noclor
RESEARCH SUPPORT

NHS

End of Study Notification, Close-Out and Reporting

Sponsored Research

SOP Reference ID:		Noclor/Spon/S11/01	
Version Number	1.0	**Effective Date:**	6th June 2016

It is the responsibility of all users of this SOP to ensure that the correct version is being used. The definitive versions of Noclor SOPs are available from the Noclor website https://www.noclor.nhs.uk/training-resources either by checking the document library or by carrying out a specific document search

Standard Operating Procedure: End of Study Notification, Close-Out and Reporting

Version History

SOP Reference ID	Effective Date	Reason for Change
SOP CA013 Version 1.0	14/04/2009	Administrative change from Camden PCT to CNWL NHS Foundation Trust (Camden Provider Services). Minor revisions/clarifications to procedures.
SOP CA013 Version 2.0	18/11/2011	Newly created Noclor SOP (applicable to all Noclor partner NHS Trusts). New numbering system adopted so this SOP has been assigned first version. New SOP format and revised content.
Noclor/Spon/S11/01	06/06/2016	

Authorship and Authorisation

Author Job Title:	Noclor Sponsor Representative			
Reviewed by:	Noclor Senior Management Group		Date:	24th May 2016
Authorised by:	Lynis Lewis, Noclor Service Director			
	Signature:	Signed copy held by Noclor	Date:	27th May 2016

SOP Content

Standard Operating Procedure: End of Study Notification, Close-Out and Reporting

1. Purpose

This Standard Operating Procedure (SOP) describes the procedures for notifying, close-out and reporting of health research sponsored by a Noclor Partner NHS Trust.

2. Scope

This SOP should be followed by Chief Investigators (CIs) that are responsible for managing health research that is sponsored by a Noclor Partner NHS Trust to ensure that the required notifications of study end are submitted within the required (regulatory) timeframes and the study is closed down and reported in accordance with sponsor procedures.

3. Abbreviations

CI	Chief Investigator
CTIMP	Clinical Trial of Investigational Medicinal Product
HRA	Health Research Authority
LPLV	Last Patient Last Visit
MHRA	Medicines and Healthcare Products Regulatory Agency
PI	Principal Investigator
REC	Research Ethics Committee
SDV	Source Data Verification
SOP	Standard Operating Procedure
S/TMF	Study/Trial Master File

4. Procedure and Responsible Personnel

The definition of the end of study should be clearly documented in the research protocol; it should refer to the point of final data capture (the point at which all required data has been collected to answer the research question(s) in the protocol). For clinical trials this is usually defined as the date of Last Patient Last Visit (LPLV). Occasionally a clinical trial must terminate earlier than specified in the protocol, in these circumstances the relevant bodies will need to be notified in the required timeframes (refer to 4.1.2 and 4.2.2).

Standard Operating Procedure: End of Study Notification, Close-Out and Reporting

If the Chief Investigator (CI) plans to extend the research beyond the agreed proposed end date this should be discussed with the Noclor Sponsor Representative as extension may require variation to contract(s) and notification to Research Ethics Committee (REC).

When a research study has concluded the Investigators (Chief and Principal(s)) are responsible for ensuring that the commitments made to their participants are fully met. The protocol, Participant Information Sheet (PIS) and consent form approved by the Research Ethics Committee (REC) should clearly explain what study participants are to expect once their participation in the research study is complete.

Procedures for notifying end of study, close-out and reporting are detailed in the table below split by research type: 4.1 Clinical Trial of Investigational Medicinal Products (CTIMPs)
4.2 All Other Research

	Procedure	Responsible Personnel
4.1	**Clinical Trials of Investigational Medicinal Products (CTIMPs)** **4.1.1 Notifying end of study** 4.1.1.1 Within 90 days of the research study concluding as defined in the protocol the appropriate bodies must be notified 4.1.1.2 The CI must notify the Sponsor Representative that the study has concluded as defined in the protocol 4.1.1.3 The CI should prepare the EudraCT Declaration of the End of a Clinical Trial form (download from EudraCT directly for current form). 4.1.1.4 The completed EudraCT Declaration of the End of a Clinical Trial Form should be sent to Sponsor Representative for review and signature prior to submission to any party. 4.1.1.5 One form should be signed off by both the sponsor and CI as follows: ▪ Section C1 enter sponsor details – E2 signed by sponsor ▪ Section C2 enter CI details –E3 signed by CI 4.1.1.6 When the form has been signed off by both parties, the Sponsor (or authorised sponsor contact) will notify the MHRA by submitting the end of study notification form via CESP 4.1.1.7 The CI will notify the Research Ethics Committee (REC) by email and copy in the Sponsor Representative 4.1.1.8 Once acknowledgement of end of trial has been received from both MHRA and REC, the CI should send the Principal Investigators (PIs) at investigator sites a copy of the end of study documentation (i.e end of study declaration form and acknowledgement letters) together with any instruction on close out procedures (and what should be done in advance of the close out visit). The Sponsor Representative should be copied into this communication 4.1.1.9 R&D/Host institutions. CTIMPs with HRA Approval only need	All responsibilities are Chief Investigator (CI) responsibilities unless specifically indicated in brackets (Sponsor Representative)

	to inform the REC that the study has ended. PIs should inform their hosting institution about end of study according to local policies and procedures 4.1.1.10 The CI is responsible for notifying the funder (as per funder specifications) 4.1.1.11 The CI is responsible for retaining the end of trial declaration and all related correspondence in the Trial Master File (TMF). **4.1.2 Early termination** 4.1.2.1 If the decision is made to terminate a CTIMP before the specified date for its conclusion the Chief Investigator/ Independent Data Monitoring /Trial Oversight Committee should notify the Noclor Sponsor Representative immediately (if the sponsor has not initiated the early termination). 4.1.2.2 The early termination must be notified to MHRA and REC within 15 days of the decision being made to terminate to meet regulatory timeframes 4.1.2.3 The steps for notifying early termination of a CTIMP are the same as detailed above 4.1.1.3 – 4.1.1.11, however Section D2 of the EudraCT End of Study Declaration Form should also be completed. The Sponsor Representative may request a statement from the Oversight Committee or Trial Statistician to support the decision /rationale to terminate the trial. **4.1.3 Close-Out** 4.1.3.1 Once a study has officially come to an end work should begin to close-out the study ready for final data analysis, reporting and archive. 4.1.3.2 The close-out should provide assurances to the sponsor that the study has been conducted in accordance with the protocol, GCP and any study specific procedures to produce reliable outcome data 4.1.3.3 A close-out visit will be conducted and reported for all participating sites[1]. 4.1.3.4 The close-out visit should be prepared for by the trial monitor in the same way that a monitor visit would be prepared for (refer to Noclor/Spon/S06/0X Section 4.22.1.3) 4.1.3.5 The monitor plan will detail any specific requirements of the close-out visit in addition to the standard checks (for example: where 100% Source Data Verification (SDV) is required).	(Principal Investigators(PIs))

[1] A participating site may need to be closed whilst the study is on-going (i.e the study has not declared ended). This may be at the request of the sponsor/REC/MHRA, the participating site or due to force majeure (an unavoidable event). Through discussion with the Sponsor Representative the Chief Investigator will ensure the appropriate action is taken and documented in the TMF commensurate to the circumstances of the site closure.

	Examples of the standard close-out checks are summarised below: ▪ checks made centrally (and at site) that all data have been correctly completed and all data queries have been resolved so that data can be locked ready for analysis ▪ Investigator Site Files (and other files as appropriate) checked for completeness and to rectify any deficiencies prior to confirming (in writing) that they can be archived ▪ checks on archive arrangements/facilities (visit if on – site) ▪ checks that original consent forms have been completed and filed appropriately ▪ checks that medical records are flagged appropriately ▪ checks on IMP accountability so that IMP can be authorised by sponsor for destruction ▪ checks that all samples collected during the study have been stored appropriately and shipped to the appropriate destination for analysis 4.1.3.6 The Sponsor will provide a close-out report template that must be completed for the trial (the report template will be referenced in the monitor plan). 4.1.3.7 Where actions are required following the visit these should be communicated to site /relevant personnel (i.e action logs) as soon as possible after the visit to facilitate close-out. Only when all actions have been confirmed (evidenced) as completed can the site be officially closed 4.1.3.8 The person who conducted the close out visit should complete the report and send to CI/Trial Manager for review. 4.1.3.9 The report(s) should be sent to the PI (other site personnel copied in as relevant) within 15 days of the visit. 4.1.3.10 The CI/ Trial Manager must ensure the objectives/actions specified at close-out have been achieved/resolved at the site before the site is officially closed. 4.1.3.11 When all actions have been closed the trial manager should send the sponsor representative a copy of the close out report and completed actions logs 4.1.3.12 The sponsor will confirm via email that the site can be officially closed and agree with the trial manager the specific content of the close-out correspondence to site. 4.1.3.13 A 'Confirmation of site close-out letter' should be sent from the trial manager to the PI informing the site that study documentation can be archived according to local procedures (to timeframes specified in the letter) and that the sponsor will notify	(Sponsor Representative)

	the PI when documentation can be destroyed. The letter should be copied to Sponsor Representative. Example letter in *Appendix 1*.	
	4.1.4 Samples	
	4.1.4.1 The CI is responsible for ensuring that storage of any samples collected as part of the trial is lawful. Samples may be held after the end of trial declaration for analysis or verification of research data for up to one year. After this period legal authority to hold tissue under ethics approval for the project will expire, either the tissue must be held on premises with a storage licence from the Human Tissue Authority, or an application made for ethical approval of another project before favourable opinion of existing project expires. Otherwise the tissue must be destroyed in accordance with the HTA Codes of Practice.	
	4.1.4.2 The CI must inform the sponsor in writing of how the samples are being dealt with prior to the legal authority to hold tissue expiring under the existing ethics approval.	
	4.1.5 Data analysis	
	4.1.5.1 Final analysis of the data (following 'lock' of the trial database) and report writing should commence after formal declaration of the end of the trial and in accordance with the trial specific data management and statistical analysis plans.	
	4.1.6 Summary Clinical Trial Report	
	4.1.6.1 The sponsor is responsible for posting results on EudraCT within 12 months of the end of study declaration date	(Sponsor Representative)
	4.1.6.2 The CI is responsible for preparing and validating results in EudraCT in a timely manner to ensure that the regulatory timeframes are complied with.	
	4.1.6.3 The sponsor is a primary EudraCT results user and will assign preparer role(s) to all those personnel identified by the CI as having responsibilities for uploading and validating the trial results	
	4.1.6.4 The CI should document (file note if this information is not captured elsewhere) the process and the people involved in preparing and validating the results for EudraCT	
	4.1.6.5 The CI should inform the Sponsor Representative as soon as the results are ready for posting (this should be <u>at least 2 weeks</u> prior to deadline for submission to allow for any unforeseen problems with posting)	
	4.1.6.6 When the results have been posted on EudraCT the Sponsor Representative will send a short confirmatory email to CT.Submission@mhra.gsi.gov.uk with 'End of trial : result-related information: EudraCT XXXX-XXXXXX-XX' as the	(Sponsor Representative)

	subject line. 4.1.6.7 The CI will be copied in to the email sent to MHRA to confirm posting of results within regulatory timeframes 4.1.6.8 The CI is responsible for informing the REC and all participating sites that the results have been posted on EudraCT. The sponsor should be copied in on this correspondence. 4.1.6.9 Reports to the funder should be submitted by the CI according to the terms and conditions of the grant. 4.1.6.10 All correspondence pertaining to final reports, including final report and acknowledgements of receipt as relevant, must be retained by the CI in the TMF **4.1.7 Publications** 4.1.7.1 The responsibility for reporting and publishing research outcomes lies with the CI 4.1.7.2 The publication policy should be detailed in the protocol and sub-contracts as appropriate (if this detail is not in the protocol refer to IRAS form submitted to REC) 4.1.7.3 The CI should refer to the funding contract where appropriate to ensure that they comply with the terms and conditions of the report publication policy. 4.1.7.4 The CI should notify Noclor of all publications resulting from the research. **4.1.8 Archiving** Refer to Sponsor SOP Archiving Noclor/Spon/S12/0X	
4.2	**All Other Research** **4.2.1 Notifying end of study** 4.2.1.1 The Chief Investigator (CI) must notify the Noclor Sponsor Representative that the study has concluded as defined in the protocol (and to the proposed end date). 4.2.1.2 The CI should notify the Research Ethics Committee (REC) within 90 days of the study conclusion by emailing a completed Declaration of the End of Study Form (refer to HRA website for current version of this form). The CI must copy the sponsor representative into the email sponsor.noclor@nhs.net 4.2.1.3 Where a research project has HRA Approval and has been reviewed by a REC, the CI need only inform the REC that the study has ended. Where a project has HRA Approval and was not reviewed by an NHS REC, the CI will need to inform the HRA when the project has ended. This notification should be sent by email to hra.approval@nhs.net including the IRAS ID and CI contact information (phone and email). Copy the Sponsor Representative into the email sponsor.noclor@nhs.net 4.2.1.4 Hosting institutions should be informed of study end by local	Chief Investigator (CI)

investigators according to local policies and procedures

4.2.1.5 The Chief Investigator should notify the funder.

4.2.1.6 The end of study declaration and all related correspondence should be retained in the Study/Trial Master File (S/TMF).

4.2.2 Early termination

4.2.2.1 If the decision is made to terminate a research study before the specified date for its conclusion the CI should notify the Noclor Sponsor Representative (if the sponsor has not initiated the early termination).

4.2.2.2 The steps for notifying early termination are the same as detailed above 4.2.1.2 – 4.2.1.6, however additional questions must be answered on the end of study form to justify the early termination and provide details as to whether there are any implications for the trial participants of the early termination.

4.2.2.3 A record of the decision to terminate the trial early, the end of trial notification form and all related correspondence should be retained in the Study/Trial Master File (S/TMF).

4.2.3 Close-Out

4.2.3.1 Once a study has officially come to an end work should begin to close-out the study ready for final data analysis, reporting and archive.

4.2.3.2 Where a close-out visit to site(s) is required for clinical trials (non-CTIMPs) this will be documented in the risk assessment and monitor plan for the study (refer to Noclor/Spon/S03/0X)

4.2.4 Samples

4.2.4.1 The CI is responsible for ensuring that storage of any samples collected as part of the trial is lawful. Samples may be held after the end of trial declaration for analysis or verification of research data for up to one year. After this period legal authority to hold tissue under ethics approval for the project will expire, either the tissue must be held on premises with a storage licence from the Human Tissue Authority, or an application made for ethical approval of another project before favourable opinion of existing project expires. Otherwise the tissue must be destroyed in accordance with the HTA Codes of Practice.

4.2.4.2 The CI must inform the sponsor in writing of how the samples are being dealt with prior to the legal authority to hold tissue expiring under the existing ethics approval .

4.2.5 Data analysis

4.2.5.1 Final analysis of the data (following 'lock' of the trial database) and report writing should commence after formal declaration of the end of the trial and in accordance with the protocol and/or trial specific data management/ statistical analysis plans as relevant.

	4.2.6 End of Study Report 4.2.7 The Chief Investigator should submit a summary study report to the sponsor and REC within 12 months of the declaration of end of the trial. 4.2.7.1 There is no standard format for final reports for non-CTIMPs. As a minimum, the CI should inform the REC whether the study achieved its objectives, the main findings, and arrangements for publication or dissemination of the research, including any feedback to participants. 4.2.7.2 Final reports should be emailed to the REC and Sponsor Representative copied in sponsor.noclor@nhs.net 4.2.7.3 The CI is responsible for disseminating final report to all participating sites. 4.2.7.4 Reports to the funder should be submitted by the CI according to the terms and conditions of the grant. 4.2.7.5 All correspondence pertaining to final reports (including final report) must be retained by the CI in the S/TMF **4.2.8 Publications** 4.2.8.1 The CI should notify Noclor of all publications resulting from the research 4.2.8.2 The publication policy should be detailed in the protocol and sub-contracts as appropriate (if this detail is not in the protocol refer to IRAS form submitted to REC) 4.2.8.3 The CI should refer to the funding contract where appropriate to ensure that they comply with the terms and conditions of the report publication policy. 4.2.8.4 A copy of any final publications (report/papers/articles/chapters in books) that has resulted from a research project sponsored by a Noclor partner should be sent by the CI to the Noclor Sponsor Representative (on acceptance for publication). **4.2.9 Archiving** Refer to Sponsor SOP Archiving Noclor/Spon/S12/0X	

5. Deviation from SOP

Noclor Sponsor SOPs define working methods which should be adhered to. However, occasionally for specific projects it may be necessary to deviate from the Sponsor SOP.

Formal written explanations/justifications of such deviations must be approved by Noclor Sponsor Representative prior to implementation (or they will be considered a non-compliance to sponsor procedures requiring reporting according to SOP Noclor/Spon/S10/0X).

The deviation from Sponsor SOP should be recorded on the SOP Deviation Form (Noclor/Inter/T12/0X) and sent to the Sponsor Representative for review. A copy of the completed and signed form should be filed with the SOP in the S/TMF.

6. SOP Storage and Archive

For clinical trials, the details of this SOP should be included on the study specific document inventory log (Noclor/Spon/T07/0X).

The Chief Investigator (CI) is responsible for retaining and archiving copies of Sponsor SOPs (and the associated training records) that have been worked to for the duration of a research study in the Study/Trial Master File (S/TMF).

7. Associated Documents

Document Reference ID	Document Type	Document Title
Noclor/Spon/S12/0X	SOP	Archiving

Standard Operating Procedure: End of Study Notification, Close-Out and Reporting

8. Appendices- Example Confirmation of Site Close-Out Letter

Sponsor/Trial Headed Paper

[Investigator's Name and address]

[Date]

Dear *Investigator Name*

Closure of Trial : XXX XXXX
EudraCT : XXXXXX
Site Name/ No: XXX

Further to the official close out visit on [DATE] for the above study, I would like to thank you for your participation and to formally remind you of the following points:

- That essential documents/data should be stored in a secure archive, away from hazards of fire, humidity, pests and other environmental hazards, for at least **X** years from the date of issue of final clinical trial report.
- That the sponsor will inform you in writing when the essential documents no longer need to be retained (i.e can be destroyed)
- If you move, or retire etc., during this period, you should nominate, in writing to the sponsor CNWL NHS Foundation Trust (details in header of letter), an appropriately qualified designee to be responsible for ensuring that the data continues to be archived correctly.
- That you will notify your host institution of the conclusion of the study according to local policies and procedures.
- That all IMP accountability documentation has been checked and the sponsor has authorised destruction as relevant to site.
- That if a properly authorised representative of a competent authority should, at a reasonable time, request access to the study records, which you hold, this request should be granted and sponsor informed (in advance of access if possible).
- That your co-operation in resolving any queries that may arise after the official closure of your site will be greatly appreciated.
- That the end of trial report will be published on EudraCT by [date] and you will be notified

Thank you for your assistance

Yours sincerely

[Insert Name]
Trial Manager
Copied to : Sponsor Representative

9. Confirmation of Training

This SOP will be provided to the Chief Investigator (CI) and he/she will have the opportunity to ask specific questions to the author of the SOP.

For clinical trials, the CI must e-sign the confirmation of self-training below prior to study commencing.

The CI is responsible for ensuring that members of his/her study team are trained in the sponsor procedures (SOPs) that are relevant to their specific roles and responsibilities on the study.

I,

confirm that I have read and understood the content of this SOP and will work according to it.

Copies of Sponsor SOPs should be filed in the relevant section of the Study/Trial Master File (S/TMF). If this SOP replaces a previous version, the previous version should be retained in the S/TMF and marked through as superseded.

The SOP details should be added to the document inventory log (Noclor/Spon/T07/0X).

10. SOP Training Log

All members of the co-ordinating trial team concerned by this SOP (according to the role and responsibilities they are being delegated by the CI and as they appear on the co-ordinating trial team delegation log) should sign the SOP training log.

	Full Name	By signing below I confirm that I understand and agree to work to this SOP	
		Signature	Date

This training log should be filed in the relevant section of the S/TMF.