# $REHAB\,427$ $\underset{\text{Spring }2009}{\text{Applied P\&O}} \ 1$ Course Revision • Pre se nta tio ns c a nc e lle d • Student-lead discussions (8:30 – 10:30am) $-\,$ May $13^{th}$ – Jen, Cedar, Random, Paula - May 20<sup>th</sup> - Kim, Megan, Jean, Greg $-\,$ May $27^{th}$ –Ad rie nne , Brand o n, Matt - June 3<sup>rd</sup> - No class $\bullet \ \ 30 \ minute \, s \, perstudent$ • "Open" format – All students a sse sse dbasedupon e valuation criteria • Papers due on 3/10/2009 by 5pm - Paper<u>and</u> electronic (email) The Research Proposal

REHAB427 re se arc h proposal	
• Me thodology 2-5 • Subject protection 1-2 • Resources 1-2  TO TAL 10-20	
Ethic s, Personnel & Budget	
Ethic s	

#### Ethic al Re sponsibility

- Three principles of ethical research\*
  - Auto no my right of self-determination
    - Individuals make their own choices
    - Re se a rc he rs must re spect that choice
      - Especially important with children, disabled persons
  - Be ne fic e nc e − re sponsibility of we ll-being
    - "Do no ham" ormax. bene fit while min. possible ham
    - Re se arc her must weight bene fits with risks
  - Justice faimess in the research process
    - Equality of benefits and burdens (i.e. controls)

    - App lic a b ility of que stion and re se are h

\* Portney & Watkins ©200

#### Histo ry

- Rights and protection for human subjects
  - De rive d from issue s of human experimentation
    - Cancer study (1960's)
    - Syphilis study (1930's 1970's)
- Nure mburg Code (1947)
  - First formaldocument
  - Research only by a qualified professional
  - Subjects must give informed consent
  - Purpose, procedures, inconveniences, and potential hazards
- Declaration of He lsinki (1964, 1975, 1983, and 1989)
  - World Medical Association
  - First to address independent review
  - Invalid research should not be accepted for publication
  - Incorporated by US Dept of Health and Human Services (DHHS) Rule s & Regulations

#### Independent Review

- US laws state all federally-funded research must be reviewed
- Most institutions require internal review for all research
- Internal Review Board (IRB)
  - At least 5 members
  - Mix of males and fe males
  - $-\ \ Not \ from \ same \ professionalgroup$
  - Competent for review
  - One member must be nonscientific • La wye r, c le rg y, e thic ist One must be unaffiliated with institution
- IRB Re vie w
  - Considerscientific merit
  - Evaluate competency of researchers
  - Asse ss risk to subjects ("risk-to-benefit")

  - Interpret feasibility of study given a vailable resources
     Results in approval, require modifications, or disapproval

# Types of Review Full review - 5 reviewers - Longer review process (many months) Expedited review - 2 reviewers - Less time for approval (weeks to months) Specific study characteristics Non-invasive procedures w/adults Routinely appled interventions Moderate exercise w/healthy subjects Exempt review - At least one reviewer - Study characteristics Surveys Interviews Review of records Review of records Non-identifying information Non-personal information (no drug, criminal, or sexual activity)

#### Informed Consent

- Informationalelements
  - Subjects must be fully informed
    - Purpose of research
    - Explanation of procedures
    - Risks (i.e. physic al, psychologic al, emotional, financial, etc.)
    - Be ne fits (i.e. no direct be ne fit, reduced pain, payment, etc.)
  - $\ Subjects\ info\ m\ a\ tio\ n\ sho\ uld\ b\ e\ p\ m\ te\ c\ te\ d$ 
    - Confidential
    - Anonymous
  - Transfer of information must be clear
    - Lay language
    - Written and/orverbal
  - Subjects must be free to question researchers
    - $\bullet\,$  Tlm e to a ssimila te

#### Informed Consent

- Consensualelements
  - Voluntary consent
    - No penalty for not partic ipating
    - No penalty for not completing (including compensation)
  - Vulnerable subjects
    - Children
    - Disable d persons
  - Withdrawal
    - Voluntary withdraw at any time, for any reason
      - Be fo re
      - During
      - After
    - Withdrawal for safe ty concems

Does this
complicate
research?

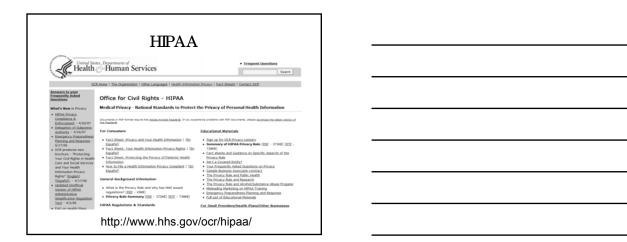
#### Informed Consent

- Consent form
  - Typed
  - Incorporates all elements of informed consent
  - Signed and dated

    - Subject
      Researcher(and witness)
  - Signature page must contain text of consent form
  - Copies
    - Subject and researcher's files
    - Kept separate from study data
- Exclusions to informed eonsent
  - Re tro spec tive re vie w of no n-identifying patient data
  - IRB is still required

#### Patient Information

- He alth Insurance Portability and Accountability Act (HIPAA)
  - Developed to transfer patient information (1996)
- HIPAA Privac y Rule
  - Set of privacy regulations incorporated into HIPAA (2004)
  - Most organizations must be HIPAA-compliant
- Protected health information (PHI)
  - Past, present, future physicalormental conditions
  - The atment options for those conditions
  - Payment information regarding treatment
  - $\quad \text{May be electronic, written, or verbal} \\$
  - Patient may be living or a decedent
- Different types of PHI
  - Individually identifiable health information (III-II)
  - De-Identified information
  - Limited dataset



#### He alth Information

- Rules of access and use
  - Differ for each type of PHI
- In dividually identifiable health information (IIIHI)
  - IIHI is created or received by a healthcare provider
  - Invo lve s medical (physical or psychological) conditions  $\bullet \quad \text{ Pa st, pre se nt or future} \\$
  - Involves treatment of medical conditions
  - Invo lve s p a yme nt info rm a tio n re g a rd ing  $\,$  me d ic a l c o nd itio ns
  - Identifies the individual

Access and use of IIHI requires consent from patient

Access and use of de-identified

information MAY NOT require consent from patient

Access and use of limited

datasets requires data use

agreement with institution

#### De -id e ntifie d information

- Name
- Location more specific than state
- Date s (b irth, a d m issio n, d isc harge, de a th, a ge o ver 89)
- Telephone number
- Faxnumber
- Social security number Medical record number
- Health plan number Account number
- 11. Certific a te/license numbers
- Ve hic le identifiers and numbers (VIN, license plate, etc)
- De vice identifiers and serial numbers 13.
- We b site info matio n (URL)
- Biometric identifiers (voice or finger prints)
- Identifying photographs (face, tattoos, etc)
  Internet address (IP address)
- Any other unique identifying information

#### Limite d Dataset

- Must be removed
  - Name
  - Address (o ther than city, state, and zip)
  - Telephone and fax number
  - Email address Social security number
  - Certificate/license information
  - Ve hic le identifiers and numbers
  - URL's and IP addresses
  - Identifying photographs

  - Me dic al record, he alth plan, or account numbers De vice identifiers and serial numbers

  - Biometric identifiers
- Are allowed
  - Admission, discharge, service dates
  - Birth and death dates

  - Ag e Ge o g raphic a l information (city, state, zip, etc.)

#### HIPAA Autho riza tio n

- Analogous to informed consent
  - What information will be used
  - Who will have access to the information
  - Who may receive the information
  - Purpose of collecting/disclosing the information
  - Expiration of information
    - Often 5 years
    - If indefinite, explicitly state so
  - Patient signature and date
  - Right to revoke information
  - $\ Right to non-partic ipation$

# UW Human Subjects Form



# Human Subjects Review

- Key review items
  - Researchercontactinformation
  - Approval from chair/dean/director
  - Co-inve stig a tors
  - Funding sources
  - Purpose
  - Procedures/protocol
  - De c e p tio n
  - $\quad Numb\,e\,r,\,a\,g\,e\,,\,g\,e\,nd\,e\,r,\,e\,thnic\,ity\,\,o\,f\,\,sub\,je\,c\,\,ts$
  - Inc lusio n/e xc lusio n c rite ria
  - $\quad Re\ c\ ruitm\ e\ nt\ p\ m\ c\ e\ d\ ure\ s$
  - Risks and benefits
  - Adverse effectsConfidentiality

  - $-\quad Info\ me\ d\ c\ o\ nse\ nt$

## Re sid e nc y Re se a rc h

- Que stion: given the serules, how do I get started?
- Answer: HIPAA allows limited access to PHI
- Pre p a ra to ry re se a rc h
  - Formulate a research proposal
  - Creating a hypothesis
  - Identifying candidate subjects
- Subject recruitment
  - As an employee you can
    - Identify subjects
    - Contact subjects for a uthorization
  - Cannot extract PHI from patient files w/o authorization

# Re sid e nc y Re se a rc h

- Many residency sites will not have access to IRB
  - Maintain your ethical responsibilities
  - Peerneview
  - Go through the motions
- Ask yourse If questions
  - Is my proposal and research ethical?
  - $\ Are \ my \ subjectsprotected?$
  - $\ Are \ my \ subjectsproperly \ informed?$
  - $-\,$  Do the subjects understand their rights & responsibilities?
  - Have I avoided coercion?
  - Have Iasked them to sign a consent form?

## Re sid e nc y Re se a rc h

#### NCOPE

Resident Directed Study Statement Form

With submission of my Directed Study to NCOPE I agree that:

- I have met with all legal requirements, and if an IRB approval is required, it has been
- Informed written consent has been obtained by all human subjects
- All HIPAA requirements have been met
  I have not participated in scientific misconduct (i.e., plagiarism). Plagiarism as defined by Benos, et al., 2005 is "using someone else's words, ideas, or results without attribution."

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Administrative Elements Personnel, Budget, Timeline, & Resources	
	]
Pe rso nne l	
1 e iso ime i	
	-
Pe rso nne l	
• Description of the research team	
<ul> <li>Primary investig a to n' reseancher</li> <li>Clinical support</li> <li>Other key personnelor collaborators</li> </ul>	
Qualifications     Briefresume or CV (curriculum vitae)     Experience/success with funding	
<ul> <li>Publication record</li> <li>Letters of support</li> </ul>	
Usually from collaborators      Residency Project	
<ul> <li>Cite a briefbackground for yourself</li> <li>Note other personnel needed (ifrequired)</li> </ul>	

Re so urc e s	
Re so urc e s	
De sc rip tion of re sources at your disposal     Facility description     Number of practitioners, technicians, support staff     Clinical re sources     Fabrication     Htting roms     Assessment are as	
<ul> <li>Equipment</li> <li>Gait lab</li> <li>Testing equipment</li> <li>Computer resources</li> </ul>	
Residency proposal     Give a description of your required or desired resources	
Budget	

## Budget

- De taile d bre a k-down of project costs
- Critic alstep
  - Often difficult to change after approval
- Keyexpenses (i.e. "Directcosts")
  - Personnel
  - Equipment
  - Supplies (Other)
  - Travel
- Administrative costs (i.e. "Indirectcosts")
  - $-\,$  Re nt, e le c tric ity, fa c ilitie s, support personne l
  - Usually a percentage of direct costs

# Re sidency Re search Budget

- Budgetsummary
  - Personnel
    - Time (% effort over study period)
    - Cost (% Salary, hourly wage)
  - Equipment
    - Computer, gait lab, prosthetic components
    - > \$300
  - Supplies and Other
    - $\bullet$  Que stionnaire s, copying , consum a ble materials, subject fees
    - < \$300
- Budget justific a tio n
  - 1-2 paragraph explanation of budget summary

# Example

# 

Time line	
/	
Time line  • Time line is a phase or task-specific schedule	
Two types  Simple time line – highlight study phases	
- Detailed time line - note specific tasks/mile stones  • Time line should mimor methodology/procedures  • Use ful for a ssessing feasibility  - Sets dead lines  - Compliments budget/resources  - Thackprogress	
Example — Simple Time line	
Timeline (month)	
Phase	
3 Intervention Data Collection (B) 4 Baseline Data Collection (A) 5 Data Analysis	
6 Final Report	

Example – Detailed Timeline	
Task	
	1
Que stio ns?	
Ç	
For Next Week	
Lecture     Data Analysis and Statistics	
Assig nme nt	
<ul> <li>Continue drafting research proposal</li> <li>Planclass discussion</li> <li>Meet with peers/instructors to develop ideas, as needed</li> </ul>	
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