

SNIS PSO Governance Policies

ARTICLE I. Name

The organization shall be known as the Society of NeuroInterventional Surgery Patient Safety Organization, hereinafter referred to as the “SNIS PSO.”

ARTICLE II. Purpose

The purpose of the SNIS PSO is to improve the quality, safety, effectiveness and cost of neurovascular healthcare by collecting, analyzing and exchanging information on outcomes of various neurovascular and related therapies and procedures.

The SNIS PSO is a Patient Safety Organization, as defined by the Patient Safety and Quality Improvement Act of 2005 (Public Law 109-41), implemented to protect the confidentiality of all data and resulting patient safety work product. The SNIS PSO engages in patient safety activities focused on neurovascular and related therapies, including, but not limited to:

- (i) efforts to improve patient safety and the quality of health care delivery;
- (ii) the creation and analysis of patient safety work product (“PSWP”);
- (iii) the development and dissemination of information with respect to improving patient safety and quality of care, such as recommendations, protocols, or information regarding best practices;
- (iv) the utilization of PSWP for the purposes of encouraging a culture of safety and quality, and of providing feedback and assistance to effectively minimize patient risk and improve outcomes;
- (v) activities related to the operation of a patient safety evaluation system (“PSES”) and to the provision of feedback to participants in a PSES; and
- (vi) compilation of information regarding patients undergoing certain neurovascular procedures, preparation of anonymous comparisons and other quality reports.

ARTICLE III. Participation

Hospitals, physicians or other practice entities contract with the SNIS PSO to participate in the quality improvement activities protected under the Patient Safety and Quality Improvement Act. The form of the contract between SNIS PSO and the practice entities must be approved by the SNIS PSO Governing Council, including the costs for participation. The contract must affirm the practice entities’ adherence to the SNIS PSO policies and procedures. See Exhibit A.

ARTICLE IV. Governing Council

The Governing Council conducts the business of the PSO and makes all decisions on behalf of the PSO, including oversight of budgets, contracts, policies and procedures, publications, relationships with outside parties, and the general direction of the organization. With the Medical Director and the Administrative Director, the Governing Council shall assure compliance with federal regulations governing PSOs.

The decisions of the Governing Council are subject to the approval by the Board of Directors of the Society of NeuroInterventional Surgery (SNIS) for the following: adoption of an annual budget, authorization of major changes in the purpose or operations of the SNIS PSO or any other action of the Governing Council identified by the chair of the Governing Council as involving a significant legal issue. No action of the Governing Council will respect to any such matter shall be effective and binding until approval by the SNIS Board of Directors has been obtained.

The Governing Council consists of six voting members, the chair and vice-chair and four representatives from each of the disease processes represented in the registry (Carotid Stenting, Aneurysm, Stroke and AVM & Other); all of whom are appointed by the Society of NeuroInterventional Surgery Board of Directors. The SNIS PSO Medical Director (described below) shall be an ex officio non-voting member of the Governing Council.

The Governing Council may meet in person or, by conference call. Meetings may be called by the chair, or at the request of any other two members of the Governing Council.

The duration of the term for Governing Council members is at the discretion of the SNIS Board of Directors. In the event of a vacancy in the Governing Council, the remaining members of the Council may exercise the powers of the full Council until the vacancy is filled.

A quorum of the Governing Council consists of at least half the Governing Council members at the time of the vote. A majority vote of the members present at the meeting at which a quorum exists is required to pass resolutions and take formal actions. The Governing Council may take action outside of a meeting via email or other electronic means as long as the vote on such actions is unanimous. Minutes or summaries of the Governing Council meetings shall be distributed electronically to all Governing Council members and the SNIS Board of Directors.

ARTICLE V. Officers

The officers of the SNIS PSO Governing Council shall consist of chair and vice-chair.

The chair and vice-chair of the Governing Council shall be appointed by the SNIS Board of Directors. The chair shall preside at all meetings of the Governing Council and shall, in general, perform all duties customarily incident to the position of chair and such other duties as may be prescribed from time to time by the SNIS Board of Directors or the Governing Council. The chair shall report regularly to the SNIS Board of Directors.

The vice-chair shall assume the duties of the chair when the latter is not available and shall perform such other duties assigned by the SNIS Board of Directors, the Governing Council, or the chair.

ARTICLE VI. Committees

The Governing Council may from time to time establish such committees as it deems advisable. Such committees shall consist of such number of persons, and shall have such powers, as designated by the Governing Council. The SNIS PSO standing committees are the SNIS PSO Quality Committee and the Research and Publications Committee.

SNIS PSO Quality Committee – The role of the SNIS PSO Quality Committee is to improve patient safety and the quality of neurovascular healthcare delivery as directed by the Governing Council. This includes the creation and analysis of patient safety work product (“PSWP”); the development and dissemination of information with respect to improving patient safety, such as recommendations, protocols, or information regarding best practices; and the utilization of PSWP for the purposes of encouraging a culture of safety and of providing feedback and assistance to effectively minimize patient risk. The Quality Committee will design and implement appropriate data collection instruments, analyze submitted data, develop risk-adjustment algorithms, and prepare benchmark reports (PSWP) for SNIS PSO members.

Research and Publications Committee – The Research and Publications (R&P) Committee shall act in good faith as a panel of scientific and medical experts to facilitate, encourage, and coordinate dissemination of knowledge derived through research using the SNIS PSO and to support free and open scientific and medical discourse, with due regard for the scientific merit of each proposed publication. Authorship and other such matters regarding publication shall be established in accordance with the Uniform Requirements for Manuscripts Submitted to Biomedical Journals of the International Committee of Medical Journal Editors (<http://www.icmje.org/>). The R&P Committee will develop procedures for proposing, evaluating, and approving publications, subject to approval by the Governing Council.

ARTICLE VII. Staff

The SNIS PSO shall engage a Medical Director to provide clinical and scientific expertise and to manage the work of the PSO. The Medical Director, acting in coordination and consultation with the SNIS Executive Director, shall engage such additional staff for the PSO as are needed to fulfill the organizational and analytical needs of the PSO, subject to budget approval by the SNIS PSO Governing Council.

The Medical Director shall be an ex officio, non-voting member of the Governing Council and an ex officio member of the SNIS PSO Quality Committee.

The Society of NeuroInterventional Surgery staff shall provide administrative support for the PSO, including the Governing Council.

ARTICLE VIII. Indemnification

To the full extent permitted by, and in accordance with the procedure prescribed in the District of Columbia Nonprofit Act, the Society of NeuroInterventional Surgery shall indemnify any and all of the members of the Governing Council and any and all of the officers, staff, agents and

representatives of the SNIS PSO for certain expenses and other amounts paid in connection with legal proceedings in which any such persons become involved by reason of their serving in any such capacity for the SNIS PSO, except to the extent that such persons are found liable based on intentional, grossly negligent, or willful, reckless or wanton misconduct.

ARTICLE IX. Amendments

These governance policies may be amended by the Board of Directors of the Society of NeuroInterventional Surgery. Participating practice entities will be notified of changes in a timely manner.