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| UC San Diego INSTITUTIONAL REVIEW BOARD ADMINISTRATION | OIA-061 SOP: Periodic Evaluations of the OIA | | | | |
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1 PURPOSE

- 1.1 This procedure establishes the process to conduct quality improvement activities in the Office of IRB administration (OIA) that periodically assess the quality, efficiency, and/or effectiveness of the OIA.
- 1.2 The process begins when the OIA director or designee initiates a new review period.
- 1.3 The process ends when all evaluations have been completed and if needed, acted upon.

2 REVISIONS FROM PREVIOUS VERSION

- 2.1 None

3 REQUIREMENTS

- 3.1 The goal of the quality improvement plan is to achieve and maintain compliance and to attain targeted levels of quality, efficiency, and effectiveness of the OIA.
- 3.2 Objectives of the quality improvement program are to:
 - 3.2.1 Assess and continuously improve quality and efficiency of reviews conducted by OIA staff acting as designated reviewers.
 - 3.2.2 Assess and continuously improve regulatory compliance of IRB minutes.
 - 3.2.3 Increase efficiency of recording and finalizing minutes.
 - 3.2.4 Assess and continuously improve quality of the assistance provided to investigators and research staff through the OIA online assistance request system, or equivalent.
- 3.3 The measures of the quality improvement program are defined in:
 - 3.3.1 *OIA-335 WORKSHEET: Minutes Quality Improvement Assessment*, or equivalent.
 - 3.3.2 *OIA-430 CHECKLIST: Staff Quality Improvement Assessment*, or equivalent.
 - 3.3.3 *OIA-602 DATABASE: Investigator Assistance Improvement Assessment*, or equivalent.

4 RESPONSIBILITIES

- 4.1 The OIA director or designee initiates this process.
- 4.2 The OIA staff ensure completion of these procedures.

5 PROCEDURE

- 5.1 Complete *OIA-430 CHECKLIST: Staff Quality Improvement Assessment*, or equivalent.
 - 5.1.1 At least five work-products from all individuals from each of the functional groups of OIA staff (i.e., non-committee review team or committee team) who regularly function as a designated reviewer should be selected for assessment each review period.
 - 5.1.2 Select at least five pieces of work-product which were reviewed and approved by the selected individual in the time period for assessment selected by the OIA director or designee.
 - 5.1.3 Track compliance and examine submissions for trends.
 - 5.1.4 Send the results to the OIA staff member's supervisor and OIA director.
 - 5.1.5 If the results of any evaluations demonstrate high variability or do not meet any established performance targets, work with the OIA director, institutional official, or designee to implement an improvement plan.
- 5.2 Complete *OIA-335 WORKSHEET: Minutes Quality Improvement Assessment*, or equivalent, on a representative sample of the minutes within the time period for assessment selected by the OIA director or designee, typically the previous three months.
 - 5.2.1 Track compliance and the number of days required to complete minutes and examine for trends.
 - 5.2.2 Send the results to the OIA director and assistant director.
 - 5.2.3 If the results of any evaluations demonstrate high variability, do not meet any established performance targets, or do not conform to the requirements of *OIA-043 SOP: IRB Meeting Minutes*, work with the OIA director, institutional official, or designee to implement an improvement plan.
- 5.3 Complete *OIA-602 DATABASE: Investigator Assistance Improvement Assessment*, or equivalent, on the online assistance request system from the time period for assessment selected by the OIA director or designee.

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- 5.3.1 Track days required to close tickets and review scores for helpfulness, quality, and timeliness and examine for trends.
- 5.3.2 Track suggested improvements from research community and examine for trends.
- 5.3.3 Send the results to the OIA director and OIA leadership team.
- 5.3.4 If the results demonstrate high variability or do not meet any established performance targets, work with the OIA director, institutional official, or designee to implement an improvement plan.
- 5.3.5 If there is an identified need for a change, improvement, or other action from the suggested improvements, work with the OIA director, institutional official, or designee to consider an appropriate response.

6 MATERIALS

- 6.1 *OIA-001 SOP: Definitions*
- 6.2 *OIA-043 SOP: IRB Meeting Minutes*
- 6.3 *OIA-335 WORKSHEET: Minutes Quality Improvement Assessment*
- 6.4 *OIA-430 CHECKLIST: Staff Quality Improvement Assessment*
- 6.5 *OIA-602 DATABASE: Investigator Assistance Improvement Assessment*

7 REFERENCES

- 7.1 None