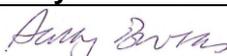


Standard Operating Procedures (SOP) for:

BH/QMUL Sponsorship of CTIMPs, ATMPs and Clinical Trials of non-CE marked Medicinal Devices – Process for JRMO staff

SOP Number:	11b	Version Number:	7.0
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Author:	R. Fay, Research Governance & GCP Manager
Reviewer:	K. Mahiouz, Clinical Trials Facilitator
Reviewer :	E. Clough, R&D Governance Operations Manager

Authorisation:	
Name / Position	Sally Burtles Director of Research Services & Business Development
Signature	
Date	7/4/16

Background

When Barts Health NHS Trust (BH) or Queen Mary University of London (QMUL) agrees to Sponsor a Clinical Trial of a Medicinal Product (CTIMP), Advanced Therapy Medicinal Products (ATMPs), or Clinical Trials of a non-CE marked Medical Devices they are accepting considerable legal responsibilities and organisational risks.

For Clinical Trials of Investigational Medicinal Products (CTIMPs), the European Commission Directive 2001/20/EC define the Sponsor as: an individual, company, institution or organisation which takes responsibility for the initiation, management and/or financing of a clinical trial.

The Health Research Authority (HRA) sets out guidance on the expectations of Sponsors. This includes that Sponsors should satisfy themselves that the trial meets the relevant standards and that arrangements are put and kept in place for management; appropriate peer review; all supporting information is supplied to the regulators for their consideration; defined roles and responsibilities for the duration of the trial; monitoring and audit; a risk assessment processes; public and participant involvement in the trial; ensuring the training and suitability of the research team; public registration of the trial; dissemination of the results; project oversight; guidance for academic supervisors and providing on-going quality assurance.

NB: HRA processes are being introduced in April 2016, admin aspects of this SOP may change rapidly. Please see HRA website for guidance.

EU Directive requires insurance or indemnity to be put in place for liabilities of the Sponsor and investigator. The legal responsibilities of the Sponsor are set out in Appendix 1.

Purpose and scope

The purpose of this standard operating procedure is to outline the review and development activities undertaken by the Joint Research Management Office (JRMO) before granting Provisional or Final Declaration of Sponsorship of CTIMPs, or signing the IRAS form on behalf of the Sponsor by Barts Health NHS Trust (BH) or by Queen Mary University of London (QMUL).

This SOP is written:

- a. To ensure that BH/QMUL JRMO staff are aware of the processes for obtaining provisional and final Sponsorship, for authorisation of the IRAS form as Sponsor of a CTIMP, medicinal devices and ATIMPs, and the documentation that they need to supply to the JRMO so that Sponsorship review can be undertaken.
- b. To ensure all BH or QMUL Sponsored CTIMPs have a formal Sponsorship agreement in place to comply with the legal requirements of the EU Directive on Clinical Trials and all UK Legislation (Medicines for Human Use [Clinical Trials] 2004 SI,1031, 1031 and all amendments), the Research

- Governance Framework for Health & Social Care 2005, and Good Clinical Practice (GCP).
- c. To ensure that all BH or QMUL Sponsored Clinical Trials that involve non-CE marked medical device trials have a formal Sponsorship agreement in place that comply with the legal requirements of the Medical Devices Regulations 2002 (Statutory Instrument 2002/618) which came into force on 13 June 2002 and implement the provisions of the Medical Devices Directive 93/42/EEC, Active Implantable Medical Devices Directive 90/385/EEC and In Vitro Diagnostic Medical Devices Directive 98/79/EEC.
 - d. This SOP also outlines the process for BH or QMUL to agree to act as EU Legal Representative of a CTIMP on behalf of a Sponsor who is based outside of the European Economic Area (EEA).

Scope

This SOP applies to all staff in the JRMO but in particular the Costing and Contract team, Research Governance Team and the GCP Team.

BH/QMUL Sponsored CTIMPs, Advanced Therapy Medicinal Products (ATMPs), Clinical Trials of non-CE marked Medical Devices that are required to notify MHRA before they start and all BH and QMUL staff working on any activity that falls under them. For the purpose of this SOP 'CTIMPs' means all regulated clinical trials including: CTIMPs, ATMP and Clinical Trials of non-CE marked devices.

Abbreviations:

BH	Barts Health NHS Trust
JRMO	Joint Research Management Office
QMUL	Queen Mary University of London
CTIMP	Clinical Trial of a Medicinal Product
ATMP	Advanced Therapy Medicinal Products

Definitions (if needed)

Chief Investigator: The UK Statutory Instrument 2004/1031 defines who can act as a Chief Investigator:

"chief investigator" means—

- (a) in relation to a clinical trial conducted at a single trial site, the investigator for that site, or
- (b) in relation to a clinical trial conducted at more than one trial site, the authorised health professional, whether or not he is an investigator at any particular site, who takes primary responsibility for the conduct of the trial;

"investigator" means, in relation to a clinical trial, the authorised health professional responsible for the conduct of that trial at a trial site, and if the trial is conducted by a team of authorised health professionals at a trial site, the investigator is the leader responsible for that team;

The Statutory Instrument distinguishes between 'authorised' health professional and health 'care' professional

Authorised health professional is defined as:

- (a) Doctor
- (b) Dentist
- (c) Nurse
- (d) Pharmacist

Health care professional is defined as

- (a) Doctor
- (b) Dentist
- (c) Nurse
- (d) Pharmacist
- (e) a person registered in a register of ophthalmic opticians maintained under section 7 of the Opticians Act 1989
- (f) a person registered in a register established and maintained under article 5 of Health Professions Order 2001

- (g) a registered osteopath as defined by section 41 of the Osteopaths Act 1993, or
- (h) a registered chiropractor as defined by section 43 of the Chiropractors Act 1994

Therefore, using the definition of ‘authorised’ health professional, only those professions listed (a) to (d) may act as a Chief Investigator (or a Principal or co-investigator).

For BH and QMUL *single site* sponsored CTIMPs the Chief Investigator will be the Barts Health NHS Trust site’s Principal Investigator.

Relevant SOPs

This SOP is closely linked with:

- SOP 1 Research project application
- SOP 7 Costing and Contracting for BH & QMUL Sponsored CTIMPs
- SOP 10 JRMO internal filing process
- SOP 11a BH-QMUL sponsorship - Process for Researchers
- SOP 13a Governance Permissions Sponsored
- SOP 14 Peer Review
- SOP 17c Process for Researchers - Amendments for Sponsored studies
- SOP 18a Project closure: guidance for research staff of Sponsored studies
- SOP 23 Risk Assessment
- SOP 38a Use of Computerized Equipment in a research projects
- SOP 38b Trial Data Management Systems
- SOP 40 Vendor assessment
- SOP 42a IMP Management -BH/QMUL Sponsored studies
- SOP 45 Essential documentation and Trial Master File (TMF)
- SOP 46 Site selection, site initiation and site activation

SOP Text

	Responsibility	Activity
1.	Costing and Contracts Officer	Cost the trial. (See SOP 7 Costing and Contracts for BH & QMUL Sponsored CTIMPs). Consult with the GCP Manager to ensure that appropriate CTIMP costs are included as per the tab on the Costing Questionnaire entitled: ‘CTIMP advice.’
2.	GCP Manager	Categorise the trial as a CTIMP. Firstly, agree with the CI whether or not the trial is a CTIMP. If it is not absolutely clear ensure the rationale for being a CTIMP or not is documented. If there is any uncertainty as to whether a trial is a CTIMP or a non-CTIMP, the GCP Manager must establish whether the trial falls within the scope of the Medicines for Human Use (Clinical Trials) Regulations 2004. GCP Manager should be cautious of any trials that involve any of the following in the protocol, as they may be a CTIMP: drugs; vitamins; nutritional supplements; food supplement; devices that deliver drugs e.g. stents; probiotics; or imaging tracers. Please refer to the MHRA website for guidance on determining whether a trial is a CTIMP. If it is still unclear the GCP Manager will send a scoping query to the MHRA by sending a copy of the protocol to the MHRA clinical trials helpline, and retaining documented evidence to support the MHRA’s decision (i.e. the email from the MHRA and version of the protocol sent). The GCP Manager should keep the CI informed of this decision-making process. It may be necessary to confirm the status of the trial with the MHRA at the grant stage to ensure that sufficient funds are costed and secured to support a successful CTIMP.

		<p>The MHRA's opinion whether a trial is a CTIMP is final. If the MHRA's opinion is unforeseen it is the CI's responsibility to comply with the applicable regulations of a CTIMP classification or revise their protocol so that it is no longer classified as a CTIMP. The GCP Manager, on behalf of the Sponsor, reserves the right to re-submit funding proposals and protocols for scoping review to the MHRA, including revisions to documents following the MHRA initial opinion including amendments once the trial has started (see SOP 17a - Amendments for Sponsored studies - process for JRMO).</p>
3.	GCP Manager	<p>Upon receipt of funding, hold a CTIMP Support Meeting with CI and Costing and Contracts Officer. (See Associated Document 5 CTIMP Support Meeting – Clarification Tool).</p> <p>Invite the CI to an initial meeting with the JRMO to discuss all the management support functions, governance issues, potential study costs and supply of the IMP or manufacture of the device for the trial. This meeting may not be necessary for every trial but is recommended for trials which will not be managed by a Clinical Trials Unit (CTU). Following the meeting the CI is expected to work with the Costing and Contract Manager on their funding applications (See SOP 07 Costing & Contracts). All funding milestones must be reviewed by the JRMO/GCP Managers before they are agreed with the funders. This is to ensure that they are realistic and feasible. Where possible invite a Governance Officer to attend and the draft copy of the HRA Schedule of Events and Statement of Activities templates should be discussed.</p>
4.	GCP Manager	<p>For non-EEA Sponsored CTIMPs – decide whether BH/QMUL agree to be the UK Legal Representative.</p> <p>If QMUL or BH are asked to act as UK Legal Representative of a CTIMP whose main Sponsor is based outside of the European Economic Area (EEA) the GCP Manager will liaise with the Sponsor Oversight Group and report back to the CI/UK Investigator. Once the Sponsor Oversight Group has made a decision whether to act as UK Legal Representative the GCP Manager will notify the UK lead researcher</p> <p>In all trials for which BH or QMUL agrees to act as EU legal representative a contract will be put in place with the Sponsor to detail the responsibilities BH/QMUL have agreed to undertake on behalf of the Sponsor. If the Sponsor Oversight Group refuses to act as UK Sponsor Rep the CI may appeal in accordance to the JRMO escalation process.</p> <p>The GCP Manager will assess whether the research team needs to transfer the protocol onto the JRMO CTIMP template protocol. The assessment will be based upon whether the existing protocol meets QMUL/Barts standards and UK and EU regulations.</p> <p>Once the JRMO have agreed to act as Legal Representative, the process follows as per the rest of this SOP.</p>
5.	GCP Manager	<p>Discuss the assignment of the Chief Investigator.</p> <p>If the CI has not previously worked as a CI on a BH or QMUL sponsored CTIMP, discuss their proposal to be the CI with the Sponsors Oversight Group. For trials Sponsored by QMUL or BH, the CI must have a substantive contract with the Sponsor (BH or QM accordingly). In order for the Sponsor to delegate to the CI the role of pharmacovigilance medical assessor, CI's must be medically qualified in the therapeutic area and be able to prescribe the IMP of this trial. Where necessary, the GCP Manager may liaise with the Sponsor Oversight Group to make this decision.</p>

		<p>The following may be considered by the Sponsor Oversight Group: previous experience as a CI/PI on non-commercial or commercial CTIMPs, multi-site/international trials (where relevant), experience on non-CTIMP trials, previous GCP and regulatory compliance, previous experience of working on MHRA inspected trials, previous experience of safety assessments/pharmacovigilance. The CI does not necessarily have to be the grant holder but it is expected that the CI is centrally involved in the protocol writing and development.</p> <p>For new CIs the GCP Manager and Sponsor Oversight Group will work with the research team or the Clinical Academic Group (CAG) Institute to assess their experience and determine whether additional peer support, training or trial management support is required.</p> <p>If, however, there are concerns about an experienced CI's previous non-compliant management of a CTIMP, the GCP Manager will escalate to the Sponsors Oversight Group who will make a decision on the suitability of the CI.</p>
6.	GCP Manager	<p>International Studies.</p> <p>Only QMUL can Sponsor international research with a QMUL substantially employed CI. BH, which has NHS's CNST indemnity, cannot cover non-NHS sites including international sites and therefore cannot sponsor international studies. The CI must be open and honest with the JRMO about their plans to open international sites at the outset.</p> <p>The GCP manager to request a full justification for international trials. The selection of countries must be given prior to Sponsorship approval. (This will also include information about any Clinical Research Organisation (CRO) that will be used to coordinate and secure international regulatory approvals (see SOP 6 – Vendor Assessments), and assigning a 'National Coordinating Centre' (NCC) for each country who is responsible for regulatory approvals and reporting. (See SOP 07 Costing and Contracts associated document 1 for costing considerations for international trials and see SOP 46 Site Activation) for information that needs to be supplied to the JRMO for international site selection or additional sites, or additional countries.</p> <p>The GCP Manager must approve the trial expanding internationally and, as Sponsor, reserves the right to refuse expansion. Appeals to the JRMO's decision may be made to the Sponsor Oversight Group and via the JRMO escalation procedure.</p>
Provisional Sponsorship Approval		
7.	Governance Team Leader	<p>Upon receipt of a Provisional Sponsorship Submission, assess whether the Sponsorship application pack is valid, register/log on ReDa and assign to a Governance Officer.</p> <p>On receipt of an application it must be checked against the list of mandatory documents by using Associated document 1 of this SOP to ensure that it is a valid submission. Within 5-working days of the JRMO receiving the submission, the Governance Partnership Coordinator must send an email to the CI/research team confirming receipt of a valid submission or an email rejecting the submission due to missing mandatory documents. If any document/s has not been sent to the JRMO the Governance Partnership Co-ordinator must request copies from the CI or their coordinating team.</p> <p>The date of Sponsorship submission is the date the JRMO receives a complete valid submission application. The JRMO's clock will not start until a valid submission is received. N.B. A valid submission includes written confirmation that</p>

		<p>funding has been secured to cover the entire trial. The JRMO only reviews studies with secured funding; failure to provide confirmation of funding may result in the JRMO rejecting the application until they are provided with evidence of secured funding.</p> <p>Upon receipt of a valid application, the Governance Partnership Co-ordinator must locate the study on ReDa or add it as a new study and allocate a ReDa number.</p> <p>Allocate the study based upon workload, priority of the study, known milestones and experience of the Governance Officer. Notify the Governance Officer of their new study.</p> <p>Schedule a one-hour Kick-off Meeting with the following people: CI, GCP Manager, Governance Officer, Contracts Manager, Pharmacy, JRMO Monitor, Monitor (if not monitored by the JRMO), Trial Manager, Clinical Physics (if a device trial). The CI must be present for the meeting to go ahead.</p>
8.	<p>JRMO Governance Officer / (Governance Team Leader may assume this role if allocated the trial)</p>	<p>Notify the CI that you have been assigned the study for Sponsorship. Review all documents and coordinate/facilitate the approvals. Feedback comments to the CI.</p> <ul style="list-style-type: none"> • Ideally within one working day but no later than 5-working days of being informed that you are the governance lead, notify the CI and the GCP Manager that their study has been allocated to them for a CTIMP for Sponsorship review. • Ask the CI/research team whether there are any milestones that need to be met i.e. deadlines for REC/first patient recruited etc. Where possible, give estimated review timelines for providing them with feedback. • The JRMO Governance Officer's review is the primary Sponsorship review and includes both the protocol, IRAS form and all documents that are submitted for REC and the MHRA approval, including IMP labels. • Review all documents and ensure that the JRMO has received all documents that will be submitted to MHRA/REC/CAG/HRA approval. • The governance review should be done in parallel to the GCP Manager's review. Ensure that the information in all documents is <u>consistent</u> i.e. that the information in the PIS, protocol, supporting documents and applications to regulators match. • Review the protocol to ensure that it meets appropriate <u>standards</u> and corresponds to the <u>protocol guidance</u>, using the current JRMO protocol template version. Ensure that no template wording remains in the protocol. • Ensure that Sponsorship <u>approval from support departments</u> Imaging, Clinical Physics and Pharmacy, are received and saved in the file from each support department. • Certify that adequate independent <u>peer review</u> (for guidance see SOP 14 – Peer Review) has been obtained and that any feedback from peer reviewers has been addressed in the application. • Any concerns about the application should be brought to the attention of the

		<p>Governance Team Leader, GCP Manager and/or raised with the relevant BH/QMUL expert i.e. Information Governance, HTA representative, IT.</p> <ul style="list-style-type: none"> • Save all correspondence and all versions of submitted CTIMP documents in the indemnity file so that it is readily available for inspection of the Sponsorship review process. For CTIMPs, all correspondence with key decisions or information should be printed in the file and saved in Indemnity, so that they are readily available for MHRA Inspection (see SOP 10 – Filing). • All governance decisions (including in meetings and by phone) and correspondence must be documented and saved in the study file. The Governance Officer must not use pencils or correction fluid on documents during the governance review. • Work with the Costing and Contracts Manager to ensure that the HRA Schedule of Events and Statement of Activities for HRA Approval have been completed and all activates in the protocol and costs identified (see HRA website for details).
9.	GCP Manager	<p>Undertake Sponsorship review and risk assessment of the protocol and trial and feedback to CI.</p> <p><u>Clinical Trial Application and Protocol review</u></p> <ul style="list-style-type: none"> • The GCP Manager’s review should be done in parallel with the governance officer’s review. • The GCP Manager must ensure that the Clinical Trial Application and protocol complies with Good Clinical Practice standards, referring to the protocol guidance. Particular importance must be made to the pharmacovigilance procedures (see SOP 26a - Pharmacovigilance) and the end of trial definition/procedures (see SOP 18a - Project closure: guidance for research staff of sponsored studies). • Review patient related documents and the protocol and address any areas of concern with the research team. Where possible combine comments with the JRMO Governance Officer’s feedback. • Perform risk assessment as per SOP 23 (Risk Assessment). • Ensure that the JRMO Governance Officer is aware of the GCP team’s items outstanding. N.B. To avoid delays, comments to the CI can be sent separately from the Governance Officer’s feedback. However, both the GCP and Governance Officer should read each other’s feedback to ensure that the feedback to the research team is consistent and to avoid multiple sets of comments. • Ensure study has been added to JRMO CTIMP dossier and Sponsor oversight group meeting documents. • Invite the CI to forthcoming Chief Investigator training and ensure that the research team are aware of the approvals process i.e. how it differs from non-CTIMP studies including final Sponsorship and the greenlight process).

10.	Costing and Contracts Officer	<p>Hold the Kick-off Meeting and then inform the GCP Manager and Governance Officer when primary contracts are in progress.</p> <p>The purpose of the Kick-off meeting is to identify all contracts required before the Final Declaration of Sponsorship can be given.</p> <p>See Associated Document 2 (Costing and Contract Checklist) for meeting guidance.</p> <p>Contracts Officer is responsible for creating the contract checklist and sending a draft to the CI for confirmation that all contracts have been identified.</p> <p>If the contract terms have not been agreed or the Contract Manager has concerns, the GCP Manager and Governance Officer should be informed.</p> <p>Any queries about the HRA Schedule of Events and Statement of Activities should be addressed to ensure that all activates in the protocol and costs identified for all sites (see HRA website for details).</p>
11.	GCP manager	<p>During Kick-off Meeting ensure Conditions of Sponsorship (see Associated Document 3) is discussed and resigned.</p>
12.	GCP Manager	<p>When GCP Manager's checklist is complete inform the Governance Officer that the GCP team are ready to issue provisional Sponsorship. Sign-post CI to the next steps.</p> <p>Review revised documents and the GCP Manager's Checklist (associated document 6). Work with the CI and team to ensure that a GCP compliant protocol has been achieved and a consensus is reached. Once satisfied that all relevant processes are complete for this stage in the provision of Sponsorship, inform the JRMO Governance Officer that they can issue Provisional Sponsorship Approval.</p> <ul style="list-style-type: none"> Ensure that the CI is aware of the trial set-up SOPs including: SOP 46 - Site selection, site initiation and site activation, SOP 47- Trial Committees and SOP 45 - Essential documentation and Trial Master File (TMF), and associated documents so that relevant trial documents are under development to avoid any delays with the 'greenlight to activate sites' process. <p>Allocate a JRMO monitor to the CTIMP. Where possible include the JRMO Governance officer and JRMO monitor in any meetings about the trial to share information and as part of the monitor's trial training.</p>
13.	JRMO Governance Officer /(Governance Team Leader may assume this role if allocated the trial)	<p>Ensure feedback to the CI is comprehensive and complete. Ensure all approvals are in place and that the GCP Manager has authorised, before issuing Provisional Sponsorship Approval.</p> <p>The JRMO Governance Officer must review documents and information provided by the CI. Update the JRMO feedback form accordingly and ensure that all necessary documents have been received (see Associated document 1 - JRMO Submission checklist) reviewed and saved according to the SOP 10 - Filing. Where necessary provide further feedback to the CI and any relevant parties until consensus is reached. Ensure all approvals are in place including Imaging, Clinical Physics and Pharmacy approval and peer reviews. Minimise feedback by making it clear to the CI what is essential to meet the regulations and what is recommended.</p> <p>When all applicable parties [e.g. CI, Clinical Radiation Expert (CRE) and Medical Physics Expert (MPE) etc.] have electronically signed [authorised] the application</p>

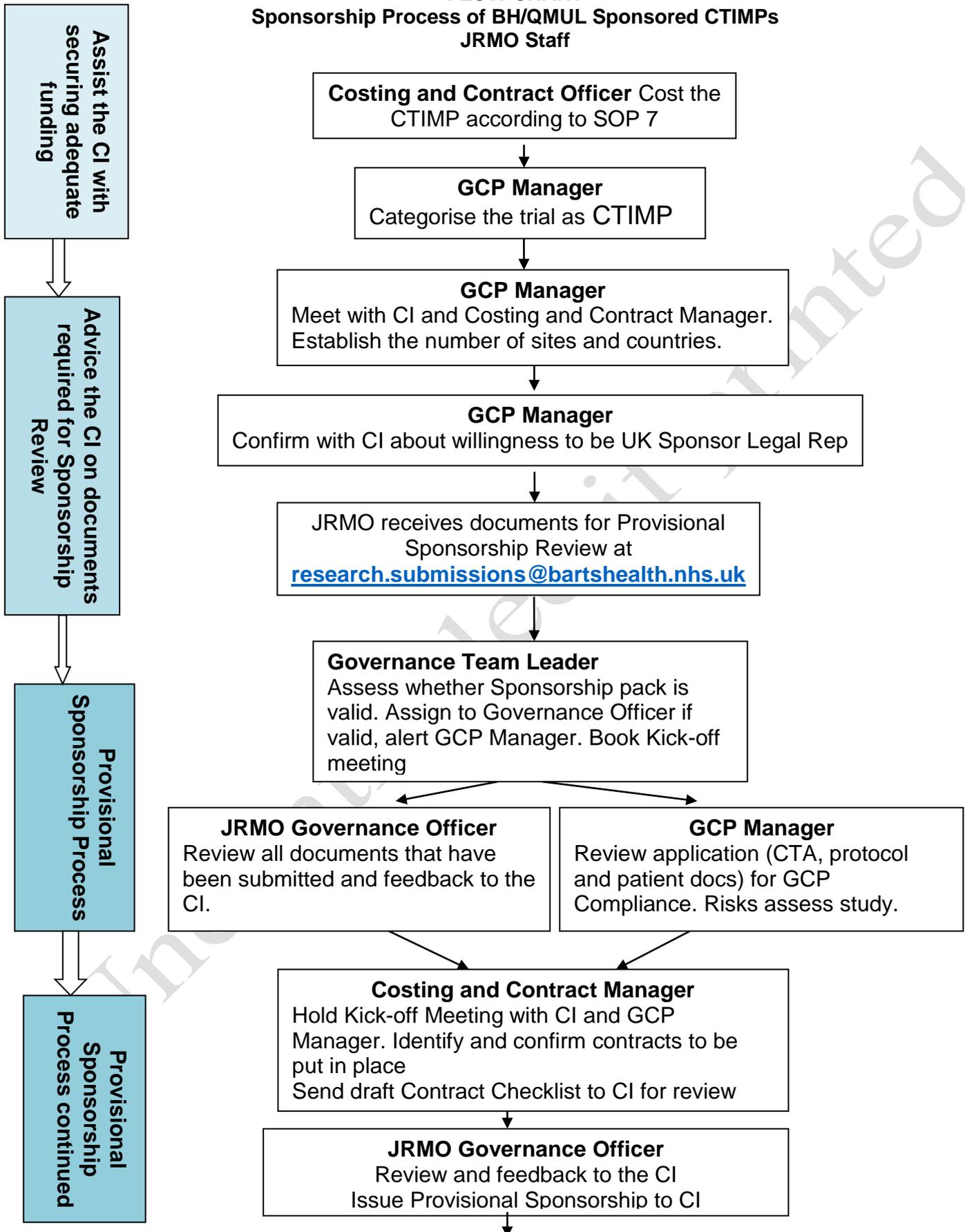
		<p>and upon receipt of confirmation that GCP Manager is ready to proceed, issue Provisional Sponsorship approval (associated document 6). This letter may include specific conditions which must be met before BH/QMUL will agree to issue Final Declaration of Sponsorship.</p> <p>The CTIMP full document set should be uploaded on to ReDa (all documents on the submission checklist – see associated document 1) and a final approved version of the documents are saved in JRMO BH indemnity folder.</p> <p>The JRMO Governance Officer must update ReDa including events tab, status, risk assessment score, logging of IMPs (see SOP 10 – Filing). Hard copy filing of all study documents is mandatory for CTIMPs.</p>
<p>Check that MHRA, HRA and REC conditions are met. Issue Final Declaration of Sponsorship.</p>		
14.	<p>JRMO Governance Officer /(Governance Team Leader may assume this role if allocated the trial)</p>	<p>Check that all MHRA and REC conditions of approval are met. Once the MHRA, HRA and REC approval are received (including documented evidence that their conditions of approval have been met), ask the Contract Manager for an update on the progress of the contracts.</p> <p>The IRAS form may be authorised on behalf of the Sponsor, once the JRMO has received copies of the following documents from the research team:</p> <ul style="list-style-type: none"> • MHRA approval (or in the case of Type A trials acknowledged by the MHRA) • MHRA conditions have been met • REC approval • REC conditions have been met • HRA Approval <p>Ensure that these documents are saved in the Sponsor File and in the Indemnity drive.</p>
15.	GCP Manager	<p>Schedule the Final CTIMP meeting. The following people must be invited to the meeting:</p> <ul style="list-style-type: none"> • CI • Costing and Contracts officer/s, • GCP Manager/s, • JRMO Monitor (as part of their trial specific training – this includes studies for which they receive quarterly monitoring reports from external monitors) , • Trial Coordinator/Trial Manager, • Trial Monitor (if monitored by person outside of the JRMO), • Pharmacist. <p>(see point 19 for meeting details)</p>
16.	Costing and Contracts Officer	<p>Finalise the Contracts Checklist. Following the Final CTIMP meeting (see point 19) the Costing and Contracts checklist should be finalised and sent to the CI for signature (see SOP 7 - Costing and Contracts for BH and QMUL Sponsored CTIMPs). The JRMO Governance Officer cannot issue Final Declaration of Sponsorship until the Costing and Contracts checklist has been signed by the CI and returned to the Costing and Contracts Manager</p> <p>Inform the GCP Manager and Governance Officer in writing once the Contract checklist is complete.</p>
17.	JRMO Governance Officer	<p>Prepare for Final Declaration of Sponsorship to the CI. Final Declaration of Sponsorship can be issued by the Governance Officer once:</p> <ul style="list-style-type: none"> • Everything has been received including an email from the GCP Manager

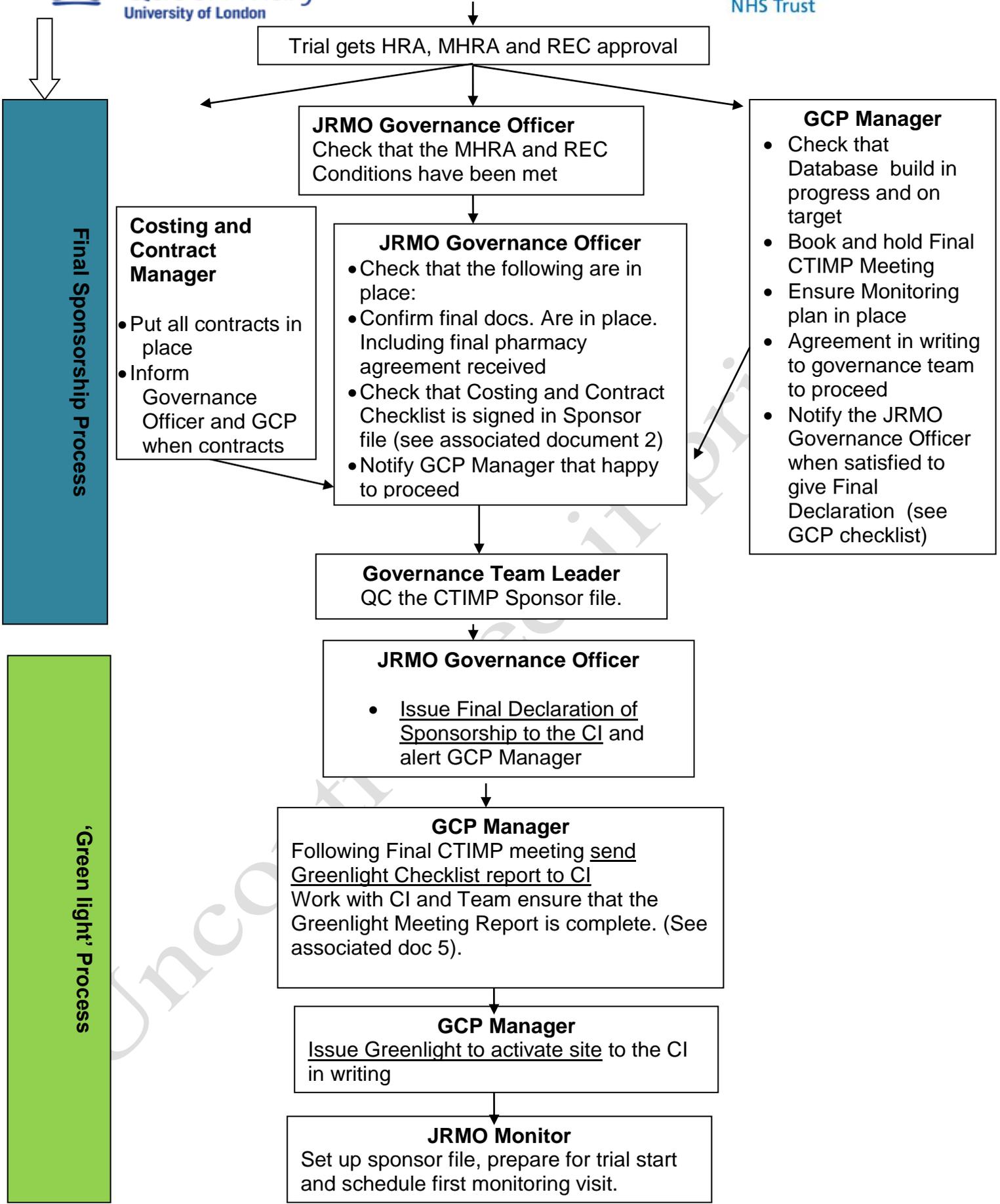
	/(Governance Team Leader may assume this role if allocated the trial)	<p>who has confirmed that they are satisfied that trial is GCP compliant.</p> <ul style="list-style-type: none"> • Contracts Checklist has been received from the Contract Manager and saved in the Sponsor file. • CI and Statistician have signed the protocol. <p>When satisfied, ask the Governance Partnership Co-ordinator to QC the CTIMP Sponsor file.</p>
18.	Governance Team Leader / or independent Governance Officer/ Research and Development Governance Operations Manager	<p>QC the CTIMP Sponsor file.</p> <p>The Governance Team Leader should review the trial paperwork to ensure all final hardcopy documents are ready for the sponsor file. If the Governance Team leader conducted sponsorship review, someone independent should perform the QC checks i.e. the Research and Development Governance Operations Manager. Check that ReDa, Indemnity and the Sponsor file are complete and that all items have been completed on the Governance Feedback Tracking sheet. Once satisfied that all governance items are complete confirm with the Governance Officer in writing. (see Associated Document 7 – QC checklist)</p>
19.	JRMO Governance Officer	<p>Send Final Declaration of Sponsorship to the CI.</p> <p>Send the Final Declaration to the CI (SOP 13a – Governance permissions for sponsored studies). Update ReDa, indemnity and the folder, print and save hardcopy and pass the whole hardcopy study file to the JRMO Monitor.</p>
'Green light' to Activate Research Sites.		
20.	GCP Manager	<p>Hold the Final CTIMP meeting.</p> <p>Once the REC, HRA and MHRA approvals have been received, the GCP Manager should hold the Final CTIMP meeting. The purpose of the final CTIMP meeting is for the Sponsor to identify all outstanding items before the GCP Manager can issue the 'green light' to activate the sites. This meeting can occur before or after the Final Declaration of Sponsorship is issued by the Governance Officer but must be after the REC and MHRA have approved the study. If the Declaration of Sponsorship has not been issued it is advisable to invite the Governance Officer to the 'Final CTIMP meeting' so that their final items are addressed in the meeting.</p> <p>The CI must be present for the meeting to take place. Other members of the JRMO or trial team are welcome to join the meeting e.g. research nurse, data manager, and statistician as part of trial specific training, clinical physics expert (if a non-CE marked device).</p> <p>The Final CTIMP Meeting Report (see Associated Document 5) should be used as an agenda and circulated before the meeting so that the CI and team can prepare. At the meeting, an attendance sheet must be completed and saved in the Sponsor file. Following the meeting, the Final CTIMP Meeting Report (see Associated Document 5) must be completed by the GCP Manager and distributed to the study team. Any actions or items outstanding identified in the meeting should be emailed to the CI and followed up to resolution. Where necessary further meetings may be scheduled and must also be minuted.</p> <p>Ask the CI to bring the TMF as evidence that they are ready to start. Where necessary ask the JRMO monitor to review the TMF before issuing the 'green light' to activate sites.</p> <p>Ensure Conditions of Sponsorship (see Associated Document 3) is discussed and resigned.</p>
21.	GCP Manager	<p>Upon completion of all items send email that gives the 'green light' to activate sites.</p> <p>Issue 'green light' to activate sites when evidence that all actions are completed.</p>

		Send this to the CI, coordinating team, monitor, database manager (including JRMO IT if relevant). (see Associated document 8) Notify the JRMO monitor.
22.	JRMO Monitor	<p>Set up Sponsor File, schedule first monitoring visit, as per monitoring plan, set annual report reminders on ReDa.</p> <ul style="list-style-type: none"> To ensure that all annual report reminders are set before they are due, update ReDA with DSUR and APR and end of trial reminders. <p>Obtain relevant Sponsor file from the governance officer and set-up in and store in the GCP team's CTIMP cupboard.</p>

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Sponsorship Process of BH/QMUL Sponsored CTIMPs
JRMO Staff





Appendix 1 Reproduced from the MHRA Guide ISBN 978 0 11 708107 9)

Sponsor's Function and Responsibilities	UK Statutory Instrument I 2004/1031 Reference
A. Authorisation for clinical trials and research ethics committee opinion	
Obtain required authorisations to commence the trial (clinical trial authorisation and favourable ethics committee opinion)	Part 3: Regs. 12, 13, 17, 18, 19 and 20 Schedules 3,4 and 5
Keep records of all amendments to the authorisations and obtain approval where approvals are required	Part 3: Regs. 22, 24, 25 and 26
Produce undertaking to allow inspection of premises in third countries if required	Part 3: Reg. 21
Notify all relevant bodies of the conclusion or termination of the trial within the specified timeframes	Part 3: Reg. 27
B. GCP and the conduct of clinical trials	
Ensure that the conditions and principles of Good Clinical Practice are satisfied and adhered to	Part 4, Reg. 28 Schedule 1
Ensure that the trial is conducted in accordance with the protocol and subsequent amendments	Part 4: Reg. 29
Notify any serious breaches of Good Clinical Practice or the protocol, or any urgent safety measures taken to the appropriate authorities	Part 4: Regs. 29A and 30
Ensure investigational medicinal products and relevant devices are available to subjects free of charge	Part 4: Reg. 28
Keep a trial master file to hold all documents relating to that trial	Part 4: Reg. 31A
Appoint named individuals responsible for archiving the trial essential documents	Part 4: Reg. 31A
C. Pharmacovigilance	
Ensure an investigator's brochure exists and is validated and updated at least annually	Part 1: Reg. 3A
Keep records of all adverse events relating to that trial which are reported by investigators	Part 5: Reg. 32
Record and report suspected unexpected serious adverse reactions to appropriate authorities within specified timelines	Part 5: Reg. 33
Ensure all suspected unexpected serious adverse reactions including those in third countries are entered into the European database	Part 5, Reg. 34
Provide annual list of suspected serious adverse reactions and a safety report to the appropriate authorities	Part 5: Reg. 35
D. Manufacture and labelling of investigational medicinal product	
Meet requirements for the authorisation to manufacture and import investigational medicinal product (including the use of hospital exemptions)	Part 6: Regs. 36 and 37 Schedules 6, 7 and 8
Certification of the investigational medicinal product by a Qualified Person	Part 6: Reg. 43
Two-step release process for investigational medicinal product ('technical release' and 'regulatory release')	Part 6: Reg. 43
Ensure investigational medicinal product is labelled in accordance with Article 15 of Commission Directive 2003/94/EC	Part 7: Reg. 46

Change Control

This section outlines changed from version 6.0 to version 7.0

Section Changed	Summary and description of change
March 2016	Complete rewrite of SOP, dividing into SOP for researchers and SOP for JRMO

List of appendices *(this is embedded text such as template wording)*

	Appendix name
Appendix A	Sponsor's Function and Responsibilities UK Statutory Instrument I 2004/1031 Reference

List of Associated Documents *(these are standalone documents)*

Associated Document 1	JRMO Document Submission checklist
Associated Document 2	JRMO Contract Checklist – kick-off meeting
Associated Document 3a	BH Conditions of Sponsorship (CI) (not a public document)
Associated Document 3b	QMUL Conditions of Sponsorship (CI) (not a public document)
Associated Document 3c	BH Conditions of Sponsorship (CI & CTU) (not a public document)
Associated Document 3d	QMUL Conditions of Sponsorship (CI & CTU) (not a public document)
Associated Document 4	Final CTIMP Meeting Report
Associated Document 5	Support Meeting – Clarification Tool (not mandated)
Associated Document 6	GCP Managers set-up Checklist
Associated Document 7	Final Governance Team QC counter checklist
Associated Document 8	Greenlight to activate sites email (not a public document)