POLICY

1. Purpose
Define the role and responsibilities of the University of Rochester’s (UR) institutional review board, the Research Subjects Review Board (RSRB), established under the Human Research Protection Program, to ensure oversight of the UR as a research institution.

2. Scope
This policy applies to all human subject research conducted by University of Rochester employees or agents.

3. Definitions
3.1. Human Subject Research – any activity that either:
   3.1.1. Meets the Health and Human Services (HHS) definition of research and involves human subjects as defined in the HHS regulations (see below); OR
   3.1.2. Meets the Food and Drug Administration (FDA) definition of research and involves human subjects as defined in FDA regulations (see below).

3.2. Research (HHS Regulations)
A systematic investigation, including research development, testing and evaluation, designed to develop or contribute to generalizable knowledge. A “systematic investigation” generally means that there is a study plan/protocol that is followed. Contributing to “generalizable knowledge” means that there is or will be a report, publication, poster, communication, etc. that provides the results and conclusions of the research to other people/clinicians/researchers outside the department/institution.

3.3. Research (FDA Regulations)
Any experiment that involves a test article and one or more human subjects, and that either must meet the requirements for prior submission to the FDA under section 505(i) or 520(g) of the act, or need not meet the requirements for prior submission to the FDA under these sections of the Food, Drug and Cosmetics Act, but the results of which are intended to be later submitted to, or held for inspection by, the FDA as part of an application for a research or marketing permit. For research involving drugs, an experiment is any use of a drug except for the use of a marketed drug in the course of medical practice.

3.4. Human Subject (HHS Regulations) – A living individual about whom an investigator (whether professional or student) conducting research obtains:
   3.4.1. Data through intervention or interaction with the individual, or
   3.4.2. Identifiable private information
3.5. Human Subject (FDA Regulations)
An individual who is or becomes a participant ("subject") in research, either as a recipient of the test article, or as a control. A subject may be either a healthy individual or a patient. For research involving medical devices, a human subject is also an individual on whose specimen an investigational device is used.

3.6. Intervention - Includes both physical procedures by which data are gathered (for example, venipuncture) and manipulations of the subject or the subject’s environment that are performed for research purposes.

3.7. Interaction - Includes communication or interpersonal contact between the investigator/research team and the subject.

3.8. Private Information - Information about behavior that occurs in a context in which an individual can reasonably expect that no observation or recording is taking place, and information that has been provided for specific purposes by an individual and which the individual can reasonably expect will not be made public (e.g., medical, employment and educational records).

3.9. Test Article - Any drug for human use, biological product for human use, medical device for human use, human food additive, color additive, electronic product, or any other article subject to regulation under the Food, Drug and Cosmetics Act or under sections 351 or 354-360F of the Public Health Service Act.

3.10. Investigator Initiated Research – Pertains to the individual(s) who wrote the protocol. For FDA-regulated research this individual is called a “sponsor-investigator”.

3.11. Institutional Review Board (IRB) – The committee formally designated by an institution to review, to approve the initiation of, and to conduct periodic review of, research involving human subjects. The IRB at the University of Rochester is the Research Subjects Review Board (RSRB).

3.12. Employee or Agent – An individual who, (1) acts on behalf of the institution; (2) exercises institutional authority or responsibility; or (3) performs institutionally designated activities, including but not limited to staff, students, contractors and volunteers, regardless of whether individual receives compensation.

4. References
4.1. HHS 45 CFR 46; FDA 21 CFR 56
4.2. Policy 102 University of Rochester Human Research Protection Program;
Policy 103 Organizational Structure of the HRPP;
Policy 402 RSRB Meetings;

Paper copies of the Policy may not be the current version. The current version of this Policy is maintained and available on the OHSP shared network.
5. Responsibilities

5.1. The RSRB is responsible for the review and approval of all human subject research projects, regardless of sponsorship, to protect the rights and welfare of human subjects, including:

5.1.1. Research conducted by or under the direction of any staff or faculty member (employee or agent) of the UR or its affiliates in connection with his/her institutional responsibilities.

5.1.2. Research involving UR faculty/staff use of the UR’s non-public information to identify or contact human subjects.

5.1.3. Research for which the UR has accepted responsibility for review under the terms of an IRB Authorization Agreement after verifying that the collaborating organization has an approved FWA and has documented a UR IRB as the IRB of record.

5.1.4. Research for which the UR has accepted responsibility for review under the terms of an Individual Investigator Agreement that designates a site as a part of the UR FWA.

5.2. At the request of an employee or agent of the UR, the RSRB has the authority to determine whether a project meets the criteria for human subject research.

5.3. At the request of an employee or agent of the UR, the RSRB has the authority to determine whether a project causes the UR to become engaged in human subject research.

5.4. As governed by federal regulations for the protection of human subjects [HHS 45 CFR 46 and FDA 21 CFR 56], and as delegated by the Institutional Official, the RSRB has the authority and responsibility to:

5.4.1. Approve, require modifications, or disapprove any research activities overseen by the UR or its affiliates based upon whether human subjects are adequately protected.

5.4.1.1. UR officials with supervisory authority, including Faculty Advisor, Department Chair or Chief, Deans, and President, may subsequently disapprove research that was approved by the RSRB. However, these officials may not override the RSRB’s decision to disapprove a project [HHS 45 CFR 46.112 and FDA 21 CFR 56.112].
5.4.2. Suspend or terminate approval of research that is not being conducted in accordance with the IRB's requirements or federal regulations (Policy 402 RSRB Meetings and Policy 403 Notification of RSRB Determinations).

5.4.3. Suspend or terminate approval of research that has been associated with serious events/problems. This includes the authority of the Chair to take immediate action to suspend a research project to protect research subjects from serious risks.

5.4.4. Observe, or have a third party observe, the consent process.

5.4.5. Observe, or have a third party observe, the conduct of the research.

5.5. The RSRB (inclusive of Chairs, members and staff) is responsible for reporting any perceived attempt to unduly influence the actions of the RSRB.

6. Requirements

6.1. The RSRB staff determines when a project “engages” the UR in human subject research and therefore requires UR RSRB review (see Guideline for Determining Engagement in Research).

6.1.1. If the RSRB determines that a project does not engage the UR in human subject research, notification to the Investigator shall be made.

6.2. The RSRB staff determines when a project “engages” non-UR and Affiliates facilities or sites (if applicable) in human subject research and the additional requirements that may be necessary to conduct the research activities (see Guideline for Determining Engagement in Research).

6.2.1. Researchers from other institutions (non-UR and Affiliates faculty/staff) requesting to use UR or its affiliates as a site are responsible for contacting the appropriate department to obtain approval for access.

6.3. The RSRB staff determines that a project qualifies as human subject research (see Guideline for Determining Human Subject Research), based on whether the activity represents “research” and involves “humans” as subjects [as defined by HHS 45 CFR 46], and, when applicable, whether the activity represents a “clinical investigation” of a “test article” involving one or more humans as subjects [as defined by FDA 21 CFR 50].

6.3.1. If additional board review is not applicable, a notification to the Investigator shall be made. Activities that qualify as human subject research will be processed by the RSRB office and assigned for additional reviews as applicable.

6.4. The RSRB will interface as necessary with other departments in the UR that are involved in research (Policy 102 University of Rochester Human Research Protection Program and Policy 103 Organizational Structure of the HRPP).
6.5. RSRB Chairs, members, or staff, who experience undue influence on the actions of the RSRB or have knowledge of an attempt at undue influence on the actions of the RSRB, should report such allegations promptly to the RSRB Director.

6.5.1. In instances where a faculty member is the alleged source of undue influence, the RSRB Director and OHSP Director will conduct an initial assessment of the allegation and report their findings to the Institutional Official (IO).

6.5.2. Depending on the level and/or topic of concern, the IO may be notified to conduct further investigation. The IO may conduct the investigation him/herself or may form a panel. If there appears to be evidence to substantiate that inappropriate and unethical inducement occurred, the IO, in consultation with the Director of RSRB and OHSP, and others as appropriate, will determine the course of action. This may include, but is not limited to: no action, dismissal, letter of caution, administrative suspension or termination of studies, requirement for remedial action.
Originator/Authors:
Emily Flagg, Senior Regulatory Specialist

Appendices:
None

Revision History:
February 2016: Sect 4.2 and 4.3 hyperlinks added to references; editorial changes

Supersedes Date:
09/04/2013

Approved By:

[Signature]
Robert Clark
Institutional Official and Senior VP for Research

[Signature]
Kelly A. O'Donoghue
Director, OHSP

[Signature]
Tiffany L. Gommel
Director, RSRB

Date
3/14/16

Date
3/15/16

Date
3/15/2016

Paper copies of the Policy may not be the current version. The current version of this Policy is maintained and available on the OHSP shared network.