Welcome to the Training

June 2020

The session will begin shortly

Reminder:
Document individual staff attendance & completion of this training

Any questions should be sent via Q&A

All attendees will be muted during the training

Raise your hand if you would like to speak

Reminder: document this training!

Site IoRs are responsible for ensuring that study staff members are adequately trained to serve their designated site- and study-specific functions.

Per the DAIDS policy on *Requirements for Manual of Operational Procedures,* all sites must establish and follow a standard operating procedure for personnel training and certification documentation.

IoRs are responsible for documenting that each study staff member has completed study-specific training corresponding to his or her designated roles and responsibilities. This documentation must be on file at the site and available for inspection/monitoring at any time.

Reminder: document this training!

- Ops Center will provide an email documenting that the training was conducted.
- **Sites are responsible for documenting individual staff attendance.**
- A sample sign-in log is shown here, but any format consistent with site SOPs may be used.

IMPAACT Processes for Reportable Protocol Deviations during the COVID-19 Pandemic
Thursday, 11 June 2020

Training Led by: IMPAACT Operations Center Staff
Training Content: see attached slides
Training Participants: as recorded below

Printed Name	Signature	Role on Study

While lines are muted, please type questions into the Q&A box.

IMPAACT Processes for Reportable Protocol Deviations during the COVID-19 Pandemic

11 and 15 June 2020

Prepared and reviewed by Katie McCarthy and Anne Coletti, IMPAACT Operations Center, and reviewed by Carrie Fry and Stephanie Popson, IMPAACT Data Management Center

IMPAACT
International Maternal Pediatric Adolescent AIDS Clinical Trials Network

COVID-19 Pandemic

- This presentation focuses on recent updates to the IMPAACT reportable protocol deviation processes in response to the COVID-19 pandemic.
- Most updates are expected to be time-limited in relation to the pandemic.
- Two recent updates to the deviations process:
  - New utility (PDRS)
  - Updates to Deviation eCRF

Key Resource

IMPAACT Manual of Procedures

Section 12.4, Protocol Deviations

http://impaactnetwork.org/DocFiles/MOP/12_Implementation.pdf

- IMPAACT policies pertaining to documentation and reporting of protocol deviations have not changed.
- IMPAACT definitions of reportable protocol deviations have not changed.
- Options for reporting protocol deviations have been updated.

Reportable Protocol Deviations

The IMPAACT Network MOP defines a subset of protocol deviations as reportable, with additional reporting by the IoR or designee required. Reportable deviations include those that result in:

- **Significant increased risk to the study participants or others**
- **Significant non-compliance with IRB-approved protocol requirements**
- **Significant non-compliance with Good Clinical Practices or Good Clinical Laboratory Practices and all applicable regulations**

Deviation Case Report Form Update

- Two COVID-related updates:
  - New note added:
    If the deviation is related to COVID-19, indicate “Not required” for corrective and preventive actions.
  - New question added:
    Is this deviation related to COVID-19?

Deviation Case Report Form Update

Other updates *unrelated to COVID-19* have been incorporated into the eCRF, including:

- Additional question to add brief description of the deviation (no more than 200 characters)
- Additional response options for deviation type:

Delegation of duties deviation	Use of disallowed medication or device	Specimen handling deviation
IRB, ethics or regulatory review deviation	Blood volume maximum exceeded	AE/SAE/EAE reporting deviation

New Utility: Protocol Deviation Reporting System

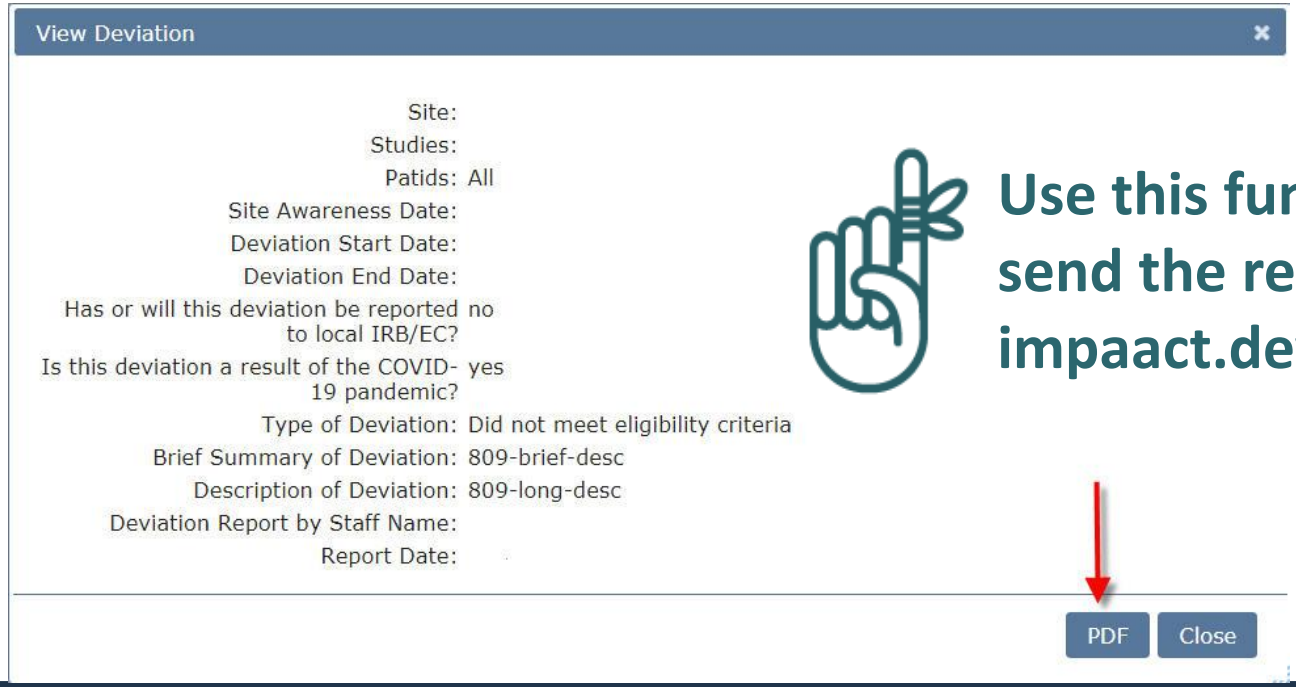
- Due to an anticipated increase in the number of reportable protocol deviations that may occur during the COVID-19 pandemic, the DMC developed a new system for “mass” entry of reportable deviations.
- This system follows the same policies and definitions as the Deviation eCRF but allows sites to report multiple occurrences of a given deviation in one entry (compared to entering individual Deviation eCRFs for each occurrence and participant).

Resources for the Protocol Deviation Reporting System

- Presentation slides from the DMC are available here: https://www.frontierscience.org/apps/cfmx/apps/common/training/resources/presentations/PDRSTraining.pdf
- Direct questions to the protocol data manager or IMPAACT.deviation@fstrf.org

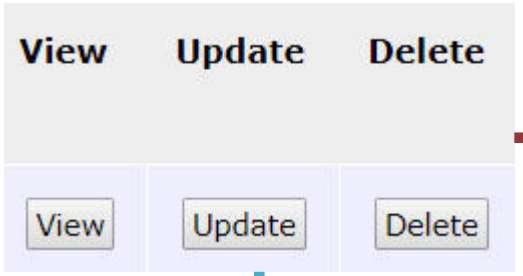
Some Updated Functionalities: Save a Report as a PDF

A previously entered deviation can be printed by clicking the “View” button on the first screen. Then, click the PDF button.



Use this functionality to send the report to impaact.deviation@fstrf.org

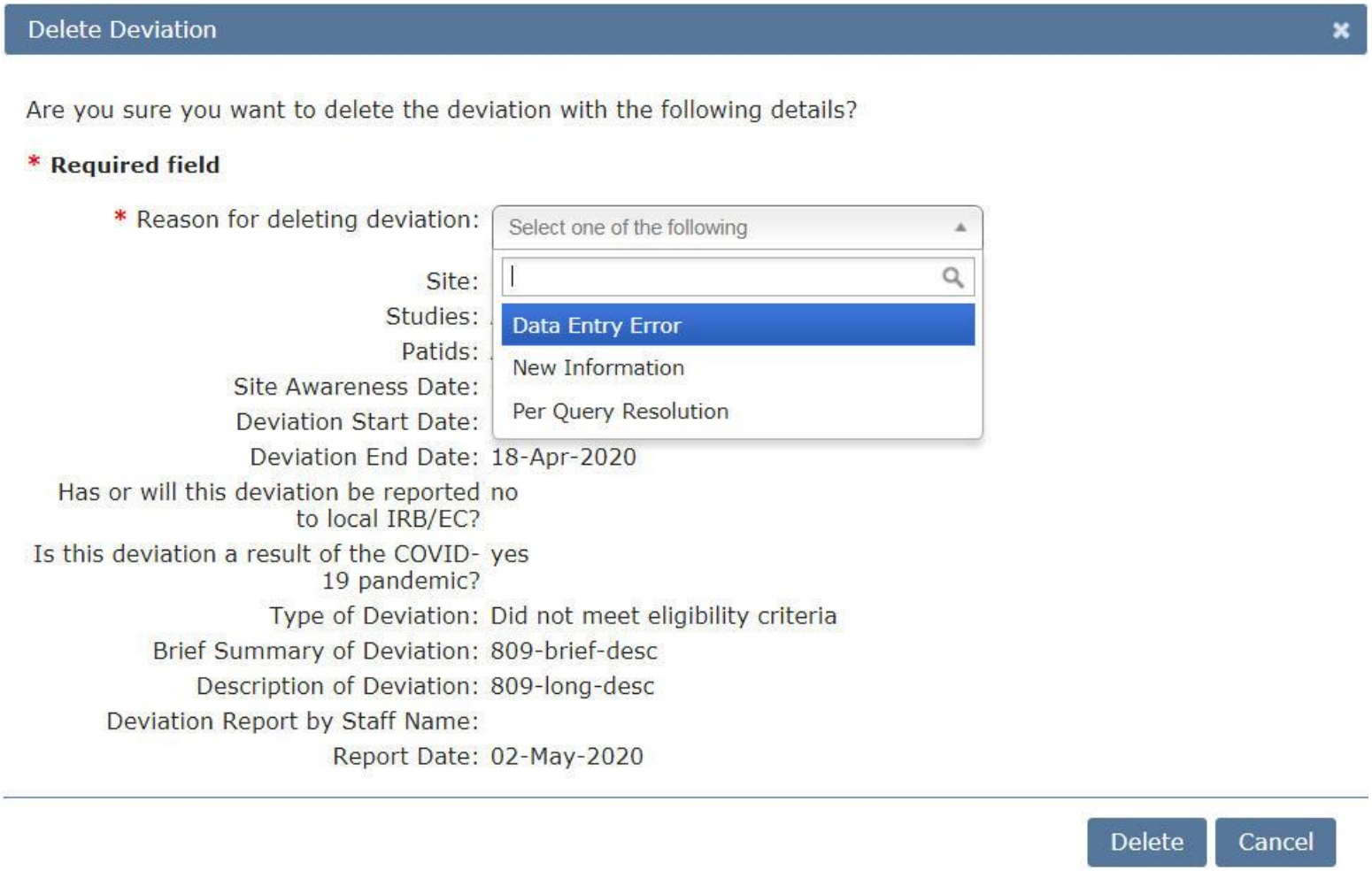
Some Updated Functionalities: Update or Delete a Report



Clicking **Delete** brings up a dialogue box asking you to confirm that you wish to delete the deviation. Click Delete again to confirm deletion, or Cancel to exit without making changes. You must select a reason for the deletion from the dropdown box.

Clicking **Update** brings up the information previously entered on the deviation. You may update information from this screen. You will be required to enter a reason in the dropdown.

Some Updated Functionalities: Delete a Report

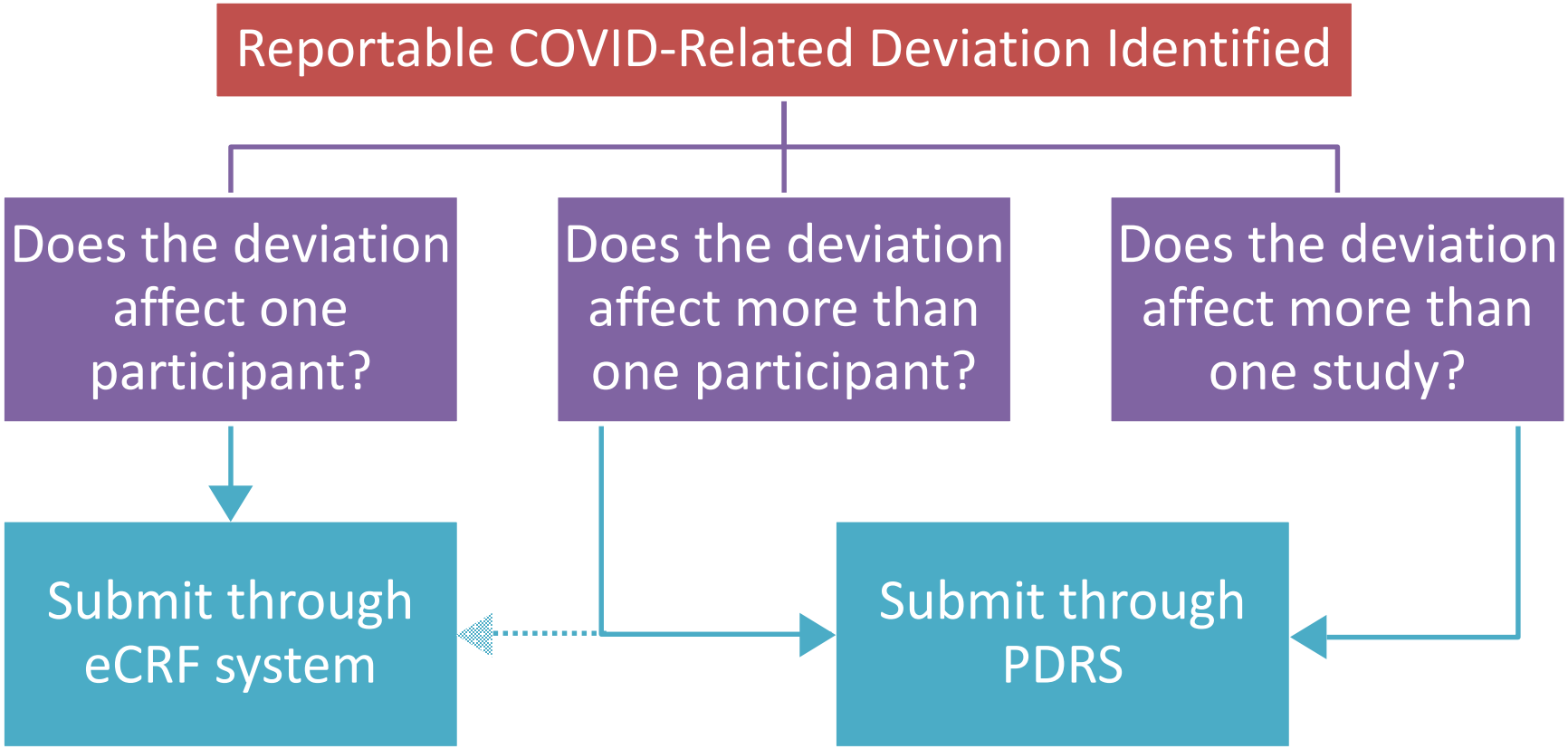


Which system should I report through? Both? Either?

- Sites may choose which system (i.e., eCRF or PDRS) to use to enter reportable protocol deviations.
- Both systems will feed information into the relevant study databases for monitoring and analysis purposes.
- Reportable deviations submitted through either system will be handled in a similar manner through the DMC and Ops Center for reporting to Network reviewers.

Sites should only submit deviations through one of the mechanisms (not both).

Which system should I report through? Both? Either?



IMPAACT International Maternal Pediatric Adolescent AIDS Clinical Trials Network

Sites should only submit deviations through one of the mechanisms (not both).

Key Reminders

- Individual missed visits or evaluations generally do not meet the IMPAACT Network definition of reportable deviation.
- Trends of multiple missed visits or evaluations, that are due to reasons other than participant non-compliance, generally do meet the Network definition of reportable deviation.

Key Reminders

- An individual participant choosing not to come to the site due to potential COVID-19 risk would generally not be reportable.
- An individual missed visit because of operational disruption at a site (e.g., site was closed for a short time and visit could not be re-scheduled within the window) would generally not be reportable.

Key Reminders

- A trend of multiple missed visits over the course of several weeks because of a site shutdown would generally be reportable.
- A trend of multiple missed laboratory evaluations over the course of several weeks because a site could only conduct virtual visits would generally be reportable.

  ❖ *In both of these scenarios, reporting would likely be done through the PDRS although the Deviation eCRF may be used*

  ❖ *Trends could be across the site or across the study.*

Key Reminders

- Regardless of reportability, all protocol deviations will continue to be source documented and reported to IRBs/ECs and other regulatory entities, following their policies and procedures.
- Entries into other eCRFs will identify when virtual visits were performed, or when visits or evaluations were missed, due to the COVID-19 pandemic.

Frequently Asked Questions

(1) Several ongoing IMPAACT studies expanded the allowable visit windows in recently distributed Clarification Memoranda. If a participant visit (in-person or virtual) occurs in the expanded window, rather than the previously defined allowable window, is this a reportable protocol deviation?

No, not a protocol deviation (and not reportable)

Frequently Asked Questions

(2) Some IMPAACT studies discontinued participant follow-up early due to the COVID-19 pandemic. Are the “missed” visits, i.e., those that would have occurred had follow-up continued considered reportable protocol deviations?

No, not a protocol deviation (and not reportable)

Studies that discontinued follow-up early include IMPAACT P1026s (which is continuing chart abstraction) and IMPAACT 2015.

Frequently Asked Questions

(3) Several ongoing IMPAACT studies allow for remote/virtual visits in recently distributed Clarification Memoranda. If a participant visit occurs virtually and laboratory and physical examination evaluations are missed, is this a reportable protocol deviation?

Depends:

- **One participant's missed evaluations are generally not reportable**
- **If all participant visits were conducted virtually for a period of time, the trend of missed evaluations would be considered reportable**

Frequently Asked Questions

(4) Would a trend in participant non-compliance be considered a reportable protocol deviation?

No, per the Network MOP, participant non-compliance (e.g., missed visits, missed doses of study drug) is considered a protocol deviation but is not considered a reportable protocol deviation. Participant non-compliance should be documented and reported per usual site procedures (and any applicable protocol requirements) but should not be reported at the Network level.

Frequently Asked Questions

(5) What is considered a trend for reporting purposes? Would two or three missed evaluations be considered a trend?

There is no specific definition of trend for reporting purposes. Per the Network MOP, the site Investigator of Record (IoR) retains responsibility for final determination of reportability. Sites and teams need to consider the impact of the missed evaluations on participant safety and data integrity.

[continued on next slide]

Frequently Asked Questions

(5) What is considered a trend for reporting purposes? Would two or three missed evaluations be considered a trend?

[Continued] Under the current circumstances of the COVID-19 pandemic, sites that have paused in-person visits and therefore missed multiple visits would likely need to submit these as reportable protocol deviations. Similarly, sites that have conducted only virtual visits would likely need to submit missed evaluations as reportable protocol deviations. This would be regardless of how many evaluations or visits were missed.

Frequently Asked Questions

(6) Are sites able to enter reportable deviations through the PDRS now? How can sites update information in the PDRS?

Yes, the PDRS is available for sites to enter reportable deviations. With the updated release, issued on 8 June, sites are able to save reports as PDF as well as update or delete information in the system.

Frequently Asked Questions

(7) For COVID-19-related deviations, do I need to report on the Deviation eCRF and into the PDRS?

No, sites should use only one mechanism to report a deviation – either the eCRF or the PDRS.

Questions?

Questions?

If your site has questions about a deviation, email the protocol clinical trials specialists, protocol data managers, or the Deviation Group:
IMPAACT.deviation@fstrf.org