

# Research, Development & Innovation Sub-Committee (RD&I)

## Terms of Reference & Operating Arrangements

Reviewed:	November 2020
Approved:	November 2020
Next Review Due:	October 2021

## 1. INTRODUCTION

- 1.1 Within 3.1.1 of the Trust's standing orders it provides that *"The Board may and, where directed by the Welsh Ministers must, appoint Committees of the Trust either to undertake specific functions on the Board's behalf or to provide advice and assurance to the Board in the exercise of its functions. The Board's commitment to openness and transparency in the conduct of all its business extends equally to the work carried out on its behalf by Committees"*.
- 1.2 The Quality, Safety & Performance Committee, Strategic Development Committee and Charitable Funds Committee have been established by the Board to assist in discharging its functions and meeting its responsibilities with regards to the quality, safety and performance of healthcare, strategic and organisational development and to make and monitor arrangements for the control and management of the Trust's charitable funds.
- 1.3 As part of the aforementioned Committee functions, the Research, Development & Innovation (RD&I) Sub-Committee has been established to act as the "front door" for all RD&I business at Board level and will perform the following functions on their behalf:
- monitor the performance and delivery of RD&I on behalf of the Quality, Safety & Performance Committee;
  - develop the RD&I Strategy on behalf of the Strategic Development Committee; and
  - review and approve business cases for alignment with strategy and funding on behalf of the Charitable Funds Committee.
- 1.4 Innovation and Research are defined as follows:
- **Innovation** - *is the exploration of emerging technologies and / or processes that positively impact healthcare by improving the care experience, individual and population health, and reducing costs.*
  - **Research** - *is designed and conducted to generate new knowledge.*

## 2. PURPOSE

- 2.1 The purpose of the RD&I Sub-Committee is to provide:
- Strategy and policy oversight for Research, Development & Innovation activities at the Trust and for any Strategy that requires Board approval this to then be taken to the Trust Strategic Development Committee.
  - Receive assurance on the monitoring of performance – [through Quality lens]
  - [Exception reporting] and as defined by the Quality, Safety and Performance Committee, elements of this performance monitoring assurance may need to also be taken there – according to performance, quality, assurance frameworks and exception reporting criteria for that Committee.
  - Promotion and encouragement of a Research & Innovation ethos and culture which is integral to the Trusts vision, mission and values.

- Assurance to the Board in relation to the Trust's arrangements for ensuring compliance with the UK Policy Frameworks for Health & Social Care Research as amended from time to time.
- Consideration of relevant matters with reference to the parameters identified for risk appetite in relation to research, development and innovation as set by the Board.

### **3. DELEGATED POWERS AND AUTHORITY**

With regards to its role in providing advice to the Board, the Committee will fulfil the following functions:

#### **3.1 Strategy & Policy Development**

- Promote and encourage a Research & Innovation ethos and culture within the Trust.
- Oversee the development of all Research & Innovation strategies and implementation plans ensuring the conduct of good quality projects within the Trust's portfolio of Innovation and Research activity.
- Consider the strategic implications for the Trust from the findings arising from national developments, review, audit and/or inspection, and monitor the successful implementation of any actions required resulting from these findings.
- Matters of Strategic development for the assurance and approval of the Trust Board to be escalated to the Trust Strategic Development Committee and, as appropriate, on to Trust Board.

#### **3.2 Strategy & Policy Approval**

- Approve policies relevant to the business of the Committee as delegated by the Board.
- Scrutinise Research and Innovation Business cases which exceed the delegated limits of the Chief Executive to consider prior to formal Trust Board approval.

#### **3.3 Monitoring and Review**

- The Sub-Committee will, in respect of its assurance role, seek assurance that research governance and innovation arrangements are appropriately designed, implemented and are operating appropriately to ensure the provision of a high quality Innovation and Research service.
- To achieve this, the Sub-Committee will need assurance that the following aspects of Research & Innovation development are being effectively managed.
- The safety, rights, dignity and wellbeing of participants in Innovation and Research development projects is above all other considerations.
- There is clear, consistent strategic direction, strong leadership and transparent lines of accountability

- The diversity of the organisation’s patients, service users, donors and staff is valued and that their active participation in the development, undertaking and use of Innovation and Research is promoted.
- There is close collaboration with partner Organisations in higher education to improve quality, promote joint working and avoid unnecessary duplication of functions. In this respect, the work of RD&I Sub-Committee will be reflected in the agenda and priorities of the Trust’s Academic Partnership Board.
- The organisation ensures compliance with appropriate legislation and regulation such as the, UK Policy Framework for Health and Social Care Research 2017 the EU Clinical Trials Directive 2004 as amended, Good Laboratory Practice, Good Manufacturing Practice in manufacturing products for clinical trials and Good Clinical Practice in the conduct of all clinical Innovation and Research activities as appropriate.
- Systems are in place to monitor compliance with standards and to investigate complaints and deal with irregular or inappropriate behaviour in the conduct of Innovation and Research activity.
- Research, and Innovation expenditure is accounted for and complies with audit requirements and requirements of external funders or sponsors as appropriate.
- The Committee will scrutinise research and/or innovation proposals and/or business cases that are seeking charitable funding PRIOR to submission to the Charitable Funds Committee, in order to provide assurance on the quality and safety of RD&I related activity.
- When research or innovation findings have commercial potential the Trust takes action to protect and exploit them in collaboration with its Innovation and Research partners and where appropriate commercial Organisations.

### 3.4 Access

The Chair of the Research, Development & Innovation Sub-Committee shall have reasonable access to Executive Directors and other relevant senior staff.

## 4. MEMBERSHIP

### Members

4.1 A minimum of two (2) members to include:

Chair                      Independent member of the Board (Non-Executive Director) or delegated Independent Board member

One Independent Member of the Board (Non-Executive Director)

### Attendees

4.2 In attendance

- Executive Director with responsibility for RD&I currently Medical Director
- Executive Director of Finance or nominated officer with RD&I funding responsibilities

- Associate Medical Director with responsibility for R&D
- Clinical Director (or Nominated Deputy) – Velindre Cancer Centre
- Executive Director of Nursing AHP and Health Sciences
- Director of Corporate Governance
- Head of RD&I Strategy
- Representative - Velindre Cancer Centre Strategic Management Team
- Representative – Welsh Blood Service Strategic Management Team
- WBS RD&I Lead
- Trust Head of Research & Development
- Service User/Lay representatives
- Staff Side Representative

#### 4.3 **By invitation**

The Sub-Committee Chair may extend invitations as required to the following:

- Information Governance Manager (in advisory capacity)
- Divisional Directors
- Representatives of stakeholder organisations

As well as others from within or outside the organisation who the Sub-Committee consider should attend, taking account of the matters under consideration of each meeting.

#### **Secretariat**

4.4 As determined by the Director of Corporate Governance.

#### **Member Appointments**

4.5 Members shall be appointed for a maximum of 3 consecutive years before formally reviewing their role on the Committee. During this time a member may resign or be removed by the Board.

#### **Support to Committee Members**

4.6 The Director of Corporate Governance on behalf of the Committee Chair shall:

- Arrange the provision of advice and support to Committee members on any aspect related to the conduct of their role: and
- Ensure the provision of a programme of Organisational development for Committee members as part of the Trust's overall OD programme developed by the Director of Workforce and Organisational Development.

## **5. SUB-COMMITTEE MEETINGS**

#### **Quorum**

5.1 At least two members must be present to ensure the quorum of the Committee, one of whom should be the Committee Chair. If the Chair is not present an agreement as to who will Chair form the Independent Members in their absence.

## **Frequency of Meetings**

5.2 Meetings shall be held no less than four times a year and otherwise as the Chair of the Committee deems necessary – consistent with the Trust’s annual plan of Board Business.

## **Withdrawal of individuals in attendance**

5.3 The 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. RELATIONSHIPS & ACCOUNTABILITIES WITH THE BOARD AND ITS COMMITTEES/GROUPS**

6.1 Although the Board has delegated authority to the Sub-Committee for the exercise of certain functions as set out within these terms of reference, it retains overall responsibility and accountability for the safety, security and use of information to support the quality and safety of healthcare for its citizens through the effective governance of the Organisation.

6.2 The Sub-Committee is directly accountable to the Quality, Safety and Performance Committee, Strategic Development Committee and Charitable Funds Committee for its performance in exercising the functions set out in these terms of

6.3 The Sub-Committee shall embed the Trust’s corporate objectives, priorities, and requirements, e.g., equality and human rights through the conduct of its business.

## **7. REPORTING AND ASSURANCE ARRANGEMENTS**

7.1 The Committee Chair shall:

- Report formally, to the:
  - i. Quality, Safety & Performance Committee on the performance and delivery of RD&I;
  - ii. Strategic Development Committee Board on strategic development and updates to the RD&I Strategy; and
  - iii. Charitable Funds Committee to recommend for approval business cases aligned with the RD&I Strategy and Trust’s overarching strategic objectives.

7.2 The Director of Corporate Governance, on behalf of the Board, shall oversee a process of regular and rigorous self assessment and evaluation of the Committee’s performance and operation including that of any Sub Committees established.

## **8. APPLICABILITY OF STANDING ORDERS TO COMMITTEE BUSINESS**

8.1 The requirements for the conduct of business as set out in the Trust’s Standing Orders are equally applicable to the operation of the Sub-Committee.

## **9. REVIEW**

9.1 These terms of reference and operating arrangements shall be reviewed annually by the Sub-Committee with reference to the Board.

## **10. CHAIR'S ACTION ON URGENT MATTERS**

- 10.1 There may, occasionally, be circumstances where decisions which normally be made by the Sub-Committee need to be taken between scheduled meetings. In these circumstances, the Sub-Committee Chair, supported by the Director of Corporate Governance as appropriate, may deal with the matter on behalf of the Board, after first consulting with two other Members of the Sub-Committee. The Director of Corporate Governance must ensure that any such action is formally recorded and reported to the next meeting of the Sub-Committee for consideration and ratification.
- ↑10.2 Chair's urgent action may not be taken where the Chair has a personal or business interest in the urgent matter requiring decision.