

SIDCER-FERCAP Survey Form 27: Annual Progress Report
Version 3.0, 30 April 2020

ANNUAL PROGRESS REPORT FORM

EC Name			
Address			
Telephone			
Website			
Contact Person/ Position/E-mail			
Chair/E-mail			
Secretary/E-mail			
Changes in Membership (if there are changes, identify the new members, if they are medical/scientific, non-medical/non-scientific, affiliated, non-affiliated, male, female, and the trainings provided)			
Changes in Staff (if there are changes, identify the new staff and the trainings provided)			
Changes in SOPs (if there are changes, identify the new SOPs with English titles)			
Number of protocols reviewed through Full Board Review (this year)		Common types of protocols reviewed through Full Board review (<i>e.g.</i> , drug, medical device, investigator initiated, etc.)	
Number of protocols reviewed through Expedited Review (this year)		Common types of protocols reviewed through Expedited Review	
Number of protocols Exempted from Regular Review (this year)		Common types of protocols Exempted from Regular Review	



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Number of Full Board Meetings (this year)		Average number of Members who attend Full Board Meetings	
Ethical challenges/issues encountered (this year)			
Status of Corrective action to address challenges/issues encountered (this year)			
Type of FERCAP assistance needed to address challenges/issues encountered (this year)			
Status of Corrective action in response to the major weaknesses identified in the most recent Survey Report			
Type of FERCAP assistance needed to address major weaknesses identified in the most recent Survey Report			

NOTE: Submit this **Annual Progress Report Form** together with the updated **Action Plan** with documentary evidence in response to the most recent **Survey Report**.

Report submitted by:

Name:

Position:

Signature:

Date: