

## Clinical Committee

### Committee Composition

Chair:	A member of the Executive Committee, designated by the Executive Committee.
Full members:	<p>Typically, 7 members, but with the flexibility to increase to 10 members if required.</p> <p>An open call for available Committee positions will be advertised. ESE members can apply themselves or nominate someone else. Current Committee members can also make nominations. This Committee will review and vote on the applications/nominations received. The Committee Chair will then propose the new member(s) to the Executive Committee, who will ratify the new member(s).</p> <p>Membership should include a Nurse and an EYES representative.</p>
Ex-officio members:	<p>ESE President.</p> <p>ESE President-Elect.</p>
Co-opted members:	Up to two additional members may be co-opted for a limited period to fulfil a specific role, subject to Executive Committee approval. Input may also be sought from patient advocacy groups.

**Quorum** Fifty percent (50%) of Full Members (including the Chair) +1.

### Duration of Service

Chair:	Four years.
Full members:	Four years.
Ex-officio members:	Co-terminous with office.
Co-opted members:	Up to two years, but with the option to extend to four years in total with approval from the Executive Committee.

**Reporting** The Committee reports to the ESE Executive Committee through the Clinical Committee Chair.

**Meetings** At least five meetings per year; meetings can be held online.

The work of the committee is very important. Committee members are expected to attend all committee meetings and to participate in committee related email communications.

Committee members who do not attend three consecutive meetings (or one meeting in a year if meetings are held annually) will be asked to step down, other than in exceptional circumstances.

## **Remit**

1. To advance quality and equality of patient care in endocrinology across Europe.
2. To pursue alliances with and support all healthcare professionals in endocrinology (clinicians, specialist nurses and allied professions) delivering patient care.
3. To recommend new ESE Focus Area Clinical Leads and coordinate the ESE Focus Areas towards strategic clinical developments in endocrinology.
4. To play a leading role in the development of both European and international guidelines for optimal management of endocrine disorders.
5. To give guidance on matters in clinical endocrinology, including ethical issues, societal consequences, and best practice.
6. To support clinical research in Europe, with a special focus on supporting endocrinologists in less-advantaged countries.
7. To manage ESE's input into European databases/registries for rare endocrine disorders.
8. To support the ESE Education Committee on clinical education activities in endocrinology, as required.
9. To liaise with the ESE Science Committee as necessary.
10. To provide input on scientific symposia and other conference and training sessions.
11. To support the ESE Patient Organisation Network, helping to ensure ESE is actively engaged in an appropriate level of patient support activities.
12. To work with the ESE media representative and ESE Office to ensure adequate and appropriate representation of clinical endocrinology in the media.
13. To work towards the financial sustainability of the Clinical Committee activities.

## **Additional notes**

- All Committee members need to be paid up members of the European Society of Endocrinology.
- The work of the committee is very important. Committee members are expected to attend all committee meetings and to participate in committee related email communications.
- Committee members who do not attend three consecutive meetings (or one meeting in a year if meetings are held annually) will be asked to step down, other than in exceptional circumstances.
- The Committee will liaise with other ESE Committees as appropriate.
- All papers and minutes must be treated in strictest confidence.
- The use of an AI 'otter' to join meetings/take notes at a committee meeting is not permitted unless expressly authorised by the Chair.
- All Committee members must act in the best interest of the Society.
- 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.
- The Chair should not serve a second consecutive term of office, unless there are exceptional circumstances identified by the Executive Committee.
- The Society is committed to equal opportunities and the promotion of equality, diversity and inclusion and where possible this committee should follow the principles of [ESE's Equality, Diversity and Inclusion Policy](#).
- Committee membership should represent the key areas of interest; geographical spread; and gender considerations.

## **Current membership**

### Chair

Martin Fassnacht, Germany, co-terminous with office, (2021-2025).

### Full members

Bjørn Olav Åsvold, Norway, (2021-2025).

Annamaria Colao, Italy, (2023-2027).

Channa Jayasena UK, (2024-2028).

Susanne Kaser, Austria, (2023-2027).

Bruno Lapauw, Belgium, (2024 –2028).

Ljiljana Marina, Serbia, (2024 –2028).

Dimitra Argyro Vassiliadi, Greece (2024-2028).

Nurse Representative: Kirsten Davidse, Netherlands (2024-2028).

EYES Representative: Barbara Altieri, Germany, (2024-2028).

### Ex-officio

Jérôme Bertherat, France, co-terminous with office, (President, 2023- 2025).

Wiebke Arlt, UK, co-terminous with office, (President-Elect, 2023-2025).

### Co-opted members

Olaf Dekkers, Netherlands, 2019-2025 (extension 2023-2025 approved by the Executive Committee).

ESE Team member responsibility: Head of Scientific Programmes