



**Queensland Health
Central Queensland Hospital and Health Service
Human Research Ethics Committee (HREC)
EC00173**

HREC application submission dates, HREC meeting dates & HREC site requirements 2020

| Closing Date | Human Research Ethics Committee (HREC) Meeting |
|---------------------|---|
| 20 January 2020 | 30 January 2020 |
| 17 February 2020 | 27 February 2020 |
| 16 March 2020 | 26 March 2020 |
| 20 April 2020 | 30 April 2020 |
| 18 May 2020 | 28 May 2020 |
| 15 June 2020 | 25 June 2020 |
| 20 July 2020 | 30 July 2020 |
| 17 August 2020 | 27 August 2020 |
| 14 September 2020 | 24 September 2020 |
| 19 October 2020 | 29 October 2020 |
| 23 November 2020 | 3 December 2020 |

- All research proposals are to be submitted via the ERM: https://www.health.qld.gov.au/hiro/html/regu/regu_home
- Supporting documents should be uploaded against the ethics application form. Please ensure that all submissions include a protocol and Merit, Integrity and Review Form. Please contact the Secretariat (cqhshrec@health.qld.gov.au) if you require these documents. Please note that Incomplete submissions will not be validated
- The closing time for submissions is 12 midday. Please note: There are no exceptions to the closing time without prior agreement by the HREC Administrator



**Central Queensland Hospital and Health Service HREC EC00173
Research Study Checklist for Coordinating Principal Investigators**

| A) Mandatory components for all submissions (Ethical Review or SSA) | | YES | No. of copies required |
|--|--|--------------------------|-------------------------------|
| 1. | Cover letter, signed by Coordinating Principal Investigator with: <ul style="list-style-type: none"> o Brief description of project, including phase of study if a clinical trial o List of all sites where study is to occur, applicable to the HREC application o List of supporting documents submitted and uploaded o HREC reference number (for SSA) o For commercially sponsored studies the name and address of the sponsor organisation/CRA for the HREC review invoice (must be Australian address) must be included in the cover letter | <input type="checkbox"/> | 1 |
| 2. | For low and negligible risk (LNR) research studies – Completed LNR application form and all supporting documentation | <input type="checkbox"/> | 1 |
| 3. | Study protocol ((Although the protocol may have the same information as the NEAF or LNR application form, the protocol is the study working document. It is the formal design or specific plan for the research. When revisions occur during the course of the research you will need to submit a revised protocol as an amendment. The protocol should include a version date/number which is changed as the document is updated) | <input type="checkbox"/> | 1 |
| 4. | CV for researchers | <input type="checkbox"/> | 1 |
| 5. | Merit, Integrity and Review Form (Please contact the Secretariat if you require this document) | <input type="checkbox"/> | 1 |

| B) Other items that may be required depending on the particular research project application being submitted | | YES | NO | N/A | No. of copies required |
|---|--|--------------------------|--------------------------|--------------------------|-------------------------------|
| 5. | Data collection tool(s) e.g CRF | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 1 |
| 6. | Master Participant Information Sheet and Consent Form (PICF) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 1 |
| 7. | CTN/CTX form(s) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 1 |
| 8. | Investigator's Brochure | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 1 |
| 9. | Questionnaires/other instruments | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 1 |
| 10. | For industry sponsored studies: Form of indemnity (Medicines Australia HREC Review Only form) if HREC is not located at a participating site. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 1 |
| 11. | Advertising materials (including a copy of transcript for advertisement, e-mail, website, letter or telephone call) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 1 |
| 12. | Letter of invitation/Letter to GP, etc. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 1 |
| 13. | Participant diaries | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 1 |
| 14. | Participant wallet card | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 1 |
| 15. | Other correspondence, e.g. FDA reviews, correspondence from other HRECs, expert independent reviews, peer review etc. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 1 |
| Research using gene technology | | | | | |
| 16. | <u>Institutional Biosafety Committee</u> (IBC) approval | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 1 |
| 17. | Licence for dealings with a Genetically Modified Organism (GMO) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 1 |
| Research which is using radiological procedures that are performed specifically for research | | | | | |
| 18. | Independent assessment report or verification by a Medical Physicist (or District Radiation Safety Officer) of the total effective dose and relevant organ doses for those radiological procedures that are performed specifically for the research protocol | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 1 |