

UNIVERSITY OF VIRGINIA

**Institutional Review Board for
Health Sciences Research
(IRB-HSR)**

Standard Operating Procedures

Preface

The University of Virginia (UVa) supports the advancement of scientific knowledge through research. UVa is grateful to individuals who choose to participate in such research and is committed to the protection of humans who participate in research.

The University, administrators at all levels, investigators and their research staffs, and the IRBs, share the collective responsibility for the ethical conduct of research. This collaboration must exist in a culture of trust, complete openness, and honesty by upholding the highest ethical principles in the conduct of research. By upholding the highest standards, we build public support for the pursuit of greater knowledge garnered in a safe research environment.

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Purpose

The purpose of this standard operating procedure is to describe the scope, authority, and components of the Human Research Protection Program (HRPP) for ensuring that the rights and welfare of all human subjects participating in research at UVa are protected. The requirements of the HRPP apply to all research involving human subjects conducted on behalf of UVa, irrespective of funding.

Ethical / Regulatory Framework for Conducting Human Research

The UVa HRPP adheres to the ethical principles and guidelines for the protection of human research participants summarized in the Belmont Report, complies with federal regulations, guidance, and state laws related to human subjects protection, and for federally-sponsored research maintains a Federal-wide Assurance of compliance (FWA) with the Office for Human Research Protections (OHRP).

Three basic principles of the Belmont Report are central to the ethics of research involving human subjects and guide the IRB's in ensuring that the rights and welfare of research participants are protected. These are:

- (1) Respect;
- (2) Beneficence; and,
- (3) Justice.

Respect for Persons applied by obtaining informed consent, and considering privacy, confidentiality, and additional protections for vulnerable populations
Beneficence- applied such that the potential benefits of research are maximized and the possible risks are minimized to persons involved.

Justice – evidenced in the equitable selection of research participants

Definitions

Human Subject

The DHHS definition of human subjects will generally apply to all human research conducted by investigators at the University of Virginia unless the

research involves a test article. Those investigations involving a test article will also be subject to FDA definitions

DHHS regulations define a human subject as a living individual about whom an investigator conducting research obtains (1) data through intervention or interaction with the individual; or (2) identifiable private information.

Intervention includes both physical procedures by which data are gathered (e.g., venipuncture) and manipulations of the subject or the subject's environment that are performed for research purposes.

Interaction includes communication or interpersonal contact between investigator and subject.

Private information includes information about behavior that occurs in a context in which an individual can reasonably expect that no observation or recording is taking place, and information which has been provided for specific purposes by an individual and which the individual can reasonably expect will not be made public (for example, a medical record). Private information must be individually identifiable (i.e., the identity of the subject is or may readily be ascertained by the investigator or associated with the information) in order for obtaining the information to constitute research involving human subjects.

FDA regulations define human subject as an individual who is or becomes a participant in research, either as a recipient of the test article or as a control. A subject may be either a healthy human or a patient.

Research

DHHS regulations define research as a systematic investigation, including research development, testing and evaluation, designed to develop or contribute to generalizable knowledge.

A "systematic investigation" is an activity that involves a prospective plan that incorporates data collection, either quantitative or qualitative, and data analysis to answer a question.

Examples of systematic investigations include:

- surveys and questionnaires;
- interviews and focus groups;
- analyses of existing data or biological specimens ;
- epidemiological studies;
- evaluations of social or educational programs;
- cognitive and perceptual experiments;

- medical chart review studies.

Investigations designed to develop or contribute to generalizable knowledge are those designed to:

- draw general conclusions;
- inform policy; or,
- generalize findings beyond a single individual or an internal program (e.g., publications or presentations.)

However, research results do not have to be published or presented to qualify the experiment or data gathering as research. The intent to contribute to "generalizable (scholarly) knowledge" makes an experiment or data collection research, regardless of publication. Research, even if is never published, is still research. Participants in research studies deserve protection whether or not the research is published.

Examples of activities that typically are not generalizable include:

- biographies;
- oral histories that are designed solely to create a record of specific historical events;
- service or course evaluations, unless they can be generalized to other individuals;
- services, courses, or concepts where it is not the intention to share the results beyond the UVa community;
- classroom exercises solely to fulfill course requirements or to train students in the use of particular methods or devices;
- quality assurance activities designed to continuously improve the quality or performance of a department or program

Note: Thesis or dissertation projects conducted to meet the requirement of a graduate degree are usually considered generalizable, and require IRB review and approval.

FDA regulations define a clinical investigation as any experiment that involves a test article and one or more human subjects and that either is subject to requirements for prior submission to the FDA, or is not subject to requirements for prior submission to the FDA of the Federal Food, Drug, and Cosmetic Act, but the results of which are intended to be submitted later to, or held for inspection by, the FDA as part of an application for a research or marketing permit.

A test article means any drug (including a biological product for human use), medical device for human use, human food additive, color additive, electronic product, or any other article subject to regulation under the Federal Food, Drug, and Cosmetic Act.

Examples of clinical investigations include:

- Investigational drug clinical trials;
- Medical treatment with investigational device study;
- Medical outcomes study comparing approved drugs/devices.

Authority of Institutional Officials

The University of Virginia (UVa) has demonstrated a commitment to human subject protections by establishing a human subject's protection program led by a University of Virginia official with sufficient standing, authority and independence to ensure implementation and maintenance of the program. The UVa Human Subject Protection Program is led by the Institutional Official, the Associate VP for Research (AVPR). The AVPR should have demonstrated experience in human research protections, federal regulations and research with humans.

The Institutional Official and the University of Virginia IRBs are responsible for protecting the rights, dignity, welfare, and privacy of human research subjects at the University by adhering to the principles of the Belmont Report and all other applicable federal, state and local regulations.

AVPR is committed to:

- advancing responsible conduct in research;
- ethical treatment of human research subjects; and,
- ensuring that the right of every human being to voluntary, informed consent to research is respected.

The Office of the Vice President for Research serves its purpose by:

- ensuring that the overall HRPP at UVa is provided the resources necessary to conduct the activities under its jurisdiction and adjusting resource allocations as needed;
- working to protect the rights and welfare of human research subjects by fostering and advancing the ethical and professional conduct of persons and organizations that engage in research with human participants;
- providing education to researchers, research staff and the public,
- conducting periodic reviews of research involving human subjects;; and,
- serving as the Institutional Health Insurance Portability and Accountability Act of 1996 (HIPAA) Privacy Board. (IRB-HSR only).

The AVPR has the authority to review decisions of the IRB. In the case of an IRB approval decision the project may be disapproved, suspended, or terminated on behalf of the institution should the AVPR conclude that a project does not fully comply with policies or obligations of the University of Virginia. In the case of a decision by the IRB to disapprove, suspend, or terminate a project, the AVPR or any other officer or agency of the University of Virginia, state government, or federal government may not reverse the decision.

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Operation of the Human Subject Protection Program

UVa's Institutional Official (IO) will have ultimate responsibility for ensuring ethical conduct of research involving humans.

The AVPR will oversee the work of the Post Approval Monitoring and Education Program, the University Conflict of Interest Committee, the IRB's, and the IRB-HSR in its role as the HIPAA Privacy Board..

The AVPR office will manage an oversight system for health sciences research involving human subjects to ensure that research complies with the terms of the approved protocol, federal regulations and state law, IRB-HSR decisions and IRB-HSR procedures.

A climate free of fear of sanction is required to foster appropriate reports and ensure a fair review of allegations; therefore, any individual who reports an incident of non-compliance will remain confidential and be protected from retaliation. Retaliation against good faith "whistle blowers" is illegal and will not be tolerated at UVa.

Post Approval Monitoring and Education Program

UVa will conduct procedural and record keeping audits of health sciences research involving human subjects for the purpose of detecting, correcting and reporting (as required) administrative and/or material breaches in protecting the rights and welfare of humans in research. These audits are conducted under the Post Approval Monitoring Program located in the AVPR office. In addition, educators from the AVPR office and the School of Medicine Clinical Trials office work with the IRB-HSR to develop educational programs as needed. Additional support in conducting health sciences research is available to researchers at UVa through the School of Medicine Clinical Trials Office.

Education and Training

All researchers and pertinent staff (including the IO and IRB Directors) will receive initial and ongoing education in the general concepts of ethical conduct of research and the protections of humans in research.

Only those researchers and study personnel who have completed all necessary training and who are qualified to perform the specific research interventions identified in the protocol will participate in the conduct of human subject research.

Conflict of Interest

UVa will take steps to identify actual or potential sources of conflict of interest in human subject research and either eliminate, reduce or manage such conflict. Investigators are required to disclose actual or potential research related conflicts of interest to UVa and to the IRB. UVa researchers will abide by the conflict of interest policies and procedures of the Conflict of Interest Committee located within the Office of the Vice President for Research. The IRB and the COI Committee will evaluate such conflicts and, if necessary, determine (1) whether the conflict is permissible in the context of the protocol,

and, if so, (2) whether the conflict warrants disclosure to potential subjects as part of the informed consent process or (3) warrants further management to reduce or eliminate the interest. The IRB or the COI Committee will notify the research team when it determines that an interest must be disclosed and/or further managed.

In addition, during IRB-HSR meetings, board members are asked to declare any conflicts of interest they have and to abstain from voting regarding any research for which they feel themselves to have a conflict of interest.

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Confidentiality of Subjects Participating in Research

As the IRB-HSR serves as the HIPAA Privacy Board for UVa, UVa will ensure that information related to an individual subject's participation in health sciences research is protected and maintained in a confidential manner. No such information will be released beyond the scope of the research staff, the IRB, sponsor, internal monitors or the other appropriate institutional officials without the individual subject's permission, unless otherwise required by law or in response to emergent situations which require such disclosure to minimize harm to the subject or others.

In some studies, subject information may remain confidential and not be disclosed even to the subjects or may be disclosed to the subject only after some period of time. In such studies, the consent form will explain the confidentiality requirements to the subjects.

Authority of the Institutional Review Boards

The oversight of human subject research at the University of Virginia consists of two institutional review boards (IRBs).

- The IRB for Social and Behavioral Sciences (IRB-SBS) reviews all non-medical social and behavioral human research
- The IRB for Health Sciences Research (IRB-HSR) reviews all health sciences research.

The UVa IRBs are charged with a twofold mission:

- (1) to determine and certify that all projects reviewed by the IRB conform to the regulations and policies set forth by all applicable federal, state and local agencies regarding the health, welfare, safety, rights, and privileges, and privacy of human subjects in research; and
- (2) to assist investigators in conducting ethical research in a way that permits the safe accomplishment of the research activity.

The UVA IRB's operate under a Federal-wide Assurance of Protection for Human Subjects (FWA) with DHHS, which is identified by the federal government as FWA 00006183. The IRB's are responsible for the review, prospective approval and continued oversight of all research involving human subjects that is conducted by its students, staff, and faculty or involves the University of Virginia funding or facilities, unless an IRB Authorization Agreement is in place assigning an outside IRB as the IRB of record

The IRBs are comprised of faculty and staff representatives from various academic disciplines at the University of Virginia, non-scientific members, and community representatives who are not affiliated with the University.

The IRBs operate within the federal regulations and guidance with respect to the review and approval of research protocols involving human subjects.

The UVa IRB's are authorized to review and have authority to:

- Approve, modify (to secure approval), or disapprove all human research involving health sciences research conducted by the organization;
- Suspend or terminate research not conducted in accordance with the regulations, statutes and principles or IRB's requirements mentioned above or that has been associated with unexpected serious harm to subjects;

- Observe, or to have a third party observe, the consent process,
- Observe, or have a third party observe, the conduct of the research; and,
- The IRB-HSR will also perform certain functions related to protecting the privacy of protected health information used or disclosed in research, consistent with the requirements of the federal Privacy Rule authorized by the Health Insurance Portability and Accountability Act (HIPAA).

- The IRB-HSR is charged with reviewing requests for waivers of authorization or use of a Limited Data Set as necessary for research involving the protected health information for the research of faculty, students, employees, serving as agents of UVA. [Agents include all individuals (including students) performing institutionally designated activities or exercising institutionally delegated authority or responsibility.]

The IRB's will establish procedures necessary to carry out its responsibilities and ensure ethical conduct of research.

IRB-HSR

The IRB for Health Sciences Research (IRB-HSR) is responsible for the oversight of all health sciences research that involves human subjects (as defined by DHHS and FDA regulations) that is conducted by faculty, staff or students, serving as agents of the University of Virginia, regardless of the location of the research or its source of financial support unless an IRB Authorization Agreement is in place assigning an outside IRB as the IRB of record. In addition the IRB-HSR is appointed as the HIPAA Privacy Board for the University of Virginia.

Procedures for conducting the business of the IRB-HSR may be found in this document, the IRB-HSR Research Guidance, the IRB-HSR Member's Guide and in the IRB-HSR Administrative Guidance Documents.

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Consistent with principles of informed consent and data privacy expressed in ANA Nursing Code of Ethics 3.3.

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All human subject research conducted under the auspices of the IRB-HSR will be performed in accordance with Title 45 Code of Federal Regulations, Parts 46, 160 and 164 and Title 21 Code of Federal Regulations Parts 50, 56, 312, and 812. The IRB-HSR also functions under all applicable Virginia state statutes and regulations, the principles of The Belmont Report and IRB-HSR requirements for the protection of human subjects.

- 45 CFR Part 46-Code of Federal Regulations- Public Welfare: Protection of Human Subjects
 - Subpart A Federal Policy for the Protection of Human Subjects
 - Subpart B Additional Protections for Pregnant Women, Human Fetuses, and Neonates Involved in Research
 - Subpart C Additional DHHS Protections Pertaining to Biomedical and Behavioral Research Involving Prisoners as Subjects
 - Subpart D Additional DHHS Protections for Children Involved as Subjects in Research
- 21 CFR Part 50- Protection of Human Subjects
- 21 CFR Part 56- Institutional Review Boards
- 21CFR312: Investigational New Drug Applications Title 21, Chapter FDA, Part 312
- 21CFR812: Investigational Device Excmptions Title 21, Chapter FDA, Part 812
- 45CFR Part 160 and 164, Standards for Privacy of Individually Identifiable Health Information; Security Standards for the Protection of Electronic Protected Health Information (HIPAA Privacy and Security Rules)

IRB-HSR Chair/Vice Chair

The AVPR appoints the chair, and if needed a vice chair, for the IRB-HSR. These individuals are respected, active members of the University community who are well informed in regulations relevant to human subjects in research. The term of service for the chair is a five year term, renewable only once. The term of the vice-chair is at the discretion of the AVPR. Appointment letters are issued by the Office of the VP for Research and kept on file in the IRB-HSR offices.

The IRB-HSR chair and vice chairs should:

- have experience in conducting human subjects research, have thorough knowledge of federal regulations and state statutes concerning human subjects research, and understanding of University of Virginia research policies, conflict of interest policies and knowledge of ethical guidelines governing research;
- be familiar with the IRB regulations, the IRB-HSR Research Guide, IRB-HSR Member Guide, the IRB-HSR procedures and forms, and the University's Federal Wide Assurance (FWA);
- ensure projects approved are in compliance with DHHS and FDA regulations and the terms of the FWA with OHRP;

**OO19: The
Vice Chair of
UVA IRB-
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RN.**

- review protocol submissions, related consent forms and other supporting materials and evaluate them in terms of criteria for approval or exemption in coordination with the IRB-HSR administrative staff;
- assist the IRB-HSR administrative staff in making protocol assignments for full board and expedited reviews;
- chair IRB-HSR meetings for full board reviews;
- advise Principal Investigators and other research staff at the University of Virginia on requirements regarding research with human subjects in coordination with the IRB-HSR Directors and staff;
- lead educational sessions for investigators and IRB-HSR board members in coordination with the IRB-HSR Directors;
- assist the IRB-HSR Directors in addressing serious and continuing non-compliance incidents;
- keep informed of changes in regulations or interpretation of regulations and current issues; and,
- attend education/ training offerings.

OO19: Both the Director and the Associate Director of UVA IRB-HSR are RNs, as are 2 of the 5 Compliance Coordinators

IRB-HSR Director

The Director of the IRB-HSR is responsible for the overall management of the administrative offices and for overseeing all functions and activities of the IRB-HSR. The Director will work closely with the Chair and Vice Chair of the IRB-HSR to ensure institutional compliance with federal and state regulations and institutional policies and procedures. The Director will also serve as the principal liaison to the Associate Vice President for Research at the University of Virginia. The Director of the IRB-HSR is responsible for communicating IRB-HSR staffing, office and meeting needs to the Associate Vice President for Research.

IRB-HSR Member Designee

Experienced IRB-HSR designees are IRB-HSR members, with sufficient time served with the IRB-HSR and experienced in reviewing submitted research, to act in lieu of the chair or vice-chair in reviewing, determining the status of research or approving research.

The chair designates the vice chair to review and approve all expedited reviews.

Whenever the chair is not available to conduct IRB-HSR business, the chair designates the vice chair to assume his/her responsibilities during the period of his/her absence. Whenever the chair or vice chair is not available to conduct IRB-HSR business, the chair or vice chair may designate a board member to assume his/her responsibilities during the period of his/her absence. A chair determines that a member qualifies as an experienced designee by evaluating one or more of the following:

- their qualifications as a researcher;
- IRB-HSR service; and
- member knowledge of the regulations and guidance concerning human subjects in research.

An IRB-HSR designee may, on occasion, act for the chair in situations that require the absence of the chair, i.e., conflict of interest, business emergencies, etc.

OO19: The Vice Chair of UVA IRB-HSR is an RN - thus, at least one nurse reviews and approves Expedited Review protocols.

By virtue of appointment, all vice chairs are designated by the chair to review and approve research.

Administrative Designee

A chair may designate key members of the IRB-HSR staff to serve as their designee in the following types of situations:

- Review and approve the following review types:
 - Determination of Human Subject Research Submissions
 - Coded, Non-engaged and Exempt Submissions
 - Administrative Certifications of Grant Continuation Reviews
 - Non- UVa Agent Determinations
- Make assignment of protocols, in consultation with the IRB-HSR Chair, to primary reviewers for IRB-HSR meetings;
- Review HIPAA authorizations; and
- Any other tasks as assigned by the chair(s).

A chair determines that an IRB-HSR administrative staff member qualifies as an experienced designee by evaluating their knowledge of IRB-HSR policies, procedures, regulations, and guidance.

Appointment and Service of IRB-HSR Board Members

IRB-HSR members will be appointed utilizing the following criteria:

- IRB-HSR members, with varying backgrounds to promote complete and adequate review of human research activities commonly conducted by the institution, will be appointed for one to three year, renewable terms.
- The IRB-HSR will be composed of no less than five and no more than thirty members sufficiently qualified through their experience, expertise, and diversity, including consideration of race, gender, and cultural backgrounds and sensitivity to such issues as community attitudes, to promote respect for its advice and counsel in safeguarding the rights and welfare of human subjects.
- If the IRB-HSR regularly reviews research that involves a vulnerable category of subjects, such as children, prisoners, pregnant women, or handicapped or mentally disabled persons, the IRB-HSR will include one or more individuals who are knowledgeable about and experienced in working with these subjects.
- The IRB-HSR will not consist entirely of men or entirely of women. Qualified persons of both sexes will be considered so long as no selection is made to the IRB-HSR only on the basis of gender.
- The IRB-HSR will consist of members of various professions including at least one scientist, one nonscientist, and one member who is not otherwise affiliated with the institution, and who is not part of the immediate family of a person who

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Ensures at least one RN is a voting member of IRB-HSR.

is affiliated with the institution (community member). One of the scientist members will always include a registered nurse.

- No IRB-HSR member will be knowingly appointed whose institutional responsibilities conflict or appear to conflict, with the primary goals of the IRB-HSR. This includes, but is not limited to: University Counsel, Office of Sponsored Programs, or the Office of Grants and Contracts, as well as individuals serving as ombudsman.
- Members may serve on the board in a full time position, a shared position (meaning they usually split the position equally) or in an alternate position (meaning they come only when the person in the full time position, for whom they are the alternate, is unable to attend).


Newly appointed members are added to the appropriate IRB-HSR roster. Copies of revised rosters are sent to OHRP and are posted on the IRB-HSR website. At the end of the member's term, the IRB-HSR chair, in consultation with the Associate Vice President for Research if necessary, may extend an invitation for a board member to serve another term.

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Alternates, if appointed, are designated for a specific member. If both the alternate and the member attend a meeting, only one of these two may vote. In these cases, the minutes reflect who is in attendance as a voting member.

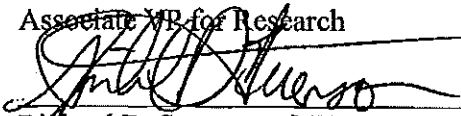
Members of the IRB-HSR may be removed before the end of their term if their participation in IRB-HSR activities is deemed to be inadequate, inappropriate, or damaging to the reputation of the University and its research activities. Removal may be initiated by the AVPR, at the recommendation of the chair of the IRB-HSR, or the chair of the member's department or dean of the college or school the member represents.

Signatures



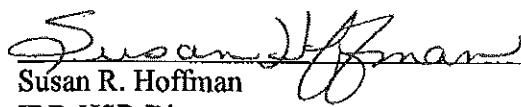
David J. Hudson PhD
Associate VP for Research

5/13/14
Date



Richard D. Stevenson MD
IRB-HSR Chair

5/12/14
Date



Susan R. Hoffman
IRB-HSR Director

5/12/14
Date