



Research Ethics Board

Standard Operating Procedure

SOP File #	REB.SOP.404
Title	Ongoing REB Review Activities
Effective Date	October 22, 2021
Next Review	2026
Next Administrative Review	2023

1. Purpose

This standard operating procedure (SOP) describes the procedures for REB review of ongoing research activities that occur after the initial Research Ethics Board (REB) approval of a research project and before the next scheduled continuing review of the research project.

2. Definitions

See the MSVU **REB Glossary of Terms (REB.INFO.001)**

3. Scope

This SOP pertains to REBs that review human participant research in compliance with applicable policies and guidelines.

4. Responsibilities

All REB members, REB Office Personnel and Researchers are responsible for ensuring that the requirements of this SOP are met.

The Researcher is responsible for reporting to the REB any unanticipated issues or events that may arise or proposed changes that are needed through the course of the research that might affect the rights, safety and well-being of research participants.

5. Procedures and/or Specific Policies

Circumstances may arise during the course of research that may need to be reported to the REB and/or require that changes be made to the project. In addition to the formally scheduled continuing review, the REB must receive and review any new information generated throughout the course of the research that might affect the rights, safety, and well-being of research participants. Such information may include:

- Proposed amendments to the previously approved research,
- Reports of unanticipated issues and events involving risks to participants or others,
- Deviations from the previously approved research,
- Any other new information that may adversely affect the safety of the research participants or the conduct of the research,

Modifications to the approved research may not be initiated without prior REB review and approval except where necessary to eliminate apparent immediate hazards to human participants. If changes are made to eliminate immediate hazards, the Researcher must notify the REB immediately.

5.1. Amendments to the Approved Research

- 5.1.1. The Researcher is responsible for submitting to the REB any proposed changes to the approved research in the form of an amendment request. Changes to the approved research include modifications to the research, to the consent form, changes in participant materials (e.g., recruitment materials), a change in the Researcher or research team, etc.;
- 5.1.2. When the amendment includes a change to the consent document(s), the Researcher must indicate their recommendation for the provision of the new information to current and/or past research participants;
- 5.1.3. The Researcher should indicate the new level of risk the research poses by incorporating the change. Supporting correspondence documentation and/or background information may be appended to the amendment submission;
- 5.1.4. The REB Chair or designee reviews the amendment to determine the appropriate level of REB review required (i.e., Full Board or delegated review);
- 5.1.5. The REB Chair or designee also may use delegated review procedures for review of amendments when the conditions are met (see SOP 401);
- 5.1.6. If the proposed change represents more than minimal risk, it must be reviewed by the REB at a Full Board meeting.
- 5.1.7. For amendments requiring Full Board review, the responsible REB Office Personnel assigns the amendment to the next available Full Board meeting. For amendments that meet the criteria for delegated review, the responsible REB Office Personnel will forward the amendment to the designated reviewer;
- 5.1.8. When an amendment involves a revised consent, the REB will consider the recommendations of the Researcher in determining if, how and when the new information should be provided to the research participants and whether re-consent is required;
- 5.1.9. The REB must find that the criteria for approval of the overall project are still met in order to approve the amendment;
- 5.1.10. The amended research may not be implemented prior to the REB review and approval, except when necessary to eliminate immediate hazards to participants.

5.2. Unanticipated Issues

- 5.2.1. The Researcher is responsible for reporting any unanticipated issue or event that may increase the level of risk to participants or have other ethical implications for participants.
- 5.2.2. Any unanticipated issue that may increase the level of risk to participants or may impact participants' welfare should be reported immediately to the REB.
- 5.2.3. The researcher should indicate whether the unanticipated issue was directly related to the research and whether changes to the protocol are necessary to reduce the chance of recurrence.
- 5.2.4. If changes are necessary, an amendment request should be submitted in addition to the unanticipated event report.

5.3. Deviations from Previously Approved Research

- 5.3.1. Deviations from the approved protocol that are necessary to eliminate an immediate risk(s) to the participants may be implemented immediately but must be reported to the REB at the earliest opportunity.
- 5.3.2. Deviations that occur through the course of research that may impact the risk assessment of the research or have other ethical implications must be reported to the REB. If a permanent change is required, an amendment request should be submitted.

- 5.3.3. Minor deviations (e.g., typographical corrections of consent form, changes of wording on questionnaires) from the research that do not impact risk or have ethical implications may be summarized in annual status reports.

5.4. Review of Unanticipated Event and Deviation Reports by the REB

- 5.4.1. The responsible REB Office Personnel will screen the submission form for completeness;
- 5.4.2. Privacy breaches are reviewed by the REB Chair or designee, and any recommendations including remedial action are determined in consultation with the organization's privacy office and/or legal counsel. The privacy breach report is forwarded to the REB Chair or designee for review and final acknowledgement;
- 5.4.3. The REB Office Personnel may route the submission back to the Researcher to request clarifications, missing documents or additional information;
- 5.4.4. The REB Office Personnel will forward the submission to the designated REB reviewer(s);
- 5.4.5. The assigned REB reviewer(s) will conduct a review of the report and determine if any action or follow-up is required;
- 5.4.6. The assigned reviewer(s) may request further information from the Researcher;
- 5.4.7. When reviewing the report, the REB should:
- Assess the appropriateness of any proposed corrective or preventative measures by the Researcher,
 - Consider any additional appropriate measures that may or may not have been identified or proposed by the Researcher,
 - Consider whether the affected research still satisfies the requirements for REB approval; in particular whether risks to research participants are still minimized and reasonable in relation to the anticipated benefits, if any, to the research participants and the importance of the knowledge that may reasonably be expected to result,
 - Consider whether some or all the research participants should be notified of the events (i.e., if it may affect the participant's willingness to continue participation in the research), and
 - Consider whether suspension or termination of the ethics approval of the research is warranted;
- 5.4.8. If the event does not raise concerns and does not appear to involve risks to research participants or others, the REB Chair or designee acknowledges the report, and no further action is required;
- 5.4.9. If the REB Chair or designee determines that immediate action is required to protect the safety of research participants, they may suspend ethics approval of the research pending review by the Full Board, providing the justification for such action is documented;
- 5.4.10. If the event raises concerns or involves risk to research participants such that REB action may be required, the item is added to the agenda of the next Full Board meeting;
- 5.4.11. For reports reviewed at a Full Board meeting, the REB determines whether further action is required. Possible actions that could be taken by the REB include, but are not limited to:
- Placing a hold on the research pending receipt of further information from the Researcher,
 - Requesting modifications to the research,
 - Requesting modifications to the consent documents or process,
 - Providing additional information to past participants,
 - Notifying current participants when such information might affect the participants' willingness to continue to take part in the research, and requiring that current participants re-consent for ongoing participation,

- Altering the frequency of continuing review,
 - Requiring additional training of the Researcher and research staff,
 - Termination or suspension of the research,
 - Allegation of non-compliance or breach of responsible conduct of research in accordance with the Organization’s policy and procedures.
- 5.4.12. When action is taken by the REB to ensure the protection of the rights, safety, and well-being of participants, the REB chair or designee is responsible for reporting to the Researcher and the Organizational Official(s).

6. References

See References listed (if applicable)

7. Acknowledgements

The development of this document has benefited directly from similar documents made public by the Tri-Council, as well as several Canadian universities. In some instances, specific formulations drawn from these sources have been incorporated into this document. Specific iterations were drawn from the following:

- Standard Operating Procedures for Observational Health and Non-Clinical Trial Research Ethics Boards - [N2/CAREB-ACCER REB SOPs – Canadian Association of Research Ethics Boards](#) (retrieved July 2021)
- N2/CAREB-ACCER REB SOPs - N2 Network of Networks - [Resources - N2 Canada](#) (retrieved July 2021)

8. SOP History

SOP Number	Key Changes	Effective Date
REB.SOP.404	Minor revisions for EDI language	October 2021
REB.SOP.404	Extensive revisions to harmonize with N2/CAREB SOP.404	September 2021
REB.SOP.116	Minor updates/housekeeping/formatting	June 2014
REB.SOP.116	Original Version	2012