

Current Perspective

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Choosing the Board of Trustees

How a medical society governs itself depends on a number of factors, including its culture, its governance structure, its bylaws, and its policies. A key element is the structure and selection process of its governing body—in the Academy’s case, the Board of Trustees.

Who is on the Academy’s Board, and how are they chosen? First, the Board includes its officers—President, President-Elect, and Past-President. They must be Fellows of the Academy, be free of any conflicts of interest, and possess the professional skills, experience, ethics, and reputation that will enable them to lead the Academy and have the trust and respect of the members. Unlike some societies where the President may serve multiple years, in our Academy the one-year term permits more to serve.

The Board is also composed of six Trustees-at-Large representing the general membership. Each serves a four-year nonrenewable term. Four additional ophthalmologists are Secretaries/Senior Secretaries with special positions of operational responsibility in Advocacy, Clinical Education, Ophthalmic Practice, or the Annual Meeting. They are elected for three-year terms, renewable once.

Candidates for all these positions are approved by the Nominating Committee, with care taken to ensure diversity of gender, race, ethnicity, geography, and practice type (see table). This committee functions independently of the current Board and takes its role very seriously. The candidates it suggests are then forwarded to the Board of Trustees for approval. Other names may be brought forth by petition from the general membership (a rare occurrence).

I am asked occasionally why the Academy does not have contested elections with multiple candidates for each position. First, in a contested election, as most candidates are unknown to the majority of members, they engage in electioneering or campaigning. As with other political elections,

this becomes expensive and contentious. (For some societies, campaigning for president costs over \$100,000.) The contest doesn’t necessarily ensure the best outcome, and it frequently turns negative. Second, by definition, it always results in a loser, and the resulting bad feelings can have long-lasting repercussions. It also doesn’t generate more member engagement in the election. Statistically, 12% to 15% of our members vote. The national average for contested elections in medical associations is 12%. The Academy membership voted to abandon contested elections in 1999.

With the merger of the American Academy of Ophthalmology and the American Association of Ophthalmology in 1981, two positions nominated by the Council were added to the Board—its Chair and Vice-Chair. They alternate coming from the State Section (from state societies) and from the Specialized Interest Section (largely composed of subspecialty societies). Each Council leader spends four years on the Board of Trustees—two as Vice-Chair of the Council and two as Chair of the Council.

The CEO and the *Ophthalmology* editor, both of whom must be free of conflicts of interest, and the Foundation Advisory Board Chair are also Board members.

Finally, the Academy has two other classes of trustee with limited voting rights. The Board includes two International Trustees, who must be members of the Academy and practice outside of the United States. These positions rotate from region to region. And there are up to three Public Trustees (generally not ophthalmologists) selected to bring unique and valuable perspectives to Board discussions. They currently include a health system CEO, an international businessman and philanthropist, and a health care economist.

Each year the Nominating Committee faces the identical challenge—choosing among a group of very qualified candidates. Those candidates ultimately dedicate substantial time

	Female	Caucasian	Black	Private Practice	Subspecialist
Academy U.S. Members	25%	57%	3%	83%	68%
Board of Trustees	30%	60%	15%	60%	63%

serving on a Board structured to represent an accomplished membership with diverse backgrounds and interests. And it is that Board heterogeneity that enriches the discussions and strengthens the organization.