

**Effective Date:** 06/09/2017

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**NHS Foundation Trust** 

### Title: Non-Commercial Study Archiving of Investigator Site file and **Pharmacy Site File (if applicable)**

For Trust-wide SOPs, please check this is the <b>latest version of the SOP</b> on the Joint Research Office website: <a href="www.ucl.ac.uk/jro">www.ucl.ac.uk/jro</a> .		
For Departmental SOPs, please check this is the <b>latest version of the SOP</b> with the Research Unit QA Manager.		
Author: Name: Stuart Braverman Position: Research Data & Information Manager		
Signature Date		
Approved by: Name: Isla-Kate Morris Position: Research Quality & Safety Manager		
Position:		
Signature Date		
Authorised by: Name: Bryan Williams Position: Director of Research Support		
Signature Date		



Hospital

**SOP Number and Version:** 

UCLH SOP 10, Version 2.1



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Revision Chronology:			
Version Number:	Effective date:	Reason for change:	Author:
UCLH SOP 10, V1	14/02/2014	Initial standardised SOP for use within UCLH	Daniel Heather
UCLH SOP 10, V2	03/04/2017	SOP updated to include new archiving retention periods for ATIMPs and CTIMPs; separate archiving process for commercial studies; further details regarding JRO process for archiving and clarification on archiving patient identifiable research-related records.	Stuart Braverman
UCLH SOP 10, V2.1	06/09/2017	SOP updated to remove reference to UCL Records Office address and archiving warehouse, as any archiving requests are solely coordinated by the JRO and UCL Records team via email. Reference to UCL Records Office costs have also been removed, as the service is offered free of charge for applicable research studies. Minor changes made throughout document. A template Investigator Site File Contents Checklist has been included as an appendix (Appendix 2) to aid researchers in maintaining essential documents.	Stuart Braverman

#### **ACRONYMS**

SOPs Standard Operating Procedures

CCTU Cancer Clinical Trial Unit CRF Clinical Research Facility

RN Research Nurse LRN Lead Research Nurse

R&D Research and Development Department

QA Quality Assurance
DM/S Data Manager/Staff
GCP Good Clinical Practice

SF Site File

MHRA Medicines and Healthcare Products Regulatory Agency

PI Principal Investigator
TMF Trial Master File
ISF Investigator Site File

CTIMP Clinical Trial of an Investigational Medicinal Product

ATIMP Advanced Therapy Trial of an Investigational Medicinal Product

Non-CTIMP Any research study that is not a clinical trial of an investigational medicinal

product

**UCL ROS** 

Database University College London Records Office System Database

ECG Echocardiogram
ICF Informed Consent form

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#### 1. BACKGROUND

This Standard Operating Procedure (SOP) describes the process of archiving essential documents (ISF/TMF/Pharmacy file) of non-commercial studies such as CTIMPs, ATIMPs and non-CTIMP studies carried out in UCLH. ISF and Pharmacy files (if applicable) should be archived through the **University College London (UCL) Records Office.** 

The purpose of this SOP is to lay out the correct **archiving storage and retrieval procedures** for ISF and Pharmacy files for non-commercial studies.

In instances where the below conditions do **not** apply (i.e. commercially sponsored studies), the records will be archived via an accredited commercial third party. To discuss in more detail, please contact the UCLH Archivist and Records Manager annie.lindsay@uclh.nhs.uk.

#### 2. PURPOSE

The sponsors should have an index of the documents to be filed in the ISF. If the sponsor does not have an index, the **UCLH SOP 8 on Essential Documents and ISF/TMF** outlines a list of documents which need to be filed in the ISF (Appendix 2).

In cases where the PI is also the CI and the sponsor has delegated to the CI the archiving of the TMF, then this should follow the same process as of the ISF and Pharmacy Site File.

#### 3. PROCEDURE

	Actions (When? How?)	Responsible persons (Who?)
1	The Principal Investigator (PI) or delegated person (typically Data Manager (DM)/Staff or Research Nurse (RN)) is responsible for ensuring that all essential documentation (ISF and Pharmacy file) for the study is archived as per current regulations <sup>1</sup> (EU Clinical Trials Directive (2001/20/EC), International Conference for Harmonisation – Good Clinical Practice (ICH-GCP) Guidelines and GCP Directive). Records pertaining to CTIMPs must be archived for 25 years. Records pertaining to ATIMPs must be archived for 30 years. Paperwork for other studies must be archived for the duration stated in the protocol by the sponsor. UCL Records Office retains the documents.	P.I/Delegated Person (e.g. Data Staff/Resear ch Nurse)
	Archiving Pharmacy Files The PI or delegated RN/DM needs to inform Pharmacy and collect the Pharmacy file from Pharmacy and archive it with the ISF.	
2	Studies should be archived when the <b>Sponsor has instructed or agreed for the site</b> to archive the ISF and Pharmacy files. The actions outlined in the <b>UCLH SOP 9: Study Close Down</b> should be carried out prior to starting the archiving process.	Sponsor

<sup>&</sup>lt;sup>1</sup> Please note the archiving regulatory requirements are dependent on the type of study.

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3	Providing that one of the following conditions are met, the records should be archived via UCL Records Office:  The legal sponsor for the study is UCL The local investigator holds a contract (honorary or substantive) with UCL The study is hosted at a UCL managed or joint UCL/UCLH managed facility (e.g. UCL/UCLH Clinical Research Facility; UCL Institute of Neurology etc.)  **In instances where the conditions above do not apply, the records will be archived via an accredited commercial third party. To discuss in more	UCL Records Office/accred ited commercial third party
	detail please contact the UCLH Archivist and Records Manager annie.lindsay@uclh.nhs.uk.	
4	Where these conditions do apply, the member of the research team undertaking archiving should review the instructions contained in the <b>Research Records Transfer Form</b> (Appendix 1), which are reproduced below for convenience:	Delegated research team member undertaking
	<ol> <li>Please contact the UCL Records Office via email (records.office@ucl.ac.uk) to request boxes. Boxes not supplied by the UCL Records Office will NOT be accepted. Box dimensions are as follows 360mm (L) x 140mm (H) x 255mm (W). Please stipulate:</li> <li>Number of boxes required</li> <li>Location where boxes should be delivered to</li> </ol>	archiving
	2) Once you have the boxes, <b>write a temporary running order</b> (in pencil only) on the front of each box (1, 2, 3). Do NOT write or stick anything else on the boxes.	
	3) Put the ISF and Pharmacy site file (if applicable) in the boxes. <b>Remove papers from bulky ring-binders and lever arch files</b> as these take up space. Do not place additional boxes (e.g. magazine files) inside the boxes.	
	4) List the box number and contents of that box on the Research Records Transfer Form (Appendix A). Complete the form in Microsoft Word format and email as an attachment to <a href="mailto:randd@uclh.nhs.uk">randd@uclh.nhs.uk</a> The form will not be accepted in hardcopy or as a PDF.	
5	JRO staff will enter the relevant information onto the UCL ROS (Records Office System) Database on receipt of the Research Records Transfer Form (Appendix A). JRO staff will then e-mail the research team representative the ROS output form, containing the unique box reference number generated by the UCL ROS system. There will be one output form per box.	JRO
6	The research team representative will insert the information generated by UCL ROS into the boxes and will e-mail <a href="mailto:randd@uclh.nhs.uk">randd@uclh.nhs.uk</a> to confirm this	Delegated research

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	has been done.	team Foundation Trust member undertaking archiving
7	On receipt of the above mentioned e-mail, JRO representatives will arrange for the UCL Porters to collect the boxes from their current location and transferred to the UCL Records Office. The overall archiving process time takes on average 4 weeks to complete.	JRO
8	The JRO will keep a record of the box reference numbers and will request the return of 1 box every 3 months, for monitoring purposes.	JRO

#### **Patient Hospital/Medical Notes**

Please refer to the UCLH Records Management Policy. Under **NO** circumstances should patient/medical notes be archived by the UCL Records Office. Other research related paperwork containing patient identifiable data (for example ICFs, lab reports and ECG data) may be archived in accordance with this SOP.

#### Retrieval of boxes

In the event that boxes need to be retrieved from Archiving, study teams should e-mail <a href="mailto:randd@uclh.nhs.uk">randd@uclh.nhs.uk</a> with study title and R&D reference number, as well as details of where the boxes should be delivered to. The JRO Data and Information Management team will liaise with the UCL Records Office to organise the retrieval of these boxes.

#### **Destruction of Archived Boxes**

The UCL Records Office will be in contact when the **stated archiving time** for a box has expired to see if documents can be destroyed. The relevant RN/PI should contact the Department where the PI was conducting the study to confirm destruction. If further archiving time is required, the research nurse of PI should inform the Records Office via **records.office@ucl.ac.uk**.

#### 4. IMPLEMENTATION & TRAINING

Staff following this SOP must confirm they have read and understood the procedures outlined above by completing their relevant training log as a record of acknowledgement. It may be necessary to ensure staff are trained in the implementation of specific SOPs.

#### 5. PUBLICATION & COMMUNICATION

This SOP is authorised and published on the JRO website: <a href="http://www.ucl.ac.uk/jro.">http://www.ucl.ac.uk/jro.</a> The latest version of the SOP will be made available on the JRO website.

The original fully signed master copy is stored in a designated binder within the JRO and maintained by the JRO Research Quality & Safety Manager (or Research Unit QA Manager if a Departmental SOP).

#### 6. TEMPLATES ASSOCIATED WITH THIS DOCUMENT

	Document	Stored
1.	Research Records Transfer Form	ReDA SOP Store and JRO Website

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#### 7. REFERENCES

**UCLH SOP 2** Definition of Responsibilities Essential Documents and ISF/TMF **UCLH SOP 8 UCLH SOP 9** Study Close Down **UCLH Policy Records Management Policy** 

#### 8. APPENDICES

Appendix 1: Research Records Transfer Form Appendix 2: Site File Contents Checklist





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**Appendix 1: Research Records Transfer Form** 



Joint Research Office

#### RESEARCH RECORDS TRANSFER FORM

#### **INSTRUCTIONS**

- Please contact the UCL Records Office (<u>records.office@ucl.ac.uk</u>) to request boxes first. Boxes not supplied by the UCL Records Office <u>will not</u> be accepted. Box dimensions are as follows 360mm (L) x 140mm (H) x 255mm (W). Please stipulate:
  - a) Number of boxes required
  - b) Location boxes should be delivered to
- Once you have the boxes write a temporary running order (in pencil only) on the front of each box (1,2,3). Do not write or stick anything else on the boxes
- Put the records in the boxes. Remove papers from bulky ring-binders and lever arch files as these take up space. Do not place additional boxes (e.g. magazine files) inside the boxes.
- List the box number, and contents of that box on this form as shown below. Ensure you complete the form in Microsoft Word format and email as an attachment to randd@uclh.nhs.uk.

Details of	s of records		
Box	Contents list: Please include type of documents (e.g. CRFs, Protocol,	Covering dates	
number	Informed Consent Forms etc)		
	(To insert a new column please right click on the last column and select inset>column down and complete as appropriate)		
1/3	Patient log, Monitoring, Correspondence, Site initiation and training,	06/04/2009 -	
	CVs	19/03/2012	
2/3	Administrative binder: patient log, monitoring, correspondence, site	22/04/2010 -	
	initiation and training, CVs, financial disclosures, investigator agreement	07/06/2012	
3/3	Patient 2, 3 and 4 binder: enrolment and informed consent forms,	22/04/2010 -	
	discharge summary	07/06/2012	

- The boxes will be registered in Records Office System (ROS) by the Joint Research Office and you will be provided with a receipt to put in the box and a unique reference number which will have to be written on the box. One UCL ROS output form per box needs to be included.
- JRO will then arrange collection of the box for storage.

#### **PLEASE NOTE**

- Only the Investigator Site File (ISF) and Case Report Forms (CRFs) should be transferred offsite. Under no circumstances should patient notes/medical records or other source documents leave UCLH.
- Please ensure the ISF contains all records stipulated by the study sponsor as per their SOP.
   In the absence of a sponsor SOP for the Site File please use the UCLH SOP 8 for Essential Documents and the Study File (TMF/ISF).

#### YOUR DETAILS

Details of depositor	
Name of person transferring records	
Job Title (e.g. Research Nurse, Data	
Manager)	
Email and telephone number	

Details of transfer	
Number of boxes	

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Date form completed	NUC Formulation T	a4
Location to be collected from (please be as	NHS Foundation T	rust
specific as possible)		

Study details	
R&D number	
Short title	
Full title of study	
P.I. name	
Sponsor name	

Details of	Details of records in each box		
Box number	Contents list: Please include type of documents (e.g. CRFs, Protocol, Informed Consent Forms etc.)	Covering dates	
	(To insert a new column please right click on the last column and select inset>column down and complete as appropriate)		

#### (For JRO use ONLY)

					DOC Ameleine
					ROS Archive
					Ref Number
					(This reference
				Aughing Food	will have to be
				Archive End	written on the
Short Ref	Box number	R&D No	JRO Ref Number	Date	box)



University College Hospital



# University College London Hospitals Appendix 2 – Site File Contents Checklist

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Title:				
Protocol number:	ISRCTN/	Clintrial	Gov number	r·
EudraCT number:		vestigato		'-
REC number:		l Investig		
R&D number:			,	
1.02 1.01				
TABLE OF CONTENTS		Study	Y N N/A	Comments
Contacts List		Туре		
1.0 CORRESPONDENCE				
1.1 Emails/Letters/Telephone				
Conversation/Meetings Minutes				
2.0 SPONSORSHIP / R&D MANAGEMENT				
2.1 Scientific Peer review				
2.2 Risk Assessment				
2.3 Feasibility				
2.4 Insurance certificate / statement				
2.5 Clinicaltrials.gov or ISRCTN registration				
2.6 NIHR adoption letter				
2.7 NHS IRAS forms				
2.8 NHS permission/Site Capacity & Capability	/			
2.9 Sponsor open to recruitment letter/Sponso	rs			
approval letter if academic or other industry, i.e. fur	nded			
by industry but sponsored by University.				
3.0 AGREEMENTS AND FINANCE				
3.1 Finance and costings budget template				
3.2 HRA Statement of Activities/Schedule of E	vents			
(studies approved from May 2016)				
3.3 Grant application and award letter				
3.4 Signed agreements (e.g. CI, CTA/CTSA, la	ab,			
supply, MTA)  3.5 LCRN funding letters				
3.6 Invoices and payments				
3.7 Reports to funder				
4.0 REGULATORY APPROVALS (where applica	blo to			
study type)	ble to			
4.1 IRAS applications				
4.2 REC Letters (provisional and favourable or	ninion)			
4.3 HRA Approval and correspondence (studie				
approved from May 2016)				
4.4 MHRA Notice of Acceptance Letter OR	(	CTIMP		
Email confirmation that study does not fall under Clinical Trial Regulations.	er the			
4.5 MHRA No objection for a clinical investigat		Medical devices		
4.6 HTA certificate	T	Гissue		
4.7 ARSAC research certificate / IRMER appro		Radiation		
4.8 GTAC favourable opinion		Gene herapy		
4.9 Amendment notifications		- · J		
4.10 Amendment acknowledgement / approval	I			
letters				

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4.11 REC Annual Progress Reports	Jity	NHS Foundation Tru
5.0 PROTOCOL		
5.1 Current approved signed protocol		
5.2 All previously approved versions of protocol		Or file note to where located
5.3 Version History Log		
5.4 Protocol amendments		
5.5 Log of (Protocol or GCP) Deviations / Violations /		
Potential Serious Breaches / Serious Breaches / Urgent		
Safety Measures		
5.6 Sample protocol violation and deviation form		
6.0 PARTICIPANT INFORMATION		
6.1 Patient Information Sheet(s)		
6.2 Consent Form(s) 6.3 GP letter(s)		
6.4 Patient Contact Card(s)		
6.5 Patient Diary Card(s)		
6.6 Signed consent forms		
6.7 Version History Log		
6.8 All previously approved versions of PIS, ICF and		Or file note to where
GP letters		located
6.9 Patient Screening and Enrolment Log		Todatou
6.10 Identification Code List		
6.11 Randomisation code (if applicable)		
6.12 Registration/Randomisation faxes (if applicable)		
6.13 Sent GP letters		
7.0 RESEARCH TEAM		
7.1 Delegation Log (signed and dated)		
7.2 CV / GCP certificates (signed and dated)		Or file note to where located
7.3 Staff Training Records		Or file note to where located
7.4 Research Passport(s) and issued Honorary		Or file note to where
Research Contract(s) and/or Letter(s) of Access		located
8.0 PHARMACOVIGILANCE / SERIOUS ADVERSE EVENT (if applicable to study type)		
8.1 SAE reporting guidelines		
8.2 SUSAR/SAE Log		
8.3 Sample SAE form		
8.4 Completed SAE forms 8.5 24 hour contact card (if applicable)		
` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` `		
8.6 Sponsor SOPs		
8.7 Emergency Un-blinding details (if applicable)		
8.8 Correspondence to Sponsor reporting SAEs		
8.9 Development Safety Update Reports (annual		
safety reports)		
8.10 Drug company safety reports		
8.11 DSMC terms of reference		
8.12 DSMC meeting minutes / emails		
8.13 Safety meeting minutes / emails		
9.0 MONITORING AND AUDIT		
9.1 Monitoring plan		
9.2 Site Initiation Visit	CTIMP	

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9.3 Log of Monitoring Visits			NUC Foundation Tru
9.3 Monitoring reports	CTIMP		NHS Foundation Tru
9.4 Study close-out visit report			
9.5 Audit reports / certificate			
9.6 Inspection Findings			
10.0 STANDARD OPERATING PROCEDURES			
10.1 Relevant SOP and applicable policies			
11.0 TREATMENT RELATED DOCUMENTS (applicable to study type)			
11.1 Investigator Brochure (IB)	CTIMP Medical devices		
11.2 Summary of Product Characteristics (SPC)	CTIMP		
11.3 Version History Log			
11.4 Previous versions			Or file note to where located
11.5 IMP Dossier	CTIMP		
11.6 Sample labels			
11.7 Ordering and shipping records	CTIMP		
11.8 QP release	CTIMP		
11.9 Accountability Log			
, ,			
11.10 Destruction Log 11.11 Pharmacy Site File	CTIMP		Or file note to where
11.11 Friamiacy Site File	CTIIVIE		located
11.12 Essential requirements checklist	Medical devices		
11.13 CE-mark certificate(s) and confirmation from	Medical		
manufacturer the device will be used within specification	devices		
11.14 Declaration of Conformity	Medical		
44.45 Technical Deceies	devices		
11.15 Technical Dossier	Medical devices		
12.0 DATA MANAGEMENT (COLLECTION, HANDLING & STORAGE)	devices		
12.1 Data management plan			
12.2 Statistics plan			
12.3 Current template CRF/data collection tool			
12.4 Previous versions of CRF			
12.5 Instructions for CRF completion			
12.6 Copies of Completed CRFs			Or file note to where located
13.0 LABORATORY RELATED DOCUMENTS – IF APPLICABLE (if applicable to study type)			
13.1 List of Labs used with contact details			
13.2 List of Study specific equipment used			
13.3 Lab technical procedure/test certification of	CTIMP		Or file note to where
accreditation	OT:: /=		located
13.4 Normal Lab reference ranges for any tests or	CTIMP		Or file note to where
medical procedures in the protocol  13.5 Calibration records for technical equipment		$\vdash$	located
13.6 Arrangements for collection, storage and	Tissue		
shipment of blood and tumour tissue specimens	113346		
13.7 Record of collected body fluids/tissue samples	Tissue		
13.8 Record of retained body fluids/tissue samples	Tissue		
· · · · · · · · · · · · · · · · · · ·	1		<u> </u>

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13.9 Example letter requesting pathology sample	Tissue	NHS Foundation Tru
14.0 STUDY CLOSURE AND ARCHIVING		110
14.1 Declaration of the End of Study		
14.2 Archiving arrangements		
14.3 Summary of study findings		
15.0 MISCELLANEOUS		

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