



TERMS OF REFERENCE

RESEARCH & INNOVATION SUB-COMMITTEE

Version	Issued to:	Date	Comments
V0.2	Research & Development Committee	07.10.2013	Approved
V0.3	Research & Development Committee	24.10.2014	Approved
V0.4	University Partnership Board	16.11.2015	Approved
V0.5	Research & Development Sub-Committee	27.11.2015	Approved
V0.6	Research & Development Sub-Committee	22.02.2016	Approved
V0.7	Research & Development Sub-Committee	13.02.2017	Approved
V0.8	Research & Development Sub-Committee	21.05.2018	Approved
V0.9	Research & Development Sub-Committee	14.09.2020	Approved
V0.9	Quality, Safety & Experience Assurance Committee	06.10.2020	Approved
V10.0	Research & Innovation Sub-Committee	08.03.2021	Approved
V10.0	Quality, Safety & Experience Assurance Committee	13.04.2021	Approved
V11.0	Research & Innovation Sub-Committee	14.03.2022	Approved
V11	People, Organisational Development and Culture Committee	04.04.2022	Approved
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V12	People, Organisational Development and Culture Committee	03.04.2023	For Approval

RESEARCH & INNOVATION SUB-COMMITTEE

1. Constitution

- 1.1. The Research & Innovation Sub-Committee (RISC) was established as a Sub-Committee of the People, Organisational Development and Culture Committee (PODCC) and constituted from 1st August 2021.

2. Purpose

- 2.1. The purpose of the Research & Innovation Sub-Committee is to assure the Board, via the People, Organisational Development and Culture Committee, that it is discharging its functions and meeting its responsibilities with regards to the quality and safety of research, development and innovation activity carried out within the organisation.

The guiding principles will be:

- 2.1.1 a clear strategy;
- 2.1.2 clear governance and performance management
- 2.1.3 working within budget constraints.

- 2.2. 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.
- 2.3. 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.

3. Key Responsibilities

- 3.1. Assure the Board, through the PODCC, in relation to arrangements for ensuring compliance with all relevant frameworks, UK Clinical Trials, Clinical Investigations and other Regulations (transposed into UK law from European Union Directives) and reporting requirements.
- 3.2. Assure the Board, through the PODCC, that the sponsorship of research studies by Hywel Dda University Health Board follows a robust scientific review and complies with all relevant regulations.
- 3.3. Assure the Board, through the PODCC, that the arrangements for undertaking real world evaluations of medical devices are robust and comply with all relevant regulations.
- 3.4. Assure the Board, through the PODCC, that the ring-fenced funding is being spent according to Welsh Government requirements.
- 3.5. Receive assurance on the management of operational risks that have been aligned to the Sub-Committee, and provide assurance to the PODCC that risks are being

managed effectively and report any areas of concern, e.g. where risk tolerance is exceeded, lack of timely action.

- 3.6. Receive assurance on the progress of HDdUHB sponsored research studies
- 3.7. Receive assurance on the progress of real-world evaluations of medical devices taking place in the HDdUHB
- 3.8. Receive and comment on financial, performance management and data reports from the Research and Innovation Operational Team.
- 3.9. Oversee the development of the Health Board's Research & Innovation Strategy.
- 3.10. Oversee the development and approval of research and innovation written control documents (policies, plans, Standard Operating Procedures, etc) within the scope of the Sub-Committee, obtaining ratification as and where appropriate.
- 3.11. Consider the implications for the Health Board of the outcomes arising from relevant review, audit or inspection carried out by external regulatory authorities, review progress with resulting Corrective and Preventative Action plans (CAPAs) and authorising their completion.
- 3.12. Ensure strong relationships and effective communication with associated Higher Education Institutions and other external organisations
- 3.13. Support Universities with their research & innovation agenda, including undergraduate /postgraduate work, research impact, and their Research Excellence Framework submission.
- 3.14. Ensure the HDdUHB maintains its University status by monitoring and driving improvement in those metrics associated with University status against which it will be judged by Welsh Government:
 - University Links
 - Health Education and Training Contribution
 - Contribution to Quality Care
 - Contribution to Health Research
 - Contribution to other Health Related activities
- 3.15. Report on research and innovation activity to relevant health community committees and the Health Board via the Director of Research, Innovation and Value, or a nominated deputy.
- 3.16. Agree issues to be escalated to the PODCC, with recommendations for action.

4. Membership

4.1 The membership of the Research & Innovation Sub-Committee shall comprise:

Title
Medical Director & Deputy Chief Executive (Chair)
Director Research, Innovation & Value (Vice Chair)
Independent Member
Clinical Director Research & Development
Head of Research & Development
Head of TriTech & Innovation
Research & Innovation Finance Business Partner
Research active representatives – acute sector, primary care, mental health
Head of Data Science
Assistant Director of People Development
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 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 a 3 rd Sector Organisation
Head of Research, Innovation & Improvement, Regional Partnership Board

4.2 The membership of the Sub-Committee will be reviewed on an annual basis.

5. Quorum and Attendance

- 5.1 A quorum shall consist of no less than a third of the membership and must include as a minimum the Chair or Vice Chair of the Sub-Committee and a research active clinician.
- 5.2 An Independent Member shall attend the meeting in a scrutiny capacity.
- 5.3 Any senior officer of the HDdUHB or a partner organisation may, where appropriate, be invited to attend, for either all or part of a meeting, to assist with discussions on a particular matter.
- 5.4 The Sub-Committee may also co-opt additional independent external 'experts' from outside the organisation to provide specialist skills.
- 5.5 Should any member be unavailable to attend, they may nominate a fully briefed deputy to attend in their place, subject to the agreement of the Chair.
- 5.6 The Chair of the Research & Innovation Sub-Committee shall have reasonable access to Executive Directors and other relevant senior staff.

- 5.7 The Sub-Committee may ask any or all of those who normally attend but who are not members to withdraw to facilitate open and frank discussion of particular matters.

6. Agenda and Papers

- 6.1 The Sub-Committee Secretary is to hold an agenda setting meeting with the Chair and the Sub-Committee Lead at least **six** weeks before the meeting date.
- 6.2 The agenda will be based around the Sub-Committee work plan, identified risks matters arising from previous meetings, issues emerging throughout the year and requests from Sub-Committee Members. Following approval, the agenda and timetable for papers will be circulated to all Sub-Committee Members.
- 6.3 All papers must be approved by the Director of Research, Innovation and Value.
- 6.4 The agenda and papers for meetings will be distributed **seven** days in advance of the meeting.
- 6.5 The minutes and action log will be circulated to members within **ten** days to check the accuracy.
- 6.6 Members must forward amendments to the Sub-Committee Secretary within the next **seven** days. The Sub-Committee Secretary will then forward the final version to the Sub-Committee Chair for approval.

7 Frequency of Meetings

- 7.1 The Sub-Committee will meet quarterly and shall agree an annual schedule of meetings. Additional meetings will be arranged as determined by the Chair of the Sub-Committee in discussion with the Director of Research, Innovation and University Partnerships.
- 7.2 The Chair of the Sub-Committee, in discussion with the Sub-Committee Secretary, shall determine the time and the place of meetings of the Sub-Committee and procedures of such meetings.

8. Accountability, Responsibility and Authority

- 8.1 The Sub-Committee will be accountable to the People, Organisational Development and Culture Committee for its performance in exercising the functions set out in these terms of reference.
- 8.2 The Sub-Committee shall embed the HDdUHB's vision, corporate standards, priorities and requirements, e.g. equality and human rights, through the conduct of its business.
- 8.3 The requirements for the conduct of business as set out in the HDdUHB's Standing Orders are equally applicable to the operation of the Sub-Committee.

9. Reporting

- 9.1 The Sub-Committee, through its Chair and Members, shall work closely with the Board's other committees, including joint /sub committees and groups to provide advice and assurance to the Board through the:
- 9.1.1 Joint planning and co-ordination of Board and Committee business;
 - 9.1.2 Sharing of information.
- 9.2 In doing so, the Sub-Committee shall contribute to the integration of good governance across the organisation, ensuring that all sources of assurance are incorporated into the Board's overall risk and assurance framework.
- 9.3 The Sub-Committee may establish groups or task and finish groups to carry out on its behalf specific aspects of Sub-Committee business. The Sub-Committee will receive updates following each meeting, detailing the business undertaken on its behalf. The following management groups have been or will be established:
- Research Quality and Sponsorship Group
 - TriTech and Innovation Management Group
- 9.4 The Sub-Committee Chair, supported by the Sub-Committee Secretary, shall:
- 9.4.1 Report formally, regularly and on a timely basis to the People, Organisational Development and Culture Committee on the Sub-Committee's activities. This includes the submission of a Sub-Committee update report for information after every meeting, as well as the presentation of an Annual Report within 6 weeks of the end of the financial year;
 - 9.4.2 Bring to the People, Organisational Development and Culture Committee's specific attention any significant matters under consideration by the Sub-Committee;
 - 9.4.3 Ensure appropriate escalation arrangements are in place to alert the UHB Chair, Chief Executive, or Chair of other relevant Committees, of any urgent/critical matters that may compromise patient care and affect the operation and/or reputation of the UHB.

10. Secretarial Support

- 10.1 The Sub-Committee Secretary shall be determined by the Director of Research, Innovation and Value.

11. Review Date

- 11.1 These terms of reference shall be reviewed on at least an annual basis by the Sub-Committee for approval by the People, Organisational Development and Culture Committee.