



THE SABAN RESEARCH  
INSTITUTE

# Tea With The IRB:REPORTING NEW INFORMATION-CHLA STUDY TEAM RESPONSIBILITIES

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- Understand the reporting and monitoring responsibilities of
  - Investigators
  - Sponsors
- Understand CHLA IRB prompt reporting requirements of new information
- Understand the requirements for prompt reporting of new information to another IRB (CHLA is not the Reviewing IRB)

- Responsibilities Include:
  - Monitoring of **safety** for individual subjects
  - Monitoring of the **conduct** of the research
  - Monitoring of the **data collected** to ensure subject safety
- This is shared responsibility

# Plan for Monitoring the Safety and Data

- A good plan for monitoring safety and data will allow for prompt reporting of new information to the IRB
- It is the responsibility of the investigator/sponsor to notify the IRB of events that might affect the criteria for approval, e.g., risk to benefit assessment
  - IRBs need information to evaluate if the risk to benefit assessment has changed
  - IRBs are not positioned to review individual events (data) except when events are unanticipated problems involving risk to subjects or others

# Why Report New Information?

- IRBs are required to review new information, per regulation
- When new information is submitted for review, the IRB must determine whether the information represents:
  - An **unanticipated problem** involving risks to subjects or others;
  - **Non-compliance** with the federal regulations or with the requirements or determinations of the IRB; and,
  - **Non-compliance that is serious or continuing.**

# Investigator Guidance on the Website

## Investigator Guidance Documents

Below are guidance documents for CHLA investigators who are conducting human research.

[Submitting for IRB Review](#) ▼

[Recruitment, Consent and Assent](#) ▼

[Reporting Events and New Information to the IRB](#) ▲

- [New Information that Requires Prompt Reporting](#) ←

[Drugs and Devices](#) ▼

[Amendments to CHLA IRB Approved Research](#) ▼

[Continuing Review Requirements and Submission of Closure Reports](#) ▼

Information that indicates a **new or increased risk**, or a **new safety** issue.

Examples:

- New information (e.g., an interim analysis, safety monitoring report, publication in the literature, sponsor report, or investigator finding) indicates an **increase in the frequency or magnitude of a previously known risk or uncovers a new risk**
- An investigator brochure, package insert, or device labeling is revised to indicate an **increase in the frequency or magnitude of a previously known risk, or describes a new risk**
- Withdrawal, restriction, or modification of a marketed approval of a drug, device, or biologic used in a research protocol

- **Harm** experienced by a subject or other individual, which in the opinion of the investigator are **unexpected and probably related** to the research procedures.
  - A harm is “unexpected” when its **specificity or severity are inconsistent with risk information** previously reviewed and approved by the IRB in terms of nature, severity, frequency, and characteristics of the study population.
  - A harm is “probably related” to the research procedures if in the opinion of the investigator, the **research procedures more likely than not caused the harm**.

- **Non-compliance** with the federal regulations governing human research or with the requirements or determinations of the IRB, or an allegation of such non-compliance
- **Audit, inspection, or inquiry** by a federal agency and any resulting reports (e.g. FDA Form 483)
- **Written reports** of study monitors (when there are findings)
- **Failure to follow the protocol** due to the action or inaction of the investigator or research staff
- **Breach** of confidentiality

- **Protocol violation** that harmed subjects or others or that indicates subjects or others might be at increased risk of harm
- **Complaint of a subject** that indicates subjects or others might be at increased risk of harm or at risk of a new harm
- Any changes significantly affecting the conduct of the research
- **Unanticipated adverse device effect** (any serious adverse effect on health or safety or any life-threatening problem or death caused by, or associated with, a device)

- **Change to the protocol** taken without prior IRB review to **eliminate an apparent immediate hazard** to a subject
- **Incarceration of a subject** in a study not approved by the IRB to involve prisoners
- **Complaint of a subject** that **cannot be resolved** by the research team
- **Premature suspension or termination** of the protocol by the sponsor, investigator, or institution

Violations, deviations, and incidents should be reported to the CHLA IRB only if:

- It affects the safety and welfare of subjects, indicates a new or increased risk
- It is new safety issue
- It has caused harm to a subject or other individual(s)
- It is noncompliance with federal regulations or the requirements or determinations of the IRB

## CHLA Requirements

- Reportable new information must be submitted to the CHLA IRB within 5 business days
- Information that does not fall under any of the following categories in the investigator guidance document does not require reporting to the CHLA IRB

## NOTES:

- Not all IRBs have the same prompt reporting requirements
- CHLA study teams must follow the reporting requirements of the Reviewing IRB to determine what new information requires prompt reporting

- CHLA study teams are responsible for understanding the Reviewing IRB's requirements for review and oversight of the research
- These requirements may be different than CHLA IRB requirements

## NOTE:

- Always access the [Reviewing IRB's references and resources from the source](#) to ensure you are referring to the most current versions of the documents

## HSPP Ceded Review Checklists and Forms

The information below is for relying on an external IRB. There is information, guidance and checklists that must be used to customize sponsor template or lead site consent forms so that they include CHLA specific language.

### Relying on a Central IRB

- Instructions for Making a Submission to a Central IRB for Industry Sponsored Multi-Center Clinical Trials
- Template Document: Key Information Summary Section for Consent Forms
- Template Document: Disclosure of Financial Conflicts of Interest Statement for Consent Forms
- Reference Document: Advarra IRB Getting Started Guide
- Reference Document: WCG IRB Getting Started Guide
- Presentation: New Connexus Overview for WCG IRB
- Presentation: Initial Review Submissions to WCG IRB
- Presentation: Managing Studies Approved by WCG IRB
- Advarra IRB Resources
- WCG IRB Resources

### Relying on Other External IRBs

- Reliance on Another IRB for Review and Oversight
- External IRB Consent Form Checklist
- NMDP IRB Consent Form Checklist
- NCI CIRB Boilerplate for Consent Forms
- CHLA Institutional Profile Information Sheet (CHLA Local Context)



Human Subject Protection Program
   
 Investigator Guidance
   
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### INSTRUCTIONS FOR RELIANCE ON ANOTHER IRB FOR REVIEW AND OVERSIGHT

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#### Purpose

This document provides detailed information about the CHLA requirements to rely on another IRB for review and oversight.

When relying on another IRB, is CHLA Clearance or CHLA IRB review required for reportable new information and events?

**NO** - CHLA clearance or CHLA IRB review is not required for reportable new information when the study team is relying on another IRB.

- Do not submit any reportable events in iStar. The CHLA IRB is not the Reviewing IRB.

Does the CHLA HSPP Office require any notification of reportable new information and events that occur at CHLA?

**YES** - Once a submission of a reportable event that occurred at CHLA has been made to the Reviewing IRB, send the following information to the CHLA HSPP Office.

- Use the IRB Reliance email address for this purpose (irbreliance@chla.usc.edu):
  - Details of the submission made to the Reviewing IRB
  - The Reviewing IRB's review of the event and its determination(s)

## Why is this required?

- This email submission provides the **CHLA HSPP office** with information that will be used to **communicate** with the **Reviewing IRB** for events that happen at CHLA.
- The HSPP Office will ensure any local **CHLA requirements are considered by the Reviewing IRB**, and will partner with the Reviewing IRB if any information needs to be reported to federal agencies.

You have just been assigned as the study coordinator for a study that is under review and oversight by another IRB. You are not sure where to find Reviewing IRB information for the study.

- What are your first steps to familiarize yourself with the study?
- Who do you contact for details about the study?
- How do you familiarize yourself with the Reviewing IRB reporting requirements?

- Communicate with the CHLA PI to obtain the following information:
  - Lead site contact information (PI, coordinator, administrator)
- When relying on another IRB, ask the Lead Site PI of the study for a **communication plan**

- Ask these questions:
  - Where can I find the **IRB review requirements**, policies, procedures and guidance documents located (e.g., IRB website)?
  - What are the requirements for **reporting new information** that happens at CHLA? How is reporting of new information performed and by whom?
  - How will documentation of **IRB review determinations and the most current approved versions of IRB-approved materials** be disseminated?
  - How will CHLA provide **site enrollment and study progress information** for continuing review?

- Consider creating a spreadsheet to track ceded studies:
  - CHLA protocol number
  - CHLAPI
  - Contact person at the Lead Site for questions and communication
  - Reviewing IRB website, other resources
  - Requirements for prompt reporting of new information that differ from CHLA requirements
  - Most current approval dates of study documents and materials
  - Version dates of documents to ensure the most current documents and materials are used

# Questions and Discussion