

Terms of Reference for DDEA Advisory Board

The terms of reference for the DDEA Advisory Board describes its profile, composition, tasks and responsibilities, meetings, remuneration, and code of conduct.

Profile

The composition of the Advisory Board must include a well-balanced and broad representation of stakeholders from Denmark and abroad, considering competences, gender, age, career level, geography, and sector, to ensure bridge-building with the key stakeholders of DDEA and to provide the DDEA Board of Directors (BoD) with high quality feedback and recommendations on DDEA's key activities.

The Advisory Board must include members with competences and expertise within:

- Research within diabetes and other endocrinology fields, including basic and metabolic research, translational research, clinical research, and interdisciplinary research
- Clinical expertise within diabetes and other endocrinology fields
- Education and talent development, preferably with expertise in digitalization and online training
- Innovation and entrepreneurship
- Life science ecosystem
- Fundraising, e.g. from life science industry, other foundations, or European Union Horizon Europe programme
- Scientific communication and outreach
- Public involvement and outreach

A member may have competences and expertise within more than one of the above. It is not a requirement that all members possess all competences listed above.

Composition and appointment

The Advisory Board consists of 10 members, including a Chair and a Vice-Chair, with 50% of members from research institutions in Denmark and 50% of members from internationally renowned research institutions abroad. The Chair must be from a research institution in Denmark, and the Vice-Chair must be from a research institution from abroad. The members, the Chair, and the Vice-Chair are appointed by the DDEA BoD according to the profile described above.

The members from research institutions in Denmark are appointed on the basis of applications received from the entire Danish diabetes and endocrine research community and other relevant key stakeholders. These include relevant departments and faculties of science and health sciences at the universities; Steno Diabetes Centers; departments of endocrinology at the university hospitals; the Danish Endocrine Society and other relevant professional societies; the Danish Association of the Pharmaceutical Industry (Lif); relevant life science companies; and DDA alumni. The members from research institutions abroad are appointed on the basis of nominations from the DDEA BoD or the entire Danish diabetes and endocrine research community and other relevant key stakeholders.

The Chair and the Vice-Chair are appointed for a period of five years (2023-2027). All other members are initially appointed for a period of 2.5 years (2023-2025). After 2.5 years, new members will be appointed for up to 2.5 years (2025-2027) by the BoD on the basis of new applications and nominations from the entire Danish diabetes and endocrine research community and other relevant key stakeholders. Members can be re-appointed for another term, but no more than 50% of the committee can be re-appointed and members can only serve for two consecutive terms.

If the Chair resigns before the end of their term, the BoD will appoint a new Chair selected among the members. Until a new chair is appointed, the Vice-Chair will serve as the acting Chair, assuming the responsibilities, tasks and authority of the Chair. Likewise, in the event of the Chair's absence or inability to perform their duties, the Vice-Chair shall also serve as the acting Chair until the Chair's return.

If a member of the Advisory Board, or the Vice-Chair, resigns before the end of his or her term, the Advisory Board may function with fewer members (down to seven members), or a new member will be appointed in accordance with the above-mentioned profile and process.

Tasks and responsibilities

The aim of the Advisory Board is to be a formal body to provide feedback and recommendations to the DDEA BoD on the DDEA's four key activity classes and the overall strategy of DDEA.

The primary responsibility of the Chair of the Advisory Board is to provide leadership to the Board, ensuring its effective functioning and leading the Advisory Board in providing feedback and recommendations to the DDEA BoD.

The Chair's and the Vice-Chair's principal tasks include setting the agendas for Advisory Board meetings in coordination with the DDEA Secretariat, chair group work sessions during Advisory Board meetings, liaise with the DDEA Secretariat, and ensure that the Advisory Board's feedback and recommendations are presented to the DDEA by compiling an annual report to DDEA. The report outlines strengths, weaknesses, opportunities and threats (SWOT) and assess the success criteria, key performance indicators, and other evaluation factors in relation to the four key activity classes. The report will be prepared by the Secretariat and approved by the Chair and the Vice-Chair of the Advisory Board. The main points of the report will be included in the DDEA annual report and create the basis for the DDEA BoD's decisions on whether the strategy needs adjusting.

The principal tasks of the Advisory Board are to:

- Discuss and challenge the overall strategy of DDEA and the strategy of DDEA's key activities and provide feedback and recommendations to the DDEA BoD on past, present, and future activities to ensure continuous development of DDEA and provide the DDEA BoD with a basis for deciding whether the strategy for future activities needs adjusting. The Advisory Board will provide feedback and recommendations within:
 - Overall strategy, including fundraising and the four strategic themes of DDEA, i.e. digitalization and new technologies; public involvement and outreach; strategic partnerships; and translational research.
 - Education and talent activities: Format and topics of PhD and postdoc courses, seminars and symposia, and suggestions for *hot topics*; how to implement the four strategic themes of DDEA in its activities; and how to bridge diabetes and other endocrinology fields.
 - Networking and collaboration activities: Assist the DDEA BoD with suggestions to establish effective networking and collaboration activities among diabetes and other endocrinology fields, and suggestions for establishing relevant strategic partnerships.
 - Grant activities: Assist the DDEA BoD with suggestions on how to recruit world-class research talent; how to improve mobility across disciplines, borders, and sectors; and how to increase the quality of applications from all fields of endocrinology.
 - Communication and outreach activities: Suggestions for public and scientific outreach activities, including format and topic of activities, and feedback on DDEA communications and communication channels.
- Set up relevant *ad hoc* sub-committees, as needed, to receive input on specific focus areas, in particular the four strategic themes of DDEA, so that the Advisory Board can provide the DDEA BoD with high-quality suggestions and recommendations.

Meetings

The Advisory Board will meet once annually. The meetings may be conducted online or as onsite meetings.

The Advisory Board, or the Chair and the Vice-Chair on behalf of the Advisory Board, will meet once annually with the BoD, or the BoD Chair on behalf of the BoD, to present overall feedback and recommendations of the

Advisory Board; to evaluate the function of the committee; and to provide suggestions for potential changes to the work of the committee.

Remuneration

Members of the Advisory Board will receive no remuneration. Members' travel and accommodation costs in connection with the meetings will be reimbursed.

Code of conduct

The Advisory Board has no decision-making power, other than setting up the *ad hoc* sub-committees. It is entirely an 'advisory' board.

The Terms of Reference have been updated in October 2024 by the DDEA BoD and are valid as per 9 October 2024.