BROCK UNIVERSITY RESEARCH ETHICS BOARD Monday, June 5, 2017 12:00 – 2:00 p.m. MC D350-L

Minutes of the BREB Meeting

Attendance

Jean Armitage Kirsten Bott Gail Frost Kimberley Gammage Lara Green Jason Liu Matthew Mallette Jennifer Maturin-Brown Greg McGarr Sandra Peters Ayda Tekok-Kilic Craig Tokuno Regrets Stephen Cheung

Μ	MINUTES							
IT	EM	DISCUSSION	ACTION					
1	Motion to approve Agenda • Approved		Motion to approve: KB Seconded: JA All in favour					
	Motion to appro Approved	ve May Decision Reports ୀ	Motion to approve: LG Seconded: MM All in favour					
	Motion to appro • Approved	•	Motion to approve: GM Seconded: JMB All in favour					
2	New Business	Full board review (in camera)	Motion to move in camera: KB Seconded: KG All in favour					
		The REB Sub-Committee on Guidelines, Practice, and Procedure (GPP)	Motion to move out of camera: MM Seconded: KB					
		Update on Changes to REB Guideline – Conducting Research as a Course Assignment:	All in favour					
		 The Chair updated the board with changes made to this guideline based on suggestions from the SREB. The BREB approved this guideline at the last meeting 						
		however, when it went to SREB, there was concern from some members that it was not clear whether cop-op,						
		practicum projects etc. would need REB review and approval. The document was taken back to GPP who						
		clarified that these examples would not be considered research – instead, projects used to practice the skills required for their profession. Therefore, the following						
		changes were made to the guideline: "Course assignments that do not meet the definition of research						
		with human participants [e.g., assignments that are limited to data that are in the public domain,						
		consultations with individuals for assistance in accessing information that is in the public domain,						

observations of facets of an organization or institution	
without collecting data about individuals within the	
organization, practice using standardized instruments or	
protocols where no data or analyses will be reported,	
practicums where the primary purpose is to develop	
professional skills, or co-op placements] are not subject	
to REB review." GPP also added however that if data	
collected are later proposed for research, it would be	
considered secondary use of information not originally	
intended for research and would require REB review.	
This would apply to cases where data was originally	
collected for assignment purposes but then later	
proposed for research.	
 A motion was put forward by KG to accept the changes 	
made to the guideline. Seconded by GF. All members	
voted in favour.	
 The new documents to be approved by BREB today 	
were reviewed:	
1) Venipuncture Information Sheet	
The Chair explained that this sheet was created as there	
is currently no way to track and ensure quality control	
with respect to blood draws. GPP developed this sheet	
so researchers have a way to track venipuncture data	
(e.g., phlebotomist name, number of attempts, written	
consent from participants for a second attempt,	
reporting serious adverse events etc.).	
 For example, if a participant experienced severe 	
bruising, this would be documented on this sheet. It	
would be reported after the fact to the REB (on the	
annual report), however, the sheet ensures records are	
kept on this information.	
LW clarified that adverse events refer to something that	
goes wrong in research that was unanticipated. If	
researchers have already listed something as a risk and	
the participant consented to proceed with this risk in	
mind, the event would need to be recorded on this	
venipuncture information sheet and reported to the REB	
on the annual report (still reported but not within 24	
hours or as an emergency) If, however, an anticipated	
event occurs, meaning a risk that was not outlined in the	
application or the consent form, this needs to be	
reported to the REB immediately.	
• For example, if someone falls in the lab and this was an	
unanticipated event (researchers did not include falling	
as a potential risk in the application or on the consent	
form that the participant signed), this would need to be	
reported to the REB immediately. Changes would then	
be made to the protocol to prevent any future events	
(e.g., introducing a spotter in the protocol for future	
participants).	
 It would be helpful if we had a written definition of 	
adverse events to avoid confusion. This will be taken	
back to the GPP.	

events need to be reported. A link for this sheet will also
be provided in the venipuncture SOP so researchers are aware of both documents.
 A board member suggested adding a separate column
to record the date blood was drawn, should researchers
use the same form on multiple draw days.
It was also agreed to change the last column to ask for
the date a serious adverse event was reported to the
REB (instead of whether it was reported at all).
A motion was put forward by MM to approve the Venipuncture Information Sheet. Seconded by GM. All
members voted in favour.
2) REB Standard – Responsibilities of Faculty Supervisors and
Student Researchers
The SREB discussed including details on this standard
regarding who constitutes a student researcher (i.e., would this include post-doctoral fellows?). As a result,
the standard was taken back to GPP who made the
following changes: "Each student researcher
(undergraduate, master's, or doctoral) or post-doctoral
fellow" which clarifies who the standard would apply
to.
 Per wording in the Faculty Handbook (FHB), the word "proposal" was changed to "research design," given that
the definition of a proposal is very different across
departments (i.e., "The supervisory committee must
approve the research design prior to").
 A board member asked why the ethics application asks
researchers to define the level of research (e.g., Faculty
research, Masters thesis/project, PhD, undergraduate etc.), if the standards are the same for all types of
research. LW confirmed that this is simply used for
metrics in the office.
Board members asked why the following question is
being recommended as an addition to the application
form: Has the research design been approved by a
supervisory committee in accordance with the relevant
graduate program's procedures? If a Faculty member is qualified enough to submit their own application for their
own Faculty work, why does the office need to confirm
that the entire committee has approved a student's
project? It would seem the supervisor would be capable
enough to approve the project on their own.
The office confirmed that this is not the REB's policy - the requirement for owner isomy committee approach of
the requirement for supervisory committee approval of graduate student research designs prior to applying to
the REB has been in place at least since 2003. The
online Senate records confirm these requirements were
introduced at some point prior to Senate 555 (January
23, 2008).
Some universities ask on the REB application whether a
scientific review been done – perhaps this might be a
 more appropriate question to ask? From a graduate program perspective (not the REB's), it
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3	Adjourn	 is a requirement to have the design approved by the committee. A board member asked about whether this applies to side project where a student is completing work for their own personal purposes, and not for academic work. LW clarified that students can only do research for an academic project. E.g., student work for a directed reading, Master thesis or Major Research Project (MRP). A board member suggested that this be clarified on the application – it was agreed to change Masters thesis/<u>MRP</u>, given the word project may give the impression that a student can complete research on their own, without needing an academic tie/purpose. LW clarified that this protects the participants right to sue because if the student is just completing the research without any connection to Brock, there have no affiliation or tie to Brock. The board discussed if the question about whether the committee has approved the research design fits in the application – do board members see any issue in asking this question? It helps ensure that before projects come to ethics, they have been reviewed by the appropriate and qualified individuals. This avoids numerous changes being made to the ethics application, after it has received clearance. Having the question on the application might also act as a check-point or a reminder for supervisors that this is a requirement according to the FHB. A motion was put forward by LG to approve the standard in principle (and that the question regarding whether the research design has been approved by the supervisor committee will be asked). Seconded by MM. all members voted in favour. The following documents were tabled for approval at the next board meeting: REB Guideline – Meetings, Quorum, and Attendance; SOP 04 VO2 Max; SOP 06 Colour Vision and Hearing (Sleep Lab). 	Motion to adjourn: KG
	Aujouni		Seconded: JL All in favour