1.0 PURPOSE

This SOP describes the overall management of GREB office personnel.

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."

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3.0 RESPONSIBILITIES

The GREB Chair or designee and GREB office personnel are responsible for ensuring that the requirements of this SOP are met. Queen's University is responsible for providing sufficient resources to adequately support the functions of the GREB.

4.0 DEFINITIONS

See Glossary of Terms.

5.0 PROCEDURES

GREB office personnel provide consistency, expertise, and administrative support to GREB, and serve as a daily link between GREB and the research community. GREB office personnel are vital to ensuring the efficient and effective administration and enforcement of GREB decisions; thus the highest level of professionalism and integrity is expected.

5.1 Job Descriptions

5.1.1 Job descriptions establish the role requirements for GREB office personnel, in accordance with Queen’s University policies and procedures;

5.1.2 All GREB office personnel will be provided with a copy of their job description and job expectations and given access to all applicable GREB Ethics Guidelines policies and procedures;

5.1.3 GREB office personnel are subject to privacy and confidentiality policies of GREB and Queen’s University.
5.2 Responsibilities

5.2.1 GREB office personnel responsibilities may include:
- Pre-review of submissions and requests to GREB;
- Quality management activities;
- Management of administrative issues involving GREB research ethics oversight as described by applicable GREB policies;
- Implementation of GREB directives; and
- Provision of advice and information to GREB.

5.3 Hiring and Terminating GREB Office Personnel

5.3.1 Queen's University has the responsibility for the recruitment, hiring, continuing review, and termination of GREB office personnel, in accordance with Queen's University policies and procedures.

5.4 Delegation of Authority or Responsibility

5.4.1 The GREB Chair may formally delegate appropriate tasks or responsibilities to GREB office personnel provided the delegated individual has the expertise to carry out the task(s), the task is compliant with GREB SOPs, and the task delegation has been agreed to by both GREB office personnel and applicable Queen's University official(s);

5.4.2 Delegation of tasks by the GREB Chair must be documented in writing, and if applicable, approved by the Director of Research Ethics Compliance (see SOP 106.001: Signatory Authority).

5.5 Performance Evaluations and Documentation

5.5.1 Performance feedback with respect to GREB office personnel will be provided on an ongoing basis by the GREB Chair or designee to the Director of Research Ethics Compliance;
5.5.2 Queen's University has the responsibility for conducting formal performance evaluations in accordance with Queen's University's policies and procedures;

5.5.3 Queen's University has the responsibility for identifying, documenting, and retaining formal GREB office personnel interactions.

5.6 Periodic Evaluation of GREB Office Human Resource Needs

5.6.1 A periodic evaluation of the adequacy of GREB resources will be conducted by the Director of Research Ethics Compliance;

5.6.2 The evaluation will assess the extent to which GREB office personnel, equipment, finances, and space are adequate to carry out their function in support of GREB;

5.6.3 This assessment takes into consideration the volume, complexity, and types of research projects administered by GREB office personnel and whether or not activities in support of GREB can be completed in a timely manner;

5.6.4 The need for additional resources will be discussed by the Director of Research Ethics Compliance in conjunction with the GREB Chair and other Queen's University official(s) as appropriate.

6.0 REFERENCES

See References.

7.0 APPENDICES

None.

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8.0 REVISION HISTORY

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<th>Version</th>
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<td>v.104.001 2016FEB08</td>
<td>Original: This SOP was developed based on information from the TCPS2 (2014) and Queen’s University previous documents or policies (using the format of CAREB/N2).</td>
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