Standard Operating Procedures (SOP) for:			
Reporting of Serious Breaches of GCP or the Trial Protocol			
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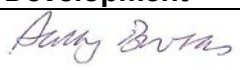
Signature	
Date	**1/6/16**

Purpose and Objective:
To identify and standardise the process for reporting Serious Breaches of GCP or the trial protocol. Regulation 29A of the Medicines for Human Use (Clinical Trials) Regulations 2004 [Statutory Instrument 2004/1031], as amended by Statutory Instrument 2006/1928, contains a requirement for the notification of 'serious breaches' of GCP or the trial protocol, by the sponsor to the MHRA within 7 days of becoming aware of that breach. NHS REC committees also require serious breaches to be reported to the approving REC within 7 days. It is the responsibility of all staff involved in a study to identify and report potential serious breaches occurring during the day to day running of a clinical trial. The sponsor is responsible for assessing potential serious breaches, for the final decision of whether the event is consider to be a serious breach and for notifying the MHRA of any serious breach.
Scope:
This SOP applies to all studies sponsored or hosted by Bart's Health NHS Trust or Queen Mary University of London. The majority of instances of deviations or breaches are technical deviations that do not result in harm to the trial subjects or significantly affect the scientific value of the reported results of the trial. These cases should be documented e.g. in the Case Report Form (CRF) for the trial or Trial Master File (TMF) in order for appropriate corrective and preventative actions to be taken. In addition, these deviations should be included and considered when the clinical study report is produced as they may have an impact on the analysis of data. However, not every deviation from the protocol needs to be reported to the Joint Research Management Office (JRMO) as a 'serious breach'.

Abbreviations:	
BH	Barts Health NHS Trust
JRMO	Joint Research Management Office
QMUL	Queen Mary University of London

Definitions *(if needed)*
Serious breach (As defined by MHRA): A serious breach of GCP or the trial protocol is defined as a breach which is likely to affect to a ***significant*** degree: i) The safety or physical or mental integrity of the subjects of the trial or ii) The scientific value of the trial. Hosted Studies: Externally sponsored studies.
Relevant SOPs
SOP 31 Non-conformances

SOP Text

	Responsibility	Activity
1.	All	**Identify the existence of a potential breach or deviation from/of GCP or the protocol during the day to day running of the trial and inform the PI.** A serious breach of GCP or the trial protocol is defined as a breach which is likely to affect to a ***significant*** degree: i) The safety or physical or mental integrity of the subjects of the trial or ii) The scientific value of the trial In addition all breaches of : (a) The conditions and principles of GCP in connection with that trial; or (b) The protocol relating to that trial, (including all amendments) should be reported.
2.	Principal Investigator	**Notify the sponsor immediately.** (If the study is sponsored by BH or QM, the contact point is the JRMO Research Governance and GCP Manager for the study). Initial notification can be made via telephone or email. As much information as possible should be provided. (The 7 day notification to MHRA clock commences here). The initial notification should be followed by written notification of a potential serious breach. The PI should send the notification form to the sponsor representative within **24hrs** of becoming aware of the potential breach. If the incident involves a BH Trust patient or staff member, consider if it meets the requirements of the Trust Incident Reporting policy as necessary.
For CTIMP Studies		
For BH and QM sponsored studies		
	Responsibility	Activity
3.	RG and GCP Manager	**Review the incident/event.** When notified of a potential serious breach, the information should be reviewed in a timely manner. Any additional information required should be requested. **Inform the QA Manager about the incident/event**
4.	QA Manager	**Log the incident/event appropriately in the study file and central log.** Once informed by the RG and GCP Manager, the QA Manager should log the initial report and make sure the event is followed to resolution.
5.	RG and GCP Manager	**Assess the incident/event and decide if it is a serious breach.** Once necessary information has been received, the RG & GCP manager should decide if the incident or event is a serious breach. Please refer to the MHRA website for further guidance on the notification of serious breaches of GCP or the trial protocol. If the incident/event meets the criteria of a serious breach, the MHRA Notification of Potential Serious Breach of GCP or Trial Protocol Form (see Associated Document 1) should be completed. If the incident/event is deemed not to be a potential serious breach, the PI and research team may still need guidance and it should still be followed-up to ensure it is managed appropriately. In most cases the CI/PI and research team will be in agreement on whether a breach exists. If there is disagreement on the issue, it should be discussed but the sponsor is ultimately responsible for making this decision. Evidence and reasons behind the decision made should be carefully documented and filed appropriately. NB: The safety or physical or mental integrity of the subjects of the trial should be relevant to trial subjects in the UK. The MHRA guidance indicates that all other aspects should be reported for even if for non UK sites.

6.	RG and GCP Manager	**Submit completed Notification of Potential Serious Breach of GCP or Trial Protocol Form (Associated Document 1) to MHRA within 7 days.** Details about how to submit to the MHRA can be found on the MHRA website. Ensure agreed corrective and preventative actions are included. Ensure both the study team and JRMO files receive a copy of the document sent to the MHRA. The MHRA will confirm receipt of the potential breach and an inspector will be allocated to the breach for review.
7.	Investigator	**Inform the REC about the serious breach within 7 days.** REC submission takes the form of a copy of the MHRA submission plus cover letter. This can be emailed or posted to the REC which approved the study. Ensure any/all follow-up information is forwarded on.
8.	RG and GCP Manager/ Principal Investigator	**Provide relevant information and follow up to the MHRA.** The Research Governance and GCP Manager and PI should work together to provide relevant information to the MHRA and follow up any further actions the MHRA request. The Research Governance and GCP Manager and PI must ensure all required actions are completed and that the breach is then closed. The MHRA will formally email to state no further information is required.
For hosted CTIMP studies		
9.	Sponsor representative or PI	**Inform JRMO of potential breach and forward all relevant paperwork.**
10.	RG and GCP Manager/GCP Team	Review serious breach and record with study documentation. As it is the sponsor's responsibility to assess the breach and ensure resolution, the JRMO Research Governance & GCP Manager will assist only where requested or where necessary.
For Non CTIMP Studies		
For BH and QM sponsored studies		
11.	RG and GCP Manager/QA Manager	**Review the incident/event.** When notified of a potential serious breach, the information should be reviewed in a timely manner. Any additional information required should be requested.
12.	QA Manager	**Log the incident/event appropriately in the study file and central log.** Once informed by the RG and GCP Manager, the QA Manager should log the initial report and make sure the event is followed to resolution.
13.	RG and GCP Manager	**Asses the incident/event and decide if it is a serious breach.** If the incident/event meets the criteria of a serious breach, the Notification of Potential Serious Breach of GCP or Trial Protocol Form (Associated Document 2) should be completed. If the incident/event is deemed not to be a potential serious breach, the CI/PI and research team may still need guidance and it should still be followed-up to ensure it is managed appropriately. NB: In most cases the CI/PI and research team will be in agreement on whether a breach exists. If there is disagreement on the issue, it should be discussed but the sponsor is ultimately responsible for making this decision. Evidence and reasons behind the decision made should be carefully documented and filed appropriately.
14.	Principal Investigator	**Submit to the approving REC for the attention of the Chairperson.** Document and describe the event, including both corrective and preventative action taken or planned, including supporting documentation as needed.
15.	Principal Investigator/ RG and GCP Manager	**Ensure all required actions are completed.** The PI, with the support of the RG and GCP Manager, must ensure all required actions are completed and that the breach is then closed. The REC will acknowledge in writing and further information or clarification may be requested until the incident is closed.

For hosted Non-CTIMP studies		
16.	Sponsor representative or PI	**Inform JRMO of potential breach and forward all relevant paperwork.**
17.	RG and GCP Manager/GCP Team	Review serious breach and record with study documentation. As it is the sponsor's responsibility to assess and ensure resolution, the JRMO RG & GCP Manager will assist only when requested or when necessary.

Change Control

This section outlines changed from version 4.0 to version 5.0

Section Changed	Summary and description of change
All	New template used
All	Minor corrections
Relevant SOPs	Relevant SOPs added
4	QA Manager responsibilities added
Associated Documents	Addition of Non- CTIMP form

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

	Document name
Associated Document 1	MHRA Notification of Serious Breach of GCP or Trial Protocol Form
Associated Document 2	Non-CTIMP - Notification of Serious Breach of GCP or Trial Protocol Form

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