

## **PCRN Northern & Yorkshire Advisory Board Terms of Reference**

### **1. Background**

- 1.1 The purpose of PCRN N&Y is to enable trials and studies to take place within primary care and to engage with primary health care professionals and the family of NIHR research networks in the region to enable the delivery of NIHR portfolio studies.
- 1.2 The overarching aim is to support the delivery of high quality NIHR portfolio research studies.

### **2. Responsibilities and Activities**

- 2.1 To oversee the activity of the PCRN N&Y Executive and monitor adherence with contractual requirements.
- 2.2 To provide strategic guidance and a point of reference for the PCRN N&Y Executive.

### **3. Structure and Accountability**

- 3.1 The PCRN N&Y Advisory Board acts in an advisory capacity to the PCRN N&Y Executive and as such has no executive powers. However, the Board can request that any concerns or advice that it has regarding PCRN N&Y strategy and policy are brought to the attention of the national Primary Care Research Network.
- 3.2 The Advisory Board will receive reports from the PCRN N&Y Executive.
- 3.3 The Advisory Board will ensure appropriate involvement of patients and carers in the activities of the Network.
- 3.4 The work of the Advisory Board will be included in the Network's Annual Report.
- 3.5 The Terms of Reference of the PCRN N&Y Advisory Board will be reviewed periodically to ensure that it remains fit for purpose and is best configured to discharge its duties.
- 3.6 The membership of the Advisory Board will be reviewed periodically to ensure the membership remains fit for purpose and is best configured to discharge its duties.

3.7 Whilst ultimately accountable to the PCRN CC the overall responsibility for the activity and performance of PCRN N&Y rests with the PCRN N&Y Executive Group supported by advice of the Advisory Board.

#### **4. Membership and Meetings**

- 4.1 The membership of the PCRN N&Y Advisory Board will be drawn from Clinical Directors of the stakeholder organisations. This includes CLRNs, TCRNs, PCTs, SHAs and HEIs.
- 4.2 Named deputies will be permitted by prior agreement.
- 4.3 A quorum will consist of not less than 8 members of the Committee which must include the Chair or Deputy, one PCRN N&Y member (Clinical Lead or Manager), and at least one representative from a PCT and CLRN.
- 4.4 The PCRN N&Y secretary will prepare agendas, keep minutes and deal with any other matters concerning the administration of the Committee. Minutes will be approved by the whole committee. The minutes will be considered as accepted by the members of the Board if within 30 days from receipt no member has objected in writing to the Board Chair.
- 4.5 Items for the agenda will be fed through the PCRN N&Y secretary. It is for the Chairman to decide whether or not the issue shall be included in the Group's business. If an individual resides outwith the Board, the individual raising the matter may be invited to attend.
- 4.6 The Advisory Board will meet 6 monthly. Minutes of the meetings will be sent to directors of stakeholder organisations and other interested individuals, notable, CLRNs, TCRNs, PCTs, SHAs and HEIs.

#### **5. Appointment of Members**

- 5.1 The Advisory Board will be chaired by a Network professional independent of PCRN N&Y.
- 5.2 Appointment of the Board Chair will be by nomination. Multiple nominations will be subject to a committee vote.
- 5.3 In set up, Board members will initially be invited by the PCRN N&Y Clinical Lead.
- 5.4 Subsequent nominations will be made through the Board chair and ratified by the committee members.
- 5.5 The Board chair will serve for a maximum term of 2 years (4 meetings). He/she can seek re-election.

## Membership

The membership will be as follows (some members may have dual representation):

- Chair: (independent)
- PCRN(N&Y) Clinical Lead (deputises for Chair if unavailable)
- PCRN(N&Y) Manager
- CLRN Clinical Directors
- TCRN Clinical Leads
- PCT Medical Directors (Trust Research leads)
- North East SHA
- Yorkshire & The Humber SHA
- Representative from PCRN Coordinating team
- Universities/RDS