**Governance Task Force Frequently Asked Questions**  
*as of 21 November 2018*

**What is governance?**

Governance is the structure and processes that organizations put in place to carry out their mission and achieve strategic priorities. This includes leadership development, the structure by which leaders interact (e.g. a Council or Board) and are selected, and how member volunteer workgroups are organized (or committees, task forces, etc.).

**Why are we conducting a governance review?**

- Our governance review was prompted by recommendations in the Leadership Development Task Force and the Strategic Plan 4 Task Force (SP4) Reports, which Council approved.
- Conducting a review provides the opportunity to ensure that we are organizing and selecting the leadership and member workforce in ways that support the unique needs of the society and facilitate strategic implementation of the society’s mission.
- The review process does not assume that the current system is broken. It simply asks whether we are doing things as effectively as we can and, if not, how we can address current shortcomings.
- One of the core values of SP4 is the richness of our diverse membership, and the principle of inclusivity. Thus, this review will examine our current governance through this lens, but also will devote the time needed for input from our diverse membership.

**What’s the timeline for the Governance Task Force review?**

- The Governance Task Force (GTF) was formed in the Spring of 2018 to review the current governance structure of the Endocrine Society.
- The Task Force met with Council in June and November and also had two in-person meetings in September and November.
- It is anticipated that the Task Force will provide recommendations for Council’s consideration in March 2019.
- The Task Force wishes to have robust input from the membership before finalizing its report.
I haven’t heard about this before, how will society members know what’s going on?

- Dr. Susan Mandel introduced the Governance Task Force (GTF) activities in her October 2018 President’s message in *Endocrine News*.
- In September 2018, we used webinars to informally share core concepts considered at the GTF meetings with key leaders, including past officers, past Council members, current Council, current committee members/Chairs, SP4 Retreat Participants, and Governance Workshop participants.
- This is the just the beginning of our discussion and outreach. To facilitate a robust discussion, we created https://www.endocrine.org/membership/gtf as a resource for all members. The site has a link to the webinar to see what has been discussed and also a link to provide feedback. **Please spread the word to your colleagues, so that we can hear from as many members as possible.**
- The GTF will reach out to members over the coming months to obtain more feedback and incorporate that feedback into its final recommendations.

It sounds like the task force made some decisions, why weren’t we consulted?

- No decisions have been made. Indeed, the GTF is an advisory and not decision-making body. Final decisions about any and all changes to society governance will be made by Council, as per the society’s bylaws.
- The discussions from meetings through September focused on ways to ensure that our leadership reflects the diversity of the society, and also possesses the attributes needed to work collaboratively to achieve the goals of SP4.
- The webinars were a first opportunity to share the work of the task force and provide members with some context and information about “governance” and why it is important for our society.
- We now need your input.

What’s wrong or broken with our current governance structure? It seems like everything is working.

- The premise of the charge was not based on the idea that the governance structure is broken. The recommendation to review the governance structure of the Endocrine Society was based on the priorities set forth by SP4.
- Our membership has become increasingly diverse over the last 15 years. SP4 emphasizes and values diversity and inclusion. Our current leadership is not fully reflective of our current membership. Thus, one of the goals of the GTF is to ensure that our leadership reflects the broad diversity of our membership.
- Though demographics of the society have changed and will change over time, it will remain critical to maintain representation of all constituent groups, whether through elections or a selection process.
- Members have raised concerns about our current method of ensuring member representation in our leaders. Some members are dissatisfied with the current
tripartite structure because it categorizes members using a single professional constituency: basic scientist, clinical investigator, or physician in practice. Currently, these designations are used to identify nominees for three of the eight Council seats, and the VP and President positions, which rotate among the three constituencies. In one recent survey, about 75% of respondents felt that a single constituency does not define them. Some members don’t feel like they are represented by any of the three existing categories and are therefore excluded from leadership positions. As an example, members who are primarily educators or administrators do not “fit” within the current tripartite categories. Additionally, other members pointed out that a single category does not represent all of their professional roles, which may include significant amounts of education, administration, clinical care and/or research. Because of these concerns, the GTF is exploring ways to expand beyond the current tripartite designations without abandoning representation of the current tripartite categories.

- As another example of lack of representation, non-US members comprise 40% of the society, but it remains very difficult for a non-US member to be elected to a leadership position.
- The GTF is exploring multiple ways to select leaders and ensure a balanced leadership team that reflects member diversity (professional roles, geographic location, research/clinical focus, type of workplace, etc.). We are also looking at successful models from other organizations.
- We also recognize that building and developing a robust and representative leadership pipeline will be critical for the long-term success of the Endocrine Society.

*If we eliminate the constituencies, basic scientists will be devalued and won’t have opportunities to serve in leadership roles. All of those will go to clinicians because they’re a larger percentage of the membership.*

- We value all of our members. SP4 reaffirms that scientific inquiry is foundational to our society, advancing human knowledge and providing the underpinnings to advance clinical care.
- As noted above, one of the goals of this review is to ensure that we have the right people in the right places at the right times, and that our leadership team is balanced demographically—whether that be professional role, geographic location, gender, race/ethnicity, or other valuable components of our diverse society.
- To change our governance approach in ways that alienates any member group is inconsistent with SP4’s spirit of unification, our core values, and common sense.
I heard we are eliminating elections.

I heard we are eliminating contested elections and are going to substitute a slate.

Elections are an important member benefit and their elimination would take away my voice.

- No decisions have been made regarding the processes we will use to select our leadership.
- We recognize that, for some members, voting is a defining principle of our democratic organization. However, for many of our members (and across Societies like ours), the most important membership benefits are around personal benefits (meetings, publications, etc.) and governance is not top of mind. This may explain the historically low participation in elections (between 10-15 percent). In a recent survey, another reason cited by some members for not voting is that the information provided about the nominees is insufficient to inform their choice.
- The GTF is exploring multiple ways to select leaders and ensure a balanced leadership team that reflects member diversity (professional roles, geographic location, research/clinical focus, type of workplace, etc.).

I heard we are eliminating committees—when will you announce that?

Why are the committee appointments now only for one year—does this mean that I won’t be able to continue as a member?

- The GTF also is reviewing the ways in which we currently organize our members to do the work of the society. No decisions have been made to eliminate committees.
- Regardless of the names and structure of the working groups, the GTF recognizes that it will be important to maintain institutional memory, to engage as many members as wish to be involved, to provide opportunities for varying time and energy commitments, to consider fundamental functions of the society, and to consider the strategic plan.
- Some possibilities that have been discussed include choosing a structure that relates to the underlying function. For example, 1. Retaining traditional committees that the society needs for its ongoing commitments (e.g. advocacy) with long term member appointments (perhaps 3 years as is currently the case) 2. Creating task forces with a broad task/mandate, and a shorter timeline. 3. Creating working groups with a very focused and time-limited task, who might report either to Council or a committee 4. “Micro-volunteering” for mini-projects (e.g. visits to Congress, letter writing, abstract reviewing).
• As we continue to review our member organization, we will likely return to longer committee appointments, with the caveat that a committee's name might change, but the need for member engagement will not.