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Pearls of Wisdom: IRB Review

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CTMB Guideline 4.4

The institution is responsible for ensuring that all relevant materials are available for review at the time of the audit.



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IRB documents, copies of the locally utilized informed consent forms, other regulatory documentation, if applicable.



Alliance Policy 2.8.7.1 Assessing Audit Findings An audit consists of reviewing and evaluating: Conformance to IRB and informed consent content requirements



CTMB Guidelines 5.2

Review of IRB Documentation and Informed Consent Content



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5.2.1 IRB For each protocol selected for an audit, the following documents should be the minimum items to be reviewed:



CTMB Guidelines 5.2

Review of IRB Documentation and Informed Consent Content

5.2.1 IRB For each protocol selected for an audit, the following documents should be the minimum items to be reviewed:

Full Initial IRB approval **AND** Annual re-approval Approval (or disapproval) of protocol amendments that affects more than minimal risk

Documentation of IRB approval or re-approval prior to patient registration



IRB REVIEW PROBLEM # 1

IRB REGULATORY RECORDS



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IRB REGULATORY RECORDS

Incomplete

- Difficult to track
- CIRB regulatory records not available



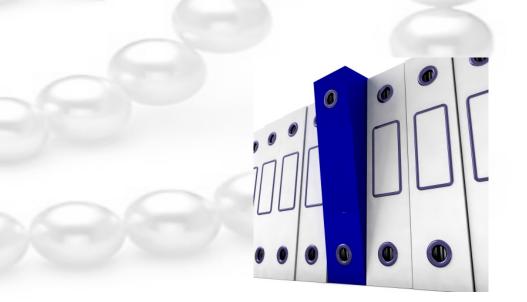




ORGANIZE!



Keep protocols AND documents separated





Keep protocols AND documents separated

Create a separate folder / dividers



Keep protocols AND documents separated

Create a separate folder / dividers
 Initial Approval
 Continuing Reviews
 Amendment Approvals





TIP!

FLAG AND FILE As You Go!

DON'T WAIT for a notice of an audit.



TIP!

FLAG AND FILE As You Go!

FLAG and FILE each approval when it is received!





FLAG AND FILE As You Go!

FLAG and FILE each approval when it is received! For automated systems (Local and CIRB): PRINT, FLAG and FILE immediately!



TIP!

On each FLAG write the following information

- Initial Approval/ Amendment/ Continuing Review
- IRB Approval/Acknowledgement Date
- Protocol Version Date (if applicable)



TIP!

ALTERNATIVELY

Use the flagging system WITH a legend/log accessible in the front of the binder to identify IRB Correspondence



REMEMBER! CIRB: IRB of Record Per CTMB Guidelines 5.2 The following will need to be on file for review



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REMEMBER! CIRB: IRB of Record Per CTMB Guidelines 5.2

The following will need to be on file for review

- Approval letter from the CIRB noting the local IRB accepts CIRB as the IRB of record
- All CIRB approval documents
- The study specific worksheet with local context



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IRB REVIEW PROBLEM # 2

LATE SUBMISSIONS TO IRB





IRB REVIEW PROBLEM # 2

LATE SUBMISSIONS TO IRB CTMB Guideline 5.2.1

Amendments (addendums or updates) must be approved by the IRB of record within 90 days of the Group's notification







DOCUMENT TRACKING





PEARL: DOCUMENT TRACKING

Conduct An Internal Audit of Protocol Document Submissions Monthly / Quarterly

Keep a Running List of Required Approvals / Deadlines





PEARL: DOCUMENT TRACKING

For automated systems / databases

Create a report in your local database that can run tracking reports





PEARL: DOCUMENT TRACKING

Highlight pertinent information for easy review/tracking Approval types Approval deadlines

TIP!

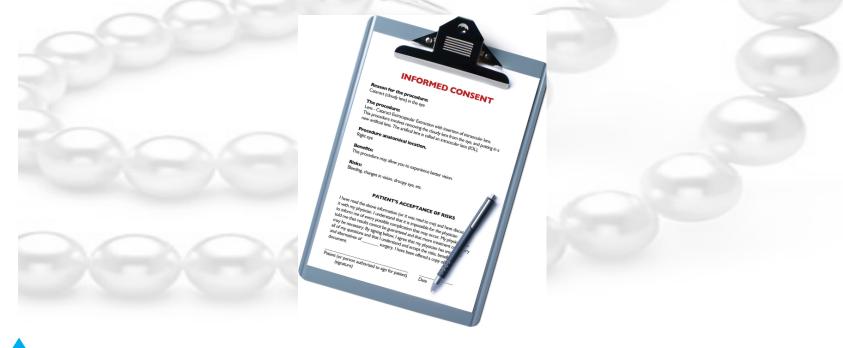
Review type



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INFORMED CONSENT CONTENT





INFORMED CONSENT CONTENT

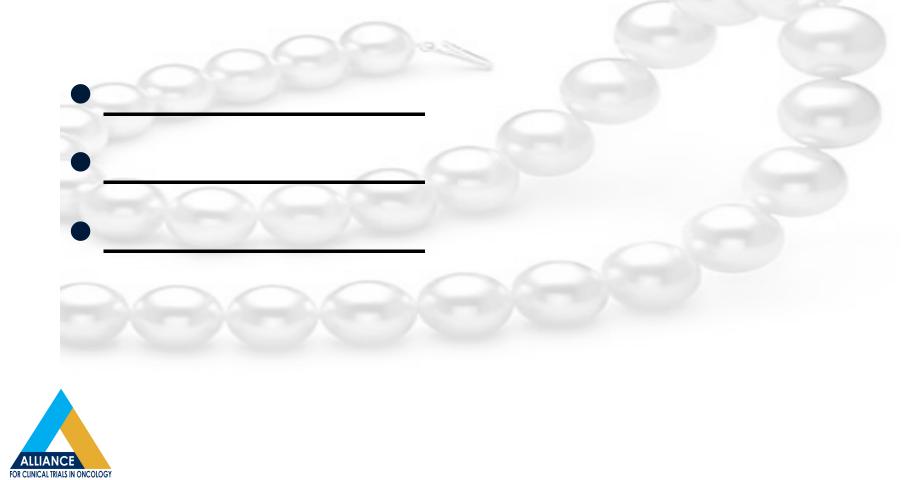
CTMB Guidelines 5.2.2

Each of the informed consent documents selected for audit must be reviewed to ensure they contain the risks and alternatives listed in the model informed consent document approved by the NCI.



INFORMED CONSENT CONTENT

Required Elements



INFORMED CONSENT CONTENT

Informed Consent Content (ICC) Review (Table B)

	ICC Deficiency Descriptions
	Involves research: purposes; duration of participation; description of procedures; identification of experimental procedures
	Description of risks or discomforts
	Description of any benefits to subject or others
	Disclosure of alternative procedures or treatments
suoi	Description of the extent of confidentiality of records
Regulations	Explanation regarding compensation and/or whether treatments are available if injury occurs
Federal Red	
t th	Unforeseeable risks to subject, embryo or fetus
Flements per the	Circumstances in which subject's participation may be terminated by investigator without subject's consent
a mo	Additional costs to subject which may result from participation in research
Required	Statement that new findings which may relate to subject's willingness to continue participation will be provided to subject
	Disclosure of approximate number of participants
	Statement stating: "A description of this clinical trial will be available on http://www.clinicaltrials.gov , as required by U.S. Law. This website will not include information that can identify you. At most, the website will include a summary of the results. You can search this website at any time."
	Statement that a copy of the consent will be given to study participant

http://ctep.cancer.gov/branches/ctmb/clinicalTrials/docs/Appendix_2.pdf



INFORMED CONSENT CONTENT PROBLEM

LOCAL CONSENT MISSING REQUIRED ELEMENTS





INFORMED CONSENT CONTENT PROBLEM

Local Consent Missing Required Elements

Common Missing Elements



INFORMED CONSENT CONTENT PROBLEM

Local Consent Missing Required Elements

- Omitted Risks or Discomforts
- Missing Statement of Unforeseeable Risks
- Omitted / Changed Alterative Treatments
- Missing Statement that new findings will be discussed
- Omitted study correlative / study companion questions







Duplicate Model Consent!



- Maintain the order and format of the Model Consent
- Add specific institution information
 <u>After</u> ensuring Model Consent format is in tact



- Do NOT Omit Risks
 Do Not Change Alternatives to Participation
- Discourage your IRB from rearranging the order of the study specific sample questions



If CIRB is the IRB of Record

The Local Consent should match the Model word for word



TIP!

Cut and Paste from the Model

Double check that adding..... does not omit



REMEMBER!

If local IRB requires changes obtain Lead Center / Sponsor Approval FIRST





Any substantive changes of information concerning risks or alternative procedures and/or translational research contained in the model informed consent document must be justified in writing by the Investigator. Investigators must forward copies of such changes, with their justifications, to the Alliance regulatory staff for review



REMEMBER!

 Maintain a copy of Sponsor approved changes in the IRB binder

 If CIRB is the IRB of record the study specific worksheet with local context will need to be on file for review



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Pearls of Wisdom: IRB Review

Please save questions for the panel at the end of the presentations.

