1 PURPOSE

1.1 This procedure establishes the process to manage information reported to the IRB to ensure that information that represents Non-Compliance, Unanticipated Problems Involving Risks to Subjects or Others, Suspensions of IRB Approval, and Terminations of IRB Approval are managed to protect the rights and welfare of subjects.

1.2 The process begins when the IRB receives an information item.

1.3 The process ends when the information item is determined not to represent a problem that requires management, is managed administratively, or referred to the convened IRB for review.

2 REVISIONS FROM PREVIOUS VERSION

2.1 Added Section 3.2 with additional DOD reporting information.

2.2 Revisions added to allow investigators who have additional information for the Committee to consider to request reconsideration.

2.3 Incorporated minor deviations policy information.

2.4 Removed references to outdated HRP-214 and replaced with Post Approval Submission Form.

3 POLICY

3.1 The Institution will promptly notify the federal department or agency funding the research of any for cause investigation of that research by another federal department or agency or national Institution.

3.2 The institution will require corrective and preventive action plans when reports of new information which represent non-compliance are received.

3.3 The institution will determine whether actions need to be taken to mitigate risks when unanticipated problems involving risks to subjects or others are reported.

3.4 The Institution will promptly (no longer than within 30 days) notify the Department of Defense (DOD) human research protection officer:

3.4.1 When the Institution is notified by any federal department, agency or national Institution that any part of the HRPP is under investigation for cause involving a DOD-supported research protocol.

4 RESPONSIBILITIES

4.1 The IRB staff members and IRB members carry out this procedure.

5 PROCEDURE

5.1 Review each item of information and answer the following questions:

5.1.1 Is this an Allegation of Non-Compliance?

5.1.2 Is this a Finding of Non-Compliance?

5.1.3 Is this a report of a Minor Deviation?

5.1.4 Is this an Unanticipated Problem Involving Risks to Subjects or Others?

5.1.5 Is this a Suspension or Termination of IRB Approval?

5.2 If you are unable to answer a question, consult the IRB chair or IRB director or designee

5.3 If the IRB chair and IRB director or designee are unable to answer a question, follow "SOP: Investigations (HRP-025)."

5.4 If the answer is "no" to all questions, skip section 5.5 and continue with section 5.7.

5.5 If the answer is "yes" to one or more questions, then follow the corresponding sections below.

5.5.1 Allegations of Non-Compliance: Determine whether each Allegation of Non-Compliance has any basis in fact.

5.5.1.1 If yes, follow the procedures under Findings of Non-Compliance.

5.5.1.2 If no, follow any other corresponding sections.

5.5.2 Findings of Non-Compliance: Determine whether each Finding of Non-Compliance is Serious Non-Compliance or Continuing Non-Compliance.

5.5.2.1 If no, follow the procedures under Non-Serious/Non-Continuing Non-Compliance.

5.5.2.2 If yes, follow the procedures under Serious or Continuing Non-Compliance.

5.5.3 Minor Deviations: Determine whether the reported information meets the definition of a minor deviation as described in HRP-001.

5.5.3.1 If yes, complete steps at Section 5.11.

5.5.3.2 If no, follow any other corresponding sections.

5.5.4 Non-Serious/Non-Continuing Non-Compliance

5.5.4.1 Work with the individual or group responsible for the Non-Compliance to develop and implement a suitable corrective and preventive action plan (CAPA).

5.5.4.2 If unable to work with the individual or group responsible for the Non-Compliance to develop and implement a suitable CAPA, consider the Non-Compliance to be Continuing Non-Compliance and follow the procedures for Serious or Continuing Non-Compliance.

5.5.5 Serious Non-Compliance; Continuing Non-Compliance; Suspension of IRB Approval; Termination of IRB Approval; or Unanticipated Problem Involving Risks to Subjects or Others

5.5.5.1 Confirm your decision with the IRB chair or IRB director or designee.

5.5.5.2 If the issue involves non-compliance, work with the investigator or research staff to develop and adequate corrective and preventive action plan

5.5.5.3 If the issue involves an unanticipated problem involving risk to subjects or others, work with the PI to develop a plan to mitigate the risk to subjects or others.

5.5.5.4 Place on the agenda for the next available convened IRB meeting in an IRB with appropriate scope as an item of Serious Non-Compliance; Continuing Non-Compliance; Suspension of IRB Approval; Termination of IRB Approval; or Unanticipated Problem Involving Risks to Subjects or Others.

5.6 If in your opinion the rights and welfare of subjects might be adversely affected before the convened IRB can review the information, contact the IRB chair or IRB director or designee to consider a Suspension of IRB Approval following the "SOP: Suspension or Termination of IRB Approval (HRP-026)."

5.7 If the information reported indicates a potentially new or increased risk to subjects which is either not described in the consent document or is described with a different frequency or severity than in the report, follow the corresponding sections below.

5.7.1 For minimal risk studies, determine if the new information increases the study risk level over minimal risk.

5.7.1.1 If so, follow the steps at 5.7.2.

5.7.1.2 If not, determine if the new or increased risk is adequately described in the consent document, as appropriate and that the study continues to meet criteria for approval.

5.7.1.2.1 If so, complete and send a "TEMPLATE LETTER: Acknowledgement of Report (HRP-524)" or equivalent to the PI and the person submitting the information.

5.7.1.2.2 If not, halt enrollment notifying the PI of the required halt in enrollment and need to submit a modification request and a modified consent [1]document containing the required elements of informed consent are added to the submission. Once received follow the procedures in HRP-032 for review and approval. Upon issuance of approval, they will be notified that enrollment in the study may resume.

5.7.2 For greater than minimal risk studies, forward the report and any supporting information for placement on the next agenda for the Committee that reviewed the most recent continuing review submission, whenever possible.

5.7.2.1 If the Committee determines that the new or increased risk is adequately described in the consent document such that the study continues to meet criteria for approval, complete and send a "TEMPLATE LETTER: Acknowledgement of Report (HRP-524)" or equivalent to the PI and the person submitting the information.

5.7.2.2 If the Committee determines that the new or increased risk is not adequately described in the consent document such that the study does not continue to meet criteria for approval, the Committee will temporarily halt enrollment in the study until the Committee approves a modified

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consent document containing the required elements of informed consent. Complete and send a "TEMPLATE LETTER: Acknowledgement of Report (HRP-524)" or equivalent to the PI and the person submitting the information notifying them of the required halt in enrollment and need to submit a modification.

5.8 If the information reported does not indicate a potentially new or increased risk to subjects but does necessitate changes to the description of any other required elements of informed consent, then follow the corresponding sections below.

5.8.1 Does the required change to the consent document represent more than a minor modification?

5.8.1.1 If no, follow the steps at 5.7.1.2.

5.8.1.2 If yes, follow the steps at 5.7.2.

5.9 If the notification involves a subject becoming a Prisoner in a study not approved by the IRB to involve Prisoners:

5.9.1 Confirm that the subject is currently a Prisoner.

5.9.1.1 If the subject is currently not a Prisoner no other action is required.

5.9.2 Stop all research interactions and interventions with, and obtaining identifiable private information about, the now-incarcerated subject until the regulatory requirements for research involving Prisoners are met or until the subject is no longer a Prisoner would present risks to the subject.

5.9.2.1 Submit a Post Approval Submission Form for review by the IRB.

5.9.3 For Department of Defense (DOD) research promptly report all decisions to the Department of Defense (DOD).

5.9.4 The Department of Defense (DOD) must concur with the IRB before the subject can continue to participate while a prisoner.

5.10 Take any additional actions required to resolve any concerns or complaints associated with the information.

5.11 If the information does not involve a Serious Non-Compliance; Continuing Non-Compliance; Suspension of IRB Approval; Termination of IRB Approval; or Unanticipated Problem Involving Risks to Subjects or Others and a response is expected from the IRB, complete and send a "TEMPLATE LETTER: Review of Information Item (HRP-524)" or equivalent to the person submitting the information. If the information is a Minor Deviation being submitted in conjunction with another review, "TEMPLATE LETTER: Review of Information Item (HRP-524)" or equivalent is not required.

5.12 If the Committee makes a preliminary determination that the event involves Serious or Continuing Non-Compliance or that the study should be suspended, inform the Principal Investigator of the determination within three (3) business days by phone call or email. Include in the communication a statement that the investigator may address the Committee in writing or in person to request reconsideration and to provide additional information. Hold the TEMPLATE LETTER: Review of Information Item (HRP-519) until (1) three working days have lapsed and the PI does not request reconsideration: or (2) the Committee reconsiders the item and makes a determination.

5.13 When the Committee makes a preliminary determination to suspend the study, the Committee should determine whether concerns for subject safety requires a final determination of suspension.

6 MATERIALS

6.1 FORM: Post Approval Submission Form

6.2 SOP: Definitions (HRP-001)

6.3 SOP: Investigations (HRP-025)

6.4 SOP: Suspension or Termination of IRB Approval (HRP-026)

6.5 TEMPLATE LETTER: Approval of Protocol (HRP-510)

6.6 TEMPLATE LETTER: Review of Information Item (HRP-519)

6.7 TEMPLATE LETTER: Acknowledgement of Report (HRP-524)

7 REFERENCES

7.1 21 CFR §50.25(a) and (b)

7.2 21 CFR §56.108(b)

7.3 21 CFR §56.111

7.4 45 CFR §46.103(b)(5)

7.5 45 CFR §46.108(a)

7.6 45 CFR §46.111

7.7 45 CFR §46.116(a) and (b) [pre-2018 Rule]/45 CFR §46.116(b) and (c) [2018 Rule]