Executive Summary:

This compendium was created by the Society for Simulation in Healthcare (SSH) to help codify organizational procedures and methods. The goal of this compendium will be to effect continuity from year to year. It is also to provide organization in the methods and procedures of day to day business, improve the current system, increase efficiency, and reduce the need for continual bylaws revision. This compendium will also afford new leaders, members, and staff with clear guidelines and set forward clear standards.

This compendium is to be considered an official statement of the policy of SSH. No item within the compendium shall be in conflict with or supersede the SSH Bylaws.

Specific Human Resources (HR) policies applicable to SSH staff are maintained by Trinet and not contained in this compendium. Trinet is the collaborative employer for the society and performs the necessary HR functions.
Table of Contents for Policies, Procedures, Guidelines, and other governing documents for the Society for Simulation in Healthcare.

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GOVERNANCE
1. Summary of Purpose
   1.1. The Society for Simulation in Healthcare (the “Society”) and its leadership are dedicated to serving the interests of the Society in the most honorable and ethical manner possible; the Society’s leadership is committed to the avoidance of conflicts of interest or the appearance of conflicts. Society policy requires all those acting on its behalf to avoid conflicts of interest between their duties to the Society and their duties to other organizations or entities.

2. Scope
   2.1. This policy applies to Society leadership and candidates for these positions.
   2.2. Governance Committee is responsible for oversight of this policy.
   2.3. The Board of Directors is responsible for providing approval of this policy.

3. Definitions
   3.1. Conflict of Interest: A conflict of interest exists when an individual participates in the deliberation and resolution of an issue important to the Society while, at the same time, the individual has other professional, business, family, or volunteer responsibilities outside the Society that could predispose or bias the individual to a particular view or goal that may be inconsistent with the mission or interests of the Society.
   3.2. Society leadership includes Directors, Officers, Committee Chairs and Vice Chairs, Commission Chairs and Vice Chairs, and the Editor in Chief. For the purpose of this policy anyone in a Society leadership position is referred to as an “individual.”
   3.3. Immediate family: defined as (current or within past 3 years) spouse, domestic partner, cohabitant, child, stepchild, grandchild, parent, stepparent, mother-in-law, father-in-law, son-in-law, daughter-in-law, grandparent, great grandparent, brother, sister, half-brother, half-sister, stepsibling, brother-in-law, sister-in-law, aunt, uncle, niece, nephew, or first cousin

4. Policy Details
   4.1. All actual or potential conflicts of interest must be disclosed to the Society annually, or at any time such a conflict may arise. The Society will generally address conflicts of interest in one of three ways.
4.1.1. For most typical, minor, or potential conflicts, full disclosure is generally sufficient and no further action is necessary.
4.1.2. For potentially more serious conflicts, the individual generally should recuse him/herself from part or all of the discussion regarding the issue for which there is a conflict and from voting on the issue.
4.1.3. For actual serious conflicts, the individual may have to voluntarily withdraw – or be withdrawn involuntarily if necessary – from the Society position.

4.2. Actual or potential conflicts of interest, if manageable, will be mitigated by implementing a written plan and monitoring compliance.

5. Procedures for Ensuring Compliance
5.1. The Society’s Board of Directors has the authority to make determinations on how to proceed in all such cases, and the Board reserves the right to adopt an appropriate management plan for ongoing conflicts. All conflicts of interest will be addressed in a manner that fully complies with the requirements under the California Corporations Code and applicable law.

5.2. Elected Leadership
5.2.1. Each nominee will submit a completed and signed disclosure of interest form to the Executive Office upon submission of the nomination packet.
5.2.2. The Governance Committee will review the completed disclosure of interest forms for potential conflicts of interest.
5.2.2.1. If no actual or potential conflicts are found, no action is required.
5.2.2.2. If a manageable conflict is found, the Governance Committee will recommend a management plan for each potential conflict. The management plan will be signed by the candidate and the Chair of the Governance Committee and approved by the Executive Committee.
5.2.2.3. If an unmanageable conflict is found, the Governance Committee will recommend that the nominee not be slated for election.
5.2.3. Disclosure of interest statements and management plans shall not be posted to the elections website.

5.3. Appointed Leadership
5.3.1. The President or President Elect will submit the names of the individuals that he/she would like to appoint to open leadership positions to the Executive Office.

5.3.2. Each potential appointee will submit a completed and signed disclosure of interest form to the Executive Office.

5.3.3. The Governance Committee will review the completed disclosure of interest forms for potential conflicts of interest.
   5.3.3.1. If no actual or potential conflicts are found, no action is required.
   5.3.3.2. If a manageable conflict is found, the Governance Committee will recommend a management plan for each potential conflict. The management plan will be signed by the appointee and the Chair of the Governance Committee and approved by the Executive Committee.
   5.3.3.3. If an unmanageable conflict is found, the Governance Committee will recommend to the Executive Committee that the individual not be appointed.

5.4. Annual Review
   5.4.1. Each individual will submit a completed and signed disclosure of interest form before IMSH each year.
   5.4.2. The Board of Directors will be given access to all disclosure forms and management plans.
   5.4.3. The Governance Committee will review the completed disclosure of interest forms for potential conflicts of interest.
   5.4.3.1. If no actual or potential conflicts are found, no action is required.
   5.4.3.2. If a manageable conflict is found, the Governance Committee will recommend a management plan for each potential conflict. The management plan will be signed by the individual and the Chair of the Governance Committee and approved by the Executive Committee.
   5.4.3.3. If an unmanageable conflict is found, the Governance Committee will make recommendations to the Executive Committee.

5.5. Mid-year Changes
5.5.1. If an individual’s disclosure changes, it is the responsibility of the individual to update their disclosure form and submit it to the Executive Office.

5.5.1.1. The Governance Committee will be notified if a disclosure form is updated and will review the updated disclosure.

5.6. Annual Reminders of compliance monitoring:

5.6.1. The Governance Committee will annually remind those responsible for compliance monitoring of approved management plans.

5.7. Violations of the Leadership Disclosure and Conflicts of Interest Policy

5.7.1. If the Board has reasonable cause to believe an individual has violated the Leadership Disclosure and Conflicts of Interest Policy, it shall inform the individual of the basis for such belief and afford the individual an opportunity to explain the alleged violation.

5.7.2. If, after hearing the individual’s response and after making further investigations as warranted by the circumstances, the Board determines the individual has violated the policy, it shall determine and take the appropriate course of action.

6. Appendices / Attachments

6.1. Disclosure of Interest Form (Pages 5-7)
6.2. Management Plan Template (Page 8)
Society for Simulation in Healthcare
Leadership Conflict of Interest Disclosure Form

The Society for Simulation in Healthcare (the “Society”) and its leadership are dedicated to serving the interests of the Society in the most honorable and ethical manner possible; the Society’s leadership is committed to the avoidance of conflicts of interest or the appearance of conflicts. Society policy requires all those acting on its behalf to avoid conflicts of interest between their duties to the Society and their duties to other organizations or entities. Consequently, Society leadership is required to complete and submit this form annually when serving in such positions, and also disclose periodically as conflicts arise.

A conflict of interest exists when an individual participates in the deliberation and resolution of an issue important to the Society while, at the same time, the individual has other professional, business, family, or volunteer responsibilities outside the Society that could predispose or bias the individual to a particular view or goal that may be inconsistent with the mission or interests of the Society.

All actual or potential conflicts of interest must be disclosed to the Society on this form, or at any time such a conflict may arise. The Society will generally address conflicts of interest in one of three ways.

1. For most typical, minor, or potential conflicts, full disclosure on this form is generally sufficient and no further action is necessary.

2. For potentially more serious conflicts, the individual officer or director generally should recuse him/herself from part or all of the discussion regarding the issue for which there is a conflict and from voting on the issue.

3. For actual serious conflicts, the individual officer or director may have to voluntarily withdraw – or be withdrawn involuntarily if necessary – from the Society position.

The Society’s Board of Directors has the authority to make determinations on how to proceed in all such cases, and the Board reserves the right to adopt an appropriate management plan for ongoing conflicts. All conflicts of interest will be addressed in a manner that fully complies with the requirements under the California Corporations Code and applicable law.

Therefore, as a member of Society leadership, I will avoid conflicts of interest and the appearance of conflicts. I am disclosing below all relevant and material facts and situations or areas in which it might even appear that I have conflicting duties to other entities.
I invite any further review by the Society of any aspects of these situations or areas that might be considered appropriate. Also, if it is deemed appropriate, I will take other steps, such as avoiding part or all of the deliberation and voting on certain issues, or adopting a conflicts management plan, if deemed appropriate by the Board.

1. List your current employer(s).

________________________________________________________________
________________________________________________________________
________________________________________________________________
________________________________________________________________
________________________________________________________________
________________________________________________________________
________________________________________________________________

a. I am not currently employed (initial here): __________________.

2. List additional sources of income not listed in (1) above and any relationship with vendors/industry that are related to the mission and business of the Society.

________________________________________________________________
________________________________________________________________
________________________________________________________________
________________________________________________________________
________________________________________________________________
________________________________________________________________
________________________________________________________________

a. I know of no additional sources of income or relationships with vendors/industry that might give rise to conflicts (initial here): ________________

3. List all current volunteer positions or responsibilities that are related to the mission and business of the Society.

________________________________________________________________
________________________________________________________________
________________________________________________________________
________________________________________________________________
________________________________________________________________
a. I know of no volunteer positions or responsibilities that are related to the mission and business of the Society: (initial here): ____________________.

4. List all positions or relationships of immediate family members that are related to the mission and business of the Society.

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

a. I know of no positions or relationships of immediate family members that are related to the mission and business of the Society. (initial here): ____________________.

_______________________________________
Signature

_______________________________________
Name (print) Date
SOCIETY FOR SIMULATION IN HEALTHCARE (SSH)
CONFLICT MANAGEMENT PLAN
for
[Name]

I. BACKGROUND

[Provide background information that pertains to this person’s potential or perceived conflict]

II. SOURCES OF POTENTIAL OR PERCEIVED CONFLICT

[Identify the source of potential or perceived conflict]

III. MANAGEMENT STRATEGIES

If elected, [Name] agrees to:
   1) [List components of management plan]

IV. MONITORING

[Indicate individual responsible for compliance monitoring. Typically this is the President. For a President’s plan, typically the first two years of term (as President-Elect and President), compliance monitoring will be the responsibility of the Board liaison to Governance Committee which is typically the Immediate Past President and the last year of term (as Immediate Past President), the compliance monitoring will be the responsibility of the President]

In agreement,

__________________________________  __________________________________
[Signature]  [Date]    [Signature]  [Date]
[Name]      [Chair’s Name]
Nominee     Chair of Governance Committee
1. Summary of Purpose
   1.1. The SSH Beverlee Anderson Education Scholarship Fund provides support to attend the annual International Meeting on Simulation in Healthcare (IMSH). Named for Beverlee Anderson, the first Executive Director of SSH, this fund was created to honor her contributions to SSH. Anyone interested in healthcare simulation is eligible to apply. Current membership in SSH is not required. Scholarships are awarded based on need as well as interest and commitment to implement simulation methodologies for healthcare education.

2. Scope
   2.1. Provides directions for the Beverlee Anderson Educational Scholarship selection process
   2.2. Internal Relations Committee is responsible for oversight of this policy.
   2.3. The Board of Directors is responsible for providing approval of this policy.

3. Definitions
   3.1. None

4. Policy Details
   4.1. The purpose of this policy is to establish selection process for the Beverlee Anderson Educational Scholarship recipients.

5. Procedures for Ensuring Compliance
   5.1. Scholarship Benefits and Responsibilities
       5.1.1. If the selected scholarship recipient registered for IMSH prior to the award, his/her conference registration will be refunded.
       5.1.2. Upon attending IMSH, scholarship recipients will be required to submit a report on their experience at the conference and plans to use acquired knowledge and skills in their professional practice.
       5.1.3. Scholarship includes:
           5.1.3.1. IMSH registration
           5.1.3.2. One pre-conference course registration
           5.1.3.3. $1,000 travel stipend
           5.1.3.4. SSH membership including Simulation In Healthcare Journal subscription for one year
5.2. Scholarship Application
   5.2.1. To be considered for the scholarship, an applicant must submit the following items by deadline set by the Selection Committee:
   5.2.1.1. Online-application
   5.2.1.2. Curriculum Vitae (CV)
   5.2.1.3. A letter of endorsement by dean, department chair, clinical director or other appropriate authority.
   5.2.2. The letter of endorsement and CV should be sent in ONE email to the staff liaison with "BAESF" in the subject line with the name included in the body of the email.
   5.2.3. The online application will include appropriate questions related to the scholarship, the questions may include, but not limited to, the following items:
   5.2.3.1. Name (First, Middle Initial, Last)
   5.2.3.2. Degree
   5.2.3.3. Clinical Title (if any)
   5.2.3.4. Institution
   5.2.3.5. Department
   5.2.3.6. Email
   5.2.3.7. Phone Number
   5.2.3.8. Years involved in simulation?
   5.2.3.9. Member of a simulation organization other than SSH
   5.2.3.9.1. If so, which one..........
   5.2.3.10. Previously attended IMSH
   5.2.3.10.1. How many times?
   5.2.3.11. Financial need
   5.2.3.12. Current involvement with simulation
   5.2.3.13. Reason to attend IMSH?
   5.2.3.14. Application of what they have learned as a result of attending IMSH?

5.3. Selection Working Group
   5.3.1. Selection Working Group Composition: The Selection Working Group a sub-group of the Internal Relations Committee (IRC). The selection Working Group Chair and its members shall be appointed by the IRC Chair.

5.3.2. Selection Working Group Members
5.3.2.1. The Selection Working Group shall be comprised of the Chair and six (6) members.

5.3.2.2. The Working Group members shall include SSH Treasurer, representatives from the IRC and IMSH planning committees, and three other members appointed by the IRC Chair.

5.3.2.3. In appointing members, the right of first refusal shall be given to Dr. Daniel Raemer, founding SSH President, and Dr. William Schiller, the husband of Beverlee Anderson.

5.3.2.4. A SSH staff liaison shall serve on the Working Group as a non-voting member.

5.3.2.5. Terms of appointment to working group service are one (1) year with an option for reappointment.

5.4. Selection Committee Responsibilities

5.4.1. The Committee will encourage scholarship applications.

5.4.2. Based on the balance of the Scholarship Fund reported by the Treasurer and the Scholarship budget set by the Board of Directors, the Working Group will determine the number of scholarships to be awarded.

5.4.3. The Committee will review each application received by the deadline.

5.4.4. Each application will be reviewed and ranked by at least two (2) Working Group members.

5.4.5. In selecting scholarship recipients, the working group will give priority to first-time attendees and applicants from low-income regions and low-budget organizations.

5.5. Scholarship Application Timelines: These timelines may be adjusted and are meant as a guide.

5.5.1. **August 1:** Working Group members appointed

5.5.2. **September 1:** Call for applications posted on the SSH website.

5.5.3. **October 1:** Application deadline.

5.5.4. **Around November 1 / Before Early-Bird Deadline:** Notify applicants

6. Appendices / Attachments

6.1. None
1. Summary of Purpose
   1.1. This policy describes the benefits of Corporate Roundtable membership.

2. Scope:
   2.1. This policy covers the members of the Corporate Roundtable and the benefits they receive.
   2.2. External Strategic Relations Committee is responsible for oversight of this policy.
   2.3. The Board of Directors is responsible for providing approval of this policy.

3. Definitions
   3.1. Corporate Roundtable:
       3.1.1. The SSH Corporate Roundtable is a sub-committee of the External Strategic Relations Committee. It was established to invite and encourage industry to partner with SSH and promote visibility and recognition of the science and study of simulation into the future.

4. Policy Details
   4.1. Corporate Roundtable membership offers the following benefits:
       4.1.1. Opportunity to interact with other companies interested in healthcare simulation
       4.1.2. Three individual, and fully transferable, annual SSH memberships which include subscriptions to the SSH Journal Simulation in Healthcare
       4.1.3. All employees of Corporate Roundtable member organizations shall receive a 15% discount on SSH membership.
       4.1.4. One vote on the Corporate Roundtable
       4.1.5. Inclusion of the Corporate Roundtable member’s logo on the SSH Corporate Roundtable’s page in the SSH Journal once per year
       4.1.6. Visibility on the SSH webpage dedicated to Corporate Roundtable members, including links to corporate websites
       4.1.7. Placement on a page recognizing Corporate Roundtable members in the program guide for the International Meeting on Simulation in Healthcare (IMSH)
4.1.8. 5% discount (up to a maximum discount of $500) on exhibit booth rates for the annual International Meeting on Simulation in Healthcare (IMSH)

4.1.9. Corporate Roundtable sign/placard place in exhibitor booth acknowledging Corporate Roundtable membership

4.1.10. Corporate Roundtable badge ribbon for CR members and Steering Committee badge ribbon for SC members

4.1.11. Corporate Roundtable exhibitors receive one additional priority point for booth assignments

4.2. Membership on the Corporate Roundtable is from July 1 through June 30. Current annual dues are $1500 USD (as of 7.1.2014).

5. Procedures for Ensuring Compliance
5.1. The Corporate Roundtable has an appointed staff liaison to ensure that policy details are followed.

6. Appendices / Attachments
6.1. None
Background:
The SSH Board of Directors must maintain strong and active interactions and communications with the commissions and committees within the Society. Board liaisons are assigned to facilitate this commitment.

Objectives:
1. To improve the communication between the Board and the committees/commissions.
2. To enable the early identification of developments or opportunities where Board involvement would advance success.

Liaison Assignments:
1. The President Elect makes all liaison assignments for his or her term as President. Customarily, the President Elect:
   a. elicits Board member requests for liaison preferences.
   b. appoints Treasurer as liaison to Finance & Audit Committee.
   c. appoints Immediate Past President as liaison to the Bylaws and Nominations Committees.

Liaison Responsibilities:
1. Provide a channel for communication between Board and committee/commission.
   a. Be familiar with committee/commission objectives/goals for year.
   b. Facilitate communication of all requests and correspondence to and from the Board including motions, feedback, guidance, requests, etc.
   c. Be prepared to present and discuss relevant Board agenda items related to your assigned committee or commission.
   d. Communication from Board to the committee/commission should be prompt (generally within one week) via telephone or email.
2. Participate in committee/commission meetings:
   a. It is expected the liaison will attend a majority of the committee/commission’s meetings.
   b. The Board liaison is not intended to be a part of the committee/commission’s work.
   c. Be alert to potential problems in the committee/commission (e.g., inactivity in execution of objectives or assignments) and alert the President and/or Executive Director needed.
   d. When scheduled, attend the President-elect’s orientation with committee/commission chairs at the Annual Meeting.
e. The Board liaison is not part of the committee/commission governance. Ultimate authority for the committee/commission is the Chair.

3. At the end of term as liaison, facilitate the transition to new liaison by sharing applicable information, and documents.
Background
SSH Committees, Commissions, Councils and Task Groups are created to ensure that the society serves the needs of its members by establishing policies and direction for programs, products, and services to advance the SSH Vision, Mission and Strategic Plan. As outlined in the Bylaws, these groups are required to report, at least annually, on their progress in advancing the SSH Mission, Vision, specific charge, and Strategic Plan as directed by the SSH Board of Directors and leadership.

Individuals volunteer their service to these groups, and are selected or elected through a specific process as outlined in the SSH Bylaws. Each official group within SSH has an assigned staff liaison who serves as the point of contact and may have responsibility for delivering the programs, products and services. Many groups also have a Board Liaison, who serves as appoint of contact to the Board.

In addition, the Society has several Interest Groups – Affinity Groups, Special Interest Groups and Sections – focused on specific topics or interests. Any SSH member is eligible to join any Interest Group. A staff member is assigned to serve as a liaison for the Interest Groups.

Chair Description:
The key roles of the Chair are facilitation, communication and group leadership – ensuring that the members and volunteers are actively engaged in the achievement of SSH’s working goals.

This individual, in collaboration with the Vice Chair, if there is one, and Staff Liaison, actively participates in the work of the group, provides thoughtful input to the deliberations, and focuses on the best interests of SSH and its membership rather than the interests of an individual or limited group, and works toward the accomplishment of the goals as described in the group’s charge.

Chair Objectives and Responsibilities:
1. Attends all meetings (in person and virtual) of the mission critical group which may include IMSH. In the case of an unavoidable conflict, the Chair will have the Vice Chair fill in as chair for that meeting. The Chair must preside over the group meetings in a professional and orderly manner.
2. Engages in and is supportive of SSH’s overall leadership and planning process, including participation in the Board of Directors meetings as requested.

3. Uses the group’s charge, as assigned by the bylaws or President, to guide direction of group’s tasks.

4. Works collaboratively with SSH staff to schedule meetings and conference calls, develop meeting agendas, track action items, and take meeting minutes.

5. Reviews all relevant material prior to the meetings. Prepares to make contributions, facilitate discussions, and voice objective opinions concerning the group’s issues and activities.

6. Encourages group members to be participatory and focuses on group member strengths when making assignments.

7. In collaboration with the Staff Liaison, promotes clarity within the group on their role and how it supports and fits within SSH.

8. Communicates regularly with group members to ensure tasks are on track and that obligations are fulfilled.

9. Addresses concerns about group member performance (e.g. poor attendance, missed deadlines, etc.).

10. Supports SSH’s policy of diversity and inclusion by assisting in the identification and growth of future SSH leaders, including identifying and encouraging a diverse group of applicants to the group and its projects.

11. In collaboration with Staff Liaison, prepares reports and recommendations to the SSH Board of Directors on the group’s activities and initiatives.

12. Promotes SSH and its mission critical groups by actively assisting in SSH’s membership recruitment and retention campaigns.

13. Represents the group in other meetings as requested by the SSH leadership.

14. Accepts and completes special assignments as requested.

**Vice Chair Description:**

The key role of the Vice Chair is to assist the Chair and the Staff Liaison in facilitation, coordination and communication – ensuring that the group members are actively engaged in the achievement of SSH’s goals. This individual, in collaboration with the Chair, actively participates in the work of the group, provides thoughtful input to the deliberations, and focuses on the best interests of SSH and the membership rather than personal or constituent interests, and works toward the accomplishment of the goals as described in the strategic plan.
The Vice Chair fulfills the responsibilities of the Chair at meetings, on projects, etc., when the Chair is unavailable.

**Objectives and Responsibilities:**
1. Attends all meetings (in person and virtual), which may include IMSH. The Vice Chair will fulfill the role of the Chair in the event the Chair is unavailable.
2. Engages in and is supportive of SSH's overall leadership and planning process.
3. Reviews all relevant material prior to the meetings. Prepares to make contributions, facilitate discussions, and voice objective opinions concerning the group's issues and activities.
4. Supports the Chair in communicating regularly with members to ensure that the group's obligations are fulfilled.
5. Promotes group member involvement by maintaining an understanding of activities, discussions and programs.
6. Promotes clarity within the group on the group’s role and how it supports and fits within SSH.
7. Assists in formulating content resources that will further the goals and objectives of the group and SSH.
8. Represents the working group in other meetings as requested.
9. Accepts and completes special assignments as requested.
Background
SSH Committees, Commissions, Councils and Task Groups are created to ensure that the society serves the needs of its members by establishing policies and direction for programs, products, and services to advance the SSH Vision, Mission and Strategic Plan. As outlined in the Bylaws, these groups are required to report, at least annually, on their progress in advancing the SSH Mission, Vision, specific charge, and Strategic Plan as directed by the SSH Board of Directors and leadership.

Individuals volunteer their service to these groups, and are selected or elected through a specific process as outlined in the SSH Bylaws. Each official group within SSH has an assigned staff liaison who serves as the point of contact and may have responsibility for delivering the programs, products and services. Many groups also have a Board Liaison, who serves as appoint of contact to the Board.

In addition, the Society has several Interest Groups – Affinity Groups, Special Interest Groups and Sections – focused on specific topics or interests. Any SSH member is eligible to join any Interest Group. A staff member is assigned to serve as a liaison for the Interest Groups.

Staff Liaison Description:
The core responsibility of the Staff Liaison is to serve as a counsel to the Chair and Vice Chair to ensure overall strategic leadership for the group, consistent with the goals and objectives of SSH, are in compliance with SSH’s policies. The Staff Liaison serves as the group’s liaison to the Executive Director. The Executive Director assigns the Staff Liaison, and the Staff Liaison works for and reports to the Executive Director.

The Staff Liaison provides day-to-day management of his/her assigned groups and is responsible for implementing the procedures that deliver the programs, products and services to the society and its members. The Staff Liaison coordinates with the members of the assigned group and other SSH programs and mission critical groups regarding joint opportunities.

Objectives and Responsibilities:
1. Works closely with Chair and Vice Chair to ensure overall strategic leadership for the group is consistent with the goals and objectives of SSH including developing meeting agendas.
2. Relays relevant information from the Executive Director and as directed, from leadership meetings, to the Chair.

3. Attends all meetings of the assigned mission critical groups to ensure a productive connection to SSH’s leadership and to help the group understand how its work fits into the strategic goals of SSH, the work of the SSH staff and other mission critical groups.

4. Assists the Chair in keeping the group moving forward to meet established goals with timely follow-up from meetings and clear next steps through effective communication including:
   - Scheduling
   - Meeting agendas and minutes
   - Attendance tracking
   - Action items
   - Electronic communication

5. Maintains contact with the Chair, Vice Chair, and Subcommittee Chairs.

6. Drafts business related documents for consideration by the Chair or the assigned group including but not limited to:
   - Business plans
   - Budgets
   - Reports and recommendations from the Mission Critical Group to the Board or others.
1. Summary of Purpose:
   1.1. To establish nominations and elections processes for the SSH Board positions in accordance with SSH Bylaws

2. Scope
   2.1. This policy affects members of the Nominations Committee and Candidates for Board of Directors Service.
   2.2. Nominations Committee is responsible for oversight of this policy.
   2.3. The Board of Directors is responsible for providing approval of this policy.

3. Definitions
   3.1. None

4. Policy Details
   4.1. Nominations Committee Responsibilities:
       4.1.1. The Nominations Committee will be responsible for preparing a list of candidates to be presented for consideration for office.
       4.1.2. Eligibility requirements for the Board of Directors will be verified by the Nominations Committee in conjunction with SSH Administration (Executive Director).
       4.1.3. The Committee will encourage nominations by the membership for open positions.
       4.1.4. The Committee will strive for a balanced representation of membership both on the ballot for elected positions on the Board of Directors. The Committee will take into account the academic excellence, engagement, and commitment of each nominee, as well as demographic, geographic and professional diversity to ensure the fulfillment of the SSH mission and strategic plan.
       4.1.5. The Committee will review all Board of Directors criteria, roles and responsibilities with the candidates prior to formalizing the slate of nominees to ensure that nominees understand the commitment to SSH if elected.
       4.1.6. The Committee will vet all nominations and recommend a slate of candidates to the executive committee, such slate will include no more than 3 nominees for each office.
4.1.7. In addition to reviewing CV and personal statements, the Nominations Committee will also consider prior service to SSH, suitability for the position and special skills that the nominated individual possesses.

4.1.8. The Committee Chair will present the results of the balloting to the Board of Directors.

4.2. Candidate for eligible offices are evaluated for slating based on their service to SSH, including but not limited to:

4.2.1. Committee Service or Chair
4.2.2. SIG Service or Chair SIG Chair
4.2.3. Affinity Group Service or Chair
4.2.4. Section Service or Chair
4.2.5. Board of Directors Appointed or Elected
4.2.6. Executive Committee Appointed or Elected
4.2.7. IMSH Participation – Presenter, Moderator, Program Development
4.2.8. Accreditation Program Support – Reviewers
4.2.9. Certification Program Support – Assessors, Facilitators
4.2.10. Instructional Services – Webinars, Resource Development, etc.
4.2.11. Journal Services – Associate Editor, Editorial board, Reviewer
4.2.12. Other documented service.

5. Procedures for Ensuring Compliance

5.1. Call for Nominations:

5.1.1. Call for nominations will be continually updated on the SSH website and annual calls will be sent through the SSH e-mail, SimConnect and any other available communication (i.e. Journal/newsletter)
5.1.2. A template for open nominations will be available on the website.
5.1.3. The evaluation tool and description of its use by the Nominations Committee will be available on the website.
5.1.4. A slated nominee’s biography, CV, and COI & disclosure statement will be posted on the Website and a summary will be included on the ballot if appropriate for on-line balloting
5.1.5. Voting will be conducted via web polling of the membership.

5.2. Nominations Committee Suggested Timeline:
5.2.1. **May 1**: Deadline for the Nominations Committee to review and update job descriptions for all elected board positions prior to soliciting nominations.

5.2.2. **May 15**: Positions for open nominations are posted on the SSH website. The roster of the Nominations Committee is publicized at this time.

5.2.3. **June 15**: Deadline for open nominations.

5.2.4. **July 15**: Slate of nominees for all open positions will be sent to the EC for approval.

5.2.5. **August 1**: Nominee’s biographies and position statements will be posted on the SSH website.

5.2.6. On-line web polls close by August 31.

5.2.7. **September 1**: President notifies newly elected members and sends announcement to the membership via e-mail, SimConnect and Web Site.

6. Appendices / Attachments

   6.1. None
1. Summary of Purpose
   1.1. To establish policy related to expectations of candidates for SSH member-elected positions as it pertains to campaigning and etiquette during open election period.

2. Scope
   2.1. This policy covers candidates running for a leadership position within the Society.
   2.2. The Nominations Committee is responsible for oversight of this policy.
   2.3. The Board of Directors is responsible for providing approval of this policy.

3. Definitions
   3.1. None

4. Policy Details
   4.1. SSH will not distribute mailing lists to individual candidates for use during the election process.
   4.2. The candidate may send personal communication to colleagues and/or professional friends.
   4.3. SSH letterhead and the SSH logo are used only for official SSH business. The candidate may not use the logo or letterhead for election related communication.
   4.4. The candidate may not solicit support or an endorsement from an SSH Board member or SSH staff member.
   4.5. The campaign process is intended to be a positive process. The candidate shall not negatively characterize another candidate in the SSH organization.

5. Procedures for Ensuring Compliance
   5.1. None.

6. Appendices / Attachments
   6.1. None
FINANCE & ACCOUNTING
1. Summary of Purpose
   1.1. The Finance and Audit (F&A) Committee of the Society exists to perform the functions of an audit committee, a finance committee, and an accounting review committee. This policy defines the duties for the committee surrounding the area of Account Receivables in order to maintain cash flow and to insure that appropriate tasks are performed in accordance with GAAP.

2. Scope
   2.1. This policy applies to SSH staff, contracted entities, and defines the AR duties of the F&A Committee.
   2.2. Finance and Audit Committee is responsible for oversight of this policy.
   2.3. The Board of Directors is responsible for providing approval of this policy.

3. Definitions
   3.1. None

4. Policy Details
   4.1. Accounts Receivables (AR). These are the funds due SSH from any source, be it customer, member, or elected member that are legally due SSH by contract or for services performed. AR amounts are maintained by the Accounting Department on the various ledgers as established by GAAP and are maintained on those ledgers until they are received and paid in full.

5. Procedures for Ensuring Compliance
   5.1. The Accounting Department and SSH Executive Staff will provide timely processing of all receipts in order to allow accurate information updates in the ledgers.
   5.2. The F&A Committee will periodically review all financial statements produced that concern the AR amounts and shall review the AR amounts on a monthly basis in order to bring awareness to AR amounts that are exceeding a reasonable time limit.
   5.3. Customers with balances over 60 days shall be contacted via mail / email / phone in order to ascertain their payment status and also to alert them to the outstanding balance. A 1.5% monthly fee shall be assessed.
5.4. Customers with balances under 60 days will be considered as normal business operations, unless the Treasurer alerts the F&A Committee for a specific instance. Should a company become insolvent, enter into bankruptcy protection, or otherwise show signs of financial distress, the Chair of the F&A Committee shall be notified. An appropriate course of action shall be recommended to the committee by the Chairperson.

5.5. The Treasurer shall notify the F&A Committee members any amounts that exceed 180 days for informational purposes. The F&A Committee shall review the customer and the amount over 180 days (there might be other amounts due from the same customer that are under 180 days) and decide on the course of action, which will include no less than a formal letter from SSH to the customer, requesting payment in full. SSH Associate Executive Director or the Accounting Department may also contact the customer directly to resolve the matter.

5.6. The F&A Committee shall escalate to the President and the Executive Committee any customer with amounts over 90 days due exceeding $5000.

6. Appendixes / Attachments
   6.1. None
1. Summary of Purpose
   1.1. To provide SSH leadership with guidelines for receiving donations and grants that support the Society’s mission.
   1.2. To ensure that all funds received are in alignment with Society goals and are applied appropriately in accordance with those goals.
   1.3. To differentiate between restricted and unrestricted funds, the application, and the income recognition policies of each.

2. Scope
   2.1. This policy applies to all funds received by the society in the form of donations and grants.
   2.2. Finance and Audit Committee is responsible for oversight of this policy.
   2.3. The Board of Directors is responsible for providing approval of this policy.

3. Definitions
   3.1. None

4. Policy Details
   4.1. SSH may accept funds that further the society’s vision and mission. The Bylaws Section 5, Article 3 states that the – *The Finance and Audit Committee shall function under the direction of the policies and procedures for Finance and Audit Committee and in accordance with the annual Finance and Audit Committee Charge from the Society Board of Directors.*

   4.2. The approval of applications for all government or private sector grants will be applied after the Board of Directors has endorsed the application. Grants and other donated funds will be treated in accordance with appropriate accounting standards. The Finance and Audit Committee will review and report on all activity by the use of these funds back to the Executive Committee. The Finance and Audit Committee will present findings to the Board of Directors, if the President makes a formal request.

5. Procedures for Ensuring Compliance
   5.1. Restricted Grant Funds
       5.1.1. These funds cannot be used for any purpose other than that which the funding company has previously dictated; or the funds may be required to be paid back. Any funds received from Corporations with a restricted purpose must be recognized as restricted and used in the manner
dictated in the grant letter (subject to approval by the Board to accept the funds).

5.1.2. Funds are deposited and recorded under other revenue – “Temporarily Restricted Contributions” or “Permanently Restricted Contributions”. The funds will be shown as “Temporarily Restricted” or “Permanently Restricted” under Net Assets in the Statement of Financial Position. Income from these items is recognized as received based on FASB Standard SFAS 116, which covers accounting for contributions received and contributions made.

5.2. Unrestricted Grant Funds

5.2.1. Any funds received from Corporations that are not restricted to a specific program or purpose and still extend the Society’s mission and purposes, or are intended for operational support are considered unrestricted grants.

5.2.2. Funds are deposited and recorded as revenue. The funds will be shown as Unrestricted under Net Assets in the Statement of Financial Position.

5.2.3. Board of Directors will take a vote on the utilization of these funds within the SSH. Vote will take place at the mid-year Board meeting during IMSH in January of each fiscal year, in coordination with annual presentation for “program advancement”.

5.2.4. Income from these items is recognized as received based on FASB Standard SFAS 116, which covers accounting for contributions received and contributions made.

6. Appendixes / Attachments

6.1. See Bylaws Article 3 – Section 5

The Finance and Audit Committee shall function under the direction of the policies and procedures for Finance and Audit Committee and in accordance with the annual Finance and Audit Committee Charge from the Society Board of Directors.
1. Summary of Purpose
   1.1. The Finance and Audit (F&A) Committee of the Society exists to perform the functions of an audit committee, a finance committee, and an accounting review committee. This policy defines the duties for the committee within each of these areas and further details the roles and responsibilities of the committee members according to accepted standards for audit control functions and financial advisement groups.

2. Scope
   2.1. This policy applies to all processes and staff of SSH and defines the duties to be followed as members of the F&A Committee.
   2.2. Finance and Audit Committee is responsible for oversight of this policy.
   2.3. The Board of Directors is responsible for providing approval of this policy.

3. Definitions
   3.1. None

4. Policy Details
   4.1. Mission and Role of the Finance and Audit Committee
   The mission of the F&A Committee is to provide an independent, unbiased review of the financial health of SSH and to make financial recommendations based upon the needs of the membership of SSH in accordance with the direction required to maintain financial viability and readiness of the Society. The F&A Committee shall provide the SSH Board of Directors with guidance, information, and recommendations related to the activities of SSH management and staff in accordance with professional and legal standards.

   4.2. Composition of the Finance and Audit Committee
   The Treasurer of the Society shall be the Chair of the committee during their elected term, and shall remain on the committee for at least one year past this term. There will be at least seven committee voting members in addition to the Treasurer and past-Treasurer. Committee members shall vote on a Vice-Chair for the committee, and all members shall be asked to serve a three year term. Members may be reappointed by the Treasurer for additional three year terms. The Executive Director, the
Associate Executive Director, and the Finance Director will attend meetings as needed as non-voting members. Their participation shall be at the discretion of the Treasurer.

The President is an ex-officio member and may attend meetings at his or her discretion. While the President-elect is not a member of the committee he or she is welcome to attend meetings in preparation for their year as President.

The Finance and Audit Committee is independent of the Executive Office and SSH management and reports directly to the SSH Board of Directors.

4.3. Duties of the Finance and Audit Committee

4.3.1. The F&A Committee shall:

4.3.1.1. Review all financial indicators created by the Treasurer and the Finance Director, including financial statements produced by SSH management, staff, and their agents and will provide guidance on when to conduct external audits of financial statements.

4.3.1.2. Assist the Treasurer in the development of the annual budget and provide this to the Executive Committee prior to presentation to the SSH Board. The Treasurer shall present the budget to the Executive Committee and to the Board of Directors.

4.3.1.3. Develop and implement standards, policies, procedures, and guidelines relating to Society financial management and oversight.

4.3.1.4. Provide ongoing financial information for various aspects of Society business in what are known as dashboards; that these dashboards are updated according to the timelines created by the Treasurer, and that the F&A Committee shall review and make modifications to dashboards as part of their role.

4.3.1.5. Provide updated dashboards on a regular basis to the Executive Committee and the Board of Directors, between
scheduled meetings, in order to allow information to be reviewed prior to such meetings.

4.3.1.1.6. Discuss and debate any and all circumstances where SSH finances are deemed improper or in jeopardy, either by falling revenues or escalating expenses.

4.3.1.1.7. Provide supporting documentation for areas of recommendation. For example: the suggestion of external audits, budget line items or areas that are being singled out for additional scrutiny by the Executive Committee or Board of Directors, to the advisement of expense reduction.

4.3.1.1.8. Have audit oversight for all branches of the Society including but not limited to the Executive Office, the Board of Directors, committees, and the Society Journal.

4.3.1.1.9. Advise the Executive Office and the Board of Directors on the financial performance and impact of society business.

4.3.2. The Treasurer shall:

4.3.2.1. Meet with Committee Chairpersons as needed to compile their budget needs for the upcoming year. These budgets shall be reviewed by the Executive Office for clarity and necessity.

4.3.2.2. Be provided by the Executive Director and the Finance Director with the budget information required from the current year, including but not limited to IMSH data, in order for the Treasurer to create a budget that reflects changes in growth for both SSH and IMSH. This must be completed no later than two weeks prior to the F and A Committee’s spring face to face meeting.

4.3.2.3. Create a Treasurers Report to the Board of Directors that includes a narrative of the current fiscal state of the Society. This will include recommendations for funding approvals and denials. Any off-cycle budget requests that are deemed necessary by the Executive Office, F and A Committee and Board of Directors shall be documented with a justification and then forwarded to the Board of Directors for approval or denial.
4.3.3. The Finance Director shall:
  4.3.3.1. Provide to the Treasurer updates to dashboards as required
          that reflect the Society’s business.
  4.3.3.2. Provide changes, additions, and/or deletions to dashboards
          as requested by the Treasurer.
  4.3.3.3. Provide financial insight to the Treasurer to better interpret
          financial reports and any trending of data that will be of
          importance to the committee.

5. Procedures for Ensuring Compliance

5.1. Meetings
   The Finance and Audit Committee shall meet no less than three times
   each year in person, with one of those meetings occurring during the
   annual IMSH meeting. The committee shall also meet via conference call
   every month or at the Treasurer’s discretion. The Treasurer may call
   additional face to face or conference call meetings as needs arise.

5.2. Agendas
   The Treasurer shall issue an agenda for the fiscal year in order to
   properly review the pertinent needs of the Society and to insure the
   periodic review of annual, semi-annual, and quarterly functions.

5.3. Budget Process
   The society fiscal year is July 1 through June 30; the Finance Director
   shall provide all budget statements and the Income Statements
   throughout the year and also at year’s end closing. The Treasurer shall
   compile and prepare an annual budget for the upcoming fiscal year and
   present this to the Executive Committee by May of that year, in
   preparation for final review by the Executive Committee and then Board
   review in June. These timetables are subject to change as needed.

5.4. Bank Reconciliations
   5.4.1. A formal review process over the preparation of bank
           reconciliations and the related adjustments shall be conducted on a
           quarterly basis by a Society individual.
   5.4.2. The Executive Director will manage the review process of all bank
           reconciliations. The Executive Director and/or Associate Executive
Director will review bank reconciliations on a quarterly basis during the months of September, December, March, and June and report outcomes of this review to the Treasurer and the Finance and Audit Committee.

5.5. Audit Process
5.5.1. An annual audit shall be conducted after the fiscal year-end and shall be submitted to the Treasurer for review and presentation to the committee during October of that year. The committee and the Treasurer shall:
5.5.2. Meet with the auditor to review their formal reports and findings. These will be submitted by the Finance Director to the IRS as required by regulation.
5.5.3. Discuss the findings independent of the auditor and the Executive Office and create a report to summarize the audit and to provide recommendations. This report shall be finalized by the Treasurer and the Treasurer shall present this to the Executive Committee and the Board of Directors during the annual meetings at IMSH.

5.6. Regulatory Filings
5.7. The Finance Director shall compile and submit the IRS form 990 to the Executive Director and the Treasurer in October; this shall be reviewed with the CPA firm to address any issues. The IRS form 990 shall be made available to the Board for approval before filing. The IRS form 990 shall be signed by the Treasurer and President of the society and filed as required by law.

5.8. Any additional regulatory filings will be submitted as required.

6. Appendixes / Attachments
6.1. None
1. Summary of Purpose:
   1.1. To provide guidance to the organization on financial management and procedures for accurate accounting of income and expenses

2. Scope
   2.1. Finance and Audit Committee is responsible for oversight of this policy.
   2.2. The Board of Directors is responsible for providing approval of this policy.

3. Definitions
   3.1. None

4. Policy Details
   4.1. The Treasurer, in concert with the SSH Executive Director, the committee chairs and the Finance and Audit committee will prepare an annual budget reflecting all income and expenses anticipated for the fiscal year. Individual budgets will be prepared for any special project or meeting and the expenses and income relative to that project will be reflected in the budget.

5. Procedures for Ensuring Compliance
   5.1. Income and Expenses
      5.2. The Society shall use acceptable accounting practices in managing the finances of the Society.
   5.3. Checks/Cash Income
      5.3.1. Checks/Cash received are listed on a deposit transmittal form identifying category and class assignment; deposit only to SSH stamped
      5.3.2. Monies are deposited in the SSH Depository Account
      5.3.3. Bank deposit slip record is attached to deposit transmittal
      5.3.4. Entries will be made by bookkeeper into Quickbooks using deposit transmittal
   5.4. Credit Card Usage
      5.4.1. Refer to SSH Credit Card Usage Policy
   5.5. Checks / Payments / Out-of-Cycle Budget Requests
5.5.1. Executive Director, President and Treasurer are approved signers

5.5.1.1. The Executive Director signs checks up to $5,000 if budgeted

5.5.1.1.1. Checks exceeding $5,000 requires two of the above mentioned signatures.

5.5.1.1.1.2. Out of cycle budget requests are approved by the Executive Director for any amount less than $2,000. For amounts $2,000-$5,000, the Treasurer and Executive Director must approve. Proper justification from committee chairs must accompany each request.

5.5.1.1.1.3. The Treasurer and Executive Director will inform in writing the Executive Committee of any out-of-cycle budget approvals.

5.5.1.1.1.4. All out-of-cycle budget requests exceeding $5,000 may only be approved through a vote of the Executive Committee and/or BOD.

5.6. Payment by Direct Deposit or Wire Transfer

5.6.1. Any payments related to the Annual Conference may be done by wire transferred as appropriate.

5.7. Bank Reconciliation

5.7.1. The accountant receives bank statements (unopened) and credit card settlement statements (unopened) and reconciles the bank statements on a monthly basis. If a bookkeeper is not contracted, the Executive Director will perform these functions.

5.8. Taxes

5.8.1. SSH fiscal tax year is July 1 – June 30.

5.8.2. The Society’s budget year may differ if so determined by the BOD.

5.8.3. The accountant will complete the required 1099’s and state, local and federal tax returns for all SSH required recipients.

5.9. Reporting to BOD/Executive Committee

5.9.1. See Finance and Audit Policy for Monthly, Quarterly and Annual reporting guidelines, as well as Audit and IRS filing processes.

6. Appendixes Attachments

6.1. None
1. Summary of Purpose
   1.1. This policy describes the guidelines and procedures to follow when accepting gifts and funds for the Society for Simulation in Healthcare for various purposes from prospective donors.

2. Scope
   2.1. The Executive Director is authorized to accept on behalf of SSH, without Executive Committee approval, all gifts and funds identified in 4.3 Gifts Generally Accepted Without Review. Gifts and funds identified in 4.4 Gifts Accepted Subject to Prior Review shall be accepted by SSH only if acceptance is approved by the Executive Committee.
   2.2. Finance and Audit Committee is responsible for oversight of this policy.
   2.3. The Board of Directors is responsible for providing approval of this policy.

3. Definitions
   3.1. None

4. Policy Details
   4.1. The Society for Simulation in Healthcare (SSH) is a nonprofit organization incorporated in California and recognized as a tax-exempt organization under Section 501(c)(3) of the Internal Revenue Code. SSH solicits and accepts gifts from individuals, corporations, and foundations for purposes that will help SSH further and fulfill its mission of leading the facilitation of excellence in (multi-specialty) health care education, practice, and research through simulation modalities. SSH urges all prospective donors to seek the assistance of legal and financial advisors in matters relating to their gifts, including the resulting tax and estate planning consequences. The following policies and guidelines govern acceptance of gifts made to SSH for the benefit of any of its operations, programs, or services.

5. Procedures for Ensuring Compliance
   5.1. Use of Legal Counsel - SSH will seek the advice of legal counsel in matters relating to acceptance of gifts when appropriate. Prior review by counsel is recommended for:
   5.1.1. Gifts of securities that are subject to restrictions or buy-sell agreements.
   5.1.2. Documents naming SSH as trustee or requiring the SSH to act in any fiduciary capacity.
   5.1.3. Gifts requiring the SSH to assume financial or other obligations.
   5.1.4. Transactions with potential conflicts of interest.
5.1.5. Gifts of property which may be subject to environmental or other regulatory restrictions.

5.2. Restrictions on Gifts - SSH will not accept gifts that would result in SSH violating its corporate charter, would result in SSH losing its status as an IRS 501(c)(3) not-for-profit organization, are too difficult or too expensive to administer in relation to their value, would result in any unacceptable consequences for SSH, or are for purposes outside SSH’s mission.

5.3. Gifts Generally Accepted Without Review
   5.3.1. Cash gifts are acceptable in any form, including by check, money order, credit card, or on-line.
   5.3.2. Marketable securities may be transferred electronically to an account maintained at one or more brokerage firms or delivered physically with the transferor's endorsement or signed stock power (with appropriate signature guarantees) attached. All marketable securities will be sold promptly upon receipt unless otherwise directed by SSH’s Finance & Audit Committee. In some cases marketable securities may be restricted, for example, by applicable securities laws or the terms of the proposed gift; in such instances the decision whether to accept the restricted securities shall be made by the Executive Committee.
   5.3.4. Designation as a remainder beneficiary of charitable remainder trusts.
   5.3.5. Designation as an income beneficiary of charitable lead trusts.
   5.3.6. Life insurance where SSH is named as both beneficiary and irrevocable owner of the insurance policy. The donor must agree to pay, before due, any future premium payments owing on the policy.

5.4. Gifts Accepted Subject to Prior Review. The Executive Committee shall review and determine whether to accept gifts of:
   5.4.1. Tangible Personal Property
   5.4.2. Real Estate

6. Appendixes/ Attachments
   6.1. None
1. Summary of Purpose
The Society for Simulation in Healthcare (SSH) is a 501(c)3 organization that is committed to facilitating excellence in (multi-specialty) health care education, practice, and research through simulation modalities. The SSH is a mission-driven organization that is sustained through sound financial and accounting principles, along with investment strategies as supervised by the Finance and Audit Committee, the Treasurer, and the Executive Director. The purpose of this investment policy is to establish guidelines for SSH’s overall investment portfolio. The Finance and Audit Committee expects that actual returns and return volatility may vary from expectations and return objectives across short periods of time. The policy also incorporates accountability standards that will be used for monitoring the progress of SSH’s short- and long-term investments and to evaluate their contributions to the Society.

The financial status of SSH is strong for an organization of its size and type. Best financial practices suggest that an organization like SSH ought to have a minimum of 180 days of reserves/net assets. Although more reserves are undoubtedly better than less, SSH is a membership organization and should balance the need for appropriate reserves with the need to pursue strategic opportunities to provide more value to its members. As of June 30, 2016 SSH will have reserves of approximately $2.5 million and its operating budget will generate a surplus in excess of 4% of its total operating budget (another best practice guideline).

2. Scope
2.1. This policy affects all financial investments made on behalf of the Society for Simulation in Healthcare. It is designed to provide clear guidance to the board in its investment process in order to assure that the organization’s objectives are achieved, and should be reviewed annually.
2.2. Finance and Audit Committee is responsible for oversight of this policy.
2.3. The Board of Directors is responsible for providing approval of this policy.

3. Definitions
3.1. None
4. Policy Details

4.1. Investment Objective for Unrestricted Funds

The Finance and Audit Committee will execute the following investment objectives:

4.1.1. Investments are to preserve long-term, real purchasing power of assets while providing a predictable and growing stream of annual distributions in support of SSH.

4.1.2. Periodic cash flow, either into or out of the investment portfolio, will be used to better align the investment portfolio to the target asset allocation outlined in the asset allocation section below.

4.1.3. The investment accounts will be reviewed annually by the Finance and Audit committee and a report will be sent to the Executive Committee.

4.1.4. The Finance and Audit Committee shall annually review cash funds in the daily accounts. The Finance and Audit Committee will review and vote to allocate an amount that will enhance the return on these funds without affecting daily operational cash requirement. The review of cash funds in the daily accounts will be a fixed agenda item for each Finance and Audit Committee meeting.

4.2. Investment Objective for Restricted Funds

Restricted funds will be invested for specific project and/or event needs, with the objective that the yield will be equal to or greater than the expected expenses of such needs, unless otherwise directed by the SSH Board of Directors.

4.3. Investment Portfolio Investments

Asset allocation.

4.3.1. The Finance and Audit Committee recognizes the need for strategic allocation of the investment portfolio’s assets across broadly defined financial asset and sub asset categories with varying degrees of risk and return.

4.3.2. Fund assets will be managed as a portfolio comprised of two major components: an equity portion and a fixed income portion. The expected role of fund equity investments will be to maximize long-term growth of portfolio assets, while the role of fixed income investments will be to generate current income, provide for more
stable periodic returns, and provide some protection against a prolonged decline in the market value of portfolio equity investments.

4.3.3. Finance and Audit Committee will make asset allocation recommendations to the SSH Board of Directors annually to coincide with budget submission.

4.3.4. Asset Allocation Targets

<table>
<thead>
<tr>
<th>Asset Class</th>
<th>Lower Limit %</th>
<th>Target %</th>
<th>Upper Limit %</th>
</tr>
</thead>
<tbody>
<tr>
<td>Equity</td>
<td>35</td>
<td>49</td>
<td>55</td>
</tr>
<tr>
<td>Fixed Income</td>
<td>40</td>
<td>49</td>
<td>60</td>
</tr>
<tr>
<td>Cash</td>
<td>1</td>
<td>2</td>
<td>5</td>
</tr>
</tbody>
</table>

4.4. Strategic Initiative Fund
SSH will set aside 10% of its net assets as of June 30, 2016 (estimated to be about $230K) and establish a strategic initiative fund. The purpose is to provide one-time or start-up funding for new projects judged by the Board to be of strategic importance. If the project is envisioned as a long-term source of funding for SSH, then the time frame for generating excess revenue to repay the Strategic Initiative Fund initially and eventually to support the SSH Operating Budget should generally not exceed three to four years.

4.4.1. Applying for Strategic Initiative Funding.

4.4.1.1. The SSH Committee Structure will be used to review and endorse member proposals/projects.

4.4.1.2. Once the endorsement of the relevant SSH committee has been obtained, the Committee Chair will complete the Request for Strategic Funding form.

4.4.1.3. The Committee Chair will then submit the completed form to the Finance and Audit Committee for review and recommendation.

4.4.1.4. The strategic initiative form and the Finance and Audit Review and Recommendation will be reviewed by the SSH Board, which will make the final decision regarding the proposal and its funding.
4.4.2. Ongoing Support of this Fund: When a SSH strategic initiative begins to generate a surplus, the first call will be to replenish the strategic funds used as an investment in the initiative, and after that the operation and any surplus will be built into the operating budget.

4.5. Diversification.
Diversification across and within asset classes is the primary means by which the Finance and Audit Committee expects the portfolio to avoid undue risk of large losses over long time periods. To protect the portfolio against unfavorable outcomes within an asset class due to the assumption of large risks, the Committee will take reasonable precautions to avoid excessive investment concentrations:

4.5.1. With the exception of fixed income investments explicitly guaranteed by the U.S. government, no single investment security shall represent more than 5% of total portfolio assets.
4.5.2. No single investment pool or investment company (mutual fund) shall comprise more than 20% of the total portfolio assets.
4.5.3. With respect to fixed income investments, for individual bonds the minimum average credit quality of these investments shall be investment grade (Standard & Poor’s BBB or Moody’s Baa or higher).

4.6. Rebalancing.
It is expected that the investment portfolio’s asset allocation will vary from its target asset allocation as a result of varying periodic returns earned on its investments in different asset and sub asset classes. The investment portfolio will be evaluated semiannually in order to assess for rebalancing. Oversight of this process will be the responsibility of the SSH Accounting office in conjunction with the Finance and Audit Committee. The portfolio will be rebalanced to its target normal asset allocation as indicated.

4.7. Role of the Finance and Audit Committee.
The Finance and Audit Committee will act in a fiduciary capacity with respect to the investment portfolio and is accountable to the SSH Board of Directors and Executive Committee for overseeing the investment of all assets owned by SSH. The Finance and Audit Committee will:
4.7.1. Make recommendations to the Board of Directors based on the objectives policy stated below.
4.7.2. Ensure investments are managed per guidelines that are consistent with the short-term and long-term financial goals of SSH. Guidelines are intended to provide for sufficient investment flexibility in the face of changes in capital market conditions and in the financial circumstances of SSH.

4.7.3. Ensure investments are formulated consistent with SSH’s anticipated financial needs and in consideration of SSH’s tolerance for assuming investment and financial risk, as reflected in the majority opinion of the Finance and Audit Committee.

4.7.4. Review this policy, no less than annually, in the context of the investment portfolio and ensure allocations and returns are aligned with SSH goals and adaptable to any changes in SSH’s financial position.

4.7.5. Subject to any specific limitation set forth in a gift instrument or law, we, as the SSH Board of Directors, may delegate to an external agent the management and investment of The Portfolio. In doing so we shall act in good faith with the care that an ordinarily prudent person in a like position would exercise under similar circumstances. We shall establish the scope and terms of the delegation to be consistent with the purposes of the mission; we must establish a policy for the periodic review of the agent’s actions to monitor performance and compliance with the scope and terms of the delegation. So long as we comply with the above requirements we are not liable for the actions of an agent to which the function was delegated.

4.7.6. Investment return is to be measured in a manner consistent with the guidelines and as issued by the Global Investment Performance Standards (GIPS) or, if differently as Oranges specifically directed in writing. Investment returns will be reported quarterly. This review will examine the Portfolio’s total return as well as that of the separate asset classes or funds that comprise the Portfolio. Performance is to be compared to all relevant benchmarks. To aid in the evaluation of Portfolio trends, quarter, year to date, one year, three year, and since inception period ended returns will be reported. All asset classes should be compared to their relevant benchmarks and the benchmarks should remain consistent from reporting period to reporting period.
5. Procedures for Ensuring Compliance
   5.1. In keeping with the portfolio’s overall long-term financial objective, the Committee will evaluate portfolio performance over a suitably long-term investment horizon, generally across full market cycles, or, at a minimum, on a rolling five-year basis. Investment reports shall be reviewed by the Finance and Audit Committee on an annual basis and subsequently reported to the Board of Directors on an annual basis.
   5.2. Any changes to this Investment Policy Statement deemed necessary by the Managers will be fully discussed and agreed upon by both the Managers and the Directors before taking effect, and such changes will be incorporated in writing into the guidelines. We may recommend exceptions to this policy. Written notice of a policy exception should contain the date the exception is effective, the specific exception to be allowed and the date the exception’s effectiveness will terminate. Any changes we deem necessary will be incorporated in writing into the guidelines.

6. Attachments / Appendixes
   6.1. None
1. Summary of Purpose
   1.1. To provide guidance to the organization on reviewing and accepting proposals for named and endowed lectures and awards

2. Scope
   2.1. Finance and Audit Committee is responsible for oversight of this policy.
   2.2. The Board of Directors is responsible for providing approval of this policy.

3. Definitions
   3.1. None

4. Policy Details
   4.1. Accepting Proposals
       4.1.1. The Society will entertain proposals from within and without the organization which propose naming and endowing a lecture and awards which recognize individuals and/or institutions for major contributions to the field of simulation in healthcare.

5. Procedures for Ensuring Compliance
   5.1. Named or Endowed Lectures
       5.1.1. Lecture Specifics
           5.1.1.1. A named lecture must be fully endowed from its inception
           5.1.1.2. The lecture will be presented at an annual meeting of the Society
           5.1.1.3. If possible, the lecture should be presented on an annual basis
           5.1.1.4. The lecture will be identified by a specific name as recommended by the endowment source
           5.1.1.5. The lecture may be included as a printed manuscript in the Society’s Journal at the discretion of the EIC
           5.1.1.6. The selection of the individual to give the named lecture will be approved by the Board of Directors.
           5.1.1.7. The invited lecturer will receive an honorarium, all travel & lodging expenses and an appropriate recognition item.
           5.1.1.8. The endowment funds will be placed in a designated fund and income used solely for the purpose of the invited lecture’s expenses and recognition.
           5.1.1.9. Additional donations to the endowment fund may be accepted and considered donations.
           5.1.1.10. There may be more than one named and endowed lecture
           5.1.1.11. The BOD may waive any of these restrictions at its discretion.

   5.1.2. Items to be Included in all Lecture Proposals
5.1.2.1. Name of individual or entity to be honored
5.1.2.2. Proposed name of the lecture
5.1.2.3. Background on individual or entity and justification for the honor
5.1.2.4. Recommendations for selection criteria
5.1.2.5. Contain a commitment to endow the lecture in the amount as determined necessary by the Board of Directors following consultation with a financial expert.
5.1.2.6. Name and contact information for the organization, entity, or individual submitting the proposal.

5.2. Named or Endowed Awards

5.2.1. Award Specifics
5.2.1.1. Named awards will be presented at an annual meeting of the Society.
5.2.1.2. The Nominating Committee will determine criteria for the approved named award and recommend to the BOD candidates to receive the award.
5.2.1.3. The Nominating Committee may solicit nominations from the membership
5.2.1.4. The award will include a suitable recognition item and travel & lodging to the meeting at which the award is presented.
5.2.1.5. The award may or may not be given annually depending on the identification and approval of a suitable recipient and adequate funding availability.
5.2.1.6. The Society may solicit funding to endow the award or provide funding from its organizational budget.
5.2.1.7. The endowment funds will be placed in a designated fund and income used solely for the purpose of the awardee’s expenses and recognition.
5.2.1.8. Additional donations to the endowment fund may be accepted and considered donations.
5.2.1.9. There may be multiple named awards
5.2.1.10. The Society may, at any time, initiate proposals for other types of awards given by the Society itself and not named for an individual or entity.

5.2.2. Items to be Included in all Award Proposals
5.2.2.1. Name of individual or entity to be honored
5.2.2.2. Background on individual or entity and justification for the honor
5.2.2.3. Recommendations for funding the expenses of the award.
5.2.2.4. Recommendations for recipient’s selection criteria
5.2.2.5. Name and contact information for the organization, entity, or individual submitting the proposal.
### Appendixes / Attachments

6.1. None
COMMUNICATIONS
1. Summary of Purpose
   1.1. Investigators wishing to distribute either an invitation to participate in a research study or a research study-related survey to the membership of the Society for Simulation in Healthcare (SSH) with the organization’s explicit endorsement must first submit the materials in question to the SSH Research Committee for review and approval.

2. Scope
   2.1. Provides directions for the research study and survey endorsement process
   2.2. Research Committee is responsible for oversight of this policy.
   2.3. The Board of Directors is responsible for providing approval of this policy.

1. Definitions
   1.1. For the purposes of this document, research study-related surveys are defined as those surveys that are 1) associated with a specific protocol intended to advance knowledge and 2) obtained with the intent of disseminating the resulting data in some scholarly capacity. Requests for study or survey endorsement will be reviewed by the committee using the following criteria.

1. Policy Details
   1.1. This policy addresses the research project review criteria, requisite inclusions, submission requirements, and outlines the review process for those submissions.

2. Procedures for Ensuring Compliance
   2.1. Research Project Review Criteria: In order to be considered for society endorsement, the study should be:
      2.1.1. Feasible: The study can be successfully completed in the amount of time allotted.
      2.1.2. Interesting: Answers an important question of value to the simulation community
      2.1.3. Novel: Will result in new information not previously described or meaningfully add to existing knowledge.
      2.1.4. Ethical: For applicable projects, an IRB or ethical review board letter of approval or exemption must be included with this application
along with a description of how data will be protected, managed, analyzed, and used.

2.1.5. Relevant: has broad relevance and will ultimately improve healthcare simulation.

2.1.6. The study must also be methodologically sound, with an appropriate design to achieve its stated goals.

2.2. Survey-Specific Prerequisites

In order to be considered for society endorsement, the survey must be:

2.2.1. Clearly written, relevant, and concise

2.2.2. Structured according to best practices for survey development and validation.¹

2.2.3. Methodologically sound. (Submissions must include a brief description of the number of responses needed, projected length of time to complete, how many reminders to be sent, data analysis plan, what will be done with data after completion, anonymous or not, IRB/ethics committee status)

2.2.4. Written to include clear information for prospective respondents about the survey purpose, originator, anonymity, confidentiality, and way in which data will be used.

2.2.5. Aligned in its intent with the overall mission, vision, and values of the Society.

2.3. Submission Requirements Checklist: Project submissions must include the following elements:

2.3.1. A cover letter (no longer than 1 page) addressing the above review criteria and clearly stating the society’s proposed involvement with the process. The cover letter also must contain language stating that no information regarding members, member contact information, or survey responses may be used in any way except as proposed in the application.

2.3.2. A high-level project summary (no longer than 2 pages) addressing the research question (i.e. purpose, hypothesis, and specific aims) and study methodology. Methodological elements that should be addressed include study structure, outcome variables, data concerning the validity of assessment instruments, sample size calculations (if applicable), and proposed analysis plan.

2.3.3. An electronic copy (.doc or .pdf) of any survey or assessment instrument to be used within the study.

2.3.4. Letter documenting the completion of formal IRB/ethics board review.
2.4. Review Process
2.4.1. Submissions or inquiries regarding the submission process should be sent to Kathy Adams, Director of Continuing Education (kadams@ssih.org). Submissions will first be forwarded to the chair of the Research Committee and then distributed to the SSH Research Committee, Scholar Advisory Subcommittee for evaluation. Submissions may also be sent to the chairs of other committees if relevant to the proposal. These individuals will then evaluate the proposals based on the above criteria. Reviews are typically completed within 2 to 4 weeks after receipt of the information outlined.

2.4.2. Submissions approved by the Research Committee will be forwarded to the SSH Executive Committee for final approval. Once this is obtained notification will be made of the project’s status and the submission will be forwarded to the SSH Media and Communication Committee for dissemination.

2.4.3. Declined proposals will be accompanied by a detailed letter documenting the rationale behind the committee’s decision. While these studies may be reconsidered after appropriate modification, a full resubmission will be required. Please note as well that resubmitted revisions of previously declined studies may also require the approval of an amendment by your local IRB or ethics review board. If so, this process must be completed prior to resubmission and documentation of this additional ethical review process must be included with the revised materials.

3. Appendices / Attachments
3.1. The following references describe aspects of optimal survey design process:
1. Summary of Purpose
   1.1. The Society for Simulation in Healthcare’s brand is an important component to how the society is represented both internally and externally. These guidelines serve to provide both corporate identity and how to convey that identity.

2. Scope
   2.1. Addresses all aspects of visual representation of the SSH brand
   2.2. Media and Communications Committee is responsible for oversight of this policy.
   2.3. The Board of Directors is responsible for providing approval of this policy.

3. Definitions
   3.1. None

4. Policy Details
   4.1. These guidelines are created in a pdf document that give distinct rules on how all aspects of SSH’s brand should be handled. This includes everything from the design of a logo and how it can be used, to letterheads, the look of a website, personal communications and how it all looks together. The brand should be consistent through all mediums and platforms and the Brand Guidelines pdf document is created to reinforce them.
   4.2. The brand guidelines help SSH and its constituents properly communicate the message of the brand. It is used as a guide by designers, copywriters and marketers when they are developing designs or strategies as it clearly illustrates what can and cannot be used.
   4.3. It is a strict code and is followed rigorously, because having a brand is one of the most important parts of SSH’s business and the consistency of this brand is essential. Deviation from this, however small, may confuse our constituents and alter the SSH reputation. So strict adherence to detail is important.
   4.4. Designers have the best advantage from using brand guidelines as logos, fonts and typography, as well as images and photographs will be shown in exact specifications within this document.

5. Procedures for Ensuring Compliance
   5.1. Procedures are included in the “SSH Brand Guidelines”
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<th>VERSION</th>
<th>DATE REVISED</th>
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<td>1</td>
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6. Attachments and Appendices

   6.1. SSH Brand Guidelines
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WHO WE ARE

The Society for Simulation in Healthcare (SSH) was established in January 2004 to represent the rapidly growing group of educators, researchers and technologists who utilize a variety of simulation techniques for education, testing, and research in health care. The membership, now over 3,000, is united by its desire to improve performance and reduce errors in patient care using all types of simulation including task trainers, human patient simulators, virtual reality, and standardized patients. We are a broad-based, multi-disciplinary, multi-specialty, international society with ties to all medical specialties, nursing, allied health, paramedical personnel, simulation technologists and industry.

WHAT WE DO

Recognizing that simulation represents a paradigm shift in health care education, SSH promotes improvements in simulation technology, educational methods, practitioner assessment, and patient safety that promote better patient care and can improve patient outcome. SSH welcomes ties with other organizations interested in patient simulation.

MARKETING STATEMENT

*Promoting the art, science and practice of healthcare simulation.*

The Society for Simulation in Healthcare is a leading interprofessional society that advances the application of simulation in healthcare through global engagement.

CORPORATE LOGO

All representations of SSH must include the standard logo or one of the secondary logos represented in these Guidelines. New logos require written justification and must be approved by the Board of Directors.

The horizontal logo below is the preferred format for SSH and should be used exclusively unless a truly vertical format is the only option. A vertical logo can be seen on Facebook. Please request a vertical logo from the Communications Manager if needed. The two-colored logo is preferred. A single color logo is available and can be seen below.

Committees and SIGs use the standard SSH logo. Icons representing each SIG are available for use on the SIG web page.
At this time, five sub-brand logos have been developed: CHSE, CHSE-A, CHSOS, SSH Accredited Program and IMSH. The certification logos were created because the programs are designed to serve members from an array of associations. In addition, SSH has actively sought support for the programs from other associations, such as ASPE and INACSL to date. SSH will continue to develop and administer CHSE and will identify the program with the CHSE sub-brand logo. The logo uses the same colors as the SSH logo to reinforce the relationship to SSH.

A. LOGO FILE TYPES

- .eps -- this version is recommended. It is a vector graphic and can be resized
- .png -- used online
- .tif -- if program will not accept .eps

B. LOGO FILE LOCATIONS

- Dropbox: SSHadmin\SSH Logo

The typography is an important part of consistent branding. Myriad Pro is used on the website, printed collateral and is preferred when available. Arial is acceptable in correspondence and presentations.  Samples below:

**MYRIAD PRO WEB**

```
ABCDEFGHIJKLMNOPQRSTUVWXYZ
abcdefgijklmnopqrstuvwxyz
1234567890!?."'
```

**ARIAL REGULAR**

```
ABCDEFGHIJKLMNOPQRSTUVWXYZ
abcdefgijklmnopqrstuvwxyz
1234567890!?."
```

**ARIAL NARROW**

```
ABCDEFGHIJKLMNOPQRSTUVWXYZ
abcdefgijklmnopqrstuvwxyz
1234567890!?."
```
Serif fonts can be used to co-ordinate with logo

**JUSTIFICATION**

Do not use full justification, text should be left justified. Do not center large paragraphs of text.

**CONTENT FORMATTING GUIDE**

- **Phone number format**: 952.358.2440
- **Time format**: 8:00AM-4:30PM (CT)/9:00AM-5:30PM (EST) in formal document where scientific content does not dictate the 24 hour clock.
- **Date form**: 4 digit year is preferred where possible, such as 4/27/2015

### A. EMAIL NAMING STANDARD

Email – nomenclature

- Use . between names
- Do not include ssh or ssih in email address

**Individual staff**: Initial of first name, last name

- kaberle@ssih.org

**Functional**

- certification@ssih.org
- imsh2012@ssih.org

**Committees**

- certification.chair@ssih.org

**Board**

- president@ssih.org
- past.president@ssih.org
- president.elect@ssih.org

### B. EMAIL SIGNATURE

Email signature must be in an approved front. Signature that is approved by the marking department is sufficient.
A. LINKS

• Links to outside websites open in a new window.
• Links to pages within site open within the site.
• PDF documents open in a new window

B. DOCUMENTS

PDF is the preferred format for documents posted on the website. When possible use PDF forms that can be submitted online.

VII. PHOTOGRAPHY & VIDEO

A. PHOTOGRAPHY

• Photography must not contain products that are identifiable by manufacturer
• Photography provided by Ed Reiker does not require cited credit
• IMSH photography is available online, contact the Communications Manager to obtain these photos
• Photos with a clean background are preferred
• Stock photos relevant to content can be purchased. Stock photos already purchased are available in the dropbox under SSH Images.

B. VIDEO

• Videos for public access are posted on SSH YouTube channel and can be embedded in website
• Videos should be branded with a SSH logo
• Policy and location of videos to be restricted to members or offered for a few is yet to be determined.
VIII. LANGUAGE AND STYLE

- Writing for website pages and collateral should be 8th grade reading level or lower. Listserv and all scientific content is written as appropriate to that audience.
- Membership messages are written in first person.
- To check grade level or ease of reading use the link below,


Common uses of capitalization:

- Membership Committee – both words capitalized
- the committee
- Board of Directors
- the board

Social media icons for Facebook, Twitter and LinkedIn are included in print collateral and email marketing as appropriate. Staff and members must read and agree to the SSH Social Media Usage Policy.

A. SOCIAL MEDIA ICONS

Dropbox – communications\social media icons

B. SOCIAL MEDIA CHANNELS

- Website: http://www.ssih.org/
- Facebook
- Twitter: @SSHorg
- YouTube
- LinkedIn
- SimConnect
Use the Office templates to produce correspondence, presentations and the like when representing SSH. Contact the SSH executive assistant for samples.

- Letterhead
- Power Point

Documents are saved in Communications, sub folder Document Templates.

Business Cards are created for all members of the Board of Directors, staff and Committee Chair. Blank cards are available.

Electronic:

- SSH Fact Sheet
- IMSH Fact Sheet
- SSH overview power point

Materials:

- Blank business card
- Simulation in Healthcare Journal
- CHSE, CHSE-A, CHSOS and SSH Accreditation brochures
- Exhibit display
- New member Welcome Kit
- Membership flyer
Ads:

- IMSH 2015 (full page, iPad and Med Sim size)
- Accreditation (full page)
- Certification ads—all programs (full page)
- Membership engagement two full pages
- Simulation Matters ad from USA Today
Section Two:
Color Palette and Logo Usage and
SSH Member Welcome Kit
Using correct and consistent colors will ensure a strong SSH brand. All SSH materials should include the primary colors as a base. Secondary color palettes are useful for multi-piece items and to differentiate products.

### THE PRIMARY COLOR PALETTE

Using correct and consistent colors will ensure a strong SSH brand. All SSH materials should include the primary colors as a base. Secondary color palettes are useful for multi-piece items and to differentiate products.

#### Primary Color Palette
- **Pantone 7692 C**
  - CMYK Build: C=98 M=69 Y=22 K=5
  - RGB Build: R=0 G=85 B=137
  - HTML Build: #005589

- **Pantone 2717 C**
  - CMYK Build: C=32 M=16 Y=0 K=0
  - RGB Build: R=169 G=194 B=229
  - HTML Build: #A9C2E5

#### Secondary Color Palette
- **Pantone 1585 C**
  - CMYK Build: C=0 M=73 Y=100 K=0
  - RGB Build: R=247 G=104 B=29
  - HTML Build: #F7680E

- **Pantone 165 C**
  - CMYK Build: C=0 M=76 Y=97 K=0
  - RGB Build: R=255 G=99 B=29
  - HTML Build: #FF631D

- **Pantone 7702 C**
  - CMYK Build: C=65 M=14 Y=17 K=0
  - RGB Build: R=75 G=172 B=198
  - HTML Build: #4BACC6

- **Pantone 416 C**
  - CMYK Build: C=52 M=43 Y=43 K=8
  - RGB Build: R=127 G=127 B=127
  - HTML Build: #7F7F7F

- **Pantone 425 C**
  - CMYK Build: C=63 M=55 Y=54 K=28
  - RGB Build: R=89 G=89 B=89
  - HTML Build: #595959

### THE SSH LOGO
A. LOCKUP

The Minimum Size for SSH’s Logo
The preferred logo width cannot be smaller than 1.5"
The preferred logo height cannot be smaller than 0.6"
B. TYPOGRAPHY

(1) Logo Acronym Typography: Futura Medium
(2) Logo Full Name Typography: Futura Medium Condensed

The logo abbreviation and full name color should match the front “swoosh.”

C. BRAND ELEMENTS

The SSH brand elements must always be positioned away from any other graphic elements an amount equal to, or greater than, 0.25".
D. COLOR PALETTE

These colors should be used for all SSH branded collateral in print and online. The Pantone colors and the respective color builds are below.

(1) Pantone 7692 C (Dark Blue)
CMYK Build: C=98 M=69 Y=22 K=5
RGB Build: R=0 G=85 B=137
HTML Build: #005589

(2) Pantone 2717 C (Light Blue)
CMYK Build: C=32 M=16 Y=0 K=0
RGB Build: R=169 G=194 B=229
HTML Build: #A9C2E5
E. ACCEPTABLE LOGO BACKGROUNDS

Full-color SSH logo placed behind a light texture background.

White SSH logo placed behind a dark texture background.

Full-color SSH logo placed behind a light colored background.

White SSH logo placed behind a dark colored background.
F. UNACCEPTABLE ELEMENT RELATIONSHIPS

Do not omit any part of the logo lockup.

Do not enclose the logo in a shape.

Do not alter the typeface of the logo abbreviation or full name.

Do not rearrange any parts of the logo lockup.

Do not stretch any part of the logo.
G. UNACCEPTABLE BACKGROUNDS

- Do not reverse the logo from shapes.
- Do not alter the Pantone or build formulas.
- Do not overprint the logo on a dark color.
- Do not place the logo over shapes, patterns or busy photos.
A. **LOCKUP**

The Minimum Size for CHSE's Logo

The preferred logo width cannot be smaller than 2”

The preferred logo height cannot be smaller than 0.75”
B. TYPEFACE

(1) Logo Abbreviation Typography: Myriad Pro Semibold
(2) Logo Full Name Typography: Futura Light

The logo abbreviation color should match the “swoosh” in the back while the full name color should match the front “swoosh.”

C. CHSE BRAND ELEMENTS

The CHSE brand elements must always be positioned away from any other graphic elements an amount equal to, or greater than 0.25”. 
D. COLOR PALETTE

These colors should be used for all CHSE branded collateral in print and online. The Pantone colors and the respective color builds are provided below.

(1) Pantone 7681 C (Light Blue)
   CMYK Build: C=42 M=19 Y=2 K=8
   RGB Build: R=135 G=169 B=204
   HTML Build: #86A8CB

(2) Pantone 301 C (Dark Blue)
   CMYK Build: C=99 M=74 Y=26 K=10
   RGB Build: R=9 G=78 B=127
   HTML Build: #084D7E
E. ACCEPTABLE BACKGROUNDS

Full-color CHSE logo placed behind a light texture background.

White CHSE logo placed behind a dark texture background.

Full-color CHSE logo placed behind a light colored background.

White CHSE logo placed behind a dark colored background.
F. UNACCEPTABLE ELEMENT RELATIONSHIPS

Do not omit any part of the logo lockup.

Do not enclose the logo in a shape.

Do not alter the typeface of the logo abbreviation or full name.

Do not rearrange any parts of the logo lockup.

Do not stretch any part of the logo.
G. UNACCEPTABLE COLORS AND BACKGROUNDS

Do not reverse the logo from shapes.

Do not alter the Pantone or build formulas.

Do not overprint the logo on a dark color.

Do not place the logo over shapes, patterns or busy photos.
H. DESIGN

CHSE Color Palette

- **Pantone 656 C**
  - CMYK Build: C=17 M=0 Y=0 K=0
  - RGB Build: R=207 G=237 B=252
  - HTML Build: #DF631E

- **Pantone 635 C**
  - CMYK Build: C=31 M=4 Y=4 K=0
  - RGB Build: R=171 G=214 B=234
  - HTML Build: #CEEFC8

- **Pantone 312 C**
  - CMYK Build: C=75 M=15 Y=14 K=0
  - RGB Build: R=15 G=166 B=201
  - HTML Build: #ABD6E9

- **Pantone 7712 C**
  - CMYK Build: C=98 M=37 Y=36 K=0
  - RGB Build: R=2 G=128 B=152
  - HTML Build: #0FAD9C

- **Pantone 7675 C**
  - CMYK Build: C=94 M=79 Y=4 K=1
  - RGB Build: R=41 G=78 B=155
  - HTML Build: #2B4E9A
The Minimum Size for CHSE-A’s Logo

The preferred logo width cannot be smaller than 2.5”
The preferred logo height cannot be smaller than 0.7”
B. TYPOGRAPHY

(1) Logo Abbreviation Typography: Myriad Pro Semibold
(2) Logo Full Name Typography: Futura Light

The logo abbreviation color should match the “swoosh” in the back while the full name color should match the front “swoosh.”

C. BRAND ELEMENTS

The CHSE-A brand elements must always be positioned away from any other graphic elements an amount equal to, or greater than 0.25”.
D. COLOR PALETTE

These colors should be used for all CHSE-A branded collateral in print and online. The Pantone colors and the respective color builds are provided below.

1. Pantone 7681 C (Light Blue)
   - CMYK Build: C=42 M=19 Y=2 K=8
   - RGB Build: R=135 G=169 B=204
   - HTML Build: #86A8CB

2. Pantone 301 C (Dark Blue)
   - CMYK Build: C=99 M=74 Y=26 K=10
   - RGB Build: R=9 G=78 B=127
   - HTML Build: #084D7E
E. ACCEPTABLE LOGO BACKGROUNDS

- Full-color CHSE-A logo placed behind a light texture background.

- White CHSE-A logo placed behind a dark texture background.

- Full-color CHSE-A logo placed behind a light colored background.

- White CHSE-A logo placed behind a dark colored background.
F. **UNACCEPTABLE ELEMENT RELATIONSHIPS**

1. **Do not omit any part of the logo lockup.**

2. **Do not enclose the logo in a shape.**

3. **Do not alter the typeface of the logo abbreviation or full name.**

4. **Do not rearrange any parts of the logo lockup.**

5. **Do not stretch any part of the logo.**
G. UNACCEPTABLE COLORS AND BACKGROUNDS

Do not reverse the logo from shapes.

Do not alter the Pantone or build formulas.

Do not overprint the logo on a dark color.

Do not place the logo over shapes, patterns or busy photos.
H. DESIGN

CHSE-A Color Palette

Pantone 649 C
CMYK Build: C=10 M=10 Y=0 K=0
RGB Build: R=224 G=222 B=240
HTML Build: #E0DEEF

Pantone 270 C
CMYK Build: C=25 M=31 Y=0 K=0
RGB Build: R=188 G=173 B=213
HTML Build: #BBADD4

Pantone 7440 C
CMYK Build: C=38 M=67 Y=0 K=2
RGB Build: R=159 G=105 B=169
HTML Build: #9F68A9

Pantone 513C
CMYK Build: C=45 M=97 Y=0 K=0
RGB Build: R=154 G=45 B=145
HTML Build: #992D91

Pantone 268 C
CMYK Build: C=75 M=100 Y=0 K=8
RGB Build: R=95 G=39 B=135
HTML Build: #5E2786
A. LOCK-UP

The Minimum Size for CHSOS's Logo
The preferred logo width cannot be smaller than 2.5"
The preferred logo height cannot be smaller than 0.7"
B. TYPOGRAPHY

(1) Logo Abbreviation Typography: Myriad Pro Semibold
(2) Logo Full Name Typography: Futura Light

The logo abbreviation color should match the “swoosh” in the back while the full name color should match the front “swoosh.”

C. BRAND ELEMENTS

The CHSOS brand elements must always be positioned away from any other graphic elements an amount equal to, or greater than 0.25”.
D. COLOR PALETTE

These colors should be used for all CHSOS branded collateral in print and online. The Pantone colors and the respective color builds are provided below.

CHSOS’s Logo Color Palette
These colors should be used for all CHSOS’s branded collateral in print and online. The Pantone colors and the respective color builds are provided below.

(1) Pantone 7681 C (Light Blue)
CMYK Build: C=42 M=19 Y=2 K=8
RGB Build: R=135 G=169 B=204
HTML Build: #86A8CB

(2) Pantone 301 C (Dark Blue)
CMYK Build: C=99 M=74 Y=26 K=10
RGB Build: R=9 G=78 B=127
HTML Build: #084D7E
E. ACCEPTABLE BACKGROUNDS

Full-color CHSOS logo placed behind a light texture background.

White CHSOS logo placed behind a dark texture background.

Full-color CHSOS logo placed behind a light colored background.

White CHSOS logo placed behind a dark colored background.
F. **UNACCEPTABLE ELEMENT RELATIONSHIPS**

Do not omit any part of the logo lockup.

Do not enclose the logo in a shape.

Do not alter the typeface of the logo abbreviation or full name.

Do not rearrange any parts of the logo lockup.

Do not stretch any part of the logo.
G. UNACCEPTABLE COLOR AND BACKGROUND

Do not reverse the logo from shapes.

Do not alter the Pantone or build formulas.

Do not overprint the logo on a dark color.

Do not place the logo over shapes, patterns or busy photos.
H. DESIGN

CHSOS Color Palette

Pantone 556 C
CMYK Build: C=11 M=0 Y=13 K=0
RGB Build: R=225 G=241 B=225
HTML Build: #007F97

Pantone 580 C
CMYK Build: C=30 M=0 Y=38 K=0
RGB Build: R=181 G=220 B=177
HTML Build: #B5DBB1

Pantone 3405 C
CMYK Build: C=100 M=0 Y=77 K=0
RGB Build: R=0 G=167 B=114
HTML Build: #00A672

Pantone 7731 C
CMYK Build: C=70 M=0 Y=67 K=33
RGB Build: R=43 G=136 B=94
HTML Build: #2A885E

Pantone 328 C
CMYK Build: C=96 M=51 Y=72 K=0
RGB Build: R=0 G=112 B=100
HTML Build: #006F64
The Minimum Size for SSH’s Accredited Program Logo

The preferred logo width cannot be smaller than 1.5”
The preferred logo height cannot be smaller than 0.85”
B. TYPEFACE

(1) Logo Acronym and Accredited Program Typography: Futura Medium
(2) Logo Full Name Typography: Futura Medium Condensed

The logo abbreviation, accredited program and full name color should match the front "swoosh."

C. BRAND ELEMENTS

SSH’s Accredited Program brand elements must always be positioned away from any other graphic elements an amount equal to, or greater than 0.25".
D. SSH ACCREDITED PROGRAM COLOR PALETTE

These colors should be used for all SSH’s Accredited Program branded collateral in print and online. The Pantone colors and the respective color builds are provided below.

(1) Pantone 7692 C (Dark Blue)
   CMYK Build: C=98 M=69 Y=22 K=5
   RGB Build: R=0 G=85 B=137
   HTML Build: #005589

(2) Pantone 2717 C (Light Blue)
   CMYK Build: C=32 M=16 Y=0 K=0
   RGB Build: R=169 G=194 B=229
   HTML Build: #A9C2E5
E. ACCEPTABLE BACKGROUNDS

Full-color SSH Accredited Program logo placed behind a light texture background.

White SSH Accredited Program logo placed behind a dark texture background.

Full-color SSH Accredited Program logo placed behind a light colored background.

White SSH Accredited Program logo placed behind a dark colored background.
F. UNACCEPTABLE ELEMENT RELATIONSHIPS

Do not omit any part of the logo lockup.

Do not enclose the logo in a shape.

Do not alter the typeface of the logo abbreviation or full name.

Do not rearrange any parts of the logo lockup.

Do not stretch any part of the logo.
G. UNACCEPTABLE COLOR AND BACKGROUND USAGE

Do not reverse the logo from shapes.

Do not alter the Pantone or build formulas.

Do not overprint the logo on a dark color.

Do not place the logo over shapes, patterns or busy photos.
H. SSH ACCREDITED PROGRAM DESIGN

SSH Accredited Program Color Palette

**Pantone 705 C**
- CMYK Build: C=0 M=5 Y=13 K=0
- RGB Build: R=255 G=240 B=220
- HTML Build: #FF00DC

**Pantone 7401 C**
- CMYK Build: C=0 M=14 Y=39 K=0
- RGB Build: R=255 G=220 B=165
- HTML Build: #FFD4A4

**Pantone 7409 C**
- CMYK Build: C=0 M=38 Y=100 K=0
- RGB Build: R=251 G=169 B=25
- HTML Build: #FA0118

**Pantone 7578 C**
- CMYK Build: C=0 M=72 Y=100 K=8
- RGB Build: R=224 G=100 B=31
- HTML Build: #FA9118
The International Meeting on Simulation in Healthcare (IMSH) uses a customized logo to identify the meeting. This logo will be consistent every year, but the colors will change to reflect the meeting location. The logo should be used in full, and the Society for Simulation in Healthcare should not be removed from it.

A. LOCK-UP

The Minimum Size for IMSH’s Logo

The preferred logo width cannot be smaller than 2”

The preferred logo height cannot be smaller than 0.65”
B. TYPOGRAPHY

(1) Logo acronym and full name typography: Akzidenz-Grotesk Pro Medium

C. BRAND ELEMENTS

The IMSH brand elements must always be positioned away from other graphic elements an amount equal to, or greater than 0.25".
D. COLOR PALETTE

These colors should be used for all IMSH branded collateral in print and online. The Pantone colors and the respective builds are provided below.

(1) Pantone 7692 C (Green)
CMYK Build: C=91 M=8 Y=44 K=0
RGB Build: R=0 G=164 B=160
HTML Build: #00A3A0

(2) Pantone 2717 C (Blue)
CMYK Build: C=100 M=90 Y=10 K=0
RGB Build: R=37 G=64 B=143
HTML Build: #24408E

(3) Pantone 446 C (Black)
CMYK Build: C=0 M=0 Y=0 K=90
RGB Build: R=65 G=64 B=66
HTML Build: #404041
E. ACCEPTABLE LOGO BACKGROUND

Full-color IMSH logo placed behind a light texture background.

Full-color IMSH logo placed behind a light colored background.
F. UNACCEPTABLE ELEMENT RELATIONSHIPS

Do not omit any part of the logo lockup.

Do not enclose the logo in a shape.

Do not alter the typeface of the logo abbreviation or full name.

Do not rearrange any parts of the logo lockup.

Do not stretch any part of the logo.
G. UNACCEPTABLE COLOR AND BACKGROUND USAGE

Do not alter the Pantone or build formulas.

Do not overprint the logo on a dark color.

Do not place the logo over shapes, patterns or busy photos.
A. POCKET FOLDER

**Front**

**Back**

**Inside**

**Pantone 312 C**
- CMYK Build: C=75 M=15 Y=14 K=0
- RGB Build: R=15 G=166 B=201
- HTML Build: #ABD6E9

**Pantone 7675 C**
- CMYK Build: C=94 M=79 Y=4 K=1
- RGB Build: R=41 G=78 B=155
- HTML Build: #284E9A
C. INSERTS AND COLOR PALETTE

Pantone 7409 C
CMYK Build: C=0 M=38 Y=100 K=0
RGB Build: R=257 G=170 B=25
HTML Build: #FA918

Pantone 7578 C
CMYK Build: C=0 M=72 Y=100 K=8
RGB Build: R=224 G=100 B=31
HTML Build: #DF631E

Pantone 270 C
CMYK Build: C=25 M=31 Y=0 K=0
RGB Build: R=188 G=173 B=213
HTML Build: #BBADD4

Pantone 268 C
CMYK Build: C=75 M=100 Y=0 K=8
RGB Build: R=95 G=39 B=135
HTML Build: #5E2786
D. INSERTS AND COLOR PALETTE

**Pantone 3405 C**
- CMYK Build: C=100 M=0 Y=77 K=0
- RGB Build: R=0 G=167 B=114
- HTML Build: #00A672

**Pantone 328 C**
- CMYK Build: C=98 M=57 Y=72 K=0
- RGB Build: R=0 G=112 B=100
- HTML Build: #006F64

**Pantone 7425 C**
- CMYK Build: C=22 M=100 Y=56 K=0
- RGB Build: R=197 G=35 B=88
- HTML Build: #C42257

**Pantone 7435 C**
- CMYK Build: C=50 M=100 Y=57 K=10
- RGB Build: R=135 G=38 B=82
- HTML Build: #872651
E. ENVELOPE

F. TYPOGRAPHY

Approved Typefaces

Raleway Regular
ABCDEFHGIJKLMNOPQRSTUVWXYZ
abcdefghijklmnopqrstuvwxyz
1234567890

Raleway Bold
ABCDEFHGIJKLMNOPQRSTUVWXYZ
abcdefghijklmnopqrstuvwxyz
1234567890

Raleway Medium
ABCDEFHGIJKLMNOPQRSTUVWXYZ
abcdefghijklmnopqrstuvwxyz
1234567890
1. Summary of Purpose
   1.1. As an international society, The Society for Simulation in Healthcare (SSH) and its programs, activities and expertise are of special interest to the healthcare industry. One of the important ways we promote SSH is through traditional and social media.

   1.2. In order to maintain a professional and trusted relationship with the media and our membership, information coming from SSH must be accurate, timely, complete and in harmony with the official position of the society.

   1.3. The Executive Director and Associate Executive Director have been designated as the first and primary contacts for internal and external messaging.

2. Scope
   2.1. This policy pertains to any communications or messaging representing SSH.
   2.2. Media and Communications Committee is responsible for oversight of this policy.
   2.3. The Board of Directors is responsible for providing approval of this policy.

3. Definitions
   3.1. None

4. Policy Details
   4.1. Media Relations
       The SSH president, past-president, president-elect, Executive Director, Associate Executive Director, and designated senior staff are the only individuals who may speak on behalf of the organization. Members and staff contacted by the media shall contact the Executive Director who will coordinate a response on behalf of the society.

   4.2. Positive Contributions
       Members who speak to the media are expected to discuss the society in a positive light or not to comment.

   4.3. Media Access at IMSH
       Any member of the press must contact the Executive Director or a designee for approval of his/her registration to IMSH and must work
through the Executive Director or designee to arrange access to appropriate individuals for media inquiries.

4.4. Confidentiality
Board policy matters, strategic plans, and ongoing negotiations are considered confidential unless approved for discussion by the SSH president or Executive Director.

4.5. Members email addresses
SSH staff utilizes email communication to share information with members and individuals who have requested email notices. Email addresses provided to SSH are not shared with other organizations. Members are required to provide their email address upon joining. Non-members may submit their email address via ssih.org. All group emails sent must allow the recipient to opt out of future email contact.

Committee and group rosters, including email address, are available to the chair and vice-chair for communications with their own committee or group. SSH policy does not permit selling or distributing these lists. Email addresses of members are maintained by SSH staff.

5. Procedures for Ensuring Compliance
5.1. Any contact by the media must be referred to the Executive Director

5.2. All requests for email broadcasts, mailing or other method of contacting SSH members must follow the procedures as outlined in the Communications Request Form policy.

6. Appendices / Attachments
6.1. None
1. Summary of Purpose:
   1.1. This policy serves to provide an outline of the SSH communications
       process and provide directions on how to use the Communications
       Request Form to gain access and proceed through the communications
       process.

2. Scope:
   2.1. This policy covers how to carry out communications to members.
   2.2. The Media and Communications Committee is responsible for oversight
       of this policy.
   2.3. The Board of Directors is responsible for providing approval of this policy.

3. Definitions:
   3.1. None

4. Policy Details:
   4.1. SSH is passionate about engaging with our membership, building our
       brand and maintaining our corporate integrity. To achieve this, a planned
       approach is required for all communications. This policy and
       accompanying form allows the SSH team to assist you in delivering
       messages to your target audiences. Please note that SSH staff will make
       the final decision on the best communication tools to use depending on
       the timeframe and other messages competing for your audiences'
       attention.

5. Procedures for Ensuring Compliance:
   5.1. Request Procedure:
       5.1.1. The form will be made available via a specific page on the SSH
               web site. Any member may access the form via the web page.
       5.1.2. After completing the form, the submitter must send a copy of the
               form to the Staff Liaison of the Media and Communications
               Committee (a link will be provided).
       5.1.3. The Staff Liaison will review the document for accuracy and
               completeness and then forward to the Chair of the Media and
               Communications Committee for review.
       5.1.4. The Chair will respond back to the staff liaison with any comments.
       5.1.5. The staff liaison will coordinate with the SSH
               Marketing/Communications manager to schedule the
               communication.
5.1.6. Once a date has been determined, the staff liaison will then inform the submitter of the approval and approximate send date.

5.1.7. The staff liaison will provide the information to the marketing department for final execution.

5.1.8. A copy of the completed form will be archived in the SSH Dropbox.

5.2. This form must be used for any communication that requires the assistance of staff or SSH leadership. Generally, this includes any mass communication or marketing messaging.

5.3. If a message is sent without using this form, staff will notify the originator and clarify this policy with them.

5.4. If the originator refuses to comply with this policy, revocation of communication privileges using official SSH media channels may be considered.

5.5. Communications Process

Communication Process Map

5.6. Communications Request Form (also available online)

SSH is passionate about engaging with our membership, building our brand and maintaining our corporate integrity. To achieve this, a planned approach is required for all communications. This form allows the SSH team to assist you in delivering messages to your target audiences.
Please complete all fields. Please note that SSH staff will make the final decision on the best communication tools to use depending on the timeframe and other messages competing for your audiences’ attention.

**Committee/SIG Lead Contact Details**

<table>
<thead>
<tr>
<th>Name</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Email</td>
<td></td>
</tr>
<tr>
<td>Phone</td>
<td></td>
</tr>
</tbody>
</table>

**Communication Details**

<table>
<thead>
<tr>
<th>Title</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Type of request</td>
<td></td>
</tr>
<tr>
<td>SSH member email.</td>
<td></td>
</tr>
<tr>
<td>SIG specific email (Internal)</td>
<td></td>
</tr>
<tr>
<td>External email. This would be distributed to non-members in the SSH database.</td>
<td></td>
</tr>
<tr>
<td>Social Media (Twitter/Facebook/SimConnect/LinkedIn)</td>
<td></td>
</tr>
<tr>
<td>SSH Webpage. Please note if there are specific pages where you would like your message included.</td>
<td></td>
</tr>
<tr>
<td>External publications</td>
<td></td>
</tr>
<tr>
<td>Other (please comment)</td>
<td></td>
</tr>
<tr>
<td>President’s Newsletter (quarterly)</td>
<td></td>
</tr>
</tbody>
</table>

**Target Audience**

| Statement from Chair support communication |  |
Timeline

Please provide a 30-day date range for the communication to be issued (05/01/16-05/31/16)

Communication Content

Text

[ ] Word document attached

Photo and/or graphic to be included (High res images 300dpi jpeg format)

[ ] Yes

If yes, has consent/copyright been obtained

*Note that certain requests may require CEO, President or BoD approval.
Addendum – Policy Approval History

<table>
<thead>
<tr>
<th>Policy Approval History</th>
<th>Date Approved</th>
<th>Summary of Changes (if any)</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Who Approved</td>
<td>Date Approved</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Chair and Vice Chair, Media and Communications Committee</td>
<td>July 25, 2016</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
1. Summary of Purpose
   1.1. Establish basic guidelines for participation in networking on the SSH website.
   1.2. Provide members with written expectations upon first login that must be accepted before participation in the social networking site.

2. Scope
   2.1. All conduct on SSH websites and social media.
   2.2. Oversight of this policy is the responsibility of the Membership Department, Executive Staff, and the Media and Communications Committee.
   2.3. The Board of Directors is responsible for providing approval of this policy.

3. Definitions
   3.1. None

4. Policy Details
   4.1. Members must agree to the following Code of Conduct terms in order to use SimConnect:
   4.1.1. This site is provided as a service for the members of Society for Simulation in Healthcare. Society for Simulation in Healthcare is not responsible for the opinions and information posted on this site by others. We disclaim all warranties with regard to information posted on this site, whether posted by Society for Simulation in Healthcare or any third party; this disclaimer includes all implied warranties of merchantability and fitness. In no event shall Society for Simulation in Healthcare be liable for any special, indirect, or consequential damages or any damages whatsoever resulting from loss of use, data, or profits, arising out of or in connection with the use or performance of any information posted on this site.
   4.1.2. Do not post any defamatory, abusive, profane, threatening, offensive, or illegal materials. Do not post any information or other material protected by copyright without the permission of the copyright owner. By posting material, the posting party warrants and represents that he or she owns the copyright with respect to such material or has received permission from the copyright owner. In addition, the posting party grants Society for Simulation in Healthcare and users of this site the nonexclusive right and license to display,
copy, publish, distribute, transmit, print, and use such information or other material.

4.1.3. Messages should not be posted if they encourage or facilitate members to arrive at any agreement that either expressly or impliedly leads to price fixing, a boycott of another's business, or other conduct intended to illegally restrict free trade. Messages that encourage or facilitate an agreement about the following subjects are inappropriate: prices, discounts, or terms or conditions of sale; salaries; profits, profit margins, or cost data; market shares, sales territories, or markets; allocation of customers or territories; or selection, rejection, or termination of customers or suppliers.

4.1.4. Society for Simulation in Healthcare does not actively monitor the site for inappropriate postings and does not on its own undertake editorial control of postings. However, in the event that any inappropriate posting is brought to the attention of Society for Simulation in Healthcare we will take all appropriate action.

4.1.5. Society for Simulation in Healthcare reserves the right to terminate access to any user who does not abide by these guidelines.

5. Procedures for Ensuring Compliance

5.1. Moderation of SimConnect and Social Networking Sites

5.1.1. SimConnect and the Social Networking site are considered to be self moderated by members and users of the social networking tools.

5.1.2. The SSH staff will randomly review daily digests of information posted on SimConnect. If there is unacceptable information posted, the SSH staff will send an email to the member requesting that the member comply with the code of conduct that they agreed upon entry into the site and will remove the post.

5.1.3. Members may email the Web Content Producer or the Executive Director with specifying information that is felt to be offensive or inappropriate.

5.1.4. Any member that has been notified three or more times of inappropriate postings may be asked to leave the community or be blocked from the community at the discretion of the Executive Director.
<table>
<thead>
<tr>
<th>POLICY TITLE</th>
<th>VERSION</th>
<th>DATE REVIEWED</th>
</tr>
</thead>
<tbody>
<tr>
<td>Code of Conduct for Participation in web-based Networking</td>
<td>2.0</td>
<td></td>
</tr>
</tbody>
</table>

5.1.5. The SSH staff will provide high level oversight and reserve the right to terminate access to any user who does not abide by the guidelines agreed to.

6. Appendices / Attachments
   6.1. Legal Language
CONFERENCES
1. Summary of Purpose:
   1.1. To establish guidelines for the promotion of products and services at SSH conferences, educational activities, and meetings.

2. Scope
   2.1. All SSH conferences, educational activities, and meetings.
   2.2. This policy applies whether the promotional activity is representing a non-profit, for profit, or government entity.
   2.3. Meetings Oversight Commission is responsible for oversight of this policy.
   2.4. The Board of Directors is responsible for providing approval of this policy.

3. Definitions
   3.1. None

4. Policy Details
   4.1. Promotional activities may not be conducted outside of the exhibition area for any meeting of the Society for Simulation in Healthcare (SSH).
   4.2. Individuals or entities are not allowed to promote organizations, products or services at SSH-sponsored meetings and events outside of designated exhibition areas.
   4.3. All promotional activity conducted during an SSH-sponsored educational activity must occur in paid promotional exhibition space within the designated exhibition area,
   4.4. Those individuals or entities promoting a service, collaboration, network, healthcare product, or educational program must abide by vendor restrictions.
   4.5. The distribution of brochures, flyers, buttons, or other promotional materials outside of designated promotional areas is not allowed.
   4.6. Promotional attire (containing an entity logo, for example) may be worn by an individual, however, solicitation or promotional activity engaged in on the part of that individual must occur in designated promotional areas.
   4.7. Non-SSH business conducted during SSH-sponsored events must utilize independently contracted meeting space.
   4.8. There are provisions for outside groups to rent/lease space from SSH for a fee.
4.9. When approved, the SSH Board of Directors can waive this fee and allow complimentary use of SSH-contracted space.

5. Procedures for Ensuring Compliance
   5.1. Procedures for securing independently contracted meeting space are in the Exhibitor prospectus for each event.
   5.2. The Society shall monitor compliance of this policy through the onsite oversight of SSH staff and leadership volunteers during SSH-sponsored meetings and events.
   5.3. Individuals and/or entities engaging in promotional activities outside of designated exhibition areas will be asked to cease the promotional activities immediately.
   5.4. Violations will be managed by the SSH Executive Committee. Attendance may be suspended, continuing education credit earned withdrawn, or dismissal from the meeting mandated, if the individual and/or entity is unwilling to comply with this policy.

6. Appendices / Attachments
   6.1. None
1. Summary of Purpose
   1.1. Priority point system is used to assign booths for both International Meeting on Simulation in Healthcare (IMSH) and Asia Pacific Meeting on Simulation in Healthcare (APMSH).

2. Scope
   2.1. Covers the point system used to prioritize exhibitors at IMSH and APMSH
   2.2. Finance and Audit Committee is responsible for oversight of this policy.
   2.3. The Board of Directors is responsible for providing approval of this policy.

3. Definitions
   3.1. None

4. Policy Details
   4.1. Beginning in 2011, a priority point system was implemented to create a more equitable method of assigning booth space. Priority point system is used to assign booths for both International Meeting on Simulation in Healthcare (IMSH) and Asia Pacific Meeting on Simulation in Healthcare (APMSH).

5. Procedures for Ensuring Compliance
   5.1. One point for each 10x10 space purchased. These points accumulate and exhibitor always retains these point acquired from space occupied.
   5.2. Five points for each consecutive year exhibiting at IMSH. If exhibitor does not exhibit any given year, exhibitor forfeits all consecutive years’ points. This is intended to reward loyalty.
   5.3. One point for each $5,000 in meeting support (whether for IMSH or APMSH).
   5.4. Two points for each year exhibiting at APMSH.
   5.5. Five points to Corporate Roundtable members. Dues must be paid for points to post.

6. Appendices / Attachments
   6.1. None
1. Summary of Purpose
1.1. Provides details on SSH Exhibitor payment, refund and cancellation options.

2. Scope
2.1. All vendors who exhibit at all SSH meetings and events.
2.2. Finance and Audit Committee is responsible for oversight of this policy.
2.3. The Board of Directors is responsible for providing approval of this policy.

3. Definitions
3.1. None

4. Policy Details
4.1. SSH will provide a policy for any organization which exhibits at an SSH meeting or event. This policy outlines all booth fees, payment expectations, refunds, and issued badges.

5. Procedures for Ensuring Compliance
5.1. Exhibit Fees
5.1.1. Premium Plus * $45.00 per square foot.
5.1.2. Premium * $40.00 per square foot
5.1.3. Choice * $39.00 per square foot
5.1.4. Standard * $37.00 per square foot
5.1.5. Educational * 800 each – limit one (1) booth at this reduced rate. To qualify for educational rate, applicant must provide a copy of organization’s 501(c3) status or contain .org,.edu or .gov in website URL address.

5.2. Applications and Payments Deadlines
5.2.1. October 1, 2012 – 50% Deposit due
5.2.2. All Funds Due: November 5, 2012

5.3. Cancellations/Refunds
5.3.1. All cancellations and/or reduction in space must be submitted in writing to the Director of Meetings & Exhibits. The following dates and refunds apply. Cancellations submitted after January 12 will not
receive a refund and money may not be applied to future annual meetings. Reduction in booth size is considered a cancellation and below fees will apply as value of the space returned to IMSH. IMSH reserves the right to relocate any exhibitor’s booth that requests a space reduction.

5.3.1.1. Before November 5: $100 administrative fee
5.3.1.2. November 6 – December 13: 10% of booth fee
5.3.1.3. December 14 – January 11: 25% of booth fee
5.3.1.4. January 12 – January 25: 100% of booth fee

5.4. Exhibitor Badges
5.4.1. Five (5) Exhibitor Hall Badges for each 10x10 booth unit up to a maximum of 30 badges.
5.4.2. Additional hall badges are $395.00. There is no limit to number of additional hall badges at the rate of $395.00.
5.4.3. Educational Booths are limited to two (2) Exhibitor Hall Badges.

6. Appendices / Attachments
6.1. None
**Disclosure and Non-Promotion during SSH Educational Activities and Events**

1. **Summary of Purpose**
   1.1. Provide a clearly defined policy regarding the disclosure of relevant financial relationships for individuals in control of SSH Educational and Scientific Content.

2. **Scope**
   2.1. Individuals required to disclose relevant financial relationships include:
       2.1.1. Primary and Contributing Authors
       2.1.2. Course Faculty
       2.1.3. Course Directors
       2.1.4. Educational Content Reviewers
       2.1.5. Scientific Content Reviewers
       2.1.6. Educational Content Chairs
       2.1.7. Scientific Content Committee Members
       2.1.8. Education Committee Members
       2.1.9. Research Committee Members
       2.1.10. Educational Activity Planning Committee Members
       2.1.11. Meetings Oversight Commission Members
       2.1.12. SSH Staff
   2.2. Meetings Oversight Commission and Education Committee are responsible for oversight of this policy.
   2.3. The Board of Directors is responsible for providing approval of this policy.

3. **Definitions**
   3.1. **Commercial Interest.**
       A commercial interest is defined as any entity producing, marketing, re-selling, or distributing healthcare and/or simulation-related goods or services. Providers of clinical service directly to patients are not considered commercial interests.
   3.2. **Financial Relationships.**
       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 or
advisory committees or review panels, board membership, and other activities from which remuneration is received, or expected. Relationships of the individual’s spouse or partner are to be included as those of the individual.

3.3 Relevant Financial Relationships
Financial relationships with commercial interests are relevant if they have occurred in the 12-month period preceding the time the individual is involved in controlling SSH educational and/or scientific content. There is no minimal dollar amount considered for relationships to be considered relevant. Inherent in any amount is the incentive to maintain or increase the value of the relationship.

3.4 Conflict of Interest
Circumstances create a conflict of interest when an individual has an opportunity to affect SSH educational or scientific content about products of services of a commercial interest with which he/she has a relevant financial relationship.

4. Policy Details
4.1 All individuals in a position to control content of SSH educational or scientific activities must disclose the name of commercial interests with which the individual and his/her spouse or partner has had a relevant financial relationship within the past 12 months.

4.2 Non-Promotion of Relevant Financial Relationships during SSH Presentations
4.2.1 Provision of Presentation Materials in Advance
4.2.1.1 Presenters with relevant financial relationships to the content being delivered will be required to provide all presentation materials to the SSH Education Committee Review Team prior to presentation.

4.2.2 Required Verbal Disclosure of Relevant Financial Relationships
4.2.2.1 At the beginning of an SSH presentation, presenters must verbally disclose all relevant financial relationships, and also list those relationships on electronic presentation materials used during the presentation. Cooperation with this requirement is essential. Presenters will be evaluated on whether or not disclosure was made.
4.2.2.2. If financial relationships exist that are not related to the topic being presented, these relationships do NOT need to be disclosed.

4.2.2.3. If relevant financial relationships exist, in addition to verbal disclosure at the beginning of the presentation, presenters must discuss how the content has been adjusted to avoid the introduction of commercial bias during the presentation. For example, presenters may state that:

- “I am covering topics other than those represented by my relationship with (Name of commercial entity).”
- “I will not be presenting this content in a promotional manner.”
- “I will not endorse (name of commercial entity) during this presentation.”
- “Another faculty member is covering content related to this commercial entity.”
- “There will be no case studies or activities presented that in any way represent past, current or prospective clients of (name of commercial entity).”
- Any recommendations made during this presentation are evidence-based, or consistent with current consensus-based simulation practice.”

4.2.3. Presentations delivered by individuals with relevant financial relationships will be monitored by a member of the SSH Education Committee Content Advisory Team.

4.2.4. Promotional Activity Restriction & Non-endorsement of Commercial Entities

4.2.4.1. Endorsement of commercial entities, products, goods and services is not permitted in learning sessions that award contact hours. This will be strictly enforced.

4.2.4.2. In addition, presenters using equipment or materials for instruction during presentation of accredited content must refrain from endorsement of commercial products or companies during the presentation.

4.2.5. Use of Institutional and SSH Logos
4.2.5.1. It is acceptable to display have institutional/commercial entity logos on electronic presentation materials in a non-promotional manner along with the corresponding SSH logo. Presenters are encouraged to also use the corresponding SSH event presentation template in electronic presentations.

5. Procedures for Ensuring Compliance
5.1. Individuals who fail to disclose will be not be included in the development, review or presentation of content for SSH-sponsored educational activities. When a disclosed financial relationship is deemed relevant, the individual will be advised to resolve the conflict in a manner sufficient to prevent bias. When a relevant financial relationship poses too great a risk for bias, or the individual involved refuses to implement conflict resolution strategies, the individual will not be included the development, review or presentation of relevant content.

6. Appendices / Attachments /
6.1. Accreditation Council for Continuing Medical Education (ACCME) Standards for Commercial Support. These standards are also used by the American Nurses Credentialing Center (ANCC).
1. Summary of Purpose
   1.1 All presenters providing content for events sponsored by the Society for Simulation in Healthcare (SSH) must agree to the stipulations stated in this policy.

2. Scope
   2.1 All presenters providing content for SSH-sponsored events
   2.2 Meetings Oversight Commission and Education Committee are responsible for oversight of this policy.
   2.3 The Board of Directors is responsible for providing approval of this policy.

3. Definitions
   3.1 None

4. Policy Details
   4.1 Presenters involved in the development and delivery of content for SSH-sponsored events may not receive direct payment from a commercial entity for honorarium, travel or other expenses in conjunction with their involvement in the event.
   4.2 Individuals eligible to receive honoraria for participation in SSH-sponsored events, paid directly by SSH, are as follows:
      4.2.1 Preconference and Immersive Presenters as follows: $500/credit hour, to be divided at the Course Director’s discretion among course presenters.
      4.2.2 Plenary/Keynote Speakers – to be negotiated with each speaker.
   4.3 Individuals eligible to receive a discounted/complimentary tuition benefit for SSH-sponsored events:
      4.3.1 Planning Committee Co-Chairs – complimentary registration for all preconference and general sessions.
      4.3.2 Planning Committee Content Chairs – discounted registration fee for general session registration.
      4.3.3 Plenary/Keynote Speakers – complimentary registration for all preconference and general sessions.
   4.4 Individuals Eligible to Receive Reimbursement of Expenses to Attend SSH-sponsored events:
      4.4.1 Planning Committee Co-Chairs
      4.4.2 Plenary/Keynote Speakers
4.5. All presenters must register for the actual days of attendance at the event.

4.6. Content submitted to SSH-sponsored events must be original and free from commercial bias. In addition, content must not contain libelous or unlawful statements, it may not infringe on the personal or proprietary right of others, and may not contain fraudulent, plagiarized, or incorrectly attributed material.

4.7. If excerpts (e.g. assessments, figures, tables, illustrations, or audio/video files) from copyrighted works are included, presenters must secure the necessary written release(s) from the original author prior to presentation. The original publication must be acknowledged during the presentation.

4.8. Written releases must be obtained from patients whose names or likenesses are included in submitted content. Should SSH request copies of such releases, they must be provided to the Office of Continuing Education within two weeks.

4.9. Presenters involved in the development and delivery of educational content for the Society for Simulation in Healthcare (SSH) may not receive direct payment from a commercial entity for honorarium, travel or other expenses in conjunction with their involvement in an SSH-sponsored educational activity.

4.10. SSH presenters must complete a short biosketch and submit a recent curriculum vitae. Submitted content will NOT be peer-reviewed until these requirements have been completed.

4.11. When referring to a product, equipment or supplies, presenters are asked to refrain from using company or trade names.

4.11.1. Example: “high-fidelity manikin” should be used instead of a particular company/model name.

4.12. A copy of all presentation files must be made available by the presenters for archive by SSH.

4.13. Absolutely no printing of presentation materials will be done onsite by the Society. A Business Center may be available for this purpose. All onsite printing charges are at the expense of the presenter.

4.14. Room and AV sets are pre-determined. Presenters must design the course to utilize the specific set and equipment available for each particular course delivery type (i.e. Expert Panel, Workshop, etc). Room sets are outlined within the descriptions for each course delivery format.

4.15. There will be no substitutions or additions to the presenters for a session without prior approval by the SSH Office of Continuing Education.
4.16. Each individual presenting at SSH-sponsored events consents to be audio and video recorded, and further consents that SSH-selected segments of those recordings may be used by the Society for promotional purposes. This does not imply a transfer of any intellectual property utilized or owned by the presenter in conducting the activity.

4.17. Content submitted to Society-sponsored events will become the property of the Society only in the delivery format in which it was submitted. Content will not be altered for presentation into another delivery format without permission from the course director or primary author.

4.18. Presented content, including the ideas and intellectual property contained therein, will not be altered or distributed by the Society without consent of the primary author or course director.

4.19. The Society will not edit or alter submitted content without written consent of the primary author or course director.

4.20. When content is accepted for presentation at an SSH-sponsored event, every effort will be made to resolve scheduling conflicts, however, it cannot be guaranteed that all conflicts will be resolved.

4.21. Enrollment in Preconference and Immersive Courses requires an additional participant registration fee to cover course expenses. In the event enrollment in one of these courses is too low to enable the course to break even financially, SSH reserves the right to cancel the course. SSH is not liable for faculty travel expenses and/or change fees incurred as a result of the cancellation.

5. Procedures for Ensuring Compliance
5.1. The Education Committee and Director of Continuing Education will ensure compliance.

6. Appendices / Attachments
6.1. None
MEETINGS
1. Summary of Purpose
   1.1. Parliamentary procedure exists to facilitate the transaction of business and to promote cooperation and harmony. Policy groups and governing bodies can use this resource as a guide for implementing parliamentary procedures for running effective meetings.

2. Scope
   2.1. Parliamentary Procedures at all SSH meetings
   2.2. The Governance Committee is responsible for oversight of this policy.
   2.3. The Board of Directors is responsible for providing approval of this policy.

3. Definitions
   3.1. None

4. Policy Details
   4.1. SSH will utilize a combination of both simplified and long-version parliamentary procedures during its meetings.

5. Procedures for Ensuring Compliance
   5.1. Please refer to the official Robert’s Rules of Order for all official parliamentary procedures
   5.2. Recommended and Brief Rules of Note
      5.2.1. Order of Business
         5.2.1.1. Call to order
         5.2.1.2. Roll call
         5.2.1.3. Minutes, read and approved or corrected
         5.2.1.4. Report of committees
            5.2.1.4.1. Standing committees
            5.2.1.4.2. Special committees
         5.2.1.5. Unfinished or old business
         5.2.1.6. New business
         5.2.1.7. Announcements
         5.2.1.8. Adjournment
      5.2.2. Proper Procedure for Handling a Motion
         5.2.2.1. Member rises or signifies they would like to speak and addresses chairperson
         5.2.2.2. Chairperson recognizes member by saying name or nodding
5.2.2.3. Member states motion
5.2.2.4. Chairperson asks for a second if one is not offered voluntarily
5.2.2.5. Chairperson states the motion.
5.2.2.6. Chairperson asks for discussion if it a debatable motion.
5.2.2.7. When discussion ceases, chairperson restates motion and asks for a vote.
5.2.2.8. Chairperson gives results of vote and declares the motion passed or failed. (Some motions do not require all 8 steps see section III for variations).

5.2.3. Motions Most Often Used During a Meeting
5.2.3.1. Motions have rank or precedence, those of lower rank yield to those of higher rank, resulting in more than one motion of the floor at one time. A higher ranking motion can be moved during the discussion period of the motion before the assembly. The following motions are listed according to their rank, starting with the lowest.

5.2.3.2. The main motion
5.2.3.2.1. Phraseology: "I move..."
5.2.3.2.2. Rules for procedure:
5.2.3.2.2.1. Requires the 8 steps as described in proper procedure, section II.
5.2.3.2.2.2. Majority vote

5.2.3.3. Amendment (a change in a motion by adding, subtracting or substituting words)
5.2.3.3.1. Phraseology: "I move we amend the motion by..."
5.2.3.3.2. Rules for the procedure:
5.2.3.3.2.1. Requires 8 steps in as described in proper procedure
5.2.3.3.2.2. Majority vote
5.2.3.3.2.3. An amendment to an amendment changes or modifies the original amendment. Say, "I move we amend the amendment by...". Use same rules for procedure as above for the original amendment.

5.2.3.4. Refer to committee
5.2.3.4.1. Phraseology: "I move we refer this matter of..."
5.2.3.4.2. Rules for procedure:
  5.2.3.4.2.1. Requires the 8 steps in proper procedure
  5.2.3.4.2.2. Majority vote

5.2.3.5. Postpone to a certain day
  5.2.3.5.1. Phraseology: "I move we postpone consideration of this motion until..."
  5.2.3.5.2. Rules for procedure:
    5.2.3.5.2.1. Requires 8 steps in proper procedure
    5.2.3.5.2.2. Majority vote

5.2.3.6. Close debate (to stop discussion upon the motion)
  5.2.3.6.1. Phraseology: "I move we close debate and vote immediately on the pending question."
  5.2.3.6.2. Rules for procedure:
    5.2.3.6.2.1. Requires 7 steps of the proper procedure - omit discussion (step 5.2.2.6)
    5.2.3.6.2.2. Two-thirds vote

5.2.3.7. Lay on the table
  5.2.3.7.1. Phraseology: "I move we table this motion concerning..."
  5.2.3.7.2. Rules for procedure:
    5.2.3.7.2.1. Requires 7 steps of the proper procedure - omit discussion (step 5.2.2.6)
    5.2.3.7.2.2. Majority vote
  5.2.3.7.3. Motion to take from the table is the method used to bring the motion back on the floor for discussion after a period of time has elapsed, Say, "I move we take from the table the motion..." The same rules as for lay on the table apply.

5.2.4. Other Useful Motions
  5.2.4.1. Withdraw a motion (to retract, recall or take back a proposed motion)
    5.2.4.1.1. Phrase: "I wish to withdraw the motion concerning..."
    This is made by the originator of the motion.
  5.2.4.1.2. Rules for procedure:
5.2.4.1.2.1. If a member objects to the withdrawal, a motion by another member is in order.
5.2.4.1.2.2. Requires 7 steps of the procedure - omit requirement of a second. (step 5.2.2.4)
5.2.4.1.2.3. Majority vote.

5.2.4.2. Reconsider (motion to bring an old motion on to the floor)
5.2.4.2.1. Phrase: "I move we reconsider the vote on the motion...."
5.2.4.2.2. Rules for procedure:
5.2.4.2.2.1. Requires 6 steps of the proper procedure - omit interruption of speaker (step 5.2.2.1) and recognition by chairperson (step 5.2.2.2)
5.2.4.2.2.2. Majority vote

5.2.4.3. Point of order (member indicates an error in parliamentary procedure)
5.2.4.3.1. Phrase: "I rise to a point of order."
5.2.4.3.2. Rules for procedure:
5.2.4.3.2.1. May interrupt a speaker; does not need recognition; does not need a second
5.2.4.3.2.2. Decision made by chairperson

5.2.4.4. Parliamentary inquiry (member asks if an error has been made in procedure)
5.2.4.4.1. Phrase: "I rise for parliamentary inquiry."
5.2.4.4.2. Rules for procedure: same as for Point of Order

5.2.4.5. Division (to obtain an accurate account of the vote)
5.2.4.5.1. Phrase: "I call for division."
5.2.4.5.2. Rules for procedure: same as for Point of Order

5.2.4.6. Questions of privilege (matters concerning personal comfort)
5.2.4.6.1. Phrase: "I rise to a question of privilege,"
5.2.4.6.2. Rules for procedure: same as for Point of Order
5.2.4.6.3. Variation: individual raises hand of request and states "personal privilege.

5.2.4.7. Adjourn (motion to end the present meeting)
5.2.4.7.1. Phrase: "I move we adjourn."

5.2.4.7.2. Rules for procedure:
   5.2.4.7.2.1. Requires 7 steps in proper procedure - omit discussion
   5.2.4.7.2.2. Majority vote

5.2.5. How to Attempt to Pass a Motion
   5.2.5.1. Second the motion immediately.
   5.2.5.2. Give arguments for it during the discussion.
   5.2.5.3. Vote for the motion.
   5.2.5.4. Vote against any motion to postpone the original motion indefinitely.
   5.2.5.5. Move to amend it, to perfect or improve it.
   5.2.5.6. Vote against the motion to close debate in order to continue to discuss the motion's good points.
   5.2.5.7. Vote against the motion to table.
   5.2.5.8. Vote against the motion to recess.
   5.2.5.9. Vote against the motion to reconsider.
   5.2.5.10. Carry out motions immediately, so the motion to rescind cannot be used.
   5.2.5.11. Vote against motion to adjourn.
   5.2.5.12. The only way to carry a motion is to get the votes. Have your supporters at the meeting and encourage them to vote your way.

5.2.6. How to Attempt to Defeat a Motion
   5.2.6.1. Do not second the motion.
   5.2.6.2. Give arguments against it during the discussion.
   5.2.6.3. Vote against the motion.
   5.2.6.4. Move to postpone indefinitely in an attempt to "kill" it.
   5.2.6.5. Move to amend it to make it undesirable or complicated.
   5.2.6.6. Move to refer it to a committee to delay action.
   5.2.6.7. Move to postpone it to the next meeting to delay action.
   5.2.6.8. Move to close debate to stop further discussion of good points.
   5.2.6.9. Move to table the motion.
   5.2.6.10. Move to take a recess to delay the discussion and vote.
   5.2.6.11. If opponents win, move to reconsider the motion.
5.2.6.12. If opponents win and action has not been taken, move to rescind it.

5.2.6.13. Move to adjourn in order to prevent voting.

6. Appendices / Attachments
   
   
   
   
   
MEMBERSHIP
1. Summary of Purpose
   1.1. To ensure SSH Sections conduct fair and representative processes for nominating and voting on Section leadership positions of chair and vice-chair.

2. Scope
   2.1. This policy covers the nominations and elections for SSH Sections.
   2.2. The Internal Relations Committee is responsible for oversight of this policy.
   2.3. The Board of Directors is responsible for providing approval of this policy.

3. Definitions
   3.1. None

4. Policy Details
   4.1. Nominations Committee:
       4.1.1. The current Chair of the Section will be the chair of the Nominations Committee, so long as they are not seeking re-election. In the event the chair is seeking re-election, the vice-chair of the Section shall chair the nominations committee. In the event the vice chair is also seeking re-election, the chair of the nominations committee shall be appointed by the SSH President.
       4.1.2. A call shall go out to all Section members for interest in serving on the nominations committee a minimum of 30 days prior to the first meeting.
       4.1.3. After reviewing qualifications and experience of interested members, 3-4 shall be appointed to the Nominations Committee by the Nominations Committee Chair.
       4.1.4. An individual nominated for an elected position may not serve on the Nominations Committee.
       4.1.5. Members of the nominations committee shall serve a one-year term
   4.2. Nominations Committee Responsibilities:
       4.2.1. The Committee will encourage nominations by the Section membership for open positions.
4.2.2. The Committee will strive for a balanced representation of Section membership on the ballot for elected positions.

4.2.3. The Committee will take the following factors into account when reviewing candidates:
   4.2.3.1. Prior service to SSH
   4.2.3.2. Prior service to the Section
   4.2.3.3. Academic excellence
   4.2.3.4. Engagement in and commitment to the field
   4.2.3.5. Demographic, geographic, and professional diversity
   4.2.3.6. Additional criteria as determined by the Section

4.2.4. The Committee will confirm eligibility requirements for Section leadership in conjunction with the SSH Staff Liaison.

4.2.5. The Committee will review the roles and responsibilities with the candidates prior to formalizing the slate of nominees to ensure that nominees understand the commitment to SSH and the Section, if elected.

4.2.6. The Committee will vet all nominations and determine the final slate of candidates. Such slate will include no more than 3 nominees for each office.

4.2.7. Conflict of interest (COI) disclosure for each candidate will be reviewed by the same group or committee that reviews COI disclosures for Society officers.

4.2.8. The Committee Chair will present the final slate to the SSH Section Staff Liaison.

4.3. Candidate Eligibility
   4.3.1. Candidates eligible for elected positions will be current SSH Members in good standing.
   4.3.2. Candidate for eligible elected positions are evaluated for slating based upon criteria determined by the Section and communicated to all members prior to the nominations process.
   4.3.3. Candidates for elective positions to the Section may serve two consecutive terms in a specific elected position, after which they are ineligible for slating in that elected position in the next election cycle.

5. Procedures for Ensuring Compliance
   5.1. Call for Nominations
      5.1.1. Call for nominations will be presented and updated on the Section specific SimConnect group and will be sent to all Section members
through SSH e-mail and any other available communication (as applicable)

5.1.2. A template for open nominations will be available on the Section specific SimConnect group and by request to the SSH Staff Liaison

5.1.3. The evaluation tool and description of its use by the Nominations Committee will be available on the Section specific SimConnect group (if applicable).

5.1.4. Any interested Section member must submit all required documents to the SSH Staff Liaison by the designated deadline.

5.1.5. The Section nominations committee will review all nominees based upon criteria set forth by the Section and determine the final slate for election.

5.2. Election Process

5.2.1. Candidate (Slate) Announcement

5.2.1.1. A slated nominee’s biography, CV, and COI & disclosure statement will be posted on the Section specific SimConnect group and a summary will be included on the ballot, if appropriate for on-line balloting

5.2.2. Voting Procedures

5.2.2.1. Voting will be conducted via web polling of the Section membership and/or by mail-out ballot as determined by the Nominations Committee as the most efficient way to insure access to voting by the members.

5.2.2.2. Opening of voting will be announced by the SSH Staff Liaison through SSH e-mail and on the Section specific SimConnect group

5.2.2.3. The voting period will be no less than two (2) weeks from open to close of voting period.

5.2.2.4. Members of the Section and SSH are eligible to vote. No vote shall be counted if the person is not both a member of the Section and SSH.

5.2.2.5. At the conclusion of the election process, the results will be presented to the Chair of Nominations of the Section for review and then sent to the SSH Executive Committee for ratification.

5.3. Expectations of Candidates During the Election Process

5.3.1. Upon agreeing to become slated, candidates for Section Office commit to:

5.3.1.1. Becoming well versed in the history, organization, and purposes, of the Section.
5.3.1.2. Not seeking to use the Society for personal enrichment, personal aggrandizement or special perks.
5.3.1.3. Understanding the Section dynamics and will strive to be an effective section leader.
5.3.1.4. Being broadly representative of the section membership, not of a particular interest group or clique.
5.3.1.5. Understanding the Section’s responsibilities
5.3.1.6. Not participating in any kind of campaigning or self-promotion that would use a particular group or sub-group of the SSH for their personal gain.

5.3.2.

6. Appendices / Attachments

Appendix A: Nomination/Election Timeline
The timeline below represents the specific events and designated timeframes that must be adhered to in order to achieve a fair nomination and election process. The dates are inserted as an example, but the timeframes for events are required by SSH policy and procedure. The timeline may be adjusted with approval from the SSH Executive Committee.

a) Final Day of Open Elections – September 30
b) 4 months prior – June 1
   i. Nominations Committee Chair identified
   ii. Call for interest to Section members to serve on Nominations Committee (must be open for a minimum of 14 days)
c) 3 months prior – July 1
   i. Deadline for the appointments to the Nominations Committee
   ii. Nominations Committee for Section convenes first meeting
d) 2.5 months prior – July 15
   i. Open positions and Call for nominations posted on SimConnect (call for interest must be open for a minimum of 30 days)
e) 1.5 months prior – August 15
   i. Deadline for Call for nominations
   ii. Nomination Committee reviews nominations
f) 1 month prior – September 1
   i. Nomination Committee determines final slate of candidates to be presented for election
Section Nominations and Elections

ii. Nominations Committee Chair sends final slate of candidates to SSH Section Staff Liaison to ready for election process

g) 0.5 month prior – September 15
   i. Slated candidates biographies, position statements, and COI disclosure posted to Section specific SimConnect group and sent to all Section members with voting instructions
   ii. Online voting to open and remain open for a minimum of 14 days. Notice will be sent to all Section members when balloting is opened and will include the final day to vote which will not be less than 14 days from the open of voting

h) September 30 – Voting closes
i) Post Close of Voting – by October 15
   i. SSH Section Staff Liaison will present results to Nominations Chair for review
   ii. Election results will be sent to SSH Executive Committee for ratification
   iii. SSH President notifies newly elected members and send announcement to the Section membership
1. Summary of Purpose
   1.1. To provide guidance to the organization on sale of discounted memberships to third parties.

2. Scope
   2.1. The Society for Simulation in Healthcare (SSH) appreciates organizations, corporations, and other third parties to sponsor or purchase memberships for individuals. SSH recognizes that this practice may be used for promotional purposes for the third-party organization’s products or goods. One example is a non-profit organization providing membership opportunities for its employees as part of an instructor training program. Another example is a profit-making organization providing a paid membership along with a product sale. This policy outlines the rules under which these third-party memberships will be entertained.

   2.2. The Internal Relations and Finance and Audit committees are responsible for oversight of this policy.

   2.3. The Board of Directors is responsible for providing approval of this policy.

3. Definitions
   3.1. None

4. Policy Details
   4.1. SSH will permit a third-party organization to purchase institutional (i.e., bulk) individual memberships at the current registration fee without restriction.

   4.2. SSH will permit a third-party organization to purchase institutional (i.e., bulk) individual memberships at a discounted price with the following stipulations:

   4.2.1. 10 members to 24 members: 10% discount per member rounded up to the nearest $5

   4.2.2. 25 members to 49 members: 15% discount per member rounded up to the nearest $5

   4.2.3. 50 members and above: 20% discount per member rounded up to the nearest $5

   4.2.4. SSH will provide a system of registration purchase codes (RPC) for the third-party to distribute to those individuals who will become
members. The SSH website registration system will accept valid RPC as a payment method.

4.2.5. The registrations must be completed on-line referring to each new member as if they were registering independently.

4.2.6. The membership dues must be paid by the third party in one lump sum within thirty (30) days after billing.

4.2.7. The third-party organization may not state, suggest, or imply that participation in this program constitutes a special relationship with SSH. The third-party organization may not state, suggest, or imply that participation in this program constitutes an endorsement of the organization’s products, services, or programs by SSH, its board of directors, or officers in any manner whatsoever.

4.2.8. Any promotion of the paid-membership program by the third-party organization must be approved in advance by SSH upon submission of the promotional material to the executive director at least one week prior to distribution. The secretary of SSH shall have final authority for approving material for distribution, display, or other promotion.

4.2.9. Any press releases, media statements, or other public announcements regarding the paid membership program must be approved in advance by SSH upon submission to the SSH Executive Director at least one week prior to release. The secretary of SSH shall have final authority for approving media announcements or statements.

5. Procedures for Ensuring Compliance

5.1. The SSH office will provide a mechanism for third-party organizations to purchase and process these memberships.

6. Appendices / Attachments

6.1. None
1. Summary of Purpose
   1.1. To provide guidelines for SSH Special Interest Groups. SSH Special Interest Groups are defined as an active group of SSH members with a common interest not currently served by the committee structure or section of the organization. The purpose of a Special Interest Group is to provide opportunities for SSH members to advance simulation in their area of interest, to increase opportunities for participation in SSH, to promote and advance the purposes and activities of SSH, and to identify educational opportunities for the Society’s conferences and events.

2. Scope
   2.1. This policy applies to all SSH Special Interest Groups.
   2.2. The Internal Relations Committee is responsible for oversight of this policy.
   2.3. The Board of Directors is responsible for providing approval of this policy.

3. Definitions
   3.1. None

4. Policy Details
   4.1. Special Interest Groups are structured groups of 30 or more members dedicated to advancing simulation in their area of interest and supporting the vision and mission of SSH. The Board of Directors approves transition from Affinity Group to Special Interest Group. The Special Interest Group will act in a way that is consistent with the policies of SSH.

5. Procedures for Ensuring Compliance
   5.1. Formation of a Special Interest Group
      5.1.1. A SIG must operate as an Affinity Group (AG) prior to applying for SIG status
      5.1.2. Any AG that has sustained membership of thirty (30) or more SSH members for two (2) years and has been active for at least two consecutive years can be considered for designation as a SIG of the Society.
      5.1.3. The majority of the Affinity Group Membership must vote in favor of applying for SIG status. The written request to apply for SIG status
must be submitted to the Internal Relations Committee at least 30 days prior to the Board of Directors meeting and should include:

5.1.3.1. when the group was formed;
5.1.3.2. the current number of group members;
5.1.3.3. the results of the vote to apply for SIG status;
5.1.3.4. the requested name of the SIG;
5.1.3.5. the proposed mission of the SIG;
5.1.3.6. the proposed chair and vice chair of the SIG;
how the SIG will support the mission of SSH.

5.1.4. The Internal Relations Committee will review the request and submit a formal motion for approval to the Board of Directors.

5.2. Dissolution or re-activation of a Special Interest Group

5.2.1. A Special Interest Group may be declared inactive or dissolved whenever the SSH Board of Directors determines that there is insufficient interest to continue.

5.2.2. A change from inactive status to active status will require an application as in the case of the formation of a new Affinity Group.

5.3. Leadership

5.3.1. Each Special Interest Group shall elect a Chair and Vice-Chair subject to approval by the SSH Executive Committee.

5.3.2. The Chair and Vice-Chair will serve terms of two (2) years. Upon approval by the Executive Committee, the Chair and Vice-Chair may serve an additional 2-year term.

5.4. Responsibilities of a Special Interest Group

5.4.1. The SIG shall report to the Internal Relations Committee. The SIG shall develop its own goals, subject to approval by the Internal Relations Committee.

5.4.2. SIGs will create measurable goals annually and that are consistent with the goals and objectives of SSH or deliverables as described by the Internal Relations Committee.

5.4.3. SIGs shall undertake activities in support of the approved goals.

5.4.4. To perform SIG functions, the SIG must provide information to the Internal Relations Committee on activities for the upcoming fiscal year that require budgetary oversight.

5.4.5. The SIG Chair will report no less than annually to the Internal Relations Committee on the activities of the group.
### POLICY TITLE
Special Interest Group (SIG) Policy

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5.4.6. The chair or vice-chair of the SIG or their designee will attend the SIG Chairs meeting on a regular basis.

5.4.7. SIGs are required to hold at least one face-to-face meeting at the International Meeting on Simulation in Healthcare and have minutes from those meetings. Minutes from the face-to-face meeting shall be submitted to Internal Relations Committee within ten (10) days after the meeting has ended.

5.4.8. Other conference calls and meetings will occur at the discretion of the SIG leadership.

5.4.9. In collaboration with the communications manager, the SIG shall keep current its page(s) on the SSH website.

5.4.10. The Section is not empowered to speak on behalf of SSH nor to negotiate agreements with other organizations.

5.4.11. Materials to be distributed outside the SIG (documents, articles, surveys, etc.) must be approved by the Membership Committee prior to distribution.

5.4.12. Opinions or views of the SIG may not be representative of the organization.

5.5. Benefits of a Special Interest Group
5.5.1. SIGs may use SSH list-serv to communicate with its members.
5.5.2. Each SIG will be provided space on the SSH website to publicize its activities.
5.5.3. Each SIG will receive a mailing list of its members with monthly updates of new and expired members of the group.
5.5.4. SIGs may publish approved announcements in Simulation Spotlight.
5.5.5. A SIG may request assistance from SSH staff in preparation and coordination of SIG meetings.
5.5.6. A SIG may award prizes for best abstracts in its area of interest at SSH meetings.
5.5.7. A SIG is eligible to preview accepted IMSH content and recommend courses to its members.
5.5.8. A SIG is eligible to bestow a maximum of two (2) service awards on its outstanding members.

5.6. Membership
5.6.1. Membership in a SIG is limited to members of the Society. Nonmembers interested in joining the SIG must first join the SSH.
5.6.2. An additional fee may be associated with the SIG meeting.
5.6.3. Any SSH member whose membership has lapsed is automatically removed from the SIG as a member.

5.7. Merger of two or more Special Interest Groups
5.7.1. Two or more special interest groups can request to merge and become one group. Members of each interest group must vote to reach a consensus to merge with another group. The newly merged group will take the place of the groups which preceded the merger.
5.7.2. The formal application must be submitted at least 90 days prior to the International Meeting on Simulation in Healthcare.
5.7.3. The Internal Relations Committee will review the request and submit a formal motion to the Board of Directors for approval of the merger.

5.8. Transition to Section Status
5.8.1. Any Special Interest Group that has reached a membership of one hundred (100) or more SSH members for two (2) years, has been active for at least two (2) consecutive years, and has consistently fulfilled its responsibilities can be considered for designation as a Section of the Society.
5.8.2. The majority of the Special Interest Group membership must vote in favor of applying for Section status.
5.8.3. The Special Interest Group will make a request in writing to the Board of Directors to become a Section. The formal application must be submitted at least 30 days prior to the Board of Directors meeting.
5.8.4. Special Interest Groups should review Section policies and procedures prior to applying for Section Status.

5.9. SSH Logo
5.9.1. The SSH Logo may be used only in accordance with the SSH Brand Guidelines and may not be altered in any way.
5.9.2. The SSH Logo is to be used on all widely distributed materials. Sample materials must be reviewed and approved prior to distribution.

6. Appendices / Attachments
6.1. None
1. Summary of Purpose
   1.1. To provide guidelines for SSH Sections. The purpose of a Section is to provide opportunities for the members of SSH to advance simulation in their area of interest, to increase opportunities for participation and leadership in SSH, to promote and advance the purposes and activities of SSH and to identify educational opportunities for the Society’s conferences and events.

2. Scope
   2.1. This policy applies to all SSH Sections.
   2.2. The Internal Relations Committee is responsible for oversight of this policy.
   2.3. The Board of Directors is responsible for providing approval of this policy.

3. Definitions
   3.1. None

4. Policy Details
   4.1. SSH Sections are structured groups of 100 or more SSH members dedicated to advance simulation in their area of interest and support the vision and mission of the Society. The Section will act in a way that is consistent with the policies of SSH.

5. Procedures for Ensuring Compliance
   5.1. Formation of a Section:
      5.1.1. A Section must operate as a Special Interest Group (SIG) prior to applying for Section status.
      5.1.2. Any Special Interest Group that has sustained membership of one hundred (100) or more SSH members for two (2) years and has been active for at least two (2) consecutive years can be considered for designation as a Section of the Society.
      5.1.3. Members of the Special Interest Group must vote to reach a consensus to apply for Section status. The Special Interest Group will make a formal application in writing to the Board of Directors to become a Section. The formal application must be submitted at least 30 days prior to the Board of Directors meeting and should include:
         5.1.3.1. when the group was formed;
5.1.3.2. the current number of group members;
5.1.3.3. the results of the vote to apply for Section status;
5.1.3.4. the requested name of the Section;
5.1.3.5. the proposed mission of the Section;
5.1.3.6. the proposed chair and vice chair of the Section;
5.1.3.7. how the Section will support the mission of SSH.

5.2. Dissolution or re-activation of a Section
5.2.1. A Section may be declared inactive or dissolved whenever the SSH Board of Directors determines that there is insufficient interest to continue.
5.2.2. A change from inactive status to active status will require a petition as in the case of the formation of a new Section.

5.3. Leadership
5.3.1. Each Section shall elect a Chair and Vice-Chair subject to approval by the SSH Executive Committee.
5.3.2. The Chair and Vice-Chair will serve terms of two (2) years. Upon approval by the Executive Committee, the Chair and Vice-Chair may serve an additional 2-year term.

5.4. Responsibilities of a Section
5.4.1. The Section shall report to the SSH Board of Directors. The Section shall develop its goals, subject to approval by the Board of Directors.
5.4.2. Sections will create measurable goals annually that are consistent with the vision, mission, goals and objectives of SSH or deliverables as set by the Board of Directors.
5.4.3. Sections shall undertake activities in support of the approved goals.
5.4.4. To perform Section functions, the Section must provide information to the Board of Directors on activities for the upcoming fiscal year that require budgetary approval.
5.4.5. The Section Chair will report no less than annually to the Board of Directors on the activities of the Section.
5.4.6. The chair or vice-chair of the Section or their designee will attend the SIG Chairs meeting on a regular basis.
5.4.7. Sections are required to hold at least one face-to-face meeting at the International Meeting on Simulation in Healthcare. Minutes from the face-to-face meeting shall be submitted to the Board of Directors within ten (10) days after the meeting has ended.
5.4.8. Other conference calls and meetings will occur at the discretion of the Section leadership and minutes will be made available to the Board of Directors.

5.4.9. In collaboration with the communications manager, the Section shall keep current its page(s) on the SSH website.

5.4.10. Under the direction of the Board of Directors, Section Chairs constitute a Section committee which advises the Board of Directors. The Board shall determine the purpose and mandate of such a committee. The Section committee will meet at least once at the annual International Meeting on Simulation in Healthcare.

5.4.11. The Section is not empowered to speak on behalf of SSH nor to negotiate agreements with other organizations.

5.4.12. Materials for distribution outside the Section (documents, articles, surveys, etc.) must be approved by the SSH Executive Committee prior to distribution.

5.4.13. Sections will work with the Staff Liaison to coordinate society support for activities and initiatives.

5.5. Benefits of a Section

5.5.1. Sections may use SSH list-serv to communicate with its members.

5.5.2. Each Section will be provided space on the SSH website to publicize its activities.

5.5.3. Each Section will receive a monthly update of new and expired members of the group.

5.5.4. Sections may publish approved announcements in Simulation Spotlight.

5.5.5. A Section may request assistance from SSH staff in preparation and coordination of Section meetings.

5.5.6. A Section may award prizes for best abstracts in its area of interest at SSH meetings.

5.5.7. A Section is eligible to preview accepted IMSH content and recommend courses to its members.

5.5.8. A Section is eligible to bestow a maximum of two (2) service awards on its outstanding members.

5.5.9. Sections are also eligible to hold regional meetings and Section-specific meetings. Regional or Section-specific meetings must be reviewed by the Meetings Oversight Committee and a budget/business plan for the meeting must be approved by the Finance and Audit Committee. The Board of Directors has final
approval for regional and Section-specific meetings. The Society administration will provide infrastructure support as is feasible to Section meetings and conferences.

5.5.10. Sections may suggest Section-specific educational programs to be held at the International Meeting in Simulation in Healthcare, webinars, and other venues.

5.6. Membership
5.6.1. Members of the Section must be current members of SSH.
5.6.2. Nonmembers interested in joining the Section must first join SSH.
5.6.3. An additional fee may be charged for Section membership to support the infrastructure requirements of the Section.
5.6.4. Any SSH member whose membership has lapsed is automatically removed from the Section as a member.

5.7. SSH Logo
5.7.1. The SSH Logo may be used only in accordance with the SSH Brand Guidelines and may not be altered in any way.
5.7.2. The SSH Logo is to be used on all widely distributed materials. Sample materials must be reviewed and approved prior to distribution.

6. Appendices / Attachments
6.1. None
1. Summary of Purpose
   1.1. To provide guidelines for SSH Affinity Groups (AG). SSH Affinity Groups are groups of SSH members with special interests in a particular area of simulation that request to meet at the International Meeting on Simulation in Healthcare (IMSH) to network and collaborate formally. The purpose of an Affinity Group is to provide opportunities for individuals to advance simulation in their area of interest, to increase opportunities for participation in SSH, and to promote and advance the purposes and activities of SSH.

2. Scope
   2.1. This policy applies to all SSH Affinity Groups.
   2.2. The Internal Relations Committee is responsible for oversight of this policy.
   2.3. The Board of Directors is responsible for providing approval of this policy.

3. Definitions
   3.1. None

4. Policy Details
   4.1. Any member of the Society can request to form an Affinity Group. The Board of Directors approves designation as an SSH Affinity Group. When the Affinity Group has been active for at least two years, the group can request to be considered for designation as a Special Interest Group (SIG). There are no restrictions on the number of Affinity Groups or their areas of interest. The Membership Committee as a whole and its SIG Oversight Subcommittee in particular are responsible for the oversight of Affinity Groups. The affinity group will act in a way that is consistent with the policies of SSH.

5. Procedures for Ensuring Compliance
   5.1. Formation of an Affinity Group
      5.1.1. Any SSH Member or non-member may request to form an Affinity Group, provided they have documentation of at least twenty (20) SSH Members supporting the formation of the group. The application letter must be submitted to the Membership
Committee at least 90 days prior to the International Meeting on Simulation in Healthcare and should include:

5.1.1.1. the requested name of the Affinity Group;
5.1.1.2. the proposed mission of the Affinity Group
5.1.1.3. the names and signatures of at least twenty (20) SSH members interested in forming the affinity group;
5.1.1.4. the proposed chair and vice chair of the Affinity Group
5.1.1.5. how the Affinity Group will support the mission of SSH.

5.1.2. The Membership Committee will review the request and submit a formal motion to the Executive Committee for approval.

5.2. Dissolution or re-activation of an Affinity Group

5.2.1. An Affinity Group may be declared inactive or dissolved whenever the SSH Board of Directors determines that there is insufficient interest to continue.
5.2.2. A change from inactive status to active status will require an application as in the case of the formation of a new Affinity Group.

5.3. Leadership

5.3.1. Each affinity group shall elect a Chair and Vice-Chair, whom must be SSH members, subject to approval by the SSH Executive Committee.
5.3.2. The Chair and Vice-Chair will serve terms of two (2) years. Upon approval by the Executive Committee, the Chair and Vice-Chair may serve an additional 2-year term.

5.4. Responsibilities of an Affinity Group

5.4.1. The Affinity Group shall report to the Membership Committee. The Affinity Group shall develop its own goals, subject to approval by the Membership Committee.
5.4.2. Affinity Groups will create measurable goals annually that are consistent with the goals and objectives of SSH or deliverables as described by the Membership Committee.
5.4.3. Affinity Groups shall undertake activities in support of the approved goals.
5.4.4. The Affinity Group Chair will report no less than annually to the Membership Committee on the activities of the group.
5.4.5. The chair or vice-chair of the affinity group or their designee will attend the SIG Chairs meeting on a regular basis.
5.4.6. Affinity Groups are required to hold at least one face-to-face meeting at the International Meeting on Simulation in Healthcare and have minutes from those meetings. Minutes from the face-to-face meeting shall be submitted to Membership Committee within ten (10) days after the meeting has ended.

5.4.7. Other conference calls and meetings will occur at the discretion of the Affinity Group leadership.

5.4.8. In collaboration with the communications manager, the affinity group shall keep current its page(s) on the SSH website.

5.4.9. Opinions or views of the Affinity Group may not be representative of the organization.

5.4.10. The AG is not empowered to speak on behalf of SSH nor to negotiate agreements with other organizations.

5.4.11. Materials to be distributed outside the Affinity Groups (documents, articles, surveys, etc) must be approved by the membership committee prior to distribution.

5.4.12. Affinity Groups will not be eligible for administrative support from SSH until such time as the group becomes an active Special Interest Group.

5.5. Benefits of an Affinity Group

5.5.1. Affinity Groups may use SSH list-serv to communicate with its members.

5.5.2. Each Affinity Group will be provided space on the SSH website to publicize its activities.

5.5.3. Each Affinity Group will receive a mailing list of its members with monthly updates of new and expired members of the group.

5.5.4. Affinity Groups may publish approved announcements in Simulation Spotlight.

5.6. Membership

5.6.1. Membership in an Affinity Group is open to members and nonmembers. Nonmembers may not hold a leadership position within the affinity group.

5.6.2. An additional fee may be associated with the Affinity Group meeting.

5.7. Transition to Special Interest Group Status
5.7.1. Any Affinity Group with at least thirty (30) members that has been active for at least two (2) consecutive years and has consistently fulfilled its responsibilities can be considered for designation as an SSH Special Interest Group.

5.7.2. An exceptionally active Affinity Group with at least sixty (60) members that has consistently fulfilled its responsibilities can petition to the Board of Directors for a waiver of the two-year requirement.

5.7.3. The Affinity Group will make a formal application in writing to the Membership Committee to become a SIG.

5.7.4. After review and approval by the Membership Committee, the application and a motion to approve the SIG will be submitted to the Board of Directors. The formal application must be submitted to at least 30 days prior to the Board of Directors meeting.

5.7.5. Affinity Groups should review the SIG policies and procedures prior to applying for SIG status.

5.8. SSH Logo

5.8.1. The SSH Logo may not be altered in any way.

5.8.2. The SSH Logo is to be used on all widely distributed materials. Sample materials must be reviewed and approved prior to distribution.

5.8.3. Please refer to the SSH Brand Guidelines for additional details on SSH Logo and Branding.

6. Appendices / Attachments

6.1. See SSH Bylaws Article IX Section 1 and 2
1. Summary of Purpose
   1.1. To provide a structured approach to communicate with membership.
   1.2. To maintain the maximum number of active members within the Society.
   1.3. To notify members of upcoming expiration and encourage renewal of membership.
   1.4. To understand nonrenewal decisions and strategically plan to increase membership.
   1.5. To effectively communicate with members related to services provided by the SSH.

2. Scope
   2.1. The Internal Relations Committee is responsible for oversight of this policy.
   2.2. The Board of Directors is responsible for providing approval of this policy.

3. Definitions
   3.1. None

4. Policy Details
   4.1. Process of Expiration Notification for Non-Payment of Dues
       4.1.1. The Society’s membership renewals are on a 12-month basis from join date.
       4.1.2. The Membership Department will send bulk emails / invoices to those members who will be expiring due to non-payment as reminders at -60 days, -30 days, and +15 days of the expiration date.
       4.1.3. Members will be instructed to log on to the website, where they will receive a message that their membership will soon expire and have the opportunity to immediately pay the dues for renewal.
       4.1.4. Members that are delinquent will be suspended from the Social Networks, Journal and all other benefits until they have reinstated their membership.
       4.1.5. Once the member has been suspended, they will be sent a short online survey to help determine the reason for non-payment resulting in non-renewal.
       4.1.6. Any member indicating dissatisfaction with their membership will be contacted by the Membership Department to
encourage feedback related to that non-renewal and to provide due process for reinstatement.

4.1.7. The membership sub-committee will provide the Internal Relations Committee with a summary of the feedback.

4.1.8. The Membership Director will provide the Executive Director and Associate Executive Director with a monthly report containing membership statistics.

4.2. Privacy

4.2.1. The SSH Association maintains member databases that contain mailing, billing, and member profile information, as well as a record of each member's product purchases and registrations for conferences. The information in these databases is used by authorized SSH staff members to process orders; mail invoices, member benefits, renewal notices, and announcements; and respond to member inquiries. Member and non-member records are maintained indefinitely. Purchase, Continuing Education and registration databases may be retained for up to six years, or according to the current ACCME guidelines.

4.2.2. Personal information is stored in a relational database and standard security methods are used to protect it. We require confirmation of identity before releasing information back to the user for update over the Web.

4.2.3. Commercial information (such as credit card numbers) is obtained using our secure Web server through Authorize.net. We do not store complete credit card information on our machines.

4.3. Email

4.3.1. The SSH Association does not rent or sell email addresses. SSH may use email addresses to contact members to answer member questions or to acknowledge the receipt of membership applications and other orders, to send membership renewal notices, and to send occasional announcements about SSH events to those members who have not opted out of receiving such announcements. These announcements are short, straightforward messages which
contain pointers to online resources where members can explore the information more fully.

4.4. Postal Mail
4.4.1. SSH uses the postal addresses of its members to mail products and announcements from SSH and from its Corporate Supporters. The names and mailing addresses of members who have not opted out (see below) may be rented to outside organizations to send information about an upcoming event that have been carefully screened by authorized SSH staff for their suitability. SSH member names and mailing addresses are never sold.

4.5. Opt-Out
4.5.1. SSH purchases a secure email marketing system, “Constant Contact” (www.constantcontact.com) to send group emails to our membership. The Constant Contact site gives members the opportunity to opt out from receiving email communications or from having their name and address made available to anyone other than the SSH Association. When registering for a conference, registrants also have the option not to have their name included on the attendee list.

4.6. Change/Modify Member Information
4.6.1. The SSH site gives members the opportunity to change information previously provided. Members may change information on the website by following the “membership tab” followed by the “personal records” sub-navigation tab. They may also change their information by phoning the office at: 866-730-6127 and a staff member will gladly assist. Additionally, members may obtain assistance by sending an email to admin@ssih.org.
4.6.2. Note: Information is always updated whenever a new conference registration occurs and upon renewal of membership.

4.7. Links to Other Sites
4.7.1. The SSH web site contains links to external web sites. The Society for Simulation in Healthcare is not responsible for the privacy practices or the content of such web sites.

4.8. Communication Related to Services Provided

4.8.1. Members may contact SSH via the published phone number or any SSH email address (primarily admin@ssih.org) and the message will be received by a Customer Service Coordinator. The Coordinator will either address the concern immediately or route the message to the appropriate SSH staff person to address the question(s).

4.8.2. All SSH employees will attempt to help members via phone and / or email communication methods with 24 hours of receiving the notification.

4.8.3. Any issue that is not resolved by the SSH staff member will be routed to the Executive Director or Associate Executive Director.

5. Procedures for Ensuring Compliance

5.1. The Membership Department in conjunction with the Internal Relations Committee will ensure that the processes are adhered to based on the schedules detailed above.

6. Appendices / Attachments

6.1. None
1. Summary of Purpose
   1.1. SSH membership categories are broadly defined by the bylaws. The purpose of this policy is to specify eligibility and verification requirements for each category of membership and to provide guidance to the staff in providing membership services and processing dues.

2. Scope
   2.1. Provides requirements for SSH membership
   2.2. The Internal Relations Committee is responsible for oversight of this policy.
   2.3. The Board of Directors is responsible for providing approval of this policy.

3. Definitions
   3.1. For the purpose of dues, the Active Membership may be defined as:
       3.1.1. Full Membership which includes a mail and online subscription to the Journal for North American members and an online only subscription to overseas members.
       3.1.2. Life Membership which includes all benefits of Full Membership but exempt from annual dues.
       3.1.3. Retired Membership a mail and online subscription to the Journal for North American members and an online only subscription to overseas members.
       3.1.4. Student Membership which includes a mail and online subscription to the Journal for North American members and an online only subscription to overseas members.

4. Policy Details
   4.1. Life Membership is reserved for an individual member of the Society who has rendered outstanding service to the Society or to the field of simulation. To receive the designation of Life Member, the individual must receive an affirmative majority vote by the Society Board of Directors. Life membership is for the life of the individual unless revoked, is not transferable, and includes all benefits of membership.
       4.1.1. To be considered for Life Membership, individuals must fulfill the following criteria:
           4.1.1.1. Current SSH Membership
4.1.1.2. Long-term commitment to SSH as evidenced by at least 10 (ten) years of continuous membership and active participation in the Society.

4.1.1.3. Substantial contribution to the field of healthcare simulation.

4.2. Retired status is available to individuals who:
   4.2.1. have been Active Members of the Society in good standing for at least 10 (ten) years; and
   4.2.2. if still employed, work less than an average of 20 hours per week, calculated on an annual basis.
   4.2.3. Retired members receive a discount on their membership dues as set by the Board of Directors.
   4.2.4. Retired members shall be voting members.

4.3. Student Members are individuals who are pursuing academic studies, full or part-time, may join or renew at the student rate. Six credits or equivalent will be considered part-time.
   4.3.1. Student IMSH registration includes a membership.
   4.3.2. Student members receive a discount on their membership dues as set by the Board of Directors.
   4.3.3. Students must submit a current letter of enrollment or transcript from their institution at the time of dues payment or meeting registration.
   4.3.4. Student members shall be voting members.

4.4. Resident/Fellow Members are individuals who have been accepted into a residency or fellowship training program and remain enrolled therein.
   4.4.1. Resident/Fellow IMSH registration includes a membership.
   4.4.2. Student members receive a discount on their membership dues as set by the Board of Directors.
   4.4.3. Residents/Fellows must submit a current letter from the director of their training program at the time of dues payment or meeting registration.
   4.4.4. Resident/Fellow members shall be voting members.
4.5. Annual dues amounts for active members will be approved by the Board of Directors.
4.5.1. Members may join at any time throughout the year. 
4.5.2. Payment of dues may be made by check, credit card or wire.  
4.5.3. Receipt of payment must be recorded before members have access to member-only sites on the web or are eligible for member benefits.  

4.6. Active Member benefits include but are not limited to:  
4.6.1. Eligible for elected office  
4.6.2. Eligible for reduced or member rates at SSH sponsored conferences and meetings  
4.6.3. Discount on SSH Certification  
4.6.4. Subscription to the Society’s Journal based on dues structure  
4.6.4.1. On-line access to Journal will be following payment receipt  
4.6.4.2. Publisher will be notified of new memberships on a regular basis  
4.6.5. Subscription to Simulation Spotlight, e-news on healthcare simulation  
4.6.6. Free access to the webinars at the Live Learning Center  
4.6.7. Membership in Special Interest Groups and Sections  
4.6.8. Access to member-only sites on the Society web pages  
4.6.9. Access to SimConnect, an online communication platform  
4.6.10. Access to KeyIn, a review site for simulation products and services  

4.7. Honorary member benefits include all benefits of active members except voting privileges and eligibility for elected office  
4.7.1. Receipt of payment must be recorded before members have access to full member benefits  
4.7.2. Non-renewals will be removed from the on-line Journal access list and Sim Connect one month after their membership expires.  

5. Procedures for Ensuring Compliance  
5.1. Termination of Membership - Membership will be automatically terminated for non-payment of dues in accordance with Society’s policy.  
5.1.1. The membership of any member of the society may be terminated, following due process, by the Board of Directors two-
thirds (2/3) vote, upon the occurrence of any of the triggering events listed in the Bylaws.

5.1.2. Due process:
5.1.2.1. The Board of Directors must provide written notice of the intent to revoke membership from the individual within 10 business days of the vote, specifying the precise and specific issue(s) deemed to meet the threshold for removal.
5.1.2.2. The individual shall have the opportunity to respond with 10 business days of receipt of the notice of removal.
5.1.2.3. The Board of Directors shall consider all available information, and act in accordance with California statutes that govern the rights of a member.

6. Appendices / Attachments
6.1. None