

**Investigator Initiated****Single****Single Site** (MSHREC **MUST** be the reviewing HREC)**Summary of Institutional Procedures - Guide for Researchers**Queensland  
GovernmentMetro South  
Health**Required:**

1. All documents are to be uploaded onto ERM and all submission are via ERM.

Initial Submission							
Document	Documents to be uploaded into ERM	Type of Letter from MSHREC	Documents to be uploaded into ERM	Type of Letter from MSRGO	Do I need to wait for the MSRGO letter?		
Human Research Ethics Application (HREA)	✓	Approval Letter All documentation submitted with the initial HREC application must be noted in the Approval Letter.	✓	Authorisation Letter All documentation submitted with the initial application for site authorisation must be noted in the Site "Authorisation to Commence Research" letter.	Yes		
Protocol	✓		✓				
Investigator Brochure	✓ (if applicable)		✗				
PICF/s – Site Version (with version control)	✓		✓				
Assessment Tools	✓		The project at the site cannot start until the RGO Authorisation Letter is issued.			✓ (Only if document/s contains site specific information or identifiers)	
Patient tools eg diary, wallet card, brochures	✓						
Advertisements	✓						
<b>In addition to the items listed above, the following form part of the Site Specific Application to obtain authorisation to commence research:</b>							
SSA Application	✗	NA	✓			NOTE: No RGO approval is given for the protocol.	
Research Contract Approval and Study Execution Form	✗		✓			The project at the site cannot start until the RGO Authorisation Letter is issued.	
HREC Approval Letter	✗		✓				
PICF/s – Approved Site Version (with version control)	✗		✓				
Clinical Trial Research Agreement (CTRA)	✗		✓ (discuss with RGO)				
Data & Material Transfer Agreement	✗		✓ (discuss with RGO)				
Risk and Benefits Letter	✗		✓				
eCTN (if applicable submit as soon as received)	✗		✓	Nil	No		

Investigator Initiated		Single		Single Site (MSHREC <b>MUST</b> be the reviewing HREC)		
After Study Authorisation						
The following submissions are to be electronically uploaded into ERM.						
	Document <sup>1</sup>	Documents to be uploaded into ERM	Type of Letter from MSHREC	Documents to be uploaded into ERM	Type of Letter from MSRGO	Do I need to wait for the MSRGO letter?
AMENDMENT	Protocol Amendments <sup>2</sup> that pose <b>NO CHANGE</b> to the institutional risk or resource requirements	✓	Approval Letter	✗	NA	NA
	Protocol Amendments <sup>2</sup> that <b>DO POSE A CHANGE</b> to the institutional risk or resource requirements	✓	Approval Letter	✓	Authorisation Letter The amendment can not be implemented until MS RGO approval is given. No RGO approval is given for protocol amendments	Yes
	Research Contract Approval and Study Execution Form to accompany a protocol change that poses a risk	✗	NA	✓		
	Risk and Benefits Letter	✗	NA	✓		
	HREC Approval letter of Protocol Amendment that <b>DOES POSE A CHANGE</b> to the institutional risk or resource requirements <sup>2</sup>	✗	NA	✓		
PICF	Amended Single-Site PICF (with version control)	✓	Approval Letter	✗	Nil	No
	HREC Approval letter for Master PICF	✗	NA	✗		
LEGAL	eCTN Acknowledgment - amendment to site details	✗	NA	✓	Nil	No
SAFETY	Investigator Brochure - amendment	✓ (if applicable)	Acknowledgement Letter	✗	NA	NA
	On-Site SAEs <sup>4</sup>	✓	Acknowledgement Letter	✗	NA	NA
	GCP Breaches <sup>5</sup> ( <b>DO NOT</b> send deviations)	✓	Acknowledgement Letter	✓	Acknowledgement Letter	No
REPORTS	Commencement Form	✗	Nil	✗	Nil	No
	Progress Reports (or more frequently depending on HREC approval conditions)	✓ Due 30 April	Acknowledgement Letter	✗ (Submit only if PI deems findings important)	NA	NA
	Study or Site Closure/Suspension	✓	Acknowledgement Letter	✓	Acknowledgement Letter	No
OTHER	General correspondence (eg memos that impact on the study - eg clarification of inclusion / exclusion criteria)	✓	Acknowledgement Letter	✗	NA	NA
	Any other documents not listed	✓	Acknowledgement Letter	Please check with the RGO office before submission	Nil	No

## Notations

<sup>1</sup> Please note this document only applies to MSHREC as the Reviewing HREC and MSH RGO as the Reviewing Institution. This Summary of Procedures document can be applied retrospectively to the 1 January 2012 to all items listed above unless the PI deems it important to notify institution (eg patient safety would be or has been compromised if institution not notified).

<sup>2</sup> Protocol Amendments can be implemented once the reviewing MSHREC provides the PI with the approval letter for that amendment. Examples of Risk to the Institution are new unapproved data to be collected and/or sent off site or collection of extra tissue samples. Examples of Resource Implications are protocol requirements for extra visits or extra procedures or involvement of other departments not previously approved (eg Radiology). These examples are not an exhaustive list. MSRGO does not approve or acknowledge protocols or protocol amendments. If the amendment requires a change to the Master PICF see '3' below as to whether it requires MSRGO approval.

<sup>3</sup> Examples of A Significant Implication for Site at MS are protocol requirements that require a change to the CTA.

<sup>4</sup> On-Site SAEs **are to be submitted** to MSHREC.

<sup>5</sup> GCP Breaches only **are to be submitted** to both the MS HREC and MS RGO. Definition of a GCP Breach at MS is where patient safety is compromised (eg signing an unapproved PICF; enrolment of an inappropriate patient into the trial; a dosing, timing or delivery error in the study intervention attributable to members of the research team; the research team failed to comply with pre-specific trial guidelines for data collection and/or outcome evaluation due to avoidable reasons).

Deviations **are not to be submitted** to either MSHREC or MSRGO (eg late study visits or medical or clinical assessment is missed unless patient safety is compromised, deviation that affects the ethical acceptability of the study). These examples are not an exhaustive list.

**Accepting PI:** A Principal Investigator from an Accepting Site who is participating in the study but does not have the CPI responsibilities.

**Accepting Site:** A site that is participating in a multi-centre research project, but which has not taken on CPI responsibility.

**Coordinating Principal Investigator (CPI):** The CPI Team from the Lead Site is responsible for coordinating all HREC processes throughout the study, on behalf of the Accepting PI's over which the CPI has CPI responsibilities.

**CPI:** Coordinating Principal Investigator

**CTRA:** Clinical Trial Research Agreement

**CTX:** Clinical Trial Exemption

**DSMB:** Data Safety Monitoring Board

**eCTN:** Electronic Clinical Trial Notification

**ERM:** Ethics Review Manager

**HREA:** Human Research Ethics Application

**HREC:** Human Research Ethics Committee

**Lead Site:** A site that is participating in a multi-centre research project and has taken on CPI responsibility.

**MS:** Metro South

**Multi-Centre Research:** A research project undertaken by a group of institutions (or individuals) at one or more sites within and/or across Australian jurisdictions.

**PI:** Principal Investigator = PI for an Accepting Site in Multi-Centre Research; PI for Single-Site Research

**PICF:** Participant Informed Consent Form

**Reviewing HREC:** For multi-centre research, the reviewing HREC is NHMRC certified which, under the single ethical review process, has reviewed and ethically approved the study and has assumed responsibility for monitoring the conduct of the research being conducted at one or more sites within and/or across Australian jurisdictions. Additionally the reviewing HREC will apply the ethical review and approval process to Single-Site research at MS sites.

**RGO:** Research Governance Office

**SAE:** Serious Adverse Event

**Single-Site Research:** A research project undertaken at only one site.

**TGA:** Therapeutic Goods Administration

**USADE:** Unanticipated Serious Adverse Device Effect

**USM:** Urgent Safety Measure

National Statement on Ethical Conduct in Human Research (2007) (updated 2018)

Guidance on safety monitoring and reporting in clinical trials involving therapeutic goods, November 2016

Australian Code for the Responsible Conduct of Research 2018

Framework for Monitoring: Guidance for the National Approach to Single Ethical Review of Multi-Centre Research, Jan 2012

Research Governance Handbook: Guidance for the national approach to single ethical review. December 2011

Risk-based Management and Monitoring of Clinical Trials Involving Therapeutic Goods

Integrated Addendum to ICH E6(R1): Guidelines for Good Clinical Practice Guidelines E6(R2) Annotated with TGA comments

NOTATIONS

GLOSSARY

REFERENCE