

PURPOSE and APPLICABILITY

This document provides information about local context considerations relevant to human subjects research conducted by University of Washington employees or agents. For questions about this information, contact the UW Human Subjects Division at hsdrely@uw.edu.

Section 1: Institution and HRPP	Information		
Institution Name	University of Washington (UW)		
Overview	UW is a large, public flagship research university comprised of:		
	3 campuses in Seattle, Tacoma and Bothell WA		
	 UW Medicine (not including affiliated covered entities that are healthcare 		
	components considered to be non-UW legal entities)		
Federalwide Assurance (FWA)	FWA00006878		
FWA Expiration Date	1/13/2027		
Institution Name on FWA	U of Washington		
Institutional Components on	UW Medicine (does not include affiliated health care entities unless specifically		
FWA	identified here)		
	 UW Medical Center (2 campuses: Montlake and Northwest) 		
	Harborview Medical Center		
	Airlift Northwest		
	 UW Physicians (UW Neighborhood Clinics) 		
	UW Bothell Branch		
	UW Tacoma Branch		
Applicability of federal	UW has not elected on its FWA to apply federal regulations to non-federally funded		
regulations to non-federally	research. In general, UW follows federal regulations in the review of non-federally		
supported research	funded research; however it encourages flexibility in certain situations under its		
	<u>Flexibility Policy</u> .		
AAHRPP Accreditation	No		
CTSA	<u>Institute of Translational Health Sciences</u>		
Quality Assurance Attestation	UW's HSD is routinely inspected by OHRP, FDA, UW internal audit, and others. HSD's		
	most recent federal inspections conducted by FDA in 2017 and 2023 resulted in no		
	findings.		
HRPP/IRB Contact Information	Institutional Official		
	Joe Giffels		
	Sr. Associate Vice Provost for Research Administration and Integrity		
	Box 351202, Gerberding Hall G80		
	Seattle, WA 98195		
	Phone: 206-616-0804		
	jgiffels@uw.edu		
	IRB Office		
	Human Subjects Division (HSD)		
	Box 359470, University of Washington		
	Seattle, WA 98195-9470		
	Jeans, 11/1 30133 3470		

	IDD Contact for All Externally Deviewed Ctudies			
	IRB Contact for All Externally Reviewed Studies			
	Phone: 206-543-0098; ask for Reliance Team			
	hsdrely@uw.edu			
	Primary HRPP/IRB Contact (Human Protections Administrator)			
	Jason Malone, MPA, CIP, Director			
	Phone: 206-543-7246			
	jmmalone@uw.edu			
	IRB Contact for Subject Inquiries			
	Phone: 206-543-0098			
	hsdinfo@uw.edu			
Affiliations and FMA status				
Affiliations and FWA status	Research conducted at UW frequently involves collaboration with regional partners.			
	These regional partners are <u>not</u> listed under UW's FWA. UW maintains reliance			
	agreements with some of these partners (indicated with *), however those			
	agreements do not allow for "daisy-chaining" of reliance agreements. Separate			
	authorization must be obtained from these institutions for the conduct of IRB review			
	on their behalf:			
	Seattle Children's*			
	• Fred Hutch*			
	Kaiser Permanente of Washington*			
	Agencies of the State of Washington*			
	Benaroya Research Institute at Virginia Mason*			
	Washington State University			
	Valley Medical Center			
	VA Puget Sound Healthcare System			
	Bloodworks Northwest*			
	Washington Center for Bleeding Disorders*			
	The Pacific Northwest National Laboratory (PNNL)			
	Northwest Kidney Centers			
	Public Health – Seattle and King County*			
Community attitudes towards	The overall attitude towards research in the Seattle-Tacoma-Everett-Bellevue Metro			
research	area is favorable. Seattle is home to a large number of research institutions including			
	the Allen Institute for Brain Science and PATH. Scientific and medical research is			
	portrayed frequently in a positive light in local news. UW researchers have			
	successfully conducted many studies involving Exception from Informed Consent			
	with input and support from the community.			
Post Approval Monitoring	UW Human Subjects Division operates the Post Approval Verification and Education			
Program	program (PAVE). PAVE auditors <i>may</i> be available to audit studies reviewed by			
	external IRBs upon request. PAVE FAQs.			
Researcher Training	UW does not currently have an institutional requirement that researchers complete			
Requirements	either Human Subjects Protections (HSP) Training or Good Clinical Practice (GCP)			
	training. UW researchers are instructed to follow the training requirements of any			
	funding agencies, collaborating institutions or reviewing IRBs.			
	UW researchers maintain their own training records and can provide these to the			
	reviewing IRB upon request.			
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Researcher Qualifications	For all studies not reviewed by a commercial IRB, HSD confirms that the UW PI and UW study team members are qualified according to its standard operating procedures as part of assessing the study for reliance. The reviewing IRB may either rely upon this assessment or may conduct its own assessment according to its policies.
Public Health Service (PHS) Financial Disclosure	UW is in compliance with PHS Significant Financial Interest disclosure requirements. UW researchers maintain documentation of their own financial conflict of interest
Compliance	management plans and must provide these to the reviewing IRB.
Indemnification of University	Standing Order Regarding Indemnification of University Personnel
Personnel	
Risk Management Policy	UW is self-insured by a revolving fund authorized and created under WA State law (RCW 28B.20.250). Proof of Insurance and Liability Coverage Terms and Conditions.

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	al Laws and Policies pertaining to Human Subjects Research				
Retention of State	Under WA State law (RCW 40.14.050), research records held by the UW are considered public				
Records	records and must be retained and available for inspection for specified time periods.				
	<u>University</u> and <u>UW Medicine</u> retention periods vary depending on the type of research and				
	document.				
	The reviewing IRB cannot require that UW records (including identifiers) be destroyed prior				
	to the end of the applicable records retention periods. The UW study team is responsible for identifying applicable retention periods.				
	UW held research records may also be subject to public records requests. Any requests must be immediately forwarded to the <u>UW Office of Public Records</u> .				
Legally Authorized	There are no WA state laws that directly address the use of LARs in research. However, WA				
Representatives (LARs)	State law (RCW 7.70.065) defines who may provide consent for patients in life-threatening or				
	end-of-life situations. Per legal advice, the UW uses this list to identify LARs in the research				
	context.				
	Order of priority for LARs:				
	(i) The appointed guardian of the patient, if any;				
	(ii) The individual, if any, to whom the patient has given a durable power of attorney that				
	encompasses the authority to make health care decisions; (iii) The patient's spouse or state registered domestic partner;				
	(iv) Children of the patient who are at least eighteen years of age;				
	(v) Parents of the patient;				
	(vi) Adult siblings of the patient;				
(vii) Adult siblings of the patient, (viii) Adult grandchildren of the patient who are familiar with the patient; (viii) Adult nieces and nephews of the patient who are familiar with the patient (ix) Adult aunts and uncles of the patient who are familiar with the patient; an					
					(x) An adult who has exhibited special care and concern for the patient and meets other
					requirements listed under the law.
	requirements listed under the law.				
Age of Majority	There are no WA State laws that directly address the age of majority for consent to participate				
7 GC Of Wajority	in research. However, there are several laws that define the age of majority under specific				
	circumstances or for providing consent for specific types of healthcare. Per legal advice, the				
	UW applies these laws to research involving the specific type of healthcare when defining the				
	age of majority for providing consent.				
	age of majority for providing consent.				

The age of majority in WA is 18 (RCW 26.28.010) unless the person is: An emancipated minor as declared by a court or under a petition for relief from domestic violence (age 16) (RCW 13.64) (RCW 26.50.020) A minor married to a person who has reached majority (any age) (RCW 26.28.020) Receiving inpatient treatment for substance abuse or chemical dependency (any age if the child meets the definition of a "Child in need of services" at RCW 13.32A.030(5)) (RCW 70.96A.235) Receiving outpatient treatment for substance abuse or chemical dependency (age 13) (RCW 70.96A.095) Receiving outpatient treatment for mental health services (age 13) (RCW 71.34.530) Receiving inpatient treatment for mental health without parental consent (age 13) (RCW 71.34.500) Receiving treatment for sexually transmitted disease (age 14) (RCW 70.24.110) Choosing or refusing birth control or abortion services (any age) (RCW 9.02.100) Receiving prenatal care services (any age) (State V. Koome, 84 Wn 2d 901 (1975)) Use of health care Under WA state law (RCW 70.02), the patient or their LAR must explicitly authorize the use of information in WA 4 different types of records. These are specifically and separately identified in the UW HIPAA state for research with Authorization Template for Research and are: written consent Sexually transmitted disease AIDS or HIV Behavioral or mental health/illness, including psychotherapy notes Drug or alcohol abuse, diagnosis, or treatment **Notifiable Conditions** The Washington State Department of Health maintains a list of notifiable conditions WA state law and administrative code describes The permitted and mandatory disclosures (i.e., reporting) for sexually transmitted diseases (RCW 70.02.220) Rules for notification of partners at risk of human immunodeficiency virus (HIV) infection (WAC 246-100-072). The reviewing IRB should consider whether information about notification should be shared with subjects. It is the responsibility of the UW study team to identify whether information about any conditions identified by the research will be shared with public health authorities. Mandated Reporting of Under WA state law (RCW 26.44.030) and UW Executive Order 56, all UW employees and Abuse or Neglect volunteers who have a reasonable cause to believe that a child has suffered abuse or neglect must immediately report the suspected abuse. Mandatory reporters of abuse or neglect of vulnerable adults is defined in WA state law (RCW 74.34.020), including when and how such abuse should be reported (RCW 74.34.035). The reviewing IRB should consider whether information about the potential for reporting should be shared with subjects and/or their parents or LARs. Recording or WA state law (RCW 9.73.030) requires that some type of consent or notification occur for transmitting of private transmission or recording of private communications. Review HSD guidance on this state law. communications

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	The reviewing IRB should not approve the recording of private communications in WA state without the prospective consent or notification of all individuals to be recorded.
Use of eCare/MyChart	Under UW Medicine policy, the UW Medicine's eCare/MyChart system may not be used for research recruitment purposes.
	The reviewing IRB should not approve the use of UW Medicine's eCare/MyChart system for research recruitment.
Use of EPIC Care Everywhere	Under UW Medicine policy, UW Medicine's EPIC Care Everywhere may not be used for research purposes unless the clinical data is necessary for patient/participant safety activities.
	The reviewing IRB should not approve the use of UW Medicine's EPIC Care Everywhere unless it determines that it meets the requirement above.
Use of Amazon's Mechanical Turk	Studies using Amazon's Mechanical Turk (MTurk) must comply with the UW Procurement Services policy that no UW employee, family member, or student directly involved in the research will participate as a subject. The policy requires adding a qualifying question that asks whether the subject is a UW employee or family member, or UW student who is directly involved in the research. If they answer yes, they must be disqualified from MTurk activities.
Administering or	The reviewing IRB should allow UW researchers to add this qualifying question. UW has a robust policy about research that involves the growth, production, procurement,
handling of cannabis	administration, or use of marijuana. This policy does not apply to observational research for which the researcher does not grow, produce, procure, or administer marijuana.
Financial assistance for	UW's HSD will communicate any limitations on the research directly to the reviewing IRB. The Human Subjects Assistance Program (HSAP) is a discretionary no-fault program that may
research-related injury	provide limited medical and other assistance to subjects who experience a research-related medical problem.
	Researchers may choose to provide a HSAP <u>information sheet</u> to research participants.
	If the reviewing IRB determines that the study poses greater than minimal risk, the consent form should contain language relevant to HSAP. Required language is in the document UW Guide to Consent Elements for Externally Reviewed Studies. Language suggesting a promise
	or commitment to pay should be avoided.
UW Required Consent Considerations	Format: UW has no institutional requirements for the format of consent materials and strongly supports flexibility for consent format and content.
	Elements: UW has a limited list of institutionally-required consent elements. These are described, and required and sample language is included for each, in the document UW Guide to Consent Elements for Externally Reviewed Studies.
	The reviewing IRB should ensure that these elements are present as applicable to the study and may approve alternative language for each element unless otherwise indicated.
	Use of short forms: UW is subject to RCW 69.78 which mandates that UW adopt a policy concerning the identification and recruitment of persons who are members of underrepresented demographic groups to participate in clinical trials. This policy must use methods recognized by the United States FDA to identify and recruit such persons. UW

therefore requires that its investigators adhere to <u>FDA guidance</u> about the use of short form consent, and specifically requires the following:

When agents or employees of UW will be obtaining consent using the short form consent method for any research, it is UW policy that:

- 1. An appropriately qualified interpreter will be available to the subject throughout their participation in the research.
- 2. For research that involves more than minimal risk and/or FDA regulated studies:
 - After the use of a short form process, researchers must provide study participants with a translated consent form in a language understandable to them. This form must be provided to the reviewing IRB for approval within 30 days of using the short form consent process and the IRB-approved translated consent form must be provided to the participant within 2 weeks of IRB approval. UW does not specify the method by which the form is provided (e.g., email vs. paper) and does not require that the form is signed.
- 3. UW researchers may use the short forms of the reviewing IRB's institution, or those-provided by HSD.

The reviewing IRB may apply more conservative requirements for the use of the short form consent method, but it may not waive the UW policy requirement.

Electronic Signatures: WA State has adopted the Uniform Electronic Transactions Act, effective June 11, 2020. This law describes the conditions which must be met for an electronic signature to be legally effective. Due to the complexities of the legal conditions and the diversity of possible e-signature systems, **HSD must concur with the e-signature system for obtaining consent and/or HIPAA authorization prior to its use.**

DocuSign and UW ITHS REDCap. UW eSignatures (UW's DocuSign application) and the UW ITHS installation of REDCap are the only tools that have been pre-confirmed by UW to be compliant with WA State law. Both are available to UW researchers. Equivalent, non-UW REDCap installations or other e-consent systems may also be used if authorized by HSD. Note that the UW ITHS REDCap tool can be configured to be FDA Part 11 compliant but it requires consultation with UW Medicine Research IT [redcaphelp@uw.edu]. Other tools may be FDA Part 11 compliant but their use require authorization by HSD. UW eSignatures is not Part 11 compliant. For the use of UW eSignatures, the UW researcher must apply to use it through the UW-IT office.

Non-UW Installations of REDCap. Researchers may request concurrence from HSD by asking the owner of the REDCap Installation to complete the <u>SUPPLEMENT Other REDCap Installation</u> and submitting it to HSD.

Other e-Consent Platforms. Researchers may request concurrence from HSD by asking the Chief Information Officer, Chief Information Security Officer, or other individual with sufficient authority and subject matter expertise to complete the TEMPLATE Other eSignature Attestation_Letter and submitting it to HSD.

Specific information about the e-signatures must be provided in writing to participants, preferably in the consent form. Required language is in the document UW Guide to Consent Elements for Externally Reviewed Studies.

See below for limitations on the use of e-platforms for obtaining documentation of HIPAA authorization.

Section 3: HIPAA Compliance and other considerations for access to protected health information			
Overview	UW is a hybrid covered entity. This means that some, but not all, components of the UW provide health care and are therefore subject to HIPAA and related WA state laws. The UW covered entity is a complex set of components, described in UW Medicine's Policy COMP.101 and 101.G1 UW HIPAA Designation.		
	 In general, research data is not considered subject to HIPAA once it is removed from the UW Medicine electronic systems. For example: A researcher from the School of Medicine (SoM, which is not part of the UW covered entity) reviews UW Medicine medical records and abstracts identifiable information and stores that information on SoM servers. The initial use of the medical records is subject to HIPAA, but once the information is held by the researcher outside of the medical records, it is no longer subject to HIPAA for any secondary disclosures. A School of Dentistry researcher conducts a survey of patients in a clinic waiting room. The survey data is not entered into the patients' clinical dental records and is stored on the researcher's computer. The survey data is never subject to HIPAA. 		
Preparatory to Research	While the preparatory to research provision applies in theory to research conducted at		
Activities Not Allowed	UW, in practice it is almost always impossible for UW research teams to make the		
for Recruitment	attestations required under the Preparatory to Research requirements at 45 CFR		
Activities	164.512(i)(1)(ii) because:		
	the research study staff who are accessing the PHI are not members of the		
	workforce of the covered entity, but rather of the non-covered components (e.g., an academic unit), and/or		
	PHI accessed for recruitment purposes will be removed from the covered entity to servers that are owned by the non-covered components (e.g., the academic units)		
	For access to UW Medicine PHI without authorization for recruitment purposes, the reviewing IRB should consider a partial or full waiver of HIPAA Authorization rather than determining that the activities fall under the Preparatory to Research provision.		
Obtaining HIPAA	Researchers accessing UW Medicine records with patient permission are advised to use a		
Authorization for UW	separate HIPAA Authorization form maintained by HSD and vetted by UW Medicine		
Medicine Records	Compliance. This is because of the Washington State law requiring explicit "opt in"		
	language for release of certain types of health care information as well as other state law requirements.		
	UW HIPAA Authorization template		
INFORMATION CUTET			

UW HIPAA Authorization template for pregnant partners

Language in these templates should not be modified except with the permission of <u>UW</u> Medicine Compliance.

The reviewing IRB should not approve consent materials that contain HIPAA Authorization language for the purposes of accessing UW health care records. The UW's Standalone HIPAA Authorization Form should be used unless the UW study team has obtained permission from UW Medicine Compliance for an alternative format.

Electronic Authorization. The UW ITHS REDCap system (and equivalent, HSD-approved non-UW REDCap installations) or the UW version of DocuSign (for non-FDA-regulated studies) may be used to obtain HIPAA authorization for access to PHI at UW Medicine, Seattle Children's, and Seattle Cancer Care Alliance. For authorization to obtain/access PHI at any other HIPAA-covered institution, consult that institution's privacy and/or health records information office. Electronic authorization signatures captured in other systems are *not* accepted.

HSD Policy Reference:

GUIDANCE HIPAA
GUIDANCE Consent
INSTRUCTIONS UW E-Signature Tools

Section 4: Possible Ancillary Reviews		
UW researchers are responsible for identifying the ne	eed for, obtaining and maintaining any required ancillary reviews	
and approvals, and communicating relevant information to the reviewing IRB. HSD does not maintain this		
information. Italicized items are the most likely to im	pact or intersect with IRB review.	
Any UW investigator has a conflict as defined in GIM	<u>Financial Conflict of Interest Disclosure</u>	
<u>10</u> .		
Radiation exposure (procedures or materials)	Human Subjects Radiation Approval Committee (HSRAC)	
Recombinant/synthetic DNA/RNA, human gene	Institutional Biosafety Committee (IBC)	
transfer and other biohazardous agents		
Radioactive drugs being used without an IND for	Radioactive Drug Research Committee (RDRC)	
basic science research	Contact James W. Vélez (jvelez@uw.edu)	
Human embryonic stem cells (hESC)	Embryonic Stem Cell Research Oversight Committee (ESCRO)	
Genomic Data Sharing Certification	<u>UW HSD</u> can perform certification upon request	
Research involving in-person or virtual interactions	Office of the Youth Protection Coordinator Registration	
with subjects under 18		
Cancer-related intervention studies	Cancer Consortium Scientific Review Committee	
The research involves the use of UW Medicine	UW Medicine Security Review for Machine Learning	
patient data (whether identified or de-identified) for	Contact Sally Beahan (sbeahan@uw.edu)	
machine learning outside of UW IT systems.		
UW Medicine and UW Dentistry residents and	UW HR Labor Relations	
fellows are study subjects.	Contact Jennifer Mallahan (mallaj@uw.edu)	
Clinical services, items or tests that are provided as	Clinical Research Budget and Billing (CRBB)	
part of a research study by UW Physicians, Seattle		

Cancer Care Alliance or UW Medicine hospitals or clinics	
Material Transfer Agreements (MTA) and Data Use Agreements (DUA)	MTAs are issued by two UW offices, CoMotion and the Office of Sponsored Programs (OSP). DUAs associated with grant activities may be negotiated by the Office of Sponsored Programs or by the investigator's academic department.
Audio recordings made for research purposes in a UW Medicine clinical setting require prior approval from the relevant CEO or Executive Director	UW Medicine Compliance: <u>Audio Recordings In The Clinical</u> Setting For Research, Education Or Quality Improvement Purposes

Version Number	Posted Date	Implementation Date	Summary of Changes
2.1	12.23.2024	12.23.2024	Update FDA Part 11 compliance statement for UW ITHS REDCap; revise policy information about short form consent
2.0	09.26.2024	09.26.2024	Update links for insurance and indemnification
1.9	01.04.2024	01.04.2024	Update information about ancillary reviews and HSD's federal inspection status
1.8	10.02.2023	10.02.2023	Provide additional guidance on Washington State law regarding consent and audio recording
1.7	08.31.2023	08.31.2023	Remove requirement to provide IRB letter to use DocuSign
Previous versions			For older versions: HSD staff refer to the SharePoint Document Library; Others – contact hsdinfo@uw.edu .

Keywords: External reliance; FWA; Multi-site; Single IRB