

New Safety Information SOPs

Committee Member Training

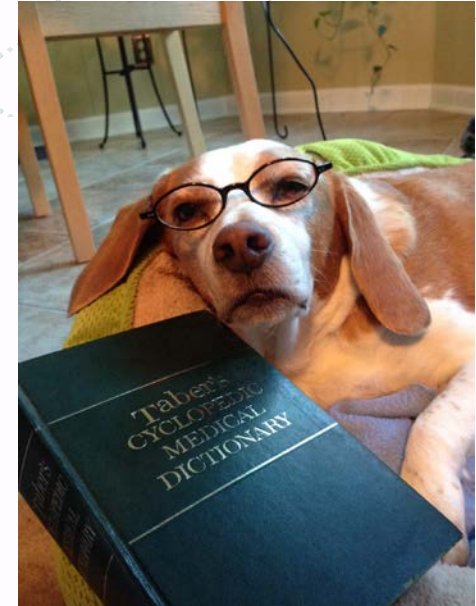


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Jeanne Lovmo, M.A., OHRE Compliance Manager

LEARNING OBJECTIVES

- ◆ What constitutes “new safety information”
- ◆ How is new safety information is processed within the OHRE



What to Report to the UNC IRB?



New or Increased Risk = New Safety Information

- ◆ Adverse Events
- ◆ New findings
- ◆ Deviations
- ◆ Noncompliance
- ◆ Other



Adverse Events*

- ◆ Adverse Events, Internal:
 - unexpected, *and*
 - related or possibly related, *and*
 - serious OR suggest new/increased risk
- ◆ Adverse Events, External:
 - unexpected, *and*
 - related or possibly related, *and*
 - serious OR suggest new/increased risk, *and*
 - warrant a change to the protocol, subject notification, or re-consent



* Includes unanticipated adverse device effect

New Safety “Findings”



- ◆ Interim analysis
- ◆ DSMB report
- ◆ Findings from related studies
- ◆ Hold or early closure due to safety concerns

Protocol Deviations



Noncompliance

- ◆ Conduct research without IRB approval or exemption
 - Start before approval letter received
 - During a lapse in approval
- ◆ Fail to obtain informed consent or to re-consent w/ new risk
- ◆ Deviate from the approved consent or recruitment process
- ◆ Initiate changes to the protocol without IRB approval
- ◆ Fail to complete required human subjects protection training
- ◆ Over-enroll in a study that is greater than minimal risk

“Other” New Safety Information

- ◆ Breach or potential breach of confidentiality or privacy
- ◆ Subject complaint
 - Rights, welfare, or safety adversely affected, *or*
 - Cannot be resolved by the investigator
- ◆ Incarceration of subject in study not approved to include prisoners
- ◆ Audit, inspection, or written report by a federal agency (FDA 483)
- ◆ State board action (e.g., suspension of professional license)
 - Affects the ability to conduct the study as approved, *or*
 - Increases risks to subjects or others

New Safety Information - UNC cedes review

- ◆ Unanticipated Problem Involving Risk to Subjects or Others (UPIRSO) determination *when the event involved UNC subjects or researchers*
- ◆ Serious Noncompliance determination *when the event involved UNC subjects or researchers*
- ◆ Continuing Noncompliance determination *when the event involved UNC subjects or researchers*
- ◆ Suspension
- ◆ Termination

When to Report?

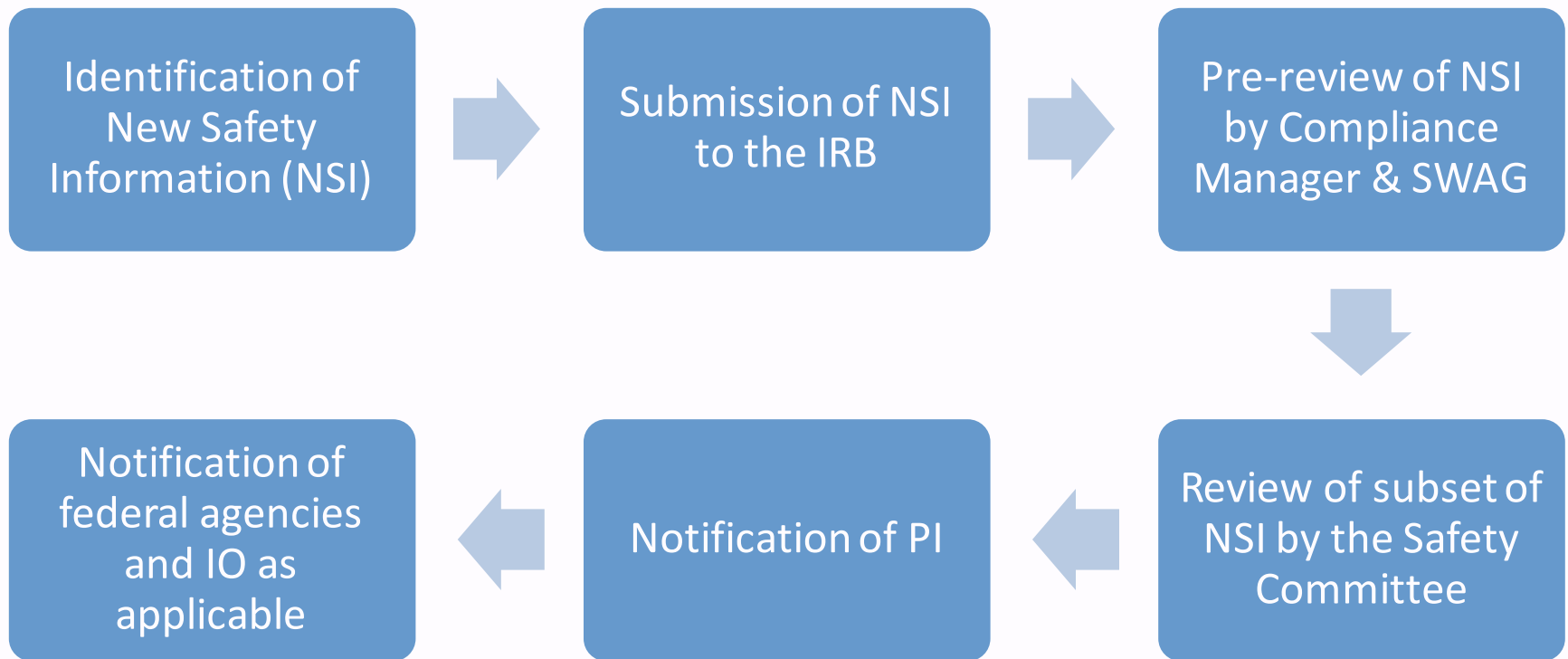


***Calendar days**



UNC
RESEARCH

Flow of Information



Who is SWAG?



Safety Welfare Analysis Group (SWAG)

- ◆ Reviews all New Safety Information
- ◆ Includes ≥ 3 members who have experience with research
 - Vicki Bae-Jump, MD, PhD, Associate Professor OBGYN-GynOnc , LCCC
 - Luigi Troiani, PA, Clinical Instructor, Department of Neurology
 - Jeanne Lovmo, MA, OHRE Compliance Manager
- ◆ This is NOT an IRB

SWAG's Review Process

- ◆ Requests additional information
- ◆ Evaluates information
- ◆ Works with Investigators to Develop Sufficient Corrective and Preventative Actions (CAPA) Plans
- ◆ Resolves submission that does not represent UPIRSO, Serious or Continuing Noncompliance.
- ◆ Refers information to Safety Committee.



Who is the Safety Committee?

Serves as an IRB in accordance with 45 CFR 46, and 21 CFR 50 and 56 (SOP 401).

- ◆ At least five members of varying backgrounds who are qualified through experience and expertise
- ◆ One scientist, one nonscientist, one unaffiliated member, one member who represents the general perspective of a participant



Regulatory Determinations

- ◆ **Serious Noncompliance (SNC)**
- ◆ **Continuing Noncompliance (CNC)**
- ◆ **Unanticipated Problem Involving Risk to Subjects or Others (UPIRSO)**
- ◆ **Suspension of IRB Approval**
- ◆ **Termination of IRB approval**



Considerations

- ◆ Modification of protocol and/or consent document
- ◆ Reconsent, Notification
- ◆ Modification of continuing review schedule
- ◆ Additional monitoring or training
- ◆ If suspension/termination – participant transfer, refer for care outside study, follow-up continue under independent monitoring
- ◆ Additional resources to support the research recommended/required?
- ◆ Recommendations for the Vice Chancellor for Research (IO)



PI Notification

- ◆ Determination(s)
- ◆ Rationale for the determination(s)
- ◆ Any actions requested and recommended by the committee.



IRB Reporting Requirement to Federal Agencies



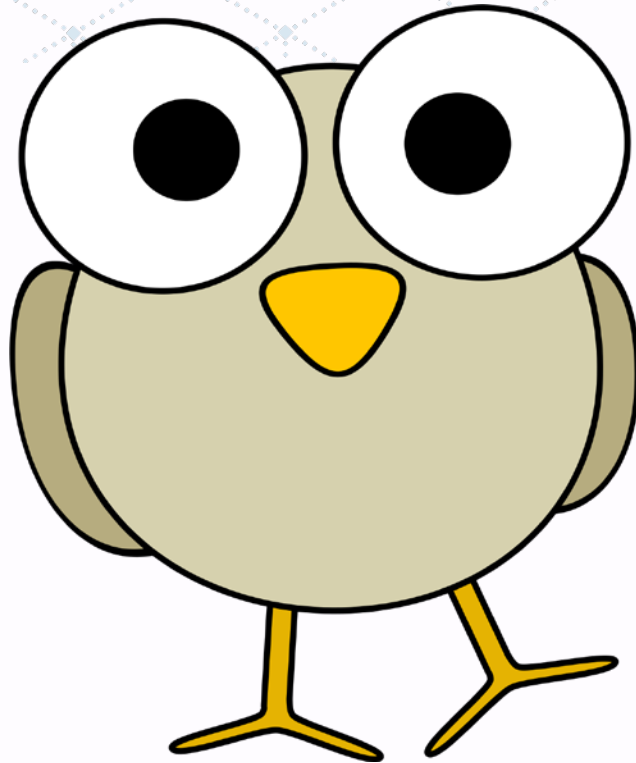
FDA Regulated Research



Federally Funded Research

[45 CFR 46.103(b)(5) and 21 CFR 56.108(b)]

THANK YOU!



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