

Terms of Reference

Metro South Health Research Council

These terms of reference set out the authorisation, purpose, functions, guiding principles, membership and reporting arrangements of the Metro South Health (MSH) Research Council. These terms of reference should be read in conjunction with the overarching MSH Common Arrangements for Tier 3 to 7 Committees document.

1. AUTHORISATION

The MSH Research Council (the Council) functions under the authority and delegations of the MSH Executive Strategic Governance Committee (ESGC), to which it reports, providing advice and recommendations.

In accordance with the *Hospital and Health Boards Act 2011* (Qld) and as authorised by the Metro South Hospital and Health Service Board and the Health Service Chief Executive (HSCE), all decisions made within MSH must be made by a person with the delegated authority to do so (i.e. the MSH Executive responsible for Metro South Research). Registers of human resource, financial, contract and other delegations are published on QHEPS.

The role of the Council, as with all Committees within MSH, is advisory only. For the avoidance of doubt, the MSH Research Council is not authorised to make decisions. The Council should therefore be asked to note, discuss and/or endorse items.

2. PURPOSE

The purpose of the Council is to provide strategic advice and make recommendations to the HSCE or delegate that will enable and facilitate the achievement of MSH's Vision in relation to research.

These terms of reference establish the Council's purpose, scope and functions, key performance indicators, guiding principles, membership, reporting and administrative arrangements.

3. FUNCTIONS AND RESPONSIBILITIES

The functions of the Council set out below are a non-exhaustive description of how the Council will give effect to its purpose and should inform the Council's standing agenda items.

As the strategic advisory and oversight body in relation to research, MSH Research Council:

- Demonstrates leadership in the maintenance, development and promotion of research excellence across MSH.
- Provides strategic advice and make recommendations to the HSCE or delegate to enable and facilitate the achievement of MSH's Vision in relation to research across all MSH facilities and services.
- Identifies and prioritises MSH's research goals and strategies.
- Identifies strategies and initiatives with the aim to develop and foster a progressive approach to integrate research within clinical services across MSH.
- Provides advice on the appropriate use of research funding to develop and sustain research.
- Provides guidance to the MSH Research Grants Committee on the alignment of MSH-funded research grant schemes with MSH strategy.

- Oversees the development and implementation of strategies that place research as an integral part of health care planning and delivery including oversight of development of research strategic planning.
- Influences and informs MSH Executive in relation to opportunities, issues and risks that are relevant to research.
- Oversees the development, review and maintenance of MSH policies, procedures, work instructions and guidelines in accordance with relevant legislation and standards.
- Identifies relevant legislation, laws, regulations, guidelines and codes of practice, and develops or endorses processes to implement and monitor compliance with these standards, which may include:
 - Australian Code for the Responsible Conduct of Research (2007) (Updated 2018) ('the Code')
 - National Statement on Ethical Conduct in Human Research (2023)
 - Ethical conduct in research with Aboriginal and Torres Strait Islander Peoples and communities: Guidelines for researchers and stakeholders (2018)
 - Keeping research on track: A guide for Aboriginal and Torres Strait Islander peoples about health research ethics (2018)
 - Queensland Health: Research Ethics and Governance Health Service Directive (QH-HSD-035:2022) (REG HSD)
 - National Safety and Quality Health Service Standards 2nd Edition ACSQHC 2017 (Cth) including the National Clinical Trials Governance Framework
 - Australian Clinical Trial Handbook 2018
 - Guidance for Good Clinical Practice (ICH-GCP)
 - Standard Protocol Items: Recommendations for Interventional Trials (SPIRIT)
 - Consolidated Standards of Reporting Trials (CONSORT)
 - *Human Rights Act 2019* (Qld) and
 - MSH Research Policy Framework.
- Oversees the implementation of the National Clinical Trials Governance Framework and monitoring of related performance measures, operational metrics and additional metrics across all MSH facilities and services.
- In consideration of reports and metrics, uses available data to promote research excellence and identify unwarranted variation in research service provision (including clinical trials), providing advice to assist facilities and services to improve research services and appropriately address variation, where required.
- Oversees the development and implementation of research education and development strategies that builds research capability and capacity in MSH.
- Facilitates an environment that enables the translation of research findings into practice, policy or further research.
- Ensures research is embedded with MSH clinical and corporate governance arrangements.
- Endorsing Committee/Authority for any research related procedures, work instructions and guidelines.

4. GUIDING PRINCIPLES

The Council will be guided by the strategic priorities of MSH. In performing its functions, the Committee must recognise and adhere to the principles set out in Section 13 of the *Hospital and Health Boards Act 2011* (Qld), Section 25 of the *Public Service Act 2008* (Qld), and Section 61 of the *Financial Accountability Act 2009* (Qld).

Members of, and attendees at the committee, and the Committee must conduct themselves in accordance with the MSH I CARE² Values:

- Integrity
- Compassion
- Accountability
- Respect
- Engagement
- Excellence

5. RISK MANAGEMENT

The role of this Council is to:

- Pro-actively identify and manage risks and opportunities within its scope including for all recommendations.
- Develop and review controls and treatments where appropriate.
- Take such action as is appropriate to receive assurance that risk is being managed if relevant.

6. REPORTING

This MSH Research Council is a Tier 3 Committee.

The Council receives regular reports from:

- Facility/Service Research Committees as established by MSH Directorates:
 - Facility/Service Research Committee Minutes.
- MSH Research Grants Committee:
 - Report on research grants awarded, completed and grant outcomes.

The standing reports provided to the Council are those specified within **Attachment 1** – Standing Reports.

The Council provides regular reports to the MSH ESGC and to MSH Directorate Executive Directors. Key reports provided to the ESGC will include those relating to:

- MSH Research Council Minutes
- National Clinical Trial Governance Framework activities, performance measures, operational metrics and additional metrics.

Authority and accountability

The Executive Director, Metro South Research reports to the Chief, People, Engagement and Research Officer and – with appropriate consultation – makes Health Service-wide decisions which effect research activities and partnerships throughout MSH. The Executive Director, Metro South Research may escalate research-related issues to the Chief, People, Engagement and Research Officer if/when required.

Whilst the Council is an advisory body and holds no formal delegations The MSH Research Council will be directly accountable to and escalate research-related issues and risks to the Chief, People, Engagement and Research Officer. Recommendations from the Council will be made on the basis of majority consensus of the MSH Research Council membership.

MSH Research Council has authority to endorse the Terms of Reference and membership of:

- MSH Directorate Research Committees, which function to oversee the operational research support.
- MSH Research Grants Committee, which oversees the administration of peer-review grant support.

Escalation Process

A dispute resulting from a recommendation, action item or matter will be escalated to the Executive Director, Metro South Research or the Chief, People, Engagement and Research Officer for resolution.

Performance measures

- MSH can demonstrate maintenance or development of research capacity, quality and productivity.
- MSH Strategic Plan and Research Strategy:
 - documents MSH research goals and strategies;
 - is approved by the authorised delegate; and
 - is reviewed regularly, accessible and updated as required.
- MSH Executive is well-informed by Council, about research opportunities, issues and risks.
- MSH can demonstrate congruence between clinical, corporate and research governance.
- MSH can demonstrate compliance with legislation, standards and guidelines relevant to research (e.g. NCTGF).
- MSH Research Council, Research Committees, and Research Grants Committee Terms of Reference are updated every three (3) years and are accessible.

7. MEMBERSHIP

Chair:

- Nominated/delegated by the MSH Executive responsible for Metro South Research.

Deputy Chair:

- Nominated/delegated by the Chair from within the Council membership.

If the designated Chair and Deputy Chair are unavailable, an Acting Chair may be nominated by the Chair, or by a majority of the members.

Members:

- Chief, People Engagement and Research, MSH
- Executive Director, Metro South Research, MSH
- Addiction and Mental Health Services Representative x1
 - Nominated by the Executive Director, Addiction and Mental Health Services, MSH
- Community and Oral Health Services Representative x1
 - Nominated by the Executive Director, Community and Oral Health, MSH
- Logan and Beaudesert Hospitals Representative x1
 - Nominated by the Executive Director, Logan and Beaudesert Health Service, MSH
- Princess Alexandra Hospital Representative x1
 - Nominated by Executive Director, Princess Alexandra Hospital, MSH
- QEII Jubilee Hospital Representative x1
 - Nominated by the Executive Director, QEII Jubilee Hospital, MSH
- Redland and Wynnum Hospitals Representative x1
 - Nominated by the Executive Director, Bayside Health Service, MSH
- Allied Health Services Professional Stream Representative x1
 - Nominated by the Executive Director, Allied Health Services, MSH
- Nursing and Midwifery Services Professional Stream Representative x1

- Nominated by the Executive Director, Nursing and Midwifery, MSH
- Medical Services Professional Stream Representative x1
 - Nominated by the Executive Director, Medical Services, MSH
- Aboriginal and Torres Strait Islander Health Directorate Representative x1
 - Nominated by the Director, Aboriginal and Torres Strait Islander Health
- Clinical Governance Directorate representative
 - Nominated by the Executive Director, Clinical Governance, Legal and Risk
- Digital Health and Informatics Representative x1
 - Nominated by the Executive Director, Digital Health and Chief Information Officer, MSH
- Finance Representative x1
 - Nominated by Chief Finance Officer, MSH
- Human Research Ethics Committee Chair or Deputy Chair, MSH
 - Nominated by the Executive Director, Research, MSH
- Senior Research Representative/s
 - Nominated by the Chair, in consultation with membership
 - Up to one (1) nominated by the Executive Director, Princess Alexandra Hospital, MSH
- Clinical Trial Representative/s
 - Nominated by the Chair, in consultation with membership
 - Up to one (1) nominated by the Executive Director, Princess Alexandra Hospital, MSH
- Consumer partner representative/s
 - Nominated by the Chair, in consultation with the MSH Consumer Partnering Team
- Co-opted Member/s
 - Appointed by the Chair in consultation with membership.

Please note: It is intended that members of MSH Research Council would not concurrently be members on the MSH Study Education and Research Trust Account (SERTA) Committee, nor the MSH Research Grants Committee. In the event that concurrent membership of any two groups is considered, advice must be sought from the MSH Research Support Scheme Probity Advisor.

Invited Guests (Non-Voting):

- Translational Research Institute
- PA Research Foundation
- Health Translation Queensland
- The University of Queensland
- Queensland University of Technology
- Griffith University

Subject Matter Experts:

- External person(s) with industry or biotechnology expertise

Proxy/Observers:

- Proxies and/or observers are permitted

Member Responsibilities

Members undertake to:

- escalate research strategic priorities or emerging issues to the Council via submission of a briefing paper to the Chair;
- complete pre-reading of meeting documents and agenda items prior to the meeting;
- communicate key matters within their service/facility/division/organisation;
- use best endeavours to attend all meetings and ensure they, or a suitably informed delegate/proxy attend a minimum of 80% of scheduled meetings; and
- declare actual, potential or perceived conflicts of interest in accordance with MSH policies and procedures.

8. FREQUENCY

Council meetings will be scheduled to meet five (5) times per year on alternate months and/or as required. Additional meetings may be called at times deemed necessary by the Chair and/or the Chief, People, Engagement and Research Officer.

The MSH Research Council and MSH Research Partners Forum shall be scheduled at times deemed necessary by the Chair and/or the Chief, People, Engagement and Research Officer.

An annual calendar of meeting dates will be published as an addendum to the terms of reference. Cancellation and re-scheduling of meetings will be at the discretion of the Chair.

Meeting Processes

Proxy Attendance

Members of the Council shall nominate a proxy to attend a meeting if the member is unable to attend and there is no other delegate attending from the same service/division. Proxies should be suitably briefed prior to the meeting.

The Chair will be informed of the substitution at least two (2) working days prior to the scheduled nominated meeting. The nominated proxy shall have voting rights at the attended meeting.

The nominated proxy shall provide relevant comments/feedback, of the Council member they are representing to the attended meeting.

Quorum

A quorum will consist of 50% of members plus one (1) in attendance (simple majority). The meeting will be cancelled if quorum is not achieved.

Out-of-session Resolutions

Should resolution on an issue of significance be required between scheduled meetings, members will be contacted requesting an indication of their position. The Chair may only formulate a recommendation if a minimum of 50% plus one (1) member respond in writing (simple majority). The outcome of the resolution reached will be documented and included in meeting documents at the next scheduled meeting.

Conflicts of Interest

From time-to-time members, who are involved in the Council, may experience a conflict of interest that is directly or indirectly related to their personal, private, organisational (eg University) and/or professional associations.

Actual, potential or perceived conflicts of interest must be declared to the Chair, or in the event the Chair experiences a conflict of interest the Chief, People, Engagement and Research Officer. All declared conflicts of interest will be documented

by the Secretariat. Where a conflict has been disclosed which may impact on a matter being discussed, the Chair will determine if a discussion may proceed and/or if the member with the conflict must abstain from the process.

To remove any doubt, Council member responsibilities in the context of this Council, are to MSH and to serve the community benefit. All conflicts of interest must be resolved in accordance with MSH policy and procedures and in the public interest.

9. SECRETARIAT

The Executive Support Officer, Metro South Research ('the Secretariat') will provide secretariat support to the Council, including the preparation of meeting papers and administrative support.

The Secretariat will prepare and maintain a corporate file of the Council's records:

- An agenda will be prepared by the secretariat and provided to the membership prior to each meeting.
- Standing agenda items will be determined by the Chair in consultation with the membership.

The secretariat will provide minutes of each meeting via email distribution.

Minutes will be provided to MSH Executive Correspondence Unit for inclusion on MSH Executive meetings, subject to consideration by the Chair of that meeting.


10. TERMS OF REFERENCE REVISION HISTORY

Version	Date	Comment	Author	Reviewed by
3.0	19/06/2020	Endorsed and published	Metro South Research	Dr Brian Bell A/Executive Director, PAH
4.0	31/08/2022	Endorsed	Metro South Research	Professor John Upham Executive Director, Metro South Research
5.0	07/12/2023	Endorsed – ESGC 9/11/2023	Metro South Research	Professor John Upham Executive Director, Metro South Research

These terms of reference will be reviewed each year in accordance with the Committee Annual Workplan or earlier if considered necessary by the Chair and/or the HSCE.

11. APPROVAL

The Terms of Reference will be reviewed by the Committee every three (3) years or earlier if considered necessary by the Chair and/or the HSCE.

Signature  Date 07/12/2023

Professor John Upham
Executive Director, Metro South Research

Any amendments to these terms of reference require the endorsement of the Council and approval of the Chair.

This attachment sets out the standing reports provided to the Council.

The Chair of the Council, with the endorsement of the Council, has the authority to make changes to this attachment independent of revision approvals to the core terms of reference i.e. amendments/additions within this attachment can be made without formal written approval from the HSCE.

Report	Description	Reporting Body/Officer	Frequency
MSH Directorate: Facility/Service Research Committees	Minutes	MSH Directorate Executive Directors	Following each convened meeting

Standing Reports last updated: December 2023

This attachment sets out the annual work plan of the Council.

The Chair of the Council, with the endorsement of the Council, has the authority to make changes to this attachment independent of revision approvals to the core terms of reference i.e. amendments/additions within this attachment can be made without formal written approval from the HSCE.

Deliverable	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Committee performance evaluation (+ 12 months from establishment)	X											
Review of Terms of Reference (+ 12 months from establishment and every 3 years thereafter)	X											
Review of Work Plan (+ 12 months from establishment)	X											

Work Plan last updated: December 2023

Integrity	Compassion	Accountability	Respect	Engagement	Excellence
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