



British  
Thoracic  
Society

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# ANNUAL GENERAL MEETING



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The ANNUAL GENERAL MEETING of the British Thoracic Society will be held on Tuesday 23 November 2021 at 4.30PM virtually on Zoom.

[Please register in advance via Zoom](#)

Better lung health **for all**

There is no disguising the fact that this has been another challenging year, again dominated by COVID-19, with respiratory teams continuing to work flat out, dedicated to delivering high quality care to patients and supporting colleagues in these difficult times. I am so humbled to be a part of the respiratory community. In addition to our “usual” respiratory patients our specialty continues to routinely care for those patients with acute COVID-19, both hospitalised and in “virtual wards”, following up these patients and leading the care for those with “Long-COVID”.

BTS has continued to support respiratory teams with resources and rapid guidance, but also by working closely with NHSE&I and colleagues in the devolved nations to ensure the voice of the specialty is heard and considered in national planning and decisions. The Society’s work across the range of our usual activities has continued. We have maintained much of our educational portfolio, albeit virtually, and as we prepare for this AGM we look forward to another successful online Winter Meeting.

I invite you to read more about all this work in both the Society’s Annual Report for 2020/21, and in our first ever Impact Report, both available on the BTS website.

Our objectives have not changed. With the invaluable support of our members we continue to strive to:

- **Bring the professional and patient voices together.**
- Promote **awareness of the crucial role of the respiratory workforce** and of the **impact of respiratory disease on society.**
- Develop and disseminate **world-class clinical standards, education** and related **quality improvement** tools.
- Seek **more effective synergies** with others working in the respiratory space towards a long term strategy for change.
- **Promote equality of opportunity and outcomes** in all that we do.
- Develop ways to **address health inequalities.**

There are many challenges ahead including the backlog of appointments, diagnostics and procedures caused by the pandemic. Winter is likely to bring further extraordinary pressure, people are tired and we know that the respiratory workforce remains inadequately resourced.

BTS has been renewing its efforts to ensure that the UK has an appropriately staffed and skilled respiratory workforce to match the challenges of today and tomorrow, by engaging with parliamentarians, NHS leaders and other stakeholder organisations. Still, in the midst of this, the respiratory specialty continues to show great resilience, adaptability and motivation, providing the highest possible care to all those who need it.

This is my last AGM foreword as Chair. I would like to thank all of you, my colleagues, for your support during the past three years. They have been very challenging times, but out of all threats come opportunities and it is our job to keep the faith and make the most of these opportunities. I welcome my successor, Dr Paul Walker, who will be an even greater Chair of the Society.

Finally, I was delighted to meet with some of the team again at Doughty Street recently and I would like to thank all of the staff at BTS HQ for their support, companionship, good humour, commitment and dedication. Your ongoing ability to deliver mountains from molehills has always astounded me.



Jon Bennett  
Chair of the BTS Board of Trustees



## BRITISH THORACIC SOCIETY ANNUAL GENERAL MEETING

Tuesday 23 November 2021 at 4.30pm by Zoom

Please register in advance [via Zoom](#).

After registering, you will receive a confirmation email containing more information about joining the AGM.

Please send apologies to [bts@brit-thoracic.org.uk](mailto:bts@brit-thoracic.org.uk)

### AGENDA

The Society's President, Dr Graham Burns, will be in the Chair.

1. Apologies for absence
2. **Minutes** of the Annual General Meeting (AGM) held on Wednesday 2 December 2020  
(Paper 1)
3. **Matters arising** from the minutes if not elsewhere on the agenda.
4. **Report from the Chair of the Board of Trustees**
  - 4.1 Professor Jon Bennett will give a brief overview of activities during the year.
5. **Report from the Honorary Treasurer**
  - 5.1 Report and financial statements for the period ended 30 June 2021 (Paper 2)  
  
Members are referred also to the Annual Report from the Board of Trustees which can be found here: <https://www.brit-thoracic.org.uk/about-us/governance-documents-and-policies/>
  - 5.2 Investments
  - 5.3 Membership Fees for 2022, including the ERS membership annual fee for BTS members
  - 5.4 Delegate rates for Meetings in 2022
  - 5.5 Appointment of auditors for 2021/2022
6. **Report from Editors of *Thorax* and British Open Respiratory Research (BMJORR)**
  - 6.1 The annual reports from the Editors-in-Chief are enclosed. (Papers 3a and 3b)
7. **Office Bearers and Trustees**
  - 7.1 **President and President-elect 2022**  
The Honorary Secretary will report. Following the call for nominations in the summer of 2021, **Professor Onn Min Kon** was nominated and was returned unopposed. He will serve as President-elect with effect from the AGM in November 2021, serving as President for one year from the AGM in November 2022. Mrs Rachael Moses will serve as President in 2022.

## 7.2 **Chair of BTS Board**

The Honorary Secretary will report. Following due process and in accordance with the Society's constitution, Dr Paul Walker was selected as Chair-elect in 2020. He will take up post with effect from the AGM, having shadowed Professor Jon Bennett during 2021.

## 7.3 **Honorary Secretary**

The post of Honorary Secretary is advertised in the year before the current incumbent demits office, as required by the Society's constitution. This allows for effective handover to take place during the coming year. The post has been advertised and a report will be provided.

## 7.4 **Chair of the Science and Research Committee**

Following due process and in accordance with the Society's constitution, Professor James Chalmers was appointed as the Chair of the Science and Research Committee and will take up post following the AGM.

## 7.5 **Chair of the Quality Improvement Committee**

Following due process and in accordance with the Society's constitution, Dr Mark Juniper was appointed as the Chair of the Quality Improvement Committee and will take up post following the AGM.

## 8. **Election of members of Council**

Following the call for nominations, 6 people will join Council, serving from November 2021 until November 2024. 7 applications for 5 places on Council were received and an election was held. No election was held for the under 35 member.

Dr Robin Condliffe

Dr Rebecca D'Cruz (the under 35 member)

Professor Koottalai Srinivasan

Professor Stephen Scott

Dr Dominick Shaw

Dr Sophie West

## 9 **Votes of thanks**

9.1 To all members of BTS.

9.1 **Elected members of BTS Council** who will stand down at the AGM:

9.2 Dr Jay Suntharalingam

Dr Ricardo Jose

Mrs Lizzie Grillo

Dr Kavita Dave

Dr Alanna Hare

Professor John Hurst

9.3 **Trustees** who will stand down at the AGM:

Professor Liz Sapey, Chair of the Science and Research Committee

Professor Mick Steiner, Chair of the Quality Improvement Committee

9.4 **Officers** who will stand down at the AGM:

Dr Graham Burns, President

Professor Jon Bennett, Chair

10. **Any other business notified to the Chair or Secretary before the meeting**

11. **Date of next AGM**

Wednesday 23 November 2022 (to be confirmed)

**MINUTES of the meeting of the ANNUAL GENERAL MEETING of the BRITISH THORACIC SOCIETY**  
held on Wednesday 2<sup>nd</sup> December 2020 at 4.30pm, remotely via Zoom.

Dr Mohammed Munavvar presiding.

The meeting was quorate, with 89 members attending.

1. Apologies for absence had been received from Dr Stephen Chapman, Dr Justine Hadcroft, Professor Nick Hart, Dr Theresa Harvey-Dunstan, Professor Gisli Jenkins, Professor Alan Smyth and Dr Matt Wise.
2. **Minutes of the last meeting**
  - 2.1 The minutes of the Annual General Meeting held on Wednesday 4<sup>th</sup> December 2019 were confirmed as an accurate record. There were no matters arising.
3. **Report from the Chair of the Board of Trustees**
  - 3.1 Professor Jon Bennett presented a brief overview of the Society's activities during the year and referred members to the Trustees' Annual Report and Accounts for the year ended 30 June 2020 for more details. He began by reflecting on the impact of the COVID-19 pandemic, and expressed the hope that all members would continue to stay safe and well, while recognising that many were feeling extremely tired and/or had themselves suffered from COVID.
  - 3.2 The Chair made particular reference to the way in which the COVID-19 pandemic had affected individual members in their work within the NHS and other settings; had affected the work of the Society; and its impact on the speciality moving forward. Between March and October 2020 BTS had produced (and updated) over 30 pieces of pragmatic guidance which were viewed more than 300,000 times on the website and downloaded more than 250,000 times, 80% from within the UK, and 20% in the rest of the world. The Winter Meeting had been moved to February 2021, and, while it was a source of regret that it could no longer be held face-to-face, the remote event would provide the same excellent quality content to a high production standard. Short courses and other activities had been re-set to be delivered remotely and he wished to record his thanks to the BTS head office team, and Cathryn Stokes and Jackie Ford who managed the Society's conferences and short course programmes respectively.
  - 3.3 Respiratory teams and others were currently tackling the "second-wave" of COVID-19 admissions, as well as the usual Winter Pressures and trying to restore other respiratory services and support patients remotely. This was a huge task, and the Board of Trustees was engaged in a series of activities to try to bring to the attention of national and regional policy makers throughout the UK the need for improved resources, planning and pragmatic management. Respiratory patients were not currently receiving adequate care.
  - 3.4 Professor Bennett mentioned other current activities. The Board was currently developing a BTS Position Statement on Diversity, Equality and Inclusion and would be updating its related procedures and practices in early 2021; and BTS was planning more work on Inequalities in healthcare provision, not least by joining the new RCP London Alliance

#### 4. **Report from the Honorary Treasurer (Meeting paper 2)**

4.1 Dr Paul Walker presented the Honorary Treasurer's report for the Society's Annual Accounts for the year to 30 June 2020. His main message was that, despite the impact of losing some activities as described by the Chair in his report, the Society's investments and overall financial performance had held up well. Society assets were £6,354,111 at the end of the year (£6,545,377 in 2019). The Society's head office building was valued in late 2017 at £2.8million.

4.2 Income streams relating to membership and the journals had performed very well. The financial year had ended with an anticipated deficit of £185,240 (compared to a surplus of £64,260 in 2019). Because of rapid and effective efforts to re-engineer the short course programme and the Winter Meeting in 2020-21, the Board was hopeful that the deficit would be less at the end of June 2021, and was happy to accept that it might take 2-3 years to eradicate completely. Dr Walker added his thanks to the staff, Committees and others concerned in managing the change to on-line activities,

4.3 The value of the Society's investment portfolio at 30 June 2020 was £4,074,385, compared to £4,118,049 in 2019. The portfolio has performed reliably during the year, with the Treasurer meeting the Investment Manager at least quarterly to review, and it had been possible to take £60,000 investment income towards BTS operational costs as required in the Society's Investment Policy. The latter had again been reviewed by the Board and would remain as in previous years, unless financial performance of the portfolio following the UK's withdrawal from the European Unit required mitigating action in the coming year. He was satisfied that the Society's assets were well protected and hedged, however.

4.4 The accounts were approved by a show of (electronic) hands.

#### 4.5 ***Annual Membership Subscriptions***

Dr Walker proposed that there should be no increases in subscription fees for 2021, a record 8 years running since an increase had been proposed. He asked members to note however, that the ERS had increased its annual subscription for BTS members from £20 to £30 with effect from 1<sup>st</sup> July 2020. It was also apparent that the experiment to allow anniversary renewals, introduced in 2018, had not been a success, and that the renewal date of 1<sup>st</sup> July would apply again to all members from July 2021.

#### 4.6 ***Delegate fees for conferences and short courses***

Dr Walker reported that these would have to change according to the delivery mechanism, but the Society will endeavour not to charge inflated sums, as is always the case, but to cover costs at the very least.

#### 4.7 ***Approval of the Society's Auditors***

The Honorary Treasurer reported that the second had been carried out in August with all parties working entirely remotely. No significant problems had been identified. The proposal to re-appoint HaysMacintyre as the Society's auditors was approved by a show of (electronic) hands.

#### 5. **Report from the Editors of *Thorax* and *BMJ Open Respiratory Research* (Meeting paper 3)**

5.1 The report from the editors of *Thorax* and *BMJ ORR* had been circulated to members with the agenda, and was received. The President noted how all concerned in the publication, review

and production of both journals had accommodated the challenges posed by COVID and thanked editors and all concerned for their hard work. Their names had been added to the list of other contributors to BTS' work which appeared on the back covers of the AGM papers.

## 6. **Election of Office Bearers and Trustees**

The President made the following announcements on behalf of the Honorary Secretary.

### 6.1 **President and President-elect**

Following the call for nominations over the summer of 2020, Rachael Moses had been returned unopposed as President-elect with effect from December 2020, serving as President for one year from December 2021. Dr Graham Burns would serve as President in 2021.

### 6.2 **Chair of the BTS Board**

Following due process – advertising and interviews over the summer and autumn- Dr Paul Walker had been selected to take over as Chair of the BTS Board in November 2021, serving for three years until November 2024. As the Society's constitution requires, he will shadow the current Chair for a year as necessary before taking up office.

### 6.3 **Honorary Treasurer**

As reported at the AGM in 2019, Dr John Park will succeed Dr Paul Walker as Honorary Treasurer with effect from the 2020 AGM, serving until November 2023.

### 6.4 **Trustee appointment during the year**

Following due process Dr Charlotte Addy will take up the position of Chair of the Workforce and Service Development Committee following the AGM, serving to November 2023. The President observed that, as with the applications for the Chair of the Board position, the interview panels had been presented with excellent candidates, all of whom had flair, drive and enthusiasm, and this filled him and other senior colleagues with much hope and certainty that the specialty and BTS would be in good hands in the future.

### 6.5 **Lay Trustee update**

The President reported that, despite several attempts since January, it had not yet been possible to find a lay Trustee to replace Alice Joy. A fresh attempt was currently underway, using some new agencies, two of which have been established to attract people from diverse backgrounds into Board level positions within charities. He urged those attending the AGM to think also about whether they have contacts with anyone who might find the position of interest.

## 7. **Election of members of Council**

7.1 The Board of Trustees had agreed in June 2020 to extend the length of service of all members of Council, Standing Committees and Chairs and members of Advisory Groups by a year, with the agreement of the individuals concerned. This was done so that the hiatus in the work of BTS Committees and Groups and related activities would not cause disadvantage to those who would otherwise miss out on almost 6 months of service. An election for members of Council had not been necessary therefore necessary this year.

## 8. **BTS Medal and Meritorious Service Award**

8.1 The President moved on to a new feature of the AGM, for this year only. This had been introduced so that the Society might present its annual Awards. The presentations would normally be done just before the AGM, and arrangements would be made to acknowledge



the recipients at the November 2021 Winter Meeting, which everyone hoped would be a face –to-face event.

- 8.2 **The BTS Medal** is open for nomination from any member of the Society annually. It is awarded after consideration of all nominations received by the BTS Nominations Committee to “a distinguished person who has greatly contributed to respiratory medicine or science. This prestigious award aims to acknowledge the recipient's leadership in and contribution to clinical and/or scientific work which has resulted in benefit to patients and the inspiration of peers”.

Two BTS Medals were presented in 2020, with each recipient making a short response:-

Dr Bernard Higgins  
Professor John Moxham

Details can be found here of their achievements <https://www.brit-thoracic.org.uk/about-us/pressmedia/2020/bts-medal-2020/>

- 8.3 **The BTS Award for Meritorious Service.** The BTS Nominations Committee makes one award each year to an individual who “has provided a service to the Society far above that which one would normally expect for their position/role, often over a far longer period than would normally be the case”.

The award was given this year to Dr David Smith

<https://www.brit-thoracic.org.uk/about-us/pressmedia/2020/meritorious-service-award-2020/>

## 9. **Votes of thanks**

### 9.1 **To all members and staff of BTS**

The President gave a vote of thanks to all BTS members for everything they had done during the year to provide care and support during the COVID-19 pandemic and subsequent “wave” in a myriad of ways, and not necessarily on the so-called “front-line” The Society hoped to recognise this work during the Winter Meeting in February 2021 and details would be sent to members in the following week about this. He thanks also those members of the Board and Committees and Groups who had participated in BTS activities during the year despite a heavy clinical workload. He also expressed thanks to BTS staff members who had been working remotely, in the main, since March and who had provided solid, timeous and much-appreciated support in a time of great challenge and change.

### 9.2 **Officers who will stand down at the AGM- President and Honorary Treasurer**

The Chair of the Board expressed thanks on behalf of Officers, the Board and all members and staff to Dr Mohammed Munavvar for his exemplary period of service as President and President-elect since 2018. He had served with distinction as President of the Society in what has been the most challenging and turbulent year of its history. He had played his part in the senior Officers' Group with serious purpose; an unswerving commitment to a heavy BTS schedule on top of his extremely taxing clinical workload; and an admirable determination to achieve the highest standards of advice and responses to requests for support and information. Professor Bennett looked forward to the time when the Society could express its thanks in person, later in 2021.

The President thanked Dr Paul Walker, Honorary Treasurer, for his earlier presentation and sound stewardship of the Society's financial resources over the last three years. He had been a stalwart of the Officers' Group which had met almost every week since March and had represented BTS at a number of national meetings to ensure that the specialty's interests were properly taken into consideration. Dr Walker's steady, informed and conscientious custodianship of the Society's financial resources has been of great benefit in the last year in particular.

### **9.3 *Trustees who will stand down at the AGM***

The President proposed a vote of thanks to Dr Graeme Wilson and Dr Justine Hadcroft who have served as Chairs of the Specialty Workforce Committee and the Models of Care Committee respectively for three years and then as co-Chairs of the new Workforce and Service Development Committee for the past year. They have made a significant and important contribution to the Society's work in promoting workforce improvements and the continued improvement of data collection and development of initiatives to improve recruitment and retention, and the promotion of Integrated Care.

### **10 *BTS Staff***

Dr Munavvar announced that the Society's Chief Executive, Sheila Edwards, would be retiring at the end of March 2021, after more than 22 years in post. Her place would be filled by the current Deputy Chief Executive, Sally Welham. Much work had taken place over the latter part of 2020 to re-structure the head office support structure and install a new Senior Management Team. The Board looked forward to the time when Mrs Edward's retirement and contribution to the Society could be marked in person, later in 202, and had every confidence that Miss Welham would be a very successful replacement.

### **11. *Date of Next Meeting***

- 11.1 Wednesday 24<sup>th</sup> November 2021, at 5.30pm in the Queen Elizabeth Conference Centre, London.

There being no other competent business, the AGM closed at 5.45pm

## Balance sheet

Company no. 1645201

**As at 30 June 2021**

	Note	£	2021 £	£	2020 £
<b>Fixed assets:</b>					
Tangible assets	11		1,620,279		1,697,850
Investments	12		4,460,163		4,074,385
			<u>6,080,442</u>		<u>5,772,235</u>
<b>Current assets:</b>					
Debtors	13	506,298		567,880	
Cash at bank and in hand		1,236,261		904,214	
			<u>1,742,559</u>	<u>1,472,094</u>	
<b>Liabilities:</b>					
Creditors: amounts falling due within one year	14	(1,035,027)		(890,218)	
<b>Net current assets</b>			<u>707,532</u>		<u>581,876</u>
<b>Total net assets</b>			<u><u>6,787,974</u></u>		<u><u>6,354,111</u></u>
<b>The funds of the charity:</b>	17				
Restricted income funds			112,188		107,389
Unrestricted income funds:					
Designated funds		6,105,440		5,797,233	
General funds		570,346		449,489	
Total unrestricted funds			<u>6,675,786</u>	<u>6,246,722</u>	
<b>Total charity funds</b>			<u><u>6,787,974</u></u>	<u><u>6,354,111</u></u>	

The financial statements have been prepared in accordance with the special provisions applicable to companies subject to the

Approved by the Board of Trustees on 5th October 2021 and signed on its behalf by



Dr. John Park  
Honorary Treasurer

## Statement of financial activities (incorporating an income and expenditure account)

For the year ended 30 June 2021

	Note	Unrestricted £	Restricted £	2021 Total £	Unrestricted £	Restricted £	2020 Total £
<b>Income from:</b>							
Charitable activities							
Membership	2	658,019	-	<b>658,019</b>	618,933	-	618,933
Standards and Education	2	328,646	40,000	<b>368,646</b>	77,683	50,432	128,115
Research and Innovation	2	1,213,531	-	<b>1,213,531</b>	1,536,753	-	1,536,753
Profile	2	-	-	-	-	-	-
Investments	3	47,830	-	<b>47,830</b>	60,104	-	60,104
<b>Total income</b>		<b>2,248,025</b>	<b>40,000</b>	<b>2,288,025</b>	<b>2,293,473</b>	<b>50,432</b>	<b>2,343,905</b>
<b>Expenditure on:</b>							
Investment Management costs	4	38,653	-	<b>38,653</b>	37,353	-	37,353
Charitable activities							
Membership	4	152,920	-	<b>152,920</b>	181,522	-	181,522
Standards and Education	4	838,651	29,291	<b>867,942</b>	810,867	25,025	835,892
Research and Innovation	4	855,761	-	<b>855,761</b>	971,014	-	971,014
Profile	4	374,448	-	<b>374,448</b>	497,731	5,633	503,364
<b>Total expenditure</b>		<b>2,260,433</b>	<b>29,292</b>	<b>2,289,724</b>	<b>2,498,487</b>	<b>30,658</b>	<b>2,529,145</b>
<b>Net income / (expenditure) before net gains on investments</b>		<b>(12,408)</b>	<b>10,708</b>	<b>(1,699)</b>	<b>(205,014)</b>	<b>19,774</b>	<b>(185,240)</b>
Net gains on investments		435,562	-	<b>435,562</b>	(6,026)	-	(6,026)
<b>Net income / (expenditure) for the year</b>	5	<b>423,154</b>	<b>10,708</b>	<b>433,863</b>	<b>(211,040)</b>	<b>19,774</b>	<b>(191,266)</b>
Transfers between funds		(116)	116	-	(5,633)	5,633	-
<b>Net income / (expenditure) and net movement in funds</b>		<b>423,038</b>	<b>10,824</b>	<b>433,863</b>	<b>(216,673)</b>	<b>25,407</b>	<b>(191,266)</b>
<b>Net income / (expenditure) for the year and net movement in funds</b>		<b>423,038</b>	<b>10,824</b>	<b>433,862</b>	<b>(216,673)</b>	<b>25,407</b>	<b>(191,266)</b>
<b>Reconciliation of funds:</b>							
Total funds brought forward	17	6,252,748	101,363	<b>6,354,111</b>	6,469,421	75,956	6,545,377
<b>Total funds carried forward</b>	17	<b>6,675,786</b>	<b>112,187</b>	<b>6,787,974</b>	<b>6,252,748</b>	<b>101,363</b>	<b>6,354,111</b>

All of the above results are derived from continuing activities. There were no other recognised gains or losses other than those stated above. Movements in funds are disclosed in Note 17 to the financial statements.

## REPORT FROM THE EDITORS OF *THORAX*

The current editorial team at *Thorax* will step down on 1<sup>st</sup> July 2022 having started on 1<sup>st</sup> July 2015. Three Editors-in-Chief (Professors Nick Hart, Gisli Jenkins and Alan Smyth) supported by the Deputy Editors (Professors Claire Wainwright and Rachel Chambers) extended their tenure by 2 years to allow not only a comprehensive handover to the next editorial team but also served to provide stability to the journal's management during the COVID-19 pandemic, albeit the original plan had been to ensure the stability of the journal during introduction of Plan S, an initiative to drive greater open access publishing with *Thorax* designated as a transformative Journal. Our editorial strategy since 2015 has focused on originality, rigour and excellence with a current impact factor for *Thorax* of 9.139 and a 5 Year Impact Factor of 11.246. The interview process for the senior editorial team has been undertaken and the new editors-in-chief will be announced in early 2022 to allow adequate transition from exiting to incoming editors-in-chief.

Although submissions have dropped back below 2020 levels, these are still higher than 2019. The instant reject rate remains high at 74% and the overall acceptance rate is at 12% for 2021 YTD. 2021 has seen increased acceptances from the USA and Australia. Since 2018, the top three submitting countries have been UK, China and USA with China moving from 3<sup>rd</sup> to 2<sup>nd</sup> place since 2019. This follows the original strategy from the editors-in-chief to target submissions from China and the USA. Several transfers into *Thorax* from The BMJ have received high citations, and transfers from *Thorax* to BMJORR have resulted in 37 acceptances in 2021 YTD. The current editor-in-chief are strongly supportive of being part of the BMJ group trickle down policy and engaged in this process early in their tenure which has contributed, in part, to the ongoing success at BMJ Open Respiratory Research. In 2020, *Thorax* received 102 transfers from other BMJ journals, publishing 6 of these articles and receiving 83 cites to date. The most-read manuscripts (open access and free to access) in *Thorax* this year, unsurprisingly, were all COVID-19 related articles:

*Respiratory follow-up of patients with COVID-19 pneumonia*

*Awake prone positioning in COVID-19*

*Current smoking and COVID-19 risk: results from a population symptom app in over 2.4 million people*

*Upper respiratory viral load in asymptomatic individuals and mildly symptomatic patients with SARS-CoV-2 infection*

*Long-COVID: a cross-sectional study of persisting symptoms, biomarker and imaging abnormalities following hospitalisation for COVID-19*

*COVID-19: in the footsteps of Ernest Shackleton*

*Caring for patients with COPD and COVID-19: a viewpoint to spark discussion*

*SARS-CoV-2 seroprevalence and asymptomatic viral carriage in healthcare workers: a cross-sectional study*

*Severe organising pneumonia following COVID-19*

*Pulmonary fibrosis 4 months after COVID-19 is associated with severity of illness and blood leucocyte telomere length*

To publish excellent original manuscripts, the best respiratory researchers from around the world must be encouraged to send their best work to *Thorax*. This is to ensure we maintain the challenge on the other speciality journals, such as *Lancet Respiratory Medicine*, *American Journal of Respiratory and Critical Care Medicine*, *European Respiratory Journal* and *Chest*. We have therefore actively sought original article submissions in the areas of paediatric and adult respiratory, sleep and critical care as well as successfully promoting the new article formats, including controversies and challenges in respiratory medicine (100,715 reads), state of the art reviews (251,946 reads) and brief communications (241,078 reads). These formats, in addition to the regular British Thoracic Guideline publications, Journal Club, Case Based Discussions, *Thorax Images* and *Airwaves* make important

educational contributions to the journal.

Since the last Thorax editorial report, the UK has been through a 2<sup>nd</sup> wave of the COVID-19 pandemic. In the Summer and Autumn of 2020, as we moved to recovery with a complete senior editorial team working together again, significant challenges were then apparent with the 2<sup>nd</sup> wave hitting in Winter 2020. We again delivered our business continuity plan to ensure the stability of Thorax, despite high ongoing activity of submissions and major challenges with timely peer review process. Again, one editor in chief and a large number of associate editors were seconded into full time clinical duties and were unable to perform their Thorax roles. The deputy editors-in-chief stepped up and contributed to a one in four weekly rota to triage manuscripts and the 6 'temporary' associate editors, who had not been stepped down between the waves were made permanent associate editors. These measures have ensured that during 2020 the processing time of manuscripts was similar to the previous 3 years. These herculean efforts have had a significant 'knock on effect' for 2021 with an increase in manuscript peer review processing times. The time to first decision in 2020, despite pandemic pressures, was only 14 days with a time from acceptance to publication of 26 days. Compared with 2020, there has been an increase in the time to first decision (all and reviewed manuscripts) and time to acceptance that reflects the overall challenges observed in our workforce as we emerge from the COVID-19 pandemic. The major challenge currently is obtaining high quality timely peer review from expert content reviewers, which is placing a further burden of the editors-in-chief and associate editors. The editors-in-chief have now adopted a weekly 1 in 3 rota as duty editor.

In 2020, and into 2021, there has been a significant increase in submissions of systematic reviews and meta-analyses. Although, the editors-in-chief appointed an associate editor to handle the systematic reviews and meta-analyses, accompanied by a strong triage process prior to the manuscript being sent for peer review, the workload was too high for one associate editor. We therefore appointed a second associate editor in 2021 to handle the systematic reviews and meta-analyses. This will have impact on the peer review processing times.

The impact factor for 2020, reflecting the previous 2 years of citations adjusted for the manuscripts published, showed a small decrease and Clarivate will shortly be updating 2020 impact factor following an appeal. Although in previous years, the article type included in the impact fact calculation had been over-estimated by Clarivate, only a few papers for 2020 appear to have been miscategorised as citable items. With the level of citation similar to 2019, the decrease in impact factor is, in part, due to a higher number of brief communications published in 2018-2019, which count as citable items but these are not as highly cited as original manuscripts. In addition, a number of highly cited papers published in 2017 have now dropped out of the citation window adversely effecting impact factor. The outcome of the Clarivate appeal is awaited. Finally, from 2021, for citation purposes, Clarivate will consider the date of first online publication as the date a paper is published rather than when it is assigned to a compiled issue. However, as Thorax has a short backlog, it is not expected that this will have a significant effect.

The upcoming takeover of Vectura by Philip Morris International is currently an area of much discussion. Both the BTS and BMJ are actively reviewing their tobacco industry policies. As regard Thorax, once the takeover is complete, authors with ongoing financial links to Vectura will no longer be able to publish in Thorax. There will be a review by BMJ of the Thorax homepage and submission sites to ensure the existing policy is clear that Thorax does not accept manuscripts from tobacco organisations or organisations funded by the tobacco industry. The Thorax editors-in-chief will liaise with the other respiratory journal editors and although investigators with historical links to Vectura would be able to submit the Thorax, investigators with links to companies using products or devices from Vectura will need further clarity. There has been a meeting to discuss submission policy regarding all tobacco industry-funded organisations between BMJ and representatives of The BMJ, Thorax,

BMJORR, BMJ's Research Integrity team, BMJ Open and Tobacco Control. A meeting with the respiratory journal editors is being arranged. BTS has published a statement confirming that once the takeover is complete, Vectura will fall under their existing tobacco organisations policy.

There is an ongoing challenge posed by Plan S to the current hybrid publishing model of Thorax, similar to many academic society journals. BMJ continues to monitor Thorax's transformative journal status for compliance with Plan S requirements. Currently the journal has not published as many open licence articles (CC-BY) in 2021 to maintain its status as a transformative journal, and before the end of 2021 there will need to be a decision as to whether to change the licence of some published articles. The BMJ publishing team are working closely with the editors'-in-chief on this issue.

*Thorax* metrics have shown resilience to the increase in submission rates during the COVID-19 pandemic. In 2020, 2198 manuscripts were submitted to *Thorax* (13% accepted) with 1290 submissions (16% accepted) for 2021 YTD. Our acceptance rate for original articles and brief communications is 12% and 14%, respectively, for 2021 YTD. In 2020, there were 1,705,409 total content views and 9,718 total Almetric mentions. *Thorax* has 12,000 followers on Twitter. The editors-in-chief, deputy editors and associate editors will continue with their strategy to focus on Originality, Rigour and Excellence in Respiratory Medicine to drive up the profile and standing of *Thorax*, which will further promote the British Thoracic Society and the BMJ journals Group.

*Nick Hart, Gisli Jenkins and Alan Smyth, Editors-in-Chief October 2021*

***BMJ Open Respiratory Research*****Annual Report to the BTS Annual General Meeting 2021**

*BMJ Open Respiratory Research* was launched in 2013 as an open access companion journal to *Thorax*. Since then submissions have steadily increased and the journal now has an established reputation within the fields of respiratory and critical care medicine. *BMJ Open Respiratory Research* is indexed in MEDLINE, Google Scholar, PubMed Central, Emerging Sources Citation Index, and Scopus. The journal has a 2020 CiteScore of 4.9 and is ranked 47<sup>th</sup> out of 133 in the Pulmonary and Respiratory Medicine Category of journals; a formal impact factor is expected in late 2021/early 2022.

The journal is increasingly accessed with over 280,00 content views and over 2000 Altmetric mentions in 2020. Online usage continues to increase, with over 331,000 page views so far in 2021, an increase of 37% compared to the same period in 2019. Journal content has featured in 181 news stories covered in 63 outlets across 18 countries in 2021.

After the surge of COVID-19-related research submissions in 2020, manuscript submission numbers have remained high in 2021. All submissions continue to be handled by the two editors-in-chief and decision times have significantly lengthened this year although with considerable variation. Professor Fraser Brims (Perth) has recently been appointed as Deputy Editor to assist with manuscript handling.

Acceptance rate is currently around 50%, the same as in 2020 although with an overall trend downwards over the last 4 years. The vast majority of published manuscripts are research studies.

Links between *BMJ Open Respiratory Research* and *Thorax* are now well-established and many high-quality manuscripts that do not meet the stringent publication requirements for *Thorax* continue to be transferred to *BMJ Open Respiratory Research*. Of 29 manuscript transfers from *Thorax* to *BMJ Open Respiratory Research* in 2021, 25 were published. A paper transferred from the *BMJ* to *BMJ Open Respiratory Research* in late 2020 already has 36 citations with an altmetrics score of over 400.

We are working to enhance patient and public involvement at *BMJ Open Respiratory Research*, with the aim of making the journal more accessible to patients and the wider public. Central to this strategy is the recent appointment of Ms Olivia Fulton (Edinburgh) to the editorial board as Patient Advisory Representative. Olivia is an advocate for patient and public partnership in healthcare research: she is former Patient and Public Involvement Lead at the Asthma UK Centre for Applied Research, a Cochrane UK Consumer Champion, member of the Chief Scientist Office Public Engagement Group and the European Lung Foundation Patient Advisory Group, and she frequently speaks at courses and conferences on the subject of patient and public involvement in research. The inclusion of Ms Fulton on the editorial board will help steer the journal's direction to increasingly address issues of direct relevance to people with respiratory disease as well as their carers and the wider public.

Editorial priorities for the next six months are to address lengthening decision times, expand patient and public involvement with the journal, and succession planning for the next editorial team.

*Steve Chapman & Matt Wise, Editors-in-Chief*

*October 2021*





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