

TRAINING AND EDUCATION OF RESEARCH ETHICS BOARD MEMBERS AND OFFICE PERSONNEL 5.1.2



Procedures are a series of required steps to complete a task, activity or action

Purpose:	To provide a standardized approach for provision of training and education for Island Health Research Ethics Board (REB) members and Research Ethics Office Personnel.
Scope:	 Affected Roles REB Office Personnel, REB Chairs and members Manager, Research Ethics & Compliance Environment Research Environment
Outcomes:	To ensure a consistent standard of learning for all REB members and Research Ethics Office Personnel.

1 RESPONSIBILITY

All members of the REB and REB Office Personnel are responsible for ensuring that the requirements of this SOP are met.

2 PROCEDURE

REB members, Research Ethics Office Personnel, and others charged with responsibility for reviewing, approving, and overseeing human participant research should receive detailed training in the regulations, guidelines, ethics, and policies applicable to human participant research. Such training is fully supported by the Leadership of the REB.

Adequate training of REB members and REB Office Personnel is critical if the REB is to fulfill its mandate to protect the rights and welfare of research participants.

3 TRAINING AND EDUCATION

3.1 For REB Members

- Members of the REB who are overseeing research on human participants will receive initial and ongoing training regarding the responsible review and oversight of research, and the policies and procedures that accompany such activities.
- The Manager, Research Ethics & Compliance, in consultation with the Chairs and the Research Ethics Coordinators, establishes the educational and training requirements for REB members who review biomedical and socio-behavioural research. Initial and ongoing training for the REB members is provided and documented by the Manager, Research Ethics & Compliance.
- The REB Chairs will receive additional training in areas relevant to their additional responsibilities, as applicable and relevant.
- New REB members will receive an orientation as outlined below before beginning their formal duties. REB members are required to complete the Tri-Council Policy Statement (TCPS 2) online tutorial or equivalent, and are expected to participate in the orientation process which may include, but is not limited to:
 - o Background on the REB (e.g. Terms of Reference, governance structure, annual reports, process flowchart):
 - Policies and Procedures (e.g. relevant SOPs and associated forms, consent form template, reviewer checklist);

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- Member information (e.g. meeting schedule, membership list, information and guidelines for members, reviewer guide);
- o Regulatory and guidance documents;
- Other member-specific information (e.g. copy of signed confidentiality and conflict of interest agreement, membership appointment letter); and
- o Resource information (e.g. list of training and education references, relevant articles, etc.).
- REB members and staff will be encouraged to attend workshops and other educational opportunities focused
 on REB functions. Island Health will support such activities to the extent possible and as appropriate to the
 responsibilities of members and staff members. Conference attendance is based on availability of funding and
 other practical considerations (e.g. timing, conference location).
- New or revised policies and SOPs will be disseminated to the REB members.
- REB members are encouraged to engage in self-directed learning in research ethics and in the conduct of research to enhance their ability to fulfill their responsibilities.

3.2 For REB Office Personnel

- REB Office Personnel who are overseeing research on human participants will receive initial and ongoing training regarding the responsible review and oversight of research and the policies and procedures that accompany such activities.
- The Manager, Research Ethics & Compliance, establishes the educational and training requirements for REB Office Personnel and others who perform related administrative duties. Initial and ongoing training for REB Office Personnel is provided and documented by the Manager.
- New REB Office Personnel will receive an orientation package. Before commencing their official duties in the REB office, REB Office Personnel are expected to read and become familiar with the information.
- New REB Office Personnel are required to complete the TCPS 2 online tutorial or equivalent, and are encouraged to complete additional ongoing relevant education and training in research ethics and in the conduct of research.
- REB Office Personnel will receive initial and continuing training in the areas germane to their responsibilities.
- New or revised policies and SOPs will be disseminated to the REB Office Personnel.
- REB Office Personnel will be encouraged to attend workshops and other educational opportunities focused on REB functions. Island Health will support such activities to the extent possible and as appropriate to the responsibilities of REB Office Personnel. Conference attendance is based on availability of funding and other practical considerations (e.g. workload, staffing, conference location).
- REB Office Personnel are encouraged to engage in self-directed learning in research ethics and in the conduct of research to enhance their ability to fulfill their responsibilities.

3.3 Documentation of Training and Education

3.3.1 The Research Ethics & Compliance Office will retain copies of the curriculum vitaes (CVs) of all REB members and REB Office Personnel.

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- 3.3.2 REB members and REB Office Personnel will record their relevant training and education and provide copies of their certificates of completion. Training records will be kept on file in the Research Ethics & Compliance Office.
- 3.3.3 REB members and REB Office Personnel are encouraged to retain copies of agendas of relevant workshops, seminars and conferences attended.
- 3.3.4 REB agendas and minutes will record the distribution of any educational materials presented at the REB meetings.

4 TRAINING

4.1 Review of the SOP.

5 COMPLIANCE MONITORING

- 5.1 The Island Health Manager, Research Ethics & Compliance or their delegate is responsible for ongoing monitoring of Island Health operations to verify compliance with this SOP.
- 5.2 The Island Health Manager, Research Ethics & Compliance or their delegate is responsible for communicating any changes to this SOP to all relevant personnel.
- 5.3 Deviations from this SOP will be addressed through corrective and preventative action implementation.

6 DEFINITIONS

See Glossary of Terms – Research Ethics

7 REFERENCES

- Network of Networks and Canadian Association of Research Ethics Board Training and Education, 103.003, V 3.0
- The Tri-Council Policy Statement: Ethical Conduct for Research Involving Humans, Article 6.2: https://ethics.gc.ca/eng/tcps2-eptc2_2018_chapter6-chapitre6.html#2
- The Tri-Council Policy Statement: Ethical Conduct for Research Involving Humans, Article 6.7: https://ethics.gc.ca/eng/tcps2-eptc2 2018 chapter6-chapitre6.html#7
- ICH GCP International Council on Harmonisation of Technical Requirements for Registration of Pharmaceuticals for Human Use ICH Harmonised Tripartite Guideline Guidelines for Good Clinical Practice E6(R2)

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8 SUMMARY OF CHANGES

Version	Effective Date	Change Description
1.0	01 JUL 2013	New procedure
2.0	09 AUG 2021	Manager, Research Ethics & Compliance will be consulted regarding training; removal of Director of Research and Capacity Building (RCB) role; removed training records to be held in RCB.; changed issuing authority from RCB to Vice President Knowledge, Practice and Chief Nurse Executive

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