



# 2018 Metrics on Human Research Protection Programs Performance for Hospitals

# About the Metrics

Improving the quality of human research protection programs (HRPP) is a top priority of AAHRPP. Effective and efficient systems of oversight within organizations provide better protections for research participants and produce higher quality research. And collectively, they raise the global bar to ensure research participants are safe and respected. AAHRPP is pleased to present the 2018 metrics for hospitals' HRPP performance.

These metrics are collected from annual reports, as well as step 1 and step 2 applications, submitted by clients. All the metrics were based off the most recent data reported by AAHRPP clients as of December 31, 2018. From data supplied by our client organizations in 2018, AAHRPP has compiled an information database to help research organizations, researchers, sponsors, government agencies, and participants identify and support high-performing practices for HRPPs. The data range from types of research and conformance with regulations and guidance, to financial and personnel resources and IRB review times.

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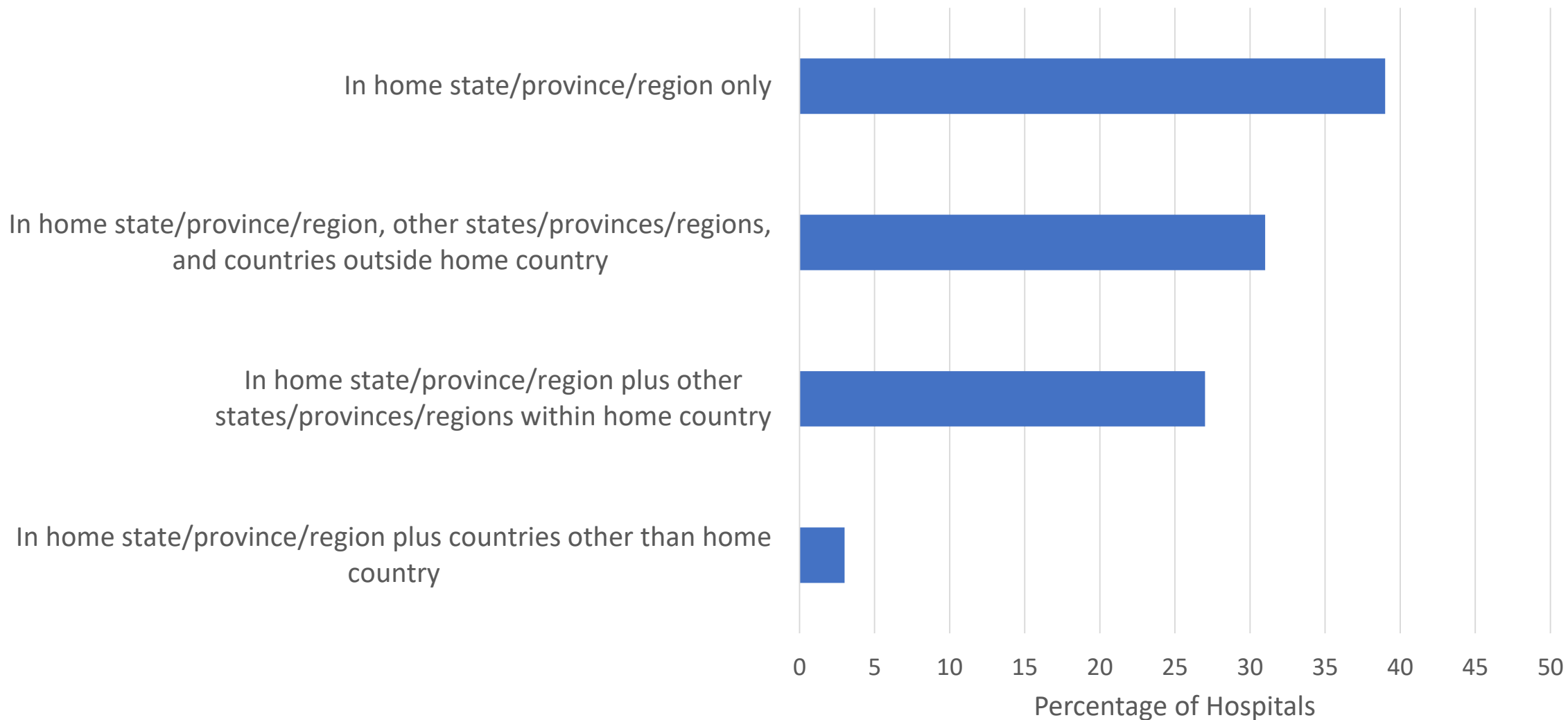
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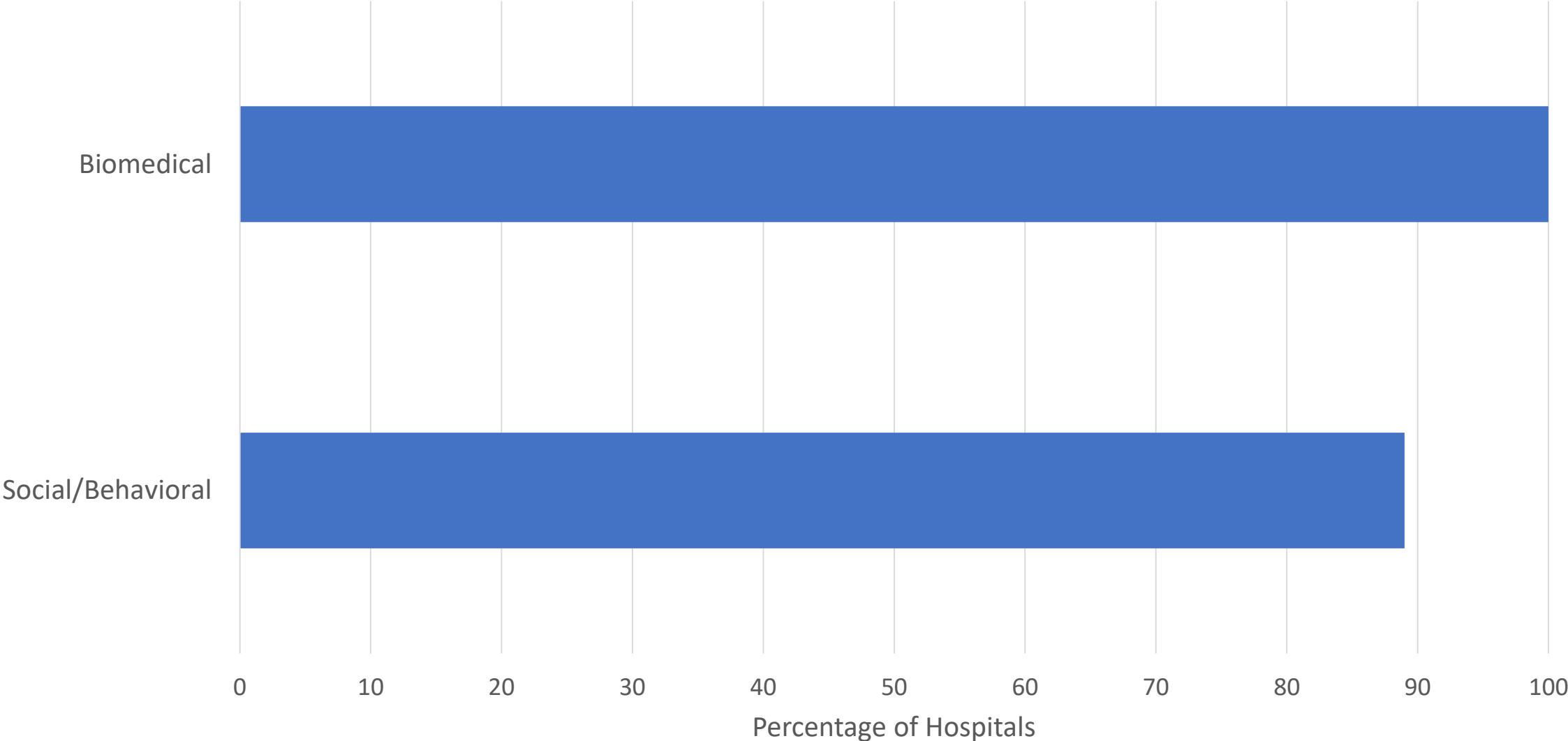
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## Where Hospitals Conduct Research



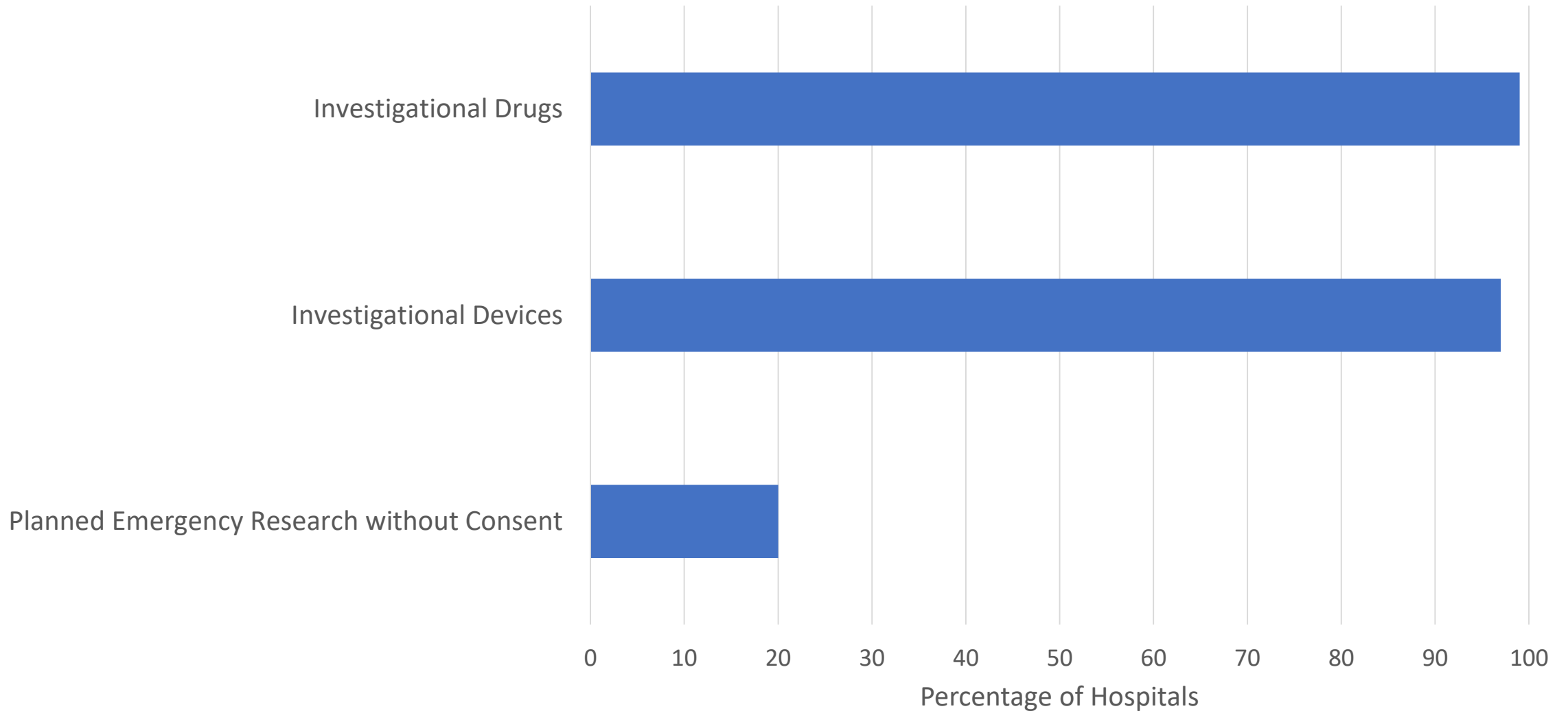
Of the 96 accredited hospitals, 39% of accredited hospitals conduct research in their home state/province/region only; 31% conduct research in their home state/province/region, other states/provinces/regions within their home country, and in countries outside their home country; 27% conduct research in their home state/province/region and other states/provinces/regions within their home country; 3% conduct research in their home state/province/region and countries other than home country.

# Type of Research Conducted or Reviewed by Hospitals



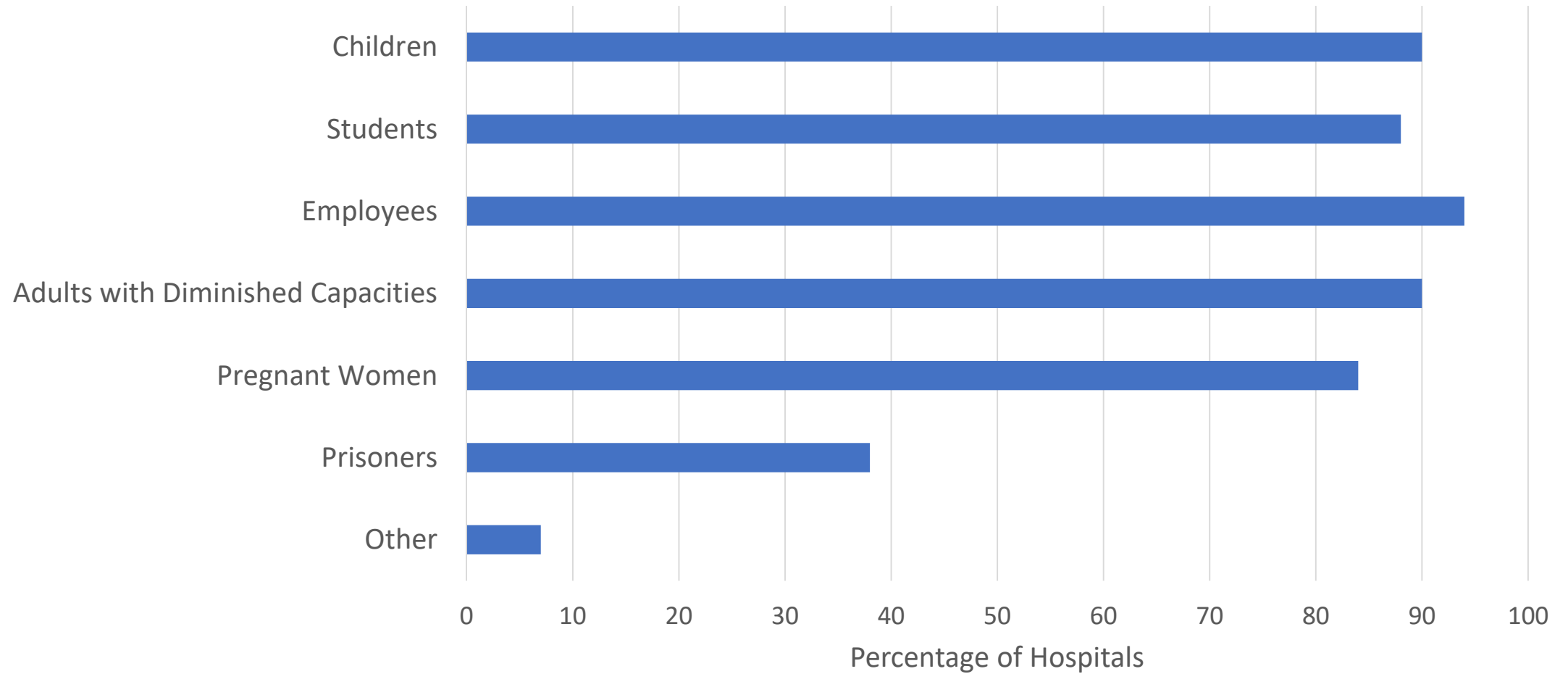
100% of hospitals conduct biomedical research; 89% conduct Social/Biomedical Research.

## Selected Types of Research Conducted or Reviewed by Hospitals



99% of accredited hospitals conduct research on investigational drugs; 97% conduct research on investigational devices; 20% conducted planned emergency research without consent within 12 months of their most recent report.

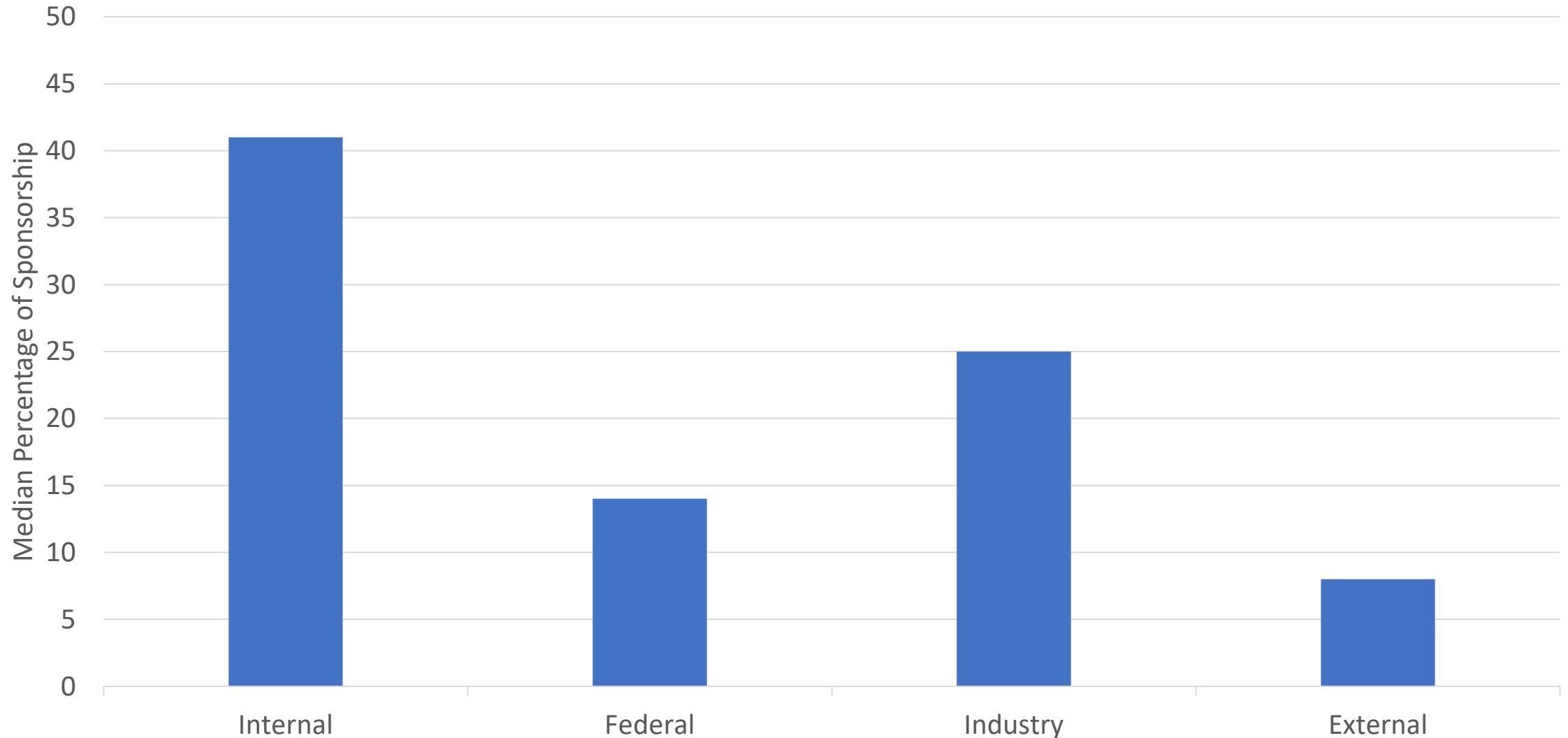
## Hospitals that Conduct or Review Research with Vulnerable Populations



90% of accredited hospitals conduct research with children; 88% conduct research with students; 94% conduct research with employees; 90% conduct research with adults with diminished capacities; 84% conduct research with pregnant women; 38% conduct research with prisoners; 7% conduct research with other vulnerable groups.

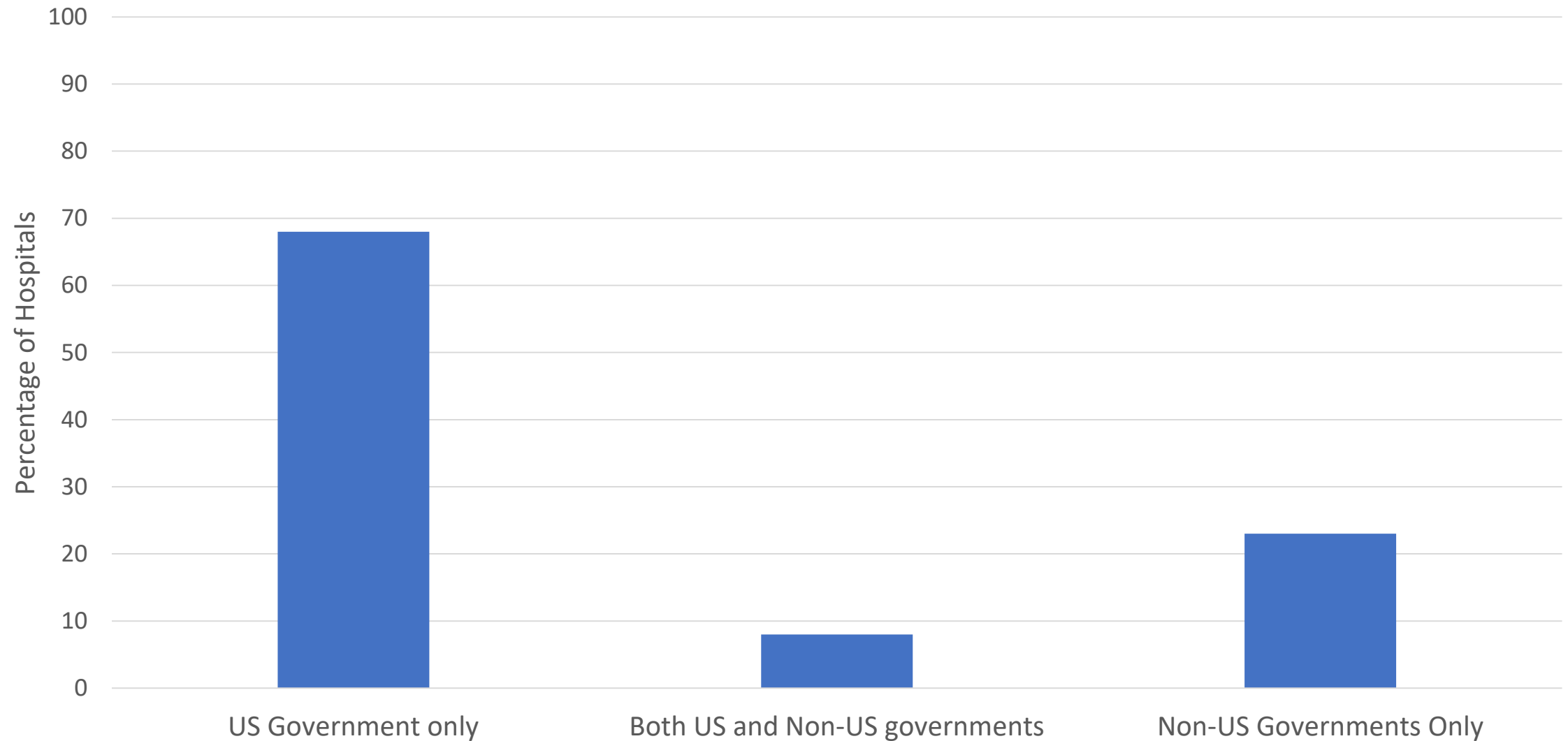


## Sponsors of Research for Hospitals



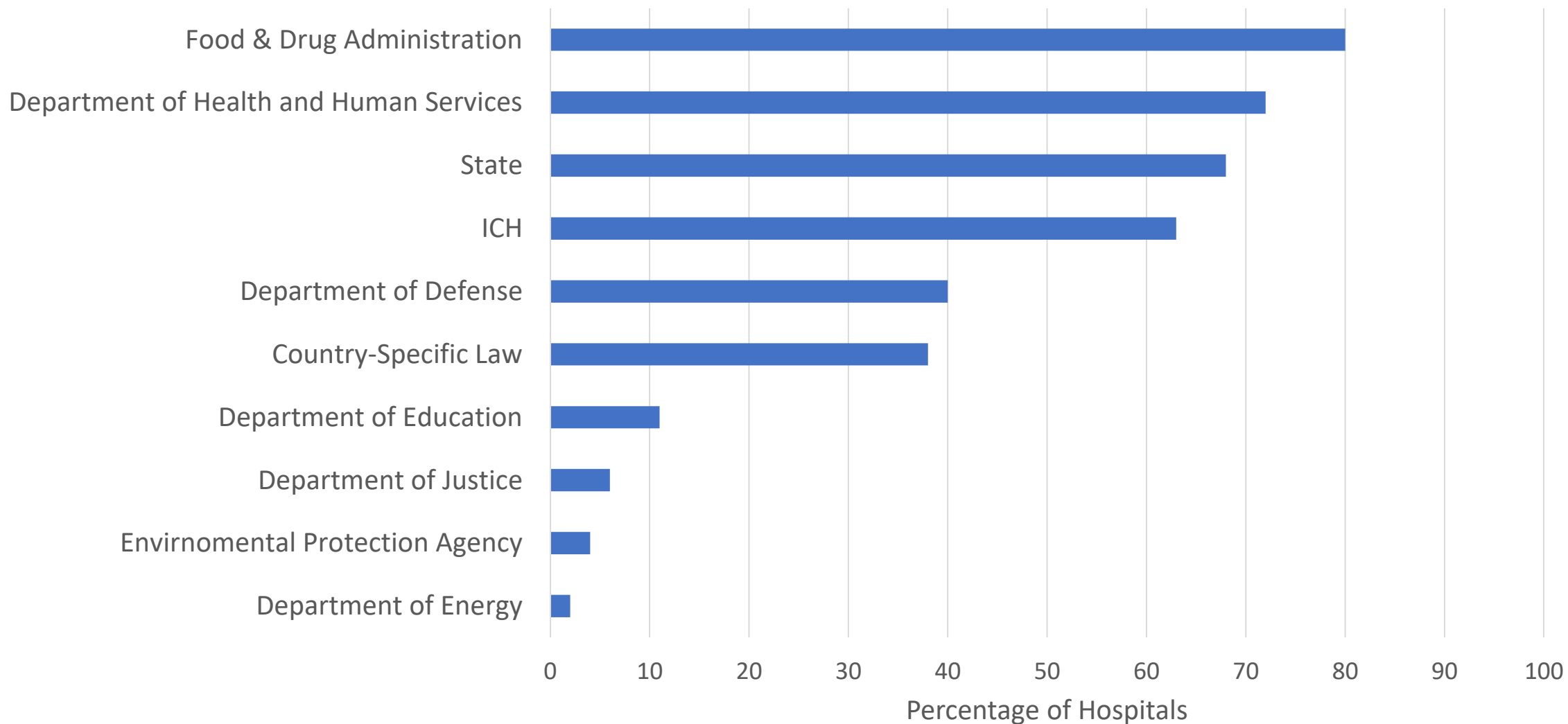
A median of 41% of hospital research is internally funded; a median of 14% of hospital research is federally funded; a median of 25% of hospital research is industry funded; a median of 8% of hospital research is externally funded.

## Federal Sponsors of Research



Of accredited hospitals which receive federal funding, 68% of hospitals receive funding from only the US government; 8% receive funding from both US and non-US governments; 23% receive funding from non-US governments only. Nine hospitals receive federal funding, but did not specify the source.

### Regulations and Guildelines Followed by Hospitals



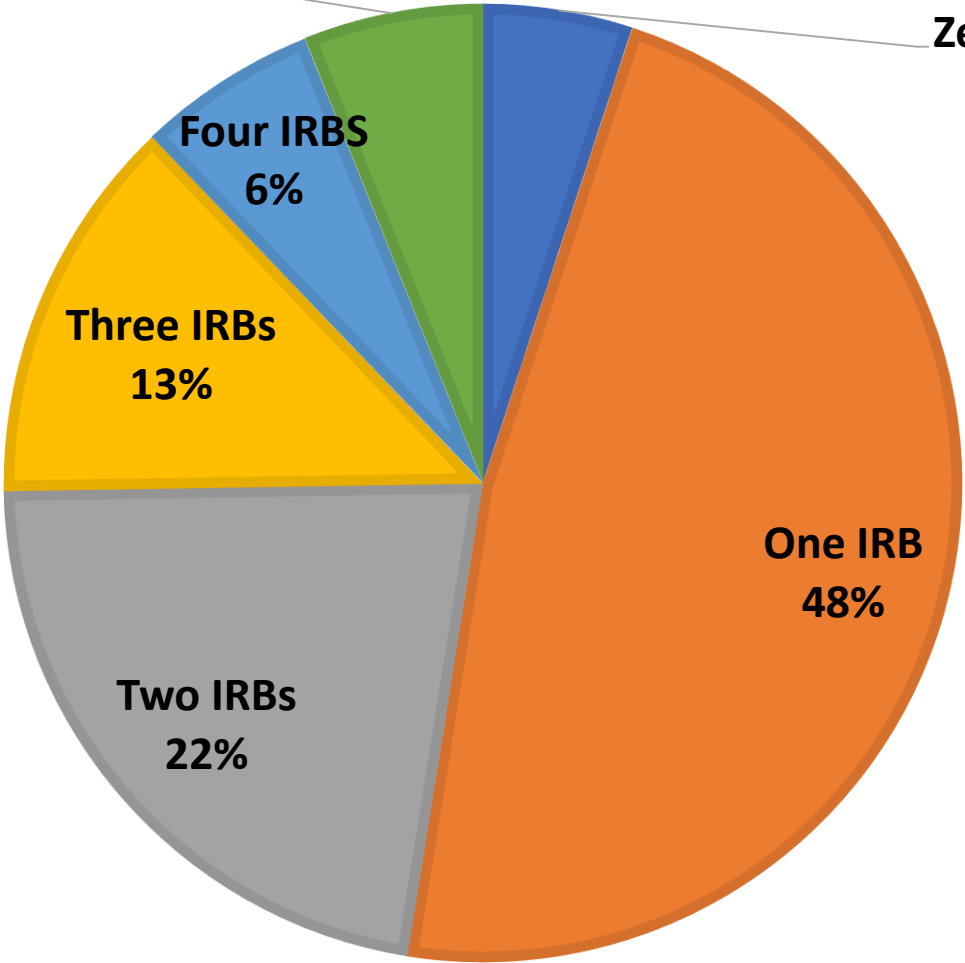
80% of accredited hospitals follow FDA regulations; 72% follow DHHS regulations; 68% follow state or local government regulations; 63% follow ICH or ICH when requested by a sponsor; 40% follow DOD regulations; 38% follow non-US country specific laws; 11% follow ED regulations; 6% follow DOJ regulations; 4% follow EPA regulations; 2% follow DOE regulations.

### IRBs Per Hospital

**Five or More IRBs**  
6%

■ Zero IRBs   ■ One IRB   ■ Two IRBs   ■ Three IRBs   ■ Four IRBs   ■ Five or More IRBs

**Zero IRBs**  
5%



**Four IRBs**  
6%

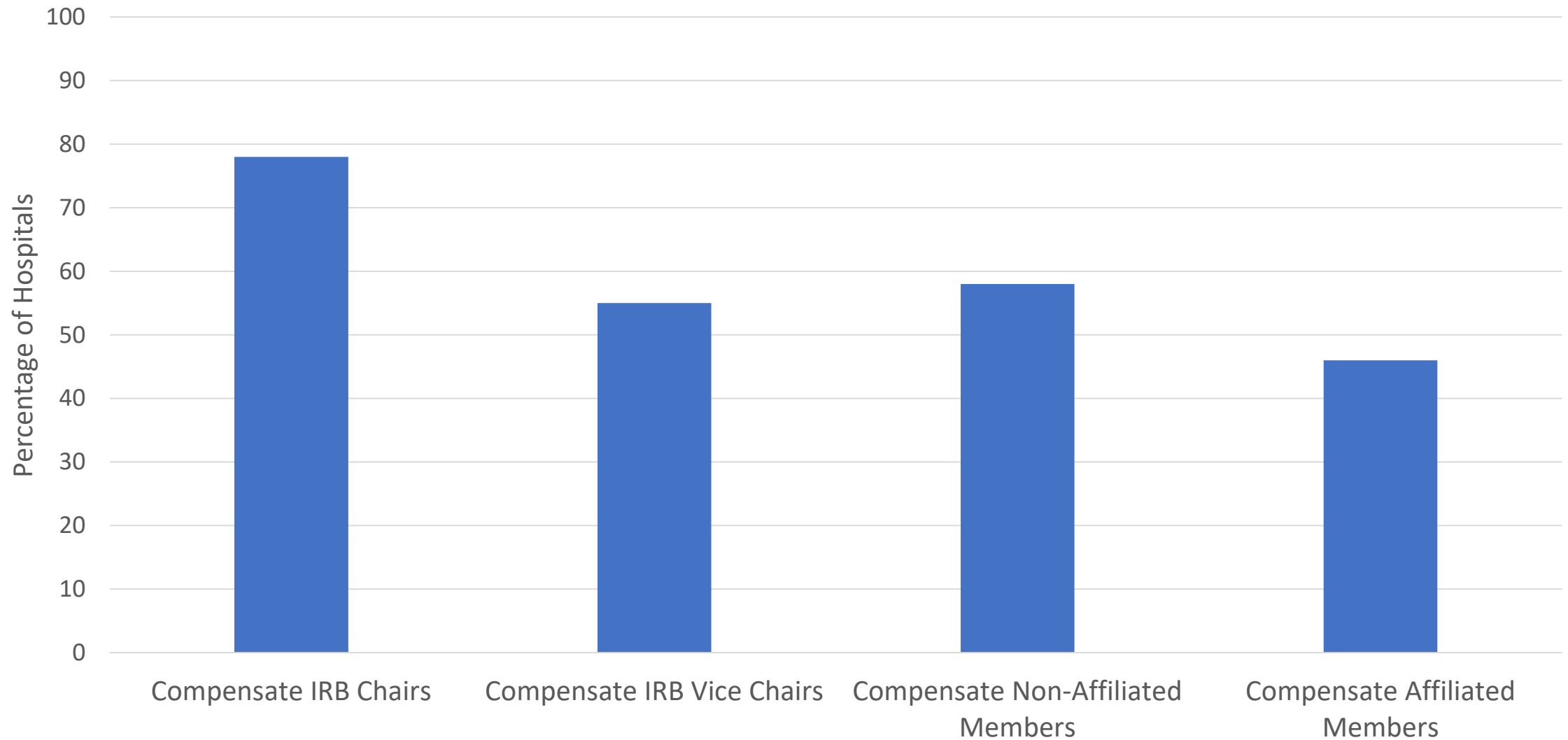
**Three IRBs**  
13%

**Two IRBs**  
22%

**One IRB**  
48%

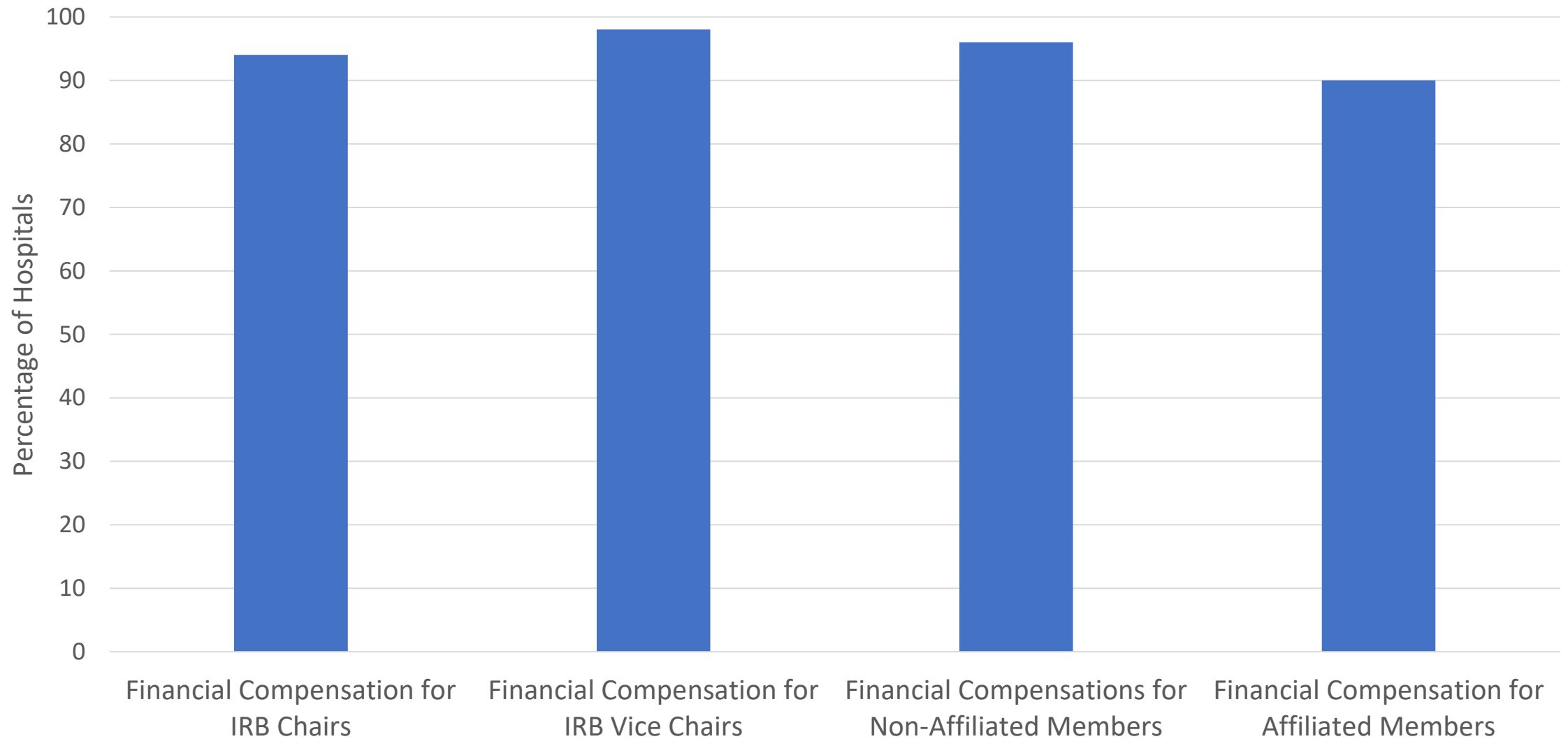
IRBS PER HOSPITAL

## Compensation for IRB Members



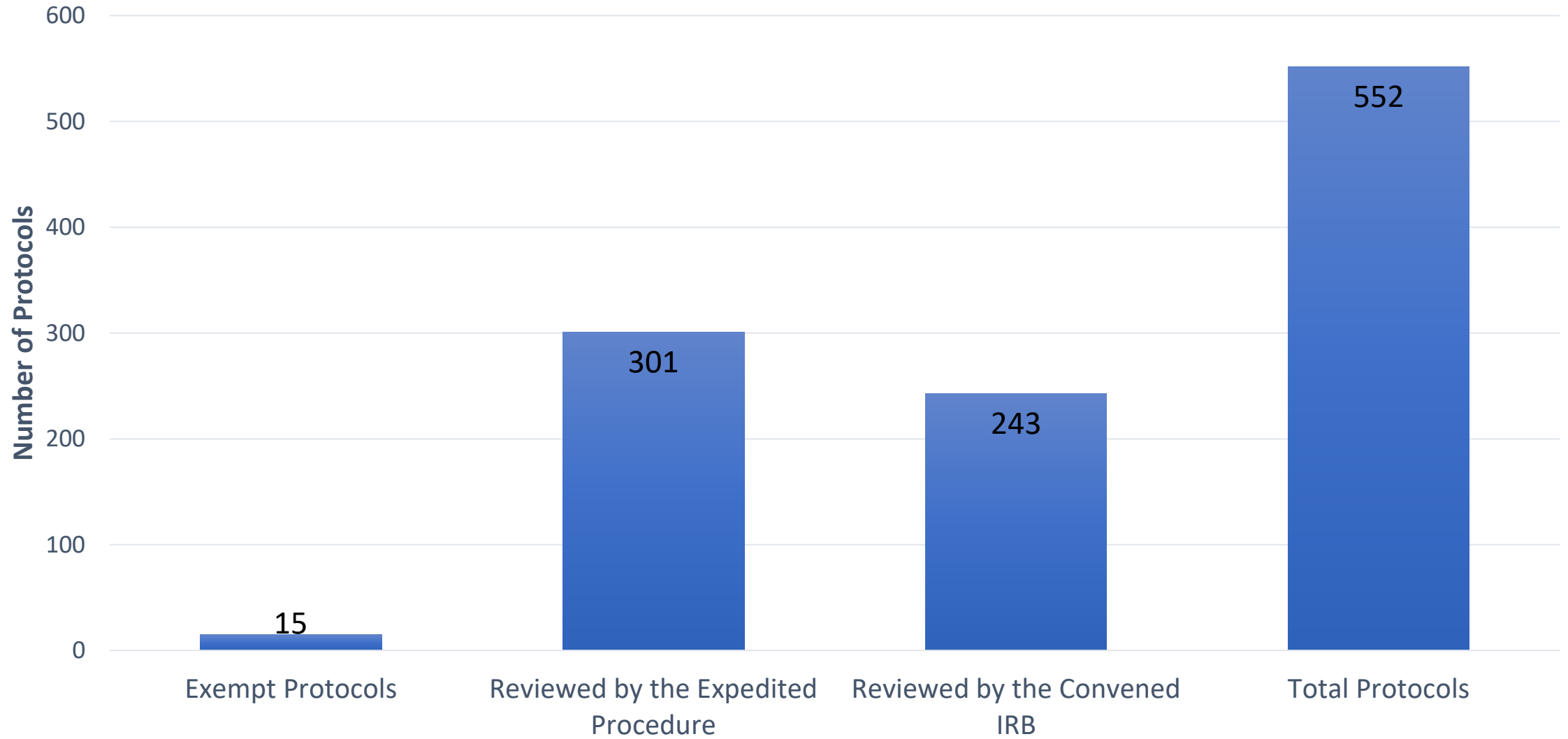
Of accredited hospitals with IRBs, 78% reported that they compensate their IRB chairs; 55% compensate IRB vice chairs; 58% compensate non-affiliated members; 46% compensate affiliated members.

## Financial Compensation for IRB members

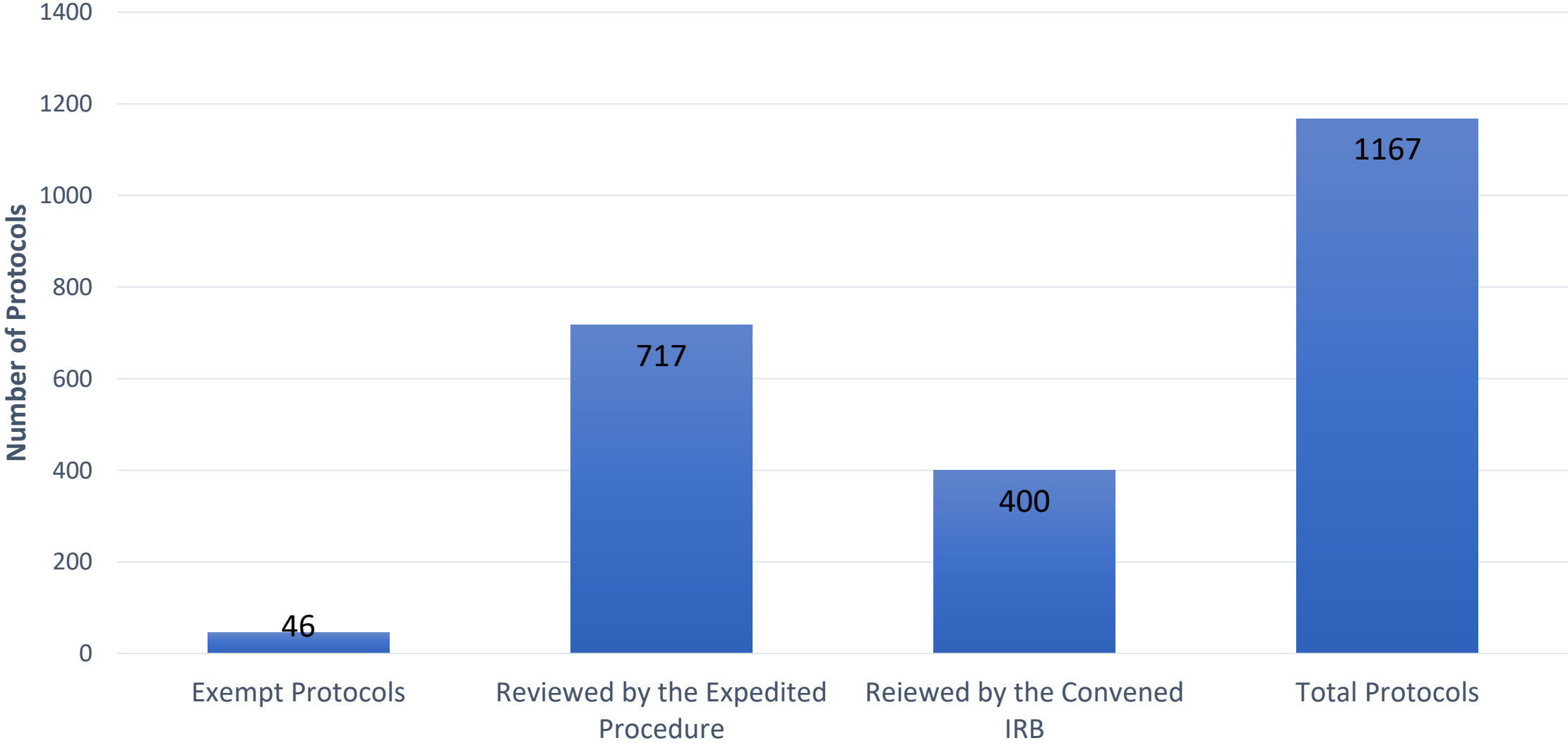


Of the hospitals which compensate their IRB chairs, 94% provide financial compensation; of the hospitals which compensate their IRB vice chairs, 98% provide financial compensation; of the hospitals which compensate non-affiliated members, 96% provide financial compensation; of the hospitals which compensate affiliated members, 90% provide financial compensation. Some hospitals reported compensating IRB positions, but not how.

### Median Number of Active Protocols Overseen by Hospitals

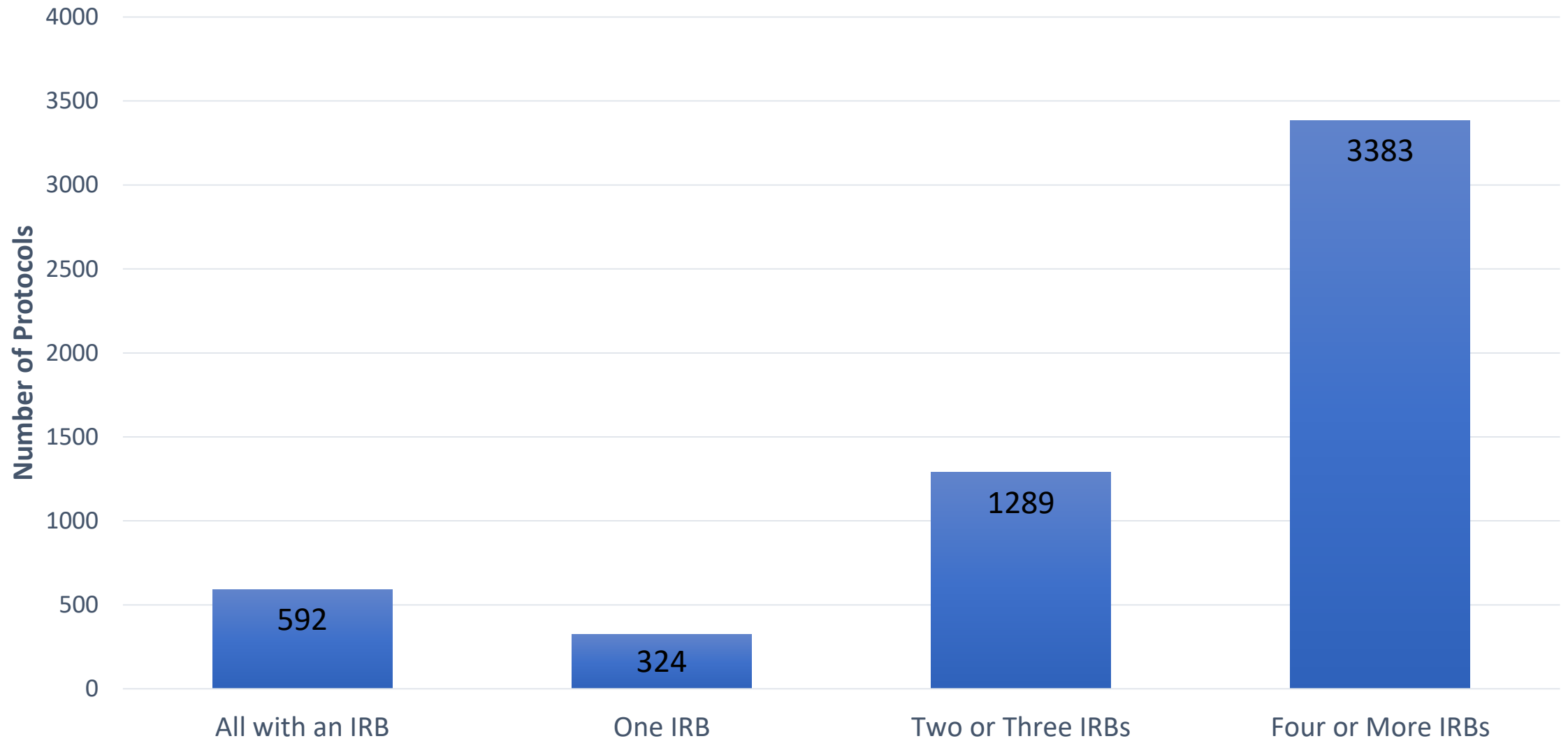


### Mean Number of Active Protocols Overseen by Hospitals

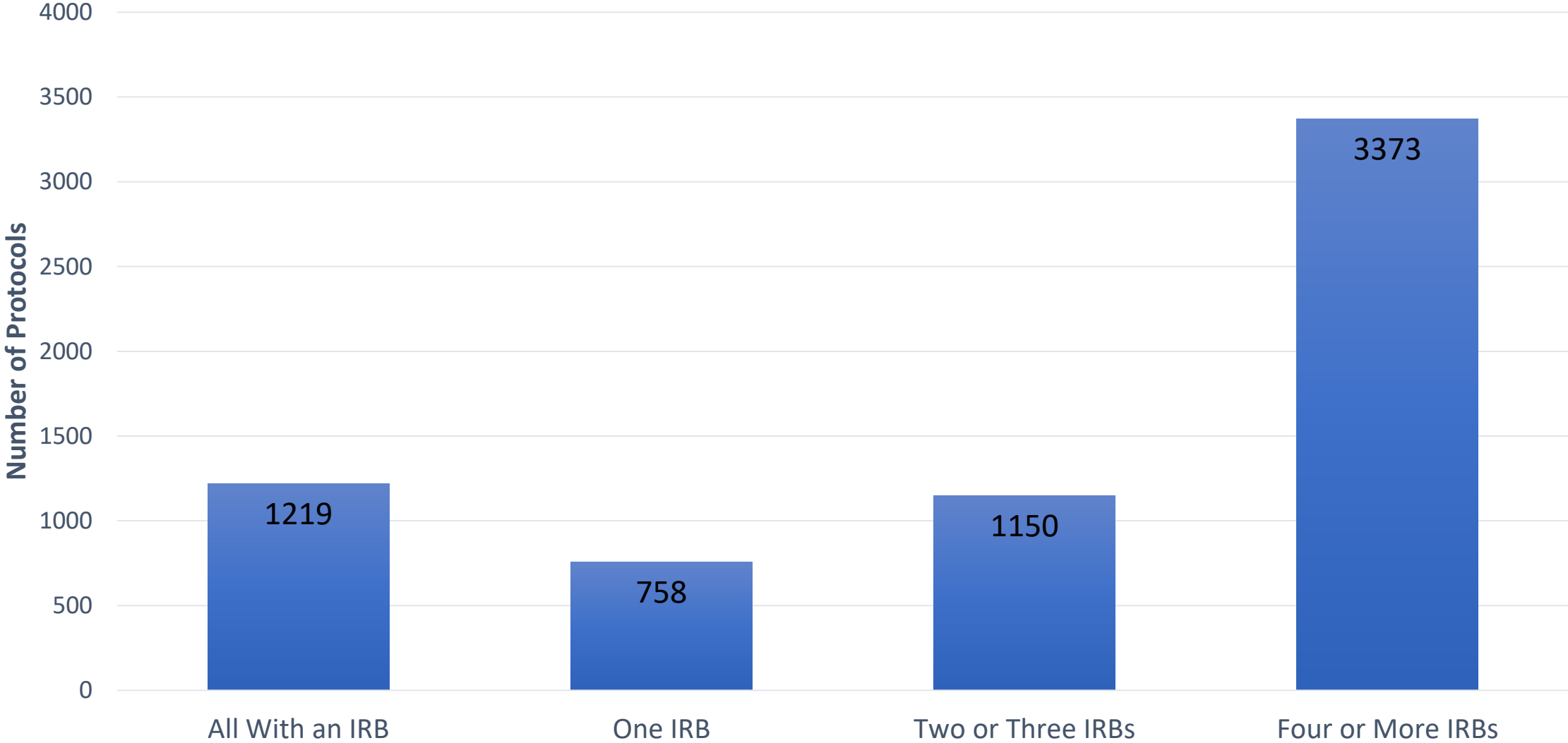




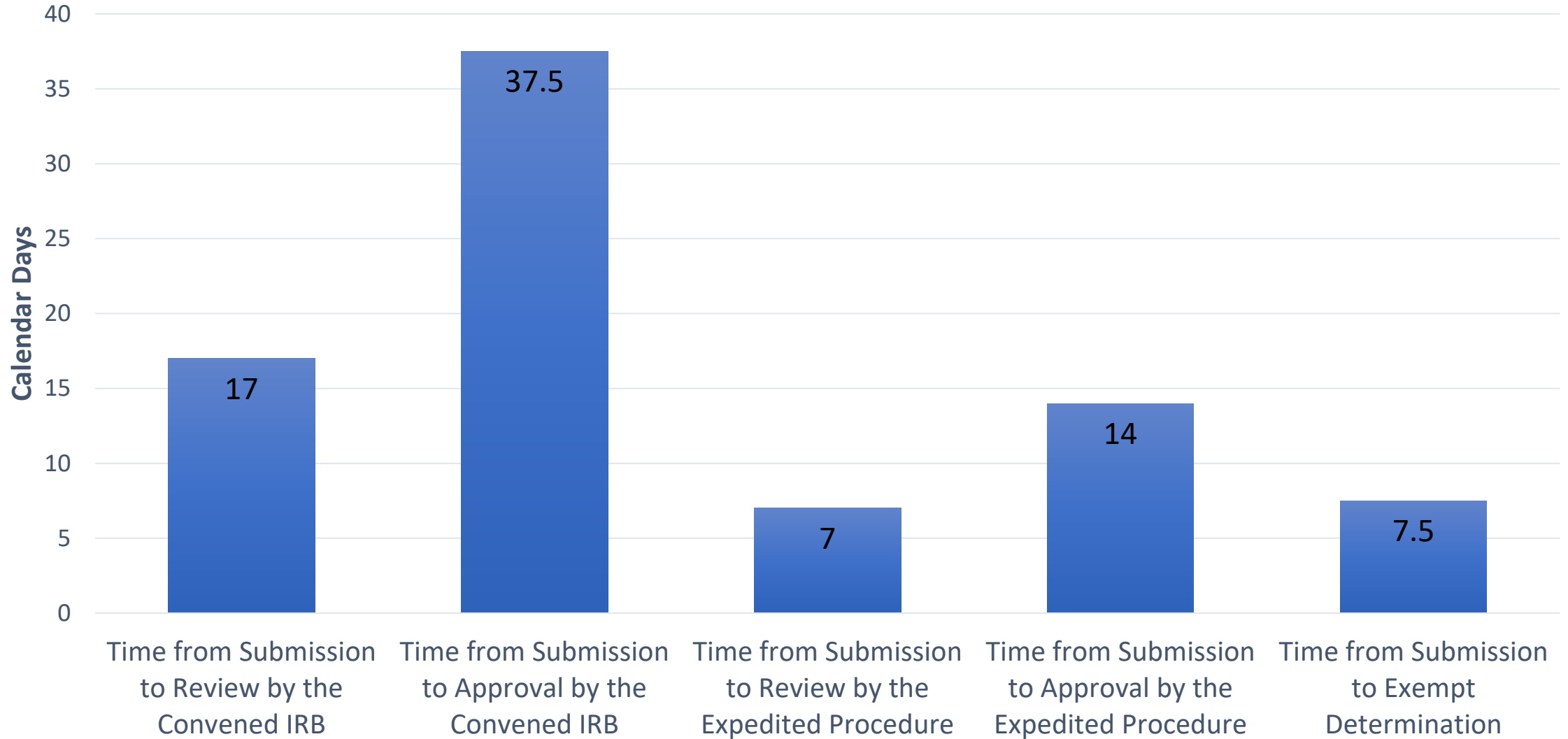
**Median Number of Protocols Reviewed by Hospitals Based on Number of IRBs**



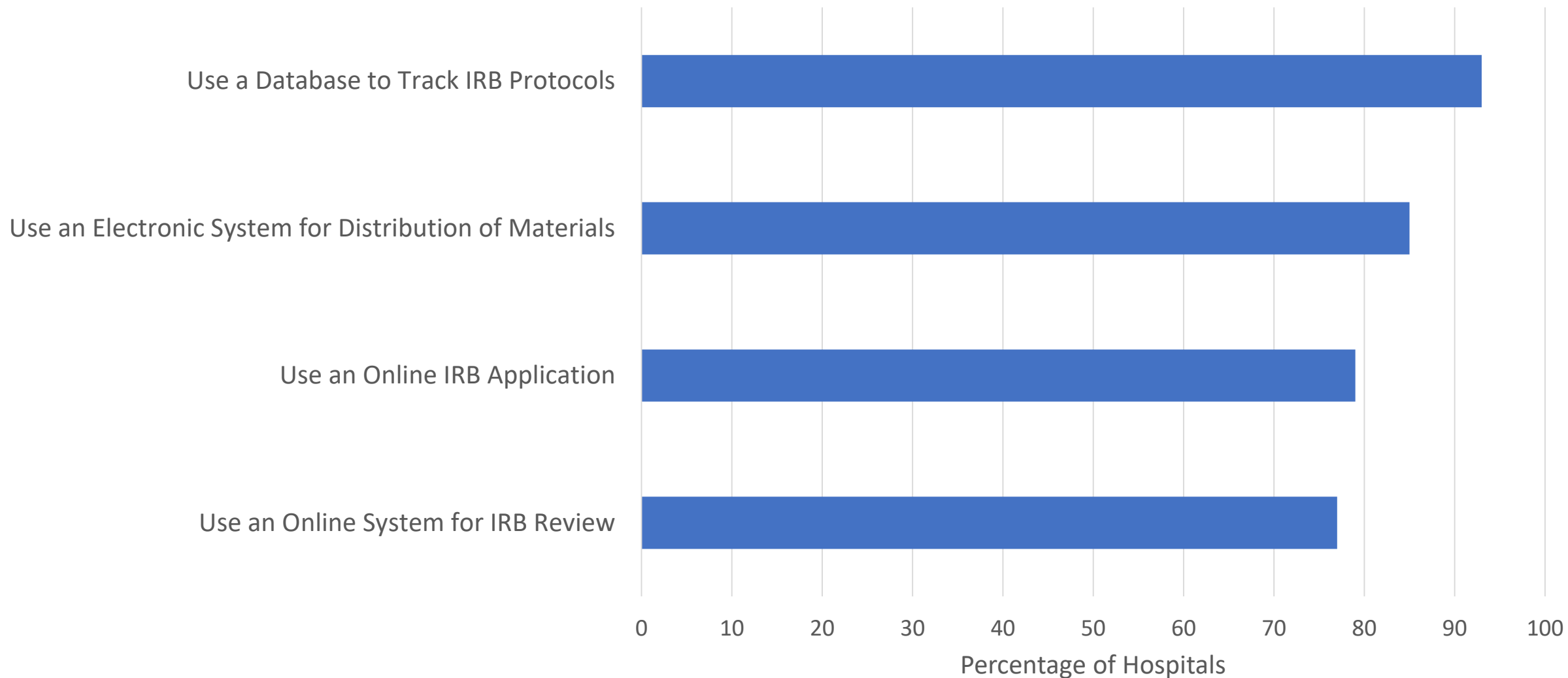
Mean Number of Protocols Reviewed by Hospitals Based on Number IRBs



### Median IRB Review Times by Type of Review



## Technology Use by Hospitals with an IRB



93% of accredited hospitals use a database to track IRB protocols; 85% use an electronic system for distribution of materials; 79% use an online IRB application; 77% use an online system for IRB review.

### IRB Staffing and Funding Levels

Protocol Category	Median Number of Staff	Median Number of Protocols	Median Protocols per FTE	Median IRB Budget
All	6	592	93	\$353,253
1-500	3	308	96	\$192,892
501-1000	4	521	127	\$347,526
1001-2000	8	1330	166	\$825,000
2000+	21	1626	78	\$606,496