

BRITISH INFECTION ASSOCIATION COUNCIL MEETING

Thursday 3rd March 10.00 – 12.30

Virtual via Teams

Meeting 1 of 4 2022

Present:

Katie Jeffery	President	(KJ)
Dave Partridge	Vice President	(DP)
Harriet Hughes	Honorary Secretary	(HH)
Hiten Thaker	Honorary Treasurer	(HT)
Rajeka Lazarus	Meetings Secretary	(RL)
Natasha Ratnaraja	Clinical Services Secretary (MMV)	(NR)
Anna Goodman	Guidelines Secretary	(AG)
Chris Chiu	Scientific & Research Secretary	(CC)
Anna Checkley	Clinical Services Secretary (ID)	(AC)
Jo Herman	Clinical Services Secretary (ID)	(JH)
Louise Dunsmure	Associate Member Secretary	(LD)
Francesca Knapper	Trainee Representative (Meetings)	(FK)
Laura Smith	BIA Secretariat, Hartley Taylor	(LS)

Apologies:

Mark Melzer	Membership Secretary	(MM)
Dinesh Aggarwal	Trainee Representative (Prof Affairs)	(DA)
Ed Moseley	Trainee Representative (Communications)	(EM)
Bridget Atkins	Manpower & Training Secretary	(BA)
Rebecca Sutherland	Devolved Administrations Secretary	(RS)
Rob Read	Journal of Infection Editor	(RR)
Martin Wiselka	CLIP Editor	(MW)

Also noted within these Minutes:

BHIVA	British HIV Association
BNF	British National Formulary
BPAIG	British Paediatric Allergy, Immunity and Infection Group
BSAC	British Society for Antimicrobial Chemotherapy
BRITMIC	British Transplant ID, Mycology and Infection in the Immunocompromised Network
CRG	Clinical Reference Group
CTAG	COVID-19 Therapeutics Advice & Support Group
ERC	Early Research Committee
ESCMID	European Society of Clinical Microbiology and Infectious Diseases
HEE	Health Education England
HIS	Healthcare Infection Society
IPS	Infection Prevention Society
IQRGs	Infection Quick Reference Guides
JRCPTB	Joint Royal Colleges of Physicians Training Board
JSC	Joint services committee
LI	Learn Infection
MicSoc	Microbiology Society
NITCAR	National Infection Trainee Collaborative for Audit and Research

NQAPP	National Quality Assurance Advisory Panel
RCP	Royal College of Physicians
RCPATH	Royal College of Pathologists
RPS	Royal Pharmaceutical Society
PCN	Primary Care Network
SIMs	Standards in Microbiological Investigation

21.3.1 Apologies

Apologies for absence were noted above.

21.3.2 Introductions to new council members

21.3.3 Minutes of previous meeting

Minutes of the meeting held on 6th November 2021 were reviewed – no corrections

Matters Arising

ECCMID 2023 – AC to get in touch with ESCMID regarding Eosinophilia guideline being a topic.

Action: AC to explore options for Eosinophilia guidelines being presented at ECCMID 2023 when call for suggestions put out – ongoing

Membership

Action: LS to review the current trainees and request CTT dates when not known - ongoing

Elsevier Planning

Action: Future strategy with Elsevier to be discussed between RR and KJ – re-tender to be considered.

Future Elsevier plan to be discussed - RR had a meeting with Alex Smith. Predicted that the JOI Impact Factor (IF) will reach 34 – 36 by July. This is fantastic, but once this is announced there will be a deluge of papers, hopefully of high quality.

To support this, Elsevier are appointing a Scientific Staff Editor full time, and this won't be taken out of BIA royalties. This person should be in place April / May time. Question of whether this post was an opportunity for succession planning for RR. Agreed succession planning is needed, but probably not via this route.

Action: KJ to discuss Scientific Staff Editor position with RR

Current Elsevier contract runs from 1st Jan 2020 – 31st Dec 2025. We need to give the Scientific Editor a couple of years before we consider tending. Re-tender of the contract needs to be considered early 2024 (12 months' notice needed).

Risk Register

Action: HH to amend the risk register as discussed with council

Amended by HH and sent around council.

Ed Moran has stepped down from the Comms role, council will carry this on until May.

Amendments to the register –

- Split off e-list and social media to have their own section under reputational section as likelihood higher for this due to its nature.

- Twitter feeds – limited access to named council members

Agreed: Council agreed the changes made to the risk register

Use of Captcha to reduce scam emails

Action: LS to liaise with Richard Pavey re Captcha

UEMS

Action: DP to speak with Steve. LS to arrange meeting to discuss.

Meeting to be arranged with Albert Mifsud and Steve Green for after Easter

HIV Dilemmas – BIA stopped supporting, so last year it was a sole sponsored meeting by ViiV with BHIVA involvement.

Action: RL to contact BHIVA to see if they have a meeting planned that BIA could support

HIV Dilemmas will be a BHIVA / Paediatric Society joint meeting.

Infection Dilemmas postponed to November, back-to-back with Trainees' Day. Fiona McGill leading this.

BIA Infection Services Standards Document

Agreed: Council support being 'blue sky thinking' in the Clin Med article

Action: NR to chase the response Martin Llewelyn is awaiting from Nick Price

Associate Members

Action: LD to put together a list of key conferences for BIA banner/stand - ongoing

NQAPP BIA representative

Action: LS to ask for TOR via Susie Jerwood

Decided this was best suited to a Clinical Scientist – then didn't take it further

New Business

Constitution

Trainee rep wording – brought up questions on how to make this fair and inclusive to all trainees. Concern about being too prescriptive about precise training pathways that trainee reps are on given it is a free election. Agreed trainee reps to represent those pathways but not that the rep has to be from a particular area.

New trainee HSST rep should have a workforce focus. Will need to explore specific training meetings that will be relevant to attend. Discussed options for who could hold the other rep positions.

Agreed

- Comms trainee rep could be held by a medical/ HSST or associate specialist trainee.
- Medical professional affairs rep
- HSST professional affairs rep Meetings trainee rep would better suit a medical infection trainee to represent the majority of attendees.

Discussed and recognised importance of ongoing representation for GIM/ID, and not to become too focussed on micro.

Other Amendments

Manpower and Training changed to Workforce and Training

Change to 'Articles' from Constitution – due to the nature of the BIA, it should be governed by articles of association rather than a constitution.

Action: HH to tidy up the articles and circulate prior to the AGM

Council Elections

Overseas Secretary – new role, expressions of interest received following announcement on Twitter

No principal officer roles up for election, so council do not need to provide nominations, just promote.

Secretariat Update

Hartley Taylor no longer providing secretariat services after the end of June. POs looking for tender submissions from potential organisations. Number of potential companies already.

November meetings – Hartley Taylor will carry on providing these

Communications Forum Platform

Kay Miller, Chief Exec of HIS, had a meeting with DP and KJ regarding their communications forum.

Similar to the HIS email forum, it has links to the HIS website, and subscribers can be sent updates as often as they choose. Or they can just receive the monthly digest.

This would be an alternative to the e-lists and a joint venture with HIS.

BIA e-list has been valuable during Covid. The ease of the e-list means we would need a strong reason to move away from it, however, the HIS system has its advantages.

Kay is going to provide costs for the email forum

Action: DP to liaise with Kay Miller regarding costs and further details of the email forum

21.3.4 Honorary Treasurer Report (HT)

HT now has access to banking and has paid outstanding invoices. The business account is now under control. Now need to focus on the investment accounts.

Increase in fees has been discussed with the accounts to explore the reasons for this. One issue is the need for a more detailed independent audit is needed when the turnover goes over £500K which takes more time and costs more.

Time and money could be saved by using Quickbooks, with HT adding invoices to Quickbooks to improve time management and efficiency. Ultimately, this is likely to reduce the accountant fees and cost to BIA.

Grants – the accountants are unsure about the grants process – BIA to share their records to make it easier for them.

Journal royalty income should increase with the impact factor going up – this could lead to more money being available for grants in future years.

21.3.5 President's Report (ML)

KJ aware council and POs are working very hard to support BIA. The BIA profile is increasing – moving into an area where ID / GIM is increasing.

Everything else covered elsewhere on the agenda.

21.3.6 Honorary Secretary Report (HH)

Covered elsewhere on the agenda.

21.2.6 Meetings Secretary Report (RL)

FIS 2021

Final balance £1,200 to share between the three societies + £10k minus administration costs.

FIS 2022

There are outstanding issues with the PCO contract. The MCI contract is not yet finalised and is being drawn up taking into consideration comments from lawyers from all 3 societies. This year, a one year contract for FIS 2022 is in place.

As a result, the dates/venue for September have not yet been finalised. There is consideration of having the meeting as virtual/hybrid as numbers of attendees for f2f meetings are lower than pre-COVID (MCI statistics suggest they only have 50 f2f registrations for a different meeting which usually they would have expected 1000 by the same time point). Agreed it is difficult to commit to setting up a large meeting at the moment. However, corporate sponsors prefer face-to-face meetings and we need to keep them on board for future events.

Sustainability Webinar

23rd March, fully virtual, need to confirm final costs. Free registration

BIA sustainability group – sent round some Ts & Cs prior to the meeting. Lots of interest, HIS, IPC, BSAC, Mic Soc, IBMS. Feels too big for just BIA to manage, infection societies as a group have contacted the centre for sustainable healthcare, who are very established and they have speciality forums on their website. Free to register, needs three people to commit an hour a week to post.

Centre for Sustainable healthcare also are able to support trainees in a fellowship, Kay Miller is looking at this on behalf of the group of societies.

Sustainability webinar is a stand-alone meeting, but it is not for BIA to lead the UK on sustainable healthcare so a central body leading on this is good, with BIA being a stakeholder. We can't commit to three hours a week.

The three hours will be split between all of the societies, so BIA are happy to support this.

It would be good to have the forum to sign post people to after the webinar.

Action: RL to continue working with the other infection societies regarding the Sustainability working group

This could be a BIA representative post in the future

Spring Meeting

Bristol – key note speakers are previous Barnett Christie winners

Call for abstracts out, 25th March deadline

Neurological Dilemmas Day

10th November, back-to-back with the Autumn Trainees' Day on the 9th, both in person in Birmingham

Hartley Taylor to continue managing these meetings.

If FIS 2022 goes virtual we could have the council meeting on the trainees' day

21.2.9 Clinical Services Committee Report (NR, AC & JH)

IQRGs

The Sepsis IQRG is finished and it was incorporated into the SMI; structure of the SMI is being reviewed at the moment so is delaying publication.

SSTI – RS has finished this and it is at consultation stage

Acute Gastro – sent to British Society for Gastroenterology for comment. Initial feedback received. SMI already issued for this, so the IQRG will stand alone.

Expressions of Interest requests issued for the next IQRGs.

Joint Working Group on strategies to optimise advice and consultation to and from infection services

Collaboration between UK SMI / RCPath / RCP / BIA

Aims are to

- Standardise definitions of different types of advice
- Optimise advice and consultation to and from infection services.

Four working groups have been formed

1. Management of consults: volume and appropriateness
2. Tools to improve quality of information provided by users
3. Assessment of quality of advice provided: a/bedside reviews and remote advice including office/non bedside reviews
4. Standardisation of definitions of types of consults/reviews and bedside reviews

All sub-groups have had their first meeting.

SMI quality assurance group – want to assess the quality of advice we provide.

Literature review can be done using the SMI, who will do this using NICE definitions, to provide a suite of tools for users. Give choices for what you can do rather than say this is the way you've got to work.

Developed some audit tools – want to audit the advice you're getting from your users, and for internal audits so these match up when external audit (UCAS) takes place.

This is a good, collaborative piece of work with the colleges.

BIA Accreditation

NR has been contacted about providing accreditation – as discussed at previous council meeting

DP & HH discussed this at JSC meeting in January. There are two specialties that have some kind of accreditation – Gastroenterology which has 'JAG' accreditation, largely related to endoscopy processes and decontamination – to carry out colorectal cancer screening you have to have JAG accreditation.

Immunologists have accreditation process – we are lining up a meeting with them (DP/HH/ML) to discuss and scope it out.

IQRGs Microguide update

Microguide – discussing with software developers, but initial thought is the clinical decision support module is not good enough to make it compatible with IQRGs. Would need IQRG in poster format on Microguide, or use an alternative interact option (Richard Pavey to support this).

Microguide to confirm lack of compatibility.

SMI docs – BIA to give consideration to hosting on website (KJ)

KJ had email from Albert Mifsud regarding SMIs, came out of the SMI Steering Group meeting (next meeting 15th March).

One issue of embedding IQRGs into the SMIs is accessibility and HTML format. SMI group has no funding specifically, and does not feel they can share SMIs in current format without addressing these issues.

They are looking at an organisation to host SMIs – RCPATH are an option, IBMS very keen to do it – BIA should put themselves forward for this, but it is a big piece of work to host on our website. Would need to have on one website to allow for document control with links on other websites.

Host section of website for SMI / IQRGs, BIA are creating the IQRGs and collaborating with SMI on them. BIA also has the greater audience – gen med are the front door, so makes more sense to be available on our website.

Need to scope with regard to resource capacity and potential financial impact, but if feasible we should host these documents as the one control document.

Action: KJ to email AM, BIA keen to explore further, but raise concern re-resourcing.

Blood culture pathway

Want to disseminate information, following the SMI. Blood cultures in the incubator within four hours of samples being taken from the patient.

BIA would be interested in being part of it, to disseminate the information.

BIA Abroad

JH keen to renew BIA links with ECSACOP (Eastern Central and Southern African College of Physicians). They would like specialist support from BIA to provide training – access to CLIP or JoI.

Exchange programme where their trainees spend time at our centres and we go over there to provide training.

November meeting to strengthen links between BIA and ECSACOP. Putting standardised training programmes in place.

RCPATH also have links in Africa so good to check with them about the work they are doing and in which areas.

HT has been in contact with Mumtaz Patel (RCP Global) who suggested speaking with Phil Goddard who is the RCP rep in Central Africa, he is very much involved.

Council agree this should be taken forward.

Action: HT to provide Mumtaz Patel contact details to JH

21.2.10 Guidelines Secretary report (AG)

Guideline group – possibly one person in the group is interested in the secretary role, would be good to have a member of the group take over.

Continuing to respond to NICE, had representation at the Cefiderocol consultation. Generally, engage and send representation where possible.

New link with RCP as some of the Covid 19 guidelines were not coming to us, going to BTS but not BIA. Link set up with Tim Higginbottom who now sends guidelines before they go out, but with very short return time, about 12 hours. AG has been responding directly to these, due to the time frame.

CTAG group have been replaced by this system and NICE is the place for Covid guidance.

MRSA Prophylaxis – still on-going

MRSA Treatment – published last year

Allergy guideline – out for consultation

Enteric Fever guideline – submitted to Journal of Infection for publication, following consultation

Norovirus guideline – AG needs to chase as was forecast for completion in June

Necrotising OE – published a need for a definition, there was talk about publication of the delphi process

Eosinophilia – AC leading on this, making good progress

BSR Hot swollen joint guidance – commissioning of a re-write

Future commissions

TB Meningitis – Guy Thwaites

Extrapulmonary NTM - AG going to take this forward and continue working on it after stepping down as secretary

AG trying to link with BTS

Rob Read email regarding publishing of the Enteric Fever guideline in Jol at no cost. No cost to publish BIA guidelines in Jol providing it meets peer review and the required standard for publication. Guidelines result in citations so RR keen to publish these.

Guidelines already published have created a lot of citations.

21.2.11 Workforce & Training Secretary Report – Including Educational Sub Committee (BA)

BA was unable to attend

21.2.12 Scientific & Research Secretary Report (CC)

Grant round ended 31st January. Not a huge number of applications received, but they were of good quality.

There was one two-year grant, £10k per year to be awarded, but no applications were received. Maybe to do with awareness, so will look at the website and make sure it is clear.

Nine applications were received for the one-year small project grants of which there were up to four awards Awarded to:

Jordan Skittrall, Cambridge, *HIV-1 central polypurine tract structure, contribution to replication and effect of disruption*

Lucy O'Connor, UCL, *The impact of antibiotic pressure on the nasopharyngeal bacterial resistome in Malawi*

Muge Cevik, St Andrews, *Unravelling the role of host microenvironment in the development of phenotypic resistance in MTB*

Ali Amini, Oxford, *MAIT cells and early interferon responses to SARS-CoV-2 vaccines*

Travel Awards

Blair Merrick, Guy's and St Thomas', ECCMID 2022 - *Development of a GMP-compliant lyophilised faecal microbiota capsule: stability data and clinical outcomes in recurrent Clostridioides difficile infection*

Daniel Pan, Leicester, ECCMID 2022 - *Longitudinal patterns of exhaled SARS-CoV-2 viral load collected by face-mask sampling and its relation to nasopharyngeal sampling viral load, clinical symptoms and household transmission in infected healthcare workers*

Martin Llewelyn stepping down from the scientific review panel. Asked for suggestions for people to take his place. No formal process for this.

Early Research Committee

Webpage and webform for mentorship scheme.

Good session at FIS with NITCAR, establishing links with them.

Writing a guide for developing a PhD project.

Grant process – majority of applicants applying for funding for consumables from within a funded PhD, but are these short-term grants not more for people who are applying for the PhD process. Both are equally valid, but from a trainee's point of view, we need to make it clear that the funding is available to help them put together applications for a PhD process, which then ties in with the mentorship committee as well.

It would be good to see more pre-PhD applications, rather than within PhD, which should really be funded by the PhD.

We try to make sure people are asking for funding for things that aren't already covered, but it is difficult to prove or check this.

Worth us reviewing the language on the website when the next calls go out as it has been rather free in the past, and applications have been judged on scientific merit rather than the stage of the trainee. This would need a change to the process document.

Action: CC to review language used on call for grants and judging criteria - update of the process document

NITCAR

KJ met with Susanne Hodgson – discussion regarding the relationship with BIA. They don't want to be under the BIA umbrella, but still seeking advice and guidance. It is with NITCAR to put forward what they want the nature of the relationship to be.

21.2.13 Membership Secretary Report (MM)

MM was unable to attend. Report provided.

Membership over 1,500, but minority are full members (print journal) with large number of trainees and associate members.

21.2.14 Associate Members Secretary Report (LD)

Spring meeting session for associate members set up. Focusing on allergies and de-labelling, including pathways. Nurses, clinical scientists, pharmacists and immunologists presenting to represent the associate members.

Sustainability webinar – already discussed but people from lots of backgrounds signing up for this which is helpful in spreading the word.

Specialist scientist trainee has been promoting BIA to scientist community. Check the list of associate members, to see if this has had any impact. Now would like to focus on nurses.

Numbers are increasing and people more aware. Slow and steady progress being made.

21.2.15 Trainee representatives Reports

Professional Affairs (DA)

DA was unable to attend.

Meetings (FK)

Spring Trainees' Day

Speakers agreed, programme to be finalised. Abstract call gone out - case presentations back this year based on feedback.

NITCAR AGM taking place at lunchtime

Action: FK to email council for support with abstract submissions if needed

Communications (EM)

EM unable to attend

20.1.16 Communications Secretary Report (EM)

Ed Moran has stepped down – no update

21.2.17 Devolved Administrations Secretary Report (RS)

Nothing to report at this time – work on-going.

21.2.18 Journal of Infection Editor Report (RR)

Covered previously in the minutes

21.2.19 CLIP Editor Report

MW unable to attend, update report shared with council.

CLIP indexed on Scopus and DOAJ

New members have joined the editorial board

Agreement to publish cases from IFS weekly teleconferences as a special edition, possibly on an annual basis

20.1.20 A.O.B.

Several national and regional posts looking at Genomics – antibiotics / antimicrobials. Have BIA been involved in any of these working parties? No BIA involvement currently.

LD would like to represent BIA in this area and keep council informed.

Agree: LD to represent BIA and report back to council

KJ closed the meeting

Dates for 2022 BIA Council meetings

Thursday 3rd March – Virtual Teams meeting

Wednesday 25th May – BIA Spring Trainees' Day

September TBC – FIS 2022

November TBC – Virtual Teams meeting