# Institutional Review Board Investigator Handbook



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#### **CHAPTER 1: The University of Maryland College Park Institutional Review Board**

# **Purpose**

The purposes of the University of Maryland College Park (UMCP) Institutional Review Board (IRB) are:

- To protect the rights and welfare of human research participants
- To approve the initiation of and conduct periodic reviews of biomedical and behavioral research involving human participant
- To terminate or suspend studies in human participants if indicated.

The UMCP IRB has the authority to approve, disapprove, or require modifications of research activities that fall within its jurisdiction. The UMCP IRB may work in conjunction with other university or institutional committees; however, it reviews research projects independently based upon the principle that human participants will be adequately protected.

# **Authority and Responsibility of the UMCP IRB**

The UMCP IRB operates under a Federalwide Assurance (FWA) (a federal wide assurance program. This is an agreement between the UMCP IRB and the Department of Health and Human Services (DHHS), which outlines the responsibilities of the UMCP IRB for upholding the ethical principles regarding research involving human participants. These principles are outlined in the report of the National Commission for the Protection of Human Participants in Biomedical and Behavioral Research titled, Ethical Principles and Guidelines for the Protection of Human Participants of Research (known as the "Belmont Report").<sup>1</sup>

Normally, the IRB will agree to serve as the institutional review board for other institutions only if a staff member or faculty appointee of UMCP is involved as a Principal or Co-Investigator. However, the IRB will serve any state agency for a specific Project by written request. Formal appropriate agreements between the committee and the requesting institution will be required.

#### **UMCP IRB Meeting Schedule and Submission Deadlines**

The Behavioral and Social Sciences Institutional Review Board (IRB) meets the second Thursday of each month on the UMCP campus. The deadline for submission of projects for IRB review is two weeks prior to the scheduled meeting. Submissions not received in the IRB office by that day and time are held over for consideration at the next meeting. Deadline adjustments can be made at the discretion of the IRB Chair. In addition, official UMCP holidays may sometimes require an adjustment to the meeting dates.

<sup>&</sup>lt;sup>1</sup> The Belmont Report: Ethical Principles and Guidelines for the Protection of Human Subjects of Research: http://www.hhs.gov/ohrp/humansubjects/guidance/belmont.html

#### **CHAPTER 2: IRB Review**

# Scope of IRB Review

IRB review and approval is required for any research involving human participants if a staff member or faculty appointee of the University of Maryland College Park (UMCP) is involved as a Principal Investigator or Co-Investigator. However, the IRB will serve any state agency for a specific project by written request and once appropriate agreements are in place. IRB will review research that meets any of the following criteria: Research conducted or sponsored by faculty, staff, students, or employees of the University of Maryland College Park.

#### **IRB Project Submission Requirements Using IRBNet**

The PI must submit their entire Project to the IRB for review using IRBNet. For assistance with obtaining an IRBNet username and password or for assistance with submitting Project using IRBNet, please contact the IRB office at 301-402-4212.

The documents required for IRB Project Submissions must be uploaded in IRBNet or the submission will not be accepted.

#### **Studies Requiring Review**

All activities that are clearly Human Participant Research, regardless of whether the activity requires full board review or might qualify for one of the expedited or exempt categories, should submit a complete an initial application to the IRB in IRBNet. No Human Participant Research study should be initiated prior to IRB approval.

The IRB has sole authority to determine whether an activity meets the definition of Human Participant Research. Any activity that might represent Human Participant Research should be submitted to the IRB for determination.

All research activities, including those deemed not Human Participant Research, must be carried out in an ethical and respectful fashion in compliance with the principles of the Belmont Report, all state and local laws and institutional policies.

To determine if a study is a human research study, please submit a Human Participant Research Determination Form through IRBNet.

#### **Research Review Requirements**

According to the United States Code of Federal Regulations, 45 CFR 46.102(d), research means a systematic investigation, including research development, testing, and evaluation designed to develop or contribute to generalized knowledge. Examples of research activity may include:

- Surveys
- Interviews
- Behavioral investigations
- Prospective or retrospective reviews
- Experiments with physiological fluids and tissue

Demonstration or service programs

# Research Conducted By "Affiliated Faculty"

Research conducted by "affiliated faculty" -- faculty members who hold clinical or adjunct appointments--is covered by the University's guidelines for research on human participants and must be submitted for IRB review. Any research project that is conducted by or under the direction of any employee or agent of this institution, in connection with his or her institutional responsibilities, requires IRB approval.

# **Research Conducted By Students**

Independent class projects, senior theses, undergraduate research projects, master's and doctoral projects, partial fulfillment of fellowship requirements, and similar exercises utilizing human research must be independently submitted to the IRB by the student/resident-researcher, but an advisor/faculty member ultimately is responsible for the protection of the participants and should be listed as the Responsible Staff Person in IRBNet.

Advisers shoulder the responsibility for students or residents engaged in independent research, and instructors are responsible for research that is conducted as part of a course. Because students and residents are transient, the faculty member sponsor must rigorously defend why they are not the Principal Investigator for such projects.

During the design of a project, advisors and faculty members should instruct students and residents on the ethical conduct of research and help them prepare applications for IRB approval. In particular, students should do the following:

- Understand the elements of informed consent.
- Develop a readable consent form written in the second person and at a level equivalent to an eighth grade education.
- Plan appropriate recruitment strategies for identifying participants.
- Establish and maintain strict guidelines for protecting privacy and confidentiality.
- Allow sufficient time for IRB review and completion of the project during the student or resident's matriculation.
- Complete CITI Training in either Biomedical Research or Social and Behavioral Research for Investigators

After IRB approval, faculty members should take an active role in ensuring that projects are conducted in accordance with the IRB's requirements. One way to meet this responsibility is to meet periodically with students/residents to review their progress and to assist in submitting the continuing reviews required by the IRB.

#### **Research Conducted At Other Institutions**

For a UMCP researcher to participate in a research project at another site, the project needs to be reviewed by the UMCP IRB. Investigators should contact the other institution's IRB to verify whether IRB approval is necessary for their institute.

The UMCP IRB tries to accommodate researchers who work at multiple sites by streamlining the IRB approval process. In some cases, reciprocal review and approval arrangements with the UMCP IRB relieve the Investigator of obtaining the independent approval of two IRBs. For more information, contact the IRB at irb@umd.edu.

Researchers who must submit a project to another IRB should work closely with the UMCP IRB to develop an Institutional Authorization Agreement (IAA). This agreement is a formal document that provides a medium for an institution engaged in research to delegate IRB review to an IRB of another institution. In order to enter into an IAA with another institution, they must have a Federalwide Assurance (FWA) on file with the Office for Human Research Protections (OHRP).

If an Institutional Authorization Agreement is appropriate for your research study, please contact the IRB Office to determine which institution will be the IRB of record (Institution A) and which institution will rely on Institution A's IRB review (Institution B).

In order to begin the process of establishing an Institutional Authorization Agreement, you must have the following items:

- A copy of the approval letter for the project.
- A list of the names, briefly explaining the roles and responsibilities of each UMCP Investigator.
- The authorization agreement signed by the other institution's signatory official first, if they
  are listed as Institution A. Please contact both the IRBs for assistance with obtaining the
  correct signatory official signatures.

#### **Research in Foreign Countries**

Research conducted by UMCP Investigators in foreign countries remains under University purview and guidelines. While the University cannot impose its standards for written documentation on other cultures, it does not relax its standards for ethical conduct or consent process.

The Office for Human Research Protections (OHRP), which provides leadership in the protection of the rights, welfare, and wellbeing of subjects involved in research conducted or supported by the U.S. Department of Health and Human Services (HHS), can determine whether procedures described by a foreign institution afford protections that are at least equivalent to U.S. regulations [45 CFR 46 101 (h)]. Under this provision, OHRP investigates the foreign country's guidelines for human participant research, and if the foreign guidelines are found to be equivalent to U.S. regulations, the Investigator is permitted to substitute those foreign procedures. Researchers proposing international research should allow additional time for this review process.

#### **Research Involving Secondary Use of Data**

Projects that use data on human participants gathered in earlier projects require IRB review. If the data are gathered by someone who has legitimate access to the records and who gives the Investigator only "blinded" or de-identified data (so that the Investigator is unable to identify the participants), the project may qualify as exempt.

#### **Conflicts of Interest Committee**

This Committee reviews disclosures for research involving any actual or perceived conflicts of interest as per institutional policies. The IRB will not review research with a declared financial interest until the Conflicts of Interest Committee has completed its evaluation and any management. The written determination of the Conflicts of Interest Committee, and the reasons for those determinations, will be provided to all IRB members for review at a convened meeting. The Research Compliance Office maintains all the annual disclosures of conflicts of interest and the proposed management plan and will upon request provide the annual conflict of interest disclosure forms to the IRB Director, IRB Chair or their Designee. The IRB Director/Chair/Designee shall have access to conflict disclosures which may assist in forming the basis to ascertain the level of conflict or changes in conflict. If the financial conflict of interest management plan affects the IRB approval criteria, the IRB will not approve the project. The IRB may require the consent to reveal any conflict and management plan, even if the approval criteria are not affected.

#### **CHAPTER 3: Education**

#### **Investigators and Study Staff**

IRB policy is that all Investigators desiring to engage in research using human participants must familiarize themselves with IRB policies and procedures related to federal regulations, and apply for IRB approval before soliciting and working with human subjects. Moreover, investigators should then maintain an ongoing relationship with the IRB to gain assistance in following policies and procedures during the conduct of their studies. This will help assure that both Investigators and the IRB remain in compliance with all state and federal regulations regarding research involving human participants. Please remember that the IRB does not in any way intend to discourage or obstruct investigations, but to work as collaboratively as possible with researchers ensure that their work meets ethical and legal standards.

#### **CITI Training for Investigators**

CITI (Collaborative Institutional Training Initiative) Training is the online human subject research training application utilized by the UMCP IRB. Ongoing education and training in protection of human participants is a federal requirement. Enhanced oversight, new requirements, and recent guidance provided by the Office of Human Research Protections (OHRP) have required actions to strengthen human research protections programs.

#### **Social Behavioral Course**

Principal Investigators, Co-PIs and research team members must complete Social Behavioral CITI Training Course before the Initial Application or Renewal Application can be fully approved, or they must be temporarily removed from the research team until the training has been completed. During the administrative review of these transactions, the IRB Office will be checking the CITI Training database to ensure that training has been completed. CITI Training will not be checked during Addenda transactions unless there are changes being made to the research team.

All members of the research community are required to complete the CITI Training Refresher every three years.

To access CITI, log on to: <a href="www.citiprogram.org">www.citiprogram.org</a> to complete the training. You will be able to create your own user name and password as this is not linked to your UMD ID. Be sure to select UNIVERSITY OF MARYLAND COLLEGE PARK as your institution. If you cannot complete the training in one sitting, you can save and finish at a later time (You can stop and start as many times as you need).

# Financial Conflict of Interest Training (FCOI)

If an Investigator is submitting a proposal to a United States Public Health Service (US PHS) agency, they must complete required FCOI training. To access this training, log on to: <a href="www.citiprogram.org">www.citiprogram.org</a>. Enroll in the "Conflict of Interest Mini-Course." This course and associated quizzes should take 30-60 minutes to complete. If the Investigator pass the quizzes, the training is good for four years. The Investigator will be sent an automatic reminder when their training is due to expire.

# Responsible Conduct of Research (RCR) Training

The National Science Foundation (NSF), by mandate of the United States Congress in the America Competes Act, Section 7009, requires all undergraduate students, graduate students, and postdoctoral researchers supported by NSF research funding to receive training in Responsible Conduct of Research (RCR). All undergraduate students, graduate students, and postdoctoral researchers supported by NSF research funding at the University of Maryland College Park must take the Responsible Conduct of Research course through the online CITI training program or through workshops offered by the Division of Research.

#### **CHAPTER 4: Informed Consent**

#### **Informed Consent Process**

The informed consent process begins with the presentation of the study to the participant and continues until the participant's study participation is completed. Obtaining the signature of the participant on an informed consent document is only one part of the process.

The informed consent process emphasizes that that the participant is competent to understand the purpose and requirement of the research, is volunteering to participate in the research study, and has the ability to withdraw from the study at any time without any adverse effect. The process starts with the exchange of information, usually in an interview setting. The setting and the tone of the interview must be non-coercive. A thorough explanation of the study along with all risks, benefits, and alternatives to participation is essential. The individual must be given an opportunity to ask questions and have those questions satisfactorily answered. The participant must be fully informed in order for consent to be truly voluntary. The informed consent document and other materials are used as a guide to this interview which is documented by the signing of the informed consent document along with a note in the research record.

The information that is given to the participant or the representative should be in language understandable to the participant or the representative.

The IRB has the authority to observe or appoint a designee to observe the informed consent process and conduct of the IRB approved research process.

# **Informed Consent Document Elements**

No Investigator may involve humans as participants in research unless the Investigator has obtained the informed consent of that participant or the participants' legally authorized representative or a waiver has been granted by the IRB. An Investigator will seek informed consent only under circumstances that provide the prospective participant or the representative sufficient opportunity to consider whether or not to participate and that minimizes the possibility of coercion or undue influence. The informed consent document must include the following:

- A clear and concise explanation of the research to be conducted and the procedures to be employed.
- Language appropriate for the targeted participant population (e.g.; eighth grade reading level, English and foreign language versions for a multi-cultural study).
- Clear and precise language detailing all potential risks or discomfort and procedures to minimize such risks, duration of participation, and benefits of participation.
- A statement defining the right of the participant to withdraw at any time without any adverse effect.
- A statement describing alternatives to the proposed research activity, if any exist.

- A statement that the data/information will be kept confidential and how confidentiality will be maintained.
- A statement of whom to contact for answers to pertinent questions about the research and research participants' rights, and whom to contact in the event of a research-related injury to the participant.
- A statement that the participant is fully informed and agrees to participate on a purely voluntary basis.

#### **Informed Consent and Assent Documents**

The informed consent form for an adult must provide signature lines along with dates for the participant. The PI may designate someone to explain the consent and does not have to be present when the participant signs the consent.

If children from 12-17 years of age are participants, signature lines with date should also be provided for the child's assent and for the parent(s) permission. The child's name must be printed on the Parental Consent Form. If the IRB deems the risk of the study in children to be Pediatric Category 3 or 4 (See chapter 5 for explanation of these categories) space for both parents' signatures must be available.

If children from 7-11 are participants, verbal assent, from the child, is required to participate in the study. Assent must be accompanied by the signed informed consent of the parent (parents) or legal guardian of the child. The child's name must be printed on the Parental Consent Form.

The PI must retain the original signed consent form document in the study file and provide a copy to the participant. The PI must retain copies of the completed consent forms for a period of at least seven years following termination of the Project. The IRB may request the PI to maintain a longer storage period for the executed consent form.

Each participant must be given a copy of the signed and dated informed consent document.

For those participants that have a medical record, a copy of the participant's informed consent should be placed in the medical record.

The original should be retained by the Principal Investigator.

#### Waiver of Written Informed Consent

The IRB may waive the requirement for the Investigator to obtain a signed consent for some or all participants [45 CFR 46.117(c)] if it finds that:

The only record linking the participant to the research would be the consent document, and
the principal risk to the participant is the potential harm resulting from a breach of
confidentiality. In that event, each participant should be asked if he/she wishes to have

documentation linking the participant with the research. The participant's wishes will govern.

- The research presents no more than a minimal risk of harm to participants and involves no
  procedures for which written consent is normally required outside of the research context
  (e.g., drawing a blood sample, or asking shoppers in a mall about the ambient lighting or
  temperature). In cases where the requirement of documentation is waived, the IRB may
  require that the Investigator provide the participant with a written statement regarding the
  research.
- The Investigator may request the IRB's ruling on waived consent at the time the Project is submitted.

Waiver of the Requirement to Obtain Prospective Informed Consent from Participants

Federal regulations allow the IRB the ability to grant a waiver from the requirement to obtain any consent from research participants in non-emergency research.

If an Investigator believes neither written nor oral consent can be obtained from any participants without jeopardizing the conduct of the project, arguments to support this position should be articulated in the application.

In order to grant a waiver, the IRB (Full Committee or Chair/Designee) must document that it believes the request meets the following criteria:

- The research involves no more than minimal risk to the participants.
- The waiver will not adversely affect the rights and welfare of the participants.
- The research could not be practicably carried out without the waiver.
- Whenever appropriate, the participants will be provided with additional pertinent information after participation.

#### **CHAPTER 5: IRB Review of Research**

#### Type of IRB Review for Projects

There are three categories of review:

- Exempt
- Expedited
- Full Board Review

#### **Exempt Review**

UMCP requires all human participant research studies meeting, or appearing to meet, one of the Exempt criteria to be submitted through IRBNet for review and approval by the IRB Chair/Designee. No Investigator or Department on campus shall have the authority to make this decision other than the IRB Chair/Designee. All research, including that in the Exempt categories, must meet at a minimum the principles outlined in the Belmont Report. The IRB Chair/Designee may require additional protections to meet these principles, including a level of informed consent appropriate to the research or review by the full committee.

The UMCP IRB requires a Continuing Review each third year in order to keep the Exempt study open. The IRB shall be made aware of any changes in the study scope or design prior to implementation of the changes to insure that the study continues to meet the Exempt Criteria.

• No research involving, or potentially involving, prisoners as participants may be classified under Exempt Categories.

#### **Expedited Review**

Some types of research do not necessitate review by the convened IRB. These types of studies may be approved by the IRB Chair/Designee and reported to the convened IRB at its next meeting.

An expedited review consists of a review of research involving human participants by the appropriate IRB Committee Chair or his/her designee. In reviewing the research, the reviewer may exercise all of the authorities of the full Committee except that the reviewer may not disapprove the research. Additionally, the reviewer may refer the application to the full Committee for a standard review as warranted.

#### **Expedited Review Qualifications:**

- Present no more than minimal risk to human participants. Minimal Risk means that the
  probability and magnitude of harm or discomfort anticipated in the research are not greater
  in and of themselves than those ordinarily encountered in daily life or during the
  performance of routine physical or psychological examinations or tests.
- Not involve the identification of the participants and/or responses which would reasonably
  place them at risk of criminal or civil liability or be damaging to the participants' 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.

#### For Initial Review of an Expedited Project, IRB Chair/Designee must:

- Review materials in sufficient detail in order to determine that the study meets the criteria for approval.
- The Chair or designee must determine that the research meets all criteria above allowing review by the expedited procedure.
- Determine the expedited category into which the study fits and document the category on the Comments section of IRBNET. Twice?
- If the study as designed does not meet any of the expedited categories, the IRB Chair should request modifications from the Investigator that would allow the research to be expedited. If the Chair and Investigator cannot reach agreement, the research will be referred to the convened IRB for review.
- Request an approval letter or modification letter be prepared for signature and will be placed on the meeting agenda as Expedited Actions.

#### **Full Board Review**

All applications except those qualifying for exempt or expedited status will be reviewed by the IRB at one of its convened meetings. However the IRB reserves the right to take any transaction to the full committee. All committee members will have access to the IRB application forms, Project summary, and informed consent documents. The Primary Reviewers will present the Project and issues to the convened IRB for discussion before a vote for approval can be cast.

A quorum (51% of the specific committee's voting membership including the chair) of members, including at least one non-scientific member, must be present for voting purposes on each review. After the vote, the Investigator will be notified in writing regarding the status of the application.

#### Assigning Risk Category and Frequency of Continuing Review

New projects are assigned categories of risk and frequency of continuing review. In order to approve research, the IRB must determine the degree of risk.

Below is the definition of risk categories derived from 45 CFR 46.

# <u>Adult</u>

, · · · ·	ADULT Greater Than Minimal Risk
magnitude of harm or discomfort anticipated in the research is not greater in and of themselves than those ordinarily encountered in daily life or during performance of routine physical or psychological examinations or tests.	•

# **Minor**

Minor/Child	Minor/Child	Minor/Child	Minor/Child
Category 1	Category 2	Category 3	Category 4
Minimal Risk (As defined in the above chart)	Greater than minimal risk, but presenting the prospect of direct benefit to individual participants.	Greater than minimal risk and no prospect of direct benefit to individual participants but likely to yield important generalizable knowledge about the participant's disorder or condition.	-

New projects not eligible for expedited review will be reviewed by at least two IRB members chosen on the basis of expertise with the particular participant matter of the study. These individuals will be responsible for presenting the project to the convened IRB for discussion.

The IRB must deliberate on all studies classified as greater than minimal risk for the purpose of assigning the frequency of continuing review reports. The IRB may decide to review greater than minimal risk studies more frequently than every twelve months.

#### **IRB Review Results**

The IRB will review research Projects and approve, disapprove, or require modifications before approval is granted. Investigators are notified in writing via IRBNET.

If the IRB disapproves a study, it will notify the Investigator of the reasons for the disapproval, and allow the Investigator an opportunity to respond. The Investigator may appeal to the IRB to reverse the decision to disapprove a study, but no other authority may approve a study if the IRB disapproves it.

IRB Review results of new Projects fall into the following categories:

#### **Project Approved:**

The project and its study tools, including the informed consent documents, are approved as submitted. Once the Investigator receives the IRB approval letter, the study may begin.

#### **Project Approved with Conditions:**

The project requires revisions, which the IRB can list as part of the motion. The PI will be provided with comments explaining rationale for the decision and given an opportunity to respond. The revisions may be reviewed by the expedited process.

#### **Project Tabled:**

The project has serious deficiencies in the materials submitted to the IRB. These must be addressed and re-reviewed by the convened IRB before the IRB can grant approval. The PI will be provided with comments explaining rationale for the decision and given an opportunity to respond. The response will be reviewed by the convened IRB. PIs should be aware that the IRB upon receiving the responses to a tabled motion may have additional requested revisions.

# **Project Disapproved:**

The project has serious deficiencies in submitted project affecting the safety and welfare of the projected participant population. These must be addressed in a new project and be reviewed by the convened IRB before the IRB can grant approval. The PI will be provided with comments explaining rationale for the decision and given an opportunity to respond. The response will be reviewed by the convened IRB.

#### **Notification of Investigators Following Review**

The IRB Office, through IRBNet, notifies each Investigator of the review of their initial project submission, correspondence received by the IRB office, project activities reported at the IRB meeting, and continuing review process. The notification should be issued within 7 business days and outline the IRB actions and any further issues which must be addressed by the Principal

Investigator. Upon receipt of that notification the PI, or designee, should make the required corrections, modifications, or resubmission of a new project through IRBNet.

# **Notification of Institutional Officials**

The minutes of the IRB meetings reflect summarized discussion of Project issues and documentation of the vote on each IRB action. Upon request, a copy of the IRB minutes will be sent to the Vice President and Chief Research Officer.

#### **CHAPTER 6: Continuing Review**

# **Continuing Review Summary Information**

All full and expedited human research projects approved by the IRB are required to undergo substantive continuing review at least once a year. Studies classified as Exempt must submit a continuing review every three (3) years. The Office for Human Research Protections (OHRP) and the FDA require periodic re-evaluation by the IRB of all approved research at intervals appropriate to the study's degree of risk.

Continuing Review must occur at least once per year for fully and expedited reviewed projects, but the IRB may require more frequent reviews. There is absolutely **no grace period.** If Continuing Review approval expires, the study no longer has approval. All interactions with participants and/or their data must cease and the Investigator should immediately contact the IRB regarding the treatment of enrolled participants.

The IRB may determine that the degree of risk warrants a more frequent review in order to protect human participants from harm. Some projects can be reviewed on a quarterly or six-month review cycle, but the approval period will never exceed one year.

For studies where continuing review approval has expired and only upon PI request, the IRB will determine on a case-by-case basis if it is appropriate for safety reasons to allow continued interactions and/or interventions with currently enrolled participants. A notice is sent to the PI. The study will be terminated 30 days after study suspension notification if no response has been received from the Investigator.

If the IRB's review of a project requiring continuing review results in termination, a new IRB application may be required to continue with the research. No new participants may be enrolled, all ongoing research activities must stop, and participants currently participating should be notified that the study has been terminated. The regulations make no provision for any grace period extending the research beyond the date the continuing review expires.

Termination notices due to non-compliance with the federal regulations for continuing review will be sent to the PI, the Department Chair, and the Office of the Vice President and Chief Research Officer. The IRB must also notify study sponsors, the FDA and OHRP (if the studies are government funded).

#### **How Is The Continuing Review Date Determined?**

DHHS regulations at 45 CFR 46.108(b) and 109(e) require, respectively, that (1) except when an expedited review procedure is used, each IRB must review proposed research at convened meetings at which a majority of the members of the IRB are present, including at least one member whose primary concerns are in nonscientific areas; and (2) an IRB must conduct continuing review of research previously approved by the full board or in an expedited at intervals appropriate to the degree of risk, but not less frequently than once *per* year. The IRB should decide the frequency of

continuing review for each study Project necessary to ensure the continued protection of the rights and welfare of research participants.

Continuing Review reminder notices are sent via electronic mail to the PI before the continuing review expiration date. At 60, 45, 30 and 15 days before the end date, an email will sent alerting PIs to have the continuing review submitted before the end date.

However, the PI remains ultimately responsible for obtaining continuing review, and should not depend solely on IRB notification as a prompt for submitting the Continuing Review (CR). Investigators are advised to submit Continuing Reviews 30-45 days prior to expiration to allow sufficient time for processing the report prior to the project's expiration.

It is important to remember that there is no grace period. Continuing Reviews do not lapse – they expire. If Continuing Review Approval expires, all study activity must cease (not just new participant enrollment), and the IRB must be contacted.

The IRB utilizes the Primary Reviewer system in conducting continuing reviews. A minimum of one reviewer will facilitate the review among the committee members. The Primary Reviewer and the entire committee will have access to the Continuing Review Report.

The Primary Reviewer will present criteria required for review to the convened IRB with discussion of the Project before a vote for continuing approval can be made. The IRB will vote separately on each continuing review. The vote will be recorded in the meeting minutes.

Continuing review may be conducted by expedited review only when the study falls into one of the expedited review categories and is minimal risk. Expedited review may also be used for continuing review if a study has been closed to accrual and intervention has been completed, but the Investigator is still collecting follow-up data.

#### **Continuing Review Submission (Full Board)**

# For Continuing Review of a Project, Investigator must:

Submit in IRBNet a Continuing Review Report as well as any consent forms to be used over the next approval period.

Any continuing review presenting greater than minimal risk will be reviewed at the full committee.

# **Expedited Continuing Review**

#### Continuing review of research may be expedited if one of the following criteria is met:

Meet the criteria for initial review by an expedited procedure;

- Be permanently closed to the enrollment of new participants, where all participants have completed all research-related interventions; and the research remains active only for long-term follow up of participants; or
- No participants have been enrolled and no additional risks have been identified;
- The remaining research activities are limited to data analysis;
- The IRB has determined and documented at a full committee convened meeting that the research involves no greater than minimal risk and no additional risks have been identified.

#### **CHAPTER 7: Amendments**

#### **Project Amendments**

During the course of a research activity, the sponsor and Investigator may decide that elements of the research require modification. If an Investigator or sponsor finds it necessary to deviate in any way from an IRB approved Project, consent forms, or eligibility requirements, an amendment or request in writing to the IRB must be submitted with the changes highlighted. If a change affects the approved consent form, it will be necessary to submit a revised consent with changes highlighted. The Project amendments will be considered by the fully convened IRB for greater than minimal risk. The IRB Chair/Designee may review an amendment by an expedited procedure if certain criteria are met. (See below).

Changes in the research may not occur until IRB approval of the amendment is received unless there is an immediate threat to the health of the participant. If such a situation were to occur, it would be the PI's responsibility to immediately report the event to the IRB as a Project deviation and serve notice that an amendment to the Project will be forthcoming.

Major changes to an existing Project, such as a change in the aim of the study, or the degree of risk to the participant may require that a new Project be submitted (usually with a new title) and the old Project be closed. This will be determined by the IRB Office.

Any changes or amendments to an already approved Project must be submitted for review and approval by the IRB prior to initiation unless a serious safety issue exists.

# **Expedited Amendments**

#### Amendments to a Project can be expedited if one of the following criteria is met:

- Does not materially affect an assessment of the risks and benefits of the study.
- Does not substantially change the aims or design of the study.
- Is not directly relevant to the determinations required for approval.

#### **Amendment Submissions**

#### For Modifications/Amendments of a project, Investigator must:

• Submit in IRBNet an Amendment form including all updated documents.

#### **CHAPTER 8: Research Participants**

# **Specifying the Number of Research Participants**

The IRB is required to protect participants from the first contact for possible recruitment. All participants who go through the recruitment process even if they fail screening or decline participation at a later date must be accounted for. Thus, total accrual is the number of participants to go through the consent process. *Initial requests for participant accrual should be large enough to reflect accurate accrual goals plus any screen failures and anticipated drop-out rates.* 

The application must specify the number of study participants to be accrued, grouped by age, gender, and population diversity. *Exceeding the accrual limits approved by the IRB is a violation of the project.* The IRB must give prior written approval for any increase in participant accrual.

If over enrollment occurs, the Investigator must do the following:

- Submit a corrective action plan, that will be implemented, to ensure that over enrollment does occur in the future.
- Add a statement requesting the ability to use the information of the over recruited participants in the data analysis and writing phase of the study.
- Provide a justification explaining why data from the over enrolled participants is deemed necessary for the scientific integrity of the study.

Multi-center studies, in which data will be pooled and recruitment may vary, present a special problem for Investigators. The application should provide information about the total picture, including both the number of participants to be studied locally and the number studied at all sites.

#### **Recruitment of Study Participants**

The UMCP IRB is responsible for ensuring the equitable selection of research participants with the proper safeguards in place to protect the rights and welfare of the participants. In fulfilling this responsibility, the UMCP IRB will review the methods and materials that investigators use to recruit participants.

No matter the method chosen to identify potential research participants, provisions must be in place to protect the individual's right to privacy.

Contacting primary care providers (PCP) for access to potential participants from the patient population of the PCP is another method of potential recruitment. This would require IRB approval prior to initiation and the PCP may be participant to HIPAA restraints that would prevent him/her from sharing Protected Health Information (PHI) with the Investigator.

Searching Medical Records or other Databases of Patient information looking for potential participants requires IRB approval prior to the search. (**NOTE**: A search to find out if a patient

population exists in anticipation of a research project would not be considered recruitment provided no identifying information was retained to be used later.)

# **Women and Minorities in Study Populations**

The study plan should be designed so that research benefits and burdens are fairly distributed. If an individual or group is denied access to a project that might be beneficial or if some people are singled out to bear the burden of risks associated with a study, the requirement for fairness is not met.

In accordance with the policies of the National Institutes of Health, the IRB requires researchers applying for federal funds to give breakdowns of their participant populations by gender and minority group. Studies with the potential to address issues relevant to both sexes must recruit both genders, and minority populations should be included in a study population wherever feasible. Researchers must justify the exclusion of any group of individuals. The IRB may make exceptions if there is adequate scientific justification for exclusion, such as when a disease predominates in one gender or the focus of the research question is on a specific group.

#### **Students as Research Participants**

When students are to be accrued for research, consent must state that students are allowed to refuse participation or withdraw early from a study without affecting their academic standing at UMCP. An alternative way to protect against coercion is to require that Faculty-Investigators advertise for participants generally (e.g., through notices posted in the school or department) rather than recruit individual students directly. As with any research involving a potentially vulnerable participant population, the IRB will pay special attention to the potential for coercion or undue influence and consider ways in which the possibility of exploitation can be reduced or eliminated.

Confidentiality is a concern raised by the involvement of students as participants in research. The IRB will consider that research involving the collection of data on sensitive participants such as mental health, sexual activity, or the use of illicit drugs or alcohol presents risks to participants of which they should be made aware and from which they should be protected to the greatest extent possible.

#### **Employees as Research Participants**

The issues with respect to employees as research participants are essentially identical to those involving students as research participants: coercion or undue influence, and confidentiality. Employee research programs raise the possibility that the decision will affect performance evaluations or job advancement. When employees are to be accrued for research, consent must state that employees are allowed to refuse participation or withdraw early from a study without affecting the conditions of their employment at the university.

#### **Advertising for Participant Recruitment**

Studies may require the use of print, television, Internet, or radio advertisement in order to accrue the participant population. Advertisements used for recruitment of participants to participate in

research Projects must be submitted to and approved by the IRB prior to use. Any type of advertising for research participants that is intended to be seen or heard by possible participants is considered to be part of the participant selection process. The IRB must review both the information contained in the advertisement and the mode of its communications.

Information placed on a website for the purposes of study recruitment must receive prior approval from the IRB.

Advertisements should not be coercive and should not state or imply a certainty of favorable outcome or other benefits beyond what is outlined in the consent document and the Project. No claims should be made, either explicitly or implicitly, that the drug, biologic, or device is safe or effective for the purposes under investigation, or that the test article is known to be equivalent or superior to any other drug, biologic, or device. Such representation would not only be misleading to potential participants but would also be a violation of the FDA regulations concerning the promotion of investigational drugs and investigational devices.

# Generally, any advertisement: print, electronic, or other media, to recruit participants should be limited to:

- The name and address of the Principal Investigator and/or the research facility.
- The purpose of the research and that it is in fact research.
- The eligibility criteria that will be used to admit participants to the study.
- A straightforward and truthful description of the benefits or burdens to the participant for participating in the study.
- The time or other commitment required from the participant.
- The location of the research and the person to contact for further information.

#### Advertisements, regardless of form, may not:

- Be Misleading or Coercive either in wording or visual effects.
- Promise a Favorable Outcome.
- Promise "Free Medical Treatment" if the intent is simply that there is no charge to partake in the research project.
- Imply any benefits beyond what is outlined in the consent and Project.
- Use terms such as "New Treatment", "New Drug", "New Medication" without explaining that the test article is investigational.

- Emphasize amount of payment for participation.
- Make claims, either explicitly or implicitly, that a drug or device is safe or effective for the purposes under investigation, or that the drug or device is in any way equivalent or superior to any other drug or device.

#### **CHAPTER 9: Vulnerable Populations**

# **Research Involving Vulnerable Populations**

Certain groups of human participants are considered to be particularly vulnerable to coercion or undue influence in a research setting. These groups and their special attention during the research process are outlined in 45 CFR 46.111(b) and 21 CFR 56.111(b). The regulations identify additional requirements for review and approval of research involving fetuses, pregnant women, and human *in vitro* fertilization, 45 CFR 46 Subpart B, prisoners, (45 CFR 46 Subpart C), and children, (45 CFR 46 Subpart D).

The following groups of human participants are considered Vulnerable Populations. However this list is not exhaustive:

- Children
- Wards of the State
- Prisoners
- Pregnant Women and Fetuses
- Persons Who Are Mentally Disabled or Otherwise Cognitively Impaired

Other Potentially Vulnerable Populations:

- Minorities
- Economically or Educationally Disadvantaged Participants
- Illiterate English Speaking Participants
- Employees as Participants
- Students as Participants
- Non-English-Speaking Participants
- Terminally III Participants

In reviewing research projects involving all categories of vulnerable participants, the IRB must ascertain that their use is adequately justified and that additional safeguards are implemented to minimize risks unique to each group. A summary of the additional requirements for review and approval of research involving children, prisoners, and pregnant women and fetuses is presented below.

#### **Research Involving Children**

To safeguard their interests and to protect them from harm, special ethical and regulatory considerations apply for reviewing research involving children. The IRB may approve research involving children only if special provisions are met in addition to the other criteria required for approval. The IRB must classify research involving children into one of four categories and document their discussions of the risks and benefits of the research study.

Federal regulations (Title 45 CFR 46, Subpart D) require that Investigators explicitly address the measures taken to protect the rights and welfare of children participating in Projects.

# **Definition of Children**

"Children" are defined as "persons who have not attained the legal age for consent to treatments or procedures involved in the research, under the applicable law of the jurisdiction in which the research will be conducted." 45 CFR 46.402(a).

In Maryland, children include all those who have not yet reached their 18th birthday and have not been legally emancipated. Emancipation may be obtained through judicial decree or based upon certain events such as marriage or military service. Marriage or military service does not automatically emancipate an individual and Investigators should seek guidance from the IRB Office, if the issue arises.

# **Categories of Research Involving Children**

45 CFR 46, Subpart D, classifies research involving children into one of four categories depending upon the risks and benefits of the proposed research, which can be approved as follows:

CATEGORY OF RISK TO THE CHILD	CONSENT REQUIREMENTS
Pediatric Risk Category I: Minimal Risk	One parent/guardian permission
Pediatric Risk Category II:	One parent/guardian permission
Greater than minimal risk, but presenting the prospect of direct benefit to individual participants.	
Pediatric Risk Category III:  Greater than minimal risk and no prospect of direct benefit to individual participants but likely to yield important generalizable knowledge about the participant's disorder or condition.	Both parents' permission, unless one is not reasonably available, deceased, unknown, legally incompetent, or does not have legal responsibility for care of the child.
Pediatric Risk Category IV:  Otherwise not approvable, but presents an opportunity to understand serious health or welfare problems of children.	Generally not approved, requires a panel of experts.

#### **Investigators should:**

Design research projects involving children in accordance with this policy, making provisions to obtain the assent of all children over the age of 7. If the study population is such that the children will not be able to provide assent at the age of 7 or at all, the Investigator should specify this in the assent provisions of the application. Identify in IRBNet the pediatric category of research that the Investigator feels the project best meets and upload permission and/or assent documents. (See Table Above)

**Pediatric Risk Category I:** Research Not Involving More Than Minimal Risk. When the IRB finds that no greater than minimal risk to children is present, the IRB may approve the proposed research only if the IRB finds that adequate provisions are made for soliciting the assent of the children and the permission of their parents or guardians, as set forth below.

Prospect of Direct Benefit to the Individual Participants. If the IRB finds that more than minimal risk to children is present by an intervention or procedure but that the intervention or procedure holds out the prospect of direct benefit for the individual participant, or by a monitoring procedure that is likely to contribute to the participant's well-being, the IRB may approve the research only if the IRB finds that:

- The risk is justified by the anticipated benefit to the participants;
- The relation of the anticipated benefit to the risk is at least as favorable to the participants as that presented by available alternative approaches; and
- Adequate provisions are made for soliciting the assent of the children and permission of their parents or guardians, as set forth below.

Pediatric Risk Category III: Research Involving Greater than Minimal Risk and No Prospect of Direct Benefit to Individual Participants, but Likely to Yield Generalizable Knowledge about the Participant's Disorder or Condition. If the IRB finds that more than minimal risk to children is presented by an intervention or procedure that does not hold out the prospect of direct benefit for the individual participant, or by a monitoring procedure which is not likely to contribute to the well-being of the participant, the IRB may approve the research only if the IRB finds that:

- The risk represents a minor increase over minimal risk;
- The intervention or procedure presents experiences to participants that are reasonably commensurate with those inherent in their actual or expected medical, dental, psychological, social, or educational situations;
- The intervention or procedure is likely to yield generalizable knowledge about the participants' disorder or condition which is of vital importance for the understanding or amelioration of the participants' disorder or condition; and

 Adequate provisions are made for soliciting assent of the children and permission of their parents or guardians, as set forth below.

Pediatric Risk Category IV: Research Not Otherwise Approvable Which Presents an Opportunity to Understand, Prevent, or Alleviate a Serious Problem Affecting the Health or Welfare of Children. If the IRB does not believe the research proposal meets any of the requirements set forth above, it may still approve the Project but only if:

- The IRB finds that the research presents a reasonable opportunity to further the understanding, prevention, or alleviation of a serious problem affecting the health or welfare of children; and
- The Secretary of the Department of Health and Human Services or The Commissioner of Food and Drugs, as applicable, after consultation with a panel of experts in pertinent disciplines (for example: science, medicine, education, ethics, law) and following opportunity for public review and comment, has determined either that the research in fact meets one of the categories set forth above, or all of the following:
  - The research presents a reasonable opportunity to further the understanding, prevention, or alleviation of a serious problem affecting the health or welfare of children;
  - The research will be conducted in accordance with sound ethical principles; and
  - Adequate provisions are made for soliciting the assent of children and the permission of their parents or guardians, as set forth below.

#### **Assent of Children**

"Assent "means a child's affirmative agreement to participate in research. A child who fails to object to participation is not necessarily assenting to participation. Assent is not passive. "Permission" is the agreement of parent(s) or guardian(s) to the participation of their child or ward in research.<sup>2</sup>

The IRB must determine for all studies involving children:

- The age of participants where assent is required.
- How and at what age assent is to be documented.

Assent must be accompanied by the signed informed consent of the parent (parents) or legal guardian(s) of the child. The Investigator must also inform the child of the purpose and the voluntary nature of their participation. This must be modified to the child's age and ability to

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<sup>&</sup>lt;sup>2</sup> Maryland Minor Consent Laws, October 26, 2012

comprehend. The following are guidelines for age ranges in obtaining assent from children. These guidelines are recommended and are not intended to replace any institutional policies and procedures regarding the assent of children.

Children younger than 7 years of age:

If appropriate as determined by the child's age and cognitive development, the Investigator should administer a simple oral explanation of the study procedures to be conducted to which the child must agree.

Children 12 years of age and less than 18 years of age:

Written assent must be obtained from the child if it is an IRB requirement. Assent of a child should be obtained in the presence of a parent/legal guardian and witness.

The IRB encourages the Principal Investigator to submit classification information related to the study's risk category, age required for assent, and method of assent documentation in the initial study submission packet.

The IRB's purpose is not to demand adherence to rigid criteria based solely on age, but to use the age ranges above as guidelines for approaching children after taking into account their emotional and cognitive development. For all children, but especially those with developmental disorders, the age ranges listed above refer to the cognitive rather than the chronological age.

The IRB reserves the right to require both parents' permission on selected Projects if the committee waives child assent or if additional requirements from the PI are deemed necessary by the convened IRB. The IRB may consider a request from that PI that the permission of one parent is sufficient for research involving greater than minimal risk, if there is a clear prospect of direct benefit to the child-participant.

The requirements of parental permission may be waived in those cases where it is clear that the parents' interests do not adequately reflect the child's interests (e.g., research on child abuse or neglect). These research Projects require Investigators to develop special procedures, which must be approved by the convened IRB that protects the rights and welfare of the children asked to participate.

#### **No Exempt Review**

Unlike research involving adults, the exemption at 45 CFR 46.101(b)(2) for research involving survey procedures, interviews, educational tests, or public observations (except where the Investigator does not participate in the activities being observed) does not apply to research involving children. 45 CFR 46.401(b).

#### **Child Abuse Reporting**

The State of Maryland requires the reporting of suspected child abuse or neglect. Investigators must abide by this law. If the Project involves interviewing children about topics that might lead to a suspicion or to knowledge on the part of the Investigator of child abuse or neglect, the child (and parent or guardian) must be informed of the reporting requirement as part of the informed consent process.

The following sentence(s) should be integrated into the currently required Informed Consent Document among the statements about confidentiality and its limits:

"Possible exceptions to confidentiality include cases of suspected child abuse or neglect. If there is reason to believe that a child has been abused or neglected, we are required by law to report this suspicion to the proper authorities."

#### Wards of the State

Children who are wards of the state or any other agency, institution, or entity can be included in IRB research only if the IRB finds and documents that such research is: (1) related to their status as wards; or (2) conducted in schools, camps, hospitals, institutions, or similar settings in which the majority of children involved as participants are not wards.

If the research is approved, the IRB must require appointment of an advocate for each child who is a ward, in addition to any other individual acting on behalf of the child as guardian. One individual may serve as advocate for more than one child. The advocate shall be an individual who has the background and experience to act in, and agrees to act in, the best interests of the child for the duration of the child's participation in the research and who is not associated in any way (except in the role as advocate or member of the IRB) with the research, the Investigator(s), or the guardian organization.

A foster parent may NOT give permission for a ward of the state to participate in research. Such permissions must be obtained through the Maryland Department of Human Resources.<sup>3</sup>

# **Emancipated Minors**

In Maryland, children include all those who have not yet reached their 18th birthday and have not been legally emancipated. Emancipation may be obtained through judicial decree or based upon certain events such as marriage or military service. Marriage or military service does not automatically emancipate an individual and Investigators should seek guidance from the IRB office, if the issue arises. Consent is sought from an emancipated minor; not assent.

<sup>3</sup> Maryland Department of Human Resources Social Services Administration, *Use of Human Subjects in Research and Research Related Activities*, July 1, 2010

#### **Research Involving Prisoners**

The special vulnerability of prisoners makes consideration of involving them as research participants particularly important. Prisoners may be under constraints because of their incarceration, which could affect their ability to make a truly voluntary and un-coerced decision whether or not to participate as participants in research. To safeguard their interests and to protect them from harm, special ethical and regulatory considerations apply for reviewing research involving prisoners.

Therefore, if a Project involves the use of prisoners as participants, or a participant becomes incarcerated after enrollment, both the general IRB Policies and the special ones outlined in this Policy apply. The IRB may approve research involving prisoners only if these special provisions are met.

#### No Exempt Review of Research Involving Prisoners

Research that would otherwise be exempt from the requirement that it receive IRB approval is not exempt when the research involves prisoners.

#### **Applicability of Policy Providing Special Protections for Prisoners**

This policy applies to anyone using the UMCP IRB as the IRB of record in research involving prisoners.

# Categories of Research Involving Prisoners [45 CFR 46.306(a)]

- Studies regarding the possible causes, effects, and processes of incarceration, and of criminal behavior, provided that the study presents no more than minimal risk and no more than inconvenience to the participants.
- Studies of prisons as institutions, or of prisoners as incarcerated persons, if those studies present no more than minimal risk or inconvenience to the participants.
- Research on conditions affecting prisoners as a class after DHHS publishes a notice in the federal register.
- Research on practices that are intended, and reasonably likely, to enhance the well-being of
  the participants; however, if some of the prisoners will be assigned to control groups which
  will not benefit from the research, then the study must first be approved by DHHS.

In addition to the general requirements for review, in reviewing prisoner research, IRBs are required by 45 CFR 46.305(a) to ensure that:

The membership of the IRB reviewing the Project includes a prisoner or a prisoner representative with appropriate background and experience to serve in that capacity, and that the majority of the IRB is not associated with the penal institution involved. If no current member of the IRB meets the prisoner or prisoners' representative criteria, then the IRB Chair will identify and recruit a qualified individual to fulfill this requirement and advise

the IRB. In addition, a majority of the IRB members at the meeting must not be associated with the prison.

- Any advantages that prisoners will realize as a result of participating in the research, when compared to the general living conditions within the prison, are not so great as to impair each prisoner's ability to weigh the risks and benefits of participation and freely choose whether to participate.
- The risks involved in the research are commensurate with risks that would be accepted by non-prisoner volunteers.
- Procedures for selecting participants are determined to be fair and free from arbitrary manipulation by prison authorities or prisoners.
- Control participants will be selected randomly from among the group of eligible volunteers, unless the PI justifies a different procedure.
- The information presented during the recruitment and consent procedures is in a language, and level of complexity, that is understandable to the participant population.
- The parole board will not take participation in the study into account, and that each prisoner will be informed that participation will have no effect on parole or release.
- Adequate provision will be made for follow-up care as necessary.

# Prisoner Research Update - Epidemiological Research

Certain parts of 45 CFR 46 Subpart C were waived by DHHS to allow DHHS to conduct or support certain important and necessary epidemiologic research on prisoners that presents no more than minimal risk and no more than inconvenience to the prisoner participants. The Secretary of DHHS specifically proposed waiving the applicability of 45 CFR 46.305(a)(l) and 46.306(a)(2) for certain research conducted or supported by DHHS that involves epidemiologic studies that meet the following criteria:

- 1. In which the sole purposes are:
  - (a) To describe the prevalence or incidence of a disease by identifying all cases, or
  - (b) To study potential risk factor associations for a disease, and
- 2. Where the institution responsible for the conduct of the research certifies to the Office for Human Research Protections, DHHS, acting on behalf the Secretary, that the IRB approved the research and fulfilled its duties under 45 CFR 46.305(a)(2)–(7) and determined and documented that:
  - (a) The research presents no more than minimal risk and no more than inconvenience to the prisoner-participants, and
  - (b) Prisoners are not a particular focus of the research.

The specific type of epidemiological research conducted or supported by DHHS and participant to the waiver involves no more than minimal risk and no more than inconvenience to the human participant participants. The proposed waiver would allow DHHS to conduct or support a type of minimal risk research that does not now fall within the categories set out in 45 CFR 46.306(a)(2)."

The range of studies to which the proposed waiver applies includes epidemiological research related to chronic diseases, injuries, and environmental health. This type of research uses epidemiologic methods (such as interviews and collection of biologic specimens) that generally entail no more than minimal risk to the participants.

# **Minimal Risk Definition for Prisoner Research and Non-Prisoners**

The federal regulations list a different definition of minimal risk for prisoners in research from non-prisoners in research. The following information is from the <u>OHRP Guidance on the Involvement of Prisoners in Research</u> dated May 23, 2003:

Definition of Minimal Risk in Prisoner Research	Definition of Minimal Risk in 45 CFR part 46,
45 CFR 46.303(d)	subpart A, 45 CFR 46.102(i) (Non- Prisoners)
"Minimal risk" is the probability and magnitude of <b>physical</b> or <b>psychological</b> harm that is normally encountered in the daily lives, or in the routine medical, dental, or psychological examination of <b>healthy persons</b> ."	"Minimal risk means that the probability and magnitude of harm or discomfort anticipated in the research are not greater in and of themselves than those ordinarily encountered in daily life or during the performance of routine physical or psychological examinations or tests."

**PLEASE NOTE**: Do not enroll a prisoner in an ongoing, IRB approved study without the approval of the committee. If a study participant becomes a prisoner during the course of the research, notify the IRB immediately.

## **Research Involving Cognitively Impaired Individuals**

The participation of cognitively impaired individuals in research typically falls in categories that cannot be reviewed using exempt procedures. In addition, projects involving cognitively impaired individuals must specifically address how an individual's capacity to give informed consent will be determined. Examples of cognitive impairment include: diagnosed mental retardation, dementia, mental illness and coma.

The IRB is not in a position to determine if an individual identified with a cognitive impairment has the capacity to give informed consent. The use of an evaluation to sign consent document may be necessary.

# Legally Authorized Representative (LAR)

In Maryland, in addition to other persons as may be authorized and empowered, the legally authorized representative for another person, for purposes of providing consent for research prescribed or directed by a licensed physician, is any one the following, which may involve:

- 1. Any parent, whether an adult or a minor, for his minor child or adult child of unsound mind. Child as used here includes biological, adopted, step, or foster children. The father of an illegitimate child, however, cannot consent for the child solely on the basis of parenthood;
- 2. Any person standing in loco parentis, whether formally serving or not;
- 3. Any guardian, conservator, or custodian, for his ward or other charge under disability;
- 4. Any adult for a minor sibling or adult sibling of unsound mind;
- 5. If an authorized parent is absent, any maternal grandparent and, if the father is an authorized parent, any paternal grandparent, for a minor grandchild or for an adult grandchild of unsound mind;
- 6. Any married person, for a spouse of unsound mind; or
- 7. Any adult child, for their mother or father of unsound mind.

## Other Potentially Vulnerable Populations

# **Economically or Educationally Disadvantaged Participants**

For research involving economically disadvantaged participants, special care must be taken to assure that the financial inducements offered do not constitute the sole grounds for the participant's participation in the research Project. Financial inducements should also not be used to assume risks that participants would not ordinarily incur.

The consent form for research involving educationally disadvantaged participants should be written with special attention to assure that terminology has been sufficiently simplified. The Investigator should discuss orally every aspect of the study with the participants to insure their understanding.

### **Illiterate English Speaking Participants**

An Investigator in an IRB approved study may enroll individuals who can speak and understand English, but cannot read or write. The potential participant must be able to place a written mark on the consent form.

The participant must also be able to:

- Comprehend the concepts of the study and understand the risks and benefits of the study as it is explained verbally.
- Be able to indicate approval or disapproval for study enrollment.

If an Investigator uses the above method to obtain consent, there must be documentation on the participant's consent form specifying what method was used to communicate the information and the specific means that the participant communicated agreement to study participation.

## **Non-English-Speaking Participants**

Non-English-Speaking participants may not be excluded from research on the basis of language use if there is a possibility that they might benefit by participating in the study.

If a research participant does not understand English, the informed consent document should be in the language readily understood by the participant to meet the requirements of 21 CFR 50.20. If the Principal Investigator anticipates that consent interviews will be routinely conducted in a language other than English, the IRB requires a translated consent document be submitted with the original Project for approval. It is the Investigator's responsibility to ensure that the translation is accurate.

As required by 21 CFR 50.27, a copy of the consent document must be given to each participant. While a translator may be helpful in facilitating conversation with Non-English- Speaking participants, verbal translation of the consent document must not be substituted for a written translation.

## **Terminally III Participants**

Terminally ill patients are those who are deteriorating from a life-threatening disease or condition for which no effective standard treatment exists. It is generally considered unacceptable to ask such persons to participate in research for which alternative, not similarly burdened, populations of participants exist. Nevertheless, it may often be necessary to involve terminally ill patients in research concerning their disease and its treatment. Further, terminally ill persons should not be excluded from research in which they may want to participate simply because of their status. One can imagine that altruism and a desire to bring good from adversity may well motivate persons suffering from life-threatening illnesses to become involved in biomedical or behavioral research. Still, terminally ill individuals are a vulnerable population of research participants, and, therefore, require additional protection against coercion and undue influence.

## **Elderly Participants**

Aside from the regulatory requirement that IRBs provide additional protections for especially vulnerable persons, there are no specific regulations governing research with elderly participants. The elderly are, as a group, heterogeneous and not usually in need of special protections, except in two circumstances: cognitive impairment and institutionalization. Under those conditions, the same considerations are applicable as with any other, non-elderly participant in the same circumstances.

#### Institutionalization

In the past, persons in nursing homes or other institutions have been selected as participants because of their easy accessibility. However, conditions in institutional settings increase the chances for coercion and undue influence because of the lack of freedom inherent in such situations. Research in these settings should therefore be avoided, unless the involvement of the institutional population is necessary to the conduct of the research (e.g., the disease or condition is endemic to the institutional setting, persons who suffer from the disease or condition reside primarily in institutions, or the study focuses on the institutional setting itself).

#### **IRB Considerations**

When a research study is undertaken at a nursing home or similar institutions, all necessary parties are informed and all documentation is maintained in a manner that meets all local, state, and federal research requirements.

# **CHAPTER 10: Payment/Reimbursement of Research Participants**

## **Participant Compensation**

Compensation or payment to research participants for participation in studies is not considered a benefit. Rather, it should be considered compensation for time and inconvenience. The amount and schedule of all payments should be presented to the IRB at the time of initial review.

# **Timing of Payments**

Credit for payment should accrue as the study progresses and not be contingent upon the participant completing the entire study. The participant should be paid in proportion to their time and inconvenience as a result of participation in the research study. Unless it creates undue inconvenience or a coercive practice, payment to participants who withdraw from the study may be paid at the time they would have completed the study (or completed a phase of the study) had they not withdrawn. For example, in a study lasting only a few days, an IRB may find it permissible to allow a single payment date at the end of the study, even to participants who had withdrawn before that date.

# **Completion Bonus**

While the entire payment should not be contingent upon completion of the entire study, payment of a small proportion as an incentive for completion of the study is acceptable, providing that such incentive is not coercive. The IRB will determine whether the amount paid as a bonus for completion is reasonable and not so large as to unduly induce participants to stay in the study when they would otherwise have withdrawn.

### **Disclosure of Payments**

All information concerning payment, including the amount and schedule of payment(s) should be set forth in the informed consent document.

# **Advertisement of Payments**

Advertisements may state that participants will be paid or compensated, but should not emphasize the payment or the amount to be paid, by such means as larger or bold type.

### **Alterations in Payments**

Any alterations in human research participant payment or liberalization of the payment schedule must be reported to the IRB prior to implementation as an amendment.

- Others Being Paid. In multi-institutional studies, when human participants at a collaborating
  institution are to be paid for the same participation in the same study at the same rate
  proposed.
- **Comparable Situations.** In other comparable situations in which, in the opinion of the IRB, payment of participants is appropriate.

• **Transportation Expenses.** When transportation expenses are incurred by the participant that would not be incurred in the normal course of receiving treatment and which are not reimbursed by any other mechanism.

#### **Procedure**

In order to manage/mitigate potential risk, a limit of \$600 has been set. \$600 is the current IRS threshold for collection of Name, Address and Social Security Number (SSN) in order to generate IRS Form 1099. The following will be implemented:

- If participants will earn over \$600 in one study, they must be told up front that name, address and SSN will be collected in order to participate and receive compensation.
   Participants will be given the opportunity to participate without receiving payment if they do not wish to provide identifying information. Use Individual Receipt Template \$600 and Over.
- If receiving *any* amount of compensation, new Consent Form language will be used to allow for participant self-report. If no compensation is given, this section can be deleted from the Consent Form. Please Note: Participants may refuse compensation and still participate.

# **Consent Form Language – Compensation Section:**

You will receive	You will be responsible for any taxes assessed on the compensation.
, ,	expect to earn over \$600 as a research participant in UMCP studies in this nust provide your name, address and SSN to receive compensation.
, ,	do not expect to earn over \$600 as a research participant in UMCP studies in our name, address, and SSN will not be collected to receive compensation.

 An Individual Receipt Form for under \$600 has been developed to allow investigators to document and report compensation while minimizing the potential risk of breach of confidentiality.

## **CHAPTER 11: Non-Compliance Issues**

# **IRB Authority in Non-Compliance Issues**

When the IRB is notified of events for which review is necessary by the convened IRB, the IRB chair or designated Chair will bring the issue to the attention of the IRB for appropriate action.

If the IRB is notified of events that indicate potential regulatory non-compliance, the committee will attempt to provide assistance through written contingencies to assist the Investigator with achieving compliance without the imposition of sanctions. However, in cases where Investigator cooperation does not occur and/or when it is determined that the safety or welfare of participants or the integrity of the institution are or have been placed at risk, sanctions may be imposed.

## **Non-Compliance Issues**

The IRB has the regulatory authority to:

- Increase the frequency of continuing review.
- Appoint a subcommittee of appropriately qualified IRB members to investigate alleged noncompliance issues and advise the convened IRB.
- Suspend study approval until compliance is achieved.
- Terminate individual research Projects.
- Report specific non-compliance activities of the Investigator to appropriate governmental entities.
- To request the UMCP Research Compliance Office to perform a targeted review of study records and data.

The IRB also has the regulatory authority to recommend additional sanctions to the Vice President and Chief Research Officer. These sanctions include:

- Research privilege probation
- Suspension of research privileges
- Termination of research privileges
- Embargo of publications

The Principal Investigator will be notified in writing if the IRB is investigating non-compliance issues and may be requested to cease all accrual or all interaction with participants. Following the

investigation and subsequent deliberations of the IRB, the Investigator will be provided written findings with one of the following actions:

- The research may continue;
- The research may continue after contingencies are satisfactorily addressed; or
- The research may not continue due to placement or recommendation of sanctions.

The IRB is required to report to the Vice President and Chief Research Officer, institutional officials, sponsoring agencies, and the US Office for Human Research Protections (OHRP) concerning any suspension or termination of research Projects. If the Project involves drugs or devices, the IRB is also required to notify the Food and Drug Administration (FDA).

The IRB is also required to report to these agencies any unanticipated problems involving risks to participants or others, and serious or continuing non-compliance as determined by the IRB [45 CFR Part 46.103(b) (5)].

The UMCP IRB, UMCP Research Compliance Office (RCO), and the Vice President and Chief Research Officer work cooperatively to assure compliance of all studies under the IRB's review. Institutions other than UMCP who use the UMCP IRB also have assurance requirements for compliance.

All reports of alleged non-compliance or inappropriate involvement of humans in research will be investigated. Such reports may be received from any source by the UMCP IRB Staff, chair or members, the RCO, or the Vice President and Research Officer.

#### **Study Closure**

Study closure is a voluntary process and carries no punitive implications. Closure is not reported to institutional officials or to the department or agency head. Closure typically applies in the following situations:

- At the completion of the study (i.e., new enrollment is closed, all data collection and analysis are completed, and all data has been de-identified);
- If the Investigator chooses to close the study (e.g., the study has not met its enrollment goal, but the Investigator does not plan to enroll new participants, collect additional data from enrolled participants, or perform any additional data analysis); or when
- The Investigator leaves the institution and does not intend to transfer responsibility for the study to another Investigator.

The Investigator must request study closure. The IRB office must be notified when a study is completed. This notification should be sent when all participants have completed all research

activities and data analysis is completed to the point that the participants' records will no longer be needed. The Investigator must complete the **Study Closure Form** found in IRBNet.

The final report of study results should be received by the IRB within 30 days of decision to close a study. Investigators may request closure of a study upon continuing review or by submitting a separate study closure form.

If no participants have been enrolled in the previous five years and all data collection is complete, the Investigator should close the study. Studies that are not closed properly by the PI may be terminated.

# Suspension

Suspension is a non-permanent interruption of research activities. Suspension may occur for the following reasons:

- Unexpected and serious adverse effects that significantly increase risks relative to benefits
- Evidence that an Investigator failed to adequately protect participants in a research study
- Willful or repeated failure to comply with federal regulations, state laws, or institutional rules that govern human research activities
- Proven research fraud or scientific misconduct
- At the request of institutional officials who have been charged with responsibility for oversight of research involving human participants (e.g., the Vice President and Chief Research Officer)
- At the request of the study sponsor, the FDA, the Office for Human Research Protections, or other duly authorized regulatory or governmental department or agency head
- Any other reason deemed necessary by a simple majority vote of a convened IRB Committee (a quorum must be present)
- The IRB or the Investigator decides that new enrollment and risk-bearing activities should be interrupted pending an investigation into any problem or alleged problem with a particular study
- Any study may be suspended by majority vote of the IRB members at a convened meeting with a quorum present. A study that is suspended may be reopened without resubmission as a new Project and consent form. If discontinuation of the study might result in increased risk of significant harm to an individual or a group of study participants, the IRB reserves the right to permit continuation of the project for participants who are already enrolled in a treatment study. Enrollment of new participants generally will not be permitted. However,

at the request of the Investigator, the IRB Chair or a designee may permit enrollment into a suspended study if and only if there is no alternative treatment.

At the time the study is suspended, the IRB will establish a unique and specific plan that, if completed by the PI, will lead to re-review of the study resulting in a decision as to whether to continue or end the suspension or to terminate the study. An audit of the Investigator's studies may be undertaken. As a minimum, the unique and specific plan will include a set of questions or conditions that must be addressed completely by the Investigator and a specified time period during which the Investigator must provide a written response.

If an emergency occurs, institutional officials, the IRB Chair, or an appropriately appointed designee may suspend a study until the next regularly scheduled meeting of the IRB. Alternatively, the Chair may convene an emergency meeting of the full committee to consider suspension of a study before the next regularly scheduled meeting. In the event that an emergency suspension is considered, the Chair must notify the PI and appropriate institutional officials (e.g., the Chancellor, Vice President and Chief Research Officer, direct supervisors of the PI, and the appropriate department or agency head). The full committee at the next scheduled meeting must review all emergency suspensions.

# **Termination**

Termination is a non-voluntary process that results in **permanent** discontinuation of all study-related activities. The IRB may require a study that has been terminated to be entirely resubmitted and re-approved with a new Project. Termination may occur for the following reasons:

- Unexpected and serious adverse effects that significantly increase risks relative to benefits
- Evidence that an Investigator failed to adequately protect participants in a research study
- Willful or repeated failure to comply with federal regulations, state laws, or institutional rules that govern human research activities
- Proven research fraud or scientific misconduct
- At the request of institutional officials who have been charged with responsibility for oversight of research involving human participants (e.g., the Vice President and Chief Research Officer)
- At the request of the study sponsor, the Food and Drug Administration, Office for Human Research Protections, or other duly authorized regulatory or governmental department or agency head
- The Investigator leaves the institution and fails to request closure of the study or fails to reassign the Investigator's responsibilities and duties to another qualified Investigator

- Failure to respond to repeated requests from the IRB regarding required actions on the part of the Investigator to maintain an active Project
- Any other reason deemed necessary by a simple majority vote of the convened IRB (a quorum must be present)

A research study that is terminated by the IRB will be reported to the study sponsor, institutional officials, and to the appropriate department or agency head. Disciplinary action or sanctions may be appropriate. Decisions will be made on a case-by-case basis. At the IRB level, appropriate sanctions might include a request for further information, an audit of ongoing clinical research activities, or suspension of all ongoing research conducted by the same Investigator or group of Investigators until all research activities are shown to be free of similar problems. The Investigator will be reminded that if a study is terminated, no further enrollment or data collection is permitted.

If discontinuation of study-related therapy might result in increased risk of significant harm to an individual or a group of study participants, the IRB reserves the right to permit continued therapy with an investigational drug, device, or biologic for participants who are already enrolled in a treatment study. Enrollment of new participants will not be permitted.

Institutional officials have the right to terminate any research activity without review by or approval of the IRB. Institutional review is broader in scope and may result in termination for reasons other than those listed above.