

## Professional Practice Committee

### Committee Purpose

Develop evidence-based clinical practice recommendations that will help health-care professionals provide quality care for people with diabetes. Provide a forum for clinical input on Association activities.

### Charge & Responsibilities:

1. Develop standards and guidelines that will help health care professionals provide quality care for people with diabetes.
  - A. Review and update the Association’s “Standards of Medical Care in Diabetes” for the January supplement of *Diabetes Care*.
  - B. Initiate the development of new or revised “Association Position Statements” and “Systematic Reviews”.
  - C. Monitor Association writing groups to ensure timely completion (within one year of assignment) of Association Statements and Technical reviews.
  - D. Suggest topics for consensus panels and working groups to address timely topics in diabetes care.
  - E. Review the Association’s current Clinical Practice Recommendations, and revises as necessary.
2. Monitor and enhance the dissemination and use of the Association’s Clinical Practice Recommendations.
3. Identify other organizations that develop diabetes-related practice guidelines and work with them on topics of mutual benefit.
4. As appropriate, advance the Association’s policies and practices for inclusion within the context of the committee’s work.
5. Promote the Association’s core values of integrity, leadership, ownership, inclusion, trust, and the passion for making a difference.
6. Review the Strategic Plan and determine how the Committee can contribute to the achievement of its targets. Annually provide brief written reports to the Board of Directors on the Committee’s current year activities and results.

### Qualifications for Membership

Members shall have a demonstrated in-depth knowledge of the science, medicine, health care and education related to diabetes. The committee’s membership is multidisciplinary and may include primary and specialty physicians, nurses, dietitians, pharmacists, epidemiologists, and others. Because this committee develops clinical practice recommendations, members may not be employees pharmaceutical, food, or device companies. Committee members agree to publication of their disclosed financial conflicts of interest in the January supplement of *Diabetes Care*.