

Draft Policy for Consultation
Ethics of Research Involving Human Participants
Open until August 21, 2026



Memorial University of Newfoundland

Ethics of Research Involving Human Participants

Approval Date: N/A

Effective Date:

Review Date:

Authority: The President

Purpose

To ensure that Memorial University and its researchers are compliant with the Tri-Council Policy Statement: Ethical Conduct for Research Involving Humans (TCPS2) and Health Research Ethics Act (HRE Act), and to establish the authority of the University's Research Ethics Boards.

Scope

Research activities involving human participants undertaken by Memorial University faculty, staff and students, and by External Researchers who intend to recruit Memorial University faculty, staff, and/or students as research participants.

Definitions

Academic Unit – Refers to a centre, department, division, faculty, program or school, other than an administrative unit, as the context requires and as defined in the University Calendar.

DRC – Departmental Review Committee

External Researcher – A Researcher who is not affiliated with Memorial University.

GC-REB — Grenfell Campus Research Ethics Board.

HREA — Health Research Ethics Authority. As defined Health Research Ethics Act

HREB — Health Research Ethics Board. Appointed by the HREA to conduct research ethics reviews in the province.

Health Research – As defined in the [Health Research Ethics Act](#).

ICEHR — Interdisciplinary Committee on Ethics in Human Research.

Participant — An individual whose data, biological materials, or responses to interventions, stimuli, or questions by a researcher are relevant to answering the research question(s).

Principal Investigator - The researcher who is responsible for the ethical conduct of the research, and for the actions of any member of the research team at a local site.

REB — Research Ethics Board.

Research — An undertaking intended to extend knowledge through a disciplined inquiry and/or systematic investigation.

Researcher — Individuals involved in Research including, but not limited to, academic staff members, visiting scholars, adjunct professors, professor emeritus, honorary research professors, students, postdoctoral fellows, or staff members.

TCPS2 — Tri-Council Policy Statement: Ethical Conduct for Research Involving Humans

Policy

1.0 RESEARCH INVOLVING HUMAN PARTICIPANTS

The University understands the importance of the ethical conduct of research involving human participants. It requires that research involving human participants is carried out in an ethical manner and is compliant with the TCPS2. The University has established and mandated its REBs to ensure that research involving human participants is compliant with the TCPS2. Human participant research that requires review by an REB may not proceed until ethics approval has been granted by an REB.

Memorial University researchers conducting Health Research are also subject to the Health Research Ethics Act. The Health Research Ethics Authority (HREA) oversees ethics review of Health Research, as defined in the Act, by the Health Research Ethics Boards (HREBs) or an REB authorized by the HREA.

2.0 AUTHORITY AND RESPONSIBILITIES OF RESEARCH ETHICS BOARDS (REBs)

2.1 Authority

The University endorses the ethical principles espoused in the TCPS2 and has mandated its REBs to ensure that research involving human participants is compliant with the TCPS2.

Two REBs at Memorial University are constituted by and report to the Office of the President:

- The [Interdisciplinary Committee on Ethics in Human Research](#) (ICEHR) receives proposals for Human Participant Research from students, faculty, and staff whose primary affiliation is with the St. John's Campus, Marine Institute, or Labrador Campus.
- The [Grenfell Campus Research Ethics Board](#) (GC-REB) receives proposals for Human Participant Research from students, faculty, and staff whose primary affiliation is with the Grenfell Campus.

Memorial University Researchers conducting Health Research must have their research reviewed and approved by the HREB or an REB authorized by the HREA to review Health Research in Newfoundland and Labrador.

REBs have the authority to transfer research proposals to ensure review by a REB with the appropriate expertise and/or jurisdiction.

ICEHR and GC-REB must develop Terms of Reference that are reviewed and approved by the Office of the President. The REBs terms of reference must outline the composition of its membership, the roles of the Chair and Vice-Chair, and its operating procedures. These Terms of Reference should be reviewed by the respective REBs every three years.

The President or their designate may convene a meeting of the REBs to discuss institutional ethics matters and on-going or emerging issues of a general ethics nature.

The REBs may request to convene a meeting with the President or their delegate to discuss institutional ethics matters or on-going or emerging issues of a general ethics nature.

The President or their designate may also convene a meeting of academic heads to discuss institutional ethics matters and on-going or emerging issues of a general ethics nature.

2.2 Mandate

University REBs are mandated to approve, reject, propose modifications to, suspend, or terminate any proposed or ongoing research which is subject to REB review. A decision of a REB to allow or disallow research on ethical grounds can be appealed based on procedural or substantive reasons, as outlined in section 5.0.

A university REB shall suspend or retract the ethical approval of human participant research under its purview that it deems to pose an unacceptable risk of harm to participants. In cases of a potential breach or misconduct, the REB will follow the [Procedure for Investigating Reports of Misconduct in Research](#).

Each REB is responsible for developing procedures for implementing the University's ethics policy that meets the needs of the disciplines it reviews and complies with the TCPS2. The procedures must be formalized in writing and made available to researchers, sponsors and funding agencies, and participants.

Research requiring ethics review must be approved by an REB before it may be undertaken. Non-compliance with this provision may constitute misconduct as outlined in the University's policy on [Integrity in Research](#).

2.3 Ethics Review of Student Course-Based Research Activities

The University has delegated ICEHR and GC-REB the responsibility for ethical review of student course-based research activities. ICEHR and GC-REB shall be responsible to develop and publish guidelines that comply with the TCPS2 to allow Academic Units to form a Departmental Review Committee (DRC) to conduct ethics review of minimal risk student course-based research activities and set the parameters of when such research may be reviewed by a DRC. Academic Units on the St. John's Campus, Labrador Campus and Marine Institute must report the research that has been reviewed by a DRC to ICEHR annually. Academic Units on the Grenfell Campus must report the research that has been reviewed by a DRC to GC-REB annually.

Student research as part of course work that is beyond minimal risk to participants must be forwarded to the appropriate REB for review. Undergraduate, graduate and postgraduate Health Research must be submitted to the HREB, or an REB authorized by the HREA to review Health Research.

2.4 Recruitment and Data Collection by External Researchers

ICEHR and GC-REB each have the authority to set guidelines and develop procedures for secondary review of Research that involves the recruitment of and data collection with Memorial University students, faculty, and staff as research participants by External Researchers who have received approval by their REB of jurisdiction.

2.5 Human Participant Research Ethics Education

The University REBs have the primary responsibility for providing education for Researchers about the ethical treatment of human research participants and about this policy, including publishing resources for researchers.

3.0 Administrative Support

The University will provide adequate resources, including qualified staff, and an annual budget to support the administrative processes and educational activities required by the REBs so that the University maintains compliance with the TCPS2.

The considerable commitment of those faculty members who serve on Memorial's REBs will be appropriately noted by the heads of their academic units, as per the REBs Terms of Reference. The Chair and Vice Chair of the REBs may be provided with course remissions for the considerable work they do, as outlined in the respective REBs Terms of Reference and in accordance with any applicable collective agreements.

4.0 Record Keeping

The REBs are responsible for establishing written procedures for the maintenance of records that comply with the TCPS2.

Minutes of REB meetings shall be prepared and maintained by REBs in accordance with the TCPS2. To assist internal and external audits or research monitoring, and to facilitate reconsideration or appeals, the minutes shall be accessible to authorized representatives of the University and funding agencies.

REBs shall maintain a file for each Research proposal they consider.

The University shall provide the REBs with information management systems for processing and record keeping and shall consult the REBs before making any changes to the information system.

5.0 APPEALS OF REB DECISIONS

A decision of ICEHR or GC-REB to allow or disallow research on ethical grounds can be appealed based on procedural or substantive reasons. The onus is on the researchers to justify the grounds on which they request an appeal and to indicate any breaches of the ethics review process or any elements of the REB decision that are not supported by the TCPS2. An appeal must be submitted in accordance with the [Procedure to Appeal a Research Ethics Board Decision](#).

In the case of appeals against a decision of the HREB, the appeals process may be reviewed in accordance with the HREA's [policies and procedures](#).

6.0 RESPONSIBILITIES OF RESEARCHERS

Researchers must be familiar with and comply with this policy, the TCPS2, and with other ethical guidelines relevant to their disciplines. Researchers must ensure that individuals under their supervision have the training and competence needed to carry out their responsibilities. Principal investigators must ensure that research personnel are familiar with and comply with this policy and other applicable ethics guidelines. Similarly, instructors who include Research components in their courses must ensure that their students are competent to conduct the assigned research and that they are familiar with and comply with this policy and other applicable ethics guidelines. Adequate supervision of student Research must be ensured, to mitigate risk of harm to participants. Assistants, students, and others who are supervised to conduct Research should understand that they are themselves researchers and therefore also bear responsibility for the ethical conduct of research with human participants.

7.0 Inconsistencies with this policy and the TCPS2

The University's Policy on Ethics of Research Involving Human Participants, in conjunction with the TCPS2, shall form the basis of decision-making by REBs. Should there be a discrepancy between the University's Policy on Ethics of Research Involving Human Participants and the TCPS2, the terms of the TCPS2 shall prevail as the basis of decision-making by REBs.

Related Documents

Appendix - Student Research as Part of Course Work

[Interdisciplinary Committee on Ethics in Human Research \(ICEHR\)](#)

[Tri-Council Policy Statement: Ethical Conduct for Research Involving Humans \(TCPS2\)](#)

[Grenfell Campus Research Ethics Board \(GCREB\)](#)

[Health Research Ethics Board Policy Manual of the Health Research Ethics Authority](#)

Procedures

- [Procedure to Appeal a Research Ethics Board Decision](#)

For inquiries related to this policy: Vice-President (Research and Innovation)

Sponsor: Vice-President (Research and Innovation)

Category: Research

Procedure to Appeal a Research Ethics Board Decision

Approval Date: N/A

Responsible Unit: Office of the Vice-President (Research)

A decision of ICEHR or GC-REB to allow or disallow research on ethical grounds can be appealed based on procedural or substantive reasons. An appeal can only be considered after the researchers and REB have made every effort to resolve disagreements they may have through deliberation, consultation or advice.

Researchers wishing to lodge an appeal against a decision of the ICEHR or the GC-REB must submit a letter of appeal to the Vice-President (Research and Innovation). The letter must justify the grounds on which the researchers request an appeal and indicate any breaches of the ethics review process or any elements of the REB decision that are not supported by the TCPS2.

In the case of appeals against a decision of either the ICEHR or the GC-REB, these two REBs will serve as an appeals board for each other. When an appeal has been lodged against a decision of either of these two REBs, the Vice-President (Research and Innovation) will advise the two REBs that an appeal has been made within five business days. The appropriate REB will consider the appeal and the other will have no involvement in the appeal process except to be advised of its final decision. The final decision of an appeal should be communicated to the Principal Investigator expeditiously as possible, but no later than 60 calendar days from the date of receipt of the appeal.

In the case of appeals against a decision of the HREB, the appeals process may be reviewed in accordance with the HREA's [policies and procedures](#).