RR0300 – INITIAL REVIEW OF RESEARCH

Interior Health would like to recognize and acknowledge the traditional, ancestral, and unceded territories of the Dãkelh Dené, Ktunaxa, Nlaka'pamux, Secwépemc, St'át'imc, Syilx, and Tŝilhqot'in Nations, where we live, learn, collaborate and work together.

Interior Health recognizes that diversity in the workplace shapes values, attitudes, expectations, perception of self and others and in turn impacts behaviors in the workplace. The dimensions of a diverse workplace includes the protected characteristics under the human rights code of: race, color, ancestry, place of origin, political belief, religion, marital status, family status, physical disability, mental disability, sex, sexual orientation, gender identity or expression, age, criminal or summary conviction unrelated to employment.

1.0 PURPOSE

To describe how the initial Ethical Review of research involving human participants will be conducted, documented, and communicated by the Interior Health (IH) Research Ethics Board (REB).

2.0 DEFINITIONS

TERM	DEFINITION
Above Minimal Risk Research	Research in which the probability and magnitude of possible harms implied by participation in the research is greater than those encountered by participants in those aspects of their everyday life that relate to the research.
Delegated Review	The level of REB review assigned to Minimal Risk Research projects, to minor changes in approved research and to continuing review applications that meet the Delegated Review criteria. Delegated reviewers are selected from the REB membership to conduct the review.
Ethical Review	A review process that ensures that the principles of respect for persons, concern for welfare and justice are protected for participants in research involving humans.
Full Board Review	The level of REB review assigned to Above Minimal Risk Research projects. Conducted by full membership of the REB, it is the default requirement for the ethics review of research involving human participants.

Initial Review	The review and approval of a research proposal for ethical acceptability prior to the start of recruitment of participants, access to data, or the collection of data.
Minimal Risk Research	Research in which the probability and magnitude of possible harms implied by participation in the research is no greater than those encountered by participants in those aspects of their everyday life that relate to the research.
Provisos	The written report sent by the IH REB to the PI or QI listing the modifications required to the research application documents prior to ethical approval being granted.
Primary Reviewer	The REB members assigned to lead the review and discussion of applications submitted for Full Board Review.
Principal Investigator (PI)	The person responsible for the ethical conduct of the research, and for the actions of any member of the research team at a local site.

3.0 POLICY

The IH REB reviews research involving human participants and conducted under the auspices of Interior Health to ensure the research is conducted ethically.

All research involving human participants must meet certain criteria before REB approval is granted. Following Initial Review of the research, the REB will make a determination as to the approvability of the research.

Research involving human participants will *not* commence within IH prior to REB Ethical Review and approval.

3.1 Submission process

3.1.1 The PI or QI or designate submits a complete application package to the REB. Submission requirements for multi-jurisdiction research undergoing harmonized review are built into the RISe Application. For research reviewed exclusively by the IH REB, submission requirements are located on the REB website. The REB will not review incomplete application packages.

3.1.2 The protocol should meet the requirements as outlined on the REB website (see the Protocol Requirements document). If another institution's REB is the Board of Record, the protocol should meet that institution's requirements. The REB may request additional documentation it deems necessary for the ethics review, or for research ethics oversight.

3.2 Criteria for Review

3.2.1 The REB will take the following into consideration during the Ethical Review:

3.2.1.1 The application can be verified as being submitted by the PI or QI, either via a signature, an Interior Health email account, or a secure electronic submission platform;

3.2.1.2 Any potential conflicts of interest are declared and managed appropriately to prevent any compromises to the safety and well-being of the participants or to the integrity of the data;

3.2.1.3 There is a state of clinical equipoise when there is a comparison of two or more treatment arms;

3.2.1.4 The methodology is scientifically sound and capable of answering the research question;

3.2.1.5 The risks to participants are minimized by:

3.2.1.5.1 using procedures that are consistent with the research design and that do not unnecessarily expose participants to risk;

3.2.1.5.2 using procedures already being performed on the participants for diagnostic or treatment purposes whenever appropriate;

3.2.1.6 The risks to participants are reasonable in relation to the anticipated benefits (if any) and to the importance of the knowledge that will be generated;

3.2.1.7 The selection of participants is equitable; including the scientific and ethical reasons for including vulnerable populations, if applicable;

3.2.1.8 There are sound scientific and ethical reasons for excluding classes of persons who might benefit from the research;

3.2.1.9 When some or all of the participants are likely to be vulnerable to coercion or undue influence, additional safeguards have been included in the research;

3.2.1.10 The amount and method of payment to participants is appropriate to ensure that there is no coercion or undue influence and that information regarding payment is provided to participants including method, amounts and schedule, when applicable;

3.2.1.11 Participants are not put at a direct or indirect financial disadvantage for the time and inconvenience of participation in the research;

3.2.1.12 PI, QI, or delegate shall obtain informed consent from each prospective participant or their legally authorized representative in accordance with, and to the extent required by, applicable regulations and policies;

3.2.1.13 The consent form accurately explains the research and contains the required elements of consent;

3.2.1.14 The informed consent process will be appropriately documented in accordance with the relevant regulations and IH policy RR0800 Documentation of Consent;

3.2.1.15 If applicable, there are provisions for ongoing data and safety monitoring and the use of a Data Safety Monitoring Board appropriate to the research project;

3.2.1.16 There will be adequate provisions to protect the privacy of participants and maintain confidentiality of data;

3.2.1.17 For clinical trials, the QI will make reasonable efforts to secure continued access to experimental drug following a phase II trial for those participants for whom the drug appears to be beneficial.

3.2.1.18 There are adequate provisions for sharing results with participants, and for the timely publication and dissemination of the research results;

3.2.1.19 Clinical trials will be registered via an internationally recognized clinical trial registry and the registration number provided to the REB.

3.2.1.20 Additional criteria will be applied when research involves: Aboriginal peoples and communities; materials related to human reproduction; genetic research; children; pregnant women; or prisoners, in accordance with governing principles and regulations.

3.3 REB Review

3.3.1 The REB will use a proportionate approach to ethics assessment based on the general principle that the more invasive or harmful the proposed and ongoing research, the greater should be the care in assessing the research. The default requirement for all research involving human participants is a Full Board Review unless the REB decides to authorize Delegated Review based primarily on the harms that are expected to arise from the research.

3.3.1.1 Projects identified as Minimal Risk will have Delegated Review by a qualified REB member prior to approval. If the Delegated Review identifies substantive ethical concerns, the project may require Full Board Review at the next scheduled REB meeting.

3.3.1.2 Projects identified as Above Minimal Risk Research will have Full Board Review at the next scheduled REB meeting.

3.3.1.3 Where the project population is considered vulnerable, the project will receive Full Board Review.

3.3.2 The REB review will include the ethical implications of the research methods and design. Scholarly Review by the REB will be proportionate to the level of risk of the research. Research determined to be Above Minimal Risk will require an external scholarly or peer review be submitted for REB review. The REB will consider peer review assessments associated with:

3.3.2.1 Research supervisor or thesis committee for student research; or

3.3.2.2 A qualified peer reviewer or peer review committee; or

3.3.2.3 The expert reviews provided to the sponsor during protocol development and via Health Canada, for industry-sponsored clinical trials.

3.3.3 Reviewers will adhere to the principles outlined in the *Tri-Council Policy Statement: Ethical Conduct of Research Involving Humans* when conducting the Ethical Reviews of research.

3.3.4 The REB Chair may assign an ad hoc expert reviewer if the nature of the protocol warrants additional expertise beyond that of the existing REB members.

3.3.5 After the ethics review is complete, the REB Chair or delegate will inform the PI or QI of the REB's decision in writing.

3.3.6 Research proposals that are under review and have not had any activity from the PI or QI for six months or more will be identified and the PI or QI will be contacted for a status update.

3.3.7 If a research study is already approved by another TCPS2-compliant Canadian REB, the IH REB will review on a case-by-case basis, with the following expected outcomes:

3.3.7.1 For studies already approved by an institution eligible to hold Tri-Agency funds, the IH REB will accept their Ethical Review.

3.3.7.2 For studies already approved by an institution that is not eligible to hold Tri-Agency funds, the IH REB will provide a proportionate review.

3.3.7.3 In either case, IH Operational Review is required and is separate from Ethical Review.

3.4 REB Decisions

3.4.1 The REB Chair or designee is responsible for ensuring that a decision is made for every submission that is reviewed by the REB, that the decision is clearly understood, and that the delegation of responsibility for considering any further information prior to issuing approval is clear.

3.4.2 As a result of its review, the REB has the authority to approve, disapprove, or to require modifications to submitted research. If there

are questions that must be addressed prior to a determination, the REB may defer its decision.

3.4.3 The REB will reach one of the following decisions as a result of its review of research submitted for Initial Review:

3.4.3.1 Approval (approve the application as submitted):

3.4.3.1.1 When an acceptable risk/benefit ratio exists and the regulatory criteria required for approval are satisfied, the research may be approved as submitted.

3.4.3.1.2 The approval date is the date of decision.

3.4.3.1.3 The expiry date of the REB approval is calculated from the date of approval for applications submitted on an IH REB application form. For studies submitted via the RISe platform for Full Board Review, expiry date is calculated from the first full board meeting date.

3.4.3.2 Provisional Approval:

3.4.3.2.1 When an acceptable risk/benefit ratio exists, and the regulatory criteria required for approval are satisfied, but the REB requires modification, clarification, or further information, the REB may recommend Provisional Approval. In this case, the REB Chair or designee will ensure that the Provisos are clearly identified and communicated in writing to the PI or QI, and that the procedures for reviewing the additional information and issuing the approval are clear. Responsibility for review of the PI Response to Provisos and the decision regarding approval conditions may be delegated to one of the following:

- The REB Chair or designee alone, or
- The REB Chair and one or more REB members who were present at the REB meeting or who submitted written comments on the application, or
- A sub-group of REB members designated by the Chair or designee or by the REB, or

- A designated REB member or members with sufficient knowledge and experience regarding the research and the regulations.
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3.4.3.2.2 If the response is deemed complete and satisfactory, approval can be issued.

3.4.3.2.3 If the response does not fully address the matters raised, additional Provisos will be sent to the PI or QI.

3.4.3.2.4 The reviewers may decide upon reviewing the response that the decision should be deferred and that the application and the written response should be reviewed at a subsequent full board meeting.

3.4.3.2.5 The approval date is the date of decision.

3.4.3.2.6 The expiry date of the REB approval is calculated from the approval date; the approval letter is not issued until all of the conditions for approval have been met.

3.4.3.3 Deferral (defer decision-making on the application and continue the deliberation of the application at a future full board meeting):

3.4.3.3.1 The REB will defer its decision to a subsequent full board meeting when significant questions are raised during its review of the research and/or when the criteria required for approval have not been met.

3.4.3.3.2 The REB Chair will ensure that all additional information, modifications or clarifications that are required are specifically identified at the full board meeting.

3.4.3.3.3 The PI or QI's written response shall be reviewed at a full Board meeting.

3.4.3.3.4 The Chair may invite the PI or QI and other members of the study team to a REB meeting to address questions about his or her research application. Per policy RA0400, these guests will only attend that

portion of the meeting necessary to address concerns.

3.4.3.3.5 After the Full Board Review of the PI Response to Provisos, the REB will issue its final decision (approved, provisionally approved, deferral or disapproved).

3.4.3.3.6 The approval date is the date of decision.

3.4.3.3.7 The expiry date of the REB approval is calculated from the approval date; the approval letter is not issued until all the conditions for approval have been met.

3.4.3.4 Disapproval

3.4.3.4.1 The REB may disapprove the research when it fails to meet the ethical standards for approval and where revision is unlikely to enable the REB to reach a positive determination.

3.4.3.4.2 Disapproval cannot be decided through the Delegated Review mechanism. If the recommendation under Delegated Review is to disapprove the research, a final decision must be made by the REB at a full board meeting.

3.4.3.4.3 The REB Chair or designee should ensure that the reasons for the disapproval are identified at the full board meeting for communication to the PI or QI and adequately documented in the Minutes.

3.4.3.4.4 If the research is disapproved, the reasons for disapproval will be communicated to the PI or QI and the PI or QI will be given an opportunity to respond in person or in writing.

4.0 PROCEDURES

4.1 Research Ethics Board Coordinator

4.1.1 Receives and screens the research application package.

4.1.2 Follows up with the PI, QI or delegate in the event the application in incomplete. Incomplete applications are not assigned for review.

4.1.3 Assigns a unique IH Research file number to the research project.

4.1.4 Determines, or consults with the Chair to determine, the level of risk and appropriate level of review for each project. The responsibility for oversight remains with the Chair.

4.1.5 Assigns project for Delegated Review to a REB member.

4.1.6 Conducts the secondary review of Minimal Risk projects for which another board is the Board of Record.

4.1.7 Assigns project for Full Board Review to two Primary Reviewers in consultation with the Chair; sends the application package to Primary Reviewers at least two weeks prior to the REB meeting.

4.1.8 Adds Above Minimal Risk Research projects to the agenda package for the next scheduled REB meeting.

4.1.9 Corresponds with the PI or QI as required throughout the review process; retains all correspondence in the study file.

4.1.10 Feedback from researchers is encouraged and will be considered as an opportunity for the REB to review and improve its functions and procedures.

4.2 REB Reviewers

4.2.1 For the Delegated Review process, the reviewer reviews the project, documents any ethical issues and recommendations using the *Application Review Form* as a guide, and uploads their review to RISe or emails it to the REB Coordinator.

4.2.2 For the full board process, two Primary Reviewers will be assigned for each Above Minimal Risk Research project and present their ethical issues and recommendations at the next scheduled REB meeting. Primary Reviewers submit their written *Application Review Forms* to the REB Coordinator no later than the day before the meeting.

4.2.3 Reviewers may be asked to review the PI Response to Provisos as required.

4.3 REB Chair or designee

4.3.1 Writes the Provisos on behalf of the REB, incorporating all ethical concerns noted by the reviewers, during the screening process, and by the full board during the meeting.

4.3.2 Communicates with the PI, QI or designate throughout the review process as required until all issues are resolved.

4.3.3 Provides approval and issues the Approval Certificate to the researcher, with a copy to the IH Research Department Navigation Lead.

5.0 REFERENCES

1. Canadian Association of Research Ethics Boards and N2 Network of Networks. (2023). Standard Operating Procedure 301.003: *REB Submission Requirements and Administrative Review*.

2. Canadian Association of Research Ethics Boards and N2 Network of Networks. (2023). Standard Operating Procedure 401.003: *Delegated Review*.

3. Canadian Association of Research Ethics Boards and N2 Network of Networks. (2023). Standard Operating Procedure 402.003: *REB Review Decisions*.

4. Canadian Association of Research Ethics Boards and N2 Network of Networks. (2023). Standard Operating Procedure 403.003: *Initial Review - Criteria for REB Approval*.

5. Canadian Institutes of Health Research, Natural Sciences and Engineering Research Council of Canada, and Social Sciences and Humanities Research Council of Canada, *Tri-Council Policy Statement: Ethical Conduct for Research Involving Humans*, December 2022.

6. Health Canada, Food and Drug Regulations, Part C, Division 5, *Drugs for Clinical Trials Involving Human Subjects*, March 14, 2023, version 2.

7. International Council for Harmonization of Technical Requirements for Pharmaceuticals for Human Use (ICH), ICH Harmonized Guideline, Integrated Addendum to ICH E6(R1); *Guideline for Good Clinical Practice*, E6(R2), November 9, 2016.

8. UBC Office of Research Ethics (2022). Standard Operating Procedure 303: *Administrative Review and Distribution of Materials*