Abbreviations used throughout this review

AMM Association of Medical Microbiologists
BASHH British Association for Sexual Health & HIV
BHIVA British HIV Association
BIA British Infection Association
BIS British Infection Society
BSAC British Society for Antimicrobial Chemotherapy
BSMM British Society for Medical Mycology
CCT Certificate of Completion of Training
DH Department of Health
EAAD European Antibiotic Awareness Day
FIS Federation of Infection Societies
HIS Healthcare Infection Society
HPA Health Protection Agency
IPS Infection Prevention Society
MRC Medical Research Council
NICE National Institute for Clinical Excellence
PMETB Postgraduate Medical Training Board
RCPath Royal College of Pathologists
RCP Royal College of Physicians
SGM Society for General Microbiology
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Council

British Infection Association Council 2013

President Dr Peter Moss (Hull and East Yorkshire Acute Hospitals NHS Trust)

Vice President Dr Martin Wiselka (University Hospitals of Leicester NHS Trust)

Interim Honorary Secretary Dr Albert Mifsud (Whipps Cross University Hospital NHS Trust)

Honorary Treasurer Dr Stephen Barrett (Southend University Hospital NHS Foundation Trust)

Manpower & Training Secretary Dr Albert Mifsud (Whipps Cross University Hospital NHS Trust)

Interim Scientific & Research Secretaries Drs Martin Llewellyn and Melanie Newport (Brighton and Sussex University Hospitals NHS Trust)

Guidelines Secretary Dr Peter Cowling (Northern Lincolnshire & Goole Hospitals NHS Trust)

Meetings Secretary Professor Steve Green (Sheffield Teaching Hospitals NHS Foundation Trust)

Membership Secretary Dr David Partridge (Sheffield Teaching Hospitals NHS Foundation Trust)

Clinical Services Secretaries (Microbiology) Dr Tony Elston (Colchester Hospital University NHS Foundation Trust)

Clinical Services Secretaries (Infectious Diseases) Dr Bridget Atkins (Oxford University Hospitals NHS Trust)

Communications Secretary Dr Kumara Dharmasena (Walsall Hospitals NHS Trust)

Trainee representatives Dr Fiona McGill (Royal Liverpool and Broadgreen University Hospitals NHS Trust)

Dr Thushan De Silva (Sheffield Teaching Hospitals NHS Foundation Trust)

Editor, Journal of Infection Professor Rob Read (Sheffield Teaching Hospitals NHS Foundation Trust)

Newsletter Editor Dr Paul Collini (Sheffield Teaching Hospitals NHS Foundation Trust)

Dr Beryl Oppenheim (was Honorary Secretary), Professor Dietrich Mack (was Scientific & Research Secretary), Dr Matthias Schmid (was Clinical Services Secretary – ID), Dr David Jenkins (was Membership Secretary), and Mr Philip Howard (was Associate Member Secretary) stood down from Council during 2012-13 having completed their terms of office. Thanks are due to them for all the hard work that they put into the Association in their various roles.
Aims and Objectives

The constitution states that the objective of the Association is to ensure the optimum delivery of healthcare to patients diagnosed with infection.

The British Infection Association aims to enable the best care for patients with infectious disease through:

- Supporting high quality clinical and basic science research in the field of infection through competitive award offunding to research applicants,
- Setting & reviewing standards in infection practice, including the development of guidelines,
- Providing excellent education in infection through meetings and presentations (alone and in collaboration with other scientific societies),
- Working with government, Public Health England, NHS England, and other interested bodies to promote best practice in areas related to infectious disease,
- Providing expert opinion on infection related matters to external agencies, patients, and the wider public,
- Supporting infection specialists within their daily work by facilitating communication and providing useful resources,
- Disseminating new research and best practice via the Association’s publication: the Journal of Infection.
Membership and Communications

Dr Kumara Dharmasena
Dr David Jenkins
Dr David Partridge

Aims:

To encourage all infection specialists to become members of the Association and to ensure that membership delivers appropriate benefits, support and opportunities. To ensure that good communications are developed within and beyond the organisation.

Progress over 2012-13:

- Membership numbers have grown to 1500, of which 571 are trainees, and 38 are Associate members
- Developing a strategy to manage requests for consultations and responses to external enquiries
- Publication of newsletters and President’s updates
- Establishment of a trainees’ committee with broad representation across the infection specialties
- Maintenance of a BIA advisory committee for Clinical Excellence awards

Our website continues to evolve to reflect our activities, and to provide an informative resource for members
Standard Setting & Guideline Development

Dr Peter Cowling

Aim:

To support infection practitioners through the development of appropriate guidelines and relevant standards of practice.

BIA involvement in Guidelines published in 2012-13:

BIA has had significant involvement in the production of the following guidelines:
NICE
Feverish Illness in Children
Antibiotics for Neonatal Infections
Cholelithiasis and cholecystitis
Bronchiolitis
Hepatitis B & C - Ways to Promote Testing
Neutropenic sepsis
Drug Allergy

Other Bodies
Managing Gram negative Infection Outbreaks in UK Neonatal Units (ARHI consultation)
Respiratory and Facial Protection (HIS consultation)
NHS (Venereal Diseases) Regulations 1974 (DH consultation on repeal/amendments)
UK Five Year Antimicrobial Resistance Strategy and Action Plan (DH technical engagement)
Management of Infection Guidance for Dentists (HPA Primary Care Unit consultation)
Standardised Microbiology Investigations (various consultations for SMI Working Groups)

Guidelines currently in preparation:

BIA Meningitis Guidelines
Also, jointly with others:
Bone & Joint Infections Guidelines (Infection Prevention & Control)
Toxigenic Staphylococcal Infections
EPIC 3
Clinical Services

Dr Tony Elston
Dr Matthias Schmid

Aim:

To support infection specialists in their daily work, addressing issues of current concern and importance in the delivery of clinical microbiology, infectious diseases and other infection-related clinical specialties, public health and infection control.

Progress during 2012-13:

- Continuing the legacy work of the AMM Clinical Services Committee, re-defining terms of reference and roles and responsibilities of committee members
- Responding to key consultation documents
- Contributing to debate and organisational responses at College sub-specialty meetings
- Continuing work undertaken for the Royal College of Pathologists ‘Blue Skies Agenda’ to further refine a service specification for infection services
- Utilisation of the BIA email discussion forum to support members in their daily clinical practice

The major topics of discussion have been the transformation of pathology, the evolving infection curriculum, KPIs for microbiology laboratories and a variety of infection prevention and control topics. The committee also exchanges information about regional education and audit meetings.
Education and Meetings

Steve Green

Aims:

To organise and promote scientific meetings on behalf of the Association (alone, or in collaboration with other scientific bodies) to disseminate knowledge in infection disciplines

To provide a forum for the presentation of clinical and basic science research by clinical academics, including those in training

To award prizes for outstanding presentations, encouraging the production of high quality material.

Highlights from 2012-13

BIA Spring Scientific meeting held in London, May 2012

• Attendance 159

• Prizes for best presentations awarded to:
  • Original research
    Moerida Belton (Imperial)
    LC Goodwin (Liverpool)
  • Clinical papers
    Amandip Sahota (Leicester)
    Richard Maude (Worcester)

Trainees' scientific meetings held in May and November 2012

• 24th & 25th May meeting at SOAS, see Trainee section for prizes

• 22nd November meeting at University of Liverpool, see Trainee section for prizes

Full BIA participation in EIS 2012 in Liverpool, with supported lectureships and other sessions.

BIA prizes awarded for presentations to for Dr Logan (Royal Free), Dr Sathamoorthery (Imperial), and Dr Kuehn (Nottingham)
Manpower and Training

Dr Albert Mifsud

Aim:
To provide evidence on the requirements for consultant numbers in infection nationally;

To support trainees in infection specialities and provide ongoing support to members in substantive posts.

This work includes:
- Anticipating the need for consultants and specialists in the infection specialties, and estimating any gap between this need and the number of anticipated new CCT holders

- Providing authoritative advice to the Federation of Royal Colleges of Physicians of the United Kingdom and to the Royal College of Pathologists and to other bodies such as the Centre for Workforce Intelligence

- Supporting trainees through involvement in the development of training curricula, and the delivery of specialist examinations

- Encouraging trainees to be fully involved in the organisation, supporting a proactive trainee sub-committee, educational initiatives and research

Progress during 2012:
- Communication with Presidents of RCPath and RCP (London) to discuss BIA members’ opinions on the delivery of infection services and on training needs

- Contribution to the JRCPTB / RCPath Infection Training Group

- Ongoing advice to the CfWI, RCP (London) and RCPath on workforce requirements

- Contribution to the work of the Medical Microbiology section of UEMS to ensure that the proposed European curriculum is consistent with the predominantly clinical nature of microbiology training in the UK

- Responses to relevant consultations such as the GMC’s Shape of Training consultation

Further planned work in this area includes:
- Ongoing active involvement in the development of infection related educational curricula, nationally and at European level

- Scoping of the impact of laboratory centralisation and mergers between traditional departments of infectious diseases and medical microbiology is having on workforce and training requirements
Annual Trainees’ Report

Dr Fiona McGill
Dr Thushan de Silva

Highlights from 2012–13

• Spring Trainees’ meeting 2012

  SOAS, theme “Old & New”, prizes awarded to:

  Dr Mariyam Mirfenderesky (St George’s Healthcare NHS Trust)
  Dr Andrew Taylor (University College Hospital London)
  Dr Gemma Winzor (New Cross Hospital)

• Autumn trainees’ meeting 2012

  University of Liverpool, theme “Tropical & Travel related infection”, prizes awarded to:

  Wael Elamin (Barts Health NHS Trust)
  Paolo Polzella

The trainee representatives have continued to provide an important link for infection trainees to contribute to and receive information about the new infection training curriculum, and other important issues regarding the future of the specialty.
Science and Research

Dr Martin Llewelyn
Professor Melanie Newport
Professor Dietrich Mack

Aim:

To support high quality infection-related scientific research and educational projects that are of professional and public benefit

The Scientific and Research Secretaries (along with the members of the Research Committee) have supported the educational and training aspirations of the Association through their contribution to the successful scientific meetings (as detailed above).

The other main objective of the Association in this area is to support research through the awarding of grants. Unfortunately the application and peer review process did not run entirely smoothly in 2012-13, and not all of the available grant money was awarded. By the time the problems with the process had been resolved it was many months after some applications had been submitted, and in some cases the application was either no longer relevant or had been funded through another source. A decision was therefore made not to proceed with the delayed applications, and instead to cancel the funding round. The money has been carried forward, and where appropriate candidates invited to resubmit. A new (2013-14) grant application round is now underway.

BIA research funding that was awarded in 2012-13 includes:

A Clinical Exchange award of £5000 to Dr Tom Wingfield of North Manchester.

There were three travel grants awarded:

July 2012 – Dr Papinei - £750 to attend 15th International Conference on Infectious Diseases in Bangkok
February 2013 – Claire Jones - £750 to attend Keystone Conference in USA
February 2013 – Rebecca Drummond - £750 to attend Immunology of Fungal Infections in USA.
Governance and Finance

Dr Steve Barrett
Dr Peter Moss

Aim:

To ensure the integrity of BIA as a charity is protected through open and transparent financial and organisational management, and compliance with the requirements of the Office of the Scottish Charity Regulator (OSCR).

A report on the activity and finances of the Association was presented at the Annual General Meeting in May 2012. Minor changes to the constitution were approved at his meeting, these included:

Sections 4 & 5. Council & Officers of the Association
Section 4(a) currently lists the following 2 members amongst Council:
- President
- Vice-President (to be of a different infection discipline to the president; this post will cease to exist after 2 appointments)

and Section 5 (b) currently states:
The President shall serve for a term of three years and shall not be eligible for re-election for a consecutive term as President, except in exceptional circumstances.

In order to ensure continuity of office, and knowledge of Council business, the following amendments are proposed:
- The roles of President and Vice President become permanent within Council
- Members are nominated as Vice President with the understanding that they become President on completion of their term of office
- President and Vice President shall each serve a term of 2 years

Section 5c) currently states that the Honorary Secretary and Honorary Treasurer each serve a term of four years and are eligible for re-election.

This was to ensure continuity but given the suggested changes to sections 4(a) and 5(b) above, it would be reasonable to change this to a term of three years with opportunity for re-election, and may make these onerous posts more attractive.

These amendments were agreed unanimously by the members present, and were so accepted and ratified.
Honorary Treasurer’s Report

The year’s changes in Officers and Trustees resulted in a need to review the BIA’s Memorandum and Articles of Association. The BIA continues as a company registered in Scotland and regulated by the Office of the Scottish Charity Regulator (OSCR), but the change of Honorary Treasurer along with the need to retain an address in Scotland has resulted in the BIA’s registered address now being that of its solicitors in Edinburgh. The BIA has been told it does not currently have the correct type of bank account for a charity, and steps are being taken to change this, which should bring the advantages of electronic banking. Until this change, the former Honorary Treasurer, Professor AI Leanord, has kindly continued to act as signatory for the bank account.

This year’s major item of grant expenditure was BIA’s £70,000 contribution to a MRC fellowship, which occurs every three years.

A review of membership records led to a substantial number of members being identified who were receiving free trainee membership despite having ceased to be trainees. Most of these have now joined as full members. Please advise the BIA if you no longer qualify for trainee membership.

The financial summary as prepared by the BIA’s accounts is shown below:
British Infection Association

STATEMENT OF FINANCIAL ACTIVITIES
INCLUDING INCOME AND EXPENDITURE ACCOUNT
For the year ended 30 September 2012

<table>
<thead>
<tr>
<th>Notes</th>
<th>Unrestricted funds £</th>
<th>Designated funds £</th>
<th>Restricted funds £</th>
<th>Total £</th>
<th>Total £</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>INCOMING RESOURCES FROM GENERATED FUNDS</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Donations and legacies</td>
<td>2</td>
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<td>-</td>
<td>-</td>
<td>167,880</td>
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<td>Investment income</td>
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<td>30,702</td>
<td>-</td>
<td>-</td>
<td>30,702</td>
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<tr>
<td><strong>Incoming resources from charitable activities</strong></td>
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<td></td>
<td></td>
<td></td>
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<td></td>
<td>4</td>
<td>215,876</td>
<td>-</td>
<td>4,398</td>
<td>220,274</td>
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<tr>
<td><strong>TOTAL INCOMING RESOURCES</strong></td>
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<td></td>
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<tr>
<td></td>
<td>246,578</td>
<td>-</td>
<td>4,398</td>
<td>250,976</td>
<td></td>
</tr>
</tbody>
</table>

| **RESOURCES EXPENDED** | 5 | | | | |
| **CHARITABLE ACTIVITIES** | | | | | |
| Activities in furtherance of objectives | 109,840 | - | 11,137 | 120,977 |
| Governance costs | 10,471 | - | - | 10,471 |
| **TOTAL RESOURCES EXPENDED** | | | | | |
| | 120,311 | - | 11,137 | 131,448 |

| **NET INCOMING/(OUTGOING) RESOURCES BEFORE TRANSFERS** | | | | | |
| Gross transfers between funds | (6,739) | - | 6,739 | - | |
| **NET INCOMING RESOURCES** | | | | | |
| | 119,528 | - | - | 119,528 |

| **OTHER RECOGNISED GAINS AND LOSSES** | | | | | |
| Gains/(losses) on investment assets | 110,380 | - | - | 110,380 |
| **NET MOVEMENT IN FUNDS** | | | | | |
| | 229,908 | - | - | 229,908 |

| **Fund balances at 1 October 2011** | 1,088,607 | 210,000 | - | 1,298,607 |
| **Fund balances at 30 September 2012** | 1,278,515 | 210,000 | - | 1,488,515 |

The statement of financial activities also complies with the requirements for an income and expenditure account under the Companies Act 2006.
The Association’s income has decreased from £402,250 in 2011 to £250,976 in 2012 — largely due to the previous year’s assimilation of the assets of the Association of Medical Microbiologists. Expenditure decreased from £151,816 in 2011 to £131,448 in 2012. This has resulted in a surplus before investment gain of £119,528 (2011 surplus of £250,432).

Supplying members’ Journal copies cost £24,685 in the year, and Fellowship Grants awarded in the year amounted to £109,840.

Investments increased from £985,078 in 2011 to £1,098,043 in 2012. The Association made an unrealised gain of £108,412 in the year (2011 loss of £24,211). This is the result of changes in stock market conditions in the year.

The net assets of the Association at 30th September 2012 amounted to £1,488,515 (2011; £1,258,607). The Association looks forward to continuing to improve its financial position with continued improvements in the stock market and the expanding profiles of the Journal of Infection and the membership.
Contact details

Postal Address
British Infection Association
C/o Hartley Taylor Ltd
Suite GC
Caledonian House
Tatton Street
Knutsford
WA16 6AG

Telephone
Please contact Head office on 01565 621967

Email
bia@hartleytaylor.co.uk

Council members contact details:

President, Dr Peter Moss, president@britishinfection.org
Vice President, Dr Martin Wiselka, vicepresident@britishinfection.org
Honorary Secretary, Dr Albert Mifsud, secretary@britishinfection.org
Honorary Treasurer, Dr Stephen Barrett, treasurer@britishinfection.org
Meetings Secretary, Professor Steve Green, meetings@britishinfection.org
Membership Secretary, Dr David Partridge, membership@britishinfection.org
Clinical Services (ID), Dr Bridget Atkins, clinicalservicesid@britishinfection.org
Clinical Services (Micro & Virology), Dr Tony Elston, clinicalservicesmv@britishinfection.org
Guidelines Secretary, Dr Peter Cowling, guidelines@britishinfection.org
Communications Secretary, Dr Kumara Dharmasena, communications@britishinfection.org
Manpower & Training Secretary, Dr Albert Mifsud, manpowertraining@britishinfection.org
Scientific & Research Secretary, Drs Martin Llewelyn and Melanie Newport, scientificresearch@britishinfection.org
Trainee (Meetings) Secretary, Dr Fiona McGill, traineemeetings@britishinfection.org
Trainee (Professional Affairs) Secretary, Dr Thushan De Silva, traineeprofaffairs@britishinfection.org
Trainee (Communications) Secretary, Dr David Partridge, trainee@britishinfection.org
Newsletter Editor, Dr Paul Collini, newsletter@britishinfection.org