

Terms of Reference

Guideline Development Group

Responsibilities

Members of the Guideline Development Group (GDG):

- a. Agree on the scope; identify the criteria for inclusion and exclusion of questions.
- b. Advise on literature searches and any developments relating to the review questions identified in the scope.
- c. Advise on issues or respond to issues raised by editors or topic group leads.
- d. Interpret and use the evidence to devise practical recommendations to cover most aspects of stroke management.
- e. Achieve an agreed consensus on clinical recommendations, and are collectively responsible for signing off on its recommendations.
- f. Ensure views of people affected by stroke are considered throughout the update of the guideline.
- g. Attend all scheduled GDG meetings, contribute constructively to meetings, and make a full commitment to the group and the tasks involved to update the guideline.
- h. Inform the GDG of any developments/changes within their areas of expertise which might influence or impact on the activities of the GDG or the update.
- i. Where members represent both a geographical region and a specialty or professional group, be prepared to consult with colleagues to ensure the widest possible range of views are considered.
- j. Maintain confidentiality around the content of discussions undertaken within the group.
- k. Actively promulgate the final guideline.

GDG Chair

Professor Martin James chairs the GDG by virtue of his role as Chair of the Intercollegiate Stroke Working Party (ICSWP), which sponsors the guideline. The role of the GDG Chair is to ensure the GDG functions effectively to achieve its aims. The Chair is responsible for ensuring that all GDG members are able to contribute fully to the process.

Meetings

GDG meetings take place remotely, over MS Teams unless otherwise stated. Meeting dates are agreed at the start of the project. Further or additional meetings may be arranged if necessary to enable the guideline project to be completed on time.

Meeting dates for 2023 edition:

- 14 October 2021; 11:00-13:00
- 13 January 2022; 10:30-13:00
- 7 April 2022; 10:00-13:00
- 18 May 2022; 10:00-13:00
- 7 July 2022; 10:30-16:00 (hybrid meeting)
- 25 November 2022; 10:00-13:00
- 16 February 2023; 10:00-13:00

Editors

There are four guideline editors, each responsible for a chapter of the guideline:

- Martin James (GDG Chair and clinical director of SSNAP), responsible for the chapter on long term management and secondary prevention
- Ajay Bhalla (associate clinical director of SSNAP), responsible for the chapter on acute care
- Rebecca Fisher (associate director of SSNAP), responsible for the chapter on organisation of stroke services
- Louise Clark (associate director of SSNAP), responsible for the chapter on rehabilitation and recovery.

Responsibilities

The role of a guideline editor is to oversee the review, drafting and editing process of the guideline and its final publication and dissemination. Each editor is assigned several topic groups to oversee; the topic areas and questions for which they are responsible are agreed with the Chair of the GDG.

Editors:

- a. Identify topic group leads for each of their topic groups and gain their agreement.
- b. Oversee all activities associated with their assigned topic groups. This should, wherever possible, include attending topic group evidence review meetings and monitoring consistency of approach.
- c. Liaise with the stroke guideline team regularly between meetings to ensure project deadlines are met.
- d. Review drafts and responses from assigned topic groups and evidence review meetings, and present these to the GDG in conjunction with the topic group leads.
- e. Inform the GDG of information from the topic group lead or the topic group on any studies, guidelines, large trials or Cochrane reviews that are underway or are imminent, and which are relevant to the guideline.
- f. Alert the GDG to any controversial recommendations or evidence to recommendations from their topic groups.
- g. Oversee the process for addressing consensus questions; manage the identification of other (grey) literature for review and coordinate sign off of draft recommendations with other topic group leads and groups within their chapter.

Topic group leads

Responsibilities

The role of the topic group lead is to lead the work of the specific topic group allocated to them by a guideline editor. Topic group leads:

- a. Identify members to join their topic group and gain their agreement.
- b. Ensure that their topic group includes representation from as wide a range as possible of professions and organisations with expertise on the research questions assigned to that topic group. An appropriate balance of gender, age and representation from across the UK and Ireland should also be sought.

- c. Where a topic is of particular relevance to people affected by stroke, ensure that their group contains one of the GDG patient voice representatives.
- d. Inform the topic editor of any studies, guidelines, large trials or Cochrane reviews that they or any members of their topic group are a part of, or that are imminent, and which are relevant to the guideline.
- e. Select papers to be reviewed from the abstract lists circulated. Where uncertainty occurs, agree with the topic editor regarding papers to be reviewed.
- f. Identify two external reviewers for each paper from among their topic group members, and inform the guideline project team. The stroke guideline team is responsible for distributing papers to those reviewers and collecting their evidence tables.
- g. Chair topic group evidence review meetings to discuss progress, papers reviewed, changes to recommendations, and/or participate in any meetings that are arranged by the stroke guideline team for their group.
- h. Alert the topic editor to any potentially controversial recommendations or evidence to recommendations from the group
- i. Draft the recommendations and evidence to recommendations following evidence review meetings, gathering sign off from the topic group.
- j. Present recommendations and evidence to recommendations from their topic group to the GDG and participate in GDG discussions on their topic area.
- k. Inform the topic editor of any issues relating to their topic groups, and escalate issues around returning evidence tables and abstract lists with the stroke guideline team.
- l. Coordinate the process for addressing consensus questions; appoint further topic group members where appropriate and ensure representation throughout the process from across the UK and Ireland as well as from a broad range of professions, and from patients.

Topic groups

The role of topic groups is to review the evidence and present draft recommendations and draft amendments to the evidence to recommendations sections from their topic group for discussion and agreement by the GDG. Individual topic group members review papers and produce evidence tables for discussion in their topic group. Topic group members are experts drawn from a wide range of specialist societies and interested parties.

Stroke guideline team

Responsibilities

The stroke guideline team provides overarching support for those involved in updating the guideline and manages the processes. The stroke guideline team undertakes the following main tasks (this list is not exhaustive):

- a. Plan and progress the guideline development project, draw up project plans and manage the timeline.
- b. Develop search strategies, search the literature and support topic groups and editors to sift search results.
- c. Download papers and record evidence review outcomes and track amendments to the guideline.
- d. Set up and facilitate GDG meetings and topic group evidence review meetings, and manage paperwork and meeting outcomes.

- e. Manage declarations of interest.
- f. Recruit patient voice representatives to the GDG.
- g. Support the Chair to identify potential barriers to successful group work.
- h. Communicate updates to editors, topic group leads and topic group members.
- i. Appropriately store project documentation, manage access and version control.
- j. Manage the peer review and public consultation exercise.
- k. Manage the update to the plain language summary along with the patient voice representatives.
- l. Liaise with organisations to secure endorsement of the guideline.