Policy
1. The IRBPPC provides support for the IRB and the GVSU research community by reviewing and developing IRB policies and procedures.

2. The IRBPPC is comprised of seven members, including the IRB Chairperson (or an IRB member designee), two other IRB members, three faculty members who have not previously served as GVSU IRB members but have regularly conducted human subjects research in the past, and a staff member from the GVSU Office of Research Compliance and Integrity (ORCI).

3. IRBPPC member appointments are made by the Institutional Official (IO), and are generally for one-year terms, with appointments being renewable.

4. New policies and significant changes to existing policies must be reviewed and approved by the IRBPPC.

Procedures
1. Responsibilities of the IRBPPC
   a. Periodically review the IRB policies and procedures, including submission forms, documents, and guidance, as appropriate.

   b. Develop new or revised IRB policies and procedures, forms, documents, and guidance as appropriate.

   c. Periodically review the information and instruction provided on the IRB website and make recommendations for improvement.

   d. Assist in identifying informational and/or knowledge lapses among IRB members, investigators, research staff, and students. Support educational efforts in addressing deficits.

2. Review and Approval of Policies
   a. Significant vs. Minor Policy Changes
i. Significant policy changes are those considered by the IRBPPC/IO/ORCI to fundamentally change the interpretation of the policy and/or that add additional conditions to the policy.

ii. Minor policy changes are those considered by the IRBPPC/IO/ORCI to not change the fundamental interpretation of the policy. Such changes include, but are not limited to:

   1. Grammatical/typographical edits,
   2. Addition of clarifying statements in the policy that do not change the fundamental interpretation of the policy, and
   3. Changes in the administrative procedures and/or regulatory references supporting the policy.

b. Minor changes to existing policies may be implemented by the ORCI and/or IO at any time without IRBPPC review and approval.

c. Any new policies or significant changes to existing policies must be reviewed and approved by a majority vote of the IRBPPC.

d. Following IRBPPC approval of a policy, the IO may, at their discretion, review and approve the policy.

   i. If the IO recommends major changes, the policy will be returned to the IRBPPC for further review, and the policy will require reapproval by the IRBPPC.

   ii. If the IO approves the policy with minor changes recommended, the policy will be updated to reflect the minor changes and will be considered final.

   iii. If the IO approves the policy as written without further recommendations, or chooses not to review it, the policy will be considered final.

e. ORCI staff members are responsible for preparing and maintaining IRB policies. This includes:

   i. Drafting new policies,

   ii. Presenting policies for review to the IRBPPC,

   iii. Incorporating changes identified by the IRBPPC and/or IO into policy drafts,

   iv. Disseminating approved policies to researchers, and
v. Maintaining a historical record of previously approved versions of policies.

f. Unless otherwise stated in the policy, policies and procedures are written to apply to those individuals conducting the IRB-covered research. It is noted that some policies (particularly those numbered in the 000’s and 100’s) apply to IRB members and administrative staff, including the IO and ORCI staff members; in such instances, the policy and procedures will clearly identify the responsible party.

g. All policies must be reviewed and updated as needed and at least once every five years.

h. Review and approval of policies may occur via email.

i. The IRB will be notified of all policy changes approved by the IRBPPC at the next convened IRB meeting.