Introduction to Clinical Research Resources

Monday, September 22nd, 2014 ~ 12:00-2:00 pm ~ Pierce Hall

PROGRAM:

WELCOME AND INTRODUCTIONS - 12:00 - JIM HUDSON, MD, ScD AND ROGER WEISS, MD
CHAIRS, MCLEAN CLINICAL RESEARCH COMMITTEE

PRESENTATIONS AND Q&A: Short presentations followed by time for questions from audience.

12:10 - McLean IRB and Human Research Protection Program
12:25 - PHS Human Research Quality Improvement Program
12:40 - McLean Research Pharmacy
12:55 - PHS Clinical Research Office
1:10 - McLean / PHS Research Compliance
1:25 - HMS Catalyst

RESOURCE FAIR - 1:40 - 2:00 - Each group that presents, plus the groups listed below, will have informational materials and will be available for follow-up discussion and Q&A:

• McLean Mental Health Library
• McLean / PHS Research IS
• McLean Research Administration
• McLean Office of Chief Academic Officer

All welcome to attend! PIs, postdocs, grad students, CRCs, RAs, and RN/SW members of interdisciplinary research teams.

Lunch provided. Please RSVP to OfficeOfCAO@mclean.harvard.edu
IRB

Elizabeth L. Hohmann MD
Chair and Physician Director,
Partners IRBs
Associate Professor of Medicine/ID
Massachusetts General Hospital

9/22/2014
Today’s Topics

IRB structure
IRB staff
Insight
Ancillary reviews
Commercial/Independent IRBs
How to help us help you
IRB Processes

- Expedited Review
  - Meets criteria for minimal risk.
  - Not your definition – the government’s
  - Done by a chairperson on behalf of the committee panel – committee told.

- Full Committee Review
  - More than minimal risk
  - Panel of your peers considers complete proposal – don’t embarrass yourself
  - Call something “a priority” if necessary, i.e. JIT.
  - Your failure to attend to something in a timely way is not our emergency.
IRB Actions

- Approval
- Requires modification - minor changes.
- Deferral - Need significantly more info and has to go back to the reviewing scientific chairperson.
- Disapproval – (a chair alone can’t do this!)
- (These IRB actions apply to all reviews, expedited and committee)
- Your “approval clock” starts ticking at the time you get a “requires modification” action
We ARE the IRB for:
Faulkner, North Shore Shriner’s Burns McLean Hospital Partners in Health Planned Parenthood of MA

Ceded review for Cancer Tx or Only cancer pts May not always be clear which-ASK.

Some of our MGH/BWH panels only do continuing reviews.
IRB chairs

- Libby Hohmann MD (ID) – Physician Director
- Steve McAfee MD (Heme/onc)
- David Smith MD (Heme/onc)
- Avram Traum MD (Pedi Nephrology)
- Melissa Frumin MD (Psychiatry)
- Melissa Abraham Ph D (Psychology, Internet, Deception)
- Lawrence Tsen MD (Anesthesia)
- Megan Morash RN
- Julian Seifter MD (Nephrology)
- Steve Vacirca MD (Radiology)
- Benjamin Silverman, MD (Psychiatry)

- Emeritus chair: Jonathan Alpert MD PhD (Psychiatry)
- Administrative Director: Rosalyn Gray- all knowing
- Associate Admin Director: Maria Sundquist – cede reviews, IAA
- Continuing Reviews: Josephine O’Driscoll-Davis
Ancillary committee bosses

- Radiation Safety/Laser – John Correia PhD
- Research Pharmacy – John Vetrano RPh/Pharm D and Cheryl Reilly-Tremblay RPh
- Nursing Review – TBD…
- Biomedical Engineering – Pat Anglin Regal
- Biosafety – Jay Vyas MD PhD…. TBD….
- Partners Clinical Research Office – See their Website, Director is Maureen Lawton JD, Divisional associates by dept.

9/22/2014
Inter-institutional Agreements

- Newton-Wellesley
- North Shore
- Spaulding
- HSPH
- HMS
- MEEI
- BIDMC
- Children’s Hosp.
- Joslin Diabetes
- Harvard University
- MIT

Cede review processes via CATALYST on-line submission is possible.
McLean panel

- Folded into MGH Panel
- Some members agreed to stay on
- Meets Wed 5 pm now!
- New members are welcome – email
- Chairs:
  - Benjy Silverman MD
  - A. Robert Schleipmann
  - Mary Ellis, Administrative Chair, CIP

9/22/2014
Commercial IRBs

- For Phase III and IV industry sponsored studies.
- Investigator must request this.
- Process to assess study
- “Insight shell” – NOT duplication!
- Quorum and Chesapeake IRBs
- Your staff will interact directly with the outside IRB web portal!
- A Partners ICF template IS used
Tips/Comments -1

- No exhaustive “pre-review”
- Basic completeness check
- Answer questions completely
- Ask to speak with administrative or scientific chair if you need to.
- We’re a scientific and ethical review.
- Provide a point-by-point self-contained response to review.
Tips/Comments -2

- Enlist the QI team if desired
- Special scrutiny of PI held INDs
- Attend CRP and CCI sessions
- Consider GCP training at PHS next year – a great value
- Meet your protocol administrator
- Join the IRB!

9/22/2014
Partners Human Research
Quality Improvement Program

Introduction to Clinical Research Resources
Sept 22, 2014

Sarah White
Director, QI Program
swhite12@partners.org
The QI Program provides support and education to the research community to ensure investigator compliance with federal, institutional, and Good Clinical Practice requirements.

Our staff provide the following to the research community:

- Not-for-cause onsite reviews
- For-cause onsite reviews
- Assistance in study start-up
- Educational In-Services
- Assistance with FDA applications
- Assistance with ClinicalTrials.gov Registration
QI Program

Chief Academic Officer
Anne Klibanski, MD

Partners Human Research Affairs
Pearl O’Rourke, MD

Quality Improvement Program (QI Program)

Human Research Committee (HRC)

Embryonic Stem Cell Research Oversight (ESCRO)
QI Staff

- Michele Gomez – SR. QA/QI analyst
  - Data analysis, education, onsite reviews

- Stephen Hayes - Sr. QA/QI Specialist
  - For-cause/not for cause onsite reviews, education

- Charlene Malarick RN, CCRC – Sr. QA/QI Specialist
  - For-cause/not for cause onsite reviews, education

- Emily Ouellette JD – QA/QI Specialist
  - IND/IDE holder assistance, Clinical trials registration/results

- Sarah White MPH – Director
Why might you need the QI Program?

- There are rules – *do you know how to apply them to the study?*
  - What is adequate PI oversight?
  - How do you consent a non-English speaking subject?
  - What is the best way to monitor your PI initiated study?
- Are you appropriately documenting research?
  - How do you document drug accountability?
  - What is *source documentation*?
  - Regulatory *what???
- The PI of the study holds an IND or IDE – *what does that mean?*
Why should you care?

*There are consequences to noncompliance*

- **IRB**
  - Requirements to report noncompliance to the IRB
  - Reports to OHRP, FDA
  - Suspension or restriction of research privileges
  - Internal effort to investigate, respond and report: IRB, QI Program, Institutional Official, Office of General Council

- **FDA enforcement**
  - Inspection
  - Warning letter, Disqualification, Monetary fines, Civil/Criminal liability
What is a QI Program onsite review?

• A not-for-cause or for-cause audit of your study documents
• Interview with PI and other key study staff (generally coordinator)
• Information reviewed during QI Program Onsite Review (not all may apply)
  – Regulatory files/records, including IRB correspondence
  – Sponsor correspondence
  – Documentation of data and safety monitoring
  – Informed consent process and documentation
  – Subject Files
  – Adverse event assessment and reporting
  – Test article accountability and proper storage
  – FDA documentation/correspondence, if applicable
Yikes! What is an ‘IRB requested’ review?

- IRB Requested / Directed Reviews
  - Education Review
  - Independent Verification Process
  - IRB – suspected noncompliance based on observations by reviewer
  - Self – report of possible serious/continuing noncompliance
  - Report of noncompliance from 3rd party

⇒ Report is sent to IRB committee
Dr. Rauch just informed me that my study has been chosen for a mandatory onsite review – am I in trouble???

• QI Program Mandatory Audit Program
  – Goal: Provide education and feedback to ensure the study is being conducted in accordance with federal regulations, institutional policies, and good clinical practice.
  – Studies are randomly selected
  – Designed to be mandatory, enabling the QI Program to assist investigators it has not previously work with that may have varied and additional requirements to adhere to throughout the duration of their research.

→ Report is NOT sent to IRB committee
Rules upon which our assessment is based

- Federal Regulations
  - 45 CFR 46, Protection of Human Subjects
    - Applies to all research involving human subjects that is regulated by a federal agency
  - FDA, 21 CFR 50, 54, 56, 312, 812
    - Triggered when doing human research using a drug, biologic, and device
- Institutional policies and guidance
- Good Clinical Practice
  - [http://www.ich.org/LOB/media/MEDIA482.pdf](http://www.ich.org/LOB/media/MEDIA482.pdf)
- Determinations of the IRB
What types of observations do we make?

Frequent observations FY2013

<table>
<thead>
<tr>
<th>Observation</th>
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<tbody>
<tr>
<td>Changes were made to study procedures without IRB approval.</td>
</tr>
<tr>
<td>Invalid consent forms were used to consent subjects</td>
</tr>
<tr>
<td>Study procedures performed by non PHRC-approved study staff</td>
</tr>
<tr>
<td>English consent form used to consent non-English speaking subjects</td>
</tr>
<tr>
<td>Source documentation to verify eligibility is not on file.</td>
</tr>
<tr>
<td>Inadequate delegation of responsibility</td>
</tr>
<tr>
<td>Data reported to the IRB is not accurate</td>
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</tbody>
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What kinds of tools does QI have?

I. Study Checklists

- Study Start-up checklist for Minimal Risk Research
- Subject Eligibility checklist
- Visit Timeline checklist
- Data & Safety Monitoring Plan checklist
- Informed Consent Compliance checklist
- Self Assessment checklist
- FDA Sponsor & Investigator Responsibility checklist

II. Study Logs

- Adverse Event Tracking
- Coordination Center Regulatory Documentation Tracking
- Device Accountability
- Drug Accountability
- Monitoring
- Pre-Screening Log
- Protocol Amendment/Version Tracking Log
- Minor Deviations/Violations Tracking Log (NEW) to facilitate reporting at Continuing Review
- Staff Signature / Delegation of Responsibility
- Subject Contact Log
- Subject Enrollment
- Temperature Log
- Tissue Log
http://www.partners.org/phsqi/

Partners Human Research Quality Improvement (QI) Program
116 Huntington Avenue, Suite 1002
Boston, MA 02116
Fax | 617-424-4111
Email: emailto:humanresearchqi@partners.org

WHAT IS PARTNERS QI PROGRAM?
The Partners QI Program is committed to providing on-going support and education to the research community. Our knowledgeable staff work closely with you to ensure optimal conduct of human research within the framework of federal regulations, institutional policies, and good clinical practice.

How can the QI Program help you?
- Not-for-cause/routine onsite reviews
- For-cause onsite reviews
- Assistance in study start-up
- Educational & In-Services
- Assistance with FDA applications
- Assistance with ClinicalTrials.gov Registration
See a [complete list](#) and description of our services.

How do I request QI Program Services?
QI Services are now initiated by our [QI Service Request Form](#).
Clinical Trials Registration
What are the requirements for Clinical Trials Registration?

- **Federal Requirements**
  - FDA Amendment Act of 2007 (FDAAA)
    - Requires registration of ‘Applicable Trials’: Phase 2 – 4 interventional studies involving drugs, biologics, or devices regulated by the FDA
    - Requires results and adverse event reporting for approved/cleared drugs, biologics, or devices
  - CMS (Jan 2014)
    - Requires an NCT # for all ‘Qualifying Clinical Trials’ as determined by Medicare Coverage Analysis (MCA)

- **The International Committee of Medical Journal Editors (ICMJE)**
  - Requires registration of any human research project that prospectively assigns human subjects to intervention or comparison groups to study a health outcome
Clinical Trials Registration @ Partners

• Partners has a policy and process to assist you in meeting clinical trials registration requirements
  – FDAAA & CMS required
  – ICMJE strongly recommended
• Partners website on ClinicalTrials.gov:  
  http://healthcare.partners.org/phsirb/investigatorctregistration.htm
• Local Contacts:
  Sarah White: swhite12@partners.org
  Emily Ouellette: eouellette@partners.org
Why should you care?

- Consequences
  - FDAAA: public notices of noncompliance, withholding of NIH funds, $10K/day fines
  - CMS: CMS will not accept billing claims for items/services provided
  - ICMJE: Cannot publish in ICMJE and other selected journals
McLEAN HOSPITAL RESEARCH PHARMACY CORE
Established in 2013

- Provide high quality pharmaceutical services
- Promote safe and ethical use of investigational medications
- Support clinical research growth
- Assure institutional compliance with state, federal, hospital and AAHRPP requirements for investigational drug use
Research Pharmacy Activities

Human Protection

- Research pharmacy staff members are CITI trained
- Protocol review for IRB pharmacy ancillary committee
  - Review and approve new protocols & amendments
  - Balance risk vs. benefit for protection of human subjects
  - Examine protocol to ensure criteria is met for IRB approval
  - Expertise in investigational medication review
Research Pharmacy Activities

Collaboration

- Assist Investigators, Coordinators & Sponsors
- Provide expert consultation on drug related aspects of:
  - Study design
  - Protocol development
  - Randomization
  - IND application development
  - Formulation design
  - Technical aspects of clinical trials
Pharmacist Coordination of Services

Primary contact for study teams

- Pre-initiation (walk-through)
- Initiation
- Dispensing & documentation
- Monitor visits
- Close-out visits
Pharmacist Coordination Of Services

Pharmacy Aspects of Protocol Management
- Study binder created to manage protocol & records
- Design of study specific procedures & documents
  - Randomization
  - Blinding/Rx unblinding
  - Formulation design
  - Titration
  - Procurement
  - Drug handling/control
  - Compounding
  - Dispensing procedures
  - Rx packaging & labeling
  - Rx order forms
  - Investigational drug data sheet
  - Dispense/return/destroy logs
Pharmacist Coordination of Services

Pharmacy Aspects of Protocol Management

- In-service pharmacy staff members:
  - Protocol
  - Procedures
  - Investigational product information

- Compliance
  - State & federal regulations
  - IRB, hospital policy, TJC (formerly JCAHO)
Investigational Product Accountability

Supply chain transparency: manufacture → administration

- Procurement
  - Ship direct to pharmacy
  - Receipt documented & confirmed (sponsor)
  - Chain of custody, C of A

- All steps tracked & documented
  - Preparation
  - Manipulation
  - Dispensing
  - Returns
Investigational Product Accountability

- Perpetual inventory
  - Weekly/monthly
  - Expiration dates monitored
  - Destruction/return of study medications

- Monitor Visits
  - Accountability of study medication, protocol adherence
Investigational Product Storage

Secure- Limited Access (key card entry)

- Controlled substance safe
- 1 Refrigerator, 2 freezers- locked
- Room temperature storage
- Temperature/humidity monitoring
McLean Research Pharmacy CORE

Collaborating with Research Groups
Important 1st Steps

Contact the research pharmacy in **EARLY** planning stages

- Email protocol or draft as soon as possible
- Request a meeting
- *Find out how we can help you!*
Collaboration Process Overview

Initial Study Planning
Collaboration Process Overview

Initial Study Planning

Contact Research Pharmacy
Meet & Discuss
• Formulation
• Dosing/Regimen
• Logistics/Feasibility
• Budget Estimate
Collaboration Process Overview

Initial Study Planning

Contact Research Pharmacy
Meet & Discuss
- Formulation
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- Budget Estimate

Budget for Research Pharmacy Expenses
Collaboration Process Overview

Initial Study Planning

Contact Research Pharmacy
Meet & Discuss
• Formulation
• Dosing/Regimen
• Logistics/Feasibility
• Budget Estimate

Budget for Research Pharmacy Expenses

Request Assistance
Drug Aspects of:
• Protocol
• Study Design
• IND Application Development
Collaboration Process Overview

Initial Study Planning → Contact Research Pharmacy
- Meet & Discuss
  - Formulation
  - Dosing/Regimen
  - Logistics/Feasibility
  - Budget Estimate

Budget for Research Pharmacy Expenses

IRB Application & Approval

Request Assistance - Drug Aspects of:
- Protocol
- Study Design
- IND Application Development
Collaboration Process Overview

**Initial Study Planning**
- Meet & Discuss
  - Formulation
  - Dosing/Regimen
  - Logistics/Feasibility
  - Budget Estimate

**Contact Research Pharmacy**

**Budget for Research Pharmacy Expenses**

**IRB Application & Approval**

**Study Set-Up in Research Pharmacy**

**Request Assistance-Drug Aspects of:**
- Protocol
- Study Design
- IND Application Development
Collaboration Process Overview

Initial Study Planning

Contact Research Pharmacy
- Meet & Discuss
  - Formulation
  - Dosing/Regimen
  - Logistics/Feasibility
  - Budget Estimate

Budget for Research Pharmacy Expenses

Study Set-Up in Research Pharmacy

IRB Application & Approval

Initiation
- Site Initiation Visit
- Compound/Prepare IP
- Dispense
- Site Monitor Visits
- Product Accountability

Request Assistance-Drug Aspects of:
- Protocol
- Study Design
- IND Application Development
Collaboration Process Overview

Initial Study Planning

Contact Research Pharmacy
Meet & Discuss
- Formulation
- Dosing/Regimen
- Logistics/Feasibility
- Budget Estimate

Budget for Research Pharmacy Expenses

Request Assistance-Drug Aspects of:
- Protocol
- Study Design
- IND Application Development

Study Set-Up in Research Pharmacy

IRB Application & Approval

Initiation
- Site Initiation Visit
- Compound/Prepare IP
- Dispense
- Site Monitor Visits
- Product Accountability

Study Closure
- IP Return/Destruction
- Close Out/Visit
- Documentation/Accountability
- Archive
Collaboration Process Overview

Study Initiation involves many departments and tasks

- We aim to provide the best service possible while maintaining subject safety
- **Contact us early - we are here to help!!!**
Estimates & Budgets

Budget for research pharmacy services & fees from the beginning

- Request a cost estimate as soon as possible
- Cost estimates are issued after review of study documents/details
- Estimates must be signed & returned to the research pharmacy prior to study initiation
McLean Research Pharmacy CORE

Things to Remember....

- Contact the research pharmacy early for new protocols
- Budget for research pharmacy services/fees
- Provide plenty of notice- dispensings, monitor visits
- Notify the research pharmacy about changes in enrollment rates & protocol status
McLean Research Pharmacy CORE

Questions?
Contact Information

McLean Hospital Research Pharmacy CORE

Laura Godfrey, RPh
Research Pharmacist
- p (617) 855-2777
- F (617) 855-3720
- ljugodfrey@partners.org
Clinical Research Resources at McLean

Partners Clinical Research Office
Maureen Lawton

September 22, 2014
Overview

1. PCRO
   • Core Services

2. PCRO Contracting Services:
   • Agreements
   • Terms for Corporate Sponsored Clinical Trial Agreements

3. PCRO Financial Services
   • Budgeting
   • Medicare Coverage Analysis
   • Medicare IDE Device Petitions
PCRO Core Services

**Contracting Services** span across Partners (BWH/F, MGH, SRH, MCL, NWH, PCHI, NSMC, MGPO VUCL).

- Pre-award negotiation & execution of agreements for industry-sponsored clinical research.
- Support of Academic Research Organizations within Partners (TIMI, CTNI, NCTU).

**Financial Services** span across Partners (BWH/F, MGH, SRH, NSMC and DFPCC with Partners activity)

- Pre-award for industry research budgets - drafting, negotiation, approval of budgets including financial terms through PeopleSoft fund activation
- Medicare Coverage Analysis (industry, federal, foundation, unfunded)
- Medicare device petitions
Types of Agreements

- Clinical Trial Agreements
- Confidentiality Agreements
- Services Agreements
- Clinical Research Support Agreements
- TIMI Agreements
- CTNI Agreements
- PREP and PCHI Trials
- Amendments
- Research Gifts
Overview of Contractual Terms

- Right to publish data from our site(s)
- Confidentiality
  - Data from our site(s)
  - Information received from Company
- Ownership of intellectual property
- “Ownership” of data (rights to use / control data)
- Access to Data – if no publication of multicenter study
Overview of Contractual Terms (continued)

- Company’s right to use / disclose subject data and compliance with HIPAA Privacy Rule and Common Rule
- Company’s restricted use of name of PHS, PHS’ affiliates and investigators
- Compliance with PHS Policy on Payments in Clinical Trial Agreements
- Allocation of liability: subject injury, indemnification, insurance
Overview of Contractual Terms (continued)

- AAHRPP commitment
- Company’s use of specimens / human tissue
- Company-provided study drug / device
Other Areas That Handle Industry Contracts

• **Innovation [formerly Research Ventures and Licensing ("RVL")]**
• **Research Management**
• **Development Office**
• **Materials Management**
• **Office of General Counsel**
  – Office of Interactions with Industry (OII): personal consulting agreements. [PHSOII@partners.org](mailto:PHSOII@partners.org)
Who should I contact if I have an upcoming industry sponsored trial?

Effective September 21, 2012 clinical research agreements are submitted to PCRO through InfoEd PD.

PCRO assignments by chief code:
PCRO Agreement Associates

PCRO Financial Analysts
PCRO Contact Information

Maureen Lawton, Corporate Director
mlawton@partners.org; 617-954-9367

Karen Lodigiani, Director, Corporate Sponsored Clinical Research Contracting
klodigiani@partners.org; 617-954-9737

Jennifer S. Meneses, Director, Clinical Research Financial Services
jmeneses3@partners.org; 617-954-9368

Alicia Vital, Agreement Administrator
avital@partners.org; 617-954-9806

http://navigator.partners.org/internal
Including link to departmental assignments of PCRO agreement associates and financial analysts
INTRODUCTION TO RESEARCH COMPLIANCE
RESEARCH COMPLIANCE

- What We Can Do For You
- Why is Research Compliance Important?
- Risks of Non-Compliance
- Raising Concerns
- Who to Contact
What We Can Do For You?

- Write policies when need arises
- Communicate policies and other guidance
- Consult on operations and help develop SOPs
- Interact with government officials, when necessary
- Implement corrective actions
- Monitor operations (random and for cause reviews)
What Can We Do For You?

- Prevent issues – talk to us if you’re not sure how to go about doing something “the right way”
- Educate – big groups, small groups, individuals
- Address issues – something’s wrong…we can help fix it
- Cooperation – call us when regulators show up
Research compliance is important because we must maintain the trust of our patients, the public, our sponsors, and our government.

*We do this by acting with integrity and lawfulness.*
Committed to conducting our affairs in accordance with the highest ethical and legal standards.

- To maintain these standards, we must perform our duties with integrity and honesty and in compliance with all applicable laws by observing both the letter and the spirit of the law.
Scientific Integrity
Principle:
Ensures validity of results/
Maximizes return on public & private
investment
Conflict of Interest
Conflict of Commitment
Research Integrity
Data, Resource Sharing
Cyber Security
Public Access to Publications

Cost Policy/
Financial Management
Principle:
Ensures fair and reasonable costs
to the Government & other sponsors
Cost Principles
Salary Charges/Effort Reporting
Indirect Costs
Cost Sharing
Clinical Trials Billing

Social and Political
Requirements
Principle:
Meets National, Social, Economic,
Security Interests
SEVIS/Visas
Export Controls
Race, Gender & Handicap Equality
and Education
Lobbying
Debarment
Drug Use

Welfare of Subjects
and the Environment
Principle:
Provides safety/welfare of
subjects and environment
Human Subjects
Animal Welfare
HIPAA
Environmental Health & Safety
Select Agents
Radiation Access
Who Cares What We’re Doing

- ORI – Office of Research Integrity at Public Health Service
- OIG – Office of the Inspector General
- DOJ – Department of Justice
- OHRP – Office for Human Research Protections
- FDA – Food and Drug Administration
- Consumers, patients, media
Risks of Non-Compliance

- Fines & Penalties
- Loss of Expanded Authorities
- Sponsor imposed monitoring
- Suspension or debarment from receiving Federal Funds
- Damaged Reputation & Loss of Public Trust
Risks of Non-Compliance

Results of Research Billing Non-Compliance: Significant Audits & Settlements

1993 HHS–OIG Investigation: most of the 130 hospitals investigated were improperly billing Medicare for implanting investigational devices.

1999 GAO Report: Medicare was unknowingly being billed for routine costs in oncology clinical trials. GAO/HEHS–99–182

Public Settlements
- 2005 – University of Alabama settlement – $3.4 million
- 2005 – Rush University Medical Center settlement – $1 million
- 2005 – Weill Cornell Medical Center settlement – $4.3 million
- 2010 – Tenet Healthcare System, Norris Cancer Center – 1.9 million
Risks of Non-Compliance

University of Minnesota
Misuse federal funds
$32 million

Univ. of Southern California
Questioned Costs
HHS/OIG Audit
$400,000

East Carolina Univ
Questioned Costs
HHS/OIG Audit
$2.4 million

Cornell Medical
Clinical Research Issues
$4.4 million

Florida International Univ.
Effort Certification & Direct Costs
$11.5 million

Univ. California, San Francisco
Animal Care Allegations
$92,500 fine

Johns Hopkins Univ.
Effort Certification & Direct Costs
$2.7 million

New York University Medical Center
Inflated Research Grant Costs
$15.5 million

Mayo Foundation
Mischarging Federal Grants
$6.5 million

Yale
Effort Certification & Cost Transfers
$7.6 million

Harvard/BIDMC
Costing Issues (Self-Reported)
$3.25 million

Northwestern University
Committed Time/Effort
$5 million

Results of Research Non-Compliance: Significant Audits & Settlements
What Went Wrong?

- Nothing that couldn’t happen anywhere else.
- Good people misguided as to how to do the right thing.
- Insufficient documentation.
Raising Concerns

How do I decide?

- Does the action comply with the laws, regulations, policies and procedures that apply to us?
- Is it consistent with McLean/Partners policies?
- Does it protect and serve the best interests of our patients and research subjects?
- How do you feel about it? Can you explain your decision to your family, your patients, and our larger community?
Raising Concerns

Where to Go?

- Supervisor
- Compliance
  - Partners Anonymous Helpline: 800–856–1983
  - McLean Compliance: 617–855–2598

PHS Non–Retaliation Policy

Retaliation of any kind is prohibited. Any person who violates this policy will be subject to corrective action.
The Compliance Office specializes in promoting an understanding of the interface between the nuts and bolts reality of your job and the laws, regulations, policies and procedures to which we all must adhere.

- Integrity is everyone’s responsibility.
- What you think, is important.
- Don’t be afraid to question.
RESEARCH COMPLIANCE RESOURCES

CONTACTS

Jennifer Mahoney
Compliance Officer
jmahoney12@partners.org
617–855–2598

Mary Mitchell
Corporate Director, Research Compliance
Partners HealthCare system
mmitchell14@partners.org
617–954–9597
Harvard Catalyst Education and Training

Erica Lawlor, MPS
Senior Program Manager

September 22, 2014
The Problem

Translating biomedical research findings into clinical applications that improve human health is a slow and complex process with high costs and high failure rates.

Our Mission

Harvard Catalyst brings together the intellectual force, technologies, and clinical expertise of Harvard University and its affiliates and partners to improve human health.
Participating Institutions

Beth Israel Deaconess Medical Center
Brigham and Women’s Hospital
Broad Institute
Cambridge Health Alliance
Children’s Hospital Boston
Dana-Farber Cancer Institute
Forsyth Institute
Harvard Pilgrim Health Care
Hebrew SeniorLife
Immune Disease Institute
Joslin Diabetes Center
Judge Baker Children’s Center
Massachusetts Eye & Ear Infirmary
Massachusetts General Hospital
McLean Hospital
Mount Auburn Hospital
Schepens Eye Research Institute
Spaulding Rehabilitation Hospital
Veterans Affairs Boston Healthcare System
Boston College Connell School of Nursing
Harvard Business School
Harvard Divinity School
Harvard Graduate School of Design
Harvard Graduate School of Education
Harvard Law School
Harvard Medical School
Harvard School of Dental Medicine
Harvard School of Public Health
Harvard School of Engineering and Applied Sciences
Harvard University Faculty of Arts and Sciences
Kennedy School of Government
Massachusetts Institute of Technology
Radcliffe Institute for Advanced Study
How does Harvard Catalyst support translational research?

By enabling collaboration and by providing training, and tools, and technologies

- **Workforce Development: Education & Training**
  - Degree and non-degree educational programs
  - **Funding** - pilot grants

- **Collaboration**
  - Collaboration tools - find potential collaborators and/or mentors
  - Consulting & advice - access to expertise

- **Tools and Technologies**
  - Research resources - access to technologies, clinical research facilities, and the community
Education & Training

In keeping with its core educational mission, Harvard Catalyst offers more than a dozen courses and training programs, ranging from short courses on translational and clinical research to degree granting multiyear advanced education and training programs. In addition, the Advanced Curriculum Compendium helps you find more than 100 advanced research courses offered by Harvard affiliated schools and academic healthcare centers. For courses designed to address research assistant and study staff needs, please see your local institutional offerings.

Compare Educational Offerings

Watch videos of senior leadership discussing Harvard's new vision at the inaugural KangT-Sang lecture.

How do I?

- Find introductory courses to get started in translational and clinical research?
- Identify advanced courses on specific topics?
- Find degree-conferring educational opportunities?
- Find funded training opportunities (e.g., fellowships)?
Common Definitions and Tools

**T0**
Basic Biomedical Discovery

Examples include:
- Models of Disease
- Molecular Biology
- Human Biology
- Cellular and Organismal Metabolism

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Examples include:

**Basic Scientific Discovery**
- Preclinical and Animal Studies
- Human Physiology
- First in Humans (FIH) (healthy volunteers)
- Proof of Concept (POC)
- Phase 1 Clinical Trials

**T1 Translation to Humans**

**T2 Translation to Patients**
- Phase 2 Clinical Trials
- Phase 3 Clinical Trials

**T3 Translation to Practice**
- Phase 4 Clinical Trials
- Health Services Research
- Dissemination
- Communication
- Implementation
- Clinical Outcomes Research

**T4 Translation to Population Health**
- Population-level Outcome Studies
- Social Determinants of Health

**Improved Global Health**
- Community-Based Participatory Research (CBPR)
- Cost Effectiveness/Comparative Effectiveness
- Health Disparities
- Public Policy

**Control of Experimental Conditions**
- Observational Studies
- Personalized Medicine
- Guideline Development
- Systematic Reviews/Meta-Analyses

Sample Size
Courses and Training Programs

**Overview Courses**
Cover entire T spectrum

**T-specific Intro Courses:** go into more depth for each space

**Advanced Courses:**
Often covering more than one T space; technical topics

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**Introduction to Clinical Investigation:** face-to-face class
**Fundamentals of Clinical and Translational Research:** online

- Intro T1 course
- Intro T2 course
- Intro T3 course
- Intro T4 course

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**Advanced Courses:**
- Advanced Imaging
- Mentored Clinical Research Program
- Network Medicine
- Applied Biostatistics
- Understanding Biomarker Science
- Medical Device Development

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**Cross-Cutting Learning:** Adaptive skills that are woven throughout AND offered as independent courses

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**Team Science**

**Ethics**

**Mentoring**

**Leadership Skills**

**Grant Writing and Communications**

**Regulatory**
Grant Review and Support Program (GRASP)

Elements of Grant Writing

- Know the content of the Writing Tips.
- Use the Work Plans and R01 Tools.

Orientation and Grant-Writing Workshop

- Learn how to write an R01 grant.
- Learn how to use the Work Plans and R01 Tools.

Long-term Guidance and Participation

- Use the Work Plans and R01 Tools.
- Submit the Work Plans to GRASP Coordinator and your scientific mentor(s) monthly.
- Attend workshop modules.
- Serve as advisors to future GRASP participants.
Advanced Curriculum Compendium

Online compendium of courses from Harvard affiliates. Dynamic content and broad array.

Core Competency Areas:

- Assessment of drugs,
- Bioethics,
- Bioinformatics,
- Biostatistics,
- Clinical trial design,
- Data management,
- Devices + biologics,
- Epidemiology,
- Genetics + genomics,
- Human research policies + reg affairs,
- Human subjects research protection
- Imaging,
- Professional development,
- Research management,
- Research tools,
- Scientific communications,
- Study coordination + mngmt,
- Team leadership