Research Administration and Compliance Meeting  
Wednesday, February 22, 2017  
Ball Conference Room, BioTech One  
1:00 – 2:30 p.m. – General Research Administration  
2:30 – 4:00 – Clinical Research Compliance

General Research Administration

- Grant and Contracts Update – Mark Roberts  
  o G&C Staff Update  
  o University of California – Riverside: Payroll Certification System Audit –
- Office of Sponsored Programs Update – Annie Publow  
  o RAMS-SPOT Patch Update  
  o Policy Reminder (eID/Password)  
  o RAMS-SPOT: Administrative Actions

Clinical Research Compliance:

- Clinical Research Compliance Program Resources – Sue Robb  
  o Good Clinical Practice Training  
  o Coverage Analysis Screener
- Office of Sponsored Programs Update – Melanie Wiggins  
  o Informed Consent Review – Industry  
  o Accelerated Clinical Trial Agreement (ACTA)
- ClinicalTrials.gov Registration and Reporting – Alanda Perry
- Clinical Research Coordinator Updates – Lydia Klinger  
  o Training Process Update  
  o Visit Scheduling Process  
  o SOCRA Exam Update

Future Dates for RACM Meetings, 1-4 p.m., Ball Conference Room, BioTech I

- April 26, 2017
RACM: Office of Sponsored Programs – Industry Update

Melanie Wiggins
Director, Office of Sponsored Programs – Industry and Clinical Trials
OSP Red Team Review of Subject Injury Language in Informed Consent Form (ICF) for WIRB Studies
ICF Subject Injury Language Review Process

- OSP Red Team is now reviewing informed consent forms (ICF) for industry funded clinical trials to ensure compliance with subject injury language in contracts.
- **Prior** to submitting a WIRB study in RAMS-IRB, the PI/Study staff reviews consent form for revisions to non-injury language and coordinates with their School/Department for the creation of a funding proposal in RAMS-SPOT for subsequent notification to OSP.
ICF Subject Injury Language Review Process

1. **Department/School (as appropriate) creates funding proposal (FP) in RAMS-SPOT**
   - PI/Study staff uploads redlined ICF (non-injury language) into the funding proposal in RAMS-SPOT and logs a Public Comment.
   - School/Department reviews ICF, makes any additional changes related to costs, uploads latest ICF redline (annotates version) to funding proposal in RAMS-SPOT and logs a Public Comment.

2. **School/Department creates a review (RV) record in RAMS-SPOT via the Submit Document for Review section**, uploads the contract, links the funding proposal and logs a Public Comment.
   - The RV should include Sponsor/CRO contact information for both the consent form and the contract for negotiation purposes

**NOTE:** It is extremely important that OSP receives the contract for comparison with the ICF. Review of ICF cannot take place without it.
ICF Subject Injury Language Review Process

3. OSP will triage the review and assign to a reviewer. The reviewer will review/negotiate the appropriate revisions to the subject injury language directly with the Sponsor or contract research organization (CRO), as appropriate.
4. Once OSP has completed negotiation of the language, they will upload an approval memo with the VCU/Sponsor approved ICF template into the RAMS-SPOT funding proposal and will log a Public Comment.
5. PI submits through RAMS-IRB.
### Activity Details (Log Public Comment)

<table>
<thead>
<tr>
<th>Job Name</th>
<th>Subject</th>
<th>Recipients</th>
</tr>
</thead>
<tbody>
<tr>
<td>Project Team</td>
<td>This subject was generated by script and therefore could be different for each recipient. Here is an example rendering for recipient Alanda Perry Jones: &quot;Comment Logged - FP00005365 - Luketic, Velimir&quot;</td>
<td>Alanda Perry Jones (C) Christopher James (C) Elizabeth Fortune (C) Frederick Mueller (Psy) John Thrift (Center for Mary Simmons (C) Center Sara Tirombly (Center Velimir Luketic (Interna)</td>
</tr>
<tr>
<td>OSP Owner Log Public Comment Activity</td>
<td>This subject was generated by script and therefore could be different for each recipient. Here is an example rendering for recipient Amanda Hill: &quot;Comment Logged - FP00005365 - Luketic, Velimir&quot;</td>
<td>Amanda Hill (Office of VCU OSP RED TEAM)</td>
</tr>
</tbody>
</table>
**Exalenz CSPH-EX-0414**

**Current State:**
- **Title:** Unspecified
- **Last Modified:** 16/03/2017 11:46 AM
- **Owner:** Amanda Hill
- **Fiscal Advisor Unit:** Internal Med - Gastroenterology
- **Clinical Title:** Yes
- **Name:** Red

**Pending Review Action**

**History**

<table>
<thead>
<tr>
<th>Activity</th>
<th>Author</th>
<th>Activity Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>First</td>
<td>Hill, Amanda O</td>
<td>26/03/2017 10:39 AM</td>
</tr>
<tr>
<td>Second</td>
<td>Hill, Amanda O</td>
<td>26/03/2017 5:53 PM</td>
</tr>
<tr>
<td>Other</td>
<td>Dickerson, Joshua</td>
<td>26/03/2017 2:37 PM</td>
</tr>
</tbody>
</table>

**Notes:**
- Please note that budget figures are still being negotiated and once finalized the final costs will be provided in the routed document.
- Thanks,
  - Josh

**My Current Actions**

- Agreement Executed or Accepted
- Send for Review - Approved
- Withdraw
- Upload Documents
- Upload Administrative Documents
- Start Renovations for Review
- Take Ownership
- Assign Ownership
- Log Public Comment
- Log Private Comment
- Notify Expert for Review
- Revert Email
ICF Review for VCU IRB (or non industry)

• *Generally*, If VCU IRB is the IRB of record (usually for non-industry studies), OSP will not need to review the subject injury language in the ICF prior to submission for IRB review. There may be exceptions for Task Orders under Master Agreements.

• For submission to VCU’s IRB, Study teams should use the subject injury language in the VCU approved template. VCU IRB can ask for OSP review on an as needed basis.

• Study teams should upload ICF in funding proposals to be submitted to OSP and OSP will check for congruency with contract during negotiation and prior to award.

• Please contact [OSPRED@vcu.edu](mailto:OSPRED@vcu.edu) with questions.
Use of Accelerated Clinical Trial Agreement (ACTA)
VCU Adopts use of the Accelerated Clinical Trial Agreement (ACTA)

• VCU has adopted the use of the Accelerated Clinical Trial Agreement (ACTA) template. This template was developed collaboratively amongst Clinical and Translational Science Award (CTSA) recipient institutions, industry sponsors and the University Industry Demonstration Partnership (UIDP) as a mechanism to streamline the industry sponsored multisite contract negotiation process thereby ultimately reducing the time to study activation.

• The ACTA template is provided for execution in lieu of negotiation of the industry sponsor initiated clinical trial agreement template. As a registered user of the ACTA, VCU has agreed that use of the term Accelerated Clinical Trial Agreement or ACTA is only permitted when referring to the unmodified template. Any changes made to the template by the Sponsor shall require review and negotiation by the Office of Sponsored Programs (OSP) and negates the use of the ACTA template in this form.
Using the ACTA

- A fillable version of the ACTA has been posted on the forms page of the Office of Sponsored Programs (OSP) website under the Industry & Clinical Trial subheading at the following address:  http://www.research.vcu.edu/forms/index.htm#osp_forms

- In order to expedite processing of clinical trial agreements received from industry sponsors for clinical trials where there is no associated Master Agreement, we would like to encourage investigators and study staff to send the ACTA template back to such industry sponsors for their consideration and signature for those studies where feasibility has been assessed and the decision has been made to move forward.

- Sponsors should be made aware that VCU's use of this template is predicated on acceptance of terms as is with no negotiation.

- Once the Sponsor has agreed to use the ACTA template as is, please forward the Sponsor-signed template through the Submit Document for Review activity in RAMS SPOT for OSP's review and signature. OSP will return the ACTA to the Sponsor once the associated funding proposal information has been reviewed and approved.
Fillable Version of Accelerated Clinical Trial Agreement (ACTA)

http://www.research.vcu.edu/forms/acta_template.pdf

Accelerated Clinical Trial Agreement

This Accelerated Clinical Trial (ACTA) Agreement ("Agreement") is made as of this _______ day of _______ [MONTH], _______ [YEAR] (the "Effective Date") by and between VIRGINIA COMMONWEALTH UNIVERSITY, a non-profit, educational, research and healthcare institution ("Institution") with an address located at 800 East Leigh Street, Richmond, Virginia 23298 and ________________ [COMPANY NAME], a corporation having its principal place of business at ________________ [COMPANY ADDRESS] ("Sponsor"). Sponsor and Institution are herein referred to collectively as "Parties." Individually, each of Sponsor and Institution is a "Party."

WHEREAS, the Institution and Sponsor have agreed to use the ACTA, to accelerate the process of translating laboratory discoveries into treatments for patients, to engage communities in clinical research efforts, and to train a new generation of clinical and translational researchers;

WHEREAS, Sponsor is a for-profit organization that intends to conduct a sponsored multicenter clinical trial, described in 1.1 below, involving the use of certain diagnostic(s), drug(s), device(s), or biologic(s) provided by Sponsor;

WHEREAS, the Institution has appropriate facilities and personnel with the qualification, training, knowledge, and experience necessary to conduct such a clinical trial and;

WHEREAS, the Study contemplated by this Agreement is of mutual interest and benefit to Institution and Sponsor, and will further the instructional and research objectives of Institution in a manner consistent with its status as a nonprofit educational, research and health care institution;

NOW, THEREFORE, in consideration for the mutual promises made in this Agreement and for valid consideration, the Parties agree as follows:

1. Scope of Agreement

1.1. Institution will undertake a sponsored multicenter clinical trial ("Study") described in the protocol entitled, ____________________________ [PROTOCOL TITLE and Protocol designation] which is attached hereto and incorporated herein as Exhibit A ("Protocol"). Institution will use its reasonable efforts to only recruit subjects in accordance with the Protocol. The Study will be conducted by the Institution under the direction of ____________________________ [PRINCIPAL
Example of Email to Accompany ACTA

Virginia Commonwealth University (VCU) has adopted the use of the Accelerated Clinical Trial Agreement (ACTA) template. This template was developed collaboratively amongst Clinical and Translational Science Award (CTSA) recipient institutions, industry sponsors and the University Industry Demonstration Partnership (UIDP) as a mechanism to streamline the industry sponsored multisite contract negotiation process thereby ultimately reducing the time to study activation.

The attached ACTA template is provided for execution in lieu of negotiation of the industry sponsor initiated clinical trial agreement template. As a registered user of the ACTA, VCU has agreed that use of the term Accelerated Clinical Trial Agreement or ACTA is only permitted when referring to the unmodified template. Any changes made to the template by the Sponsor shall require review and negotiation by the Office of Sponsored Programs (OSP) and negates the use of the ACTA template as is.

If you agree to use this template in its unmodified format, please fill in the appropriate study and contact information, sign and return and VCU will move forward with full execution of this agreement.

Please refer any questions regarding the use of the ACTA to the VCU Office of Sponsored Programs (OSP), Industry and Clinical Trials. OSP may be reached by email at OSPRed@vcu.edu or by phone at 804-828-6772.

Thank you for supporting this important initiative.
Questions??

Contact OSPRED@vcu.edu

Melanie Wiggins
Director
OSP-Industry and Clinical Trials
Phone: 827-4992
mwiggins@vcu.edu

Juanita Lawrence, M.Ed.
Assistant Director
OSP-Industry and Clinical Trials
Phone: 827-4993
ljuanita@vcu.edu
ClinicalTrials.Gov: FDAAA Final Rule & Complementary NIH Policy

Alanda Perry Jones
ClinicalTrials.gov Program Administrator
CCTRCTGOV@vcu.edu
perryar@vcu.edu
804-628-9395

https://clinicaltrials.gov/
https://register.clinicaltrials.gov/
Transparency and knowledge sharing

- Provide information to potential participants, providers, researchers
- Fulfilling ethical obligation to trial participants
- Reduce publication bias
- Promote efficient allocation of resources
Responsible Party

- Investigator-initiated trials
- Only one responsible party, one ClinicalTrials.gov record
- The Responsible Party for a clinical trial must register the trial and submit results information. The Responsible Party is defined as:
  - The sponsor of the clinical trial or
  - The principal investigator (PI) of such clinical trial if so designated by a sponsor, grantee, contractor, or awardee, so long as the PI is responsible for conducting the trial, has access to and control over the data from the clinical trial, has the right to publish the results of the trial, and has the ability to meet all of FDAAA's requirements for the submission of clinical trial information
FDAAA Final Rule
Applicable Clinical Trials Registration & Results Reporting

• Effective Date: January 18, 2017
• Compliance Date: April 18, 2017
• Defines, clarifies, and expands requirements of FDA Amendments Act of 2007 (FDAAA 42CFR Part 11)
FDAAA Final Rule
Applicable Clinical Trials Registration & Results Reporting

What's New?

• additional data elements required for registration and results
• results reporting to include “FDA regulated products (drugs and devices) that have not been approved, licensed or cleared by the FDA”
• requires submission of the clinical trial protocol and a statistical analysis plan at the time results are reported
Applicable Clinical Trials are subject to FDAAA and generally include controlled interventional studies (with one or more arms) of drugs, biological products or devices which are subject to FDA regulation. FDA Regulation generally means that the trial has one or more sites in the U.S, involves a drug, biologic, or device that is manufactured in the US (or its territories), or is conducted under an investigational new drug application (IND) or investigational device exemption (IDE).

Applicable Drug Clinical Trial is defined by law as a controlled clinical investigation, other than a phase I clinical investigation, of a drug subject to section 505 of the Federal Food, Drug, and Cosmetic Act or to section 351 of the Public Health Service Act.

Applicable Device Clinical Trial is defined by law as (I) a prospective clinical study of health outcomes comparing an intervention with a device subject to section 510(k), 515, or 520(m) of the Federal Food, Drug, and Cosmetic Act against a control in human subjects (other than a small clinical trial to determine the feasibility of a device, or a clinical trial to test prototype devices where the primary outcome measure relates to feasibility and not to health outcomes); and (II) a pediatric post-market surveillance as required under section 522 of the Federal Food, Drug, and Cosmetic Act.”
NIH Policy

• NIH policy applies to all clinical trials funded in whole or in part by NIH, not just “applicable clinical trials” as defined by FDA
• Phase 1 clinical trials of FDA-regulated products
• Small feasibility device trials
• Interventions that are not regulated by the FDA, such as behavioral interventions
• Effective January 18th, 2017
• NIH clinical trial decision tree:
  http://osp.od.nih.gov/sites/default/files/NIH%20Definition%20of%20Clinical%20Trial%20Decision%20Tree-%20UPDATED.pdf
NIH Clinical Trial Definition

A research study\(^1\) in which one or more human subjects\(^2\) are prospectively assigned\(^3\) to one or more interventions\(^4\) (which may include placebo or other control) to evaluate the effects of those interventions on health-related biomedical or behavioral outcomes.\(^5\)

\(^1\)See Common Rule definition of research at 45 CFR 46.102(d).
\(^2\)See Common Rule definition of human subject at 45 CFR 46.102(f).
\(^3\)The term “prospectively assigned” refers to a pre-defined process (e.g., randomization) specified in an approved protocol that stipulates the assignment of research subjects (individually or in clusters) to one or more arms (e.g., intervention, placebo, or other control) of a clinical trial.
\(^4\)An intervention is defined as a manipulation of the subject or subject’s environment for the purpose of modifying one or more health-related biomedical or behavioral processes and/or endpoints. Examples include: drugs/small molecules/compounds; biologics; devices; procedures (e.g., surgical techniques); delivery systems (e.g., telemedicine, face-to-face interviews); strategies to change health-related behavior (e.g., diet, cognitive therapy, exercise, development of new habits); treatment strategies; prevention strategies; and, diagnostic strategies.
\(^5\)Health-related biomedical or behavioral outcome is defined as the pre-specified goal(s) or condition(s) that reflect the effect of one or more interventions on human subjects’ biomedical or behavioral status or quality of life. Examples include: positive or negative changes to physiological or biological parameters (e.g., improvement of lung capacity, gene expression); positive or negative changes to psychological or neurodevelopmental parameters (e.g., mood management intervention for smokers; reading comprehension and/or information retention); positive or negative changes to disease processes; positive or negative changes to health-related behaviors; and, positive or negative changes to quality of life.

NIH Proposal Language

• New & Competing Renewals after January 18th, 2017

<table>
<thead>
<tr>
<th>Plan for Dissemination of NIH-Funded Clinical Trial Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dissemination of study results through ClinicalTrials.gov registration and reporting at a minimum will include the following components:</td>
</tr>
<tr>
<td>• The Principal Investigator (PI) will be responsible for ensuring compliance with ClinicalTrials.gov requirements for this project. The PI or his/her designee will register the trial prior to enrolling the first subject. Once a record is established, s/he will confirm accuracy of record content; resolve problems; and maintain records including content update and modifications. S/he will also be responsible for aggregate results reporting and Adverse Event reporting at the conclusion of the project.</td>
</tr>
<tr>
<td>• Add specifics related to this trial</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Additional FDAAA Applicable Clinical Trial certification</th>
</tr>
</thead>
<tbody>
<tr>
<td>I certify that this submission contains an Applicable Clinical Trial (ACT) and I will ensure compliance with registration and results reporting submissions to ClinicalTrials.gov as required under the FDA Amendments Act of 2007 (FDAAA) and the Final Rule (42 CFR Part 11).</td>
</tr>
</tbody>
</table>
Summary Table of HHS/NIH Initiatives to Enhance Availability of Clinical Trial Information

<table>
<thead>
<tr>
<th>Element</th>
<th>Final Rule</th>
<th>NIH Policy</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Scope/Applicability</strong></td>
<td>Applicable clinical trials of FDA-regulated drug, biological, and device products and pediatric post-market surveillance studies of devices required by the FDA under the FD&amp;C Act. Does not apply to phase 1 trials or small feasibility device studies. Applicable clinical trials are (1) clinical trials of drug and biological products that are controlled, clinical investigations, other than phase 1 investigations, of a product subject to FDA regulation; and (2) prospective clinical studies of health outcomes comparing an intervention with a device product against a control in humans (other than small feasibility studies) or any pediatric post-market surveillance studies required by FDA under the FD&amp;C Act. Applies to public and private sector sponsors and other entities who meet the definition of a responsible party.</td>
<td>All clinical trials funded wholly or partially by NIH. Includes phase 1 clinical trials and trials that do not involve any FDA regulated product such as trials involving only behavioral interventions. Applies to NIH-funded clinical trials where applications or proposals are received by NIH on or after the policy’s effective date. Applies to NIH-conducted clinical trials initiated on or after the policy's effective date.</td>
</tr>
<tr>
<td><strong>Registration data elements to be submitted to ClinicalTrials.gov</strong></td>
<td>Elements defined in the final rule. Consists of descriptive information, recruitment information, location and contact information, and administrative data.</td>
<td>Same</td>
</tr>
<tr>
<td><strong>Results information data elements to be submitted to ClinicalTrials.gov</strong></td>
<td>Elements defined in the final rule. Includes participant flow, demographic and baseline characteristics, outcomes and statistical analyses, adverse events, the protocol and statistical analysis plan, and administrative information.</td>
<td>Same</td>
</tr>
<tr>
<td><strong>Potential Consequences of Noncompliance</strong></td>
<td>*Identifying clinical trial record as non-compliant in ClinicalTrials.gov *For federally funded trials, grant funding can be withheld if required reporting cannot be verified. *Civil monetary penalties of up to $10,000/day (amount to be adjusted going forward)</td>
<td>*May lead to suspension or termination of grant or contract funding *Can be considered in future funding decisions *Identifying clinical trial record as non-compliant in ClinicalTrials.gov</td>
</tr>
<tr>
<td><strong>Effective Date</strong></td>
<td>January 18, 2017. Compliance date is 90 days from the effective date.</td>
<td>January 18, 2017</td>
</tr>
</tbody>
</table>
ICMJE Clinical Trial

• Current VCU policy (2013)
• Registration prior to first enrollment
• Definition: “any research study that prospectively assigns human participants or groups of humans to one or more health-related interventions to evaluate the effects on health outcomes”
  – Health-related interventions: “drugs, surgical procedures, devices, behavioral treatments, dietary interventions, and process-of-care changes”
  – Health outcomes: “any biomedical or health-related measures obtained in patients or participants, including pharmacokinetic measures and adverse events”
## Timelines

<table>
<thead>
<tr>
<th>EVENT</th>
<th>TIMELINE</th>
<th>APPLIES TO</th>
</tr>
</thead>
<tbody>
<tr>
<td>Registration</td>
<td>prior to enrollment of first participant</td>
<td>ALL clinical trials (ICMJE, NIH, FDAAA)</td>
</tr>
<tr>
<td>Results</td>
<td>no later than 12 month after Primary Completion Date</td>
<td>FDAAA applicable clinical trials NIH trials ending after 1/18/17</td>
</tr>
<tr>
<td></td>
<td>(note: delayed results may be requested for unapproved/uncleared products)</td>
<td></td>
</tr>
<tr>
<td>Registration Errors</td>
<td>correct within 15 calendar days</td>
<td>FDAAA, NIH</td>
</tr>
<tr>
<td>Results Errors</td>
<td>correct within 25 calendar days</td>
<td>FDAAA, NIH</td>
</tr>
<tr>
<td>Updates</td>
<td>Annual</td>
<td>All clinical trials</td>
</tr>
</tbody>
</table>
Welcome to the ClinicalTrials.gov Protocol Registration and Results System (PRS).

Organization: VirginiaCU
One-word organization name assigned by PRS (sent via email when account was created)
Username: 
Password: 
Forgot password

See Submit Studies on ClinicalTrials.gov for information on how to apply for an account, how to register your study, and how to submit results.

Send email to ClinicalTrials.gov PRS Administration
# Roles in PRS

<table>
<thead>
<tr>
<th>ClinicalTrials.gov Role</th>
<th>Party</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sponsor</td>
<td>VCU</td>
<td>Primary organization conducting study and associated data analysis (not necessarily a funding source).</td>
</tr>
<tr>
<td>Responsible Party</td>
<td>Principal Investigator/Sponsor-Investigator</td>
<td>individual designated as responsible party by the sponsor/individual who both initiates and conducts the study</td>
</tr>
<tr>
<td>Study Official</td>
<td>Principal Investigator (and Subinvestigators, if applicable)</td>
<td>Person(s) responsible for the overall scientific leadership of the protocol, including study principal investigator</td>
</tr>
<tr>
<td>Record Owner</td>
<td>PI or can be delegated</td>
<td></td>
</tr>
<tr>
<td>Access List</td>
<td>Per PI discretion; Record Owner and Access List members can edit record</td>
<td></td>
</tr>
</tbody>
</table>
PRS Accounts (Record Owners/Access List)

http://www.research.vcu.edu/forms/e-ct_account_creation_form.htm
Penalties for Noncompliance

- Civil monetary penalties >$10,000 per day
- Loss of grant funding
- Noncompliance considered for future funding
- Records identified as noncompliant on ClinicalTrials.gov
- Restriction of publication rights
- Nonpayment of CMS claims
Additional Resources

• W-CCTR ClinicalTrials.gov page
  http://www.cctr.vcu.edu/clinicalresearch/services/clinicaltrials.gov.html

• Summary Information https://www.nih.gov/news-events/summary-hhs-nih-initiatives-enhance-availability-clinical-trial-information

• PRS Instructions for Registration & Reporting
  https://clinicaltrials.gov/ct2/manage-recs
More to come...

- Compliance Notice
- Questions/Comments:
  Alanda Perry Jones
  CCTRCTGOV@vcu.edu
  perryar@vcu.edu
  804-628-9395