

Documented Institutional Ethics Requirements Scarborough Health Network

Mission and Values

To partner with our diverse communities to generate and apply new knowledge and innovative solutions that make healthcare more equitable, accessible and relevant. To better health through research that matters to the Scarborough community.

Privacy Considerations

Please note shared electronic health systems such as Connecting Ontario and eHealth do not permit access for research purposes.

Informed Consent Form Requirements

All informed consent forms must be in laymen's terms or at a level acceptable to the patient population to ensure language comprehension.

SRERS Administration Scarborough Health Network

Reminder: Institutional Research Administration Requirements

The CTO Streamlined System provides a streamlined approach to research ethics review only. Institutional approval is required for all studies conducted at Scarborough Health Network which includes a feasibility assessment by the research office.

SHNRI Feasibility Assessment

Before submitting an application through the CTO Stream, SHN researcher or delegate must contact the Research office to complete the feasibility assessment process. To schedule the assessment meeting, please email the SHN research institute at research.institute@shn.ca

Contracts/Agreements

Institutional approval of any study is conditional upon a fully executed study contract agreement with Scarborough Health Network, Principal investigator, and the study sponsor. All research staff must enter a research confidentiality agreement and document all conflicts of interest. No study can begin in any capacity until all study agreements have been fully executed.

Please see the Documented Institutional Ethics Requirements form (DIER) for Scarborough Health Network's specific requirements that must be incorporated into your Centre Initial Application.

CTO Stream

Collaborators:

The following collaborators must be given a role on all Provincial Initial Application (PIA) forms and Centre Initial Application (CIA) forms.

Email: acarvalhal@shn.ca

Role: Institutional Representative

Email: aqamar1@shn.ca

Role: Institutional Representative

Email: cmorris@shn.ca

Role: Institutional Admin

This access is automatically granted when the Centre Initial Application is created. **When Scarborough Health Network is the Provincial Applicant site the research team should immediately create the CIA for Scarborough Health Network (right after creating the PIA).** This will ensure that access is automatically granted as required above, otherwise the research team will need to manually add these roles to the PIA prior to submission.

Institution Representative in application forms

The Primary Institution Representative must be indicated as follows in the applications within CTO Stream:

Title: Dr.
First Name: Adriana
Surname: Carvalho
Organization: Scarborough Health Network
Address: 3050 Lawrence Ave East
Rm 1.245



661 University Avenue, Suite 460
MaRS Centre, West Tower
Toronto, Ontario
M5G 1M1 Canada
www.ctontario.ca

City: Scarborough
Province/State: ON
Postcode/Zip: M1P 2V5
Telephone: 416-438-2911 2204
Fax: n/a
Email: acarvalhal@shn.ca

The Secondary Institution Representative should be indicated as follows:

Title: Ms.
First Name: Attia
Surname: Qamar
Organization: Scarborough Health Network
Address: 3050 Lawrence Ave East
Rm 1.245
City: Scarborough
Province/State: ON
Postcode/Zip: M1P 2V5
Telephone: 416-438-2911 ext. 6007
Fax: n/a
Email: aqamar1@shn.ca