

# **Terms of Reference**

# Steering Committee for

# UK Standards for Microbiology Investigations (UK SMIs)

### TITLE

The Steering Committee for UK Standards for Microbiology Investigations (UK SMIs)<sup>a</sup>.

The following Working Groups are accountable to the Steering Committee:

- Joint Working Group Meeting for Syndromic Algorithms
- Working Group for Microbiology Standards in Clinical Bacteriology
- Working Group for Microbiology Standards in Clinical Virology/Serology

Additional UK SMI Working Groups may be set up to develop UK SMIs on topics which are not covered by the listed working groups.

## ACCOUNTABILITY AND AUTHORITY

The development of UK SMIs is undertaken under the custodianship of Public Health England (PHE)<sup>b</sup>. PHE<sup>b</sup> is responsible for facilitating the development and hosting of UK SMIs but does not have full ownership. UK SMIs are developed in equal partnership with the professional societies and PHE<sup>b</sup> which display their logos (if available) on the UK SMIs; these bodies are hereafter referred to as "partner organisations" and are listed below. The Steering Committee for UK SMIs is accountable to the partner organisations. The Steering Committee is responsible for overseeing, advising and guiding the activities of the UK SMI Working Groups and the development of the standards.

The Steering Committee work with the Standards Unit which is responsible for managing the development, revision, archiving, publication and access of UK SMIs.

<sup>&</sup>lt;sup>a</sup> Background information regarding UK SMIs is available in Appendix 1

<sup>&</sup>lt;sup>b</sup> Reference to PHE througout this document includes any successor organsiation

### ROLE

The role of the Steering Committee is:

- To recommend and present microbiology standards which are produced to a National Institute for Health and Care Excellence (NICE) accredited standard
- Ensure a structured dialogue between partner organisations and the Steering Committee
- Direct the Working Groups on the following:
  - i) Overall policy, strategy and priorities
  - ii) Liaison with appropriate stakeholders and ensure appropriate representation on the UK SMI Working Groups
  - iii) Promoting awareness of UK SMIs amongst commissioners of services
  - iv) Horizon scanning for new aspects of infectious agents and diseases that require inclusion in the UK SMIs
  - v) New technologies and testing methods
  - vi) Accreditation requirements for development of UK SMIs (NICE and certification to ISO 9001) including governance of NICE accreditation process
  - vii) Consistency and harmonisation across UK SMIs including coordination across UK government including devolved administrations

### **MEMBERSHIP AND ATTENDANCE**

#### Membership

Membership is drawn from the partner organisations and includes a Chairperson, Standards Unit scientific staff, representatives from partner organisations and lay representation. The representatives should be members of the council (or equivalent body) of the partner organisations and should therefore give representative views of the council and the majority of members. Representatives act as conduits for two way reporting and dialogue. Lay representatives evaluate and comment on the documents and any other agenda items under discussion, and also the UK SMI development processes from a patient and public perspective. Lay representatives act as a conduit to specialist interest and/or patient and public involvement groups via the PHE<sup>b</sup> People's Panel.

Members include:

- 1. Chair of Steering Committee (appointed from the membership of the partner organisations but does not represent a partner organisation whilst in the role of Chair)
- 2. Chairs of Working Groups
- 3. Staff from the Standards Unit
- 4. Lay Representatives

- 5. Partner organisations:
  - i. Association of Clinical Oral Microbiologists
  - ii. Association for Clinical Biochemistry and Laboratory Medicine
  - iii. British Infection Association
  - iv. British Society for Medical Mycology
  - v. British Society for Microbial Technology
  - vi. British Society for Parasitology
  - vii. Healthcare Infection Society
  - viii. Public Health Scotland
  - ix. Institute of Biomedical Science
  - x. Microbiology Society
  - xi. Northern Ireland Microbiology and Audit Group
  - xii. Northern Ireland Public Health Agency
  - xiii. Public Health Wales
  - xiv. Royal College of General Practitioners
  - xv. Scottish Microbiology and Virology Network
  - xvi. Society for Anaerobic Microbiology
- xvii. Society for Applied Microbiology
- xviii. The British Society for Antimicrobial Chemotherapy
- xix. The Royal College of Pathologists
- xx. The UK Clinical Virology Network
- xxi. UK Clinical Mycology Network
- xxii. Welsh Microbiological Association
- xxiii. British Society for Parasitology

All partner organisations are invited to send a representative to sit on the Steering Committee. It is permissible for a committee member to represent a maximum of three partner organisation when the representative of said organisation is unable to attend. It is the responsibility of the covering member to act as the conduit for two way reporting in these situations. It is also permissible for a committee member to sit on more than one Working Group plus the UK SMI Steering Committee.

The Chair has discretion to invite multiple members from a partner organisation, where necessary, to ensure balance of representation and to assist the Steering Committee in fulfilling its role.

#### Attendance

The Chair and a minimum of one half of partner organisations that have nominated representatives (excluding Standards Unit staff and lay representatives) are required to be in attendance at a meeting to be quorate.

In the absence of the designated Chair, a member of the Steering Committee or Standards Unit will chair the meeting.

Committee members are expected to attend scheduled meetings. Where possible, members should notify the Standards Unit when they know they will miss a meeting. This is important due to the resource consequences if a quorum is not reached. Actions that can take place if a quorum is not reached are listed in Appendix 2.

A review of attendance will be undertaken annually. Results discussed with the Chair, the member and the relevant partner organisation where appropriate.

#### **Duties of members**

All members are expected to:

- i) Attend meetings (including face to face, virtual and teleconference)
- ii) Chairs of UK SMI Working Groups unable to attend a meeting should ensure an update on Working Group activities is submitted
- iii) Chairs of UK SMI Working Groups are expected to exchange information on UK SMI activities
- iv) Engage with all stages of the development process by reviewing documents, sending comments or stating nil return when requested by the Standards Unit
- v) Collect information from and consult widely with members of partner organisations,
  other interested stakeholders and individuals with relevant expertise where appropriate
- vi) Disseminate quarterly reports and ensure a two-way reporting line is undertaken between the Steering Committee and partner organisation
- vii) Contribute experience and knowledge of good practice to reach consensus decisions
- viii) Maintain an understanding of the development of UK SMIs
- ix) Maintain professional competence in clinical microbiology
- x) Act as a champion for UK SMIs within their partner organisation and promote them elsewhere when relevant.

#### **Duties of Partner Organisations**

All partner organisations are expected to:

- i) Nominate individuals to sit on UK SMI committees
- ii) Fund the travel expenses of nominees
- iii) Maintain a strong input into the production of UK SMIs
- iv) Maintain a system for regular progress reports to Council
- v) Establish consultation procedures for commenting on UK SMIs
- vi) Reinforce own perception of ownership.

#### Tenure of Membership

The tenure of members of the Steering Committee is 5 years. The tenure of members may be extended with the agreement of the partner organisation. The tenure of the Chair is 5 years which can be extended by a further term. When the post becomes vacant, members of the Steering Committee oversee the process for the appointment of a new Chair.

The tenure of the lay representatives is 5 years and this may be extended with the agreement of the Chair.

### **APPOINTMENT OF A CHAIR**

The partner organisations are invited to submit nominations for the position of Chair. The candidates forward a short CV and a letter of interest which is considered by a selection or interview panel.

A job description and personal specification for the post is available.

### **MEETINGS AND FUNCTIONAL ARRANGEMENTS**

Meetings are held at least twice a year, with additional meetings including teleconferences arranged at the discretion of the Chair. The Chair, with the support of the committee members may invite a guest or co-opt an individual to assist the committee in fulfilling its role.

The scientific and administrative support is provided by the Standards Unit. The Standards Unit circulate agenda and papers to the members of the group approximately 10 working days in advance of the meeting. Circulation of papers is restricted to committee members, guests and co-opted members.

When documents are circulated electronically before consultation, members are expected to engage with the process and highlight areas of inaccuracy or gaps in content at this time. Discussions in the committee meetings need to centre on the particular stage in the development process reached at that time. Non-verbatim, contemporaneous minutes of each meeting are maintained. The minutes are completed and approved by the Chair and sent out to members 6-8 weeks after the meeting.

Meetings generally take place on PHE<sup>b</sup> premises or elsewhere at the discretion of the Standards Unit with refreshment and lunch provided.

All meetings are CPD approved by the Royal College of Pathologists and the Institute of Biomedical Science.

# REVIEW

The terms of reference, performance and appropriateness of the Steering Committee will be reviewed by the Chair and the Head of the Standards Unit, taking into account the views and recommendations of the members of the Steering Committee.

## **APPENDIX 1 - BACKGROUND**

UK SMIs are a referenced collection of clinical bacteriology/virology standards and quality guidance notes, consisting of approximately 100 documents. UK SMIs cover all stages of the investigative process in microbiology<sup>c</sup> from the the pre-laboratory processes (pre-analytical stage), laboratory processes (analytical stage) and post-laboratory processes (post-analytical stage)..

UK SMIs are freely available on the PHE<sup>b</sup> webpages of the Gov.UK website as controlled documents; they can be viewed online.

#### https://www.gov.uk/government/collections/standards-for-microbiology-investigations-smi

Standardisation of the diagnostic process through the application of UK SMIs helps to assure the equivalence of investigation strategies in different laboratories across the UK and is essential for public health, surveillance, research and development activities.

UK SMIs are NICE accredited and represent neither minimum standards of practice nor the highest level of complex laboratory investigation possible.

Three groups of users have been identified for whom UK SMIs are especially relevant:

- UK SMIs are primarily intended as a general resource for practising professionals operating in the field of laboratory medicine and infection specialties in the UK.
- UK SMIs provide clinicians with information about the available test repertoire and the standard of laboratory services they should expect for the investigation of infection in their patients as well as providing information that aids the electronic ordering of appropriate tests.
- UK SMIs provide commissioners of healthcare services with the appropriateness and standard of microbiology investigations they should be seeking as part of the clinical and public health care package for their population.

<sup>&</sup>lt;sup>c</sup> Microbiology is used as a generic term to include the two GMC-recognised specialties of Medical Microbiology (which includes Bacteriology, Mycology and Parasitology) and Medical Virology.

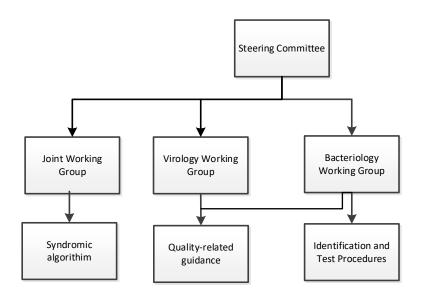
# **APPENDIX 2 – POLICY FOR NON QUORATE MEETINGS**

The Chair will call a meeting to order after finding that a quorum is present. If a meeting has not reached a quorum at the call to order or during a meeting (eg when a member leaves early), the Chair has a duty to declare the absence of a quorum. The following is a list of actions that may be taken in the absence of a quorum:

- Deal with and finalise the minutes and actions of the previous meeting
- Deal with non substantive changes to UK SMIs eg grammatical and clerical points but ensure these are endorsed by a quorum of members electronically
- Deal with the comments from consultation but ensure that these are endorsed by a quorum of members electronically
- Continue or finalise business that has previously been considered and agreed at the last quorate
  meeting where appropriate

Any new business and substantive decisions should be communicated with members by email before they are ratified.

# APPENDIX 3 – STEERING COMMITTEE AND WORKING GROUP ORGANOGRAM



# APPENDIX 4 – POINTS FOR CONSIDERATION WHEN ACCEPTING PARTNER ORGANISATIONS ONTO UK UK SMI COMMITTEES/WORKING GROUPS

An open and transparent process for appointment of partner organisations onto UK SMI committees is required to strengthen the position of UK SMIs and avoid selection based on personal recommendation or historical participation.

When considering a candidate organisation the following areas should be considered by the Steering Committee:

- Synergy between the objectives of the candidate organisation and UK SMIs
- Breadth of scope of candidate organisation to include whole specimen pathway, user engagement and patient involvement
- Membership number of members, types of members, discipline
- Interaction with membership active e-mail distribution list or message board
- Impact on training and professional standards
- UK or devolved administration standing of the candidate organisation and wide influence
- Ability to support committees and groups that form part of UK SMIs where appropriate
- Demonstration that they are not a pressure group for narrow issues, have political or industry affiliation
- Ability to sign up to memorandum of understanding to ensure participation and involvement

The rationale for the final decision on appointment should be recorded in the minutes of the meeting.