SMART TALK

A Community Forum to Explore Issues Surrounding Single IRB Review

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Before we begin

Questions are welcome! Please post these under ‘Q/A’

Discussion with fellow attendees should be posted under ‘Chat’

A link to today’s recording will be emailed to attendees. A recording will be posted on the SMART IRB website

Your feedback is valued! Please complete the survey at the end of the SMART Talk! The survey will be emailed as well.

SMART IRB: Your Roadmap to Single IRB Review

Agreement

Providing a common, comprehensive framework reliance agreement with 1420+ signatories across the United States

Reliance System

Your home to request, document, and track reliance requests with fellow Participating Institutions in one centralized place

Harmonization

Strategically align your institution's policies and procedures with industry best practices

Resources & Education

Explore an ever-growing portfolio of customizable resources for your institution's reliance program

Support

Need assistance? Check out our Support Center, Ambassadors, and Helpdesk

Meet Your SMART IRB Ambassadors!

Polly Goodman
Harvard Catalyst

Nichelle Cobb
AAHRPP

Jeremy Lavigne
Harvard Catalyst

Ada Sue Selwitz
University of Kentucky

Find your SMART IRB Ambassador Today: www.smartirb.org

Aaron Kirby
Harvard Catalyst

Kathy Lawry
AAHRPP

Stacey Goretzka
Ind. Consultant

Carissa Minder
Washington University in St. Louis

New SMART IRB Resources!

Recent publications include:

- Relying on an External Single IRB: FAQs for Relying Site Study Teams
- Guidelines for Relying Site Study Teams: Enhancing sIRB Process Standardization
- SMART IRB Reliance System: New Institution Onboarding Checklist

Stay tuned for:

- Harmonization: Exemptions – Public Comment Period
- Harmonization: Local Considerations - Publication

Upcoming Events

Next SMART Talk

All Aboard! Helping Researchers and Research Partners Navigate Single IRB

March 18, 2026, 2-3:30 pm EST

You Say Non-Compliance, I Say Noncompliance: Exploring Reportable Event Harmonization in a Single IRB World

Moderator:

Nichelle Cobb, SMART IRB Ambassador At Large + Senior Advisor

Panelists:

Mike Linke, Chair, NIH StrokeNet Central IRB + Program Director, Education – SMART IRB

Edith Paal, Senior Director, University of Arkansas for Medical Sciences (UAMS) Institutional Review Board

Courtney Jarboe, HRPP Assistant Director, University of Minnesota

Brittany Keown, IRB Reliance Manager, Ascension Health

SMARTIRB.org

What the SMART IRB Agreement says

SMART IRB Responsibilities: Reviewing IRB

5.9 Notification of Unanticipated Problems and Complaints and Associated Suspension/Termination of IRB Approval. With respect to Research under Ceded Review, a Reviewing IRB/Reviewing IRB Institution will promptly notify the Overall PI, Site Investigator(s), and the Relying Institution(s) of applicable review decisions, findings, and actions (including any suspension or termination of IRB approval of Research and required corrective actions) with respect to (i) any unanticipated problems involving risks to human subjects or others or significant Research participant complaints (e.g., those that could affect the conduct of the Research) involving Research participants enrolled by the Relying Institution; and (ii) such events involving Research participants enrolled by any other Relying Institution if such events relate to or may affect the conduct of the Research by or the safety, rights or welfare of Research participants enrolled in the Research by the notified Relying Institution(s). Such notifications may be made through the Reviewing IRB/Reviewing IRB Institution's designee, if agreed by the relevant Relying Institution(s) in connection with the instance of Research.

SMART IRB Responsibilities: Reviewing IRB

5.10 Notification of Serious and/or Continuing Noncompliance and Associated Suspension/Termination of IRB Approval. With respect to Research under Ceded Review, a Reviewing IRB/Reviewing IRB Institution will promptly notify the Overall PI, Site Investigator(s), and the Relying Institution(s) of applicable review decisions, findings and actions (including any suspension or termination of IRB approval of Research and required corrective actions) with respect to (i) serious and/or continuing noncompliance or apparent serious and/or continuing noncompliance with the Federal Policy, other applicable federal human subjects protection regulations or policies, and/or the FDA Clinical Investigation Regulations, as applicable, or with the requirements or determinations of the Reviewing IRB, by the Relying Institution or its Personnel; and (ii) such serious and/or continuing noncompliance or apparent serious and/or continuing noncompliance at any other Relying Institution if such noncompliance relates to or may affect the conduct of the Research or the safety, rights, or welfare of Research participants at the notified Relying Institution(s)…All such notifications may be made through the Reviewing IRB/Reviewing IRB Institution's designee, if agreed by the relevant Relying Institution(s) in connection with the instance of Research.

SMART IRB Responsibilities: Reviewing IRB

5.13 External Reporting. With respect to Research under Ceded Review, a Reviewing IRB/Reviewing IRB Institution will notify a Relying Institution in advance if the Reviewing IRB determines under applicable federal human subjects protection regulations or under the terms of the Relying Institution's Assurance that a report (other than a report discussed in Section 5.13.3) is required to a federal human subjects research regulatory agency (e.g., OHRP, FDA) regarding unanticipated problems involving risks to human subjects or others; serious and/or continuing noncompliance with the Federal Policy, other applicable federal human subjects protection regulations or policies, and/or the FDA Clinical Investigation Regulations, as applicable, or with the requirements or determinations of the Reviewing IRB; and/or any suspensions or terminations of IRB approval ("Report").

SMART IRB Responsibilities: Reviewing IRB

5.13.1 Default Procedure. Unless an alternate reporting arrangement is agreed upon in accordance with Section 5.13.2, the Reviewing IRB/Reviewing IRB Institution will draft the Report and will provide the Relying Institution the opportunity (no fewer than five (5) business days, whenever possible and consistent with any applicable federal regulations or requirements) to review and comment on the draft Report before the Reviewing IRB/Reviewing IRB Institution sends the final Report to the external recipients (such final Report will also be copied to the Relying Institution). The Relying Institution will promptly provide any comments on the draft Report to the Reviewing IRB/Reviewing IRB Institution as provided in Section 6.16 hereof. Nothing in this Agreement requires the Reviewing IRB/Reviewing IRB Institution to be in violation of any legally required timeframes for submission of its Report, and the Reviewing IRB/Reviewing IRB Institution is under no obligation to adopt or concur with the comments of a Relying Institution. However, nothing herein shall prevent a Relying Institution from making its own Report in addition to any Report prepared by the Reviewing IRB/Reviewing IRB Institution; if a Relying Institution so elects, it will provide a copy of such Report to the Reviewing IRB/Reviewing IRB Institution as provided in Section 6.16.

SMART IRB Responsibilities: Relying Institution

6.12 Notification of Unanticipated Problems and Complaints. With respect to Research under Ceded Review, a Relying Institution will require its Site Investigator(s) and other Personnel to promptly notify the Reviewing IRB of any unanticipated problems involving risks to human subjects or others or any significant Research participant complaints (e.g., those that could affect the conduct of the Research) involving Research participants enrolled by the Relying Institution.

SMART IRB Responsibilities: Relying Institution

6.13 Notification of Noncompliance. With respect to Research under Ceded Review, a Relying Institution will promptly notify the Reviewing IRB of any potential noncompliance with the Federal Policy, other applicable federal human subjects protection regulations or policies, and/or the FDA Clinical Investigation Regulations, as applicable, or with the requirements or determinations of the Reviewing IRB by the Relying Institution or its Personnel in connection with the Research.

SMART IRB Responsibilities: Relying Institution

6.16 External Reporting. With respect to Research under Ceded Review, a Relying Institution will notify the Reviewing IRB/Reviewing IRB Institution in advance if the Relying Institution determines under applicable federal human subjects protection regulations or under the terms of the Relying Institution's Assurance that a Report is required…A Relying Institution will promptly provide any comments on any draft Report that will be made by the Reviewing IRB/Reviewing IRB Institution pursuant to Section 5.13.1 hereof; if the Relying Institution elects to make its own additional Report, it will provide a copy of such Report to the Reviewing IRB/Reviewing IRB Institution. If the Reviewing IRB/Reviewing IRB Institution and a Relying Institution will make a joint Report pursuant to Section 5.13.2 hereof, they will work collaboratively to prepare and timely submit the Report and will not make independent Reports unless they cannot ultimately or timely agree on the content of the Report. If the Relying Institution will make the Report pursuant to Section 5.13.2 hereof, the Relying Institution will promptly prepare the draft Report and will provide the Reviewing IRB/Reviewing IRB Institution with the opportunity (no fewer than five (5) business days, whenever possible and consistent with any applicable federal regulations or requirements) to review and comment on the draft Report, after which time the Relying Institution may finalize and send the Report to external recipients (such final Report will also be copied to the Reviewing IRB/Reviewing IRB Institution). Regardless how Reports are handled, the Relying Institution will make and be solely responsible for any and all other reports or notifications in accordance with Section 5.13.3 hereof.

Another Key Document for Today's Discussion

- Includes recommendations for
  - Definitions
  - Policy
  - What to report
  - Reporting timeframes
- Includes examples of
  - Apparent Serious or Continuing Noncompliance
  - Examples of events that likely constitute unanticipated problems

SMART IRB Guidance: Reportable Events – Proposed Definition and Harmonization Recommendations

Proposed Definitions

- Noncompliance is any failure to follow:
  - Applicable federal regulations, state and local laws, or institutional policies governing human subjects protections or
  - The requirements or determinations of the IRB, including the requirements of the approved investigational plan (i.e., protocol deviations).

    Noncompliance can result from performing an act that violates these requirements or failing to act when required.
- **Serious noncompliance** is any noncompliance that increases the risk of harm to subjects; adversely affects the rights, safety, or welfare of subjects; or adversely affects the integrity of the data and research.
- **Continuing noncompliance** is a pattern of repeated noncompliance that continues after initial discovery, including inadequate efforts to take corrective actions within a reasonable timeframe.

SMART IRB Guidance: Reportable Events – Proposed Definition and Harmonization Recommendations

Noncompliance Harmonization Recommendations

- Institutions should:
  - Require at least a preliminary report of noncompliance that can have an impact on the rights, safety, and welfare of subjects to the Reviewing IRB within 7 calendar days of the local site investigator becoming aware of the event(s).
  - Alert Relying Institutions that may be affected by an event and obtain their input, as appropriate, regarding the event and any proposed corrective actions.
  - Provide researchers with a list of examples of potential serious or continuing noncompliance that could have an impact on the rights, safety, or welfare of subjects.
  - Allow flexibility, when possible, regarding who can submit the report to the Reviewing IRB, but with the expectation that the Overall PI for a study and local investigator at the site where an event occurred are aware of the submission of the event.

SMART IRB Symposium: Enhanced Training in sIRB Review

Management of Noncompliance in Multi-Site Studies Under a Single IRB

October 8, 2024

SMART IRB Symposium: Enhanced Training in sIRB Review

Management of Noncompliance in Multi-Site Studies Under a Single IRB

October 8, 2024

- 353 active participants
- featured case-based training materials
- discussions led by expert panel members
- attendees engaged in practical problem-solving exercises
- Mentimeter-based activities
- participants shared valuable insights and experiences

Informed Consent Noncompliance

During an HRPP-required self-audit, a study team reports that 20 participants were enrolled with an expired consent form. A line-by-line comparison with the current IRB-approved consent form showed

…no difference in the text

Discussion

- Use SMART IRB definitions to promote consistent determinations
- continuing noncompliance requires persistence or recurrence after corrective actions
- the importance of implementing corrective actions

Determination

Over 90% of respondents felt that this was *neither* serious nor continuing noncompliance.

…serious new risks were identified in the current consent form

Discussion

- participants were not informed of new risks
- issue occurred before discovery
- rights and welfare
- actual vs potential risk

Determination

Over 90% of respondents felt this constituted serious noncompliance.

Informed Consent Noncompliance

- During an HRPP-required self-audit, a study team reports that 20 participants were enrolled with an expired consent form. A line-by-line comparison with the current IRB-approved consent form showed

…*no difference* in the text; however, the site PI and study team have a previous history of enrolling participants with expired consent forms in other studies.

Discussion

- **the expired consent matched the current version**
- **PI's history of similar issues**
- **How would the sIRB know about the previous issues?**

Determination

80% of respondents felt this was continuing noncompliance.

Dosing Error Noncompliance

Three participants were inadvertently given a one-time dose of 150 mg instead of 15 mg of study drug at one relying site.

…The participants had no apparent ill effects from the overdose of study drug.

Discussion

- absence of harm and its isolated nature
- potential for harm, even without actual harm

Determination

Over 90% of respondents felt that this was serious noncompliance.

…One hour after the dosing one of the participants developed a rash. The rash resolved without treatment with 3 hours.

Discussion

- one-time incident without evidence of a recurring pattern
- potential for harm, even in the absence of long-term effects
- sIRBs must manage site-to-site differences in how event seriousness is assessed.

Determination

Over 90% of respondents felt this constituted serious noncompliance.

Dosing Error Noncompliance

- Participants at *10 relying sites* were inadvertently given a one-time dose of 150 mg instead of 15 mg of study drug at one relying site.
- The participants had no apparent ill effects from the overdose of the study drug

Discussion

- The event was reported for the first time across 10 sites and was deemed an isolated occurrence at each site.
- If new sites report the same error after corrective measures are in place, it may warrant a continuing noncompliance determination.

Determination

54% of respondents felt that this was serious noncompliance
37% of respondents felt that this was serious and continuing noncompliance

Dosing Error Noncompliance

Challenges in Single IRB review

- Sites may resist sharing their errors with others, complicating study-wide corrective actions.
- Questions arose about the lead PI's role and how much control they have over individual site compliance.
- Sites may object to being labeled as non-compliant for isolated, first-time errors.
- Provide site-specific and study-wide training to address protocol adherence.

Disagreement Over Serious Noncompliance Determination

- A study team member alleged a site PI intentionally directed enrollment of participants who did not meet blood pressure inclusion criteria
- no adverse events
- PI claimed her instructions were misunderstood

sIRB serious noncompliance determination

Increased the risk of harm; adversely affected the rights, safety, or welfare; and adversely affects the integrity of the data and research

sIRBs provide a "clean slate" approach, evaluating cases without preconceived notions about a PI's character or history.

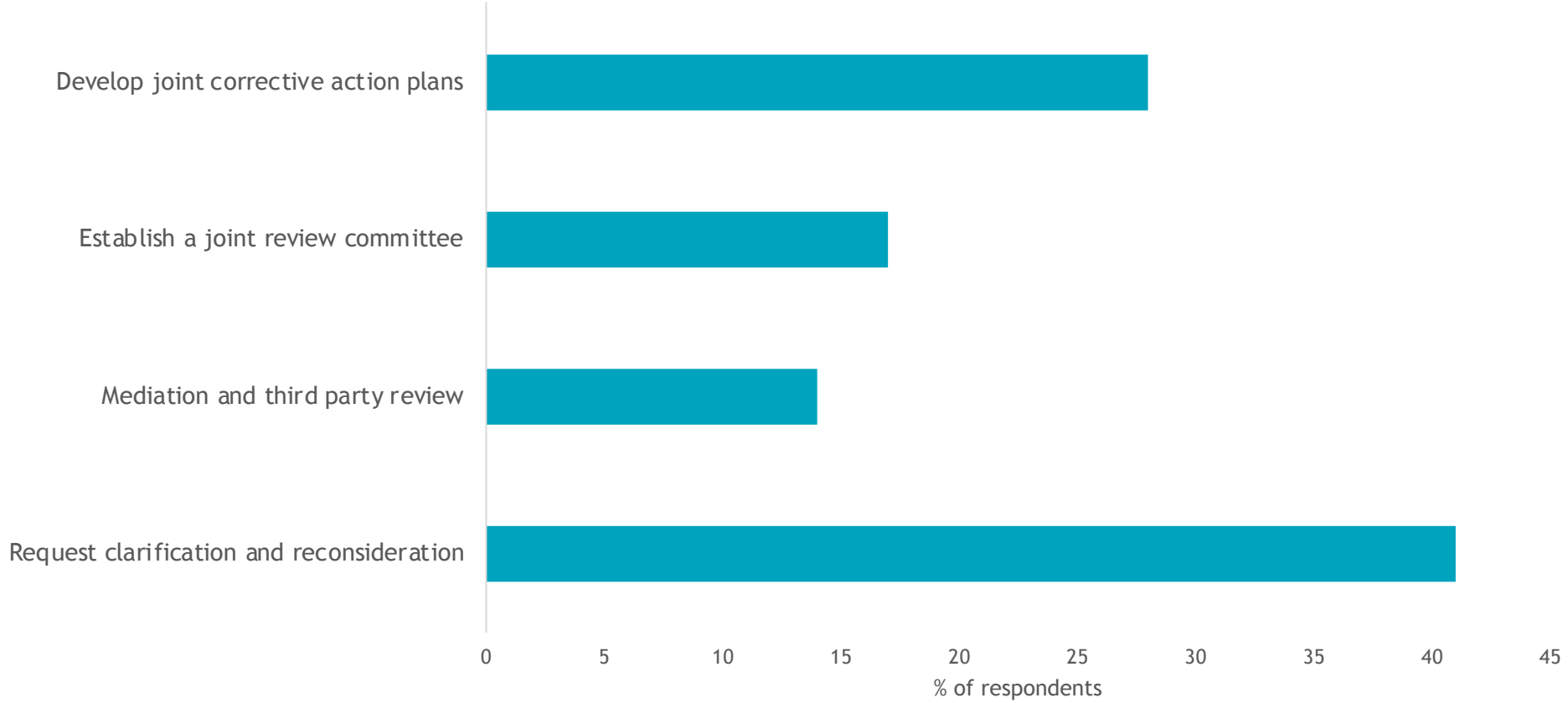
Site HRPP noncompliance

No harm to participants

argued that the PI had a long history of cooperation with the IRB and had no previous record of noncompliance Based on their definitions, they felt that the protocol deviation constituted noncompliance but not serious noncompliance.

What steps could be taken to resolve the disagreement over serious noncompliance determinations?

Mentimeter responses from attendees



What steps could be taken to resolve the disagreement over serious noncompliance determinations?

Summary of Panel Discussion:

- Initiate discussions between sIRBs and relying institutions during study setup to clarify expectations for compliance definitions, responsibilities, and reporting processes.
- Leverage resources like the SMART IRB recommendations for harmonizing definitions and processes across sites.
- Enhance training for PIs and study teams on the sIRB process
- Emphasize that single IRB oversight is a collaborative process with shared responsibilities
- Establish reliance agreements with explicit language on reporting processes, compliance definitions, and dispute resolution mechanisms.

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