

Purpose of committee/how it supports our mission

The clinical practice guidelines committee (the committee) makes a major contribution to The Renal Association's (RA) mission by ensuring it supports its members in delivering high quality care to improve lives. It is fundamental to the supporting statement 'Guidelines: Delivering evidence-based clinical practice guidelines to drive excellence in the care of patients with kidney disease'.

Accountability

The committee is a subcommittee of the clinical affairs committee and reports directly to it.

Responsibilities

- The committee undertakes programmes of work as directed by the chair in response to a brief provided by the clinical affairs committee
- The work includes continuous updating of the clinical practice guidelines posted on the association website. A rolling programme ensures revision of all guideline modules at intervals no greater than five years
- Preparing collaborative guidelines with other specialist societies. All new and revision guidelines should be prepared using the process outlined in the policy manual published on the website.
- All guidelines should follow the systems and processes to facilitate the continuation of NICE accreditation for guidelines produced
- This work ensures that patients are represented on each guideline development review group
- This work includes maintaining an archive of historic guidelines of the association
- The chair prepares written reports of the business of the committee for the clinical affairs committee, or delegates this task to a member of the committee
- The chair is responsible for keeping the committee's website area up to date with information about the current committee membership, minutes of committee meetings and other relevant documents
- The chair is responsible for keeping the membership of the association informed of the committee's activities through the website, RA monthly news, and other appropriate communication channels.

Membership

The committee comprises:

- The chair
- At least one elected member of the council
- President (ex officio)
- Clinical vice president (ex officio)
- Committee members to include the lead for each module of the association's clinical practice guidelines who is responsible for providing a new or an updated version of the guideline module during their term as lead
- Two representatives of the BAPN
- Chair, British Transplant Society guidelines committee
- Patient representative
- Representative, the renal multidisciplinary team
- Representative, SpR club committee

Committee rules

- The role of chair is open to any member of the association in good standing and is advertised within the association via the RA monthly news
- Applications are reviewed and appointments made in accordance with the RA's equality and diversity statement
- The appointment is ratified by the trustees
- The appointments panel or the appointed chair may if thought appropriate, appoint a deputy chair to assist in the running of the committee
- The chair normally serves for three years plus an additional discretionary one year
- The chair is a member of the clinical affairs committee
- The chair is an invited member of the council as and when the agenda requires
- Committee membership is open to any member of the association in good standing and expressions of interest are sought via the RA monthly news
- Expressions of interest are reviewed and appointments made on the recommendation of the chair and in accordance with the RA's equality and diversity statement
- Committee membership is ratified by the governance and nominations committee

- Members of the committee usually serve for no more than three years, renewable for a second and final term of three years
- Members of the committee are expected to attend at least one committee meeting annually and contribute actively to the work of the committee as required by the chair
- The committee meets at least once a year; in addition committee business is maintained using e-mail and telephone communications between meetings
- The chair prepares written reports of the business of the committee for the clinical affairs committee and the RA council, or delegates this task to a secretary chosen from the committee membership
- To be quorate the committee must have a minimum of the chair or deputy chair who chairs the meeting and 50% of the committee's membership
- Any member not attending two consecutive meetings or seconding a deputy to represent them at the meeting may be replaced at the discretion of the chair
- Decisions are taken in the same way as dictated in the Articles for the board
- The committee is supported by the CEO and staff and agendas are agreed by the chair and circulated at least two weeks before the meeting
- Other papers are circulated a week before the meeting
- Minutes are taken and kept in the archive.

Task and finish groups

The committee may establish task and finish groups or subcommittees with the appropriate membership to execute its responsibilities while maintaining responsibility and monitoring progress, quality and cost.

Key objectives

2019

2020

2021

Risk management

Risks to achieving the key objectives are escalated to the CEO and staff who inform appropriate trustees and record them on the corporate risk register.

Date agreed

4 February 2019

Date reviewed

4 February 2019

Corporate sponsorship

To be confirmed