

ICS Physiotherapy Committee Meeting Minutes

Monday 20th October 2014,

Venue: SulAmérica Convention Center

Room: E Time: 07.00-09.00

Known Attending: Helena Frawley (HF) (Chair), Els Bakker (EB), Chantale Dumoulin (CD), Jacqueline de Jong (JdJ), Marijke Van Kampen (MvK), Elizabeth Shelly (BS), Margaret Sherburn (MS), Melanie Morin (MM), Doreen McClurg (DM), Cristina Naranjo-Ortiz (CN-O), Rebekah Das (RD), Cristiane Carboni (CC), Peter Meyers (PM), Petra Voorham-van der Zalm (PvZ), Heather Moky (HM), Adelia Lucio (AL).

Apologies: Stephanie Knight (SK), Rhonda Kotarinos (RK), Stephanie Madill (SM),

ICS Office: Avicia Burchill (AB), Marijke Slieker-ten Hove (MSI)

	Item	Lead / Tabled by	Details	Action required	Who	By when
1	Committee picture to be taken	ICS office				
2	a. Approval of Barcelona meeting minutes;	HF	MS proposed the approval of the Barcelona minutes and DM seconded			
	b. Approval of September teleconference meeting minutes		MS proposed the approval of the September teleconference minutes and DM seconded It was discussed that people had experienced problems with the teleconference meetings. WEBEX as an alternative was discussed.			

			ACTION POINT: AB to get details of WebEx and see whether feasible.	Yes	АВ	Jan 15
3	Committee Members & Portfolios; Terms of Office (TOO)	HF	 a. Standing down in Rio: HF, EB, BS, MS, SK HF thanked for all those standing down for their contribution and support of her as chair. b. Remaining for 1 year (by special approval): JdJ, CD c. Remaining; TOO: DMC; 2017 MVK; 2015 MM; 2015 SM; 2016 CN-O; 2016 Newly elected; TOO: RK; 2017 CC; 2017 RD; 2017 PM; 2017 Co-opted until 2015: HM, AL, PvZ MVK confirmed she was going to stand down and MM was going to continue. Post Script note: For clarification 4 nominations will be called for in 2015 to replace MvK (1) CD (2) and JdJ (3) plus to accept one of the co-opted three selected in 2014 (4) Note these three will need to reapply for the position. Portfolios for 2014: Chair: DMC Sci Rep: MM 			

			M'ship & Comm'n: SM, CN-O Roundtable: JdJ, MvK, RD (TBC) It was discussed that there is now a need for a person now to run roundtable as JdJ and MvK stepping down. PvZ agreed to take this position on. RD said she would be willing to help. AL also expressed interest but it was discussed that she not required. The local's representatives will be CD and MM. Sci & Res: CD, DM, RK and RD. Ed & PD: PM, RK, HM, HM confirmed. It was also discussed that EB would like to finish the work on the education guidelines. It was agreed that EB be co-opted for one year to finish the education guidelines. ACTION POINT: Sub-committees to be updated with new roles and EB tasked to finish education guidelines and therefore co-opted for 1 year.	Yes	АВ	Jan 15
4.	Terms of Reference (TOR)	SM & CN-O	 a. Job descriptions for portfolio positions and new member package The new member package was described as being too detailed and tricky for those whose English is not first language. AB explained that anyone joining a committee should have competent English so to simplify the member package would be contradictory. b. Ranking criteria for new applications It was suggested that when the committee have more applications than positions that a ranking criteria be used to 			

			assist with the reviewing of the applications. It was discussed and decided that the office to take forward. ACTION POINT: design ranking criteria for reviewing nominations. HF proposed that each subcommittee designed a terms of reference. The round table has one and this is to be used as a template. Regular liaison and communication as required and each committee work out what the minimum should be.	Yes	АВ	Apr 15
			ACTION POINT: CO, CD, PM, to develop terms of reference template for each sub-committee.	Yes	CO/CD/PM	Apr 15
5.	Reports – External Committees	b. c. d. e. f.	 a. Chair: submitted, tabled on 4 Sep. No comments b. Education Rep Report: MSI explained that she stepped down from the physiotherapy committee to free up more time and that she cannot attend all the committee meetings. The Education committee has changed over the last year. She explained that they finally have the discussion about where the education committee will be in 5 years. All the standalone courses we do are focused on getting more revenue for the ICS by way of more ASM delegates and more ICS members. MSI questioned should the ICS be going to 2nd world countries as physiotherapists have a role in those countries as physiotherapists are the cheaper option. The education committee has had a decrease in budget but it has been adhered to. The physiotherapy committee needs to bring ideas and contacts to MSI to ensure we have a parallel programme rather than encompassed into the main 			

	programme. As there is not level of entrance hopefully the competence profile will assist. MSI further explained that Donna Bliss ensured that there is a physiotherapist and nurse on the education committee. The role is a very busy role and therefore it may not be possible to be on both committees. It was discussed about who that person should be and their contact should be on the physiotherapy committee – a liaison person. The education subcommittee should be the liaison. MSI felt there needed to be a better strategy for workshop applications. Do we want workshops accepted before they have been put in? MSI questioned whether the education committee going to support the local physiotherapy course with free translation. MSI is it appropriate in Montreal? AB explained the new board decision that fifth annual meeting will not be in Europe or Northern America. Also that the committee should make it clear on application that this is the "official" physio committee application and the office will take it forward. MSI stated that ELearning needs to be taken forward and AB explained that the committee just needed to come with proposal. c. Scientific: MM outlined the scientific criteria for abstracts. The first criteria is originality so it's good to start the abstract with "this is the first". The next criteria is scientific merit and if it's not scientifically sound it has no clinical relevance. Choice of key words very important to ensure that your abstract is reviewed by someone in your area. Lack of anonymity is automatically disqualified. For non-English speakers it's good to get your English reviewed before	Yes	MM	Jan 15	
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			submitting. Avoid "salami" – don't split results across 3 abstracts. Conclusion has to be in line with your result. AB said that this is a perfect enews article or short video. ACTION POINT: MM to prepare as short article for the enews. MM explained that the scientific committee asked for external reviewers to cover more abstracts. Others who are not in the field will review "easily" but it needs to be physiotherapists reviewing the rehabilitation category. CD thanked MM and AD. d. Ethics: Cristina's report: Not discussed e. Standardisation Committee: BS explained that this is a very active committee and there are several documents being worked on. The CPP and ICS/IUGA joint working group on conservative management are of interest to the physiotherapists. The documents should be open for comments soon. BS explained that she is now the wiki editor. BS explained that she had some instructions but it's simple to join and to post. The instant access terminology glossary is being launched this meeting. f. Fistula Committee: Gill Brook's report: Not discussed g. Continence Promotion Committee: Not discussed		
6.	Reports – Internal Committees	a. BS b. JdJ / MvK	a. Membership & Communication – BS explained that CN-O will be taking over and as unglamorous as this committee is it's a		
		c. CD d. JdJ	very important committee. There needs to be a strong consideration for people who have no role to join this		

subcommittee. The website has not been reviewed. It's not well utilised and there is unlimited possibilities here to contact the physiotherapists in the membership. AB explained that the ICS office can send articles in enews. **ACTION POINT: Membership & communication** subcommittee to communicate with the round table speakers and workshop leaders and request a 1 page report of what they reported at Rio. b. Roundtable: Lead of Roundtable will remain – Jacqueline (JdJ), and Petra (PvZ) will help Round table –There were a couple last minute cancellations. Trying to avoid issues like this in the future, raised the question of if the speaker needed to cancel, they could be responsible to find a replacement speaker. Another question raised was changing the format. This added in more discussion of how you select the speakers from the RT and challenges like room space. c. Scientific & Research: CD reported that submitted 5 papers and they are under review, huge accomplishment. The plan is to submit for a workshop in 2015. We can request for funds to help pay to sponsor a workshop. We have never asked for funds and many other committees have asked for this. Adherence to PFMT- the topic is broader than just for PT's. The committee can propose as a State of the Art for a future meeting, as well as a workshop

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7.	Other:				T	T	
	a. Education:	a.	EB / PM /	a. Revisions made post September meeting.			
	Competency		BS				
	Guideline						
	b. Education:	b.	Marijke	b. Use the education document to help inform your slides.			
	Speaker's Kit		Slieker	Propose to not have further action by Helene and use the			
				education document.			
	c. Education:	c.	BS	c. Peter Rosier has shared with us the 'Manual Urodynamic			
	development of			Committee' (a guideline for collating education modules – see			
	teaching module			attached).			
	related to a PT						
	topic			Invitation from Peter Rosier (Chair of Urodynamic Committee):			
				If you can think of a topic that is 'not too small and not too large'			
				in the field of diagnostic testing for dysfunction of the lower			
				urinary tract, such topic can become a teaching module. (In the			
				manual the example-topics are concentrated around			
				urodynamics but the committee to date, does support topics			
				that are not precisely urodynamic testing).			
				The first requirement is that an evidence summary is written			
				about the topic. And the second is that an instructive-slides set is			
				prepared and presented and recorded. The evidence summary =			
				knowledge background is submitted to NU&U for publication			
				and the slides set contains the -how -to -do -in -practice (on the			
				basis of the best available evidence). (By the way: Teaching			
				modules can not set strong 'standards' if no/little good evidence			
				exists)			
				If somebody has an idea/topic it can be submitted to the			

			committee (or me) (last page of the manual) and if the committee agrees with the topic and the ad hoc working group the work may start. We always ask for the working groups that they are as diverse as possible, both for professional as for geographical background. I am looking forward to your ideas and initiatives!" Ideas suggested by BS: digital PFM examination or EMG assessment. Interested members: BS; others?		
	d. ICS Lifetime Achievement Award	d. DM & HF	e. HF & DM to update K Bo submission in Rio We have an updated CV of Kari Bo that will be submitted. (Keep it quiet.) It will be the 3rd time the PT committee has submitted an application for Kari in 3 years but hopefully that won't be a problem.		
	e. new Research / Education activity	e. Sci & Res / Ed sub- committees	 e. Suggestion from HF: if a Research topic is chosen, please consider research topics already identified by external bodies as worth investigating: http://www.jla.nihr.ac.uk/top-tens.asp See UI topics e.g. #1: What are the optimal pelvic floor muscle training protocols (frequency and duration of therapy) for the treatment of different patterns of urinary incontinence? ICI? other? 		
8.	Any other business?		No new business. Meeting was Closed at 9:23am		

9.	Next meeting	DM	a. teleconference meeting Jan		
			b. teleconference 6 weeks pre-ASM		
			c. ASM face-to-face meeting		