MANCHESTER 1824

The University of Manchester

**Standard Operating Procedure**

| | | | |
|---|---|---|---|
| **Number:** | UoM/Delegation of Responsibilities/SOP06/5.0 | | |
| **Title:** | Delegation of Sponsor responsibilities | | |
| **Version:** | 5.0 (August 2016) | **Effective Date** | August 2016 |
| **Author:** | Mrs April Lockyer | **Review Date** | August 2018 |
| **Reviewed by :** Prof Deborah Symmons | | **Approved By:** Prof Nalin Thakker | |
| **Position:** Chair of Clinical Trials Management Group | | **Position:** Associate Vice President for Research Integrity | |
| **Signature:**  | | **Signature:**  | |

| Version | Date | Reason for change |
|---|---|---|
| **2.0** | **January 2013** | **Update of weblinks and office details** |
| **3.0** | **May 2014** | **Addition of version control statement for SOP** |
| **3.0** | **May 2014** | **Addition of contractual obligations (Appendix I)** |
| **4.0** | **October 2015** | **Update of weblinks and office details** |
| **5.0** | **August 2016** | **Update of weblinks and office details** |
| | | |
| | | |

**When using this document please ensure that the version you are using is the most up to date either by checking on the Research Governance, Ethics and Integrity Team website (http://www.staffnet.manchester.ac.uk/services/rbess/governance/) for any new versions or contacting the author to confirm the current version.**

## 1.0 Background

The EU Good Clinical Practice (GCP) Directive 2001/20/EC was introduced to establish standardisation of research activity in Clinical Trials throughout the European Union. It was transposed into UK law as the Medicines for Human Use (Clinical Trials) Regulations 2004 (SI 2004/1031) which came into force on 1st May 2004. The Medicines for Human Use (Clinical Trials) Regulations together with subsequent amendments will be referred to as the Regulations in the rest of this document.

Regulation 3, as amended by Statutory Instrument 2006/1928, requires research which falls under the regulation to have a Sponsor. As stated in the Regulations, the role of the Sponsor "in relation to a clinical trial, [is] the person who takes responsibility for the initiation, management and financing (or arranging the financing) of that trial". Therefore all proposed research which falls within the scope of the Regulations will require a formal confirmation from the Sponsor.

Regulation 3 allows for two or more parties to take on the responsibilities of the Sponsor (co-sponsorship). One of the co-sponsors must take on responsibility for carrying out the functions of a Sponsor under Part 3 (authorization for clinical trials and ethics committee opinion) of the Regulations and shall make the request for authorization to conduct the trial. The request for authorization shall specify who is responsible for carrying out the functions of the Sponsor under Part 3 of the Regulations, Part 4 (good clinical practice and the conduct of clinical trials) of the Regulations and Part 5 (pharmacovigilance) of the Regulations.

Paragraph 12 of Regulation 3 allows that "a person who is a Sponsor of a clinical trial in accordance with this regulation may delegate any or all of his functions under these Regulations to any person but any such arrangement shall not affect the responsibility of the Sponsor."

## 2.0 Purpose

This Standard Operating Procedure (SOP) describes the process to be followed for dividing responsibilities between the University of Manchester (the University) and another organization when there is a co-sponsorship arrangement whereby the University is one of the Sponsors. It also describes the process for delegating these divided responsibilities to other individuals, notably the Principal Investigator or Principal Investigator at a site.

## 3.0 Procedure

### 3.1 Agreeing the division of responsibilities between the co-sponsors

3.1.1 Where the University is being asked to enter into a co-sponsorship arrangement with another organisation, the University will require that a co-sponsorship agreement is negotiated via the University Contracts Team. This agreement will contain a Division of Responsibilities which will be negotiated on behalf of the University by the Research, Governance, Ethics and Integrity Officer. An example template for the Division of Responsibilities is contained in Appendix 1.

3.1.2 On the basis of the research protocol and risk assessment of the study, the Research, Governance, Ethics and Integrity Officer will discuss the division of responsibilities with the Principal Investigator and a representative from the co-sponsor to determine which organisation is best suited to take responsibility for each item on the Division of Responsibilities.

3.1.3 Where the University is the substantive employer of the Principal Investigator, the University would usually take on the responsibilities of the Sponsor under Part 3 of the Regulations.

3.1.4 The University would not usually take on responsibilities under Part 5 of the Regulations, but would require the Principal Investigator to copy the University in to safety reports.

### 3.2 Delegation of Sponsor responsibilities

3.2.1 Where the University intends to delegate some of its responsibilities as Sponsor, as defined in the Division of Responsibilities, to the Principal Investigator this will be indicated on the Division of Responsibilities. The University will also list the responsibilities that it has delegated to the Principal Investigator in a written agreement that must be signed by the Principal Investigator.

3.2.2 Where the University delegates responsibilities to the Principal Investigator it will assure itself that the Principal Investigator has the necessary experience and training to fulfil these responsibilities.

3.2.3 Where the University delegates responsibilities to a third party it will put a formal agreement in place to be negotiated by the University Contracts Team.

3.2.4 Where the Principal Investigator intends to delegate some of his/her responsibilities to another member of his/her research team. S/he should do so using a delegation log which should be signed by all parties. The Principal Investigator should assure him/herself that the researcher to whom s/he delegates responsibilities has adequate experience and training to undertake the delegated responsibilities.

Appendix 1

**Schedule X – Example of a Division of Sponsorship Responsibilities Schedule**
**Study Title:** **A CTIMP**
**CI:** **Professor …….**
**EudarCT:** **1111-001111-11**

| Responsibility | SPONSOR RESPONSIBILITIES | | DELEGATED RESPONSIBILITIES |
|---|---|---|---|
| | **UoM** | **Co sponsor** | **Principal Investigator** |
| **Study preparation:** | | | |
| Design of the protocol | ✓ | ✓ | ✓ |
| Ensuring that the protocol has undergone independent scientific and statistical review and is compliant with the Medicines for Human Use (Clinical Trial) Regulations. | ✓ | | ✓ |
| Secure funding for the trial | ✓ | | ✓ |
| Ensure that the appropriate contracts and agreements are in place for the study. | ✓ | ✓ | |
| **Responsibilities under Part 3 of the Regulations (authorisation for clinical trials and ethics committee opinion):** | | | |
| Request for authorisation (Schedule 3, Part 2) | ✓ | | ✓** |
| Notice of amendments (Schedule 3, Part 3) | ✓ | | ✓ ** |
| Notice of conclusion of clinical trial (Schedule 3, part 4) | ✓ | | ✓ ** |
| Schedule 5 – where it relates to a decision of the licensing authority under Part 3. | ✓ | | |
| Obtain Management (R&D/ Research Governance) approval from the appropriate Trusts | ✓ | | ✓ *** |
| Apply for EudraCT No. | ✓ | | ✓ |
| Ensure that no individual has been recruited to be subject in a trial and no advertisement has been issued for the purpose of recruiting individuals to be subject in a trial unless authorisation by the licensing authority has been secured. | ✓ | | ✓ |
| Make application to appropriate ethics committee in accordance with regulation 14. | ✓ | | ✓ ** |
| Ensure that no individual has been recruited to be subject in a trial and no advertisement has been issued for the purpose of recruiting individuals to be subject in a trial unless favourable opinion has been given by an appropriate ethics committee or appeal panel appointed under Schedule 4 of the Regulations. | ✓ | | ✓ |
| Making amendments to a clinical trial authorisation (including substantial amendments) in accordance with regulation 24. This will include: | ✓ | | ✓ ** |
| • Keeping records of amendments | ✓ | | ✓ |
| • Sending records of the amendments to the licensing authority, where the authority has | ✓ | | ✓ ** |

| | | | |
|---|---|---|---|
| required this. | | | |
| • Sending valid notice of amendment to the licensing authority where the sponsor proposes to make a substantial amendment to a clinical trial authorisation which consist of an amendment to the terms of the request for authorisation of the clinical trial or the particulars or documents that accompanied that request. | ✓ | | ✓ ** |
| Sending valid notice of amendment to the relevant ethics committee when the sponsor proposes to make a substantial amendment to a clinical trial authorisation which consists of an amendment to the terms of the application for an ethics committee opinion in relation to the clinical trial or the particulars or documents that accompanied that application. | ✓ | | ✓ ** |
| Ensuring that no amendment is made to the clinical trial authorisation without receiving a favourable opinion from an ethics committee in accordance with regulation 24 paragraph 9. | ✓ | | ✓ |
| Ensuring that no amendment is made to the clinical trial authorisation until 35 days from the date of receipt of a valid notice of amendment to the licensing authority has passed and no notice to the sponsor has been received setting out grounds for not accepting the proposed amendment or ensuring that any conditions placed on the amendment by the licensing authority have been adhered to. | ✓ | | ✓ |
| Notifying the licensing authority and relevant ethics committee of the conclusion of a clinical trial or trial termination in accordance with Regulation 27. (And other appropriate stakeholders.) | ✓ | | ✓ ** |
| Ensure all investigators and participating organisations are aware of dates of approval and implementation of all such amendments. | ✓ | | ✓ |
| ***For clinical trials to be conducted at more than one site***<br>If any sponsor responsibilities are to be delegated to another site, ensuring that the request for authorisation to conduct the trial specifies what responsibilities are to be delegated to that site (particularly in relation to Part 4, regulation 28 paragraphs 2 and 3). | ✓ | | ✓ ** |
| **Ongoing reporting:** | | | |
| Submit annual progress reports to the relevant ethics committee. | ✓ | | ✓ *** |
| Submit an end of Trial report to the relevant ethics committee and the MHRA within one year of the end of the Trial. | ✓ | | ✓ *** |
| **Responsibilities under Part 4 of the Regulations (Good Clinical Practice and the Conduct of Clinical Trials):** | | | |

| | | | |
|---|---|---|---|
| Ensuring that trials are conducted in accordance with the conditions and principles of good clinical practice and protection of clinical trial subjects in accordance with regulation 28. | | ✓ | |
| **In accordance with Schedule 1 of the Regulations the Conditions and Principles of Good Clinical Practice and for the Protection of Clinical Trial Subjects include:** | | | |
| • Ensuring that the rights, safety and well-being of the trials subjects shall prevail over the interests of science and society. | ✓ | ✓ | |
| • Each individual involved in conducting the trial shall be qualified by education, training and experience to perform his/her tasks. | | ✓ | |
| • Clinical trials shall be scientifically sound and guided by ethical principles in all their aspects. | ✓ | ✓ | ✓ |
| • The necessary procedures to secure the quality of every aspect of the trial shall be complied with. | | ✓ | |
| • The available non-clinical and clinical information on an investigational medicinal product shall be adequate to support the proposed clinical trial. | ✓ | | ✓ |
| • All clinical data shall be recorded, handled and stored in such a way that it can be accurately reported, interpreted and verified, while the confidentiality of records of the trial subjects remains protected. | | ✓ | |
| • Before the trial is initiated, foreseeable risks and inconveniences have been weighed against the anticipated benefit for the individual trial subject and other present and future patients. | ✓ | ✓ | |
| • Provision has been made for insurance or indemnity to cover the liability of the investigator and sponsor which may arise in relation to the clinical trial. | ✓ | ✓ | |
| • The principles of obtaining informed consent from participants are adhered to. | | ✓ | |
| Ensure that the trial is conducted in accordance with the trial protocol. | | ✓ | |
| Ensure that the trial is conducted in accordance with any conditions imposed by the licensing authority. | | ✓ | |
| Ensure that the trial is conducted in accordance with the application for an ethics committee opinion. | | ✓ | |
| Ensure that participants receive appropriate medical care whilst participating in the study. | | ✓ | |
| Ensuring that individuals involved in conducting the trial have current substantive or honorary employment contracts in pace, where required. | | ✓ | |
| **Breaches and misconduct:** | | | |
| Notifying the licensing authority in writing of any serious breaches of the conditions and principles of | | ✓ | |

| | | | |
|---|---|---|---|
| good clinical practice in connection with the trial or the protocol relating to that trial within 7 days of becoming aware of that breach.<br>(As defined in Regulation 29A paragraph 2, a serious breach is defined as a breach which is likely to effect to a significant degree the safety of physical or mental integrity of the subjects of the trial or the scientific value of the trial.) | | | |
| Give written notice to the licensing authority and the relevant ethics committee of measures taken and the circumstances giving rise to any urgent safety measures that have been utilised to protect subjects in accordance with Regulation 30. (in the case of pandemic or serious, or potentially serious, risk to human health this should be immediately for any other circumstances this should be no later than 3 days from the date the measures were taken.) | | ✓ | |
| Investigating suspected research misconduct Trust employee | | ✓ | |
| Investigating suspected research misconduct UoM employee | ✓ | | |
| **Records Management:** | | | |
| Maintain a trial master file and ensure that it contains, at all times, the essential documents relating to that clinical trial as set out in paragraphs 4 and 5 of Regulation 31A. | | ✓ | |
| Ensuring that the trial master file is readily available at all reasonable times for inspection by the licensing authority or any person appointed by the sponsor to audit the arrangements for the trial. | | ✓ | |
| Ensure that any alteration to a document contained, or which has been contained, in the trial master file shall be traceable. | | ✓ | |
| Ensure that the documents contained, or which have been contained, in the trial master file are retained for at least 5 years after the conclusion of the trial and that during that period are readily available to the licensing authority on request and complete and legible. | ✓ | | ✓ |
| Ensure that medical files of trial subjects are retained for at least 5 years after the conclusion of the trial. | ✓ | ✓ | |
| Appoint named individuals within the sponsor's organisation to be responsible for archiving the documents which are, or have been, contained in the trial master file and access to those documents shall be restricted to those appointed individuals. | ✓ | | |
| **Responsibilities under Part 5 of the Regulations (Pharmacovigilance):** | | | |
| Maintain records of all adverse events reported to the sponsor by the investigators for that trial. | | ✓ | |
| Provide such records to the licensing authority on request. | | ✓ | |

| | | | |
|---|---|---|---|
| Ensure that all Serious Adverse Events (SAEs), other than those specified in the Protocol as not requiring immediate reporting, are promptly assessed as regards the requirement for expedited reporting to the regulatory authority and relevant ethics committee. | | ✓ | |
| Ensure that SAEs are reviewed by an appropriate committee for the monitoring of trial safety. | | ✓ | |
| Ensuring that all relevant information about a suspected unexpected serous adverse reaction (SUSAR) which is fatal or life-threatening is recorded and reported as soon as possible to the licensing authority, the competent authorities of any EEA State, other that the UK, in which the trial is being conducted and the relevant ethics committee but not later than 7 days after the sponsor was first aware of the reaction. | | ✓ | |
| Ensuring that all relevant information about a SUSAR which is not fatal or life threatening is reported as soon as possible to the licensing authority, the competent authorities of any EEA State, other that the UK, in which the trial is being conducted and the relevant ethics committee but not later than 15 days after the sponsor was first aware of the reaction. | | ✓ | |
| Ensure that the investigators responsible for the conduct of a trial are informed of any SUSARS which occur in relation to an investigational medicinal product used in that trial, whether that reaction occurs during the course of that trial or another trial for which the sponsor is responsible. | | ✓ | |
| Provide the licensing authority and relevant ethics committee with annual reports of SUSARS which have occurred during that year and a report on the safety of the subjects of those trials. (As provided for in Regulation 35.) | | ✓ | |
| **Data Management:** | | | |
| Design of case report forms | | ✓ | |
| Design of database | | ✓ | |
| Ensure appropriate analysis of data | ✓ | | ✓ |
| **IMP Management:** | | | |
| Liaise with appointed drug distribution company with regard to trial supplies of the trial drug and placebo. | | ✓ | |
| Liaise with site pharmacists regarding the provision and accountability of the drugs. | | ✓ | |
| Ensure that the IMP is not used for any purposes other than the conduct of the study and is used in strict accordance with the protocol. | | ✓ | |
| Ensure IMP is provided and labelled in accordance with the Regulations | | ✓ | |
| Ensure that IMP is stored in appropriate and secure conditions and that detailed records are maintained regarding its movement from delivery to | | ✓ | |

| | | | |
|---|---|---|---|
| return/destruction. | | | |
| **Contracts and contractual obligations to be listed** | | | |
| | | | |
| | | | |
| | | | |
| **Monitoring** | ✓ | ✓ | |
| ***Develop monitoring plan** | | ✓ | |
| ***Conduct monitoring on-site monitoring and produce monitoring reports** | | ✓ | ✓ |
| | | | |
| **Resources** | | | |
| Administer funding for the study | ✓ | | ✓ |
| Secure and contract for the supply of resources including medicinal products | ✓ | | |
| Ensuring that the resources are adequate to allow the collection, analysis and protection of high quality research data. | ✓ | ✓ | |
| | | | |
| **Publication:** | | | |
| Initiate and co-ordinate review and submission of abstracts, posters and publications | ✓ | ✓ | ✓ |

* The co-sponsor should receive copies of reports/notices/information.

** Where sponsor responsibilities are delegated to the CI or PI – the CI or PI must seek approval of the responsible sponsor BEFORE acting with delegated responsibility.

*** Where sponsor responsibilities are delegated to the CI or PI – the CI or PI must send a copy to the responsible sponsor.