October, 2013

Human Subjects Protection Update

Committee on Clinical Investigation *Boston Children's Hospital*

Inside this issue:

Message from General Counsel: Updating Financial Disclosures

Children's Hospital policies require that faculty members disclose any financial interests in three contexts. First, faculty must submit disclosures on an annual basis so that the Hospital may identify and manage any potential conflicts of interest ("COI"). This requirement applies to both research and clinical staff.

Second, in accordance with the Public Health Service ("PHS") regulations, investigators are required to submit financial disclosures in connection with grant applications that will be funded by PHS agencies. The PHS regulations require investigators to submit disclosures at the time of application, and to update disclosures as necessary within 30 days of learning of or acquiring any new activities or interests, and annually throughout the duration of the PHS funded research (1).

Third, any investigators involved in clinical research must submit COI disclosures with their protocol applications, which will be reviewed by the Committee on Clinical Investigation ("CCI")(2). The laws and policies governing human subject protection raise special concerns regarding financial interests and relationships of investigators. Investigators should pay particular attention to disclosing any relationships (whether compensated or not) with sponsors of the study in question and any role in the development of a test article or device that will be deployed in the study. Should investigators learn of or acquire any new activities or interests, they must immediately update their IRB disclosures by way of amendment. Investigators are responsible for notifying IRB administrators of any changes in outside activities so that any potential conflicts could be reexamined and managed, as necessary. Investigators must also ensure that all reporting across the institution is consistent so that the annual disclosures, PHS disclosures, and IRB disclosures are all updated simultaneously. Investigators should not assume that updates on their annual or PHS disclosures will be reflected on their IRB disclosures.

Any questions regarding conflicts of interest and outside activities may be directed to Suzanne Tannenbaum, Business Conflicts Manager (suzanne.tannenbaum@childrens.harvard.edu) or Dianne McCarthy, Chief Counsel for Research Affairs (dianne.mccarthy@childrens.harvard.edu).

(1) The institutional conflict of interest policies and instructions to submit disclosures may be accessed at: http://www.childrenshospital.org/research-and-innovation/research-administration/conflict-of-interest-policy-for-phs-investigators .

(2) The clinical research conflict of interest policies may be accessed at: http://web2.tch.harvard.edu/researchadmin/.

How to Edit Existing Study Documents

Have an amendment to submit and need to edit consent forms, recruitment documents, study protocols, etc.? Read on for helpful hints about how to revise documents and upload them in the right place to CHeRP.

In order to keep an "audit trail" of changes made to study documents, CHeRP is set up such that new versions of documents can be uploaded "on top" of the ones they are replacing.

When revising a study document, log into CHeRP, open the protocol in question, click on the "documents" tab, and click on the link to the document that needs to be edited. The document should open in Word. Turn on the "track changes" function, make necessary changes, and save a copy of the document.

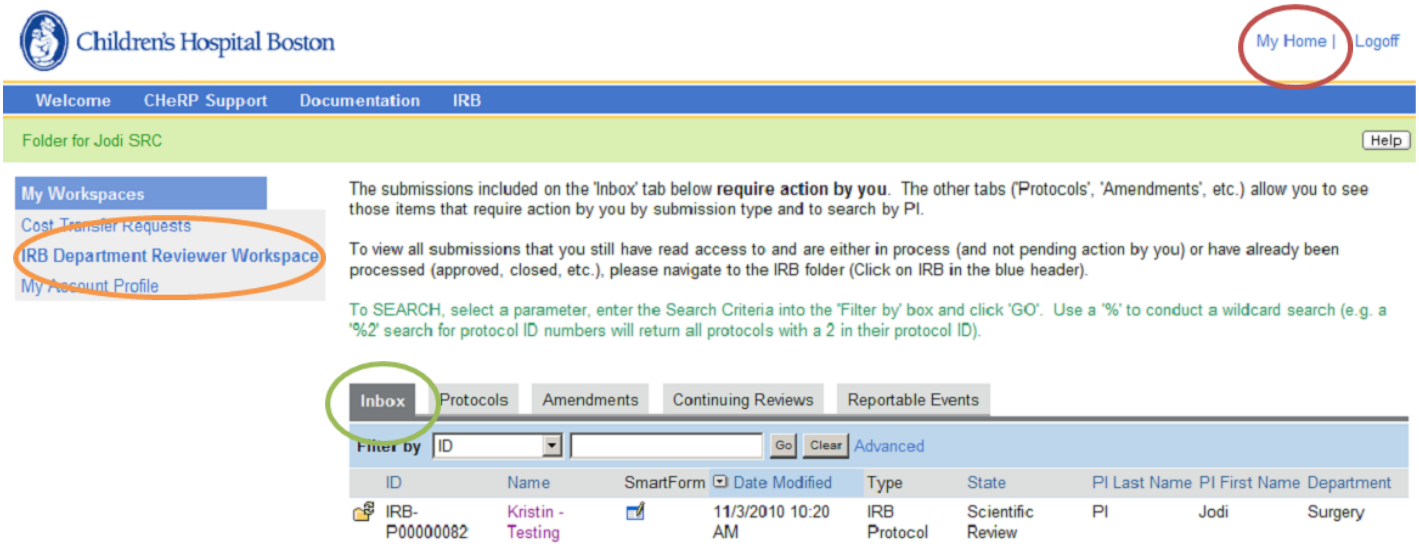
Now, go back to CHeRP, open the protocol SmartForm to the page where the document "lives" (i.e. if you're revising

continued on page 5

Do I Need to do *Something* in CHeRP?

Whether you are a scientific review coordinator, department reviewer, IRB Member, or research team member, there are two ways to know if you need to take action on a submission in CHeRP. When a submission requires action from you, an automated email is generated from CHeRP. This email tells you which submission needs action or a response. This email also provides a direct link to the protocol's work-space.

Another way to view submissions that require your attention is through the "inbox" in CHeRP. While in CHeRP, if you click "My Home" in the top left corner of the page (red circle below), you will be brought to your inbox (green circle below).



Here, will be a list of all items that you need to take action on (submit a response, enter your review, etc.). Once you perform the required action, the item will no longer show up in your inbox.

If you have multiple roles (IRB member and research team member, for example), the inboxes are separate. You will have one inbox for all items you need to review as an IRB Member, and you will have one inbox for all items you need to take action on as a research team mem-ber. You can switch between inboxes by using the workspace links on the left hand side of the page (orange circle above).

Memo-to-File: from the EQuIP Office

Consent is not a document signed and dated before a subject is enrolled in a study; *rather* it is an on-going process documented throughout a subject's participation in a study.

The following are a few ***Best Practices*** identified during recent EQuIP **Study Reviews***:

Identifying the need for and documenting re-consent

When the IRB approves an amendment that involves new information which may affect the subject's willingness to continue participation in a study, the investigator is required to inform the subject/family before the next study visit/procedure as part of the on-going consent process. Like any other study procedure, the research team should document this in the subject's study record (e.g. Memo-to-file, study visit checklist). Depending on the type of research and information, the IRB may require that active subjects are re-consented with the amended consent form prior to further study participation.

Identifying and promptly consenting subjects who turn 18 while still enrolled in ongoing research

Unless the requirement has been explicitly waived by the IRB, any minor subject enrolled via parental permission and assent that subsequently turns 18 while enrolled in a research study must be consented consent as an adult prior to continued study participation. Research where this typically occurs would be that involving longitudinal follow up, prospective review of medical records, or ongoing sharing of samples via a repository. Research teams should develop and implement a method to track and identify in real-time minor subjects who turn 18 during a study. E.g. add a field which calculates age to an enrollment log or database and alerts research team when a subject turns 18 in relation to subsequent study visits/follow-up contacts.

* A confidential, full or partial review of on-going studies to ensure compliance with applicable regulations and policies and to evaluate study conduct, organization, record-keeping and documentation. The EQuIP office aims to help investigators implement tools and strategies to improve identified problem areas. Reviews may be voluntarily requested by PI/staff (eg to ensure compliance, during staff changes, to prepare for an external audit).

Visit the EQuIP website (http://www.childrenshospital.org/research-and-innovation/research-administration/equip) for more information and resource or call Eunice Newbert or Susie Corl at the EQuIP office @ 617-355-5308 (ext. 5-5308)

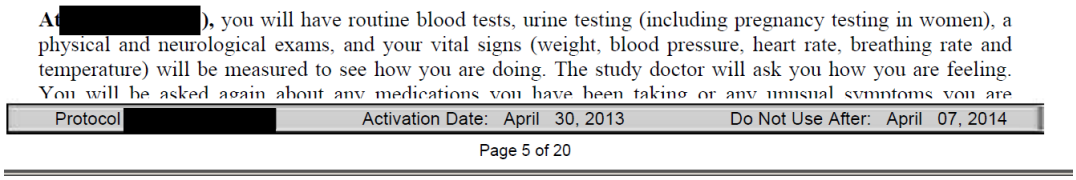
Consent Formatting Tips

Margins matter

Always use the following margins when formatting consent forms:

> *The bottom margin needs to be 0.7" and the footer margin needs to 0.08"*

If the above settings are not used, final approved consent content may be obscured by the IRB Activation Date footer:


At [redacted]), you will have routine blood tests, urine testing (including pregnancy testing in women), a physical and neurological exams, and your vital signs (weight, blood pressure, heart rate, breathing rate and temperature) will be measured to see how you are doing. The study doctor will ask you how you are feeling. You will be asked again about any medications you have been taking or any unusual symptoms you are

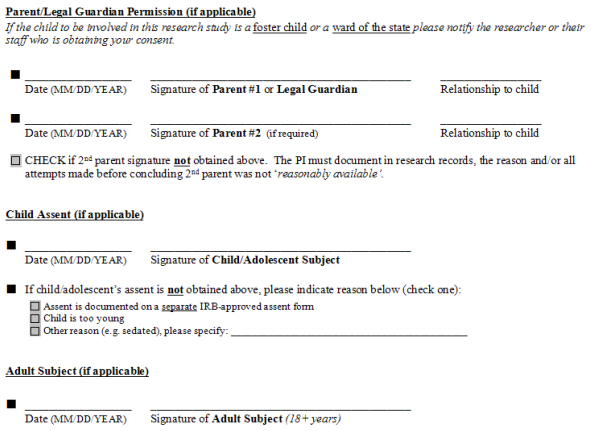
Protocol [redacted] Activation Date: April 30, 2013 Do Not Use After: April 07, 2014

Page 5 of 20

Signature Section Essentials

Make sure the appropriate signature sections are included in the consent form. For example:

- If the IRB approval letter states one parent's permission required, there should be one parent signature line in the consent form. If two parents' signatures are required, there should be two signature lines.
- If minor subjects will be capable of assent, there should be a space to document their assent.
- If the study will enroll both minors and adults, there should be signature lines for both.


Parent/Legal Guardian Permission (if applicable)

If the child to be involved in this research study is a foster child or a ward of the state please notify the researcher or their staff who is obtaining your consent.

■ _____ _____ _____
Date (MM/DD/YEAR) Signature of **Parent #1** or **Legal Guardian** Relationship to child

■ _____ _____ _____
Date (MM/DD/YEAR) Signature of **Parent #2** (if required) Relationship to child

☐ CHECK if 2nd parent signature **not** obtained above. The PI must document in research records, the reason and/or all attempts made before concluding 2nd parent was not '*reasonably available*'.

Child Assent (if applicable)

■ _____ _____
Date (MM/DD/YEAR) Signature of **Child/Adolescent Subject**

■ If child/adolescent's assent is **not** obtained above, please indicate reason below (check one):
☐ Assent is documented on a separate IRB-approved assent form
☐ Child is too young
☐ Other reason (e.g. sedated), please specify: _____

Adult Subject (if applicable)

■ _____ _____
Date (MM/DD/YEAR) Signature of **Adult Subject** *(18+ years)*

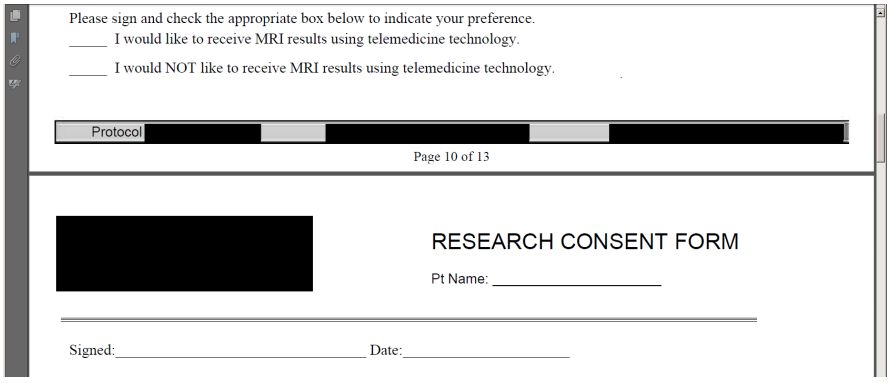
Page break etiquette

When making final revisions to a draft consent form, always review where page breaks fall to avoid documentation errors or omissions in the following areas:

Signature sections

Optional study procedures

Tables


Please sign and check the appropriate box below to indicate your preference.
_____ I would like to receive MRI results using telemedicine technology.
_____ I would NOT like to receive MRI results using telemedicine technology.

Protocol [redacted]

Page 10 of 13

[redacted]

RESEARCH CONSENT FORM

Pt Name: _____

Signed:_____ Date:_____

References:

http://www.childrenshospital.org/research-and-innovation/office-of-clinical-investigation

http://www.childrenshospital.org/research-and-innovation/office-of-clinical-investigation/guidelines-and-policies

http://www.childrenshospital.org/research-and-innovation/research-administration/equip/forms-and-policies

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The Office of Clinical Investigation has been established to oversee the protection of human research subjects at Boston Children's Hospital. Children's is committed to safeguard the rights and welfare of all children, adolescents, adults and family members who volunteer to participate in research. To this end, the Office of Clinical Investigation upholds the principles of the Belmont Report: Ethical Principles and Guidelines for the Protection of Human Subjects in Research, as the cornerstone of our mission, organization and daily activities.

- Have questions or comments about any of the articles in this newsletter?
- Need advice about your research?
- Want to know more about human subjects protection at BCH?

Please don't hesitate to contact the CCI and one of our staff will be happy to assist you.

How to Edit Existing Study Documents, continued

Continued from page 1

the protocol document, go to the "protocol and appendices" page of the SmartForm), find the document that needs to be changed, and click the button directly to the left of the document that says "upload revision" (see photo).

At this point, you can upload the document you just changed and saved. CHeRP will keep track of the new version by assigning a version number; so if the document you're changing was version 2 before, once you've uploaded a revised copy, it will become version 3 in CHeRP. Looking at the version number will help you to know if you've uploaded your revised document correctly (see photo.

That CHeRP allows for different document versions obviates the need for multiple documents that serve the same purpose and ensures that when you go to download a study document, you are downloading the most recent IRB-approved version of that document.

For further questions about editing existing study documents, please contact your department's IRB Administrator.