AGENDA

• What are deviations?
• When must they be submitted to the IRB?
• When is convened IRB review required?
• Actions taken before the Board meeting
• Actions taken during the Board meeting
• Determinations made at the Board meeting
• What happens after the Board meeting?
WHAT ARE DEVIATIONS?

Definition: An unintentional action or process that departs from IRB approval and is identified retrospectively. (IRB SOP 404)

Examples:
- Scheduling a study visit outside a protocol specified window
- Enrollment of subject that does not meet inclusion criteria
- Failure to collect self-report questionnaires
- Failure to obtain valid informed consent
- Administration of the incorrect dose of study drug
Deviation should be submitted to the IRB in real-time when:

- One or more participants were placed at increased risk of harm
- The event has the potential to occur again
- The event has the potential to qualify as serious or continuing non-compliance

**Serious noncompliance** is noncompliance that may affect subject safety; increase risks to participants; affect the integrity of the data; violate the rights and welfare of participants; or affect the subject’s willingness to participate in research.

**Continuing noncompliance** means a pattern of noncompliance that indicates a lack of understanding about the regulations or ethical requirements that may affect the rights and welfare of participants.
Deviations are referred to the convened IRB for review if a serious or continuing non-compliance determination and/or an unanticipated problem determination is needed. Determinations are commonly needed when:

- The deviation increased risks to participants
- Data integrity was affected by the deviation
- Subjects’ rights or welfare was violated
- The event is part of a pattern of deviations
The Deviation report is reviewed by the IRB staff and the Director/Chair before it is scheduled for convened review. These reviews are to document timely receipt of the report and to ask preliminary questions. The initial review includes an assessment of prior submissions to determine if there have been similar events in the past.

Common Questions Asked During Initial Review:
1. How was the deviation identified?
2. What is the root cause of the event?
3. If there was a delay in reporting, what was the cause?
4. What is the PI’s assessment of the potential for increased risk to the subject(s)?
5. Did the deviation impact the integrity of the study data?
6. Has the study sponsor/other monitors weighed in on the deviation/required any follow-up?
7. Has the subject been informed of the error? If so, what information was shared? If not, is there a plan to inform the subject? Why/Why not?
8. What is the proposed corrective action plan to prevent future deviations? Are any changes needed to implement this plan?
ACTIONS TAKEN BEFORE CONVENED MEETING

- If convened review is needed the IRB acknowledges the report to confirm timely submission and schedules the report for the next available Board agenda.
- The study team may be asked to address specific requests for additional information prior to convened review.
- The agenda notes will inform the members if they are being asked to consider non-compliance determinations, unanticipated problem determinations, or both.
During the meeting, the Board should consider the report and any additional information provided prior to the meeting.

Some questions that may be raised:
- Does the study team’s summary of the event make sense? Are there questions about exactly what happened that need to be answered? Does the deviation have a clear root cause?
- Did the study team respond appropriately to the deviation? Should they have taken different steps once the event was identified?
- Is more information needed to assess the impact of the deviation for this specific subject or other subjects?
DISCUSSION AT THE BOARD MEETING

The Board should consider the corrective action plan proposed by the study team and determine if additional action should be taken or if additional information is needed to assess the appropriateness of the corrective action plan proposed.

After discussion, the IRB should accept the report and require any of the following:

• No action be taken
• Additional information be provided
• Additional corrective actions be taken
DISCUSSION AT THE BOARD MEETING

The IRB can consider any of the following additional actions be taken in response to the event:

- Accept report or with no additional requirements
- Approve investigator’s proposed changes
- Administrative hold on the study pending IRB receipt of further information
- Modification of the protocol
- Modification of the information disclosed during the consent process
- Providing additional information to current participant the information may relate to the participant’s willingness to continue participation
- Making arrangements for clinical care outside the research or additional follow-up for participants
- Providing additional information to past participants
- Requiring current participants to re-consent to participation
- Observation of the research or the consent process
- Requiring additional training of the investigator
- Notification of investigators at other sites
- Obtaining additional information
- Termination or suspension of the research
DETERMINATIONS AT THE MEETING

The IRB should then determine if the event meets the definition of serious non-compliance, continuing non-compliance, or an unanticipated problem.

Serious noncompliance is noncompliance that may affect subject safety; increase risks to participants; affect the integrity of the data; violate the rights and welfare of participants; or affect the subject's willingness to participate in research.

Continuing noncompliance means a pattern of noncompliance that indicates a lack of understanding about the regulations or ethical requirements that may affect the rights and welfare of participants.

Unanticipated problems are events that are any incident, experience or outcome that meets the following criteria:

- unexpected (in terms of nature, severity, or frequency) given (a) the research procedures that are described in the protocol-related documents, such as the IRB-approved research protocol and informed consent document; and (b) the characteristics of the subject population being studied;
- related or probably related to participation in the research;
- suggests that the research places subjects or others at a greater risk of harm (including physical, psychological, economic, or social harm) than was previously known or recognized.
ACTIONS TAKEN AFTER THE MEETING

IRB Staff will send a letter to the study team informing them of the Board’s determinations.

If additional information is requested, the response may require review by the convened IRB.

If corrective actions are stipulated, the IRB will review the response to ensure that the required steps have been taken.

The IRB will report to the VPR, FDA, and/or OHRP any serious non-compliance, continuing non-compliance, and unanticipated problem determinations.