

NATIONAL HEALTH RESEARCH ETHICS COUNCIL ANNUAL REPORT (2015-2016)



Foreword by the Minister of Health

The National Health Research Ethics Council's (NHREC) Annual Report 2015-2016 provides an opportunity for us to consider the many ways in which the conduct of ethical research affects our lives. Indeed, it gives us pause to reflect on the amount of time and energy required to ensure that the mechanisms involved in supporting and developing ethical research are acknowledged. In this, the final year of their term, the members of the NHREC have demonstrated their commitment to ethical research in a variety of ways. It is a matter of great pride and a pleasure to present some of the highlights of the NHREC's 2015-2016 achievements and activities.

The re-structuring of the NHREC into four working groups or committees continued to enable focus on the NHREC's 2015-2016 goals. The NHREC EXCO continued to oversee the functioning of the NHREC and working groups/ task-teams / committees and subcommittees. The NDoH Ethics in Health Research: Principles, Structures and Processes were signed off by this Office and published electronically in March 2015 with a hard copy version expected in due course. In addition, the Norms and Standards Working Group is currently engaged in two other highly anticipated guidelines, the revision and updating of the DoH 2006 South African Clinical Trial Guidelines: Good Practice for Clinical Trials with Human Participants as well as the development of ethics guidelines for biobanks in South Africa. The Complaints and Advisory Disciplinary Working Group (CADC) completed a Standard Operating Procedure (SOP) for disciplinary processes, sanctions and appeals in electronic format which was approved by Council. It responded to several complaints and queries received over the course of the year and all were resolved appropriately. The Quality Promotion & Enhancement Committee (QPEC) had a very busy and fruitful year continuing with auditing and provisionally registering human Health Research Ethics Committees. During November and December 2015, QPEC members and the Secretariat conducted on-site assessments of five (5) registered RECs. Additionally, the QPEC developed the Audit Plan and determined the schedule for auditing of Animal Research Ethics Committees (AREC) preparing for their registration. These audits were conducted by Council Members. The Legal and Regulatory Working Group continued to be pro-active

strengthening the legal framework for research ethics and research with human participants in South Africa.

As shown, the NHREC continues to fortify its association with RECs and ARECs through annual meetings, enriched communication, and open dialogue. I wish to communicate my thanks to the Council members for their hard work and willingness to create an enabling environment for the further growth of ethical health research in South Africa. Your work contributes significantly to the enhancement of dignity for all South Africa's people. I also wish to thank the managers and Health Research Directorate staff and secretariat for providing the NHREC with important support.

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DR'A MOTSOALEDI, MP

MINISTER OF HEALTH

DATE:

Acknowledgement by the Director-General

As highlighted in this 2015/16 Annual Report, the National Health Research Ethics

Council (NHREC) had a demanding yet fruitful year. Of its many accomplishments, the

Department is particularly pleased that the Council has published the second edition of the

NDoH Ethics in Health Research Principles, Processes and Structures. Moreover, the

NHREC's continuation of work on guidelines such as the South African Clinical Trial

Guidelines: Good Practice for Clinical Trials with Human Participants is appreciated.

The continuing work of the Council in the tasks of auditing and registering RECs and

ARECs in South Africa is valued. We are grateful for the continuing and cooperative

efforts made by Council members as they work with a myriad of institutions and entities

which are engaged in health research in South Africa. To address the unique and relevant

health research challenges in our society is often frustrating and difficult. It is, therefore,

with humility that we thank the NHREC members for giving their valuable time and effort to

support ethical research in South Africa.

We express our gratitude to the members of the NHREC: Prof D du Toit (NHREC

Chairperson), Prof D van Bogaert (NHREC Vice-Chairperson), Dr T Muthivhi, Dr S

Ncanana, Adv L Nevondwe, Prof A Pope, Dr J Ramalivhana, Ms T Sebata, Dr M

Sekhoacha, Dr Y Sikweyiya, Dr T Sithebe, Dr C Slack, Prof AA van Niekerk, and Ms T

Zwane. The Department is also grateful for the following officials: Dr GV Andrews (Chief

Operating Officer) and Ms T Zondi in providing guidance and strategic leadership to the

NHREC. For assisting with the secretariat and logistical arrangements of the Council, we

are grateful to Mr T Molebatsi, Mr J van der Westhuizen and Mr R Maluleke.

MS MP MATSOSO

DIRECTOR GENERAL: HEALTH

DATE: 03/10/2012

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National Health Research Ethics Council (NHREC) Annual Report 2015-2016 NHREC Committees and Working Groups

Purpose: The National Health Research Ethics Council (NHREC) was established in September 2006 in terms of the National Health Act 61 of 2003, section 72(1). It is the statutory body mandated to determine guidelines for functioning of research ethics committees; to audit and register research ethics committees; to set norms and standards for research involving human participants, clinical trials and use of animals; to adjudicate complaints about research ethics committees; and to advise the national department and provincial departments on ethical issues concerning research.

Membership: The following persons were appointed to the NHREC by the Minister of Health on 21 August 2013:

Prof. D du Toit (Chairperson), Prof. D van Bogaert (Vice-Chairperson), Prof A Dhai, Dr S Ncanana, Adv L Nevondwe, Prof A Pope, Dr J Ramalivhana, Dr L Schoeman, Ms. T Sebata, Dr M Sekhoacha, Dr N Sithebe, Dr C Slack, Prof AA van Niekerk, and Ms T Zwane.

The current NHREC comprises Prof. D du Toit (Chairperson), Prof. D van Bogaert (Vice-Chairperson), Dr T Muthivhi, Dr S Ncanana, Adv L Nevondwe, Prof A Pope, Dr J Ramalivhana, Ms. T Sebata, Dr M Sekhoacha, Dr Y Sikweyiya, Dr N Sithebe, Dr C Slack, Prof AA van Niekerk, and Ms T Zwane.

Secretariat: In 2015-2016, the NHREC was supported by the NHREC Secretariat: Mr T Molebatsi, Mr J van der Westhuizen and Mr R Maluleke (logistics).

NHREC Executive Committee (NHREC EXCO)

Mandate: The NHREC EXCO is responsible for:

- NHREC operations between scheduled meetings
- Overseeing the functioning of the working groups/task teams/committees
- Identifying and approving specialists for co-option to working groups/task teams/ committees as necessary
- Formulating a strategic plan for the NHREC in consultation with all NHREC members
- Formalising relationships by way of Memoranda of Agreement or Understanding with key stakeholders such as the Medicines Control Council and other professional bodies.
- Ensuring the visibility of the NHREC and highlighting its activities amongst stakeholders
- Initiating and maintaining regular communication with relevant stakeholders
- Consulting, collaborating and cooperating with the National Health Research
 Committee as necessary
- Drafting reports on NHREC activities and tabling such reports with the Director General and Minister of Health as appropriate

Membership:

The NHREC's Executive Committee (NHREC EXCO) 2013-2016 consists of the Chair, Prof D du Toit; the Deputy Chair, Prof DK van Bogaert; the Chairs of each Working Group or Committee: Dr S Ncanana; Adv L Nevondwe; Prof A Pope; Dr C Slack and the NHREC Secretariat: Mr T Molebatsi; Mr J van der Westhuizen and Mr R Maluleke.

Objective 2015-2016	Progress	Comment
Oversee the functioning of the NHREC and working groups/task teams/committees and sub-committees.	On-going	The NHREC EXCO wishes to thank the Council members and the NHREC Secretariat for their continued dedication and support.

Activities of the NHREC EXCO 2015-2016

Objective 2013-2014	Progress	Comment
Review the existing Code	The existing NHREC	The NHREC Code of Conduct
of Conduct for NHREC	Code of Conduct was	was compiled as stipulated by
Members.	reviewed by the NHREC	regulations in section 90 (1) (s) of
	EXCO and Council	the Act. Deviation from the Code
	Members.	of Conduct by NHREC members
		constitutes misconduct.

NHREC WORKING GROUPS AND COMMITTEES

The NHREC has four working groups or committees comprised of Council members and EXCO (as *ex officio* members). The working groups and committees are:

- The Norms and Standards Working Group
- The Complaints and Advisory Disciplinary Committee
- The Quality Promotion and Enhancement Committee
- The Legal and Regulatory Working Group

A brief description of their activities and major achievements follows.

1) NHREC NORMS AND STANDARDS WORKING GROUP

Mandate: This Working Group

- drafts norms and standards for research involving humans, clinical trials and use of animals;
- drafts standard operating procedures, policy documents, and statements of expected conduct for the NHREC.

Membership: The 2013-2016 membership includes: Prof A Pope (Chair); Prof D du Toit (*exofficio*); Prof D van Bogaert(*ex officio*); Dr S Ncanana; Dr J Ramalivhana; Dr M Sekhoacha; Dr C Slack; Prof AA van Niekerk and Ms T Zwane.

Secretariat: Mr T Molebatsi; Mr J van der Westhuizen and Mr R Maluleke.

Objective 2014-2015	Progress	Comment
1. Publish DoH 2015	The DoH guidelines Ethics in	Published electronically.
publication <i>Ethics in Health</i>	Health Research: Principles,	
Research: Principles,	Structures and Processes	
Structures and Processes	were signed off by the	
	Minister Dr A Motsoaledi and	,
	published electronically on1	
1	March 2015.	
2. Submit all approved/	On-going	The Norms and Standards
endorsed guidelines and		Working Group thanks the
relevant research ethics		Council members and the
information to the Secretariat		NHREC Secretariat for
for uploading on the NHREC		their input and assistance
website		in this on-going process.

Activities 2015-2016

The Norms and Standards Working Group's major undertaking in the reporting period was to revise the Department of Health's 2004 publication *Ethics in Health Research: Principles, Structures and Processes.* This undertaking was completed at the end of November 2014; signed off and approved with effect from 1 March 2015.

The 2015 guidelines (2nd editions) incorporate current trends, regulations, ethical guidelines as well as guidance concerning a variety of types of research conducted in South Africa. The publication provides a succinct and reader-friendly guide to ethical practice in research.

Work on the revision and updating of the DoH 2006 *South African Clinical Trial Guidelines: Good Practice for Clinical Trials with Human Participants* is underway, having been initiated in February 2015. A preliminary draft of the revision was circulated for early input from MCC, and a further revision was circulated in May 2016 to REC Chairs for input from their various constituents. The current Working Group hopes to complete the revision by the end of 2016 but acknowledges the constraints due to its term of office ending in August 2016 and because of capacity deficits.

Planned and Ongoing Activities of the Norms and Standards Working Group

Planned Objective 2016-	Progress	Comment
2017		
Continue the revision of DoH 2016 3 rd edition publication <i>Good Clinical</i> Practice Guidelines	Preliminary draft circulated to MCC (March 2016); REC chairs (May 2016)	It is unclear whether the task can be completed within 2016 because of capacity deficits; additional co-opted capacity may be required which has budgetary
2. Develop MoU with National Research Committee to facilitate better communication and consultation regarding overlap of mandates	Minimal progress	Necessary to promote more cohesive and integrated outcomes that are cognizant of ethical implications
3. Develop ethics guidelines for biobanks in South Africa	Planning phase not yet completed; some overlap with ASSAf ELSI Consensus Study on	Likely to require additional co-opted capacity with expertise in clinical ethics as well as

Genetics & Genomics.	in research ethics re
	biobanks; has budgetary
	implications

2) THE COMPLAINTS AND ADVISORY DISCIPLINARY COMMITTEE (CADC)

Mandate: This Committee

- adjudicates complaints about Research Ethics Committees;
- hears complaints from researchers who believe that a Research Ethics Committee has discriminated unfairly against them;
- refers matters involving allegations of unethical or unprofessional conduct by a healthcare provider to the relevant statutory health professional council or body;
- Institutes remedial measures and disciplinary action where warranted, to facilitate compliance with legal, ethical and professional norms and standards as required for responsible conduct of research.

Membership: 2013 – 2016 Adv L Nevondwe (Chair), Prof A Pope, Dr S Ncanana, Ms T Sebata, Dr M Sekhoacha and Ms T Zwane.

Secretariat: Mr T Molebatsi, Mr J Van der Westhuizen and Mr R Maluleke.

Activities 2015/16

The Committee reviewed Standard Operating Procedures (SOP) for disciplinary processes, sanctions and appeals. The SOP was subsequently approved by Council on 11 February 2015.

Complaints received by CADC

- 1)NHREC/CADC031115-014 (ethics of exome sequencing)
- 2)NHREC/CADC250216-015 (March 2016 complaint from WSU students)
- 3)WCPHRC query (March 2016)
- 4) NHREC/CADC010716-016 (July 2016)

Objective		Progress	Comment
Finalise SOP Disciplinary partitions and appe	orocesses,	Reviewed and finalised in February 2015	Document finalised.
Finalise all cases reported	which are	All cases were finalised	
Publish SOP's NHREC website	on the	finalised	The document is published on the website.

Plan 2016/17

Finalise all the cases which are reported within a period of 30 days from the date when the complaint is lodged.

3) WORKING GROUP: QUALITY PROMOTION AND ENHANCEMENT COMMITTEE (QPEC)

Mandate: This is a new committee consolidating the former working groups on (1) Training and (2) the Registration and Auditing of Research Ethics Committees. It gives effect to the following mandates of the NHREC:

- Determines guidelines for functioning of Health Research Ethics Committees (RECs).
- Audits and registers RECs.

Membership: The 2015-2016 membership included: Dr S Ncanana (Chair); Prof D du Toit (*ex officio*); Prof D van Bogaert (*ex officio*); Ms T Sebata; Dr T Sithebe; Dr N Ramalivhana, Dr M Sekhoacha and Prof A Pope.

Secretariat: Mr T Molebatsi; Mr J van der Westhuizen and Mr Ronald Maluleke

Activities of the Quality Promotion & Enhancement Committee (QPEC)

Objective 2015-2016	Progress		Comment
Provisional registration of RECs	Three Health received p	RECs rovisional	The provisionally registered RECs adhered to NHREC Ethical guidelines for provisional registration

RECs were provisionally registered in line with NHREC guidelines. These RECs include:

- Northern Cape Department of Health Provincial Health Research and Ethics Committee
- North West University Vaal Triangle Campus(NWU-VTC)Humanities and Health Research Ethics Committee (HHREC)
- Life College of Learning Research Ethics Committee
- University of Western Cape Humanities and Social Sciences Research Ethics Committee
- University of Western Cape Biomedical Research Ethics Committee

The documents received from these RECs were reviewed by the QPEC. They included terms of reference, a checklist for REC application, SOPs, application for registration, conflict of interest and confidentiality agreement, and research ethics protocol examination.

Objective 2015-2016	Progress	Comment
Monitoring and Evaluation of	During November	Of the five on-site visits, three (i.e.
RECs: On-site assessment	and December 2015,	NWU REC, Life Healthcare REC
of provisionally registered	QPEC members and	and Rhodes University REC). REC
RECs	the Secretariat	were determined to be operating
	conducted on-site	according to the DoH Ethics
	assessments of	Guidelines. Two RECs remain
	five(5) provisionally	under development: (Northern Cape
	registered RECs	REC: there is some improvement in
		how the REC operates. However,
		capacity is still a challenge. The
		committee has a dual role, that of
		ethics review as well scientific
	х	review. Walter Sisulu University
		also has capacity issues as well as
		processes that are not clearly
		defined. These issues are being
		addressed by their new Chair)

A total number of five RECs were visited by QPEC members and the Secretariat between November and December 2015. Three of these RECs appeared to be generally well managed (operating with best practices and according to DoH guidelines). These RECs are:

- North West University REC,
- LifeHealthCare REC and
- Rhodes University REC

Two RECs that registered earlier were revisited to provide feedback on evaluation and Identification of gaps

- Rhodes University REC
- Walter Sisulu University Health Research Ethics& Biosafety Committee

Some of the best characteristics shown by these RECs include:

- Policies and SOPs well defined
- Proper evidence of protocol review
- Administrative: Proper filing of documents, supported by their respective administrative bodies or a secretariat
- Evidence of members being trained in the principles of research ethics

RECs Annual Report Assessment: As part of Monitoring and Evaluation (M&E), QPEC assessed and analysed the RECs 2014 annual reports. The following was established:

- Membership: composed as per NHREC guidelines. However, some RECs have a challenge with recruiting and retaining community representatives or lay persons.
- Review of protocols
 - Average turnaround times: 4 to 8 weeks
 - More than 95% of applications received were approved
 - > 22 protocols approved under delegated ministerial consent
- Monitoring & Evaluation
 - > Active monitoring not done, limited capacity
 - Passive monitoring was done (i.e.RECs receive progress reports from researchers)
 - Fewer RECs than in previous years reported adverse effects
- Ethics Training

> RECs members do attend research ethics training

The feedback on the RECs Annual Report was also sent to all RECs.

Objective 2015-2016	Progress	Comment
Auditing of Animal Research Ethics Committees (ARECs)		It is envisaged that the audit will be finalised by 17 September 2016.

The QPEC was tasked to drive the process of auditing Animal Research Ethics Committees (ARECs) registered with the NHREC. One of the undertakings involved in the setting of ethical norms and standards for conducting human health research involving animals is their auditing. All ARECs in South Africa are required by law to register with the NHREC. The audit was done by NHREC members and the Audit Report will be published soon.

Objective 2014-2015	Progress	Comment
Improvement of the REC reporting template for yearly REC submission of data to the NHREC	distributed to all REC Chairs.	Thirty-Nine (39) RECs submitted their annual reports in 2015. Follow-up on the RECs that are delayed is on-going.

REC Reporting Template was improved and distributed to RECs. RECs are expected to report yearly using the template. Thirty-Nine (39) RECs RECs submitted annual reports for the year 2015.

2016/17 Plan

The QPEC will implement the following objectives:

Planned	Objectives	Progress	Comment
2016-2017			
1. Auditing of	ARECs	The Audit Plan was	To follow up on the audit
		developed and	report recommendations
		implemented	

The QPEC will assist in the drafting of the Audit report, analysis of the findings and the communication and discussion of the findings with the relevant ARECs. This process will include considerations of capacity building thus strengthening the ethics of animal research.

Planned Objectives 2016-	Progress	Comment
2017		
Auditing of Health and	The NHREC will also	
Human RECs	embark on auditing health	
	and human RECs that are	
	currently on provisional	
	registration.	

Planned Objective 2017-	Progress	Comment
2017		
3. Registration of new RECs	On-going REC provisional	
and ARECs, continue with	registration and on-site	
REC audits, assessments	assessment visits will	

and on-site visits for fully	continue.	
registered and provisionally	4	
registered RECs and		
ARECs, increase		
communication and build		
capacity in research ethics		

The QPEC Committee will continue to register RECs and ARECs, provide –provisional registration for new RECs and ARECs, audit, assess and conduct on-site visits to RECs for the purpose of ensuring that all health research performed in South Africa is based on and adheres to ethical practice.

4) The Legal and Regulatory Working Group 2015-2016

Mandate: The Legal and Regulatory Working Group is mandated to strengthen the legal framework for research ethics and research with human participants in South Africa

Membership: The 2013-2016 membership comprised Dr C Slack (Chair); Prof D du Toit (*ex officio*); Prof D van Bogaert (*ex officio*); Prof A Pope; Adv L Nevondwe; Dr M Sekhoacha; and Dr T Sithebe.

Secretariat: Mr T Molebatsi; Mr J van der Westhuizen and Mr Ronald Maluleke

Activities 2015-2016

Objective	Progress	Comment
To ensure that regulations for research with human participants are developed and disseminated to research stakeholders	Feedback was requested from Research Ethics Committees (RECs) about the adequacy of the regulations. Support was provided on several queries about the regulations to research stakeholders.	was received by 4 RECs on the human subjects

To ensure adequate	Foodbask	
To ensure adequate operationalisation of s71 of the National Health Act (NHA, 2003) requirement that 'non-therapeutic' child research obtains Ministerial Consent	Feedback was solicited on Operational Guidelines developed by the Working Group to help RECs and researchers to implement a delegation of power from the MoH to those RECs fully registered with the Council, and advice/ support was provided to stakeholders who sent queries about how to implement these Operational Guidelines.	Awareness-raising should continue to help stakeholders to implement this short-term solution to this restrictive component of s71. Those RECs currently unable to provide delegated ministerial consent because they have not yet achieved full registration should be audited as soon as possible.
To ensure law reform for s71 of the National Health Act (NHA, 2003).	There was liaison with DoH and its legal unit to keep momentum regarding implementation of proposed amendments to s71 already approved by the Minister of Health.	There should be on-going attention to the issue of law reform of s71 because some norms (e.g. mandatory parental consent for child research) constrain otherwise ethicallyacceptable research.
To ensure inputs to national guidelines	Inputs were made to the SA Department of Health 2015 Ethics in Health Research: Principles, Processes and Structures. Also, Inputs were also made to guidelines for Good Clinical Practice to ensure harmonisation with national guidelines.	There should be ongoing attention to possible remaining tensions between the NHA (2003), regulations, and national guidelines and advice provided to stakeholders.

Conclusion:

As evident in this Report, the NHREC has accomplished much during this term of office. However, we are aware that there are many challenges that lie ahead as we endeavour to ensure that South African research ethics systems and infrastructure are continuously appraised, supported and strengthened. The end result for which we strive is consistent excellence in health research for all South Africans. The NHREC wishes to thank sincerely the NHREC Secretariat and other persons and entities who have continuously supported our endeavours.

Prof D du Toit

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Chairperson: National Health Research Ethics Council

Date: 19/09/2016