



ORDER

Imphal, the 19th August, 2024

No. M/1/2023-RIMS(52): The Executive Council of the Regional Institute of Medical Sciences, Imphal, in its 52nd meeting held on 19th July, 2024 under Agenda Item No. 6, has approved the Standard Operating Procedure (SOP) for Research Ethics Board (REB) of Regional Institute of Medical Sciences (RIMS), Imphal.

2. Copies of the approved SOP for REB, RIMS, Imphal, is enclosed.

By Orders & in the name of Chairman, EC

(Prof. G. Sunil Kumar Sharma)
Director,
RIMS, Imphal

Copy to:

1. P.S. to Secretary, Health & Family Welfare, Government of India - for kind information of Chairman, EC, Society of RIMS, Imphal.
2. The Joint Secretary (N.E.), Ministry of Health & Family Welfare, Government of India.
3. The Under Secretary (N.E.), Ministry of Health & Family Welfare, Government of India.
4. The Medical Superintendent, RIMS Hospital, Imphal.
5. The Dean (Academic), RIMS, Imphal.
6. The Principal, Dental/College of Nursing, RIMS, Imphal.
7. All HoDs, RIMS, Imphal.
8. The Deputy Director (Admn.), RIMS, Imphal.
9. The CAO/FA, RIMS, Imphal.
10. All Section Officers, RIMS, Imphal.
11. The System Administrator, RIMS, Imphal. - for uploading in RIMS website.
12. Order Book.

Standard Operating Procedures (SOP) of the RIMS Research Ethics Board for Biomedical and Health Research Involving Human Participants

1. Introduction

In accordance with the Declaration of Helsinki and subsequent international ethical guidelines, including ICMR for biomedical research, it is necessary for all research proposals involving human subjects to be cleared by an appropriately constituted Research Board or Ethics Committee to safeguard the welfare and rights of participants. Ethics Committees are entrusted not only with the initial review of the proposed research protocols prior to initiation of the projects but also have a continuing responsibility to regularly monitor compliance with all ethical requirements till the completion of the study.

This Standard Operating Procedure (SOP) document outlines the policies, procedures, and guidelines for the ethical review and oversight of research involving human participants by the Research Ethics Board (REB) of the Regional Institute of Medical Sciences, Imphal. The REB is responsible for ensuring that all research activities carried out under the auspices of the Regional Institute of Medical Sciences, Imphal, comply with the highest ethical standards and applicable regulations, guidelines, and laws.

The primary objective of the REB is to protect the rights, safety, and well-being of human participants involved in research projects conducted by the Regional Institute of Medical Sciences, Imphal, or external researchers seeking approval from the committee. The REB is committed to facilitating ethical and scientifically sound research while upholding the principles of respect for persons, beneficence, and justice, as outlined in the Indian Council of Medical Research (ICMR) National Ethical Guidelines for Biomedical and Health Research Involving Human Participants (2017), Drugs and Cosmetics Act 1940 and Drugs and Cosmetics Rules 1945 (including the amendments), and New Drugs and Clinical Trials Act and Trial (2019).

The SOP document is designed to ensure consistency, transparency, and accountability in the REB operations and decision-making processes. It is aligned with the ICMR National Ethical Guidelines, as well as other relevant national and international regulations, guidelines, and best practices.

2. Objective

The objective of this SOP is to contribute to the effective functioning of the Research Ethics Board (REB) of RIMS so that a quality, consistent and unambiguous ethical review mechanism for health and biomedical research is put in place for all proposals dealt with by the REB RIMS based on the existing Indian regulations and relevant international guidelines.

3. Roles and responsibilities of the REB RIMS

3A. Terms of reference of REB

The **terms of reference of REB RIMS** are aligned with the Indian Council of Medical Research (ICMR) National Ethical Guidelines for Biomedical and Health Research Involving Human Participants (2017). They are,

1. **Review and approval of research proposals:** REB RIMS shall be responsible for reviewing and approving research proposals involving human participants, ensuring that the proposed research adheres to ethical principles, such as respect for persons, beneficence, and justice.
2. **Protection of participants' rights and welfare:** REB RIMS shall ensure that the rights, safety, and well-being of research participants are adequately protected. This includes evaluating the potential risks and benefits of the research, ensuring informed consent processes are in place, and monitoring ongoing research for any potential ethical issues.
3. **Oversight and monitoring:** REB RIMS shall provide ongoing oversight and monitoring of approved research projects. This includes reviewing progress reports, monitoring adverse events, and addressing any ethical concerns that may arise during the course of the research.
4. **Conflict of interest management:** REB RIMS shall identify and manage potential conflicts of interest that may arise among researchers, sponsors, or committee members to ensure the integrity and objectivity of the research review process.
5. **Compliance with regulations and guidelines:** REB RIMS shall ensure that research complies with relevant national and international regulations, guidelines, and ethical standards, such as the ICMR National Ethical Guidelines, New Drugs and Clinical Trial Act and Rules (2019), Good Clinical Practice (GCP) guidelines, and other relevant laws and regulations.
6. **Capacity building and education:** REB RIMS shall promote ethical awareness and provide training and education to researchers, staff, and committee members on ethical principles, guidelines, and best practices in research involving human participants.
7. **Record-keeping and documentation:** REB RIMS shall maintain detailed records and documentation of their review processes, decisions, and ongoing monitoring activities to ensure transparency and accountability.

3B. Roles & Responsibilities based on the above terms of references

1. The REB RIMS will review and approve all types of research proposals involving human participants with a view to safeguarding the dignity, rights, safety and well-being of all actual and potential research participants regardless of the source of funding. The goals of research, however important, should never be permitted to override the health and well-being of the research participant.
2. The REB RIMS will ensure that all the cardinal principles of research ethics, viz. Autonomy, Beneficence, Non - malfesance and Justice are taken care of in planning, conducting and reporting the proposed research.
3. It will review the proposals before the start of the study as well as monitor the research throughout the study until and after completion of the study through appropriate well-documented procedures (for example, interim reports, final reports and site visits, etc.).

4. The REB RIMS shall take up the dual responsibilities of reviewing both the scientific content and ethical aspects of the proposal.
5. The REB RIMS will also examine compliance with all regulatory requirements, applicable guidelines and laws of the country and/or other countries/organizations wherever applicable/feasible.
6. The REB RIMS will ensure that universal ethical values and international scientific standards are expressed in terms of local community values and customs.
7. The REB RIMS will assist in the development and education of a research community responsive to local healthcare requirements.

8. Undergraduate and Postgraduate Research Ethics Committee

A separate Research Ethics Sub-committee shall be formed from time to time to review research proposals from the students (both undergraduate and postgraduate, including PhD work). Members of the sub-committee shall be from amongst the four technical (medical science) members of the REB RIMS (two basic medical scientists and two clinicians). The Member Secretary of REB RIMS shall chair the sub-committee.

4. Types of the projects to be reviewed by REB RIMS

Aligning the National Ethical Guidelines for Biomedical and Health Research Involving Human Participants (2017) of the Indian Council of Medical Research (ICMR), the following types of projects will be reviewed.

- a. Clinical trials: These include studies involving investigational new drugs, devices, or interventions on human participants.
- b. Epidemiological studies: Research involving the study of the distribution and determinants of health-related events, states, or processes in specified populations.
- c. Genetic studies: Research involving the study of human genes, gene products, or genetic disorders.
- d. Stem cell research: Studies involving the use of stem cells, including embryonic stem cells, induced pluripotent stem cells, and adult stem cells.
- e. Research on reproductive health: Studies related to fertility, contraception, abortion, and other aspects of reproductive health.
- f. Research on vulnerable populations: Studies involving participants who may be vulnerable due to their age (children, elderly), socioeconomic status, or other factors that may affect their ability to make voluntary informed consent.
- g. Public health research: Research aimed at improving the health of populations or communities, including studies on disease prevention, health promotion, and health services.
- h. Behavioural and social science research: Studies involving human participants in the fields of psychology, sociology, anthropology, and other behavioural and social sciences.

- i. Qualitative research: Research involving the collection and analysis of non-numerical data, such as interviews, focus groups, or observational studies.
- j. Research on biological materials: Studies involving the collection, storage, and use of human biological materials, such as blood, tissues, or other bodily fluids.
- k. Research on medical records or data: Studies involving the use of medical records, health registries, or other sources of personal health data.

5. Review of proposals from outside the institute

REB, RIMS Imphal may review research proposals from outside the institute, provided the following conditions are met.

- a. The REB RIMS have the necessary geographical access to the site(s) where the research is proposed to be conducted. This is important for the committee to be able to monitor and oversee the research activities effectively.
- b. The REB RIMS have the competence and expertise to review the specific type of research proposal from outside.
- c. There should be a formal agreement or Memorandum of Understanding (MoU) between the REB RIMS and the institution or organization submitting the proposal from outside. This agreement should clearly define the roles, responsibilities, and expectations of both parties.
- d. The REB RIMS shall ensure that the proposed research complies with all relevant local ethical and regulatory requirements, including obtaining necessary approvals from relevant authorities, if applicable.
- e. The REB RIMS shall have adequate funding to effectively review and monitor the proposed research from outside the institute.
- f. The REB RIMS shall maintain detailed documentation and records of the review process, including minutes of meetings, decisions, and any relevant communications with the external organization or researchers.

It is important to note that the decision to review proposals from outside the institute is at the discretion of the REB RIMS, and it may choose to accept or decline such proposals based on their capacity, expertise, and other relevant considerations.

6. Review of academic proposals from Diplomat of National Board (DNB) students or investigator-initiated studies

REB RIMS will typically follow the same review process and ethical considerations when dealing with academic proposals from Diplomat of National Board (DNB) students or investigator-initiated studies. Therefore, proposals from DNB students or investigator-initiated studies must comply with relevant institutional policies, guidelines, and standard operating procedures related to research involving human participants. However, REB may take some specific considerations or guidelines:

7. SOP for research on vulnerable population

To ensure the rights, safety, and well-being of vulnerable participants, the following guidelines shall be followed.

- a. REB RIMS shall have a clear process for identifying and categorizing vulnerable populations, such as children, pregnant women, individuals with cognitive impairments, prisoners, economically or educationally disadvantaged groups, or other populations that may be vulnerable to coercion or undue influence.
- b. REB RIMS shall conduct a comprehensive risk assessment to evaluate the potential risks and benefits of the proposed research for vulnerable participants. This assessment should consider physical, psychological, social, economic, and legal risks, as well as the potential for stigmatization or discrimination.
- c. Proposals involving vulnerable populations shall undergo an enhanced review process, which may include additional expertise or representation on the REB, such as members with specific knowledge or experience related to the vulnerable population being studied.
- d. REB RIMS shall carefully review the informed consent process and documentation to ensure that it is appropriate for the vulnerable population and addresses their specific needs and vulnerabilities. This may involve the use of assent procedures for children, the involvement of legally authorized representatives, or the use of culturally appropriate language and formats.
- e. Strict measures shall be in place to protect the privacy and confidentiality of vulnerable participants, including data management and storage procedures, access controls, and protocols for reporting and handling breaches.
- f. REB RIMS may require researchers to engage with relevant communities, stakeholders, or advocacy groups representing the vulnerable population to ensure that the research is culturally appropriate, respectful, and addresses community concerns or priorities.
- g. REB RIMS shall establish procedures for ongoing monitoring and oversight of research involving vulnerable populations, which may include regular progress reports, site visits, or the appointment of independent monitors or data safety monitoring boards.
- h. REB RIMS shall ensure that researchers and study staff receive appropriate training and education on working with vulnerable populations, including ethical considerations, cultural competence, and strategies for minimizing risks and protecting participants' rights and welfare.
- i. REB RIMS should ensure that research involving vulnerable populations complies with relevant national and international regulations, guidelines, and ethical standards, such as the ICMR National Ethical Guidelines for Biomedical and Health Research Involving Human Participants (2017) and other applicable laws or policies.
- j. REB RIMS shall maintain detailed documentation and records of the review process, decisions, and ongoing monitoring activities for research involving vulnerable populations, ensuring transparency and accountability.

8. Composition of REB RIMS

The REB RIMS should be multidisciplinary and multi-sectorial in composition. Independence and competence are the two hallmarks of an REB. The number of persons in the Research Ethics Board should preferably be 8-15 members, out of which at least 50% of the members, including the chairperson, should be non-affiliated to RIMS, Imphal. The composition shall be as close as follows:-

- A. Chairperson
- B. One - to three persons from the basic medical science area
- C. One – three clinicians
- D. One legal expert or retired judge
- E. One social scientist/ representative of a non-governmental voluntary agency
- F. One philosopher/ ethicist/ theologian
- G. One layperson from the community
- H. Member Secretary

The REB RIMS approving drug trials shall have in the quorum at least one representative from the following groups:

- A. One basic medical scientist (preferably one pharmacologist).
- B. One clinician
- C. One legal expert or retired judge
- D. One social scientist/ representative of a non-governmental organization/philosopher/ ethicist/ theologian or a similar person
- E. One layperson from the community

9. Power and Functions of the REB RIMS members

a. Chairperson

- i. The Chairperson will chair all meetings of the REB RIMS. The Chairperson is empowered to convene emergency meetings of the full REB, RIMS or a sub-group/committee as per requirement. The Chairperson will be responsible for conducting committee meetings and leading all discussions and deliberations pertinent to the review of the research proposals.
- ii. The Chairperson will preside over all administrative and financial matters pertinent to the committee's functions. The Chairperson will sign documents and communications related to REB functioning.
- iii. The Chairperson will represent the REB RIMS at various meetings and fore. In case of anticipated absence, the chairperson will nominate preferably the Member Secretary or an REB member to represent the REB, RIMS.
- iv. In case of anticipated absence of the Chairperson at a planned REB meeting, the Chairperson will nominate a committee member from outside the Institute as acting Chairperson, or if, for reasons beyond control, the Chairperson is not available, an acting Chairperson will be elected from amongst the external members by the members present. The acting chairperson will have all the powers of the chairperson for that meeting.

- v. The chairperson will inform all members of the REB RIMS of any request/ suggestions from the REB members or its secretariat staff in a regular full board REB meeting for discussion and subsequent actions thereafter.
- vi. The chairperson will appoint an SOP team to improve the existing SOP or formulate a new SOP, if necessary.

b. Member Secretary

- i. The Member Secretary will conduct the business of the REB RIMS in consultation with the Chairperson. He or She, assisted by the Secretariat staff, will maintain records and communicate with all concerned including the Director, RIMS.
- ii. The Member Secretary is in charge of the Secretariat of the REB, RIMS.
- iii. The Member Secretary will prepare and maintain the meeting agenda and minutes and REB documentation. He/She will sign documents and communications related to REB functioning.
- iv. The Member Secretary will receive research proposals submitted to the Secretariat. He/She shall prepare and distribute study files and organize an effective and efficient tracking procedure for each proposal.
- v. The Member Secretary will report to the Chairperson on all matters related to the REB RIMS, including monitoring of the research proposals reviewed by the REB, RIMS.
- vi. The Member Secretary will communicate with the Principal Investigator regarding REB decisions related to the submitted research proposal.
- vii. The Member Secretary will arrange to provide updates on relevant and contemporary issues of health research to the committee members, and training of REB members, if needed.
- viii. The Member Secretary will receive Research Board review processing fees and issue official receipts for the same, prepare for audits, inspections, annual reports and financial statements of the REB, RIMS.

c. Members

- i. Members should be aware of local, social and cultural norms, as this is the most important social control mechanism.
- ii. It is the responsibility of each REB member to review research proposals, attend REB meetings and participate in discussions and deliberations so that appropriate decisions can be arrived at. Members should read, understand, accept and sign the agreement contained in the confidentiality Form (**Annexure IV**).
- iii. Any REB member can put forth suggestions/requests to the Chairperson/ Member Secretary by mail/letter/verbal request (during the meeting).
- iv. REB members should participate in continuing education activities in biomedical ethics and biomedical research and provide information and documents related to training obtained to the REB secretariat. Members should remain updated on relevant laws and regulations relating to ethics.

- v. REB members will assist the Chairperson and Member Secretary in carrying out REB activities as per the SOP.

d. REB secretariat staff

- i. The staff shall assist the Chairperson/ Member secretary and help in the distribution of SOPs to REB members and in keeping the records of the investigators.
- ii. The staff will make available the Forms for Submission of Research Proposal and will maintain files for SOPs (both current and past), all proposals submitted to the REB, RIMS and minutes of the REB meetings.
- iii. The Secretariat staff will screen all Research proposals submitted online for the prerequisite requirements, and forward it to the Member Secretary.
- iv. All the staff of the Secretariat will sign a confidentiality agreement, which should be filed with the REB. (**Annexure V**)

10. Terms of Reference

- a. The Director, Regional Institute of Medical Sciences (RIMS), Imphal, constitutes the REB RIMS. It would be preferable to appoint persons trained in bioethics or persons conversant with ethical guidelines and laws of the country.
- b. The Director, RIMS, Imphal, will appoint the Chairperson of the REB, RIMS, who will be from outside the Institute to maintain the independence of the committee. The chairperson should preferably have at least a minimum of 1-3 years of experience serving on the Research Ethics Board of an institute.
- c. The Director, RIMS, Imphal, will also appoint the Member-Secretary, who will be a medical faculty member of the Institution with domain speciality experience, preferably with knowledge of clinical research and ethics, with a personal interest in ethics and a capacity of good communication skills.
- d. Members should be a mix of medical/ non-medical, persons from basic sciences and applied sciences and other laypersons to represent the different points of view.
- e. The REB members will be appointed by the Director, RIMS, Imphal. Members will be selected in their personal capacities based on their qualifications, experience in the domain field, interest, ethical and/or scientific knowledge and expertise, as well as on their commitment and willingness to volunteer the necessary time and effort for the REB. They should not have any known record of professional misconduct.
- f. **New members will be appointed** under the following circumstances:
 - i. When a regular member completes his/ her tenure.
 - ii. If a regular member resigns before the tenure is completed.
 - iii. If a regular member ceases to be a member for any reason, including death or disqualification (long-term non-availability, absence in 3 consecutive meetings).

- iv. To fulfil the membership requirements as stated in this SOP
- g. The new members will be identified by the Chairperson according to the membership requirement i.e. as per the composition specified in this SOP, provided the potential member fulfils the conditions of appointment after discussion by the REB.
 - h. The names of new members to be appointed may be suggested by the REB members and the Chairperson to the Director, RIMS, for the final decision regarding the appointment.
 - i. The duration of appointment in the REB, RIMS is initially for a period of 2 years. At the end of 2 years, the committee will be reconstituted, and up to 50% of the members may be replaced by a procedure that includes nominations by the Chairperson of the REB, RIMS and Head of the Institute.
 - j. The REB RIMS can have as its members, individuals from other institutions/ organizations or communities with adequate representation of age and gender to safeguard the interests and welfare of all sections of the community/society.
 - k. The REB, RIMS may invite member(s) of specific patient groups or subject experts for REB meetings, if required, based on the requirement of the research area (e.g. HIV AIDS, genetic disorders, stem cell research, etc.) for eliciting their views. Such individuals will have to sign a confidentiality agreement and declare in writing conflicts of interest, if any, prior to attending the meeting. They will attend the meeting in the capacity of 'Guest/ Observer' and will not have the right to vote.
 - l. The REB, RIMS members should be encouraged to keep abreast of all national and international developments in ethics through orientation courses or regular training. The Chairperson and Member Secretary will take care of such activities in consultation with the Director, RIMS, Imphal.
 - m. A member can tender her/his resignation to the chairperson of the REB, RIMS, with reasons in writing, and the committee will take the decision. If a member wishes to resign from the membership, he/ she has to address his /her letter to the Chairman REB, RIMS, Imphal, and if reasonable, it will be forwarded to the Director, RIMS, for final decision. The resignation will become effective from the day it is accepted by the Director.
 - n. **Disqualification of a member**
 - i. A member may be disqualified by the Chairperson if his/ her conduct is inappropriate for an REB member. The process will be initiated if the REB chairperson or member-secretary receives a communication in writing for alleged misconduct from anybody. The chairperson will call for a meeting of the REB specifically to discuss this issue or the matter will be taken up for discussion. The meeting convened will follow the usual rules of quorum. The allegation(s) will be discussed at the REB meeting and the member alleged of misconduct will be provided adequate opportunity to defend himself/herself. He / She will be disqualified; if REB members present in the meeting approve of disqualification by voting (At least 2/3rd of the votes should be in favor of disqualification. The

alleged person will not have the voting right.) The chairperson will convey the disqualification to the concerned member through a written communication.

- ii. If, in the opinion of the Chairperson, the allegation is of grave significance where the integrity of REB could be questioned, the Chairperson may suspend the membership of the concerned REB member till a final decision is taken by REB. During the period of suspension, the concerned member will not have any right, privilege or responsibility of an REB member and will not perform any duty of an REB member.
- o. All members should maintain absolute confidentiality of all discussions during the meeting.
- p. Conflict of interest should be declared by members of the REB RIMS
- q. Normally, the REB RIMS will meet in the months of February, May, August and November every year on the fourth Friday of the month. However, meetings may also be called with the consent of the Chairperson for discussion of urgent matters.
- r. A minimum of seven members is required to form the quorum of the meeting. Out of the seven members, at least two members, including the Chairperson, should be from outside the institute.
- s. Honorarium will be paid for attending the review meeting for the members of the REB RIMS including invited experts, which will be subjected to changes from time to time.
- t. The SOP of the REB RIMS shall be updated periodically based on the changing requirements.

11. Application Procedures

- a. All proposals should be submitted in the prescribed application form duly signed by the investigator(s) / collaborators and forwarded by the Departmental Research Committee (DRC) with comments to the REB, the details of which is given in **Annexure II**.
- b. Fifteen (12) hard copies and one soft copy on a CD (3 hard copies and one soft copy on a CD in the case of the students/scholars) should be submitted along with the application form. The application should also be submitted online at www.rims.edu.in by the Principal Investigator.
- c. All relevant documents are enclosed with the application form and the same is uploaded to the website.
- d. The date of the meeting will be intimated to the researcher to be present, if necessary, to offer clarifications. **The processing fee should be remitted along with the application wherever applicable.**

- e. The REB RIMS secretariat shall screen all proposals for their completeness and, depending on the risk involved, categorize them into three types, namely, exemption from review, expedited review and full review.
- f. Generally, research proposals should be submitted at least one month before the scheduled meetings.
- g. For senior faculties who apply as a P.I., his/her service period must cover at least 80% of the project period.

12. Review Process

Depending on the nature of the research project and the degree of risk involved to participants, the project may be assessed under one of the three different types of assessment process. e.g. full assessment, expedited assessment, exempt review.

Students' research projects, including thesis protocols, may be assessed for clearance by a sub-committee of three members of REB, RIMS, and Imphal.

13.1. Element of the review

- a. Essentiality of the study
- b. Scientific design and conduct of the study
- c. Examination of predictable risks/harms
- d. Examination of potential benefits
- e. Procedure for selection of participants, including inclusion/ exclusion of participants and other issues like advertisement details
- f. Management of research-related injuries, adverse events
- g. Compensation provisions
- h. Justification for placebo in the control arm, if any
- i. Availability of products after the study, if applicable
- j. Patient information sheet and informed consent form in the local language or dialect or the language in which it is going to be administered (as per existing guidelines).
- k. Protection of privacy and confidentiality.
- l. Involvement of the community, wherever necessary.
- m. Plans for data analysis and reporting
- n. Adherence to all regulatory requirements and applicable guidelines
- o. Competence of investigators, research and supporting staff
- p. Facilities and infrastructure of study sites
- q. Criteria for withdrawal of participants, suspending or terminating the study
- r. Account for storage and maintenance of all data collected during the trial/research
- s. Plans for publication of results – positive or negative while maintaining the privacy and confidentiality of the study participants
- t. Details of foreign collaborators and documents for review by the Health Ministry's Screening Committee (HMSC) or appropriate Committees/ agencies/authorities like the Drug Controller General of India (DCGI) for international collaborative studies
- u. Memorandum of Understanding (MoU) for the exchange of biological material in national/international collaborative study

13.2. Exemption from review

- a. Research conducted in established or commonly accepted educational settings involving normal educational practices such as (i) research on regular and special educational instruction strategies or (ii) research on the effectiveness of or the comparison among instruction techniques, curricula, or classroom management methods, etc.
- b. Research involving the use of educational tests (cognitive, diagnostic, aptitude, achievement), survey procedures, interview procedures or observation of public behaviour unless:
 - i. information obtained is recorded in such a manner that human subjects can be identified, directly or through identifiers linked to the subjects;
 - ii. any disclosure of the human subjects' responses outside the research could reasonably place the subjects at risk of criminal or civil liability or be damaging to the subjects' financial standing, employability, or reputation.
- c. Research involving the collection or study of existing data, documents, records, pathological specimens, or diagnostic specimens, if these sources are publicly available or if the information is recorded by the investigator in such a manner that subjects cannot be identified, directly or through identifiers linked to the subjects.
- d. While normally, the research in the above three categories will be considered for exemption, it may not be considered for exemption if it involves children and other vulnerable groups as participants.

Annexure VI provides the Review Exemption Application Form

13.3. Expedited review

- a. The proposals presenting no more than minimal risk to research participants may be subjected to expedited review.
 - i. The Chairperson and/or REB member(s) designated by the Chair or a Subcommittee of the REB constituted by it will undertake the expedited review.
 - ii. If the PI believes that her/his proposal qualifies for the expedited review, she/he should make a request for the same while submitting the application for review to the REB.
 - iii. The person(s) undertaking expedited review may take any action that the full committee may take except disapproval of the research proposal. Thus, in the expedited review, the reviewer(s) may approve or request modification(s) in the proposal/protocol and/or consent form and other study materials or defer action

pending additional information, but if disapproval is the decision, then the proposal must be referred to the full REB for review at its next convened meeting.

- iv. A list of all research proposals approved using expedited review procedures is provided to the REB at its next convened meeting. When a research proposal is reviewed pursuant to the expedited review process, REB records of the review must include documentation of the determination of minimal risk and the permissible category of research justifying the expedited review.
- v. Genetic studies should not be considered for expedited review.

Annexure VII provides the categories of research that will be considered for the expedited review as per ICMR guidelines, and **Annexure VIII & IX** provide Study Assessment Form for Expedited Review and Approval letter format in case of Expedited Review

13.4. Full review

- i. All research proposals/ protocols which do not qualify for exempted or expedited review.
- ii. Proposals that involve vulnerable populations and special groups shall be subjected to full review by all the members.

13.5. Review meeting

- a. The mandate of the REB RIMS will be to review all research proposals involving human subjects to be conducted at the Institute or outside the Institute involving personnel of RIMS, irrespective of the funding agency. If outside laboratories are involved while carrying out such works, they should be recognized by the Institute.
- b. The review shall be done by all reviewers (members of REB RIMS).
- c. The REB RIMS should not keep a decision pending normally for more than 3 months after its first discussion.
- d. All the proposals received in time shall be reviewed in the ensuing REB RIMS meeting. The meeting can be extended to another day(s) to complete the review process.
- e. Researcher will be invited to offer clarifications if need be. Independent consultants/experts will be invited to offer their opinions on specific research proposals if needed, but they will not take part in the final decision-making.
- f. Decision will be taken by consensus after discussion.
- g. All decisions will be taken in meetings and not by circulation of project proposals.
- h. All proposals submitted at least one month before the scheduled meetings should be put up for review.
- i. An interim review can be resorted to by a Sub-committee, to be constituted by the Chairperson, instead of waiting for the scheduled time of the meeting like a re-examination of a proposal already examined by the REB or any other matter which should be brought to the attention of the REB. However, decisions taken should be brought to the notice of the main committee.
- j. Modified proposals may be reviewed by an expedited review through identified members, and it will be discussed in the next meeting of the REB.
- k. In the case of urgency/emergency, after reviewing the nature of urgency/emergency, the Chairperson is empowered to call a meeting of the REB, RIMS or form an interim review

committee to review the proposal. In case of decisions taken by the interim review committee, it shall be brought up in the next REB, RIMS meeting for discussion and ratification.

1. If required, subject experts could be invited to offer their views. These experts/consultants may be specialists in ethical or legal aspects, specific diseases or methodologies, or represent specific communities, patient groups or special interest groups (e.g. cancer patients, HIV/AIDS positive persons or ethnic minorities).

a) Inviting experts:

- a. The Member Secretary will take the responsibility for getting the expert opinion in the REB review process if he/she thinks so. This shall be communicated to the Chairperson and all the REB members.
- b. The Member Secretary, in consultation with the Chairperson (or at a full board meeting, as deemed necessary), will identify and select the consultant to be invited based on the area of expertise, independence and availability. The Member Secretary, on behalf of the REB, will invite the expert in writing to assist in the review of the research study and provide his/ her independent opinion in writing. This will be done after seeking concurrence and confirming the availability of the expert through telephonic/electronic communication.
- c. The Member Secretary will request the expert to declare a conflict of interest, if any, in writing and sign confidentiality and conflict of interest agreements. The Secretariat will forward copies of the Confidentiality Agreement and Conflict of Interest Agreement to the expert(s) for careful reading, understanding and signing.
- d. The Member Secretary will provide explanations/ clarifications (telephonically or in writing) to the expert(s) if any doubts or questions are raised.
- e. The expert(s) will attend the REB meeting to provide additional information or clarifications if invited by the Member Secretary/ Chairperson. However, the expert(s) will not participate in the decision-making process of the research study.
- f. The services of the expert(s) get automatically terminated once the final decision regarding the study is taken by the REB. The REB will document the termination of the services of the expert by providing a letter of gratitude.

b) Guest/observer to visit REB, RIMS or attend REB, RIMS meeting

- a. On receiving a written/email request from a guest/ an observer intending to visit REB, RIMS or attend its meeting, the Member Secretary, in consultation with the Chairperson, will decide the matter.
- b. He/She will be permitted to do so after submitting the written permission signed either by the Chairperson or Member Secretary of the REB RIMS, to the REB secretariat.
- c. The date and time of the visit to the REB or REB meeting will be informed to the guest/observer in writing/email.
- d. The Secretariat will ensure that the Confidentiality Form is duly signed and dated by the guest or observer for the REB / REB meeting and will file it in REB records. The request letter/email will also be filed in REB records by the secretariat.

c) Decision-making

- a. Members will discuss the various issues before arriving at a consensus decision.
- b. Member should withdraw from the meeting during the decision procedure concerning an application where a conflict of interest arises, and this should be indicated to the Chairperson prior to the review of the application and recorded in the minutes.
- c. Decisions will be made only in meetings where a quorum is complete.
- d. Only members can make the decision. The experts/ consultants will only offer their opinions and shall not take part in decision-making.
- e. Decision may be 'to approve', 'to reject' or 'to revise the proposals'. Specific suggestions for modifications and reasons for rejection should be given.
- f. In cases of conditional decisions, clear suggestions for revision and the procedure for having the application re-reviewed should be specified.
- g. In case of an appeal against the decision of the REB, RIMS, an application should be submitted to the Chairperson by the Principal Investigator within two weeks of communication of that decision.

d) Communicating the decision

1. The decision will be communicated by the Member Secretary in writing.
2. Suggestions for modifications, if any, should be communicated to the Principal Investigator.
3. Reasons for rejection should be informed to the researchers.
4. If a revision is to be made, fifteen copies of the revised document, along with a soft copy on a CD, should be submitted within a stipulated period of time as specified in the communication. The same should be submitted online.
5. The schedule/plan of ongoing review by the REB should be communicated to the Principal Investigator.

14. Processing Fee (Revised after the REB-related meeting held on 17th April 2024)

- a. Rs. 20000/- for projects sponsored by the Pharmaceutical Companies.
- b. Rs. 10,000/- for all externally funded extramural projects not related to 14.a and funding is more than Rs. 1.5 lakhs. However, Rs. 5000 only will be charged for extramural projects where funding upto Rs. 1.5 lakhs.
- c. Rs. 10,000/- as a resubmission processing fee for starting an already approved project that was not initiated within the sanctioned project period.
- d. No processing fee for all internally funded intramural projects.
- e. No processing fee for all self-financed projects with a maximum of one each in a financial year.
- f. Rs. 10,000/- for projects, including PhD project works submitted by non-RIMS applicants who will be working under the supervision of a RIMS Faculty member as Supervisor/ Guide/Co-Guide
- g. Rs. 2,000/- for REB clearance of the fieldwork in RIMS by the students from other Universities/colleges under the supervision of a faculty member in RIMS Imphal
- h. Processing fee is exempted for the following RIMS projects
 - i. Projects by MBBS/BDS/B.Sc Nursing students (upto internship) of RIMS
 - ii. Thesis of RIMS MD/MS/DM/MCh/MSc Nursing/MDS/MPhil/Diploma students/other course works related to a course
 - iii. PhD thesis of RIMS

- iv. Other Student projects that are done on academic interest without financial involvement
- v. Revised submission
- i. Processing fee must be paid online only to the Account of REB RIMS Imphal in Baroda Bank, RIMS Campus.
- j. Validity of ethical clearance by the REB RIMS Imphal is for the period of the study to a maximum of 2 years starting from the date of the approval by the REB RIMS Imphal.
- k. REB approval will be renewed after the completion of 2 years and yearly thereafter on payment of the processing fee based on the amount of funding.
- l. For non-starter projects within the first 2 years of the ethical clearance, their ethical clearance will be withdrawn automatically.
- m. Projects that could not be completed or started within the stipulated time need a fresh renewal of the ethical clearance. The processing fee will remain the same depending on the amount of funding.
- n. No new project, except for the exempted ones will be processed without prior submission of the processing fee.
- o. Processing fee will be part of the internal resource and will be deposited into the Corpus Fund of the Institute. Mode of payment shall be notified from time to time.

15. Sitting allowance.

Sitting allowance of Rs.2000/- for the Chairman and Rs.1,500/- for the Hony. Member Secretary, Rs.1,000/- for the rest of the members and Rs. 500/- for office assistant (s) will be entitled for the day of the scheduled meeting of the REB, RIMS and REB, RIMS Undergraduate and Postgraduate Ethics Committee.

16. Monitoring

Once REB RIMS gives a certificate of approval, it is the duty of the REB RIMS to monitor the approved studies. The Full Board or Chairperson and Member Secretary will take the responsibility to decide to conduct on-site monitoring. It is further the responsibility of the designated REB member(s) to perform on-site monitoring of selected study site(s).

1. **Periodic review:** The ongoing research may be reviewed at regular intervals of six months if the study period is more than 6 months.
2. **Continuing review:** The REB has the responsibility to continue reviewing approved projects for continuation, new information, adverse event monitoring, follow-up and later after completion if need be.

3. Monitoring / Follow-up procedures

A. Selection of study sites:-

1. Routine monitoring for a site may be decided at the time of approval of the project by the Full Board.
2. "For-cause monitoring" will be performed at sites for reasons identified by any member of the REB, after approval by the Chairperson.

3. The reasons for identifying a particular site for “for-cause monitoring” could include any one or more of the following:
 - a. High number of protocol violations
 - b. Large number of studies carried out at the study site or by the investigator
 - c. Large number of Serious Adverse Events (SAE) reports,
 - d. High recruitment rate
 - e. Large number of Protocol deviations
 - f. Complaints received from participants or any other person
 - g. Frequent failure to submit the required documents
 - h. Any other cause as decided by REB

B. Before the visit

- i. The Chairperson will identify and select one or more REB members to conduct monitoring of a site.
- ii. The selected members will be given an appointment letter and the agenda of monitoring will be decided by the identified members in consultation with the Member Secretary and Chairperson
- iii. The Secretariat will decide the date of the monitoring in consultation with the members and the PI.
- iv. The final date will be communicated to the PI and designated members.
- v. The members will review the relevant project documents and make appropriate notes.
- vi. The Secretariat will provide the monitoring Members with relevant reference material/documents related to the project
- vii. These members will carry with them Site Monitoring Visit Report Forms (Annexure X) collected from the Secretariat.

C. During the visit

1. The members of the monitoring team will check the log of delegation of responsibilities of the study team, and check if the site is using REB-approved protocol, informed consent documents, case record forms, diaries, advertisements, etc.
2. Observe the informed consent process, if possible
3. Review randomly selected participants' files to ensure that participants are signing the correct informed consent
4. Check investigational product accountability is adequately controlled and documented throughout the product flow at the study site (arrival, dispensing, use, return from the subject and return/destruction after the study), check for storage times, conditions and expiry dates to be acceptable and sufficient supplies available, wherever applicable,
5. Verify that the investigator follows the approved protocol and all approved amendment(s), if any,
6. Ensure that the investigator and the investigator's trial staff are adequately informed about the trial

7. Verify that the investigator and the investigator's trial staff are performing the specified study functions, in accordance with the approved protocol and any other written agreement between the sponsor and the investigator/institution, and have not delegated these functions to unauthorized individuals
8. Verify that the investigator is enrolling only eligible subject
9. Determine whether all serious adverse effects (SAEs) are appropriately reported within the time as per the applicable regulatory requirement(s). Case record forms would be checked to review the safety data i.e. Adverse Events (AEs) and SAEs for the volume or severity of adverse events,
10. Review the project files of the study to ensure that documentation is filed appropriately,
11. Review the source documents for their completeness and collect views of the study participants, if possible
12. The member of the monitoring team will fill out the Site Monitoring Visit Report Form and sign and date it.

D. After the visit

- i.** The member of the monitoring team will submit the completed Site Monitoring Visit Report Form and submit it to the REB secretariat within 7 working days of conducting a site monitoring visit or at the time of full board meeting (whichever is earlier).
- ii.** The report should describe the findings of the monitoring visit.
- iii.** The Member-Secretary will present the monitoring report at the next full board REB meeting and the concerned member will provide additional details/clarifications to members, as required.
- iv.** The REB will discuss the findings of the monitoring process and take appropriate specific action by voting or a combination of actions, some of which are listed below:
 - a. Continuation of the project with or without changes
 - b. Restrictions on enrolment
 - c. Recommendations for additional training
 - d. Recruiting additional members in the study team
 - e. Revising/ providing qualifications/ experience criteria for members of the study team, termination of the study
 - f. Suspension of the study, etc.
- v.** If the member has findings that impact on safety of the participant, he/she will inform the Member Secretary on the same day. The Member Secretary will

discuss with the Chairperson, and any one of the actions described above will be taken.

- vi. The final decision taken at the full board REB meeting by the Chairperson will be recorded in the Site Monitoring Visit Report Form.
- vii. The Secretariat will convey the decision to the Principal Investigator in writing within 14 working days of the meeting.
- viii. The Secretariat will place a copy of the report in the protocol file.

17. Reporting of Adverse Events (AE)/Serious Field Incidents (SFI)

- a) All research proposals need to define the anticipated adverse events and the criteria for assessing their seriousness
- b) Adverse events must be reported to the REB RIMS within one week of their occurrence. The REB RIMS will decide the course of action.
- c) In the multi-site/centric research, serious adverse events from the site(s) of the study must be reported to the Data Safety Monitoring Board (DSMB)/ REB RIMS within 24 hours. In SAE-like death, the study should be stopped till further directive comes from the REB RIMS. Normally, the decision to continue the study shall be taken by REB RIMS within 48 hr of the receipt of the SAE report.
- d) In all other cases, all serious adverse events/field incidents must be reported to the REB RIMS/DSMB within 24 hours of their occurrence.
- e) While reporting adverse events/SFI to the REB /DSMB, the PI must provide her/his views on whether:
 - i. the event(s) is/are related to the study,
 - ii. it/they warrant any change in the protocol and/or informed consent form,
 - iii. it/they warrant any change in the care or management of the participants
- f) All reports of the adverse events, opinions of the DSMB/Monitor and the action taken will be placed before the REB RIMS at its next meeting
- g) Compensation:- The participants will be entitled to financial compensation as per existing Rules (**Annexure XI**)

18. Record keeping and Archiving

All documentation and communication are to be dated, filed and preserved. Confidentiality is to be maintained during access and retrieval procedures. The following records should be maintained:

- a. The Constitution and composition of the REB RIMS
- b. Signed and dated copies of the latest curriculum vitae of all REB members;
- c. Standing operating procedures of the REB RIMS;

- d. Relevant National and International guidelines;
- e. Copies of protocols submitted for review, progress reports, and SAEs;
- f. All correspondence with REB RIMS members and investigators and other regulatory bodies regarding application decisions and follow-up;
- g. Agenda of all REB RIMS meetings;
- h. Minutes of all REB RIMS meetings with the signature of the Chairperson;
- i. Copies of decisions communicated to the applicants;
- j. Record of all notifications issued for premature termination of a study with a summary of the reasons;
- k. Final report of the study including microfilms, CDs and Video recordings.
- l. All records must be safely maintained for a period of 5 years after the completion/termination/publication of the study, whichever occurred later.
- m. The Member-Secretary must hand over full custody of such records to her/his successor, and the handing over must be documented.

19. Education on Ethics

- a) The REB RIMS members should be encouraged to keep abreast of all national and international developments in ethics through orientation courses on related topics by the REB members or regular training organized by bodies.
- b) All relevant new guidelines should be brought to the attention of the members.
- c) Members should be encouraged to attend national and international training programs in research ethics to maintain quality in ethical review and be aware of the latest developments in this area.
- d) Any change in the regulatory requirements should be brought to their attention and they should be aware of local, social and cultural norms, as this is the most important social control mechanism.
- e) The REB RIMS will also conduct CME on research ethics for the Institute or other organizations whenever feasible.

20. Special Considerations

There are certain specific concerns pertaining to specialised areas of research which require additional safeguards/protection and specific considerations for the REB to take note of. Examples of such instances are research involving children, pregnant and lactating women, vulnerable subjects and those with diminished autonomy, besides issues pertaining to commercialization of research and international collaboration.

Again, while reviewing the proposals, the following situations may be carefully assessed against the existing facilities at the research site for risk/benefit analysis:

- A. Collection of blood samples by finger prick, heel prick, ear prick, or venipuncture:
- i. From healthy adults and non-pregnant women who weigh normal for their age, not more than 500 ml blood is drawn in an 8-week period, and the frequency of collection is not more than 2 times per week;
 - ii. From other adults and children, the age, weight, health of the participants, the collection procedure, the amount of blood to be collected, and the frequency with which it will be collected should be considered. The volume of blood collected will not be more than 50 ml or 3 ml per kg, or whichever is less in a period of 8 weeks and not more than 2 times per week;
 - iii. From neonates, depending on the haemodynamic, body weight of the baby and other purposes, not more than 10% of blood is drawn within 48 – 72 hours. If more than this amount is to be drawn, it becomes a risky condition requiring infusion/blood transfusion;
 - iv. Prospective collection of biological specimens for research purposes by non-invasive means. For instance:
 1. Skin appendages like hair and nail clippings in a non-disfiguring manner;
 2. Dental procedures - deciduous teeth at the time of exfoliation or if routine patient care indicates a need for extraction of permanent teeth; supra and sub-gingival dental plaque and calculus, provided the collection procedure is not more invasive than routine prophylactic scaling of the teeth;
 3. Excreta and external secretions (including sweat);
 4. Non-cannulated saliva collected either in an un-stimulated fashion or stimulated by chewing gum or by applying a dilute citric solution to the tongue;
 5. Placenta removed at delivery;
 6. Amniotic fluid obtained at the time of rupture of the membrane prior to or during labour;
 7. Mucosal and skin cells collected by buccal scraping or swab, skin swab, or mouth washings;
 8. Sputum collected after saline mist nebulization and bronchial lavages.
- B. Collection of data through non-invasive procedures routinely employed in clinical practice. Where medical devices are employed, they must be cleared/approved for marketing, for instance –
- i. Physical sensors that are applied either to the surface of the body or at a distance and do not involve input of significant amounts of energy into the participant or an invasion of the participant's privacy;
 - ii. Weighing or testing sensory acuity;
 - iii. Magnetic resonance imaging;

- iv. Electrocardiography, echocardiography, electroencephalography, thermography, detection of naturally occurring radioactivity, electroretinography, ultrasound, diagnostic infrared imaging, Doppler blood flow.
 - v. Moderate exercise, muscular strength testing, body composition assessment, and flexibility testing where appropriate given the age, weight, and health of the individual.
- C. Research involving clinical materials (data, documents, records, or specimens) that will be collected solely for non-research (clinical) purposes.
- D. Collection of data from voice, video, digital, or image recordings made for research purposes.
- E. Research on individual or group characteristics or behaviour not limited to research on perception, cognition, motivation, identity, language, communication, cultural beliefs or practices, and social behaviour or research employing survey, interview, oral history, focus group, program evaluation, human factors evaluation, or quality assurance methodology.