Health and Social Care Research Procedure	
Enabling Policy Statement; Executive Owner; Approval Route:	Our Research and Innovation - PVC, Research and Innovation - Executive Board
Is the Procedure for internal use only (Non-disclosable) ?	Disclosable
Associated Policy Statements:	Our Research and Innovation
Authorised Owner:	Head of Assurance (Research, Innovation and Impact)
Authorised Co-ordinator:	Director of Research, Innovation and Impact.
Effective date:	08 June 2026.
Due date for full review:	07 June 2028.
Sub documentation:	Requesting UoS Sponsorship for Health and Social Care Research Documents required for Health and Social Care Research Management responsibilities when conducting Sponsored Health and Social Care Research Transferring Sponsorship.

Approval History

Version	Reason for review	Approval Route	Date
1.0	New document	EB	08Jun2026

1. Purpose

The University of Surrey (the University) Sponsors research into health and social care and provides an internal governance framework to ensure researchers conduct their work in accordance with legislative and ethical standards.

This Procedure sets out the University's internal governance and operational framework for health and social care research.

The UK Policy Framework for Health and Social Care Research sets out the principles of good practice in the management and conduct of health and social care research in the UK. This applies to all research in health and social care that involves NHS patients, their biological material, data or information. It includes research involving them indirectly, including using data held by the NHS or social care services. The Health Research Authority (HRA) stipulates that research which falls under the UK Policy Framework for Health and Social Care research must be supported by defined roles, including a Sponsor and Chief Investigator.

Studies may need approval from one or more of the following:

- Health Research Authority (HRA)
- NHS Research Ethics Committee (REC)
- Confidentiality Advisory Group (CAG)
- Radiation Assurance
- Pharmacy Assurance.

The University will act as Sponsor for studies led by our staff and students. The University has a governance structure in place to confirm Sponsorship, and to oversee set up, running and closure of studies.

The sub-procedures listed in this Procedure form part of the governance infrastructure and provide instructions on University processes. Standard Operating Procedures (SOPs) and associated forms and templates can be accessed on the Research, Innovation and Impact (RII) webpages.

2. Scope and Exceptions to the Procedure

This Procedure and associated documents apply to all University Staff (including staff of subsidiaries) and students working on studies which require approval from one of the bodies listed above.
To confirm whether external approval is required the researcher (or supervisor if researcher is a student) should complete the tools on the HRA website. A study that does not require external approval may still be subject to the Ethics for Teaching and Research Policy with ethical review and governance checks conducted by the University Ethics Committee and RII-Assurance.
Researchers should also be aware that they may need to apply to other ethical review committees (for example Non-Animal Scientific Procedures Act NASPA) depending on the individual protocol design.

3. Definitions and Terminology

3.1. This Procedure replaces the Quality Manual that would normally be expected as part of the Quality Management System (QMS).

3.2. Definitions:

Safety Reports include Adverse Events, Adverse Reactions, Suspected Unexpected serious

adverse reactions, Serious adverse events, serious adverse reactions and unexpected serious adverse reactions. See HRA website

Sponsor The organisation or partnership that takes on overall responsibility for proportionate, effective arrangements being in place to set up, run and report a research project.

Urgent Safety Measure is taken by the Sponsor or investigator in order to protect the subjects of a clinical trial against any immediate hazard to their health or safety.

3.3. Abbreviations used:

- CI – Chief Investigator
- HRA – Health Research Authority
- NHS – National Health Service
- SOP – Standard Operating Procedures
- REC – Research Ethics Committee
- RII – Research Innovation and Impact
- RIGC – Research Integrity and Governance Committee
- UoS – University of Surrey

4. Procedural Principles

4.1. Responsibilities

4.1.1. **The University** is the Sponsor of Health and Social Care research

4.1.2. **Research, Innovation & Impact – Assurance (RII-Assurance)** Acts as the University's delegate undertaking the activities required of the Sponsor. RII-Assurance will advise researchers and check that the required procedures are followed.

4.1.3. **The CI** is responsible for the overall conduct of the study and for ensuring that regulatory requirements are followed.

4.1.4. **Researchers** working on a study must ensure that they comply with all national and University procedures.

4.1.5. **The Research Integrity and Governance Committee** (RIGC)approves this Procedure and associated SOPs.

4.1.6. **University Research and Innovation Committee (URIC)** approve procedures to support good research practice and a robust system for managing the implementation of the Research and Innovation Policy.

4.1.7. **Senate** have responsibility for oversight of research including ethical conduct.

4.1.8. **Pro-Vice Chancellor, Research and Innovation (PVC-RII)** has the final decision on whether the University will Sponsor a study.

4.2. Central Oversight

RIGC will be informed of any Safety Reports, with Urgent Safety Measures being escalated to PVC-RII.

4.3. Research Culture

The following principles will inform both the University and researcher culture:

4.3.1. Public Involvement

The University encourages public involvement in the design, management, conduct and dissemination of research.

4.3.2. Transparency

Researchers are encouraged to conduct their research under the HRA's Transparency Pillars:

Registering Research – even if not required as a condition of approval, researchers should consider registering their research on a public database. When choosing a registry, the CI should carefully consider any fees against the administration required to maintain the record.

Report – The CI must comply with the reporting conditions of approval.

Inform - The University promotes that the outcome of research should be made publicly available. Information about research findings should be available to those who took part in the study, interested groups or communities and the general public in a format that is accessible and easy to understand[1].

Share – The University is committed to fostering an open research culture. The Library has resources for researchers. Human Tissue collected under a NHS REC approval may be transferred to the University's HTA license for storage for future research studies. UOS_HT_SOP_14 provides details of the procedure that must be followed in respect of such transfers.

[1] Text taken from https://www.hra.nhs.uk/planning-and-improving-research/best-practice/publication-and-dissemination-research-findings/

4.3.3. Equality and Diversity

In line with the University's Equality Diversity and Inclusion Procedure, researchers are encouraged to conduct research that involves and benefits all parts of society. The University supports the NIHR initiatives such as "under-served communities".

4.3.4.Quality

To ensure studies are conducted to a high quality level, it is recommended that the principles of Good Clinical Practice (where applicable) are followed. Not all parts of GCP will be relevant to all study designs.

The CI must implement measures to ensure the reliability of data collected during the study. All members of the study team must read and follow the appropriate SOPs and University policies/procedures. Those taking informed consent from participants must have undertaken suitable training.

4.3.5.Risk

The University will take a risk-based approach when considering studies for Sponsorship that is consistent with our commitment to secure and promote freedom of speech and academic freedom. This will include consideration of the University's ethical and legal obligations, financial risks and risks/benefits to the participants. The CI must prepare a risk assessment of study-specific risks which should be reviewed regularly (at least 6-monthly). Should any new risks be identified or risks increase in likelihood or severity then these must be discussed with the Sponsor. The Sponsor may require mitigation measures to be implemented to allow the continuation of the study.

5. Governance Requirements

5.1. Implementation: Communication Plan

5.1.1. Details of this new procedure will be announced via a news item on the RII sharepoint page and through faculty FRIO newsletters.

5.1.2 Relevant departments will be approached for opportunities to present at team meetings.

5.1.3 Researchers will be sent a copy when they contact RII-Assurance Team.

5.2. Implementation: Training Plan

5.2.1. Individual researcher training requirements will be identified during the Sponsorship application process.

5.3. Review

5.3.1. This procedure will be reviewed every three years. Templates and other documents will be reviewed on receipt of any updates from regulatory authorities.

5.4. Legislative Context and Higher Education Sector Guidance or Requirements

5.4.1. This Procedure ensures that that the University meets the requirements of the UK Policy Framework for Health and Social Care Research and other relevant legislation and legal requirements.

5.5. Sustainability

5.5.1. Implementation of this Procedure does not have any direct environmental impact.

Individual research studies will have different impacts depending on research methodologies.

5.5.2 The University has signed up to the UKRI concordat on sustainability.
https://www.surrey.ac.uk/news/university-surrey-signs-concordat-environmental-sustainability-research-and-innovation-practice
University laboratory facilities can apply for LEAF (Laboratory Efficiency Assessment Framework) accreditation https://www.surrey.ac.uk/sustainability/engagement/leaf.

6. Stakeholder Engagement and Equality Impact Assessment

6.1. An Equality Impact Assessment was completed on 23/04/2026 and is held by the Authorised Co-ordinator.

6.2. Procedure communicated to all subsidiaries on 24Jul2026

6.3. Stakeholder Consultation was completed, as follows:

Stakeholder	**Nature of Engagement**	**Request EB Approval (Y/N)**	**Date**	**Name of Contact**
Governance	Review of draft procedure	N	12/05/2026	Kelley Padley, Governance Officer
H&S	Review of draft Procedure	N	13/05/2026	Matt Purcell, Director of Health and Safety
Sustainability	Document review by email	N	07/05/2026	Martin Wiles, Head of Sustainability
Academic Freedom of Speech	Doc review online	N	12 May 2026	Joshua Andresen, lead Freedom of Speech