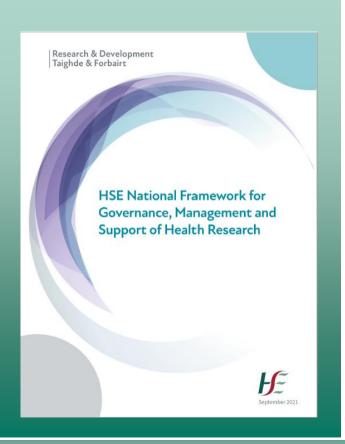
Implementation of the HSE National Framework for the Governance, Management and Support of Research

# Roadmap for the reform of the HSE Research Ethics Committees

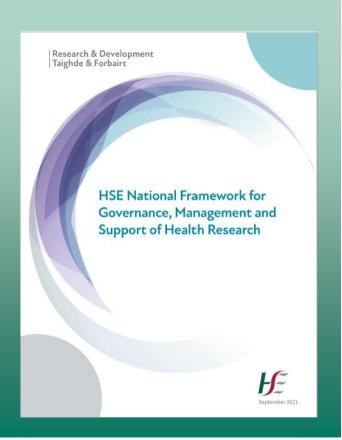
Dr. Ana Terrés, Head of Research and Evidence

3 November 2021



# The HSE framework for the Governance, Management and Support of Research

- Principles for the governance and management of health research in the HSE
- Roles and responsibilities
- Structures to put it into practice
- Processes to support staff



# RGMS Framework Implementation- national requirements:

- 1. Reform of the HSE Research Ethics Committee System
- 2. Establish RGMS functions at local level
- 3. Roll out a national electronic research management system
- 4. Establish the National RGMS oversight committee
- 5. Develop relevant policies and standard codes of practice.

# Research Ethics Committees in HSE and HSE funded services The current landscape

- 2021: Transition of authority from 'recognised RECs' to National Research Ethics Committee (NREC) for approvals of Clinical Trials of Investigational Medicinal products (CTIMPs)
- National Research Ethics Committee commenced operations in May 2021:
  - Clinical Trials of Investigational Medicinal Products (NREC-CT)
  - Clinical Investigations of Medical Devices (NREC-MD)

### The current picture - continuation

- All other studies (not under the NREC remit) are the responsibility of the Research Ethics Committees in HSE and HSE funded services.
  - Approx. 32 RECs
  - Review approx. 2,000 proposals/ year
  - Combination of Regional RECs (CHO and Hospital cover) plus hospital/service based

### Many deficits:

- Large areas of community services have no access to REC
- Covid 19 Pandemic severe pressure on existing RECs Midlands REC stood down
- Differences in approach to reviews and application forms
- Demands placed on RECs due to lack of other research governance/management structures.
- Multiple REC approvals required for studies involving several sites





# 16 Hospital RECs in this region but <u>no coverage</u> for community services

- 1. Cappagh Hospital REC
- 2. Children's Health Ireland
- 3. Connolly Hospital REC
- 4. Coombe Hospital REC
- 5. National Rehabilitation Hospital REC
- 6. Rotunda Hospital REC
- 7. Royal Victoria Eye & Ear REC
- B. St Luke's REC
- 9. Stewards Hospital REC
- 10. St John of God REC
- 11. St Michaels House REC
- 12. Beaumont Hospital REC
- 13. National Maternity Hospital REC
- 14. St James/ Tallaght REC
- 15. St Vincent's REC
- 16. Mater Misericordiae REC



# The REC Reform Working Group

Name	Position	Representing
Dr Ana Terrés (Chair)	HSE Assistant National Director, Head of Research & Evidence	HSE Research and Evidence
Dr Hazel A Smith (Project Manager)	Senior R&D Manager (Research Ethics Governance and Support Services)	HSE Research and Development
Dr Claire Collins	Director of Research & Innovation, Irish College of General Practitioners	Irish College of General Practitioners
Ms Fiona Cregg	Quality and Regulatory Affairs Manager & Data Protection Officer	Health Research Board Clinical Research Co- ordination Ireland
Dr Rachel Crowley	Consultant Endocrinologist and former Chair of SVUH REC	Ireland East Hospital Group Rep
Prof Gerard Curley	Consultant in Anaesthesiology and Critical Care, Head of Department of Anaesthesia, RCSI & Beaumont Hospital	RCSI Hospital Group Rep
Prof Patrick Dillon	Consultant Anaesthesiologist and Chair of HSE Mid-Western Area REC	UL Hospital Group/ HSE Mid-Western Area
Dr Úna Fallon	Public Health Specialist and Chair of HSE Midlands Area REC	HSE Midlands Area REC
Dr Jennifer Ralph James	Head of Office	National Office for Research Ethics Committees
Prof David Kerins	Consultant Cardiologist and Chair of Cork Clinical REC	South/ South West Hospital Group Rep
Ms Caroline Lamb	Research Ethics Committee Coordinator, HSE South East Area REC	HSE South-Eastern Area Rep
Peter Lennon	Research Services and Policy Unit	Department of Health
Prof Gerard Loftus	Emeritus Professor of Paediatrics, NUIG and Chair of Galway Clinical REC	Saolta Hospital Group Rep

# The REC Reform Working Group

Name	Position	Representing
Ms Rosalie Smith-Lynch	Regional Manager Consumer Affairs, HSE Dublin North East, member of HSE North East Area REC	HSE North East Area REC
Dr Barry Lyons	Consultant Paediatric Anaesthesiologist, Chair of Children's Health Ireland at Crumlin REC and lecturer in Medical Ethics at Trinity College Dublin	Children's Health Ireland Rep
Kara Madden	Patient and Public Involvement Advisory	HSE Research and Development Patient and Public Involvement Reference Group
Dr Gemma Moore	Qualitative Evaluation and Research Officer	HSE National Quality Improvement Team
Máiréad Murray	Senior R&D Manager, Research & Development	HSE Research and Development
Prof Brendan McClean	Director of Physics at Saint Lukes Radiation Oncology Network	Midlands Hospital Group Rep
Lynne McGlynn	Research Ethics Officer, Beaumont REC	Beaumont Hospital REC
Dr Declan O'Hanlon	General Manager Research and Development, HSE	HSE Research and Development
Dr Sadhbh O'Neill	Co-ordinator of TUH/SJH Joint Research Ethics Committee	Midlands Hospital Group Rep
Ciara O Reilly	Patient and Public Involvement Advisory	HSE Research and Development Patient and Public Involvement Reference Group
Dr. Lucia Prihodova	Programme Manager	National Office for Research Ethics Committees
Dr Jean Saunders	Director CSCS & CSTAR@UL and Deputy Chair of HSE Mid-Western Area REC	UL/ HSE Mid-Western Area Rep
Ms Aileen Sheehy	Programme Manager	National Office for Research Ethics Committees

# **Objectives of the HSE REC Reform**

- Equity of access to ethical review for research: full coverage including all S38, S39 and HSE community services.
- o Effective and efficient system:
  - > Enable single REC review for multi-site studies.
  - > Enable standardised approach to the review process
  - ➤ Integrated with other research ethics committees —cohesive approach to a national mix model of RECs.

# **Objectives of the HSE REC Reform**

- REC review processes integrated with overall processes for research governance.
- o **Increase capacity** to ensure all projects involving patients, service users, their data or samples are reviewed by a HSE REC.
- Increase consistency and quality of research ethics review processes for the RECs.
- A sustainable REC system, built on existing structures, that is appropriately valued, respected and supported.



# The REC Reform Roadmap: a Phased Approach

# **HSE REC Reform -PHASE 1**

- Establishment of six HSE Reference
   RECs aligned to each of Regional Health Areas.
- Reference RECs will be formed building on existing RECs where possible, by modifying and putting in place structures to support them.
- Reference RECs will cover all HSE organisations and all S38 and S39 which do not currently have access to a REC.





### What is a HSE Reference REC?

- O HSE Reference RECs are RECs that:
  - poperate to the same standard Code of Practice, Management and Governance —currently being developed
  - Are supported by the National HSE REC Coordination and Support office (currently being established)
  - report to a National Committee for the Governance,
     Management, and Support of Research (to be operational in early 2022) REC appointing authority.

# **HSE REC Standard Code of Practice – a summary**

- Explains the remit of the HSE Reference RECs vs the National Research Ethics
   Committees, hospital based RECs and academic RECs
- Governance and Management of HSE Reference RECs
- Membership and Recruitment of Members for HSE Reference RECs
- Financial considerations for HSE Reference RECs
- Integration of the HSE REC review with Research Governance, Management and Support Functions.
- Activities that REC review
- Standard Operating Procedures for HSE Reference REC



# **HSE RRECs Support and Coordination Office**

- The office is currently being established as part of National HSE R&D
- Office will be responsible for implementing the REC reform according to the Roadmap.
- Will support HSE RRECs with recruitment, training of members and with implementation of all relevant operational protocols.
- The SCO will develop a quality assurance program to ensure RREC compliance with the standard code of practice.
- Provide supports to REC for the implementation and use of the Electronic Research Management System.

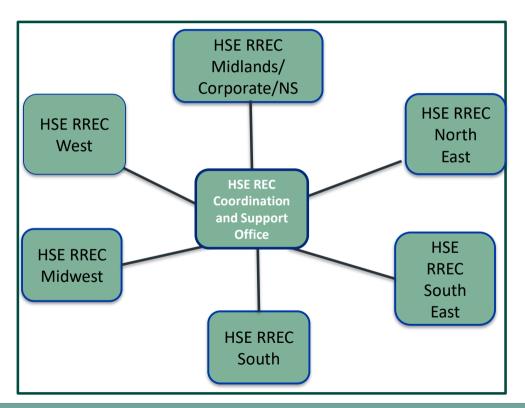


# HSE National RGMS Oversight Committee as the HSE RREC Appointing Authority

- Responsible for the ensuring the implementation of the RGMS framework delivers a cohesive national research governance system.
- With respect to RECs:
  - RREC oversight but no role in ethical decision making
  - Nomination/suspension of HSE Reference RECs
  - Reviewing annual reports
  - Ensuring sustainability
  - Ensuring compliance with HSE RREC standard code of practice
  - Driving integration with other health RECs and cohesion with NREC
  - Transparency about HSE RREC activity with the public



# **REC Appointing Authority**



# HSE REC Reform -PHASE 2 - 3

- Establish agreed ways of working with other RECs to enable single approval for multisite studies by engagement with other RECs:
  - > S38 Hospitals
  - > HSE Hospitals
  - > Private Hospitals
  - > Universities
- Simplification of the dual approach to Academic/HSE REC approval by engagement with academic partners.



Sláinte**Care.**Right Care. Right Place. Right Time

Map of six new Regional Health Areas

# The REC Reform Roadmap for each regional health area

#### Proposed new RHA A with its hospitals



# \* Hospitals in RHA A currently covered by HSE North East REC

- Cavan General Hospital
- Monaghan Hospital
- Connolly Hospital
- Louth County Hospital, Dundalk
- Our Ladies Hospital, Navan
- Our Ladies of Lourdes Hospital,

#### .

Hospitals in RHA A with own REC®

Beaumont Hospital

Cappagh Hospital

The Rotunda

Mater Hospital

#### **Proposed Reference REC for RHA A:**

HSE Reference REC for North East Area

- RHA A covers all of CHO 9, parts of CHO 8
   and 1 and relevant hospitals \*
- There are 11 hospitals in this area and it involves 2 HGs (IEHG and RCSI)

HSE North East Area REC already exist – New RREC will expand cover to include CHO 9 (currently has no REC cover).

#### Proposed new RHA **B** with its hospitals



# \* HSE Hospitals in RHA

- MRH Mullingar
- MRH Portlaoise
- MRH Tullamore
- Naas General Hospital

# Hospitals in RHA B with own REC

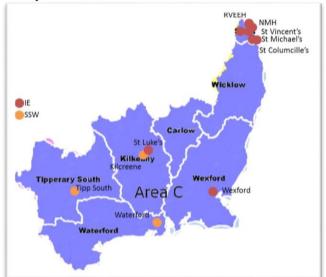
- The Coombe
- Tallaght Hospital
- · St James's Hospital
- · St Luke's Hospital

#### **Proposed Reference REC for RHA B:**

#### HSE RREC for Midlands/Corporate/NS

- RHA B covers all of CHO 7 and parts of CHO 8 and hospitals \*
- There are 9 hospitals in this area (2 x model
   4) and it involves 2 HGs (IEHG and DMHG)
- HSE Midlands REC existed before Covid 19
   New RREC will be re-established and will expand cover to include CHO7 (currently has no REC cover).

#### Proposed new RHA **C** with its hospitals



#### \* HSE Hospitals in RHA C

- Lourdes Orthopaedic Hospital, Kilcreene
- St Colmcilles Hospital
- St Lukes, Kilkenny
- South Tipperary Hospital
- Waterford UH
- Wexford General Hospital

#### Hospitals in RHA B with own REC

- · National Maternity Hospital
- · Royal Victoris E&E
- St Vincents UH
- · St Michaels Hospital, Dun Laoghraie

#### **Proposed Reference REC for RHA C:**

HSE Reference REC for South East Area

- RHA C covers all of CHO 5 and CHO 6 and relevant hospitals\*
- There are 10 hospitals in this area and it involves 2 HGs (IEHG and SSWHG)
- HSE South East REC currently exist –
   New RREC will be expand cover to include CHO6 (currently has no REC cover).

### Proposed new RHA D with its hospitals



#### \* HSE Hospitals in RHA D

- Bantry General Hospital
- CUF
- CUMI
- Mallow General Hospital
- UH Kerry

- Mercy UH
- · South Infirmary Victoria UH

No Hospital based RECs in this area.

### **Proposed Reference REC for RHA D:**

**HSE Reference REC for South Area** 

- RHA D covers all of CHO 4 and hospitals \*
- There are 7 hospitals in this area and it involves 1 HG (SSWHG).
- Current REC for this area is the Clinical Research Ethics Committee of the Cork Teaching Hospitals (Academic REC)
- Only change is HSE RREC to (formally) include research in CHO 4. Need agreement with UCC.



### Proposed new RHA E with its hospitals



#### **HSE Hospitals in RHA E**

- Croom Hospital
- Ennis Hospital;
- Nenagh Hospital
- University Hospital Limerick
- University Maternity Hospital Limerick
- · St Johns Hospital, Limerick

No Hospital based RECs in this area.

#### **Proposed Reference REC for RHA E:**

HSE Reference REC for the Midwestern Area

- RHA E covers all of CHO 3 and hospitals in the region.
- There are 6 hospitals in this area (1 x model 4) and it involves 1 HG (ULHG)
- This area is currently served by the HSE Midwest REC and the area of coverage for the HSE RREC for Midwestern Area would be the same.



#### Proposed new RHA F with its hospitals



#### \* HSE Hospitals in RHA F

- Galway UH
- Letterkenny UH
- Mayo UH
- Portiuncula UH
- Roscommon UH
- Sligo UH

Hospitals in RHA B with own REC (all HSE)

#### **Proposed Reference REC for RHA F:**

#### **HSE Reference REC for West Area**

- RHA F covers all of CHO 2 and part of CHO 1 and relevant hospitals \*
- There are 6 hospitals in this area and it involves 1 HG (Saolta)
- Various possible models for this area:
  - 1 HSE RREC + single hospitals RECs
  - Hub (GUH REC) Spoke model
  - RECs merge into a single REC



# **HSE REC Reform -PHASE 4-5**

# Long term possibilities still to be scoped properly

- Mutual recognition between HSE RRECs and Hospital based RECs – possible or merge of HSE RRECs and Hospital based RECs
- Whole system operation as a single national HSE REC





# Proposed timeline for the implementation of the RoadMap

# 2021

- Finalise the Standard Code of Practice, Governance and management for HSE Reference RECs.
- Establishment of the National HSE
   REC Support and Coordination office
- Establishment of the REC Appointing Authority

# 2022-23

- Establishment of six HSE RRECs
   operating to the standard Code of Practice,
   to provide support to HSE services and
   S38 and S39 who do not already have a
   REC
- Establish the protocols with hospital RECs to enable HSE RREC approvals for multisite studies.
- Agreements with private hospitals
- Agreement with Universities for simplification.

