

Enw'r Pwyllgor: Name of Sub-Committee:	Exception Report from Research & Development Sub-Committee
Cadeirydd y Pwyllgor: Chair of Sub-Committee:	Dr Philip Kloer, Medical Director and Deputy CEO
Cyfnod Adrodd: Reporting Period:	9 th November 2020
Materion Ansawdd, Diogelwch a Phrofiad: Quality, Safety & Experience Matters:	
<p>The Research & Development Sub-Committee (RDSC) met on 9th November 2020. This paper is a summary of the key points against the agenda items.</p> <p>1. Bringing Research to Life The Sub-Committee received a presentation from a Consultant Ophthalmologist on the research being undertaking during her NHS Research Time Award. The presentation highlighted multiple collaborations between Universities and other Ophthalmic centres, both in the UK and abroad, with a focus on research that makes a direct difference to patients and improves services. Members acknowledged the importance of including reports of research at Sub-Committee meetings, which demonstrates the impact of research.</p> <p>2. R&D Operational Team Performance The Sub-Committee received a report on R&D operations across the University Health Board (UHB), with the following noted:</p> <ul style="list-style-type: none"> • The increase in the number of positive COVID-19 patients in the hospitals has had an impact on the ability of delivery staff to keep a variety of studies open alongside the urgent Public Health COVID-19 studies. • Space has been allocated for the research facility in Glangwili General Hospital (GGH). Plans have been prepared, however, the project is expensive and there are limits on how R&D funding can be utilised. The Director of Finance is aware and will provide support where necessary. It is anticipated that the work will be commissioned before the next RDSC meeting in January 2021. • The Grants team have submitted applications for grants totalling over £3 million, with the outcome of these applications awaited. <p>3. Research Quality Management Group Report The Sub-Committee received a report from the Research Quality Management Group (RQMG), with the following noted:</p> <ul style="list-style-type: none"> • Plans are in place to develop a Quality Assurance (QA) metrics dashboard, for presentation to the next RDSC meeting in January 2021. This will provide assurance that our research is being closely monitored and is conducted in line with recognised quality standards. <p>4. Financial Report The Sub-Committee received the financial report with the following noted:</p> <ul style="list-style-type: none"> • Spending Plans have all been requested. No investigator accounts are at risk of being overdrawn. 	

- Confirmation that R&D is on track to break even for 2020/21 with no risk to the Health Board.

5. Progress on Standard Operating Procedures

The Sub-Committee noted that 60% of the Standard Operating Procedures have now been completed, and received assurance that these will be complete by the end of 2020. The Sub-Committee recognised that this has been an enormous piece of work and the QA team were commended for their progress.

6. R&D Strategy

Work is progressing to develop a new 3-5 year R&D Strategy, with the key issues discussed including:

- The need to increase and diversify the R&D financial allocation focussing on areas to target for growth.
- The development of Clinical Engineering and Innovation Research.
- Collaborations with three University and the two neighbouring Health Boards.
- The growth plan in Primary Care, which requires careful thought to avoid being overly ambitious, requiring more staff and facilities to progress.
- The need for the new hospital to be considered.
- The need to consult Welsh Government and Health and Care Research Wales (HCRW) to ensure the Strategy is following the same trends.

Given the significance of this Strategy for RDSC, it was agreed that the draft document be appended to the RDSC Exception Report to QSEAC, in order to raise awareness of the work of the RDSC and also provide QSEAC with an opportunity to provide feedback, whilst the strategy is still in the development stage. (attached at Appendix 1)

7. University Partners

The Sub-Committee received an update from the University of Wales Trinity St David.

Risgiau:

Risks (include Reference to Risk Register reference):

There are nine active risks for R&D on the Risk Register, with the Sub-Committee receiving assurance on the management of these risks.

Gwella Ansawdd:

Quality Improvement:

No Quality Improvement items were presented for discussion.

Argymhelliad:

Recommendation:

QSEAC is asked to note the content of the Exception Report from the Research & Development Sub-Committee.

Dyddiad y Cyfarfod Pwyllgor Nesaf:

Date of Next Sub-Committee Meeting:

Monday 11th January 2021 14:00-16:30

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**PWYLLGOR ANSAWDD, DIOGELWCH A SICRHAU PROFIOD
RESEARCH AND DEVELOPMENT SUB COMMITTEE**

DYDDIAD Y CYFARFOD: DATE OF MEETING:	09 November 2020
TEITL YR ADRODDIAD: TITLE OF REPORT:	Research, Development, and Innovation Strategy Development
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Dr Phil Kloer, Medical Director and Director of Clinical Strategy
SWYDDOG ADRODD: REPORTING OFFICER:	Dr Leighton Phillips, Deputy Director, Research and Innovation

Pwrpas yr Adroddiad (dewiswch fel yn addas)

Purpose of the Report (select as appropriate)

Er Sicrwydd/For Assurance

**ADRODDIAD SCAA
SBAR REPORT**

Sefyllfa / Situation

Progress update on the development of a new Research, Development, and Innovation (R,D&I) Strategy and proposals for strategic and subordinate goals.

Cefndir / Background

On the 14 September, R&D Sub Committee received a proposal for development a new R,D&I Strategy, including several assumptions that would guide its development and the process that the Research and Development (R&D) Department would go through.

Some of the most significant feedback points from Committee members during that discussion, included:

- the importance of identifying a limited number of high impact goals;
- keeping the strategy concise but acknowledging that there might be a more detailed companion document;
- ensuring that knowledge mobilisation forms an integral part;
- carefully considering our delivery capacity and alongside this determining how ambitious we want to be, as an organisation with comparatively less capacity for research; and
- the scope to increase income generation and create a virtuous cycle, with income being reinvested to improve research capacity.

The R&D Department has spent the past six weeks advancing the strategy development process against the high level plan included at Annex A, which will respond to the feedback points of R&DSC members. This report highlights progress and asks R&DSC members to consider the plans for the next period, including the anticipated structure and content of the forthcoming strategy.

Asesiad / Assessment

Progress in developing the strategy over the last period has included:

- a review of the strategic goals and plans of other organisations to identify good practice;
- the six teams that form the R&D Department conducting a SWOT analysis and a subsequent review of the findings utilising analytical software. The review of the findings is now being validated through development sessions with each of the teams, with a focus on identifying action to address key themes and the development of strategic goals;
- the development of a strategic goals map, including subordinate goals and the identification of actions to achieve those goals, with an aligned measurement framework. A draft map, including outline headings for the strategy is included at Annex B;
- starting a mapping of research, innovation, and improvement assets with the regional hub, to identify partnership opportunities; and
- preparing a business case for a new clinical engineering research and innovation team, capable of undertaking new technology and device research; and
- agreeing to align the strategy as the delivery mechanism for the new corporate medium term planning goal, which commits to:

“Develop and implement a 3 year strategic plan to increase research, development, and innovation activity, and number of research investigators sufficient as a minimum to deliver the Welsh Government and Health and Care Research Wales expectations and improvement targets (see specific requirement 3.G.i). The plan will be developed in partnership with universities, life science companies, and public service partners, so as to maximise the development of new technologies and services that improve patient care and health outcomes. While making further progress in established areas including respiratory, oncology, and diabetes studies, the portfolio will target and expand into areas of organisational clinical and academic strength, including ophthalmology, orthopaedics, anaesthetics, and mental health. A function spanning clinical engineering, research and innovation will also target a threefold increase in technology trials.”

Plans between now and the next R&DSC include:

- concluding the development sessions with each team within the R&D Department;
- carrying out an all staff questionnaire, to identify perceptions of the R&D Department, research interests, and areas for development;
- holding planning discussions with neighbouring health boards to identify areas of common interest and for development over the lifetime of the strategy;
- holding planning discussions with university partners to identify areas of common interest and for development over the lifetime of the strategy;
- advancing meetings with Health and Care Research Wales to better understand forthcoming strategy, financial regime, and performance targets;
- concluding a mapping of regional research, innovation and improvement assets with the regional hub and the identification of a small number of high impact priorities;
- holding an R&D Department virtual ‘away half day’ to conclude the strategy development process;
- writing the strategy and related operationalisation and measurement frameworks; and
- preparing for the detailed review of the strategy by appropriate health board governance arrangements.

Argymhelliad / Recommendation

R&DSC are asked to take assurance from the activities underway to develop the new Research, Development, and Innovation Strategy, agree the high level strategic goals, and endorse the work plan for the next two months.

Amcanion: (rhaid cwblhau)

Objectives: (must be completed)

Committee ToR Reference: Cyfeirnod Cylch Gorchwyl y Pwyllgor:	Research and Development Sub-Committee Terms of Reference. V0.9 August 2020.
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):	3.3 Quality Improvement, Research and Innovation Choose an item. Choose an item. Choose an item.
Nodau Gwella Ansawdd: Quality Improvement Goal(s):	All Quality Improvement Goals Apply Choose an item. Choose an item. Choose an item.
Amcanion Strategol y BIP: UHB Strategic Objectives:	4. Improve the productivity and quality of our services using the principles of prudent health care and the opportunities to innovate and work with partners. Choose an item. Choose an item. Choose an item.
Amcanion Llesiant BIP: UHB Well-being Objectives: Hyperlink to HDdUHB Well-being Objectives Annual Report 2018-2019	9. All HDdUHB Well-being Objectives apply

Gwybodaeth Ychwanegol:

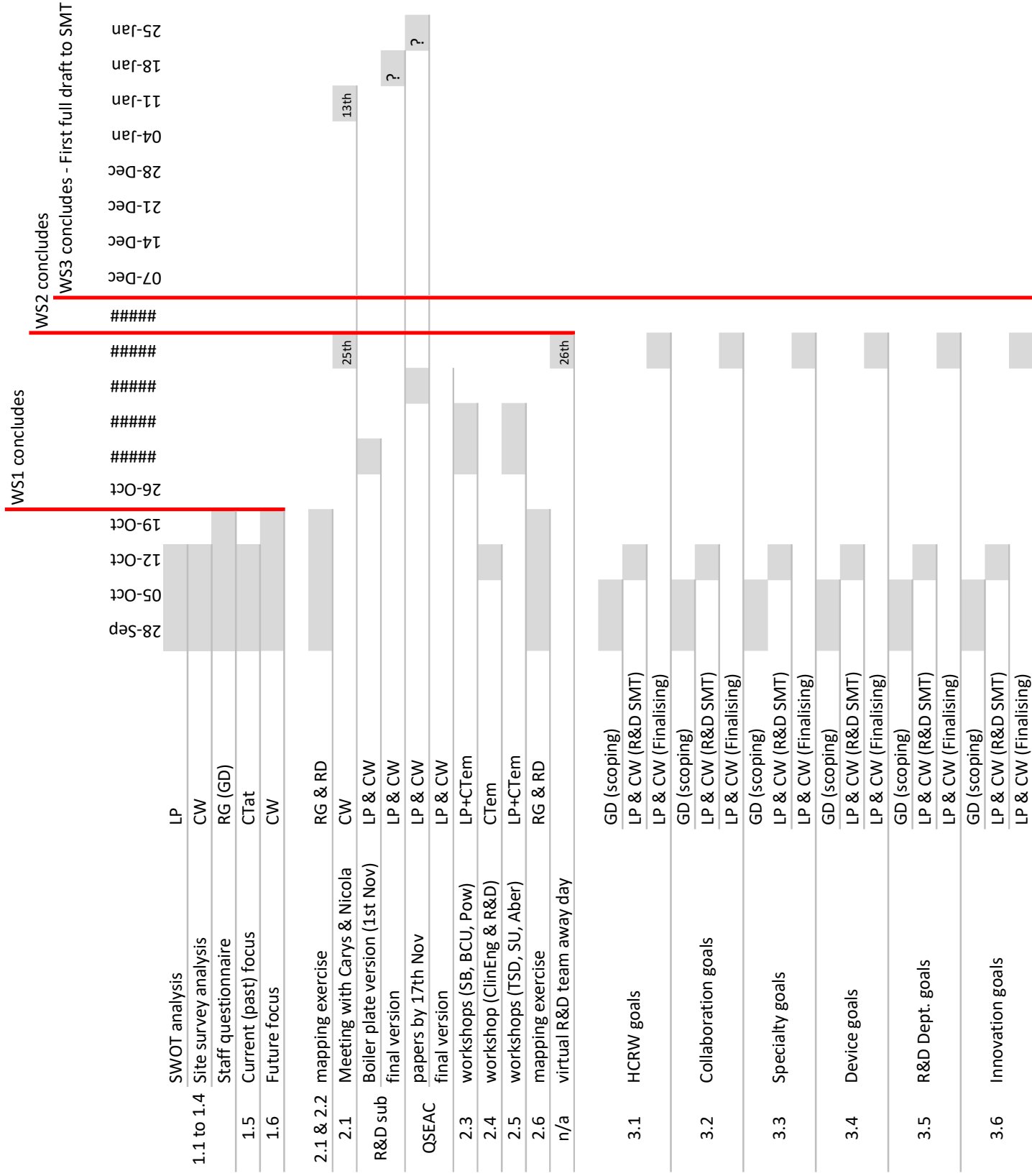
Further Information:

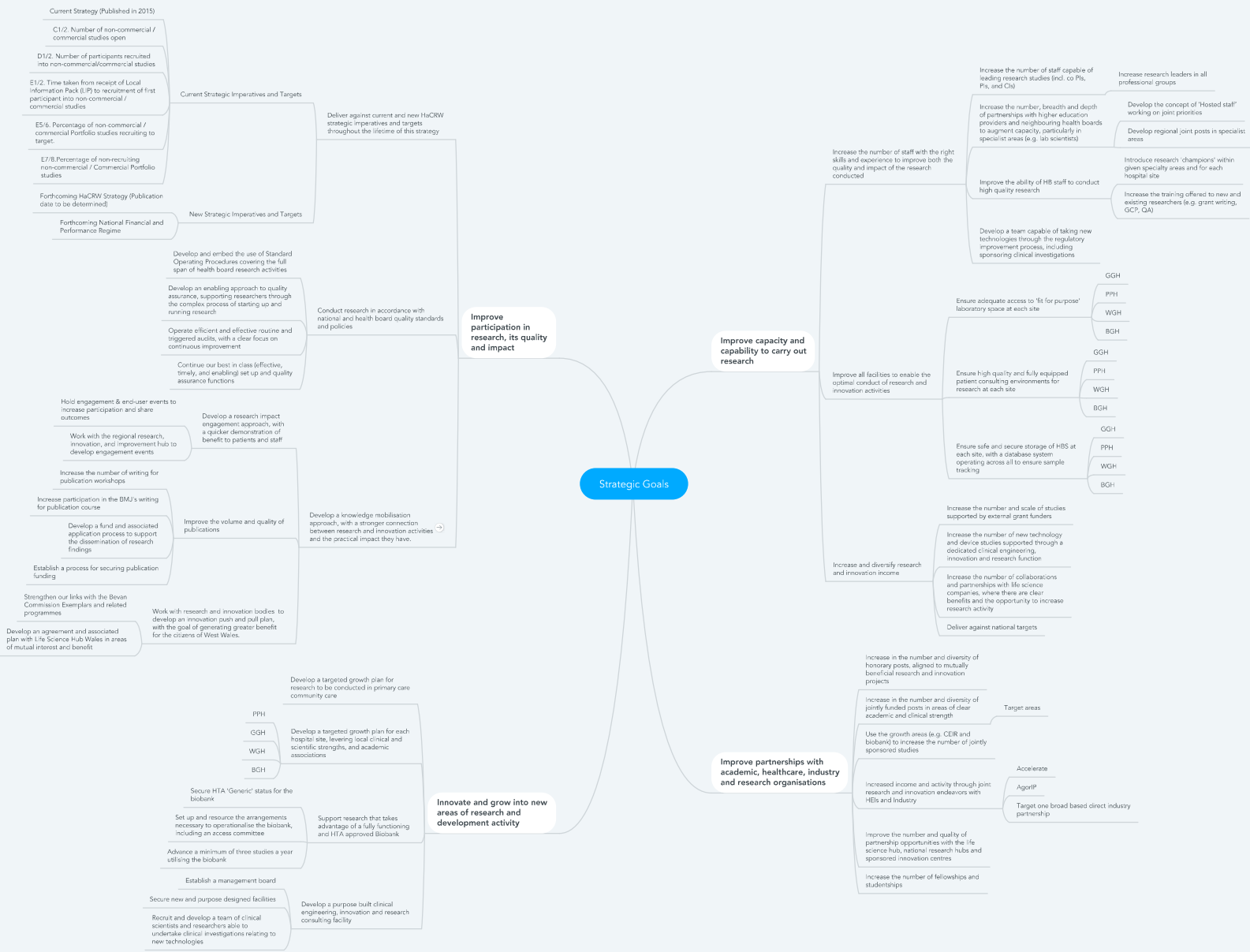
Ar sail tystiolaeth: Evidence Base:	Agendas, papers and minutes of the Research and Development Sub-Committee meeting on 14 September 2020.
Rhestr Termiau: Glossary of Terms:	Included within the body of the report.
Partion / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Ansawdd, Diogelwch a Sicrhau Profiod:	Research and Development Sub-Committee Chair, Vice-Chair and Members. Research Quality Management Group Chair.

Parties / Committees consulted prior to Research and Development Sub Committee:	
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Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian: Financial / Service:	No financial impact or capital requirements:
Ansawdd / Gofal Claf: Quality / Patient Care:	No adverse quality and/or patient care outcomes/impacts A Research Quality Management System including R&D Policies, Procedures, Checklists, Guidelines, Templates and Forms and a routine Research Governance audit programme, has been under development since May 2017 when a dedicated Research Quality Assurance post was introduced. This has improved the quality of research undertaken and upholds the safety, dignity, rights and wellbeing of patients and other research participants.
Gweithlu: Workforce:	No adverse existing or future staffing impacts.
Risg: Risk:	No risks identified. A sound system of internal control, as evidenced in the Research and Development Sub-Committee's Annual Report, ensures that any risks to the achievement of the Health Board's objectives are identified, assessed and managed. SBAR template in use for all relevant papers and reports.
Cyfreithiol: Legal:	No known reason for legal challenge.
Enw Da: Reputational:	No known likelihood for adverse political or media interest or public opposition.
Gyfrinachedd: Privacy:	No known impact on privacy

Cydraddoldeb: Equality:	<p>Equality Impact Assessment (EqIA) documentation – follow link below</p> <ul style="list-style-type: none"> • Has EqIA screening been undertaken? Yes/No – There is no reason to undertake at this point. The report is a simple progress update against a strategy development process. (if yes, please supply copy, if no please state reason) • Has a full EqIA been undertaken? Yes/No (if yes please supply copy, if no please state reason) <p>http://howis.wales.nhs.uk/sitesplus/862/opensdoc/453906</p>
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Strategic Goals

1. Improve capacity and capability to carry out research

- 1.1. Increase the number of staff with the right skills and experience to improve both the quality and impact of the research conducted
 - 1.1.1. Increase the number of staff capable of leading research studies (incl. co PIs, PIs, and CIs)
 - 1.1.1.1. Increase research leaders in all professional groups
 - 1.1.2. Increase the number, breadth and depth of partnerships with higher education providers and neighbouring health boards to augment capacity, particularly in specialist areas (e.g. lab scientists)
 - 1.1.2.1. Develop the concept of 'Hosted staff' working on joint priorities
 - 1.1.2.2. Develop regional joint posts in specialist areas
 - 1.1.3. Improve the ability of HB staff to conduct high quality research
 - 1.1.3.1. Introduce research 'champions' within given specialty areas and for each hospital site
 - 1.1.3.2. Increase the training offered to new and existing researchers (e.g. grant writing, GCP, QA)
 - 1.1.4. Develop a team capable of taking new technologies through the regulatory improvement process, including sponsoring clinical investigations
- 1.2. Improve all facilities to enable the optimal conduct of research and innovation activities
 - 1.2.1. Ensure adequate access to 'fit for purpose' laboratory space at each site
 - 1.2.1.1. GGH
 - 1.2.1.2. PPH
 - 1.2.1.3. WGH
 - 1.2.1.4. BGH
 - 1.2.2. Ensure high quality and fully equipped patient consulting environments for research at each site
 - 1.2.2.1. GGH
 - 1.2.2.2. PPH
 - 1.2.2.3. WGH
 - 1.2.2.4. BGH
 - 1.2.3. Ensure safe and secure storage of HBS at each site, with a database system operating across all to ensure sample tracking
 - 1.2.3.1. GGH
 - 1.2.3.2. PPH
 - 1.2.3.3. WGH
 - 1.2.3.4. BGH
- 1.3. Increase and diversify research and innovation income
 - 1.3.1. Increase the number and scale of studies supported by external grant funders
 - 1.3.2. Increase the number of new technology and device studies supported through a dedicated clinical engineering, innovation and research function
 - 1.3.3. Increase the number of collaborations and partnerships with life science companies, where there are clear benefits and the opportunity to increase research activity
 - 1.3.4. Deliver against national targets

2. Improve partnerships with academic, healthcare, industry and research organisations

- 2.1. Increase in the number and diversity of honorary posts, aligned to mutually beneficial research and innovation projects
- 2.2. Increase in the number and diversity of jointly funded posts in areas of clear academic and clinical strength
 - 2.2.1. Target areas
- 2.3. Use the growth areas (e.g. CEIR and biobank) to increase the number of jointly sponsored studies
- 2.4. Increased income and activity through joint research and innovation endeavors with HEIs and Industry
 - 2.4.1. Accelerate
 - 2.4.2. AgorIP
 - 2.4.3. Target one broad based direct industry partnership
- 2.5. Improve the number and quality of partnership opportunities with the life science hub, national research hubs and sponsored innovation centres
- 2.6. Increase the number of fellowships and studentships

3. Innovate and grow into new areas of research and development activity

- 3.1. Develop a targeted growth plan for research to be conducted in primary care community care

3.2. Develop a targeted growth plan for each hospital site, leveraging local clinical and scientific strengths, and academic associations

3.2.1. PPH

3.2.2. GGH

3.2.3. WGH

3.2.4. BGH

3.3. Support research that takes advantage of a fully functioning and HTA approved Biobank

3.3.1. Secure HTA 'Generic' status for the biobank

3.3.2. Set up and resource the arrangements necessary to operationalise the biobank, including an access committee

3.3.3. Advance a minimum of three studies a year utilising the biobank

3.4. Develop a purpose built clinical engineering, innovation and research consulting facility

3.4.1. Establish a management board

3.4.2. Secure new and purpose designed facilities

3.4.3. Recruit and develop a team of clinical scientists and researchers able to undertake clinical investigations relating to new technologies

4. Improve participation in research, its quality and impact

4.1. Deliver against current and new HaCRW strategic imperatives and targets throughout the lifetime of this strategy

4.1.1. Current Strategic Imperatives and Targets

4.1.1.1. Current Strategy (Published in 2015)

4.1.1.2. C1/2. Number of non-commercial / commercial studies open

4.1.1.3. D1/2. Number of participants recruited into non-commercial/commercial studies

4.1.1.4. E1/2. Time taken from receipt of Local Information Pack (LIP) to recruitment of first participant into non-commercial / commercial studies

4.1.1.5. E5/6. Percentage of non-commercial / commercial Portfolio studies recruiting to target.

4.1.1.6. E7/8. Percentage of non-recruiting non-commercial / Commercial Portfolio studies

4.1.2. New Strategic Imperatives and Targets

4.1.2.1. Forthcoming HaCRW Strategy (Publication date to be determined)

4.1.2.2. Forthcoming National Financial and Performance Regime

4.2. Conduct research in accordance with national and health board quality standards and policies

4.2.1. Develop and embed the use of Standard Operating Procedures covering the full span of health board research activities

4.2.2. Develop an enabling approach to quality assurance, supporting researchers through the complex process of starting up and running research

4.2.3. Operate efficient and effective routine and triggered audits, with a clear focus on continuous improvement

4.2.4. Continue our best in class (effective, timely, and enabling) set up and quality assurance functions

4.3. Develop a knowledge mobilisation approach, with a stronger connection between research and innovation activities and the practical impact they have.

Link: <https://www.mindmeister.com/1648954065?t=XHoQpyajW7#>

4.3.1. Develop a research impact engagement approach, with a quicker demonstration of benefit to patients and staff

4.3.1.1. Hold engagement & end-user events to increase participation and share outcomes

4.3.1.2. Work with the regional research, innovation, and improvement hub to develop engagement events

4.3.2. Improve the volume and quality of publications

4.3.2.1. Increase the number of writing for publication workshops

4.3.2.2. Increase participation in the BMJ's writing for publication course

4.3.2.3. Develop a fund and associated application process to support the dissemination of research findings

4.3.2.4. Establish a process for securing publication funding

4.3.3. Work with research and innovation bodies to develop an innovation push and pull plan, with the goal of generating greater benefit for the citizens of West Wales.

4.3.3.1. Strengthen our links with the Bevan Commission Exemplars and related programmes

4.3.3.2. Develop an agreement and associated plan with Life Science Hub Wales in areas of mutual interest and benefit