

**Infection Prevention and Control of Healthcare Associated Infections in Primary
 and Community Care**

National Clinical Guideline Centre for Acute and Chronic Conditions

1st Guideline Development Group Meeting – Day 1

Date and Time: 17th March, 10:30 – 17.15

Place: *National Clinical Guideline Centre, Regent's Place, 4th Floor, 338
 Euston Road, London, NW1 4BT*

GDG Present:

Carol Pellowe (Chair) (CP)	(Present for agenda items 1–13)
Elizabeth Gibbs (EG)	(Present for agenda items 1–13)
Graham Tanner (GT)	(Present for agenda items 1–13)
Michael Nevill (MN)	(Present for agenda items 1–13)
Eugenia Lee (EL)	(Present for agenda items 1–13)
Brian Pullen (BP)	(Present for agenda items 1–13)
Sally Stucke (SS)	(Present for agenda items 1–13)
Godfrey Smith (GS)	(Present for agenda items 1–13)
Sue Wright (SW)	(Present for agenda items 1–13)
Julian Spinks (JS)	(Present for agenda items 8–13)

NCGC Present:

Nina Balachander (NB)	(Present for agenda items 1–13)
Jennifer Hill (JH)	(Present for agenda items 1–13)
David Wonderling (DW)	(Present for agenda items 1–13)
Lee-Yee Chong (LYC)	(Present for agenda items 1–13)
Sarah Riley (SR)	(Present for agenda items 1–13)
Sarah Bermingham (SB)	(Present for agenda items 1–13)

In attendance:

NICE Staff: NICE attendee 1	Sarah Dunsdon (SD)	(Present for notes 1–13) (Present for notes 1–8)
NICE attendee 1	Barbara Meredith (BM)	

Observers:

NCGC Project Coordinator	Abigail Jones	Present for notes (1-4)
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Agenda Item:

1. **Introductions and Apologies for Absence:** CP welcomed the group to day 1 of the first meeting of this GDG. Apologies were received from (GDG members *Ellie Hayter and Zara Head and Joanna Ashe from the NCGC*). All members introduced themselves and their backgrounds.

2. **Composition of Guideline Development Group:** CP gave a presentation explaining the role of GDG members in the guideline development process. CP explained that anyone who hadn't completed and returned the acceptance, availability and contact details needed to do so as soon as possible and return the forms to NB

CP gave a presentation on declarations of interest (DOI) and explained how important it is for transparency and credibility of the guideline. CP reminded GDG members to complete

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the DOI forms in their packs and hand completed forms to NB them to by the end of the meeting. CP also explained that GDG members are required at each meeting to declare their interests verbally. Each GDG member declared his/her interests in front of all those present.

CP asked all GDG members to declare any relevant conflicts of interest. All declared that they knew of no personal specific, personal non-specific, non-personal specific or non-personal non-specific interest in the development of this guideline.

- 3 **NCGC, Overview and Working Practices:** JH introduced the National Clinical Guidelines Centre and the technical team who will be working on the Infection Prevention and Control guideline. She explained what is expected of the GDG members and how they will be working with the technical team during the guideline development process.
- 4 **Overview of Guideline Development Process:** NB presented an overview of the guideline development process, the work plan, key stages and dates from the 1st meeting to publication and launch of the guideline.
- 5 **Relationship with NICE and the Guideline Development Process:** SD gave a presentation on 'Relationship with NICE and the Guideline Development Process' which included an overview of NICE and the collaborating centres, the guideline products and launch and implementation of the guideline
- 6 **Role of patient/carer members:** BM explained Patient/carer involvement in the guideline development process including patient perspectives, additional opportunities for patient/carer input to NICE guidelines and initial concerns for this guideline.
- 7 **History of Infection prevention and Control Guideline:** NB gave a presentation on the history of the guideline.
- 8 **Outline of Scope and Recommendations from Previous Guideline:** CP gave a presentation on the guideline scope and notified the group that they had a list of recommendations from the previous guideline in their packs.
- 9 **Introduction to review questions, outcomes and definition of terms:** NB gave a presentation on defining clinical questions in a NICE guideline and explained the different types of questions and how to formulate a PICO question.
- 10 **Using health economic evidence in guideline:** DW presented 'The role of health economics in NICE guideline development' where he outlined the use of health economic evidence in NICE guidelines and explained some of the concepts in cost-effectiveness analysis. The GDG were asked to think about areas in the scope that should be prioritised for economic analysis.
- 11 **Discussion of Review Questions:** The GDG members were put into 3 groups to work on refining and defining the review questions.
- 12 All GDG members discussed the review questions and issues that may arise during the evidence review.

Close and date of the next meeting

- 13 *1st GDG – day 2*, Thursday 18th March, 9.30-15:30, at National Clinical Guideline Centre, Regent's Place, 4th Floor, 338 Euston Road, London, NW1 4BT

Infection Prevention and Control of Healthcare Associated Infections in Primary and Community Care

National Clinical Guideline Centre for Acute and Chronic Conditions

1st Guideline Development Group Meeting – Day 2

Date and Time: 18th March, 9.30 – 15.30

Place: National Clinical Guideline Centre, Regent's Place, 4th Floor, 338 Euston Road, London, NW1 4BT

GDG Present: Carol Pellowe (Chair) (CP) (Present for agenda items 1–8)
Elizabeth Gibbs (EG) (Present for agenda items 1–8)
Graham Tanner (GT) (Present for agenda items 1–8)
Michael Nevill (MN) (Present for agenda items 1–8)
Eugenia Lee (EL) (Present for agenda items 1–8)
Brian Pullen (BP) (Present for agenda items 1–8)
Sally Stucke (SS) (Present for agenda items 1–8)
Godfrey Smith (GS) (Present for agenda items 1–8)
Sue Wright (SW) (Present for agenda items 1–8)
Ellie Hayter (EH) (Present for agenda items 1–8)
Zara Head (ZH) (Present for agenda items 1-8)

NCGC Present: Nina Balachander (NB) (Present for agenda items 1–8)
Jennifer Hill (JH) (Present for agenda items 1–8)
David Wonderling (DW) (Present for agenda items 5-8)
Lee-Yee Chong (LYC) (Present for agenda items 5-8)
Sarah Riley (SR) (Present for agenda items 1–8)
Sarah Bermingham (SB) (Present for agenda items 1–8)
Lina Guilhane (LG) (Present for agenda items 1-4)

In attendance:

NICE Staff: None		
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Observers:

None		
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3. **Introductions and Apologies for Absence:** CP welcomed the group to day 1 of the first meeting of this GDG. Apologies were received from (GDG member *Julian Spinks, Joanna Ashe from the NCGC and Sarah Dunsdon from NICE*). All members introduced themselves and their backgrounds.
4. **Introduction to Claromentis:** SR gave a presentation on how to use Claromentis for GDG members. This covered logging in and out, locating guideline documents and checking documents in and out. GDG members were advised to read the guidelines manual, especially the introduction and chapter on the scoping process.
- 3 **Literature Searching and Appraising the Literature:** LG presented an overview of the role of the information scientist, on behalf of Joanna Ashe.
- 13 **Guidelines, Decision Making and GRADE:** NB presented an overview of the GRADE

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process and how this effects decision making in the guideline process.

- 14 **Reporting Clinical Evidence and Economic Analysis:** NB presented an example of how a clinical review would normally be presented to the GDG, using an example of hand hygiene preparations.

SB presented an example of how economic analysis would normally be presented to the GDG, using an example of hand hygiene preparations.
The GDG discussed which clinical questions would be prioritised for economic modelling.

- 15 **Review Questions:** The GDG members were then put into 3 groups were they worked on inclusion and exclusion criteria for 3 clinical areas; hand hygiene, long term urinary catheters and vascular access devices.

- 16 **Allocation of Guideline Sections:** The GDG were then asked to volunteer to be allocated to different clinical areas specified in the scope. Three volunteers were sought for each clinical area.

- 17 **Any Other Business:** Prior to the close of the meeting, GDG members were asked to regularly check their emails and Claromentis to ensure they are up-to-date with the progress of the guideline. They were reminded to return any outstanding forms to NB or the project coordinator and to book all travel through the project coordinator.

Close and date of the next meeting

- 13 *2nd GDG*, 28th April, 10.30-16:30, at 180 Great Portland St