



ICS Physiotherapy Committee meeting Agenda

Tuesday 13TH September,

Venue: Tokyo International Forum

Room: G405

Time: 11:00-13:00

Known Attending: Doreen McClurg (Chair), Cristina Naranjo Ortiz, Heather Moky,

Known Apologies: Rhonda Kotarinos, Rebekah Das, Peter Meyers, Melanie Morin, Jacqueline de Jong, Paula Igualada-Martinez, Cristiane Carboni, Petra Voorham - van der Zalm, Adelia Lucio,

Also in attendance: Myung-Soo Choo, Jenny Ellis, Nelly Faghani (New),

1. Committee picture to be taken
2. Approval of Montreal meeting minutes (Attached)
3. Approval of teleconference minutes- January, February & August 2016 (Attached)
4. Terms of Office and
 - a. Alignment to Committees within the Physiotherapy Committee.
 - b. Feedback from these committees
 - c. Feedback from members on any other ICS committees
5. Terms of Reference
6. Update on publication of Educational Guideline
7. New Standard Operational Documents discussion from the ICS office (Attached)
8. Update on project re how pelvic floor examinations are taught
9. The physiotherapist's role on the treatment of Fistula, co-option of Gill Brook, working with RK
10. Update on Physio Roundtable
11. AOB

ICS Physiotherapy Committee Meeting Minutes

**Tuesday 6th October,
Venue: Palais des Congrès
Room: 512H
Time: 07:00-10:00**

Attendees: Doreen McClurg (Chair) Elisabeth Bakker, Cristiane Carboni, Rebekah Das, Jacqueline De Jong, Rhonda Kotarinos, Adelia Lucio, Stephanie Madill, Peter Meyers, Heather Moky, Melanie Morin, Cristina Naranjo-Ortiz, Marijke van Kampen, Petra Voorham-van der Zalm.

Apologies: Chantale Dumoulin

Also in attendance; Myung-Soo Choo, Avicia Burchill, Paula Iguarada-Martinez

1. Education Document

EB explained that there were a few comments on the review document. Some comments were with regards to the English which is very easily changed. The scoring was raised and we decided not to use the International Classification but just reference but EB would like to have advice of committee with this point. The committee agreed. EB questioned the first phrase and it was agreed to add “to ensure a multi-disciplinary approach when needed”. It was also commented that there are too many references to overactive pelvic floor and it was suggested to remove but the committee agreed to keep this in the document. EB will make changes before meeting tomorrow. DM wanted to check the procedure on how it gets published.

ACTION POINT: ICS Office to provide procedure on how to get document to publication stage.

MvK asked about the document suggesting that people should aim for a level 3. EB stated it was in the document and it was recommended but that it is not always possible. It was agreed to make it clearer. EB questioned should lobbying re level 3 be an aim of the document. CC felt that was important. DM also stated it would be a useful document to start a women’s health service. RD it might be private not always government.

2. Approval of Rio meeting minutes

Approved

3. Approval of teleconference minutes- January 2015

Approved

4. Approval of teleconference minutes – September 2015

Approved

5. Terms of Office

SM confirmed that she would not be renewing her position. CNO confirmed she would like to stay for another term. It was agreed to call for one position to continue succession planning.

ACTION POINT: Note SM not renewing on committee and the Physiotherapy Committee to call for one expression of interest.

6. Terms of Reference

Round Table Sub Committee: PV (Chair) & CNO, AL. Remove RD

RT PV, CNO and AL

Education – RK, AL, PM & HM. Remove EB.

RK, AL, PM HM

Membership & Communication – CC. Add RK. Remove CNO.

CC, RK

Scientific – MM, RD, RK, DM. Remove CD & RK. Add PI.

MM, RD, DM, PI

ACTION POINT: ICS Office to make changes to subcommittees on the website and committee to check.

ACTION POINT: CC to liaise with ICS Office to set up rota re articles for enews.

ACTION POINT: CC to collect powerpoints and handouts from round table to load to the ICS website. Office to assist and follow up.

It was agreed that there were no changes to the TOR re attendance of meeting. It was discussed that all PT ICS committee members get entrance to RT for free and that speakers should also be entitled to this.

ACTION POINT: ICS Office to ensure that speakers and physio committee members of the round table are permitted in for free.

A discussion with regards to industry supporting the round table was held. HM questioned whether there were any rules. AB explained there were no rules as the Round Table is excluded from CME. AB requested that if anyone has contacts with industry partners to put them in contact with office.

ACTION POINT: Committee to consider possible industry support for the Round Table to either bring physios to meeting or support social event.

7. Outstanding Actions:

6b ACTION POINT: CNO, CD, PM, to develop terms of reference template for each sub-committee. *CD confirmed 'We have not completed this task yet as the previous project is still not completed. When we finalise the adherence consensus project, we will move on to other projects' 14/1/15*

JJ confirmed that the terms of reference for the round table subcommittee could be used as a template. The scientific subcommittee need to produce a TOR. PR to produce aims and objectives for the education subcommittee.

ACTION POINT: TOR to be produced by January for each subcommittee. ICS Office to circulate round table TOR with minutes as example/template.

8. Lifetime Achievement Award

DM explained that for the past 2 years the committee have submitted application for Kari Bo. It was discussed and DM happy to submit again for 2016.

ACTION POINT: ICS Office to remind DM of lifetime deadline and application process.

9. Plans for Tokyo Roundtable

PV when planning for 2016 have to consider that in Beijing no Chinese physios came to the Round Table and that its expected to be the same in Japan as there is no physio role in Japan. PV asked the committee, do we lower the academic level for the Round Table to encourage Japanese attendance? Or keep to a relatively high standard because the core ICS members are attending to increase and develop their knowledge and skills.

MC explained that in Japan the nurses do the physio work. A discussion was held about the lack of physios in Japan. PM suggested to discuss with CPC. It was agreed to provide a higher level Round Table and an “Entry Level” or “basic” workshop. DM suggested to review the format for the RT after the evaluation.

ACTION POINT: Physio Committee to send a letter to the Japanese ICS members to contribute to workshop and to encourage new people to come.

ACTION POINT: Physio committee workshop to have translation

ACTION POINT: SM to provide details of institution in Japan who has partnership with?.

ACTION POINT: ICS Office and chair to contact the Japanese Physio Association

ACTION POINT: Ask Board for 5 free registrations to the 2016 to encourage new members to join i.e. the Ambassador programme.

DM asked the committee if anyone has any links then to use these try and raise the profile.

10. New project – ‘developing best practice guidelines for training physiotherapists to complete pelvic floor muscle assessments’

PM explained that after finishing the guidelines, RD submitted the suggestion of developing best practice guidelines for pelvic examination and most of the committee agreed this was worth doing. AB explained there could be Educational Modules & e-learning options. MM explained that her workshop included many of the tools and perhaps this could form the basis of such guidelines. PM responded perhaps the content is almost there and then look at what we can develop later. In long term the guidelines could be very developed. DM felt that they needed to put a group get together. DM suggested that the end point could be standard educational modules. SM thought that this was not a standard alone thing – it should be combined with all other aspects of the practice.

The Education and the Scientific committee could get together to develop such guidelines and discuss the format.

Physiotherapy Committee Teleconference 21st January 2016

Attendees: Doreen McClurg, Jacqueline de Jong

Also in Attendance: Jenny Ellis

Plans for ICS 2016

- Committee agreed that the roundtable would take place on Wednesday afternoon with a drinks reception at the end of the session.
- 1 room only, no breakout rooms. Room to be set up as lecture theatre at the front, break out tables at the back. JDJ would like to review numbers and change rooms- if we reach maximum capacity for the room selected.
- Rough plan for the day- 3 speakers before the break, 2 workshops after the break and a report from the physiotherapy committee
- JDJ to invite Kari Bo to be a speaker- presenting new research.
- We need a local PT speaker-JE suggested Wakako could suggest local PT's. JE to contact.
- Avicia to confirm the ticket costs with Kenes- including drinks reception (plus nibbles.)

Physiotherapy teleconference Wednesday 10th February Minutes Final

Attendees: Doreen McClurg (Chair), Cristina Naranjo Ortiz, Jacqueline de Jong, Paula Igualada-Martinez, Peter Meyers, Rebekah Das, Rhonda Kotarinos, Stéphanie Madill, Jenny Ellis (ICS Office)

Apologies: Adelia Lucio, Cristiane Carboni, Heather Moky, Melanie Morin, Myung-Soo Choo, Petra Voorham - van der Zalm

1. Apologies- see above.
2. Action points from Montreal, see below:

Physio Committee Meeting	Who?	Latest action
Note SM not renewing on committee and the Physiotherapy Committee to call for one expression of interest.	Office	Done
ICS Office to remind DM of lifetime deadline and application process.	AB	Done
Ask Board for 5 free registrations to the 2016 to encourage new members to join i.e. the Ambassador programme.	DM	In budget request
ICS Office to ensure that speakers and physio committee members of the round table are permitted in for free.	AB	will do next year
ICS Office to provide procedure on how to get document to publication stage.	JE	
ICS Office to make changes to subcommittees on the website and committee to check.	Office	
CC to liaise with ICS Office to set up rota re articles for enews.	CC	DM received schedule will forward to committee.
CC to collect powerpoints and handouts from round table to load to the ICS website. Office to assist and follow up.	CC	Ongoing
Committee to consider possible industry support for the Round Table to either bring physios to meeting or support social event.	ALL	No industry sponsors at the moment, JDJ- limited responses from industry. Looking to have drinks/nibbles included in the price.

TOR to be produced by January for each subcommittee. ICS Office to circulate round table TOR with minutes as example/template.	Office	To be finalised in March
Physio Committee to send a letter to the Japanese ICS members to contribute to workshop and to encourage new people to come.	DM	
Physio committee workshop to have translation	AB	
SM to provide details of institution in Japan who has partnership with?	SM	
ICS Office and chair to contact the Japanese Physio Association	Office/DM	

3. Update on Educational Guidelines- PM- working on the "guideline paper will send it ASAP to Doreen.

PIM enters call.

4. Update on new project developing Best Practice Guidelines for training PTs to complete PF assessment- RD sent DM confirmation that she was information gathering. RD working on what will be included in training in India, also working with colleagues in Australia, their suggestion was that we can contact tertiary institutes that teach pelvic floor training then we can put together best practice from this information. Will require further discussion on how people are trained- is it done in tertiary environments? DM UK affiliated to University. RD picked up post graduations through professional development courses. SM in Canada its professional development courses. JDJ run through a University. RD part of master courses not under graduate programs or professional development courses. PM need to do scoping review and then ask for individual input, would be glad to centralise information to be used. RD will contact Australian institutes for this information, PM needs to be evidence based- evaluation, teaching etc. DM will leave education committee to move that forward.

PM leaves call.

5. Round table update – limited sponsorship opportunities may need to self-fund. DM concerned about translation costs, no money for translation costs. KB speaking at the roundtable, JDJ suggested KB speak at SOA session. Need suggestions for people to give SOA presentation or workshop

presentations. PM not attending, RK not attending, RD not attending, DM attending, SM not attending, CNO attending, PIM might be attending . DM thinks asking KB good idea. JDJ ask local PT who's attending to suggest workshop. Heidi and Julia attending. JE suggested direct mailer to PT members to speak at the session- apply for this. DM agreed this would be fair way to recruit for the session. DM correspondence with local PT sent to JDJ, thinks it might be difficult to use local speakers, limited positive responses might be able to get them speak for 5 minutes. PT local don't do research so their level is too low to speak. Suggest urologist or urogynaecologist instead. Deadline for applications end February. ICS office to put together an email to physio members of ICS to find out who is likely to attend and who may be interested in presenting/doing a workshop at the roundtable

6. Basic Workshop- has been submitted, will hear shortly.
7. Communications update- DM had received an email from Cristiane and is to send this information round all committee members to contribute. JE confirmed hot topics, even basic very popular.
8. Research Project- DM asked whether funding available- JE to confirm awards available. DM committee to look into research options, to be discussed in Tokyo. JDJ review of pelvic floor literature? Evaluating pelvic floor contraction possible topic or anorectal.

CC left call.

9. Update Lifetime achievement- DM confirmed that Kari Bo will receive the award in Tokyo.
10. Update Committee TOR- submitted for Board sign off, due March.
11. Committee next year- 1 person suggested but hasn't started. JE to check and confirm name and confirm to DM.
12. AOB- JE to confirm with DS budget

Urology news article- PIM wrote article for urology news, review of PT, hot topics in PT etc. This came about as the ICS office requested a PT member to be involved in this article. DM thanked PIM for this project.

DM asked if office could assist in production of materials that PT committee could send out to their network? JE confirmed that this would be possible.

13. Date of next meeting- call 6 weeks before Tokyo (2nd August.)



ICS Physiotherapy Committee meeting Minutes

Wednesday 10th August 2016

Venue: Teleconference

Time: 12:00-13:00 GMT

Attendees

Name	On teleconference	Attending Tokyo
Doreen McClurg (Chair)	yes	Yes
Adelia Lucio	no	Not known
Cristiane Carboni	no	Not known
Cristina Naranjo Ortiz (Not Available) MAY NOW PHONE	yes	Yes
Heather Moky	yes	Yes
Jacqueline de Jong	yes	Unsure
Melanie Morin (Not Available)	No (apologies)	Yes
Myung-Soo Choo (Not Available)	no	Yes
Paula Iguallada-Martinez (Not Available)	yes	No
Peter Meyers (No Response)	no (apologies)	No
Petra Voorham-van der Zalm (Not Available)	no(apologies)	No
Rebekah Das	yes	No
Rhonda Kotarinos (Not Available) CAN NOW PHONE IN	yes	No
ICS Office ATTENDANCE UNCERTAIN		

1. Minutes of all meetings will be signed off in Tokyo

2. TOKYO ROUNDTABLE –see above

Jacqueline gave an update re the Physio Roundtable.

The updated schedule has now been uploaded on to the web-site.

Doreen is to congratulate Kari on her award following her presentation.

Doreen to contact PT members of other committees e.g. Education, Scientific, Ethics, Trustees, WIKI/communications for a brief update on their activities to give in her report or to do a brief report themselves. (Might be easier if I was to do all rather than everyone - what do people think?)

Jacqueline has sent information to the speakers and to the roundtable chairs about the format of their presentations/discussions

ICS has agreed to ask PTs attending the Roundtable to pre-select the workshops they want to attend. If booking at ICS then this facility will also be available on the main registration desk.

This will be a less chaotic way of workshop selection

Evaluation of Round table – Jacqueline to contact Heather and myself with the original evaluation forms and Heather has agreed to update this.

Heather has agreed to help with Chairing the Roundtable should Jacqueline be unable to attend

3. Kari Bo presentation for the Lifetime Achievement award. It was decided that a short introduction of Kari by someone from the committee would be given at the dinner just before her presentation. Paula suggested Doreen as chair should do this



4. Terms of Office - One new member elected Nelly Faghani from Canada.
We have 4 members of the committee who will have served 3 years in 2017 and are eligible to stand for a further 3 years, Cristiane Carboni, Rhonda Kotarinos, Rebekah Das, and Peter Meyers. All have confirmed willingness to stand again except for Rebekah who will let us know before the Tokyo meeting.
A new Round-table committee also needs to be put in place for 2017
5. Projects update –
Education publication – Peter has sent Doreen a draft publication. Once read this will be circulated to the rest of the committee
Pelvic floor assessment – Rebekah has gathered documents from 2 universities in Australia and one from India what outline how this is taught. During the Round Table report this project will be highlighted and we will ask for information to be sent to us from as many countries as possible, including the UK's CSP, and Chantale's pelvic floor evaluation workshop. Doreen to ask the ICS office if these documents are something we can put on to the PT Documents Forum on the ICS web-site so we all have access. Rebekah has also developed an excel spreadsheet to facilitate recording of teaching methods etc. All the PT committee are to review this spreadsheet and once approved (hopefully by Tokyo) if each person who had a document to upload they could also complete the relevant parts of the spreadsheet.
It was agreed that any University documents that we have will only be used for this purpose and we will acknowledge the university in any publications.
Fistula – it was agreed that this project should go ahead with Gill Leading and Rhonda helping

Physiotherapy Committee Terms of Office

Member	Committee Role	Term Start	Term End	Term Yrs	Elected	Term details	Additional Information
Doreen McClurg	Chair	23-Oct-14	14-Sep-17	3	Y	3 year term will finish in 2017- can be reelected by formal election	
Stephanie Madill	Committee Member	29-Aug-13	15-Sep-16	3	N	3 year term will finish in 2016- can renew once	Stephanie has confirmed that she will step down in Tokyo.
Cristiane Carboni	Committee Member	23-Oct-14	14-Sep-17	3	N	3 year term will finish in 2017- can renew once	
Rhonda Kotarinos	Committee Member	23-Oct-14	14-Sep-17	3	N	3 year term will finish in 2017- can renew once	
Rebekah Das	Committee Member	23-Oct-14	14-Sep-17	3	N	3 year term will finish in 2017- can renew once	
Peter Meyers	Committee Member	23-Oct-14	14-Sep-17	3	N	3 year term will finish in 2017- can renew once	
Melanie Morin	Committee Member	18-Oct-12	30-Aug-18	6	N	6 year term will finish in 2018- CANNOT RENEW	
Adelia Lucio	Committee Member	08-Oct-15	30-Aug-18	3	N	3 year term will finish in 2018- can renew	
Petra Voorham-van der Zalm	Committee Member	08-Oct-15	30-Aug-18	3	N	3 year term will finish in 2018- can renew	
Heather Moky	Committee Member	08-Oct-15	30-Aug-18	3	N	3 year term will finish in 2018- can renew	
Paula Igualada-Martinez	Committee Member	08-Oct-15	30-Aug-18	3	N	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	
Nelly Faghani	Committee Member	15-Sep-16	05-Sep-19	3	N	3 year term will finish in 2019- can renew once	
Myung-Soo Choo	Ex-Officio	23-Feb-15	14-Sep-17	2	N	Ex-officio	

Quorate No=5

Nominations 2017

Doreen will need to confirm if reapplying for the Chair position.

Stephanie Madill stepping down in Tokyo.

Cristiane, Rhonda, Rebekah and Peter need to confirm if renewing their position. If not then these will need to be advertised following the meeting.

Key	
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 advertised after Tokyo
	New member/position
	No action

ICS Physiotherapy Committee Terms of Reference

1. PURPOSE: The Physiotherapy Committee represents and supports ICS physiotherapy members and the physiotherapy contribution to various ICS committees in order to encourage and maintain the multidisciplinary strength of the ICS. It acts as a liaison body between the Chair of ICS, ICS Board of Trustees and its physiotherapy members regarding matters of mutual concern.

2. FUNCTIONS:

The Physiotherapy Committee has 3 functions: communication, research and education.

a) Membership and communication

- Organise the annual Round-Table meeting
- Create and manage the Physiotherapy Website
- Seek out and encourage PT members to run for key ICS committees.
- Maintain and archive information of the history of the physiotherapy committee on the ICS physiotherapy web site.

b) Scientific and Research

- Foster PT involvement in workshops and courses
- Encourage research
- Keep ICS member physiotherapists informed of new, international research opportunities, developments and outcomes
- Facilitate an International scientific study group

c) Education and Professional development

- Foster physiotherapy education under the auspices of ICS that is of the highest quality, including but not limited to, courses and workshops at Annual Meeting and Educational Activities in developing countries.
- Create and market a competence profile of a pelvic floor physical therapy
- Produce educational material specific to physiotherapy

3. RESPONSIBLE TO: ICS Board of Trustees and ICS General Secretary

4. COMPOSITION:

Total Members	Method of Appointment	Name	Term of Office
ICS General Secretary	Ex officio		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	See Membership Page	Term of office: 3 years, but renewable after notification to the members at an AGM. ICS Bylaw #3.

	<p>member (past 5 years) of the Physiotherapy 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. Voting regulations as stated.</p>		
Membership	<p>All members of the ICS Physiotherapy Committee must:</p> <ul style="list-style-type: none"> - be an active ICS members (paid for current membership year) as per by-law 2.3.2* - have completed a disclosure form - have been a member of ICS for at least 1 year and / or attended at least 1 Annual Meeting, to have first-hand experience of the workings of the Society - be active physiotherapy representative members on various ICS committees and subcommittees, and / or active on physiotherapy committee working parties or sub-committees as per by-law 2.3.6^ - - attend at least 2 out of 3 ICS Annual Meetings. Members are also required to join teleconferences. <p>The committee is made up of between 10 and 12 members</p>	<p>See membership page</p>	<p>3 years, but renewable once by Chair/Committee approval.</p>
Subcommittees	<p>The physiotherapy committee will convene the following subcommittees:</p> <ul style="list-style-type: none"> • Physiotherapy Membership and Communication Subcommittee • Physiotherapy Round Table Subcommittee • Physiotherapy Scientific and Research Subcommittee • Physiotherapy Professional Development Sub-committee • Others as deemed appropriate from time to time 		

*2.3.2. All members of ICS committees must be active ICS members as defined under membership in these bylaws.

^2.3.6. The performance of committee members will be reviewed annually by the committee to determine their contribution based on attendance at meetings, responsiveness to projects etc. Non-active members will then be asked to resign.

5. MEETINGS:

- One face-to-face meeting during the Annual Scientific meeting.
- One teleconference, normally in January.
- Other communications by email.

6. QUORUM: One third of committee membership plus one. For example, a committee of ten will have a quorum of four members.

7. MINUTES: As per the 2009 ICS Bylaws:

6. Minutes

6.1. *Minutes of all General Meeting, Board of Trustee meetings, Executive Committee meetings, any formal meetings of ICS officials and ICS committee meetings must be recorded, and kept at the ICS office and published on the ICS website in the member's only section.*

6.2. *Draft minutes of the meetings shall be sent to all those who attended for correction and subsequently made available to all ICS members via the website within six weeks of the date of that meeting.*

6.3. *Only a member attending the meeting in question may comment on the accuracy of the draft minutes. Any ICS member can comment on the subject discussed or the issues raised.*

6.4. *Sensitive issues will be recorded in the published minutes by the subject only.*

8. MEMBERSHIP ROLES AND REPORTING FUNCTIONS:

1. Physiotherapy Committee Chair

a. Reports to:

- i. Trustees
- ii. Responsible for submitting an interim report to the Board of Trustees' mid-term meeting - date given in advance each year.
- iii. Prepare an annual report to the Board of Trustees outlining achieved goals/budget requests and future objectives and strategies.

b. Roles:

- i. Coordinate the activities of the physiotherapy committee
- ii. Be present at the Annual General Meeting should the membership have any questions about committee activities.
- iii. Lead all committee members in active participation in committee activities

- iv. Review committee member performance annually as per by-law 2.3.6.

2. Physiotherapy Membership and Communication Subcommittee / Team

- a. Reports to:
 - i. Physiotherapy Chair
 - ii. Report to be given at the Physiotherapy Round Table Meeting each year.
- b. Roles:
 - i. Create and manage the Physiotherapy Website
 - ii. Maintain and archive information of the history of the physiotherapy committee on the ICS physiotherapy web site.
 - iii. Develop and implement strategies to help ICS physiotherapy members connect / network / become involved in ICS Physiotherapy activities
 - iv. Seek out and encourage PT members to run for key ICS committees. (See below for specifics)
 - Board of Trustees
 - ICS Education Committee
 - ICS Scientific Committee
 - Such representative members will be expected to provide a written report prior to each physiotherapy committee meeting, and be able to discuss relevant issues to their portfolio during the committee meetings.
- c. Composition:
 - i. Lead and team members

3. Physiotherapy Round Table Subcommittee / Team

- a. Reports to:
 - i. Physiotherapy Membership and Communications Subcommittee lead
 - ii. Report to be given at the Physiotherapy Round Table each year and as requested.
- b. Roles:
 - i. Plan and coordinate the Physiotherapy Round Table at Annual ICS Meeting each year
 - ii. Determine structure of Round Table to possibly include
 - 1. Report of physiotherapy subcommittee leads
 - 2. Presentation for research of good quality not accepted for the annual meeting
- c. Composition
 - i. Physiotherapy Round Table Subcommittee lead – an experienced Round Table Subcommittee member
 - ii. Member of the Physiotherapy Scientific and Research Subcommittee – responsible (with the help of other round table subcommittee members) to plan the scientific component of the meeting
 - iii. Member of the Physiotherapy Membership and Communication Subcommittee

- iv. Site liaison – from the country elected for the subsequent annual meeting, In situations where there is no site physiotherapist available, the site liaison member would be elected from the current committee or from the general membership
 - v. Other members as needed
- 4. Physiotherapy Scientific and Research Subcommittee / Team
 - a. Reports to
 - i. Physiotherapy chair
 - ii. Report to be given at the Physiotherapy Round Table each year.
 - b. Roles:
 - i. Works with ICS Scientific committee physiotherapy representative to foster PT involvement in workshops and courses
 - ii. Keep ICS member physiotherapists informed of new, international research opportunities, developments and outcomes
 - iii. Encourage research – possibly including an international scientific study group.
 - c. Composition
 - i. Lead and team members
- 5. ICS Scientific Committee Physiotherapy representative
 - a. Reports to
 - i. ICS Scientific committee chair
 - ii. Physiotherapy Chair and Committee, activities related to role as Physiotherapy Representative on ICS Scientific Committee
 - b. Roles
 - i. Be an active contributing member to the ICS Scientific Committee: Represent physiotherapy members and their contribution to ICS research activities
 - ii. Act as liaison between the Physiotherapy Scientific and Research Subcommittee / team and ICS Scientific Committees
- 6. Physiotherapy Education and Professional Development Subcommittee / Team
 - a. Reports to
 - i. Physiotherapy chair
 - ii. Report to be given at the Physiotherapy Round Table each year.
 - b. Roles:
 - i. Create and manage a list of interested physiotherapy speakers for educational courses
 - ii. Create and market the competency profile of Pelvic Physical Therapists
 - iii. Produce educational materials specific to physiotherapy
 - c. Composition
 - i. Lead and team members
- 7. ICS Education Committee Physiotherapy representative:
 - a. Reports to:

- i. ICS Education Committee Chair
 - ii. ICS Workshops and Course Sub-committee (WACS) Chair
 - iii. Physiotherapy Chair and Committee, activities related to role as Physiotherapy Representative on ICS Education Committee
- b. Roles:
 - i. Be an active contributing member to the ICS Education Committee and WACS:
 - 1. Represent physiotherapy members and their contribution to ICS Educational Activities
 - 2. Attend 2 Education Committee meetings per year (Annual Scientific Meeting, and January committee meeting in London)
 - 3. Read and score workshop applications submitted to Education Committee (Dec – Jan each year)
 - ii. Act as liaison between the Physiotherapy Professional development Subcommittee / team and ICS Education Committees
 - 1. Propose, design and co-ordinate submission of workshops representing (but not limited to) high quality physiotherapy contribution to the ICS, for submission each year by Dec 1st, with assistance from the Physiotherapy Professional Development Subcommittee
 - 2. Co-ordinate the physiotherapy contribution to ICS external Educational Activities (speakers, topics, content), in conjunction with the Physiotherapy Professional Development Subcommittee

8. ICS Trustee Physiotherapy Representative

- a. Reports to
 - iii. ICS Board of Trustees
 - iv. Physiotherapy Chair and Committee, activities related to role as Physiotherapy Representative on ICS Board of Trustees
- b. Roles
 - v. Be an active contributing member to the ICS Board of Trustees: Represent physiotherapy members and their contribution to ICS
 - vi. Act as liaison between the Physiotherapy committee and ICS Board of Trustees
- c. If no Physiotherapy Trustee Representative at any one time, the Chair of the Physiotherapy Committee will liaise with the Board Allied Health Representative

To view the Terms of Office Information please [click here to view 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 <http://www.ics.org/tv> 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.

Educational Module creation procedure

Stage	Action	Comment
Proposal Stage	Creation of committee/working group to prepare proposal.	This can be a committee who have decided to prepare a 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.	

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
- ☐ Video is edited
- ☐ Module is added to ICS website and advertised