Reliance on the NCI CIRB: Investigator and DFCI IRB Responsibilities

This document outlines the procedures for utilizing the NCI CIRB for studies conducted by investigators at the Dana-Farber/Harvard Cancer Center.

The NCI CIRB Initiative is a cooperative venture with FWA institutions that is intended to create a more effective and efficient mechanism for IRB oversight of NCI-sponsored Cooperative Group clinical trials as well as certain CTEP trials. Specifically, the NCI CIRB is designed to 1) improve access to certain NIH research by enabling rapid approval of clinical trials through the use of the NCI CIRB review process; 2) enhance the protection of study participants by providing consistent expert IRB review at the national level; and 3) reduce the administrative burden for local IRBs and research staff.

The DFCI IRB maintains responsibility for local oversight of the performance of CIRB-approved studies. These responsibilities include ensuring the safe and appropriate performance of the research including, but not limited to, ensuring the initial and ongoing qualifications of investigators and research staff; overseeing the conduct of the research; monitoring protocol compliance, maintaining compliance with state, local or institutional requirements related to the protection of human subjects; providing a mechanism to receive and address concerns from local study participants and others about the conduct of the research; and investigating, managing, and providing notification to the NCI CIRB of any study-specific incidents, experience, or outcome that seems to rise to the level of an unanticipated problem and/or serious or continuing noncompliance.

A. Initial Submission Requirements: Investigator Responsibilities

1. When an investigator wishes to submit a research protocol that has been approved by the NCI CIRB, the following steps must be followed:
    a. The investigator/research staff will complete the NCI CIRB protocol application form; and, submit the following documents:
        i. Study protocol;
        ii. CIRB final approval letters of both the entire study and approval of the DF/HCC sites (CIRB initial approval letters);
        iii. Documentation of the most recent CIRB approval for continuation (if applicable);
        iv. The DFCI NCI-CIRB Reviewed Research Consent Document.

B. OHRS Procedures Following Initial Submission of a Protocol

Once an NCI CIRB protocol is submitted to OHRS, OHRS will submit the protocol for the following reviews:

1. Review by an SRC member for scientific prioritization
2. Review by an IRB member to ensure compatibility with our research portfolio;
3. Review by the appropriate departments such as pharmacy, nursing, radiation safety, conflicts of interest etc.

4. The DFCI IRB will issue an SRC approval memo and a Central IRB Activation memo upon activation.

   *****NCI CIRB research must be activated prior to enrolling any subjects onto the research.***

C. Informed Consent Guidelines

1. **NCI-CIRB Reviewed Research Consent Document:** The study team is responsible for merging the DF/HCC boilerplate local consent context language with the NCI CIRB approved cooperative group model consent using this template which will then be used to consent participants. The DF/HCC boilerplate is required for these submissions to communicate the specific local risk, financial, injury and privacy language utilized by the DF/HCC to research participants. Any updates to the NCI CIRB approved cooperative group model consent must be incorporated into this document and included with an amendment submission to OHRS. The NCI CIRB expiration date will be reflected in the footer of this consent document and will be posted to OncPro.
2. **Consenting Non-English Speaking Subjects in NCI CIRB Approved Research:** The NCI CIRB has approved the use of the DF/HCC Short Form Consent Documents and Addendums to be utilized in all NCI CIRB approved research studies. Study teams should follow the current process for consenting Non-English speaking participants.
3. **Translated Consent Documents:** Any translated informed consent documents must be approved by the NCI CIRB and then submitted as an amendment to OHRS before they can be utilized.

D. Investigator Responsibilities Following Activation of an NCI Protocol

1. **Continuing Reviews:** The study team is responsible for providing OHRS documentation of continuing review approval from the NCI IRB at least 30 days prior to the study expiration date. If continuing review approval is not provided before the approval lapses, the study will expire and subjects will not be able to start and/or continue the research at DF/HCC until current continuing review approval is provided. The study team is responsible for submitting:

   - the Central IRB approval documents as well as the **Application for Continuing Review of Central IRB Protocols; and,**
   - The Minor Deviation/ Violation Log ;
   - The study will also be routed for a Scientific Progress Review (if applicable).

   The DFCI IRB will issue a Central IRB Continuing Review Activation Memo and the footer of the consent document posted to OncPro will be updated to reflect the new expiration date.

2. **Amendments:** The study team is responsible for providing OHRS with all revised protocol documents approved by the Central IRB. These documents will be posted on OncPro by OHRS. Revised documents must be provided to OHRS within 30 days of receipt from the sponsor and/or Central IRB.

    - The study team is responsible for submitting the Central IRB approval documents as well as the **Amendment Submission Form - Central IRB**
    - A review will be performed of the amendment submission
    - The amendment will be routed for Activation as needed.
    - The DFCI IRB will issue an SRC approval memo (if applicable) and a Central IRB Amendment Activation Memo upon activation.
    - If an amendment requires DFCI IRB review for local changes such as a Change in Outside Interest, Change in PI or Study Contact, or Alert Page change, a DFCI IRB Approval memo will be issued.

3. **Adverse Events, Other Events and Unanticipated Problems:** The DFCI IRB retains responsibility for the oversight of all events occurring at participating DF/HCC sites. The study team is required to follow all DFCI IRB reporting policies related to Adverse Events, Deviations, Violations, Exceptions and Unanticipated Problems including the collection and reporting of minor deviations and violations at the time of IRB annual approval submission.

    - You may also be required to report to the sponsor, relevant regulatory agencies and the CIRB as per the protocol and CIRB requirements.
    - These submissions will be reviewed by the DFCI IRB per the DFCI IRB Policies and Procedures Manual.
    - Study teams are reminded that eligibility exceptions and deviation are not allowed on cooperative group studies. Any departure from the NCI CIRB approved protocol, DF/HCC SOPs or sponsor requirements are considered violations.
    - All violations must be reported to OHRS that meet the DFCI IRB reporting policies.
    - An email notification will be sent to study teams notifying them of the review outcome for these events.

E. Continuing DFCI IRB Responsibilities

1. The DFCI IRB maintains responsibility for local oversight of the performance of CIRB-approved studies. These responsibilities involve ensuring the safe and appropriate performance of the research at its affiliated institutions including, but not limited to,
    a. Ensuring the initial and ongoing qualifications of investigators and research staff;
    b. Overseeing the conduct of the research
    c. Monitoring protocol compliance;

   d. Maintaining compliance with state, local, or institutional requirements related to the protection of human subjects;
   e. Providing a mechanism to receive and address concerns from local study participants and others about the conduct of the research; and
   f. Investigating, managing, and providing notification to the NCI CIRB of any study-specific incidents, experience, or outcome that seems to rise to the level of an unanticipated problem and/or serious or continuing noncompliance. When notifying the NCI CIRB of a potential unanticipated problem and/or serious or continuing noncompliance, the DFCI IRB must provide a plan to manage the incident, experience, or outcome, including measures to prevent similar occurrences.
2. As a part of ensuring safe and appropriate performance of research, the DFCI IRB has the authority to observe any aspect of the research process including observing the consent process. The CIRB retains the authority to direct the DFCI IRB to perform such inspections as necessary to assure adequate regulatory compliance.
3. The DFCI IRB will notify the NCI CIRB when a regulatory deficiency has been cited on an audit that occurred during the time that the NCI CIRB was responsible for study review.
4. The DFCI IRB will maintain a shadow file for each study under NCI CIRB
5. The DFCI IRB will conduct full board review of any study enrolling prisoners, as the NCI CIRB is not constituted to review studies enrolling prisoners. Submission of a study for full board review by the DFCI IRB must follow the procedures outlined in SOP: Procedures for Full Board Review. Inclusion of prisoners in a previously-initiated, CIRB-approved

Questions regarding Central IRB review process should be directed to OHRS at: (617) 632-3029 or OHRSCentral_IRB@dfci.harvard.edu