**Terms of Reference**

**PCRS-UK Education Committee**

**Definition**

The Education Committee is a sub-committee of Primary Care Respiratory Society UK Executive and is responsible for advising on, developing and implementing the educational activities of the charity. The purpose of the Education Committee is to bring about individual clinician change through education. The Education Committee is accountable through the Executive to the PCRS-UK trustees.

**Composition of the Committee**

The Committee shall consist of between 4 and 8 members who shall be appointed by the Executive and shall include representation from GPs, practice nurses, respiratory specialist nurses and allied health professionals who are directly involved with the delivery of patient care and/or are healthcare educationalists. The Committee will be chaired by the PCRS-UK Education Lead. A vice-chair will also be appointed. If the Chair is a GP the vice-chair shall ideally be a nurse (or allied health professional) and vice versa.

At least 4 members of the Committee must be formal members of PCRS-UK. Only the formal PCRS-UK members will have voting rights on the committee. Asthma UK and the British Lung Foundation will each be invited to nominate a patient representative to sit on the Education Committee to help ensure a patient centred approach is adopted in all activities.

A representative of the Education Committee will sit on the Service Development Committee and vice versa. A representative of the Education Committee will sit on the Conference Organising Committee and the Primary Care Respiratory Update editorial board.

The Chief Executive (or designated deputy) will act as secretary to the Committee, supported by the PCRS-UK Operations Team, but will not have voting rights.

The PCRS-UK Executive Chair may attend Committee meetings and participate in Committee proceedings as he/she sees fit.

**Powers and Responsibilities**

The Committee shall be responsible for:

* Formulating recommendations for the Executive on the education strategy of the PCRS-UK and short, medium and long term business plans for education to include:
* Professional development of an individual or small group of clinicians (tools and resources)
* Clinical education updates/topics and materials for individuals and small units
* Clinical update material (& events) suitable for different groups (responding clinically to guidelines and new evidence)
* Respiratory Leaders professional development programme
* Professional development (& clinical) support for constituent grass roots groups, up to practice leads (incl. forums/working parties as relevant):
* Practice nurses
* Respiratory nurse specialists
* GPs
* Other allied health professionals
* Supporting clinicians & practices to work towards the PCRS-UK Quality Award standards/implement national guidelines & policies
* Educational input to PCRS-UK conference, the Primary Care Respiratory Update and affiliated groups
* Supporting the CE to secure the funding and other resources required to deliver the agreed strategy and business plans
* Implementing the approved annual business plan, reporting progress and any deviations to the Executive
* Identifying and responding to business opportunities as they arise, seeking approval from the Executive for any activity outside the agreed business plan
* Responding to and acting upon tasks allocated to them by PCRS-UK Executive
* Identifying and recommending to the Executive suitable candidates for membership of the Education Committee and managing the appointment process
* Allocating responsibilities within the Committee and for education projects
* Establishing working groups as required to develop and conduct the education activities of the Charity, ensuring terms of reference are in place and approved by the Executive
* Succession planning for the Committee and its working groups
* Contributing to the performance appraisal of the Education Lead
* Ensuring all PCRS-UK education activities are conducted in line with agreed PCRS-UK strategic direction and policies/procedures.

All members of the Committee are expected to abide by the PCRS-UK code of conduct.

**Committee Proceedings**

The Committee shall meet regularly, at least twice a year.

A meeting of the Committee may be held in person or by suitable electronic means agreed by the members in which all participants may communicate simultaneously with all other participants.

A quorum of the Committee shall be three.

Decisions made by the Committee shall be by simple majority verdict unless otherwise specified in these terms of reference. All Committee Members shall have equal voting rights. In the event of there being a tied vote, the Chair will have an additional casting vote.

Conflicts of interest will be declared at the start of each meeting in line with PCRS conflict of interest policy.

All Committee Meetings are to be minuted, with the minutes to be presented at the next Committee Meeting, and ratified by the Committee as agreed, and then signed by the Chair. Draft minutes approved by the Chair and CE are to be circulated to Executive within 2 weeks of a Committee meeting and presented at the next Executive meeting. Any changes to the minutes are to be communicated to the Executive within two weeks of the minutes being ratified.

**Committee Chair**

The Chair (or Co Chairs) of the Committee shall be appointed by the Executive. The Chair’s term of office shall be three years from the date of his / her appointment as Chair. The Chair shall not normally serve more than two terms of office, unless otherwise approved by the trustees.

**Appointment of Committee members**

The composition of the committee shall be reviewed on an annual basis by the Committee chair in light of the business plan/priorities. A plan for recruitment, including specification to fill the up & coming vacancies, shall be agreed with the committee and approved by PCRS-UK Executive Chair /CE.

Vacancies shall be advertised to the PCRS membership and candidates will be asked to provide a supporting statement (and CV) confirming their interest in the role. Candidates will be shortlisted by the Committee Chair / agreed appointment panel, and interviews conducted to identify the most suitable candidate. Recommended candidate(s) with supporting rationale shall be put to PCRS Executive for approval.

Candidates shall normally be formal members of the PCRS: however the need for specific skills / experience may require candidates from outside the PCRS membership. Such candidates would be appointed in an ‘advisory capacity’ and shall not have voting rights on the Committee.

**Terms of Office for Committee members**

Membership of Committees shall be for three years. Thereafter, the Member is entitled to reapply for Committee Membership but shall not serve more than 3 consecutive terms of office (in exceptional circumstances, PCRS Executive may authorise election for a further term).

**Removal of Committee Members**

Any member of the Committee shall cease to hold office if he / she:

* Ceases to be a member of PCRS.
* Becomes incapable by reason of mental disorder, illness or injury of managing and administering his own affairs.
* Resigns his / her office by notice to the Committee Chair.
* Is absent without the permission of the Committee from two consecutive meetings and the Committee resolve that his / her office be vacated.
* Receives a vote of no confidence or is deemed to have brought the Charity into disrepute and is asked by a majority of the Committee to resign. The member concerned may appeal to the Executive.

**Committee Member’s Expenses**

Travel costs payable to the individual and locum costs payable to the practice will be reimbursed for Committee members attending Meetings of the Committee. Expenses will be paid upon presentation of a completed PCRS-UK expenses claim form. Car travel costs will be reimbursed at a rate of 45p per mile and rail or air fares will be refunded at standard class upon presentation of a valid receipt. Locum costs will be paid upon receipt of an invoice from the practice.

Loss of earnings may be claimed by members who lose a day’s income as a result of attending the meeting or have to take a day’s annual leave, as follows, GPs: £400 per full day, nurses: £300 per full day or backfill expenses can if necessary be reimbursed to Committee members’ host organisations at the same rates. Childcare costs (or other care costs related to a dependent) may be claimed as an expense in lieu of ‘loss of earnings’ or a locum fee.

**Agreed by PCRS-UK Executive:** May 2015

**Approved by Trustees: June 2015**

**Next Review Date:** June 2018