

TERMS OF REFERENCE

NSLHD Board Research Innovation and Technology Committee (RIT)

1. TITLE

NSLHD Board Research, Innovation and Technology Committee (RIT)

2. PURPOSE

The Northern Sydney Local Health District (NSLHD) Board is committed to ensuring the delivery of clinical care is underpinned, informed and/ or supported by high impact, world leading research, innovation and technology that benefits our patients, their families and carers and our community.

The NSLHD Board Research, Innovation and Technology Committee (RIT) is established to provide assurance to the Board that research, innovation and technology is appropriately governed and supported such that it complements clinical care. The RIT will engage and coordinate with the NSLHD Chair of Research and with NSLHD's university and other research partners to drive the delivery of the NSLHD Research Strategy.

3. RESPONSIBILITIES

The RIT achieves its primary objectives by:

- advising and reporting to the Board regarding strategies, priorities, actions and risks associated with research, innovation and technology;
- identifying opportunities to improve the use, performance and delivery of, research, innovation and technology;
- supporting leadership and strategic direction for research, innovation and technology that promotes a culture of continuous learning and evidence based clinical care;
- recommending policy and system changes to sustain or enhance research, innovation and technology in health care;
- promoting and supporting the NSLHD Innovation Program;
- promoting a robust, inclusive research culture at NSLHD which celebrates diversity and champions sustainable research careers, particularly for early to mid-career researchers;
- promoting education and training of the NSLHD workforce in relation to research, innovation and technology;
- promoting and celebrating NSLHD research initiatives, projects and/or achievements and promoting NSLHD as a teaching and learning organisation;
- partnering with the Board Consumer Committee to support and realise a shared vision for patient safety, outcomes and experience and clinical quality across the District;
- Ensuring that any technological innovation complies with relevant policies, procedures, legislation and regulations particularly in the areas of governance, program management,

quality assurance, information security, cyber security, procurement and vendor management.

- monitoring and providing direction in relation to organisational alignment with key organisational statements, including the NSLHD Research Strategy, and the strategic and clinical services plans;
- overseeing and monitoring organisational progress and achievement of the National Safety and Quality Health Service Standards (Clinical Trials); and
- monitoring performance, including Ministry of Health Key Performance Indicators, affecting research, innovation and technology.

4. GOVERNANCE

The RITC reports to the NSLHD Board.

The Executive Director Office of the Chief Executive NSLHD is the Executive Sponsor with delegated responsibility from the Chief Executive NSLHD for the effective functioning of the RIT.

5. MEMBERSHIP

- A Committee Chair who shall be a Member of the Board appointed as such by the Board
- Up to five other Members of the Board
- Chief Executive NSLHD
- Executive Director Office of the Chief Executive NSLHD (Executive Sponsor)
- Executive Director Medical Services NSLHD or delegate
- Executive Director Nursing and Midwifery NSLHD
- Director Allied Health NSLHD
- Director Aboriginal and Torres Strait Islander Health Service NSLHD or delegate
- Chief Digital Health Officer NSLHD
- Manager Research Strategy and Partnerships NSLHD
- Chair of Research NSLHD
- Kolling Institute Academic Director
- Chief Executive Officer NORTH Foundation
- Consumer Advisor
- Executive Director Finance and Corporate Services NSLHD
- Director Performance, Analytics and Business Intelligence NSLHD
- Research Ethics and Governance Manager NSLHD
- NSLHD Human Research Ethics Committee (HREC) Chair
- Executive Director Media and Communications

At the discretion of the Committee Chair additional members and observers can be invited to attend.

6. CHAIR

NSLHD Board Member (Appointed by the NSLHD Board Chair)

7. EXECUTIVE SPONSOR

Executive Director Office of the Chief Executive NSLHD

8. COMMITTEE SECRETARIAT

Board Secretariat NSLHD

9. FREQUENCY OF MEETINGS

Minimum of 6 meetings each calendar year (bimonthly).

A meeting schedule will be published and communicated to the membership on an annual basis by the Secretariat.

The Committee Chair or the Chief Executive may convene ad hoc and out-of-session meetings should this be considered necessary.

10. QUORUM

Quorum will be 50% + 1 of agreed membership, but must include at least one Board Member.

11. MEETING PAPERS

The Committee Chair shall approve the agenda prior to the meeting. Members of the RIT will receive the agenda, meeting papers including the minutes from the previous meeting, prior to the next meeting.

Minutes will be taken for each meeting. The Committee Chair shall sign the minutes at the following meeting following their endorsement at the meeting.

12. REPORTING

Following each meeting the Committee Chair will develop, with the Executive Sponsor, a written report for the Board's information containing key issues, achievements or risks identified by the RIT.

Minutes to be shared with the Board, the NSLHD Health Care Quality Committee, the NSLHD Board Consumer Committee, the NSLHD Clinical and Quality Council and the NSLHD Digital Health Steering Committee.

13. REPORTING COMMITTEES

TBC

14. METHOD OF EVALUATION

The Committee will review the Terms of Reference at least annually and complete an annual evaluation.