Standard Operating Procedure (SOP)

SOP Number: SOP CW AHC 205	**SOP Name:** Committee Review Preparation
Location: *Company-Wide Policies	**Responsible Department:** Research Services
Executive Owner Executive Director of Research Services	**Original Creation Date:** 01/18/2022
Effective Date: 04/04/2022	**Review Date:** 04/04/2022

I. SCOPE: This standard operating procedure (SOP) applies to Research Personnel and Institutional Review Board (IRB) staff members, chair, and committee members at AdventHealth.

II. PURPOSE: This procedure establishes the process to prepare for an IRB meeting. This procedure begins when meeting preparation commences and ends when IRB members attending the meeting have been notified of the agenda and their assignments.

III. QUALIFIED PERSONNEL: Designated Reviewers; IRB staff members

IV. TRAINING: Not applicable

V. SUPPLIES & EQUIPMENT: Not applicable

VI. PROCESS/PROCEDURE: AdventHealth places limits on the number of items on the agenda. The workloads are determined by IRB staff and members on a per IRB panel basis. The limits are based on the complexity of agenda items at a typical meeting and the time available to meet. Limits are adjusted as needed by IRB staff and members.

A. Confirm which IRB members (regular, alternate, IRB Executive Chair, and IRB vice-chairs) will be present at the meeting.
B. Prepare an agenda.
C. Assign an IRB member as the primary presenter to each agenda item.
D. Ensure that at least one IRB member with relevant scientific/scholarly expertise will use HRP-401 WORKSHEET – Scientific and Scholarly Review and be present for each agenda item. If an IRB member with relevant scientific/scholarly expertise is not available, follow SOP CW AHC 210 Consultation to obtain a consultant.
E. Use HRP-431 WORKSHEET – Quorum to ensure that the meeting will be appropriately convened.
F. If the meeting will not meet the quorum requirements, make arrangements to meet quorum requirements (e.g., arrange for additional or different IRB members or consultants to attend, arrange for materials to be provided to attendees, arrange for IRB member training before or at the meeting), or notify a manager.
G. Ensure that all IRB members are provided or have access to the materials in CW AHC IRB Member Review Expectations, at least one week before the meeting, unless an exception is approved by the IRB Executive Chair or the HRPP Administrator.

VII. DEFINITION(S): For capitalized terms not defined in this policy, refer to CW AHC 107 Definitions in Human Research.

For capitalized designations not defined in this policy, refer to CW AHC 103 Designations in Research

VIII. EXCEPTION(S): See CW AHC 101 Research Oversight

IX. REFERENCE(S): Not applicable

X. RELATED DOCUMENT(S) / ATTACHMENT(S):

- CW AHC 107 Definitions in Human Research
- CW AHC 103 Designations in Research
- CW AHC 101 Research Oversight
- CW AHC 108 Human Research Protection Program
- SOP CW AHC 210 Consultation
- WORKSHEETS are located on the AdventHealth Research Institute website
  - HRP-401 WORKSHEET – Scientific and Scholarly Review
  - HRP-431 WORKSHEET – Quorum