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<td>Guidelines Committee Chair</td>
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<td>Daniela Filipescu</td>
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<tr>
<td>Past President of the ESA</td>
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<tr>
<td>Amaury van Kesteren</td>
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<tr>
<td>Quality Manager</td>
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<td><strong>Approved by</strong></td>
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<td>Zeev Goldik</td>
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<td>President of the ESA, on behalf of the ESA Board of Directors</td>
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| **Relevant regulations / legislation / guidelines / references** | 1* To streamline the guideline challenge - The European Society of Anaesthesiology policy on guidelines: Eur J Anaesthesiol 2016; 33:1–6  
2* POL_NOM_01_NC nominations committee policy  
3* SOP_ADM_01 activity reporting procedure  
4* POL_FIN_02 Reimbursement Policy  
5* POL_ADM_04 Conflict of Interest Policy |
| **Change History**                                                                                                                                                                                       |
| **Date** | **Version** | **Change Details**                                                                                                                                  |
| 24FEB2010 | 1.0 | First version                                                                                                                                         |
| DEC2013 | 2.0 | Total term of office = 7.5 years                                                                                                                    |
| MAR2014 | 3.0 | Reimbursement of task force members deleted                                                                                                          |
| JUN2014 | 4.0 | Deleted all description to appointments and refer to Nom. Com. Pol. instead                                                                     |
| DEC2014 | 5.0 | SSC members agree to perform reviews for EJA upon request. Refusals to review will be investigated and followed up on by SSC chairs.        |
| 14JUN2017 | 6.0 | Formatted to fit quality document template. Chair responsibilities added: committee website and e-news, Newsletter contribution, budget due by June |
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1) Introduction, Purpose and Scope of the Committee

The European Society of Anaesthesiology has been strongly supporting the development of high-quality, evidence-based guidelines as a tool to harmonise and improve clinical practice in anaesthesiology (that in the definition of ESA includes intensive care, critical emergency and perioperative medicine as well as pain therapy) throughout Europe.

ESA, through the Guideline Committee (GC), encourages and supports the development of Guidelines that best fulfil clinicians’ expectations and needs.

2) Activities of the Committee

The Guidelines Committee fulfils the following functions:

- Defines the requirements and the course of action for an ESA guideline
- Oversees the process of identification and prioritisation of topics and preparation, dissemination, evaluation and finally update of ESA guidelines
- Is responsible for the selection of ESA Guidelines Task forces
- Establishes and maintains relationships with other academic societies and scientific groups deemed necessary in the preparation of collaborative guidelines
- Defines how to implement guidelines and to inform ESA members
- Carries out other functions related to the promotion and harmonisation of clinical practices as decided by the ESA Board.

By June 30th, the Guidelines Chair shall submit the budget proposal for the following year for approval by the ESA Board of Directors. The annual budget will be set at an appropriate level to fund activities of the Guidelines Committee. Chair

The Chair of the Guidelines Committee reports to the Board of Directors. Written reports will be presented to the Board and Council twice a year (September and April) following the activity reporting procedure (ref. 3*). The template of the reports is attached (ADM_01_F2 template committee activities report).

The Chair is responsible for the content published on the ESA Guidelines Committee website and updates sent as e-news to ESA members.

The Guidelines Committee will support the ESA e-Newsletter by annually publishing at least one article on the Committee’s activities.

a. Processes of the Guidelines Committee

The process of guideline development is set out in “GUI_02_F1: Guideline production process for new guidelines”, and explained in the Editorial “To streamline the guideline challenge. The
Each year, suggestions for possible guideline topics will be invited from all Scientific Subcommittees and National Scientific Societies through the National Anaesthesiologists Societies Committee (NASC), but ESA members, Council, the NASC, the Board and the Scientific Committee can contribute. These will be collected by the chair of the Guidelines Committee. The Guidelines Committee will consider them and produce recommendations for approval by the Board.

The Chair of the Guidelines Committee will report in writing to the ESA Board on guidelines progress every three months. Informal updates will be available at any time.

b. Organisation and administration of the ESA Guidelines Task Forces

An initial consultation of a steering group of few experts in the domain of clinical practice guidelines (CPG) will preliminary evaluate the project. Once a guideline topic has been approved, open vacancy announcement will be published on the ESA website and e-news inviting interested individuals to apply. The applications will be evaluated by the Guidelines Committee, according to a number of criteria (GUI_02_F3 task force application evaluation system), which will be scored (GUI_02_F2 task force application form) by the Guidelines Committee’s members.

Each ESA Guidelines Task Force will produce a guideline according to the scope and budget agreed between the Guidelines Committee and the Chair of the Task Force.

Structure of the ESA Guidelines Task Force

Each Task Force will have a core group, which will be invited to Task Force meetings, and reimbursed according to ESA policy (ref. 4*), but can also have a larger Advisory group, which will correspond electronically. The number of members of the core group will vary according to the expected complexity and scope of the guideline, but will usually be between 6 and 10, and all are expected to be ESA members in good standing. An exception to this rule can be the person(s) in charge of locating, collecting and appraising the literature on behalf of the Task Force.

In each task force a methodologist should be present. If not within the task force, an external methodologist should be identified.

From time to time, Task Forces in conjunction with other organisations (EBA, or other Scientific Societies) might be deemed necessary. In this case, the above procedures apply only to the members affiliated to ESA.
The European Board of Anaesthesiology (EBA) shall be invited to nominate 1 or 2 representatives in the Advisory group of each Task Force.

The International Federation of Nurse Anaesthetist (IFNA) shall be invited to nominate 1 representative in the Advisory group of each Task Force depending on the subject of the guideline.

c. Appointment of chair of Task Force

Members of each Task Force will be invited to decide on a Chair amongst themselves. If necessary, a nomination can be made by the Guidelines Committee. Whichever is the case, the nomination will have to be approved by the Guidelines Committee, which retains the right to invite specific members onto either core Task Force or Advisory panel.

The role of the chair of each guideline Task Force is:

- To work with the Guidelines Committee to scope the work required and set a budget and timescale.
- To take overall responsibility for the production of the guideline, within the timescale and budget agreed. Anticipated variations from the agreed schedules should be discussed as soon as possible with the Chair of the Guidelines Committee.
- To set dates and agendas for meetings of the task forces, and chair those meetings personally or else arrange for a deputy.
- To ensure that the views of all relevant stakeholders are represented in the guideline production process. This may include physicians in other specialties, non-medical staff and patient representatives.
- To ensure that the guideline production process is transparent and auditable.
- To liaise with National Societies of Anaesthesiology and Specialist Societies as required during the guideline production process.
- To oversee the searching for, and appraisal of research evidence and to ensure that the evidence is taken into account in the final guideline, following well established methodological requirements and tools.
- To draft the guideline, making sure, where evidence is lacking or ambivalent, that expert opinion is clearly presented as such. To ensure that comments on the draft and suggestions for improvement are considered.
- To manage, by negotiation and mediation as necessary, potential difficulties between members of the working group.
- To produce brief written reports on progress to the Guidelines Committee every 3 months, for forwarding to the ESA Board. We also expect more frequent informal contact with the chair of the Guidelines Committee as appropriate to the status of the work as it develops. The Chair of the Guidelines Committee will circulate progress reports to the members of the Committee.

d. Acknowledgement of the ESA
e. Benefits to ESA members of ESA Guidelines Committee activities

- To make available a European guideline to be used by individual ESA members and adopted, with any desired modifications, by national societies of anaesthesiology for their own national use, if they so wish.
- Harmonisation of clinical management of anaesthesia, peri-operative medicine, intensive care medicine, critical emergency medicine and pain medicine throughout Europe.
- Improvement of standards of care throughout Europe.

3) Structure of the Committee

a. Positions

The Chair of the Guidelines Committee reports to the ESA Board. All members of the Guidelines Committee are expected to be ESA Members in good standing.

The Guidelines Committee comprises of:
- Chair of the Guidelines Committee
- Members:
  - Past-chair of the Guidelines Committee (for 18 months)
  - Chair of the Scientific Committee
  - NASC Chair
  - A representative of the European Board of Anaesthesiology
  - 3 appointed members
  - ESA Secretariat staff in charge of the Guidelines Committee

The Guidelines Committee Chair makes proposals for changes in the number of appointed members to the ESA Board and regularly refers to them for consideration and approval of all important items. The Committee may also co-opt further additional members, whether experts in the field or, for instance, the Editor of the European Journal of Anaesthesiology, as necessary, and if approved by the ESA Board of Directors.

b. Voting Rights

All members sitting on the committee except the ESA Secretariat ESA Secretariat staff in charge of the Guidelines Committee have voting rights. ESA Secretariat staff in charge of the Guidelines Committee has advisory and administrative roles.
c. Terms of Office

The term of office of Guidelines Committee Chair is three years. For continuity of the activities, the Past-Chair will remain a member of the Committee for one and a half after the end of his/her term as Chair.

The term of office for the Members of the Guidelines Committee is three years renewable twice for one year for a total of five years. The tacit annual renewal of the term following the first three years term can be discontinued if the contribution is deemed insufficient, or in case of repeated absences at meetings, repeated failure to undertake appointed tasks or answer communications over a prolonged period. In such cases, the Chair of the Committee can decide to dismiss that Committee member with the approval of the ESA Board.

Committee members can apply for the Chair position no later than at the end of their third year. The total aggregated uninterrupted term of office must not exceed seven and a half years (member+ Chair+ Past Chair).

For members representing other organisations (IFNA, EBA), the same terms of office apply.

Members of the Guidelines Committee must resign from the Committee one year after retiring from active work.

4) Appointment Process

The ESA Secretariat staff in charge of the Guidelines Committee is responsible for keeping a record of the committee membership, informing the Chair about the end of term of different members and future vacancies and communicating all changes to the Media Committee and Communication Specialist for updating the ESA website.

a. Chair of the Guidelines Committee

The appointment process is described in the ESA Nominations Committee Policy (ref. 2*). The Chair of the ESA Guidelines Committee must have been an active member for at least the last two years before application. The criteria published in the Chair vacancy will include the general criteria and scoring criteria outlined in the Nominations Policy.

b. Appointed Members

The appointment process of the Guidelines Committee Members is described in the ESA Nominations Committee Policy (ref. 2*). ESA membership for at least one year is required before application to Guidelines Committee member position.
The criteria published in the member vacancy will include the general criteria and scoring criteria outlined in the Nominations Policy.
The prime qualifications for membership are ability, knowledge and enthusiasm.

5) Meetings

The Guidelines Committee is convened as necessary by the Chair. Meetings are usually twice yearly, one meeting during the annual prioritisation process (usually February/early March) and the other at Euroanaesthesia. The Chair may propose to have an additional planned meeting pending ESA Board budget approval. Other meetings are encouraged as teleconferences.

Standard committee procedures are followed, with agenda and minutes recorded (ref. 3* and ADM_01_F1 template meeting minutes).
The minutes of each meeting of the Guidelines Committee are written and kept by the Secretariat staff in charge of the committee and are validated by the Chair after accepting amendments from meeting participants. The final minutes are approved by the Committee at its next meeting.
The minutes are the responsibility of the Chair.

6) Reimbursement Policy

Travel costs for Guidelines Committee members to attend Guidelines Committee related activities will be reimbursed according to the Reimbursement Policy (ref. 4*).
For the Task Forces’ meetings, the Chair of the Task Force needs to clarify after consultations with the Chair and the Secretariat staff in charge of the Guideline Committee on the issue of attendance. Indeed, it has to be clearly mandated who within each guideline group is entitled to join a meeting or a whether a meeting is to take place in the first place. As a general rule, only under exceptional circumstances and if budget allows, are meetings to take place.
In case of ESA/EBA Task Force meetings, they will take place in ESA headquarter and if not, the costs should be split with EBA.
For ESA members of Task Forces, ESA will provide reimbursement for accommodation and transportation.
For EBA members of Task Forces, ESA does not provide any reimbursement.
For advisory Groups to task forces, ESA does not provide any reimbursement and indeed these members are as a general rule only to be consulted electronically.

7) Conflicts of Interest

Any person who sits in the Guidelines Committee should annually declare any relationship or arrangement with a commercial company, direct or indirect, that could be reasonably considered to affect the work in the Guidelines Committee. This includes, but is not limited to, financial relationships, advisory positions, receipt of grants/research supports, receipt of honoraria or consultation fees, participation in a company sponsored speaker’s bureau, stock shareholder, and spouse/partner financial relationships with a commercial company. Conflict of interest within
the Task Forces must be clearly stated on a specific COI form by members on appointment and recorded in the final guideline document if applicable.
Please refer to the Conflicts of Interest Policy (ref. 5*) and the COI form (COI_01_F1 COI disclosure form).

8) Appendices

GUI_02_F1 Guideline production process for new guidelines
GUI_02_F2 Task force application form
GUI_02_F3 Task force application evaluation system
ADM_01_F2 template committee activities report
ADM_01_F1 template meeting minutes
ADM_04_F1 COI disclosure form