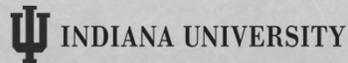


# Dealing with Data Securely: Non-technical Thoughts Concerning Data Security and Management

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## Objectives

- ◆ Review and identify challenges and obstacles for data security and protection of confidentiality
- ◆ Identify best practices for IRBs in the review of researchers' plans for protection of data and confidentiality
- ◆ Identify strategies for institutions to work with researchers and IRBs to develop and implement data management/security strategies.

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# Introduction

- ◆ When I started in the field.....
  - ◆ Locked filing cabinet in a locked office
- ◆ Now.....
  - ◆ Not so much, to say the least
  - ◆ It's a new world for Data

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# Introduction

- ◆ New Environment for Data
  - ◆ More data and more private data
  - ◆ New expectations and requirements to share data
  - ◆ New technologies to:
    - ◆ Collect
    - ◆ Use/Analyze
    - ◆ Share
    - ◆ Store
    - ◆ Hack/steal/lose data
- ◆ So a double/triple dose of
  - ◆ Opportunities
  - ◆ Risks/vulnerabilities

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# Introduction

- ◆ So..... What is
  - ◆ An IRB to do to be prepared?
  - ◆ A HRPP to do to be prepared?
  - ◆ An Institution to do to be prepared?
- ◆ Think in terms of
  - ◆ Expertise
  - ◆ Technology
  - ◆ Requirements

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# What is to be Done? Avoid This



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## What is to be Done?

- ◆ Option: Put IT experts on the IRB
  - ◆ Kinda a waste of expertise
  - ◆ Not practical
  - ◆ Risk of being idiosyncratic rather than systematic
- ◆ Option: Institutionalize It

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## What is to be Done?

- ◆ From Institutional Perspective: An Integrated Approach
  - ◆ Do we know what data we have?
  - ◆ As data is owned by institution – not researcher - need for institutional policies and process for collection, use, access, sharing and storing of this institutional data
  - ◆ IRB one component of institutional data oversight community
    - ◆ May well be central component for some activities, but not the only component
    - ◆ Who else and how to collaborate?
    - ◆ How do these units work together

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## Data Plan

- ◆ Pull Together all Interested/Affected Parties
  - ◆ IRB
    - ◆ Office and committee representatives
  - ◆ Researchers
  - ◆ IT
    - ◆ Security
    - ◆ Operations
    - ◆ Library
  - ◆ Privacy/HIPAA/GC
  - ◆ Institutional partners: For Whom IU Serves as IRB of Record
    - ◆ Hospitals
    - ◆ Partnering research institutes

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## Data Plan

- ◆ Begin the Conversation
  - ◆ Or, it may seem, negotiations
- ◆ Acceptable Systems Initially
  - ◆ Absolutely no overlap for collecting, transmitting, computing, storing, archiving
  - ◆ Thus the negotiation part
- ◆ In the face of this
  - ◆ Narrowed the group
  - ◆ Drafted white paper
  - ◆ Re-gathered the group
  - ◆ Discussed, negotiated, cajoled, etc. till we reached a consensus

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## Data Plan

- ◆ Integrate Selected Systems into IRB Application
  - ◆ Accepted systems identified
    - ◆ Selection of any one of them means approvable
  - ◆ Use of any not identified
    - ◆ Required justification
    - ◆ Review by expert as consultant to IRB
  - ◆ Conduct education with IRB staff and members

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## From Concept to Reality

- ◆ Implementation
  - ◆ Negotiations continued
    - ◆ Application language
    - ◆ Reports
      - ◆ To whom
      - ◆ Including what information
      - ◆ Real-time or delayed
    - ◆ Institutional security signoff required prior to IRB approval?
    - ◆ Approval letter language
  - ◆ Education to research community
    - ◆ Research compliance staff not trained/equipped to provide

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## From Concept to Reality

- ◆ Phased Implementation
  - ◆ First step
    - ◆ Data subject to HIPAA
      - ◆ Highest compliance risk
      - ◆ Researchers dealing with this data already have some familiarity with security requirements
    - ◆ Collection of limited information
      - ◆ When using system on list
        - No further action required
      - ◆ When using system not on the list, researcher must either:
        - ◆ Confirm the system they are using has institutional IT security approval
        - ◆ Commit to completing institutional security review prior to use of system
      - ◆ Consider whether collection of detailed information may do more harm than good

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## Researcher Response

- ◆ Lots of Questions
  - ◆ Be ready with list of people who can assist – most likely not IRB or research compliance office
    - ◆ Departmental IT
    - ◆ Institutional IT
    - ◆ HIPAA Security Officer
    - ◆ Contracts
- ◆ But no resistance from researchers
- ◆ Helpful to know preferred systems
- ◆ Often speeds initiation of research by moving discussion regarding IT needs earlier in the process

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## Institutional Response

- ◆ Ready to move to Step 2
- ◆ But what is Step 2?
  - ◆ Back to negotiations with various stakeholders
  - ◆ But now we have data to guide decisions
    - ◆ Identify IT needs
    - ◆ Targeted education (not from research compliance)
    - ◆ Targeted communication
- ◆ Discussions regarding security of sponsor-provided systems

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## What We're Working on Now

- ◆ Data Management guidance
- ◆ Applying same process to research data not subject to HIPAA
- ◆ Consideration of holding IRB approval pending IT system certification
- ◆ Consideration of IRB's role in encouraging or even mandating data sharing

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# Wrap Up

- ◆ Key Points in the Process
  - ◆ Identify the Goal
  - ◆ Identify and involve the best parties to be part of the process
  - ◆ Recognize that compromises have to be made, pet systems may be rejected, feelings may be hurt
  - ◆ Don't let the discussion/process wander too far off track
  - ◆ Keep pushing the agenda and goal
- ◆ Questions and Discussion