

SRERS Administration North York General Hospital

Reminder: Institutional Research Administration Requirements

The CTO Streamlined System provides a streamlined approach to research ethics review. Each participating site must ensure that all necessary institutional authorizations and contracts/agreements are in place prior to beginning the research.

Before submitting the application through the CTO stream, the NYGH researcher or delegate should confirm that the study scope meets requirements and eligibility criteria for a CTO stream submission.

For “**Pre-submission eligibility inquiry for CTO**” please send email to NYGH Office of Research and Innovation (research.innovation@nygh.on.ca) along with the completed Study Submission Checklist, Resources Required for Research form, and Ethics Educational Certifications.

A researcher planning to apply for CTO stream should – (1) be an NYGH employee/physician with credentialed active status at NYGH, (2) complete mandatory ethics education training, and (3) ensure that the resources required to conduct the proposed research are available.

For guidance regarding CTO submission, please refer to - <http://www.nygh.on.ca/Default.aspx?cid=4517&lang=1>

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: Michael.Wood@nygh.on.ca

Role: Institutional Representative

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

Department Approver in application forms

The Department Approver on the CIAs for North York General Hospital must be indicated as follows:

Title: Mr.
First Name: Michael
Surname: Wood
Organization: North York General Hospital
Address: 4001 Leslie Street, Room LE-140
City: Toronto
Province/State: Ontario
Postcode/Zip: M2K 1E1

Telephone: 416-756-6382
Fax: N/A
Email: Michael.Wood@nygh.on.ca

Institution Representative in application forms

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

Title: Mr.
First Name: Michael
Surname: Wood
Organization: North York General Hospital
Address: 4001 Leslie Street, Room LE-140
City: Toronto
Province/State: Ontario
Postcode/Zip: M2K 1E1
Telephone: 416-756-6382
Fax: N/A
Email: Michael.Wood@nygh.on.ca

The Secondary Institution Representative field should be left blank.