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# Navigating the Institutional Review Board: Submissions, Reviews, and Procedures

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# Navigating the Institutional Review Board:
## Submissions, Reviews, and Procedures

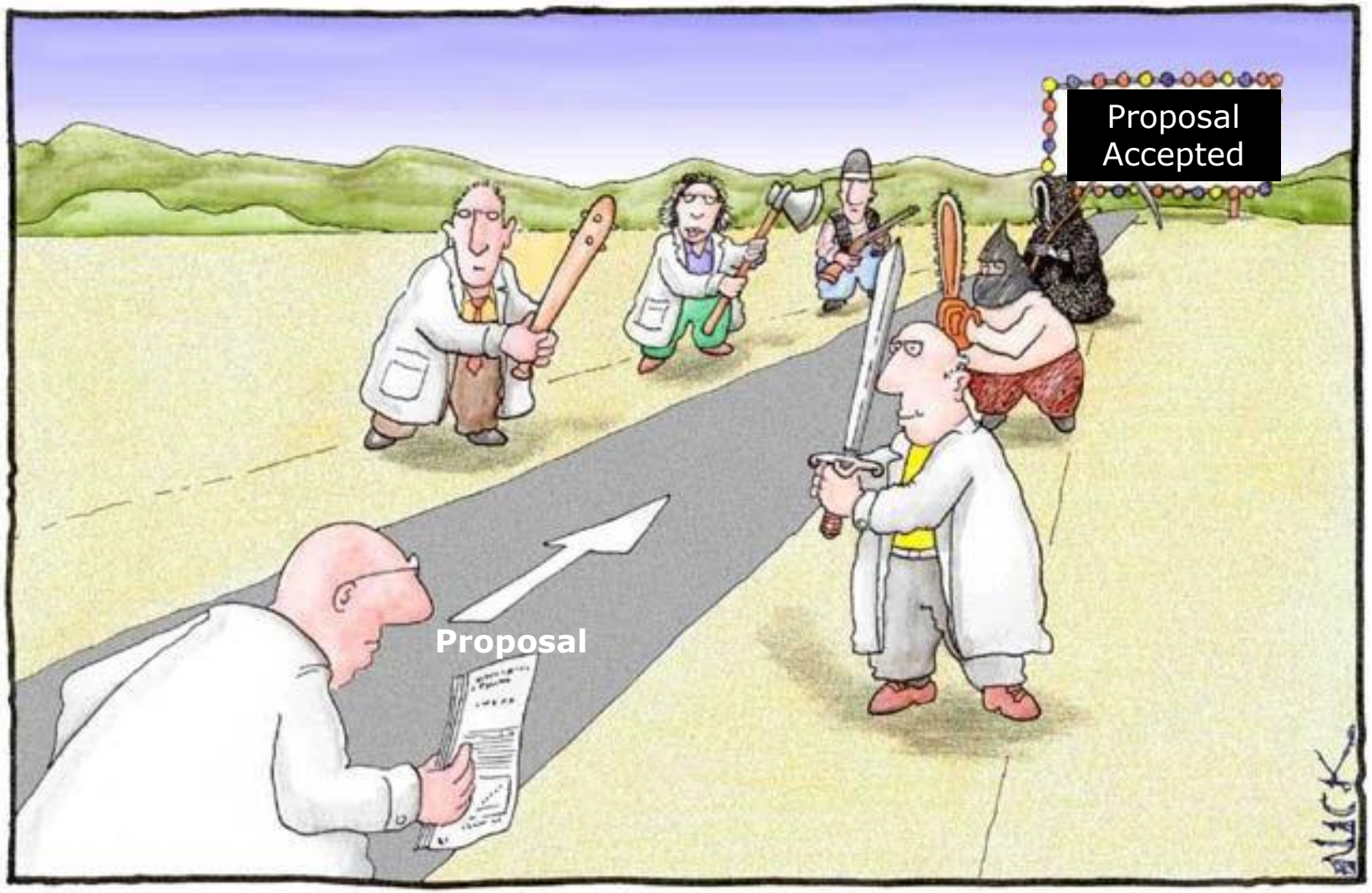

Presented by

*Jon Ehrman, Ph.D.*

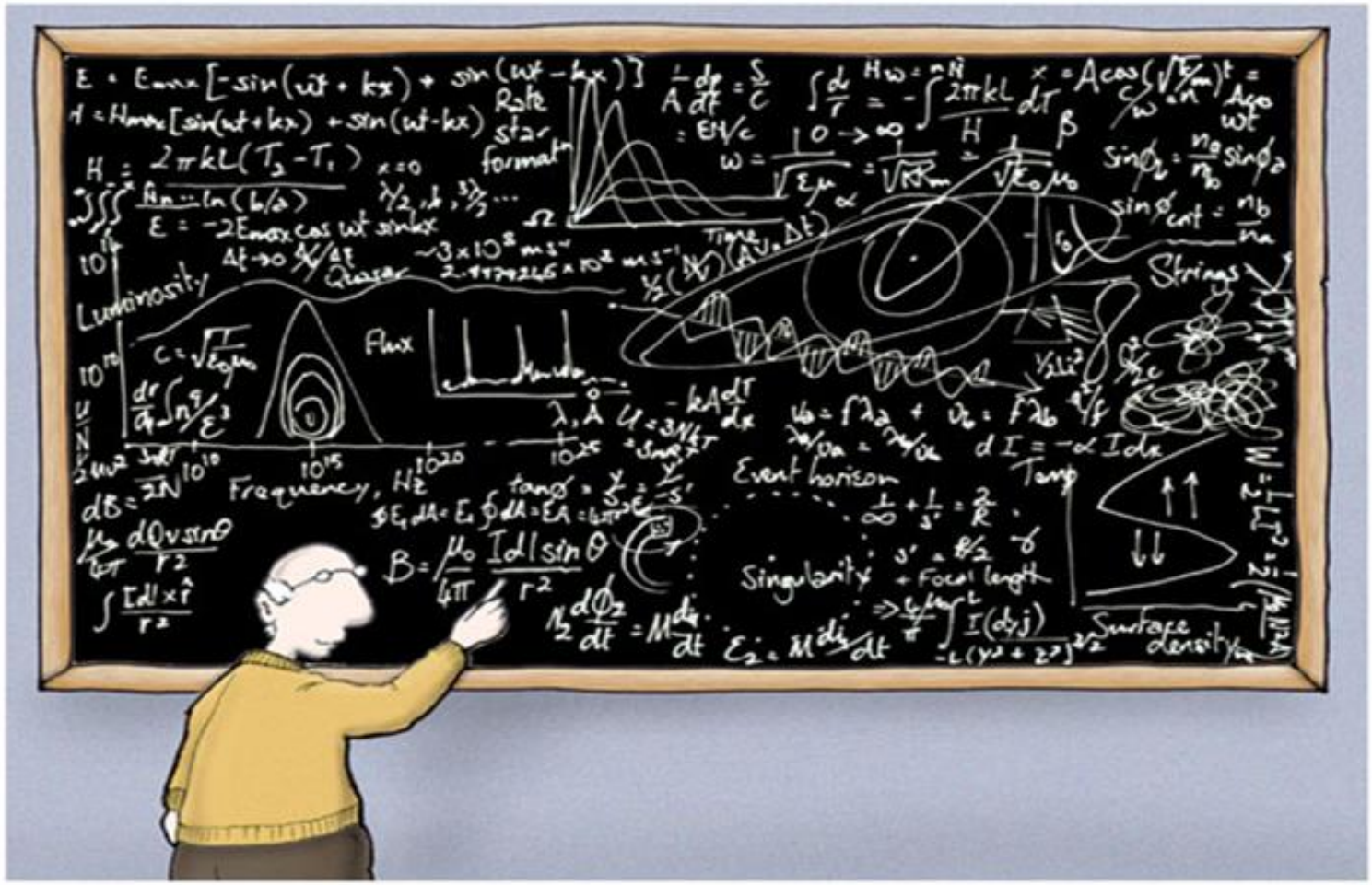
*HFH IRB Chair*


Last Update: 9/12/2024

# IRB Approval can seem Daunting



# ….and Overly Complicated

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# Protect human subjects who agree to participate in research


Cleopatra testing poison on prisoners

Nazi's human experiment-ation in the name of "scientific research"

Fernald Center studies on absorption in young males with develop-mental disabilities

Tuskegee Syphilis Study not told of penicillin effectiveness

# Study Participant Protection Development

- Nuremburg Code as a result of the Nazi War Crime Trial of 1947: voluntary consent, good for society, results justify study, avoid physical/mental suffering, no chance disability/death, minimize risk, protect participants, use qualified personnel, can withdraw at any time, terminate if needed
- The Belmont Report-Ethical Principals and Guidelines for the Protection of Human Subjects of Research
  - Report of the National Commission for the Protection of Human Subjects of Biomedical and Behavioral Research
    - **Respect for Persons**-autonomy and protected those with reduced autonomy
    - **Beneficence**-Maximize benefits and reduce harm risk
    - **Justice**-equitable distribution of research risks and benefits
- Institutional Review Boards in U.S.
  - Codified in U.S. regulations in 1974
  - Office of Human Research Protections (OHRP) under the Dept. of Health and Human Services (DHHS)

# HFH Institutional Review Board

| Institutional Review Boards (Henry & Edsel) |
| --- |
| Human subjects research studies |
| Chaired by: Jonathan Ehrman, Ph.D. |
| Coordinated by: Heather Wolak (Henry) Ellen Ryall (Edsel) |
| 17 Committee Members (Henry)<br><br>14 Committee Members (Edsel) |
| Each committee convenes monthly |

- Designated to conduct independent review of research protocols (full board, expedited, and external)- Voluntary
- Governed by federal regulations and monitored by the U.S. Department of Health and Human Services (DHHS) Office for Human Research Protections (OHRP) - 45 Code of Federal Regulations Part 46
- Full Board committee meetings take place every second and fourth Tuesday of the month (greater than minimal risk)
  - Scientists, physician, non-scientist, community members (non-affiliated)
- Expedited pre-reviews conducted daily, allowing 3-5 business days for committee review/determination
- External studies are ceded to a non-HFH IRB but require HFH IRB approval for reliance


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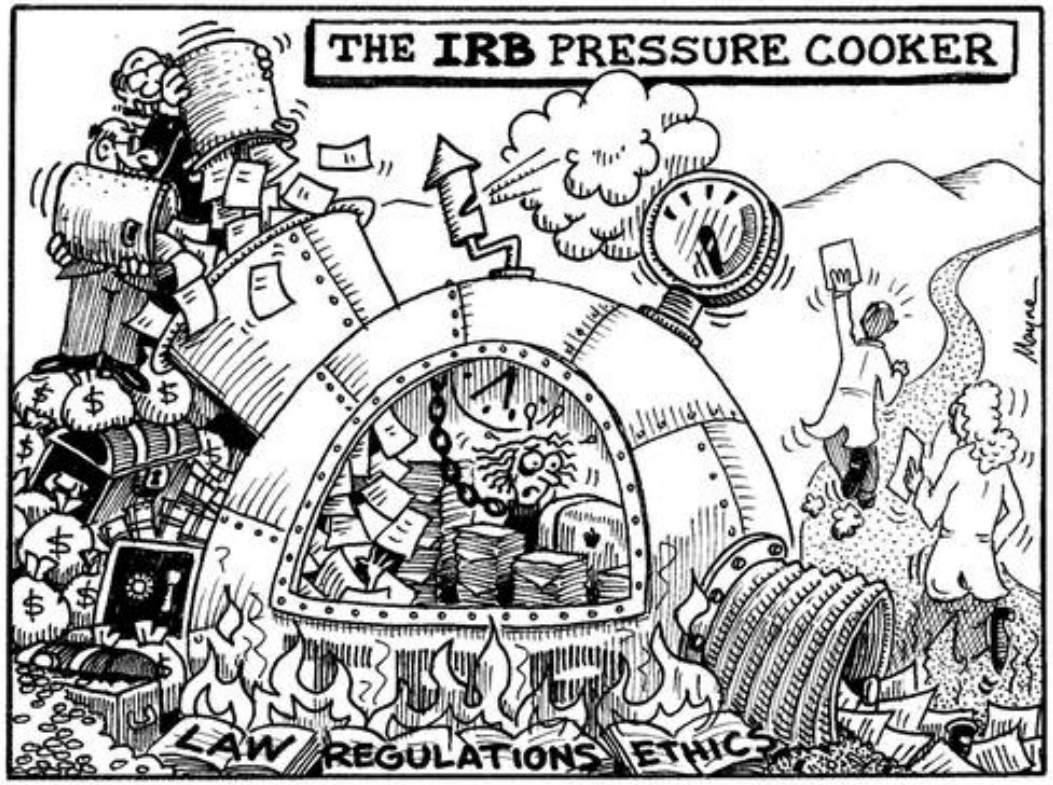
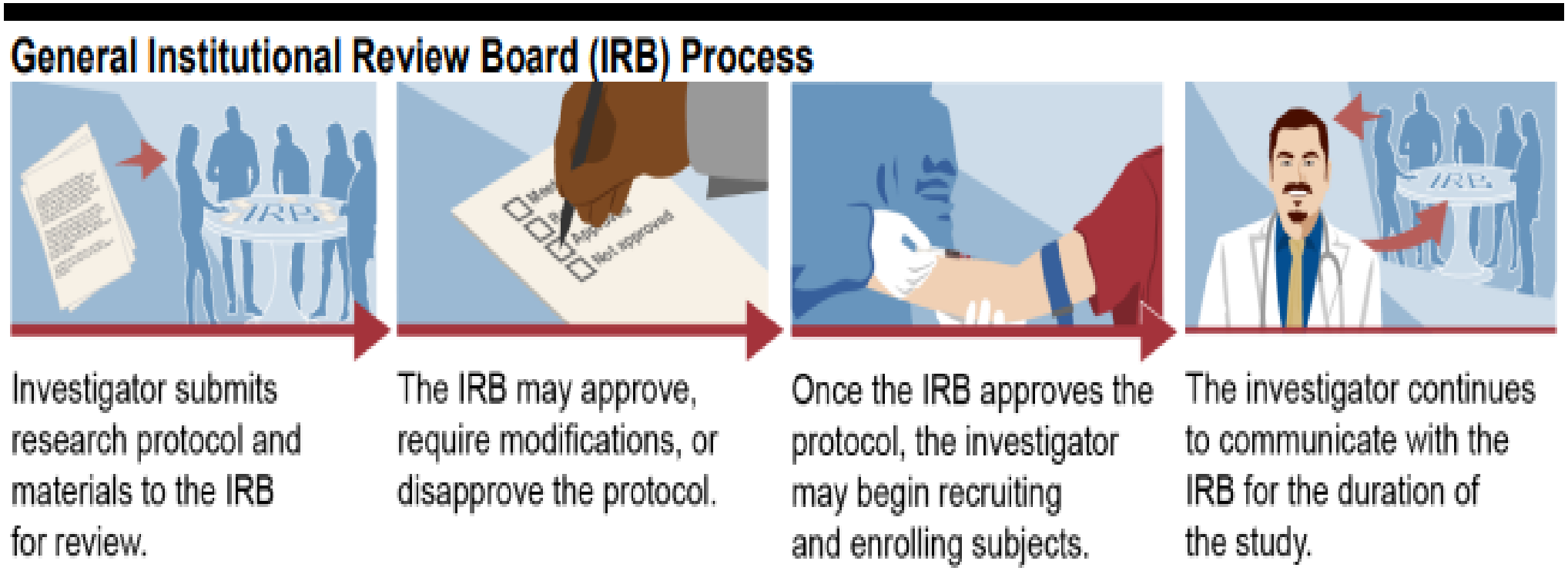
There are more than 3,000 IRB (~1000 new protocols) submissions per year at HFH and the IRB staff and committees are under pressure on one side to make sure the rules are followed to ensure patient protection….and on another side to do so in a timely manner.




**The IRB currently has oversight of approximately 2,600 active research studies, with only about *20 active studies led by a Nursing professional* as principal investigator.**

# General IRB Process




# Study Activities Which are NOT Considered Research

| QUALITY PROJECTS* | CASE REPORTS | PREPATORY WORK |
|---|---|---|
| Done solely to improve **internal** health care operations. | If no more than three (3) cases. Take steps to minimize risk (i.e., de-identified data is published). | Record review before starting to determine feasibility of project (i.e., adequate sample size to achieve aims). Solely for review of Patient Information necessary to prepare protocol. ***Not recruitment*** |

***NOTE:** Some Quality Projects could be considered research if the study:

- Included interventions that differ from standard-of-care to be published outside of HFH;
- Began purely as QA/QI but along the way becomes research; or,
- Involves pooling data from several health systems/hospitals disseminated outside HFH.

**When in doubt, request an HSR Determination**

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# Research Question: FINER

- **F**easible: Sample size to prove the hypothesis. Sufficient time and resources to conduct and complete the study
- **I**nteresting to you
- **N**ovel: Confirms or refutes previous findings or extends previous findings
- **E**thical: Cannot have unacceptable risks or withhold standard treatment
- **R**elevant: To scientific knowledge, future directions, clinical or health policy

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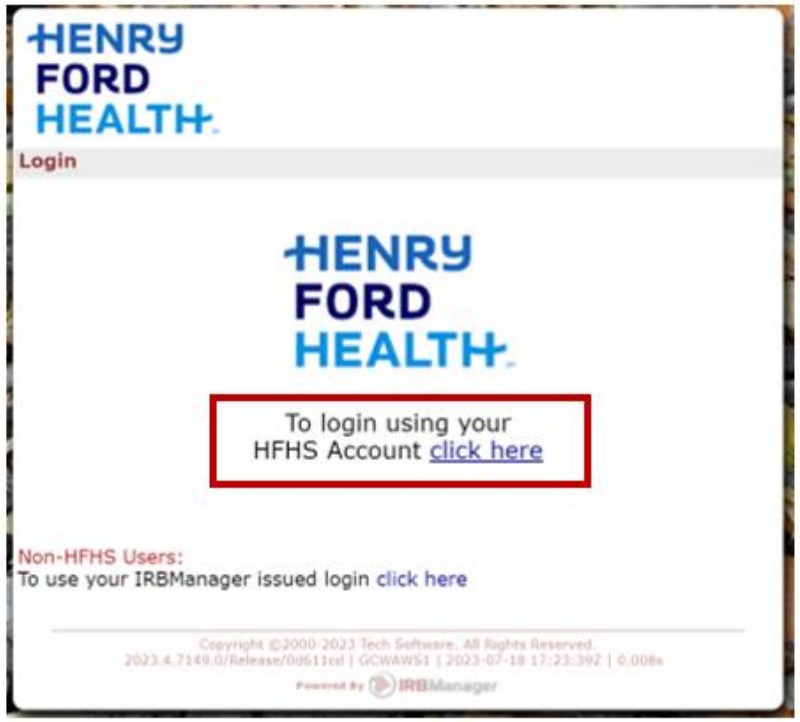
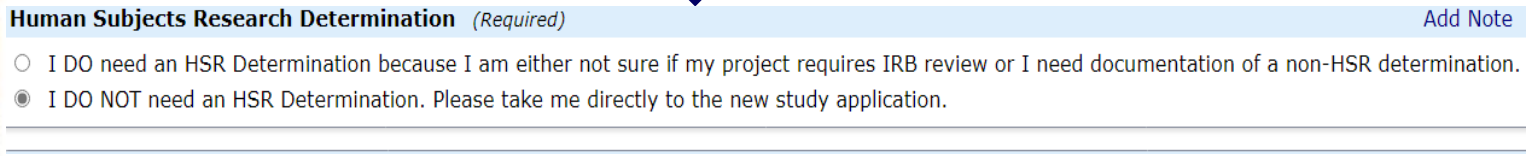
# How do I submit my application for review?

**IRB Manager is an online submission, workflow, and data management system for Henry Ford Health's Institutional Review Board. The electronic forms provided within this system allows the research community to submit new studies for review, as well as submit other forms for continuing review, amendments, key personnel changes, reportable events and final reports.**







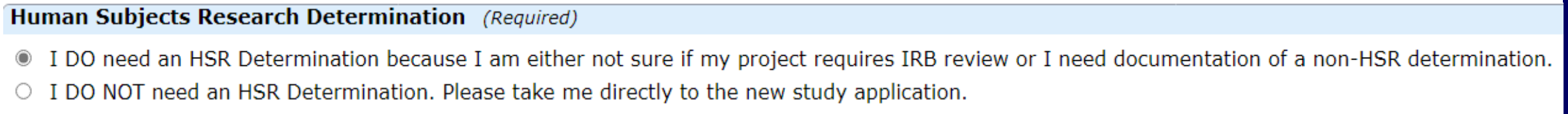
# How the IRB Determines if Your Project is Human Subjects Research

1. Do study activities meet the definition of research:
   a) Involves a **systematic investigation** (i.e., collecting and analyzing the data using quantitative and/or qualitative analyses to test a hypothesis or to answer a research question)
   b) Designed to **develop or contribute to generalizable knowledge** (i.e., the findings can be generalized to a larger patient or provider population outside of the research study, informs policy, or is universally or widely applicable)

2. Do study activities involve human subjects:
   a) Collection of data or information through **intervention or interaction** with a living subject
   b) Collection or use of **individually identifiable and private** information or biospecimens

**If study activities meet <u>both</u> the definitions of Research and Human Subjects then IRB review and approval is required to conduct the study.**

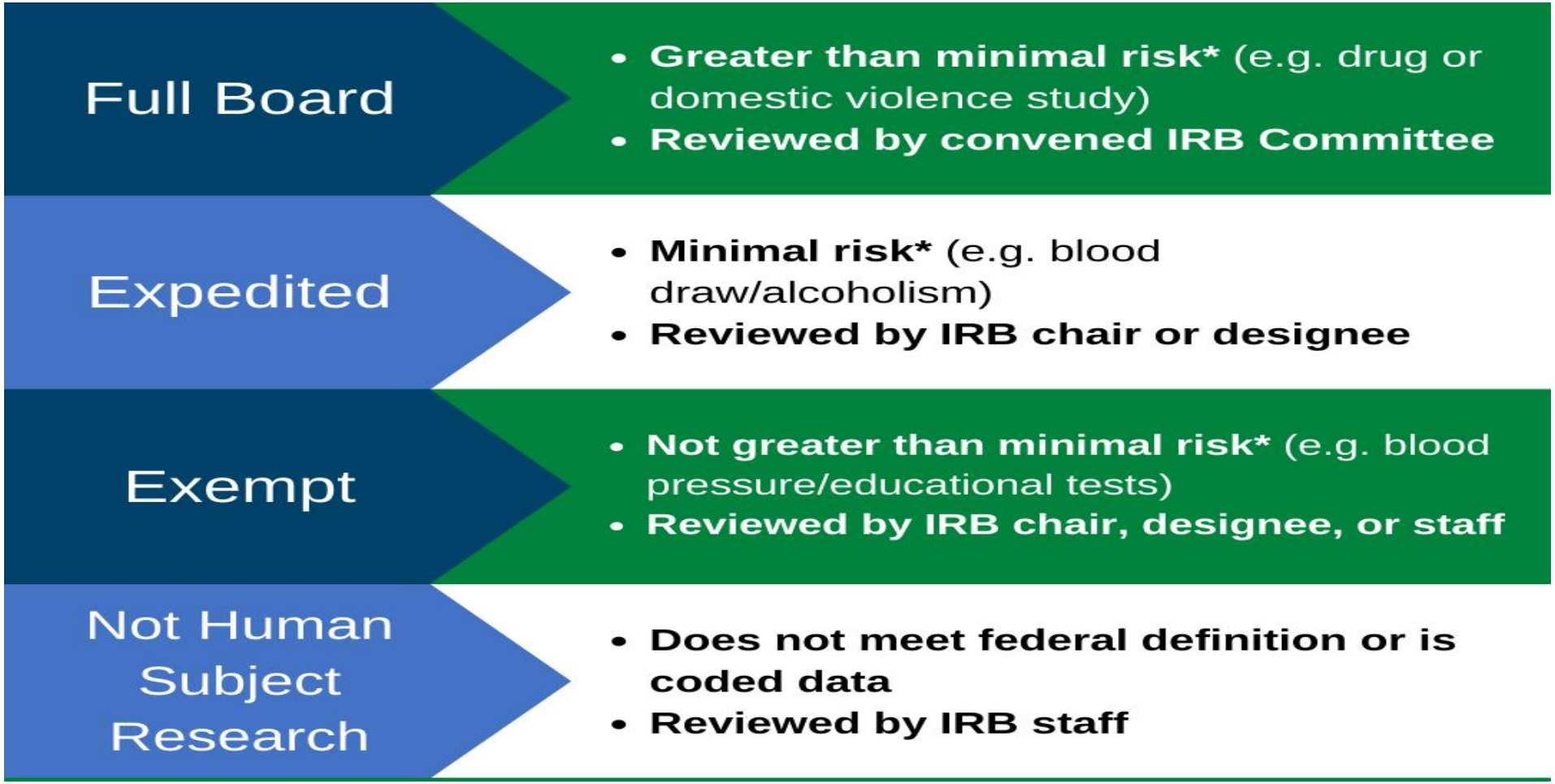
# When Do I Request a Human Subjects Research (HSR) Determination?




- If the activities do not involve **research** or do not involve **human subjects**, an HSR determination can be requested by submitting the *New Protocol Application xForm*.

- Select the "I DO need an HSR Determination because I am either not sure if my project requires IRB review or I need documentation of a non-HSR determination."

# IRB Levels of Review




*__Minimal Risk__ is defined in the federal regulations as the probability and magnitude of physical or psychological harm or discomfort anticipated in the research are not greater in and of themselves than those normally encountered in the daily life, or in the routine medical, dental, or psychological examination of healthy persons.

# Exempt Review Categories

- **Category 1:** Research, conducted in established or commonly accepted educational settings, that specifically involves normal educational practices (e.g., Evaluating use of accepted or revised standardized tests; Testing or comparing a curriculum).
- **Category 2**: Research that only includes interactions involving educational tests, survey procedures, interview procedures, or observation of public behavior and meets criteria.
- **Category 3**: Research involving benign behavioral interventions (e.g., Being exposed to stimuli such as color, light or sound at safe levels; Performing cognitive tasks.
- **Category 4**: Secondary research uses of identifiable private information or identifiable biospecimens and meets criteria (e.g., Analyzing existing tissue samples or data set which are recorded by the investigator without identifiers).
- **Category 5**:Research and demonstration projects that are designed to study, evaluate, improve, or otherwise examine public benefit or service programs.
- **Category 6**: Taste and food quality evaluation and consumer acceptance studies.

# Expedited Reviews

- No greater than minimal risk research that does not fall into one of the Exempt Review Categories.
- The expedited review procedure may not be used where identification of the subjects and/or their responses would reasonably place them at risk of criminal or civil liability or be damaging to the subjects financial standing, employability, insurability, reputation, or be stigmatizing, unless reasonable and appropriate protections will be implemented so that risks related to invasion of privacy and breach of confidentiality are no greater than minimal risk.
- If greater than minimal risk, a full board review is required.

# Expedited Review Categories

- **Category 1:** Clinical studies of drugs and medical devices only when certain conditions are met (e.g., post market approval of drug/device).
- **Category 2**: Collection of blood samples by finger stick, heel stick, ear stick, or venipuncture in certain populations and within certain amounts.
- **Category 3**: Prospective collection of biological specimens for research purposes by noninvasive means (e.g., saliva, urine sample).
- **Category 4**: Collection of data through noninvasive procedures (not involving general anesthesia or sedation) routinely employed in clinical practice, excluding procedures involving x-rays or microwaves (e.g, CT scan).
- **Category 5**:Research involving materials (data, documents, records, or specimens) that have been collected, or will be collected solely for non-research purposes (e.g., medical records, discarded tissues from a repository).
- **Category 6**: Collection of data from voice, video, digital, or image recordings made for research purposes.
- **Category 7:** Research on individual or group characteristics or behavior or research employing survey, interview, oral history, focus group, program evaluation, human factors evaluation, or quality assurance.

# Full Board Review

Studies that require review at a convened full board meeting deemed to be greater than minimal risk to subjects:

- Randomized, Prospective, Placebo controlled studies
- Clinical procedures with drugs, devices, or biologics, or innovative research into new medical or surgical procedures
- Genetic Testing
- Vulnerable populations (e.g., *Children, pregnant women/neonates, prisoners, cognitively impaired, non-English speaking, unconscious, uninsured, low-income, elderly, homeless, employees or students/trainees)*
- Disclosure of information that could require mandatory legal reporting (e.g., child/elder abuse, etc.)

# IRB Submission Requirements

- **IRB Application Form:** used for full board, expedited and exempt review.
- **Study Protocol:** Use IRB Template if the study is PI-initiated.
- **Supporting Documents:** data collection tools, data spreadsheet, letters, telephone/email scripts, advertisements, etc.
- **Letters of Collaboration:** support from personnel outside the PI's department
- **PI and Division Head/Dept Chair Signatures:** leadership approval
- **Signed and Dated Curriculum Vitae:** required only for investigators
- **Financial Conflict of Interest Disclosure:** required for all key personnel
- **Informed Consent Form:** HFHS template is used
- **CITI Good Clinical Practice (GCP) Training:** Mandatory education for key personnel

**All application materials must be approved prior to starting the research**

# Key Personnel

- *“Key Personnel” are individuals who contribute to the scientific development or execution of a project in a substantive, measurable way, whether or not they receive salaries or compensation under the protocol. This includes, but is not limited to, individuals involved in conducting the research through interaction or intervention for research purposes and any individuals involved in the consent process.*
- *Key Personnel include the PI, Co-I, and other Research Team Members (i.e., Regulatory Coordinator, Data Coordinator, Research Coordinator)*
- *Responsibilities of Key Personnel may include consenting subjects, performing data analysis, medical record abstraction, data collection, and other research-related activities (e.g., physical exam, lab specimen collection, drug administration).*
- *CITI Good Clinical Practices (GCP) training which includes COI modules is mandatory for all key personnel and is valid for 3 years. Other recommended training includes Human Subjects Biomedical Research training and Responsible Conduct of Research.*

# Informed Consent

Informed consent refers to the **voluntary** choice of an individual to participate in research based on an **accurate** and **complete understanding** of its purpose, procedures, risks, benefits, alternatives, and any other factors that may affect a person's decision to participate.

- The standard requirements for informed consent apply regardless of the type of review--expedited or convened--utilized by the IRB.
- Study procedures may/may not be greater than minimal risk to subjects.
- There is direct contact or opportunity to obtain documentation of consent from subjects.
- Research involves prospective data collection


**Bottom line, consent must be in language understandable to the subject**

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# REQUIRED Elements of Consent

- Statement that the protocol involves research; An explanation of the purposes of the research; Expected duration of the subject's participation; Description of the procedures to be followed; Identification of any procedures which are experimental
- Description of any reasonably foreseeable risks or discomforts or any benefits to the subject or to others that may reasonably be expected from the research
- Any appropriate alternative procedures or courses of treatment that might be advantageous
- Statement describing the extent, if any, to which confidentiality of records identifying the subject will be maintained
- If identifiable PHI or biospecimens collected need statement regarding protecting identity and future use
- Whether compensation is available for participation
- How to contact the Investigator for questions, concerns, or injuries and how to contact someone independent (i.e., the IRB) of the research for questions, concerns, complaints, or subject rights
- Statement that participation is voluntary
- Statement that refusal to participate will involve no penalty or loss of benefits to which the subject is otherwise entitled
- The subject may withdraw or discontinue participation at any time without penalty or loss of benefits to which the subject is otherwise entitled
- **Greater Than Minimal Risk**: Whether any compensation and/or medical treatment is available if injury occurs and, if so, what they consist of, or where further information may be obtained

# Assent Obtained for Minor Study Subjects

- Minors, 12-17 years old: Parent/legal guardian signs consent and minor signs a separate assent.
- Minors, 7-11 years old: Assent of the child can be executed on the consent signed by the parent/legal guardian or as a separate assent form.
- Minors, 3-6 years old: Assent may be waived if IRB agrees that the child is not capable of understanding the implications of the research due to age.
- Assent templates for minors ages 7 to 11 years old and for minors ages 12 to 17 years old are available for use on the IRB website. A verbal assent script is also available for children ages 3 to 6 years old.

# Requests for Waiver of Informed Consent & HIPAA Authorization

A Waiver of Documentation of Informed Consent can be requested if the study is minimal risk and there is no direct contact to obtain a signed informed consent, however verbal consent can be obtained. The IRB may waive the requirement for the investigator to obtain a signed consent form for some or all subjects, if it finds:

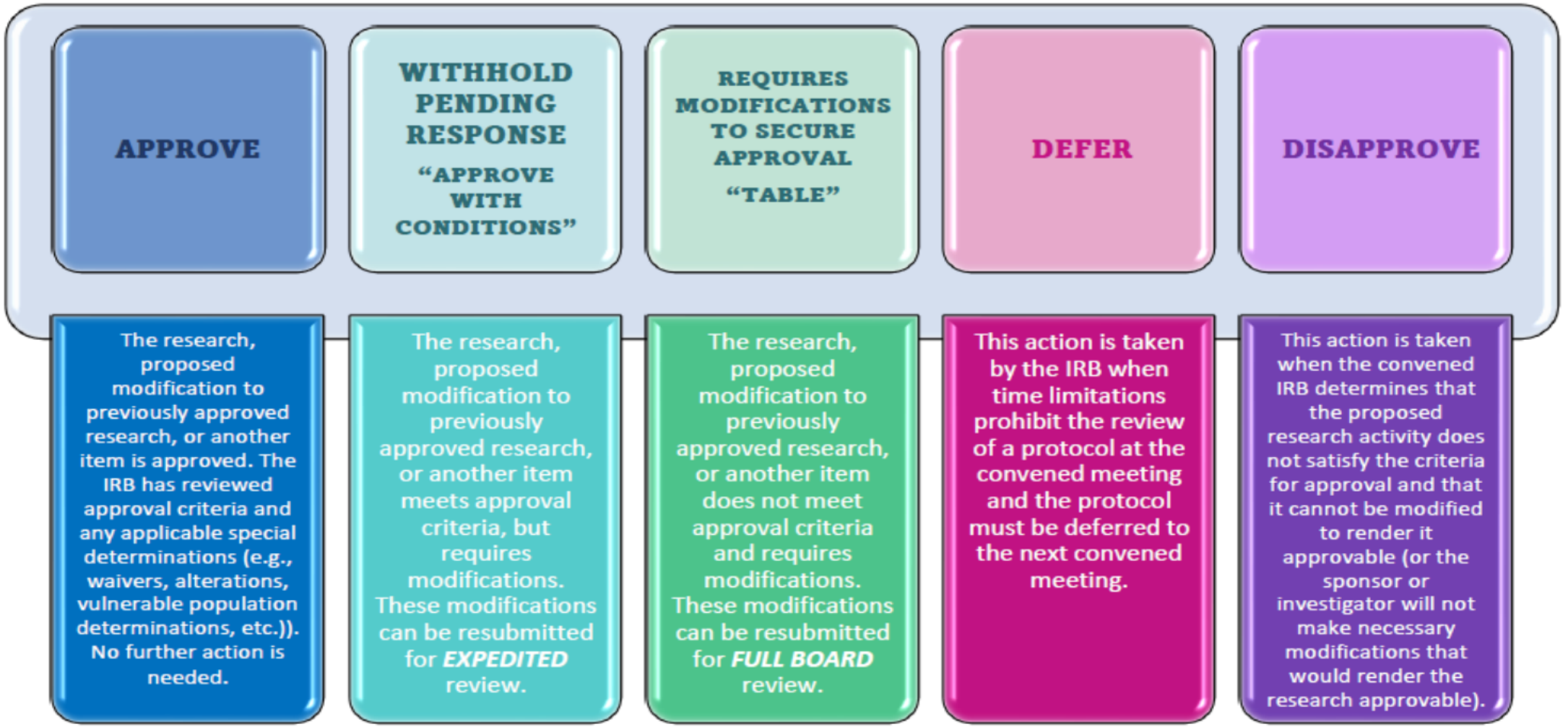
- Study procedures present no greater than minimal risk to subjects and involves no procedures, for which written consent is normally required outside of the research context.
- No contact or opportunity to obtain documentation of consent/authorization from subjects.
- The signed Informed Consent/HIPAA Authorization Form would be the principal document that would link the subject to the study and the principal risk would be potential harm resulting from a breach of confidentiality.

# Partial or Full Waiver of HIPAA Authorization

- **Partial HIPAA Waiver**
  - Accessing Protected Health Information (PHI) for the purposes of recruitment only (i.e., accessing medical records only) for the purposes of recruiting subjects and then obtaining Authorization at the time of Consent.
  - The IRB can grant a partial HIPAA authorization waiver to allow for information to be collected from the medical record. For example, a partial waiver must be granted in order to collect eligibility information about potential subjects from the medical record such as whether a person or persons have a specific disease.
  - Any study for which the Principal Investigator or research team plans to access or use PHI about persons in a research study prior to their consent should request the partial waiver.
- **Full HIPAA Waiver**
  - No PHI to be collected or accessed
  - No interaction with study subject (e.g., chart abstraction)

# IRB Determinations

Upon review completion, the IRB provides a letter of determination. When a study is approved, this letter will include a list of stamped, approved documents. If the study requires additional modifications, the letter will include the IRB's concerns along with steps to submit a response.



# PI Responsibilities Post-Approval

- Ensure either hand signed or Docusigned, dated CV is submitted every 3 years.
- Ensure CITI Good Clinical Practice training is renewed every 3 years.
- Report any changes in conflicts of interest.
- Submit an Amendment to make changes to an existing study or to file a change in study PI.
- Submit a Key Personnel Change Form to add or remove all other study personnel.
- Submit an Annual Continuation Form for a study to remain open (e.g., enroll new subjects, collect or analyze data, if subjects are still in active treatment or follow-up. Submit 60 days prior to approval expiration date.)
- Submit an Annual Check-In Form for an exempt or expedited study or a study that does not require signed consent.
- Submit a Reportable Event Form to report adverse events that are serious, unanticipated, AND possibly related to the study drug/device/procedures, to report any unapproved changes to the study (i.e., protocol deviations), or to report any other significant information to the IRB (i.e., DMSB reports).
- Submit a Final Review Form to close a study when all research activities are completed and at the point of publishing results.

# Resources to Support Your Research

- Please contact IRB Administration at IRBQuestions@hfhs.org if you have any questions about IRB submissions
- IRB Website: Institutional Review Board (hfhs.org)
- IRB Manager System Access: IRB Forms (hfhs.org)
- For IRB Manager Assistance: IRBManager@hfhs.org
- For Statistical Assistance: Contact Public Health Sciences @ https://redcap.hfhs.org/redcap/surveys/?s=P3MXEK87TW

  ***Graduate Medical Education covers 10 hours of biostatistical support for residents and fellows, which can be renewed. Must complete GME proposal and obtain signatures from Medical Education***

- For Information Privacy & Security (IPSO): Security requirements, data destruction procedures, email and laptop encryption https://onehenry.hfhs.org/departments/ipso/Pages/Overview.aspx