HRP 101

Human Research Protection Program Plan

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Scope
Throughout this document “Organization” refers to The University of Central Florida.

Purpose
The University of Central Florida is committed to protecting the rights and welfare of participants in Human Research. The purpose of this document is to describe the University of Central Florida’s plan to comply with ethical and legal requirements for the conduct and oversight of Human Research.

UCF’s Human Research Protection Program is a comprehensive system to ensure the protection of the rights and welfare of participants in Human Research. The Human Research Protection Program is based the all individuals in the organization along with key individuals and committees fulfilling their roles and responsibilities described in this plan.

Definitions

Agent
An individual is considered to be an agent of UCF if the individual is performing institutionally designated activities or exercising institutionally delegated authority or responsibility. This would include, among others, students or volunteers when interacting with human participants for classroom activities that qualify as human research; employees when conducting research with participants or when using or controlling human participant records; and any individual conducting research with participants at UCF-controlled facilities or for whom UCF has responsibility.

An individual who is not an employee is considered an agent of the organization for purposes of engagement in Human Research when that individual has been specifically authorized to conduct research on behalf of the organization. Examples of individuals who would not be considered agents would be employees when conducting human research while on sabbatical through a separate institution; or employees when conducting research for another entity while acting in a consulting role that is not assigned by UCF. However, if data derived from consulting work could reasonably be expected to be used later for university related purposes, the employee would be considered an agent. When a UCF researcher conducts a consenting process, he/she is then engaged which makes UCF engaged.

Legal counsel has the ultimate authority to determine whether someone is acting as an agent of the organization.

Clinical Trial
A biomedical research study of human subjects designed to answer specific questions about therapeutic interventions (drugs, treatments, devices, or new ways of using known drugs, treatments, or devices). Clinical trials are used to determine whether new therapeutic interventions are safe and effective.
Engaged in Human Research

For purposes of the HRPP, and as anticipated in UCF’s Federal-wide Assurance, the institution is considered to be engaged in research whenever one of its employees or agents 1) intervenes or interacts with living individuals for research purposes; or (ii) obtains individually identifiable private information for research purposes [45 CFR 46.102(d),(f)].

Human Research:

Any activity that either:

- Is “Research” as defined by DHHS and involves “Human Subjects” as defined by DHHS (“DHHS Human Research”); or
- Is “Research” as defined by FDA and involves “Human Subjects” as defined by FDA (“FDA Human Research”).

Human Subject as Defined by DHHS

A living individual about whom an investigator (whether professional or student) conducting research obtains (1) data through Intervention or Interaction with the individual, or (2) information that is both Private Information and Identifiable Information. For the purpose of this definition:

- **Intervention** means physical procedures by which data are gathered (for example, venipuncture) and manipulations of the subject or the subject’s environment that are performed for research purposes.
- **Interaction** means communication or interpersonal contact between investigator and subject.
- **Private Information** means information about behavior that occurs in a context in which an individual can reasonably expect that no observation or recording is taking place, and information which has been provided for specific purposes by an individual and which the individual can reasonably expect will not be made public (for example, a medical record).
- **Identifiable Information** means information that is individually identifiable (i.e., the identity of the subject is or may readily be ascertained by the investigator or associated with the information).

Human Subject as Defined by FDA

An individual who is or becomes a subject in research, either as a recipient of the test article or as a control. A subject may be either a healthy human or a patient. A human subject includes an individual on whose specimen (identified or unidentified) a medical device is used.

Investigator

The person responsible for the conduct of the Human Research at one or more sites. If the Human Research is conducted by a team of individuals at a trial site, the investigator is the responsible leader of the team and may be called the principal investigator.
Research as Defined by DHHS
A systematic investigation, including research development, testing and evaluation, designed to develop or contribute to generalizable knowledge.\(^1\)

Research as Defined by FDA
Any experiment that involves a test article and one or more human subjects, and that meets any one of the following:

- Must meet the requirements for prior submission to the Food and Drug Administration under section 505(i) of the Federal Food, Drug, and Cosmetic Act meaning any use of a drug other than the use of an approved drug in the course of medical practice;

- Must meet the requirements for prior submission to the Food and Drug Administration under section 520(g) of the Federal Food, Drug, and Cosmetic Act meaning any activity that evaluates the safety or effectiveness of a device; OR

- Any activity the results of which are intended to be later submitted to, or held for inspection by, the Food and Drug Administration as part of an application for a research or marketing permit.

Mission
The mission of this Organization’s Human Research protection program plan is to protect the rights and welfare of subjects involved in Human Research that is overseen by this Organization.

Ethical Requirements
In the oversight of all Human Research, this Organization (including its investigators, research staff, students involved with the conduct of Human Research, the Organization’s Institutional Review Boards (IRBs), IRB members and chairs, IRB staff, the Organizational official, and employees) follows the ethical principles outlined in the April 18, 1979 report of The National Commission for the Protection of Human Subjects of Biomedical and Behavioral Research titled “Ethical Principles and Guidelines for the Protection of Human Subjects of Research,” also known as “The Belmont Report”:

- Respect for Persons
- Beneficence
- Justice

Legal Requirements
This Organization commits to apply its ethical standards to all Human Research regardless of funding.

\(^1\) For research conducted within the Bureau of Prisons: Implementation of Bureau programmatic or operational initiatives made through pilot projects is not considered to be research.
All Human Research must undergo review by one of the organizationally designated IRBs. Activities that do not meet the definition of Human Research do not require review and approval by one of the Organization’s IRBs and do not need to be submitted to one of the Organization’s IRBs unless there is a question regarding whether the activity is Human Research.

When this Organization is engaged in DHHS Human Research that is conducted, funded, or otherwise subject to regulations by a federal department or agency who is a signatory of the Common Rule, the Organization commits to apply the regulations of that agency relevant to the protection of Human Subjects.

When this Organization is engaged in FDA Human Research, this Organization commits to apply the FDA regulations relevant to the protection of Human Subjects.

Any questions about whether an activity meets the regulatory definitions of Human Research should be referred to the IRB Office who will provide a determination.

Other Requirements

When reviewing research that involves community based research, the IRB obtains consultation or training.

All policies and procedures are applied identically to all research regardless of whether the research is conducted domestically or in another country, including:

- Confirming the qualifications of investigators for conducting the research
- Conducting initial review, continuing review, and review of modifications to previously approved research
- Post-approval monitoring
- Handling of complaints, non-compliance, and unanticipated problems involving risks to subjects or others
- Consent process and other language issues
- Ensuring all necessary approvals are met
- Coordination and communication with local IRBs

For clinical trials, this Organization commits to apply the “International Conference on Harmonization – Good Clinical Practice E6.” (ICH-GCP)

This Organization prohibits payments to professionals in exchange for referrals of potential subjects (“finder’s fees”) and payments designed to accelerate recruitment that were tied to the rate or timing of enrollment (“bonus payments.”)

When Human Research is conducted or funded by the Department of Justice (DOJ), this Organization commits to apply 28 CFR §22. When Human Research is conducted with the federal Bureau of Prisons (DOJ), the Organization commits to comply with 28 CFR §512.

When Human Research is conducted or funded by the Department of Education (ED), this Organization commits to applying 34 CFR §97 Subpart D (equivalent to 45 CFR §46 Subpart D), 34 CFR §98.3, 34 CFR §98.4, 34 CFR §356.3, and 34 CFR §99.

When Human Research is conducted or funded by the Department of Energy (DOE), this Organization commits to applying the Department of Energy (DOE) O 443.1A and to use
“Checklist for IRBs to Use in Verifying That HS Research Protocols Are in Compliance with the Department of Energy (DOE) Requirements.”

When Human Research is conducted or funded by, or when the results of research are intended to be submitted to or held for inspection by the Environmental Protection Agency (EPA), this Organization commits to applying 40 CFR §26, which includes the requirement to apply 45 CFR §46 Subparts B and D.

Sponsored Human Research

For both sponsored and non-sponsored Human Research this Organization abides by its ethical principles, regulatory requirements and its policies and procedures.

Scope of Human Research Protection Program

The categories of Human Research that are or may be overseen include:

- Educational research involving children, parents, college students, teachers or test data
- Human factors/simulation research
- Psychological/behavioral research
- Social science research
- Forensic science research
- Research conducted or funded by the Department of Justice (DOJ)
- Research conducted or funded by the Department of Education (ED)
- Research conducted or funded by the Department of Energy (DOE)
- Research conducted, funded, or subject to oversight by the Environmental Protection Agency (EPA)
- Research conducted or funded by the Department of Defense (DOD)
- Federally funded research
- FDA-regulated research.
- Research involving drugs that require an IND.
- Research involving devices that require an abbreviated IDE.
- Research involving devices that require an IDE issued by FDA.
- Investigator held abbreviated IDE.
- Investigator held IND or IDE.
- International research
- Research involving pregnant women as subjects.
- Research that plans to or is likely to involve prisoners as subjects.
- Research involving children as subjects.
- Research involving a waiver of consent for planned emergency research.
- Emergency use of a test article in a life threatening situation.
- Activities involving humanitarian use devices.
- Research using the short form of consent documentation.
• Classified Research (Classified research is secret research to which access is restricted by law to a particular hierarchical class of people. A security clearance is required to review classified research.)

The categories of Human Research not overseen include:
• Research conducted or funded by the Veteran Administration (VA)
• Research involving fetuses.
• Research involving \textit{in vitro} fertilization.
• Research involving non-viable neonates.
• Research involving neonates of uncertain viability.
• Research involving children, pregnant women, fetuses, or neonates that is not otherwise approvable without approvable of an agency secretary or director.

\textbf{Human Research Protection Program Policies and Procedures}

Policies and procedures for the Human Research Protection Program are available on the following Web site:

\textbf{Human Research Protection Program Components}

\textbf{Organizational Official}

The Director of Compliance for the Office of Research & Commercialization is the Organizational Official. The Organizational Official has the authority to:

- Create the Human Research Protection Program budget.
- Allocate resources with the Human Research Protection Program budget.
- Hire and fire research review staff.
- Determine what IRBs the organization will rely upon.
- Approve IRB authorization agreements.
- Create policies and procedures related to the Human Research Protection Program that are binding on the organization.

The Organizational Official is responsible for:

- Overseeing the review and conduct of Human Research under the jurisdiction of the Human Research Protection Program.
- Periodically reviewing this plan to assess whether it is providing the desired results and recommend amendments as needed.
- Establishing policies and procedures designed to increase the likelihood that Human Research will be conducted in accordance with ethical and legal requirement.
- Instituting regular, effective, educational and training programs for all individuals involved with the Human Research Protection Program.
Ensuring that the research review process is independent and free of coercion or undue influence, and ensure that officials of the organization cannot approve research that has not been approved by an IRB designated by the organization.

Implementing a process to receive and act on complaints and allegations regarding the Human Research Protection Program.

Implementing an auditing program to monitor compliance and improve compliance in identified problem areas.

Investigating and remediating identified systemic problem areas and, where necessary, removing individuals from involvement in the Human Research Protection Program.

Ensuring that the Human Research Protection Program has sufficient resources, including IRBs appropriate for the volume and types of Human Research to be reviewed, so that reviews are accomplished in a thorough and timely manner.

Fulfilling educational requirements mandated by OHRP.

### Institutional Official

The Associate Vice President for Research & Commercialization is the Institutional Official. The Institutional Official has the authority to:

- Sign UCF’s Federalwide Assurance for Compliance on file with OHRP.
- Institute a Suspension of IRB Approval or a Termination of IRB Approval in accordance with “SOP: Suspension of Termination of IRB Approval.”
- Appoint and remove IRB members and IRB chairs in collaboration with the Associate Vice President for Research.
- Approve and rescind IRB authorization agreements
- Place limitations or conditions on an investigator’s or research staff’s privilege to conduct Human Research.
- Establish the process to identify institutional financial interest that may cause an institutional conflict of interest.

### All members of the Organization

All individuals within the Organization have the responsibility to:

- Be aware of the definition of Human Research.
- Consult the IRB when there is uncertainty about whether an activity is Human Research.
- Not conduct Human Research or allow Human Research to be conducted without review and approval by an IRB designated by the Organizational Official.
- Report allegations of undue influence regarding the oversight of the Human Research Protection Program or concerns about the Human Research Protection Program to the Organizational Official.
- Report allegations or finding of non-compliance with the requirements of the Human Research Protection Program to the IRB.

Individuals who are responsible for business development are prohibited from carrying out day-to-day operations of the review process.
IRBs

All human research is reviewed by UCF’s single IRB, unless UCF has entered into an authorization agreement with a separate institution that has an FWA, and whose IRB is judged by UCF’s IRB chair to be qualified to review the research. UCF may rely upon IRBs of another organization provided one of the following is true:

- The IRBs are part of an AAHRPP accredited organization.
- The UCF investigator is a collaborator on Human Research that is primarily conducted at another organization and the UCF investigator’s role does not include interaction or intervention with subjects.

Note: If UCF is the direct recipient of federal funding, the UCF IRB must review the Human Research.

The University of Central Florida IRB has authorization agreements with IRBs for Florida Hospital, Orlando Health and Nemours.

The IRBs relied upon by UCF have the authority to:

- Approve, require modifications to secure approval, and disapprove all Human Research overseen and conducted by the organization. All Human Research must be approved by an IRB designated by the Organizational Official. Officials of the organization may not approve Human Research that has not been approved by the IRB.
- Suspend or terminate approval of Human Research not being conducted in accordance with the IRB’s requirements or that has been associated with unexpected serious harm to participants.
- Observe or have a third party observe, the consent process and the conduct of the Human Research.
- Determine whether an activity is Human Research.
- Evaluate financial interests of investigators and research staff and have the final authority to decide whether the financial interest and management plan, if any, allow the research to be approved.

IRB member and IRB staff are responsible for following Human Research Protection Program policies and procedures that apply to IRB members and staff.

Investigators and Research Staff

Investigators and research staff have the responsibility to:

- Follow the Human Research Protection Program requirements described in the INVESTIGATOR MANUAL (HRP-103).
- Comply with all determinations and additional requirements of the IRB, the IRB chair, and the Organizational Official.

Legal Counsel

Legal Counsel has the responsibility to:
- Provide advice upon request to the Organizational Official, IRB, and other individuals involved with the Human Research Protection Program.
- Determine whether someone is acting as an agent of the Organization.
- Determine who meets the definition of “legally authorized representative” and “children” when Human Research is conducted in jurisdictions not covered by policies and procedures.
- Resolve conflicts among applicable laws.

**Deans/Department Chairs**

Deans and Department Chairs have the responsibility to:

- Oversee the review and conduct of Human Research in their department or school.
- Forward complaints and allegations regarding the Human Research Protection Program to the Organizational Official.
- Ensure that each Human Research study conducted in their department or school has adequate resources.

**Grants and Contracts Office**

The Grants and Contracts Office has the responsibility to review contracts and funding agreements for compliance with Human Research Protection Program policies and procedures.

**Office of Research Program/Services**

Research Program/Services personnel have the responsibility to conduct regular quality improvement assessments of IRB-approved Human Research.

**Education and Training**

All new employees are to review this plan as part of initial orientation. The human resources department is to conduct refresher training on current employees as needed to maintain awareness of this policy.

Training of IRB members, investigators and staff involved in human research activities is tracked by the IRB. The web-based Collaborative Institutional Training Initiative (CITI) training program is used for this purpose. Investigators, research staff, IRB members, IRB staff, and others involved in the review or conduct of Human Research are to complete the required modules every three years. Additionally, the IRB Office staff and/or IRB Chair present training sessions for faculty and graduate students throughout the year. The Organizational Official may identify and implement additional educational and training needs. Annually, several IRB members and IRB Office staff attend Public Responsibility in Medicine and Research (PRIM&R) or National Association of IRB Managers (NAIM) conferences to increase knowledge of the federal regulations. The ORC provides funding for conference registration and travel expenses. Investigators and research staff must complete the initial and continuing training described in the INVESTIGATOR MANUAL (HRP-103).
Questions and Additional Information for the IRB
The IRB Office is open 9 AM-5 PM to your questions, information, and feedback. Contact and location information for the IRB Office is as follows:

Phone: 407-823-2901
      407-882-2012
Fax: 407-823-3299
Address: Office of Research & Commercialization
         12201 Research Parkway
         Suite 501
         Orlando, FL 32826
Email: irb@mail.ucf.edu

Reporting and Management of Concerns
Questions, concerns, complaints, allegations of undue influence, allegations or findings of non-compliance, or input regarding the Human Research Protection Program may be reported orally or in writing. Employees are permitted to report concerns on an anonymous basis. Concerns may be reported to the IRB Chair, IRB Office, Organizational Official, Legal Counsel, Deans, or Department Chairs.

The IRB has the responsibility to investigate allegations and findings of non-compliance and take corrective actions as needed. The Organizational Official has the responsibility to investigate all other reports and take corrective actions as needed.

Employees who report in good faith possible compliance issues should not be subjected to retaliation or harassment as a result of the reporting. Concerns about possible retaliation should be immediately reported to the Organizational Official or designee.

To make such reports, contact:

Phone: 407.882.1168
Fax: 407.823.3299
Address: Douglas Backman
         Director, Office of Compliance
         Office of Research & Commercialization
         12201 Research Parkway
         Suite 501
         Orlando, FL 32826
Email: dbackman@mail.ucf.edu

Monitoring and Auditing
In order to monitor and ensure compliance, internal or external auditors who have expertise in federal and state statutes, regulations and organizational requirements will conduct periodic audits. Audits will focus on areas of concern that have been identified by any entity, i.e., federal, state or institutional. Random audits may also be conducted.
Disciplinary Actions

The Organizational Official may place limitations or conditions on an investigator’s or research staff’s privilege to conduct Human Research whenever in the opinion of the Organizational Official such actions are required to maintain the Human Research Protection Program.

Approval and Revisions to the Plan

This Human Research Protection Program Plan is to be approved by the Associate Vice President for Research & Commercialization. This plan is intended to be flexible and readily adaptable to changes in regulatory requirements. The Organizational Official has the responsibility to review this plan to assess whether it is providing the desired results. At the request of the Organizational Official, the Associate Vice President for Research & Commercialization has the authority to amend this plan as deemed necessary.

Approved:

Tom O’Neal
Associate Vice President for Research & Commercialization