SOP		
Department	**Title**	**Dates**
Research Integrity and Protection	Responsibilities of Investigators Conducting Human Subject Research	Effective: 10/23/2017
		Approved: 4/11/2017
SOP ID		Last Revised: 10/23/2017
IRB-SOP-803		Expiration: n/a

PURPOSE

Investigators must comply with Ascension Wisconsin policies and procedures as well as all applicable federal, state, and local laws regarding the protection of human subjects in research. It is an Investigator's responsibility to be aware of the expectations, training requirements and oversight responsibilities prior to conducting or engaging in human subject research. The purpose of this document is to outline the responsibilities of Investigators who conduct research at Ascension Wisconsin.

SCOPE

This policy applies to all personnel who conduct research involving human subjects, or assist in the performance of such research activities, where that research is performed at or under the auspices of any Ascension Wisconsin facility or subsidiary organization covered by the Ascension Wisconsin Federalwide Assurance (FWA), including oversight entered into through an IRB Authorization Agreement. The Principal Investigator (PI) is ultimately responsible for the oversight and adherence to this policy.

DEFINITIONS

Belmont Report: The 1979 report of the National Commission for the Protection of Human Subjects of Biomedical and Behavioral Research, entitled, "The Belmont Report - Ethical Principles and Guidelines for the Protection of Human Subjects of Research"

Common Rule: Also known as 45 CFR 46. Outlines requirements of federally supported research with regards to human subjects protections, and places the responsibility of these protections on institutions, their Institutional Review Boards, and investigators.

Intervention or Interaction: includes physical procedures performed on an individual, manipulation, communication or interpersonal contact with an individual or manipulation of an individual's environment.

Private information: includes information that an individual can reasonably expect will not be made public, and information about behavior that an individual can reasonably expect will not be observed or recorded.

Investigator: is the person responsible for the conduct of the research. If the research is conducted by a team of individuals, the investigator is the responsible leader of the team and may be called the Principal Investigator.

Identifiable: means that the identity of the individual is or may be readily ascertained by the investigator or associated with the information.

Protocol Deviation: Any departure from the defined procedures and treatment plans as outlined in the protocol version approved by the IRB. A protocol deviation occurs when there is an inconsistency

in a research study between the protocol that has been reviewed and approved by the IRB and the actual activities being done. Protocol deviations may be minor or major:

Minor Protocol Deviation: Any difference or departure in the conduct of a study from the criteria and/or procedures prescribed in the IRB approved protocol which does not affect the participant's rights, safety, welfare, and/or the integrity of the study and resultant data. Deviations may result from action or inaction of the participant, investigator, or staff. A minor deviation:

- Has no substantive effect on the risks to research participants;
- Has no substantive effect on the value of the data collected (i.e., the deviation does not confound the scientific analysis of the results);
- Does not result from willful or knowing misconduct on the part of the investigator(s), and;
- Does not result in or require any substantive action to be taken or result in any change to the subject's condition or status (i.e., does not affect the subject's participation in any way, does not result in a change to the subject's emotional or clinical condition, does not cause an adverse experience or require a change to the clinical care of the subject, etc.).

Major Protocol Deviation: Any difference or departure from the criteria and/or procedures prescribed in the IRB approved protocol that affects the participant's rights, safety, or welfare; increases the risk/benefit ration; or, compromises the integrity of the study's data. A major deviation:

- Results in or requires a substantive action to be taken or results in a change to the subject's condition or status;
- Harms or poses a significant risk of substantive harm to research participants;
- Damages the scientific integrity of the data collected for the study;
- Results from willful or knowing misconduct on the part of the investigator(s);
- Involves serious or continuing noncompliance with federal, state, or local research regulations;
- Includes repeated minor protocol deviations from the same investigator/research staff; or
- Includes a failure to follow action ordered to correct minor protocol deviations.

Research: is defined in 45 CFR 46.102(d) as a systematic investigation, including research development, and testing and evaluation, designed to develop or contribute to generalizable knowledge. 21 CFR 50.3(c) defines research as an experiment that involves a test article and one or more human subjects.

Human Subject: is defined in 45 CFR 46.102(f) as an individual about whom an investigator conducting research obtains data through intervention or interaction with individual or identifiable private information. 21 CFR 50.3(g) defines human subject as an individual who is or becomes a participant in research, either as a recipient of a test article or as a control.

Test Article: As defined by 21 CFR 50.3(j), the term Test Article means any drug (including a 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 jurisdiction of the FDA.

Unanticipated Problem Involving Risks to Subjects or Others: ("Unanticipated Problem"): Any information that is 1) unanticipated and 2) is related to the research; 3) indicates that subjects or others are at increased risk of harm.

PROCESS

1. **Principal Investigator (PI) Qualifications**
   - **1.1.** The PI must be qualified by education, training, and experience in the area in which the research is being conducted. The PI must be familiar with the IRB-approved protocol, all applicable regulations and guidelines, state laws, the Ethical and Religious Directives for Catholic Health Care Services (ERDs), and institutional policies and guidelines pertaining to his or her human subject research and clinical investigations.
   - **1.2.** The PI must be a current associate, member of the medical staff or otherwise affiliated with the Ascension Wisconsin.

1.2.1. Students may serve as PIs for their own research projects and are responsible for submitting the IRB application. However, when a student is listed as the PI, an associate or staff member must be listed on the protocol submission.

1.2.2. IRB Chair may grant exceptions to this requirement and allow non-Ascension Wisconsin staff to serve as PI if appropriate (examples: research conducted by a qualified student from a local university; minimal risk nursing intervention conducted by a Professor from the School of Nursing from a local university). In these cases, there must be an Ascension Wisconsin staff person identified on the study.

1.3. PI Responsibilities

The PI is ultimately responsible for all aspects of conducting the research study, including the supervision of all co-investigators and research personnel to whom study responsibilities might be delegated. While the PI may delegate responsibilities as appropriate, the PI is responsible for ensuring that all research activities are designed and performed in an ethical manner that protects the integrity of the study and rights, welfare and safety of human subjects. Responsibilities of the PI are outlined below.

1.3.1. General

- Obtain all appropriate approvals, including IRB review, prior to involving any human subjects (including their data or tissue) in research studies.
- Understand Ascension Wisconsin institutional policies and IRB policies and procedures related to the conduct of research and conduct research according to.
- Conduct the study in strict accordance with the current IRB-approved research protocol except where a change may be necessary to eliminate an apparent immediate hazard to a given human research subject;
- Complying with the ethical principles of human subject research (The Belmont Report), the requirements of federal regulations, including the Common Rule, FDA, and HIPAA regulations, applicable state laws, including state privacy laws, relevant professional standards, applicable Ethical and Religious Directives, Ministry policies and any other applicable regulations.
- Ensure the rights and welfare of each research subject, and that the subject's rights and welfare must take precedence over the goals and requirements of the research
- Providing disclosure of financial interests information and disclosing any other potential conflicts of interest that might affect the relationship with the research participant or the research outcome.

1.3.2. Risks to Subjects and Subject Safety

- Minimize risks to research subjects by using procedures which are consistent with sound research design and which do not unnecessarily expose the subjects to risk; and, whenever appropriate, by using procedures already being performed on the subjects for diagnostic or treatment purposes.
- Ensure that risks to human subjects are reasonable in relation to the anticipated benefits (if any) to the individual, and the importance of the knowledge that may be expected to result.
- Assessing the safety and risk of the research, and ensuring an appropriate plan is in place for monitoring the research.
- Design and carry out the research with adequate data and safety monitoring, when appropriate.
- Ensure appropriate additional safeguards are included in the study to protect the rights and welfare of human research subjects who are likely to be vulnerable to coercion or undue influence (e.g., children, prisoners, pregnant women, mentally disabled persons, or economically or educationally disadvantaged persons).
- Ensure that all study subjects meet the inclusion and exclusion criteria set forth by the study protocol.

1.3.3. Informed Consent and Subjects rights and welfare

- Ensure fair and equitable recruitment practices, and avoiding recruitment practices that place participants at risk for coercion or undue influence.
- Obtain the informed consent of the participant, or the participant's legally authorized representative, prior to participation in research. PIs are permitted to delegate to appropriate individuals the authority to obtain consent on their behalf; however, they remain ultimately responsible.
- Ensure the consent process meets the criteria for legally effective informed consent, including that individuals are adequately informed of the risks and benefits of research participation and the procedures that will be involved in the research.
- Appropriately document information consent in accordance with, and to the extent required, by Ascension Wisconsin policies and procedures and federal regulations
- Maintain the privacy of human research subjects and the confidentiality of data, when applicable in accordance with the HIPAA Privacy Rule.
- Responding promptly to participants' complaints and/or concerns or requests for information.
- Notifying subjects of any significant new findings during the study that may affect their rights, welfare or safety, or their willingness to participate.

1.3.4. IRB Submissions and Reporting

- Submit paperwork in accordance with IRB Submission acceptability standards.
- Seek guidance from the Ascension Wisconsin IRB Office when uncertain about whether proposed activities require IRB review.
- Promptly respond to all requests for information or materials solicited by the IRB.
- Comply with all IRB determinations, conditions, and requirements.
- Prepare timely submissions of continuing IRB approval and ensure that protocols receive continuing IRB review and approval at the interval determined by the IRB.
- Receive IRB approval of proposed changes to the research protocol or informed consent documents prior to implementing such modifications, except in an emergency when it is necessary to safeguard the well-being of human subjects.
- Report promptly to the IRB, in accordance to IRB policies and procedures (and if applicable, the sponsor and FDA), any of the following:
    - deviations from the currently approved research protocol;
    - adverse event that is considered to be 1) unexpected; 2) serious and 3) possibly or definitely related to the study;
    - significant changes in the risk/benefit of study participation
    - Unanticipated problems involving risks to subjects or others
    - other incidents and/or complaints
- Assure that the IRB application is consistent with the proposal for funding for internal/departmental or external support.

1.3.5. Researcher Training

- Complete IRB-required human subjects and applicable HIPAA training, as well as other institutional-required and/or sponsor-required training, and remain up-to-date with federal regulations, state and local laws, and institutional and IRB policies and procedures.
- Assure that all research staff engaged the conduct of the human subject research qualified and appropriately trained for their roles and responsibilities and complete all IRB or institutional initial and ongoing training requirements.

1.3.6. Supervision and Oversight

- Appropriately qualified sub-investigators and research staff may perform tasks as delegated by the PI but they cannot accept primary responsibility for the research.

- Ensure that all study staff participating in the conduct of research observe applicable laws, regulations, and institutional policies and guidelines, and adhere to the provisions of the IRB-approved protocol.
- Regularly review research processes and address any deficiencies identified.
- Conduct and document monitoring of research activities on a regular basis, including informed consent and pharmacy practices, when applicable.
- Assure adequate resources to conduct the research (e.g., personnel, time, facilities, funding, and access to a study population).
- Cooperate fully with, and being adequately prepared for, all internal and external (e.g. sponsor, federal agency) auditing and monitoring activities.

1.3.7. Research Recordkeeping

- Maintain records of all approved-IRB documents and correspondence; including, at minimum, the IRB application, protocol, screening, recruitment and consent documents, data collection materials and instruments, documentation of subject eligibility and participation and signed consent forms, unless waived by the IRB.
- Retain all study records for a minimum of 3 years after completion of the research at this site, in accordance with Institutional Record Retention policies. Depending on the research, adhere to applicable FDA regulations or Sponsor requirements for record retention.
- If research involves Protected Health Information (PHI), retain permission to use the PHI for 6 years beyond the expiration date of the authorization (i.e., the consent form or authorization.)
- Make all research records accessible for review and copy by authorized representatives of the IRB and/or the department or agency supporting or conducting the research to ensure proper performance of the study and compliance with federal regulations and institutional policies.
- Maintain confidentiality of stored records in accordance with the IRB-approved protocol.

REFERNCES

21 CFR 312, subpart D
21 CFR 312, subpart E
FDA: “Guidance for Industry Investigator Responsibilities — Protecting the Rights, Safety, and Welfare of Study Subjects”

RELATED MATERIAL

Ascension Wisconsin Policy: Human Subject Research

REVISION HISTORY

Version #	Date Revised	Reason for/Brief Description of Change	Revised By
01	4/11/2017	New- Initial Integration Update	J. Blundon
02	10/23/2017	Addition of Related Material, References and Revision History sections.	J. Blundon