

**Canadian Neurological Sciences Federation (CNSF)
Clinical Practice Guidelines Committee (CPGC)
Terms of Reference**

Background:

In June 2010, the CNSF Board of Directors created a Clinical Practice Guidelines Committee (CPGC) to develop recommendations on how to deal with requests to endorse best-practice guidelines. In November 2010, the CPGC affirmed that the endorsement of Clinical Practice Guidelines (CPG) is an appropriate role for the CNSF and approved a set of criteria and processes that had been drafted based on the principles and policies developed by the Canadian Stroke Network for its "Stroke Strategy". The CNSF Board of Directors subsequently approved these criteria and procedures on November 24, 2010.

Committee Purpose:

- The purpose of the Clinical Practice Guidelines Committee is to encourage and support the development and implementation of best-practice guidelines by other groups such as the Affiliate Societies and, if requested, to consider the endorsement of these guidelines.
- The CPGC will also assist in the dissemination of these guidelines within the membership of the CNSF, considering the applicability of specific guidelines to the Canadian practice context.
- The CPGC will also consider for endorsement guidelines developed by organizations external to the CNSF if the guideline is deemed important and applicable to the Canadian practice context. Guideline review and endorsement will occur in accordance with procedures outlined in the CPGC processes document (separate to this document).

Committee Membership:

The committee will consist of:

- The Committee Chair and Vice-Chair.
- One representative from each of the CNSF constituent Societies, ideally selected because of her/his expertise or interest in practice guidelines development;
- The CNSF Resident representatives.
- The CNSF President and/or one Vice President
- The CNSF CEO
- Associate Society representatives: one each from the Canadian Association of Neuroscience Nurses (CANN) and the Canadian Association of Physical Medicine and Rehabilitation (CAPMR), preferably individuals with expertise or interest in practice guidelines development; these individuals will be appointed on an ad hoc basis
- Affiliate Society representatives: When the CPGC is reviewing Guidelines submitted for endorsement by the CNSF, two representatives of Affiliate Societies not involved in the CPG under consideration for endorsement may be appointed to the committee *ad hoc*;
- At the Chair's discretion, special review committees consisting of Society members with particular expertise may be established to review specific guidelines; such a review committee would be separate from the core CPGC and report its findings to the CPGC. Such *ad hoc* appointments would be made in consultation with the President of the Society and the Society's regular representative on the CPG Committee to optimize expertise on special review committees. Conflicts of interest between CPGC members or special review committee members will be carefully considered, and committee membership will be altered accordingly.

Committee Chair and Vice Chair:

Appointed by the CNSF Board of Directors.

Committee Accountability/Authority:

The CPGC is accountable to the CNSF Board, to whom it must report at least once yearly. The committee must outline any anticipated initiatives and financial expenditures for the year and present them to the board for approval before the budget is set for the next year.

Committee Responsibilities:

- Consider for endorsement Clinical Practice Guidelines that have been prepared by inter-professional groups of sub-specialized neurologists, neurosurgeons and/or other clinical neuroscience practitioners in accordance with current evidence-based criteria for the preparation of guidelines.
- Publish its current criteria for approving clinical practice on the CNSF web-site and review its criteria and processes at least every two years;
- Consult with appropriate specialists to support the effective implementation of new policies and practices through strategies of "knowledge transfer" that include the rationale for the recommendation, key health system implications, standardized performance measures to evaluate implementation and a summary of the supporting evidence to ensure that the best-practice guidelines endorsed by the CNSF have their optimum impact;
- Encourage the submission of CNSF-endorsed guidelines for publication in either the Canadian Medical Association Journal (CMAJ) or the Canadian Journal of Neurological Sciences (CJNS) in both English and in French to promote the widest possible distribution of endorsed practice guidelines to Canadian practitioners and policy-makers;
- Consult annually with the professional group (usually one of the Affiliate Societies) that originally submitted the guidelines to determine if there is a need for revisions to ensure that the recommendations endorsed by the CNSF are kept up-to-date.
- Review periodically the processes followed to consider submitted practice guidelines for endorsement as well as the role of the CNSF in guidelines development.

Conflicts of Interest:

Prior to beginning the review of proposed Clinical Practice Guidelines, each committee member will be asked to declare that s/he has no conflict of interest concerning the submitted document. In situations where a committee member has had significant involvement in the preparation of the document, she/he will be excused from the review process.

Terms of Appointments:

On the recommendation of their Societies, the CNSF Board of Directors will appoint members for terms of two years and reconfirm these appointments annually.

Meeting Frequency and Recording:

- The CPG Committee will meet a minimum of twice per year. The Chair may call additional meetings, as required.
- Minutes of meetings will be recorded by a member of the committee and will be submitted to the CNSF Secretariat Office for distribution to committee members.
- The committee will submit a written report to the CNSF Board of Directors at the June and November board meetings.