

The ORARC Quality Improvement Program (QIP) Can Help!



❖ QIP Services

- QIP Consultation
- IRB/ESTR Submission Assistance
- Study Management Tools (e.g., logs and Regulatory Binder)
- Investigator/Study Staff Training

❖ [QIP Service Request Form](#)

❖ QIP Education Sessions

- ❖ December: **Closing time, Your Research Can't Stay Here: What Researchers Departing HLC Schools Should Know**
- ❖ January: **Digital Accessibility Essentials**
- ❖ Registration for all sessions now available via the [Harvard Training Portal](#).
- ❖ **Contact QIP with any little (or big) question at all!**



Internal Study Monitoring and What You Should Know

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Agenda



- Internal Study Monitoring and What You Should Know
- Areas of Common Errors
- Avoid Protocol Deviations
- Common Areas of Informed Consent Errors
- The what, when, why and where to report
- ESTR RNI Submission
- Who should submit report

Internal Study Monitoring and What You Should Know



- Internal Study Monitoring is the process in which a study team regularly reviews study procedures and documentations to ensure compliance with regulatory and institutional requirements.
- Purpose of Internal Study Monitoring:
 - Ensure proper record keeping
 - Retention of required regulatory documents and participant files
 - Adherence to the IRB-approved protocol and/or IRB policies and procedures

Internal Study Monitoring and What You Should Know

continued

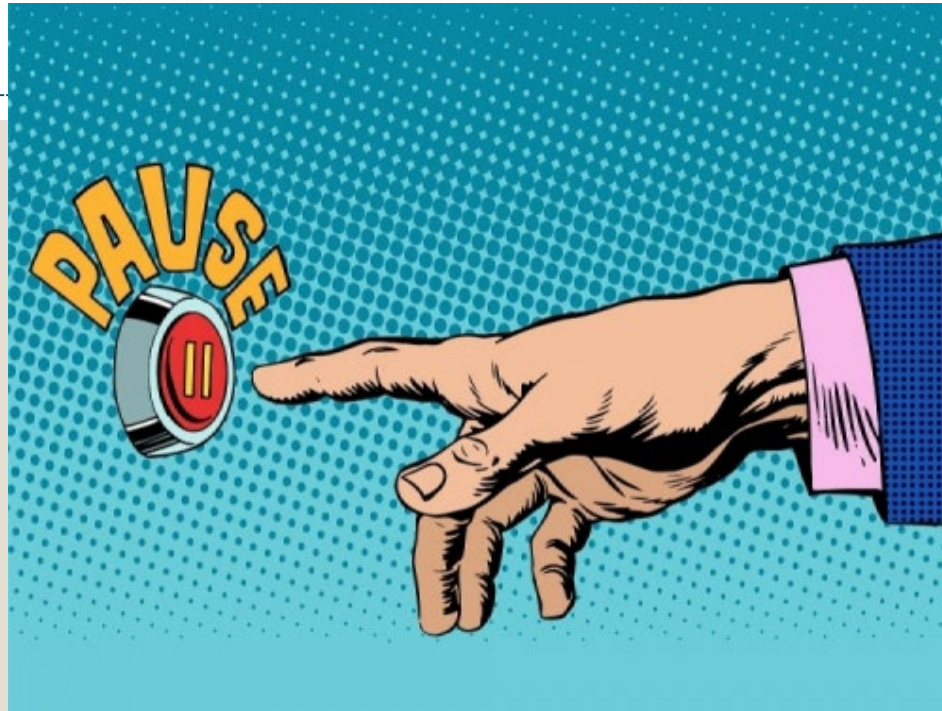


- **What monitoring plans should describe:**
 - Who is responsible for file maintenance
 - What will be maintained
 - How often files will be reviewed and using what method
 - Where documentation will be retained (for both Regulatory Documents and Participant files)
- **The plan for monitoring regulatory compliance should be included in the Research Protocol under section 21.1.**

QIP Study Management Tools



- QIP has created tools and templates to help with internal study management
 - Regulatory Binder
 - ✦ QIP has developed a template “Regulatory Binder” for organizing and maintaining physical as well as electronic regulatory documentation.
 - ✦ Our template offers input regarding both requirements as well as best practices for which documents to maintain during and after conducting a study.
 - Investigator Self-Assessment
 - ✦ These checklists assist in maintaining and organizing study documentation and assisting in maintaining compliance.
 - Regulatory Documentation, Participant Files and Investigational Drug/Device



Let's pause here for questions before moving on to common human research audit findings.

Areas of Common Errors



- **Protocol deviations**
 - Know and follow approved protocol
 - Submit modifications – approval required prior to implementation
 - Deviation from approved protocol requires reporting
- **Informed consent – more information to come**
- **Study Files**
 - Regulatory documentation not organized/available
 - Participant files missing information or inaccurate

Avoid Protocol Deviations: Questions to ask yourself/your staff regularly



- Have the risks or benefits changed since the last submission to the IRB?
 - Have there been any adverse or unanticipated events, or discoveries that could impact the risks/benefits ratio of the study
- Is recruitment progressing as expected?
 - If recruitment is overly effective, you may need to submit a modification to amend the approved number of participants
 - If recruitment is slower than anticipates, you may consider a modification to add additional recruitment methods or study locations

Questions to ask yourself/your staff regularly

continued



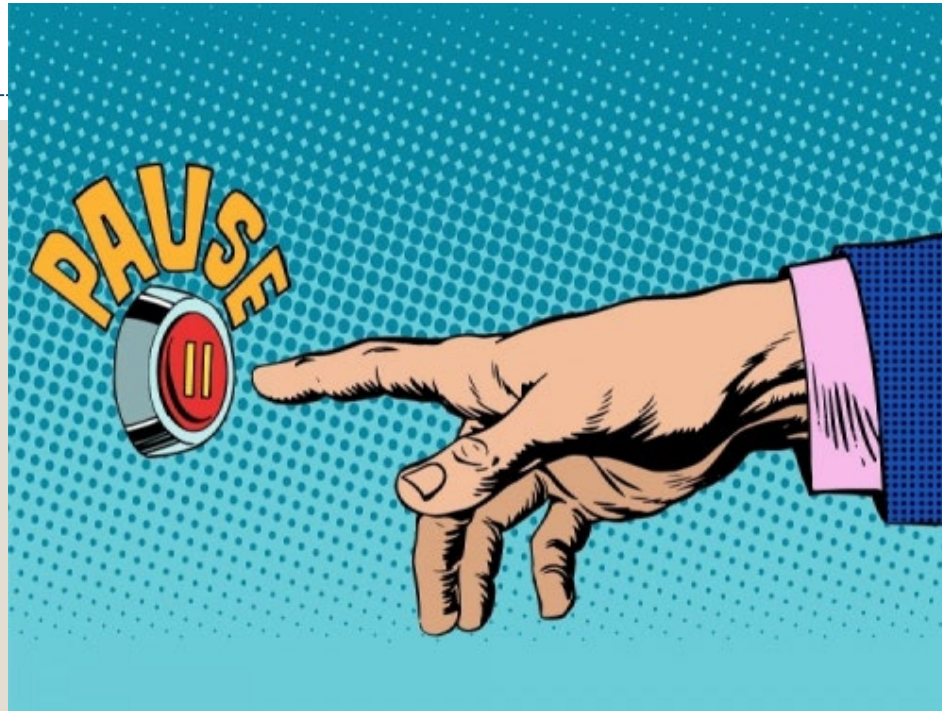
- Are participants expressing any misunderstanding or confusion during the consent process?
 - Does the consent form or consent process need to be revised to increase understanding?
- Are data storage and transfer methods still adequate?
 - Is there enough physical file cabinet or digital storage space?
 - Have there been any issues with lost or misdirected data?
- Are there any concerns with the conduct of the study?
 - What does the data look like – any consistently missing values?

Common Areas of Informed Consent Errors



According to the protocol:

- Ensure Signed and dated
 - ✦ By participant (thumb print, mark?)
 - ✦ By person conducting the consent process
- All fields completed (e.g., participant ID number filled in where indicated)
- All check boxes completed
- Witness signature requirements met
- Assent conducted when appropriate/according to protocol
- Documentation of parental/guardian permission
- Documentation that copy of the IC was given to the participant
 - ✦ Consider using QIP's [Enrollment and Screening Log](#)



Let's pause here for questions before moving on to our final section, Reportable New Information (RNI).

What is Reportable New Information (RNI)?



- Reportable New Information must be reported to the IRB within 5 business days if it meets the Prompt Reporting Requirements (outlined in the Investigator Manual).
- Examples of Reportable New Information include:
 - Information that indicates a new or increased risk, or a new safety issue.
 - Harm experienced by a participant or other individual, which in the opinion of the investigator are **unexpected** and at least **possibly related** to the research procedures
 - Failure to follow the protocol due to the action or inaction of the investigator or research staff.
 - Etc.

Why report? Regulations!



- DHHS & FDA regulations [***45 CFR 46.108(4)(i) & 21 CFR 56.108(b)(1)**] require that IRBs have:
 - Written procedures for ensuring prompt reporting of
 - ✦ a) any unanticipated problems,
 - ✦ b) serious continuing noncompliance, or
 - ✦ c) a suspension/termination of the study
- DHHS & FDA regulations [***45 CFR 46.108(3)(iii) & 21 CFR 50.25(b)(5)**] require that IRBs evaluate new information that becomes available during a study which may require the IRB/Investigator to reassess the risk/benefit to participant.

Where should I report?



- All reporting should be done in ESTR via a Reportable New Information (RNI) Submission.

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Submissions

Create New Study

Report New Information

My Work List | Unassigned | All Submissions | In-Review | Active | Archived

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page 1 no results | 25 / page

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IRB19-0165: Face Recognition Study

Approved

Entered IRB: 2/14/2019 2:35 PM
Initial approval: 3/1/2019
Initial effective: 3/22/2019
Effective: 3/22/2019
Last updated: 4/23/2019 11:10 AM

Principal investigator: [Redacted]
Submission type: Initial Study
Primary contact: [Redacted]
PI proxies: [Redacted]

IRB office: HMS
IRB coordinator: Kimberley Serpico
Letter: Correspondence_for_IRB19-0165 3-22-2019.pdf(0.02)
Regulatory authority: 2018 Requirements

Next Steps

View Study
Printer Version
View Differences
Report New Information

History | Funding | Project Contacts | Documents | Follow-on Submissions | Reviews

Activity	Author	Activity Date
Modification MOD19-0165-01 Opened	[Redacted]	4/23/2019 11:10 AM
Letter Sent	Serpico, Kimberley J	3/22/2019 8:55 AM
Prepared Letter	Serpico, Kimberley J	3/22/2019 8:55 AM
Finalized Documents	Serpico, Kimberley J	3/22/2019 8:52 AM
Designated Review Submitted	Serpico, Kimberley J	3/22/2019 8:52 AM
Required Modifications Reviewed	Serpico, Kimberley J	3/22/2019 8:51 AM

ESTR RNI Submission – Key Elements



- Date PI became aware of the information
- Category of the new information
- Description of the occurrence/incident
- If (and why) the incident/new information in the PI's opinion:
 - Poses a change to the study risk(s)
 - Requires a modification to the approved research
- **Corrective Action Plan**
 - PI is encouraged to propose a plan
 - IRB Review Specialist will weigh in
 - Convened IRB, if engaged, will weigh in

Corrective Action Plans



- May include corrective actions and/or preventative actions
- Corrective actions include:
 - Re-consent of participants
 - Disclosure
 - Study Audit
- Preventive actions include:
 - Modifications to protocol
 - Modifications to consent
 - Re-training of staff

ESTR RNI Submission & Process



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Pre-Submission | **RNI19-0004: Alma's test on 4.23.2019**

Last updated: 4/23/2019 1:19 PM | Reported by: Mary Little (irbd3) | IRB office: HMS
Submission type: Reportable New Information | IRB coordinator:

Next Steps

- Edit RNI
- Printer Version
- Submit RNI** (circled in red)
- Assign Coordinator
- Add Related Submission
- Add Comment
- Copy Submission
- Discard

Flowchart: Pre-Submission → Pre-Review → IRB Review → Post-Review → Review Complete. Clarification Requested and Action Required are branches from Pre-Review, IRB Review, and Post-Review respectively.

History Table:

Activity	Author	Activity Date
Reportable Information Opened	Little (irbd3), Mary	4/23/2019 1:18 PM

- Once submitted the RNI will first be reviewed by your IRB Review Specialist.
- You may be asked for further clarification and details about the information you provided in ESTR.
- The IRB Review Specialist will consider whether the incident is
 - An unanticipated problem involving risk to subjects or others
 - Serious noncompliance
 - Continuing noncompliance
- If the RNI possibly involves any of the above 3 designations it will be reviewed at an IRB meeting by the full board.

Who should submit report?



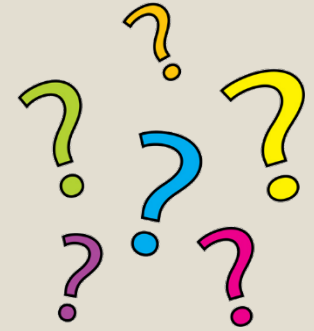
- Any study team member listed in ESTR can submit an RNI for a study they are affiliated with.
 - If the RNI goes to a convened IRB meeting for review and/or results in an official IRB correspondence letter, this will be addressed to the PI of the study and cc'd to any relevant parties (e.g. Dept. Chair, SPA, Funding Sponsor, Federal Agency, etc).
- The IRB can submit an RNI as needed to report on a study

Questions?



Quality Improvement Program (QIP) Staff

- Alyssa Speier, QIP Director, aspeier@hsph.harvard.edu
- Lisa Gabel, Senior QA/QI Specialist, lgabel@hsph.harvard.edu
- Amy Harchelroad, QA/QI Specialist, aharchelroad@hsph.harvard.edu



Department Assigned Review Specialist:

<https://www.hsph.harvard.edu/regulatory-affairs-and-research-compliance/department-assignments/>

IRB Reliance Specialist

- Julie Chamberlin, jchamberlin@hsph.harvard.edu

Additional Resources & Links

- ORARC Website: <https://www.hsph.harvard.edu/orarc>
- ORARC QIP Page: <https://www.hsph.harvard.edu/regulatory-affairs-and-research-compliance/hlc-qip/>
- Investigator Manual: <http://www.hsph.harvard.edu/orarc/investigator-manual/>
- ESTR Support and Training: <http://estrsupport.fss.harvard.edu/home>