscience intensive care unit, with emphasis on proof of concept in a targeted patient population, conducted in a small multicenter study.
4) Pilot observational studies to determine feasibility of conducting a future observational or interventional study in the neuroscience intensive care unit.
5) Pilot trials to determine feasibility of conducting a future trial in the neuroscience intensive care unit.
6) Multidisciplinary process-oriented research that directly impact patient-centered care and outcomes
7) Population studies that will directly enhance the care of neurocritically ill patients.

**Collaboration Objectives that are desired for this application:**

1) Facilitate a future multicenter center approach to enhance scientific rigor and generalizability.
2) Create data formats, which could be used as models for national networks.
3) Enhance the opportunities for the NCRN to conduct early-phase studies.

The following would be considered to be non-responsive to this FOA:

1) Retrospective data reviews
2) Focused self-report surveys
3) Scientific mechanistic studies in a laboratory setting
4) Computational Algorithm development in a laboratory setting using preexisting data
5) Infrastructure or registry development proposals

2. Award Information:

The award will be up to $100,000. 10% indirect costs will be permitted if a necessary requirement of the institution. A single award will be issued each year. The award must be spent within period of the award notice, with no-cost extensions permissible with appropriate justification.

Budget Constraints: The budget is constrained to the following:

1) $15,000 maximum salary support for the PI
2) Patient enrollment reimbursement for study related costs
3) $10,000 for equipment
4) $5,000 for travel to facilitate multicenter study

3. Eligibility Information:

1) Higher education organizations similar to pre-existing NIH guidelines.
2) MD, MD-PhD, RN, Pharm D or similar degree
3) Career dedicated to Neuroscience critical care including being an active clinician
4) Active membership in good standing at the Neurocritical Care Society through the award time
5) There is no career level restriction for this FOA

4. Application Information

A. Mandatory Application Contents: use relevant NIH forms and formatting rules for each of these documents as applicable.

1) Biosketch of investigators (NIH 5 page format)
2) Budget
3) Budget justification
4) Environment description
5) Collaboration Plan for multiple centers
6) Collaboration Plan for the NCRN
7) Specific Aims (1 page limit)
8) Research Strategy (10 page limit)
9) Longitudinal Plan (beyond the period of funding) (1 page limit)
10) Human subjects safety (4 page limit)
11) Institutional Support letter (chair or dean) for longitudinal research agenda, to include adequate protected time to complete the proposed study
12) Letters of support from collaborating investigators
13) Waiver of Indirect costs letter (from each institution)
14) Data Sharing agreement between participating centers
B. Electronic Submission

1) Plan for PDF electronic submission to the NCS
### Appendix XI Educational Product Application

<table>
<thead>
<tr>
<th>Submitted by</th>
</tr>
</thead>
<tbody>
<tr>
<td>NCS Committees Associated with Product Development</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Publication type</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Title</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Proposed Production Timeline</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Anticipated Publication Date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Book Specifications</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Topic Description</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Target Audience/Proposed Marketing Plan</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Table of Contents</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Basic Chapter Outline*</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Authors and Editors</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Text Revisions/Updates</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Future Versions</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Similar Products on the Market (include pricing)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Anticipated Expenses</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Book List Price</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Revenue Generation</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>
Appendix: XII NCS Publishing and Distribution Agreement

Product Title:

This Publishing and Distribution Agreement (“Agreement”) is made as of the later date signed below (“Effective Date”) by and between the Neurocritical Care Society, Inc., a non-profit corporation located at 330 N. Wabash Ave, Suite 2000, Chicago, IL 60611 (“NCS”), and [insert author’s name], (“author”) designation, U.S. citizen and address.

Whereas, NCS is multi-professional medical team, improving health care for patients with life-threatening neurological illnesses;

Whereas Author(s) have developed the content for the [Insert title of product] and wish to utilize NCS as a publishing and distribution house;

Now, therefore, in consideration of the promises and mutual covenants contained herein, and for other good and valuable consideration, the receipt and adequacy of which are hereby acknowledged, the parties, agree as follows:

1. Definition
   1.1 Product. “Product” means [Insert title and description of product]
   1.2 End Users. “End Users” mean individuals, such as nurses, physicians, and other health care professionals, who purchase the Product for their individual use and not for further resale.
   1.3 Gross Revenues. “Gross Revenues” means all revenues actually received by NCS from the sale, both print and electronic versions, as well as translated versions, of the Product.
   1.4 Retailers. “Retailers” mean any retailers, such as Amazon, Apple, Barnes & Noble, NCS OnDemand, and others that sell the Product to End Users.

2. Authority of NCS. NCS at its expense shall have the authority to undertake the following tasks described below.
   2.1 Content Review. NCS may conduct a thorough internal review of the Product content to ensure scientific and medical accuracy.
   2.2 Formatting. NCS may format the Product for compatibility with various print, electronic and digital editions of the Product. For purposes of use in electronic and digital forms, NCS may adjust the Product to the respective form of use and include links or otherwise combine it with other works.
   2.3 Reproduction and Distribution. Should NCS decide to publish the Product, then NCS will undertake reproduction and distribution of the Product at its own expense and risk. However, NCS is not obligated to publish the Product or to continue its publication. Should NCS decline to publish the Product within twelve (12) months of delivery of a final manuscript, with all necessary changes effected, then all rights to the Product shall be transferred to Author(s), and this Agreement shall be terminated. All such rights shall also transfer and this Agreement shall be terminated should NCS discontinue publication and sale of the Product for a continuous period of at least three (3) years.
   2.4 Marketing. NCS shall market the Product at its sole discretion and the parties agree that there shall be no guaranteed marketing budget.
2.5 Agreements with Retailers. Once the Product has been approved as provided in section 2.1 above, and subject to Section 2.3, above, NCS shall use commercially reasonable efforts to enter into a distribution agreement with any corresponding Retailer for sale of Product.

2.6 Continuing Education. NCS will determine if the Product is eligible for application to continuing education boards. NCS will complete continuing education applications at its discretion and may require Author(s) assistance gathering information for this application.

3. [Author] Responsibilities. Author(s) shall be responsible for the following tasks described below.

3.1 Content. Author(s) shall be responsible for content creation. Author(s) agrees to prepare and submit the content for the Product no later than [date]. The content shall be submitted in such format as specified by NCS. Author(s) agree to revise content based on feedback provided by an internal NCS review, such revision to be delivered within thirty (30) days of receipt of such feedback. Author(s) agree to NCS retaining full editorial discretion.

3.2 Trademark and Copyright Notices. Author(s) shall place appropriate trademark and copyright notices on the [Product Name], as indicated by NCS.

3.3 Ownership of Product. Author transfers to, and NCS shall retain, all right, title and interest in and to the Product.

3.4 No Distribution of Product. Author(s) shall not distribute the Product to End Users or Retailers.

3.5 Updating of Product. Author(s) will revise the content of Product as directed by NCS, which is expected to be once every three years. If any Author is unwilling or unable to prepare the revision within a reasonable time, NCS shall then have the right to arrange with others for its preparation, and any compensation for such preparation shall be deducted from any compensation due to the Author(s), as well as any ongoing online complimentary access to the Product in digital form cancelled.

4. Copyright Transfer and Rights Granted.

4.1 Copyright Transfer. The Author(s) hereby assigns to the Neurocritical Care Society the full and complete copyright for the submitted work, present and future which includes without limitation the right to reproduce the work by way of all forms of publication whether now known or hereinafter invented and the right to grant sub-licenses of all translation and subsidiary rights on such terms as NCS shall determine, all rights in the nature of copyright, rental and lending and database rights and all other intellectual property rights in all languages throughout the world.

4.2 Author Rights. Author(s) retain the rights to use the content the Author(s) authored for the Product for the following personal, non-commercial purposes: teaching (including distribution of copies, paper or electronic), distribution of copies to research colleagues for their personal use, or inclusion in a thesis or dissertation.

4.3 Copyright Protection. NCS may take any necessary steps to protect the Product copyright against infringement by third parties. The copyright notice shall be inserted into all editions of the Product.

5. Warranties. Author(s) warrant that the Product is original except for such excerpts from copyrighted works (including illustrations, tables, animations and text quotations) as may be included with the permission of the copyright holder thereof, in which case(s) Author is required to obtain written permission to the extent necessary and to indicate the precise source.
5.1 Author(s) warrant that Author(s) are entitled to grant the rights in accordance with section 4.3, that the Author(s) have not assigned such rights to third parties, that the Product does not contain any libelous statements and does not infringe on any copyright, trademark, patent, statutory right or proprietary right of others, including rights obtained through licenses; and that Author(s) will indemnify NCS against any costs, expenses or damages for which NCS may be liable as a result of any breach of this warranty.

6. **Compensation.** In consideration of the development and assignment of the product to NCS, NCS will offer [insert compensation agreement here].

7. **Complimentary Hard Copies and/or Online Access.** In consideration of the development and assignment of the Product to NCS, all authors will receive one complimentary hard copy of the print version of the Product or a complimentary copy of the Product in electronic/digital form (or complementary online access to the Product, if applicable). If Product is an ongoing subscription-based platform or enduring web-based activity with rotating Authors, Author will be given complimentary digital access during the Author’s active term.

8. **Miscellaneous.**

   8.1 **Governing Law.** Any claim, controversy or dispute arising under or related to this Agreement shall be deemed to be made in, and governed and interpreted in accordance with the laws of the State of Minnesota without regard to the application of conflict laws principles. The sole forum for the resolution of disputes that cannot be resolved through negotiation shall be a State or Federal court in or for Chicago, IL.

   8.2 **Entire Agreement; Amendment.** This Agreement shall constitute the entire understanding of the parties with respect to the subject matter hereof, and it supersedes all prior agreements, understandings, warranties, or covenants, written or oral, express or implied, at law or in equity, respecting the subject matter hereof. This Agreement can only be amended or modified by a writing signed by the parties hereto.

   8.3 **Assignment.** This agreement is personal to the Author(s) and may not be assigned or transferred by either of them without NCS’ prior written consent. NCS may assign or transfer this Agreement to (a) an affiliate or (b) in connection with the sale or other disposition of all or substantially all of the assets of NCS or any affiliate or subsidiary or division thereof, provided that (1) any such assignee agrees in writing with Author(s) to comply with NCS’s obligations under this Agreement, and (2) in the case of an assignment in which NCS survives, NCS remains subject to all of its obligations under this Agreement.

   8.4 **Severability.** In the event that any provision in this Agreement shall be held invalid or unenforceable by a court of competent jurisdiction, such holding shall not affect the validity or enforceability of any other provisions hereof, which remaining provisions shall continue in full force and effect.

   8.5 **Right to Compete.** Nothing in this Agreement is intended to restrict NCS from developing or distributing products which are competitive with or similar to the Product.

   8.6 **Review of Agreement.** Each party to this Agreement acknowledges that they have carefully read this Agreement, have had it explained by legal counsel or had the opportunity to discuss the same with legal counsel, and has voluntarily and freely agreed to those terms and signed this Agreement.

   8.7 **Counterparts; Electronic or Faxed Signatures.** This Agreement may be executed in counterparts. Each party agrees that an agreement signed and submitted electronically or by facsimile machine shall have the same legally binding effect as an original paper version would have.
IN WITNESS WHEREOF, Author(s) and NCS have executed this Agreement as of the Effective Date.

Author

________________________________________  Author

Date: ________________________________  Date: ________________________________

The Neurocritical Care Society, Inc.

By: ____________________________________

Date: ________________________________
Appendix I. Neurocritical Care Society (NCS) Bylaws

BYLAWS

Last Revised: March 2018
## Appendix XIII: NCS BYLAWS

### Table of Contents

**ARTICLE I NAME OF CORPORATION** 172

- Section 1. Name of Corporation 172

**ARTICLE II MEMBERS** 173

- Section 1. Classes of Members 173
- Section 2. Annual Meeting 173
- Section 3. Special Meetings 173
- Section 4. Action by Members Without a Meeting 173
- Section 5. Place of Meetings 174
- Section 6. Notice of Meetings 174
- Section 7. Qualification of Voters 174
- Section 8. Quorum and Adjourned Meetings 174
- Section 9. Organization 174
- Section 10. Voting 175
- Section 11. Proxies 175
- Section 12. Reports 175
- Section 13. General Provisions for Membership 176

**ARTICLE III BOARD OF DIRECTORS** 176

- Section 1. Power of Board and Qualification of Directors 176
- Section 2. Number and Term of Office 177
- Section 3. Organization 177
- Section 4. Resignations and Removal of Directors 177
- Section 5. Newly Created Directorships and Vacancies 178
- Section 6. Action by the Board of Directors 178
- Section 7. Place of Meeting 179
- Section 8. Annual Meeting 179
- Section 9. Regular Meetings 179
- Section 10. Special Meetings 179
- Section 11. Waivers of Notice 179
- Section 12. Quorum and Manner of Participation 179
- Section 13. Annual Report 180
ARTICLE IV COMMITTEES

Section 1. Executive Committee and Other Committees of the Board ....................................................... 181
Section 2. Audit and Compliance Committee ......................................................................................... 181
Section 3. Committees of the Corporation ............................................................................................. 182
Section 4. Meetings .................................................................................................................................. 182
Section 5. Quorum and Manner of Acting ............................................................................................... 183
Section 6. Tenure of Members of Committees of the Board ................................................................. 183
Section 7. Alternate Members .................................................................................................................. 183

ARTICLE V OFFICERS ................................................................................................................................ 184

Section 1. Number ........................................................................................................................................ 184
Section 2. Term of Office and Qualifications .......................................................................................... 184
Section 3. Additional Officers .................................................................................................................. 184
Section 4. Removal of Officers ................................................................................................................ 184
Section 5. Resignation .............................................................................................................................. 184
Section 6. Vacancies .................................................................................................................................... 185
Section 7. President ..................................................................................................................................... 185
Section 8. Vice President ........................................................................................................................ 185
Section 9. Treasurer .................................................................................................................................... 185
Section 10. Secretary .................................................................................................................................... 185
Section 11. Executive Director .................................................................................................................. 186
Section 12. Appointed Officers ................................................................................................................ 186
Section 13. Assignment and Transfer of Stocks, Bonds and Securities .................................................... 186

ARTICLE VI CONTRACTS, CHECKS, DRAFTS AND BANK ACCOUNTS ......................................................... 186

Section 1. Execution of Contracts ........................................................................................................... 186
Section 2. Loans ......................................................................................................................................... 187
Section 3. Checks, Drafts, etc. ................................................................................................................... 187
Section 4. Deposits ...................................................................................................................................... 187

ARTICLE VII INDEMNIFICATION AND INSURANCE .................................................................................. 188

ARTICLE VIII CONFLICTS OF INTEREST .................................................................................................. 189

Section 1. Definition of Conflicts of Interest ............................................................................................ 189
Section 2. Disclosure of Conflicts of Interest ............................................................................................ 189
Section 3. Approval of Contracts and Transactions Involving Potential Conflicts of Interest .................... 189
Section 4. Validity of Actions .................................................................................................................. 190
Section 5. Employee Conflicts of Interest. ........................................................................................................ 190

ARTICLE IX COMPENSATION ............................................................................................................................ 191
  Section 1. Reasonable Compensation. .................................................................................................................. 191
  Section 2. Approval of Compensation. ............................................................................................................... 191

ARTICLE X GENERAL ......................................................................................................................................... 192
  Section 1. Office. .................................................................................................................................................. 192
  Section 2. Books and Records. ............................................................................................................................ 192
  Section 3. Seal. ..................................................................................................................................................... 192
  Section 4. Loans to Directors and Officers. ......................................................................................................... 192
  Section 6. Fiscal Year. ......................................................................................................................................... 192
  Section 7. Related Party Transactions. .............................................................................................................. 192

ARTICLE XI AMENDMENTS ............................................................................................................................. 194
ARTICLE I

NAME OF CORPORATION

Section 1. Name of Corporation.

The name of this Corporation shall be THE NEUROCRITICAL CARE SOCIETY INC. (hereinafter referred to as the “Society”)
ARTICLE II
MEMBERS

Section 1. Classes of Members.

The Society shall have three classes of members, designated as full, junior, and honorary members.

(a) *Full members*. For eligibility as a full member of the Society an individual must be a physician, nurse, pharmacist, advanced practitioner, or other professional who has an interest in neurocritical care and/or participates in the management of critically-ill neurological patients.

(b) *Junior Members*. For eligibility as a junior member in the society an individual must be a physician, nurse, pharmacist, advanced practitioner, or other professional holding a residency or training position in neurocritical care setting who has demonstrated an interest in neurocritical care.

(c) *Honorary Members*. Honorary Members are those who, by reason of professional qualifications and contributions to the field of neurocritical care are deemed worthy of such selection to membership of the Society.

Section 2. Annual Meeting.

The Society shall meet annually within one hundred eighty (180) days of the close of the fiscal year, at a place, date, and hour designated by the Board of Directors. An Annual Business Meeting shall be held during the Annual Meeting.

Section 3. Special Meetings.

Special meetings of the members may be called at any time by the President, the Board of Directors, or by 25% or more of the full members.

Section 4. Action by Members Without a Meeting.

Whenever members are required or permitted to take any action by vote, such action may be taken without a meeting using electronic communication or other medium as approved by the Board of Directors and as permitted by law.
Section 5. Place of Meetings.

Meetings of the members shall be held at a place, date, and hour designated by the Board of Directors.

Section 6. Notice of Meetings.

(a) Written notice by any means including electronic communication, shall be given to each member, and such notice shall state the place, date and hour of the meeting. Notice of a Special Meeting shall also state the purpose or purposes for which the meeting is being called.

(b) A copy of the notice of any meeting shall be distributed to members not less than ten nor more than sixty days before the date of the meeting to each member entitled to vote at such meeting.

(c) Notice of meeting need not be given to any member that submits a signed waiver of notice, in person or by proxy, whether before or after the meeting. The attendance of any member at a meeting in person or by proxy, without protesting prior to the conclusion of the meeting the lack of notice of such meeting, shall constitute a waiver of notice by such member.

Section 7. Qualification of Voters.

(a) Members of all classes in good standing shall be entitled to vote, and each such full member shall have one vote.

(b) Removal for Cause: Membership may be denied, revoked or restricted for cause only by action of the Board, which may only be taken pursuant to the Society’s Disciplinary Policy.

Section 8. Quorum and Adjourned Meetings.

(a) One-tenth of the total number of members entitled to vote shall constitute a quorum for the transaction of business.

(b) A majority of the members present, whether or not a quorum is present, may adjourn any meeting to another time and place without notice to any member.

Section 9. Organization.
At every meeting of the members the President, or in the absence of the President, the Vice President, or in the absence of such officers, a person selected by the full members present, shall act as chairman of the meeting. The Secretary or, in the absence of the Secretary, any Assistant Secretary, shall act as secretary of the meeting, and in the absence of both the Secretary and any Assistant Secretary, a person selected by the full members present shall act as secretary of the meeting.

Section 10. Voting.

(a) Whenever any corporate action, other than the election of directors, is to be taken by vote of the members entitled to vote, it shall, except as otherwise required by law or by the Certificate of Incorporation, be authorized by a majority of the votes cast at such meeting.

(b) Directors shall be elected by the plurality of the votes cast by eligible members in a designated election except as otherwise required by law.

Section 11. Proxies.

(a) Each member entitled to vote at a meeting of members may authorize another person or persons to act for such member by proxy.

(b) Every proxy must be signed by that member, and the authority of the proxy shall be limited to the purpose stated therein. No proxy shall be valid after the expiration of eleven months from the date thereof unless otherwise provided in the proxy. Every proxy shall be revocable at the pleasure of the member executing it, except as otherwise provided by law.

(c) The authority of the holder of a proxy to act shall not be revoked by the incompetence or death of the member who executed the proxy unless, before the authority is exercised, written notice of an adjudication of incompetence or of death is received by the Secretary or an Assistant Secretary.

Section 12. Reports.

The Board of Directors shall present at each Annual Meeting of the Members a report, verified by the President and Treasurer or by a majority of the Board of Directors, or certified by an independent public or certified accountant or a firm of such accountants selected by the Board of Directors, showing in appropriate detail the following:

(a) the assets and liabilities, including the trust funds, of the Society as of the end of a twelve (12) month fiscal period of the Society terminating not more than six (6) months prior to said meeting;

(b) the principal changes in assets and liabilities, including trust funds, during said fiscal period;
(c) the revenue or receipts of the Society, both unrestricted and restricted to particular purposes, during said fiscal period;

(d) the expenses or disbursements of the Society, for both general and restricted purposes, during said fiscal period; and

(e) a summary of the activities of the Society during the preceding year.

Each such report shall be filed with the records of the Society and a copy or an abstract thereof shall be entered in the minutes of the proceedings of the Annual Meeting at which the report is presented.


(a) Application and Admission to Membership. Application for membership shall be made on a form prepared by the Executive Director or his/her designee, as approved by the Board of Directors. Completed applications shall be submitted to the Executive Director, or his/her designee, accompanied by the applicable dues and fees.

(b) Dues. The dues structure for the Society shall be established by the Board of Directors, subject to approval by a vote of the members.

(c) Good Standing. To be considered a member in good standing, the requirements of this section must be observed. Membership is an honor and privilege that may be suspended or revoked for cause. Any member whose dues payment has not been received and credited within ninety (90) days from his/her dues date can be suspended from membership and its rights and privileges. Any member who has been convicted of a felony under the penal law of the state or foreign jurisdiction or any member whose license to practice his/her profession has been suspended, revoked or surrendered to any state or foreign jurisdiction shall no longer be eligible for membership, as his/her membership shall be suspended.

ARTICLE III
BOARD OF DIRECTORS

Section 1. Power of Board and Qualification of Directors.

The Society shall be managed by its Board of Directors. Members of the Board of Directors are elected by the general society membership. Each director shall be at least eighteen years of age.
Section 2. Number and Term of Office.

(a) The Board of Directors shall consist of not less than seven (7) nor more than thirty members (30), 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 any action by the Board of Directors to effect such increase or decrease shall require the vote of a majority of the entire Board of Directors, and further provided that no decrease in the number of directors shall shorten the term of any incumbent director. All Past-Presidents (except the Immediate Past-President) will be ex officio (non-voting) members of the Board of Directors and will have the right to attend meetings at their discretion; their numbers shall not be considered for purpose of Board size or for determination of quorum.

(b) Annually, directors shall be elected from the general membership of the Society to hold office for a four-year term and until their successors have been elected, qualified, and seated at the next Annual Meeting of the Board of Directors. Included in the election of the directors, shall be up to five International Regional Committee chairpersons from each of the five regions (Asia, Europe, Central/Caribbean and North America, Mideast/Africa and South America) who will hold director office for a two-year term and until their successors have been elected and qualified.

(c) Each director shall have one vote.

(d) Members who have served a full term on the Board of Directors may not be re-elected for a period of one full year after completion of their term on the Board.

(e) Members who have served two terms on the Board of Directors may not be re-elected.

(f) No Past President may be elected to serve on the Board of Directors.

Section 3. Organization.

At each meeting of the Board of Directors, the President, or, in the absence of the President, the Vice President, shall preside, or in the absence of either of such officers, a chairman chosen by a majority of the directors present shall preside. The Secretary shall act as secretary of the Board of Directors. In the event the Secretary shall be absent from any meeting of the Board of Directors, the meeting shall select its secretary.

Section 4. Resignations and Removal of Directors.

(a) Any director of the Society may resign at any time by giving written notice to the President, or to the Secretary. Such resignation shall take effect at the time specified therein or, if no time be specified, then on delivery.
(b) Any director who has more than two (2) unexcused absences within the same fiscal year shall be deemed to have resigned from the Board of Directors, and not further action shall or need be taken.

(c) Any director may be removed for cause by vote of the Board of Directors.

(d) Any or all of the directors may be removed without cause by vote of the majority of the members.

Section 5. Newly Created Directorships and Vacancies.

Newly created directorships resulting from an increase in the number of directors and vacancies occurring in the Board of Directors for any reason shall be filled by vote of a majority of directors then in office, regardless of their number. Directors elected to fill newly created directorships shall hold office until their successors have been elected or appointed and qualified; there shall be no classification of these directors until the next annual meeting of members. Directors elected to fill vacancies shall serve until the next annual meeting at which the election of directors is in the regular order of business, and until their successors are elected and have qualified.

Section 6. Action by the Board of Directors.

(a) Except as otherwise provided by law, the Certificate of Incorporation of the Society, or in these by-laws, the act of the Board of Directors, whether in-person or remotely, means action of the Board by vote of a majority of the directors present at the time of the vote, if a quorum is present at such time.

(b) Any action required or permitted to be taken by the Board of Directors or any committee thereof may be taken without a meeting if all members of the Board or the committee consent in writing to the adoption of a resolution authorizing the action. Any director or committee member may assent to a written consent electronically. The resolution and the written consents thereto by the members of the Board or committee shall be filed with the minutes of the proceedings of the Board or committee.

(c) Any one or more members of the Board of Directors or any committee thereof may participate in a meeting of such Board or committee by means of a conference telephone or similar electronic communications equipment allowing all persons participating in the meeting to hear each other at the same time. Participation by such means shall constitute presence in person at a meeting.
Section 7. Place of Meeting.

The Board of Directors may hold its meetings at the principal office of the Society, or at such place or places or in electronic format within or without the State of New York as the Board of Directors may from time to time by resolution determine.

Section 8. Annual Meeting.

As soon as practical after the election of directors at the Annual Meeting of the members, the Board of Directors shall meet for the purpose of organization, qualification of Officers, and the transaction of other business. Notice of such Annual Meeting need not be given.

Section 9. Regular Meetings.

Regular meetings of the Board of Directors may be held without notice at such times as may be fixed from time to time by resolution of the Board of Directors. The annual schedule of regular meetings shall be established at the Annual Meeting.

Section 10. Special Meetings.

Special meetings of the Board of Directors shall be held whenever called by the President. Notice shall be given orally, by telefax, by mail, or by email to the last address known to the Society and shall state the purposes, time and place of the meeting. If notice is given orally, in person or by telephone, it shall be communicated not less than one (1) day before the meeting; if it is given by telefax, or email, it shall be transmitted not less than three (3) days before the meeting; and, if it is given by email, it shall be mailed not less than seven (7) days before the meeting.

Section 11. Waivers of Notice.

Notice of a meeting need not be given to any director who submits a signed waiver of notice whether before or after the meeting, or who attends the meeting without protesting, prior thereto or at its commencement, the lack of notice.

Section 12. Quorum and Manner of Participation.

(a) A majority of the Board of Directors shall constitute a quorum for the transaction of business.
(b) A majority of the directors present, whether or not a quorum is present, may adjourn any meeting to another time and place without notice to any director.

(c) Any one or more members of the Board of Directors, or of any committee, may participate in a meeting of the Board or committee by means of a conference telephone or similar communications equipment or by electronic video screen communication, as long as all persons participating in the meeting can hear each other at the same time and each person can participate in all matters before the Board or committee including, without limitation, the ability to propose, object to and vote upon a specific action to be taken by the Board or committee. Participation by such means shall constitute presence in person at such a meeting.


The Board of Directors shall present at the Annual Meeting of members a report certified by a firm of independent public accountants selected by the board or verified by a majority of the directors, showing in appropriate detail the following:

(a) A summary of the assets and liabilities, including the trust funds, of the Society as of the end of the last fiscal year.

(b) Any significant changes in assets and liabilities, including trust funds, during said fiscal period.

(c) A summary of the revenue or receipts of the Society, both unrestricted and restricted to particular purposes during said fiscal period.

(d) A summary of the expenses or disbursements of the Society for both general and restricted purposes, during said fiscal period.

This report shall be filed with the records of this Society and a copy thereof entered in the minutes of the proceedings of the Annual Meeting of the members.
ARTICLE IV
COMMITTEES

Section 1. Executive Committee and Other Committees of the Board.

(a) The Board of Directors, by resolution or resolutions adopted by a majority of the Entire Board, may designate from among its members an Executive Committee, an Audit and Compliance Committee, and other standing and special committees of the Board of Directors, each consisting of three or more Directors with one Director being designated as the committee chairman, and may designate one or more Directors as alternate members of any such committee who may replace any absent member or members at any meeting of such committee. The President of the Corporation shall be an ex-officio voting member of all committees of the Board of Directors.

(b) The Executive Committee consists of the Officers and three (3) or more Directors as selected by the President. The Immediate Past President will serve as a voting member of the Executive Committee.

(c) The committees of the Board of Directors shall have such authority as defined by the Board; and the Executive Committee shall have all the authority of the Board, except that no such committee shall have authority as to the following matters:

i. The submission to the members of any action requiring the members’ approval under the law.

ii. The filling of vacancies in the Board or in any committee.

iii. The fixing of compensation of the directors for serving on the Board or on any committee.

iv. The amendment or repeal of the by-laws, or the adoption of new by-laws.

v. The amendment or repeal of any resolution of the Board, which by its terms, shall not be so amendable or repealable.

Section 2. Audit and Compliance Committee.
The Audit and Compliance Committee shall consist of at least three (3) independent Directors, one of which shall be the Immediate Past President. In addition to any other duties as may be assigned by the Board of Directors from time to time, the Audit and Compliance Committee shall:

(a) Overseeing the Society’s accounting and financial reporting processes.

(b) Overseeing an audit of the Society’s financial statements.

(c) Annually retaining or renewing the services of an independent auditor, and discussing audit results with the independent auditor. Prior to the audit, reviewing the scope and planning of the audit with the auditor.

(d) Following the audit, reviewing with the auditor any material risks or weaknesses identified, any restrictions on the scope of the auditor’s activities, any significant disagreements between the auditor and management, and the adequacy of the corporation’s accounting and financial processes.

(e) Annually considering the auditor’s performance and independence

(f) Review all Director and nominee conflict of interest statements and report any recommendations or conclusions to the Executive Committee.

(g) Semi-annually, or more frequently as necessary, report its activities to the Board of Directors

Section 3. Committees of the Corporation.

The Board may create such committees of the Corporation as it may deem desirable. Each such committee shall include at least three (3) members, of whom at least one (1) shall be a Director. The members of such committees shall be appointed by the President. Such committees shall be advisory only, and action by the Board of Directors shall be required in order to act on the advice or findings of such committees.

Section 4. Meetings.

Meetings of committees, of which no notice shall be necessary, shall be held at such time and place as shall be fixed by the President of the Society or the chairman of the committee or by vote of a majority of all of the members of the committee. Scheduling, notice of committee meetings, and waiver of notice shall be in accordance with the provisions of Sections 9, 10 and 11 of Article III.
Section 5. Quorum and Manner of Acting.

Unless otherwise provided by resolution of the Board of Directors, a majority of all of the members of a committee shall constitute a quorum for the transaction of business and the vote of a majority of all of the members of the committee shall be the act of the committee. The procedures and manner of acting of the Executive Committee and of the committees of the Board shall be subject at all times to the directions of the Board of Directors.

Section 6. Tenure of Members of Committees of the Board.

Each committee of the Board and every member thereof shall serve at the pleasure of the Board.

Section 7. Alternate Members.

The Board of Directors may designate one or more directors as alternate members of the Executive Committee or of any standing committee of the Board, who may replace any absent member or members at any meeting of such committee.
ARTICLE V
OFFICERS

Section 1. Number.

The Officers of the Society shall be a President, Vice President, Treasurer, Secretary and such other officers as the Board of Directors may in its discretion determine. Any two or more offices may be held by the same person, except the offices of President and Secretary.

Section 2. Term of Office and Qualifications.

Open Officer seats will be filled using the following succession plan: Secretary to Treasurer; Treasurer to Vice President; Vice President to President. The Secretary position will be elected each year by the Board of Directors at its Annual Meeting. All Officers must have previously served on the Board of Directors. Unless a shorter term is provided in the resolution of the Board electing such officer, the term of office of each Officer shall be one year and shall begin with the first Annual Meeting of the Board of Directors immediately following his/her election or appointment and qualification. Each such term shall continue until the Officer’s successor is elected or appointed and qualified at the following Annual Meeting of the Board of Directors.

Section 3. Additional Officers.

Additional officers may be elected for such period, have such authority and perform such duties, either in an administrative or subordinate capacity, as the Board of Directors may from time to time determine.

Section 4. Removal of Officers.

Any Officer may be removed from the Board as such by the affirmative vote of two-thirds (2/3) of the entire Board, upon written notice setting forth the reasons and grounds thereof, with the Officer subject to the removal motion provided the opportunity to respond in writing no later than ten (10) days prior to the date of such meeting.

Section 5. Resignation.

Any Officer may resign at any time by giving written notice to the Board of Directors, or to the President or to the Secretary. Any such resignation shall take effect at the time specified therein, or, if no time be specified, then upon delivery.
Section 6. Vacancies.

A vacancy in any office shall be filled by the Board of Directors.

Section 7. President.

The President shall preside at all meetings of the members and of the Board of Directors. The President shall act as the chief executive officer of the Society and shall supervise generally the management of the affairs of the Society, as well as the functions of the other Officers and any committees. He or she shall keep the Board fully informed. He or she shall freely consult with all Directors and employees concerning the activities of the Board of Directors and Society. He or she shall perform all duties incident to the office of President. The President shall also perform such other duties as may be assigned from time to time by the Board.

Section 8. Vice President.

In the absence or incapacity to act of the President or if the office of President is vacant, the Vice President shall preside at all meetings of the members, and shall perform the duties and exercise the powers of the President, subject to the right of the Board from time to time to extend or confine such powers and duties or to assign them to others. The Vice President shall have such powers and shall perform such other duties as may be assigned by the Board of Directors or the President.

Section 9. Treasurer.

The Treasurer shall, if required by the Board of Directors, obtain a bond for the faithful discharge of his duties, in such sum and with such sureties as the Board of Directors shall require. The Treasurer shall keep and maintain the books of account and shall have charge and custody of, and be responsible for, all funds and securities of the Society, and deposit all such funds in the name of and to the credit of the Society in such banks, trust companies, or other depositories as shall be selected by the Board of Directors. The Treasurer shall also perform all other duties customarily incident to the office of Treasurer and such other duties as from time to time may be assigned by the Board of Directors.

Section 10. Secretary.

It shall be the duty of the Secretary to act as secretary of all meetings of the Board of Directors, and to keep records of the minutes of all such meetings; the Secretary shall see that all notices required to be given by the Society are duly given and served; the Secretary shall keep a current list of the Society’s directors and officers and their residence addresses; the
Secretary shall be custodian of the seal of the Society and shall affix the seal, or cause it to be affixed, to all agreements, documents and other papers requiring the same.

Section 11. Executive Director.

The Board of Directors shall appoint and the Society shall employ an Executive Director of the Society for a period of time and upon such terms and conditions as the Board of Directors may determine. The Executive Director shall have all of the usual power and authority typically held by a person holding such a position, subject, in all events, to the overall direction and control of the Board of Directors. He/she may make and sign in the name of the Society contracts or agreements in the ordinary course of its business. He/she shall have the authority to employ, supervise, and discharge personnel as from time-to-time may be deemed necessary. He/she shall do and perform other duties as may be assigned from time-to-time by the Board of Directors.

Section 12. Appointed Officers.

The Board of Directors may appoint any subordinate officer as necessary.

Section 13. Assignment and Transfer of Stocks, Bonds and Securities.

The President, the Vice President, the Treasurer, the Secretary, and each of them, shall have power to assign, or to endorse for transfer, under the corporate seal, and to deliver, any stock, bonds, subscription rights, or other securities, or any beneficial interest therein, held or owned by the Society.

ARTICLE VI
CONTRACTS, CHECKS, DRAFTS AND BANK ACCOUNTS

Section 1. Execution of Contracts.

The Board of Directors, except as in these by-laws otherwise provided, may authorize any officer or officers, agent or agents, in the name of and on behalf of the Society to enter into any contract or execute and deliver any instrument, and such authority may be general or confined to specific instances; but, unless so authorized by the Board of Directors, or expressly authorized by these by-laws, no officers, agent or employee shall have any power or authority to bind the Society by any contract or engagement or to pledge its credit or to render it liable in any amount for any purpose.
Section 2. Loans.

No loans shall be contracted on behalf of the Society unless specifically authorized by the Board of Directors.

Section 3. Checks, Drafts, etc.

All checks, drafts and other orders for the payment of money out of the funds of the Society, and all notes or other evidences of indebtedness of the Society, shall be signed on behalf of the Society in such manner as shall from time to time be determined by resolution of the Board of Directors.

Section 4. Deposits.

All funds of the Society not otherwise employed shall be deposited from time to time to the credit of the Society in such banks, trust companies or other depositories as the Board of Directors may select.
ARTICLE VII
INDEMNIFICATION AND INSURANCE

To the full extent authorized by law, the Society shall indemnify any person, made or threatened to be made, a party in any action or proceeding, whether civil or criminal, by reason of the fact that the person, his or her testator or intestate is or was a director or officer of the Society or served in any capacity at the request of the Society any other corporation, partnership, joint venture, trust, employee benefit plan or other enterprise. The foregoing shall not obligate the Society to purchase directors’ and officers’ liability insurance, but should applicable law permit, the Society may purchase such insurance if authorized and approved by the Board of Directors.
ARTICLE VIII
CONFLICTS OF INTEREST

Section 1. Definition of Conflicts of Interest.

A conflict of interest may exist whenever a covered individual is in a position to directly or indirectly benefit him or herself, a family member(s), other individuals, or another organization with which the individual is affiliated through the use of their role in the Society.

Financial relationships are those relationships in which the individual benefits by receiving a salary, royalty, intellectual property rights, consulting fee, honoraria, ownership interest (e.g., stocks, stock options or other ownership interest, excluding diversified mutual funds), or other financial benefit. Financial benefits are usually associated with roles such as employment, management position, independent contractor (including contracted research), consulting, speaking and teaching, membership on advisory committees or review panels, board membership, and other activities from which remuneration is received, or expected. What was received: includes salary, royalty, intellectual property rights, consulting fees, honoraria, ownership interests (e.g. stock, stock options or other ownership interest, excluding diversified mutual funds), or other financial benefit.

Section 2. Disclosure of Conflicts of Interest.

A Director or officer shall disclose a conflict of interest: (a) prior to voting on or otherwise discharging his duties with respect to any matter involving the conflict which comes before the Board or any committee; (b) prior to entering into any contract or transaction involving the conflict; (c) as soon as possible after the Director or officer learns of the conflict; and (d) on the annual conflict of interest disclosure form. The Secretary of the Society shall distribute annually to all Directors and officers, a form soliciting the disclosure of all conflicts of interest, including specific information concerning the terms of any contract or transaction with the Society and whether the process for approval set forth in Section 3 of this Article VIII was used.

Section 3. Approval of Contracts and Transactions Involving Potential Conflicts of Interest.

A director or officer who has or learns about a potential conflict of interest should disclose promptly to the Secretary of the Society the material facts surrounding any actual or potential conflict of interest, including specific information concerning the terms of any contract or transaction with the Society. All effort should be made to disclose any such contract or transaction and have it approved by the Board before the arrangement is entered into.
Following receipt of information concerning a contract or transaction involving a potential conflict of interest, the Board shall consider the material facts concerning the proposed contract or transaction including the process by which the decision was made to recommend entering into the arrangement on the terms proposed. The Board shall approve only those contracts or transactions in which the terms are fair and reasonable to the Society and the arrangements are consistent with the best interests of the Society. Fairness includes, but is not limited to, the concepts that the Society should pay no more than fair market value for any goods or services which the Society receives and that the Society should receive fair market value consideration for any goods or services that it furnishes others. The Board shall set forth the basis for its decision with respect to approval of contracts or transactions involving conflicts of interest in the minutes of the meeting at which the decision is made, including the basis for determining that the consideration to be paid is fair to the Society.

Section 4. Validity of Actions.

No contract or other transaction between the Society and one or more of its directors or officers, or between the Society and any other corporation, firm, association or other entity in which one or more of its corporation or officers are directors or officers, or have a substantial financial interest, shall be either void or voidable for this reason alone or by reason alone that such director or directors or officer or officers are present at the meeting of the Board of Directors, or of a committee thereof, which authorizes such contract or transaction, or that his or their votes are counted for such purpose, if the material facts as to such director’s or officer’s interest in such contract or transaction and as to any such common directorship, office or financial interest are disclosed in good faith or known to the Board or committee, and the Board or committee authorizes such contract or transaction by a vote sufficient for such purpose without counting the vote or votes of such interested director or officers. Common or interested directors may be counted in determining the presence of a quorum at a meeting of the Board of Directors or a committee, which authorizes such contract or transaction. At the time of the discussion and decision concerning the authorization of such contract or transaction, the interested director or officer should not be present at the meeting.

Section 5. Employee Conflicts of Interest.

An employee of the Society with a potential conflict of interest in a particular matter shall promptly and fully disclose the potential conflict to his supervisor. The employee shall thereafter refrain from participating in deliberations and discussion, as well as any decisions, relating to the matter and follow the direction of the supervisor as to how the Society decisions which are the subject of the conflict will be determined. The President shall be responsible for determining the proper way for the Society to handle decisions which involve unresolved employee conflicts of interest. In making such determinations, the President may consult with legal counsel.

The President shall report to the Board at least annually concerning employee conflicts of interest which have been disclosed and contracts and transactions involving employee conflicts which the President has approved.
ARTICLE IX
COMPENSATION

Section 1. Reasonable Compensation.

It is the policy of the Society to pay no more than reasonable compensation for personal services rendered to the Society by officers and employees. The directors of the Society shall not receive compensation for fulfilling their duties as directors, although directors may be reimbursed for actual out-of-pocket expenses, which they incur in order to fulfill their duties as directors. Expenses of spouses will not be reimbursed by the Society.

Section 2. Approval of Compensation.

The Board of Directors must approve in advance the amount of all compensation for Officers of the Society. Before approving the compensation of an Officer, the Board shall determine that the total compensation to be provided by the Society to the officer is reasonable in amount in light of the position, responsibility and qualification of the officer for the position held, including the result of an evaluation of the officer’s prior performance for the Society, if applicable. In making the determination, the Board shall consider total compensation to include the salary and the value of all benefits provided by the Society to the individual in payment for services. At the time of the discussion and decision concerning an officer’s compensation, the officer should not be present in the meeting. The Board shall obtain and consider appropriate data concerning comparable compensation paid to similar officers in like circumstances.

The Board shall set forth the basis for its decisions with respect to compensation in the minutes of the meeting at which the decisions are made, including the conclusions of the evaluation and the basis for determining that the individual’s compensation was reasonable in light of the evaluation and the comparability data.
ARTICLE X
GENERAL

Section 1. Office.

The office of the Society shall be at such place within or without the State of New York as the Society shall determine by resolution from time to time.

Section 2. Books and Records.

There shall be kept at the office of the Society (1) correct and complete set of records of account, (2) minutes of the proceedings of the members, the Board of Directors and the Executive Committee, (3) a current list of the directors and officers of the Society and their residence addresses, (4) a copy of these by-laws, (5) a copy of the Society’s application for recognition of exemption with the Internal Revenue Service, and (6) copies of the past three years information returns to the Internal Revenue Service.

Section 3. Seal.

The corporate seal shall be in the form of a circle and shall have inscribed thereon the following: The Neurocritical Care Society, Inc. A New York Not-for Profit Corporation.

Section 4. Loans to Directors and Officers.

No loans other than through the purchase of bonds, debentures, or similar obligations of the type customarily sold in public offerings, or through ordinary deposit of funds in a bank, shall be made by the Society to its directors or officers, or to any other corporation, firm, association or other entity in which one or more of its directors or officers are directors or officers or hold a substantial financial interest except as allowed by law.

Section 6. Fiscal Year.

The fiscal year of the Society shall commence January 1 in each calendar year and end on December 31 of that year.

Section 7. Related Party Transactions.
The Board of Directors shall adopt a Related Party Transactions Policy, for the purpose of protecting the Society’s interest when it is contemplating entering into a transaction or arrangement with a related party. A copy of the Related Party Transaction Policy shall be appended to these Bylaws.
ARTICLE XI
AMENDMENTS

Amendments to the Bylaws may be proposed on resolution by majority of the Board of Directors. Such amendments shall be presented to the voting membership for consideration. The Bylaws may be amended by a simple majority of votes cast at any meeting of the members.