Children Policy/Procedure

Internal Approval
SVP, Research
EVP & Chief Scientific Officer, Research

Scope
This policy identifies the risk and prospect for benefit determinations required when children are research subjects. It also provides an overview of the operational procedures for applying additional protections.

Definitions

**Minimal risk:** The probability and magnitude of harm or discomfort anticipated in the research are not greater in and of themselves than those ordinarily encountered in daily life or during the performance of routine physical or psychological examinations or tests.

**Condition:** The Institutional Review Board (IRB) interprets **condition** as referring to a specific (or a set of specific) physical, psychological, neurodevelopmental, or social characteristics that an established body of scientific evidence or clinical knowledge has shown to negatively affect children's health and well-being, or to increase their risk of developing a health problem in the future.

Policy Statements

*Federal regulations* that govern the Protection of Human Subjects (45 CFR Part 46, Subpart D; 21 CFR 50, Subpart D) provide additional protections for children involved as subjects in research. These regulations impose added responsibilities that depend on the degree of risk involved in the research and the extent to which the research is likely to benefit the subject or relate to the subject's illness. The regulations also
set forth requirements for obtaining permission from parents and guardians and except under certain circumstances, assent by the children themselves.

When any protocol involves children as research subjects, an expert in pediatrics will be assigned as a reviewer and will participate in the review of the protocol.

**Risk/Benefit Determinations**

The Institutional Review Board (IRB) must classify studies that involve minors into one of four groups, each with specific added responsibilities. The following information describes the permissible risk categories for research that involves children.

The IRB may approve only research that satisfies the following conditions:

1. **Research not involving greater than minimal risk.**
   
   *If the IRB finds that adequate provisions are made for soliciting assent of the children and the permission of their parents or guardians. Consent from one parent is sufficient.*

2. **Research involving greater than minimal risk, but presenting the prospect of direct benefit to the individual subjects, only if:**
   
   a. The risk is justified by the anticipated benefit to the subjects;
   
   b. the relation of the anticipated benefit to the risk is at least as favorable to the subjects as that presented by available alternative approaches; and
   
   c. *adequate provisions are made for soliciting the assent of the children* and the permission of their parents or guardians, as set forth below. Consent from one parent is sufficient.

3. **Research involving greater than minimal risk and no prospect of direct benefit to individual subjects, but likely to yield generalizable knowledge about the subject's disorder or condition, only if:**
   
   a. The risk represents a minor increase over minimal risk;
   
   b. the intervention or procedure presents experiences to subjects that are reasonably commensurate with those inherent in their actual or expected medical, dental, psychological, social, or educational situations;
   
   c. the intervention or procedure is likely to yield generalizable knowledge about the subjects' disorder or condition that is of vital importance for the understanding or amelioration of the subjects' disorder or condition; and
   
   d. *adequate provisions are made for soliciting the assent of the children* and the permission of their parents or guardians, as set forth below, *then consent must be obtained from both parents if they have custody and are reasonably available.*

4. **Research not otherwise approvable that presents an opportunity to understand, prevent, or alleviate a serious problem that affects the health or welfare of children, which the IRB does not believe meets the above requirements of this section, only if:**
   
   a. The IRB finds that the research presents a reasonable opportunity to further the understanding, prevention, or alleviation of a serious problem that affects the health
or welfare of children; and

b. The Secretary of the Department of Health and Human Services or the Commissioner of the Food and Drug Administration, after consultation with a panel of experts in pertinent disciplines (e.g., science, medicine, education, ethics, law) and following the opportunity for public review and comment, has determined that either:

   i. The research satisfies the above requirements of this section, as applicable, or

   ii. The following:

      1. The research presents a reasonable opportunity to further the understanding, prevention, or alleviation of a serious problem that affects the health and welfare of children;

      2. The research will be conducted in accordance with sound ethical principles;

      3. adequate provisions are made for soliciting the assent of the children and the permission of their parents or guardians. Consent must be obtained from both parents if they have custody and are reasonably available.

Procedures

In considering the risks of a research study involving children:

1. The IRB interprets minimal risk in relation to the normal experiences of average, healthy, normal children;

2. In evaluating risk, the IRB considers the equivalence of potential harm or discomfort anticipated in research with the harm or discomfort that average, healthy, normal children may encounter in their daily lives or experience in routine physical or psychological examinations or tests;

3. The IRB considers the risk of harm or discomfort in relation to the ages of the children to be studied; and assess the duration, as well as the probability and magnitude of potential harm or discomfort in determining the level of risk.

4. The IRB interprets the phrase used in the regulations - "a minor increase over minimal risk" - as only slightly above minimal risk.

Operational Procedures for Applying Extra Protections

To assure that the special protections of children are considered by the investigator and the IRB, the following procedures will be followed:

1. Any investigator who proposes to include children in research will be asked to complete the Special Protections for Children section of the protocol application.

   a. Investigators will be asked to make an initial determination as to the risk/benefit category for the research.
2. The IRB and/or designated member will review:
   a. The researcher determination as part of the protocol review process.
   b. Requirements for assent and parental permission.

3. When the protocol is discussed at the convened IRB meeting, a final determination will be made that includes:
   a. The risk/benefit category
   b. Assent requirements
   c. If the permission of one or both parents is required.

4. The final letter of approval sent to the investigator will indicating the final risk/benefit determination, and assent and parental permission requirements.

5. The minutes will contain a discussion for each protocol regarding the rationale for the risk/benefit assessment, assent, and parental permission.

Related Content

- Department of Health and Human Services Regulations
  - 45 CFR Part 46, Subpart D: Additional Protections for Children Involved as Subjects in Research

- U.S. Food & Drug Administration CFR – Code of Federal Regulations Title 21
  - 21 CFR 50, Subpart D: Additional Safeguards for Children in Clinical Investigations

IRB Form: Protocol Application: Special Protections for Children

Approval Signatures

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<th>Step Description</th>
<th>Approver</th>
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Applicability

Boston Children's Hospital- Policies & Procedures