

**Company number: 02940178**

**Charity number: 1039236**

**Written resolutions of The Intensive Care Society (“the Society”)**

**Date of Agreement: 12 October, 2026**

**The trustees of the Society propose that the resolution below is passed as an ordinary resolution.**

## **ORDINARY RESOLUTION**

*It is hereby resolved by way of ordinary resolution that the below Council Regulations of the Society on Professional Advisory Group (“PAG”) related definitions and rules about PAG Members of Council are hereby approved and adopted in substitution for and to the exclusion of all existing Council Regulations of the Society on PAG related definitions and rules about PAG Members of Council, in accordance with Article 11 of the Articles of Association of the Society.*

**Professional Advisory Group (“PAG”) related definitions and rules about PAG Members of Council which correspond with the Articles of the Society**

1. **PAG Member of Council** means a member of Council appointed in accordance with 1.1 – 1.8 and 2 below. (This definition applies to the use of this term in the Articles of the Society.)

The persons listed under paragraphs 1.1-1.8 shall be PAG Members of Council and shall be appointed in accordance with the rules about representatives of PAGs in the Council Regulations, including as set out in paragraph 2 below:

- 1.1 at least one and up to four persons from the SAS PAG;
- 1.2 at least one and up to four persons from the Resident Doctors PAG;
- 1.3 at least one and up to four persons from the Nurses PAG;
- 1.4 at least one and up to four persons from the Pharmacy PAG;
- 1.5 at least one and up to four persons from the Physiotherapists PAG;
- 1.6 at least one and up to four persons from the Advanced Practitioners PAG;
- 1.7 at least one and up to four persons from the Allied Healthcare Professionals PAG; and
- 1.8 five persons from the Consultant Intensivist PAG.

2. **List of PAGs and rules about the PAGs’ representation on Council**

### ***General Eligibility***

Representation as a PAG shall normally require a minimum membership threshold of 40 Society members. Where membership falls below this threshold, continued representation may be maintained at the discretion of Council (by approval of a simple majority). In all cases, representation must remain proportionate to the size of each profession within the Society membership and the Intensive Care workforce, and shall not give rise to an automatic entitlement to establish a separate PAG.

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### ***PAG representation on Council***

For the Consultant Intensivist PAG, its Chair, Deputy Chair and three additional deputies appointed by election of the Consultant Intensivist PAG will be automatically appointed to Council.

For each other PAG, the Chair of the PAG from time to time shall automatically be appointed to Council. Additional representation for each PAG on Council shall be determined as follows:

- If the professional category/categories which that PAG represents has 200 or more ICS Members eligible to vote (or such other number of ICS Members as the Council determines), the Deputy Chair of that PAG will also be automatically appointed to Council.
- If the professional category/categories which that PAG represents has 600 or more ICS Members, in addition to the Deputy Chair one further deputy, to be appointed by election of that PAG, will be automatically appointed to Council.
- If the professional category/categories which that PAG represents has more than 1200 ICS Members, in addition to the Deputy Chair two further deputies, to be appointed by election of that PAG, will be automatically appointed to Council.

Unless specified otherwise below, all proposed office holders for the role of Chair and Deputy Chair for each PAG must be submitted to the Executive Committee on behalf of Council for prior approval, following which the Chair and Deputy Chair will be voted in by the relevant PAG by simple majority vote.

For the avoidance of doubt, for the purposes of the definitions and rules about PAG Council Members set out herein, the “membership” means the ICS Members eligible to vote as defined under the Articles.

### ***Exceptions (including casual vacancies)***

If circumstances arise in relation to the composition of a PAG or Council that are not covered by these Regulations, the Executive Committee (further and subject to a recommendation of the Trustees) may, at its discretion, take such steps as it considers reasonable and appropriate to ensure that there is full PAG representation on Council. Such steps include (without limitation) to appoint any suitably qualified person to Council where deemed necessary to fill a casual vacancy arising. By way of example only, such circumstances may include where a member of a PAG or Council goes off on long-term sick or maternity leave during their term.

#### **2.1 Resident Doctors Professional Advisory Group (“Resident Doctors PAG”)**

The Resident Doctors Professional Advisory Group shall consist of at least 6 and up to 10 members elected by the membership. Two of the PAG members need not be holders of National Training Numbers in intensive care medicine if they demonstrate commitment to a career in intensive care medicine and meet the eligibility criteria set out in the definition of “**Resident Doctor**” given below at paragraph 3. These two spaces are not exclusively reserved. The Chair and Deputy Chair/(s) will be voted in by the PAG. Only PAG members with a National Training Number in intensive care will be eligible for the Chair or Deputy Chair positions.

#### **2.2 SAS Doctors Professional Advisory Group (“SAS PAG”)**

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The SAS Doctors Professional Advisory Group will consist of at least 6 and up to 10 members elected by the membership. The Chair and Deputy Chair(s) will be voted in by the PAG. Definition of **“SAS Doctor with an interest in intensive care medicine”/ “SAS Doctor”** given below at paragraph 3.

### **2.3 Nurses PAG**

The Nurses Professional Advisory Group will consist of at least 6 and up to 10 members elected by the membership. The Chair and Deputy Chair(s) will be voted in by the PAG. The term and status of **“Nurse”** is as defined and regulated by the Nursing and Midwifery Council.

### **2.4 Pharmacy PAG**

The Pharmacy Professional Advisory Group will consist of at least 6 and up to 10 members elected by the membership. The Chair and Deputy Chair(s) will be voted in by the Pharmacy PAG. The term and status of **“Pharmacist”** is as defined and regulated by the General Pharmaceutical Council. The Pharmacy PAG includes pharmacy technicians and pharmacy assistants.

### **2.5 Physiotherapists PAG**

The Physiotherapists Professional Advisory Group will consist of at least 6 and up to 10 members elected by the membership. The Chair and Deputy Chair(s) will be voted in by the Physiotherapists PAG. The term and status of **“Physiotherapist”** is as defined and regulated by the Health and Care Professions Council.

### **2.6 Advanced Practitioners PAG**

The Advanced Practitioners Professional Advisory Group will consist of at least 6 and up to 10 members elected by the membership. The Chair and Deputy Chair(s) will be voted in by the Advanced Practitioners PAG. The term and status of **“Advanced Practitioners”** is regulated via the practitioner’s primary profession which is generally nursing, physiotherapy or other healthcare professions as defined and regulated by the Nursing and Midwifery Council or the Health and Care Professions Council.

### **2.7 Allied Healthcare Professionals (“AHP”) PAG**

The AHP Professional Advisory Group will consist of up to two representatives of each of the Health and Care Professionals Councils regulated professions who do not otherwise have their own PAG. The Chair and Deputy Chair(s) will be voted in by the AHP PAG.

### **2.8 Consultant Intensivist (“CI”) PAG**

The CI Professional Advisory Group will consist of at least 6 and up to 10 members elected by the membership. The Chair and Deputy Chair(s) will be voted in by the CI PAG. The definition of **“Consultant Intensivist”** is given below.

## **3. Definitions related to the PAGs (as referenced in paragraph 2 above)**

### **“Resident Doctor”**

A medically qualified doctor who will normally be regulated by the General Medical Council, holds a current national training number and has been appointed to the UK higher speciality national training programme for intensive care medicine.

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Or a medically qualified doctor who will normally be regulated by the General Medical Council, holds a current national training number and can demonstrate commitment to a career in intensive care medicine. They must hold a national training number in a specialty that gives eligibility for application to higher specialty training in intensive care medicine (Acute Care Common Stem, Core Anaesthetic Training or Internal Medicine Training) or have successfully completed one of the above training programmes within the past two years.

**“Consultant Intensivist” member (Consultant with a specialist interest in Intensive Care Medicine)**

A medically qualified doctor who will normally be regulated by the General Medical Council and be on the Specialist Register who has a medical consultant contract and one or more daytime Direct Clinical Care Programmed Activities in Intensive Care Medicine (“ICM”) identified in their job plan, provided that he/she is not responsible for a second specialty at the same time as the ICM commitment.

**“SAS Doctor with an interest in intensive care medicine (ICM)” or “SAS Doctor”**

A medically qualified doctor who will normally be regulated by the General Medical Council and who has an SAS (Speciality, Specialists and Associate Specialist) contract with one or more daytime Direct Clinical Care Programmed Activities in ICM identified in their job plan, provided that he/she is not responsible for a second specialty at the same time as the ICM commitment. An ICS Member must hold one of the three SAS titles in order to join the PAG. Locally Employed Doctors with no current intention of returning to training are able to join the SAS category of membership and the SAS PAG.