

Clinical Practice Committee (CPC) Remit

Position Statement

The aim of ESPE as a professional society is the welfare of young people under the care of endocrine specialists and who may need hormone interventions. ESPE recognises the rights of all young people to be involved in decisions around their medical care. Young people with variations in gender identification should be recognised as retaining the same level of competence to self-determination as all other young people. Their right to physical integrity and to self-determination should not be reduced, preventing their access to necessary endocrine support and treatments.

Committee Composition

Members	<ol style="list-style-type: none"> 1. Chair 2. Deputy Chair 3. Member 4. Member 5. Member 6. Member 7. Member 8. YES Group representative
Co-opted members	As necessary
Other considerations	<ul style="list-style-type: none"> • Gender balance, young members, spread of clinical disciplines (including diabetes, obesity and metabolism) and spread of geographical areas especially across Europe. • All members should attend the meetings where possible. • Only Committee members should attend the meetings; no representatives should attend unless expressly agreed by the Chair.
Quorum	4 members, including Chair or Deputy Chair
Duration of Service	3 years (with possibility to extend for one year or a second term). Members who are involved in a consensus or guideline development should participate until the end even if their term of office on the committee is complete.
Reporting	The Committee reports to the ESPE Council
Meetings	4 meetings per year. There will be at least one face to face meeting, and it will take place at the Annual Meeting.
Minutes	To all members of the Clinical Practice Committee
Administrative Support	<ul style="list-style-type: none"> • Society Programme Development Team

<p>Remit</p>	<ul style="list-style-type: none"> • To develop and maintain ESPE’s Clinical Practice Committee Strategy, in line with ESPE’s overall strategy. • To lead on the development and endorsement of guidelines and consensus statements/meetings. • To lead on the development of patient information. • To manage and develop the strategies of ESPE Working Groups. • To liaise with the ENDO-ERN. • To develop detailed guidelines for current and proposed clinical activities, including review of website content and other associated information. • To review and monitor progress on all clinical activities and report back to the Council. • To contribute to the evolution, and development of all ESPE clinical activities. • To oversee and contribute to the evolution and development of other ESPE activities as appropriate, in line with the Clinical Practice Committee strategy.
<p>Additional notes</p>	<ul style="list-style-type: none"> • Committee members should make every effort to attend all meetings. • Any Committee member who does not attend a meeting for a year will be asked to step down, other than in extenuating circumstances (e.g. maternity/paternity leave, illness etc.). • All Committee members need to be paid up members of the Society. • All papers and minutes must be treated in strictest confidence. • All Committee members must act in the best interest of the Society. • Any passwords and logins provided to Committee members to enable their roles should not be shared with anyone. • Any potential conflicts of interest should be declared at the start of the meeting or as they arise, and the member concerned should take no part in the discussion. • All members can serve a second consecutive term of office or extend their term for one year. • Members may be asked to take ownership of specific projects being managed by the Clinical Practice Committee.