

High Desert Health System POLICY AND PROCEDURE

POLICY NUMBER: 669 VERSION: 2

SUBJECT: RESEARCH COMMITTEE

PURPOSE: To describe the composition, duties, and meeting frequency of the Research

Committee.

I. COMPOSITION:

The Credentialing & Privileging Committee (Policy 332) may serve as the Research Committee when the need arises.

- II. **DUTIES**: The Committee shall monitor all research activities at the facility involving human subjects including, but not necessarily limited to:
 - A. Review all requests for the performance of any type of medical research within the facility and make recommendations to the C&PC on whether to grant permission to conduct such research and whether, if approved, such research must be performed in accordance with any stated conditions. Such recommendations shall be subject to approval by the Medical Director, the Administrator, and the DHS Director.
 - B. Monitor all approved medical research projects and require and receive from time to time, but not less than annually, written progress reports on all approved research projects.
 - C. Assure compliance with all Federal and State laws and regulations applicable to the approval, performance and monitoring of medical research.
 - D. Make an annual detailed written report to the DHS Director not later than October 31 of each year of the medical research accomplished, the research in progress, and a description of the source and dollar amount of funds expended for research at the facility during the County's previous fiscal year.

III. REQUESTS TO CONDUCT MEDICAL RESEARCH:

No Professional Staff or other person shall perform any type of medical research at the facility without first obtaining the approval of the Research Committee, the Medical Director, the Administrator, the DHS Director, and any other person or body whose approval is required under a County contract. No medical research shall be approved unless such research will benefit health care for County patients. All requests for permission to conduct medical research in the facility must be in writing and in such form as may be required by the Committee and shall be

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accompanied by the written approval of the Physician Director/Supervisor of each department/service involved.

IV. **MEETINGS**:

The Committee shall meet as necessary and shall maintain a permanent record of its proceedings and actions, and the chair or his/her designee shall present a written (meeting minutes will suffice for this purpose) and oral report to the Medical Director, the Administrator, and the DHS Director on its activities.

Approved By: Beryl Brooks (ADMR,COMP AMB HEALTH CARE CENTER), Ruth Oren (CHIEF PHYSICIAN I ANESTHESIOLOGY), Susan Knapp (CHIEF NURSING OFFICER I)

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Supersedes: