

HIS Guidelines Committee – Terms of Reference 2019

1. Purpose

The Guidelines Committee (GC) is a standing committee of the Healthcare Infection Society (HIS) whose purpose is to make recommendations to HIS Council regarding the preparation and updating of clinical guidelines and guidance produced in accordance to NICE methodology, and in keeping with the strategic aims of the Society.

The Guidelines Committee is responsible for the overall monitoring and review of the working parties who produce guidelines and guidance.

Their role is to preserve and enhance the reputation of HIS as a producer of high quality, robust and relevant guidelines and guidance relating to healthcare-associated infections that will evidence and drive best clinical practice and promote patient safety.

2. Activities

- Establish and approve the HIS Guideline development strategy
- Approve and support the development of working parties for the production of NICE accredited guidelines and advice documents relating to IPC and nosocomial infections.
- Maintain the NICE methodology guide and NICE accreditation.
- Contribute to the reviewing and updating of all existing HIS guideline documents.
- Propose topics for new guidelines or advice documents.
- Facilitate and contribute to NICE, PHE and UK SMI consultations as required.
- Contribute to the planning of the scientific programme for the biannual HIS conference and also FIS conference (when it is hosted by HIS).
- Oversee the content of the consultations and working party pages of the HIS Website.
- Collaboration with the Journal of Hospital Infection to identify publications from working parties and grant recipients.
- Development of specialist advisory groups
- Oversight of research projects, e.g. prevalence surveys
- Regularly review outputs of Committee, including guidelines, supplements and other articles for JHI, recommendations to Council and funding and outcome of research awards

3. Responsible to

The Healthcare Infection Society Council.

4. Membership

4.1 Members

- **Chair:** A member of Council (ideally as a trustee, or as a co-opted member), appointed by Council for a three year term, which can be extended by Council by up to a further two years. Ideally the Chair will have experience of clinical guideline production and Grading of Recommendations, Assessment, Development and Evaluations (GRADE).
- **Vice-Chair:** Appointed by Council for a three year term, which can be extended by Council by up to a further two years. Represents the committee at Council if Chair is unable to attend. The Vice-Chair may succeed the Chair, if approved by HIS Council.

Members of the committee must represent the membership categories and professional roles of HIS members. Members should be drawn from the HIS current membership. Members should include at least one of the following:

- Consultant
- Trainee member
- Associate member
- Biomedical, Healthcare or Clinical scientist
- Member of the microbiological scientific research (academic or industrial) community
- JHI Editor-in-Chief (or another Editor of the JHI)
- Infection Control Nurse (where the Associate member does not have this professional role)
- The HIS Research and Development Manager will attend meetings as a Society representative. They do not have voting rights.

The minimum number of members shall be 12

4.2 Nominations

Nominations for membership of the committee will be sought via an open call to HIS members.

All nominees will be asked to declare potential conflicts of interest during the application process.

5. Terms of membership

Following an open call for members, or recommendations made by existing committee members, individual members will be recommended to Council by the Chair for an agreed time period of up to three years, which can be extended by two further terms of two years on the Chair's recommendation, if agreed by Council.

Individual members must be members of HIS in order to serve on the committee.

Any member of the group appointed is expected to attend 50% of meetings (including teleconferences) of the Committee annually unless agreed by the Chair of the Committee.

6. Meetings

6.1 Frequency of meetings

The Guidelines Committee will meet face-to-face every six months with work continuing between meetings by email and teleconference as and when required.

Normally there will be a teleconference in between each face-to-face meeting.

Additional business will be carried out electronically as far as possible. The Chair may convene additional meetings as they deem necessary.

6.2 Quorum

A quorum shall be 7 members

6.3 Agenda and papers

An agenda, along with documentation/information/reports supporting the items under discussion will be agreed with the Chair and circulated to members of the Guidelines Committee a minimum of seven (7) calendar days before a meeting by email. In the absence of return communication outlining errors in the delivery of email, the agenda and papers will be considered received by all parties unless otherwise notified.

It is essential that all papers are read and considered in advance of the meeting.

6.4 Minutes

Formal minutes recording the proceedings of meetings will be taken by the Research and Development Manager and distributed to the Chair for review within seven (7) calendar days of the meeting taking place. Final minutes will be circulated to all Committee members, and others in attendance, as close to three (3) calendar weeks after the meeting takes place as is practicable.

Minutes of the Guidelines Committee will be circulated by the Research and Development Manager.

7. Decision making

Where possible, a general consensus identified by the Chair of the Committee will be sufficient to consider a matter passed, rejected or deferred. Where consensus is not possible, all decisions will be made by a vote. Where an equity of votes occurs, the Chair may cast an additional vote to finalise the decision, or may defer the decision for later action.

8. Conflicts of interest

Members with a conflict of interest must absent themselves from the decision making. On the occasions where the Chair declares an interest, the chair of the committee will absent themselves from the decision making in that funding round and deputy chair will take the chair the meeting. Please refer to the HIS conflicts of interest policy for further information.

9. Reporting to Council and delegation of responsibility

9.1 HIS Council

The Guidelines Committee will report to the HIS Council on all matters related to their remit, and advise on the contribution of the Society's research funding activities to the greater Society strategy.

One member of the Guidelines Committee (usually the Chair or Vice-Chair is a member of HIS Council

The Guidelines Committee may make recommendations to Council regarding the organisation of new initiatives

The Guidelines Committee are delegated the responsibility to make decisions regarding guideline production and working parties. All decisions must be formally reported to Council during a meeting of Council.

The Chair of the Guidelines Committee will report verbally at Officer and Chairs teleconferences.

The Research and Development Manager is delegated authority to conduct the primary triage of Travel Grant applications, before passing on applications within scope that meet the Travel Grant selection criteria.

9.2 Annual General Meeting

The Chair of the Guidelines Committee will attend the Annual General Meeting of the Society held in November/December of each year to represent the Guidelines Committee. If this is not possible, a further member of the committee may be nominated to stand in their stead.

The terms of reference will be reviewed every two years.

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