GREATER GLASGOW NHS BOARD

Minutes of a meeting of the Greater Glasgow NHS Board
Ethics Committee held in Board Room 2
Dalian House, 350 St Vincent Street, Glasgow
on Friday 7 June 2002 at 12.30 pm

PRESENT

Professor M Farthing (Chairman)
Dr W G Anderson  Dr M P G Jamieson
Dr H Burns  Dr F Marshall
Dr B N Cowan  Dr I A Wallace

IN ATTENDANCE

Mr J C Hamilton  Head of Board Administration
Ms A Torrie  Local Research Ethics Committee
Administrator, North Glasgow
University Hospitals NHS Trust
Mr W S Marshall  Secretariat Officer

ACTION BY

1. APOLOGY

An apology for absence was intimated on behalf of Councillor J Gray.

2. GOVERNANCE ARRANGEMENTS FOR THE OPERATION OF LOCAL RESEARCH ETHICS COMMITTEES IN GREATER GLASGOW

The Ethics Committee received for consideration copies of a Scottish Executive Health Department document "Governance Arrangements for NHS Research Ethics Committees in Scotland". The Chairman advised that the Committee would have to consider how these new governance arrangements were to be applied to the operation of the eight Local Research Ethics Committees currently working within NHS Greater Glasgow. It was recognised that these new arrangements presented a challenge but also an opportunity to take an innovative look at how Local Research Ethics Committees operated within the Board's area.

(a) Background

The Director of Public Health explained the background to the operation of Local Research Ethics Committees in Greater Glasgow. He pointed out that the proposed new guidance removed any ambiguity that may have existed because of the close historical association of some Local Research Ethics Committees with Trusts and made NHS Boards clearly accountable for all LRECS within their boundaries. The proposals had financial and administrative implications for the way LRECS had traditionally been handled within NHS Greater Glasgow.
Greater Glasgow NHS Board, previously Greater Glasgow Health Board, had organised its LREC processes quite differently from the rest of Scotland. In most other Board areas only one LREC existed and this was directly accountable to its Board which took responsibility for the organisation, budget and administrative support of that LREC.

This had never been the case within Greater Glasgow. Although conscious of the general advice that there should be one LREC per Board, the size of Greater Glasgow and the huge number of applications for ethical approval submitted, it was considered impractical to proceed on this basis. The preferred option locally was to devolve LRECs to the Trusts to organise with the Board contributing a monitoring role.

The Director of Public Health emphasised that this system had worked well. Currently there were eight LRECs operating within NHS Greater Glasgow. It was agreed that this basic structure should remain in place but would obviously require to be adapted in the light of the new governance arrangements and any subsequent guidance received.

(b) Role of Greater Glasgow NHS Board Ethics Committee

It was agreed that the Greater Glasgow NHS Board Ethics Committee was not constituted as a LREC per se in that it would not be considering any protocols but should assume the role of an executive group which would oversee and monitor the work of the various LRECs operating within Greater Glasgow. It was considered that such an arrangement met the criteria laid down in the new governance arrangements since it built on existing mechanisms of monitoring and control previously established. Ms Torrie confirmed that the various LRECs within the city fully supported this process of operation.

The Ethics Committee recognised the need to establish mechanisms for the support and training of LREC members. At present no specific LREC budget existed although monies were filtered in a variety of ways to support current LREC activities. The Director of Public Health undertook to liaise with the Director of Finance regarding the question of more specific funding, although it was recognised that more data was required from the LRECs regarding their income, expenditure, and staffing costs. The Secretary was asked to write to the LRECs for this information. Some discussion followed on the possibility of LRECs charging more for considering proposals in appropriate cases.

(c) Local Research Ethics Committees in Greater Glasgow

There was discussion as to the number of LRECs. It was considered that there may be scope for re-organisation within distinct geographical and disciplinary boundaries. It was agreed that LRECs should be consulted regarding any possible re-organisation of their activities.

The Ethics Committee considered a letter from the Chairman of Greater Glasgow NHS Board regarding the need to ensure harmonisation of procedures across all LRECs in Greater Glasgow. With this in view, consideration was given to a draft model Constitution for the operation of all LRECs across the city. A number of amendments were offered on its content. Dr Jamieson suggested that Members should take more time to peruse this document and let the Secretary know of any further amendments or changes.
(d) Implications of New Governance Arrangements for Greater Glasgow

The Ethics Committee noted that there were a number of key implications arising from the introduction of the new governance arrangements. The main implications were:

- NHS Boards were accountable for the establishment, support, training and monitoring of all LRECs within their boundaries.
- Each NHS Board should identify a named officer (of appropriate seniority) who would take lead responsibility for LRECs on behalf of the Chief Executive who had overall accountability.
- It was the responsibility of the appointing NHS Board to set an annual budget for the adequate support of LRECs for which it was accountable, irrespective of any income received from charges made for ethical review where appropriate to do so.
- NHS Boards must provide adequate administrative support for their local LRECs.
- Appointing NHS Boards should undertake to provide within their LREC budget, resources for training, guidance on which would be issued by the Scottish Executive Health Department.
- NHS Boards would provide facilities for the provision of handling and storing confidential documents.
- NHS Boards were responsible for the appointment of LREC Committee Members. Appointment of these Members should be by open process, compatible with Nolan Standards of Public Accountability. Vacancies should normally be filled following public advertisement in the press and/or by advertisements via local professional and other networks. Those appointed should have received training in ethical review and processes and relevant skills.
- NHS Boards should provide each LREC Member with a personal statement regarding the indemnity provided and its contents.
- NHS Boards should be responsible for ensuring rotation of membership and a balanced age and gender distribution within LRECs.
- The Chairman and Vice Chairman of LRECs should be appointed by the accountable NHS Board.

The Ethics Committee recognised the need to meet the time constraints imposed regarding full compliance with the governance arrangements. Greater Glasgow should aim to be fully conversant by April 2003. Ms Torrie detailed the major issues requiring attention particularly in relation to the future composition of LRECs if full compliance was to be achieved.

A timetable of future actions was required and the Head of Board Administration undertook to initiate this accordingly particularly in regard to the recruitment and appointment of members of the new LRECs to be established.

Head of Board Administration
The Ethics Committee agreed that the transition to full compliance would have to be planned and developmental in approach. The sensitivities of existing LREC Members would be fully considered in the process of re-appointment. It was suggested that the Chairman of Greater Glasgow NHS Board write to existing Lay Members of LRECs to thank them for their contribution to the work of these Committees and to encourage them to re-apply for positions on the new LRECs.

It was hoped that these processes would be completed by September 2002 though the enormity of the task was recognised. The Head of Board Administration would arrange for a summary paper of the Committee's proposals to be circulated initially to Members for comment and then to the LRECs for comment as a first step in this process.

**DECIDED:**

(i) That the decisions made by the NHS Greater Glasgow Board Ethics Committee be summarised and circulated to LRECs in a discussion paper to be prepared by the Head of Board Administration.

(ii) That at the appropriate time the Head of Board Administration undertake the recruitment process for the establishment of new LRECs within Greater Glasgow with a view to being fully compliant with the new governance arrangements by April 2003.

(iii) That the Greater Glasgow NHS Board Ethics Committee meet regularly over the coming months to lead on the development of new arrangements for LRECs commitment with the new governance arrangements.

3. **YORKHILL LREC**

The Ethics Committee considered correspondence received in connection with the functioning of the Yorkhill Local Research Ethics Committee.

It was agreed that professional and lay members of LRECs had equal status and therefore equal voting rights. Where LRECs had difficulties in procedure, it was right that the Greater Glasgow NHS Board Ethics Committee should be asked to attempt resolution. There were a number of avenues open to the Ethics Committee in seeking advice in connection with such issues.

**NOTED**

4. **ETHICS APPROVAL FOR STUDENT SPECIAL STUDY MODULES**

The Ethics Committee received for consideration copies of a letter from Dr Wallace regarding ethics approval for student special study modules.

In connection with this issue, Ms Torrie tabled copies of a recent paper from the Association of Research Ethics Committees which offered interim advice for reviewing student research projects. Dr Wallace thanked Ms Torrie for this document.

**NOTED**
5. DATE OF NEXT MEETING

The next meeting of the Greater Glasgow NHS Board Ethics Committee would be held on Friday 2 August 2002 at 12.30 pm in Board Room 1, Greater Glasgow NHS Board, Dalian House, 350 St Vincent Street, Glasgow.