STANDARD OPERATING PROCEDURE 12

GCP Defined Responsibilities
Part 1: Trial/Study Management Group and day-to-day activities

Version:	V3.0	Effective Date:	20 October 2023
Issue Date:	6 October 2023	Review Date:	20 October 2025
Author:	Claire Daffern, Quality Assurance (QA) Manager, Warwick Clinical Trials Unit (WCTU)		
WCTU Reviewers:	Greg Scott, QA Support Officer, WCTU Jill Wood, QA Manager, WCTU		
Sponsor Reviewers:	Mathew Gane, Research Governance & QA Manager, Research & Impact Services (R&IS)		
WCTU approval:	Natalie Strickland, Head of Operations, WCTU		
Sponsor approval:	Carole Harris, Assistant Director, R&IS (Systems & Strategic Projects) & Head of Research Governance		
Review Lead:	WCTU QA Team		

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Revision Chronology:	Effective date:	Reason for change:
Version 3.0	20 October 2023	Change of Title, linking SOP 12 parts 1, 2 and 3 for clarity. Addition of Co-CI considerations. Minor amends to text.
Version 2.0	12 May 2022	Biennial review: Change to new format. Minor amends to text.
Version 1.6	22 January 2020	Biennial review: Change to new format. Minor amends to text throughout.
Version 1.5	24 October 2017	Biennial review. Updated web links. Format changes. Addition of TMG charter template. Addition of information regarding the delegation of responsibilities where there are two PI's.
Version 1.4	17 June 2015	Addition of procedures to follow on the loss or change of a Chief Investigator
Version 1.3	2 June 2014	Amendments to trial team responsibilities. Addition of TMG information.
Version 1.2	7 May 2012	Updated web links. Format change only.
Biennial review April 2010 Version 1.1		No changes.
Version 1.0	March 2006	Format change.

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Part 1: Trial/Study Management Group and day-to-day activities

1. Purpose and Scope

The purpose of this Standard Operating Procedure (SOP) is to detail common roles and appropriate allocation of day-to-day responsibilities for research team members, including the Trial/Study Management Group (T/SMG) to help ensure the smooth running of a clinical research study.

There are also other groups who have a responsibility for the study, but who are not involved on a day-to-day basis with the running of the study. These are called oversight committees and include the Trial Steering Committee (TSC) and Data Monitoring Committee (DMC). Responsibilities of these groups are covered in Part 2 and Part 3 of this SOP, respectively.

It is applicable to any member of staff working on a University of Warwick sponsored research study. Staff working on studies with external sponsors must ensure they are following their sponsor's requirements.

2. Definitions

Clinical Trial/Study:	Any prospective evaluation of a health care intervention involving human participants, including the administration of a treatment or type of management, diagnosis, or the provision of lifestyle (e.g., dietary) advice.
Trial/Study Management Group (T/SMG)	The Trial Management Group normally includes those individuals responsible for the day-to-day management of the trial, such as the Chief Investigator, statistician, trial manager, data manager etc. The role of the group is to monitor all aspects of the conduct and progress of the trial, ensure that the protocol is adhered to and take appropriate action to safeguard participants and the quality of the trial itself.
Chief/Coordinating Investigator (CI):	The healthcare professional who takes primary responsibility for the conduct of the trial, whether or not they are an investigator at any particular trial site. An investigator assigned the responsibility for the coordination of investigators at different centres participating in a multicentre study.
Co-Chief Investigator (Co-CI)	There is no regulatory definition of a Co-CI. For regulatory purposes there must be one single healthcare professional who has overall responsibility. Studies may include Investigators that have extensive responsibilities and input and are subsequently called Co-Chief Investigators (Co-CIs). It is important to distinguish between CI and Co-CI roles.
Coordinating Centre:	The centre involved in setting up, managing, closing, and analysing the Trial/study
Investigator/Principal Investigator:	A person responsible for the conduct of a trial/study at an investigator site. If a trial/study is conducted by a team of individuals at an investigator site, the investigator is the responsible leader of the team.
Sponsor:	An individual, company or organisation which takes responsibility for the initiation, management and/or financing of a study.

Essential documents:	Documents which must be signed off by the CI with overall responsibility: Protocol (and any associated amendments) Coordination centre delegation log Case Report Forms (CRFs) Patient Information Sheet(s) and Consent Form(s) Data Management Plan (DMP) Risk Assessment and Monitoring Plan (RAMP) Regulatory and REC submissions (including amendments) These documents cannot be approved by any Co-CIs

3. Background

Good Clinical Practice (GCP) guidelines state that prior to initiating a study, the sponsor *(delegated to WCTU for WCTU-managed studies)* should define, establish, and allocate all study related duties and functions and that each individual involved in conducting a study should be qualified by education, training, and experience to perform his or her respective task(s).

For a study to run safely it is essential that all staff involved are aware of the anticipated extent of their involvement and limits to their authority.

You are advised to refer to the University of Warwick Research Code of Practice which is available on the R&IS website

4. Procedure

4.1 Responsibilities

Sponsor	• Liaise with CI (and Co-CI where applicable) to agree division of responsibilities • Completion of the 'Division of Responsibilities' form
CI	• Overall oversight (safety and scientific integrity) • Application and signatory for the research ethics committee (REC) opinion. • Liaise with Sponsor's Office to agree study responsibilities and document appropriately. Delegate tasks to trial/study team and document on Coordinating Centre Signature & Delegation Log • Chair TMG meetings and ensure meetings have clearly documented minutes and action logs • Approval of essential documents
Co-CI	• Any of CI related tasks other than, overall oversight, approval of essential documents, delegation of CI activities and ethical and regulatory submission approval. The delegated activities must be clear on the Coordination Centre Signature & Delegation Log.
All staff	• Ensure familiarity with Good Clinical Practice (GCP) principles • Ensure relevant training applicable to role is completed (to include reading and acknowledging all relevant SOPs)

4.2 When?

Individual study-related duties and functions should be defined, established and allocated prior to the initiation, and reviewed throughout the lifetime of the study.

4.3 How?

An outline of some key responsibilities of each role/committee is given below. Details of some responsibilities may vary according to the particular study involved and the make-up of the team will vary depending on study design. For WCTU managed studies, the CI will work with their Senior Project Manager (SPM) to allocate roles and create an appropriate team.

4.3.1 Trial/Study Management Group (T/SMG) Meetings

Constitution:

The T/SMG normally includes those individuals responsible for the day-to-day management of a study/trial at the coordinating centre. Membership usually comprises of the CI, Senior Project Manager, Trial Manager/Coordinator, Statistician, Health Economist and others as appropriate for the stage of the study.

Frequency:

The TMG should meet regularly, as appropriate for the phase of the project. Meetings are generally held monthly, but consideration should be made and agreed regarding their frequency throughout the lifetime of the project. A template agenda for a TMG meeting is available which can be amended according to the stage of the study (Template T28).

Remit:

The group is responsible for monitoring all aspects of the conduct and progress of the study, to ensure that the protocol is adhered to and to take appropriate actions to safeguard participants and the quality of the study itself.

Comprehensive minutes should be recorded for each meeting to document key discussions, actions, and decisions (see list of templates below). A copy of the agenda, minutes and associated report(s) should be filed in the Trial/Study Master File (T/SMF). It is good practice to also produce an action log to track that delegated actions/responsibilities have been completed.

A template Charter for the operation of the TMG is available (T27). This can be used to define the roles and responsibilities, membership, quoracy, conduct and decision-making process of the Trial Management Group.

4.3.2 Chief Investigator (CI) and Co-CI

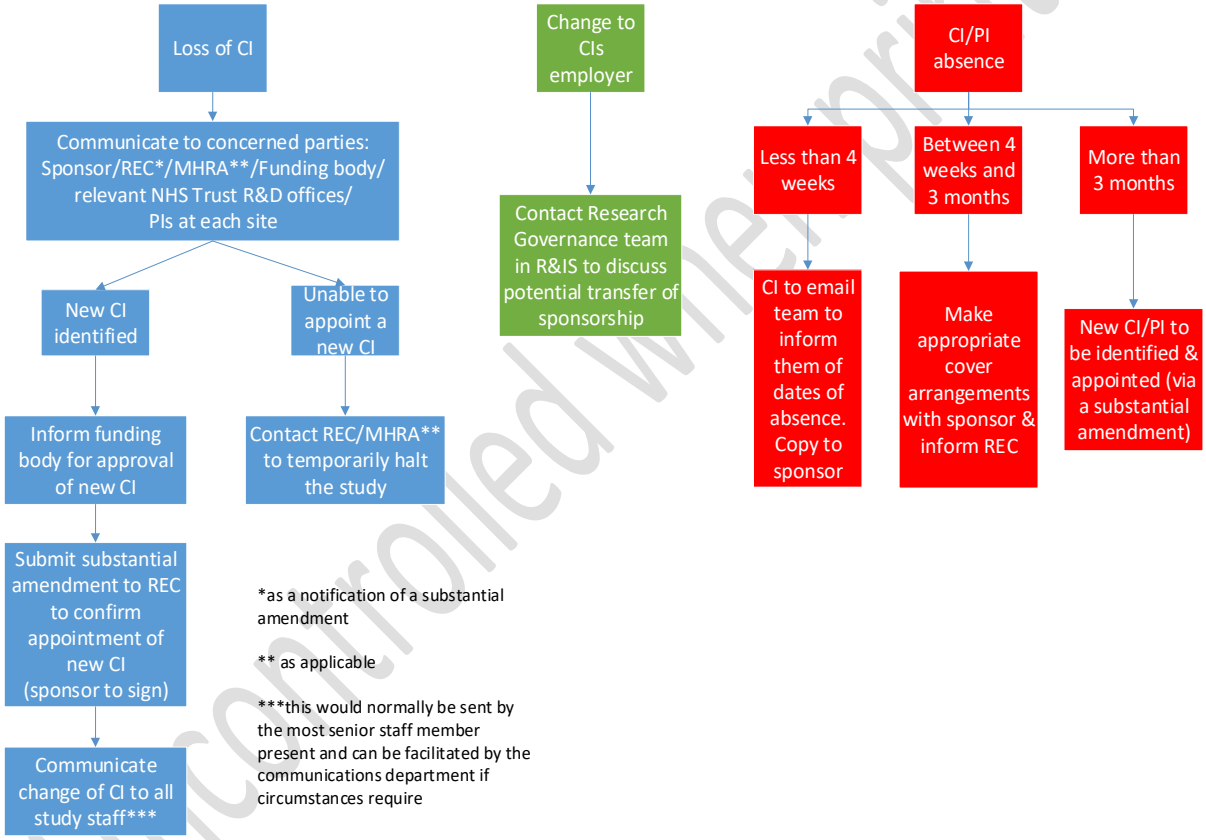
The CI bears overall responsibility for the day to day running of all aspects of the study and for the safety of study participants. The CI should be appropriately trained and have relevant experience to undertake this role. A number of funders for some grant schemes, such as many of the NIHR grant schemes, allow the listing of more than one person as a Chief Investigator, subsequently then called Co-Chief Investigators (Co-CIs). Although in principle this is acceptable and a fair reflection of the input of the different collaborators, it is important that there is recognition of who should be the overall responsible CI and therefore signatory on essential documentation. The distinction should be clear on any patient facing documents.

The study sponsor will work with the CI (and Co-CI where applicable) to allocate study roles which will be documented in the Division of Sponsor Responsibilities form. For Warwick sponsored studies this will be template T01.

Once all required approvals/contracts are in place, the CI or their delegate should follow the guidance in SOP 26 Clinical Research Study Activation, Site Selection and Initiation and sign the 'Permissions required to commence a randomised trial' form (known as the Green Light Form, template T18). For WCTU managed studies, the WCTU QA team will review the form and confirm all the required elements are in place via an email to the study team and sponsor's office prior to submission for approval signatures.

Roles and responsibilities of staff at the study coordinating centre should be delegated as appropriate and documented using the Coordinating Centre Signature & Delegation Log form (Template T23). Electronic versions of delegation logs may be used where staff are working remotely, and the CI may approve via email (follow G33, email approval guidance).

4.3.2.1 Procedures required on the change, loss, or absence of study CI



If the circumstances around the loss or change of a CI are in any way distressing and staff are upset by the news, the University has a counselling service available via Wellbeing Support Services. Alternatively, staff can access the university's Employee Assistance Programme (EAP) which is a confidential support service for staff to provide help for employees to deal with personal and professional problems that could be affecting home or work life, or health and general wellbeing.

4.3.3 Principal Investigator (PI)

The PI is responsible for the study at their site. They should nominate appropriately qualified/trained and experienced staff, for example research nurses, to assist in the recruitment and follow-up of participants. Roles and responsibilities of site staff should be documented using the Site Signature and

Delegation Log (T22).

In certain circumstances it is possible for a site to have two PIs if deemed necessary. This may be to bring specific expertise to the role or to maintain sufficient cover. Both PIs will have overall responsibility for the study. Where specific responsibilities differ, the site must have a clear understanding of this, and it should be made clear on the Site Signature and Delegation Log.

If there is change of PI at any point, it may be necessary to arrange for the site agreement to be updated and re-signed by the site team. Contact the contracts team in R&IS to obtain advice.

See the process flowchart above for details of how to manage loss, absence or change of a PI.

The NIHR have introduced an associate PI scheme, details of which can be found here. The scheme is a six month in-work training opportunity, providing practical experience and mentorship for healthcare professionals starting their research career. Where an associate PI is involved, the site delegation log should clearly state their responsibilities.

4.3.4 Trial/Study Manager/Coordinator

The day-to-day conduct of the study is usually the responsibility of the Trial/Study Manager or Trial/Study Coordinator. Additional support may be provided from a Senior Project Manager to ensure that study milestones are met and further operational/administrative support e.g., Data Entry Clerk(s), Recruitment Facilitators may be required to help with day-to-day study related activities and the large volume of paperwork and data generated.

Main duties for a Trial Manager (TM) or Trial Coordinator (TC) include:

- Planning and coordination of study activities using project management and administrative expertise to ensure recruitment targets are met
- Responsibility for submission of all relevant applications for approval on behalf of the CI
- Ensuring adherence to GCP, SOPs, University policies and relevant regulatory requirements
- Acting as main point of communication between CI, funders, regulatory agencies, and clinical teams
- Creation and maintenance of study documentation, reports to and minutes from the T/SMG and other related materials
- Management of study data
- Line management of trial team and ensuring training needs are met
- Ensuring study contracts and/or agreements are abided to.

4.3.5 Senior Project Managers

The SPM role is to provide high level project management input across a portfolio of large multi-centre clinical trials in a variety of therapeutic areas to ensure that projects are delivered on time, within budget and in accordance with the protocol, contracts and agreements and all relevant regulations.

Oversight and support to Trial Management Team to ensure study milestones are met.

4.3.6 Quality Assurance (QA) Team

The QA role is to provide adequate oversight to ensure that all studies are conducted in compliance with the relevant regulatory requirements and legislation. This includes oversight of appropriate training for the staff concerned and monitoring of study processes and procedures. See SOP 19

'Quality Control', SOP 24 'Essential Training and Training Records', SOP 25 'Auditing' and SOP 31 'Handling non-compliances' for further details.

4.3.7 Programmer

The Programmer leads the development, creation, validation, and maintenance of the bespoke clinical data management system (CDMS) to comply with the legal and regulatory obligations to safeguard clinical study data. Further information regarding the activities of the programming team is provided in SOP 14 'Clinical Trial Software Development' and SOP 42 'Clinical Data Management System (CDMS) Planning & Maintenance'.

4.3.8 Statistician

The Statistician should be involved in all phases of the study, from the research proposal and funding application to the analysis and reporting stage. Their main responsibilities include development of the Case Report Forms (CRFs) and analysis, reporting and publication of the results. Further information is provided in SOP 8 'Statistical Considerations' and SOP 21 'Statistical Analysis Plan'.

4.3.9 Health Economist

The Health Economist is responsible for the economic evaluation alongside a study. They are responsible for assisting with relevant CRF development, preparing an economic analysis plan, managing the health economic data as it is received and analysis, reporting and publication of the data. Further details are available in SOP 33 'Economic Evaluation Considerations'.

List of abbreviations

CDMS	Clinical Data Management System
CI	Chief Investigator
Co-CI	Co-Chief Investigator
CRF	Case Report Forms
DMC	Data Monitoring Committee
DMP	Data Management Plan
EAP	Employee Assistance Programme
GCP	Good Clinical Practice
PI	Principal Investigator
QA	Quality Assurance
RAMP	Risk Assessment, Monitoring Plan
REC	Research Ethics Committee
R&IS	Research and Impact Services
SOP	Standard Operating Procedure
SPM	Senior Project Manager
TC	Trial Coordinator
TM	Trial Manager
T/SMG	Trial/ Study Management Group
TSC	Trial Steering Committee
WCTU	Warwick Clinical Trials Unit

Templates

Template **T18** Permissions Required to Commence a Randomised Controlled Trial Form (Green Light)

Template **T22** Site Signature and Delegation Log

Template **T23** Coordinating Centre Signature and Delegation Log

Template **T28** Trial Management Group Agenda Builder

Template **T27** Trial Management Group Charter

Template **T31** Minute writing template

Template **T29** Decision and action log

Guidance **G33** email approval guidance