

ICS Ethics Committee meeting Agenda Tuesday 13th October, Venue: Tokyo International Forum Room: G407 Time: 08:30-10:30

Known Attending: Nina Davis (Chair), Heidi Moossdorff-Steinhauser, Cristina Naranjo Ortiz, Ryuji Sakakibara (New), Ruwan Fernando,

Known Apologies: Tamara Dickinson (New), Alvaro Bedoya-Ronga, Chris Chatterton (New),

In Attendance: Avicia Burchill, Dominic Turner, David Castro-Diaz,

Unconfirmed: Elise De, Martha Spencer (New),

- 1. Approval of Montreal meeting minutes and March Teleconference Minutes (Attached)
- 2. Introduction of members- Chris Chatterton, Martha Spencer, Ryuji Sakakibara, Tamara

Dickinson

- 3. Terms of Office (Attached)
- 4. Terms of Reference (Attached)
- 5. Ethics Award
- 6. Ethics project with SSC
- 7. New Standard Operational Documents discussion from the ICS office (Attached)
- 8. Presentation and discussion of FGM white paper.
- 9. Committee picture
- 10. AOB

ICS Ethics Committee Meeting Minutes Wednesday 7th October, Venue: Palais des Congrès Room: 512H Time: 07.00-08.00

Attendees: Nina Davis (Chair), Alvaro Bedoya-Ronga, Elise De, Andrew Farkas, Suzanne Hagen, Cristina Naranjo Ortiz, Tomas Rosenbaum, Safwat Tosson

Apologies: Ruwan Fernando

In Attendance: David Castro Diaz, Heidi Moossdorff-Steinhauser, Avicia Burchill

1. Approval of Rio meeting minutes

Approved

2. March teleconference minutes

Approved

3. Terms of Office

ND confirmed that ST and SH were extended by one year and are leaving. TR and AF also have completed their terms. ND said the committee was very honored to have benefitted from their efforts and thanked them for their time and contributions. CO confirmed that she would like to renew her position. ND wanted to call for expressions of interest with specific attention to nurses and non-clinical scientists. HM explained that it's difficult to get people to join this committee. TR suggest that the role for committee needs to be clearer to attract people. AB mentions that we can co-opt members as needed to help with EC projects.

ACTION POINT: Ethics committee to call for expressions of interest with a specific solicitation to nurses and non-clinical scientists. The EC will co-opt ICS members as necessary to assist with its activities.

4. Terms of Reference

ND explained that the terms of reference were never completed, as the Board of Trustees anticipated changes being made at the Montreal meeting.. It was strongly felt that compliance and to monitor and maintain the disclosure policy were primary remits of the committee. ND asked for ideas and volunteers to assist with the preparation of position/white papers. DC suggested ethical considerations in research i.e. live surgery meetings or placebo arms in research. The ICS should be able to provide advice on these matters. ND: If there has been a disciplinary matter, the committee has been involved, and this constitutes an important part of our activities. TR: When a subcommittee is set up and makes a recommendation, should that be endorsed by the whole committee? AF explained that the committee serves in an advisory capacity. The ultimate decision is made by the Board of Trustees. AB explained that the disciplinary committee can be outside of the ethics committee as indicated in the bylaws. ED explained that the ethics committee selects the members of the disciplinary committee. ND: the EC has to trust the due diligence of the disciplinary committee. ED: Should the entire panel see the recommendation before it is submitted to the Board? CO disagreed and felt that the Ethics Committee is not a disciplinary committee. AF explained that the Ethics Committee is a resource for the Board of Trustees. TR felt that the Ethics Committee is partly responsible for the decision. ED drew a parallel to the Education Committee: the ICS members have to trust that the courses are of high quality and in that regard, the rest of the committee has to trust the actions of the subcommittees. ND explained that in the recent disciplinary matter, she made the decision to make the disciplinary committee small with an odd number of participants, and she wanted them from the ethics committee. Plus there was a requirement to move quickly.

ND would welcome any additions and changes to terms of reference document. ED: As we are international and multi-disciplinary, we in the ICS are uniquely able to assign global relevance to continence issues.

ACTION POINT: ND to re-work the terms of reference document and office to place on the forum.

ND explained that ED had suggested the production of white papers on the following: FGM, outsourcing research to foreign countries, a statement on mesh use, consent for surgical issues. AF wondered whether outsourcing is appropriate to the ICS. ST: Prof London covered a lot of these issues last year in his talks. TR: What can we do competently? ND explained how the fact sheets process could work for the white papers in that experts created and/or signed off on the content and the EC edited the documents. AR mentioned that the FRCOG is an excellent source for ethics papers that could provide ideas and content for the EC white papers.

ACTION POINT: EC members to choose 1-3 topics for white papers via a forum, then will determine who will provide content.

5. ICS 2016 Programme

ND hopes that all committee members will attend the workshop and hopes it will be well received. ND also requested that the committee come and support tomorrow's debate. ND requested ideas for 2016. We have to do some kind of educational programme. Do we want to do a course and a debate? AB explained the workshop deadline is now 4th January 2016. ND suggested the topic of how to set up an ethics consult team. SH suggested the workshop should be linked to the white paper. ND suggested it be placed on the micro site and in other places. AR raised the ethics poster competition. Choose topic such as autonomy. Attendees then present clinical cases involving a relevant ethical dilemma and its resolution. (AR provided a preliminary sketch for his idea – attached.) AB explained the process to go through to get an award approved by the Board and mentioned that industry may also be interested in supporting.

ACTION POINT: AR and ND to work with ICS Office to prepare ethics award application for Board consideration.

ACTION POINT: EC members to assist AR in finalizing the structure and processes for the proposed poster session.

ND wanted to request 3 teleconferences from the Board. One in November/early December to discuss 2016 programme, another in the Spring, then determine if a third is needed. AR said he also found the forums useful.

AB left. ED and NSD took minutes

6. The EC relationship to the Board of Trustees has been a concern of the EC for many years. ES, former chair, had tried to have an EC member attend all BoT meetings in an ex officio capacity – advisory and to maintain transparency. However, this was never adopted. The question of the relationship of the EC to the Board, specifically the committee's independence, remain a concern. TR and AF reiterated their views that the EC, to maintain its credibility and value to the ICS, should clearly define its responsibilities to the membership and establish itself as an independent advisory and monitoring unit within the organization.

ACTION POINT: TOR revision to be completed by ND and sent to the EC members in a forum for corrections, changes and final approval before submission to the BoT. The document should define the relationship of the EC to the BoT.

7. ND pointed out that the EC microsite needs to be updated with members' pictures and informal shots. ND asked members to make suggestions regarding other items that would be appropriate for the microsite. ED suggests that white papers go on the site as well.

ACTION POINT: The ICS Office will assist in updating the EC microsite.

The meeting was adjourned at approximately 9:25 am.

Appendix

Ethics poster competition.

ICS participants +/- industry.

Price: Certificate 1st,2nd, 3rd

1year ICS free membership for first price.

(Payed with ICS or ethics founds, alternatively, we can involve industry to finance the price)

Structure:

100 wards abstract with focus in one or more of the categories bellow.

- Autonomy
- Beneficence
- Non maleficence
- Justice

Poster exhibition (20 mins) follower by a 3 minutes Poster presentation and 2 minutes A&Q. (10 presentations – 50 mins) price and feedback (20 mins)

If we involve the industry, max of 3 posters.

Committee involvement.

- Abstracts selection.
- Score presentations.

Aims: Rise ethics discussion at a member level.

Provide with day to day practice ethical dilemmas related to culture and medical system.

Increase ethical issues profile.

Rise Ethics Committee visibility.

ICS Ethics Committee teleconference Minutes 20th March 2016

Attending; Nina (chair), Ruwan, Elise, Alvaro, Heidi

- New members: Tamara Dickinson: nurse, USA

Martha Spencer: geriatrician, Canada

1. Workshop (90 minutes)

- Start with 5 minutes review basic principles of medical/global ethics

- The idea was to have 4 cases but after consideration we decided to go for **3 cases** and maybe one case from the audience or questions

- Nina will be moderator

- Each panellist (Elise, Ruwan, [geriatrician/scientist member], to prepare a brief set of slides (max 5/case) before **June 1th** when HANDOUT is due.

Cases:

1. Who pays/provides for women's care in developing countries? (guest discussant Suzy Elneil) – Ruwan to coordinate. **Needs date and time of workshop**.

2. Publication Ethics: "Salami" and Other Problems - Scientist member.

3. Geriatric case - Martha Spencer offered to help with this case (she won't be able to go to Tokyo). Martha to identify surrogate or, perhaps, Tamara can serve as facilitator.

- As moderator, Nina will make summary slide to wrap up the workshop

- All agreed that we should limit participants to 35

Guidance for workshop facilitators:

We need a slide or 2 to outline the case for consideration and another slide with the questions to be considered. Then, we need summary slides (2-3) to highlight the points we had hoped would come out in the discussion. I have been thinking of having some extra slides available with references or legal precedents or any other relevant information that might be triggered by the discussion of the various topics. That being said, we do want to avoid a lecture format.

2. We still need a science member for the EC, then the committee will have its full quota

- One suggestion made. Nina needs to contact Alex Digesu

- Heidi suggests asking: Ryuji Sakakibara: sakakibara@sakura.med.toho-u.ac.jp

3. Position paper

- Elise has taken the lead on this and asked a urologist and gynecologist from Burkina Faso to write the white paper on FGM. They would like an example of other similar documents. The AUA has several on its website (<u>www.auanet.org</u>). This can be a guide. One on testosterone by Darius Paduch is a particularly good one.

- Elise will edit the position paper

Deadline for position paper: June 1

- 4. Ethics award
 - There are no specific criteria for ethics prize
 - Reviewers: everything with ethical relevance can be considered for the prize
- 5. Co-opted members:
 - Martha Spencer (pending official acceptance of application)
 - Tamara Dickinson (pending official acceptance of application)

Adjourned 12:01 p.m. PST

With thanks to Heidi Moossdorff for recording the minutes.

ACTION ITEMS:

NSD

- 1. Complete workshop application/collate handout
- 2. Reach out to scientist candidates
- 3. Obtain information from ICS office regarding schedule of EC activities
- 4. Prepare slides to "wrap up" the EC Workshop

RF

- 1. Contact Suzy Elneil and coordinate /facilitate workshop case dealing with question of who is responsible for supporting women's health care in developing nations
- 2. Compose slides related to above discussion and submit before 1 June for inclusion in handout

ED

- 1. Prepare a brief review of medical ethics to open the workshop
- 2. Coordinate efforts of clinicians from Burkina Faso in writing the position paper on FGM
- 3. Edit position paper and submit for BoT approval by 1 June

Ethics Committee Terms of Office

Member	Role	Term Start	Term End	Term Yrs	Elected	Term details	Additional Information
Nina Davis	Chair	23-Oct-14	14-Sep-17	3	Y	3 year term will finish in 2017- can be reelected by formal election	
Ruwan Fernando	Committee member	23-Oct-14	14-Sep-17	3	N	3 year term will finish in 2017- can Renew	
Alvaro Bedoya Ronga	Committee member	23-Oct-14	14-Sep-17	3	N	3 year term will finish in 2017- can Renew	
Elise De	Committee member	23-Oct-14	14-Sep-17	3	N	3 year term will finish in 2017- can Renew	
Heidi Moossdorff- Steinhauser	Committee member	08-Oct-15	30-Aug-18	3	Ν	3 year term will finish in 2018- can renew	
Cristina Naranjo Ortiz	Committee member	29-Aug-13	05-Sep-19	6	N	6 year term will finish in 2019. Cannot renew	
Chris Chatterton	Committee member	16-Sep-16	05-Sep-19	3	N	3 year term will finish in 2019- can Renew	
Martha Spencer	Committee member	16-Sep-16	05-Sep-19	3	N	3 year term will finish in 2019- can Renew	
Ryuji Sakakibara	Committee member	16-Sep-16	05-Sep-19	3	N	3 year term will finish in 2019- can Renew	
Tamara Dickinson	Committee member	16-Sep-16	05-Sep-19	3	N	3 year term will finish in 2019- can Renew	
David Castro-Diaz	Ex-officio	25-Feb-15	14-Sep-17	2	N	Ex-officio	

Quorate No=3

Nominations 2017

Nina will need to confirm if re-apply for the Chair position.

Ruwan, Alvaro and Elise will need to confirm if they wish to renew, if not then these positions will need to be advertised after Tokyo.

Кеу	
Colour	Meaning
	Stepping down in Tokyo
	Stepping down in Florence
	Elect position- will need to re-
	apply
	Will need to confirm if renewing,
	positions will need to be advertis
	after Tokyo
	New member/position

ICS Ethics Committee Terms of Reference

1.

PURPOSE: To establish and maintain proper conduct of the ICS in matters of ethical consideration

2. FUNCTIONS:

- Develop policies to ensure that all research presented to the Society is carried out in compliance with international ethical standards for the conduct of human and animal research. These policies will then be presented to the Board of Trustees for approval and implementation. Establish, update, monitor and enforce disclosure policy regarding conflicts of interest as they apply to ICS members, officers and meeting participants
- 2. Organise an educational workshop and one or more other programmes dealing with ethical issues relevant to the interests of ICS members. These are to be presented at the annual scientific meeting.
- 3. Develop position papers on ethical matters on behalf of the ICS
- 4. Serve as a resource for resolution of ethical questions raised by the Board of Trustees or by the ICS membership
- 5. Serve as a liaison between the membership and the Board of Trustees to convey views and opinions regarding ethical issues that may arise.
- 6. Undertake such additional matters as may from time to time be **required** of the committee by the General Secretary and Board of Trustees.
- 3. RESPONSIBLE TO: ICS Board of Trustees and ICS General Secretary

Total Members	Method of Appointment	Name	Term of Office
General Secretary/ Board Liaison rep	Ex officio	See Membership Page	3 years
Chair:	Elected. A member must sign his/her agreement to stand. This nomination is signed by nominator and seconder, all being current ICS members. The nominee for Chair would be a current or recent member (past 5 years) of the Ethics Committee. If no one is nominated the ICS Nominations committee may suggest a suitable candidate. Nominations received by 1st March for current members all other applications by 1st April.	<u>See</u> <u>Membership</u> <u>Page</u>	Term of office: 3 years, renewable once by formal election
Membership	All members of ICS committees must be active ICS members (paid for current membership year) (By-law 2.3.2) 9 members each with 3 year term of office, 3 retiring each year ensuring a regular rotation through the committee.	<u>See</u> <u>Membership</u> <u>Page</u>	3 years, renewable once by Chair/committee approval.

4. COMPOSITION:

	The optimum representation is 10 Committee members formed preferably from the following: 2 gynaecologists 2 urologists 1 geriatrician 2 physiotherapists 2 scientists 1 nurse	Further terms could be approved in exceptional circumstances and by referral to the ICS Trustees.
Subcommittees (if any)	Ad hoc	
Updated January 2016		

- **5. MEETINGS:** One face-to-face meeting during the Annual Scientific meeting. Other meetings throughout the year by teleconference, as required, and by email/online forum.
- **6. QUORUM:** One third of committee membership plus one. For example, a committee of ten will have a quorum of four members.
- **7. MINUTES:** Minutes are recorded at each meeting and posted on the ICS and CPC website in accordance to 2009 ICS Bylaw 6.1-6.4).

8. REPORTING & ROLES:

The Chair is responsible to the Board of Trustees, and to the members of the ICS at the AGM. The Chair must table a report at the AGM and be available to answer comments from members. The Report will be available to members 6 weeks ahead of the AGM so members can come prepared. The Chair should not read out the Report at the AGM but draw attention to important areas. If important issues should arise during the year, the Chair must advise the General Secretary, without delay.

For Terms of Office Information please see Membership Page

Dear Committee Members,

Please review the standard operating procedure for producing an "ICS Educational Module". Please note that this is still a working document and if you have any comments please direct them to Jenny or Avicia in the office. It is hoped that Educational Modules will be the gold standard of online educational content that the ICS produces. Over the next few months other types of online content will also have a procedure created so that any content that is placed on ICS TV will have followed the process of authorisation.

If you have not already we encourage you to view and review the content already on ICS TV <u>http://www.ics.org/tv</u> We require your feedback before this takes a prominent position on the ICS website.

ICS Educational Module Standard Operating Procedure

The ICS strategy over the next 5 years is to increase scientific and educational output and to become the go to society for scientific content. In addition to standardisation reports the ICS committees have been creating educational modules. Educational modules are central to the ICS strategy of facilitating the exchange of knowledge and experience among interdisciplinary health programmes. The ICS is seeking to develop and distribute high quality global health educational modules; define standards and competencies in health education; and address the needs of students, educators, and trainees as they seek to gain the skills and knowledge necessary to become healthcare leaders.

These modules consist of a PowerPoint available for download, a video and a peer reviewed published article. The outcome of these modules is that educators around the world can download the ICS module and present this to their students/colleagues. It is also expected that when an ICS speaker is invited to speak at an educational course or guest lecture the educational modules are used to provide the standardised educational content. The paper sent to NUU should be a systematic review of the content and should be in accordance to the 'PRISMA -checklist/guidelines'.

This document has been created to assist those Working /Committee groups who wish to create a module for the ICS and to ensure adherence with the approved process.

Vision for final product:

- 1. Has clearly outlined learning objectives at the beginning.
- 2. Peer reviewed paper published in NeuroUrology & Urodynamics
- 3. Video demonstrating/explaining key issues and/or techniques—goes beyond paper to increase depth of learning.
- 4. PowerPoint presentation.
- 5. The entire module could be used by an individual over the web or as part of a course for students directed by a mentor.

Working/Committees General Information

- The composition needs to be ICS members, multi-disciplinary, multinational and representing the most important stakeholders where appropriate. However if content is clearly for one discipline then sole disciplined groups are acceptable.
- Non ICS members can be part of a working group as experts or representatives of specific stakeholders but they must become an ICS member for the duration of their time on the project.
- Each group should choose a lead established at the outset who will also be the first or last author on the published paper. All members of the group will be responsible for the entire content of the module as a group. Note the lead of the group does not need to be the person who records the video. The presenter must have a clear speech, free of strong accent see the guidelines document for preparing the module content (INSERT LINK WHEN READY).
- It is recommended that the module is presented to an audience at the annual meeting before it is recorded and where possible before the manuscript is sent for publication. This will provide valuable feedback.
- The module cannot be sponsored in any way and no bias should be given towards one particular product, pharmaceutical or equipment. Best practices must be followed in avoiding brand names. When there is any mention of specific product a disclaimer should

be added to the start of the document advising that ICS does not endorse this product over other products on the market.

- The ICS will not provide financial budget for face to face meetings of any group but will consider budget proposals for videoing the content.
- The ICS office will assist with setting up a forum for the group to exchange ideas and content for review. The office can also offer facilities for teleconference or WebEx, upon approval of a budget request.
- It is expected that a module should take no longer than 6 months to prepare.

Stage	Action	Comment
Proposal Stage	Creation of committee/working group to prepare proposal.	This can be a committee who have decided to prepare a
	prepare proposal.	module or a group of ICS members.
Proposal Stage	Budget and proposal is sent to ICS office. Proposal should explain the module in no more than 2 pages outlining the aims and objectives, learning outcomes, target audience and requirement for module. Budget will only cover the costs of filming and editing costs. Budget can be prepared in conjunction with ICS Office who can assist with the best way to record the module.	ICS Office ensure no overlap with other working groups and will advise the appropriate committee. ICS office to notify Education, Standardisation committee of proposal in progress. Budget to be approved by Board of Trustees
Preparatory Stage	Working group reviews the literature, and prepares the manuscript.	Office will assist with creating online forums for easy discussion and monitoring/chasing if required.
Review Stage	Manuscript is sent to Education and Standardisation Steering Committees and Board of Trustees who review for educational value and standardisation adherence.	These committees are not commenting on the content of the module. The committees should respond within 2 weeks.
Publication Stage	Once approved the review paper can be sent for publication in the ICS journal, Neurourology & Urodynamics. The PowerPoint slides are then to be prepared and video recording will be completed in conjunction with the ICS office.	Article submitted to NUU should clearly reference International Continence Society (ICS) Educational Module. Discussion with the ICS office concerning best way to record content.
Implementation Stage	Once completed the ICS office will disseminate the content via the ICS website, social media and other outlets.	

Educational Module creation procedure

Checklist:

□ Working group created and chair appointed

- □ Budget and proposal sent to ICS Office
- □ Budget and proposal are reviewed and approved by Board of Trustees
- □ Working group prepares review paper
- Content reviewed by relevant Education, Standardisation Committees and Board of Trustees
- □ Paper submission to NUU
- PowerPoint and ideally video manuscript is prepared
- □ Video is recorded
- $\hfill\square$ Video is edited
- □ Module is added to ICS website and advertised