

PARLIAMENTARY PROCEDURES . . . AT A GLANCE

TO DO THIS	YOU SAY THIS:	MAY YOU INTERRUPT A SPEAKER?	DO YOU NEED A SECOND?	IS IT DEBATABLE?	CAN IT BE AMENDED?	WHAT VOTE IS NEEDED?	CAN IT BE RECONSIDERED?
Introduce business	"I move that..."	No	Yes	Yes	Yes	Majority	Yes
Amend a motion	"I move to amend the motion by..."	No	Yes	Yes ³	Yes	Majority	Yes
Withdraw a motion	"I move to withdraw..."	No	No	No	No	Majority	Yes
End debate and amendments	"I move the previous question"	No	Yes	No	No	2/3	No ¹
Give closer study of something	"I move to refer the matter to Committee..."	No	Yes	Yes	Yes	Majority	Yes ²
Postpone discussion for a certain time	"I move to postpone the discussion until..."	No	Yes	Yes	Yes	Majority	Yes
Temporarily suspend consideration of an issue	"I move to table the motion"	No	Yes	No	No	Majority	No
Protest breach of rules or conduct	"I rise to a point of order"	Yes	No	No	No	No Vote ⁴	No
Request information	"Point of information"	Yes	No	No	No	No Vote	No
Complain about heat, noise, etc.	"I rise to a question of privilege"	Yes	No	No	No	No Vote	No (usually)
Verify a voice vote by show of hands	"I call for a division" or "Division"	Yes	No	No	No	No Vote	No
Take up a matter previously tabled	"I move to take from the table..."	No	Yes	No	No	Majority	No
Suspend rules temporarily	"I move to suspend the rules so that..."	No	Yes	No	No	2/3	No
Call an intermission	"I move that we recess for..."	No	Yes	No	Yes	Majority	No
Adjourn meeting	"I move that we adjourn"	No	Yes	No	No	Majority	No
Notes: 1. Unless vote on question is not yet taken. 2. Unless the Committee has already taken up the subject. 3. Only if the motion to be amended is debatable.							

Executive Session:

- a. Executive session shall be an important mechanism for conducting confidential business of the Board of Directors' meetings,
- b. Executive sessions of the Board of Directors' shall be held in strict accordance with the NCSRC Bylaws and Robert's Rules of Order.
- c. All items discussed in executive session shall be held in strict confidence by all who are in attendance and may not be divulged to individuals other than the Board.
- d. The Board of Directors shall review a member of the board who is suspected of violating this rule in accordance with due process.
- e. A member of the Board found to be in violation of this rule shall be subject to disciplinary action up to and including removal from office.
- f. The Board shall file a complaint with the Judicial Committee regarding such member found in violation of this rule.
- g. Any executive session information that is germane to the effective functioning of the Board of Directors shall be disseminated to all board members in the most timely fashion possible (e.g., Executive, budget, items from the Judicial Committee and special committees' business and proposed documents).

EXECUTIVE SECRETARY – POSITION & JOB DESCRIPTION

The administrative and financial services will include:

- Central office services for membership and routine secretarial assistance
- Word processing and distribution of all society correspondence
- Forwarding of correspondence to board members as needed and requested
- Word processing and distribution of the association's Bylaws & Standing Rules
- Word processing and distribution of board minutes
- Preparing and distributing board of directors' meeting packets
- Provide secretarial assistance to all committee chairs as requested
- Maintaining a database that includes membership, board of directors, exhibitors, etc., with sorting capabilities
- Distributing new member packets and welcome letters
- Maintaining accurate records of educational program attendees
- Maintenance of all records and reports
- Provide confidential, secured storage space of society's files and records

Newsletter Services include:

- Provide type-setting of articles and layout (including advertisements) of four newsletters
- Promote corporate advertisements and maintain advertising records (invoicing, renewals, etc.)
- Promote corporate sponsorship programs (usually in conjunction with annual meeting)

Financial services* will include:

- Accounts Payable and Accounts Receivable
 - All deposits and payments are made through the central office
 - All checks are written, invoices attached with addressed envelopes and sent to the Treasurer for review and signature. Treasurer then forwards checks for signature to President. President signs and mails bill from his/her office.
 - All financial records are maintained at the central office
- Monthly bank reconciliation's (Bank statements reviewed at board meetings by Treasurer and signed)
- Detailed quarterly activity statement (Included in the Board of Directors' packets issued before board meetings to the Finance Committee only)
- Quarterly financial statement (Included in the Board of Directors' packets issued before board meetings to all board members)
- Year-end financial statement
- Budget preparation

*These items are prepared by the central office for the Treasurer and Finance Committee. It is the responsibility of the central office to provide accurate and current records. It is the responsibility of the Treasurer and Finance Committee to report these findings to the board and membership.

The Meeting Services will include:

- Attendance of central office Account Executive at planning sessions, as needed
- Contract negotiations with hotel and/or convention centers
- Processing of registration through the central office and maintenance of registrant database
- Layout, printing and distribution of registration materials and packets, meeting brochure and registrant confirmations
- Contact of speakers and preparation of program agenda as directed by the planning committee
- Arrangement of required meeting space, room setup and equipment requirements
- Printing of name tags for meeting attendees
- Set-up and arrangements between hotel and commercial exhibitors and speakers
- Arrangement of food and beverage service as specified by planning committee
- Arrangement of social activities for the meeting
- Central office services for questions regarding registration and meeting agenda
- Preparation of syllabus for printer, if required (speakers provide word processed handouts)
- Preparation and display of signs as needed
- Two central office staff on-site for registration and communication services for meeting attendees
- On-site liaison between hotel and association
- Contacts with commercial vendors (exhibitors) and arrangement of space and electrical requirements

OFFICIAL NCSRC, INC EXPENSE VOUCHER

DATE: _____

COMMITTEE: _____

EXPENSE PURPOSE: _____

ITEMIZATION:	_____ Mileage (_____ miles @ Standard IRS Rate)	\$ _____
*	_____ Air Fare (_____)	\$ _____
*	_____ Lodging (_____/day + \$____ tax X _____)	\$ _____
	_____ Meals (_____)	\$ _____
	_____ Misc. (_____)	\$ _____

*Receipts Required; Others as appropriate

TOTAL \$ _____

_____ REIMBURSEMENT REQUEST (OR) _____ TRAVEL ADVANCE REQUEST

The expenses incurred in the discharge of official business of the NCSRC, Inc. from (date) _____ to (date) _____ as itemized above in the sum of

_____ dollars \$ _____

LESS: Travel advance received: (date _____) \$ _____

(SUBMIT REFUND WITH VOUCHER) BALANCE DUE REQUESTOR: \$ _____

REFUND DUE NCSRC: \$ _____

SUBMIT TO: (Name & Address) _____

Above expenses are just and true in all respects. _____
(Signature of Requester)

THIS SECTION FOR OFFICIAL USE ONLY

APPROVED BY:

_____	_____	_____
Committee Chairperson	Date	LINE ITEM# _____
_____	_____	
Treasurer	Date	CHECKS _____
_____	_____	
President	Date	

COMMENTS: _____

* LODGING paid at 1/2 hotel rate not to exceed \$40.00 (requires a minimum 1 way travel distance of 150 miles or more).

NOMINATION AND SELECTION PROCEDURE FOR LIFE AND HONORARY MEMBERS

1. Nomination(s) must be substantiated in writing by an NCSRC active member.
2. Recommendation(s) shall be submitted as a formal resolution to the President of the NCSRC.
3. At least two letters of recommendation from active NCSRC members must accompany the formal resolution. (Two members in addition to the sponsoring member).
4. The President will present any submitted recommendations to the NCSRC Executive Committee for consideration. Annually, the NCSRC Executive Committee may select one candidate for Life Membership or one candidate for Honorary Membership for submission to the Board of Directors for approval. Selection will be made by affirmative majority vote.
5. The President will present any recommendations approved by the Executive Committee to the NCSRC Board of Directors for consideration. Selection will be made by affirmative majority vote.
6. Any nominations submitted but not selected by the Executive Committee and approved by the Board of Directors will be returned to the original sponsor for future consideration.
7. Nominations should be submitted in a manner such that the review and approval process would be completed not later than July of each calendar year.
8. Life and Honorary Membership awards will be presented at the NCSRC annual symposium.

EDUCATION PROGRAM ENDORSEMENT POLICY

1. Request for an Educational Program endorsement from the NCSRC should be made ~~to~~ using the NCSRC Educational Program Endorsement FORM (see attached request form). These forms may be obtained by calling or writing the NCSRC.
2. Applications should be submitted 45 to 60 days in advance of the meeting.
3. Upon receipt of the completed endorsement application, the Program and/or Education Committee will review the request and make a recommendation to the Board of Directors or, because of time constraints, a recommendation may be made to the President of the NCSRC for tentative approval until a formal recommendation may be made to the Board of Directors. Notification of approval or disapproval of endorsement will be made, in writing, by the President of the NCSRC and the Program and/or Education Committee.
4. Programs earning CEU's from the AARC will be given priority.

North Carolina Society for Respiratory Care



EDUCATIONAL PROGRAM ENDORSEMENT REQUEST FORM

Please type or print.

PROGRAM INFORMATION:

A. Program Title _____

B. Sponsoring Organization(s) _____

C. Program Coordinator/Chairman

Name _____ Phone (____) _____

Mailing Address _____

City _____ State _____ Zip _____

D. Dates and Locations

<u>Date Starting</u>	<u>Date Ending</u>	<u>City</u>	<u>State</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

(attach if additional dates and locations)

E. Intent of the program? (Check those applicable)

Review/refresher _____ New devices/techniques and skills _____
 Current issues _____ Other _____

F. Target audience (Check those applicable)

Respiratory Therapist/Technician ___ Physician ___ Educator ___
 Supervisor/Manager ___ Nursing practitioner ___
 Other Allied Health Practitioner ___ Other _____

G. Teaching methods (Check those applicable)

Lecture ___ Media ___ Workshop ___ Clinical ___ Laboratory ___
 Other _____

INSTALLATION OF OFFICERS

SUMMONS / ACKNOWLEDGEMENT:

I summon before you the elected officers, directors and delegate or alternate delegate elected by the membership.

PREPARATION: Raise your right hand and repeat after me the Oath of Office.

OATH OF OFFICE

I pledge my support
to the Society Bylaws,
goals and Standing Rules
promoting professional growth and recognition.

DECLARATION: As (President or Past President) I declare you elected representatives of the NCSRC.

CONGRATULATIONS! YOU MAY NOW BE SEATED.

INSTALLATION OF THE SOCIETY PRESIDENT

SUMMONS: I summon before you your elected President.

ACKNOWLEDGEMENT: You have been elected by the membership of the NCSRC as their leader and representative of their profession.

PREPARATION: Raise your right hand and repeat after me the Oath of Office.

OATH OF OFFICE

As President of the NCSRC, Inc.
I shall uphold the Society Bylaws and Standing Rules
I shall represent the best interest of the Society
and set goals promoting professional growth, recognition and stability.

DECLARATION: As (President or Past President) I declare you are the elected President of the NCSRC.

CALL FOR NOMINATIONS

The North Carolina Society for Respiratory Care, Inc. Nomination Committee requests your support in developing the list of candidates for consideration for the upcoming election.

Please review the CRITERIA for CANDIDATE NOMINATION and the OFFICIAL NOMINATION FORM prior to submitting your recommendation.

Your prompt response will enable the Nomination Committee to develop a slate of candidates for presentation to the Board of Directors for approval at their scheduled meeting in the spring.

Candidates eligible for nomination (based on established criteria) will receive a Biographical Sketch Form and Candidate for Nomination Form the second week of March.

These forms must be typed and returned *electronically* to the Nomination Committee Chairperson no later than the stated deadline.

Thank you.

NOMINATION COMMITTEE CHAIRPERSON

CRITERIA FOR CANDIDATE NOMINATION

PRESIDENT-ELECT:

1. Shall have been an active member of the Society for at least the last three (3) consecutive years prior to nomination.
2. Shall have served at least one term as an officer and at least one year on the Board of Directors.

**VICE PRESIDENT,
SECRETARY and
TREASURER:**

1. Shall have been an active member of the Society for at least the last two (2) consecutive years prior to nomination.
2. Shall have served at least one (1) year on the Board of Directors.

BOARD OF DIRECTORS:

1. Shall have been an active member of the Society for at least the last preceding year prior to nomination.
2. Mentees who have been active with the Society and fulfilled their mentee responsibilities and requirements may be eligible.

DELEGATE:

1. Shall have been an active member of the Society for at least the last three (3) consecutive years prior to nomination.
2. Shall have served at least three (3) years combined as follows:

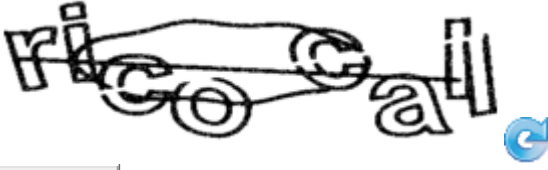
At least one term as an Officer and two years on the Board of Directors.... or previously served as Delegate.

Official Nomination Form

jcsaye@novanth	http://www.ncsr	Official Nominatic	name	biztools
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As an Active Member or Active Life member of the NCSRC, Inc., I have reviewed the [CRITERIA FOR CANDIDATE NOMINATION](#) and submit the members listed below for consideration as candidates. I understand that I do not need their permission and that their membership status and eligibility shall be verified in accordance with established criteria.

<u>CATEGORY</u>	<u>NAME OF MEMBER and MAILING ADDRESS</u>
President-Elect:	<input type="text"/>
Vice President:	<input type="text"/>
Secretary:	<input type="text"/>
Treasurer:	<input type="text"/>
Board of Directors:	<input type="text"/>

Delegate:	<input type="text"/>
Your Name:	<input type="text"/>
AARC Membership #	<input type="text"/>
	 <input type="text"/> <input type="text"/> <input type="submit" value="Submit Form"/>
<p>Once submitted this form will be routed to the Nominations Committee Chairperson (Name and email). Thank you in advance for your nominations, we will announce the elections at the NCSRC annual meeting in September. (date) IS DEADLINE FOR SUBMISSIONS.</p>	

Note: Each year, this form will be adjusted by the Nominations Committee to reflect the current vacant positions for nominations.

NOTICE OF NOMINATION FOR NCSRC ELECTIONS

Congratulations! Your name has been submitted as a CANDIDATE for nomination in the category listed below. Please indicate your desire to accept/decline consideration for this position with the NCSRC. If more than one position is listed, you may only accept one position for candidacy.

NAME: _____ **was nominated for the following positions:**

<u>Category</u>	<u>Accept</u>	<u>Decline</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

_____ I am an Active Member or Active Life member of the NCSRC, Inc.

(Initials)

_____ AARC Member Number

I understand that no individual's name can appear in more than one category on the official ballot and if nominated for multiple positions, I have accepted only one position for candidacy.

Please send completed Candidate for Nomination Form and Biographical sketch by **email** (see information below) to the NCSRC, Inc. by **April 15, 2011**.

By signing this form, you are stating that all information provided is accurate and true.

Signature (please type name in above)

Date

***Note: by typing your name in above you are electronically signing this form.**

<p>Email: (Name of Committee Chair)</p> <p>Nominations Committee Chair</p> <p>NCSRC, Inc.</p> <p>(Email Address of Committee Chair)</p>

<p align="center"><u>Nominations</u></p> <p align="center"><u>Committee Use Only</u></p> <p>Valid: _____yes _____no</p> <p>Selected: _____yes _____no</p>

Nominee Biographical Sketch Form

This form must be typed and returned with the candidate for nomination form.

Name	
Credentials	
Employer	
Title	
Respiratory Therapy Program (College)	
Graduation Year	
Other Education (Degree, Institution, Year)	
AARC Number (required)	
NCSRC Member Since (required)	
NCSRC Involvement (Officer, Board of Director, Committee Member, etc.) ** Please include years	
Other information	

Signature (type name in above) Date

***Note: by typing your name in above you are electronically signing this form.**

Please type all necessary information in the table above. Return by _____ to Nominations Committee Chairperson, (email here).

This form must be returned electronically.

NCSRC Standing Rules

ATTACHMENT M



Social Media Policy

The North Carolina Society for Respiratory Care (NCSRC) is pleased to provide a forum for sharing healthcare related topics and interacting with other respiratory care professionals. The viewpoints, opinions and actions expressed in comments are those of the individuals themselves, and may not reflect the NCSRC's policies or positions.

Our goal is to provide an online community where people with all kinds of views, theories, and concerns can express themselves, can share information, and can interact with one another.

We encourage our community to share content with us such as photos and stories. Anyone sharing this user generated content has the right to do so and has obtained permission of the photographed individuals. Please do not post photos you do not have permission to post, including photos of children without the permission of a parent or guardian.

Be Respectful. It is okay to disagree with others but belittling or insulting individuals will not be tolerated. Comments will be removed that use obscenities, personal insults, ethnic slurs or other disparaging language.

Keep Your Comments on Topic. The NCSRC's focus for this site is about respiratory care. The NCSRC may edit or remove inappropriate or off-topic comments at any time.

Protect Your Privacy. Comments are visible to the general public. Protect your privacy and don't give out personal information such as email addresses, telephone numbers or street addresses. Doing so may make you susceptible to spam and unauthorized communication. The NCSRC will not verify personal information posted by others.

Links to Other Web Sites. The NCSRC is not responsible for the content of any linked Web site, or any link contained in a linked Web site, or any changes or updates to such Web sites. The inclusion of any link does not imply endorsement by the NCSRC of that Web site. In addition, please be aware that NCSRC is not responsible for the privacy practices of such other Web sites. The NCSRC encourages you to read the privacy statements of every Web site that requests personal information from you.

The Bottom Line. The NCSRC reserves the right to delete any comments at any time. Users who persist in violating these guidelines may be barred from posting to this site.