

APTA Geriatrics: Standing Rules of the Special Interest Groups (SIGs)



Article I: Purpose

This document outlines the policies and governance of the seven (7) APTA Geriatrics SIGs.

1. **Balance and Falls (BF SIG):** The primary purpose of the Balance and Falls SIG is to provide a forum through which individuals who have a common interest in physical therapy for ageing adults with a risk of falls and balance problems may meet and promote evidence-informed care through education, clinical practice, research, volunteerism, and community outreach.
2. **Bone Health (BH SIG):** The primary purpose of the Bone Health SIG is to provide a forum through which individuals having a common interest in physical therapy for bone health and osteoporosis may connect and promote education, clinical practice, and research.
3. **Cognitive and Mental Health (CMH SIG):** The primary purpose of the Cognitive and Mental Health SIG is to provide a forum and preferred channel for sharing information and resources and promoting professional networking and advocacy efforts related to cognitive and mental health issues and behaviors in geriatric physical therapy. The CMH SIG will foster the creation and collaboration of relationships among individuals with a common interest in physical therapy for ageing adults with cognitive and mental health issues and behaviors to advance geriatric physical therapy practice knowledge and skills.
4. **Global Health for Ageing Adults (GHAA SIG):** The primary purpose of the Global Health for Ageing Adults SIG is to increase awareness of geriatric physical therapy across the globe, advance geriatric physical therapy practice globally, encourage international clinicians and students' activities, and facilitate global partnerships.
5. **Health Promotion and Wellness (HPW SIG):** The primary purpose of the Health Promotion and Wellness SIG is to enhance health promotion and wellness practice among physical therapy professionals working with ageing adults. The SIG supports this goal through education, clinical practice, research, and partnership with other health promotion organizations and initiatives.
6. **Residency and Fellowship (RF SIG):** The primary purpose of the Residency and Fellowship SIG is to foster the development, growth, and participation of geriatric residency and fellowship programs, including those engaged in existing programs (both faculty and participants) and those interested in developing new programs. Furthermore, students and others interested in becoming a resident can become members of the SIG to network.
7. **Skilled Nursing Facility (SNF SIG):** The primary purpose of the Skilled Nursing Facility SIG is to provide a forum and preferred channel for sharing information and resources and promoting professional networking and advocacy efforts among members related to the sub-acute rehabilitation/skilled nursing facility practice settings.

Article II: Composition

- A. Membership: Only members in good standing of APTA Geriatrics are eligible to be SIG members. There is no financial cost to join a SIG. Any Association member may be invited to join a SIG meeting as a guest, at the discretion of the SIG Chair.
 - a. Types of members
 - i. Subscriber: Individuals who subscribe to any of the individual SIG distribution lists to receive information. To become a Subscriber, individuals must opt-in individually to any SIG's distribution lists. A Subscriber can unsubscribe at any time, and at the time of unsubscribing, will no longer be considered a

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- Subscriber of the SIG.
- ii. Participant: Individuals who seek a more participatory with any individual SIG and volunteer for workgroups, task forces, or leadership opportunities. To become a Participant, individuals must sign-up through an application process to volunteer for a specific workgroup, task force, or leadership opportunity within any SIG. The relevant SIG Officers review applications and make appointments. Terms for volunteer positions may vary based on the role. An individual is no longer a Participant if their volunteer term concludes or they resign from the role.
- B. Officers:
- a. Each SIG shall have these Officer positions:
 - i. Chair
 - ii. Vice-Chair
 - iii. Secretary
 - b. Officer Elections, Terms, and Eligibility: Any member of APTA Geriatrics (eligible to vote in the Academy's annual election, as defined by the Academy's bylaws) will elect Officers with each serving a three (3) year term. Officers shall assume office at the close of the Academy's Annual Meeting. Officers must have been Association members for at least two (2) years and Academy members for at least one (1) year immediately preceding their election. An individual may be an Officer of only one (1) of the SIGs concurrently and may not be a member of the APTA Geriatrics Board of Directors. No SIG Officer may hold more than one office at a time, and no Officer may serve more than three (3) complete consecutive terms or more than two (2) complete consecutive terms in the same office. Current SIG Officers are not prohibited from running for a different Officer position (ex: current Vice-Chair runs for the position of Chair), assuming they are eligible. Officers are elected on the following cycle:
 - i. Year 1: all SIG Chairs
 - ii. Year 2: all SIG Vice Chairs
 - iii. Year 3: all SIG Secretaries
 - c. Resignation or removal from office: An Officer will be automatically removed if at any time they do not meet the eligibility requirements as outlined in Article 2B, or they voluntarily resign. The APTA Geriatrics Board of Directors may remove an Officer with or without cause at any time according to the following procedure:
 - i. Removal from Office Procedure: After reasonable efforts to resolve concerns (such as not participating in meetings, failing to fulfill assigned duties and responsibilities, or ethical/legal violations), the Council of SIG Chairs will meet to discuss and recommend the removal of a SIG Officer. If a SIG Chair is being discussed, that SIG's Vice-Chair may be invited to the meeting as a non-voting guest. The Council of SIG Chairs makes a recommendation to the APTA Geriatrics Board of Directors. The APTA Geriatrics Board of Directors, by majority vote upon the recommendation, removes a SIG Officer.
- C. Council of SIG Chairs: This group is chaired by the APTA Geriatrics Board of Directors SIG Liaison and includes all SIG Chairs. All SIG Chairs may vote (one vote each). The APTA Geriatrics Board of Directors SIG Liaison only votes if needed to break a tie.

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Article III: Officer Duties and Responsibilities

- A. All SIG Officers must:
 - a. Follow conflict-of-interest and confidentiality policies.
 - b. Be informed about the APTA Geriatric's mission, services, policies, and programs.
 - c. Advocate for the SIG's purpose and objectives.
 - d. Support the work of the APTA Geriatrics strategic plan.
 - e. Liaise with volunteer groups (committees, special interest groups, task forces) as assigned.
 - f. Inform others about the APTA Geriatrics. Advocate for APTA Geriatrics.
 - g. Contribute to leadership development for APTA Geriatrics by suggesting possible nominees to the board and SIGs.
 - h. Keep up to date on developments in the field of geriatric physical therapy.
 - i. Attend and actively engage in all SIG meetings and other meetings as requested.
 - j. Review agenda and supporting materials before SIG meetings.
 - k. Serve as a clinical resource to the Academy in the specialty area.
- B. The Chair should:
 - a. Facilitate all meetings of the SIG.
 - b. Work in partnership with the board liaison and staff to conduct the business of the SIG.
 - c. Prepare SIG meeting agendas.
 - d. Assist in conducting new Officer orientation.
 - e. Attend meetings of Council of SIG Chairs.
 - f. Be familiar with and comply with the APTA Geriatric's bylaws and SIG standing rules.
 - g. Represent the SIG at APTA Geriatrics meetings regarding SIG activities as required by the APTA Geriatrics Board of Directors.
 - h. Keep APTA Geriatrics Board Liaison informed of SIG activities.
 - i. Submit information relative to SIG functions for the SIG newsletter and website; may also direct to *GeriNotes* as appropriate.
 - j. Appoint SIG liaisons, task forces, and workgroups from Member Participants of the SIG.
 - k. Serve as a liaison to other sections and organizations as appointed by the APTA Geriatrics Board of Directors.
 - l. Other duties as assigned by the APTA Geriatrics Board of Directors.
- C. The Vice-Chair should:
 - a. Understand the responsibilities of the SIG Chair and be able to perform these duties in the Chair's absence.
 - b. With the SIG Chair or designee, prepare the SIG newsletter.
 - c. Other duties as assigned by the Chair.
- D. The Secretary should:
 - a. Record and distribute SIG meeting minutes. Minutes will be made available to SIG Members and distributed to the SIG Officers, the APTA Geriatrics Board of Directors Liaison, and APTA Geriatrics Staff. Minutes are submitted within 45 days of the meeting.
 - b. Distribute and promote work products (white papers, reports, etc.) of the SIG with

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- assistance from APTA Geriatrics Staff as necessary.
- c. Complete routine official correspondence of the SIG, including notification of meetings, elections results, etc., with assistance from APTA Geriatrics Staff.
- d. Other duties as assigned by the Chair.

Article IV: Meetings

- A. Each of the individual SIGs will hold at least one meeting per year.
- B. The Council of SIG Chairs will meet at least once per year, during which proposed changes to this document (Standing Rules of the SIGs) will be addressed. At least half of the SIG Chairs (or a designee) in attendance constitutes a quorum.

Article V: Financial Support

- A. SIGs do not have budgets or expense accounts or the authority to spend or promise the spending of funds on behalf of the APTA Geriatrics. A SIG is encouraged to send a proposal to their APTA Geriatrics Board of Directors Liaison for funding requests to support new initiatives or work to support SIG activities. The APTA Geriatrics Board of Directors must approve SIG funding proposals.
- B. The APTA Geriatrics Board of Directors shall consider providing financial support for travel to the APTA Combined Sections Meeting (CSM) on a case-by-case basis. The APTA Geriatrics shall have no other obligation to provide financial support to the SIG officers except as described in this Clause.

Article VII: Authority

- A. The Standing Rules of the SIGs must be consistent with the Association and Academy bylaws and policies, and can be changed according to the following procedure:
 - a. Changes to Standing Rules of the SIGs Procedure: The Council of SIG Chairs will meet to discuss and recommend changes to the Standing Rules. The Council of SIG Chairs makes a recommendation to the APTA Geriatrics Board of Directors. The APTA Geriatrics Board of Directors, by majority vote upon the recommendation, approves changes to the Standing Rules. Proposed changes to this document must be submitted in writing 60 days before the vote of the APTA Geriatrics Board of Directors.
- B. The Academy Board of Directors appoints SIG Officer vacancies.
- C. Where these Standing Rules are silent, the Academy and Association bylaws prevail.