



# WELCOME TO ONLINE TRAINING FOR CLINICAL RESEARCH COORDINATORS

## ROLE OF THE RESEARCH COORDINATOR

Informed Consent and

Informed Consent Process Best Practices

IAW Protection of Human Subjects 21 CFR Part 50

May 2016

# Objectives

- To describe the terms, requirements, process and documentation standards for study subject's informed consent(s).
- To explain the informed consent process



# Key Ethical Standard for Subject Informed Consent

- “Extent and nature of information should be such that persons ... can decide whether they wish to participate...”  
-21 CFR Part 50.20, 50.25, 50.27
- Belmont Report
  - Beneficence
  - Respect
  - Justice

# *Required* Elements of Informed Consent

Information that must be provided to the subject and included within the consent document

- Introduction
- Study involves research
- Purpose of research
- Duration of subject involvement in the study
- Description of study procedures
- Identification of any experimental procedures
- Potential risks/discomforts
- Potential benefits to subjects or others

# More *Required* Elements of Informed Consent

Make these available to the Potential Subjects

- **Confidentiality of Subject Records (e.g. access to sponsor, FDA)**
- **Compensation for injury and treatment in event of emergency**
- **Who subject can contact**
- **Participation is voluntary**

As of March 7, 2012: “A description of this clinical trial will be available on <http://www.ClinicalTrials.gov>, as required by U.S. Law. This web site will not include information that can identify you. At most, the web site will include a summary of the results. You can search this web site at any time.”

# Additional Elements of Informed Consent

- Unforeseen risks statement
- Reasons for involuntary termination
- Additional costs to subject
- Consequences of decision to withdraw (e.g. impact on their health, treatment, personal welfare etc.)
- New findings will be communicated
- Approximate number of subjects in the study
- Payments to the subject are to be included in the document and when they will be paid (e.g. incentive, travel costs etc.)

# Key Terms Associated with Consent of Subjects

- Clinical investigation, study, or protocol
- Investigator and Key Personnel with ability to explain the study to the subject, document consent process
- Human subject
- Institutional Review Board
- **Minimal risk** means that the probability and magnitude of harm or discomfort anticipated in the research are not greater in and of themselves than those ordinarily encountered in daily life or during the performance of routine physical or psychological examinations or tests.” See the Common Rule at <http://www.hhs.gov/ohrp/humansubjects/guidance/45cfr46.html#46.102>.

# Key Terms Associated with Consent of Subjects

- **Legally authorized representative (LAR)** means an individual or judicial or other body authorized under applicable law to consent on behalf of a prospective subject to the subject's participation in the procedure(s) involved in the research (45 CFR 46.102(c)) IRBs may wish to consult with legal counsel when deciding who can serve as an LAR for subjects of proposed research. **Healthcare Power of Attorney**
- Family member may or may not be an LAR.
- Assent is consent document for subjects under 18 years old; all minors are asked for assent but parents' legal consent can overrule minor's refusal.
- Ward is someone placed under the protection of a legal guardian. A court may take responsibility for the legal protection of an individual, usually either a child or incapacitated person, in which case the ward is known as a **ward of the court**, or a **ward of the state**.
- A **legal guardian** is a person who has the legal authority to care for the personal and property interests of another person, called a ward.



# Key Terms Associated with Consent of Subjects

**Health Information Portability and Accountability Act (HIPAA)** is not a consent but a separate document or authorization signed by the subject to allow researchers access to personal health information (PHI) per the HIPAA Privacy Rule of US Dept. of Health and Human Services.

- **IF you know who your subject is..HIPAA authorization is required.**
- **IF you or others could find out who the subject is using date of birth or hospital numbers...HIPAA authorization is required.**
- **Violation of the HIPAA Privacy Rule is subject to state and federal law and includes fines.**

**What research does not require a signed HIPAA authorization?**

- Study granted a waiver of consent/authorization by IRB approval
- Research using completely de-identified data; often already collected and stored in an anonymous (de-identified) record
- Research using a limited data set excluding PHI

# Key Definitions Associated with Consent of Subjects

- **Experimental Research Subject's Bill of Rights**
- **California law**, under Health & Safety Code '24172, requires that any person asked to take part as a subject in research involving a medical experiment, or any person asked to consent to such participation on behalf of another, is entitled to receive a copy of these Bill of Rights **written in a language in which the person is fluent.**
- Please visit <http://ora.research.ucla.edu/OHRPP/Pages/BillofRights.aspx> for more information and a list of over 30 translations, including access to a copy in Braille.
- **Documentation of this can be an original copy kept with the signed informed consent or you can create a note signed by the investigator as part of the consent process. The law requests this list be given prior to discussing the study informed consent**

# HIPAA Authorization Waivers

- **PI and IRB must certify that research:**
  1. Could not practicably be conducted without a waiver
  1. Could not practicably be conducted without protected health information (PHI)
  1. Poses minimal risk to privacy based on written assurance that the PHI will not be reused or disclosed and that there is an adequate plan to protect identifiers.
  1. To accomplish this, PI fills out Waiver of Consent/Authorization section of the webIRB application
  1. Research released by a waiver must be tracked for disclosure to the subject

# What is the Role of the 'Impartial Witness' in the Informed Consent Process?

## ICH E-6 GCP\* 1.26 Impartial Witness:

**“A person, who is independent of the trial, who cannot be unfairly influenced by people involved with the trial, who attends the informed consent process if the subject or the subject’s legally acceptable representative cannot read, and who reads the informed consent form and any other written information supplied to the subject”**

\*ICH E-6 is the International Conference on Harmonization, document E-6, explaining Good Clinical (Research) Practice.

# Written Consent General Guidelines

## What is submitted to the UCLA IRB as regulatory documents?

- Obtained from subject or legally authorized representative (health care power of attorney, spouse)
- For a minor: parental consent (one or both) and assent of youth or child, unless child emancipated
- No exculpatory language
- Obtained before any study procedures are performed on the subject
- Documentation in the subject's medical/research record the process of discussion and risks and documents given to subject.

# FDA Inspection Findings of Consent Violations

## What is submitted to the UCLA IRB as regulatory documents?

- Enrolled without any documentation of informed consent through the use of an IRB approved consent form
- Study assessments and screening procedures conducted on screening visit, prior to consent being *signed*
- Subject signed an outdated version of consent
- Subject randomized prior to consent
- Failure to re-consent subjects using the correct revised consent form per IRB requirements
- Failure to obtain assent as deemed an IRB requirement

# More FDA Inspection Violations

- Subject signed a sub-study consent but not the consent for the main study.
- Subject representatives documented as being non-English speaking; they signed an English informed consent.
- Consent form indicated use of placebo; however, the study did not use a placebo.
- Site staff fabricated LAR signatures.
- No documentation that a copy of the consent was provided to the subject.
- Subjects did not date the informed consent form.

# FDA Inspections Compliance Program Guidance Manual (CPGM 7348.811)

FOOD AND DRUG ADMINISTRATION  
COMPLIANCE PROGRAM GUIDANCE MANUAL

PROGRAM 7348.811

PROGRAM 7348.811

CHAPTER 48- BIORESEARCH MONITORING

CLINICAL INVESTIGATORS AND SPONSOR-INVESTIGATORS

Date of Issuance: December 8, 2008

Guidance for FDA Staff

SUBJECT: Clinical Investigators and Sponsor Investigators		IMPLEMENTATION DATE December 8, 2008
REVISION:		COMPLETION DATE Continuing
DATA REPORTING		
PRODUCT CODES	PROGRAM ASSIGNMENT CODES	
FACTS does not require product codes for Bioresearch Monitoring Inspections	09811 Food Additives	
	41811 Biologics ( Cell; Gene Transfer)	
	42811 Biologics (Blood)	
	45811 Biologics (Vaccines)	
	48811 Human Drugs	
	68811 Animal Drugs	
	83811 Medical Devices	



# FDA Inspections CPGM 7348.811

## F. HUMAN SUBJECTS' RECORDS

### 1. Informed Consent

#### a. **Describe** the informed consent process.

For the study being inspected, include the following information:

~~\*Current changes\* {ED: Retain "current changes" only in sections where changes made}~~  
DATE OF ISSUANCE 12/08/08 PART III - PAGE 6 of 20  
FORM FDA 2438<sub>g</sub> (electronic-09/2003)

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PROGRAM 7348.811

- i. Who (investigator, nurse, study coordinator, etc.) explained the investigational study and consent document to prospective study subjects, and was it provided in a language understandable to each subject?
- ii. How did the informed consent process take place? (e.g., was this explanation given orally, by video, through a translator, etc.)?
- iii. Was consent obtained prior to enrollment in the study (i.e., prior to performance of any study related tests and administration of the test article)?
- iv. After signing and dating the informed consent document, was each subject or the subject's legally authorized representative given a copy of the consent document?
- v. Was the appropriate IRB-approved version of the informed consent document used for all subjects?

# FDA Inspections CPGM 7348.811

- vi. If the short form was used (per 21 CFR 50.27(b)(2)), was the informed consent process appropriately documented?
  - a. Did the subject or the subject's representative sign the short form?
  - b. Was a witness present, who signed the short form and the copy of the summary?
  - c. Did the person actually obtaining the consent sign a copy of the summary?
  - d. Is the case history documented to show whether a copy of the summary and the short form were given to the subject or the subject's representative?
- vii. **Review** the IRB approval letter for the study. Did the IRB stipulate any conditions for the informed consent process and, if so, did the clinical investigator follow those instructions/stipulations?

# FDA Inspections CPGM 7348.811

b. **Review** the informed consent documents signed by the subjects. If the number of subjects at the site is relatively small (e.g., 25 or fewer subjects), review 100% of the informed consent documents. For larger studies, a representative number of informed consent documents should be reviewed (for example, may be specified in a sampling plan provided with the assignment).

**Determine** the following:

- i. Did the subject or the subject's legally-authorized representative sign the informed consent document prior to entry into the study? If the subject did not sign the informed consent document, **determine** who signed it and that person's relationship to the subject. **Describe** how the clinical investigator determined that the person signing the informed consent document was the subject's legally-authorized representative.

*\*Current changes\* {ED: Retain "current changes" only in sections where changes made}*

DATE OF ISSUANCE 12/08/08

PART III - PAGE 7 of 20

FORM FDA 2438<sub>g</sub> (electronic-09/2003)

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- ii. Whether subjects signed the version of the informed consent document that was current at their time of entry into the study.
- iii. For pediatric studies, was assent obtained from the subjects in addition to the permission of the parents?
- iv. Whether the written consent document(s) or oral consent complies with the eight (8) required elements in 21 CFR 50.25(a).

# FDA Inspections CPGM 7348.811

- If any problems are found (e.g. investigator failed to obtain consent from one or more subjects, consent was not obtained prior to enrollment in the study, investigator failed to use the correct informed consent document, etc.), the sample should be expanded to determine the extent of the problem.
- Collect documentation to support each observation.
- Report the total number of informed consent documents that were reviewed and the number of documents exhibiting the problem.