# Australian STI Management Guidelines for Use in Primary Care

## Reference Committee

## Terms of Reference

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## Background and purpose

The Australian STI Management Guidelines for Use in Primary Care ("the Guidelines") were developed under the auspice of the Australasian Sexual Health Alliance (ASHA) and are managed by the Australasian Society for HIV, Viral Hepatitis and Sexual Health Medicine (ASHM). The Guidelines are an online resource for primary care health professionals. They provide concise information to support the prevention, testing, diagnosis, management and treatment of sexually transmissible infections (STIs) for adults and adolescents and are frequently cited and referenced by other guidelines.

A Steering Committee, chaired by Associate Professor Richard Hillman, and an Editorial Subcommittee, chaired by Dr Chris Bourne, oversaw the Guidelines' creation in 2012/13 through a consensus-based approach, drawing primarily from the existing STI guidelines reflecting best practice. The content was written by a variety of clinical experts (general practitioners with expertise in sexual health, infectious diseases specialists or sexual health physicians), nominated by the Editorial Subcommittee and Steering Committee.

As the Guidelines are now an established resource the Steering Committee has been replaced by a **Guidelines Oversight Committee** who has oversight over the Guidelines. The purpose of the Guidelines Oversight Committee is to provide direction and leadership, including editorial standards, shape, scope, content, form and purpose.

A Major Guidelines Review will take place every 3-4 years dependant on funding, lasting 6 to 9 months. During this review, every section of the Guidelines will be reviewed and updated (as required). A Reference Committee consisting of clinical and non-clinical experts, representative members of key collaborating sector organisations and the Communicable Diseases Network Australia (CDNA), and jurisdictional representatives from the Blood Borne Viruses and Sexually Transmissible Infections Standing Committee (BBVSS) will play a key role in the review process. For more information, see Appendix A: Major Guidelines Review Process.

The membership and Terms of Reference for the Reference Committee will be reviewed prior to each Major Guidelines Review.

#### Responsibilities

The Reference Committee areas of responsibility include:

- 1. To identify section(s) of the guidelines that require update and/or development in consultation with the Steering Committee
- 2. To review and comment on updated and/or developed section(s) of the Guidelines to ensure:
  - clinical relevance and accuracy
  - o appropriateness of recommendations for key affected populations
  - o organisational acceptability for endorsement (if acting as an organisational representative)
  - o jurisdictional applicability (if acting as a BBVSS jurisdictional representative)
- 3. To feedback to the Steering Committee as appropriate
- 4. To contribute to promulgation of the updated Guidelines to the broader health workforce

#### Membership

The Reference Committee will consist of, but not be limited to, members of the Steering Committee and other clinical and non-clinical experts (including community experts representing key affected populations), and will include nominated representatives from sector organisations and BBVSS (see *Committee member expectations* 

for more information). It is anticipated that most members will represent more than one profession and/or organisation and/or jurisdiction, therefore limiting the size of the committee.

Membership is recommended to include:

- Sexual health physician
- General practitioner
- Nurse practitioner
- Basic scientist
- Public health specialist
- Social researcher
- Medical educator
- Community experts representing key affected populations
- Representatives from each of the following:
  - Australasian Sexual Health Alliance (ASHA)
  - Royal Australian College of Physicians Australasian Chapter of Sexual Health Medicine (RACP AChSHM)
  - o Communicable Diseases Network Australia (CDNA)
  - o ASHM board sexual health subcommittee
  - ASHM sexual health program
  - BBVSS jurisdictional representatives
  - o Royal Australian College of General Practitioners (RACGP)
  - Australian College of Rural and Remote Medicine (ACRRM)
  - Australian College of Nurse Practitioners (ACNP)
  - Australasian Sexual Health and HIV Nurses Association (ASHHNA)
  - Family Planning Alliance Australia (FPAA)
  - o Forensic and Medical Sexual Assault Clinicians Australia (FAMSACA)
  - Australasian Society for Infectious Diseases (ASID)
  - Australian Primary Health Care Nurses Association (APNA)
  - Australian College of Rural and Remote Medicine (ACRRM)
  - Australian Indigenous Doctors' Association (AIDA)
  - National Aboriginal Community Controlled Health Organisation (NACCHO)
  - Other relevant sexual health organisations

## **Expectations**

All Reference Committee members are asked to:

- Attend all meetings or, where attendance is not possible, submit an apology, review the minutes and attend to relevant action items
- Participate actively and work cooperatively with other members
- Prepare for all meetings by reading and considering the agenda items and any documents circulated

Organisational representatives will be nominated by their organisation, and will act in an official capacity as a representative of that organisation. They are expected to:

- Be familiar with the processes employed by their organisation to provide endorsement and informing the Reference Committee secretariat of these
- Obtain agreement from their organisation to assist in the promulgation of the completed policy and inform the secretariat of any steps to be taken to ensure the policy is promoted to organisational members

BBVSS jurisdictional representatives will be nominated by BBVSS, and will act in an official capacity as a representative of their jurisdiction. They are expected to:

- Ensure that the Guidelines consider state or territory guidance or policy (and vice versa)
- Raise any issues of importance during the initial review process so they may be considered and incorporated prior to the final review
- Communicate issues and proposed resolutions to relevant colleagues
- Identify possible barriers to endorsement in a timely manner so they may be resolved prior to the endorsement process to assist in a timely endorsement process.

### **Meetings**

- Meetings will be held by teleconference.
- Outside of meetings, the committee will communicate via email as needed.
- An ASHM staff member will act as secretariat to the committee and will:
  - Develop a workplan for the Major Guidelines Review in conjunction with the Steering Committee
  - o Participate in the committee as required
  - o Develop and disseminate a meeting schedule
  - o In consultation with the chair and committee members, determine the agenda for meetings
  - o Issue meeting invitations with instructions on how to join
  - o Manage the online communication and dissemination of relevant information
  - o Record minutes from all meetings and distribute to members in a timely manner
  - o Develop and implement a communications plan

#### Conflicts of Interest

Committee members will be required to comply with ASHM's Conflict of Interest Policy. Members will be asked to submit a disclosures of interest form prior to each minor review and inform ASHM if any changes occur within the review and endorsement period. ASHM will provide a disclosures of interests form for this purpose.

## Confidentiality

Items discussed in meetings are confidential unless otherwise advised.

#### Remuneration

Participation on the committee is voluntary, and members are not remunerated for their participation. However, committee members may be approached by ASHM to act in a paid clinical advisor capacity to develop or update the Guidelines on the recommendation of the Steering Committee.

#### Version history

Version #	Changes made	Date	New Version #
0.1	JM first draft	April 2020	0.2
0.2	JM NM CS ToR finalization	July 2020	1.0