HRP – 102 – SOP: NASA IRB Reliance on an External IRB

NUMBER	Effective Date	Version Number	Previous Versions
HRP-102	07/07/2020	v.5	v.4

Purpose

HRP – 102 establishes the process for relying on an External IRB for review of human subject research in which NASA is engaged.

The process of NASA IRB Reliance on an External IRB begins when a NASA Principal Investigator (PI) requests to rely on, or a NASA PI has identified, a potential for Reliance Acknowledgement. The process ends when the study is closed or the Reliance Acknowledgement is terminated as stated in this policy.

The HHS regulations Common Rule, at 45 CFR 46.103(e), requires that for nonexempt research involving human subjects (or exempt research that requires limited IRB review) that takes place at an institution for which an IRB not operated by that institution exercises oversight, the institution (the Relying Institution) and the organization operating the IRB (the IRB of Record) must document the Relying Institution's reliance on the IRB for its research oversight. HRP – SOP – 102 describes NASA IRB's policies and procedures for reliance, including the responsibilities of each entity to ensure compliance with the regulation.

Chapter V – National Aeronautics and Space Administration, of Title 14, Aeronautics and Space, CFR 1230.114 requires that in the conduct of cooperative research project, each institution is responsible for safeguarding the rights and welfare of human subjects and for complying with 14 CFR 1230. An institution participating in a cooperative research project may, at the approval of the department or agency head, enter into a joint review arrangement and rely upon the review of another qualified IRB, or make similar arrangements for avoiding duplication or effort.

Policy

1. It is the policy of NASA IRB that NASA PIs may rely upon another IRB for research oversight provided investigators at NASA and the external organization are participating as investigators on a research project and:

a. NASA and the other organization(s) participating in research agree to rely on an External IRB for research oversight
and/or
b. The project is NASA –funded research that does not occur on NASA property and does not involve NASA-related research subjects

2. It is the policy of NASA IRB that the NASA IRB will cede IRB review only to IRBs that are accredited by a recognized accrediting organization or otherwise have a process for ensuring compliance with ethical principles, and meets human subject protection requirements [HHS 45 CFR 46, and FDA 21 CFR 50, 56, 312, and 812], as applicable.
3. NASA IRB must receive and administratively review the eIRB submission and all accompanying documents (protocol, consent documents, waivers of consent, etc.) in order to accept the approval of an External IRB of Record, before engagement in human research under external IRB oversight.
4. NASA IRB and the Office of the Chief Medical Officer (OCHMO) must approve the reliance before engagement in human subject research under oversight of an external IRB.
5. NASA IRB Office will perform routine post-approval monitoring activities or conduct directed (for cause) reviews of study records. These oversight activities may be accomplished remotely, in collaboration with the external institution's IRB/Compliance team.
6. It is the policy of NASA IRB the NASA PI will follow written procedures for reporting its findings and actions to the appropriate officials at the External IRB of Record as noted in this policy 'Responsibilities'.
7. It is the policy of NASA IRB that, by signing the Reliance Acknowledgment and ceding review to the External IRB of Record, the External IRB of Record will follow written procedures for the conduct, reporting, and communication as noted in this policy 'Responsibilities'.

Responsibilities

Responsibilities of the ***NASA Principal Investigator*** include, but are not limited to:

1. Obtaining all applicable NASA committee and departmental approvals as necessary [e.g. safety, engineering, crew branch, space medicine] and include the information in the study submission in eIRB.
2. Complying with all submission and reporting requirements of the External IRB of Record.
3. Not engaging in the research until a signed Reliance Acknowledgement has been established.
4. Complying with the SOPs and applicable local laws and regulations of the External IRB of Record.
5. Ensuring safe and appropriate performance of research including, but not limited to monitoring protocol compliance, ensuring all collaborators and study staff are appropriately qualified, have completed Human Subjects Protections training, and have

been adequately trained to conduct the study in alignment with the IRB approved protocol.

6. Providing a mechanism to receive and address concerns from local study subjects and others about the conduct of research.
7. Ensuring that NASA consent forms include the required local context language (e.g. COI language, research costs, etc.)
8. Promptly submitting reportable events (e.g. protocol deviations, UPIRSOs, Noncompliance, Terminations or Suspensions) to the eIRB system.
9. Maintaining all documentation from the External IRB of Record in the eIRB as specified in this SOP: Procedures (1b).
10. Reporting all financial **Conflicts of Interest** (COIs) to the NASA IRB.
    a. All NASA research personnel must disclose financial conflicts of interest to both the NASA IRB and the External IRB of Record and comply with any COI management plans that may result.
    b. Investigators must report, to their institution, any changes in conflict of interest (COI) disclosures and resulting changes in COI management plans related to the research (i.e., the specific study or studies ceded to the IRB of Record).

Responsibilities of the ***External IRB of Record*** include, but are not limited to:

1. Conducting review of research according to all applicable regulations and laws, including initial review, continuing review, and review of modifications to previously approved research.
2. Conducting review of potential unanticipated problems, adverse events, and/or serious or continuing non-compliance.
3. Providing notification to the PI in writing of its determinations and decisions.
4. Making relevant IRB minutes, IRB membership rosters, and standard operating procedures available to the NASA IRB upon request.
5. When appropriate, conducting on-site or remote post-approval monitoring or audits, unless delegated to NASA IRB.
6. Maintaining an IRB membership that satisfies the requirements of 45 CFR 46.107 and 21 CFR 56.107 and which provides special expertise as needed to adequately assess all aspects of each study.
7. Promptly notifying the NASA IRB if there is a suspension or termination of the External IRB's authorization to review a study.
8. Providing the NASA IRB the contact person and contact information for the reviewing IRB.
9. Maintaining appropriate documentation per record retention policies, including an OHRP-approved Federalwide Assurance (non-commercial IRBs) for human subject research.
10. Reporting to Sponsor, Federal Agencies, or Other Oversight Entities: If the IRB of Record determines that it must report information to the Sponsor, OHRP, the FDA and/or other

oversight entities, it will notify the NASA IRB within a reasonable time in advance of reporting.

a. The IRB of Record will share the report with NASA IRB before it is sent to the sponsor/oversight authority, and will copy NASA IRB official(s) and designees.

Procedures

1. The NASA PI must submit the request for a Reliance Acknowledgement
    a. Establish NASA IRB reliance on an External IRB as per HRP – 100 – SOP: Establishing Reliance Acknowledgements.
    b. Post Approval Reporting
        i. After NASA has approved the reliance on an External IRB, the following information must be reported to NASA IRB in the eIRB system: [as an attachment in 'Basic Information']
            1. Approval documents issued by the External IRB of Record and the protocol and documents, as approved by the External IRB.
            2. Data and safety monitoring plans and reports, as applicable
            3. Reportable Events
                a. Protocol Violations
                b. Reports of serious or continuing noncompliance
                c. Unanticipated Problems Involving Risks to Subjects or Others
2. Termination of the Reliance Acknowledgement
    a. Either the NASA IRB or External IRB of Record may unilaterally terminate the Acknowledgement by providing thirty (30) calendar days written notice.
    b. The Acknowledgement may be terminated in its entirety only upon the mutual agreement of all then-participating institutions. For clarity, termination of a participating site from the Acknowledgement will not terminate the Acknowledgement with respect to the remaining participating sites and institutions.
    c. Participation in the Acknowledgement will terminate immediately in the event of and as of the effective date of any suspension, restriction, termination, or expiration of the External IRB of Record's FWA; and in the event and as of the effective date of any failure of its IRB to remain registered with OHRP.
    d. Termination of the Acknowledgement shall not affect NASA IRB's obligations under 45 CFR 46.109(e) and 21 CFR § 56.109(f) to continue review of NASA-funded research projects that occur on NASA property and/or involve NASA-related research subjects.
    e. In the event of Termination of the Acknowledgement, NASA IRB will work with the External IRB of Record involved in the Termination to determine the effect of such Termination on any research and associated research activities being conducted under the Acknowledgement at the time of Termination.
    f. The External IRB of Record will, when possible and appropriate, provide continued oversight for ongoing research for the reasonable time necessary to

appropriately transfer oversight of the research to NASA IRB or to another IRB of Record.

g. Termination of the Acknowledgement shall be in writing and state, at a minimum, (1) the reason for Termination, (2) the effects of the Termination on any research activities, (3) any possible risks associated with Terminating the agreement when research remains open with the External IRB of Record, and (4) plans for continued oversight of active research during the transfer of the reviewing IRB.

Definitions

Cooperative Research: those projects covered by this policy that involve more than one institution.

Department or agency head [14 CFR 1230.102]: the head of any federal department or agency and any other officer or employee of any departments or agency to whom authority has been delegate.

Engaged: NASA is considered engaged in research when NASA's *employees or agents* obtain:

(1) data about the subjects of the research through intervention or interaction with them, or
(2) identifiable private information about the subjects or research, or
(3) the informed consent of human subjects for the research

and analog and parabolic flight studies funded by NASA.

Institution [14 CFR 1230.102]: any public or private entity or agency (including federal, states, and other agencies).

IRB of Record: The "Reviewing IRB" to which authority for IRB review and oversight has been ceded by the Relying IRB or Relying Site for an instance of research specified in the RA.

Key Personnel: Those involved in the conduct of human subject research in which the persons engaged are in direct contact with research participants consenting and/or collecting data, and/or have access to private and identifiable research data.

Noncompliance: Failure to follow the regulations, or the requirements or determinations of the IRB. Noncompliance is defined as a violation of any federal, state, or local regulation that governs human research; any institutional policy on human research; any deviation from the protocol approved by the IRB or stipulations imposed by the IRB as a condition of approval.

a. In the case of research funded or conducted by the Department of Defense (DOD), Non-Compliance includes failure of a person, group, or institution to act in accordance with Department of Defense (DOD) instruction 3216.02, its references, or applicable requirements.

Principal Investigator (PI): The NASA PI or PI that is responsible for coordination with the NASA IRB or the IRB of Record for all of the research sites.

Reliance Acknowledgement (RA): An agreement or 'acknowledgement' entered in to by two or more institutions engaged in human subject research that permits one or more institutions to cede IRB review to another IRB. The signed acknowledgement permit a single IRB to review human subject research activities for more than one site and documents respective

authorities, roles, responsibilities, and communication between an organization providing the ethical review and a participating organization relying on a reviewing IRB.

Relying IRB: The local IRB an institution or organization that has ceded IRB review to another IRB to provide IRB review and oversight for a specific study or set of studies.

Relying Site (Relying Institution): The research site(s) at an institution or organization that has ceded IRB review to another IRB to provide IRB review and oversight for a specific study or set of studies.

Significant Complaints: a complaint that may adversely impact a participant or potential participant's safety, rights, or welfare and/or one that requires a change to the study protocol or consent form.

Site Investigator (local Investigator): The investigator at one of the sites where the study is occurring and is responsible to PI.

Unanticipated Problem Involving Risks to Subjects or Others (UPIRSO): Any information that is (1) unanticipated, (2) related to the research, and (3) indicates that subjects or others are at increased risk of harm.

b. For Department of Defense (DOD) research the term Unanticipated Problem Involving Risks to Subjects or Others includes any incident, experience, or outcome that meets ALL three of the following conditions
    i. Is unexpected (in terms of nature, severity, or frequency) given the procedures described in the research protocol documents (e.g., the IRB-approved research protocol and informed consent document) and the characteristics of the human subject population being studied.
    ii. Is related or possibly related to participation in the research (in this Instruction, possibly related means there is a reasonable possibility that the incident, experience, or outcome may have been caused by the procedures involved in the research).
    iii. Suggests that the research places human subjects or others at a greater risk of harm (including physical, psychological, economic, or social harm) than was previously known or recognized, even if no harm has actually occurred.

References

NASA

1. 14 CFR1230.114
2. NPR 7100.1A

DHHS Regulations

3. 45 CFR 46.103(e), 46.114
4. OHRP: Engagement of Institutions in Human Subjects Research (2008)

FDA Guidance and Regulation

5. 21 CFR 50, 56, 312, and 812

Other

6. ICH-GCP (E6)
7. NIH Policy on the Use of a Single Institutional Review Board for Multi-Site Research

AAHRPP

8. AAHRPP Tip Sheet 24: Single IRB or EC Review

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