Standard Operating Procedure

EXTENDED ROLES OF NON-MEDICAL CLINICIANS FOR TYPE A AND B CLINICAL TRIAL OF AN INVESTIGATIONAL MEDICINAL PRODUCT (CTIMP)

SETTING Trust-wide for research conducted within UHBW and/or sponsored by

UHBW.

AUDIENCE Non-medical prescribers (NMPs) (Nurses, Midwives, Pharmacists, and

other allied healthcare professionals (AHPs) who have completed an accredited prescribing course and registered their qualification with their

regulatory body and are involved in the handling, prescribing,

administration or management of investigational medicinal products within

clinical trials

ISSUE Non-medical prescribers involved in the consenting, prescribing, screening

and eligibility of potential participants to Clinical Trial of an Investigational

Medicinal Product (CTIMP).

QUERIES Contact Research Operations Manager or Research Matron on 0117 34

20233 or Alternatively e-mail: research@uhbw.nhs.uk.

Document History

SOP number		SC	SOP 022		SOP Version		1.4	
Effective Date		10/APR/2024		Review Date		10/APR/2026		
Review date	Versi numb	_	Version date	Effe date	ctive	Author/ Reviewer		Authorised by
N/A	V1.0		25/JUL/2018	27/J	UL/2018	Valentino Oriolo		Diana Benton
OCT/2020	V1.1		16/OCT/2020	16/N	IOV/2020	Nic Manning		Jess Bisset
JAN/2022	V1.2		11/JAN/22	07/F	EB/2022 Nic Manning		Jess Bisset	
FEB/2023	V1.3		22/FEB/2023	01/A	PR/2023	Lucy Riddolls		Margie Pavey
DEC/2023	V1.4		22/DEC/2023	10/A	PR/2024	Nic Manning		Jess Bisset

Version Number	Reason for change
1.0	N/A - original
1.1	Minor updates as part of biennial review including expanding SOP to reference non-medical prescribers outside of nursing (e.g. Pharmacists and other AHPs)
1.2	Minor clarifications throughout to ensure clear that SOP is describing processes required for NMPs to prescribe as well as eligibility sign off.
1.3	Departmental name change from Research & Innovation to Research & Development. Updated throughout SOP as a minor amendment.
1.4	Minor updates as part of biennial review

1. Introduction

The Medicines for Human Use (Clinical Trials) Regulations state that 'the decision whether a subject is eligible for entry into a clinical trial is considered to be a medical decision and... must be made by a medically qualified doctor... the medical care given to, and medical decisions made on behalf of, subjects shall always be the responsibility of an appropriately qualified doctor or, when appropriate, of a qualified dentist' (Part2 (11) of Schedule 1 to SI 2004/1031).

Over the past decade, the roles of Advanced Nurse Practitioners (ANPs), Advanced Care Practitioners (ACPs) including Emergency Nurse Practitioners (ENPs), Clinical Nurse Specialist (CNSs), Allied Health Professionals & Pharmacists have developed into autonomous practitioners: their skills include non-medical prescribing, assessment, diagnosis and management of patients' health needs and complex clinical decision making (Royal College of Nursing 2012). Thus, the MHRA now advises that the process of assessing compliance with eligibility criteria can be delegated to an appropriately qualified and trained non-medically qualified professional, provided that this has been risk assessed, is clear in the protocol and Research Ethics Committee (REC) application and there is overall oversight by a medically qualified doctor (MHRA electronic communication to UHBW R&D Department 30.04.2018).

2. Purpose

The purpose of this document is to describe the process NMP's should follow when consenting, prescribing, screening, and deciding if a subject is eligible for entry into Clinical Trial of an Investigational Medicinal Product (CTIMP). CTIMPs are categorised based on the potential risk to the participants. Risk in a clinical trial is defined as the likelihood of a potential hazard occurring and causing harm to the trial subject/participant and/or an organisation (MHRA 2014). It is anticipated that NMP's will assess eligibility criteria for Type A and Type B CTIMPs only (see Table 1).

3. Scope

3.1 In Scope: Type A and B CTIMPs hosted by and/or sponsored by University Hospitals Bristol and Weston NHS Foundation Trust (UHBW).

3.2 Out of scope: All other research; Type C CTIMPs; UHBW sponsored studies running at other sites.

4. Responsibilities

- The Chief Investigator (CI), Principal Investigators (PIs) and Sponsor are responsible for ensuring the research protocol clearly documents whether NMPs are permitted to confirm eligibility/prescribe IMP.
- The CI, PI and sponsor will be responsible for completing the delegation log and the risk
 assessment on page 5 (please see appendix 1 for risk assessment pro-forma). Please
 note that this is not the risk assessment used by the sponsor to assess feasibility of
 studies. This would include documenting any risks associated with NMP's signing to
 confirm the eligibility criteria or prescribing IMP and the mitigation for those risks.
- The sponsor is responsible for ensuring that the research protocol has been approved by the relevant REC.
- The CI and PI are responsible for ensuring that any NMP completing the eligibility review or prescribing IMP meet the following requirement and that the relevant certificates are provided:
 - Good Clinical Practice trained (certificate of completion-within previous three years)
 - Informed Consent trained (if consenting –certificate of completion and evidence of competence)

- Non-medical prescriber qualified and registered with appropriate regulatory body e.g. Nursing and Midwifery Council (NMC) statement of entry
- Proficient in system based physical assessment (University accredited) (If undertaking physical assessment)
- Three years in current specialty (employment record and / or Curriculum Vitae)
- All documentation should be filed in the Investigator Site File (ISF).
- The NMP has a responsibility to maintain their clinical competence as per their regulatory body guidance and provide evidence of up to date GCP training.
- The NMP will be proficient in distinguishing Type A, Type B and Type C CTIMPs and if unsure will liaise with CI/PI.

Trial Categories based upon the potential risk associated with the investigational medicinal product	Examples of types of clinical trials
Type A: no higher than that of standard medical care	Trials involving IMPs authorised in any EU Member State if: They relate to the authorised range of indications, dosage, and form, or They involve off-label use (such as in paediatrics and in oncology), if this off label use is established practice and supported by sufficient published evidence and/or guidelines
Type B: somewhat higher than that of standard medical care	 Trials involving IMPs authorised in any EU Member State if: Such products are used for a new indication (different patient population/disease group), or Substantial dosage modification is made for the licensed indication, or If they are used in combination for which interaction are suspected Trials involving medicinal products not authorised in any EU Member State if the drug substance is part of a medicinal product authorised in the EU. (A grading of <i>Type A</i> may be justified if there is extensive clinical experience with the product and no reason to suspect a different safety profile.
Type C: markedly higher than that of standard medical care	Trials involving IMPs not authorised in any EU Member State. (A grade other than <i>Type C</i> may be justified ig there are

extensive class data or non-clinical and clinical evidence

MHRA (2014) Good Clinical Practice (page 72)

5. Abbreviations and Definitions

Abbreviation	ns
ACP	Advanced Care Practitioner
AHP	Allied Health Professional
ANP	Advanced Nurse Practitioner
CI	Chief Investigator
CNS	Clinical Nurse Specialist
CTIMP	Clinical trial of an Investigational Medicinal Product
ENP	Emergency Nurse Practitioner
GCP	Good Clinical Practice
ISF	Investigator Site File
MHRA	Medicines and Healthcare products Regulatory Agency
NMC	Nursing and Midwifery Council
NMP	Non-medical prescriber
PI	Principal Investigator
RCN	Royal College of Nursing
REC	Research Ethics Committee
UHBW	University Hospitals Bristol and Weston NHS Foundation Trust

6. Screening

- The NMP will need to screen the potential participant to ensure that they meet all of the inclusion criteria and none of the exclusion criteria
- The NMP will review all clinical investigations / reports in relation to the inclusion and exclusion criteria and the participant will not be recruited if any investigations fall outside the inclusion or inside the exclusion criteria.
- The NMP will act on any abnormal findings if the patient is clinically unwell or will inform the responsible team caring for the patient.
- If the results of assessments change so that a patient meets the eligibility criteria (e.g., inflammatory markers post infection) the NMP can re-assess the participant for eligibility if appropriate and <u>if allowed by the protocol</u>.
- If the NMP is not undertaking eligibility review but is prescribing IMP, they must ensure
 the above steps have been taken and that eligibility has been confirmed by a suitably
 qualified individual and documented appropriately

6.1 Governance

- The NMP completing the eligibility review/prescribing IMP will be responsible for ensuring that they have access and have familiarised themselves with the current approved version of the protocol.
- The NMP assessing the participant for eligibility/prescribing IMP will be responsible for completing and signing the relevant sections of the case report form.
- The NMP completing the eligibility review/prescribing IMP will be responsible for liaising with the research team and ensure all relevant documentation is filed in the ISF.
- If completing the eligibility criteria, the NMP will be responsible for documenting the eligibility review in the medical notes.

 The PI will need to record all staff permitted to review the eligibility/prescribe IMP on the delegation log within the site file and this should be signed by the staff member and PI

7. Dissemination and training in the SOP

This SOP will be disseminated to applicable relevant staff (including R&D) and will be available on the R&D website.

Plan Elements	Plan Details
The Dissemination Lead is:	Research Operations Manager
Is this document: A – replacing the same titled, expired SOP, B – replacing an alternative SOP, C – a new SOP:	A – replacing the same titled, expired SOP
If answer above is B: Alternative documentation this SOP will replace (if applicable):	
This document is to be disseminated to:	All applicable research staff (including R&D)
Method of dissemination:	For major updates to the SOP dissemination will be: 1. To Chief Investigators of UHBW Sponsored CTIMPs 2. Research Unit leads across UHBW 3. Head of Research Governance at UoB (where SOP is applicable) All updates (major and minor to the SOP) will be: 1. Updated on the trust Document Management System 2. Updated on the R&D website 3. Cascaded in the R&D e-bulletin
Is Training required:	All staff whose activities are subject to this SOP should ensure that they read and understand the content of the SOP. The personal training log of the individual (and the Investigator Site File/Trial Master File if required) should be completed to document that the content of this SOP has been read and understood as described in SOP_007 Research Training UHBW

REFERENCES	MHRA (2014) Good Clinical practice Guide. Third impression. The Stationary Office. UK

	BNF Non-medical prescribing (2020) https://bnf.nice.org.uk/guidance/non-medical-prescribing.html Accessed 16.10.2020			
RELATED DOCUMENTS AND PAGES	SOP_006 Management of Investigational Medicinal Products (IMP) SOP_007 Research Training SOP_008 Investigator Oversight of Research Latest versions can be found on the Research & Development section on			
	UHBW's website: http://www.uhbristol.nhs.uk/research-innovation			
AUTHORISING BODY	Trust Research Group			
SAFETY	N/A			
QUERIES AND CONTACT	Research and Development Department email: research@uhbw.nhs.uk 0117 34 20233			
AUDIT REQUIREMENTS	R&D departmental Quality Management System audits are undertaken annually.			

Appendix 1: Risk Assessment* Check List

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Study name:				
Sponsor(s):				
Risk assessment conducted by:				
Name of NMP: Regulatory Body: Registration Number Expiry date:				
1. SPONSORSHIP AND RESEARCH GOVERNANCE				
Risk	Likelihood (L/M/H)	Impact (L/M/H)	Concerns	(Recommendations for) mitigation and management
The risk is that a medically qualified Doctor or Dentist (as applicable) may not be available to review and sign off eligibility/prescribe IMP (Schedule 1, Part 2 (11) of SI 2004/1031) for the duration of the study.			Patients may miss the opportunity to be recruited into research.	The risk will be mitigated by permitting NMP to review and sign off eligibility/prescribe IMP if the competencies below are met for the duration of the study.
Competencies to be assessed prior to implementing recommend		ge the risk		
The NMP must meet the following criteria (please tick as appropriate and provide evidence in ISF) for the duration of the study:	YES (sign and date each criteria please)	NO (exit risk assessment)		
 Good Clinical Practice trained (certificate of completion – in date) 				
 Informed Consent trained (if consenting - certificate of completion. Enter n/a if not consenting) 				
 Non-medical prescriber qualified and registered with appropriate regulatory body 				
 Proficient in system based physical assessment (University accredited) (if undertaking physical assessment. Enter n/a if not) 				
 A minimum of three years in specialty (employment record or Curriculum Vitae) 				
Demonstrates in depth knowledge of the study protocol				
The NMP will be permitted to complete the eligibility review/prescribe The protocol specifies that they are permitted to complete eligible. The sponsoring organisation permits NMP to complete eligible. The overall oversight remains with the CI/PI. The names of the permitted team members have been recompleted.	ligibility review/prescribe I bility review/prescribe IMP	MP and this has been	approved by REC	
Understood and approved by				
Principal Investigator:	Print:		Sign:	Date:
Sponsor representative:	Print:		Sign:	Date:
NMP:	Print:		Sign:	Date:

^{*}Please note risk assessment must be completed for each clinical trial