

<b>University of Rochester</b>	<b>Office for Human Subject Protection</b>		
	<b>Research Subjects Review Board</b>		<b>Effective Date: 09/21/2021</b>
	<b>HRPP Maintenance of Records</b>		<b>Policy 405</b>
			<b>Version: 1.4</b>

## POLICY

### 1. Purpose

Describe the requirements and procedures for maintaining adequate documentation of RSRB activities.

### 2. Scope

This policy applies to the RSRB and RSRB office staff.

### 3. Definitions

None.

### 4. References

- 4.1. HHS 45 CFR 46 Subparts B – D  
HHS 45 CFR 46.115  
FDA 21 CFR 56.115  
FDA 21 CFR 812 Subpart D  
US Code 42 USC 289g-1/g-2
- 4.2. [Policy 302 RSRB Membership and Composition](#)  
[Policy 402 RSRB Meetings](#)

### 5. Responsibilities

The RSRB office is responsible for maintaining (paper and/or electronic) records of RSRB activities for at least three years, and records pertaining to the review of human subject research for a minimum of three years after study completion or cancellation [45 CFR 46.115; 21 CFR 56.115].

### 6. Requirements

- 6.1. When the RSRB is the Reviewing IRB, the RSRB office will maintain the records (paper and/or electronic files) listed below, as applicable:
  - 6.1.1. For each study's initial and continuing review (when required), the RSRB records will generally include the following materials, as applicable to either convened board or expedited review:
    - RSRB application form(s);
    - Scientific evaluations that accompany the proposal, as applicable;
    - Copies of research protocol(s);
    - Consent/permission/assent document(s), when applicable;
    - HHS-approved sample consent document and protocol, when they exist;
    - Questionnaires, recruitment materials and Investigator's brochure, when applicable
    - Reviewer's written comments or assessments;

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- Findings required under local policy, law, codes, guidance, and applicable regulations including (as applicable),
  - Protocol-specific findings supporting determination to waive the requirement to obtain informed consent.
  - Protocol-specific findings supporting determinations for a consent procedure that waives or alters some or all of the elements of informed consent.
  - Protocol-specific findings supporting determinations for federally funded research involving pregnant women, fetuses, and neonates. [HHS 45 CFR 46 Subpart B]
  - Protocol-specific findings supporting documentation for research involving use of or transplantation of fetal tissue. [HHS 45 CFR 46 Subpart B; 42 USC 289g-1/g-2]
  - Protocol-specific findings supporting determinations for federally funded research involving prisoners. [HHS 45 CFR 46 Subpart C]
  - Protocol-specific findings supporting determinations for federally funded research involving children. [HHS 45 CFR 46 Subpart D]
  - Protocol-specific findings supporting determinations for federally funded research involving subjects who may be vulnerable to coercion or undue influence (e.g., decisionally impaired adults, economically or educationally disadvantaged). [HHS 45 CFR 46.111(b)]
  - Protocol-specific findings supporting documentation of the rationale for Significant/Non-Significant Risk determinations for research devices. [FDA 21 CFR 812 Subpart D]
- Continuing review form submitted for continuing review and related materials;
- Modifications to previously approved research and related materials, if any;
- Reports of new information – initial reports and follow up reports, if any, including but not limited to reports of injury to subjects and unanticipated problems involving risks to subjects or others;
- Pertinent protocol specific correspondence between the RSRB, Investigators, study team, or others;
- Approval and expiration dates for initial and continuing reviews, when applicable;
- Data and safety monitoring reports, if any;
- Statements of any significant new findings provided to subjects;
- Documentation of non-compliance, if applicable;
- A description of the action taken by the reviewer (approval, modifications required to secure approval) for initial or continuing review;
- Frequency of next continuing review, if applicable;

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- Rationale for an expedited reviewer’s determination that research appearing on the expedited review list ([OHRP Expedited Review Categories](#)) is more than minimal risk;
  - All other protocol related documents as necessary.
- 6.1.1.1 Expedited and exempt status review project records include the following additional RSRB information:
- An indication of the specific permissible category for expedited review or exempt status;
  - Any findings required under HHS regulations;
  - Any justifications deemed to be necessary, including rationale for the requirement of continuing review of research that otherwise would not require continuing review [45 CFR 46.109(f)(1)].
- 6.1.1.2 When the RSRB is reviewing for a multi-site study the following additional records may be maintained:
- Model Informed Consent(s)
  - Participating site’s consent form(s)
  - Participating site’s IRB questionnaire/documentation of the institutional review
- 6.1.2. Approved meeting minutes with applicable documentation required for the type of review (see *Policy 402 RSRB Meetings*, Appendix 2 for sample meeting minutes).
- 6.1.3. Emergency use reports.
- 6.1.4. Written procedures for the RSRB.
- 6.1.5. Reliance agreements describing the responsibilities of the relying organization the RSRB to ensure compliance with requirements of the Common Rule [HHS 45 CFR 46].
- 6.1.6. Resume for each RSRB member.
- 6.1.7. All RSRB membership rosters, current and prior.
- 6.2. When the RSRB is the Relying IRB, the RSRB office will maintain records (paper and/or electronic files) consistent with the required institutional review and applicable Reliance Agreements.
- 6.3. Records will be accessible for inspection by authorized representatives of federal agencies or departments at reasonable times and in a reasonable manner.
- 6.3.1. Records that document compliance (or non-compliance) with Department of Defense (DoD) regulations will be accessible for inspection and copying by authorized DoD representatives at reasonable times and in a reasonable manner.
- 6.4. The RSRB office will maintain current membership information including notification of appointment and re-appointment from the Institutional Official that includes the member’s terms of service. Membership information is updated as changes occur. (Refer to *Policy 302 RSRB Membership and Composition*, Appendix 6, for a sample roster.)

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- 6.5. The RSRB office maintains records confirming that RSRB members, as well as researchers and study staff, have completed the human subjects protection required training and education requirements.
- 6.6. For studies receiving convened board or expedited review, records will be maintained for 20 years from the date of study closure. For studies receiving a not human subject research or exempt determination, records will be maintained for 20 years from the date of initial determination.

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**Appendices:**

None

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02/2016: Sect 4.2 hyperlinks added to references  
01/2018: Sect 5 minimum period of time added; Sect 6.1 Reviewing IRB language added;  
Sect 6.1.1.2, Sect 6.2 and Sect 6.6 added; editorial changes  
01/2019: Updates for Revised Common Rule and AAHRPP standards; removed T. Gommel as  
signatory; editorial changes  
09/2021: Revised title (added HRPP)

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**Approved By:**

*Kelley A. O'Donoghue*  
[Kelley A. O'Donoghue \(Oct 13, 2021 14:25 EDT\)](#)

Kelley A. O'Donoghue  
Director, OHSP

Oct 13, 2021

Date






# Policy 405 HRPP Maintenance of Records v1.4 Final

Final Audit Report

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