

## NURSE ADVISORY GROUP

### CONSTITUTION 2019

#### 1. PREAMBLE

In mid-2017 a small Working Party reviewed the role and function of the Society's Nurse Advisory Group. This had been established 13 years earlier, and had made a significant contribution to the Society's work but it was felt that a review might help improve participation and identify priority work areas to support the Society's Strategic Plan.

A new structure was approved in October 2017 by the BTS Board and the then Chair of the Group agreed to stay in post for an additional year while the new arrangements settled in. The two new strands of activity were identified as:-

- Offer an improved learning experience - including RCN accreditation for courses; more events aimed at and planned in conjunction with sub-speciality nursing groups, such as the successful NIV courses. ILD was one area that was mentioned several times
- Lending the specialist nurse voice and support to:-
  - (a) addressing the looming nurse workforce crisis
  - (b) providing more accessible information to help Trusts in relation to specialist nursing job roles. Work might include mapping to the competence framework in Skills for Health, having a downloadable generic Respiratory Nurse Specialist job description, with add-ons to address sub-specialisms at Bands 6,7,and 8 (ILD; ITU; severe asthma etc and developing a strong nurse presence on emerging BTS communications channels.

These themes and work-streams will be in addition to the standard requirements of a BTS Advisory Group, which follow.

#### 2. TERMS OF REFERENCE

- To advise the Society on matters which influence the care of patients and to ensure the work of the Society reflects the respiratory nursing dimension
- Specific tasks will include:-
  - giving advice to the Society on programme content for the Winter and Summer Meetings
  - when requested, providing faculty members and advice on content for BTS short courses

- providing a source of reviewers for Winter Meeting abstracts in their area of expertise
  - providing advice about emerging and unmet research needs, especially where the Society might be involved in some way in answering clinically significant questions
  - assisting if requested in the development of relevant audit tools and the collection of data about respiratory services in a planned way linked to the Society's strategic objectives;
  - advising on relevant training issues in sub-specialty areas
- To provide a pool of expert opinion to which the Society can refer when it receives requests for advice and in response to consultations. These responses are generally prepared by the SAGs, but sent to the organisations concerned by BTS head office staff
  - To advise the Society on matters which influence the care of patients from the perspective of the respiratory nurse, (including treatment, therapy and procedures; appropriate standards of care and resources; and education and research requirements).
  - To be the main channel through which the Society can receive the views of nurse members and through which the Society can send information to members about the areas mentioned above.
  - The Nurse SAG will have a pivotal role in communication and linking together the wide range of activities within differing specialist nursing areas as well as generic issues. It will be at the centre of a new communications "hub" for nurse members.
  - This will require the core membership of the Group, via its Chair, to liaise with Group members, with the Council of the British Thoracic Society and its relevant Standing Committee(s), and in particular their Chairs and any nurse members, and reporting regularly in a structured way. The Society will provide a structure in which this liaison can take place effectively, using headquarters staff to facilitate effective communication.
  - The Chair of the Group will sit on BTS Council, ex-officio.
  - The Group will liaise, usually via its Chair or by a delegated member, with the Association of Respiratory Nurse Specialists, the Respiratory Nurse Alliance and the Royal College of Nursing Respiratory Nurse Forum.
  - It is important for the Chair and all members of the SAG to note that the function of all Advisory Groups is to advise the Society. **The SAG should not develop new pieces of work without prior discussion and agreement.**
  - SAGs have no role in speaking on behalf of the Society, unless specifically requested to do so by the BTS Board of Trustees. Communications training will be provided from time to time.

### 3. MEMBERSHIP

3.1 Membership of the Group is structured so that the Society gains advantage from a broad range of members' expertise, while ensuring that the size of the Group is contained.

3.2 The reconstituted group comprises a Chair and the 2 nurse members from E&T, Models of Care and Workforce Committees only.

3.3 All members, however selected and in whatever capacity, will normally serve for a maximum of 3 years from the date of taking up membership, which is usually effective from the Society's Annual General Meeting in December each year. A rolling replacement system will be established. The only exception is the Chair – elect (appointed in the third year of the Chair's period of service, to allow handover), who will therefore expect to serve for no longer than 4 years. Replacement will be sought by open advertisement.

### 4. STANDING ORDERS

4.1 The Group is required to hold one general meeting for all interested individuals (members /non-members) at the BTS Winter Meeting and, if necessary, and with prior discussion, at the BTS Summer Meeting also. The purpose of these meetings will be to report on developments in the year and receive feedback about:-

- Required educational activities
- Suggested topic(s) for Winter Meeting and Summer Meeting
- Guideline /care pathway development (via SOCC)
- Training issues (via BTS reps on SAC in Respiratory Medicine)
- Resourcing and standards

4.2 In between times, the Society will provide funding for one or two meetings of the Group. If more meetings are needed a case should be made and approval sought from the Honorary Treasurer, via the Chief Executive, both of whom will consult Trustees as necessary.

4.3 In addition, and on the advice of the Group, the Society will also set in place a mechanism by which discussions groups/social media arrangements can be established for nurse colleagues including those in specific disciplines - paediatric respiratory nurses, TB Nurses and so on.

4.4 The Group will also be asked to review Winter Meeting abstracts (for spoken and poster sessions) in its area of expertise, and suggest other colleagues whose expertise might be used in specific categories.

4.5 BTS head office staff will provide a secretariat service for meetings. This will include assistance with agenda planning, distribution of meeting papers, minute taking at meetings and support with follow up correspondence in relation to actions arising from the meeting. Support is also available to help with organising meeting dates and /or teleconferences; advice about

BTS Committees and internal communications; setting up of web discussion fora and so on. The Chief Executive will usually attend meetings, ex-officio

## 5. REPORTING ARRANGEMENTS

5.1 In matters where the Society's opinion is required by external organisations, the Honorary Secretary and / or relevant Committee via the Society's head office staff will seek the views of the Group and may ask it to reply on the Society's behalf, or to contribute opinions as part of an overall BTS response. The Group may also be called upon to provide individual representative(s) on external bodies when a BTS nomination is sought.

5.2 Each BTS Advisory group will be asked to prepare an annual report for the Executive Committee. These will be collated by head office and scrutinised in advance by the Honorary Secretary who will decide if any issues need to be pulled out for discussion at the Executive or relevant Standing Committee, otherwise the reports will be submitted on the 'information only' section of the Executive Committee agenda.

5.3 The Group will be able, via consultation with the Honorary Secretary/Chief Executive about which is the most relevant Committee, to ask that an item or items be discussed by the appropriate BTS Standing Committee. Similarly, the Group may be invited to prepare a paper and /or make a presentation for a Standing Committee or Council to inform discussions at any time during the year.

5.4 Suggestions about topics for short courses and Winter and Summer Meeting symposia may be made (or requested by relevant Committees) by direct contact between Chairs but in any event will also be prompted at the appropriate time via head office, which provides secretariat functions for Standing Committees.

## 6. CODE OF CONDUCT

6.1 The Society values the contribution of those members who serve on its various Committees and Advisory Groups and Working Parties. Without this service, it would not be possible to carry out the great variety of work that is undertaken which contributes to the raising of standards of care of people with respiratory disease. BTS has a justifiably high reputation for the quality of its activities and the advice it gives to external bodies.

6.2 The Society is also proud to have been a pioneer in a number of areas, including its Declarations of Interest scheme, which has been replicated by a number of other Societies in recent years. The probity of our actions is underpinned by a number of policies and procedures which are kept under regular (annual) review.

6.3 To ensure effective functioning of the Declarations of Interest process the Chair should proactively manage declarations from SAG members. This will include:

- Having declarations of interest as a standing item on all meeting agendas;

- Formally asking members whether anything has changed since they submitted their last declaration;
- Formally asking members at the start of each meeting whether there are any agenda items which may cause conflict or in which they have an interest;
- Seeking advice when required from the Honorary Secretary or Chief Executive if there are any concerns about new items mentioned under declaration of interest.

6.3 Consequently, we ask all members of Committees, Advisory Groups and Working Parties to note and abide by the following policy and procedures documents:-

- **BTS Policy on Biomedical Industries & Commercial Sponsorship and associated Declarations of Interest Scheme.** This is reviewed annually by BTS Council and Trustees. (updated in June 2015)
- **Endorsement Policy** (revised in June 2015)
- **Media policy** (to be revised in October 2015)
- **Travel and subsistence policy** (reviewed annually by Honorary Treasurer and Chief Executive)

These documents can all be found on the BTS website in the “governance” pages of the section entitled “About BTS”

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**Date of next review – June 2021**