Internal Centralized IRB for Multi-Site Community Healthcare Network  
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**Problem Statement**: For regional healthcare providers that are comprised of multiple research sites, conducting research can be costly in terms of time, money, and resources. Until 2012, five out of the nine hospitals operated by our organization conducted human research under various local IRBs. Some of the same projects were conducted at more than one of our sites and were reviewed by more than one IRB. Additionally, each site had its own processes/procedures in place regarding the conduct of research. This resulted in regulatory oversight and subsequent FDA audits with warning letters at some sites. The need to eliminate duplicative and unnecessary IRB review while simultaneously enhancing compliance and operational efficacy across the research enterprise was identified.

**Description of the Research**: The organization approached these issues by developing a centralized corporate HRPP. The two big challenges in meeting this goal were the consolidation of each of the hospitals' IRBs into one corporate structure, and the implementation of an electronic IRB system throughout the corporation. Our electronic system has the ability for one principal investigator to submit for multiple sites, resulting in: Less paperwork for investigators to submit; allows one application and one informed consent form for multiple sites; a local resource for investigators; lesser cost for investigators; elimination of duplicate reviews while providing review of local context; increased efficiency; and streamlined review process focused on regulatory criteria.

**Additional Information**: Our unique HRPP structure consists of one centralized IRB; one Institutional Official; and we maintain a single corporate-wide FWA on which each hospital is listed as a component. The centralized IRB is multidisciplinary compilation of members from each of the previous IRBs, as well as additional members from the community and throughout the corporation. By bringing on members of previously existing IRBs, we are able to utilize, not only their professional expertise, but also their knowledge of their local population.