

Council Nominations

Approved by Council 9/28/97, amended by Membership 11/26/99, amended and approved by Executive Committee 12/21/00, amended and approved by Council 5/01, amended and approved 2/28/08, reaffirmed by Council 9/10/11, reaffirmed by Council 5/6/17

The following policy guidelines are the outcome of the work of the Task Force on Member Representation. Their purpose was to reform SCCM's nominations procedures and to define objective criteria for selecting Council nominees.

Composition of the Nominating Committee

The Nominating Committee will be composed of seven members, five of whom are presidential appointments.

- Past president (also serves as chair)
- Three Council representatives (president-elect plus two chosen from a rotating section schedule)
- Council representatives to be appointed for one (1) year terms (and be eligible for reappointment)
- Three non-Council representatives chosen from a rotating section schedule
- Non-Council committee members to be appointed for three (3) year terms

Function of the Nominating Committee

- The chair is responsible for a smooth nomination process. The chair does not vote in the selection process, except in the event of a tie.
- The Nominating Committee is responsible for selecting a slate of Council candidates on which the membership will vote. This slate of candidates is chosen using objective criteria (as listed below).
- The Nominating Committee will solicit the section leadership, committee chairs, and Council members for Council nominees, as well as the general membership and staff. The criteria for candidates will be distributed annually at the time of solicitation and will include an explicit description of the nomination process.
- A section with a designated seat for election should propose at least two candidates.
- A section may not nominate a member of that section for an at-large seat during the scheduled, regular rotation, election, or re-election of his/her designated Council seat.
- The Nominating Committee is responsible for ensuring that candidates are qualified and appropriate.
- Once the slate is determined, the Nominating Committee forwards the slate of candidates to the SCCM EC for review.
- If the slate is acceptable, the election proceeds. If the slate is unacceptable, the EC cannot make changes to the slate, but returns it to the Nominating Committee for the determination of an alternate slate of candidates.

- The amended slate is again forwarded to the EC for approval. The presence of the past president and president-elect on both committees ensures consistency of communication between the two committees.
- The final slate must be approved by the SCCM Council.

Criteria for Council Nominees

Nominees must meet the following criteria:

1. Be an SCCM member for five (5) or more years
2. Demonstrate commitment to SCCM and its goals as evidenced by active participation in committees, task forces, sections, program development, publications, etc., and/or significant contributions to the field of critical care medicine
3. Demonstrate the following abilities:
 - a. Work in concert with a diverse group of people (Team Player)
 - b. Select and organize groups to achieve specific goals (Team Builder)
 - c. Bring a project to completion (Team Leader)
4. Volunteer enough time to fulfill obligations expected of a Council member. This entails one and a half to two weeks per year for Council meetings (excluding travel time) plus additional time committed to assigned work.
5. Provide the following supporting documents:
 - a. Curriculum vitae
 - b. Personal statement, which should specifically address examples of criterion 2 above and should be limited to 200-250 words.
 - c. Two letters of support for nomination to Council from any two SCCM members. These letters must specifically address examples of how the nominee has met criterion 2 above. It is the candidate's responsibility to solicit letters of support.

If a candidate for either Council or the ACCM BOR is approved by either Nominating Committee and his/her term on the other governing body is not expiring at the next election, then the candidate must resign from his/her position prior to the business meeting of the governing body in which he/she serves.

Composition of the Council

The composition of the Council will change to reflect the following recommendations.

- Council will consist of 13 seats plus the five members of the EC.
- Eight seats will be designated seats: Anesthesiology, Clinical Pharmacy and Pharmacology, Emergency Medicine, Internal Medicine, Neuroscience, Nursing, Pediatrics, and Surgery.
- One "collective" seat is to be rotated among all other sections.
- Six seats will be at-large seats.
- A section without a designated seat or rotation seat may nominate a member for any of the open at-large seats.
- In a year in which a section's seat is up for election or re-election in regular rotation, that section may not obtain an at-large seat.
- A section's runner-up for any Council seat will not be eligible for an at-large seat.

- The president may appoint honorary members to sit on the Council as he/she so desires. Currently, the honorary member appointments are the chancellor and vice chancellor of the American College of Critical Care Medicine and the chair of the Chapters Alliance.