Baystate Health | ADVANCING CARE. ENHANCING LIVES.

RESEARCH COMMUNITY MEETING

Wednesday, December 18, 2024

10:30am-11:30am

Agenda

Review of Common Audit Findings – *Vanessa Roxo, MPH*

Common Audit Findings by EQA in 2022-2024

Vanessa Roxo, MPH

Education and Compliance Specialist

Objectives

- To educate the research community about common audit findings.
- Importance of addressing audit findings to ensure compliance and participant safety.

Overview of Audits

What is an Audit?

a systematic and independent examination of research-related activities, documents, and records to ensure compliance with institutional policies, federal regulations, ethical guidelines, and other applicable standards.

HRPP Audits are for educational purposes

to set up teams for success!

Overview of Audits

- Key Components of an Audit
  - Assuring Compliance with Federal Regulations, Institutional Policies, HRPP SOPs and Procedures
  - Legally Effective Informed Consent
  - Verification of Protocol Adherence
  - Data Integrity
  - Protection of Participant Rights
  - Identification of Gaps and Risks
  - Quality Assurance

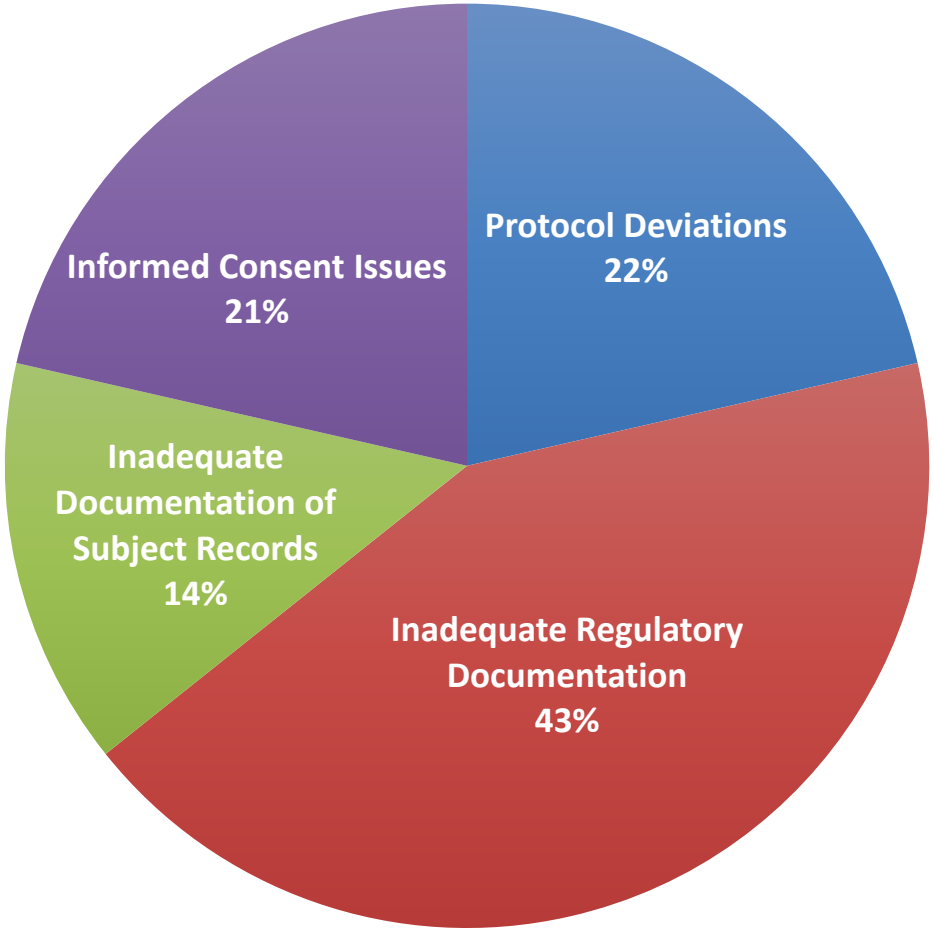
Types of Audits

- Internal Audits
  - For Cause
  - Not for Cause
    - Not for Cause
    - At the request of the study team
- External Audits (e.g. Sponsor, FDA, IRB)

Overview of Audits

- After the audit, a report is generated, which will include findings that need to be addressed:
  - Required
  - 30-days to respond
- To ensure continuous improvement in the protection of human subjects and compliance

Common Audit Findings
2022-2024



Common Audit Findings

Informed Consent Issues

- Incomplete consent forms
  - Missing signatures
  - Missing pages
- Incorrect version of consent forms used
    - Wrong or incorrect version
    - Expired
- Use of Unbiased Witness
  - Non-compliance with legally authorized representative (LAR) requirements

Informed Consent Issues: Deviations

- Report consent deviations as soon as you become aware of them:
  - Missing signature/no date
  - Wrong or incorrect version used

  - Event Reporting Form

Inadequate Documentation of Subject Records

- Missing data in case report forms
- Poor documentation practice (illegible, incomplete, or altered records)
  - ALCOA-C principles not being followed
    - A – Attributable
    - L - Legible
    - C - Contemporaneous
    - O - Original
    - A - Accurate
    - C - Complete

Protocol Deviations

Protocol Deviation → an unplanned or unintentional divergence from the approved study protocol or regulatory requirements in a research study. These deviations occur when study procedures are not followed exactly as outlined in the protocol, but they typically do not have a major impact on the participant's safety or the integrity of the study data. However, they must still be tracked and addressed to ensure compliance and transparency in the research.

Protocol Deviations

- Missing or incomplete documentation of deviations
- Failure to report deviations to the IRB
- Unauthorized changes to study procedures

Inadequate Regulatory Documentation

- Missing or incomplete regulatory documents
  - IRB Submission Letters
  - Correspondence with Sponsor
  - IRB approvals and amendments, specifically study staff modifications
- Lack of documentation for all logs
  - Training logs
  - Delegation logs
  - Investigational product logs
  - Device logs
- Lack of documentation of updated training certifications in regulatory binder
  - CVs
  - CITI Biomedical/GCP Training Certification
  - Medical, Pharmaceutical License
  - MCSR Licensure

Root Causes of Common Findings

Root Causes of Common Findings
Informed Consent Issues

- Inadequate training of study staff: research staff may lack sufficient training on the informed consent process
- Time constraints: pressure to enroll participants quickly
- Poor version control: failure to track and use the latest IRB-approved version of the consent form

Root Causes of Common Findings
Protocol Deviations

- Lack of Protocol Familiarity: study staff may not fully understand or be familiar with the protocol.
- Inconsistent Communication: failure to effectively communicate protocol changes to all members of the study team.
- Unclear Documentation Procedures: if roles and responsibilities are not clearly outlined, deviations might not be recorded or reported properly.

Root Causes of Common Findings
Inadequate Record Keeping

- Poor implementation of institutional policies for documentation
  - Find policies on "The HUB" in Scribble
    - BC 10.850 – Research Regulatory Document Maintenance and Archiving
    - BC 10.190 – Research Consent Process and Documentation
- Over-Reliance on Memory: relying on memory rather than contemporaneous documentation
- Staff Turnover or Insufficient Training: new or existing staff may not be properly trained in good documentation practices

Root Causes of Common Findings
Regulatory Documentation

- Failure to Update Logs and Documents in Real Time: study staff may delay updates to key regulatory documents
- Poor Organization of Paper or Electronic Regulatory Documents: Lack of a clear filing system or no regulatory binder can make it difficult to locate documents
  - All studies (approved after March 1, 2021) are required to use **Florence** as their Electronic Regulatory Binder system.

Impact of Audit Findings

- Impact on the Research Subjects
  - Risks to participant safety
  - Delays in research progress
- Impact on the Research Team
  - Retraining Requirements
  - Increased monitoring
- Impact for the Institution
  - Potential fines or sanctions
  - Damage to reputation
- Impact to Research Data and Study Outcomes
  - Unreliable data
  - Data not generalizable to the population

Examples of FDA Warning Letters

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Issuing Office:
Center for Biologics Evaluation and Research (CBER)
United States

WARNING LETTER

CBER-24-677324

October 10, 2024

Dear Dr. Goyal:

This Warning Letter informs you of objectionable conditions observed during a Food and Drug Administration (FDA) inspection conducted at your clinical study site between June 12, 2023 and June 23, 2023. The FDA investigator met with you during the inspection to review your conduct as a clinical investigator of a clinical study entitled:

(b)(4) (hereinafter, the protocol).

1. Failure to ensure that an investigation is conducted according to the signed investigator statement, the investigational plan, and applicable regulations. [21 CFR § 312.60].

A. Subjects were consented and enrolled in the study despite failing to meet required eligibility criteria outlined in the protocol.

i. Subject **(b)(6)** participated in the study despite meeting exclusion criterion #13 for participation in another clinical trial within 30 days prior to their screening visit.

2. Failure to obtain legally effective informed consent prior to involving a human being as a subject in research … under circumstances that provide the prospective subject or the representative sufficient opportunity to consider whether or not to participate and that minimize the possibility of coercion or undue influence. [21 CFR § 50.20].

A. According to the IRB protocol application, written consent would only be obtained from study subjects. There were several instances when someone other than the subject signed the IC form and two instances where witnesses were present without explanation of their impartiality, as outlined in the IC.

4. Failure to prepare and maintain adequate and accurate case histories [21 CFR § 312.62(b)].

A. You failed to record all adverse events (AEs) pertinent to the investigation for the following:

i. Subject **(b)(6)** reported vomiting during a visit on **(b)(6)** and called to report significant pain after a gastrostomy procedure on **(b)(6)**. Neither AE was reported on the subject's AE log.

Best Practices to Avoid Common Audit Findings

Best Practices

- Proper Training and Education
  - Sign-Up for training with the EQA Team!
- Good Documentation Practices (ALCOA-C Principles)
- Regular Study Monitoring
  - Internal self-audits
  - Routine compliance checks and team training

Next Steps

- Incorporate lessons learned from common audit findings into your daily practices.
- Schedule ongoing training sessions and internal audits with the EQA.
  - Submit an EQA Request through ServiceNow!
- Engage with the IRB and EQA teams to ensure your studies align with evolving regulations and standards.

Q&A

Please join us for the next Research Community Meeting

January 18, 2025

2pm – 3pm