McLaren HEALTH CARE

BROWN BAG SESSION

ON

HRPP EMERGENCY PREPAREDNESS PLAN

&

OVERVIEW OF ICH GCP GUIDELINES FOR RESEARCHERS AND RESEARCH STAFF

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

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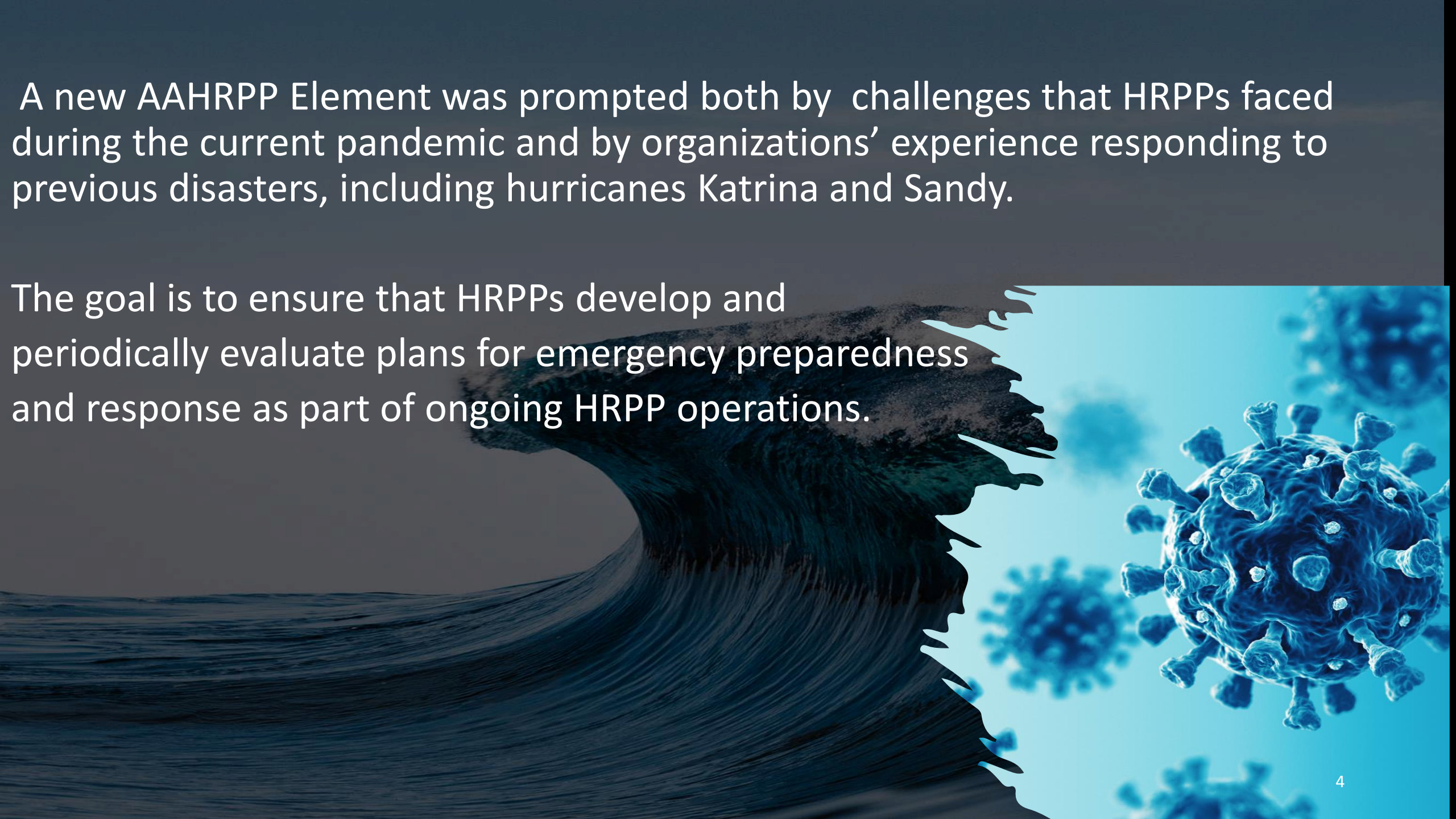
HRPP EMERGENCY PREPAREDNESS PLAN

Learning Objectives

- AAHRPP guidelines on HRPP Emergency Preparedness Plan
- Identifying potential emergencies
- Why HRPP need Emergency Preparedness Plan?
- Where can I find MHC policies and procedures?
- Who is responsible for the plan at MHC?
- During Emergency Situation
  - Assessment
  - Communication
  - Routine Operation
- Impact on Information Technology
- Education and Evaluation Plan

A new AAHRPP Element was prompted both by challenges that HRPPs faced during the current pandemic and by organizations' experience responding to previous disasters, including hurricanes Katrina and Sandy.

The goal is to ensure that HRPPs develop and periodically evaluate plans for emergency preparedness and response as part of ongoing HRPP operations.



AAHRPP's Element I.1.H

The Organization has and follows written policies and procedures specifically designed to protect the rights and welfare of research participants during an emergency. The Element includes four essential requirements:

1. The HRPP has an emergency preparedness plan, appropriate to the size and complexity of the HRPP

2. The plan is periodically evaluated and, when necessary, adjusted to ensure continuity of operations

3. Organizations provide education about their emergency response plan for IRB members, staff, researchers, and other members of the HRPP

4. Persons in the HRPP are knowledgeable about the organization's expectations during emergencies

1. Identifying Potential Emergencies

- Public health emergencies like the COVID-19 pandemic etc.
- Weather-related events like hurricanes, tornados etc.
- Natural disasters like earthquakes, flood etc.
- Man made emergencies like cybersecurity incidents (data breaches), war etc.

2. Why HRPP need Emergency Preparedness Plan?

- Human Research Protection Program be able to function in its protective capacity throughout any disaster or emergency
- Sustainability of MHC IRB during the situation
- Protection of Human Research Participants in currently enrolled ongoing studies at MHC
- Align with other MHC system plan like Information technology, HR, Finance etc.

3. Where can I find MHC Policies and Procedures?

Research Integrity Website Section - “Policies and Procedures”
https://www.mclaren.org/main/research-policies-procedures

MHC_RP0204_Emergency Preparedness Plan
https://www.mclaren.org/Uploads/Public/Documents/corporate/Research-Polices/MHC_RP0204-Emergency-Preparedness-Plan.pdf

4. Who is responsible for the Plan?

Research Integrity Manager

VP of Clinical Excellence and Research

Institutional Official and/or designee

Responsible for developing, maintaining, and carrying out the HRPP emergency preparedness, continuity and recovery plan.

PLAN

SITUATION ASSESSMENT

5. Situation Assessment

The Institutional Official or designee, the MHC IRB chair and Research Integrity leadership will assess:

- The nature of the event
- The level of risk
- Whether the situation impact MHC HRPP / Research Integrity Department / IRB operations
- Ability to access clinical site (building, work facility)
- Availability of alternative locations
- Transfer of the IRB documents to alternative sites unaffected by the event, may be necessary

5. Situation Assessment continue…..

The Institutional Official or designee, the MHC IRB chair and Research Integrity leadership will assess:

- Viability and security of paper documentation
- Effect of event on study participants / Research staff
- Functionality of communications technology and ability to communicate with Investigator and study staff
- Anticipated time to recovery

This assessment and response will include any Federal, State, or local government directives and guidelines.

6. Considerations

- ❑ Determine if work may need to occur remotely or at an alternative off-site MHC office location.
- ❑ Work with staff to determine capacity of workload to prioritize protocol processing and continuing review applications
- ❑ The organization shall proactively identify external IRBs on which it can rely temporarily during an emergency.
- ❑ Determine the types of research that might continue and the types that the organization may need to temporarily postpone.
- ❑ If applicable, notify the research community of limited capacity to process and review submissions
- ❑ If necessary to continue random reviews of research conduct, the Research Compliance office will notify researchers of remote monitoring instead of on-site visit.

PLAN

COMMUNICATION

7. Communication

- ✓ Notifications of contingency plan implementation to the research community will be made via the Research Integrity website https://www.mclaren.org/main/mclaren-irb and email through the electronic application submission system (IRIS)

- ✓ Communication with regulatory authorities (FDA, NIH etc.) for guidelines, feedback

PLAN

IRB MEETINGS

8. Conducting the IRB meetings in Emergency situation

- Need for flexibility attending convened IRB meetings to achieve quorum and regulatory meeting requirements.
- To maintain meeting continuity, it may be necessary to implement alternative review procedures including virtual platform or teleconference.
- If a virtual meeting or teleconference is also not feasible under the circumstances of the emergency, determine the need to reschedule applicable meetings.

PLAN

CONTINUING APPLICATION

9. How to handle continuing application?

If currently approved human research has or will expire prior to MHC IRB review:

- It may be necessary to implement procedures outlined in MHC_RP0111 Study suspension, Termination and Investigator Hold, to protect participants from harm.

- The additional considerations in the reviewer's worksheet may be incorporated into IRB reviews where appropriate to maximize regulatory flexibility while continuing to ensure research subject safety during the emergency/disaster.

9. How to handle continuing application? Continue…

If currently approved human research has or will expire prior to MHC IRB review:

- In instances where the convened IRB is unable to meet and IRB approval for a study may lapse, the IRB Chair can determine whether subjects can continue to participate in research activities if it is in the best interest of already enrolled subjects.

10. How IRB will handle ongoing studies?

Determine whether additional communications to the research community are necessary to inform investigators of any additional measures the IRB will take to maximize regulatory flexibility during the emergency/disaster and notify the community as appropriate such as:

- ✓ Use of waivers of documentation of consent for minimal risk research.
- ✓ In lieu of protocol site visits, alternate methods for safely assessing patient may be identified (e.g., phone contact, virtual visit, alternate location).
- ✓ In certain circumstances, it may become necessary to rely on an accredited external IRB with which MHC has a reliance agreement in place.

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11. Investigators Responsibilities during Emergency

IRB chair or designee will assess the potential impact on research participants with a focus on protection from harm. These assessments will be conducted with the applicable investigators, as appropriate:

- ✓ Some research participants may need to continue their investigational interventions or receive an alternative intervention to assure their safety and wellbeing such as the use of remote study visits, conference calls, or video conferencing.

- ✓ Some research studies may need to halt in-person interactions or change locations of interactions to assure participant safety and well-being.

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11. Investigators Responsibilities during Emergency continue…

IRB chair or designee will assess the potential impact on research participants with a focus on protection from harm. These assessments will be conducted with the applicable investigators, as appropriate:

- ✓ Some research studies may need to halt recruitment and enrollment throughout the emergency period.
- ✓ Researchers will work with IT, research pharmacy and applicable laboratories to ensure the research data and/or specimens collected for the studies are stored and backed up appropriately to protect them depending on nature of disaster.

PLAN

RESEARCH INFORMATION TECHNOLOGY

12. Impact on Information Technology

- Assess the potential impact on Information Systems.
- The Research Integrity staff will work with IT resources and/or electronic system vendors to ensure continuity of operations if electronic systems are inaccessible or not operational for extended periods of time during an emergency/disaster.
- The Research Integrity manager will collaborate with the IRB electronic system administrator and the vendor of the IRB's electronic system to ensure that records are maintained on a secure server that is accessible in the event of an emergency.
- Consider use of "downtime" procedures if systems are not able to be accessed.

PLAN

EDUCATION AND EVALUATION

13. Educating the Research community

- Developing education and training material to HRPP/IRB and research community to address emergency preparedness and response and update periodically as needed.

- Post HRPP emergency preparedness plan for research community on the Research Integrity website and email through electronic IRB software system if available. https://www.mclaren.org/main/mclaren-irb

- Research Integrity manager or designee will periodically evaluate HRPP emergency preparedness plan with the annual HRPP evaluation (MHC_RP0202 Annual Evaluation of the Human Research Protections Program) and make changes when appropriate.

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OVERVIEW OF ICH GCP GUIDELINES FOR RESEARCHERS AND RESEARCH STAFF

Learning Objectives

- Define ICH GCP
- History and need for ICH GCP
- Outline GCP goal
- Background and History on ICH GCP
- 13 Core principles of GCP
- Who and Why we need GCP training
- How we can get trained on GCP

What is ICH GCP?

- First produced in 1996
- The International Council for Harmonization of Technical Requirements for Pharmaceuticals for Human Use (ICH) Guideline for Good Clinical Practice (GCP) is an internationally agreed standard that ensures ethical and scientific quality in designing, conducting, recording and reporting trials that involve participation of human subjects.

Why GCP was needed?

- Increased Ethical Awareness
- Improved Trial Methods
- Clinical Trial Concept Better Understood
- Public/Political Concern over Safety Aspects
- Frauds and Accidents during Trials
- Growing Research and Development Costs
- Increasing Competition
- Mutual Recognition of Data

Goal of Good Clinical Practice (GCP)

Good Clinical Practice = Ethics + Quality Data

Internationally agreed and harmonised ethical & scientific quality standard

Ensures that the rights, safety, dignity & wellbeing of participants are protected

Covers standards for trial design, conduct, recording & reporting

Ensures credibility of data

Describes the responsibilities of investigators, sponsors, monitors and IRBs in the conduct of clinical trials.

Where can I find ICH GCP information?

https://www.ich.org/page/ich-guidelines

QUALITY

https://www.ich.org/page/quality-guidelines

SAFETY

https://www.ich.org/page/safety-guidelines

EFFICACY

https://www.ich.org/page/efficacy-guidelines

https://database.ich.org/sites/default/files/E6_R2_Addendum.pdf

MULTIDISCIPLINARY

https://www.ich.org/page/multidisciplinary-guidelines

13 Core Principles of ICH E6 GCP

1. Ethical conduct

- Conduct trials according to the ethical principles originating from the Declaration of Helsinki

2. Risks & benefits

- Assess risks & benefits; trial should *only* start & continue if anticipated benefits justify the risk

13 core principles continue….

3. Participant's right and safety

- Ensure participant rights & safety prevail
- #1 priority

4. Adequate background information

- Must have adequate justification (inc. clinical & non-clinical information on an IMP, where applicable) to support the proposed trial

13 Core Principles continue….

5. Protocol

- Clear, detailed protocol defining scientifically sound trial (and peer reviewed)

6. Follow the protocol

- Trial must be conducted in compliance with approved protocol
- Have a system to deal with and review/monitor non-compliances

13 core principles continue….

7. Responsibility for medical care

- The person responsible for medical care of participants must be appropriately qualified. At a recruiting site, this will be the PI

8. Training, education, experience

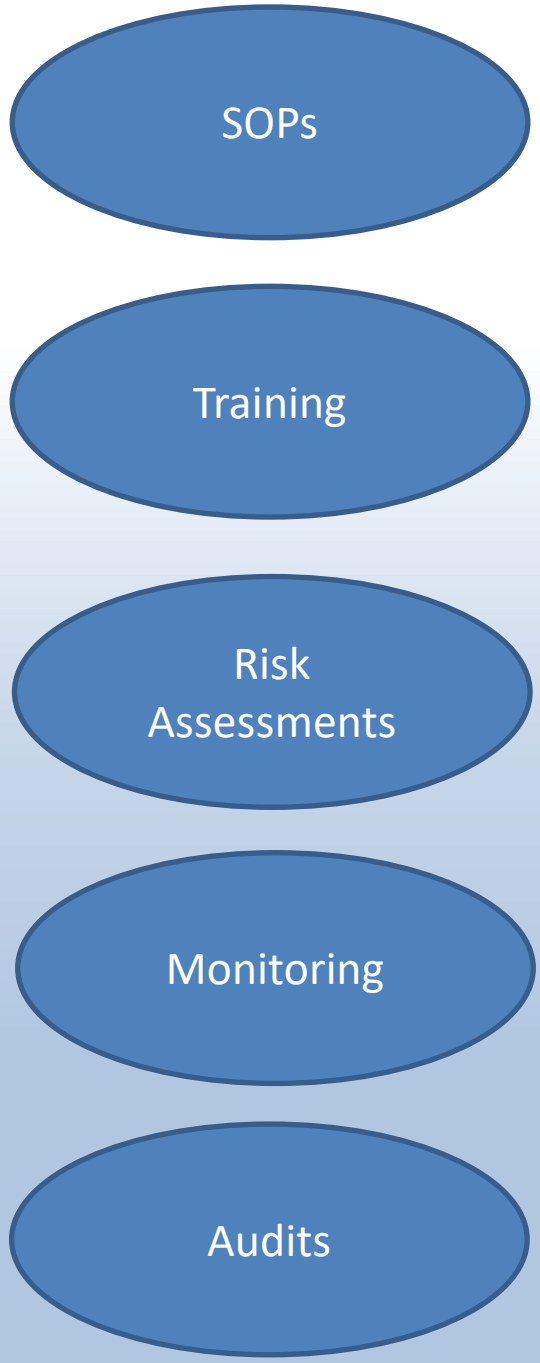
- Everyone involved in a trial must be suitably educated, trained & experienced to perform their delegated task(s)

13 core principles continue….

9. Informed consent	• Freely given informed consent must be obtained from each participant
10. Trial documentation	• Record, handle & store information in a way that allows for accurate reporting, interpretation & verification

13 core principles continue…..

11. Data protection/security	• Identifiable data must be collected, stored and handled in accordance with the applicable regulatory requirements
12. IMPs & GMP	• IMPs should be manufactured, stored & handled in accordance with Good Manufacturing Practice and used in accordance with approved protocol



13. Importance of Quality Assurance

- Systems with procedures that assure the quality of every aspect of the trial should be implemented

Difference between ICH E6 and FDA regulations

- ICH E6 requires Investigator to obtain IRB assurance that the IRB is organized and operates in compliance with ICH GCP (ICH GCP 5.11)
- ICH requirement for potential access to identifiable research records by third parties. (ICH GCP 4.8.10(n))
- ICH allows broader access to research records and confidential medical records than required by FDA
- ICH includes detailed requirements about collecting essential documents (ICH GCP 8.1)

Difference between ICH E6 and FDA regulations continue……..

- Investigator responsibilities statement form 1572 (FDA 21 CFR 312.53)
- ICH requirement for sponsor responsibilities of monitoring (ICH GCP 5.18)
- ICH GCP require prior to a subject's participation in the trial, the written informed consent form should be signed and personally dated by the subject or by the subject's legally acceptable representative, and by the person who conducted the informed consent discussion (ICH 4.8.8 and FDA 21CFR 50.27 (a))
- Element of ICF – Alternative treatment (ICH (2016) E6 Section 4.8.10(i))

Difference between ICH E6 and FDA regulations continue……..

Resources:

- Institutional Review Boards, 21 CFR § 56 (2016).
- International Council for Harmonization of Technical Requirements for Registration of Pharmaceuticals for Human Use (ICH). 2016. "**International Council for Harmonisation (ICH) Harmonized Guideline: Integrated Addendum to ICH E6(R1): Guideline for Good Clinical Practice E6(R2)**." Accessed December 29.
- Investigational New Drug Application, 21 CFR § 312 (2016).
- Protection of Human Subjects, 21 CFR § 50 (2016).
- Protection of Human Subjects, 45 CFR § 46 (2017).

Is GCP applicable to our organization/research?

An organization should determine ICH-GCP (E6)'s applicability……..

- Is ICH-GCP (E6) applied to all research conducted by the organization or limited to certain types of research (e.g., industry-sponsored clinical trials)?
- Are all requirements of ICH-GCP (E6) followed or limited to certain areas (e.g., IRB/IEC section only)?
- If the sponsor requires ICH-GCP (E6) be followed, the organization should inform the sponsor if the organization does not follow all of ICH-GCP (E6).
- If there is a contract or funding agreement that requires ICH-GCP (E6) be followed, the contract should include the extent or limit that the organization follows ICH-GCP (E6).

Is GCP applicable to our organization/research?

McLaren Health IRB commits to compliance with the International Council on Harmonization-Good Clinical Practices ("ICH-GCP") E6 to the extent ICH-GCP E6:

- is consistent with applicable federal regulations
- defined in clinical trial contract agreement with sponsors
- required by funding agency

McLaren Healthcare expectations for fulfilling NIH GCP requirement

- All Investigators and staff who are involved in the design, conduct, oversight, management, recording, or reporting of an active NIH-funded clinical trial must be GCP certified through a qualifying training provider (MHC affiliated CITI training program)

- The study team member is responsible for obtaining a GCP certificate displaying the course completion date, and providing that certificate upon request of the research sponsor or the institutional review board (IRB).

- GCP training must be renewed every three (3) years upon initial certification expiration, as long as the study team member is involved on an active clinical trial.

How can we get GCP trained?

Individuals seeking training in Good Clinical Practice (GCP) may complete one of two available **Collaborative Institutional Training Initiative (CITI) web-based** courses:

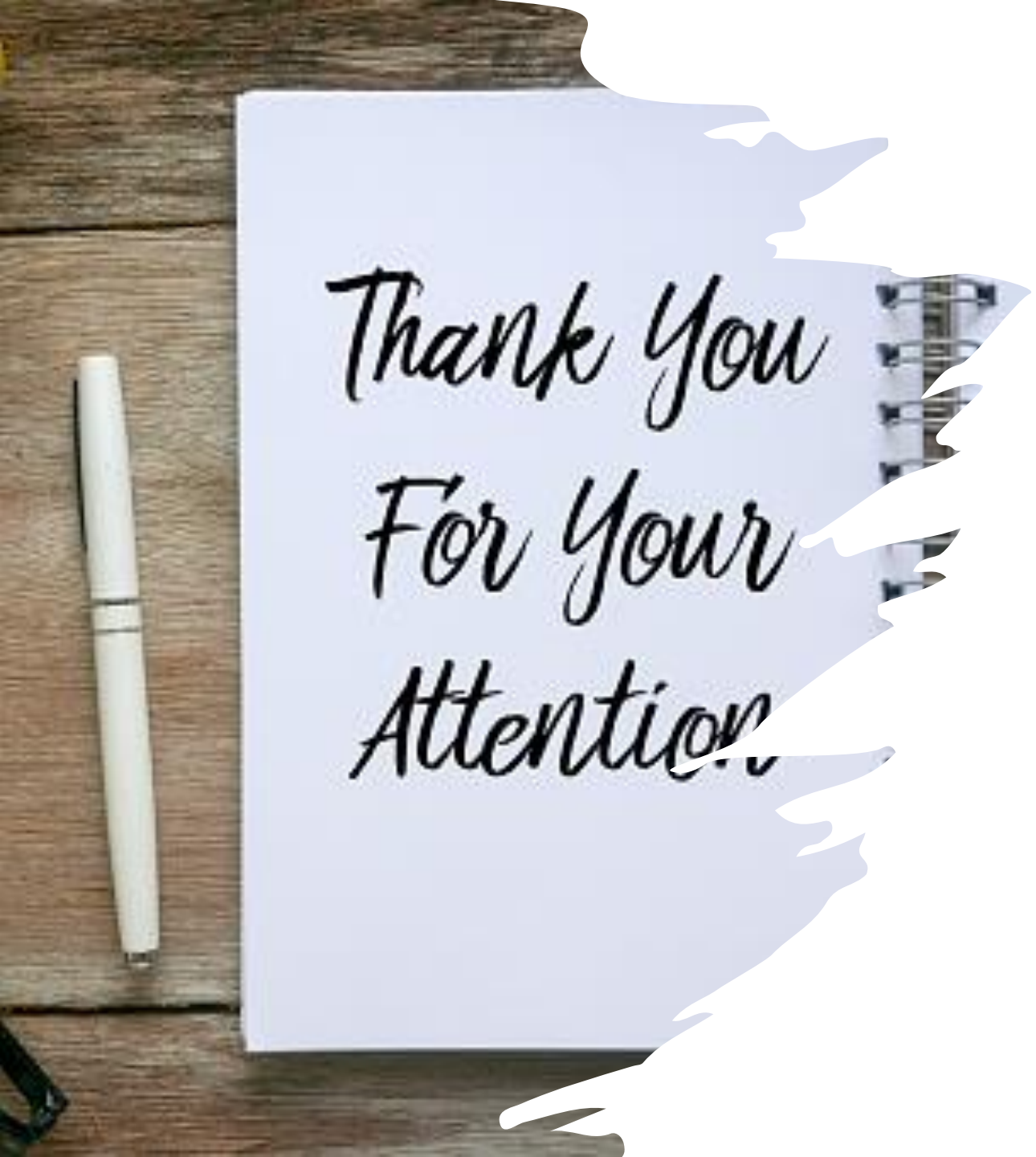
- **Good Clinical Practice for Clinical Trials with Investigational Drugs and Biologics (US FDA Focus)**. This course includes references to FDA regulations and guidance. In addition, this course meets the minimum criteria for ICH GCP training as recognized by TransCelerate BioPharma to allow mutual recognition of GCP training among trial sponsors AND NIH requirements (https://about.citiprogram.org/news/citi-program-gcp-training-complies-with-nih-policy)

- **Good Clinical Practice Social and Behavioral Best Practices for Clinical Research**

How can we get GCP trained?

McLaren Health Care IRB will accept GCP training from the following:

- Industry sponsors (e.g., organizations, etc. registered with TransCelerate Biopharma Inc.'s GCP Training Mutual Recognition program(link is external))
- Federal sponsors (e.g., NIH's NIAID GCP(link is external) or National Drug Abuse Treatment Clinical Trials Network GCP(link is external))



For Questions & Feedback

Contact

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Knowledge check

Why does the HRPP need Emergency preparedness plan, **select all that apply:**

1. Human Research Protection Program be able to function in its protective capacity throughout any disaster or emergency
2. Sustainability of MHC IRB during the situation
3. Protection of Human Research Participants in currently enrolled ongoing studies at MHC at the time of Emergency situation
4. HRPP needs to complete the annual report

Knowledge check

Who is **Not responsible** for developing, maintaining, and carrying out the HRPP emergency preparedness, continuity and recovery plan? **Select all that apply.**

1. Research Integrity Manager

2. Principal Investigator

3. VP of Clinical Excellence and Research

4. Institutional Official and or Designee

Knowledge check

If currently approved human research has or will expire prior to MHC IRB review during the Emergency situation. **Which of the following statements is false?**

1. IRB Chair can determine whether subjects can continue to participate in research activities if it is in the best interest of already enrolled subjects.

2. Principal Investigator can determine whether subjects can continue to participate in research activities if it is in the best interest of already enrolled subjects.

3. It may be necessary to implement Study suspension, Termination or Investigator Hold to protect participants from harm.

Knowledge check

During the Emergency situation, **all of the following statements are true *except*:**

1. Consider need for flexibility attending convened IRB meetings to achieve quorum and regulatory meeting requirements.

2. To maintain meeting continuity, it may be necessary to implement alternative review procedures including virtual platform or teleconference.

3. If a virtual meeting or teleconference is also not feasible under the circumstances of the emergency, determine the need to reschedule applicable meetings.

4. It is acceptable if the meeting quorum is not achieved.

Knowledge Check

The two important goals of the ICH E6 standard are:

1. To assure that sponsors select sites based on qualifications; to assure that data are reported on time.

2. To assure that the rights, well-being, and confidentiality of trial subjects are protected; to assure that trial data are credible.

3. To assure that the rights, well-being, and confidentiality of trial subjects are protected; to assure that data are reported on time.

4. To assure that all patients have access to a clinical trial; to assure that trial data are credible.

Knowledge check

ICH E6 describes standards that apply to:

1. Investigators, sponsors, and Institutional Review Boards (IRBs) / Independent Ethics Committees (IECs) / Research Ethics Boards (REBs).

2. Investigators only.

3. IRBs only.

4. Research sponsors only.

Knowledge check

ICH topics and guidelines fall into four main categories:

1. Sponsor, Investigator, Statistical Analysis, Research Ethics
2. Quality, Security, Efficiency, Multidisciplinary
3. Quality, Safety, Efficacy, Multidisciplinary
4. Sponsor, Investigator, IRB, monitor IRBs only.