



MULTI-REGIONAL CLINICAL TRIALS

THE MRCT CENTER of
BRIGHAM AND WOMEN'S HOSPITAL
and HARVARD

A USA perspective on diversity and inclusion

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Australian Clinical Trials Conference

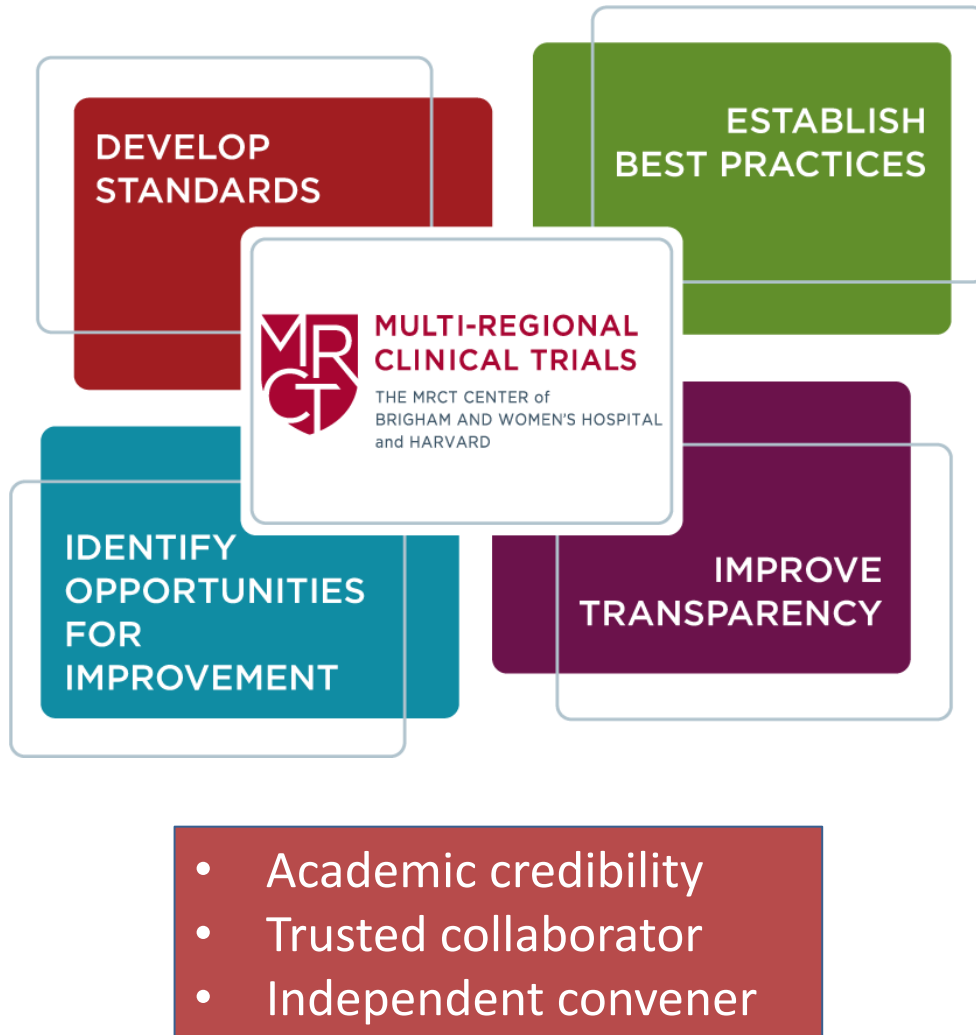


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The MRCT Center



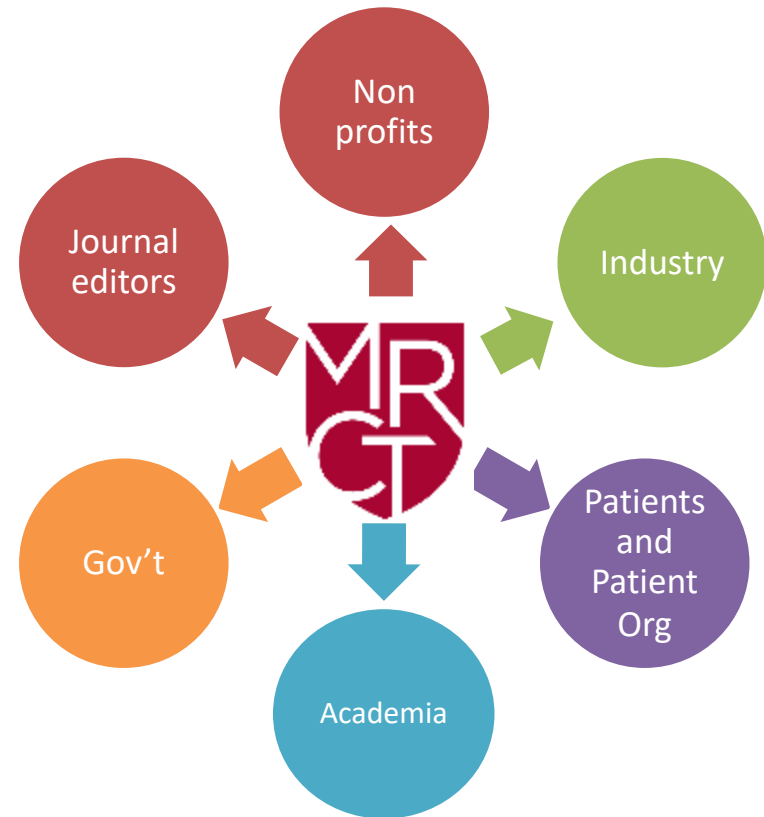
The **MRCT Center** is a research and policy center focused on addressing the conduct, oversight, ethics and regulatory environment for clinical trials.

Vision

Improve the integrity, safety, and rigor of global clinical trials.

How we work

Engage diverse stakeholders to define emerging issues in global clinical trials and to create and implement ethical, actionable, and practical solutions.



MRCT Center is affiliated with BWH and Harvard University





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Faculty Director, MRCT Center



**HARVARD
CATALYST**

THE HARVARD CLINICAL
AND TRANSLATIONAL
SCIENCE CENTER

Director, Regulatory Foundations,
Law and Ethics Program, Harvard
Catalyst

Agenda

- Political complexities
- The task
- Approaches and questions

Don't Reinvent



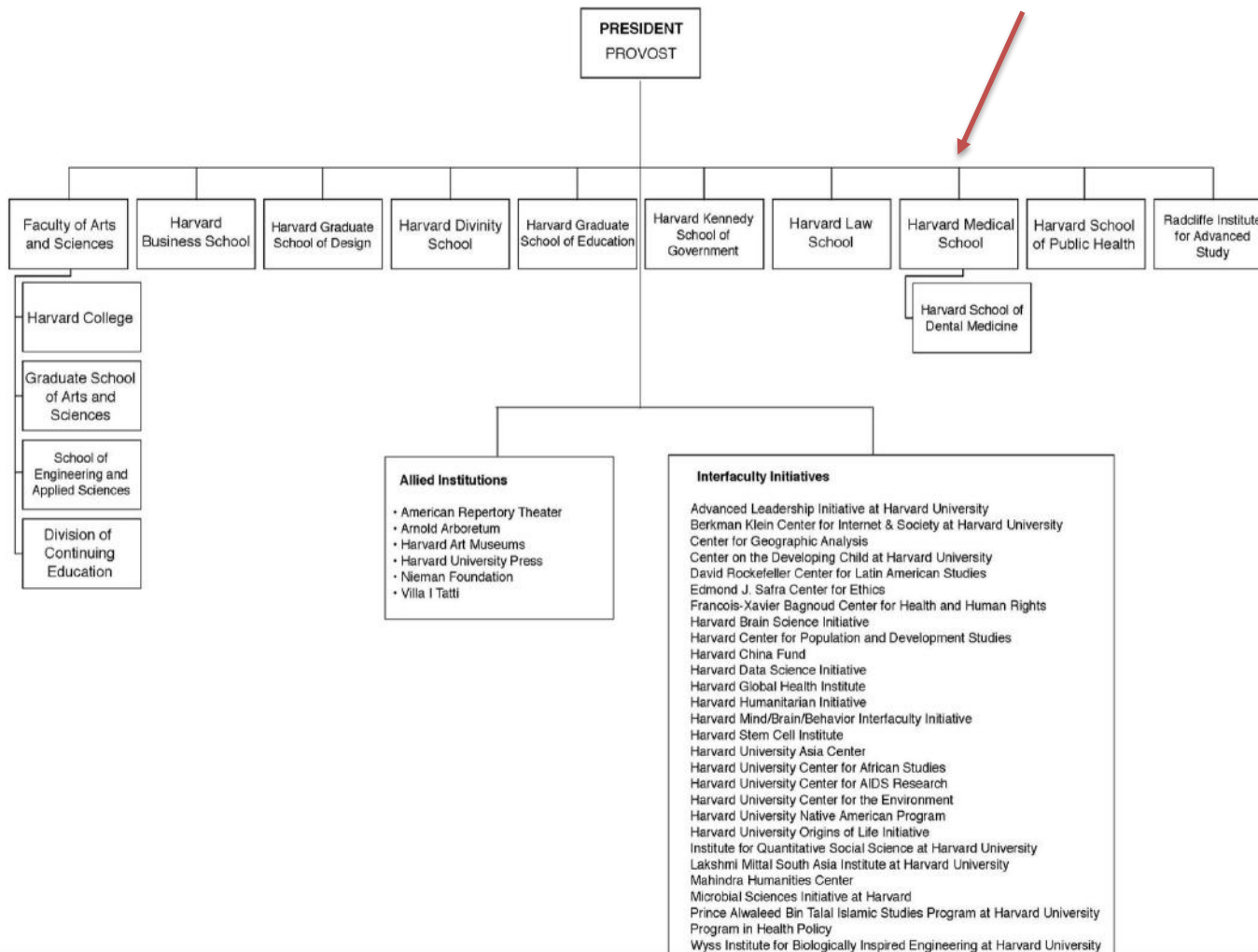
Perfect It

Harvard Medical School



Harvard University

Harvard University Faculties and Allied Institutions (as of 8/16/2019)





Harvard Catalyst (Harvard Clinical and Translational Center)



Decentralized and Large

Decentralized system of legally separate and financially distinct entities

21 separate 501(c) 3 institutions

24 separate Federal wide Assurances



Diverse Faculty

Investigators are faculty of Harvard, Broad, or MIT; not all Harvard employees

31 institutions and schools

Varying degrees of AAHRPP accreditation

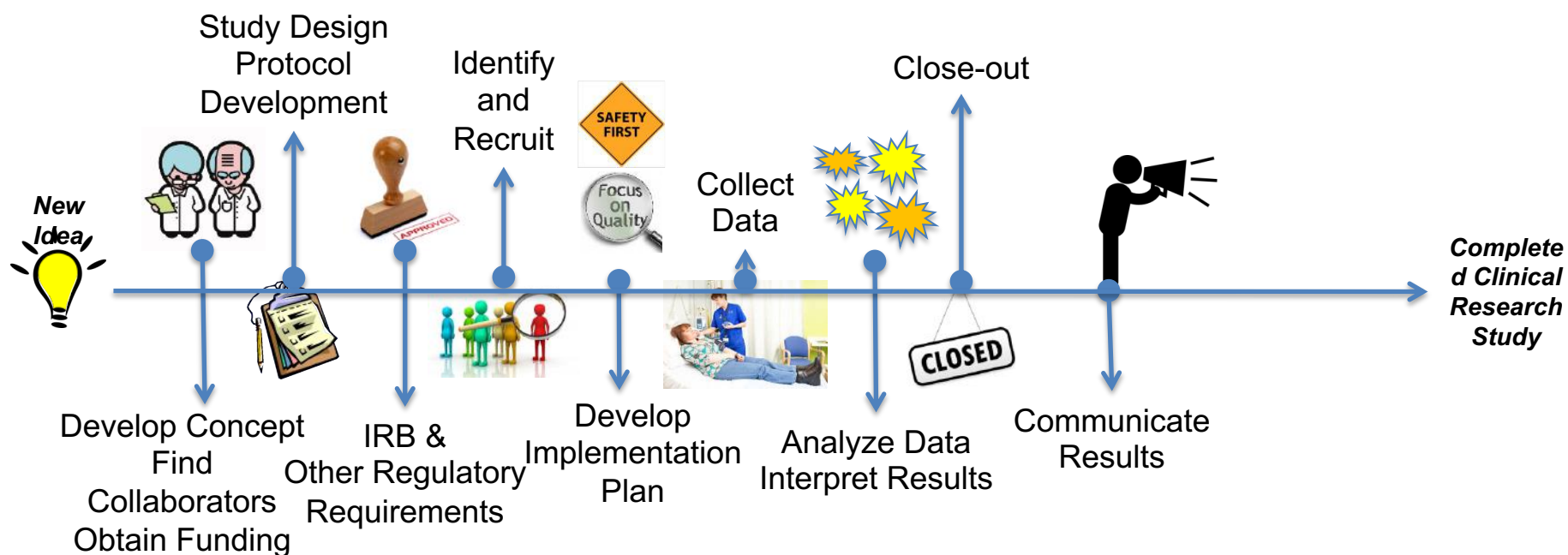
Research revenues from ~\$1M to ~\$900M

Expertise and Funding





One focus is on the **INVESTIGATOR** over the **ENTIRE LIFESPAN** of a given research study



NIH CTSA goals

- Goal 1: Train and Cultivate the Translational Science Workforce
- Goal 2: Engage Patients and Communities in Every Phase of the Translational Process
- Goal 3: Promote the Integration of Special and Underserved Populations in Translational Research across the Human Lifespan
- Goal 4: Innovate Processes to Increase the Quality and Efficiency of Translational Research, Particularly of Multisite Trials
- Goal 5: Advance the Use of Cutting-Edge Informatics

The power of a funder: requirements and accountability

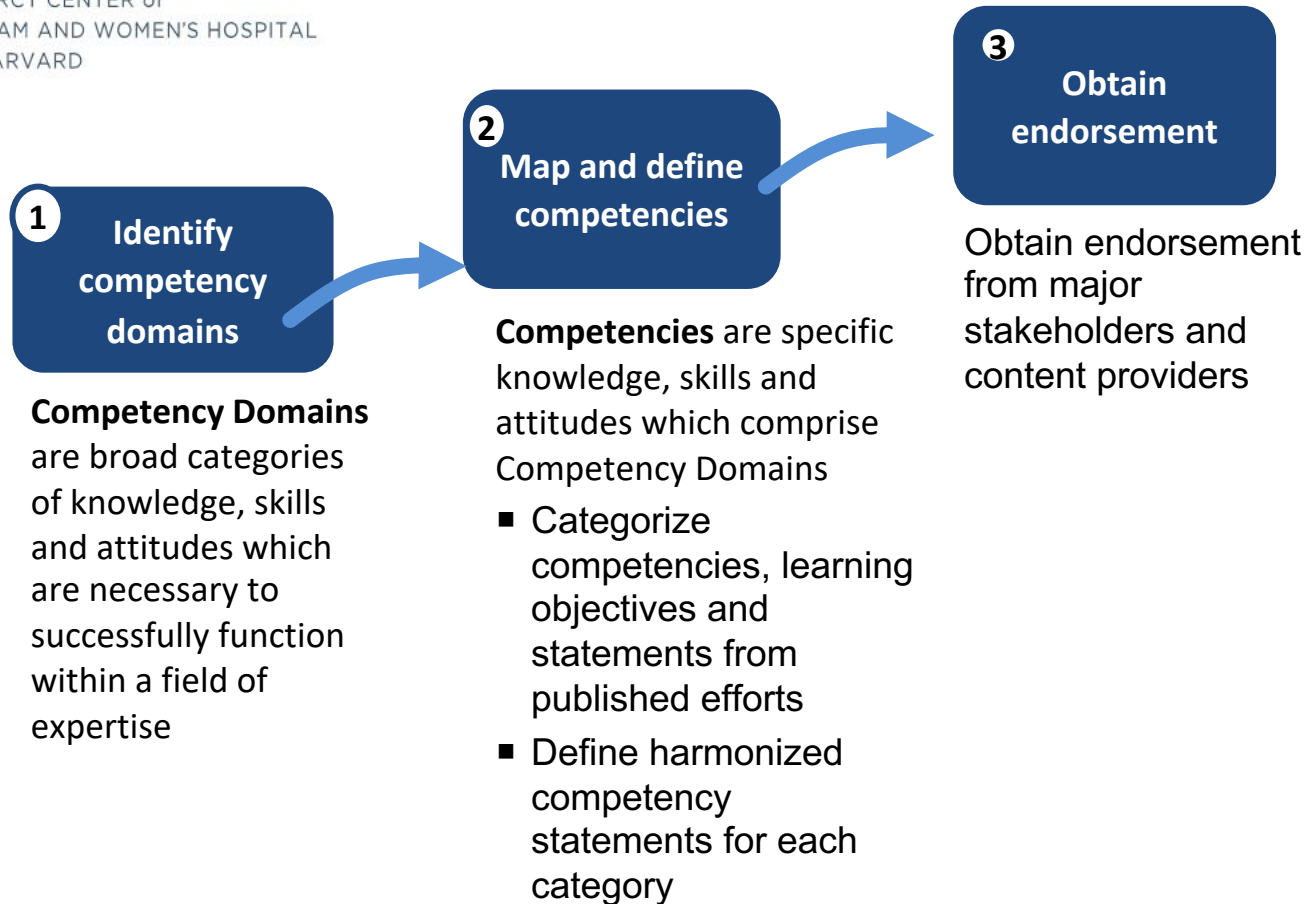


Training: Alignment and harmonization of core competencies

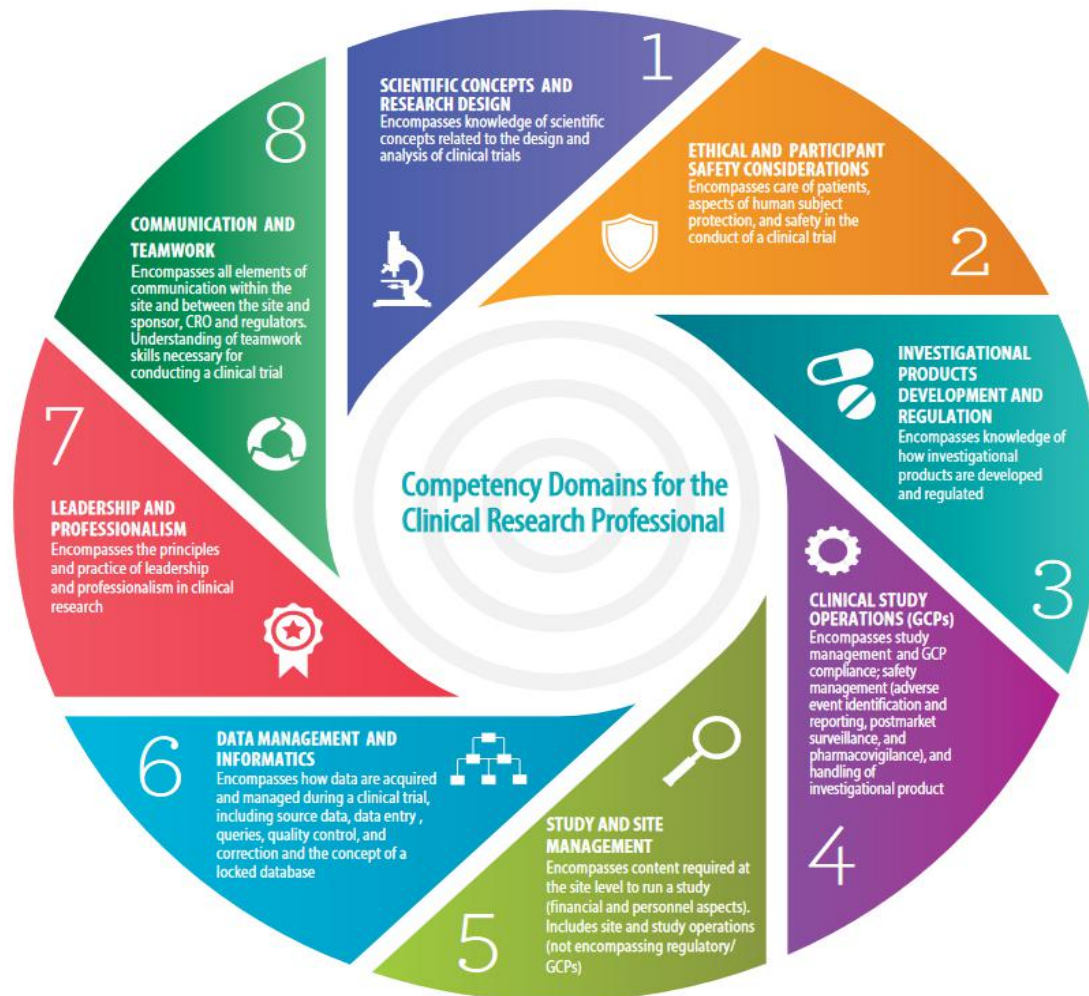


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JTF Framework – Competency Domains for the Clinical Research Professional

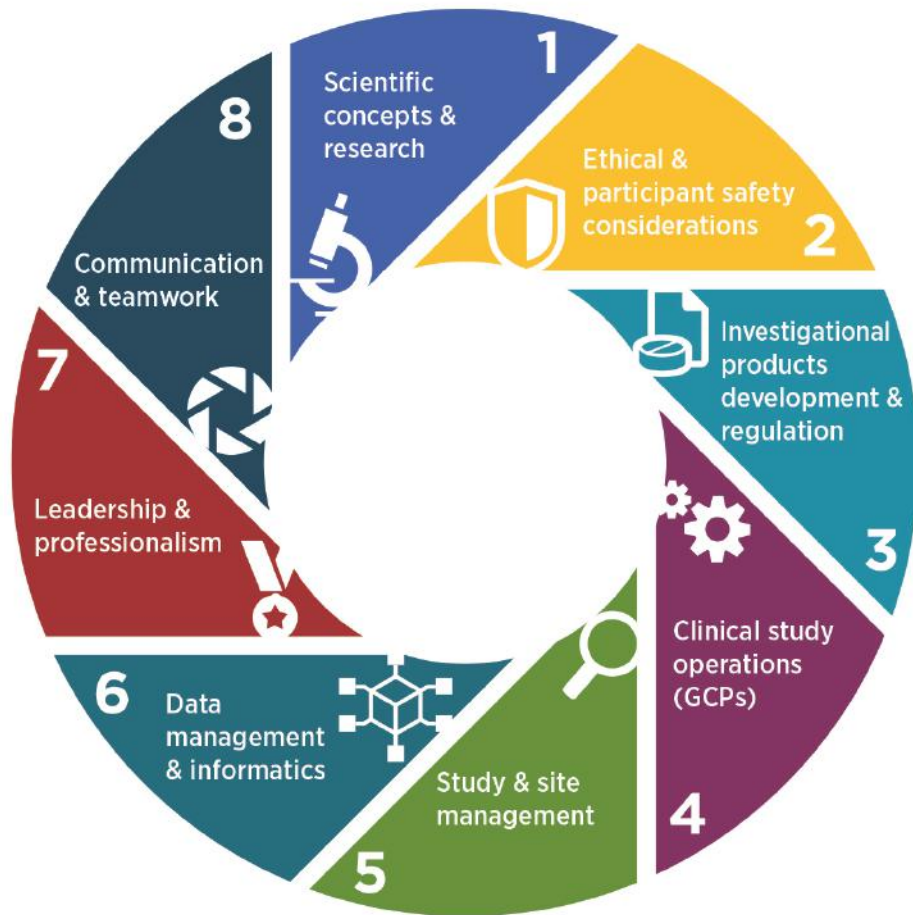


- Standardized role descriptions
- Competency-based training/education
- Level of competency vs level of job
 - Promotion and upward mobility
- Self-assessment & competence
 - Recognize personal training needs
 - Personal portfolio of competencies
- Competence & career development
 - Academic program accreditation
- Continuous process (competence not static, jobs change, gaps appear); lifelong learning

- Sonstein, S.A., Seltzer, J., Li, R., Jones, C.T., Silva, H., Daemen, E. (2014, June). **Moving from compliance to competency: A harmonized core competency framework for the clinical research professional.** *Clinical Researcher*. 28(3); 17-23



Leveling of the JTF Core Competency Framework (2018)



SKILL LEVELS

- **Fundamental level:**
can perform with coaching/explain
- **Skilled level:**
can perform independently/demonstrate
- **Advanced level:**
can teach/develop

Translating the MRCT Center JTF Framework

Spanish

Home > Framework > Translations > Spanish

El Joint Task Force for Clinical Trial Competency (JTF)

El Joint Task Force for Clinical Trial Competency (JTF) es un equipo internacional de investigadores, educadores y profesionales de la investigación clínica que están comprometidos a proveer investigadores con la dirección y herramientas para asegurar la competencia profesional de todos miembros del equipo de la investigación. El diagrama de la "rueda" representa el JTF Marco de Competencias que consiste en 8 Dominios de Competencia.

We are committed to providing the JTF Core Competency Framework in as many languages as possible. If you are interested in helping with translations, please contact

mrct@bwh.harvard.edu.

The following translations are currently available:

- [Spanish](#)
- French (in process)
- Japanese (in process)
- Portuguese (in process)



Training materials

DIAMOND Portal Offers Research Training for All



Staff who work on clinical studies can improve their skills with high-quality training materials on the [DIAMOND portal](https://ncats.nih.gov/ctsa/training/resources). The goal of the DIAMOND project is to create well-run clinical trials through well-trained staff.

<https://ncats.nih.gov/ctsa/training/resources>



Promoting Ethics and
Education in Research

About Us

Our Services

What is Research Essentials?

Research Essentials is a unique research training resource that has been designed to deliver a world class program to meet the specific needs of all those involved in research while also enabling learners to pick and choose from a diverse range of subjects so that they can design a training program that best meets their needs.

<https://praxisaustralia.com.au>



Supporting the implementation of single IRB review



A Roadmap to Single IRB Review

Funded by NCATS beginning in July 2016

As of July 2018, led by Harvard University and University of Wisconsin-Madison, along with a team of Ambassadors from across the U.S.

GROW

A national IRB
reliance network

SUPPORT

Use of SMART IRB

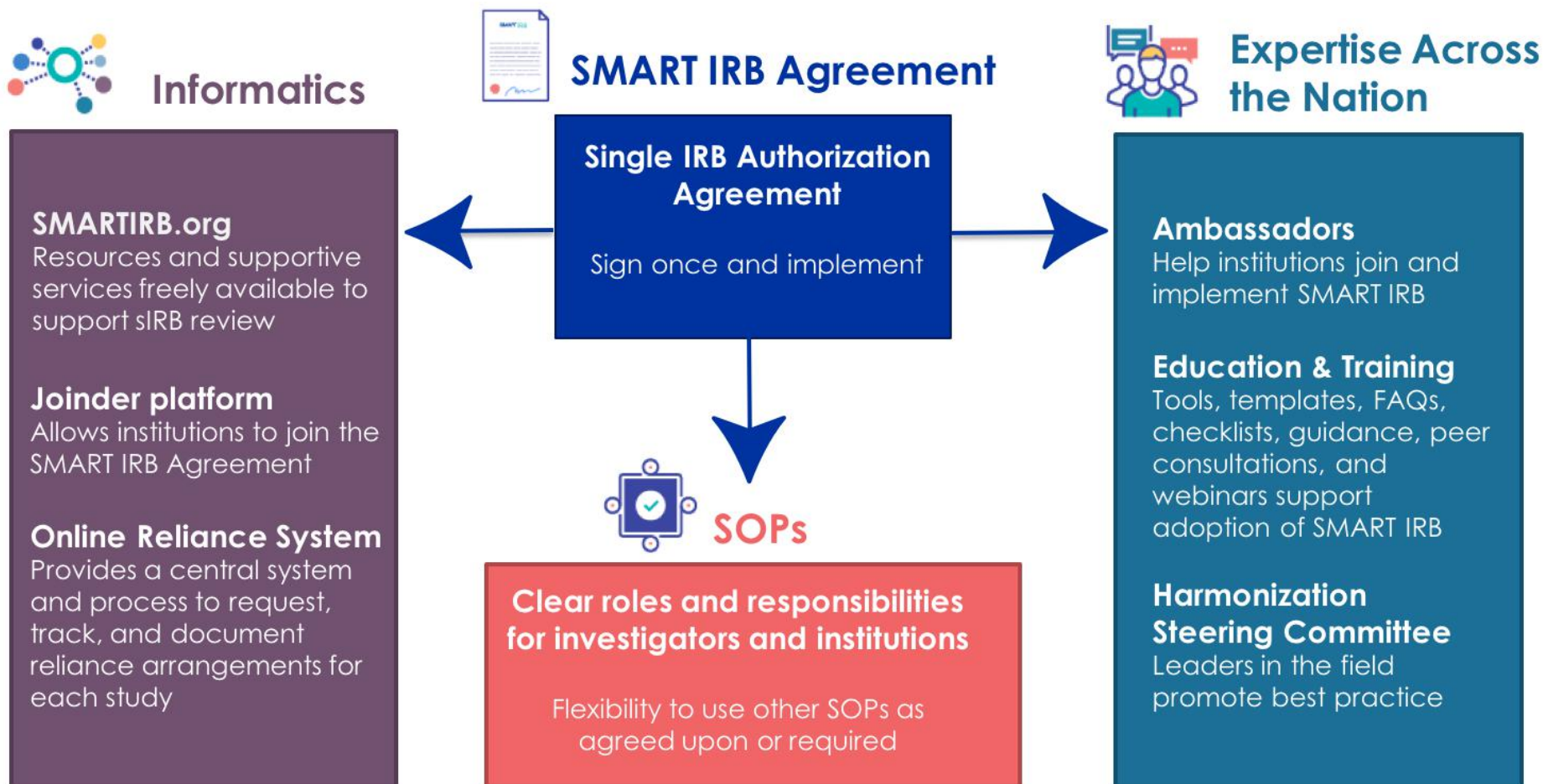
EDUCATE & TRAIN

Institutions &
Investigators

HARMONIZE

sIRB review
processes across
the nation

A Platform for Single IRB Review



Request, Track, and Document Arrangements

SMART IRB Online Reliance System

Launched in May 2017

Single point
of entry standardizes
reliance processes

Communication
portal eliminates
tracking via email or
other methods

Guided workflow
makes clear when
action is required

The system works for institutions:

1. With and without significant reliance experience
2. Familiar or unfamiliar with one another
3. With limited or substantial infrastructure to support single IRB review

Allows SMART IRB Participating Institutions to work together to establish reliance arrangements on a study-by-study basis

Get started at smartirb.org/reliance.



SMART IRB SOPs

Standard operating procedures (SOPs) for establishing and implementing reliance provide clarity during the review and conduct of research using the SMART IRB Agreement.

- Provide clarity on key roles and responsibilities
- Use of SMART IRB SOPs is not mandated
- SMART IRB supports networks with existing SOPs
- Institutions communicate whether other policies or procedures apply

SOP Manual available at

https://smartirb.org/sites/default/files/SMART_IRB_SOP-090816.pdf



Master Committee Review Board Standard

Version

SMART
VERSION 0



Record Keeping and Document Retention

This section describes the process for maintaining and storing SMART IRB administrative records and the responsibilities of SMART IRB Administration, Reviewing IRBs, and Relying Institutions for the maintenance of these records, covering SMART IRB administrative records and study-specific IRB records related to reliance, but not the investigators' Research files.

SMART IRB Administrators, Reviewing IRBs, and Relying Institutions will maintain the following records in the locations specified in the table below:

SMART IRB Records		
Record Type	Responsible Party	Storage Location
Current SMART IRB policies and procedures including: SOPs, forms, templates, etc.	SMART IRB Administration	SMARTIRB.org
Current executed SMART IRB Reliance Agreements and Joinder Agreements, as well as any amendments	SMART IRB Administration and Participating Institutions	SMARTIRB.org and at Participating Institutions
Study-specific reliance requests including: identification of Reviewing IRB(s) and Relying Institutions, and Study Team Information	Participating Institutions	Local storage at Participating Institutions
Minutes from IRB meetings at which Research ceded under the SMART IRB Agreement was reviewed; portions of the minutes that are relevant to a Relying Institution available upon request to designated officials of the Relying Institution.	Reviewing IRB	Local storage; available upon request
Records of any applicable COI management plans provided by the Relying Institution and received by the Reviewing Institution	Reviewing IRB and Relying Institution	Local storage
Records of events reported by Relying Institution and received by the Reviewing Institutions	Reviewing IRB and Relying Institution	Local storage; available on request
Study-specific review and approval notifications	Reviewing IRB and Relying Institutions	Reviewing IRB and Lead Study Team
Other general correspondence between the Relying Institution and the Reviewing IRB	Reviewing IRB and Relying Institution	Reviewing IRB and Lead Study Team; available upon request
Study-specific determinations related to ceding review to a Reviewing IRB (e.g., forms documenting decision to cede review; any outstanding concerns or requirements that must be addressed by the Reviewing IRB, and any institutional requirements related to the ceded study that the Reviewing IRB must take into consideration.)	Relying Institution and Reviewing Institution	Local storage

SMART IRB Standard Operating Procedures

VERSION DATE: 9/8/2016

Page 22 of 36

How to find out who's joined SMART IRB

- Visit smartirb.org to find the full list of SMART IRB Participating Institutions.
- Once an institution's joinder is activated, they are listed on the Participating Institutions page.

Click on
"Participating Institutions"



623 Participating Institutions
including all CTSA hubs

Join SMART IRB

[SMART IRB AGREEMENT](#)

[ONLINE RELIANCE SYSTEM](#)

[HARMONIZATION](#)

[RESOURCES](#)

[ABOUT US](#)

[SUPPORT](#)



Supporting single IRB review
Advancing collaborative research

Streamline efficiencies

- Training
- IRB/EC
- Contracting



Example: Accelerated Master Agreements

- Confidential Disclosure Agreement
 - Clinical Trial Agreement
 - Data Transfer Use Agreement
 - Fixed Price Clinical Trial Subaward Agreement
-
- The exchange of research materials under material transfer agreements (MTAs).
 - Collaborative research conducted under cooperative research and development agreements (CRADAs).
 - Clinical studies to determine the safety and efficacy of new agents under clinical trial agreements (CTAs).
 - Exchange of confidential information under confidential disclosure agreements (CDAs).
 - Informal collaborations that involve the transfer of materials and data under a Research Collaboration Agreement (RCA).

<https://www.ara4us.org>



ACDA

With the use of the Accelerated Confidential Disclosure Agreement template, protocols can be obtained by participating sites without confidentiality agreement negotiation delays, placing those sites at an advantage to initiating trials earlier than current processes permit.

[Learn More](#)



ACTA

Institutions and Industries can use the Accelerated Clinical Trial Agreement for sponsor-initiated multi-site trials. This streamlined process will allow sites to participate in clinical trials earlier in the process without undue delays in contract negotiations.

[Learn More](#)



CTSA-DTUA

The CTSA-DTUA (Clinical and Translational Science Award – Data Transfer and Use Agreement) was developed to help facilitate a more streamlined process for transfer and use of data between sites.

[Learn More](#)



FDP-CTSA

A sub-award template for federally funded clinical trials negating the need for tedious negotiations. Approved for use by the CTSA stakeholders, the NIH, and the FDP.

[Learn More](#)

Model agreements

Forms & Model Agreements




Licensing Application and Agreements

Used to when industry is interested in licensing a technology.

- [Inter-Institutional Agreements](#)  (Word - 27KB)
- [Public Health Service License Agreements](#) 
- [License Application](#) 

Confidential Disclosure Agreements (CDAs)

Used to exchange confidential information.

- [NCATS Model 2-Way CDA](#)  (Word - 23KB)
For two parties sharing confidential information.
- [NCATS 1-Way Out CDA](#)  (Word - 28KB)
For an outside party receiving confidential information from NIH.
- [NCATS 1-Way In CDA](#)  (Word - 27KB)
For an outside party providing confidential information to NIH.

Research Collaboration Agreement (RCA)

Used in a collaborative project where confidential information and materials may be exchanging hands.

- [RCA Template](#)  (Word - 31KB)









Employee Invention Report

Used when NCATS employees create new technologies.

- [PHS Employee Discovery and Invention Report](#)  (Word - 113KB)

Cooperative Research and Development Agreements (CRADAs)

Used when NIH and industry collaborate to further develop a technology for commercialization.

- [Model NIH Materials CRADA](#)   (Word - 27KB)
For collaborative studies of basic research.
- [Model PHS CRADA](#)   (Word - 49KB)
For collaborative studies of basic research.
- [Intramural Clinical Trial CRADA](#)   (Word - 47KB)
For collaborative studies that include a clinical trial conducted at NIH.
- [Extramural Clinical Trial CRADA](#)   (Word - 49KB)
For collaborative studies that include a clinical trial conducted at NIH-funded sites.

Research Collaboration Agreement (RCA)

Used in a collaborative project where confidential information and materials may be exchanging hands.

- [RCA Template](#)  (Word - 31KB)

Material Transfer Agreements (MTAs)

Used to exchange research materials.

- [NCATS Provider MTA](#)  (Word - 27KB)
- [NCATS Recipient MTA](#)  (Word - 29KB)

<https://ncats.nih.gov/alliances/forms>⁶





Streamline efficiencies

- Training
- IRB/EC
- Contracting
- Recruitment
 - Makes clinical trials slow and more costly;
 - Limits the validity of trial result: and, in turn, researchers' ability to apply the findings broadly to the general population; and
 - Stops a trial prematurely or prevents it from taking place at all.

Technology Platforms

The CTSA ACT technology platform has two major components:

1. Informatics for Integrating Biology and the Bedside ([i2b2](#) ) , a software package that converts raw records into de-identified and searchable participant information stored in a central database.
2. Shared Health Research Informatics Network ([SHRINE](#) ) , a search engine for i2b2. With appropriate agreements in place, an ACT investigator can use SHRINE to search de-identified records using a customized set of participant criteria. SHRINE queries all network institutions and provides an approximate number of participants at each site who meet the criteria.

Accrual to Clinical Trials (ACT) Network

- Discovery, exploration, and validation of patient cohorts for investigator-initiated multi-site or single-site clinical trials



CTSA Trial Innovation Network (TIN)

TRIAL INNOVATION NETWORK



metrics



NETWORK PROPOSAL SUBMISSIONS

of institutions

66

of therapeutic areas

49

SIRB ([more metrics](#))

of relying sites

171

of studies

45

STANDARD AGREEMENT (in FDP-CTSA)

of sites

73

of studies

9

TRIAL INNOVATION NETWORK

Operational innovation,
excellence, and collaboration.

The Trial Innovation Network continues to accept new proposals!
Click the button below to get started.

Get Started now!

INVESTIGATORS



Hear from us within 5 business days.

212 Proposals Submitted

<https://trialinnovationnetwork.org>

International resources

SELECT A COUNTRY TO GET STARTED

COUNTRIES

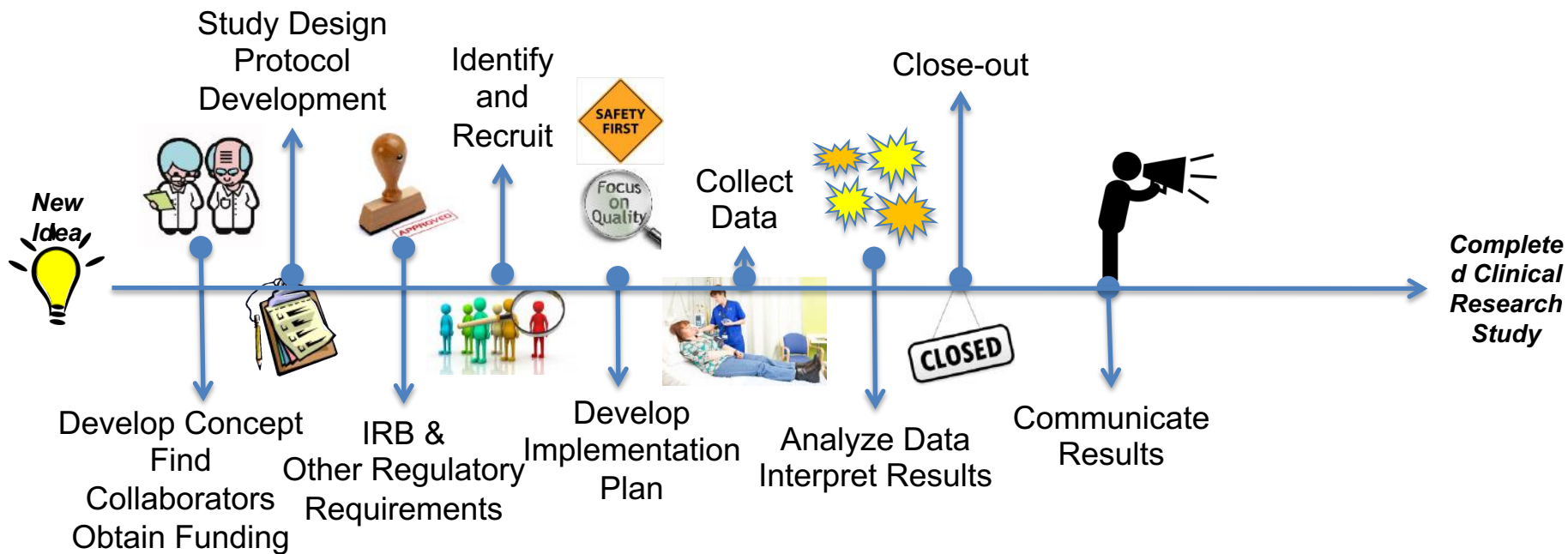


<https://clinregs.niaid.nih.gov>

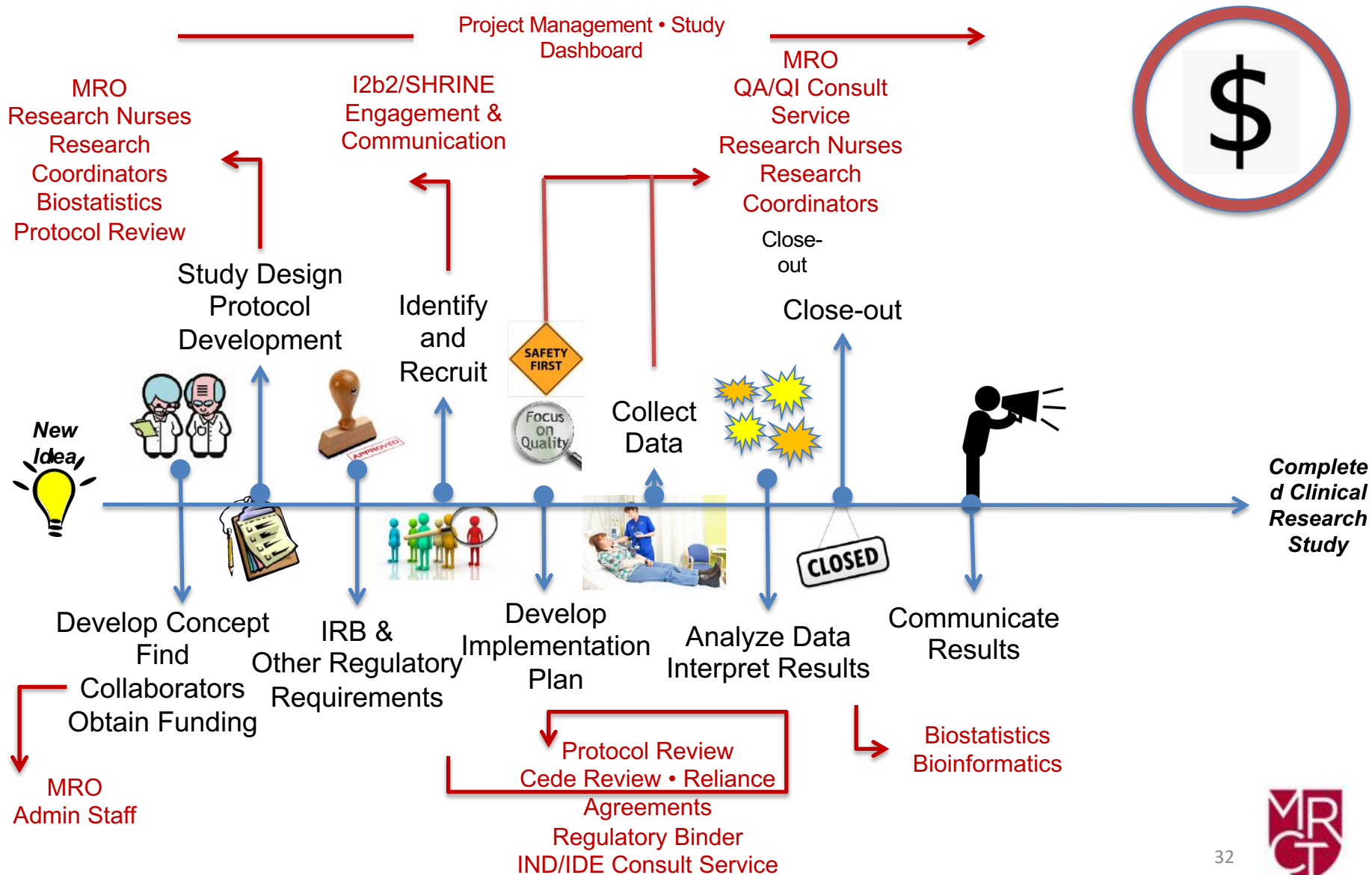
Support the individual investigator



*One focus is on the **INVESTIGATOR** over the **ENTIRE LIFESPAN** of a given research study*



Support across the clinical trial enterprise



Making the case

- Research is not the primary concern of most hospitals and academic institutions
- Frame the case:
 - Financial
 - Care improvement (and therefore financial)
 - Market share, referrals, visibility
 - Public good
- If object of clinical research is attracting industry trials → speed, IRB/EC, contract execution, recruitment (first patient on trial, number of patients on trial), data integrity, oversight
- If object is academic trials, must have clinical significance and impact → develop care pathway, business model
- Ideally, (re)engineer IT system and EHR to incorporate outcomes research as an outgrowth of clinical care



Where there's a will...

- Political will to proceed ... and to compromise
 - Common goals, vision
 - Trust
 - Time in planning
- Common resources and interdependencies
- Financial alignment (and resources)
- Metrics and measurement
- Accountability
- Governance



Thank you



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www.mrctcenter.org



Everything should be made as simple as possible – but not one bit simpler”

Albert Einstein

