

Standard Operating Procedure (SOP)

SOP Number: SOP CW AHC 229	SOP Name: Monthly Tasks
Location: *Company-Wide Policies	Responsible Department: Research Services
Executive Owner:	Original Creation Date: 01/18/2022
Executive Director of Research Services	
Effective Date: 04/04/2022	Review Date: 02/12/2024

- I. SCOPE: This standard operating procedure (SOP) applies to the HRPP Personnel
- **II. <u>PURPOSE</u>:** This procedure establishes the process to conduct monthly tasks related to the Human Research Protection Program (HRPP). This procedure begins the first business date of each month. This procedure ends when evaluations and corrective actions are completed.
- **III. <u>QUALIFIED PERSONNEL:**</u> HRPP Personnel carry out these procedures.
- IV. TRAINING: Not applicable
- V. SUPPLIES & EQUIPMENT: Not applicable

VI. <u>PROCESS/PROCEDURE</u>:

- A. The goal of the quality improvement plan is to achieve and maintain compliance and to achieve targeted levels of quality, efficiency, and effectiveness of the HRPP.
- B. Objectives of the quality improvement program are to:
 - 1. Improve compliance of Investigators with their responsibilities.
 - 2. Improve compliance of minutes with regulatory compliance.
 - 3. Increase efficiency of recording and finalizing minutes.
- C. The measures of the quality improvement program are:
 - 1. Results of Investigator self-assessments
 - 2. Errors on minutes
- D. Review the results of Investigators self-assessments sent out the previous month.
 - 1. Track the results.
 - 2. Examine for significant trends.
 - 3. Design interventions for adverse trends.
- E. Review the results of Investigators surveys sent out the previous month.
 - 1. Track the results.
 - 2. Examine for significant trends.
 - 3. Design interventions for adverse trend.
- F. Review a sample of minutes of the previous month for compliance with SOP CW AHC 208 Minutes.
 - 1. Track the results.
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- 2. Examine for significant trends.
- 3. Design interventions for adverse trend.
- G. Review the turnaround times for committee review and non-committee review.
 - 1. Track the results.
 - 2. Examine for significant trends.
 - 3. Design interventions for adverse trends.
- H. Send the results to the HRPP Administrator and Organization Official.
- I. Send HRP-901 Investigator Self-Assessment and HRP-902— Investigator Self-Assessment Instructions to 5 Investigators.
- J. Send HRP-903 Investigator Satisfaction Survey to 5 Investigators. Provide IRB members with a list of approvals using the expedited procedure from the previous month.
- VII. <u>DEFINITION(S)</u>: 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): CW AHC 101 Research Oversight
 - IX. <u>REFERENCE(S)</u>: Not applicable

X. <u>RELATED DOCUMENT(S) / ATTACHMENT(S)</u>:

- 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 208 Minutes
- Self-Assessments are located in IRBNet
 - HRP-901 Investigator Self-Assessment
 - HRP-902 Investigator Self-Assessment Instructions
 - HRP-903 Investigator Satisfaction Survey (link in HRP-902)