

ALLIED PROFESSIONAL COUNCIL CHARGE

Number of Members

Determined by the number of Allied Professionals serving on committees and subcommittees, working groups, and task forces, and three to five at-large members.

Composition

Members shall include a Chair and Vice Chair, members of current committees, working groups, task forces, and three to five at-large members, including members from the Allied Professionals Community Planning Team, to ensure representation of all Allied Professionals, including nurse practitioners, physician assistants, registered nurses, medical assistants, technicians, technologists, genetic counselors, psychologists, PharmDs, and CRNAs. The senior Allied Professional Trustee shall serve as the Board Liaison.

Method of Appointment

Ex-officio members serve automatically. The Chair and Vice Chair and at-large members shall be appointed by the President-Elect, in consultation with the President and the Chief Executive Officer, from recommendations from Allied members of the HRS Board of Trustees.

Term of Office

Ex-officio terms coincide with their term on a committee, working group or task force. The term of at-large members shall be one year, with reappointment possible to a maximum of two additional, consecutive one-year terms.

Accountability

Reports to: Board of Trustees

Key Relationships: All governance groups that have Allied Professional members.

Purpose

To identify areas whereby the Heart Rhythm Society can coordinate the talents and strengths of Allied Professionals to better meet the needs of the Society's Strategic Plan, as well as the needs of Allied Professional members.

To allow Allied Professional Trustees and committee members to organize, communicate, network and mentor potential Allied Professional leadership.

To serve as the central resource to HRS leadership to identify Allied Professional members with the knowledge and skills to best contribute to emerging initiatives.

Responsibilities

- **Create a process to identify and mentor upcoming Allied Professional leadership.**
 - Establish criteria for developing leadership for Governance Committee and Board approval.
 - Create a pipeline for future HRS Allied Professional volunteer leadership to contribute at every level of the HRS governance structure.
 - Promote mentorship of more experienced Allied Professionals to emerging Allied Professionals, to include professional development, research, and advocacy skills for participation in committee, chair and other work.

- **Develop strategies to recruit and retain Allied Professional members.**
 - Coordinate with staff to develop and maintain Allied Professional member records to include the identification of strengths and skills to draw on specific roles and tasks of any HRS governance group initiative.
 - Survey Allied Professional constituents to understand what they value and strategize to meet their needs of the diverse members in areas of education, patient and caregiver support, health policy, research and fiscal management.

- **Recommend appropriate Allied Professional members for committees, working groups, and task forces**
 - Identify and recommend volunteers to serve on HRS committees, working groups, and task forces.
 - Consult on new initiatives to coordinate Allied Professional representation.
 - Identify methods to involve increased numbers of Allied Professional members into the Society's work through the use of additional ad hoc working groups; mentor and support scientific session faculty; promote Allied Professional member research and publication; and encourage participation in emerging HRS initiatives.

- **Facilitate communication between Allied Professionals serving on committees**
 - Coordinate Allied Professional efforts on individual committees and across all governance groups to economize effort, limit redundancy, communicate ideation, promote communication and assure the goals of the Strategic Plan.

- With approval from the Board of Trustees, form strategic alliances with non-physician professional groups for education and advocacy opportunities.

Decision-Making Authority

Provide recommendations to the Board of Trustees.

Meeting Frequency

- Quarterly via conference call
- In-person meeting during the HRS Scientific Sessions

Estimated Time Commitment

Scheduled

Committee Conference Calls (Quarterly)
In-Person Meeting (May)

Ad Hoc

Committee Conference Calls (as needed)

Busiest Times of the Year

Budget preparation cycle (June - September)
During the Committee Appointment Process (November-January)
Prior to Scientific Sessions