



# Committee Volunteer Structure, Policies and Guidelines

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# Definitions

## **Statement of Inclusiveness**

HIMSS is an egalitarian group - we endeavor to find a place for all members who wish to serve. Anyone who is a current member of HIMSS (either as individuals, through a Corporate or Affiliate Member's complement of representatives, or memberships via the Organizational Affiliate program) is eligible to serve.

**Committees** are small groups of highly qualified volunteers executing the Society's strategic initiatives via a Board-approved annual plan. Committee members actively engage in work efforts resulting in tangible, valuable resources each year. Committees also recommend the hierarchy of any Task Forces, and Work Groups needed to realize the Society's vision, and oversee these groups' work to ensure consistency with the Society's strategic plan. There is no expectation of Task Forces or Work Groups being created; only if the Committee compliment cannot accommodate the entire scope of work as laid out in the Board-approved annual plan. Committees can also be set up as collaborative endeavors between HIMSS and another organization. Committees, and their members, serve at the discretion of the Chairperson of the HIMSS Board of Directors.

**Sub-Committees** are small groups made up entirely of volunteers from a parent committee. At the direction of the Committee Chairperson, they come together to work on committee projects and then disband.

**Task Forces** are groups of volunteers gathering together to work on narrow-issue projects for the Society. Task Forces convene for a particular period of time to work on the project, and then disband. Task Forces serve at the discretion of the Chair of the HIMSS Board of Directors and nearly always function under the auspices of a HIMSS Committee.

**Work Groups** are similar to Task Forces in that they are groups of volunteers gathering together for a particular period of time, and then disband. Work Groups differ in that they gather to work on time-sensitive or single-issue projects for the Society. Work Groups always function under the auspices of a HIMSS Committee. Further, Work Groups can only be created on the authority of a Committee, or Board of Directors.

**Roundtables** are Board-created groups focusing on strategic subjects and/or audiences for the Society. Each Roundtable has a specific core constituency – for example, chapter liaisons focusing on state legislative and regulatory issues. Roundtables, and their Chairs, serve at the discretion of the Chair of the HIMSS Board of Directors.

## **Volunteer Service Criteria and Statements of Purpose**

### **Committees**

Any member who has belonged to HIMSS for more than 12 months and is not currently serving in a leadership position (ex. Committee Chair or Board of Directors) - nor has a current Committee appointment - within in the Society can apply for a Committee appointment. Committees are populated through an application process in which the Chairperson-Elect of HIMSS creates a complement of volunteers that represent the Society's constituencies and have relevant skills and talents needed to achieve the year's goals. Infrequently, to achieve the desired complement of skills and talents, it is necessary to appoint a current member who has been a member of HIMSS less than 12 months.

Most committee appointments are two-year terms. (Davies Committee appointments are for three-year terms.) Depending upon the cycle of the Committee's work, the term will either be July 1 - June 30, or January 1 – December 31. Chair appointments are for a one-year term. To be considered for a Chair appointment, an individual must have maintained a current HIMSS membership for at least the previous 24 months. Infrequently, to achieve the desired complement of skills and talents, it is necessary to appoint a Chair who has been a member of HIMSS less than 24 months. If a particular skill set is required of the Chair, and no new candidates meet the requirements, the Chairperson may re-appoint the same individual for a second one-year appointment. HIMSS and non-HIMSS members may be appointed in a one-year, non-voting capacity on a Committee to serve as an advisor or as a liaison with another group. Such an appointment is made by the Board Chair when it is beneficial to include the voice of a HIMSS collaborator (e.g., other associations, governmental agencies, etc.).

Committees serve primarily as a group to execute and realize the strategic initiatives and annual plans of the Society, within a clear scope of responsibility (ex: development of resources germane to ambulatory professionals). If the scope of work outlined in the Board-approved annual plan is beyond the Committee's capacity to achieve, Committees have the ability to recommend Task Forces and/or Work Groups to address specific topics or tactics. These groups are accountable to the committee for successful completion of a project. Most Committees convene via conference call although in-person meetings are occasionally scheduled as required. Scheduling of in-person meetings is subject to the approved annual budget and plan.

At the discretion of the Committee Chairperson, a Sub-Committee can be formed. Sub-Committees are made up entirely of members from the parent committee. Their function is to focus on specific issues facing the Committee, report their findings back to the parent Committee, and then disband.

### **Task Forces and Work Groups**

Any member who is not currently serving in a leadership position (such as a Committee Chair or serving on the Board of Directors) within in the Society is eligible to serve,

depending upon the requirements needed to help the group achieve its stated purpose. Non-members may serve on these groups if they represent an organization or constituency that is typically not a member of HIMSS (e.g., other associations, governmental agencies, non-IT healthcare professionals, etc.). If a particular skill set is required, but not represented by those who have volunteered to serve, the Chairperson or Staff Liaison is encouraged to recruit an eligible person.

Task Forces and Work Groups exist for a definite time period to achieve one to three goals. If this work exceeds 12 months, the Staff Liaison will work with the Committee Chairperson or HIMSS Chairperson-Elect to, as appropriate, infuse the group with a revised group of volunteers and appoint a new Chair. The Chair of a Task Force or Work Group serves for a one-year term. If a particular skill set is required of the Chair, and no new candidates meet the requirements, the Chairperson may re-appoint the same individual for a second one-year appointment. To be considered for an appointment as a Task Force chair, an individual must have maintained a current HIMSS membership for at least the previous 12 months or demonstrate unique experience that might not be readily found among individuals who have been members at least 12 months.

Task Forces and Work Groups meet exclusively by conference call. If an industry event takes place in which many of the members of a Task Force or Work Group are planning on being in attendance, a face-to-face meeting can be convened on an as-needed basis. HIMSS is not responsible for any travel or out-of-pocket expenses incurred by Task Force or Work Group members.

### **Roundtables**

Members can serve in a leadership position within in the Society and also on a Roundtable. Roundtables are chartered and disbanded by the Board of Directors, exist to strengthen a HIMSS strategic initiative, and represent a specific core constituency within the Society's community. Roundtable Chairpersons are appointed by the Chairperson-Elect of HIMSS. To be considered a Chair appointment, an individual must have maintained a current HIMSS membership for at least the previous 24 months. Infrequently, to achieve the desired complement of skills and talents, it is necessary to appoint a Chair who has been a member of HIMSS less than 24 months. Roundtable members can remain with the group indefinitely, as long as they continue to meet the criteria (ex: current HIMSS member who works in a veteran, woman, or minority-owned business). Chairs are appointed for one year starting on July 1 and ending on June 30. If a particular skill set is required of the Chair, and no new candidates meet the requirements, the Chairperson may re-appoint the same individual for a second one-year appointment.

## **Creation, Volunteer Selection, Functional Guidelines, and Dissolution Processes**

### **Committees**

1. Through the staff, the Chair or Chair-Elect of Board of Directors identifies an unmet need for a Committee which includes:
  - What is the proposed purpose of this Committee?
  - How does this proposal fit into the current HIMSS key subjects and audiences?
  - What current HIMSS member/customer would most benefit from the creation of this group? Roughly, how many are in that constituency?
  - What critical requirements (needs) of our members would be met through the creation of such a group?
  - What new opportunities would this group create for HIMSS? Or, what currently unmet HIMSS need would be addressed?
  - What are proposed, first-year annual deliverables from this group?
  - Who would be the staff liaison?
  - If created, what would be the impact on HIMSS resources (staffing, financial, support departments, volunteers, other)?
  - What are the talent/skills required by volunteers to serve on the Committee?

Using the above information, the Chair or Chair-Elect makes a determination.

2. Presuming approval from the Chair (or Chair-Elect), Committee's Staff Liaison annually publishes a call for applications for potential volunteers in appropriate HIMSS communiqués. These notices include a date by which members must apply, and the criteria for selection.
3. Members can be appointed to one Committee at a time and must have maintained a current individual membership within HIMSS for at least the past 12 months. Infrequently, to achieve the desired complement of skills and talents, it is necessary to appoint an individual who has been a member of HIMSS less than 12 months.
4. The Staff Liaison reviews the applications, consults with the committee chair, and makes a recommendation to the HIMSS Chairperson-Elect. The Chairperson-Elect reviews the recommendation, makes the final selection of Committee members, and appoints the Committee Chairperson and Board Liaison (if applicable) for a one-year term. The Chairperson-Elect may also appoint a Committee Vice-Chair, if deemed necessary. The role of Vice-Chair is not a precursor to, nor an implied promise of, a Chair appointment in future. To be considered for either a Chair or Vice-Chair appointment, the individual(s) must have maintained a current HIMSS membership for at least the past 24 months. Infrequently, to achieve the desired complement of skills and talents, it is necessary to appoint an individual who has been a member of HIMSS less than 24 months. If a particular skill set is required of the Chair, and no new candidates meet the requirements, the Chairperson may re-appoint the same individual for a second one-year appointment.

5. All applicants are contacted with the outcomes of the selection process. Most often, members not selected for involvement in a Committee are invited to consider involvement in a Task Force, Work Group, or as a Subject Matter Expert.
6. Committees are expected to produce notes of their meetings and any other written or verbal documentation of their work. Board reports from each group shall be prepared by the staff liaisons annually for a Board meeting.
7. Committees serve at the discretion of the Board of Directors and can be disbanded at any time deemed appropriate by the Board.

### **Task Forces**

1. An authorizing body identifies an unmet need for a Task Force which includes:
  - What is the proposed purpose of the Task Force?
  - Under what Committee (if any) would this group serve?
  - What are 2-3 proposed specific deliverables from this group? Within what timeframe?
  - How does this proposal fit into the current HIMSS key subjects and audiences?
  - If created, what would be the impact on HIMSS resources (staffing, financial, support departments, volunteers, other)?
  - What current HIMSS member/customer wants the output from this group? Roughly, how many are in that constituency?
  - What critical requirements (needs) of our members/customers that would be met through the creation of such a group / delivery of the end product?
  - What new opportunities would this offering create for HIMSS? Or, what currently unmet HIMSS need would be addressed?
  - What are the talent/skills required by volunteers to serve on the Task Force?

Using the above information, the Chair or Chair-Elect makes a determination.

2. Using the above information, the Committee's Staff Liaison writes up a call for volunteers. This call is published in appropriate HIMSS communiqués and includes a date by which responses are requested.
3. All applicants are eligible to serve, depending upon the requirements needed to help the group achieve its stated purpose.
4. The Board Chair approves Task Force Chair appointments. Chairs of Task Forces serve a one-year term and must have maintained a current HIMSS membership for at least the previous 12 months or demonstrate unique experience that might not be readily found among individuals who have been members at least 12 months.
5. Task Forces are expected to produce notes of their meetings and any other written or verbal documentation of their work upon request from the Committee.
6. Task Forces serve at the discretion of the Committee or authorizing body and can be disbanded at any time by either of these entities. If a Committee wishes to disband a

Task Force before completion of its duties, the Board Chair shall be consulted before any action is taken.

### **Work Groups**

1. The Committee/Task Force identifies an unmet need for a Work Group which includes:
  - What is the proposed purpose of this Work Group?
  - What is the proposed specific deliverable from this group? Within what timeframe?
  - Under what Committee /Task Force would this group serve?
  - How does this proposal fit into the current HIMSS key subjects and audiences?
  - If created, what would be the impact on HIMSS resources (staffing, financial, support departments, volunteers, other)?
  - What current HIMSS member/customer wants the output from this group? Roughly, how many are in that constituency?
  - What critical requirements (needs) of our members/customers would be met through the creation of such a group / delivery of the end product?
  - What new opportunities would this offering create for HIMSS? Or, what currently unmet HIMSS need would be addressed?
  - What are the talent/skills required by volunteers to serve on the Work Group?
2. Members of a Work Group are drawn from members of the authorizing Task Force or Committee, and the membership at-large.
3. A call for volunteers is published in appropriate HIMSS communiqués and includes a date by which responses are requested.
4. All applicants are eligible to serve, depending upon the requirements needed to help the group achieve its stated purpose.
5. The Committee/Task Force names a Chairperson for the Work Group, and identifies a member of the Work Group as the Liaison back to the full Committee/Task Force. Work Group Chairs serve a one-year term and must have maintained a current HIMSS membership for at least the previous 12 months or demonstrate unique experience that might not be readily found among individuals who have been members at least 12 months. The Committee/Task Force Liaison is responsible for ensuring that full and accurate reporting occurs between the Committee/Task Force and the Work Group.
6. Work Groups are expected to produce notes of their meetings and any other written or verbal documentation of their work upon request from the Committee/Task Force or Board of Directors.
7. Work Groups serve at the discretion of the Committee/Task Force or authorizing body and can be disbanded at any time by either of these entities.

## **Roundtables**

1. The Board of Directors ratifies the creation of a Roundtable upon submission of the following:
  - What is the proposed purpose of this Roundtable?
  - How does this proposal fit into the current HIMSS key subjects and audiences?
  - If created, what would be the impact on HIMSS resources (staffing, financial, support departments, volunteers, other)?
  - What membership criteria (i.e. individuals engaged in HIEs or a Chapter leader) fit this group? Roughly, how many are in that constituency?
  - What critical requirements (needs) of this constituency would be met through the creation of such a group?
  - What new opportunities would this offering create for HIMSS? Or, what currently unmet HIMSS need would be addressed?
2. Using the above information, the staff liaison(s) periodically publishes a call for potential volunteers.
3. The Board Chair approves Roundtable chair appointments. Chairs of Roundtables serve a one-year term and must have maintained a current HIMSS membership for at least the previous 24 months. Infrequently, to achieve the desired complement of skills and talents, it is necessary to appoint a Chair who has been a member of HIMSS less than 24 months.
4. Roundtables serve at the discretion of the Board of Directors and can be disbanded at any time deemed appropriate by the Board.

## **Collaborative Efforts with External Entities**

From time to time to achieve a goal of the Society, it will become advantageous to develop a close working relationship with one or more external organizations. This close working relationship can take many forms – one of which may be a Collaborative Committee or Work Group.

To create a Collaborative Committee or Work Group, a Statement of Purpose must be signed by an authorized person from each organization, and the CEO of HIMSS.

The Statement of Purpose must include, but is not limited to, the following items:

1. Objective and desired outcomes of the collaboration
2. Names of collaborating organizations
3. Scope and timeline of the Committee or Work Group and what is expected of the volunteers
4. Identification of a Staff Liaison from each organization and statement of their responsibilities
5. Identification of financial and logistical responsibilities of each organization
6. Number and qualifications of volunteers needed from each organization

The existing guidelines for committee involvement also apply to those HIMSS representatives on a Collaborative Committee or Work Group.

## **Roles & Responsibilities**

### **Role of the Chairperson**

The Chairs of the various HIMSS volunteer groups serve a crucial leadership role. Chairs are considered to be experts in the topic area of the volunteer group, demonstrate strong leadership roles, and show significant interest in the topic. It is a distinct advantage if the Chairperson also has substantive health sector connections to link the work of the volunteer group to other initiatives and entities.

Specifically, the Chairperson is expected to:

1. Lead all group meetings
2. Bring the group to consensus regarding the Board-approved annual plan, scope of work, priorities, white papers, position papers, etc
3. Ensure that group members feel appreciated, valued, and involved
4. Ensure that no one group member – or small group of members – dominates the discussions or the scope of work
5. Keep the group engaged, motivated, focused on outcomes that will achieve the group's charter, and delivered in a timely manner
6. Recognize that a volunteer leader role is public and that comments made surrounding the group's work must be made carefully in context with the larger HIMSS strategic vision.
7. Upon reasonable request by HIMSS leadership, offer public comments on behalf of the Society. For example, to provide testimony, give a presentation, or be interviewed by a journalist
8. Participate in quarterly conference calls of all the Chairs of HIMSS Committees.

### **Role of the Vice Chairperson**

If deemed appropriate for the Committee, the HIMSS Board Chairperson may, on occasion, appoint a Vice Chair. Serving as Vice Chair is a one-year appointment with no implied or overt intent to step into a future role as Chairperson. Vice Chairs, in the absence of the Chair, run meetings. The Vice Chair may also lead a Committee effort on a particular topic or area.

### **Role of the Volunteer Participants**

The volunteers of the many HIMSS initiatives are keys to the success of the organization. Their value cannot be overestimated and their input is welcomed and encouraged at every level within HIMSS.

Specifically, volunteers are expected to:

1. Actively participate in all group meetings and events
2. Volunteer to perform specific duties that enable the group to achieve its goals
3. Complete volunteer work within the scope and timeline
4. Work as a member of a collaborative team – balancing the interests of HIMSS with each person's interests for professional development, learning, and contributions

5. Focus on the “win” for healthcare, rather than a sale for a corporation or benefit for an organization or individual

### **Role of the Board Liaison**

Each Committee, and a few Task Forces, has an appointed Board Liaison. This individual, a current member of the HIMSS Board of Directors, serve as the link between the volunteer groups and the Board of Directors.

Specifically, the Board Liaison is expected to:

1. Help maintain the Chairperson's and appointees' focus on the stated purpose of the group and its current year's work plan.
2. Keep the group apprised of the Board of Directors’ vision and expectations for the volunteer group
3. Attend and actively participate in all group meetings.
4. Ensure that group members feel appreciated, valued, and involved
5. Make public comments on behalf of the volunteer group, as appropriate
6. Raise the Board’s attention to valuable outcomes achieved by the volunteer group

### **Role of the Staff Liaisons**

The staff liaison is part of the national HIMSS staff assigned to work with specific groups. Staff liaisons take their roles very seriously, doing their utmost to work collaboratively with all volunteers, enabling them to achieve and improve healthcare for all.

For Committees, Task Forces, and Roundtables, the staff liaison is expected to:

1. Draft agendas for meetings which are reviewed and approved by the Chairperson
2. Record notes, make any changes requested by group members, and disseminate
3. Ensure that group members feel appreciated, valued, and involved
4. Ensure that group members who volunteer for specific tasks complete their work within the scope and timeline
5. Provide reasonable support and direction to volunteers, when possible, to help ensure that they can complete their work in a quality and timely fashion

***As a rule of thumb, there is no Staff Liaison appointed to a Work Group.***

## **Responsibilities of Volunteers**

As a Society, HIMSS is devoted to providing any interested current member with a way to serve. Volunteers bring many unique characteristics, talents, and skills to Society activities. A volunteer is expected to actively participate throughout the term of service, while maintaining a current membership in the Society.

Second, there is a culture within the volunteer groups that calls for a collaborative style. Volunteers are expected to comply with the HIMSS Code of Ethics, adopted by the Board of Directors in 1994. While providers, vendors, consultants, clinicians, administrators, staff, end-users, etc. serve side-by-side in volunteer groups within HIMSS, all are expected to set aside their competitive or personal agendas. It is inappropriate for a vendor or consultant to try and sell a product or service, or to influence a group towards a position that would favor one vendor or consulting firm. Conversely, it is inappropriate for an end-user to influence the group towards projects that would benefit their own organization.

Third, for volunteer groups to create excellent work, an atmosphere of trust must exist. To engender trust within various groups, HIMSS has established a Statement of Confidentiality. Information obtained during the natural course of discussions during any conference calls and/or meetings are for the sole purpose of the group's activities. Transcripts, summaries of discussions, minutes, and work products are to remain private unless explicit written authorization is secured from HIMSS. Volunteers representing their group in a public forum will submit all materials (presentations, opinion pieces, status reports, etc) to their staff liaison for approval prior to the event.

If a member of a volunteer group does not comply with the HIMSS Code of Ethics, the HIMSS collaborative culture, or the Confidentiality Statement, they will receive a call from their Chairperson to discuss the situation. If, upon conclusion of the intervention, the situation is not rectified, the member will be removed from the group.

### **Committee Responsibilities**

At the Committee level, there is a formal application process. If selected, the volunteer is expected to fully participate in the group and to volunteer to perform needed duties. If, after joining, the volunteer finds that s/he will not be able to honor their commitment to the Committee, that individual is expected to formally resign from the group in a timely manner.

If a Chairperson of a Committee misses any combination of two meetings, events, deadlines, or commitments, they will receive a call from the HIMSS Staff Liaison or Executive Vice President to confirm that they are still able and willing to serve as Chairperson. If the Chairperson misses one additional meeting, event, deadline, or commitment, the HIMSS Board Chairperson will remove this individual from their position and appoint a replacement.

If a member of a Committee misses two meetings, events, deadlines, or commitments, they will receive a call from the Chairperson of the group to confirm that they are still able and willing to serve. If they miss one additional meeting, event, deadline, or commitment the HIMSS Board Chairperson will remove this individual from the group and appoint a replacement.

HIMSS leadership understands that life and work situations can change dramatically, making it impossible to honor the commitment to a HIMSS Committee. In these cases, the Board Chair will name a replacement appointee. If, in future, the individual believes s/he has regained the ability to assume the responsibilities of a volunteer, HIMSS encourages him/her to contact the staff liaison assigned to the Committee to which they were originally appointed. HIMSS will examine the situation and make a re-appointment, if possible.

### **Task Force & Work Group Responsibilities**

At the Task Force and Work Group level, any current member is eligible to serve, depending upon the requirements needed to help the group achieve its stated purpose and the requirements of membership tenure (if any). If, after joining, the volunteer finds that there is not a clear fit, the volunteer is under no obligation to remain involved in the group. As a professional courtesy, it is expected that the volunteer will contact the group's Chairperson to formally resign from the group.

### **Roundtable Responsibilities**

For Roundtables, once an individual is appointed based upon the eligibility criteria outlined earlier in this document, s/he is expected to actively participate. If the member misses two meetings, events, deadlines, or commitments, they receive a call from the Chairperson of the group to confirm that they are still able and willing to serve. If they miss one additional meeting, event, deadline, or commitment the staff liaison will reach out to the Corporate Member or Chapter responsible for this individual's participation to ensure that the Corporate Member/Chapter is still interested in participating on the Roundtable. If so, a replacement will be recommended to the HIMSS Chairperson of the Board.

## HIMSS Position Statement Creation & Approval Process

Through the normal course of their work, HIMSS volunteer groups occasionally undertake the effort to create a document that may result in being adopted as an official position of the Society. To assist groups in their efforts, the Society developed a seven-step process. This process was ratified by the HIMSS Board of Directors in December, 2005.

1. HIMSS Communities (ie. Chapters, SIGs) may take regional positions that are not in conflict with an existing Society position. Prior to release, such positions need to be reviewed and approved by the HIMSS Executive Vice President to ensure they are consistent with the national goals and objectives of the Society.
2. Any member or Community of HIMSS can suggest a national topic on which they would like the Society to comment regarding a healthcare information technology and management systems issue. The HIMSS Board of Directors is the single governing entity with the authority to approve a position statement on a national topic on behalf HIMSS.
3. All such suggestions are to be sent to appropriate HIMSS staff liaison, who will forward the request to the appropriate Committee (i.e. Ambulatory Information Systems; Patient Safety; etc.) for review and recommendation.
4. The Committee will validate that the proposed position topic is consistent with the national goals and objectives of the Society. If it is, the Committee will then draft a position statement and communicate back with the submitting group. The originator is encouraged to suggest communication and implementation strategies.
5. The Staff Liaison will then circulate a working consensus position statement to other appropriate Committees for comment. Once a final consensus statement has been crafted, the HIMSS Executive Management team will review it prior to submission to the Board of Directors. The submitter of the proposed position will be kept in communications throughout this process.
6. Normally, position statements are reviewed during a regular meeting of the Board of Directors. If there is a special need, the Board can expedite position statements for approval.
7. If approved, HIMSS teams prepare the position statement for external communication and implementation of other activities, as needed. The submitting group is also notified at the same time that the position has been adopted by HIMSS.

The HIMSS EHR Association may adopt position statements pertaining directly to their topic area for which a consensus may not have been achieved. The following identifies the alternative process by which such actions can be taken.

5.(alt.) In the event, during step 5, no consensus can be achieved, the process shall follow this alternative procedure for these two groups:

- a. The staff liaison shall facilitate a conversation between the Chair of the originating group and the HIMSS Board Chair to attempt to reconcile differences.
  - i. If common ground is reached, the proposed statement as agreed upon shall be submitted to the HIMSS Board of Directors for approval as an official position of HIMSS.
  - ii. If reconciliation of views cannot be achieved:
    1. The group's Chair may submit the issue to the HIMSS Board of Directors for resolution; or
    2. The group's Chair may initiate a vote of the group's membership to solicit the group's approval of the position as originated by the group. At least 75% of the group's membership must participate and the statement shall be adopted as the group's position with a 51% affirmative vote.

6. (alt). If adopted by the group, the Chair develops a written communication to the Board of Directors clearly articulating the outcome and rationale for the decision.

7. (alt). The position statement is communicated externally as a position of the originating group, and the group implements other activities as needed.

## Committee Balance, Rotation and Selection Process

There is an appointment process for Committees. Task Forces or Work Groups do not appoint volunteers; all members are eligible to serve (some requirements for membership tenure may apply to leadership roles). It is up to the Chairperson to ensure that the groups complement both represents HIMSS membership constituencies and has the necessary skills and talents to achieve its goals. Visit the [Committees page](#) on the HIMSS website to learn more about the active groups. Included on that page are the names, phone numbers, and email addresses of the staff liaison. If you'd like to become involved in a Task Force, Roundtable or Work Group, please contact the appropriate HIMSS staff liaison and indicate your interest.

### *Achieving Equity in Rotation and Balance of Committees:*

HIMSS has designed its committees in such a way that approximately 50% of the volunteers on each committee rotate annually. This results in somewhere in the neighborhood of 4-7 openings for new volunteers to be selected for an appointment on each committee, allowing for an influx of new volunteers while preserving some measure of continuity in a committee's work.

Annually, HIMSS encourages all members who have been members for at least 12 months to apply for service on a Committee. Once the committee application period has closed, all applications are carefully reviewed. The complement of volunteers who will remain on the committee for the following fiscal year is assessed and needs identified (such as a lack of clinician participation).

Members can be appointed to one Committee at a time. Their appointment is for a two-year term. If a member is currently serving on a Committee, that individual is not eligible for a second appointment.

Chairs are appointed for a one-year term and must have been HIMSS members for at least the previous 24 months. If a particular skill set is required of the Chair, and no new candidates meet the requirements, the Chairperson may re-appoint the same individual for a second one-year appointment. Infrequently, to achieve the desired complement of skills and talents for the group, it is necessary to appoint a Chair who has been a member of HIMSS less than 24 months.

### *Committee Selection Criteria:*

The criteria used to select new committee members includes (1) ensuring each committee represents, in microcosm, the entire HIMSS community [example: military, clinician, vendor, CIO, etc]; (2) that the committee is represented to the best of HIMSS ability in regards to gender, ethnicity, and other such criteria; (3) that the committee includes those who demonstrate content expertise on their application and those who are relatively new to the content area; (4) members who are relatively new to HIMSS volunteer work balanced against those members who have had some or much experience in HIMSS volunteer work; (5) that the group is representative geographically of the nation and

according to work setting [example: provider, vendor, payer, ambulatory, etc], (6) balancing the incoming committee appointee attributes with those of the existing complement; and, (7) that the volunteers will attend conference calls, complete assignments, and demonstrate other attributes of a committed volunteer.

*Committee Selection Process:*

The existing Committee Chairperson and the staff liaison carefully review the applications; they may convene interview-type calls with candidates and check references. Once this investigative work is complete, a formal presentation of recommendations is made to the Chair-Elect; who also has a full listing of all the committee applications. The Chair-Elect of the HIMSS Board of Directors makes the final committee appointments.

## **Annual Conference Education Committee Standard Operating Procedures**

### **Committee Change Structure and HIMSS Membership Roles**

Committee member terms run from July 1<sup>st</sup> – June 30th, with the new Committee Chair taking office on July 1<sup>st</sup>. HIMSS Standard Operating Procedures for the “committee selection process,” “committee selection criteria,” and “roles and responsibilities” apply to ACEC appointees. However, in addition to the standard selection criteria, applicants are chosen by taking into consideration their topic category expertise and their years of experience within a specific industry. Finally, to be considered for ACEC, applicants must have served as an Annual Conference Reviewer for at least two years, not necessarily consecutively.

**Purpose:**

- To identify key topics for the Call for Proposal process.
- From the pool of eligible presentation proposals, recommend high-quality sessions for the HIMSS Annual Conference & Exhibition. This work is performed in conjunction with, and with recommendations from, Annual Conference reviewers.

The planning year for the ACEC runs from July 1st - June 30th; the committee meets face-to-face twice a year, once at Annual Conference and once during proposal selection, typically in August. Additional calls are held on a monthly basis.

To assist the ACEC in its task to select high quality presentations for the Annual Conference, proposals are first reviewed and discussed by a team of Annual Conference Reviewers; input is also received from ACEC Liaisons and HIMSS staff. Each member of ACEC is appointed to chair a Topic Category Work Group(s), guides that group’s work, and presents the group’s recommendations to the ACEC.

## **ACEC Committee Appointees and Structure**

### *ACEC Committee Chair Appointment:*

In addition to standard criteria for service as Chair to any HIMSS Committee, to be eligible for the role of ACEC chair, volunteers must have participated as an Annual Conference Reviewer for at least two years, not necessarily consecutively; and must have participated on the ACEC for at least one Annual Conference cycle before applying for the position.

### *ACEC Members:*

In addition to the standard criteria for service on any HIMSS Committee, ACEC appointees' selection is based on topic category expertise, years of experience within industry, and service as an Annual Conference Reviewer for at least two years, not necessarily consecutively. To ensure adherence to the ACCME's guidelines for continuing education, no appointments will be made where there is a commercial interest, i.e. vendor, consultant, or otherwise.

### *ACEC Liaisons:*

In addition to the members of the ACEC, liaisons may also be asked to serve. Liaisons are added to the ACEC to represent emerging audiences that are not represented among the appointed ACEC members. These are non-voting members who may serve up to two years in this capacity. Liaisons are approved by the HIMSS Board of Directors and must be HIMSS members.

Other than non-voting, Liaisons serve the same function as other ACEC members. They are highly involved in the proposal selection process and must be present for the ACEC face-to-face meetings, and all conference calls.

## **Other Roles involved in the ACEC**

To ensure that the call for proposals is fair, unbiased, and commensurate with the strategic goals of HIMSS, several different communities are engaged in the ACEC process.

### *Annual Conference Reviewers:*

To facilitate proposal selection by the ACEC, each proposal is first reviewed and scored by a panel of Annual Conference Reviewers.

Annual Conference Reviewers are HIMSS members who lend their time and expertise to review proposals submitted to HIMSS through its call for proposal process. Their reviews are based on defined criteria and there is a reviewer panel for each topic category. A member of ACEC facilitates each reviewer panel.

Each reviewer panel is responsible for the review of all proposals in their topic category which they evaluate through an online system. Each proposal is reviewed at least three times by at least three different reviewers specializing in that topic category. Reviewers score proposals and provide constructive feedback to the proposal submitters.

During a series of reviewer conference calls, scheduled prior to the ACEC face-to-face conference planning meeting, the panel works to produce a list of proposal selection recommendations. During these calls, the panel also identifies gaps - if any - in the proposal pool that prevent the panel from offering up a robust, comprehensive set of recommendations meeting the criteria of the topic.

At the ACEC planning meeting, the reviewers' recommendations are discussed in detail before a determination is made regarding each proposal. ACEC members have the authority to override the reviewers' recommendations as necessary to achieve a robust, comprehensive educational agenda.

Once proposals have been selected by the ACEC, reviewers may be assigned to:

- mentor presenters,
- assist speakers in developing optimal presentations,
- evaluate presentation materials in advance of Annual Conference,
- evaluate sessions on-site.

Calls for Reviewers are published annually. Reviewers are selected by the ACEC. To qualify, an individual must be a current HIMSS member who has not submitted a presentation proposal in the topic category for which s/he will be reviewing. Once selected, Reviewers may continue to serve indefinitely, as long as they continue to meet the above two criteria.

*Continuing Education Accrediting Agency Representative (Post-Graduate Institute for Medicine (PIM)):*

A PIM Staff Member may attend both face to face meetings of the ACEC as a non-voting member who serves in a continuing education consultant role.

# Davies Committees' Standard Operating Procedures

## Committee Selection, Rotation, and Balance Process

The Davies Committees are populated through three-year appointments by the Chairperson of the HIMSS Board of Directors. With two exceptions, the existing HIMSS standard operating procedures for “committee selection process” and “committee selection criteria”, and “roles & responsibilities” applies to Davies appointees.

The first exception is that preferential consideration is given those applicants who demonstrate proficient knowledge of the domain space addressed by the particular Davies Committee on which they serve, and those applications who were the lead person responsible for applications which have received a Davies Award.

The second exception is that individual members of HIMSS are ineligible for a Davies Committee appointment if they are either (a) employed by a vendor company or (b) directly working in an extensive consulting capacity with/for a vendor company. If a current member of a Davies Committee takes a job with a vendor company, s/he must resign his/her position on the Committee.

On average, 30% of Davies committee members rotate annually. This results in approximately 2-5 openings for new volunteers, while preserving continuity in a Davies' committee work.

## Committee Appointees

*Davies Recipients:* HIMSS strongly encourages and welcomes the active engagement of Davies winners as members of the Davies Committees. The individual who led the Awardee's application effort throughout its process will be offered a three-calendar-year appointment, with a maximum of two consecutive terms, to the Davies Committee that awarded their application.

*HIMSS Member Volunteers:* Appointments of non-Davies recipients with domain expertise, as described above, to the Davies Committees are three-year terms January 1 – December 31. Such volunteers are eligible to serve a maximum of two consecutive terms.

## Davies Chair Appointments

The existing HIMSS standard operating procedures for Committee Chair appointment and the Chairperson's roles & responsibilities apply to the Davies Committees with two additional requirements – to be eligible to serve as Chair, an individual must have (1) served on the Davies Committee for at least two years and (2) participated in at least one applicant site visit. It is preferred that the Chair of each Committee be filled by a Davies

winner; however, HIMSS recognizes that it may be impossible to secure a winner's services as Chair – this is a preference only.

### **Recusal Process**

There are four situations requiring the recusal of Davies Committee members from the full Davies process for a calendar year. These four situations are:

1. If a Davies Committee member's organization or client of a consulting firm member wishes to submit an application, that individual must recuse themselves from the Committee upon receipt of the application. If they have not recused themselves, their organization or client cannot apply for a Davies award in that calendar year. The recusal period is for as long as the application is active.
2. If a Davies Committee member is employed by a potentially competitive entity, (i.e. same geographic area, similar population pool, or performs consulting services for a facility that competes with an applicant entity) that individual must recuse themselves from the Committee upon receipt of the application. The recusal period is for that calendar year.
3. If a Davies Committee member is employed by the same corporate structure as an applicant, that individual must recuse themselves from the Committee upon receipt of the application. The recusal period is for as long as the application is active.
4. If a Davies Committee member changes jobs, or engages in a consulting engagement, and their new employer/client applies for a Davies Award, they must recuse themselves from the Committee upon receipt of the application. If they have not recused themselves, any application submitted by their organization or client will not be considered for a Davies award in that calendar year. The recusal period is for as long as the application is active.

If, due to the number of recusals, a Davies Committee's subject matter expertise is compromised, then the Committee Chair will recommend to the Chair of the HIMSS Board of Directors names of individuals from the Davies Roundtable to round out the complement of the Committee for that calendar year.

### **Voting**

1. Prior to group discussion, all members of the Davies Committees are to submit a completed "Davies Scoring Guide". Only those members who complete the "Guide" for a specific application are eligible to vote for that application.

2. For voting to occur, a quorum of at least 50% of the Committee's membership must be present.
3. Voting is conducted at the conclusion of the review of each application. To cast a ballot, a Committee Member must be present during the full discussion of, and during the voting for, an applicant. For an application to move forward, at least 51% of the ballots must be affirmative. Once a vote is complete, it cannot be re-opened for discussion.