# **Northwestern University IRB Guidance on Study Closure**

A closure report must be submitted to the IRB in the eIRB+ system for each non-exempt human research study, regardless of whether a study is subject to the continuing review requirement. This guidance explains the circumstances in which a study may be closed from IRB oversight, as well as ongoing researcher responsibilities that apply to closed studies.

# When a study may be closed

When a research study **no longer involves human subjects**, the study may be closed with the IRB.

Research involves human subjects while the researcher:

(i) Obtains information or biospecimens through intervention or interaction with the individual, and use, studies, or analyzes the information or biospecimens;

### OR

(ii) Obtains, uses, studies, analyzes, or generates identifiable private information or identifiable biospecimens.

## Relationship to data use and analysis

<u>Use and analysis of identifiable private data/specimens</u> is considered by federal regulatory agencies to be an example of "obtaining" data/specimens. This means it is "human subjects research" and continues to require IRB review and approval.

Maintaining identifiable private data/specimens, without using, studying, or analyzing such information/specimens is not human subjects research. If all other human subjects activities have been completed but identifiable private data/specimens will simply be maintained (as approved by the IRB), then IRB review and approval is no longer necessary and the study may be closed. If the research team plans to make available a list or database of the study participants to multiple PIs and/or multiple projects for potential recruitment into future research studies, a new project to establish a registry/subject pool must be submitted to the IRB for review and approval.

Maintaining identifiable data (or identifying links) for safety reasons (for example, so that subjects can be contacted if necessary) is not a human subjects activity that requires ongoing IRB oversight.

Under the IRB regulations, data and specimens are considered to be **identifiable** if the identity of the subject is or may readily be ascertained by the investigator or associated with the information. For further detail on when **coded** specimens and data are considered identifiable,

see <u>HHS Office of Human Research Protections Guidance on Research Involving Coded Private</u> Information.

**Private** information includes information about behavior that occurs in a context in which an individual can reasonably expect that no observation or recording is taking place, and information that has been provided for specific purposes by an individual and that the individual can reasonably expect will not be made public (e.g., a medical record).

# **Criteria for Study Closure**

A study can be closed when:

- All research participants have completed all study-related interventions and procedures, including any follow-up; AND
- The research team has obtained all private identifiable data and/or specimens from all participants (or from data/specimen sources if your study involves secondary analysis of data/specimens); AND
- The research team has completed analysis of all private **identifiable** data and specimens, as described in the IRB application.

Thus, a study may be closed as long as identifiable private data or identifiable specimens are not being obtained, used, or analyzed. When analysis of identifiable data/specimens is complete and the only remaining activities are write-up of results and storage of the data/specimens, the study may be closed even if the research team retains identifiers and/or a key linking identifiers to coded data/specimens.

If enrollment and data/specimen collection are complete, and the research team has stripped the data/specimens of identifiers, the study can be closed even if data/specimen analysis continues.

<u>Secondary analysis of existing data/specimens</u>. Study teams must consult with the IRB office prior to use of data or specimens from a closed research study if the original investigators seek to use the data/specimens to investigate new research questions/topics OR if other investigators wish to use those data/specimens to study a new research question or topic, as this may constitute new human subjects research requiring IRB exemption or approval.

<u>Data sharing</u>. If a study team plans on sharing data or specimens with individuals or entities not previously described in the IRB application, the study team must consult with the IRB office to ensure that the conditions under which the IRB approved the collection and use of the data/specimens are met.

<u>Relationship to funding</u>. Federal human research regulations do not require a study to maintain IRB approval for the duration of a grant or contract.

The study may be closed with the IRB when the human research activities are completed, whether or not the funding is still active. For example, the study data/specimens may have been fully de-identified, with analysis and manuscript preparation still occurring. This would not be considered a human research activity that needs to stay open with the IRB. Alternatively, IRB approval may need to be maintained after the funding is gone. For example, the researcher may not have completed analysis of the identifiable private data/specimens.

Some funding entities require IRB approval for the duration of the funding, even if human research activities are complete, or they may not allow the study to close without the sponsor's permission. It is the researcher's responsibility to be aware of, and comply with, those requirements.

Researchers who are seeking new funding to continue the research should consider whether it is more appropriate to extend/modify the existing IRB application or to submit a new IRB application for any future, newly-funded, activities. IRB staff can provide advice.

### Administrative Closure by the IRB

The NU IRB may close a study in any of the following situations:

- No research activities have begun or no participants have been enrolled within 3 calendar years from the date of the IRB approval of an initial application.
- The study's procedures and/or participant population appear to have substantially changed from the IRB's original assessment of the study and the study team failed to submit appropriate modifications to reflect those changes.
- The study team has not responded to any IRB query for at least 30 days.
- Lapsed IRB approval. The study's IRB approval has expired and a Continuing Review has not been submitted to the IRB for at least 30 days.

### **Multi-site Research**

# If the NU IRB served as the reviewing IRB only for activities performed by NU Personnel:

The study can be closed with the NU IRB when human subjects research activities performed by NU personnel have been completed, even if human subjects research activities are still occurring at the other sites. Federal guidance describes this example of a multi-site study that could be closed:

- The research is permanently closed to enrollment at NU; and
- All participants enrolled at NU have completed all research-related interventions and interactions, including any related to collection of long-term follow-up data;
- No additional identifiable private information about the participants is being obtained by the NU researcher; and
- The statistical center at another institution will conduct the analysis of all study data that includes identifiable private information about the participants enrolled at NU.

If those 4 criteria are met, the study can be closed with the NU IRB even if the overall study results database has not yet been "locked," such that there is the possibility that the coordinating center or statistical center at the other institution may query the NU researcher about previously collected data about the NU-enrolled subjects.

# When the NU IRB has ceded IRB oversight of a study to another IRB:

The NU study team must still submit a closure report to the NU IRB when the activities of NU personnel on the study are complete.

### When the NU IRB is serving as the IRB of record for other institutions:

The study cannot be closed with the NU IRB while the other institutions relying upon the NU IRB continue to be engaged in human research activities.

Research study closure can occur if **all** of the following conditions are met:

- Enrollment at all sites under NU IRB oversight is closed.
- Research-related interventions and/or participant follow-up at sites under NU IRB purview are completed.
- Data and specimens under NU IRB purview are anonymized (i.e., no personally
  identifiable information and no coding system associated with the data/specimens). If
  identifiable specimens and/or data are being maintained, the study cannot be closed
  unless the data/specimens have been transferred to a separate repository that has
  ongoing IRB oversight.
- Data analysis and manuscript preparation requiring use of or access to directly identifiable or coded data/specimens is completed.

 The external study sponsor (if any) has agreed that activities involving human participants at sites under NU purview are complete and has provided permission to close the study with the IRB.

When the NU researcher is the primary awardee of a federal award for a multi-site study. The study may be closed only when all human research activities at all of the sites (NU and others) have been completed.

<u>Relationship with verification or monitoring of study data</u>. Study sponsors, contract research organizations (CROs), or coordinating center personnel may need to verify or monitor individually identifiable study data or source documents at a specific site where human subjects activities have been completed. IRB approval must be maintained while these activities are occurring.

# Researcher responsibilities after study closure

The researcher continues to have responsibilities for a study even when IRB oversight of a study is no longer required. These include:

<u>Records retention</u>. Research records (including IRB applications) must be retained for three years. Records retention must also comply with all other applicable regulations governing the study, including NU Records Retention Schedules. See <u>NU Policy on Retention of University</u> Records.

There may be additional records retention requirements associated with the funding agency or other agencies involved in the research – it is the researcher's responsibility to be aware of any additional records retention requirements associated with sponsors or other agencies involved in the research.

<u>Confidentiality and data security</u>. If the researcher is maintaining identifiable private data or specimens, the protections described in the IRB application and to subjects must be maintained for the time frame described.

<u>Commitments to participants</u>. The researcher must continue to honor any commitments made to participants as part of the approved research. Examples include: providing information about study results; payment for research participation.

<u>HIPAA authorization</u>. The researcher may have obtained HIPAA authorization from subjects to access their medical records, with an expiration date that is far in the future. If the researcher still has permission to access medical records at the time s/he wants to close the study, that permission may not be used after the study closure.

## **Departure of Principal Investigator from NU**

If the Principal Investigator (PI) will be leaving NU and human subjects activities are still occurring on the PI's research studies, then one of the following should occur:

- Researcher responsibilities are shifted to another appropriate NU Principal Investigator, via Modification of the existing IRB application.
- The responsibility for providing IRB oversight and approval is shifted to the researcher's new institution and the study is closed with the NU IRB.

In rare circumstances, the NU IRB may be willing to keep responsibility for the IRB review even if the Principal Investigator is no longer employed by NU. This requires an IRB Authorization Agreement to be completed by the NU IRB and the other institution's IRB.

#### **REFERENCES**

HHS Office of Human Research Protections, "Guidance on IRB Continuing Review of Research," November 10, 2010

FDA, "Guidance for IRBs, Clinical Investigators, and Sponsors: IRB Continuing Review after Clinical Investigation Approval," February 2012