Research Professionals Network Workshop Series

WHAT YOU NEED TO KNOW ABOUT SINGLE IRB

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BU Clinical & Translational Science Institute

Boston Medical Center — Exceptional Care. Without Exception.

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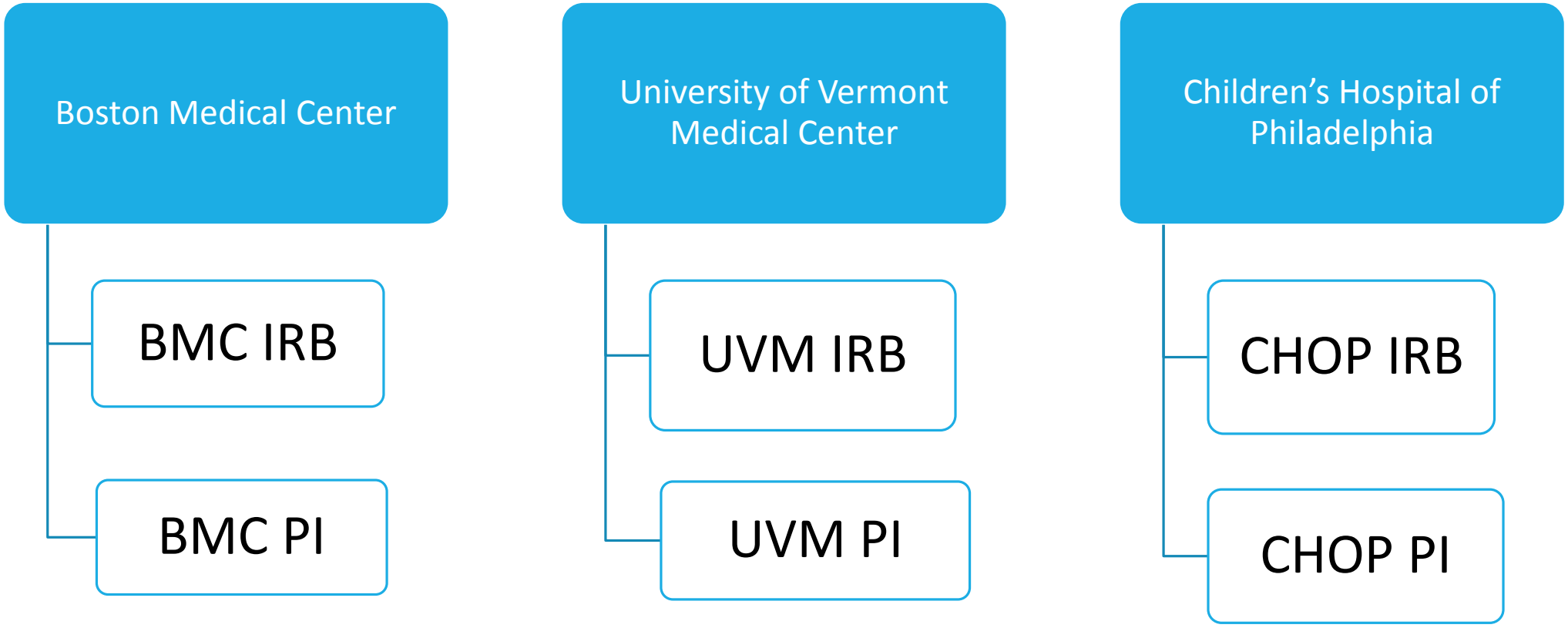
Aims of this Presentation

- Summarize information regarding this new regulatory requirement
- Give examples of experiences with single IRB that have occurred since regulatory compliance date
- Educate audience as to required documents needed to prepare for single IRB
- Explain local procedures for single IRB

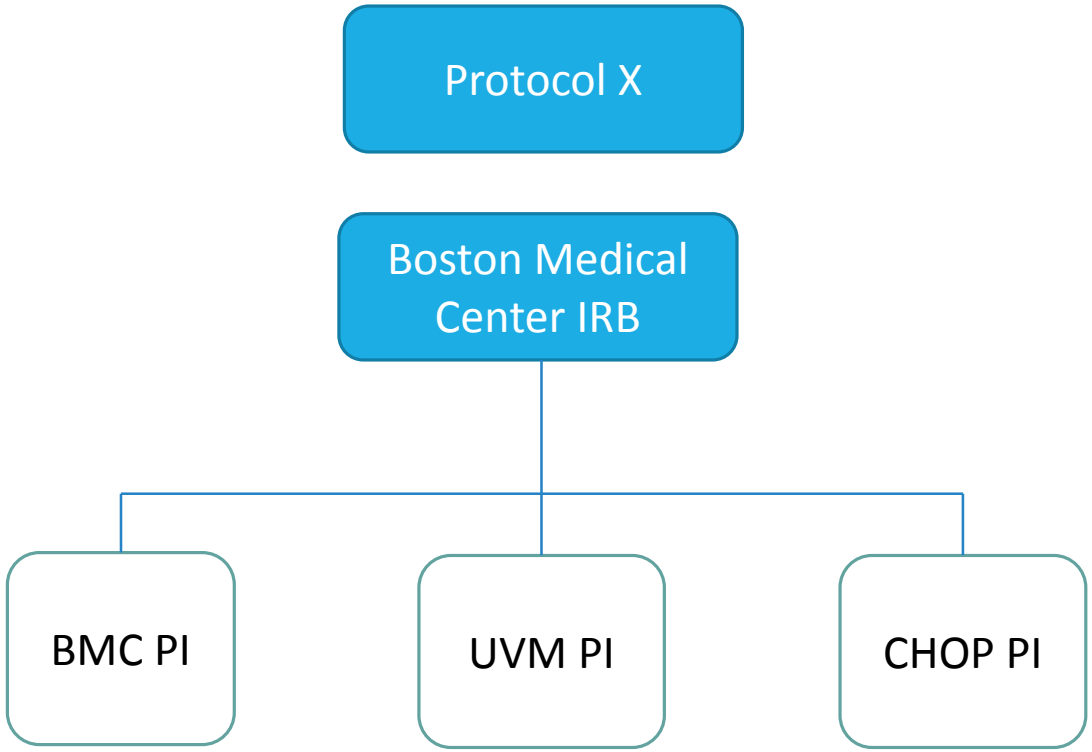
What is Single IRB Review

- **Single IRB review** – a legal arrangement that allows one IRB to review the research on behalf of other engaged institutions
- **IRB of Record** – the IRB that reviews and makes the required regulatory determinations (Reviewing IRB)
- **Relying Institution** – the institution that cedes IRB responsibilities to the IRB of Record (Relying IRB)
- **Reliance Agreement** (also called an IRB Authorization Agreement) – a document signed by two or more institutions engaged in human subjects research that permit one or more institutions to cede review to another IRB. The signed agreement permits a single IRB to review human subject research activities for more than one site

Traditional IRB Review Model



Single IRB Review Model



Why Is Single IRB Necessary

- Use of a Single IRB for NIH-funded multi-site research is required as of January 25, 2018
- The goal of the policy is to enhance and streamline the IRB review process for multi-site research so that research can proceed as quickly as possible without compromising ethical principles and protections for human research participants
- Policy applies to the domestic sites of NIH-funded multi-site studies where each site will conduct the same protocol involving non-exempt human subjects research
- Does not apply to career development, research training or fellowship awards
- Ongoing multi-site trials still recruiting
  - Single IRB policy applies to all competing grant applications (new, renewal, revision, or resubmission)
  - **NOT** expected to follow the policy **UNTIL** the renewal application

NIH Policy

Single IRB & Exceptions Webinar

What is SMART IRB

The SMART IRB, Streamlined, Multisite, Accelerated Resources for Trials IRB Reliance platform, is an initiative developed under an award from the National Center for Advancing Translational Sciences (“NCATS”) of the National Institutes of Health (“NIH”) to support single Institutional Review Board (“IRB”) review in facilitation of multi-site human subjects research.

The **SMART IRB is not a single IRB** that institutions can use. It is a platform for executing reliance agreements. Institutions who participate have already been vetted with master agreements in place to enable institutions to more readily participate in collaborative multi-site research under a single IRB.

As of today there are 479 participating institutions.

Information regarding SMART IRB

What is the Process

- The NIH policy does not provide guidance on best practices in regards to the process of single IRB
- What we know:
  - Single IRB responsibilities can fall to the lead PI of the grant, to another participating site, or to a commercial IRB
  - Investigators need to provide a Single IRB plan in their grant at time of initial submission of their grant
  - Single IRB expenses can/should be a component of the grant budget
  - There has to be a reliance agreement(s) in place with each participating institution outlining the responsibilities of each institution

Single IRB Plan for the Grant

- Describe how you will comply with the NIH Single IRB (sIRB) policy
- Provide the name of the IRB that will serve as the sIRB of record
- Indicate that all identified participating sites have agreed to rely on the proposed sIRB and that any sites added after award will rely on the sIRB
- Briefly describe how communication between sites and the sIRB will be handled
- Indicate that all participating sites will, prior to initiating the study, sign an authorization/reliance agreement that will clarify the roles and responsibilities of the sIRB and participating sites
- Indicate which institution or entity will maintain records of the authorization/reliance agreements and of the communication plan

Steps to Request to be the Single IRB of Record

Step 1. Local investigator needs to be in contact with the IRB to request permission to be the Single IRB of Record

Note: Each institution will have its own specific process and will want different information to help them decide to be the IRB of record

Step 2. A Reliance agreement needs to be negotiated if SMART IRB is not being used.

Note: If SMART IRB agreement in place, additional steps may be required

Step 3. All required local ancillary reviews for the sites need to be completed.

Step 4. Check with local IRB for rules related to ceding review and required documents.

Step 5. Formal permission, “acknowledgment” from the local IRB for collaborating researcher to begin work under a single IRB is granted.

Step 6. Local investigator must provide participating site’s materials related to, local context, consent for required elements, conflict of interest (COI) training and disclosures, required training, polices and procedures, etc.

Steps to Request Reliance

Step 1. The institutions collaboratively will need to decide who will be the Single IRB of record.

Step 2. Local investigator needs to be in contact with their local IRB to request permission to cede review to another IRB.

Note: Each institution will have its own specific process and will want different information to help them decide to cede review.

Step 3. A Reliance agreement needs to be negotiated if SMART IRB is not being used.

Step 4. All required local ancillary reviews need to be completed.

Step 5. All single IRB-approved protocol materials are submitted to the local IRB.

Step 6. Formal permission from the local IRB for local researcher to begin work under a single IRB is granted.

Work Begins

Required Consent Elements

When ceding IRB review to a Single IRB, the consent form must first be customized with information specific to the local site. This information includes:

- Contact information; and
- If the project involves Protected Health Information (PHI) subject to HIPAA, you must include the name of the local IRB and local institution as being among the organizations with access to PHI; and
- The PI must ensure that the consent form contains research-related Injury language, and the correct information regarding costs to the participant.
- Other study specific information, e.g. compensation, state reporting (HIV, Hepatitis, etc.)

Health Information Portability and Accountability Act (HIPAA)

- Most Single IRBs, who are also Privacy Boards, will accept the responsibility of making the HIPAA determination of written authorization or a waiver of authorization
- However, in some cases the Single IRB is not the Privacy Board and therefore will not accept the responsibility to make the HIPAA determination
- It is important for the local institution to ask this question, as the HIPAA responsibility for this determination will fall to the local IRB or Privacy Board

Ancillary Institutional Reviews

- While we are able to cede review to a Single IRB, other institutional reviews still need to be completed prior to work beginning. Some examples are:
  - Billing Compliance
  - Institutional Biosafety
  - Cancer Center Scientific Review

- Educate yourself as to which institutional reviews are required.

Responsibilities to the **Single IRB**

- PI and research staff may need to learn a separate electronic protocol submission system
- PI and staff need to be aware of and follow the Single IRB policies and procedures
- Follow all determinations of the Single IRB
- Notify Single IRB of any reportable events or noncompliance
- Implement changes only after Single IRB has approved them
- Provide access to study records for audit by the Single IRB and/or the local HRPP.

Act as though the Single IRB is Us. Follow their policies and procedures.

Responsibilities to your **Local IRB**

- You must ensure that the local IRB has all currently approved document versions loaded to the eIRB system at the time of initial activation locally
- Must notify when there are changes in key personnel to allow us to ensure required training is complete and any COI for new staff can be addressed
- Ongoing submissions include reportable events, changes in PI or key personnel, noncompliance, protocol closure
- Notify the local IRB if you receive notification of any audits related to the research protocol

BU Specific Guidance

The HRPP Policies and Procedures contains detailed guidance on the process for use of a Single IRB:

- Section 2.5 Multi-Site Research
- Section 7.2.2.18 Requirements for Relying on another IRB
- Section 10.2.3 Evaluation of Requests to Cede Review

OR

Email or Call the IRB at 617-358-5372 or medirb@bu.edu

UVM Specific Guidance

A step-by-step guide can be found in the IRB Policies and Procedures Manual in Section 13.3.

13.3 Procedures for Relying on External IRB for NIH Research

OR

Email or Call your Analyst for Assistance at 656-5040.

Tips on Operationalizing Single IRB Review

Lead Site

- Communicate with your IRB early and often
- Share SOPs and required information with relying sites
- Ceded review is complex! Organization, patience and flexibility is key

Relying Site

- Familiarize yourself with the IRB of Record's single IRB SOPs
- Know your local IRB requirements
- Understand your obligation as a researcher

Activities

Single IRB Activity

Put these activities in correct order

Begin Enrollment Locally	**1.**
Decide who will be the Single IRB of record	2.
Execute Reliance Agreement (Institutional Official)	3.
Ask Local IRB for Permission to Cede Review	4.
Obtain proof of Single IRB Approval	5.

Single IRB Activity – Correct Answer

Put these activities in correct order

Begin Enrollment Locally	**5.**
Decide who will be the Single IRB of record	1.
Execute Reliance Agreement (Institutional Official)	3.
Ask Local IRB for Permission to Cede Review	2.
Obtain proof of Single IRB Approval	4.

Single IRB Activity

Which IRB Should Receive these items

	Reviewing IRB	Local IRB
Continuing Review		
Serious Unanticipated Event		
Notice of Regulatory Audit		
Key Personnel Changes		
Amendments		

Single IRB Activity – Correct Answers

Which IRB Should Receive these items

	Reviewing IRB	Local IRB
Continuing Review	X	
Serious Unanticipated Event	X	X
Notice of Regulatory Audit	X	X
Key Personnel Changes	(depends upon IRB)	X
Amendments	X	

Single IRB Activity – Scenario 1

Robert Smith, PhD, is in the process of writing and submitting an NIH grant for a multi-site research study that involves randomizing children to two different types of cognitive-behavioral therapy (CBT). The study will take place at 5 academic medical centers (including a large center that has acted as a single IRB in the past), along with 5 community hospitals in the Northeast. Because the study does not involve greater than minimal risk, he attests in the grant application that his local UVM IRB will be able to act as the single IRB for the external sites. Because the UVM IRB does not charge for the IRB review of federally-funded studies, he does not budget for the review expense in the grant. When he receives the notice of award, he submits his IRB application to the UVM IRB and requests a reliance agreement for each external site.

Questions for discussion:

1. Are there any issues with this process? How could this process have been improved?

2. What are the available options to meet the NIH single IRB review requirement?

Single IRB Activity – Scenario 1

Answers:

1. Are there any issues with this process? How could this process have been improved?

PI should have talked with UVM IRB to confirm that they will agree to act as the IRB of record for the multicenter trial and discussed the IRB fees associated with this support.

How could this process have been improved?

2. What are the available options to meet the NIH single IRB review requirement?

- A collaborating site could agree to be the IRB of record.
- WIRB could be utilized as the IRB of record
- UVM IRB could serve as the IRB of record

Single IRB Activity – Scenario 2

Patricia Thomas, MD, has been approached to participate in a large, multi-site NIH-funded, longitudinal study for patients with Parkinson's disease. The study involves questionnaires, blood draws, lumbar punctures, and PET scans for research purposes. The main site informs the PI that in order to participate, she needs to cede review to Western IRB, which is acting as the single IRB. The main site provides Dr. Thomas with a reliance agreement for the local BU Medical Campus IRB to sign. The main site also sends their approved version of the consent form, along with the study protocol and other study materials.

Questions for discussion:

1. What are the next step(s) Dr. Thomas needs to take in order to be able to participate in this study?

2. Are there any components of this study that need to be reviewed by the local IRB/institution, and if so, when does this review occur?

Single IRB Activity – Scenario 2

Answers:

1. What are the next step(s) Dr. Thomas needs to take in order to be able to participate in this study?

- Local investigator needs to be in contact with their local IRB to request permission to cede review to another IRB.
- A Reliance agreement needs to be negotiated if SMART IRB is not being used.\\
- All required local ancillary reviews need to be completed.
- All single IRB-approved protocol materials are submitted to the local IRB.
- Formal permission from the local IRB for local researcher to begin work under a single IRB is granted.

2. Are there any components of this study that need to be reviewed by the local IRB/institution, and if so, when does this review occur?

In addition, the PI needs to ensure that the local ancillary reviews are completed. e.g. Radiation Safety Committee, Bio-safety committee, etc. before

Single IRB Activity – Scenario 3

Margaret Chillingworth, MD, PhD, is participating in an investigator-initiated study of a new use of an FDA-approved drug. Her local IRB has ceded IRB review to the main site, which is an academic medical center. Dr. Chillingworth is feeling a bit frazzled because a number of issues with this study are occurring simultaneously. Two of her coordinators are leaving the institution, and she has hired two new coordinators. They have not yet been added to the study team, but they have recently confirmed to her that they have completed all of the institutional human subjects protection and Good Clinical Practice (GCP) training certifications. She has also just learned that the study team recently enrolled an ineligible participant, and she believes that this constitutes a protocol deviation. And to complicate matters, one of her outgoing coordinators accidentally left a study binder that included protected health information on the subway on her way home from work. She called her contact at the Reviewing IRB and they told her that this needs to be submitted as an Unanticipated Problem. She has decided to implement new procedures to prevent this in the future and because this involves modifications to the protocol, she has determined that these changes need to be approved as an amendment.

Questions for discussion:

1. Which of these changes/incidents need to be submitted to the local IRB (the Relying IRB)?

2. Which of these changes/incidents need to be submitted to the external IRB (the Reviewing IRB)?

3. Do any need to be submitted to both IRBs?

Single IRB Activity – Scenario 3

Answers:

1. Which of these changes/incidents need to be submitted to the local IRB (the Relying IRB)?

- Changes in key personnel and UAP need to be submitted to the local IRB

2. Which of these changes/incidents need to be submitted to the external IRB (the Reviewing IRB)?

- Changes in key personnel, the protocol deviation and UAP need to be submitted to the local IRB as well as the amendment need to be submitted to the Reviewing IRB

3. Do any need to be submitted to both IRBs?

- Changes in key personnel and UAP's need to be submitted to both IRB's

Single IRB Activity

Consent Template – Handout

What sections of the consent template would you need to update if your study is using a single IRB?

Program Evaluation

Please take a few minutes to complete the evaluation of this program

RESEARCH CONSENT FORM

Basic Information

Title of Project: A randomized placeholder study for the RPN Workshop
IRB Number: H-35555
Principal Investigator: Jane Doe, MD

Overview

We are asking you to be in a research study. A research study is an organized way of collecting information about scientific questions. This form will tell you what you should expect if you agree to be in the study. There are programs in place to make sure that investigators fulfill their obligations listed in this form.

We are doing the research to learn about Single IRB. If you agree, you will determine whether any elements of this consent need to be modified before sending to the Reviewing IRB. You will be in the study for one day if you decide to stay for the whole study. You will find more information about what will happen in this study later in this form.

Purpose

We are doing this study to learn about the Single IRB review process.

What Will Happen in This Research Study

This is a template consent form that you have received from the study sponsor. You are being asked to determine what sections of this consent form need to be modified as part of the cede review process. For the purposes of this activity, this study is a Phase III study of an investigational drug.

You will be one of approximately 30 subjects who will be asked to be in the study.

Risks and Discomforts

The risks of the drug are dizziness, nausea, and extreme fatigue.

There may be unknown risks or discomforts involved.

Potential Benefits

The benefits of being in this study may be: the drug may help improve your symptoms. However, you may not receive any benefit. Your being in the study may help the investigators learn if this drug could help patients like you in the future.

Alternatives

The following alternative procedures or treatments are available if you choose not to be in this study: you may talk with your doctor about other approved treatments available.

Costs

The study drug will be provided by the Sponsor. There are some additional costs to you for being in the study. The additional costs are the costs of the drug along with any other procedures you have during the study. Items and services done only for study purposes may or may not be provided at no cost to you. You or your health insurance will be billed for all costs that are part of your normal medical care. These costs include co-payments and deductibles. You can ask any questions now about insurance coverage for this study or about the research activities paid for by the sponsor. You can also ask the investigator later, using the number on the first page of this form.

Payment

You will not be paid for being in this study.

Confidentiality

We will not record your name or any information that shows your identity. You will not be signing this form.

A description of this clinical trial will be available on http://www.ClinicalTrials.gov, as required by U.S. Law. This Web site will not include information that can identify you. At most, the Web site will include a summary of the results. You can search this Web site at any time.

Use and Disclosure of Your Health Information

The research team has to use and share your health information to do this study, including information that may identify you. By agreeing to be in this study and signing this form, you are giving us your permission where needed to use and share your health information as described in this form.

Health information that might be used or given out during this research includes:

- Information that is in your hospital or office health records. The records we will use or give out are those related to the aims, conduct, and monitoring of the research study.
- Health information from tests, procedures, visits, interviews, or forms filled out as part of this research study.

The reasons that your health information might be used or given out to others are:

- To do the research described here.
- To make sure we do the research according to certain standards set by ethics, law, and quality groups.
- To comply with laws and regulations. This includes safety-related information.

The people and groups that may use or give out your health information are:

- Researchers involved in this research study from YOUR LOCAL INSTITUTION and/or other organizations
- Other people within YOUR LOCAL INSTITUTION who may need to access your health information to do their jobs such as for treatment, research administration, payment, billing, or health care operations
- People or groups that the researchers use to help conduct the study or to provide oversight for the study
- The Institutional Review Board that oversees the research and other people or groups that are part of the Human Research Protection Program that oversees the research
- Research monitors, reviewers, or accreditation agencies and other people or groups that oversee research information and the safety of the study
- The sponsor(s) of the research study, listed on the first page, and people or groups they hire to help them do the research

We ask anyone who gets your health information from us to protect the privacy of your information. However, we cannot control how they may use or share your health information. We cannot promise that they will keep it completely private.

The time period for using or giving out your health information:

- Because research is an ongoing process, we cannot give you an exact date when we will either destroy or stop using or sharing your health information.

Your privacy rights are:

- When the study has been completed for everyone, you have the right to request access to the health information that we used or shared to make your treatment or payment decisions. If you ask for research information that is not in your medical record, we might not give it to you, but we will explain why not. You may use the contact information on the first page of this form to find out how to get your health information. You may also contact the HIPAA Privacy Officer at YOUR LOCAL INSTITUTION at DG-privacyofficer@bmc.org or at HIPAA@BU.EDU.

Compensation for Injury

If you think that you have been injured by being in this study, please let the investigator know right away. Use the phone number on the first page of this form. You can get treatment for the injury at any healthcare facility you choose. The sponsor might decide to provide compensation for the cost of care for research related injury or for other expenses. Other expenses might be lost wages, disability, pain, or discomfort. You or your insurance will be billed for the medical care you receive for a research injury. You are not giving up any of your legal rights by signing this form.

Subject's Rights

By consenting to be in this study you do not waive any of your legal rights. Consenting means that you have been given information about this study and that you agree to participate in the study. You will be given a copy of this form to keep.

If you do not agree to be in this study or if at any time you withdraw from this study you will not suffer any penalty or lose any benefits to which you are entitled. Your participation is completely up to you. Your decision will not affect your ability to get health care or payment for your health care. It will not affect your enrollment in any health plan or benefits you can get.

Questions

The investigator or a member of the research team will try to answer all of your questions. If you have questions or concerns at any time, contact Jane Doe, MD at 617-555-8888. Also call if you need to report an injury while being in this research.

You may also call 617-358-5372 or email medirb@bu.edu. You will be talking to someone at the Boston Medical Center and BU Medical Campus IRB. The IRB is a group that helps monitor research. You should call or email the IRB if you want to find out about your rights as a research subject.

Subject: _____
Printed name of subject

By signing this consent form, you are indicating that

- you have read this form (or it has been read to you)
- your questions have been answered to your satisfaction
- you voluntarily agree to participate in this research study
- you permit the use and release of information that may identify you as described, including your health information.

_____ _____
Signature of subject Date

Researcher: _____
Printed name of person conducting consent discussion

I have personally explained the research to the above-named subject and answered all questions. I believe that the subject understands what is involved in the study and freely agrees to participate.

_____ _____
Signature of person conducting consent discussion Date