I. Background
Exempt and non-exempt human subjects research must be reviewed by the IRB on an ongoing basis to ensure that the research continues to meet exemption criteria or criteria for IRB approval under the Common Rule (45 CFR 46), as applicable. This policy outlines procedures for continuing review of active projects.

II. Definitions
a. Minimal Risk: The probability and magnitude of harm or discomfort anticipated in the research are not greater in and of themselves than those ordinarily encountered in daily life of the general population or during the performance of routine physical or psychological examinations or tests.
b. Expiration date: The date after which IRB approval or an exempt determination is no longer effective until/unless the IRB/ORCA conducts a continuing review and renews its approval.
c. Renewal: The reinstitution of IRB approval or exempt determination, as the result of continuing review, for a study that was previously approved and for which approval is expiring or has expired.

III. Approval Periods
a. Department of Justice (DOJ) and FDA: Studies subject to DOJ or FDA regulations must be reviewed annually.
b. Greater than minimal risk: The Common Rule (45 CFR 46) requires human subjects research that is greater than minimal risk to be reviewed at least annually until it has progressed to a point where it consists only of one or both of the following (and no other human subjects research activities are planned): (a) data analysis, including analysis if identifiable private information or identifiable biospecimens, or (b) accessing follow-up clinical data from procedures that the subjects would otherwise undergo as part of clinical care. Thereafter, continuing review is required every 10 years.
c. Minimal risk and exempt studies: Studies that are not greater than minimal risk (exempt and non-exempt) will require review every 10 years. UCSC chose a 10-year expiration period in order to be congruent with the other University of California campuses.
d. IRB discretion: The IRB may require studies to receive continuing review more often than annually at its discretion – for example, due to the nature of the study, degree of uncertainty regarding the risks involved, the vulnerability
of the subject population, the inexperience of the investigator, prior noncompliance with the investigator or sponsor, or use of novel therapies.

IV. Continuing Review Requirements and Procedures

a. Researchers: The Principal Investigator (PI) is required to keep track of approval periods and submit a Renewal Form for IRB review no less than 30 days prior to expiration. Researchers must verify that approved materials are still in use and that there have been no unapproved changes. Researchers are expected to submit and get approval for any changes (per the IRB Policy on Amendments), report any unanticipated problems involving risks to subjects or others (per the Policy on Unanticipated Problems Involving Risks to Subjects or Others), report any noncompliance (per the Policy on Noncompliance), and to close out the study once the research is complete.

b. ORCA: As a courtesy, ORCA sends email reminders to researchers at roughly two months, one month, two weeks, and one week before expiration. ORCA does an administrative review of renewal requests in the order of receipt and sends comments/questions to researchers if needed. Once researchers respond, protocols that are eligible for exempt review are reviewed by ORCA staff, protocols that are eligible for expedited review are forwarded to the Chair or an experienced member designated by the Chair, and protocols that are potentially greater than minimal risk or do not meet exempt or expedited criteria are reviewed at a convened IRB meeting.

c. In order to keep UCSC updated on the status of active protocols for which it has an oversight responsibility, ORCA will send yearly “check-ins” to PIs inquiring about the status of the study. PIs are asked to respond with their intention to close the study or request to amend the study.

V. IRB Review and Actions

a. The IRB or ORCA (see below) will review the renewal application for continued compliance with IRB criteria for approval under 45 CFR 46.111.

i. Continuing review focuses on risk assessment and monitoring – is any new information provided that would alter the IRB’s previous conclusion that (1) the risks to subjects are minimized, and (2) the risks to subjects are reasonable in relation to anticipated benefits, if any, to the subjects and the importance of the knowledge that may reasonably be expected to result?; adequacy of the process for obtaining informed consent; Investigator and institutional issue; and research progress.

ii. Continuing review includes consideration of new federal regulations, guidance, or institutional policy, amendments being made at time of continuing review, review of subject complaints and unanticipated problems, and information brought forth to the IRB from outside entities.

b. Exempt review: Exempt determinations may be renewed administratively.
c. Expedited review: The IRB Chair or an experienced member designated by the Chair conducts the review and decides whether to approve the renewal, require modifications, or refer it to the full board.

d. Full committee review: A quorum of the IRB meets to discuss the renewal and reviews it based on the criteria above. The Board can approve it, require modifications if the comments are specific and direct, defer it if they cannot determine criteria for approval based on the information provided, or disapprove continuing the research if risks outweigh benefits.

e. Outside verification: In cases of complex procedures, investigators with prior noncompliance, discrepancies in application or materials submitted compared to approved protocol, or randomly selected projects, the IRB may check with third parties such as a sponsor or other research personnel to ensure no unapproved changes have occurred in the research.

VI. Documentation and Notification of Review

a. Modifications required: If ORCA (exempt renewals), a designated reviewer, or the full board requires modifications before the renewal can be approved, ORCA will notify the researcher and provide them with the issues that must be addressed. For renewals that are eligible for exempt or expedited review, the required modifications are documented in an email to the researcher. For renewals requiring full board review, the required modifications are documented in a letter from the IRB Chair and in the IRB meeting minutes. Researchers must respond in writing. Regardless of whether the initial application required full board review, the researcher’s response to required modifications may be reviewed by an experienced IRB reviewer designated by the Chair (expedited procedures). The reviewer may determine that the IRB’s issues are satisfied or else request further modifications from the researcher, in which case ORCA will notify the researcher and provide them with the remaining issues in an email. Again, the researchers must respond in writing and the review cycle continues until all IRB issues are resolved.

b. Deferral: If the full Board votes to defer a renewal request, ORCA will notify the researcher and provide them with the issues that must be addressed. The IRB’s issues are documented in a letter from the IRB Chair and in the IRB meeting minutes. Researchers must respond in writing. The researcher’s response to a deferral must be reviewed by the full IRB at a convened meeting.

c. Approval: Once approved, ORCA will notify the researcher of the approval, including which previously approved consent waivers are renewed and whether previous approval for the inclusion of any special populations is renewed, the effective date, and the new approval period per the above. The approval is documented in a letter from the IRB Chair and, if applicable, in the IRB meeting minutes. For renewals requiring full Board review, controverted issues and their resolution will be documented in the meeting minutes.
d. Disapproval: If the IRB disapproves the renewal, ORCA notifies the researcher and provides them with the IRB’s reasons for the disapproval. The reasons for the disapproval are documented in a letter from the IRB Chair and in the IRB meeting minutes. The researcher may submit a different protocol for initial review based on the IRB’s feedback, discontinue the research, or appeal the IRB’s determination in writing. Researcher appeals must be reviewed at a convened meeting of the full IRB.

VII. Expiration
The renewal request must be approved before the expiration date; otherwise, all research activities must cease until either IRB approval is reinstated (allowed at the IRB’s discretion if request was received prior to expiration) or a new application has been reviewed and approved. The application must be received with adequate time for the IRB to conduct their review. If the application is not received before the expiration date, the researchers must submit a new application.

VIII. References
a. OHRP Guidance on Continuing Review
b. 45 CFR 46.109, 45 CFR 46.110, and 45 CFR 46.111
c. Stanford University HRPP Policy Manual