Advancing Clinical Therapeutics Globally for HIV/AIDS and Other Infections (ACTG)
Standard Operating Procedure

Protocol Activation for ACTG Clinical Research Sites (CRSs)

SOP No.: ACTG-154, Version 5.0,

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Process Owner ACTG Network Coordinating Center

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1.0 PURPOSE

This document establishes processes and responsibilities for ACTG protocol activation of Division of AIDS (DAIDS)-approved clinical research sites (CRSs).

2.0 SCOPE

This standard operating procedure (SOP) applies to protocol activation for DAIDS-approved ACTG United States (US) and non-US CRSs as well as non-ACTG sites participating in ACTG protocols.

DAIDS is responsible for ensuring that CRSs are approved for general conduct of clinical trials; however, the ACTG is responsible for preparing CRSs to activate specific protocols.

3.0 DEFINITIONS

3.1 Site Eligibility: Indicates a CRS is eligible to register to a protocol. Eligibility is confirmed by 1) affiliation of the site with the protocol in MIS; and 2) site designation in NCRMS/DAIDS Protocol Registration System (DPRS) portal. (For details on site eligibility, see SOP ACTG-159, “Protocol Site Selection”.)

3.2 Protocol Registration: CRSs are required to submit an Institutional Review Board (IRB) approval and other necessary documents as outlined in the DAIDS protocol registration manual to the Regulatory Support Center (RSC) to become protocol registered.

3.3 Site Protocol Activation Checklist (SPAC): A checklist sent to the ACTG Network Coordinating Center (NCC) by CRSs and signed by the CRS Leader, or via the ACTG member website (see Appendix I), that includes a completed list of CRS protocol activation requirements. The electronic signature of the CRS Leader or Study Coordinator confirms their attestation to the readiness of the CRS to conduct the specified protocol. Note: For non-US sites, a preparedness letter is required to be sent to the Network Leadership prior to protocol activation. (See #3.9 below and Appendix II for Protocol Activation Flow Chart.)

3.4 Site Implementation Plan (SIP): A plan detailing how a protocol will be implemented at CRSs. The plan must be completed by the CRS and approved by the protocol team before the CRS can be activated. Note: Not all protocols require a SIP; the protocol team will determine this need.

3.5 Protocol Activation: ACTG Network approval for a CRS to begin enrolling participants into an ACTG protocol.

3.6 Protocol Activation Notification: Official notification by the ACTG Network that a CRS has met all protocol team, ACTG Network, and DAIDS criteria and may begin enrolling into a protocol that is open to enrollment.

3.7 Site Readiness: Indicates a CRS has met all DAIDS, ACTG Network, and protocol-specific requirements for protocol implementation. A CRS is granted site-readiness in the Data Management Center (DMC) system when all requirements have been met at the CRS level.

3.8 Protocol Analyte List (PAL): Lists all the tests that will be performed by a laboratory to support an ex-US site for a specific protocol.

3.9 Domestic Analyte List (DAL): Lists all the tests that will be performed by a laboratory to support a US site for a specific protocol.

3.10 Memoranda (or Letter) of Understanding (MOU or LOU): A formal agreement between a CRS and another entity (e.g., lab, clinic) that may be required to participate in the protocol. Not all protocols will require an MOU or LOU.

3.11 CRS Preparedness Letter: A letter that all non-US CRS Leaders submit to the ACTG NCC , addressed to the ACTG Network Chair, indicating that the CRS has met all the protocol requirements, all materials are on site, all trainings have been completed, and CRS staff are ready to commence implementation of a protocol. This letter is submitted after the SPAC has been reviewed and approved by the ACTG NCC.

3.12 Clinical Trial Insurance (CTI): Financial coverage for sponsors and those conducting clinical research studies at non-US CRSs to provide compensation to participants if they suffer harm as a result of participating in a research study. CTI does not cover compensation related to medical malpractice.

3.13 Tuberculosis Infection Control Checklist (TBIC): A checklist that is required from all non-US CRSs as part of protocol activation for TB studies (found in SOP ACTG-160, ACTG Clinical Research Site Tuberculosis Infection and Control Policy). For non-TB studies, it is determined by the protocol team and the ACTG NCC if the TBIC will be completed.

5.0 PROCEDURES

5.1 CRS (US and non-US)

- When a SIP is required, submits the completed SIP to protocol team for approval. Protocol teams may choose to require SIP approval prior to or concurrent with protocol registration.
- Completes PAL or DAL if required.
- Completes any protocol-required Lab Center Attestation, MOUs, LOUs, or other agreements.
- Obtains all necessary supplies and study products(s).
- Completes protocol-specific training and/or fulfills other protocol-specific requirements.
- Completes protocol registration process and obtains protocol registration approval from the DAIDS Protocol Registration Office (PRO).

Additional requirements for non-US CRS

- Completes the CRS Preparedness Letter and sends it to the ACTG NCC. This letter must be addressed to the ACTG Network Chair.
- Complete the Post-Trial Antiretroviral (ARV) Access Letter (as appropriate for drug studies) and sends it to the ACTG NCC. This letter must be addressed to the National Institute of Allergy and Infectious Diseases (NIAID) HIV Research Branch (HIVRB) Chief and is required for all protocols providing ARVs. The ACTG NCC forwards the letter to the OCSO/DAIDS Program Officer (PO).
- For non-US CRSs in countries where CTI is a requirement, the CRS must submit its CTI application to the ACTG Leadership Operations Center (LOC) for approval (actg.finance@fstrf.org) prior to the purchase of the CTI and prior to the start of the coverage period. Permission will not be granted to use funds for CTI retroactively.

Additional requirements for non-US CRS (Continued)

- Upon ACTG LOC pre-approval and following purchase of CTI, the CRS must submit the CTI certificate directly to ACTGSiteCoordination@dlhcorp.com.
- If participating in TB studies completes the TBIC found in the appendix of SOP ACTG-160, ACTG Clinical Research Site Tuberculosis Infection Control Policy, and submits it to ACTGSiteCoordination@dlhcorp.com.
- Completes the SPAC and submits it to the ACTG NCC via the ACTG member website for protocol activation approval.
- Ensures completion of any required MTAs.

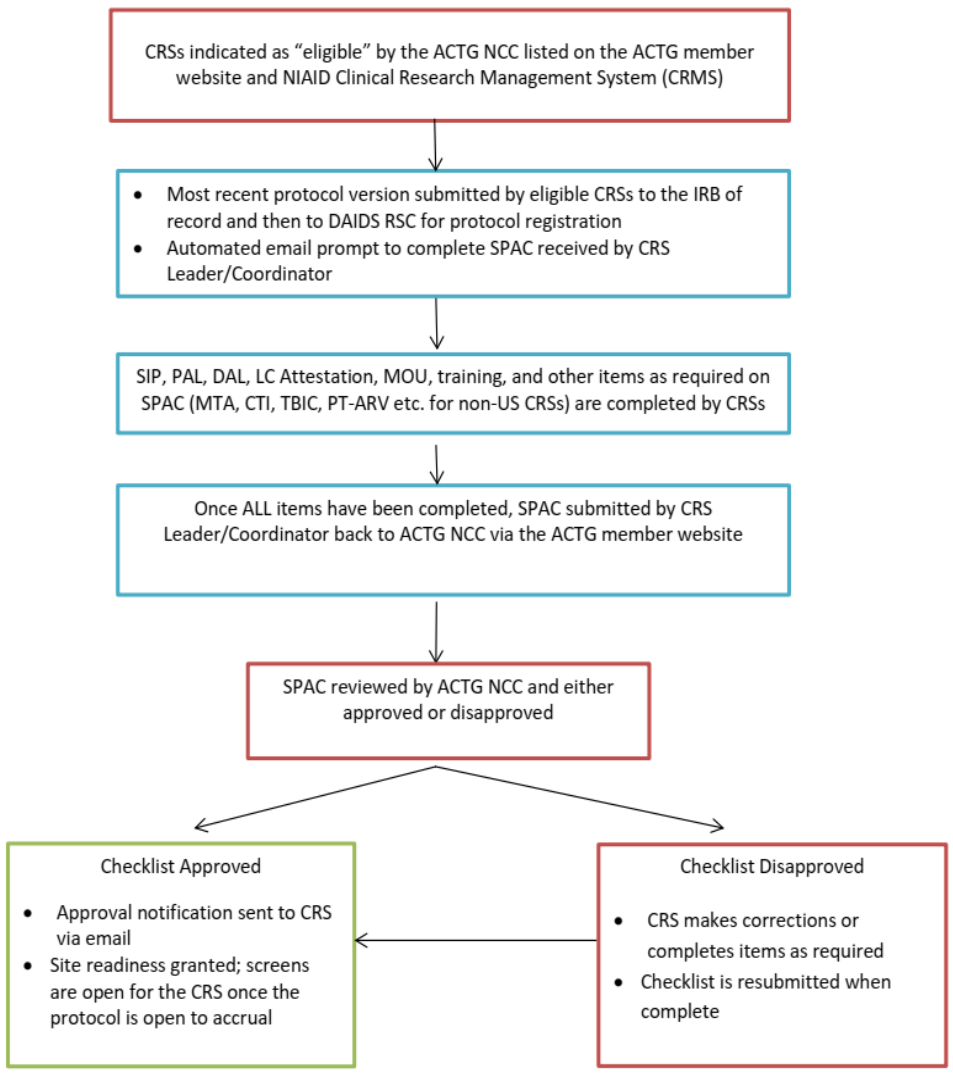
APPENDIX I: SAMPLE CRS PROTOCOL ACTIVATION CHECKLIST (SPAC)

A link to the SPAC is sent to the registered CRSs via an automated email once the CRS is protocol registered. The checklist is electronically completed by the CRS Leader or CRS Coordinator. The completed checklist is reviewed by the protocol CTS, International Site Specialist (for non-US CRSs), and the protocol team. If the protocol team has any questions, these will be sent to the CRS Leader or CRS Coordinator and must be addressed prior to approval. Once accepted, an automated email is sent to the CRS notifying them of acceptance.

Below are some examples of items that may be included in the checklist.

- ☐ The SIP is approved by the protocol team, if required.
- ☐ The site Laboratory is approved by ACTG Laboratory Center.
- ☐ The LOU and protocol-required agreements are complete, if required.
- ☐ Material Transfer Agreement (MTA) is completed, if required.
- ☐ CTI is approved by ACTG LOC/ DAIDS, if required.
- ☐ CTI certificate is obtained.
- ☐ The TBIC is submitted.
- ☐ All required protocol-specific training is complete and appropriate documentation maintained.
- ☐ At least one CRS representative attended the protocol start-up call or reviewed the slides posted to the PSWP.
- ☐ All necessary study supplies and study drugs are obtained prior to enrollment.

APPENDIX II: PROTOCOL ACTIVATION FLOW CHART



6.0 REFERENCES

6.1 ACTG SOP-159, Protocol Site Selection

6.2 ACTG SOP-160, ACTG Clinical Research Site Tuberculosis Infection Control Policy

6.3 ACTG SOP-161 ACTG MTA Review & Execution

6.4 DAIDS Protocol Registration Manual

6.5 DAIDS Protocol Registration System (DPRS)


Thank You
for your attention