IRB Member Orientation
Stanford University
Administrative Panel Year 2009-2010

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Training Specialist
Research Compliance Office
Objectives

• **Understand** Stanford IRB
• **Introduce** ethical principles and regulations
• **Present** STANFORD *Human Research Protection Program* (HRPP)
• **Criteria** for Approval and Informed Consent
• **Discuss** protocol review and reviewer role
• **Identify** resources
The Institutional Review Boards at Stanford

Binder Tab 1
Stanford IRBs

This section will cover:

• Intro to IRB (general)
• IRB Composition
• IRB at Stanford
• RCO Management
IRB Intro – why are you here?

The Institutional Review Board is a functionally independent research review unit engaged in human subject protection

- **Ensure** the rights and welfare of participants involved in human research are adequately protected
- **Ensure** all activities are compliant with Federal, State and applicable laws
- Are **appointed** by the Vice Provost and Dean of Research
- **Composed** of faculty, students, staff, and members of the community
IRB Composition

• At least 5 members with diverse backgrounds

• At least one member who is
  ➢ Scientific
  ➢ Nonscientific (needed for quorum)
  ➢ Unaffiliated or “Public”

• “Members must be sensitive to community attitudes, knowledgeable about institutional policies, regulations, and applicable laws”
  OHRP 45 CFR §46.107 and OHRP 45 CFR §46.108
IRB Composition (cont.)

- No member may participate in IRB review if they have a **conflicting interest**
- Research involving vulnerable subjects should include individuals **knowledgeable of that subject population**
- Can invite **expert consultation**; however consultants cannot vote

*(OHRP 45 CFR §46.107)*
IRBs at Stanford

• Eight IRBs
  • Seven medical IRBs
  • One nonmedical IRB (Social and Behavioral Research)

• Convened meetings and ad hoc meetings
• Administrative Panel for Human Subjects in Medical (or Nonmedical) Research
• Approximately 130 IRB members
IRB’s at Stanford, cont.

- Convened meetings meet once a month (for example, every 2\textsuperscript{nd} Tuesday)
- Schedule on [Human Subjects](Human Subjects) website
- Panel 6 and 8 do not convene
- Meetings at 12 noon, RCO conference room
IRB Management

Support for IRB: RCO Staff

IRB Manager – Initial review/modifications
IRB Associate – Continuing review
IRB Training Specialist – Educational items
HRPP Senior Staff
Vice Provost & Dean of Research

Ann Arvin, MD
Lucile Salter Packard Professor in Pediatrics and Professor of Microbiology and Immunology
– Institutional Official
– Head of HRPP
Ethical Principles & Regulations

Binder Tab 2
Ethical Principles & Regulations - Outline

- The Belmont Report
- OHRP & *The Common Rule*
- FDA regulations
- HIPAA Privacy Rule
- California State/VA regulations
- AAHRPP Accreditation
The Belmont Report

Ethical Principles and Guidelines for the Protection of Human Subjects of Research

Three Basic Principles

1. **Respect for Persons**
   - Treat subjects as autonomous agents, protect those who have diminished autonomy

2. **Beneficence**
   - Do not harm, maximize possible benefits, minimize possible harms

3. **Justice**
   - Equitable distribution of burdens and benefits

OPRR Reports; The Belmont Report 1979
Belmont Report - Application

Respect for persons
- Informed Consent
  - Obtain and document
  - Voluntariness/ no coercion
  - Protect privacy

Beneficence
- Risks/Benefits
  - Procedures w/ least risk
  - Risks reasonable in relation to benefits
  - Maintain confidentiality

Justice
- Enrollment
  - Select participants equitably
  - Avoid exploitation of vulnerable populations

Research Compliance Office
Office for Human Research Protections (OHRP)

- Established after Belmont Report
- Created 45 CFR 46 or “The Common Rule” for the protection of human subjects in research
Federalwide Assurance (FWA)

“Any institution engaged in... HHS-supported human subjects research must provide written assurance that it will comply with the... protection of human subjects regulations”

OHRP 45 CFR 46.103(a)

The five STANFORD institutions each have an FWA; each of the IRB’s is registered and has its own number

SU, LPCH, SHC, PAIRE and VA
Food and Drug Administration

Federal monitoring entity for all drug and device research on humans; relevant regulations include:

- 21 CFR 50 Protection of Human Subjects
- 21 CFR 56 Institutional Review Boards (IRB)
- 21 CFR 600 Biological Products: General
- 21 CFR 312 Investigational New Drug Application (IND)
- 21 CFR 812 Investigational Device Exemptions (IDE)

Note: All significant and non significant risk (SR/NSR) devices, Emergency Use, Sponsor-investigator, “Off-label” use fall under FDA regulations

Research Compliance Office
HIPAA

- Health Insurance Portability and Accountability Act
- 45 CFR 164, HIPAA Privacy Rule for Research
- Protect the privacy & security of an individual’s protected health information (PHI)
- Governs the way PHI is:
  » Collected
  » Maintained
  » Used
  » Disclosed

Stanford IRB = Privacy Board for University
Additional Regulations

California State
- Person obtaining consent (POC)
- *Experimental Subjects Bill of Rights*
- HIPAA – follow State and Federal requirements

Veterans Administration
- Data security
- Special consent form header and footer
- HIPAA – Federal requirements
Stanford University –
Re-accreditation : March 2009
STANFORD Human Research Protection Program (HRPP)

Binder Tab 3
In this section, we will cover:

- Definition/objective
- Entities covered/organization
- HRPP policies and procedures

Available to entire research community on RCO website (http://humansubjects.stanford.edu)
• **Definition:**
  – Embodiment of Federal Laws, regulations, and legislation as Stanford interprets and applies them to human subject research

• **Contains** documentation of IRB Policies; **20 chapters**

  **Chapters of particular significance:**

  ✓ Informed Consent (Ch. 12)
  ✓ Privacy and Confidentiality (Ch. 11)
  ✓ Structure and Composition of IRB (Ch. 6)
  ✓ Systematic Review (Ch. 7)
STANFORD HRPP

Goal:
- To protect the rights and welfare of human research participants
- Guided by ethical principals (e.g., The Belmont Report)
- Compliance with applicable laws

Objective:
- Establish a formal process to monitor, evaluate, and improve HSP
- Exercise oversight
- Intervene when necessary
- Educate investigators and staff
Components of the HRPP-covered entities

**Ann Arvin; Institutional Official**
Head of the HRPP; responsible for overseeing its implementation

**IRB staff, CQI, Panel Members**
Maintenance and implementation of day to day operations of those affected by HRPP
5 Entities represented as STANFORD

From Stanford University; 13 Component organizations

Responsible for adherence to HRPP’s
Criteria for Approval & Requirements for Informed Consent

Binder Tab 4
Criteria for IRB Approval of Research

Are all of the following requirements satisfied?

1. Risks minimized, research design sound
2. Risks reasonable vs. benefits
3. Subject selection equitable
4. Informed consent from subject or legally authorized representative
5. Informed consent documented

Are vulnerable subjects included?

6. Data monitoring when available
7. Plan for privacy/confidentiality, when appropriate
8. Additional safeguards for vulnerable population

Adapted from §45 CFR 46.111
Basic Elements of Informed Consent

1. **Study involves** research; purposes; duration; procedures; experimental procedures

2. **Risks/discomforts**

3. **Benefits** (if any or if none)

4. **Alternative** procedures

5. **Confidentiality** of subjects’ records

6. **Compensation**, medical treatments if injury

7. **Contact information** for questions about research, participants’ rights, injury event

8. **Voluntary participation:** Refusal OK, Stop OK

*Adapted from §45 CFR 46.116 (a)*
Additional Elements of Informed Consent

1. **Risks** are unforeseeable
2. Participation may be **terminated** by investigator
3. Additional **costs**
4. **Consequences** of decision to withdraw from research
5. Significant **new findings** to be provided to subject
6. Approximate **number** of subjects

*Adapted from §45 CFR 46.116 (b)*
Protocol Review Process & Reviewer Role

Binder Tab 5
Protocol Review/Reviewer Role

In this section we will cover:

- Protocol Events
- Protocol Review Types
- eProtocol Review Process
- Reviewer Role
- Special Classes of Participants
Protocol Events

• Initial Review
  New protocols

• Modification
  Changes in procedure, risk level, personnel

• Continuing Review
  SAE’s, AE’s, frequency set by IRB

• Final Report
  Completion of research

• Report
  Unanticipated Problems (UP)
  Deviations or violations
  Complaints

Research Compliance Office 36
Protocol Review Types

Review types are defined by regulations and determined by staff before protocols are assigned to reviewers

Regular – more than minimal risk; reviewed at panel meeting

Expedited – no more than minimal risk; not presented

Exempt – implied minimal risk; not presented (determined not to need continuing review)
Definitions of Minimal Risk

• Minimal Risk:

“the probability and magnitude of harm or discomfort…
not greater …than those ordinarily encountered in daily life
or during the performance of routine physical or psychological examinations or tests”

45 CFR §46.102(i)
“Regular” Review

• **Initial** review at convened meeting
  – 2 primary reviewers (pink and yellow)
  – approved by full panel (blue reviewers included)

• **Continuing** review required (at least annually)

• **Examples**
  • Studies using FDA investigational devices
  • Studies involving drugs or biologics
  • Studies with vulnerable populations

  *Risk : more than minimal*
“Expedited” Review

• **No more than** minimal risk
• Assigned to **one IRB member** for review (not presented at a convened meeting)
• “Expedited Review **Categories**” - 9
• **Continuing review** required (at least annually)

Examples:
chart reviews
or simple
blood draw studies
“Exempt” Review

- **Minimal** risk (not presented)
- **Exempt categories** - 6
- **Uncommon** in medical research because of HIPAA considerations
- Exempt from **continuing review**
- **Reviewed** by one panel manager (6 or 8)

**Examples:**
mostly social & behavior studies
**Protocol Review Process** – Reviewer/Manager Responsibilities

- **Manager**
  - Sends out notification
  - Liaison between reviewers and PD

- **1° Reviewer**
  - Reviews all docs within 5 days
  - Sends comments via eProtocol to Manager
  - Brings checklist/\textit{presents} at Panel

- **2° Reviewer**
  - Reviews all docs within 5 days
  - Sends comments to Manager via eProtocol

- **Reviewer**
  - Looks over other protocols to be presented
  - Sends comments to manager via email

\textit{All information and discussion at panel goes into decision regarding protocol}
Special Classes of Participants and Protocols Requiring Special Consideration

Binder Tab 6
Special Classes of Subjects

- Children
- Pregnant women, fetuses and neonates
- Prisoners
- Other vulnerable subjects (persons with impaired decision making)
- Students, employees
Protocols Requiring Special Consideration or Procedures

- Sponsor-investigator research
- Stem cell research
- Gene transfer research
- Device Studies
- Emergency Use
- Federally Funded research
IRB Related Issues

Binder Tab 7
Convened Meeting Procedures

- **Green** folders
  - Roster
  - Agenda
  - Conflict of Interest documents
  - “Laminates”

- Name tents
- Confidentiality & Conflict of Interest statements
- Minutes from previous meeting
- Education Items

*Occasionally there will be an early agenda item*
IRB Guidance “Laminates”

Provided at each meeting for reference use

Give regulations and guidance pertaining to research criteria

Examples of topics: children’s findings, exempt categories, requirements for waivers
IRB Findings

- Additional regulations associated with a protocol characteristic or a special population
- Example: children’s findings (orange laminate)
  - Presenter explains justification
  - IRB Chair summarizes
  - IRB Manager highlights

- Vote on the approval includes the “finding”
- Documented in IRB minutes
IRB Related Issues

Forms:

– Confidentiality of IRB process (meetings and documents)
– Conflict of Interest

*If you will be late, please call your panel manager or associate before noon the day of your meeting.*
Resources and IRB Member Continuing Education

Binder Tab 8
What do you think so far?
Education Items

Training:
- HIPAA Awareness (STARS)
- CITI Training (www.citiprogram.org)

Education
- 10 minutes at the beginning of panel
- contact information:
  - Bertha deLanda
  - Educ. Line: 650-724-7141
  - Direct line: 650-736-2686
Resources & IRB Member Continuing Education

- **RCO Web Site:**

- **RCO Staff Contact Page:**
  - [http://humansubjects.stanford.edu/general/contact.html](http://humansubjects.stanford.edu/general/contact.html)

- **Collaborative IRB Training Initiative (CITI):**
  - [http://www.citiprogram.org](http://www.citiprogram.org)

- **eProtocol Help:**