



**THE CONSTITUTION OF THE BRITISH HEART RHYTHM SOCIETY  
APPROVED OCTOBER 2015**

1. The organisation known as Heart Rhythm UK, shall be re-designated the British Heart Rhythm Society (BHRHS). BHRHS is an organisation of health care professionals engaged in the diagnosis, management and research of heart rhythm disorders.
2. Its objective is to improve the health of patients with heart rhythm disorders through advancement of knowledge, education and practice in the field of cardiac rhythm management.
3. This objective shall be pursued by education provided at scientific meetings, by communication and discussion, lectures, education, training and other means. The fullest co-operation of other national and international cardiac rhythm management device and arrhythmia groups will be sought where practicable.
4. The constitution of the organisation shall only be changed at the Annual General Meeting (AGM) or, in exceptional circumstances, agreed by Council, by an on-line vote, providing in either situation, a majority of the ordinary members vote in favour of the change. The Secretary shall notify all ordinary members of the proposed change(s) at least one month before the AGM or as soon as practical before an on-line vote.
5. There shall be a President of the Organisation. A President Elect will be elected from the Ordinary Members of the Organisation one year prior to taking up post and will also serve on Council. The President will serve for a term of up to three years. The President will represent the Organisation at home and abroad and will preside over meetings of the Council. No member may be President for more than two terms.
6. The Organisation shall consist of Council, Ordinary and Extra-Ordinary Members. Ordinary Members shall be health care professionals actively engaged in the practice of cardiac device implantation and/or associated diagnostic and therapeutic electrophysiology techniques or in research in these and allied subjects. They may be an employee of a healthcare industry whose products relate to arrhythmia management. New Ordinary Member applications must be approved by Council.

7. A Member will cease to be an Ordinary Member on the occasion of the Annual General Meeting in the year of his/her retirement. He/she shall automatically become an Extra-Ordinary Member, providing that he/she has been a member of good standing for the preceding five years, unless he/she should elect to retire from the Organisation. Extra-Ordinary members continue membership with no annual fee.
8. Extra-Ordinary Members shall receive the notices, may attend the meetings of the Organisation, may take part in the proceedings but shall not be entitled to vote. They shall have no voice in the conduct of private business otherwise and will not be eligible to sit on Council. They will not be eligible to propose candidates for membership or for Council but will be entitled to reduced registration fees for scientific meetings.
9. Ordinary Members may propose candidates for positions on Council. Candidates, who may not be employees of a commercial organisation, must be proposed by two Ordinary Members of the Organisation. Their proposal accompanied by a statement of the candidates' professional status, appointments and published works, shall be sent to the Secretary three months before the AGM. An Ordinary Member may not propose or second him or herself for membership of Council. Each Council Member including the Officers shall serve for a period of three years and is eligible to apply for re-election for a second term of three years.
10. Current Council members whose term of office is due to expire at the next AGM should be reminded four months prior to the AGM that their position will expire and should they wish and are eligible to stand for re-election, they are asked to submit their nominations within the next month.
11. The ordinary membership of the Organisation shall be asked to vote by ballot. Each voting member will be entitled to vote for President Elect candidates and for ordinary Council members. Members will be given a period of at least one month during which to place their vote. Those names receiving the most votes shall take office at the next AGM.
12. An Annual General Meeting shall be held and if necessary, and for reasons agreed by Council, an Extraordinary General Meeting may be called by the Secretary, who, with one month's notice shall notify all Ordinary Members of the reason for the meeting. Additional meetings may be arranged, at the discretion of the Council.
13. The Council, with a majority vote and for good reason, may terminate the membership of any individual provided that the

individual concerned shall have the right to be heard by Council, accompanied by a colleague, before any final decision is made.

14. Visitors may, with advance notice and with the permission of an Officer, be introduced by Members, to meetings of the Organisation. They may make contributions and take part in discussions subject to the same rules as Members but will not be entitled to vote.
15. The business of the Organisation shall be conducted by a Council which shall arrange the programme of each meeting. The Council shall consist of a minimum of twelve elected Members and a maximum of eighteen elected Members, including the Officers (President, President Elect, Secretary and Treasurer). In order for a meeting to be quorate, a minimum of 6 elected members must be present. If a meeting is not quorate, no binding decisions can be made. Council members will be allocated to key areas of responsibility such as education, training, research, standards and audit. The President Elect will be elected by the membership as a whole with both existing Council members and ordinary members eligible to stand for election. Council composition will ensure adequate representation of the breadth of the specialty with members elected to represent the interests of interventional electrophysiology, device therapies, cardiac physiology and arrhythmia nurse specialists. It is anticipated that both the interest groups and the numbers of representatives of each group may change from time to time. The Council shall have the power to co-opt an additional number of non-commercial Council Members up to a maximum of six, for a time not exceeding twelve months, should any special reason require it. Council members will take up and demit their posts at the time of the AGM. The Council will agree its Terms of Reference, which it may amend subject to a majority vote of Council.
16. The posts of Secretary and Treasurer will be elected from current Council members. Council members may nominate themselves and they must be seconded by another Council member. If more than one member is nominated, a vote will take place with the person with the majority of votes being appointed to the role. The President will have the casting vote in the event of a tie.
17. A representative of the following organisations or their equivalents shall be invited onto the Council as observers:
  - The Arrhythmia Alliance
  - The Medicines and Healthcare products Regulatory Agency (MHRA)
  - The Association of British Healthcare Industries (ABHI)
  - The British Junior Cardiologists' Association (BJCA)
  - The Society of Cardiological Science and Technology (SCST)

Observers shall not vote at Council meetings.

18. The subscription shall be fixed by the Council and shall become payable on the 1st day of July. Failure to pay due subscriptions within one year shall be considered equivalent to resignation.
19. The Secretary shall summon all meetings and circulate the programme to Members at least one month before the meeting. The Secretary shall keep minutes of the proceedings of the Organisation.
20. The Treasurer shall be responsible for the accounts, collection of membership fees and the expenditure of the Organisation and will submit the Accounts to the Organisation at each Annual General Meeting as well as reporting on the financial position of the organisation at each Council Meeting.