Scope:

Accountable Care Organization, Administrative & Business Offices, Ambulatory, Behavioral Health, Breast Health Center, Center for Advanced Medicine B, Center for Advanced Medicine C, Foundation, Healthcare Center, Home Health, Hometown Health, Hospice, Hyperbaric, Laboratory, Medical Group, Monaco Ridge, Pregnancy Center, Regional Medical Center, Rehabilitation Hospital, Skilled Nursing, South Meadows Medical Center, Surgical Arts, Therapies, Urgent Care, Wound Care, X-ray & Imaging

Policy Statement:

Renown Health is a Nevada non-profit corporation with multiple hospitals, institutes and organizations operating under its corporate umbrella. These include:

1. Renown Regional Acute Service;
2. Renown Children's Hospital;
3. Renown Children’s Health Institute;
4. Renown Institute for Cancer;
5. Renown Institute for Heart & Vascular Health;
6. Renown Institute for Neurosciences; and
7. Renown Institute for Health Innovation

The Research Steering Committee (RSC), reporting through the Authorized Institutional Official (as defined below) directly to the CEO of Renown, has overall responsibility for the Renown Health research enterprise including health care education related to research, encompassing all Renown departments, institutes and centers and both natural and biomedical sciences, social sciences and social and community services. The RSC works to foster the continuation of those creative endeavors and to promote an environment that sustains the highest standards of scholarship, health and safety.

The RSC provides executive guidance and oversight for the policies governing the conduct of research at Renown and oversees the management of its research programs by the Renown
Research Office (RO). It also works with both the RO and the individual hospitals, institutes and other affiliated Renown organizations to assist investigators seeking external funding, to promote interdisciplinary research and to make awards of seed money for early-stage investigations.

Renown Health also bears full responsibility for the performance of all research involving human subjects, including complying with federal, state or local laws as they may relate to such research and to that end, Renown has contracted with UNR-HRRP and the UNR-IRB for delegation of oversight of research.

**Purpose:**

The purpose of this policy is to establish the RSC and to set up a mechanism for a collaborative executive management process to guide Renown Health in the performance of research and related educational activities, with appropriate adherence to all applicable regulations. This committee serves to fulfill the requirements of the patient safety role as well as improve quality, minimize risk and improve performance in all research related areas within the organization.

**Definition of Terms:**

1. **Authorized Institutional Official (IO)** is defined in Policy RENOWN.ORE.100.

2. **IRB** refers to any and all of the Institutional Review Boards designated by Renown and serving under the Federal-wide Assurance of Renown Health.

**Procedure:**

1. **Designation.** The CEO shall designate the Authorized Institutional Official (IO) by name and not position. The IO shall act as the Chair of the RSC. The remainder of the RSC shall be comprised of:

   A. The Medical Director of the Renown Research Office.

   B. The Director of the Renown Research Office.

   C. A delegate from each of the following:

      i. Renown Regional Medical Center

      ii. Renown Children's Hospital.

      iii. Renown South Meadows

      iv. Renown Institute for Cancer.
v. Renown Institute for Heart & Vascular Health.

vi. Renown Institute for Neurosciences.

vii. Renown Institute for Health Innovation

D. An official in charge of facilities, equipment and material management.

E. An official in charge of quality and risk management.

F. The General Counsel shall advise the RSC, but shall not be a member per se.

2. Duties. The duties of the RSC shall be to advise the Authorized Institutional Official concerning all aspects of research and related education including:

A. Institutional interpretation of federal regulations and standard research practices through written procedures;

B. All policies and procedures related to the functions of the RO;

C. All policies and procedures related to the funding, solicitation, conduct, reporting/publication of, and ownership of research at Renown, and further related to education of medical students and others to the extent research is involved in such educational activities;

D. Any disagreements, controversies, or conflicts between hospitals, institutes, or other Renown entities or individuals concerning research activities, ownership of intellectual property, and publication; and,

E. Any allegations or findings of scientific misconduct, or improper acts related to research or research funding.

3. Per 45 CFR §46.112, research that has been approved by an IRB may be subject to further appropriate review and approval or disapproval by officials of the institution. The RSC shall serve as the additional reviewing body. However those officials may not approve the research if it has not been approved by an IRB. It is the intent of this policy to fully and vigorously support this regulation.

4. Meetings, rules of procedure, etc. The RSC shall operate under such rules and shall meet or otherwise deliberate in accordance with such procedures as may be established by or on behalf of the IO, subject to the approval of the CEO.

References/Regulations:

45 CFR §46.112
RENOWN.ORE.100
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