Research Ethics Board

Standard Operating Procedure

Document Number	**REB.SOP.406**
Title	Completion of Research
Effective Date	September 23, 2021
Next Review	2026
Next Administrative Review	2023

1. **Purpose**
   This standard operating procedure (SOP) describes the procedures for the completion of research with the Research Ethics Board (REB).

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

   The REB Chair or designee is responsible for determining if any of the submitted materials should be reviewed by the Full Board.

5. **Procedures and/or Specific Policies**
   The Completion of Research is a change in activity that must be reported to the REB. A final report allows the REB to close its files in addition to providing the REB with information that may be used in the evaluation and approval of related studies.

   5.1. Determining when Research is complete

   5.1.1. The Researcher may submit a research completion report to the REB when there is no further recruitment, all new data collection is complete, no further contact with participants is expected, and the research objectives have been met. Other criteria may be determined as per Organizational policy;

   5.1.2. The responsible REB Office Personnel will review the research completion application and request any outstanding information, clarification, or documentation from the Researcher, if needed;

   5.1.3. The REB Chair or designee will review the submission and acknowledge to the

Researcher that the protocol file is "*complete*";

5.1.4. Once a protocol file is "*complete*" with the REB, no further ethics review submissions for that research are required; however, the Researcher may submit relevant documents for acknowledgement and, if applicable, further investigation and/or action may be undertaken by the REB (e.g., adverse event reports, changes to data management plan);

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.406	Original Version	September 2021