

2024 Metrics for AAHRPP-Accredited Human Research Protection Programs

Hospitals

September 2025



About the Metrics

AAHRPP is pleased to present the 2024 metrics for Human Research Protection Program (HRPP) performance. You will see some changes to the metrics that were based on feedback from a working group with representatives from accredited organizations. AAHRPP provides these data to help research organizations, researchers, sponsors, government agencies, and participants identify and support high-performing practices for HRPPs.

These metrics are collected from Annual Reports, as well as Step 1 and Step 2 applications, submitted by accredited **hospitals**.

All the quantitative data were derived from the most recent reports submitted by AAHRPP organizations.

Abbreviations Used and Definitions

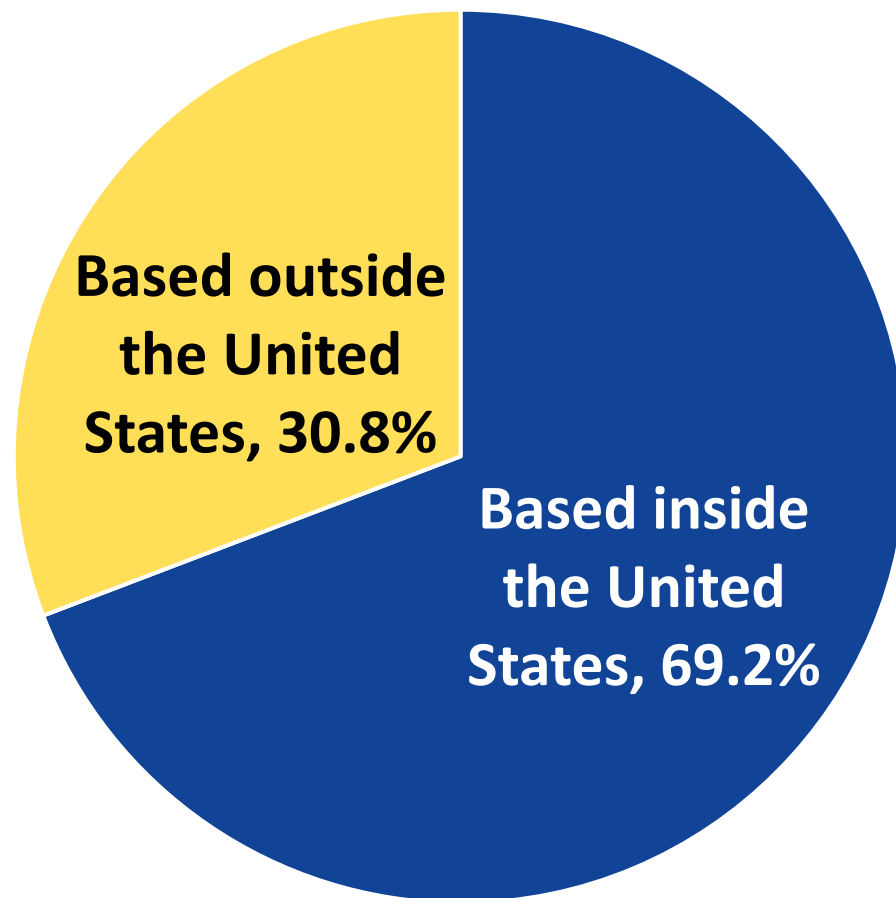
DHHS	US Department of Health & Human Services
DoD	US Department of Defense
ED	US Department of Education
DoE	US Department of Energy
DoJ	US Department of Justice
EPA	US Environmental Protection Agency
FDA	US Food and Drug Administration
ICH-GCP	International Council for Harmonisation Good Clinical Practice
VA	US Department of Veterans Affairs

**Definitions of metrics,
including how times are
calculated, are available
[here](#).**

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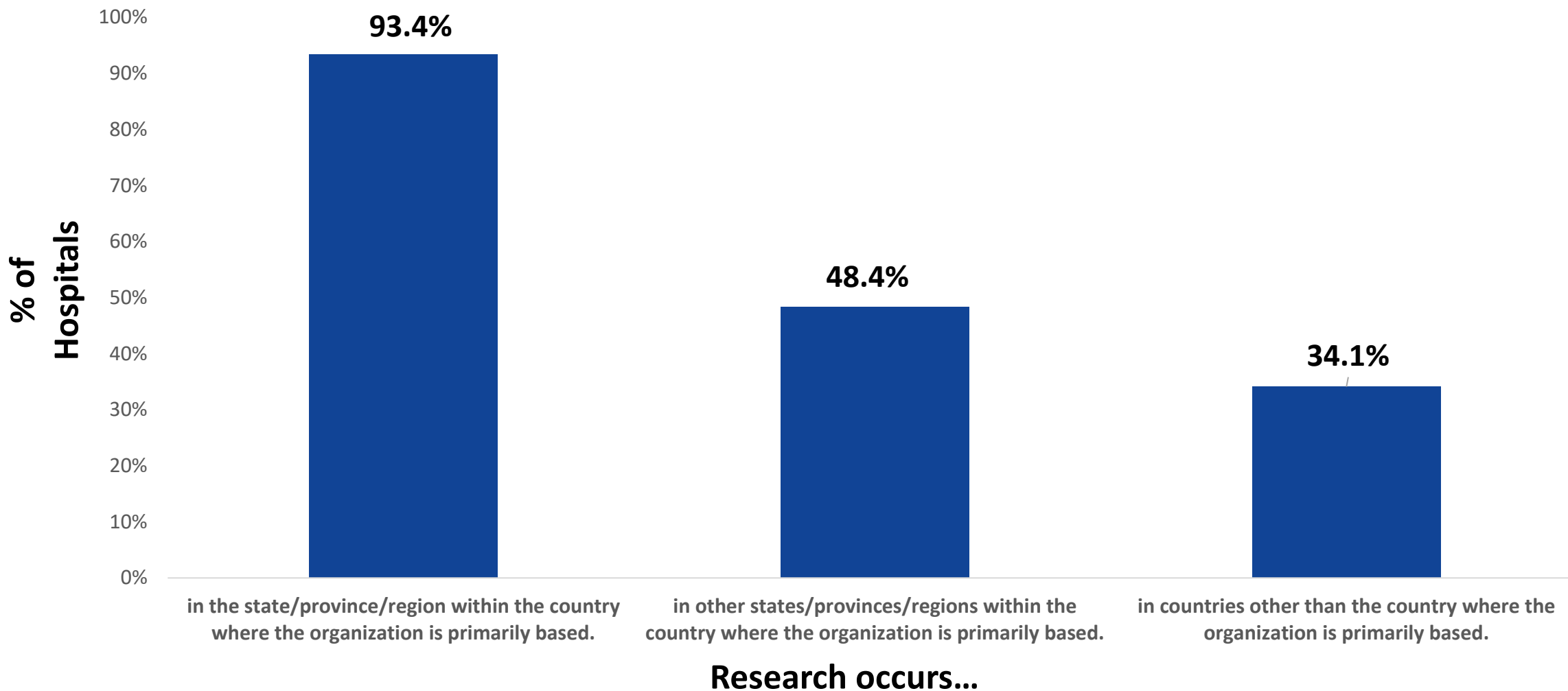
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Where Accredited Hospitals are Based



This chart shows where hospitals sponsor, conduct, review, or manage research.

Where Research Occurs



Research Type

**All hospitals conduct, manage, or review
biomedical/clinical research**

100%

**Most hospitals conduct, manage, or review
social/behavioral/education research**

91.2%

Biomedical/Clinical Research by Type

**Drugs/ biologics /
dietary supplements**

98.9%

Devices

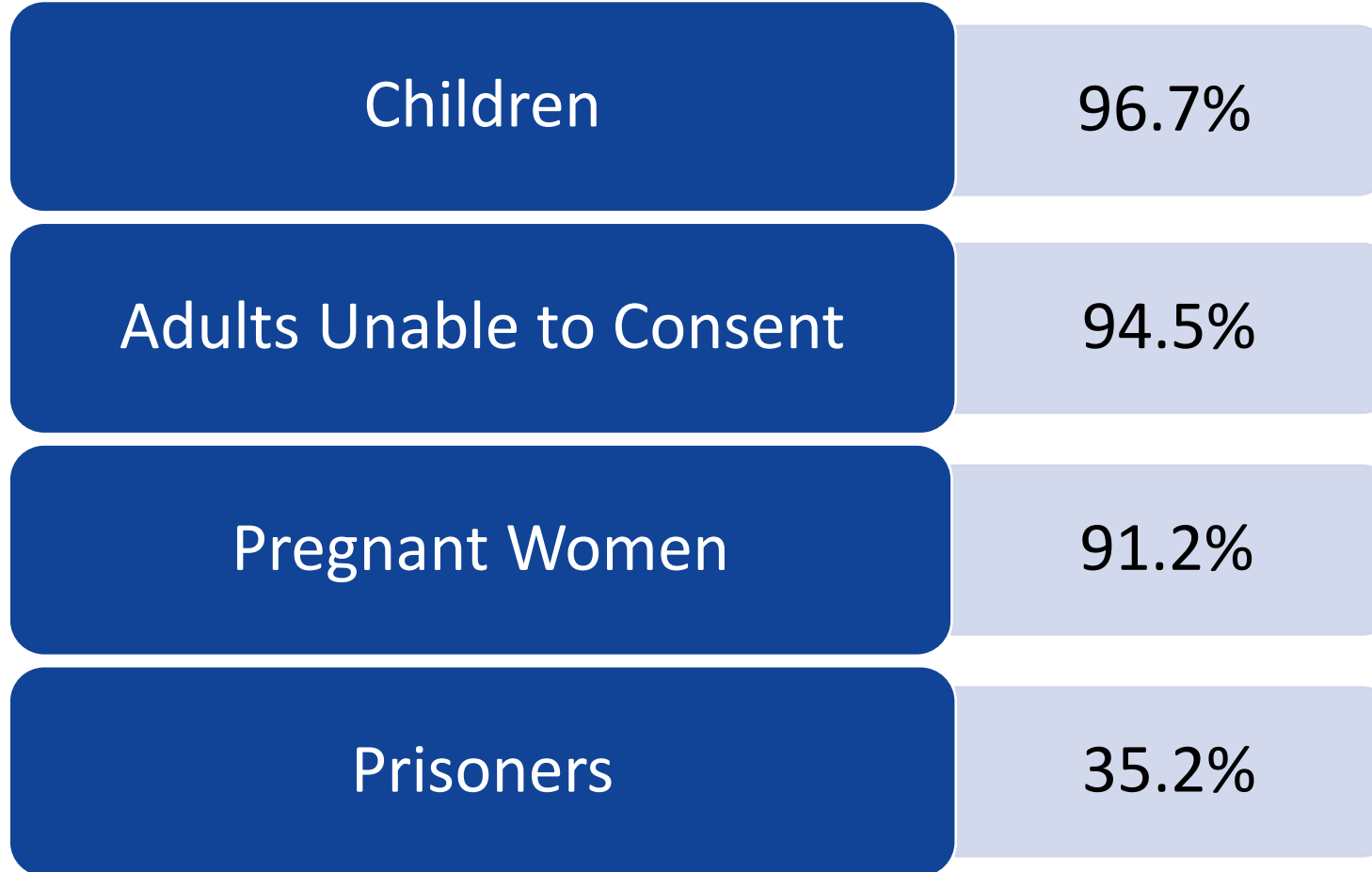
96.7%

**Planned Emergency
Research**

47.3%

This table shows
the type of
biomedical/clinical
research hospitals
conduct, manage,
or review.

Vulnerable Populations



This table shows the categories of vulnerable populations that participate in research conducted, managed, or reviewed by hospitals.

Funding Type

Industry sponsored

98.9%

Internally funded or unfunded

97.8%

Sponsored by other external
sources

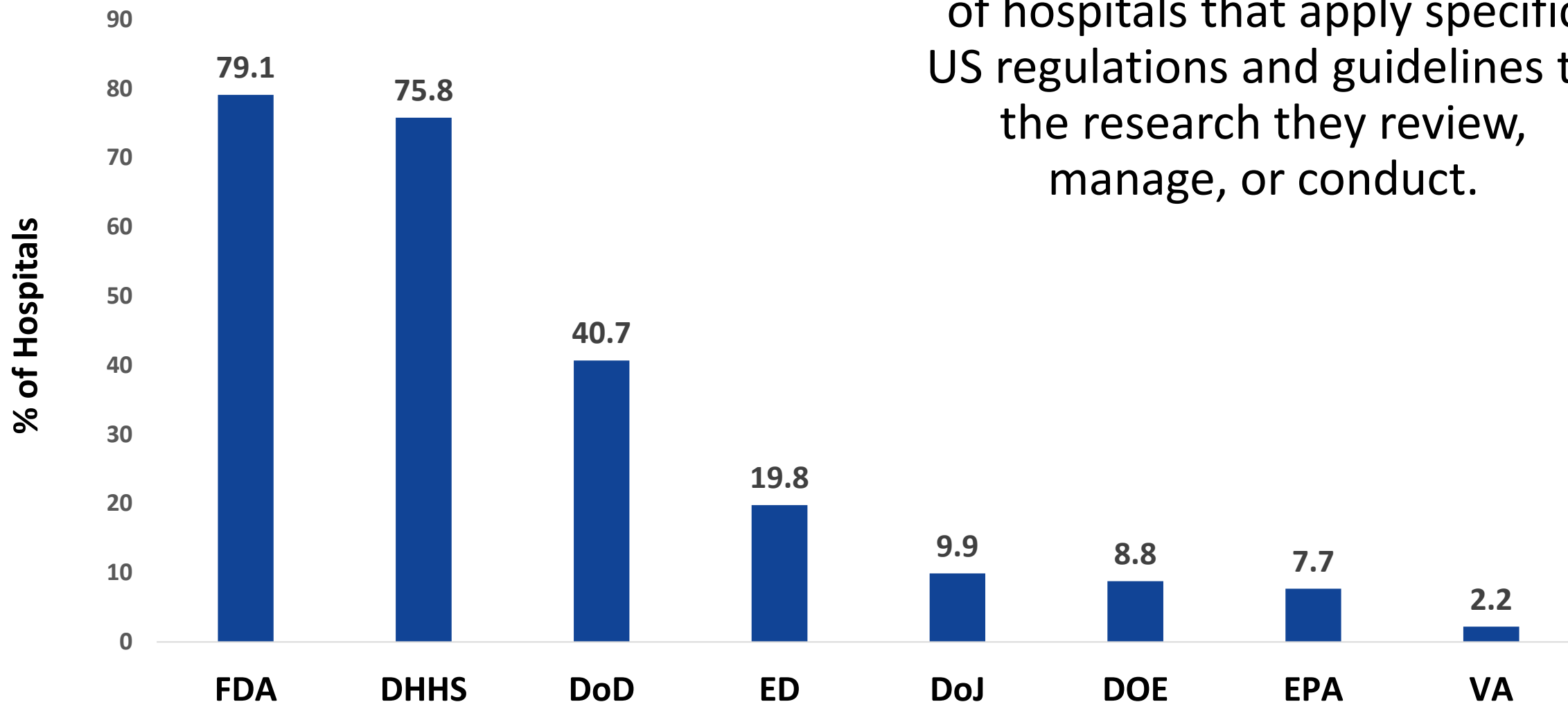
96.7%

Government or federally
sponsored

71.4%

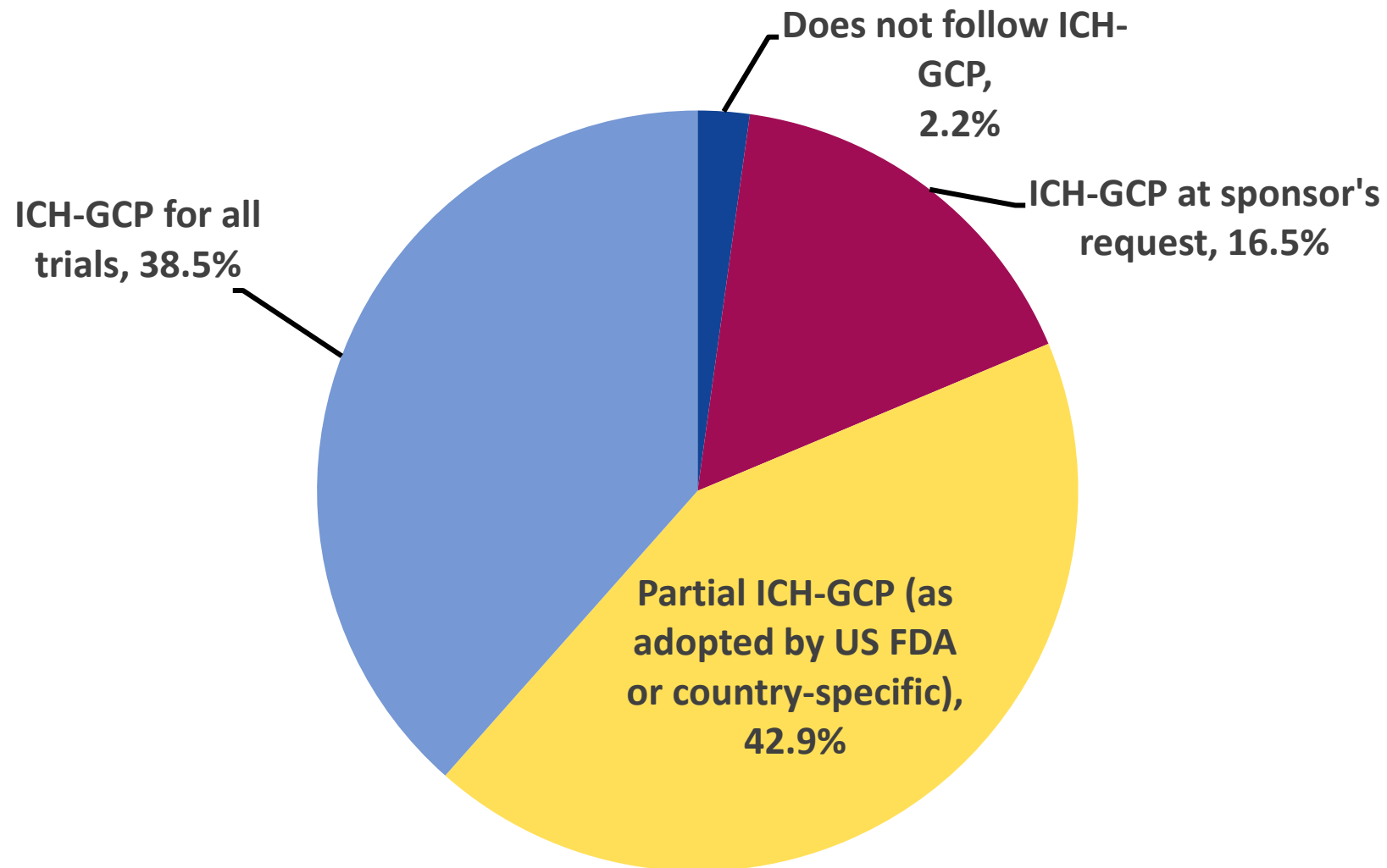
This table shows the percentage of hospitals that conduct, manage, or review research by funding type that supports the research.

Regulations & Guidelines



International Regulations & Guidelines

This chart shows the percentage of hospitals that adhere to ICH-GCP guidelines.



Internal IRBs/ECs

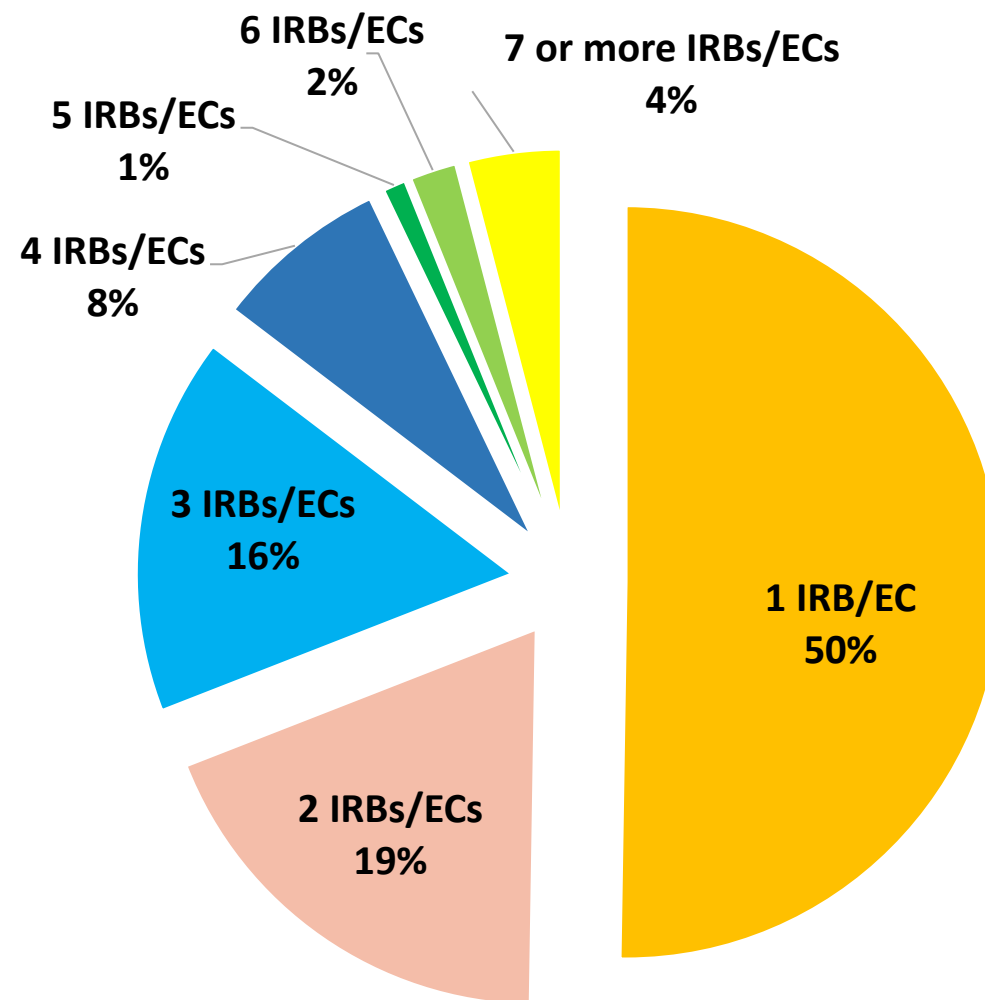
% of hospitals that
have internal
IRBs/ECs

89.0%

Median # of
IRBs/ECs per
hospital

2

Number of internal IRBs/ECs hospitals support



Relying on External IRBs/ECs*

Number of open studies
reviewed by an external
IRB/EC (median)

249

% of hospitals with internal IRBs/ECs that also
use external IRBs/ECs

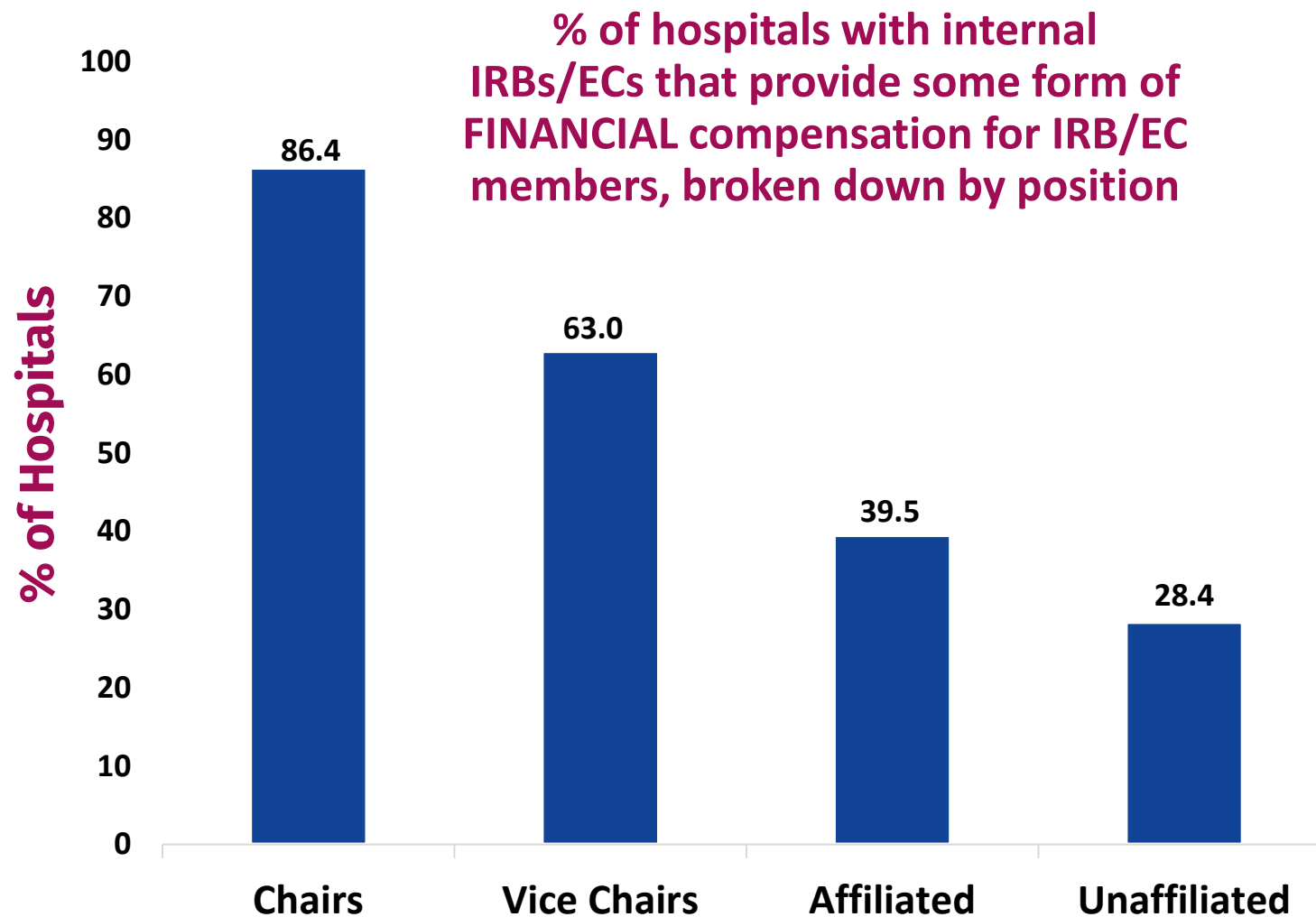
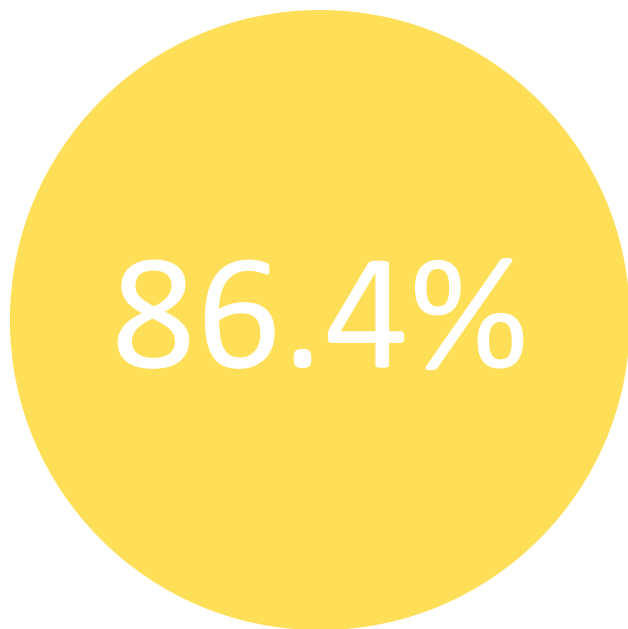
Do not rely on an
external IRB/EC

24%

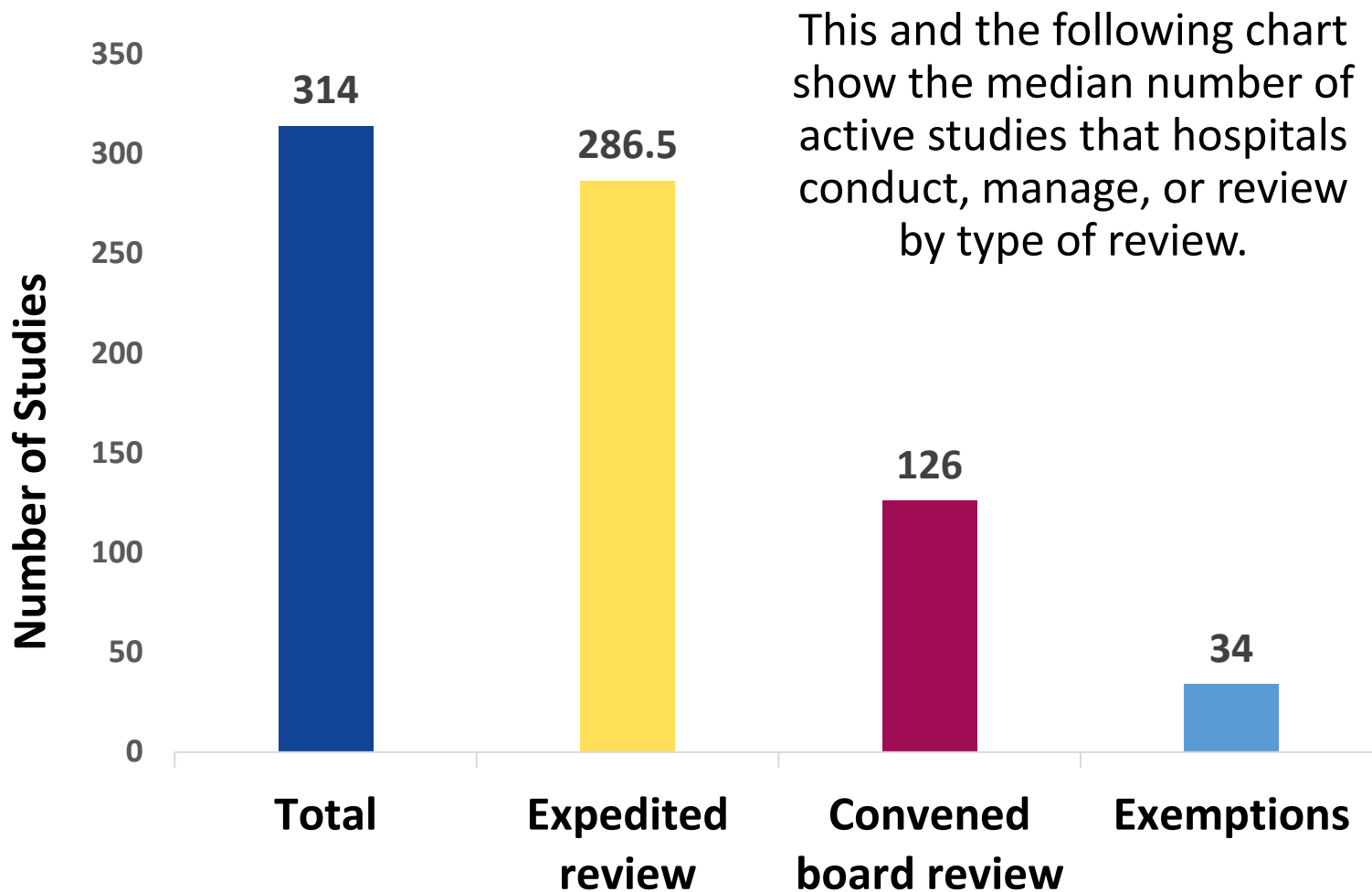
Rely on external
IRBs/ECs
76%

Compensating IRB/EC Members

**% of hospitals with internal
IRBs/ECs that provide some form of
financial compensation to IRB/EC
members**



Active Studies Overseen: All Hospitals



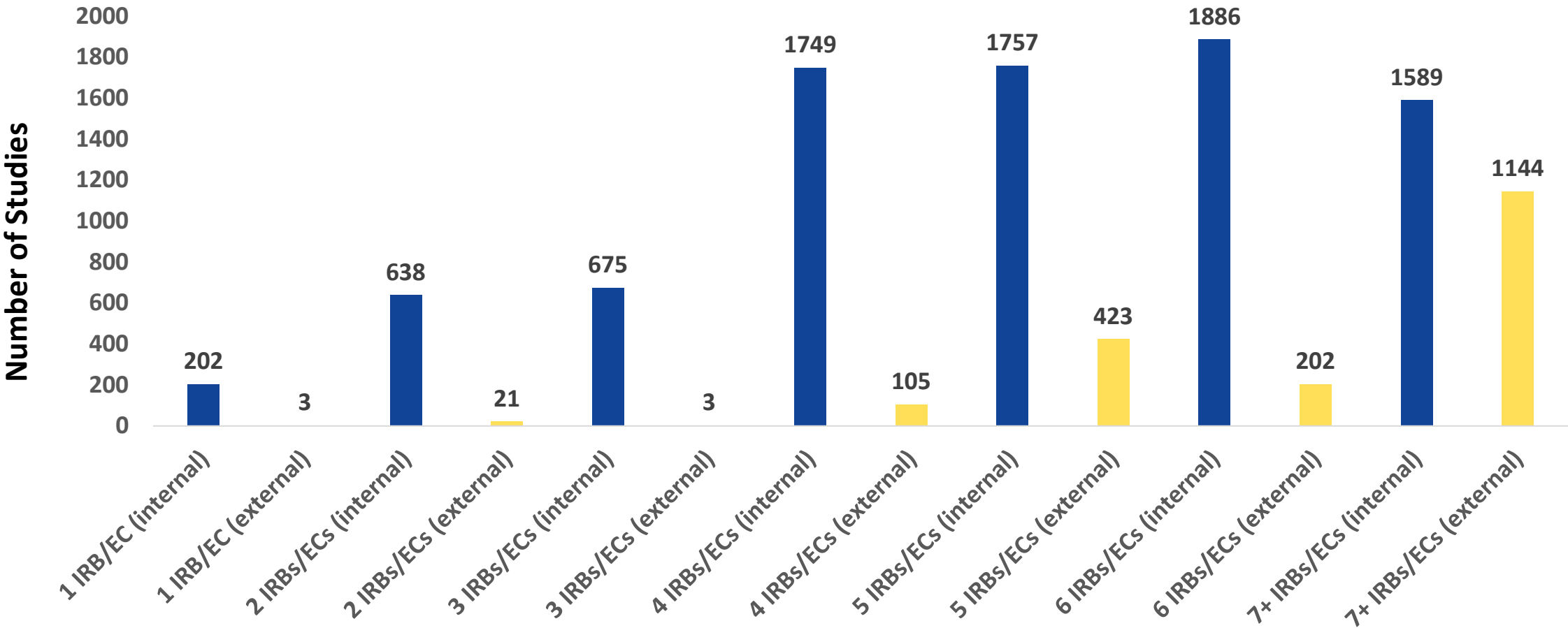
Exemptions are based on the number of determinations made by a hospital organization for a 12-month period (e.g., the year prior to the AAHRPP report).

Expedited review and convened board review only include studies reviewed by an internal IRB/EC for hospitals that have an internal IRB/EC and are not independent IRBs/ECs.

Total number of studies includes those reviewed by both internal and external IRBs/ECs in the case of hospitals with IRBs/ECs.

Active Studies Per IRB/EC: All Hospitals

This chart compares the median number of active studies hospitals oversee reviewed by an internal vs. external IRB/EC based on the number of internal IRBs/ECs they have.



Note: Median number of studies reflect exemption determinations that could be made by internal or external IRBs/ECs.

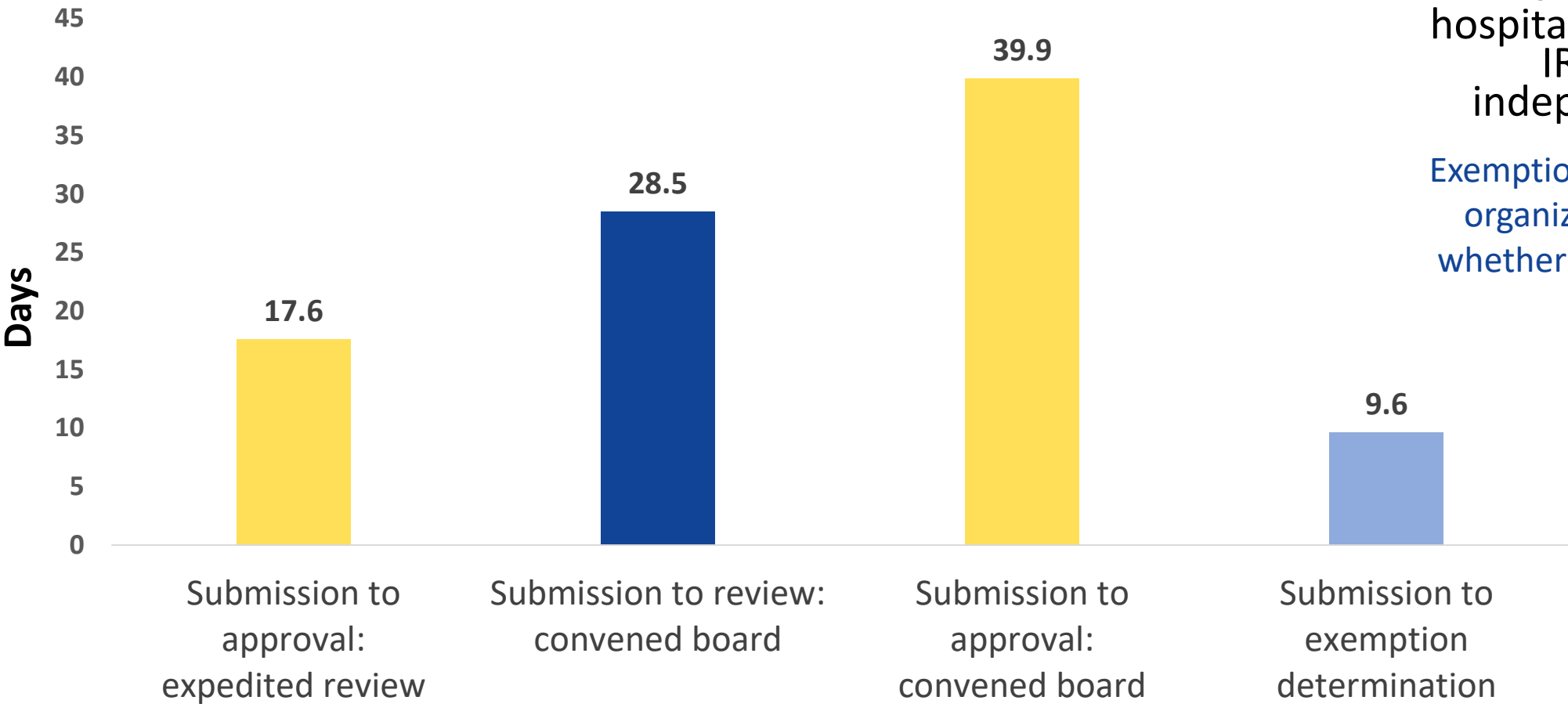
Review Times

**NOTE: THE WAY REVIEW TIMES
WERE CALCULATED IS
DIFFERENT FROM PRIOR YEARS
OF PUBLISHED METRICS**

**Data corrected
December 2025**

This chart shows the median review times by review process for hospitals that have internal IRBs/ECs or are independent IRBs/ECs.

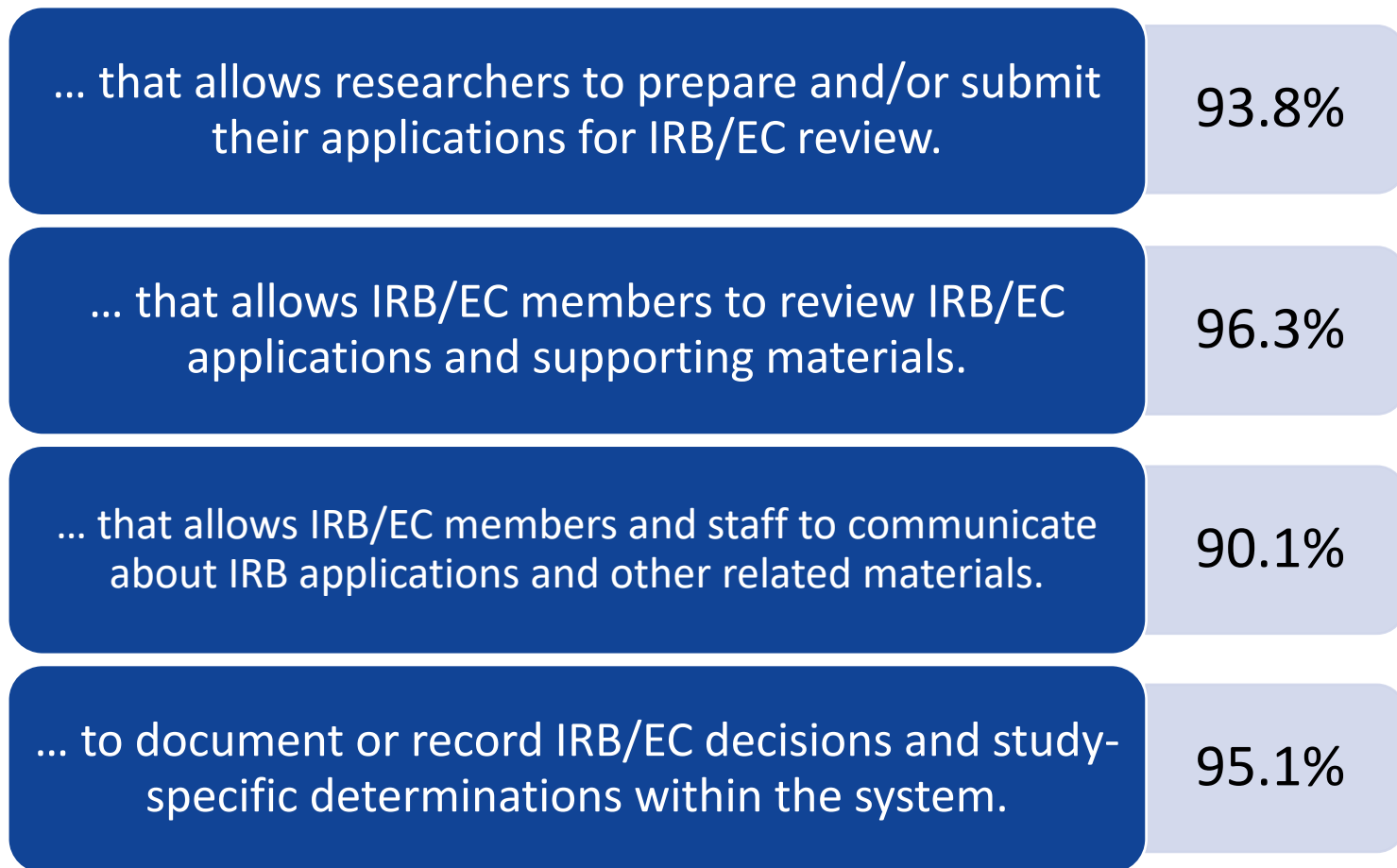
Exemption review times are for organizations regardless of whether they have an internal IRB/EC



IRB/EC Technology

This table shows the technology used by hospitals that have IRBs/ECs.

AAHRPP-Accredited hospitals use technology...



IRB/EC Staffing

Number of Active Studies	Median Number of Studies	Median Number of Staff	Median Number of Studies per Staff
All	299	5.0	69.2
0-100	39	1.5	10.0
101-500	208.5	3.8	53.8
501-1000	678	6.0	103.2
1001-2000	1615	14.0	108.4
2001-4000	2432	11.5	179.3
4001+	8078	30.4	303.4

This table breaks down IRB/EC staffing by the size of the research portfolio (exempt, expedited, and convened reviews) overseen by internal IRBs/ECs.

Data from hospitals without internal IRBs/ECs are not included

Audits of Researchers

% of hospitals that reported audits of
researchers had occurred

82.4%

Internal: "for
cause"

- Median: 1
- Total: 1485

Internal: random

- Median: 8.5
- Total: 4344

Regulatory agency
inspections

- Median: 0
- Total: 66

Audits of IRBs/ECs

% of hospitals that
reported audits of IRB/EC
records had occurred (by
internal or external
sources):

61.5%

Internal: "for
cause"

- Median: 0
- Total: 79

Internal: random

- Median: 1
- Total: 498

Regulatory agency
inspections

- Median: 0
- Total: 33

Noncompliance & Unanticipated Problems

Number of active studies	Serious noncompliance determinations	Continuing noncompliance determinations	Unanticipated problems determinations
All	1	0	1
0-100	0	0	0
101-500	1	0	0
501-1000	1.5	1	2.5
1001-2000	2	0	3
2001-4000	2	0	7
4001+	8.5	1.5	30

This table is based on the most recent year prior to a hospital’s most recent report to AAHRPP and shows the median number of events per category.

Conflicts of Interest

This graphic shows the median number of studies reviewed by an IRB/EC for hospitals within the last 12 months of their most recent AAHRPP report.

Only includes data from organizations that have internal IRB/ECs or are independent IRBs/ECs

Studies with a financial conflict of interest management plan reviewed by an IRB/EC (internal or external)

4

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