

TERMS OF REFERENCE

PHYSIOTHERAPY RESPIRATORY LEADERS

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	Leaders Members
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INTRODUCTION

The Physiotherapy Respiratory Leaders Group was established in 2015 by Rachael Moses (Consultant Physiotherapist), in 2019 the membership was consulted and the decision was made to embed the group within the Association of Chartered Physiotherapists in Respiratory Care (ACPRC). This document reflects this action and how the Physiotherapy Leaders Group will perform within the Vision, Mission and Constitution of the ACPRC. Working together will increase our impact and strategically influence clinical practice to promote excellence in patient care.

AIMS

1.0 Purpose/Role of the Group

The Physiotherapy Respiratory Leaders Group was established to:

- Provide a forum for leaders in respiratory physiotherapy to meet and discuss operational matters relating to delivery of respiratory physiotherapy services
- Provide an opportunity for clinical team leads to share innovations in practice and benchmark services across the country to optimise patient experience and outcomes
- Support and drive national agendas from NHS England as part of the ACPRC who report to the Chartered Society of Physiotherapy (CSP)

CONSTITUTION

2.0 Membership

The membership of the Respiratory Leaders Group will be very inclusive. The group aims to gain representation from physiotherapy respiratory leaders throughout the UK.

To gain membership to the Physiotherapy Leaders Group applicants will be required to:

- ➤ Be a member of the ACPRC from January 2021
- > Be leading and or managing a respiratory physiotherapy service in the UK
- Be a clinical specialist delivering respiratory physiotherapy



- > Be a respiratory physiotherapy educator or researcher
- ➤ Be willing to share good practice and innovations
- Be willing to share information about their skills and experience on the Physiotherapy Respiratory Leaders Skills Hub with other group members and the ACPRC

To fulfil its remit the Respiratory Leaders Group may obtain professional advice it requires and invite, if necessary, external experts and relevant staff representatives to meetings and membership, if deemed appropriate by the Chair of the Respiratory Leaders group and Chair of the ACPRC.

Were appropriate patients and the public may be involved to share their views and experiences.

The membership will be reviewed on an annual basis. Members will be asked annually to update their information on the skills hub to reflect any changes in their role or clinical practice. The Skills Hub will be updated by the Chair and sent to members twice a year in January and September

The Respiratory Leaders Group Chair will represent the group as being a member of the ACPRC committee.

The Respiratory Leaders Group will be supported by the ACPRC Committee by the following committee members:

- Chair
- Vice Chair
- Education Champion
- Research Officer
- Public Relations Officer
- Secretary
- Website Manager

3.0 Quorum



The quorum for the meetings shall be at least 20 members of the group with good representation from across the UK and those working in acute and community services.



4.0 Frequency of meetings

Meetings will take place twice a year. There will be a Spring/Summer Meeting and an Autumn/Winter Meeting. Meetings will be held face to face in different areas of the UK to ensure fair accessibility and / or via online platforms such as MS TEAMS or Zoom. Invitations to meetings will be sent to member at least 6 weeks in advance. Meetings will take the form of presentations, discussion groups and seminars either face to face or online for example Webinars/discussion groups. The membership will be consulted prior to meetings to generate ideas for the agenda and topics to be discussed. Agendas and meeting papers will be circulated to attendees at least one week before the meeting.

5.0 Declaration of interests

All members must declare any conflicts of interest, should they arise, and exclude themselves from the meeting for the duration of that specific item.

DUTIES

6.0 Duties and Responsibilities

The membership shall be responsible for ensuring:

- The administration of meetings is manged effectively and efficiently
- Individuals and/or working groups undertake the duties / tasks that they agree to undertake as a result of the meeting and distribute the results
- Members must maintain professional code of conduct at all times and represent their service
- Inform the Chair of any changes in their job role, contact details or skill set

AUTHORITY AND ACCOUNTABILITY

7.0 Accountability

Members are accountable to their regulating body the Health and Care and Professionals Council (HCPC).



8.0 Authority

The group's remit is to provide an opportunity to discuss matters relevant to the operational delivery of respiratory physiotherapy, share opinion and share practice. It is not a regulated body and cannot influence decisions or actions. The Chair of the group is responsible for representing the memberships opinions to the ACPRC Chair and CSP as required.

All matters relating to professional incidents will be discussed with advisors at the ACPRC or CSP. The Chair of the group is responsible for reporting any such concerns to the ACPRC Chair and CSP.

9.0 Reporting

The Chair of the group or a nominated representative will summarise meetings and actions and is responsible for sharing this with the ACPRC Chair and Committee. Meeting summaries will be submitted to the ACPRC within one month of the meeting taking place and an annual report will be sent to the ACPRC Chair to summarise the groups work annually.

10.0 Communication

The Physiotherapy Leaders Group Chair is responsible for the management of the group email and content that is circulated to the membership. If members wish to propose a question to the membership this must come through the Chair to prevent excessive emails being circulated. The Chair will screen emails regarding appropriate questions and will circulate to the membership within one week of the question being raised.

Appropriate material includes:

- Queries regarding operational management of respiratory physiotherapy services
- Queries on policy, procedures and guidelines used in the UK
- Specific clinical situations that other members of the group may have experience/expertise in
- Benchmarking and auditing of services



- Invitations to members to participate in local, regional or international research
- ➤ Sharing of relevant educational and research resources
- Sharing opportunities to be involved in national or international polices or decision making committees as reviewers

Inappropriate material includes (note these can be advertised in the ACPRC monthly newsletter):

- ➤ Non-Leadership role job adverts
- Course adverts

The Chair will forward any materials that are viewed as relevant to members of the ACPRC committee for inclusion in the ACPRC Newsletter and or Website.

The Chair is responsible for archiving and sharing useful documents for availability to the membership. The shared space will be embedded within the ACPRC website that will be password protected. Documents will be reviewed every 6 months and deleted if no longer required/out of date.

MONITORING EFFECTIVENESS

11.0

To support the continuous improvement of governance standards, the Physiotherapy Respiratory Leaders will meet annually and will complete the following no later than a month after the meeting:

- Complete a self-assessment of the effectiveness of the meeting
- Review the terms of reference for the meeting, reaffirming the purpose and objectives