1 PURPOSE
1.1 This procedure establishes the process to conduct quality improvement of the human research protection program.
1.2 The compliance improvement process begins upon receipt of the results of an investigator QI assessment. The HRPP quality improvement process begins the first business day of each quarter.
1.3 The process ends when all evaluations have been completed and if needed, acted upon.

2 REVISIONS FROM PREVIOUS VERSION
2.1 Significant revisions for AAHRPP accreditation; replaces version dated 12/11/2012.

3 POLICY
3.1 The goal of the quality improvement plan is to achieve and maintain compliance and to achieving targeted levels of quality, efficiency, and effectiveness of the HRPP.
3.2 Objectives of the quality improvement program are to:
   3.2.1 Improve compliance of investigators with their responsibilities.
   3.2.2 Improve compliance of minutes with regulatory compliance.
   3.2.3 Increase efficiency of recording and finalizing minutes.
3.3 The measures of the quality improvement program are defined in:
   3.3.1 CHECKLIST: Investigator Quality Improvement Assessment (HRP-430)
   3.3.2 CHECKLIST: Minutes Quality Improvement Assessment (HRP-431)

4 RESPONSIBILITIES
4.1 The Assistant Director of Research Program/Services ensures completion of the UCF HRPP QI Assessment.
4.2 IRB Staff review the completed UCF HRPP QI Assessment in accordance with the New Information SOP.
4.3 IRB Staff ensure the completion of the Minutes Quality Improvement Assessment.

5 PROCEDURE
Investigator QI Assessment:
5.1 Upon receipt of the results of a completed “CHECKLIST: UCF HRPP QI Assessment (HRP-430)” from the Assistant Director of Research Programs/Services, IRB staff review the information in accordance with HRP-054 - SOP - New Information.

HRPP Quality Improvement:
5.2 Review the results of all Investigator QI Assessments sent out the previous quarter and examine for significant trends.
5.3 Complete “CHECKLIST: Minutes Quality Improvement Assessment (HRP-431)” on the minutes of the previous quarter. Track compliance and the days required to complete minutes and examine for significant trends.
5.4 Send the results to the IRB Manager, Chair and Organizational Official or designee.
5.5 If the results of any evaluations demonstrate significant trends such as inconsistency, recurring noncompliance or misinterpretation of UCF IRB requirements, high variability or are outside performance targets, work with the IRB Manager, Chair and Organizational Official to implement an intervention.
5.6 Interventions may include policy and procedure modifications, education and training efforts, system modifications, or other corrective actions.

6 MATERIALS
6.1 CHECKLIST: Investigator Quality Improvement Assessment (HRP-430)
6.2 CHECKLIST: Minutes Quality Improvement Assessment (HRP-431)
6.3 TEMPLATE LETTER: Investigator Quality Improvement Assessment (HRP-534)

7 REFERENCES
## SOP: HRPP Quality Improvement Evaluations

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<td>T. Bechert</td>
<td>S. Dziegielewski</td>
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7.1 None