1.0 PURPOSE

This SOP specifies who has the authority to sign documents on behalf of GREB and describes the responsibilities of such individuals, and the circumstances under which signing authority may be delegated.

2.0 SCOPE

The scope of this SOP is restricted to the review of the ethical conduct of research involving humans that falls under GREB's oversight. GREB primarily has research ethics oversight over Humanities, Social Sciences, Science, Engineering, and administrative research conducted under the auspice of Queen's University. The scope
of GREB’s oversight is limited to those activities defined in the TCPS2 (2014) as “research” involving “human participants.”

3.0 RESPONSIBILITIES

All GREB members and GREB office personnel are responsible for ensuring that the requirements of this SOP are met.

The GREB Chair or designee is responsible for signing documents related to GREB review and ethical clearance of research. If the task of signing is delegated to a qualified individual or individuals, the responsibility for oversight remains with the GREB Chair.

4.0 DEFINITIONS

See Glossary of Terms.

5.0 PROCEDURES

5.1 Signing Authority

5.1.1 The GREB Chair or designee is authorized to sign any and all documents in connection with the review and ethical clearance of research projects involving human participants, which have been reviewed and ethically cleared by the GREB.

5.2 Delegation of Signing Authority

5.2.1 The GREB Chair or designee may delegate signing authority for documents related to GREB review and ethics clearance;

5.2.2 The GREB Chair or designee may only delegate signing authority to GREB members or GREB office personnel with the skills and knowledge necessary for the effective exercise of the authority;
5.2.3 The GREB Chair or designee may not delegate signing authority to ad hoc advisors or to independent contractors;

5.2.4 The GREB Chair or designee should clearly define the parameters of the delegated authority;

5.2.5 The GREB Chair or designee may delegate signing authority indefinitely or for defined periods of time (e.g., for absences);

5.2.6 Delegation of signing authority must be documented and kept on file and, if applicable, may need approval from the Director of Research Ethics Compliance.

5.3 **GREB Reviews, Decisions, and Other Correspondence with the Researcher**

5.3.1 For each submission reviewed at a full board meeting, the GREB Ethics Coordinator or designee records the decisions made by the Full Board;

5.3.2 Communication of the GREB decision made at a full board meeting must be reviewed and authorized by the GREB Chair or designee or as otherwise delegated by the GREB Chair or designee;

5.3.3 For each submission that undergoes delegated review, the reviewer's decision is documented in the research study file;

5.3.4 Once a final decision is documented by the GREB Chair or designee, the GREB Ethics Coordinator or designee may issue the decision or letter;

5.3.5 All activities are documented in the research file;

5.3.6 Any letters, memos, or emails between the GREB and Researchers that provide information concerning the review of research (e.g., requests for consent form changes, requests for additional information) and that do not imply or appear to imply clearance of the research, may be issued as per delegated signing authority;

5.3.7 All reviews, actions, decisions, and signatures are filed within the research file;
5.3.8 All correspondence is retained in the research file.

5.4 Correspondence with External Agencies

5.4.1 The GREB Chair or designee signs all correspondence regarding ethical issues with agencies of the Canadian federal and Ontario provincial governments (e.g., Secretariat on Responsible Conduct of Research [SRCR]), Freedom of Information and Protection of Privacy Act (FIPPA), and all Canadian funding agencies and/or sponsors (e.g., the Canadian Institutes of Health Research [CIHR], the Natural Sciences and Engineering Research Council of Canada [NSERC], and the Social Sciences and Humanities Research Council [SSHRC]).

5.4.2 The VP Research (Signatory Official, i.e., the official legally authorized to represent the institution), Director of Research Compliance (Human Protections Administrator), or Ethics Compliance Adviser signs all correspondence regarding ethical issues with foreign agencies such as the US Office of Human Research Protection (OHRP), Federalwide Assurance (FWA), and all foreign funding agencies and/or sponsors.

6.0 REFERENCES

See References.

7.0 APPENDICES

1. GREB Delegation of Duties Template

GREB SOPs v.2016FEB08
# 8.0 REVISION HISTORY

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<tr>
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<td>v.103.001</td>
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