Mahidol University
Faculty of Medicine
Siriraj Hospital

มหาวิทยาลัยมหิดล
คณะแพทยศาสตร์
ศิริราชพยาบาล

Post Approval Continuing Processes: Site Visit

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PROFESSIONAL EXPERIENCE:

- Intern, Resident in Internal Medicine and Resident in Neurology, Siriraj Hospital;
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  Siriraj Institutional Review Board (SIRB), Faculty of Medicine Siriraj Hospital (since 2023)

Affiliation

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Conflict of Interest Disclosure

Naraporn Prayoonwiwat, M.D.

There is no actual or potential conflict of interest requiring disclosure in relation to the presentation.

	Standard Operating Procedures **Topic No.: 10.2** **Topic Title: Site Visit and Compliance Monitoring**	**Page: 1 / 5** **SOP version: 8.1** **Revised No.: 1** **Revised date:** **2 December 2021**
Human Research Protection Unit Faculty of Medicine Siriraj Hospital, Mahidol University, THAILAND		**Approved date:** **5 July 2022**
Reviewer:		**Approval:**

1. PURPOSE

This policy describes Site Visit and Compliance Monitoring of the research study stated in the protocol approved by the IRB.

Site Visit and Compliance Monitoring: Policy

- Authority and responsibility of HRPU to conduct site visits
- Purposes

  : To ensure

  - protection of human subjects involved in research
  - compliance with applicable regulations and Faculty policies

  : To provide oversight and education (if needed)
- Goal: To confirm (by observation) accurate and consistent protocol performance in collegial and unobtrusive manner

Site Visit and Compliance Monitoring: Policy

- Expect full cooperation by department, principal investigator (PI), and other research team members
- Review human research projects randomly and for cause based on compliance records of researchers
- Information gathered for monitoring the implementation of research studies, necessary process corrections, areas of improvement, to plan for educational sessions and quality improvement of HRPU

Site Visit and Compliance Monitoring: Protocol Selection

Criteria: Directed Site Visit (For Cause)

- History of poor adherence to regulations and IRB policies
- Reports of serious adverse events
- Reports of violation, continuing deviation, or regulatory non-compliance
- Internal complaint or concern of potential unethical conduct

Site Visit Team may specify focused review on one aspect (e.g., consent process) or broad review

Site Visit and Compliance Monitoring: Protocol Selection

Criteria: Routine Site Visit | **4 times/year; 2 sites for each Panel**

- Active, greater than minimal risk, <5 years, currently enrolling or actively following participants
- Involve vulnerable subject population or have a potential for increased risk to participants (e.g., phase I trial, gene therapy, etc.)
- Involve large numbers of subjects
- Not having formal routine provisions for on-site monitoring

Selected at discretion of IRB

Site Visit and Compliance Monitoring: Procedures

1. Notice of the site visit
2. Site visit preparation
3. Activities during site visit
4. Post site visit activities

Site Visit and Compliance Monitoring: Procedures

Notice of the site visit

Site visit preparation

Activities during site visit

Post site visit activities

Site Visit and Compliance Monitoring: Procedures

1. Notice of Site Visit

- HRPU provide written notification of site visit*
- HRPU staff contact PI to schedule the visit at a mutually convenient date and time (notice by phone, at least 14 days)

*Except in concern of safety of subjects or unannounced site visit requested

Site Visit and Compliance Monitoring: Procedures

Notice of the site visit

Site visit preparation

Activities during site visit

Post site visit activities

Site Visit and Compliance Monitoring: Procedures

2. Site Visit Preparation

- Notify investigator by a formal letter of the study selection, 14 days in advance
- Investigators to collect, make all relevant documentation available for research conduct assessment

Site Visit and Compliance Monitoring: Procedures

Site Visit Team:

- Team of ≥4 persons (IRB Chair, Secretary and members of that IRB panel, HRPU staff), Member from another panel with experience in the study topic may be in the team, depending on the study
- Team preparation: review protocols and continuing reports

Site Visit and Compliance Monitoring: Procedures

Checklist* for Site Visit: Documents

- Research protocol: First version, updated versions
- COA, PIS, ICF, CRF
- Data recorded in data record form same as in source data
- List of investigators, assistant investigators and assigned responsibilities
- Latest version of investigator's brochure

COA: Certificate of Approval
PIS: Patient Information Sheet
ICF: Informed Consent Form
CRF: Case Report Form

*Not all items on checklist are required.

Site Visit and Compliance Monitoring: Procedures

Checklist* for Site Visit: Documents

- Document of transportation of products and substances used
- Document of quantity control in receiving/dispensing products and substances used
- Record of sample storage (liquid or tissue)
- Copy of progress report submitted to SIRB
- Site visit report by Data Safety Monitoring Committee

*Not all items on checklist are required.

Site Visit and Compliance Monitoring: Procedures

Checklist* for Site Visit: Personnel, Facility, Product

- Investigator, co-investigators, assistants having knowledge and understanding; conducting research according to SOP strictly stated in protocol
- Quantity of research protocol not too much compared to investigator team members
- Research site suitable and facilitating to research project
- Utilization and control of products as approved

*Not all items on checklist are required.

Site Visit and Compliance Monitoring: Procedures

Checklist* for Site Visit: Participants

- Participants receive complete details before giving consent
- Randomly inspect consent forms: participants signed and dated on the SIRB-stamped documents
- Observe process of obtaining consent from participants (if possible)
- Significant amendment require participants be informed and reconsented
- Participants' information kept in confidential, access limited

*Not all items on checklist are required.

Site Visit and Compliance Monitoring: Procedures

Checklist* for Site Visit: Reports

- Compare adverse event (AE) report with report sent to SIRB
- Compare protocol deviation report with report sent SIRB
- Inspect documents or inquire about AE occurred in the site, with solution
- Inspect documents on payment for compensation, travel expenses, remuneration for time-consumed, responsibility for adverse events

*Not all items on checklist are required.

Site Visit and Compliance Monitoring: Procedures

Notice of the site visit

Site visit preparation

Activities during site visit

Post site visit activities

Site Visit Form

Siriraj Institutional Review Board, Faculty of Medicine Siriraj Hospital

Study title (Thai) .....

Study title (English) .....

Protocol number .....

Principal investigator .....

Site visit member .....

Date and time .....

Issue/Item	Item	Finding	Comment
Research protocol	1.1 The first draft of proposal obtained the SIRB approval	☐ **Yes** ☐ **No** ☐ **N/A**	
	1.2 The first draft of protocol amendment obtained the SIRB approval	☐ **Yes** ☐ **No** ☐ **N/A**	
	1.3 Obtain COA from the SIRB Committee	☐ **Yes**	

Site Visit and Compliance Monitoring: Procedures

3. Activities During Site Visit

Purpose:

- To evaluate for compliance through observation, interview, and review of documents

Process:

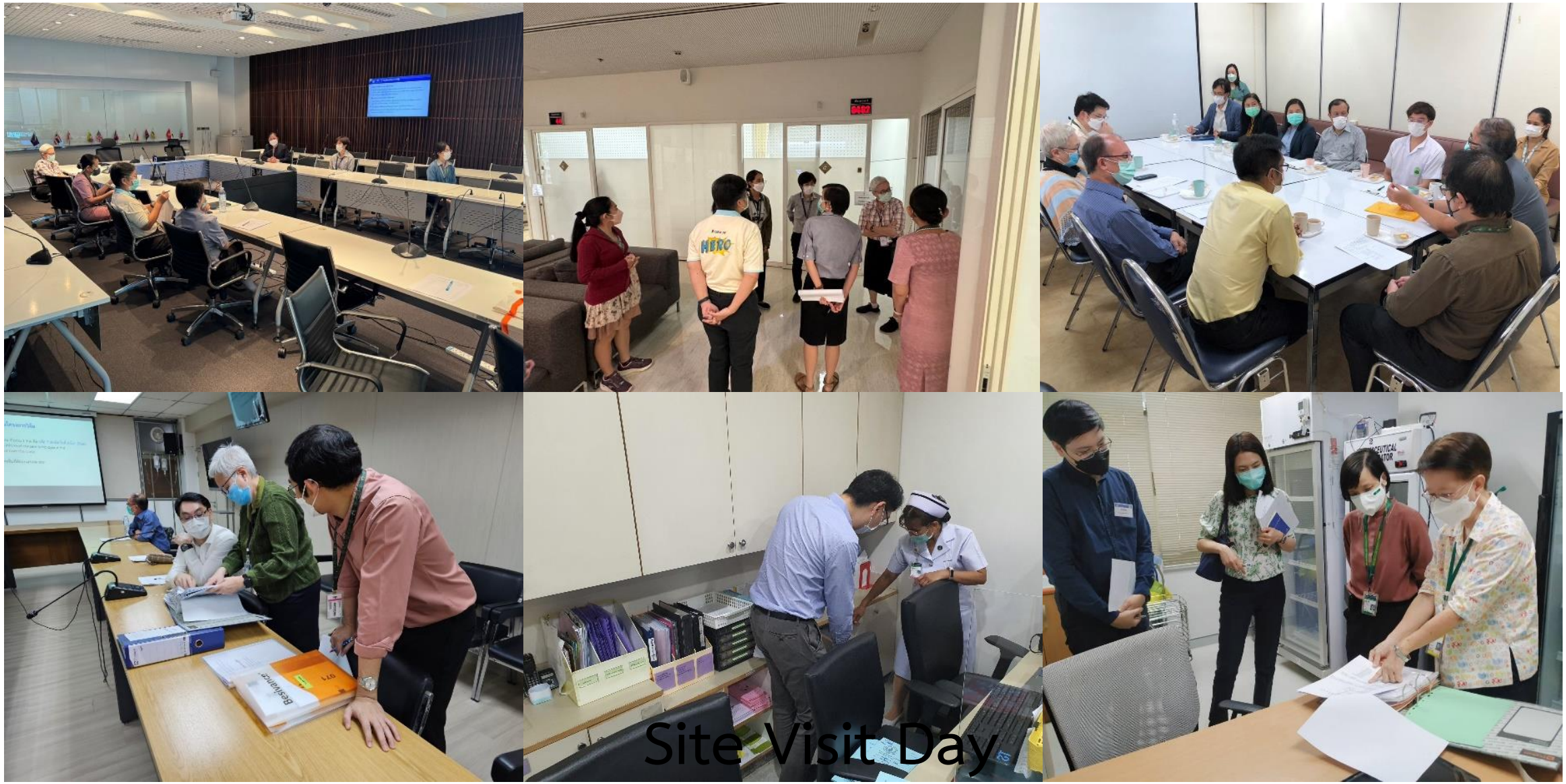
- Meeting of team member, assign role
- Meet investigators, explain the objective of site visit
- Listen to study summary from investigator
- Review study files, site inspection

Site Visit and Compliance Monitoring: Procedures

3. Activities During Site Visit

Process:

- Interview investigator or personnel knowledgeable about specific aspects of the study
- Provide recommendations, educational support
- Conclude the visit by Site Visit team leader with summary of findings, exchange opinions with investigator for quality improvement on both sides


Site Visit Day

Site Visit and Compliance Monitoring: Procedures

- Notice of the site visit
- Site visit preparation
- Activities during site visit
-  Post site visit activities

Site Visit and Compliance Monitoring: Procedures

4. Post Site Visit Activities

- Collect checklist/comments from Site Visit team members
- Generate a Summary Report providing details of findings, areas of improvement identified and recommendations, signed by SIRB Chair; send to investigator within 14 days
- For non-compliance events, require investigator to respond with corrective action plan, in 30 days after receiving Report
- Present Summary Report of site visit and responses from investigators in convened meeting of the panel

Site Visit and Compliance Monitoring: Activity

No.	Responsibility	Activity
1.	IRB Chair and Secretary	• Selection of project or venue for the Routine or Directed Site Visit. • Select at least 4 suitable IRB member and staff as a Site Visit Team.
2.	HRPU staff	• Contact the PI or key site personnel to schedule a site visit. • Arrange the preparation for the Site Visit Team

Site Visit and Compliance Monitoring: Activity

No.	Responsibility	Activity
3.	Site visit team members	• Review research protocol, relevant documents submitted, Site Visit Form Checklist. • Visit site and confirm that study is being conducted in compliance with regulations, in particular of safeguards in place for recruitment of vulnerable subjects, informed consent documents and processes without coercion or undue influence, and facilities available in an emergency.

Site Visit and Compliance Monitoring: Activity

No.	Responsibility	Activity
3.	Site visit team members	• If appropriate, obtain information about any adverse events that may have been reported and may not have been reported. • Complete Site Visit Checklist and Summary Report.
4.	IRB Secretary and Staff	• Deliver a Summary Report – signed by the IRB Chair, to the investigator within two weeks. • Include the Site Visit Summary in the IRB meeting agenda
5.	IRB Chair	• Develops and implements quality improvements as indicated by audits

Site Visit and Compliance Monitoring: Examples

Findings:	Recommendation:
PIS and ICF were kept together with CRF, disclosing participants's identification	Source code data and research documents should be kept separately; Participant codes should be used to assure participants confidentiality
PIS, ICF and CRF were incomplete; data were recorded with pencils.	PIS, ICF should be completely filled up and signed; records on CRF should be done in ink.
The most updated version of PIS and ICF were not used; forms without IRB stamp were used.	Check for the most updated version of PIS and ICF when getting the participant signature; always use the forms with IRB stamp.
Copies of PIS and ICF were not given to the participant.	Participants should sign two copies of PIS and ICF, one set should be given to the participant, the other kept by the investigator.
Cabinets for document storage were not locked; increasing risk of data leakage and compromizing privacy/confidentiality	A locked cabinet should be used and limit access to the key.

PIS: Patient information sheet; **ICF:** Informed consent form; **CRF:** Case report form

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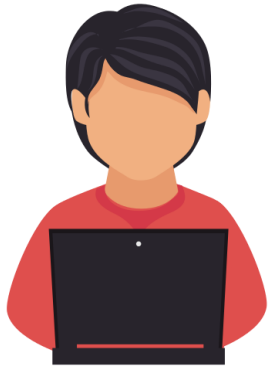
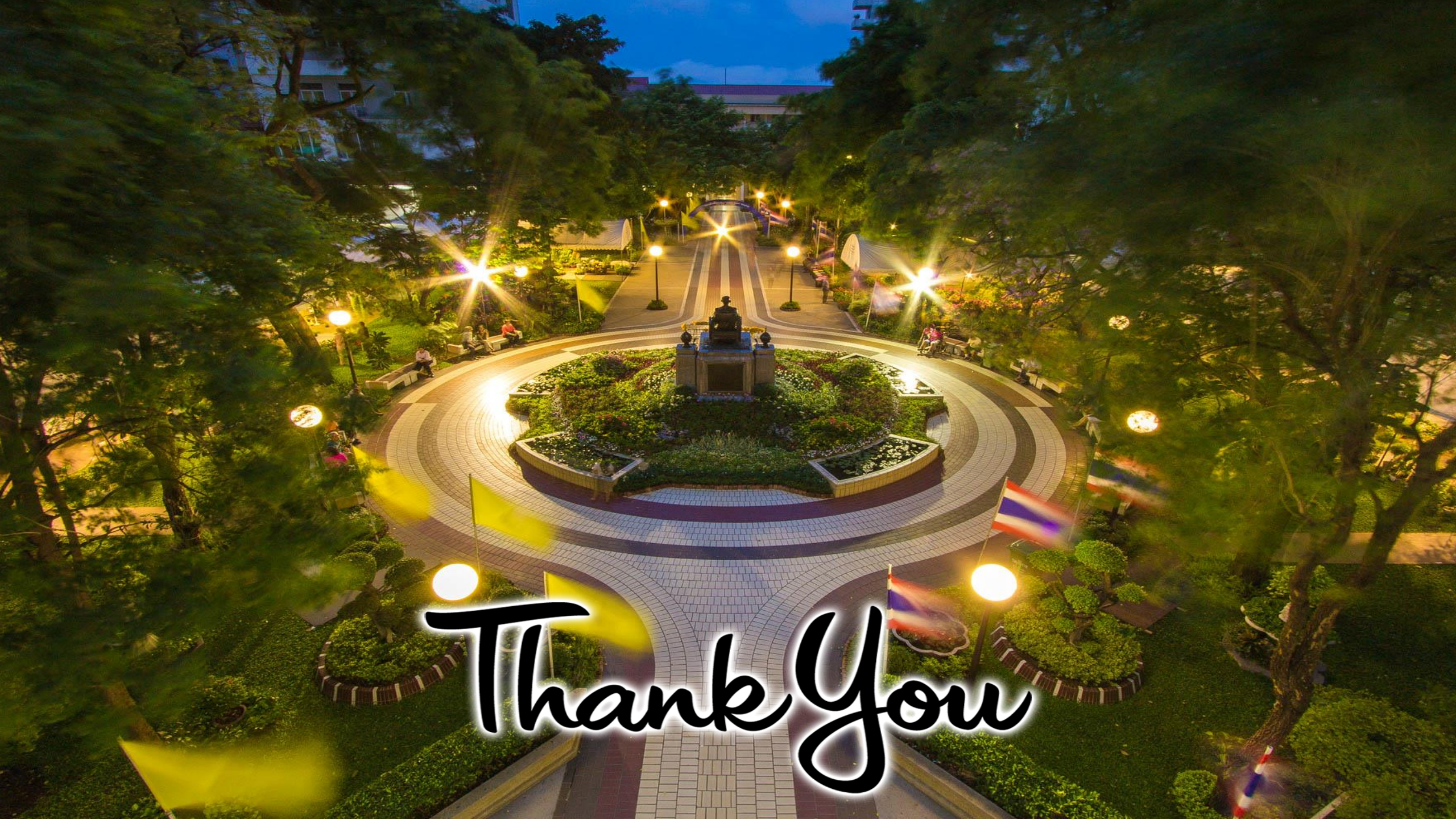
Site Visit and Compliance Monitoring: Examples

Findings:	Recommendation:
There was no temperature monitoring system for refrigerator for medical products storage; site of refrigerator for medical products was not registered.	There should be a temperature monitoring system that can notify errors directly to research team member; site of refrigerator for medical products should be registered with Research Unit of Pharmacy Department
Copies of documents on payment/ compensation to participants were not retained.	All documents on payment and compensation should be promptly kept.
Research Nurse had to handle many research protocols while engaged to service; time may not be appropriate with overwhelmed tasks	Number of Research Nurse should be increased to avoid errors.

Site Visit and Compliance Monitoring: Examples

Findings:	Recommendation:
Leaflets which had not been approved by SIRB were distributed to research participants.	Any additional new document should be submitted as well as protocol amendment to SIRB for approval prior to use.
There was no report on serious adverse event, particularly with the fatality of a participant.	Standards on definition and timeline to report serious adverse event should be reviewed and complied accordingly. For this SAE, reports of the event and protocol deviation (late report) should be submitted to SIRB.




Thank You

การเยี่ยมสำรวจโครงการวิจัย
(Site Visit)

Human Research Protection Unit
Faculty of Medicine Siriraj Hospital,
Mahidol University