

**BROCK UNIVERSITY RESEARCH ETHICS BOARD**  
**Monday, September 14, 2020**  
**12:00 – 2:00 p.m.**  
**Teams**

**Minutes of the HREB Meeting**

**Attendance**

Jean Armitage  
 Alyssa Bax (non-voting)  
 Shawn Beaudette  
 Stephen Cheung  
 Nicole Chimera  
 Gail Frost

Robert Kumar  
 Carly MaGee (non-voting)  
 Jennifer Matunin-Brown  
 Lori Walker (non-voting)  
 Danielle Williams  
 Jenalyn Yumol

**Regrets**

Kimberley Gammage  
 Megan Magier  
 Maureen Shantz  
 Terrance Wade

<b>MINUTES</b>		
<b>ITEM</b>	<b>DISCUSSION</b>	<b>ACTION</b>
1	<p><b>Motion to approve Agenda</b></p> <ul style="list-style-type: none"> <li>• Approved</li> </ul> <p><b>Motion to approve February-August Decision Reports</b></p> <ul style="list-style-type: none"> <li>• Approved</li> </ul>	<p>Motion to approve: GF            Seconded: SC            All in favour</p> <p>Motion to approve: JMB            Seconded: SC            All in favour</p>
2	<p><b>New Business</b></p> <p><b>Full board reviews (in camera)</b></p>	<p>Motion to move in camera: NC            Seconded: SB            All in favour</p>
3	<p><b>Discussion Items</b></p> <p><b>Feedback on SOP09 Core Temperature Measurement via Rectal Thermometer</b></p> <ul style="list-style-type: none"> <li>• The board would like the SOP to clarify when discussing probes for multiple uses, does it refer to multiple uses by the same person or across participants?</li> <li>• SC clarified that reusing probes is common practice across labs doing this type of research – this is not a novel idea that only this particular lab is proposing.</li> <li>• SC plans to add a visual inspection before each daily use of the probe to the SOP: Before each session, a researcher checks the probe for cracks in the casing or discolouration that seems over and above the normal. They perform a visual check and discard the probe if needed – this information will be added to SOP09.</li> <li>• SC clarified that this group of researchers is the only lab on campus using rectal probes. If there are others, they will be expected to use the same approach as outlined in this SOP (in terms of probes used multiple times).</li> <li>• The board asked SC to consider whether the SOP can be written generically enough to apply to different types of probes (as opposed to written specifically for one type, brand etc.) which may limit the applicability of the SOP.</li> <li>• The Chair jumped in to say, maybe we should specify what probe researchers should be reusing as it has</li> </ul>	<p>Motion to move out of camera: JA            Seconded: JMB            All in favour</p>

recently come to our attention that certain finger prick probes cannot be reused. By specifying which probes are deemed “acceptable” under the SOP we would avoid the confusion we are having with the finger prick protocol.

- SC told the board that if they would prefer, the lab can just switch now to the new probes that are specifically designed to be sterilized and reused across/within participants.
- The Chair reminded the board that as with other SOPs, researchers should be writing in their ethics application if their procedures differ from the SOP at all.
- SC will make edits to the SOP based on the discussion today and bring it back to the board for the October meeting.

#### **COVID Review Process**

- Brock Stage 3 (in terms of research) was explained to the board: In-person research involving interaction, observation, or moderate intervention with human participants can be authorized, subject to appropriate risk mitigation strategies (see [Health, Safety, and Wellness Guidance for In-Person Research with Human Participants under COVID-19 Pandemic Conditions](#)).
- The SREB has decided to follow the “default” process: when the appropriate/relevant stage opens up for a particular research/project, the research would apply through their Associate Dean Research, Health, Safety & Wellness etc., then come to the REB for clearance (see: <https://brocku.ca/research-at-brock/office-of-research-services/research-ethics-office/#1600373043671-47ef8a75-4bf8> for Steps Needed to Start Research Under Brock Stage 3)
- Once the application gets to the REB, if it is a new application, it would go through the usual review process (board reviewer, Office, Chair) and reviewers would examine all ethical implications for participants (including any ethical implications COVID risk mitigation strategies have on participants). But it is not the REBs responsibility to review COVID risk mitigation strategies.
- If the project already received clearance but was suspended due to COVID, they will submit a modification that will be reviewed by the Chair outlining how their protocol may have changed due to COVID risk mitigation strategies. After this is reviewed and any outstanding ethical issues are resolved, clearance will be “activated.”
- This means if a researcher wants to conduct research that falls under Brock Stage 4 or 5, they must wait until that stage opens up and start from #1 in the steps. Although this is the more straight forward approach, the HREB Chair is hesitant to proceed with this as he

		<p>believes it will delay researchers in getting clearance (they would have to wait for all the steps prior to ethics to be complete, then wait the 15-20 working day turnaround time for ethics clarifications/revisions). Although the former approach is much simpler from an administrative perspective, it could become frustrating for researchers to have a lengthy waiting period at each step.</p> <ul style="list-style-type: none"> <li>• The Chair is therefore proposing that HREB follows a different process: we accept applications that fall under any stage, and if that stage is not open yet, we only perform a “preview” of the application. It would go through the same review process (board reviewer, Office, Chair or in the case of a full board, the board and Chair) but our clarifications/revisions would just be suggestions (again, only ethical considerations and no review of COVID risk mitigation strategies) to help expedite their ethics process when they are formally authorized to apply.</li> <li>• Then, once the relevant stage opens up pertaining to the research projects we previewed, the researcher would apply through appropriate channels (e.g., ADR, Health, Safety and Wellness) and then comes back to the REB. At this point, the typical ethical issues will have been dealt with by the preview process so we would just need to look at any changes to research ethics as a result of the COVID risk mitigation strategies implemented by the previous steps in the authorization process. We can decide who should review it the second time: just the Chair, the Office and the Chair, or by board members as well if they feel they want to see it again. It would not be a requirement for all researchers to go through the preview process. They could decide to wait and start from step 1 once their relevant stage opens up.</li> <li>• The board members felt that since researchers and graduate students have been unable to do any research for 6+ months, they may appreciate the ability to start on a few of the steps to minimize the waiting periods - for example, how we are handling the study we reviewed today (given it is stage 4 or 5 and we are only in stage 3).</li> <li>• It was clarified for board members that researchers can receive an umbrella approval from the ADR and Health, Safety and Wellness for all research using similar protocols (so one authorization would apply to all research falling under that stage, as opposed to each individual ethics file).</li> <li>• LAW clarified that with the proposed HREB approach, researchers will have to come back to the REB twice. We may have a request for clarification/revision based</li> </ul>	
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	<p>on any changes that have happened during the previous authorization steps, we cannot anticipate what this will look like for each individual project. The researchers would get the bulk of the clarifications out of the way with the preview but will still need to come back to the REB with the updated applications which could have more clarifications result from it.</p> <ul style="list-style-type: none"> <li>• The key is making sure the researchers are aware of what the preview involves and what they must do at each stage in terms of approvals.</li> <li>• The Chair clarified that HREB often has more full boards than SREB which might result in a backlog of full board files to review if ask researchers to wait until they have authorization before coming to us for clearance. If we decide to go this route, we need to decide how will we communicate this with researchers. Will they get a clearance with instructions? We need to determine the best approach and educate researchers accordingly.</li> <li>• In discussions with the Office and the Chair, we determined we should not use the word “clearance” when we are sending out our points after the preview. For example, “the REB has completed a preview of the aspects of your application that are not directly related to COVID-19 risk mitigation and suggest the following research ethics related revisions and/or clarifications. This preview is intended to help expedite the REB review process, which can only be completed after appropriate authorization is in place.” We will not give out a clearance letter after the preview is complete to avoid confusion.</li> <li>• As a board/the Office, we need to achieve clarity in our expectations of the researchers in terms of how they should submit to the REB after authorization is in place. Should they highlight any changes in their application when they come back from Health and Safety?</li> <li>• A board member asked whether we should anticipate a stage closing in the near future. Do we need to determine what level of clearance we are giving? How will researchers know if they are eligible to keep their labs open/closed as COVID progresses?</li> <li>• This should be written in the previews somewhere perhaps – that the stage may close etc. Or maybe Health, Safety and Wellness should highlight this (“this research is stage #”) so we can help support researchers if we do go back in stages as a university. It was determined all of this rests in the university itself since it is a health and safety issue versus a research ethics issue.</li> <li>• The board supports the HREB plan as the Chair has proposed. The question now is when the application comes back after authorization, do the board members want to see and review those files again? We have a</li> </ul>	
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		<p>few options: it could go back to a board reviewer, a subcommittee of the board could be formed, or they could be reviewed by the Chair and Office only.</p> <ul style="list-style-type: none"> <li>• A board member who was a BREB Chair in the past felt a subcommittee may be helpful to ease the load on the Chair. Or the application could go back to the board member who initially performed the preview, but researchers must make it clear what has changed (from an ethics perspective) from the initial review. We also need to decide what we want that application to look like. Do we want it to say procedurally “masks are used at this stage” “disinfectants used at this stage” etc.?</li> <li>• Our options are: decide that since Health, Safety &amp; Wellness has looked at COVID risk mitigation strategies, we are only looking at any ethical implications imposed by the health and safety changes/requirements or we can ask that the researchers write all of the COVID risk mitigation strategies back into the application before resubmission. If we decide on the latter, we have to be very clear with our instructions as to not frustrate researchers.</li> <li>• The Office of Research Ethics has written an <a href="#">online COVID-19 risk acknowledgement form</a> which we will ask all researchers conducting in-person research to send to participants prior to attending scheduled research session(s). It lays out COVID risks and the risk mitigation strategies we are taking at Brock (on a general level, not individual lab level) and reiterates that by consenting to participate they are not waiving any rights etc. That way researchers will not have to edit their research consent form to include all the COVID risks.</li> <li>• The HREB agreed we will move forward offering previews and the second review (after authorization) will be done by the Chair.</li> </ul> <p><b>GPPC Membership</b></p> <ul style="list-style-type: none"> <li>• The Office explained that we are putting out an additional call for members to sit on our REB subcommittee on Guidelines, Practice, and Procedure (GPPC).</li> <li>• Established in 2016, the GPPC reports to the standing REBs and is responsible for developing guidelines and procedures for the ethics review process; and revising these regularly in response to changing societal values and evolving provincial, federal, and professional ethics requirements.</li> <li>• Currently we only have HREB representation from Craig Tokuno and Gail Frost.</li> </ul>	
4	<b>Adjourn</b>	<b>Meeting adjourned at 1:26 p.m.</b>	Motion to adjourn: SC Seconded: JMB All in favour