

APPROVED MINUTES

Scottish Intercollegiate Guidelines Network (SIGN) Council meeting

Monday 1 February 2021, 1pm – 2.30pm

Teams

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| Present | |
| Professor Angela Timoney (AT) | SIGN Chair |
| Professor Gregory Lip (GL) | Royal College of Physicians of Edinburgh– SIGN Vice-Chair |
| Mr Mohammed Asif (MA) | Royal College of Surgeons of Edinburgh |
| Dr Jenny Bennison (JB) | Royal College of General Practitioners (deputy) |
| Dr Anthony Byrne (AB) | Royal College of Physicians of Edinburgh |
| Ms Arlene Coulson (AC) | Royal Pharmaceutical Society |
| Dr Sara Davies (SD) | Scottish Government |
| Dr Harry Hebert (HH) | University of Dundee |
| Ms Maureen Huggins (MH) | Patient Representative |
| Dr Nauman Jadoon (NJ) | Early Career Professional |
| Dr Roberta James (RJ) | SIGN Programme Lead |
| Dr Scott Jamieson (SJ) | Royal College of General Practitioners |
| Mr Georgios Kontorinis (GK) | Royal College of Physicians and Surgeons of Glasgow |
| Dr Chu Chin Lim (CCL) | Royal College of Obstetricians and Gynaecologists |
| Dr Alan MacDonald (AMac) | Royal College of Physicians and Surgeons of Glasgow |
| Mr Kenneth McLean (KM) | Patient Representative |
| Ms Maureen McSherry (MMc) | Royal College of Midwives |
| Mr Steve Mulligan (SM) | British Association for Counselling and Psychotherapy |
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| Professor Phyo Kyaw Myint (PM) | Royal College of Physicians of London |
| Dr Alan Ogg (AO) | Faculty of Clinical Radiology |
| Dr Safia Qureshi (SQ) | Director of Evidence, HIS |
| Dr Matthias Rohe (MR) | Early Career Professional |
| Jo Savege (JS) | Scottish Association of Social Workers |
| Mr Duncan Service (DS) | Evidence Manager, SIGN |
| Dr David Stephens (DSt) | Royal College of General Practitioners |
| Miss Jasmine Wood (JW) | SIGN intern, Scottish Graduate School of Social |
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| In attendance | |
| Miss Gaynor Rattray (GR) | Temp Executive Secretary to SIGN Council (Minutes) |
| Observers | |
| Ms Kirsty Allan (KA) | Project Officer, SIGN |
| Ms Sarah Florida-James (SFJ) | Programme Manager, SIGN |
| Apologies | |
| Professor Lesley Colvin (LC) | Royal College of Anaesthetists – SIGN Vice-Chair |
| Dr Diane Dixon (DD) | British Psychological Society |

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| Ann Gow (AGo) | Director of NMAHP, HIS |
| Mr James McTaggart | British Psychological Society (Scotland) |
| Dr Marie Mathers (MM) | Royal College of Pathologists |
| Dr Jane Morris (JM) | Royal College of Psychiatrists |
| Ms Jacqueline Thompson (JT) | Royal College of Nursing (deputy) |
| Dr Hester Ward (HW) | Faculty of Public Health Medicine |

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| 1. | Welcome and apologies | |
| | <p>The Chair welcomed Council members. Virtual meetings of SIGN Council have taken place via MS Teams and Zoom. Council members preferred the Teams option for all forthcoming meetings. AT reminded members of the change in meeting structure where Council would meet every two months:</p> <ul style="list-style-type: none"> • six times per year split alternately into three formal business meetings and three development meetings. <p>Council were informed that this meeting was being recorded for the purposes of minute taking and would be destroyed afterwards. There were no objections.</p> <p>AT also welcomed Steve Mannion, Georgios Kontorinis and Alan McDonald as new Council members representing RCPS, Glasgow.</p> <p>Thanks were also given to Ronan O'Carroll for his contributions to SIGN Council. His replacement is Dr Diane Dixon.</p> <p>Apologies were noted as above.</p> | ALL/AT/GR |
| 2. | Register of Interests | |
| | <p>AT reminded members to complete the DOI forms for the forthcoming year and asked anyone who had any changes to be made, to note them and send them to GR.</p> <p>AMcD declared Gilead Pharmaceutical paid work as an interest. No action taken.</p> | ALL/GR |
| 3. | PRESENTATION: Jasmine Wood/Harry Hebert ‘The Impact of a SIGN Guideline: SIGN 136 Management of Chronic Pain’ | |
| | <p>Harry Hebert (HH) gave a presentation to the group on ‘A Preliminary Analysis of The Impact of SIGN 136 On Opioid Prescribing In Scottish Primary Care’. The key points presented included:</p> <ul style="list-style-type: none"> • Opioids too commonly used to treat chronic pain • Recommendations in SIGN guideline 136 led to uptake in national documents including national chronic pain prescribing strategy • Aims of the study | GR to send a copy of both presentation slides to Council members. |

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| | <ul style="list-style-type: none"> • Statistical Analysis • Conclusions of the study: publication of SIGN 136 is associated with a statistically significant reduction in opioid prescribing and costs <p>Jasmine Wood (JW) then presented on 'The Impact of a SIGN Guideline: SIGN 136 Management of chronic pain'. The key points from this were:</p> <ul style="list-style-type: none"> • Purpose of the impact work carried out • Methods used • Results/main findings • Conclusions of this work: SIGN 136 has had a positive impact on the clinical practice of HCPs treating patients with chronic pain and improved HCPs decision making around the treatment and prescribing for the management of chronic pain and made HCPs feel more supported in these decisions. <p>AT asked the group if they had any questions for HH and JW.</p> <p>AT and SFJ congratulated HH/JW on their work, and the positive impact it has had. Also thanked Public Health Scotland and SIGN.</p> <p>There was discussion around methadone prescribing for substance misuse.</p> <p>Maureen Huggins (MH) asked whether there would be a follow-up on patient views. It was agreed that this would be done if SIGN had capacity to hold a workshop.</p> <p>RJ thanked JW for her work with SIGN over the last 3 months, and informed the group that a report on this impact work will be presented at a future HIS board meeting.</p> | <p>JW to follow this up with Karen Graham, Patient Involvement Officer.</p> |
| <p>4.</p> | <p>SIGN COUNCIL BUSINESS</p> | |
| | <p><u>Update from the Vice-Chairs</u> Vice-Chair, Gregory Lip (GL) gave a background on the role, and what the next steps were going to be taken forward. The main focus points are:</p> <ul style="list-style-type: none"> • Deputise for Chair when and if necessary • Promote SIGN • Chair strategy meetings/participate in topic proposal process • Develop the link between SIGN Council members and guideline group developers • Publicise SIGN guidelines (working on a social media plan) • Take forward SIGN methodology, ie. GRADE • Linking with external institutions and NHS Research Scotland <p>GL asked for suggestions on any of the above points from SIGN Council members.</p> <p><u>Update about membership and discussion of vacant positions</u></p> | <p>ALL</p> |

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| | <p>AT welcomed Anthony Byrne, RCPE, Steve Mannion and Georgios Kontorinis, RCPS, Glasgow.</p> <p><u>Discussion and agreement of programme for SIGN Council development meeting on 27 April</u></p> <p>AT gave an brief outline of the main discussion points for the development day, they included:</p> <ul style="list-style-type: none"> • Discuss and plan SIGN Council work for the year ahead • The work within the Evidence Directorate about topic selection and prioritisation • How to strengthen links with academic institutions • How we link into public professional journals • How we best work within SIGN Council and Colleges <p>AT asked that any suggestions/comments on any of the above points be sent to AT, RJ or Vice-Chairs</p> | <p>ALL</p> |
| <p>5.</p> | <p>NATIONAL GUIDANCE ON POST-COVID SYNDROME</p> | |
| | <p>RJ took SIGN Council members through a brief overview of the work carried out on the post-COVID-19 syndrome guideline. The guideline is a collaboration between SIGN, NICE and the RCGP.</p> <p>The guideline along with the patient booklet was published on 18 December and is available on the SIGN website: https://www.sign.ac.uk/our-guidelines/managing-the-long-term-effects-of-covid-19</p> <p>RJ asked for help from Council to publicise both documents, in newsletters, through College contacts, etc.</p> <p>RJ then informed the group about SIGN supporting the Clinical Cell work with rapid guidance which is now being updated. Matthias Rohe (MR) asked how you find out when the updates have been completed. RJ confirmed that all updates are on the SIGN website, advertised on Twitter, through SIGN distribution co-ordinators and SIGN Council. There will also be discussion around this at the development day on 27 April.</p> <p>RJ meeting with NICE on 8 February regarding maintaining the guideline as a “living” document, and will report back on developments at next Council.</p> | <p>ALL</p> <p>RJ</p> |
| <p>6.</p> | <p>SIGN EXECUTIVE BUSINESS</p> | |
| | <p><u>Highlight report of guidelines currently in development</u></p> <p>RJ reported on the current guideline update:</p> <ul style="list-style-type: none"> • Small update was made to the Osteoporosis guideline to include medicines approved by SMC • Clinical cell guidelines and updates were in progress • Rapid review of COVID 19 in Primary Care update due to be published 3 February • SIGN Eating Disorders is currently ongoing with virtual open consultation meeting being held 26 May • The SIGN Dementia guideline will restart again with a proposed start date 24 May • Work on patient booklets is still ongoing <p>DS thanked SIGN for restarting the Dementia guideline.</p> | |

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| | <p><u>Highlight report of topic proposals</u> RJ advised that there has been no change to this since November.</p> <p>SIGN may need to go back and scope the topics again to reprioritise, this may mean that the topic proposal list may change.</p> <p>SQ thanked the SIGN team regarding trying to get the balance correct with current work and new proposals during the pandemic.</p> <p>Topic proposals will be discussed at the development day. DS raised the need to think how COVID 19 actually impacts on topics proposed and how we decide the priorities in the next 3-6 months, clinician engagement, and the need to think about the crisis still in front of us. AMcD stated that SGN Council requires to consider what topics will have most impact for the service in the short and medium term.</p> <p><u>Highlight report of current methodological issues</u> DS reported on progress in implementing EPPI reviewer. This will be the first step in implementing GRADE, so nothing to update on implementation of GRADE KmcL asked for an update on GIN and highlighted that SIGN needs to be given regular updates. DS advised the GIN Public toolkit is to be published after March and the GIN Conference is online this year, either September or October. RJ confirmed that GIN aims to hold the conference over a few days and will include plenary sessions, posters, workshops, and highlighted the challenges of delegates attending a virtual conference from different countries and time zones.</p> <p><u>Highlight report recent work and forthcoming projects in public partner involvement</u> RJ reported on this on behalf of KG. SIGN need to do more to raise awareness of the patient booklet on Long COVID.</p> <p>There is a vacancy for a Lay Representative on SIGN Council which SIGN will address.</p> <p>The ongoing work KG has been involved in with GIN will see the first five chapters of the GIN Public toolkit being published.</p> | <p>SQ welcomed any suggestions from Council.</p> <p>ALL</p> <p>DS to make sure these are included in Council agenda.</p> <p>ALL</p> |
| <p>7.</p> | <p>MINUTES OF PREVIOUS MEETING</p> | |
| | <p>AT ran through the minutes of the previous meeting (9 September 2020).</p> <p>Pg 3 – Jacqui Sneddon and Arlene Coulson (AC) met to discuss, as a result both pieces of work are delayed so action is ongoing.</p> <p>Pg 5 – Action completed.</p> <p>Minutes were approved by the group.</p> | <p>Ongoing – JS/AC</p> |
| <p>10.</p> | <p>AOCB</p> | |
| | <p>No any other business was raised</p> | |

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| 11. | DATES OF FUTURE MEETINGS | |
| | Next meeting will be a Development Day, held on 27 April. | |