Minutes
Institutional Review Board
March 8, 2012
Burnett Hall Board Room

• Call to order 3:00 pm

• Members Present: John Markham, Greg Wimer, Joyce Bergin, Delana Nivens, Zaphon Wilson, Sean Eastman

• The minutes from the February 9, 2012 were approved.

• Dr. Kraft informed the board members that as of today, Armstrong had surpassed 1,000 IRB reviews. It was suggested by board members that some sort of celebration needed to take place with the individuals involved with the 1,000th proposal.

• The following statement was approved to be added to the IRB Application form in relation to the dean and department head signatures, The signatures below indicate that the dean and department head have read the research proposal and are aware of its contents. The signatures indicate neither approval nor disapproval of the research project. They indicate only that the proposal has been read by the supervisors and is being sent to the university’s Institutional Review Board.

• Discussion turned to the matter of which office is responsible for monitoring research. It was learned that no one oversees researchers to monitor if approved safety protocol are addressed. Armstrong has no policy to monitor research. However, if a researcher sees a problem they are required to report it to the chair of the IRB. The only responsibility of the IRB is to approve or not approve protocol. Following the approval of protocol it becomes the researchers’ sole ethical responsibility to follow this protocol, which is the reason for the NIH training requirement.

• Currently, deans and department heads are not notified if any revisions have been requested by the IRB to proposals prior to approval. It was agreed that the chair of the IRB will send a list of any revisions along with the letter of approval to the investigator and appropriate department head.
• There was some discussion of whether the IRB should consider the circumstances under which an application should be flagged for automatic full review. It was agreed that any research involving the ingestion of any substance, insertion of any device, or high intensity exercise should be subject to a full IRB review.

• The IRB needs to consider providing direction on the IRB Application for record retention timelines and guidelines for destruction. Either the Georgia Board of Regents or funding agency guidelines for record retention should be employed. Although there is a place on the application to respond to these issues, ‘How’ and ‘When’ need to be added to the application form. Dr. Kraft will work on the verbiage and bring something back to the board at the next meeting. In addition, incentives need to be added to the section of the application requesting information on any payment for participants. Not everyone currently considers incentives such as class points as a form of payment.

• Dr. Kraft will put a database file on the web site with the expiration date of faculty members’ NIH certification instead of requesting a copy of the document each time it is needed. It will be the responsibility of the IRB chair to ensure that an up to date certification is on file prior to disseminating applications to board members.

• The meeting adjourned at 4:10pm.