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Human Research Protection Program

Post-Approval Event Reporting

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What is

Human Research Protection Program?

- CHR- reviews and approves protocols
- QIU- monitoring, education, post-approval events

• Overall Mission:

Ensure the ethical and equitable treatment of research participants

Work with PI improve research and overall compliance



What is the Quality Improvement Unit?

- Routine on-site reviews and directed (for-cause)
 investigations of clinical research studies
- Indirect monitoring of clinical research activities through processing of adverse events, violations and incident reports submitted to the CHR
- Management of non-routine participant complaints and concerns



Outline for Today

- Types of Post-Approval Events
- What and How to submit to CHR
- CHR/QIU role in review of Events
- Tips for Reporting
- Using iRIS to submit reports
- Q & A at the end of each section



So....

What is a Post Approval Event?

And which do we have to report to CHR?



Types of Post-Approval Event Reports

- Serious and/or Unexpected Adverse Events
- Protocol Violations/Incidents
- Safety Information:
 - Investigator Brochure/Package Insert updates
 - DSMB/DMC Report
 - Audit Reports
 - Study Holds
- Study Close-Out Reports

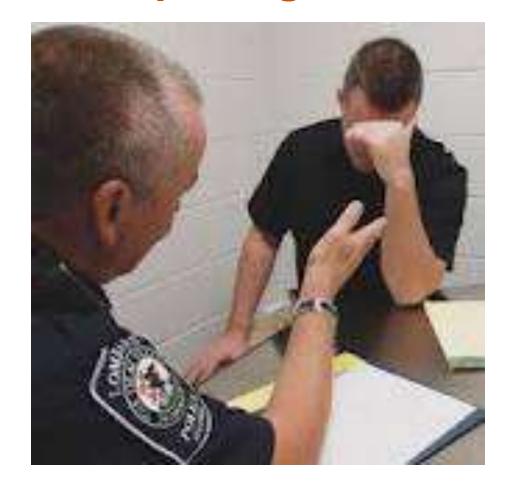


Post Approval Event Reporting: Why?

- Federal regulations and HRPP policies require reporting of possible
 - Unanticipated Problems (Adverse Events)
 - Serious and/or Continuous Noncompliance (Violations/Incidents)
- The CHR determines whether these definitions apply when evaluating post-approval reports.



Don't think of Post Approval Event Reporting as this:





Think of it like this:





Adverse Events (AEs) & Serious Adverse Events (SAEs)

Definitions <u>and</u> Determining What To Report and What NOT To Report



Definition of "Adverse Event" An Adverse Event (AE) is:

any untoward medical occurrence in a participant administered a pharmaceutical product **and that does not necessarily have a causal relationship** with this treatment.

An AE can therefore be any unfavorable and unintended sign (including an abnormal laboratory finding), symptom, or disease <u>temporally</u> associated with the use of a medicinal (investigational) product, whether or not related to the medicinal product.

~ICH E6 (1.2)

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However...



Not all AEs – or even SAEs – need to be reported to the CHR!

- The CHR has specific criteria describing and defining specifically which AEs should be reported.
- These criteria are available on the HRPP's website at

http://www.research.ucsf.edu/chr/Guide/ Adverse_Events_Guidelines.asp



Adverse Events – Internal vs External

- "Internal" AEs
 - enrolled by a UCSF investigator or
 - at a UCSF-affiliated site
 - CHR serves as the IRB
- "External" AEs
 - enrolled in the same study but
 - at a site <u>not</u> under the control of a UCSF investigator or CHR



Adverse Events – Internal

lf ...

The PI determines the event to be:

- Related to research*
- Definitely, Probably or Possibly

and

- Serious or Unexpected

Then...

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Report the event to the CHR within 5 working days of learning of it

**any* study procedure, not just the main intervention



Relatedness:

- **Definitely:** clear that the event was caused by study participation
- **Probably Related:** reasonable possibility that the event is **likely** to have been caused by study participation.
- **Possibly Related:** reasonable possibility that the event **might** have been caused by study participation. Possible relationship cannot reasonably be ruled out.
- Unrelated: The cause of the AE is known and the event is in no way related to any aspect of study participation



Serious AEs:

- Death
- Life-threatening event
- Inpatient hospitalization (>24 hrs) or prolonged existing hospitalization
- Persistent or significant disability/incapacity
- Congenital anomaly/birth defect, or cancer
- Significant medical, surgical, or other intervention/precaution required to prevent one of the outcomes listed above

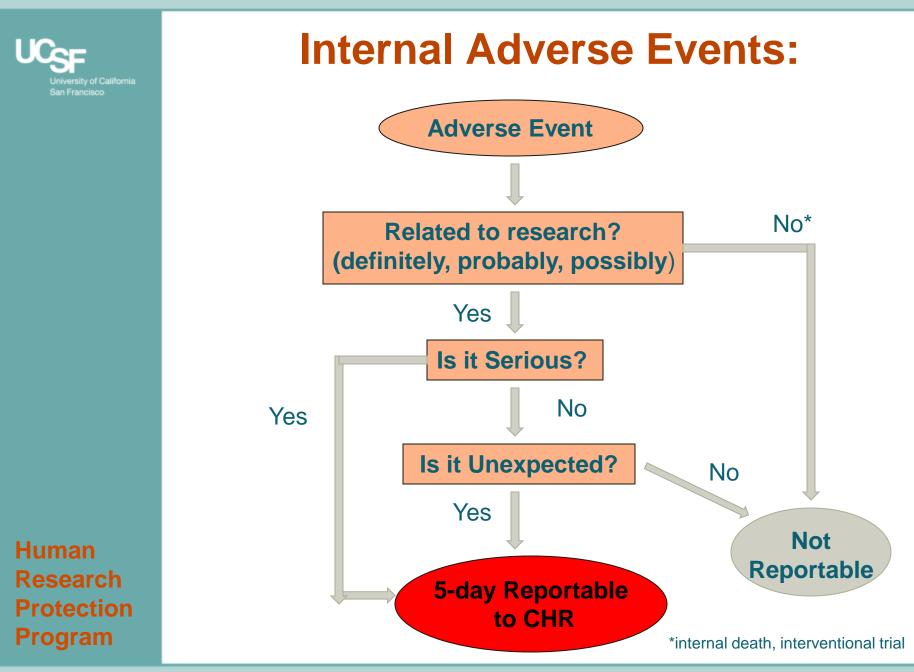
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• Event occurred in a gene therapy study



Unexpected AEs:

- Not listed in the materials reviewed by the CHR
- More serious than expected
- More frequent than expected
- Due to overdose of study medication
- Due to a protocol violation
- AE results in participant's unexpected withdrawal from study





Expected AEs:

- Reasonably anticipated as result of study procedure or study participation
- Described in Application, Consent Form
- Part of normal disease progression

NOT REPORTABLE



Adverse Events – External

lf...

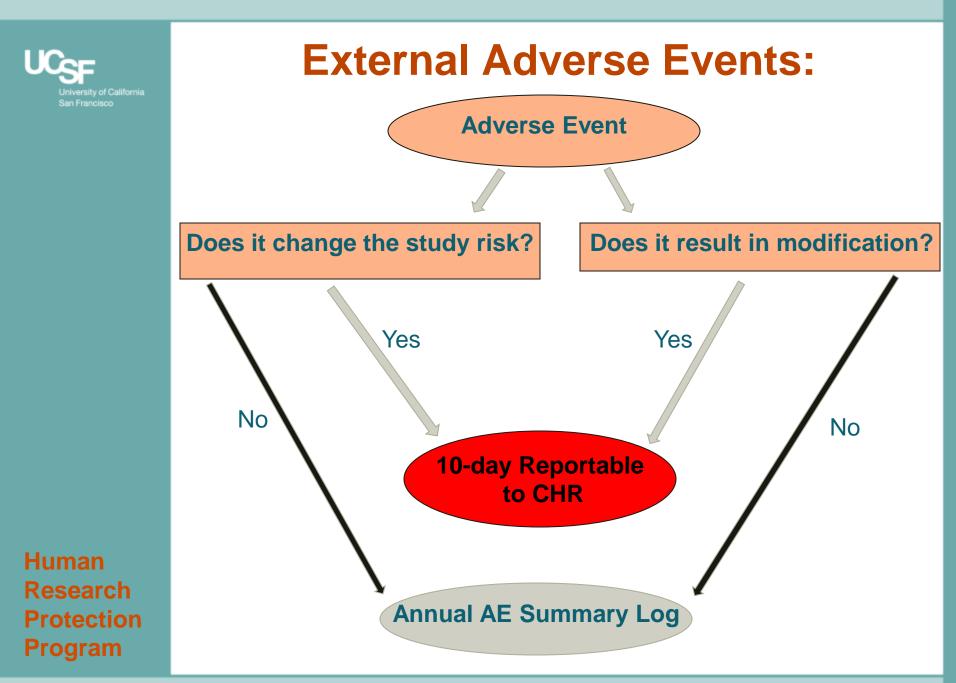
- The UCSF PI determines that the event:
 - Changes the study risks or benefits

And/Or

 Requires a modification to the CHR Application or the Consent form

Then...

Human Research Protection Program Report event to CHR within 10 working days of learning of it





AE's that do not meet CHR 5-day reporting criteria

- Do <u>not</u> submit using AE Reporting Form
- For Internal Interventional Studies only, any unrelated death should be reported using the Adverse Event Summary Log
- If Sponsor requires reporting an event that does not meet CHR criteria, use the Adverse Event Summary Log

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Determining What to Report

Note:

- Study sponsors and the FDA have expanded reporting requirements.
- The VAMC has a shorter timeline (5 days) than UCSF for reporting certain categories of post-approval events
- <u>http://www.research.ucsf.edu/chr/VA/chrV</u>
 <u>A.asp</u>

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 Sponsors may require reporting even if CHR does not- do what Sponsor says



Reporting Adverse Events





Protocol Violations & Incidents

Definitions and Determining What To Report and What NOT To Report



Major Protocol Violations & Incidents

Report to the CHR within <u>10 working days</u> of learning of it



Major Protocol Violations Definition:

Unapproved changes in procedures

Within investigator's control that may effect:

1) Participant's rights, safety or well-being or

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Major Protocol Violations Examples:

- Incorrect research treatment or intervention given
 - Wrong drug or wrong dosage
- Enrollment of participant ineligible per CHR-approved protocol
 - Even if Sponsor approves
- Procedure/lab required not done
 - Primary safety lab regarding study drug

- Procedure/lab done outside study window
 - Window based on safety or consistency



Major Incidents -Definition:

- Problematic or unanticipated events involving the conduct of the study or an individual's participation
- Possibly involves significant potential to harm the participant(s) or others.



Major Incidents – Examples:

- Problem with the informed consent or recruitment process
 - Wrong version of CF, missing HIPAA
- Significant concern or complaint received
 - Maltreatment, inappropriate behavior
- Lapse in study approval (and study activities were conducted)
- Loss of adequate resources to conduct study

 Impacts safety and compliance
- Unauthorized disclosure of private information
 - stolen or lost research data, privacy incident



Minor Protocol Violations and Incidents: Do not need to be reported to CHR

- Also known as Protocol Deviations
- Unapproved changes, deviations, or departures from study design that:
 - Have not been reviewed and approved by the CHR but
 - Do not affect participants' rights, safety, or well-being or the completeness of study data

Human Research Protection Program Document in study regulatory binder and develop a Corrective Action Plan (CAP)



Protocol Violations and Incidents

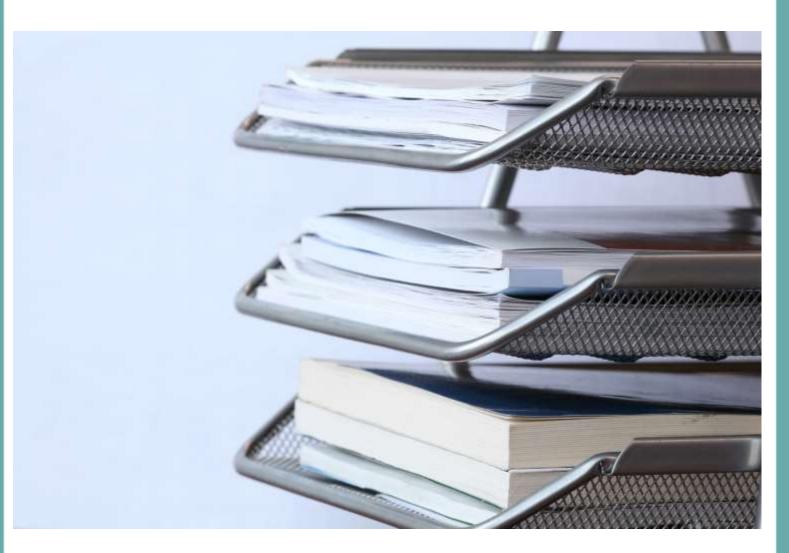




Other Safety Information

Definitions and Determining What To Report and What NOT To Report







Other Safety Information

- Updated Investigator Brochure*
- DSMB/DMC Reports*
- Audit Reports with findings
- Hold on Study Activities
- Other Safety Information or Updates that suggests a change to the risk or benefit of the research

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Report to the CHR within 10 working days of learning of new information



Study Close-Out Report

- Updates the CHR on conduct of the study since the last renewal
- Required for **all** studies
- Report within 10 working days of receiving Sponsor's Close-Out letter or PI's decision to close study



Study Close-Out Report

Do **not** close out a study with CHR if:

- Local enrollment to the study is ongoing
- Local research-related interventions are ongoing
- Local participant follow-up is ongoing
- Data analysis or manuscript preparation requiring use of or access to individually identifiable information is ongoing
- External sponsor has not given permission to close the study with the CHR.



Submitting Other Safety Information





CHR Review Process of PAERs?





What is CHR trying to determine?

- Risk-benefit ratio continues to be acceptable
- Research protocol and informed consent document accurately and completely present risk information to research subjects
- Subjects already enrolled should be advised of newly identified risks
- Unanticipated Problem or Serious and/or Continuing Noncompliance



CHR Review Process

- QIU Review & acknowledgment
 No letter sent
- Chair Review & acknowledgement
 No letter sent

- Convened Committee Review
 - If necessary
 - Outcome Letter generated



Possible OutcomesSAEs

- Unanticipated Problem
- Protocol Violations/Incidents
 - Serious Noncompliance
 - Continuing Noncompliance
 - Noncompliance
 - Serious <u>and</u> Continuing Noncompliance



Involves risk to participants or others, and

 Is unexpected or exceeds the nature, severity, or frequency described study documents, and

Related to research



Protocol Violations/Incidents: Are they Serious Noncompliance?

- 1) Failure to follow:
 - State or federal regulations
 - University policies
 - Determinations of the CHR

for protection of the rights and welfare of study participants,

AND...



Protocol Violations/Incidents: Are they Serious Noncompliance?

2) Results in, or indicates a **potential** for:

 a significant risk to enrolled or potential participants or others

or

 compromises the effectiveness of the UCSF HRPP or the University



Continuing Noncompliance

A <u>pattern</u> of noncompliance that continues to occur after a report of noncompliance and a corrective action plan have been reviewed and approved by the CHR.

 The pattern suggests the likelihood that instances of noncompliance will continue without intervention.



After the Meeting

• PI and Study Contacts receive an Outcome Letter

- Provides details regarding the Committee's decisions and any required follow-up by the PI
- Provides directions to PI to acknowledge/appeal the Committee's determination
- PI and Study Contacts receive a Submission Response Request Form
 - Provides instructions to PI to acknowledge/appeal the Committee's determination
 - Other stipulations as per the Outcome Letter
 - Provides timeframe to respond

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PI responds to Committee's Letter

 Chair acknowledges PI's response or returns to Committee for further review



Regulatory Reporting Requirements

- Federal Agencies
 - Office for Human Research Protection (OHRP)FDA
- Associate Vice-Chancellor for Ethics and Compliance
- UCSF Legal Affairs
- UCSF Privacy Office
- SF Veterans Affairs (if VA study)
- Other offices or groups as required by the nature of the study



CHR Review Process of Post-Approval Event Reports





Submitting Post Approval Events



Submitting Post- Approval Events

- Submissions Dashboard
- Creating Post-Approval Event Reports
- Review by affiliated offices
 - Privacy Office
 - Research Risk Mgmt
 - SFVAMC



Top Tips for Submitting Post-Approval Event Reports



Tips for Post-Approval Event Reporting (1)

- Determine it meets CHR reporting requirements
 - Refer to QuickGuide chart
- Ask your PI or mentor for guidance
- Submit using appropriate iRIS form
 - AE, Protocol Violation/Incident, Reporting Form

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Answer all questions on the form completely



Tips for Post-Approval Event Reporting (2)

- Include supporting documents, if relevant
 - Reports from Sponsors, DSMB, consultants
- Call QIU Analyst of Day and document your QIU consultation
- If a Privacy Breach, contact the Privacy Office and provide documentation of your consultation
 - Include in Report



Tips for Post-Approval Event Reporting (3)

- Explain the context-what should have happened v. what actually happened
- Provide **details** dates, lab values, what caused the event, how it was discovered
- Explain the **actual** or **potential** consequence
- Provide a comprehensive CAP

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• Do not include PHI in reports



Common Mistakes

- Including PHI on form
- Not describing root cause
- Not checking "Unauthorized disclosure"
 question
- Not addressing "possible" consequences
- Subject injury question
- Not answering "why report is late" question

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Using iRIS and Top Tips





"Slide @f Shame"

- All participants signed *the same* consent form
- Consent form for a different study used
- Study and consent form were not approved
- Signature page torn off, kept by study team
- Professor made participation mandatory for grade

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Participant/post-doc consented himself



Where to go for help:

- Reporting Post-Approval Events to CHR:
 - <u>http://www.research.ucsf.edu/chr/Guide/hsppGP.asp#Rep</u> orting
- QIU Section of HRPP Website:
 - <u>http://www.research.ucsf.edu/chr/Qip/hsppQip.asp</u>
- Call QIU Analyst of the Day (415) 476-1814

- SF VAMC:
 - http://www.research.ucsf.edu/chr/VA/chrVA.aspClinical Research Office (415) 221-4810 x6425



Where to go for help:

- Clinical Research Coordinators Website:
 - http://www.research.ucsf.edu/chr/Train/CRC_Group.asp
- Subjects Injury Program:
 - Bruce Flynn, Director, Risk Management
 - **476-2498**
- Privacy Office Contact Information
 - **353-2750**



The Hub

http://hub.ucsf.edu/

- One stop shopping for many of your research questions
- Created by the Office of the AVC for Ethics and Compliance
- Excellent resource for Investigators, Coordinators/Research Staff, and Participants



Next Available HRPP Classes

iRIS Training Classes

-Introduction to iRIS

- Thursday, August 20, 1:30-3:30 PM
- Tuesday, September 15, 10:00 AM-12:00 PM

-Advanced iRIS-Managing Approved Studies

- Wednesday, September 30, 1:30-3:00 PM
- Thursday, November 19, 1:30-3:00 PM

Recruitment: Ethics, Regulations and Practical Solutions

Human Research Protection Program • Thursday, August 27, 10:30 AM – 12:00 PM

Full Training Calendar at: www.research.ucsf.edu/chr



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