

Date and Time:	16 th June 2010 (10.00am-4.00pm)
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Minutes:	
Guideline Development Group Meeting	Spasticity in Children and Young People – meeting 1
Place:	RCOG
GDG present:	Paul Eunson (PE) Liz Barnes (LB) Lucinda Carr (LC) Stephanie Cawker (SC) Elspeth Dixon (ED) Christina Gericke (CG) Alec Musson (AM) James Robb (JR) Trudy Ward (TW) Jane Williams (JW)
NCC-WCH staff in attendance:	Shona Burman-Roy (SBR) Lauren Bardisa-Ezcurra (LBE) Juliet Kenny (JK) Wendy Riches (WR) Stephen Murphy (SM) Zosia Beckles (ZB) – PM only
NICE Staff:	Sue Latchem (SL)
Observers:	N/A
Invited speaker:	Barbara Meredith (Patient and Public Involvement Program)
Apologies:	N/A

Notes

Welcome and introductions, apologies, housekeeping

PE welcomed everyone to the first Spasticity in Children and Young People GDG. PE asked all present to introduce themselves and explain their role in the guideline development group. PE explained housekeeping procedures for GDG meetings.

Chair's introduction to NICE processes and being a GDG member

PE gave presentation on important aspects of NICE processes including scheduling and attendance, publications, confidentiality and declarations of interest. He explained that GDG member's declarations of interest would be renewed at each meeting and worked through difference scenarios where confidentiality/Dols may arise. SL contributed to discussion and gave further advice.

SM spoke briefly on the same topic and encouraged the group to feel at ease with methodology and policies as they were designed to protect the GDG and the integrity of the guideline.

JK reminded the group about expenses policies and gave information about where resources and policy documents could be accessed via the website.

Declarations of Interests

PE asked all present to state whether they had any new interests to declare. PE, ED, SC, JW all declared new interests.

- **PE**
 - What was declared?
PE declared that he had written two chapters for a textbook on the use of ITB for the purposes of educating healthcare professionals. He also reiterated to the group that he was formally part of but has now resigned from the Medtronic European Working Group on the same subject.
 - Is it a conflict? Why?
PE did not receive any financial reward for the chapters he wrote; this was therefore considered to be a personal non-pecuniary interest. His contribution to the European Working Group had in the past been a non-personal pecuniary interest but as he had not received funding in the last 12 months, it was now a personal non-pecuniary interest. Neither was considered to be a conflict of interest.
 - Did the GDG member have to leave the room?
No

- **SC**
 - What was declared?
Declared that she had attended a training session along organised by Ipson where she and another member of her team gave a lecture about updates in use of physiotherapy in the management of children with cerebral palsy. Her department received £300 payment for her work.
 - Is it a conflict? Why?
As the funding went directly to her department this was a non-personal pecuniary interest and therefore not considered a conflict.
 - Did the GDG member have to leave the room?
No

Icebreaking exercise

The group completed a brief icebreaking exercise

BM gave a presentation explaining the role of Patient and Public Involvement (PPIP) in guideline development

PE gave presentation on the scope, key terms and topic groups

- Gave overview of scoping process and amendments requested by stakeholders
- Discussed key terms to be used in guidelines and how decisions to use them had been made
- Suggested topic group membership
- Discussion followed

LBE gave presentation on the guideline review questions

- Reported to group feedback received from GDG prior to the meeting
- Discussion followed

SBR gave presentation on the guideline development process using an example from question 3 – Oral drugs

- ZB explained search strategies
- SBR explained how papers are weeded and data extracted

- SBR explained how papers were rated in terms of GRADE
- SBR explained how to develop translations and recommendations from the evidence and GDG consensus
- Discussion followed

SM gave presentation about what to do when there is no evidence

SBR lead discussion about the Oral Medications and ITB bolus protocols

PE revised topic group membership in light of the day's discussions and outlined work following meeting

There was no time to give feedback on the icebreaking exercise so this was rescheduled for GDG2

**Next meeting 21th July Royal College of Gynaecologists and Obstetricians (RCOG)
10.00am-4.00pm**