DANA-FARBER / HARVARD CANCER CENTER
POLICIES FOR HUMAN SUBJECT RESEARCH

TITLE: ~~Auditing of Clinical Research~~Audits and Inspections		
POLICY ~~#~~: AUD-100	**Page:** 1 of 4	**Effective Date:** 1/31/19

1. POLICY STATEMENT:

~~All active protocols are eligible for auditing, regardless of sponsorship.~~
DF/HCC research activities are subject to both internal and external audit and inspection.

Prompt notification of external audits and inspections is required to inform key associated leadership and study personnel.

2. BACKGROUND:

~~None~~

All audits/inspections strive to ensure the protection of human subjects and the quality and integrity of the data and information submitted to the Institutional Review Board (IRB), Sponsor, and regulatory authorities. DF/HCC has a vested interest in the quality of the research that is performed at the facility and in maintaining its collective reputation as an outstanding research community. Because of the center's structure and many sources of funding and support, it is critical for it to have an overall understanding of the workings and results of any external audits/inspections. This allows DF/HCC to develop systems to resolve problems when necessary.

3. RESPONSIBLE PERSONNEL:

3.1. Overall Principal Investigator (PI)
3.2. Site Responsible Investigator
3.3. Subinvestigator
3.4. Research Nurse
3.5. Study Coordinator
3.6. Office of Data Quality (ODQ) ~~Clinical Research Auditor~~Audit Team
3.7. DF/HCC Audit Committee Chair
3.8. Clinical Trials Office Director
3.9. Institutional Official (IO)

4. DEFINITIONS:

~~None~~
4.1. **Clinical Trial Office**: The institutional entity that provides centralized administrative services that help support cancer clinical trials from initial proposal through study completion.

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Commented [CC1]: Policy title updated to make this a comprehensive policy on both internal audits and external regulatory inspections.

Updates throughout to remove operational language that now exists in AUD-OP-1 and AUD-OP-2, while maintaining policy level requirements related to internal and external audits and inspections of DF/HCC trials.

4.2. **External Audit**: An independent examination of research related activities and documents to determine whether the research related activities were conducted, recorded, and accurately reported according to the protocol, sponsor's procedures, and the applicable regulatory requirements. This may include but is not limited to examinations requested or directed by the Food and Drug Administration (FDA), European Medical Association (EMA), National Institutes of Health (NIH), a National Cancer Institute (NCI)/Cooperative Group, regulatory authorities, a research sponsor, or their representatives.

4.3. **Institutional Official (IO)**: A senior official who, on behalf of a research institution, has the authority and responsibility for the oversight and administration of the institution's human subject research program.

5. POLICY:

5.1. **Internal Audits**

~~5.1.~~ The Office of Data Quality (ODQ ~~Clinical Research Auditor coordinates all~~) performs internal audits~~.~~

5.1.1. ~~The ODQ Clinical Research Auditor selects~~ of DF/HCC research activities. All protocols ~~from all studies that~~ are eligible ~~to be audited and attempts to distribute the audits evenly among the various DF/HCC disease programs.~~ for auditing, regardless of sponsorship.

~~5.1.2. For protocols that are conducted at Network Affiliate hospitals, more than one protocol may be audited on the same day.~~

~~5.2. Specific protocols may be audited upon request (e.g. for cause audits).~~

~~5.3. The ODQ Clinical Research Auditor evaluates many areas of research conduct, including but not limited to protocol and regulatory compliance, human subject protections, data accuracy, and drug handling (if applicable), and assign a preliminary audit rating.~~

~~5.4. The Overall PI is required to respond with a written corrective action plan to any major deficiencies that are identified during the audit.~~

5.1.2. The Overall PI must participate in the exit interview, unless an exception is granted by the auditor or inspector and a designee is appointed by the Overall PI. The conduct of the exit interview is mandatory and failure to

accommodate the meeting will result in notification sent to the DF/HCC Audit Committee chair and further action taken as deemed appropriate.

~~5.5.~~ The Audit Committee (see COM-100) reviews the audit reports and written corrective action plans and approves or disapproves ~~of~~ the audit rating and Overall PI response. ~~The Audit Committee may require further action.~~

~~5.5.1.~~5.1.3. ~~Documentation~~ODQ maintains documentation of the audit outcome, Audit Committee response and any required follow-up action ~~is maintained in the ODQ Audit files~~.

5.2. **External Audits and Inspections**

5.2.1. The Overall PI or designated research team member will notify the responsible clinical trials office within 1 business day of notification of any external group's plans to inspect or audit a protocol at DF/HCC, providing the following details: date, time, location, and purpose of the inspection, as well as the identity of the auditors and the principal DF/HCC study contact. The Overall PI or designated research team member should also confirm which DF/HCC sites are to be reviewed as part of the audit or inspection.

5.2.2. In the event of a regulatory agency inspection, for example by Food and Drug Administration (FDA) or European Medical Association (EMA):

5.2.2.1. It is the responsibility of the Overall PI and responsible clinical trials office to ensure impending inspections are communicated to the individuals listed on the DF/HCC External Regulatory Inspection Contact List. The responsible clinical trials office must also notify the DF/HCC Associate Director of Administration, and the appropriate IO and IRB at the site of the Overall PI.

5.2.2.2.The Overall PI or designated research team member will notify the Sponsor as soon as possible.

5.2.2.3.The Overall PI or designated research team member is responsible for following AUD-OP-2

5.2.3. The Overall PI is solely responsible for responding to the audit or inspection report by the date indicated on the report.

6. APPLICABLE REGULATIONS & GUIDELINES:

21 CFR 50 – Protection of Human Research Subjects
21 CFR 54 – Financial Disclosure by Clinical Investigators
21 CFR 56 – Institutional Review Boards
21 CFR 312 - Investigational New Drugs – Drugs for Human Use
21 CFR 812 - Investigational Device Exemptions
45 CFR 46 – Protection of Human Subjects
FDA Industry Guidelines and Information Sheets
FDA Compliance Policy Guidance Programs: 7348.809, 7348.810, and 7348.811

7. RELATED REFERENCES:

International Conference on Harmonisation – E6
~~DF/HCC Multi-center Trial Guidelines~~

8. RELATED RESOURCES:

~~DF/HCC Operation~~ AUD-OP-1: Internal Auditing ~~of Clinical Research~~Procedures
~~DF/HCC Operation~~ AUD-OP-2: FDA and Other Regulatory Inspections
DF/HCC Guidance on Responding to Audit Findings
DFHCC External Regulatory Inspection Contact list