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ESC History and Mission

History

In 1948 during the third Inter-American Congress of Cardiology held in Chicago, several leading European Cardiologists, including Charles Laubry (France) and Sir John Parkinson (United Kingdom), encouraged by Paul White (USA) and Ignacio Chavez (Mexico), discussed the possible creation of a European Society of Cardiology. On 29 January 1949, a founding meeting was organised in Brussels with representatives from 14 national societies: Belgium, Denmark, Finland, France, Greece, Italy, The Netherlands, Norway, Portugal, Spain, Sweden, Switzerland, The United Kingdom and Yugoslavia. These representatives drew up provisional statutes and appointed a board with Charles Laubry from Paris as Honorary President, Gustav Nylin from Stockholm as President and Roger van Dooren from Brussels as Secretary. The first General Assembly, where the definitive statutes were adopted, was held during the First World Congress of Cardiology in Paris (September 3-8, 1950). It was decided a European Congress of cardiology would be organised in Europe, with the first meeting being held in London in 1952, led by Sir John Parkinson.

Mission

The ESC was created to advance the prevention, diagnosis and management of diseases of the heart and the blood vessels in Europe, and to improve the scientific understanding of the heart and the vascular system.

Accordingly, the Mission of the ESC may be stated as:

To reduce the burden of Cardiovascular Disease in Europe.

Constituent Bodies

The European Society of Cardiology (ESC) is comprised of the following Constituent Bodies:
- 56 National Cardiac Societies
- 6 Associations
- 15 Working Groups
- 5 Councils
Together they represent over 80,000 members. Each Constituent Body is a voting member of the ESC.

Statutes

The ESC is a registered non profit making association governed by the Law dated 1st July 1901 (France). Statutes are voted by the Constituent Bodies at the General Assembly of the ESC. Natural or artificial persons shall adhere to these Statutes and satisfy the conditions set out by them.

Associations are governed by their respective Constitution defined in respect to the ESC Statutes and ESC Board approved policies to guarantee cohesion of the Society as a whole.
Introduction to ESC Board and Committees

ESC Board

The ESC Board is comprised of:

12 elected voting members:
- President (voted by GA)
- President Elect (voted by GA)
- 3 Vice Presidents (voted by GA)
- Secretary/Treasurer (voted by GA)
- 6 councillors (voted by GA)

Ex-officio voting members:
- Immediate Past President
- 6 Presidents of the Associations (voted by Association Membership)

Up to 12 non-voting members:
- Chairpersons of Committees
- Representative of the Constituent Bodies
- Editors of official Society Journal
- 2 to 4 external independent advisors

Non-voting members:
- CEO
- CFO

Article 8.3.7 of the ESC statutes: “The duties of all Board members are executed free of charge. All Board members will be entitled to reimbursement of expenses incurred while exercising their duties upon presentation of supporting documents.”

ESC Management Group

The ESC Management group is comprised of:
Presidential Trio (President/President-Elect/Past President) (voted by GA)
3 Vice Presidents (voted by GA)
1 Secretary Treasurer (voted by GA)
2 to 4 external non-voting independent advisors
In attendance the CEO and the CFO

ESC Committees

The ESC Board delegates the running of ESC core activities to various committees:
- Congress Programme Committee for the running of the ESC Congress
- EORP Committee for the organisation of surveys and registries
- Publications Committee for ESC Journal and TextBooks
- Education Committee for the organisation of ESC educational products & activities
- EU Affairs Committee to represent ESC’s interests towards policy makers
- Committee for Practice Guidelines to develop best practice guidelines
- Press Committee
- e-Communication Committee
- International Affairs Committee
Introduction to the European Heart House

European Heart House (EHH) Organisation and Services

History
In March 1988, Attilio Reale, President Elect, on the way to the American College of Cardiology (ACC) meeting, visited the American Heart House located at that time in Bethesda (Maryland). He discovered a superb building in a wonderful park, located close to the FDA and the NHBLI buildings. This visit was a trigger and the idea of a European Heart House was born. Under the presidency of Michel Bertrand the European Heart House became a reality and in 1993 the building was officially inaugurated.

The European Heart House (EHH) became the administrative headquarters of the European Society of Cardiology. It equally serves as a meeting venue and a centre for ESC educational courses

Structure
The heart house structure was created in order to assist the Board in the best way in the running of their tasks. As a consequence it mirrors the core activities of the ESC.

The figure below shows the European Heart House (EHH) organisational structure provided by the different ESC Business Units.

European Heart House Organisational Structure in Nice
European Heart Agency Organisational Structure in Brussels
1. National Cardiac Societies

**Definition:** In the ESC Statutes, the definition of a National Cardiac Society is according to the following article:

**ARTICLE 3 - NATIONAL SOCIETIES**

"Any National Society of Cardiology of a European (European as defined by the World Health Organisation) or Mediterranean country may join the ESC. Applications must be addressed to the Secretary/Treasurer who will transmit these to the Board which will make a provisional decision that will be confirmed by the next Ordinary General Assembly."

Today the ESC counts 56 National Cardiac Societies.

**Membership:**

Membership of a National Cardiac Society starts with an application to become a member of the ESC, it is concretized by a financial contribution of 2,9€ per individual member and is reinforced by joint initiatives or projects developed at different levels. As a constituent body, a National Cardiac Society has voting rights.

Each individual member of a National Cardiac Society is member of the ESC. These members benefit from ESC membership and the European Membership Card.
2. Associations within the ESC

**Definition:** Associations as Constituent Bodies of the ESC are registered branches of the ESC and have no separate legal status. They were created to foster collaboration among Working Groups and to promote the advancement of specific areas of expertise related to prevention, detection and management of diseases of the heart and the vascular system.

**To become an Association:** one or several Working Groups (WG) should fulfill all the following requirements:
- A formal application from the WG Nucleus signed by the Chairperson and the Vice-Chair is received by the ESC Board
- Combined number of WG members exceeds 250
- Collectively, WG should have the following activities:
  - Subspecialty journal
  - Subspecialty congress
- Respective WGs have adequate current and future funding to support the activities of the Association

**Leadership:** the administration of an Association is conducted by a Board composed of Executive Officers, regular Board Members and ex-officio Members with the operational support of the ESC Specialty Centre.

**Membership:** each of the 6 Associations has a direct membership programme, each having their own rules. Association members automatically become ESC members. ESC members, however, are not automatically Association members at present.

### Associations

![EACVI](image1.png) ![European Heart Rhythm Association](image2.png) ![Heart Failure Association of the ESC](image3.png) ![EACPR](image4.png) ![EAPCI](image5.png) ![Acute Cardiovascular Care Association](image6.png)

3. Working Groups within the ESC

**Definition:** Working groups are the scientific backbone of the ESC and have been created to facilitate scientific cooperation in different fields of cardiology. The ESC has 15 Working Groups established as official working groups.

Mainly dedicated to Research and Education, they contribute to:
- The organisation and preparation of the ESC Annual Congress, scientific meetings, courses and symposia.
- Numerous field focused studies, registries, position papers, consensus documents and reviewing of ESC Practice Guidelines.
- The dissemination of scientific knowledge to bring the benefit of translational research to the practicing physicians.
- To establish appropriate recommendations for the ESC regarding the field of each specialty.

**Leadership:** Each Working Group has a Chairman, a Vice-Chairman, a Treasurer, a Secretary and a Nucleus. The Leadership mandate is two years.

**Membership:** Each Working Group has a direct membership programme with its own rules and counts between 100 and 500 ordinary members. Membership is free and has no limitation in time.
Working Group members automatically become ESC members. ESC members, however, are not automatically Working Group members at present.

### Working Groups

<table>
<thead>
<tr>
<th>Atherosclerosis and Vascular Biology</th>
<th>Cardiac Cellular Electrophysiology</th>
<th>Cardiovascular Pharmacotherapy</th>
<th>Cardiovascular Surgery</th>
<th>Cellular Biology of the Heart</th>
</tr>
</thead>
<tbody>
<tr>
<td>e-Cardiology</td>
<td>Coronary Pathophysiology and Microcirculation</td>
<td>Developmental Anatomy and Pathology</td>
<td>Grown-up Congenital Heart Disease</td>
<td>Myocardial Function</td>
</tr>
<tr>
<td>Myocardial and Pericardial Diseases</td>
<td>Peripheral Circulation</td>
<td>Pulmonary Circulation &amp; Right Ventricular Function</td>
<td>Thrombosis</td>
<td>Valvular Heart Disease</td>
</tr>
</tbody>
</table>

### 4. Councils within the ESC

**Definition:** Councils are one of the Constituent Bodies of the ESC. They were created to bring together cardiologists, nurses or other professionals with common interests in a particular field of cardiovascular medicine or other common needs as a professional group. They are expected to encourage research, teaching, communication of knowledge and to participate in education.

There are currently 5 Councils ranging from Cardiology Practice to Basic Cardiovascular Science, whilst comprising also Cardiovascular Nursing and Allied Professions, Primary Cardiovascular Care and Hypertension.

**Leadership:** Each Council has a Chairman and a Vice-Chairman. Each Council is encouraged to appoint a Secretary and Treasurer for a 2 year period. Each Council should have a Nucleus which acts as a steering committee. The size of the Nucleus is determined by the Council but should not exceed 10 individuals.

**Membership:** a Council may have a direct membership programme if the structure permits. Direct members of an ESC Council are automatically ESC members. However ESC members are not automatically members of an ESC Council to date.
Council on Cardiovascular Nursing and Allied Professions (CCNAP)

The Council on Cardiovascular Nursing and Allied Professions (CCNAP) was created on 5 September 2006 from the dissolved ESC Working Group on Cardiovascular Nursing. Its mission is to promote excellence in cardiovascular nursing and allied professions through practice, education and research. Its objectives are set down in its Rules and Regulations which are available to the public on the ESC Web Site (http://www.escardio.org/nursing).

Structure

CCNAP is comprised of a Board and several committees. The Board is composed of a Chair, Vice-Chair, Past-Chair, Treasurer, a Congress Coordinator, a Communications Officer and the Chair of the following committees: Education Committee, Scientific Committee, Programme Committee, National Societies Committee.

The Board is responsible for strategy and the activities of CCNAP. It follows closely the strategy of the ESC. The Board defines the roles and responsibilities of its appointed members and ex-officio members.
Roles

The Chair

The Chair is elected for a two year period non-renewable.
Responsibilities:
- In collaboration with his/her Board, determines objectives/strategies of the Council and supervises all the organizational structure and initiatives. He/she prepares the agendas and conducts the General Assemblies and Board Meetings.
- Works with all Committees and the Councils Coordinator to ensure that the Council’s goals are pursued.
- Assists the Treasurer in preparing the budget, in following the budget and for the approval of expenses.
- Is responsible for the appointment of the chair persons and members of the various Committees.

The Chair automatically becomes the Past-Chair for a period of two years.

The Vice-Chair

The Vice-Chair is elected for a two year period following which he/she will automatically take on the role of Chair. The Vice-Chair acts on behalf of the Chair when needed.
Responsibilities:
- Works in close cooperation with the Chair with the aim to create continuity of strategies once he/she assumes the role of Chair.
- Manages assignments given by the Chair and takes on the responsibilities of Chair should the Chair be unable to perform his duties.
- Is the liaison with the CCNAP Advisory Committee.
- May take on specific activities.

The change of Chairs takes place at the CCNAP Board Meeting held during the ESC Congress.

The Past Chair

The Past Chair serves within the Board for two years.
Responsibilities:
- Provides historical information and background.
- Ensures the continuity in the activities and initiatives.
- Is automatically Chair of the Nominating Committee.
- Is the liaison to the AHA Nursing Council.

The Treasurer

The Treasurer is elected for a two year period.
Responsibilities:
- Works in collaboration with the CCNAP Chair and Councils Coordinator.
  - Is responsible for the financial affairs of the Council.
  - Prepares the budget in collaboration with the Chair and the Councils Coordinator before circulation to the CCNAP Board.
  - Follows the budget and approves expenses with the Chair.
  - Presents financials to the CCNAP Board.
The Congress Coordinator

The Congress Coordinator is elected for a four year period.

Responsibilities:

- Plans the strategic development of the CCNAP congress including selection of congress venue and theme based on the Board’s requirements.
- In collaboration with the entire CCNAP Board, develops a strategy that increases delegate numbers and raises the profile of the CCNAP congress.
- Works with the Programme Committee Chair to develop an attractive and innovative scientific programme.
- Collaborates with the ESC Congress Department and the organising committee of the co-hosting national society to ensure a profitable conference.
- Collaborates with the Councils Relations Coordinator on other matters related to the CCNAP congress.

The Communications Board Member

Elected for a two year period the Communications Board Member is responsible for providing content for press releases, for quarterly CCNAP newsletters and for the CCNAP web pages.

The Committee Chairs

The Committee chairs are elected for a two year period.

Responsibilities:

- Is responsible for the initiatives of the committee by implementing CCNAP strategy.
- Acts as a link between the CCNAP Board and the committee members.
- Manages assignments given by the CCNAP Chair and supervises the committees activities.
- Reports regularly to the Chair on the committee’s activities.

Committee Chairs are expected to identify persons for Vice-Chair positions to ensure smooth continuity of leading positions.

Length of mandates

- The Chair is elected for a period of 2 years non-renewable.
- Board members are elected for a period of 6 years maximum non-renewable excepting the Congress Coordinator who has one term of 4 years non-renewable.
- The Chair may be on the Board for a period of 8 years if 2 years spent as a Board member.
- The Treasurer is elected for a period of 2 years, renewable for a further 2 years.
- In principal the same rules apply to all CCNAP Committees.
- The Councils Coordinator keeps updated files of committee members. Committee Chairs keep themselves informed of the length of mandates of committee members to ensure compliance to rules regarding the length of mandates. He / she informs committee members in writing when their mandates reach term.
- The Councils Coordinator keeps updated files of board members. The CCNAP Chair keeps informed of the length of mandates of committee members to ensure compliance to rules regarding the length of mandates. He / she informs committee members in writing when their mandates reach term.

Mandates begin and end at the time of the ESC Congress.
Elections & Nominating Committee

Elections

The process must begin in December to ensure that voting and final decisions are taken at the EuroHeartCare congress. This includes identification of silent members and notification to them.

Elections for Board vacancies

- The CCNAP Board prepares an explicit description of the positions and the qualities required.
- A call is made to all CCNP members.
- The Nominating Committee gives its advice for the available positions to the Board by presenting a slate of 2-3 candidates and the members of the Board present at the Board Meeting held during the EuroHeartCare congress vote.
- The decision is taken based upon a majority of votes.

Applicants are reviewed and a slate of nominated candidates is prepared by the Nominating Committee. Decisions within the Nominating Committee are made by a majority of the votes of the committee members. The slate of candidates is presented to the CCNAP Board for voting at the Board Meeting held during EuroHeartCare. The approval takes place under the Chair's authority. If one candidate only is proposed for any position, a vote will take place in any case. If he/she is not approved, his/her candidature will fail and the Nominating Committee reconsiders the candidature and makes a new proposal to the Board. The proposed candidate(s) is approved by the majority of votes of the Board members present. Approved candidates take up their positions at the CCNAP Board Meeting held during the ESC Congress.

Elections for Committee vacancies

- Each committee prepares an explicit description of the positions and the qualities required and informs the CCNAP Board
- A call is made to all CCNP members.
- The respective committees review all applications, and decide based upon a majority of votes and discussion if needed.
- During the EuroHeartCare Congress the Chair presents the candidate to the CCNAP Board for approval with the motives to justify the choice.

This process may be followed each year to fill or to renew Committee Members.

The following applies to both Board and Committee vacancies:

- A call for nominees goes out to all committees and the full membership of CCNAP for vacant positions in CCNAP.
- Applicants should submit a letter of application (including reason for seeking position and relevant experience and expertise) and a 2-page CV.
- Applications are accepted from non-nurses.
- Each candidate can apply for one position only (e.g. if a call is made for positions in both the Board and in Committees, candidates can apply for only one position in total).
- The CCNAP membership does not vote.

Nominating Committee

Responsibilities:

- To ensure a transparent nominating process for vacant positions in the CCNAP Board.
- To give advice and present candidates for election to CCNAP Board positions.
- To ensure a balance of candidates representing a diversity of areas of clinical and research expertise, and organisational experience.
- To nominate at least two candidates for each vacant position.
Composition:
- It is led by the immediate Past-Chair.
- It is composed of one representative from each of the following CCNAP Committees: National Societies, Education, Science and the Programme Committee plus two more members.

Rules:
- CCNAP Board Members cannot serve on the Nominating Committee (except for the Past-Chair).
- Each Committee representative serves for two years on the Nominating Committee.
- Nominating Committee members cannot serve again for at least four years after serving on the Nominating Committee.
- Members of the Nominating Committee cannot apply for vacant positions.

Silent Board or Committee Members

In December prior to elections the Board and Committee Chairs identify members who are not active. A letter to be sent to silent members by Committee Chairs is available (contact the Councils Coordinator).

CCNAP Committees

Education Committee

Its mission is to facilitate a learning framework for European cardiovascular nurses by developing continuing education initiatives that provide knowledge and competencies in cardiovascular nursing care. Such initiatives are developed in partnership with health professionals, patients, family members, industry and the wider society to improve the quality of care for the cardiovascular population and those at risk for cardiovascular disease. The Education Committee promotes excellence in cardiovascular nursing through nursing and allied professional continuing education that prepares the cardiovascular professional for the future health challenges within the regulatory frameworks.

National Societies Committee

The Council on Cardiovascular Nursing and Allied Professions (CCNAP) aims to develop collaboration and communication with national societies, groups and associations of cardiovascular nursing professionals throughout Europe. This is achieved by learning from each other thanks to increasing exchanges and involvement in important cardiovascular and nurse-related topics. The National Societies Presidents should be able to disseminate information to their cardiovascular nurses and allied professionals on what CCNAP represents, and understand the importance of becoming a CCNAP member to benefit from educational opportunities and gain knowledge.

Programme Committee

The mission of the Programme Committee is to develop a state-of-the-art programme for the next EuroHeartCare conference using the knowledge and input of a multi-disciplinary team of health-care professionals that work together with the local organizing committee of the host country and industry to enhance the knowledge of the members with respect to improving the quality of research efforts and providing the best quality of care for patients with cardiovascular disease and those at risk.

Science Committee

The responsibilities of the Science Committee are to build evidence-based practice, research capacity and skills among European nurses and allied professionals within CCNAP and beyond; plan mentoring sessions for pre-doctoral and post-doctoral CCNAP researchers; and link CCNAP researchers for collaboration across Europe and the world. The committee has strong links with UNITE, a collaborative group of nurse researchers across Europe.
Collaboration website

CCNAP has a Collaboration Website which is a central exchange platform for Board and Committee members (to work on shared documents, to organize meetings, to provide important information, to store official documents, to check the meetings calendar etc). Each Committee has a separate sub-site. The link to the CCNAP Board Collaboration Website is:
http://portal.escardio.org/Communities/Councils/CCNAP/default.aspx
To log in use your ‘My ESC’ esc\user-ID and password.
The Collaboration Websites have restricted access given by ESC Staff upon request.
Meetings

Board & Committee meetings

The Board meets at least twice a year: once during the CCNAP annual congress and at the ESC Congress. An extra one-day meeting can be included in the annual CCNAP budget. Committee meetings are held during the CCNAP annual congress and an extra one-day meeting can be included in the annual CCNAP budget. If a sufficient number of committee members attend the ESC Congress, a meeting can be organised (there is no reimbursement for committee meetings at ESC Congress). The Board and the committees can hold conference calls when required.

General Assembly

- The General Assembly is held during the EuroHeartCare congress.
- The agenda of the General Assembly is drawn up by the Chair

Conferences

Contribution of the Specialty Centre

Associations, Working Groups and Councils contribute scientifically towards:
- The ESC Congress (submissions of sessions proposals, representatives within the Congress Programme Committee)
- Association / Working Groups / Councils congresses (scientific programme, joint sessions)
- External congresses

CCNAP Congress (EuroHeartCare)

An agreement is signed between CCNAP and the national / local group of cardiovascular nursing, co-organiser of the event. The agreement clarifies the contribution of the latter as well as financial principles.

An agreement is signed between CCNAP and the ESC Congress Division to clarify roles and responsibilities for the CCNAP annual congress.

The ESC Congress Division proposes a selection of venues for the CCNAP annual congress according to the “Sub-specialty destination portfolio”.

European Journal of Cardiovascular Nursing

The official journal of CCNAP is the European Journal of Cardiovascular Nursing. It is one of a family of ten ESC journals.

The Publishing Department of the ESC manages the administrative aspects of the journal, organizes business meetings, and negotiates contracts with the publisher. It is the main contact with the publisher and the Editorial Team of the journal.

The Editor in Chief of the European Journal of Cardiovascular Nursing is an ex-officio member of the CCNAP Board.

CCNAP and ESC Annual Report

The Council on Cardiovascular Nursing and Allied Professions provides an annual report of its activities when submitting the budget plan for the next fiscal year in September. This will be the basis of the section related to the Council in the ESC Annual Report.
# General Timelines

CCNAPs general timelines are as follows

## Year N (Year with no elections)

<table>
<thead>
<tr>
<th>Month</th>
<th>Events</th>
</tr>
</thead>
<tbody>
<tr>
<td>January</td>
<td>CCNAP newsletter</td>
</tr>
<tr>
<td>February</td>
<td>ESC Congress: 14 February abstract submission deadline&lt;br&gt;Presentation of ESC budget to Management Group of the Board</td>
</tr>
<tr>
<td>March</td>
<td>ESC Board review and approval of the budget&lt;br&gt;Spring Summit at European Heart House</td>
</tr>
<tr>
<td>April</td>
<td>ESC Congress Programme Committee Meeting – abstract selection&lt;br&gt;CCNAP Newsletter&lt;br&gt;CCNAP Board and Committee meetings before EuroHeartCare&lt;br&gt;EUROHeartCare (CCNAP Congress) including CCNAP General Assembly</td>
</tr>
<tr>
<td>May</td>
<td>ESC Congress: results of abstract selection</td>
</tr>
<tr>
<td>July</td>
<td>CCNAP newsletter</td>
</tr>
<tr>
<td>August / September</td>
<td>ESC Congress&lt;br&gt;CCNAP Board meeting and Committee Meetings at ESC Congress&lt;br&gt;Meeting between Treasurer, Chair, Vice-Chair and Councils Coordinator to agree on assumptions and objectives for the next fiscal year (i.e. 1 April N+1 to 31 March N+2)&lt;br&gt;Abstract submission opens for EuroHeartCare</td>
</tr>
<tr>
<td>September</td>
<td>20 September: Deadline for Objectives and Assumptions (assumptions: benefits, ROI, economic considerations, overheads) for next financial year to be sent to Councils Relations Coordinator&lt;br&gt;30 September: Deadline for submissions of proposed sessions for N+1 ESC Congress</td>
</tr>
<tr>
<td>October / November</td>
<td>CCP budget proposal for next fiscal year is reviewed by the ESC Chief Executive Officer, the Chief Finance Officer and Financial Controllers. The budget proposal is composed of a list of projects with costs plus their objectives and assumptions sent to Councils Relations Coordinator in September.&lt;br&gt;CCNAP newsletter</td>
</tr>
<tr>
<td>November</td>
<td>Congress Programme Committee Meeting for N+1 ESC Congress</td>
</tr>
<tr>
<td>December</td>
<td>Final global validation of CCP budget. Procedure ensues with preparation and consolidation of global ESC Budget. Final decision in March of next year.</td>
</tr>
</tbody>
</table>

## Year N+1 (Year with elections) Same as Year N and specific timelines for elections.

<table>
<thead>
<tr>
<th>Month</th>
<th>Events</th>
</tr>
</thead>
<tbody>
<tr>
<td>December</td>
<td>Silent members are identified and notified. CCNAP Board and Committees prepare description of positions to fill.</td>
</tr>
<tr>
<td>10 January</td>
<td>Call for applications to entire CCNAP membership</td>
</tr>
<tr>
<td>10 February</td>
<td>Deadline for applications</td>
</tr>
<tr>
<td>15 Feb-10 March</td>
<td>• For Board positions: The Nominating Committee reviews the candidates&lt;br&gt;• For Committee positions: The respective committees review all applications, decide based upon a majority of votes and discussion if needed.</td>
</tr>
<tr>
<td>April (at EuroHeartCare)</td>
<td>• For Board positions: a slate of candidates is presented to the Board at Board Meeting. The Board accepts or refuses the proposals.&lt;br&gt;• For Committee positions: the Chairs present the candidate to the CCNAP Board for approval with the motives to justify the choice.</td>
</tr>
<tr>
<td>May</td>
<td>Notification of results sent to candidates</td>
</tr>
<tr>
<td>August</td>
<td>New Chair and Board members take up positions</td>
</tr>
</tbody>
</table>
ESC Activities

Advocacy / EU Affairs
Cardiovascular Round Table
Congress and Meetings
Education
European Heart Agency
EurObservational Research Programme
Guidelines
International Affairs
Publications

Advocacy / EU Affairs

To ensure that CVD is placed firmly on the political agenda in Europe, ESC has become increasingly active in advocacy.

The objective is to position the ESC as the most credible representative of the medical and scientific community in the field of cardiology to governmental institutions in the European Union and Member States, but also to relevant NGO’s and sister organisations.

As of today the ESC has been active in the following areas:

- Prevention: stimulating the development of national strategies to combat heart disease, while providing practical tools to act both at population and individual level.
- Research: improving the standards of cardiovascular research in Europe through the identification and promotion of unmet research needs and priorities.
- Regulatory affairs: establishing an open dialogue and exchange with European regulatory authorities on cardiovascular regulatory aspects, for both drugs and devices.
- Registries: ensuring political support to the development of comparable CVD data in the European Union.
- e-Health: promote an environment supporting the development of ICT tools and services for cardiovascular health.

The European Affairs Committee is working closely with National Cardiac Societies to create synergies; it initiated a close collaboration with 7 NCS in a Cardiopolicy pilot group (DK, LT, NL, PL, PT, SP, UK). The focus of this group is on harmonization of cardiology education.

ESC Cardiovascular Round Table

The Cardiovascular Round Table was founded with the specific mission to provide an unique forum for high level dialogue between industry (pharmaceuticals, devices and equipment) and society leadership.

Its aim is to identify and discuss key strategic issues for the future of cardiovascular health in Europe and develop long term partnerships with Industry.

This to allow the ESC to leverage its unique position as a broker between professionals, industry and where appropriate any relevant third parties in order to become a key strategic force in cardiovascular health in Europe. In addition the CRT is meant to serve the ESC as a ‘think-tank’ in which through listening, understanding and learning from each other, strategic priorities for the future can be set. Senior leadership is expected to attend.
Current members: Abbott Vascular, Amgen, AstraZeneca, Bayer Healthcare, Biotronik, Boehringer-Ingelheim, Bristol-Myers Squibb, Daiichi-Sankyo, Eli Lilly, GlaxoSmithKline, Medtronic, MSD, Novartis Pharma, Pfizer, Roche Diagnostics, Sanofi, Servier, Siemens, St Jude Medical, Takeda

**Congresses and Meetings**

The ESC Congress is the annual congress of the ESC, the largest medical congress in Europe. It gathers over 30,000 participants (mainly cardiologists) and takes place every year in August/September in a different European city.

The first ESC Congress was held in 1950 and from then on every 4 years until 1988, when it became an annual event. It has become a truly global event with over 10,000 abstracts submitted every year, participants from more than 140 different countries, 430 scientific sessions, 1,200 leading cardiology professionals as faculty, 200 exhibitors.

Derivative products have been developed: ESC Congress 365, Best of ESC, ESC TV, to offer dissemination of the congress content to cardiology professionals around the world, throughout the year.

In addition, Congresses and Meetings organises subspecialty congresses: EuroHeartCare, Frontiers in CardioVascular Biology, EuroPrevent, EHRA Europace, Heart Failure, ICNC, Acute Cardiovascular Care, Euroecho-Imaging as well as meetings at the European Heart House (such as Spring Summit).

Congresses and Meetings works with the Congress Programme Committee as well as the different subspecialty congresses committees to ensure that the best content is offered to healthcare professionals.

**Education**

Education is at the core of the ESC mission to reduce the burden of cardiovascular disease in Europe. ESC’s vision, in terms of medical education, is to improve cardiovascular outcomes.

To reach this goal, the ESC Education Committee ensures all educational activities are based on sound scientific content, and that robust educational methodology is being applied to ESC all educational programmes.

The ESC Education Committee is a committee of the ESC Board. Members of the Education Committee are representatives from the ESC Associations as well as volunteers with a keen interest in medical education. The role of ESC Association Representatives is to ensure smooth bilateral communication with the respective Education Committees. The role of the Committee with the Chairperson is to implement the ESC’s strategy and contribute to the development and delivery of educational activities.

All ESC educational activities are mapped on the ESC Core Curriculum for the general cardiologist and refer to the ESC Practice Guidelines. The core curriculum is a framework for training and lifelong learning in cardiology. As such, it aims at harmonizing training in cardiology throughout the ESC member countries. It is also the core basis from which sub-specialty curricula are developed.

Presently, the educational activities include live courses delivered from the European Heart House or around Europe. Whether in partnership with national cardiac societies or as endorsed initiatives, live courses are interactive and case-based, invaluable means to disseminate the ESC Guidelines. The second family of educational activities are eLearning initiatives. From training programmes or course catalogues on the ESC eLearning platform (ESCeL) to the ESC Webinar Series or the ESC Clinical Case Gallery, all programmes are both guidelines- and case-based. The growing integration of technology enhanced learning expertise in said activities leads to better measurement of impact and outcome on clinical practice. The third family of activities is focused on knowledge assessment. Sub-specialties of cardiology have engaged in knowledge assessment for some years. Currently, an examination in general cardiology is also delivered as an opt-in service to national cardiac societies, for them to use as they see fit nationally.
The ESC Education Committee also engages with all stakeholders of medical education, including European academic centres and national cardiac societies. For that purpose, the ESC Education Conference gathers national directors of training of national and affiliated cardiac societies in December every year. The aim is to communicate on the ESC Educational activities. This is also the opportunity to run a needs assessment and exchange on potential gaps and national constraints.

**European Heart Agency**

In 2013, ESC opened offices in the political capital of Europe to serve two main ESC needs.

Firstly, it accommodates regular ESC activities and projects, such as Board meetings, scientific events, webinars, and, together with the Heart House in Nice, it has become a meeting point for our volunteers who contribute to the Associations, Working Groups and to ESC activities in general.

Secondly, the Brussels office supports the fundamental ESC project of the European Heart Agency. This is aimed at the development of new ideas and activities in response to a constantly changing landscape and wide diversity in the conditions and needs of our chosen field. The European Heart Agency encompasses three axes: European Affairs, the European Heart Health Institute (with three distinct Units: Health Policies and Economics, Innovation and Implementation, and Clinical Trials), and the European Heart Academy. The Academy aims to, amongst other projects, promote our Society’s collaboration with selected universities.

**EurObservational Research Programme**

In medicine much knowledge originates from physiopathological and observational research. Medical knowledge is transferred in operational recommendations reported in Guidelines. Such recommendations, if known, are interpreted by physicians according to their individual cultural context and beliefs and practise according to patients’ attitudes. National Health organisation is also an important driving component of the implementation of such recommendations. All this eventually results in medical practice.

A major goal of observational research is to record medical practice through the centralised collect of “real life” data. The European Society of Cardiology (ESC) recognizes the importance of gaining information on medical practice across the European and Mediterranean countries and has therefore developed the EurObservational Research Programme (EORP).

**Guidelines**

ESC Associations, Working Groups and Councils contribute to the development of ESC guidelines in clinical practice. Within their respective sub-specialty fields, they may produce position papers and consensus documents.

ESC Working Groups and Councils are required to follow the review and validation process set in collaboration with the ESC Committee for Practice Guidelines and with the European Heart Journal (EHJ) Editor-in-Chief. Associations are submitted to a consultative process to ensure no scientific overlap or contradictions with the main ESC Guidelines.

Since 1994, the ESC produces world renowned guidelines which are one of its major assets. The objective of the ESC Guidelines is to assist cardiologists in making choices about the most appropriate health care for individual patients. The ESC now plays a leading role in the development of European guidelines covering topics from the Core Curriculum. They are recognized and quoted or referred to in our 56 National Cardiac Societies and many others worldwide.

The ESC Guidelines aim to present all the relevant evidence on a particular issue in order to help physicians to weigh the benefits and risks of a particular diagnostic or therapeutic procedure. They aim to be helpful in everyday clinical decision-making and contribute to raise the standards of cardiovascular care across Europe.

The development of ESC Guidelines is coordinated by the Committee for Practice Guidelines (CPG) which was created in 1994. It has the responsibility of selecting the topics, the scheduling of the publications and the coordination of the Task Forces developing these guidelines.
The CPG has had a very active role in the creation of the Declaration of Interest platform since this has become a crucial aspect in the choice of experts involved in guidelines development. The Declarations of Interest of all experts involved in ESC Guidelines production have been webposted since 2007.

**International Affairs**

European roots – International scope. The dissemination of the latest scientific research, Clinical Practice Guidelines and education tools is a major part of the ESC’s strategy, both within and beyond Europe.

Developing collaborative relationships with ESC Affiliated Cardiac Societies (the main professional bodies within cardiovascular medicine based in regions outside Europe and the Mediterranean basin) is essential to sharing, learning and advancing the battle against cardiovascular diseases. ESC Global Scientific Activities is one of ways to achieve this through the organization of scientific sessions organised in close collaboration with the Affiliated Cardiac Societies and tailored to their needs.

There are 39 ESC Affiliated Cardiac Societies with whom the ESC is proud to develop activities and partnerships.

**Publications**

The ESC Journal Family now comprises ten traditional journals covering the entire field of cardiovascular medicine: basic science, imaging, electrophysiology, acute cardiovascular care, prevention, intervention, heart failure, nursing and from 2015, cardiovascular pharmacotherapy a new journal on clinical outcomes and quality of care is planned, along with a range of Open Access titles of which ESC Heart Failure is the first. The flagship European Heart Journal (EHJ) now appears on a weekly basis and reached an all time record impact factor of 14.7, rating it third in its field. Publications also comprise a growing number of critically acclaimed textbooks and handbooks, with eight new titles due for launch by end-2015.
ESC Communication Tools

ESC activities benefit from communications services to increase its visibility and reach.

Digital communications

- **Websites (ESC website, Heartfailurematters, AFIBmatters,...)**
- **E-campaigns/newsletters:**
  - My ESC News (monthly)
  - My ESC Congresses & Events (monthly)
  - My ESC Education (quarterly)
  - My ESC Young Community (quarterly)
  - NS Presidents’ Newsletter - NSPL (bi-monthly). This should be considered as the single communication mean towards the National Societies Presidents.
  - Associations, Councils, Working Group newsletters (quarterly)
- **Social media**
  - Twitter
  - Facebook
  - You Tube
  - LinkedIn

Branding & offline communication

- Coordination of design and print: promotional and corporate materials (brochure, flyer, poster, annual report, goodies, stationary, Christmas cards,...)
- Recommendations for development of visuals, logos
- Brand guardianship
- Advertising in ESC journals
- Stand management: ESC stands, subspecialty congresses, international (GSA, sister societies)

Press

The ESC is an extensive professional medical society with an extremely respected reputation within the field. A Press Committee has been appointed to

1. ensure appropriate exposure to the media by (medical, lay and financial)
   - Selecting appropriate and quality content (congresses scientific programmes, ESC activities,...)
   - ensuring quality of press releases content
2. safeguard this reputation by:
   - monitoring ESC image in the media and alert Board of any issues arising in the Press which could hurt ESC reputation
   - giving ESC Board advice in times of communication crisis
   - appointing and ensuring quality and quantity of ESC official spokespersons

ESC Congress News

- Daily newspaper published during the ESC Congress focussing on scientific information (Congress programme)
- Content is defined in May, by the ESC Press Committee and the Editors-in-Chief.
Finances and budget

Accounting fiscal period & key dates

The accounting fiscal period starts on the 1st of April and ends on the 31st of March.

Budget for the next financial year developed between September and February:

- **September/October**: Assumptions and objectives (operating budget and investments/projects)
- **October/November**: first budget draft reviewed by ESC CEO, CFO and Controllers
- **November/December**: presentation/discussion followed by final global validation with Treasurer and ESC Central (1st pass)
- **January**: 1st pass for allocation of costs and resources & inclusion into the ESC consolidated budget
- **February**: presentation of the consolidated budget to the management group of the ESC Board
- **March**: ESC Board review and approval of the budget

Some definitions

**Budget**

- Approved by ESC board before the end of the previous accounting year (March)
- Unique and cannot be modified once approved whatever the reason
- Based on Assumptions & Objectives given by the Association / Working Group / Council Boards / Nucleus

**Forecast**

- Snapshot photo at a given date of the budget
- Unique and cannot be modified once approved whatever the reason
- Based on actual figures of past 6 months and projections of the next 6 months with or without new initiatives
Actuals

- Final “picture” of the year passed
- Enable comparisons and trends with the previous years

Bank Accounts

- All bank accounts are managed under the responsibility of the ESC. No overdraft is authorised.
- Each group within the Specialty Centre is totally responsible for its own financial health and sustainability, including funding of its own activities.
- Any commitment of a group (Association, Working Group or Council) commits the ESC and any liability of a group is the liability of the ESC. In addition, in accordance to the ESC corporate governance rules, it is the responsibility of the leadership of each group to ensure transparency and legal oversight towards the ESC.

Expenses

ESC Decision Making and Approval Process

Refer to “Governance, legal aspects and policies” section.

ESC Delegation of Authority

For all expenses, a delegation of approval is provided to the EHH Management and the ESC CEO.

Expenses

- Expenses will be managed by EHH management together with the Finance Department.
- All expenses should go through the ESC Purchase Order System before occurring even if budgeted.
ESC project management

The project management involves the main stakeholders both volunteers and EHH staff to gather recommendations and align resources to a common goal.

A project is a new initiative beyond daily activities and needing additional resources (human, financial). A project has only one deliverable. It enables to monitor the advancement and success of ESC and sub-specialty groups activities.

All ideas are not automatically promoted into projects. For each idea, a project thinking process is launched to improve project owner satisfaction, cost efficiency and relevance.

Prior to launching any new project, the following steps are required:

3-step approach

1. Project request (vision): turn your ideas into a concrete, well defined concept. This is not a commitment but just a potentiality

2. Feasibility study (pre-project): assess all aspects of the project (resources allocation, technologies, return on investment, marketing strategy, planning, specifications...)

3. Project launch & implementation

The EHH Management provides feedback on each step until validation of project launch is reached. This approach is to optimise effective delivery within the deadline set after completion of feasibility study.

Several practical tools are being developed to support volunteers and EHH Staff in implementing the ESC Project Management (clear workflow, memo card, glossary of terms, handbook and online tool for project prioritisation & tracking).
Governance, legal aspects and policies

The ESC Corporate Governance rules, policies and procedures should be adhered to since they guarantee transparency and protection.

**Governance rules**

**Why governance rules?**
- To protect the association assets, revenues and ethical values
- To protect its leadership
- To ensure compliance with laws
- To improve accountability, confidence transparency and oversight
- To avoid potential conflicts of interest
- To improve efficiency of the decision making process
- To clarify roles and responsibilities between volunteers and staff

**Key principles**
- Collegial structure for decision-making and engagement
  - Avoid key decisions to be made by a single person
  - Nobody can approve their own expenses
  - No one can engage funds on their own with no collective/collegial process
- Definition of an escalation process in case of non adherence/deviation with rules.

**Legal Aspects**

**ESC**

The ESC is registered as a legal entity in France. Neither Associations, nor Working Groups nor Councils have a separate legal status. The ESC is a French non profit organisation (French law 1901) which implies:

- the need to justify the use of funds (this is the responsibility of the ESC Board)
- a financial autonomy (and need for reserves)
- it is subject to taxes in France (corporate tax, VAT, property tax, ...) and abroad (VAT)
- the ESC is legally responsible in the financial, legal and fiscal domains, including Associations
- An annual review (processes and accounts) and certification is performed by an auditing company (appointed by ESC general assembly for 6 years)
- The ESC Audit Committee meets twice a year minimum

All contracts, commitments, or written undertakings of a business nature entered into on behalf of the ESC including Associations, Working Groups or Councils must be reviewed by the ESC CFO and signed by the ESC CEO prior to any commitment.

All projects should be budgeted. In addition, for major projects, discussions (including analysis of internal and external needs to anticipate long term impact) should take place at the management group of the board before any commitment is made.

**Associations, Councils and Working Groups of the ESC**

Associations are part of the ESC legal entity and therefore ESC by-laws are applicable to all, including Associations. Associations have valued and thrived on the autonomy that they have been granted, but being registered branches of the ESC, they legally remain constituent parts of the ESC and as such, they are asked to comply with the legal rules of ESC Central as stated above.
For legal, fiscal and internal control reasons it is critical and mandatory to have all activities, assets and liabilities of the Associations, Working Groups and Councils reported within the ESC Structure.

In case of non compliance with these obligations the personal responsibility of the Association President / Working Group Chairperson / Council Chairperson and Treasurer, the ESC Board and CEO could be engaged (penal and civil offence).

Bank accounts are managed directly by the ESC. Any commitment of the Associations commits the ESC and any liability of the Associations is the liability of the ESC.

In accordance with the ESC corporate governance rules, Associations, Working Groups and Councils have full independence with regards to all scientific and medical matters. However, it is the responsibility of the leadership of each group (i.e. Associations Presidents, Working Groups Chairs and Councils Chairs) of each to ensure transparency and legal oversight towards the ESC.

Policies

ESC Decision Making and Approval Process

- Any commitment should be approved in advance even if budgeted
- All contracts should go through a review process
- Expenses should be approved by a third party (no one can approve his/her own expenses)
- New and/or unplanned expenses should be approved by the group beforehand
- All new initiatives / projects should be approved by the Board based on a project Plan and are subject to Heart House feedback on feasibility and alignment with ESC strategy (even if funds are already available within the group).

ESC Declaration of Interest

Declarations of Interests (DOIs) are required annually from all persons who can influence ESC messages. These persons include all Board, Committee and Nucleus members of the ESC, its Associations, Working Groups and Councils, as well as Press Spokespersons and members of other groups who can influence ESC messages. Declarations are also mandatory for members of Guidelines Task Forces and Document Reviewer Groups (as well as members of expert writing committees or scientific task forces appointed by any of the constituent bodies of the ESC).

Since 2010, each year, the ESC requests volunteers to complete a DOI form online in My ESC, based on the previous year’s activities. The DOI form contains sections for both Financial and Position of Influence declarations. For the time being, the declarations made are not published (except in the case below).

Specific arrangements, however, apply for volunteers involved in the preparation of ESC Clinical Practice Guidelines. Dependent upon timing, additional DOIs may be required to be submitted for the current year at the beginning and/or end of the period during which the Guidelines are prepared (so that the full period of the guidelines preparation is covered by declarations). Additionally, these DOIs are systematically peer reviewed (following an established hierarchy), with potential conflicts of interest being formally identified, discussed amongst the persons reviewing the DOI concerned, requests for clarification or further information being made if applicable, and finally a decision made as to whether or not a conflict of interest does exist in the context of the Guidelines being prepared. A summary of the financial declarations for the experts involved (which does not contain information of the sums involved) is made available with the actual ESC Guidelines on the ESC website.

Finally, in a separate process, all speakers, chairpersons and poster presenters at ESC congresses and events are requested to make a declaration of interests on the first slide of their presentations, where they should disclose any potential conflict of interest.

ESC Corporate Identity Rules and Regulations – Endorsement of meetings and products

Requests for endorsement are subject to formal approval. The ESC Corporate Identity Rules and Regulations document is available from the EHH.
ESC Branding Guidelines

This document provides the rules about ESC logo usage. Each Association, Working Group and Council has got its own branding guidelines.

ESC Sponsorship Policy

The sponsorship policy provides an overall framework for the development of corporate relationships such as sponsorships or joint activities between the European Society of Cardiology (ESC) and commercial organisations and non-commercial organisations (external organisations). The ESC sponsorship policy documents are available from the EHH.

ESC Privacy and Data Security Policy

The ESC respects your privacy and is committed to protecting the confidentiality of your personal information. This policy explains how the ESC collects and uses Member and customer information, and how the ESC protects your privacy. It also explains how you can manage your own personal information held in the ESC system through ‘My ESC’ on the ESC Web Site. This policy applies to personal information held about individuals. It does not apply to information the ESC holds about companies and other organisations. This general policy is in addition to any specific policies concerning specific products or services. It may be amended at any time. The ESC Privacy and Data Security Policy is available on request.

Sub-specialty position paper / statement / expert consensus publication process

For any position paper / statement / expert consensus document, compliance to a specific publication process is required. The process begins by submitting a formal request to the ESC Specialty Centre and the ESC Committee for Practice Guidelines.

Travel and meetings Policy

The purpose of the policy is:
- to provide ESC volunteers with rules for the reimbursement of travel and meeting expenses for ESC related activities
- to ensure transparency and compliance with the regulatory, fiscal and legal environment.

Travel Expenses Reimbursement Form

Legitimate and “real” expenses of volunteer professional members are reimbursed after claims have been approved by the Heart House and provided that they are supported by original receipts. The Travel Expenses Reimbursement Form should be submitted on the web through the MyESC platform and by post (a print-off of the My ESC travel expense claim).
ESC Code of Ethics

The ESC Code of Ethics includes the following:

ESC volunteers and employees must:

Be honest and ethical in their conduct, including ethical handling of actual or apparent conflicts of interest between personal and professional relationships.

Maintain the confidentiality of information entrusted to them by the ESC or its partners except when authorized or otherwise legally obliged to disclose.

Deal fairly with ESC partners, suppliers, competitors, volunteers, and employees.

Provide members with information that is accurate, completely objective, relevant, timely, and understandable.

Proactively promote ethical behavior as a responsible partner among peers in the work environment.

Protect and ensure the proper use of the Society’s assets.

Prohibit improper or fraudulent influence
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