Commit

**University Research Ethics Board (UREB)**



**REB.FORM.004 | Final Report**

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| Section A – Ethics File Details |
| 1. Date: | Click or tap to enter a date. |
| 2. Research Ethics Clearance File #: | Click or tap here to enter text. |
| 3. Title of Research Study: | Click or tap here to enter text. |
| 4. Start Date for the Study: | Click or tap to enter a date. |
| 5. Completion Date for the Study: | Click or tap to enter a date. |
| 6. Have there been any **unreported** changes to the study protocol, consent process or supporting documents since the most recent clearance approval? | Yes [ ]  No [ ] \*If yes, please complete REB.FORM.002 and submit with this request for renewal. Renewal clearance cannot be provided until the requested change has been cleared.  |
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| Section B – Applicant Information |
| 1. Principal Investigatoror Nominated Principal Investigator (see REB.INFO.001 for definitions) | Click or tap here to enter text. |
| 2. Department/Faculty | Click or tap here to enter text. |
| 3. Email Address (MSVU email only) | Click or tap here to enter text. |
| 4. Telephone Number | Click or tap here to enter text. |
| 5. Category of Researcher | Choose an item.If you chose Other, please specify: Click or tap here to enter text. |
| \*Please provide your supervisor’s or MSVU Faculty Sponsor’s information below (if applicable): |
| 6. Supervisor | Click or tap here to enter text. |
| 7. Supervisor’s Email (MSVU email only) | Click or tap here to enter text. |
| 8. Supervisor’s Telephone Number | Click or tap here to enter text. |
| 9. Have there been any changes in research personnel who interact with participants and/or have access to personal data that have not yet been reported to the UREB? | Yes [ ]  No [ ] \*If yes, please complete REB.FORM.014 and submit with this request for renewal. Renewal clearance cannot be provided until the requested change to personnel has been cleared. |
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| Section C – Research Funding |
| 1. Research Funding Status | Choose an item. |
| 2. Grantor (Please select all that apply) | Tri-Council (SSHRC, CIHR, NSERC) [ ] Internal [ ]  Other External [x] (Please specify other grantors): Click or tap here to enter text. |
| 3. Principal Investigator on funding | Click or tap here to enter text. |
| 4. Grant Number(s) | Click or tap here to enter text. |
| 5. Grant Title if different from REB File | Click or tap here to enter text. |
| 6. Funding Period | Start Date: Click or tap to enter a date. End Date : Click or tap to enter a date. |
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| Section D – Research Study Progress |
| 1. The study was | Choose the status that best reflects your study.Choose an item.If you selected “Other”, please specify: Click or tap here to enter text. |
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| Section E – Participant Information |
| 1. When did the last participant complete the study? | Click or tap to enter a date. |
| 2. Number of participants initially planned for the study | Click or tap here to enter text. |
| 3. Number of participants recruited into the study | Click or tap here to enter text. |
| 4. Number of participants that completed the study | Click or tap here to enter text. |
| 5. Number of participants that voluntarily withdrew or were removed by the researcher from the study: | Click or tap here to enter text. |
| 6. Please provide their reasons for withdrawal or removal. | Click or tap here to enter text. |
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| Section F – Risks and Benefits |
| 1. Has anything changed in the last twelve months that may impact the original risk/benefit ratio? | Yes [ ]  No [ ] If *yes*, please explain:Click or tap here to enter text. |
| 2. Has new information in literature or evolved from this or similar studies affected the risk/benefit ratio? | Yes [ ]  No [ ] If *yes*, please explain and address whether this new information changes the original rationale or risk/benefit ratio for this study:Click or tap here to enter text. |
| 3. Is there any new information available about the study that needs to be communicated to participants? | Yes [ ]  No [ ] If *yes*, please explain and address whether this new information changes the original rationale or risk/benefit ratio for this study:Click or tap here to enter text. |
| 4. During this study, have there been any indications that potential benefits to participants could be increased? | Yes [ ]  No [ ] If *yes*, please explain:Click or tap here to enter text.  |
| 5. Since the last research ethics clearance for this study, has there been any changes in the conflict of interest information provided to the UREB? | Yes [ ]  No [ ] If *yes*, please explain:Click or tap here to enter text. |
| 6. Since the last research ethics clearance for this study, has there been any changes to how or where data will be collected/managed/protected/ managed and/or disseminated?  | Yes [ ]  No [ ] If *yes*, please explain:Click or tap here to enter text. |
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| Section G - Research Event Reporting |
| In the past twelve months have any of the following occurred: | Adverse Events: Yes [ ]  No [ ] Unanticipated Events: Yes [ ]  No [ ] Privacy Breaches: Yes [ ]  No [ ]  |
| If you answered **yes** to any of the above, please answer the following questions: |
| 1. Were these reported to the UREB?
 | Yes [ ]  No [ ]  |
| 1. If they were ***not reported***, please explain
 | Click or tap here to enter text. |
| 1. What measures are now in place to protect the participants from these risks?
 | Click or tap here to enter text. |
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| Section H – Dissemination of Research |
| 1. Provide a brief summary of your research activity for this study over the last twelve months  | Click or tap here to enter text. |
| 2. Have the results of the study been disseminated to participants and NGOs?  | Yes [ ]  No [ ] If no, explain why?Click or tap here to enter text. |
| 3. Please list other forms of dissemination and plans for future dissemination.  | Click or tap here to enter text. |
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| Section I - Data Management |
| Research records are to be managed in accordance with MSVU and UREB Data Storage Guidelines, the Tri-Council Policy Statement: Ethical Conduct for Research Involving Humans and Nova Scotia's Personal Information International Disclosure Protection Act (PIIDPA), other applicable standards, including funding agency requirements (if applicable). |
| 1. How will records be managed or destroyed (if applicable) | Click or tap here to enter text. |
| 2. Where will records be managed or destroyed (if applicable) | Click or tap here to enter text. |
| 3. How long will records be managed or destroyed (if applicable). | Click or tap here to enter text. |
| 4. Please describe all applicable privacy protections. | Click or tap here to enter text. |
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| Section J – Signature and Agreement |
| My/Our signature(s) below confirms that the above information is correct, up-to-date and that no unapproved procedures were used in this study. All events (adverse, unanticipated, privacy breaches) have been reported to the UREB. Furthermore, research results have/will be communicated to participants as outlined in the research ethics application. Proper safeguards as to confidentially and security of data will be maintained and data will be securely stored in accordance with MSVU policy and applicable legislation.  |
| Signature of Principal Investigator or Nominated Principal Investigator | Name: Click or tap here to enter text. | Date: Click or tap to enter a date. |
| Signature of Faculty Supervisor | Name of Faculty Supervisor: Click or tap here to enter text. | Date: Click or tap to enter a date. |

**Submission Process:**

1. Researchers are asked to submit the application electronically only to ethics@msvu.ca
2. Please note that recruitment and data collection may not begin until a certificate of Research Ethics Clearance has been issued.
3. Researchers may **only** use letters and/or numbers for file names and refrain from using any special characters (e.g., #; &; etc.).
4. All documents must be clearly labeled and reflect how they are referenced in the application.
5. Note - a **maximum of 2 attachments** are permitted for submission– the application (1) and the combined appendices (2)
6. Application packages shall only be accepted in the form of Word documents (\*.doc or \*.docx) or Portable Document Format (\*.pdf)

For details on specific submission criteria, please see [**Guidance Documents**](https://www.msvu.ca/research-at-the-mount/research-ethics/policies-procedures-guidelines/):

* REB.INFO.401 – Faculty & Staff
* REB.INFO.402 – Graduate Students
* REB.INFO.403 – Undergraduate Students