Ontario Cancer Research Ethics Board
MaRS Centre, Suite 510 | 661 University Avenue
Toronto, Ontario | Canada M5G 0A3
416-673-6649 or 1-866-678-6427 ext. 6649 | https://ocreb.ca

The Ontario Cancer Research Ethics Board
Overview

Research Ethics

Research ethics review is vital to the advancement of ethically sound research and to the protection of human research participants. Before individuals can be enrolled in a research study, the study must be approved by a research ethics board (REB). REBs are independent, multi-disciplinary committees that review the ethical acceptability of research involving humans. REBs that review biomedical research generally include doctors and other members of the scientific community, as well as non-scientific members with specific expertise, including ethicists, lawyers, privacy experts and community members. The REB's role is to safeguard the rights and welfare of the individuals who volunteer to participate in research, by ensuring that the study sponsors and the researchers have adequately considered and applied the required ethical principles into the design and conduct of the research.

The Ontario Cancer Research Ethics Board

The Ontario Cancer Research Ethics Board (OCREB) was established in 2003 as an arms-length program of the Ontario Institute for Cancer Research (OICR), accountable to the Board of Directors of OICR through the OICR Governance and the OCREB Advisory Committees. OCREB is a central, expert oncology REB serving the hospitals/cancer centres in Ontario that conduct oncology clinical trials. OCREB's centralized model means that once a study is approved by OCREB, participating study centres can submit their centre-specific applications to OCREB, and typically receive OCREB approval to conduct the study within days. This includes centres joining studies that were originally approved by OCREB months or sometimes years earlier. This model not only provides a robust ethical focus on oncology research, but also streamlines the review process, minimizes redundancies, promotes consistency, and saves the time and cost of having the study reviewed by an REB at every participating institution/study site. Since its first meeting in January 2004, OCREB has been working with researchers, institutions and sponsors to safeguard the rights and welfare of research participants in Ontario, while advancing ethically sound cancer research.

OCREB operates in compliance with, and is constituted in accordance with, the requirements of the Tri-Council Policy Statement: Ethical Conduct for Research Involving Humans (TCPS2); the International Conference on Harmonisation Good Clinical Practice Consolidated Guideline (ICH GCP); Part C, Division 5 of the Health Canada Food and Drug Regulations; Part 4 of the Natural Health Products Regulations; Part 3 of the Medical Devices Regulations and the provisions of the Ontario Personal Health Information Protection Act (PHIPA 2004) and its applicable regulations. OCREB is qualified through the CTO REB Qualification Program and registered with the U.S. Department of Health & Human Services (DHHS) Office for Human Research Protection (OHRP) - registration number IRB00003960.

Mandate

OCREB's mandate is restricted to multi-centre clinical trials, where multi-centre is defined as more than one participating Ontario centre, and clinical trial is defined as any research that

prospectively assigns human participants to one or more health-related interventions to evaluate the effects on health outcomes.

OCREB will accept a new study with only one confirmed participating centre, providing the sponsor is actively looking for and is confident that a second centre will agree to participate. In addition, because cooperative group studies almost always include more than one centre in Ontario, OCREB will accept the submission of all cooperative group (e.g., CCTG, NRG, COG) multi-centre clinical trials even if a second centre has not been identified by the Provincial Applicant (PA) (also known as the Lead Applicant)at the time of initial submission.

Research that falls outside the scope of OCREB's mandate includes, but is not limited to, research in healthy volunteers or prisoners; retrospective chart reviews; and case studies. The PA or study sponsor should seek the opinion of OCREB if unsure about the applicability of a study to OCREB's mandate.

Studies that meet OCREB's mandate may be sponsored by academia, by co-operative groups or by industry/pharmaceutical companies. Approximately 50% of studies received by OCREB are industry-sponsored and 50% are sponsored by academia or cooperative groups, including multi-centre investigator-initiated trials.

Membership

OCREB is comprised of members from across Ontario representing many of the institutions from which clinical trial submissions are received. OCREB members collectively have the qualifications and experience to evaluate the ethics of the proposed research for both adult and pediatric oncology trials. OCREB membership includes: medical, surgical and radiation oncologists and hematologists; nurses and other professionals with oncology clinical trial or research experience; informed community members including people with cancer and family members of people with cancer; and members with expertise in research ethics, relevant law, privacy and members from other relevant disciplines such as pharmacy, pathology, and statistics.

The Chair and Vice-Chair(s) of OCREB are appointed based on the process outlined in their Terms of Reference. Members may be appointed as regular members or as alternate members. Regular members are expected to attend at least 75% of the meetings. Substitute or alternate members are expected to attend meetings when/if the regular member is not available and a minimum of two meetings per year. Members receive a modest honorarium for serving on OCREB, and are reimbursed for reasonable travel costs to attend the meetings.

Reviews

OCREB meetings are hybrid, and held by Zoom and in person in Toronto at 661 University Avenue on the second Friday of every month. Each attending member is expected to review all of the submissions on the meeting agenda from their unique and informed perspective, and to complete and submit their reviews online prior to the meeting. Studies normally are assigned to a first and a second reviewer who conduct in-depth reviews of the study in addition to any other assigned reviews (e.g., amendments). Due to the nature of the studies reviewed by OCREB, the first and second reviewers usually are oncologists and study nurses/trial coordinators, respectively.

In addition to submissions that are reviewed by the full Board – i.e., at a convened meeting - other submissions undergo delegated review. For submissions that meet the criteria for delegated review, the Chair or Vice-Chair and other OCREB members, as applicable, conduct the review on behalf of the Board. The OCREB members are informed in a timely manner of all submissions that were reviewed and approved or acknowledged by delegated review procedures.

Process for Delegating to OCREB

To provide researchers and sponsors with a single system for the ethics review of all multi-centre research in Ontario, in February 2017, the Ontario Institute for Cancer Research (OICR) entered into a Participation Agreement with Clinical Trials Ontario (CTO) as an REB Host Institution. Under this agreement, OCREB continues to serve as an expert oncology central REB for multi-centre cancer clinical trials conducted in Ontario. Applications from institutions (also called Participating Organizations) are submitted to OCREB in CTO Stream, a secure, web-based system implemented and managed by CTO.

In order to obtain access to CTO Stream and submit studies to OCREB, institutions must enter into a Participation Agreement with CTO. The institution also must maintain a Federal Wide Assurance (FWA) with OHRP and designate OCREB as an REB responsible to the institution under the institution's FWA. CTO personnel assign each new study to the most appropriate CTO Qualified REB, which then serves as the REB of Record for the study. For oncology clinical trials, OCREB would be assigned as the REB of Record. Participating institutions authorize the use of OCREB on a study-by-study basis by executing an REB of Record Agreement, which defines the roles and responsibilities of the REB, of the institution and of the Principal Investigator (PI).

NOTE. Despite the change in the online system, all OCREB requirements as found in its policies, procedures and consent templates remain in effect. This includes the pre-approval of all centre-specific consent forms without the requirement for OCREB review. Refer to the OCREB website for details at https://ocreb.ca. Contact the OCREB Research Ethics Officer for questions related to OCREB's policies, procedures.

OCREB works with each institution/Participating Organization to ensure that the local context and relevant institutional policies are respected. To date, this has been reflected mainly in consent form language. If there are local policies to be considered, this information is brought to OCREB for consideration by the Policies & Procedures Committee and by the full Board.

Submission and Review Processes

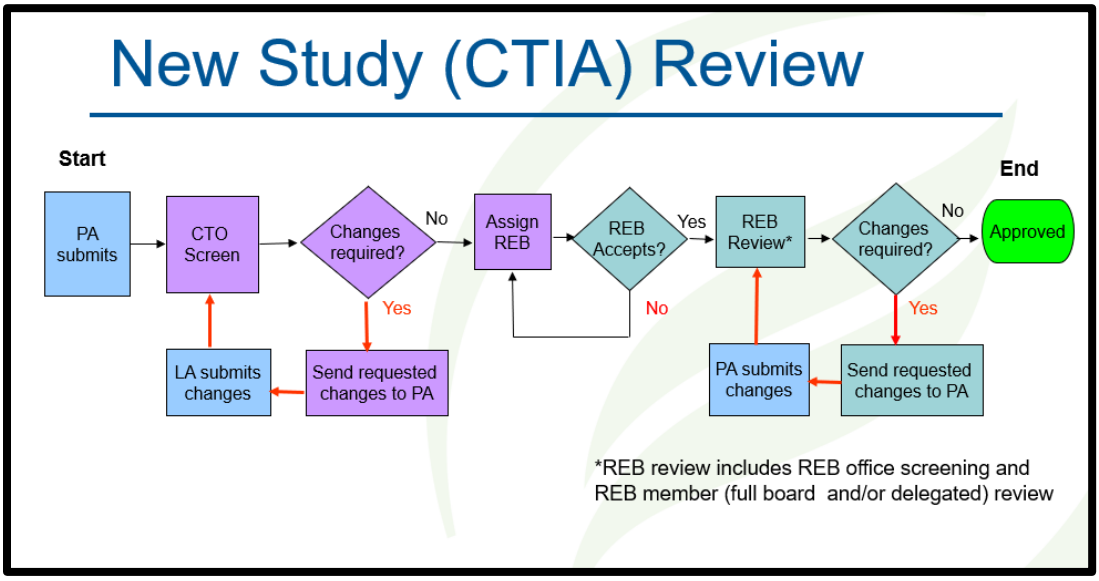
Applications to OCREB must be submitted in CTO Stream using the CTO Stream clinical trial application forms. For information about CTO Stream including user manuals, go to CTO Stream. For questions related to CTO Stream, contact CTO Stream Support at 1-877-715-2700 or streamline@ctontario.ca.

Provincial or Study-Wide Submissions

A Principle Investigator (PI) at one of the participating study centres assumes the role of lead or "Provincial Applicant" (PA) and as such, assumes responsibility for submitting all study-wide (provincial) materials to the REB on behalf of the Ontario participating centres. This includes the new study/clinical trial initial application (CTIA), and all study-wide post-approval applications. Representatives of the sponsor or CRO may assist by creating and completing provincial

applications; however, the PA is responsible for reviewing and signing off on the submissions. The time from submission to OCREB approval of CTIAs is approximately three months.

Before assigning a new study/CTIA to a CTO Qualified REB, CTO personnel screen the CTIA to ensure that the study meets the CTO mandate, that the appropriate institutional representative is listed in the application, and to confirm that the PA has signed the application.



In the single REB/multi-centre model, the initial submission is divided into two parts – a generic CTIA followed by the submission of centre-specific information using a participating site initial application (PSIA). Only the PA submits both. All other participating centres submit only a PSIA. The combined CTIA and PSIA would be similar to an initial application to the local REB.

The PA is responsible for submitting all post-approval, study-wide applications on behalf of all participating centres. This includes study-wide amendments (SWAMs) - e.g., changes to the protocol, consent forms, or investigator brochures; study-wide reportable events (SWREs) - e.g., DSMB reports, interim analysis reports; and study-wide continuing review (SWCR) applications. OCREB simultaneously approves or acknowledges (as applicable) all study-wide post-approval submissions at all approved participating centres. However, similar to the two-step initial submission process, for periodic (usually annual) review of the study, the PA submits a SWCR application to report on the study progress overall and each participating centre PI submits a participating site continuing review (PSCR) application to report on the study progress at the centre.

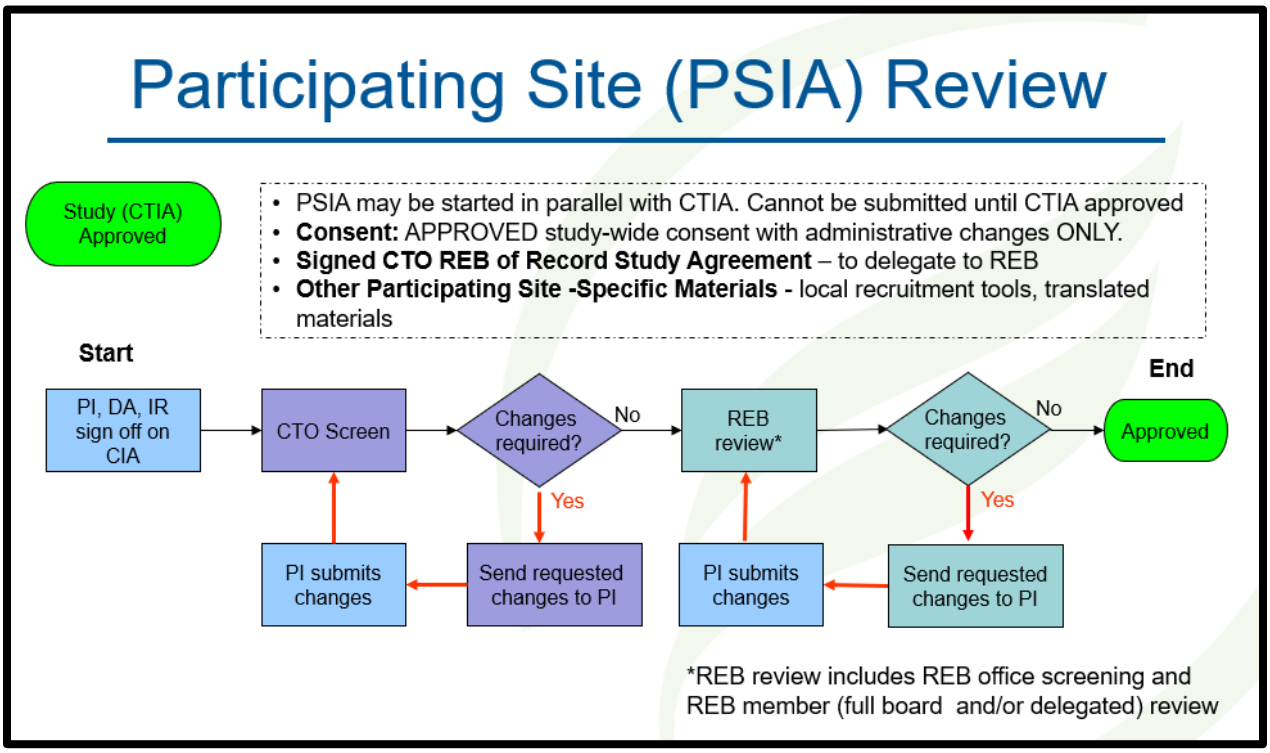
Centre (Participating Site) Submissions

A member of the PA's research team (which may include the sponsor) usually creates the PSIA for each participating centre, and provides a member of that centre's study team with access to the application by giving them a 'role'. This user subsequently adds other centre users as needed.

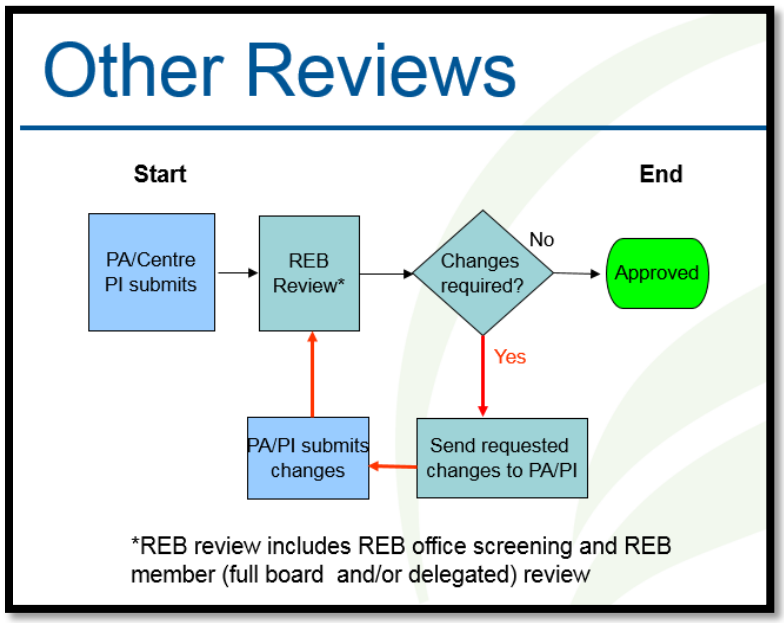
The PSIA, which is an abbreviated centre-specific application, may be completed in parallel with the CTIA; however, it cannot be submitted until the CTIA is approved. Once OCREB issues

approval of the CTIA, each participating centre PI is able to submit a PSIA to obtain OCREB approval to conduct the study at their centre. Before forwarding the PSIA to the REB of Record, CTO personnel screen the application to confirm that the institutional requirements have been met (as applicable), to ensure that the appropriate institutional representative is included in the application, and to confirm that the PI, a department approver and the institutional representative have signed the PSIA. The PSIA normally undergoes delegated review, and the time from submission to OCREB approval usually is a few days.

In order to present consistent consent forms to all study participants in Ontario, each centre must adopt the OCREB approved provincial consent form(s) at the centre-level. Centres apply only pre-approved administrative changes to their centre consent forms and the provincially approved document version date must be maintained despite the administrative changes. OCREB has a controlled honour system for the implementation of consent forms at participating centres and does not review the centre consent forms. Refer to OCREB's "*Guidance for pre-approved administrative changes*" on the OCREB website for details.



Each centre PI is responsible for the conduct of the study at his/her centre, and for the submission of all centre-specific post-approval applications such as: centre reportable events (SWREs) - e.g., local adverse events, privacy breaches and protocol deviations that meet the reporting criteria; centre amendments (PSAMs) – e.g., to change the centre PI; and, centre continuing review (PSCR) applications.



Although the process flowcharts assume a final REB decision of "approved", some submissions may be acknowledged and some may not receive REB approval.

NOTE. At the time of a provincial amendment (SWAM), all provincially approved study documents (including participant materials such as wallet cards and consent forms), are approved for use by all participating centres that have OCREB approval to conduct the study. Centres do not have to submit a separate application to implement an approved SWAM.

OCREB Operations

The OCREB office is staffed by an Executive Director (ED), a Research Ethics Manager (REM), a Research Ethics Officer (REO) and Research Ethics Coordinators (RECs). The RECs support the activities of OCREB on a day-to-day basis, working closely with the Chair & Vice-Chair(s), as well as other OCREB members as necessary. The ED is responsible for the management of the overall operations of OCREB. In collaboration with the OCREB Chair, the ED also is responsible for stakeholder relations and quality management activities. The ED works with the Chair and other team members on setting the strategic direction and annual goals of the program. The REO is responsible for developing, implementing and monitoring ethics review process standards. The REO contributes to OCREB's continuous quality improvement through education and communication on research ethics, and through quality control and quality assurance activities that promote conformity with applicable guidelines, standards, policies, and regulations associated with human research participant protections. The REM is responsible for facilitating compliance of the reviews with the standards, regulations and guidelines governing human research participant protection, for line management of the Research Ethics Coordinators (RECs) and facilitating the research ethics review process in support of the OCREB Chair, Vice-Chair(s) and members.

Policies & Procedures Committee

Established in 2006 and comprised of OCREB members and staff, this Committee serves as an advisory group to OCREB, with a mandate to investigate emerging issues, and to develop or revise policies and procedures when needed. The Committee also reviews requests for proposed institutional requirements, which typically relate to consent form language, as well as Conflict of

Interest declarations from Researchers and from OCREB members. After review and investigation, the Committee brings its recommendations to the full Board.

Education

REB members and staff must receive adequate initial and ongoing education and training in order to be knowledgeable in the relevant regulations, guidelines, policies and ethical principles that guide the review process. OCREB members and staff are encouraged to participate in continuing education activities such as the annual Canadian Association of Research Ethics Boards national conference, as well as relevant online courses and webinars. Potential OCREB members observe at least one meeting prior to being appointed, and new members participate in an orientation session, during which they receive additional resources. All members must complete the TCPS2 tutorial prior to being assigned as a reviewer, and members are urged to engage in relevant ongoing educational opportunities provided by their institutions, by their professional organizations and by OCREB.

Since 2006, OCREB has been hosting sessions for study staff at its affiliated oncology centres to provide education, to share noteworthy items affecting the research community and to promote dialogue on research participant protection. The sessions also provide a forum for communicating updates on relevant regulations and guidelines and their interpretation and implementation, as well as on OCREB policies, procedures and guidelines. Summaries of the sessions are posted on the OCREB website.

For more information about OCREB, visit https://ocreb.ca.