

# NINDS Standard Operating Procedure

## NINDS SOP 30

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## **1. PURPOSE**

This policy describes the regulatory responsibilities of Protocol Navigators within the Office of Research Staffing Support (RRS), Clinical Trials Unit (CTU), Office of the Clinical Director (OCD) at the National Institute of Neurological Disorders and Stroke (NINDS). Members of a research team have unique roles and responsibilities. The team functions as a unit to implement each research protocol seamlessly. The goal of this SOP is to facilitate an efficient workflow between the research study team and the CTU Protocol Navigators.

## **2. POLICY**

The Deputy Director of Intramural Research, Institutes and Centers, Office of Human Subjects Research Protections (OHSRP), IRBs, and investigators work together to carry out the NIH Human Research Protection Program (HRPP). Clinical research at NINDS will be performed within the regulatory requirements, including but not limited to 45 CFR 46 (Protection of Human Subjects), 21 CFR 56 (IRB review), 21 CFR 50 (Protection of Human Subjects), the NIH HRPP Policies and Procedures, the NINDS SOPs, and consistent with the ICH GCP E6 Guidelines.

In fulfilling their mandate to protect the rights and safeguard the welfare of research subjects, a Principal Investigator (PI) must take into account all applicable regulatory requirements. The PI should have adequate resources and expertise on his/her team to properly conduct, document, and comply with these requirements. Protocol Navigators (PNs) serve a vital role on the research team, including protocol document writing, submissions, record keeping, and ensuring the regulatory requirements are met.

## **3. ROLES AND RESPONSIBILITIES**

The Protocol Navigator (PN) is delegated responsibility for all regulatory protocol work from study inception to completion. In certain circumstances, the PI may wish to delegate some of the tasks listed below to other study team members for training purposes (e.g. Fellows). In this case, the PN will assist in the guidance and training of those team members to ensure all regulatory requirements are followed.

General expectations from the CTU PN are as follows:

### **3.1 Communication**

- 3.1.1 Communicates regulatory status updates to the study team in writing, including upcoming deadlines, at a frequency appropriate for the study
- 3.1.2 Attends regular meetings with the study team to discuss regulatory and reporting issues

- 3.1.2.1 *Discusses newly consented subjects (verify the enrollment log is up to date, confirm status in CRIS/BTRIS, determine if there is a need to increase accrual ceiling)*
- 3.1.2.2 *Discusses status of actions submitted to the IRB/PIRC/DEC/FDA, etc.*
- 3.1.2.3 *Discusses status of pending actions (not submitted)*
- 3.1.2.4 *Discusses new AEs (Verify AE log)*
- 3.1.2.5 *Discusses staffing changes (update Delegation of Authority [DoA]log)*
- 3.1.3 Provides advice to the PI and study team regarding regulations and application of the regulations to the study
- 3.1.4 Communicates as needed with off-site investigators and multi-center sites to ensure timely communication flow, reporting, and compliance with regulatory requirements
- 3.1.5 Communicates with and reports to study sponsor, as applicable, to ensure regulatory compliance
- 3.1.6 Assists the PI in communication with the Tech Transfer Office to ensure that proper agreements are in place and renewed, as needed
- 3.1.7 Coordinates with the Radiation Safety Committee if applicable, to obtain approval of initial reviews, amendments (changes in radiation or patient population), and triennial review
- 3.1.8 Assists the PI in ensuring all trials conducted in whole or in part by NIH are registered in ClinicalTrials.gov, and that results of these trials are submitted to ClinicalTrials.gov no later than 1 year after the final primary outcome measure is collected
- 3.1.9 Assists the PI in posting 1 IRB-approved version of a consent form no later than 60 days after the last study visit on a public federal website in compliance with 45 CFR 46.116(h)

### **3.2 Writing (all action types)**

- 3.2.1 Writes non-scientific sections of the protocol and related documents, and works with the PI on editing, amending, and writing scientific sections as applicable and based on complexity and individual qualifications
- 3.2.2 Assists with drafting and review of patient data collections forms for consistency with the study protocol and regulatory requirements
- 3.2.3 Drafts required documents prior to the PIRC/IRB/Other regulatory submission deadlines for PI review and approval

3.2.3.1 *This includes Continuing Review and Problem Reports described below*

- 3.2.4 Ensures administrative completeness, document consistency, and compliance with requirements for regulatory submissions
- 3.2.5 Prepares and submits all actions to the IRB and regulatory bodies with PI approval
- 3.2.6 Completes an NIH reliance agreement application, if needed, for research in collaboration with non-NIH employees
- 3.2.7 Assists in preparation of documents (IND exemption, safety reports, annual reports) to the FDA for various submissions (including INDs, IDEs) in the unit/section/branch, as needed by the PI and the IND/IDE Sponsor
- 3.2.8 Assists the PI to prepare for data and safety monitoring meetings in a timely fashion, and drafts non-scientific/non-clinical portions of the data and safety monitoring reports
- 3.2.9 Assists the PI to prepare for QA monitoring visits and audits
  - 3.2.9.1 *Address regulatory deficiencies noted during monitor visit/audit*
  - 3.2.9.2 *Drafts and submits final reply letters for QA monitoring/auditing reports indicating completion of requested actions and noted deficiencies*

### **3.3 Enrollment Log**

- 3.3.1 Creates the enrollment log template (subject name/code, cohort assignment, date of initial consent, study status)
  - 3.3.1.1 *The protocol navigator is not responsible for completion of the enrollment log.*

### **3.4 Delegation of Authority (DoA) Log**

- 3.4.1 Creates DoA log
  - 3.4.1.1 *The protocol navigator is not responsible for completion of the DoA log.*

### **3.5 Source Documents**

- 3.5.1 Assists in review and/or development of source document templates as needed for study team use for consistency with the study protocol and regulatory requirements and update as necessary
  - 3.5.1.1 *The protocol navigator is not responsible for completion of study source documents.*

### **3.6 Case Report Forms**

- 3.6.1 Assists in review and/or development of case report form templates as needed, in conjunction with the data manager (or other staff per DoA log) for study team use for consistency with the study protocol and regulatory requirements including NINDS Common Data Elements, and updates as necessary
  - 3.6.1.1 *The protocol navigator is not responsible for completion of case report forms.*

### **3.7 Adverse event (AE) log**

3.7.1 Creates and updates adverse event log templates for study team use

*3.7.1.1 The protocol navigator is not responsible for completion of the AE log.*

### **3.8 Non-Compliance Reports (non-writing)**

3.8.1 Provides advice based on regulations to the study team regarding potential reportable events

3.8.2 The protocol navigator is responsible for submitting the monthly report to the OCD/CTU

*3.8.2.1 The protocol navigator is not responsible for completion of non-compliance report form.*

### **3.9 Continuing Review (non-writing)**

3.9.1 Reminds the PI/Study team to ensure enrollment log is up-to-date

3.9.2 Reminds the PI/Study team to ensure adverse event log is up-to-date

### **3.10 Quality Assurance/Monitoring**

3.10.1 Assist in the creation of a Manual of Operations (MOP) for each FDA-regulated trial

3.10.2 Monitoring/Audit Visits

*3.10.2.1 Reminds the PI/Study team to ensure enrollment log is up-to-date*

*3.10.2.2 Reminds the PI/Study team to ensure adverse event log is up-to-date & signed*

*3.10.2.3 Be available to answer regulatory questions*

*3.10.2.4 Attends meetings with the monitor/auditor*

### **3.11 Internal QA**

3.11.1 Reviews all protocol documents and agreements, including tech transfer agreements if applicable, in order to track study regulatory and reporting deadlines

### **3.12 Regulatory File**

3.12.1 Maintains the regulatory documents for each study in a consistent and easily understood manner

3.12.2 Ensures that all investigators listed on the protocol are on the DoA log

3.12.3 Ensures that training records, CVs, and licenses for all research staff listed on the delegation of authority log are complete, current, and filed in the regulatory file as applicable

## **4. APPENDICES**

### **4.1 Abbreviations**

AE: Adverse Event  
CD: Clinical Director  
CFR: Code of Federal Regulations  
CR: Continuing Review  
CRF: Case Report Form  
CRIS: Clinical Research Information System  
CTU: Clinical Trials Unit  
CV: Curriculum Vitae  
DoA: Delegation of Authority  
DSM: Data Safety Monitoring  
GCP: Good Clinical Practice  
HRPP: Human Research Protection Program  
ICH: International Council for Harmonisation  
IDE: Investigational Device Exemption  
IND: Investigational New Drug  
IRB: Institutional Review Board  
NIH: National Institutes of Health  
NINDS: National Institute of Neurologic Disorders and Stroke  
OCD: Office of Clinical Director  
OHSRP: Office of Human Subjects Research Protections  
PI: Principal Investigator  
PIRC: Protocol Implementation Review Committee  
PN: Protocol Navigator  
SOP: Standard Operating Procedure

## **4.2 Definitions**

Please refer to the NINDS Glossary for definitions

<https://katie.ninds.nih.gov/Clinical-Trials-Unit-CTU/Glossary>