

Department of Obstetrics and Gynaecology

Maternity Clinical Guidelines Committee

Terms of Reference

Aims:

1. To ensure that new or updated guidelines or departmental material developed for use within this Directorate are of high standard, referenced, multi-disciplinary and, wherever possible, evidence-based.
2. To co-ordinate and develop patient information, in accordance with the NNUH NHS Foundation Trust Patient Information Guidelines, as recommended by the Patient Information Forum.

Functions of the group:

1. To develop high quality, multi-disciplinary clinical guidelines and departmental material for use within the Directorate, ensuring that these are evidence-based wherever possible. These guidelines should be easy to read and understand and use a minimum font size of 12 point using a style such as "Arial" is suggested. The style of the guidelines would normally be expected to follow a template similar to that used elsewhere in the Trust.
2. To ensure that these guidelines are ratified by representatives of both the medical and midwifery/nursing teams. The ratification process is by consensus agreement on the guideline content by the committee members and, when necessary, by action on the part of the chair (where consensus cannot be reached, but there is a majority view). Meetings will be chaired by the Maternity Clinical Guidelines Chair or a designated/nominated Consultant Obstetrician in his absence.

Patient information leaflets, when ready, produced by the author, or requested, will be sent to the patient information forum/MVP for lay comment and suggestions prior to discussion in the guidelines meeting. It will become standard procedure by the clinical effectiveness midwife to keep abreast of relevant patient information leaflets due for review and liaising with the lay MVP at least 1 month prior to review.

Predominantly midwifery based guidelines or patient information leaflets will be reviewed by the newly established 'Senior Midwifery Forum' at least 1 month before the meeting to enhance efficiency and to provide reassurance that there has been appropriate dissemination/agreement amongst the midwifery body. This group must consist of, as a minimum, clinical effectiveness midwife, band 8 midwives, practice development midwives, team leaders and any further interested midwifery colleagues who wish to review and comment.

All feedback and amendments are to be made by the author and sent to the Maternity Clinical Guidelines Chair and clinical effectiveness midwife a minimum of 1 week prior to the guidelines meeting. If this process is not followed, the guideline or patient information leaflet will not be placed on the agenda.

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3. All meetings will be minuted and the minutes agreed at the beginning of the subsequent meeting. These minutes are accessible through the Trust's 'Trustdocs' page of the website.
4. To ensure that guidelines are regularly reviewed, no less frequently than every three years, and that superseded guidelines are safely archived for future reference. The guidelines will be dated from that time they are agreed by the committee, and a commitment to review the guideline within three years by the named author or nominee made explicit by the review date specified in the agreed guideline.

Once old guidelines have been superseded by updated versions, it is the responsibility of the committee Chair to ensure that they are safely archived. An electronic database of old guidelines was started in May 2008 and is on the hospital 'H' drive. Access is restricted under the Trust policy 'Access to Trust IT systems'.

5. To ensure that approved guidelines are available to all staff through 'Trustdocs' and the departmental website which links into the Trust Intranet.
6. To assess the suitability of adopting/adapting national clinical guidelines from NICE, RCOG etc. for use within the Directorate. Wherever possible, national guidance such as this should be adapted for local use and should, at the very least, be referenced in any locally-developed guideline.
7. When appropriate, to advise, and take advice from, the O & G Risk Management Committee, the Maternity Voices Partnership, the lead for Clinical Governance and the Practice Development group in matters relating to the development and implementation of clinical guidelines for use within the Directorate. Advice should also be sought from other relevant specialities such as anaesthesia, neonatology, haematology, radiology etc.
8. To feedback developments to the Chair of the Trust Clinical Safety and Effectiveness Committee
9. To develop high quality information for patients, using the guidelines agreed by the Patient Information Forum.
10. To develop procedure specific consent forms.

Meetings and committee members:

1. Meetings will be held monthly and only cancelled or re-scheduled in extreme circumstances
2. Extraordinary meetings may be called occasionally at the discretion of the Chair
3. During the writing of new or review of pre-existing guidelines/patient information leaflets, they will be sent out to relevant bodies and associate specialities in advance of the meeting in which they are to be discussed, for comments and changes to be made.
4. Committee members must represent a cross section of the Directorate's services, and will include consultants in obstetrics and gynaecology, junior doctors, nurses, midwives, managers – as well as representatives from anaesthetics and neonatology if relevant documents are to be discussed. For patient information documents, the Patient Information Forum and the MVP will be consulted.

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5. New/revised guidelines and patient information leaflets will be sent out for consultation to all members of the guidelines committee one week prior to the meeting wherever possible. This enables members who are unable to attend the meeting to still make comments.
6. Members can be co-opted at the discretion of the Chair.
7. A quorum will consist of a minimum of five members (including the Chair). An attendance list will be kept.

References:

Royal College of Anaesthetists, Royal College of Midwives, Royal College of Obstetricians and Gynaecologists, Royal College of Paediatrics and Child Health 2007. Safer Childbirth: Minimum Standards for the Organisation and Delivery of Care in Labour. London. RCOG Press. Available at www.rcog.org.uk