Policy on Conduct of Human Research Activities during COVID-19 Operations March 16, 2020

In support of our mission to protect our patients and clinical and research community, we have been working with PHS leadership to develop our approach to the continued conduct of research in our clinical health environment. Effective immediately we are implementing the following requirements regarding research conducted in our PHS facilities and PHS research sites.

Points of Contact for Questions:

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A. Policy on Conduct of Human Subjects Research including Clinical Trials

- Ongoing activities may continue only if they are commensurate with the PHS COVID-19
 policy regarding staffing and remote work requirements. These activities cannot violate
 current PHS policy for research staffing.
- These requirements apply regardless of the IRB that oversees the ethical and regulatory
 conduct of these studies (including PHS, other institutional IRBs and commercial IRBs.)
 Researchers should follow the policies and procedures of the IRB that oversees the ethical
 and regulatory requirements of their research regarding how to report changes or obtain
 approval for changes that are needed to comply with the requirements below.
- 1. Therapeutic Research (potential for direct benefit to subjects through therapeutic intervention)
 - a. Recruitment of new subjects may continue ONLY for the following:
 - i. Any COVID-19 research
 - ii. Research that has the potential to be life-saving or is disease-altering AND there are no appropriate alternative clinical treatments for the patient. Do not enroll new subjects if there is risk they will have to come off of the therapeutic intervention due to lack of supplies or staffing:
 - iii. Studies must also be conducted in accordance with the following:
 - 1. The PI is available to maintain oversight appropriate for the study throughout the length of the study including from a remote location should that be required.
 - There are adequate and accessible supplies available to complete the study including the study treatment itself and all additional supplies to administer and monitor the study treatment.
 - 3. There will be a sufficient number of trained study staff to support conduct of the study considering staff workloads and any requirement to work remotely or to cover other hospital needs.
 - b. <u>Ongoing conduct</u> of active therapeutic studies may continue for subjects already enrolled in the study under the following conditions:
 - i. The PI is available to maintain appropriate oversight including from a remote location should that be required.
 - ii. There are adequate supplies available including the treatment itself and all additional supplies to administer and monitor the study treatment.
 - iii. Study-specific procedures to maintain safety of subjects can be continued (labs, exams etc.)
 - iv. There will be a sufficient number of trained study staff to support conduct of the study considering staff workloads and any requirement to work remotely or to cover other hospital needs.

Contact the Partners Human Research Affairs Quality Improvement Program if you need consultation or help in planning for the continuation of clinical therapeutic studies or planning for moving subjects to clinical care. Contact Pam Richtmyer at prichtmyer@partners.org.

- 2. **Non-Therapeutic Research** (no direct benefit to subjects through therapeutic intervention)
 - a. Recruitment of new subjects may continue ONLY under the following conditions:
 - 1. Recruitment occurs completely remotely (e.g. by phone, videoconference)
 - 2. No in-person interaction with potential subjects is required.
 - 3. The research staff is working remotely
 - 4. All study activities are currently approved to be conducted remotely or may easily be transitioned to remote activities (e.g. an internet-based survey study.)
 - 5. If recruitment and study activities can occur with both staff and potential subjects operating remotely, the following must also be in place for recruitment to continue:
 - a. The PI is available to maintain appropriate oversight from a remote location.
 - b. There will be a sufficient number of trained study staff to support conduct of the study <u>remotely</u> and considering staff workloads and any requirement to work remotely or to cover other hospital needs.
 - b. Ongoing conduct of non-therapeutic studies may continue for subjects already enrolled in the study under the following conditions:
 - b. No in-person interaction with subjects is currently required or visits can be changed to occur remotely.
 - c. Study staff can work remotely to conduct all study activities.
 - d. The PI is available to maintain appropriate oversight throughout the length of the study from a remote location.
 - e. There is a sufficient number of trained study staff to support conduct of the study remotely and considering staff workloads that may include covering other hospital needs.

3. Suspension of Review of New Studies:

The IRB will not accept new study submissions (therapeutic or non-therapeutic) effectively immediately with the <u>following exceptions</u>:

- 1. Any research on COVID-19 or related to COVID-19. These studies will be prioritized for review.
- 2. Emergency Use requests
- 3. Studies that have federal funding and receive Just-In-Time (JIT) notice. Researchers must include a copy of their JIT notice as an attachment to their Insight application.
- 4. Any study with non-federal funding that already has an agreement in process in the Insight system as of 03.13.2020 and meets the requirements above for ability to recruit and conduct the study. Researchers that are approached after this date about participating in non-federally funded <u>multi-site</u> research that will be using an outside IRB should contact the IRB helpdesk at <u>IRB@partners.org</u>.

Note: Any studies that were in the process of review with the IRB at the time of this notice will continue through the review process only as time allows considering other priorities. Studies

that are approved are still required to follow the requirements above with regard to recruitment limitations and conduct of research.

B. Working with the IRB

- 1) Changes to the protocol which DO NOT require prior IRB review and approval
- 2) Changes to the protocol which DO require prior IRB review and approval
- 3) Contingency planning
- 4) Home visits
- 5) Requesting priority review for novel coronavirus research

1. Changes to the protocol which DO NOT require prior IRB review and approval

- Implementing mandatory COVID-19 screening of research participants prior to planned study visits. All study teams should immediately implement the COVID-19 procedures to screen research participants before any interaction and incorporate mandatory telephone screening prior to planned study visits.
 - If a subject already enrolled in a study becomes symptomatic, study visits should be deferred if possible and the subject referred to appropriate clinical screening and care for COVID-19.
 - If a subject in recruitment/screening becomes symptomatic, they should be referred to appropriate clinical screening and care for COVID-19.

The hospitals have provided specific procedures to conduct this mandatory screening. If you are at a facility that has not provided this information, please follow the procedures at these links:

- MGH Research Patient Telephone Screening:
 https://apollo.massgeneral.org/coronavirus/research-resources/
- BWH Advance Telephone Screening for Research Subjects:
 http://www.bwhpikenotes.org/Patient Family Care/Infection Control/cv phonescreen.pdf
- o McLean Coronavirus Screen: https://partnershealthcare.sharepoint.com/sites/phrmDepartments/hd/mhra/Documents/News-Entry-Screen-Patient-Assess-B.pdf
- Changes to protocols to prevent an immediate hazard to research participants. The PI is responsible for making the assessment that there is a need for immediate action to protect the safety and wellbeing of the participant. If there is a need, the PI may make the change without first obtaining IRB approval. Note this option is only available for changes that would impact participants already enrolled in the study. It is not appropriate to make such a change in order to enroll a new participant (for example exceptions to inclusion/exclusion criteria.) We know we

can rely on your flexibility and judgment in a making these decisions in this challenging environment.

Follow the steps below if a change is made to prevent immediate hazard without IRB approval:

- Submit an "Other Event Form" to the IRB via Insight within 5 working days of the change.
- The change and rationale for making it should be clearly documented in your research records (e.g. in a note to file.)
- This change may apply to one subject or a group/all subjects in the research study.
- Minor protocol deviations which do not have the potential to negatively impact participant
 safety or integrity of study data (ability to draw conclusions from the study data), or affect
 subject's willingness to participate in the study. Minor protocols deviations could include
 conducting a study visit virtually (by remote means) or outside of window, omitting a specific
 research procedure or collecting questionnaire/assessment data over the phone instead of in
 person. Minor protocol deviations are reported to Partners IRB at time of Continuing Review
 through submission of the Minor Deviation Log.

2. Changes to the protocol which DO require prior IRB review and approval

Changes to the protocol and requests for protocol exceptions that may impact participant safety or the integrity of the study data require prior IRB review and approval. This may include dispensing study drug without performing a key safety lab or procedure, or failure to capture endpoint assessment data. PI and study teams submitting Amendments or Protocol Exceptions (via Other Event Form) related to COVID-19 may email the IRB helpdesk to request a priority review:

IRB@partners.org. We also ask that Amendments and Other Events clearly reference COVID-19 in the Amendment or Protocol Exception description.

3. Contingency Planning

PI and study teams should begin planning now for potential disruptions of supplies, study visit schedules, temporary reduction in research staff etc. Closely monitor clinical advice from the hospitals and Partners to assess how disruptions in research could impact safety and welfare of research participants.

- Investigational Drugs: If research participants are on investigational drugs, work with the research pharmacy and your sponsor (as applicable) to determine what the plan would be if the investigational drug could not be dispensed to the research participants. If the investigational drugs cannot be dispensed to the research participants, the PI should make plans to transition research participants to the most appropriate clinically available treatments. This transition should include consultations with the investigational drug service, research sponsor(s) and the clinical team caring for the research participants.
- Research Procedures: PIs need to assess whether any reduction in staff makes it unsafe to complete the planned research procedures (e.g. specimen collection may not be safe if the study does not have appropriately trained staff to conduct the specimen collection.)

- **Review of research data:** If research team members are not available, completion of research-required procedures such as reviewing lab results in a timely manner might not be possible and will require special attention under the direction of the study PI.
- Conference Call/Video Conference: If medically appropriate, PI and study teams should consider alternative study visit options to allow participants who cannot or do not want to come to the hospital to complete study visits.

If you have specific questions on research contingency planning, please contact the Partners IRB helpdesk: IRB@partners.org.

4. Home Visits

Any study that is currently approved to conduct home visits should suspend these visits. If you believe home visits are required to maintain the safety of subjects on therapeutic trials as provided in Part A of this policy, please contact the IRB for consultation prior to visiting the home. (jripton@partners.org)

5. Requesting priority review for COVID-19 research

Some Partners researchers have already started conducting COVID-19 research. We expect that many more studies are being planned. Such research needs to consider exposures to staff and clinical needs, and we recommend that you consult Infection Control before crafting your protocol. Due to expected shortages in PPE, and to avoid exposure of staff, clinical care visits to infected patients may be limited or "bundled." In order for us to prioritize the review and consult on the regulatory and ethical issues we ask that the PI provide the following information by email (IRB@partners.org):

- PI Name
- Protocol No.
- Protocol Title
- Funding (if any)
- 1-2 sentence summary on the proposed work
- Identify any local agencies working on the study

C. Working with Sponsors

The PI and research team are responsible for working with their sponsors to address changes needed to accommodate any disruptions in the approved research protocol. *The requirements set out in this document as well as any other PHS requirements take precedent over sponsor approaches unless the sponsor is requiring more restrictive changes.*

- 1. **Contact study sponsors** (e.g., federal, industry, private) and/or the coordinating center for study-specific information related to procedures to address the following as indicated:
 - Anticipated delays in recruitment for new participants
 - How delayed or missed participant contacts/visits for participants may impact on-going study participation (e.g., whether a missed safety assessment might impact the ability of the participant to receive the next round of therapy)
 - If the sponsor anticipates any drug shortages or delays in shipping and the subsequent impact on study conduct
 - Any changes to biospecimen/sample storage and shipping requirements
 - Changes in any reporting requirements to the sponsor
- Changes in monitoring (implementation of remote monitoring procedures.) All sponsor
 monitoring or audit visits must be conducted remotely or in accordance with current PHS
 guidance.

The process for giving monitors access to Epic is already in place. Monitors can get access to Epic via the Physician Gateway and study coordinators may facilitate this. Study coordinators who have not already done so should submit a request on behalf of the monitor to set up the account on Physician Gateway. The Epic Research may create an account and provide login information and a temporary password to the monitor, and the monitor must sign the confidentiality agreement when they log in to the system for the first time. Once the monitor has an account, any study coordinator on that study can give the monitor access to records for their study subjects. The coordinators determine which subjects and the time span for the access which may be 24 hours or longer. Directions for giving monitors access are available on the Partners eCARE site.

- 3. **Develop study-specific plans** for each active study considering the following:
 - Sponsor provided information (from prior section)
 - Need for continuity of the research intervention during the study period
 - Feasibility of changing from protocol-mandated visits to home visits or telemedicine (or telephone visits)
 - Need for active assessment for Adverse Events (AEs)
 - Facility availability
 - Study team and clinical staff availability
 - Identify emergency contacts within the study team

- Develop a communication plan with the study team and participants (i.e., assure participants are kept informed if clinic visits or administration of study intervention is canceled or delayed)
- Orderly withdrawal of subjects if indicated or necessary
- 4. **Contact PHS** <u>CTO</u> (https://cto.partners.org/contact/) for contract or budget considerations on industry sponsored projects

D. FAQs

1. Is my COVID-19-related project considered research?

It depends. In some cases, IRB approval may not be required for COVID-19-related activities. For example, the activities may consist solely of public health surveillance activities, clinical care, or diagnostic testing for which an FDA emergency authorization has been obtained. Contact Jesse Ripton (iripton@partners.org) for consult on this issue.

2. Do I need IRB approval to communicate a pause in recruitment and study activities to research participants?

No. These messages to participants do not require IRB approval. In addition, messages about changes to study visits, like administering questionnaires over the phone or video conferencing, do not require IRB approval.

3. Based on PHS requirements my study will pause to recruitment, is submission to Partners IRB required?

No.

4. The PI has decided to suspend the ongoing study due to COVID-19, do I need to notify the IRB?

It depends. If this is a non-therapeutic or Minimal Risk study (expedited study) where the temporary suspension would not impact the safety or welfare of research participants, this would be considered a minor deviation and would not require prior approval by the IRB.

If the study is a therapeutic study and More than Minimal Risk (Full Board study), submission of an Amendment is required to the IRB and should contain information on

contingency planning related to interruption or changes in investigational product and/or safety monitoring.

5. My research study is reviewed by an external IRB, do the restrictions apply to my study?

Yes. The PHS policy and requirements regarding research restrictions applies to all research conducted in our PHS facilities/sites, regardless of the IRB that oversees the ethical and regulatory conduct of these studies.

6. I am pausing recruitment and/or study procedures on a project reviewed by an external IRB of Record, should I notify that IRB?

It depends. You should follow the requirements of the IRB that oversees your research regarding reporting changes and whether any review/approval will be needed prior to resumption of study procedures.

7. Do I have to submit an amendment to change an in-person visit to one conducted virtually or by remote means?

It depends. If the approved procedures to be conducted at that visit can be done remotely without compromising the safety of the research participant or the scientific validity of the study, this would be considered minor deviation and would not require prior approval by the IRB. However, if there are procedures that cannot be conducted because an in-person visit cannot occur AND those procedures impact the safety of the participant or the scientific validity of the study, this should be submitted to IRB for approval as described above.

8. Should consent forms be revised to include the risk of contracting coronavirus at the hospital or during a study visit?

No. Research teams should carefully consider the risks of participants attending study visits in light of the factors discussed in this document.

9. Do I need to report risk of contracting coronavirus at time of continuing review in response to the question "Since the last continuing (or initial) review, have the risks to subjects changed?"

No. The PI should not include the risk of contracting coronavirus in the continuing review progress report form.

10. Do I need to report to the IRB if a subject or member of the research tests positive for COVID-19?

No. The PI and research teams should follow applicable hospital policy for reporting all new COVID-19 infections. The IRB does not require Other Event reporting for COVID-19 infections or deaths unless determined to be unexpected and related to the protocol.

11. Do I need to report to the IRB if a participant is hospitalized or dies due to COVID-19?

No. Unless the hospitalization or death is determined to be unexpected and <u>related to the</u> research protocol.

12. I am the Lead PI on a study where Partners IRB serves as the central IRB for external research sites. Do these requirements apply to the external sites?

It depends. The requirements apply to research conducted at PHS facilities and are based on the situation in Boston. External research sites may have different requirements based on the local situation. As the IRB of Record for research conducted at the external research site, we require the Lead PI assess whether the study can continue for recruitment and participants already enrolled in the study under the following conditions:

- The PI is available to maintain appropriate oversight.
- There are adequate supplies available including the treatment itself and all additional supplies to administer and monitor the study treatment.
- Procedures to maintain safety of subjects can be continued (labs, exams etc.)
- There are a sufficient number of trained study staff to support conduct of the study considering staff workloads and any requirement to work remotely or to cover other responsibilities at their health care facility or institution.

13. How can I flag my Amendment or Protocol Exception related to COVID-19 for priority review?

Email the IRB helpdesk (<u>IRB@partners.org</u>) AND include COVID-19 in the description field in the Amendment form and in the description of the protocol exception field in the Other Event form.

14. I am conducting FDA-regulated research for which I am the sponsor of an IND or IDE. Do I need to notify the FDA if I pause my study?

Yes. The FDA will need to be notified as soon as feasible. Please contact the Partners Human Research Affairs Quality Improvement Program for questions (Pamela Richtmyer, prichtmyer@partners.org)

15. I submitted an initial review to the IRB before the effective date of the temporary suspension of new research studies, will the IRB still review my study?

Yes. The IRB will continue to review and approve submissions submitted before the effective date. For studies that are approvable but subject to additional PHS restriction on

recruitment and study activities, the IRB will approve the study but explicitly note all

research conducted at PHS facilities must comply with current restrictions on human subject

activities.

16. Will the IRB continue to accept and review Amendments, Other Events and Continuing

Review?

Yes. The IRB will continue to review and approve these submissions. The IRB will approve

submissions but explicitly note that all research conducted at PHS facilities must comply

with current restrictions on human subject activities.

17. My new study is assigned to an upcoming IRB meeting, will it still be reviewed?

It depends. The IRB is prioritizing research related to COVID-19 and last minutes changes

made to accommodate essential research.

18. Has the process for single patient emergency use been changed?

No. The procedure for Single Patient Emergency Use of an experimental drug or device

remains the same during the COVID-19 situation.

19. Is the IRB help desk still functioning?

Yes. The Partners IRB is fully functioning, and the research community is encouraged to

contact the help desk with any questions:

Tel: 857-282-1900

Email: IRB@partners.org