The quarterly newsletter from Human Research Protections Program | **Fall 2015**

HRPP Outlook

Corporate IRB ▪ Office of Research Education, Training and Resources ▪ Office of Research Compliance and Quality Improvement

McLaren HEALTH CARE

Association for the Accreditation of Human Research Protection Programs, Inc. — Full Accreditation

EQuIP Corner

PRIMARY INVESTIGATOR:

Are you in compliance with delegation of duties and oversight of your study?

by Patricia Ivery RN, MSN, QI and Education Specialist

The primary investigator (PI) assumes full responsibility and oversight of conducting a research trial to ensure protection of human subjects and integrity of the research data collected. It is common for the PI to delegate some of his or her research tasks to other individuals on the clinical research team. The research team is generally made up of individuals with varying degrees of research experience and education, such as sub-investigators, research coordinators, research nurses, physicians, nurse practitioners, pharmacists, biostatisticians, lab personnel, etc. Before the PI can delegate a particular activity, he or she must carefully evaluate each team member's capability of carrying out the delegated research task. Although delegation of duties is acceptable, any duty that is delegated to another individual remains the responsibility of the PI. In addition to delegation and evaluation, the PI is also responsible for ensuring that all persons participating in the study, regardless of title (i.e. fellow physician associates, employees), are informed about their obligations in meeting the requirements of the protocol. Each team member should also be reminded that they must follow institutional Human Research Protections Program (HRPP) policies and applicable federal regulations [Food and Drug Administration (FDA) and Department of Health and Human Services (DHHS)].

Regulations and HRPP Policy

Once the research team personnel understand their responsibilities, the PI must continually supervise all aspects of the study. It is important to remember that failure to supervise individual team members is considered a federal violation. According to the federal guidance on investigator responsibilities, the FDA focuses on four major areas regarding delegation of duty[2]:

1. Whether individuals who were delegated tasks were qualified to perform such tasks.

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2. Whether study staff received adequate training on how to conduct the delegated tasks and was provided with an adequate understanding of the study.
3. Whether there was adequate supervision and involvement in the ongoing conduct of the study.
4. Whether there was adequate, supervision or oversight of any third parties involved in the conduct of a study to the extent such supervision or oversight was reasonably possible.

Furthermore, during a HRPP quality assurance review or audit there will be an assessment of appropriate delegation by the PI, by asking the following questions[3]:

1. Have all research personnel received protection of human subjects training?
2. If applicable, have the research personnel received conflict of interest training?
3. Have all individual research personnel been given IRB approval to participate in the research project?
4. Are research personnel abiding by applicable regulations, guidance and policies relevant to the research study?
5. Are all research personnel trained to perform the necessary protocol procedures?
6. Are the qualifications of each individual research personnel sufficient for the delegated task?

In addition to delegation and evaluation, the PI is also responsible for ensuring that all persons participating in the study, regardless of title (i.e. fellow physician associates, employees), are informed about their obligations in meeting the requirements of the protocol.

Appropriate Delegation of Study-Related Tasks

All delegated duties or tasks should be documented correctly on a form known as the "Delegation of Duty" or "Authority" log. Written delegation is not federally required but can serve to validate proper delegation of duty. Remember the adage, "if it is not written, it was not done". The log should list appropriately qualified team members who have been delegated to carry out specific research duties[4]. Many industry sponsors provide delegation of duty or authority logs for study sites to complete. Although the log form may vary slightly from sponsor to sponsor, they generally require the same basic information. Basic information includes printed full name, signature and initials of each team member, start date, end date, assigned duties (usually indicated by checking boxes) and the PI's signature after each members list of delegation. If you are using a sponsor form, make sure you follow their guidelines on completion. If you are the sponsor-investigator, the HRPP office can provide a delegation of duty log. In addition, all training activities should be documented on a training log. The log must include content of training, dates, and individual's name. In the event that the sponsor does not provide a delegation log, or you are the sponsor-investigator, the HRPP office can supply a training log form to you.

It is the PI's responsibility to check the delegation of duty log form prior to the commencement of the study. Sponsor monitors and the HRPP will not only look to see that this form is completed; they will also verify that it accurately reflects the team member's capability and scope of practice. When assigning a task, the PI should ask questions such as:

- Are all team members aware of, and agree to carry out the assigned task?
- Does this task require medical training?
- Does this task require medical license?
- Does this individual have experience in research trials?
- Does this individual have in-depth understanding of the protocol and are they capable of consenting a subject?
- Has this person been adequately trained?

The PI must delegate tasks to team members who are appropriately educated, qualified, trained, experienced, and licensed (if applicable). An example of poor delegation decision-making is to delegate to a research nurse, the duty to conduct a medical physical examination as part of the protocol procedure. This is wrong for two reasons. 1) In most states, including Michigan, conducting medical physical examination is not within the scope of practice of a registered nurse who is not a nurse practitioner and 2) In some studies findings from a physical examination will determine a subject's eligibility. This is not the responsibility of the study coordinator or registered nurse. Another area of possible incorrect delegation is evaluation of adverse events. The research coordinator may collect data pertaining to an adverse event; however, the seriousness or relationship to the study drug or device lies solely with the investigator.

PI Oversight and Ongoing Involvement

Research studies must be conducted according to FDA and DHHS regulations. These safeguards the protections of research subjects, by ensuring the research team is knowledgeable about the study protocol and are adequately trained. Prior to initiating a study, the PI should establish that they have adequate time and resources, including competently prepared personnel to conduct the research study.

The PI should update the delegation of duty log in a timely manner as new personnel are added or removed, and/or study roles and responsibilities change. In order to maintain a trail of study conduct, expired versions should be retained.

Federal authorities recommend having an oversight plan in place. The PI should ask themselves the following questions concerning their oversight process:

- Is there a procedure in place for regular communication with the PI or unencumbered access to the PI?
- Is there a procedure or policy in place for handling and communicating to the PI any protocol deviations, subject safety issues, study queries, adverse event assessment, etc. ?
- Are there routine research team meetings with accompanying meeting minutes?
- What is your method for evaluating adherence to delegated duties?
- Do you regularly monitor staff adherence to the protocol or accuracy of data collection?
- Do you keep training/education records?

Summary

There are consequences for lack of delegation and oversight; consequences that can affect the safety of research subjects and the integrity of research data. The severity of these consequences can range from reporting a deviation to the IRB, to termination of an investigator's privileges to do research. The PI is the one and only team member ultimately responsible for the conduct of the study.

Are you in compliance with delegation and oversight of your study?

References

1. *Investigator Responsibility in conducting investigations of drugs or biologics [21 CFR 312.3(b) and 21 CFR 812.3(i)]*
2. *Guidance for Industry Investigator Responsibilities – Protecting the Rights, Safety, and Welfare of Study Subjects*
3. *HRPP Policy MHC_RP0125 – Investigator Responsibilities*
4. *International Conference on Harmonization Good Clinical Practice Guideline - 8.3.24*

Resident's Corner

Back to the Basics

As we begin a new academic year, many of you will be embarking on your first research projects as you move through your residency programs. It is our desire to make this process as 'user friendly' as possible. As a new Principal Investigator (PI), it will be very helpful for you to take a moment to review the information below, as it will provide you with some useful information prior to getting started. Remember, as the PI, all facets of your study are your responsibility.

Before you Begin

Paramount to your success is first meeting with your Academic Advisor (AA)** to ensure your project is feasible. All research submitted to the IRB by a resident or student, whether novice or seasoned, must be reviewed and approved by an AA before it is received by the MHC IRB for review. Approval by the academic advisor indicates that the study is found to be scientifically sound and can reasonably be expected to answer the proposed question. Academic Advisors are also responsible for ensuring that the PI has sufficient resources and facilities to conduct the proposed research.

One key element the IRB will be looking for at the time of your submission is a "Confirmation of Scholarly Review for Validity" worksheet, signed by your Academic Advisor. Per HRPP policy "MHC_RP0109 Criteria for IRB Approval" (section 5.1.5) the IRB needs to be assured that each project:

- Uses procedures consistent with sound research design
- Has a design which is sound enough to reasonably expect the research to answer its proposed question
- Will yield knowledge from the expected results which is sufficiently important to justify the risk

Getting acquainted with the HRPP website now will benefit you as you move through the research process. Some of the things you may want to browse first are:

- Resident Corner
- Policies and Procedures
- Guidance for Investigators
- Training Requirements
- IRB Forms

The Resident Corner contains a flow chart (also shown on page 5) which outlines the basics of the IRB submission process. We would suggest printing this flow chart and keeping it nearby as a reference guide. This will alleviate questions regarding the specific steps you need to take before, during, and after submitting your project to the IRB for review and determination.

Training requirements are of particular importance, as your project cannot be approved until the IRB has proof that all personnel listed on your study have completed all required training. As the Principal Investigator, you are responsible for ensuring this is done. MHC IRB requires that all staff involved in the research process (IRB members, IRB staff, researchers, and others involved in the review of human research) be certified via the Collaborative Institutional Training Initiative (CITI) program, which provides research ethics education to all members of the research community. Complete details regarding human subject assurance training can be found in the Training Requirements section of the HRPP website.

Privacy and Confidentiality

Even what appears to be a "simple record review", is not so simple. It is

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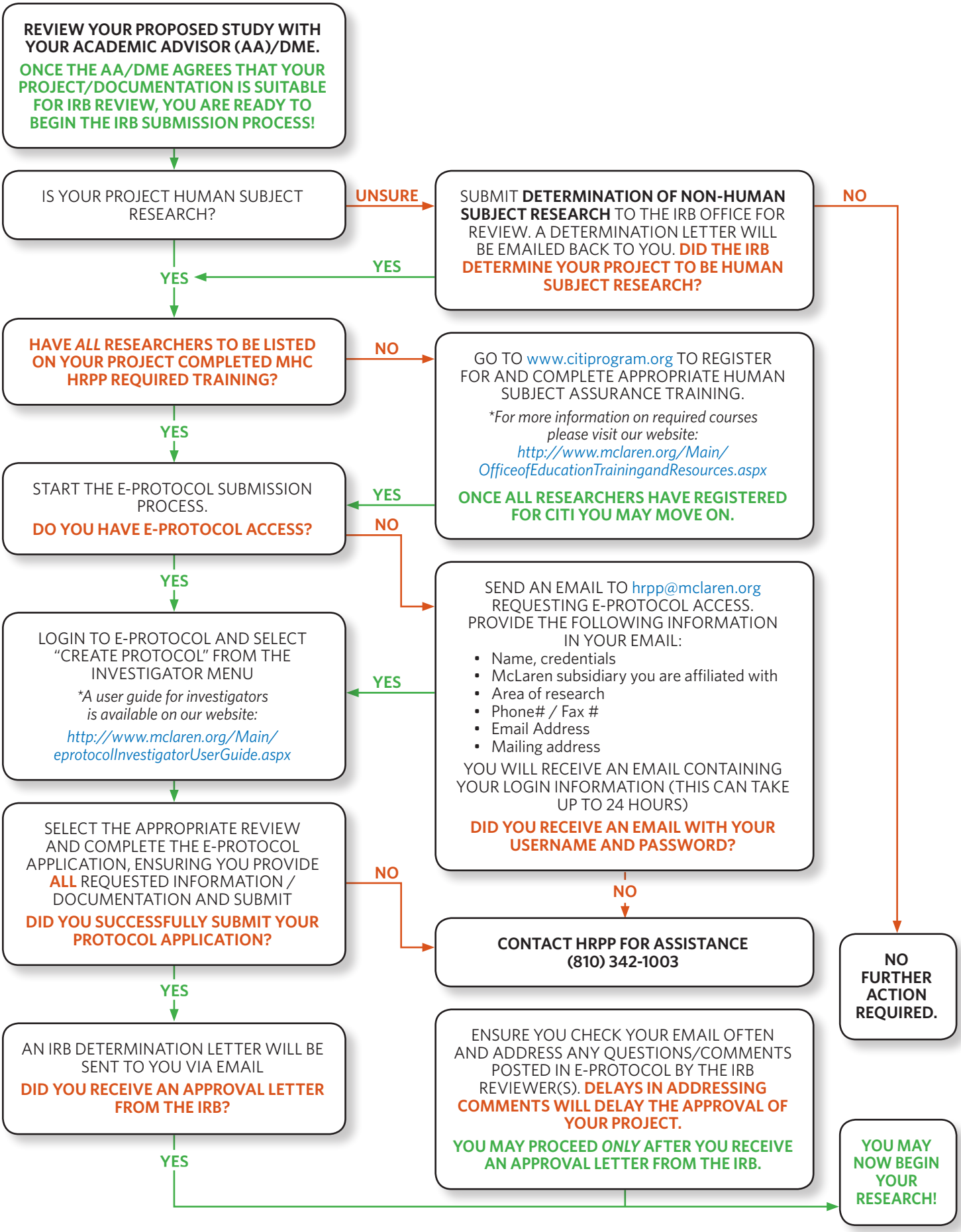
REVIEW YOUR PROPOSED STUDY WITH YOUR ACADEMIC ADVISOR (AA)/DME.
ONCE THE AA/DME AGREES THAT YOUR PROJECT/DOCUMENTATION IS SUITABLE FOR IRB REVIEW, YOU ARE READY TO BEGIN THE IRB SUBMISSION PROCESS!
IS YOUR PROJECT HUMAN SUBJECT RESEARCH?
UNSURE
SUBMIT DETERMINATION OF NON-HUMAN SUBJECT RESEARCH TO THE IRB OFFICE FOR REVIEW. A DETERMINATION LETTER WILL BE EMAILED BACK TO YOU. DID THE IRB DETERMINE YOUR PROJECT TO BE HUMAN SUBJECT RESEARCH?
NO
YES
YES
HAVE ALL RESEARCHERS TO BE LISTED ON YOUR PROJECT COMPLETED MHC HRPP REQUIRED TRAINING?
NO
GO TO www.citiprogram.org TO REGISTER FOR AND COMPLETE APPROPRIATE HUMAN SUBJECT ASSURANCE TRAINING.
*For more information on required courses please visit our website:
http://www.mclaren.org/Main/OfficeofEducationTrainingandResources.aspx
ONCE ALL RESEARCHERS HAVE REGISTERED FOR CITI YOU MAY MOVE ON.
YES
START THE E-PROTOCOL SUBMISSION PROCESS.
DO YOU HAVE E-PROTOCOL ACCESS?
YES
NO
SEND AN EMAIL TO hrpp@mclaren.org REQUESTING E-PROTOCOL ACCESS. PROVIDE THE FOLLOWING INFORMATION IN YOUR EMAIL:
• Name, credentials
• McLaren subsidiary you are affiliated with
• Area of research
• Phone# / Fax #
• Email Address
• Mailing address
YOU WILL RECEIVE AN EMAIL CONTAINING YOUR LOGIN INFORMATION (THIS CAN TAKE UP TO 24 HOURS)
DID YOU RECEIVE AN EMAIL WITH YOUR USERNAME AND PASSWORD?
YES
LOGIN TO E-PROTOCOL AND SELECT "CREATE PROTOCOL" FROM THE INVESTIGATOR MENU
*A user guide for investigators is available on our website:
http://www.mclaren.org/Main/eprotocolInvestigatorUserGuide.aspx
SELECT THE APPROPRIATE REVIEW AND COMPLETE THE E-PROTOCOL APPLICATION, ENSURING YOU PROVIDE ALL REQUESTED INFORMATION / DOCUMENTATION AND SUBMIT
DID YOU SUCCESSFULLY SUBMIT YOUR PROTOCOL APPLICATION?
NO
NO
CONTACT HRPP FOR ASSISTANCE (810) 342-1003
NO FURTHER ACTION REQUIRED.
YES
AN IRB DETERMINATION LETTER WILL BE SENT TO YOU VIA EMAIL
DID YOU RECEIVE AN APPROVAL LETTER FROM THE IRB?
ENSURE YOU CHECK YOUR EMAIL OFTEN AND ADDRESS ANY QUESTIONS/COMMENTS POSTED IN E-PROTOCOL BY THE IRB REVIEWER(S). DELAYS IN ADDRESSING COMMENTS WILL DELAY THE APPROVAL OF YOUR PROJECT.
YOU MAY PROCEED ONLY AFTER YOU RECEIVE AN APPROVAL LETTER FROM THE IRB.
YES
YOU MAY NOW BEGIN YOUR RESEARCH!

Getting to know the MHC IRB

Transitions...

HRPP is sad to announce the resignation of one of our long-standing members. Mike Jamrog , Privacy Officer at McLaren Greater Lansing, has served as a primary member of the MHC IRB since January 2012.

Mr. Jamrog will be retiring in the near future; therefore, he will be unable to continue his appointment as an MHC IRB board member. We wish Mike well in his future endeavors.

Additionally, we have had to say good bye to Jessica Gherardini and Chris Starke from McLaren Macomb, who both served as primary members of the board. Alternate members Dr. Harry Colfer, Dr. John Kazmierski, Dr. Andrew Teklinski, and Ms. Maggie Daniels were also recently removed from the IRB roster.

We would like to thank all of you for your time and efforts while serving on the MHC IRB.

New HRPP Coordinator

We are very pleased to announce a new member of the HRPP team. Markeda Richards has joined the HRPP department taking over the role of the HRPP Coordinator.

Markeda received a Bachelor of Science degree from the University of Michigan-Flint and comes to us with a background as a Clinical Subject Associate. Markeda's experience includes working for the University of Michigan for four years on both observational and interventional studies being conducted within Genesee County. She also has a combined total of nine years of experience in a clinical setting, with seven of those years being served at Genesys Regional Medical Center's Internal Medicine Residency Program.

Markeda will provide coordination support of the operation of the HRPP department. Her responsibilities will include a wide variety of administrative and support services for the HRPP department, as well as to researchers, IRB members and external agencies. Markeda will coordinate the daily activities associated with the processing of research protocols and many other facets of human research protection management and regulatory compliance.

Please join us in welcoming Markeda as our newest team member.

Resident's Corner

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likely that such a project will include the access and / or use of protected health information (PHI), and with that comes the risk of privacy breach or loss of confidentiality. Important questions to ask yourself regarding confidentiality / privacy are:

- Where will I store information/data for my study?
- How long must I keep it?
- Who will have access to it?
- How will I ensure access is restricted to those authorized to have access?
- If I have more than one investigator/other research personnel listed on my study, how will we communicate information regarding the study?

Guidance to assist you in answering these questions can be found right in our HRPP policies, specifically:

- MHC_RP0114 IRB Documentation and Research Record Retention
- MHC_RP0125 Investigator Responsibilities

Remember: The IRB must approve all research projects PRIOR to the start of any data gathering, EVEN retrospective chart reviews.

**Everyone listed on the study application must meet the institutional requirements for human subjects assurance training. As such, Academic Advisors are required to complete the same CITI training requirements as the investigator.*

NEW Active Research Projects

New studies open to enrollment at McLaren since June 2015.
For a complete list of studies please visit our website at: http://www.mclaren.org/Main/ClinicalTrialsHRPP.aspx

BEST-CLI Trial
Randomized, Multicenter, Controlled Trial to Compare Best Endovascular versus Best Surgical Therapy in Patients with Critical Limb Ischemia [IDE# G140030]
– McLaren Flint

INTREPID
An open label randomized study to determine the rate of cardiovascular events at 1 year for patients with elevated troponins post major non-cardiac surgery and the impact of ticagrelor versus aspirin on the occurrence of cardiovascular events. (INTREPID - INvestigating TicagREIor treatment in Patients with myocardial Injury post non-carDiac surgery)
– McLaren Bay Region

2013-021
Phase I Study of Thoracic Radiotherapy and Concurrent Chemotherapy with Soy Isoflavones in Stage III NSCLC (Non-Small Cell Lung Cancer) Patients [IND# 118659 for Isoflavone (Novasoy 400), Premetrxed Sodium (ALIMTA), Cisplatin (Platinol), and Etoposide (VP-16)]
– Karmanos Cancer Institute Oncology Centers and Radiation Oncology Centers in Bay City, Lapeer, Mt. Pleasant, and Petoskey

COMMANDER HF
A Randomized, Double-blind, Event-driven, Multicenter Study Comparing the Efficacy and Safety of Rivaroxaban with Placebo for Reducing the Risk of Death, Myocardial Infarction or Stroke in Subjects with Heart Failure and Significant Coronary Artery Disease Following an Episode of Decompensated Heart Failure [IND# 112,582]
– McLaren Bay Region, McLaren Macomb

GREAT
Global Registry for Endovascular Aortic Treatment (GREAT) Outcomes Evaluation [IDE# G1200122]

JUNIPER
Protocol I3Y-MC-JPBK(a): A Randomized Phase 3 Study of Abemaciclib plus Best Supportive Care versus Erlotinib plus Best Supportive Care in Patients with Stage IV NSCLC with a Detectable KRAS Mutation Who Have Progressed After Platinum-Based Chemotherapy [Abemaciclib IND# 119,489]
– Karmanos Cancer Institute Oncology Centers and Radiation Oncology Centers in Bay City, Flint, Lapeer, Mount Clemens, and Petoskey

2013-052
Karmanos Cancer Institute Biobanking Protocol
– Karmanos Cancer Institute Medical Oncology Centers and Radiation Oncology centers in Bay City, Flint, Lansing, Lapeer, Mt. Clemens, Mt. Pleasant, and Petoskey

GEMINI ACS 1
A Randomized, Double-blind, Double-dummy, Active-controlled, Parallel-group, Multicenter Study to Compare the Safety of Rivaroxaban versus Acetylsalicylic Acid in Addition to Either Clopidogrel or Ticagrelor Therapy in Subjects with Acute Coronary Syndrome [Rivaroxaban IND-75,931]
– McLaren Bay Region, McLaren Macomb

VOYAGER PAD
BAY 59-7939/174454 - An International, multicenter, randomized, double-blind, placebo-controlled phase 3 trial investigating the efficacy and safety of rivaroxaban to reduce the risk of major thrombotic vascular events in patients with symptomatic peripheral artery disease undergoing lower extremity revascularization procedures. [Rivaroxaban, IND-112,448]

Upcoming Education

2015 BROWN BAG SESSIONS!

The Education Quality Improvement Program (EQuIP) offers Brown Bag education sessions. The sessions are provided in a webinar format and take place around the noon lunch hour. Sessions are open to all research professionals, coordinators, residents, students, staff or faculty. Keep an eye on your email for registration information.

HUDs and Emergency Research
December 8, 2015

DON'T FORGET

Research CANNOT begin until the proposed study has been approved by the IRB. If you are conducting human subject research without IRB approval, you are in violation of Federal Regulations and subject to non-compliance.

Revised Policies

The following policies have been updated:

- HRPP Manual
- MHC_RP0102 FWA & IRB Registration
- MHC_RP0105 Exempt Review of Human Subject Research
- MHC_RP0109 Criteria for Approval of Human Subject Research

A full list of current HRPP policies can be found on our website at: http://www.mclaren.org/Main/IRBPoliciesProcedures.aspx

Assistance for Researchers:

Do you have questions related to eProtocol, IRB forms, policies, or review procedures?

Our Office of Research Education, Training and Resources holds office hours to help Researchers, including graduate students and residents, who are preparing Institutional Review Board (IRB) submissions and exemption requests. Sessions are intended to help researchers, students and their advisors navigate eProtocol (electronic IRB submission system) and learn about policies and review procedures.

No appointment is necessary. Please contact Jodi Reetz at (810) 342-1003 or (810) 342-1024 or via e-mail at Jodi.Reetz@mclaren.org for questions or more information.

Assistance for IRB Members:

Do you have questions related to eProtocol, IRB member checklists, policies, IRB review process or IRB criteria for approval?

Our Office of Research Education, Training and Resources holds office hours to help IRB Members to navigate eProtocol (electronic IRB submission system) and learn about policies and review procedures, including newly developed checklists. Sessions could be done either in person or via telephone.

No appointment is necessary. Please contact Jodi Reetz at (810) 342-1003 or (810) 342-1024 or via e-mail at Jodi.Reetz@mclaren.org for questions or more information.

Congratulations to Colette Quart from MCRI on being our most recent trivia winner!

Answer to the Summer 2015 Trivia Question: The IRB

McLaren HEALTH CARE

Mission statement: McLaren Health Care, through its subsidiaries, will be the best value in health care as defined by quality outcomes and cost.

If you have ideas for stories that you'd like to see in a future issue of ***HRPP Outlook***, lana.gevorkyan@mclaren.org.

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