

## IS PWYLLGOR YMCHWIL A DATBLYGU RESEARCH & INNOVATION SUB COMMITTEE

<b>DYDDIAD Y CYFARFOD:</b> <b>DATE OF MEETING:</b>	13 March 2023
<b>TEITL YR ADRODDIAD:</b> <b>TITLE OF REPORT:</b>	Research & Innovation Sub Committee Annual Report
<b>CYFARWYDDWR ARWEINIOL:</b> <b>LEAD DIRECTOR:</b>	Professor Philip Kloer, Medical Director and Director of Clinical Strategy
<b>SWYDDOG ADRODD:</b> <b>REPORTING OFFICER:</b>	Dr Leighton Phillips, Director for Research, Innovation and Value

**Pwrpas yr Adroddiad (dewiswch fel yn addas)**

**Purpose of the Report (select as appropriate)**

Ar Gyfer Penderfyniad/For Decision

### ADRODDIAD SCAA SBAR REPORT

#### Sefyllfa / Situation

The purpose of this report is to present the Research & Innovation Sub Committee Annual Report 2022/23 to the People, Organisational Development & Culture Committee (PODCC).

The Research & Innovation Sub-Committee Annual Report 2022/23 provides assurance in respect of the work that has been undertaken by the Sub-Committee during 2022/23, and that the terms of reference as set by the Committee are being appropriately discharged.

#### Cefndir / Background

Hywel Dda University Health Board's (HDdUHB) Standing Orders and the Terms of Reference for the Research & Innovation Sub Committee require the submission of an Annual Report to the Committee to summarise the work of the Sub Committee and to identify how it has fulfilled the duties required of it.

The purpose of the Research and Innovation Sub-Committee, as expressed in its Terms of Reference, is to assure the Board, via the PODCC, that it is discharging its functions and meeting its responsibilities concerning the quality and safety of research activity carried out within the organisation.

This includes:

- a clear strategy
- clear governance and performance management
- working within budget constraints.

The Research & Innovation Sub-Committee will promote and support involvement in high quality, multi-disciplinary and multi-agency healthcare research, development and innovation, promote evidence-based healthcare, build research and innovation capacity and foster a research and innovation culture, including patient/public involvement where appropriate.

The Research & Innovation Sub-Committee will facilitate collaboration with the Research and Academic community to maximise outcome and impact for the Health Board and the patients it serves.

### **Asesiad / Assessment**

The Research & Innovation Sub Committee has been established under Committee delegation with the Health Board approving Terms of Reference (TOR) for the Sub Committee at its Committee meeting on 13 April 2021.

This Annual Report outlines how the Research & Innovation Sub Committee has complied with the duties set through its TOR and identifies key actions to address developments.

### **Constitution**

There is a core membership of the Sub Committee which comprises:

- Medical Director & Deputy Chief Executive (Chair)
- Director for Research, Innovation & Value (Vice Chair)
- Independent Member
- Clinical Director, Research & Development
- Head of Research & Development
- Head of Tritech & Innovation
- Assistant Director of Nursing (with a responsibility for research)
- Assistant Director of Therapies and Health Science (with a responsibility for research)
- A representative from Aberystwyth University
- A representative from Swansea University
- A representative from the University of Wales Trinity Saint David
- Head of Data Science
- Assistant Director of People Development
- Head of Medical Education and Knowledge
- Representative from the Division for Social Care and Health Research (DSCHR) Welsh Government - Health and Care Research Wales Workforce
- Representative from 3rd Sector Organisation
- Head of Research, Innovation & Improvement, Regional Partnership Board

### **Meetings**

During 2022/23 Research & Innovation Sub Committee meetings were held on a quarterly basis. As the Research & Innovation Sub Committee is directly accountable to PODCC for its performance, it provides an assurance to PODCC through a formal written update report, which is received at the subsequent PODCC meeting. A full set of the papers for each PODCC meeting is routinely made available online from the Health Board's website.

During 2022/23, the Sub Committee met on the following occasions and was quorate at each:

- 9 May 2022
- 12 September 2022
- 14 November 2022
- 13 March 2023

## **Areas of Responsibility**

In discharging its duties, the Research & Innovation Sub Committee (R&ISC) has undertaken work during 2022/23 against the following areas of responsibility in relation to its Terms of Reference. There is a Research and Development (R&D), TriTech and Innovation, and university partnership section at each R&ISC meeting. Therefore, the same headings are used within the following sections describing the items considered by the Sub-Committee.

### **Governance**

#### **R&D**

- **Reporting to the R&ISC:** One of the responsibilities of the Research and Development Senior Management Team (R&DSMT) is to report quarterly to the R&ISC on research delivery operations across HDdUHB. An update has been provided to every R&ISC.
- **Research Quality Management Group (RQMG) Annual Report 2020/21:** The Research Quality Management Group Annual Report 2022/23 was presented for approval on 13 March 2023(Appendix 1). The Research & Innovation Sub-Committee endorsed the Research Quality Management Group Annual Report 2023/23.
- **R&D Quality Assurance and Sponsorship Sub Group (RQSG):** A draft ToR for a new Sub Group, formed by the amalgamation of the current Research Quality Management Group and Sponsor Review Group was submitted and approved at R&D SMT on 20 February 2023. The proposal to merge the groups was discussed by the R&ISC on 13 March 2023, with advice provided on the Chair, Co-Chair and Vice Chair representation. The principle of a new RQSG was approved by the R&ISC and it was agreed that the revised ToR should be approved through Chair's action due to the next Sub Committee not taking place until June 2023. The ToR were approved by the Chair on 16 March 2023 and the new RQSG will commence from April 2023.

#### **Triotech & Innovation**

- **TriTech and Innovation Group (TIG):** The ToR for a new subgroup covering both TriTech and Innovation was approved by the R&I Sub-Committee in July 2022. The new subgroup is called the Triotech and Innovation Group (TIG) replacing the previous TriTech Management Group, to ensure good governance of wider innovation activities.
- **New Terms of Reference for the Senior Innovation & Triotech Operational Team (SITOT):** Following approval from the R&ISC in July 2022, a new group was introduced called 'The Senior Innovation & Triotech Operational Team'. This was set up to manage the regular operation of the TriTech & Innovation Division and ensure actions from TIG are implemented. At the TIG meeting on the 25 July 2022 new ToR for the Senior Innovation & Triotech Operational Team were presented for discussion, assurance and decision. The ToR for the Senior Innovation & Triotech Operational Team were approved by TIG at this meeting.
- **Reporting to the R&ISC:** One of the responsibilities of the TIG is to regularly report to the R&ISC on key operational and management decisions in the ongoing development and running of the Triotech & Innovation Division. Quarterly reports were produced for the R&ISC. The first quarterly report was presented to the R&ISC at the November 2022 meeting, with the second produced for March 2023. In addition to the quarterly reports the TIG is required to provide R&ISC with an annual report detailing the TIG and its management of the Triotech and Innovation Division. The annual report for 2022/2023 was agreed at the R&ISC on 13 March 2023.
- **Reporting to regulatory authorities & incidents:** One of the responsibilities of the TIG is to review, discuss and implement any learning from incidents or interactions

with regulatory authorities during the delivery and running of the Tritech & Innovation Division, either in its general duties or during the delivery of specific projects or pieces of work. Over the 2022/23 period no reports or communications were required or brought to the attention of the R&ISC.

### **University Partnerships**

- **Reporting to R&ISC:** In order to maintain its 'University Health Board' designation, HDdUHB is required to demonstrate continuous improvement in collaborative working with its university partners. On an annual basis, HDdUHB is required by Welsh Government to provide evidence of purposeful university partnership activity, with examples of how this is improving services and benefitting our population and to set out our plans for the next 12 months aligning to the Integrated Medium Plans. As a result, regular reports of current activity, ongoing or new business and upcoming events at the key academic institutions Swansea University (SU), University of Wales Trinity Saint David (UWTSD), Aberystwyth University (AU) is presented at each R&ISC meeting with a University Partnerships Update report presented to R&ISC.

### **Discussion Items**

#### **R&D**

- **Biobank:** A high-level appraisal of five options by an external consultancy, Trustech Smart Healthcare Ltd, was commissioned in January 2022. Phase 1 of the Biobank Feasibility Project (Options Appraisal report), presented by Trustech in May 2022, recommended Option 6, to develop a 'West Wales BioResource Centre' based on existing models in the UK. Under Phase 2 of the Biobank Feasibility Project, a business case for Option 6, and an exit strategy for Option 1, were developed. The business case was presented to the R&ISC on 14 November 2022. The Sub Committee recommended convening an independent expert panel to scrutinise the business case and report recommendations back to R&ISC. The Expert Panel was convened on 23 of January 2023; the report submitted on the 30 January 2023 recommended Option 1, to close the Biobank, as it was not believed that Option 6 represented a realistic case and the risks were too high for the HDdUHB. On 2 February 2023, the extraordinary meeting of the R&ISC was informed of this the recommendation and requested a detailed plan of the decommissioning process and assurance that current running of clinical trials will not be affected by this decision. On 13 March 2023 R&ISC was presented with a report detailing the planned decommissioning of the BioBank. The Sub-Committee took assurance from the proposal noting an outstanding response from Health Tissue Authority regarding samples for three trials. A further update will be presented to R&ISC on the decommissioning process at its June 2023 meeting.
- **Research Facilities:** A report was presented to the Sub-Committee on 12 September 2022 to provide an overview of the plans that have been developed to ensure the provision of suitable space for research at both Bronglais Hospital (BH) and Withybush Hospital (WH). This issue is captured on the department's risk register (Risk 1035 BGH & Risk 1036 WGH). The Research & Innovation Sub-Committee was asked to consider escalating these risks to PODCC. Refurbishment and IT upgrade costs were agreed and works commenced in Ty Aeron Bronglais Hospital to create a fit for purpose Clinical Research Facility and are due for completion by 31 March 2023. A dedicated space has been identified at Withybush Hospital and costs and a timeline for relocation are being considered. On 13 March 2023 the Sub-Committee reviewed current plans and progress on accommodation for the BH and WH R&D Delivery Teams. This links to the department's risk register (Risk 1035 BH & Risk 1036 WH). The R&ISC agreed to revise

these risks to reflect progress to date. The Sub-Committee noted the plan for a fit for purpose Clinical Research Facility at Ty Aeron is due for completion by 1 May 2023, the Sub-Committee agreed **risk 1035** should be removed from the register. A dedicated space has been identified at WH and costs and a timeline for relocation are being considered, however, the space has yet to be confirmed; the Sub-Committee agreed risk 1036 should be increased.

### **Tritech & Innovation**

- **Intellectual Property (IP) Policy:** Following submission at an R&ISC meeting on 12 September 2022 it was agreed to review the Health Board IP Policy and draft a new policy for approval. Draft IP policy (policy number 673) has been prepared with input from an external IP Specialist, NWSSP Legal and Risk, Corporate Legal, Information Governance, Human Resources (HR). The policy was reviewed by the Executive Team on 28 September 2022 and it requested additional information to establish the position across NHS Wales as there was concern over the 40% split and whether this was appropriate. The R&ISC felt further work was required on the policy to include clarification as to whether the document is aimed at internal staff only or external organisations, further emphasis on work with university partners and clarification of operational details such as payments to teams. A revised policy was submitted to the R&ISC meeting on 14 November 2022. The policy remains in draft, pending a view from the Executive Team on HR implications.
- **TriTech Business Plan:** At the 9 May 2022, R&ISC asked for a detailed business plan for TriTech and Innovation to be developed. The TriTech Business Plan was agreed by R&ISC at an extraordinary meeting in July 2022, and then agreed by PODCC in August 2022. Delivery against the plan is routinely considered at R&ISC meetings through the updates from the TIG.
- **Quality Management System (QMS):** R&ISC was made aware that the Quality and safety standards for the Tritech Institute are part of the new ISO 13485 Quality Management system. The ISO 13485 accreditation was formally delivered and accredited in April 2022.

### **University Partnerships**

- At the R&ISC meeting on 12 September 2022, the University Partnerships Update report was presented to the Sub-Committee and accepted. At the 14 November 2022 meeting R&ISC received a report that Welsh Government was provided with a report of the current progress and success of HDdUHB's University Partnership progress and six month plan. The R&ISC was informed that the report was well received.
- **University Honorary Contracts.** At the 13 March 2023 meeting R&ISC agreed to develop a register of staff with University Honorary Contracts noting positions held and when appointed. This was felt necessary to increase wider engagement opportunities which may present in the future.

### **Assurance Items**

#### **R&D**

- **R&D Operational Teams Report:** Reports were presented to every meeting of the Sub-Committee providing an update on the activities taking place across all key areas in research & development operations. The R&ISC was asked to note each report and take assurance that the Research & Development operational teams are continuing to make progress against expectations. The Sub-Committee received assurance from the reports.

- **R&D Risk Register:** A report was presented to every meeting of the R&ISC providing an update on the departmental risks. The Sub-Committee was asked to review the identified risks and associated action plans and take assurance from the report that the department's risks are being managed appropriately. The Sub-Committee received assurance from the reports.
- **Research Quality Management Group:** A report was presented to every meeting of the R&ISC from the Research Quality Management Group (RQMG) highlighting the key areas of work undertaken. The Sub-Committee was assured in the risk, issues and associated management action plan.
- **Clinical Leadership Across R&D:** The Research and Development Department's risk register identifies the lack of research leadership (staff able to act as principal investigators) across HDdUHB as presenting an impediment to the Research & Development strategy. In recognition of this risk and the Health Board's University status, there has been a recent increase in plans and resources to support clinical staff engagement in research. The progress made by the current Research & Development leadership group, as well as future plans were summarised in this report to the Sub-Committee. The R&ISC received assurance from the report on 10 January 2022.
- **R&D Performance:** The Sub Committee received and agreed national performance reports from the Power BI dashboards at each of its meetings.

### **Tritech & Innovation**

- **Project Decision Making:** A report was presented to the R&ISC on 13 September 2022 explaining the TriTech decision making process. The Sub-Committee was asked to take assurance from the decision-making processes subject to them being kept under ongoing review as the new team and associated functions mature. The Sub-Committee received assurance from the report.
- **TriTech and Innovation Finance Tracker:** A report was presented to every meeting of the TIG providing an update on the financial status of the Tritech and Innovation Division. The TIG was asked to review the current financial position of the division against the financial yearly forecast for the division and take assurance from the report(s) that the Tritech and Innovation Divisions finances are being managed appropriately. The R&ISC received assurance from the report(s).
- **TriTech Team Activity Report:** A report was presented to every meeting of the R&ISC until July 2022, at which point the new TriTech and Innovation Group was formed. The reports provided an update on the activities that took place across all key areas in TriTech operations. This involved current progress and problems with any of the projects being delivered as well as new projects and current activity. The R&ISC was asked to note the reports and take assurance that the TriTech team is continuing to make progress against expectations. The Sub-Committee received assurance from the reports.
- **TriTech and Innovation Group Report:** A report has been presented to every R&ISC since July 2022 on the activities of the TriTech and Innovation Division. The R&ISC were assured by the reports.
- **TriTech and Innovation Risk Register:** The R&ISC has received reports of key risks and management action plans at every meeting. The R&ISC took assurance from the reports that the Tritech and Innovation Division's risks are being managed appropriately.
- **Financial Risk Stratification:** On the 13 March 2023 following notification at the previous R&ISC that a company had defaulted on a due payment under a contract, the Sub-Committee received and took assurance from a financial risk stratification approach, which would ensure that the Hywel Dda UHB is not exposed to an unreasonable level of risk through its TriTech and Innovation activities.

## University Partnerships

- **Immediate Business:** The R&ISC received regular verbal updates on the partnership activities between the Health Board and our partner Universities (SU, UWTSU, AU) in respect of research and innovation activities. The R&ISC received assurance from the report(s).

## **Information Items**

### R&D

- **R&D Finance Business Partner Reports.** An update was presented to each meeting to inform the Sub-Committee of the current financial position for both Research & Development and TriTech & Innovation. The R&ISC noted the financial reports.
- **Health and Care Research Wales (HCRW) Grant Offer.** HCRW All Wales Research Delivery Funding for 2022/23 was confirmed as £1,197,660
- **R&D Funding HCRW.** The R&ISC received a report on the 12 September 2022 describing the new approach to distributing the All Wales Delivery Funding implemented by HCRW, which will involve a transition from a model based on activity to a 'needs-based' approach. Sub Committee Members were advised that the second phase of implementing this model has involved a review of staffing across the R&D Division by HCRW, which identified several staff on the annual spending plan on fixed term contracts, which could be at risk at the end of the financial year. This is reflected in the R&D risk register.
- **The Joanna Briggs Institute partnership.** The R&ISC was advised that a partnership was being formed with Cardiff University. The partnership will allow a member of staff to attend a day of qualitative meta-analysis training, which fits in with the R&D training plan and budget.
- **The Cancer Research Strategy for Wales (CRest)** has been endorsed by partner universities and HCRW. The R&ISC was advised that HDdUHB has also endorsed the strategy.
- **Clinical Leadership of Research.** At the meeting on 13 March 2023, the Clinical Lead for R&D provided a routine update on progress made in securing more time for research interested clinicians. The report was noted.

### Tritech and Innovation

- **R&D Finance Business Partner Reports.** At each meeting the current financial status of Tritech and Innovation in relation to their Business Plan objective are reviewed. At the November 2022 R&ISC meeting it was reported that at the end of September 2022 (M6 reporting period) the closing balance £83,656 surplus with a forecasted end of year position of £73,799 surplus. The TriTech Business Plan projects a forecast return of £39,237 surplus for 2022/23, therefore the current forecast exceeds plan.
- At the March 2023 R&ISC meeting it was reported that at the end of January 2023 (M10 reporting period) the closing balance is £269,803 surplus with a forecasted end of year position of £229,199 surplus. The TriTech Business Plan projects a forecast return of £39,237 surplus for 2022/23, therefore the current forecast exceeds TriTech Business Plan. This is primarily due to securing funding for larger projects such as Amgen that will continue into next financial year.

## University Partnerships

- **University Partnership Updates.** The R&ISC receives regular updates on the partnership activities between the Health Board and Universities in respect of research and innovation activities. At the end of last financial year, the Sub Committee were

informed of the intention to move towards each university partner providing a more comprehensive overview of their activities at one in every three meetings. The Sub Committee received the following presentations and updates:

- University of Wales Trinity Saint David: 9 May 2022
- Swansea University: 12 September 2022
- Aberystwyth University: 14 November 2022
- **University Partnership Planning.** At the R&ISC meeting on 13 March 2023, Members were advised that planning discussions had been arranged with all three university partners to set the agenda for partnership discussions over the course of 2023. A targeted approach, aligning to the priorities of both organisations, would be taken. The outline agenda for the discussions will be presented to PODCC for consideration, as they will also consider the workforce dimensions of partnership.

### **National Developments**

- **National Innovation Strategy.** At the 13 March 2023 meeting, the R&ISC was advised of the publication of the new National Innovation Strategy. Sub-Committee Members noted the report.

### **Key Risks and Issues/Matters of Concern**

- The R&ISC has received five reports throughout the year on the Directorate Risk (1160). The risk is of a decreasing research portfolio and a reduction in its diversity caused by a lack of research leadership across HDdUHB. The management actions throughout the year have been to find dedicated investment to release clinicians from their day jobs for a proportion of their working week to lead research. This has had an impact in areas including orthopaedics, women's health, ophthalmology and colorectal cancer. However, the R&ISC has not been prepared to reduce the risk score from 12 due to a concern about whether the arrangements can be sustained. On 13 March 2023, the R&ISC received a series of proposals for discussion to consider how the risk score could be lowered. The proposals were noted.
- Throughout 2022/23, the R&ISC has received regular updates on service risk (1035). The risk is of inadequate research facilities at Bronglais Hospital, which has been scored as 16 (extreme). On the 13 March 2023, the R&ISC were able to agree to the de-escalation of the risk, due to identification of capital.

### **Matters Requiring Committee Consideration or Approval**

- **R&ISC ToR.** The R&ISC revised Terms of Reference (Version 11).
- **Deep Dive on Planning Objective.** A deep dive update on Planning Objective 3G and university partnerships.
- **Clinical Leadership.** Concerns were raised about clinicians not having the time available to undertake research studies. PODCC was advised of plans being developed to, as a minimum, offer an ongoing time commitment to current Clinical Research Time Award holders.
- **IP Policy.** The Sub-Committee was asked to consider that there is no organisational IP policy but a draft policy was being worked on for consideration by Executives.
- **BioBank.** PODCC was informed of the conduct, conclusions and implications of the review of HDdUHB's research biobank.
- **Clinical Research Facilities.** PODCC was asked to consider the lack of appropriated clinical research facilities at Bronglais Hospital and, through escalation to Board, supported a plan to resolve.

- **Commercial Studies** – PODCC was asked to consider HDdUHB’s underperformance on commercial studies and to note the plan that has been put in place to resolve.
- **R&D Quality Assurance and Sponsorship Sub Group (RQSG):** The Sub-Committee was asked to consider a proposal for a new Sub Group, formed by the amalgamation of the current Research Quality Management Group and Sponsor Review Group. A revised proposal for RQSG draft ToR was subsequently submitted for Chairs approval and agreed. The new Group will meet in April 2023.
- **Research Facilities:** On 13 March 2023 Sub-Committee reviewed current plans and progress on accommodation for the BH and WH R&D Delivery Teams. This links to the department’s risk register (Risk 1035 BH & Risk 1036 WH). The Sub-Committee agreed to revise these risks to reflect progress to date. The Sub-Committee noted the plan for a fit for purpose Clinical Research Facility at Ty Aeron is due for completion by 1 May 2023; the Sub-Committee agreed **risk 1035** should be removed from the register. A dedicated space has been identified at WH and costs and a timeline for relocation are being considered, however, the space has yet to be confirmed; the Sub-Committee agreed risk 1036 should be increased.

### Argymhelliad / Recommendation

PODCC is asked to endorse the Research & Innovation Sub Committee Annual Report for 2022/23.

<b>Amcanion: (rhaid cwblhau)</b>	
<b>Objectives: (must be completed)</b>	
Committee ToR Reference: Cyfeirnod Cylch Gorchwyl y Pwyllgor:	3.7 Receive the Research & Innovation (R&I) Annual Report for approval prior to submission to the Health and Care Research Wales, to ensure the Health Board increases its Research & Development/R&I capacity, research output and research income.
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	N/A
Safon(au) Gofal ac Iechyd: Health and Care Standard(s):	Governance, Leadership and Accountability
Amcanion Strategol y BIP: UHB Strategic Objectives:	Not Applicable
Amcanion Llesiant BIP: UHB Well-being Objectives: <a href="#">Hyperlink to HDdUHB Well-being Statement</a>	Not Applicable

<b>Gwybodaeth Ychwanegol: Further Information:</b>	
Ar sail tystiolaeth: Evidence Base:	Agendas, papers and minutes of the Sub Committee meetings 2022/23
Rhestr Termau: Glossary of Terms:	Included within the body of the report.
Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Ceisiadau Gofal Sylfaenol: Parties / Committees consulted prior to the Committee:	Not Applicable

<b>Effaith: (rhaid cwblhau) Impact: (must be completed)</b>	
<b>Ariannol / Gwerth am Arian: Financial / Service:</b>	A sound system of internal control, as evidenced in the R&I Sub-Committee's Annual Report, will assist with ensuring financial control, and the safeguard of public funds.
<b>Ansawdd / Gofal Claf: Quality / Patient Care:</b>	SBAR template in use for all relevant papers and reports
<b>Gweithlu: Workforce:</b>	SBAR template in use for all relevant papers and reports
<b>Risg: Risk:</b>	SBAR template in use for all relevant papers and reports
<b>Cyfreithiol: Legal:</b>	A sound system of internal control, as evidenced in the R&I Sub-Committee's Annual Report, ensures that any risks to the achievement of the Health Board's objectives are identified, assessed and managed. Compliance with the Health Board's Standing Orders, and the R&I Sub-Committee's Terms of Reference, requires the submission of an Annual Report to the Quality, Safety & Experience Assurance Committee.
<b>Enw Da: Reputational:</b>	Not Applicable

<b>Gyfrinachedd: Privacy:</b>	Not Applicable
<b>Cydraddoldeb: Equality:</b>	Not Applicable