**Investigator Site File Review Checklist**

The Investigator Site File review should be completed periodically by the trial team, as per JRO/INV/S02/07 SOP for the Preparation and Maintenance of the Trial Master File (TMF) / and Investigator Site File (ISF) for CTIMPs Sponsored by UCL.

Note: Contents of the ISF may vary depending on trial specifics. Indicate (i.e. NA) where an item is not applicable to the trial and add a reason in the comments column if necessary.

|  |  |  |  |
| --- | --- | --- | --- |
| **UCL Sponsor Number:** |  | **Date of Review:** |  |
| **Trial Short Title / Acronym:** |  | **Reason for Review:** | [ ]  Site Initiation [ ]  Periodic Review [ ]  End of Trial |
| **Name of Reviewer:** |  |

| **SECTION NAME** | **DOCUMENT NAME** | **FILED?** ***Yes/No/NA*** | **COMMENTS** ***(including date and version if applicable)*** |
| --- | --- | --- | --- |
| 1. **TRIAL ADMINISTRATION & MANAGEMENT**
 |
| * 1. **Contact Information**
 | UCL JRO Trial Contact Sheet |  |  |
| * 1. **Delegation Log**
 | Staff Signature and Delegation of Tasks Log |  |  |
| * 1. **Training**
 | Staff CVs (signed and dated) |  |  |
| Staff Training Records (e.g., GCP Certificates, Protocol and trial specific training) |  |  |
| * 1. **ISF Review**
 | ISF Review Checklist |  |  |
| * 1. **Meetings**
 | Meeting Agendas/ Minutes |  |  |
| * 1. **Newsletters**
 | Newsletters *(if applicable)* |  |  |
| * 1. **Correspondence**
 | General correspondence |  |  |
| 1. **UCL SPONSORSHIP**
 |
| * 1. **Insurance**
 | Insurance Certificate / Policy |  |  |
| * 1. **Approvals**
 | Open to Recruitment Letter |  |  |
| Site Closedown Letter |  |  |
| * 1. **Correspondence**
 | General correspondence |  |  |
| 1. **AGREEMENTS**
 |
| * 1. **Clinical Trial Site Agreement**
 | Model Non -Commercial Agreement (mNCA) |  |  |
| * 1. **Other Agreements**
 | Other Agreements *(if applicable)* |  |  |
| * 1. **Correspondence**
 | General correspondence |  |  |
| 1. **RESEARCH ETHICS COMMITTEE, HEALTH RESEARCH AUTHORITY & NATIONAL INSTITUTE FOR HEALTH RESEARCH (REC, HRA & NIHR)**
 |
| * 1. **REC**
 |
| * + 1. Approvals
 | REC/ GTAC Favourable Opinion Letter  |  |  |
| * + 1. Correspondence
 | General correspondence  |  |  |
| * 1. **HRA**
 |
| * + 1. Application
 | Statement of Activities/ Organisation Information Document (OID) |  |  |
| Schedule of Events/ Schedule of Events Cost Attribution Template (SoECAT) |  |  |
| * + 1. Assessment/ Approval
 | HRA Initial Assessment Letter |  |  |
| HRA Final Assessment/ Approval Letter |  |  |
| * + 1. Correspondence
 | General correspondence  |  |  |
| * 1. **NIHR**
 |
| * + 1. Portfolio Adoption
 | Portfolio Adoption Confirmation |  |  |
| * + 1. Correspondence
 | General correspondence  |  |  |
| 1. **MEDICINES AND HEALTHCARE REGULATORY AGENCY (MHRA)**
 |
| * 1. **Approvals**
 | MHRA Notice of Acceptance Letter - Clinical Trial Authorisation (CTA) |  |  |
| * 1. **Other Notifications**
 | Serious Breach notifications *(if applicable)* |  |  |
| Notification of Urgent Safety Measures *(if applicable)* |  |  |
| * 1. **Correspondence**
 | General correspondence  |  |  |
| 1. **SITE SPECIFIC APPROVALS**
 |
| * 1. **Site Approval**
 | Trust Confirmation of Capacity & Capability/ R&D NHS permission letter / Site approval (NHS R&D Management Approval letter for Research) |  |  |
| * 1. **End of trial**
 | Trust R&D notification of end of trial |  |  |
| * 1. **Other approvals**
 | ARSAC Documentation *(if applicable)* |  |  |
| Genetic Modification Safety Committee Approval*(for Gene Therapy Trials only)* |  |  |
| Other Site-Specific Approvals |  |  |
| * 1. **Correspondence**
 | General correspondence  |  |  |
| 1. **AMENDMENTS**
 |
| * 1. **Amendment #**
 |
| * + 1. Approvals
 | HRA/ REC/ GTAC/ MHRA Amendment Approval Letter(s)/ Substantial and Non-substantial Amendments Favourable Opinion Letter/ with Conditions Letter |  |  |
| Trust R&D NHS permission letter / acknowledgement for Trial Amendments |  |  |
| * + 1. Correspondence
 | General correspondence  |  |  |
| 1. **PROTOCOL**
 |
| * 1. **Current**
 | Current approved Protocol |  |  |
| * 1. **Superseded**
 | Superseded Protocol versions |  |  |
| * 1. **Correspondence**
 | General correspondence  |  |  |
| 1. **PARTICIPANT INFORMATION**
 |
| * 1. **Participant Information Sheet (PIS) & Informed Consent Form (ICF)**
 |
| * + 1. Current
 | Current approved Participant Information Sheet (PIS) / Informed Consent Form (ICF) (on Trust headed paper) |  |  |
| * + 1. Superseded
 | Superseded Participant Information Sheet (PIS) / Informed Consent Form (ICF) (on Trust headed paper) |  |  |
| * + 1. Signed Consent Forms
 | Signed Informed Consent Forms (*original copies*) |  |  |
| * 1. **GP Letter**
 |
| * + 1. Current
 | Current GP Letter (on Trust headed paper) |  |  |
| * + 1. Superseded
 | Superseded GP letter (on Trust headed paper) |  |  |
| * 1. **24hrs contact**
 | 24 hrs contact card *(if applicable)* |  |  |
| * 1. **Questionnaires**
 |
| * + 1. Current
 | Current Template Quality of Life Questionnaires (*validated / trial specific if applicable)* |  |  |
| * + 1. Superseded
 | Superseded versions of Template Quality of Life Questionnaires (*validated / trial specific if applicable)* |  |  |
| * 1. **Patient Diary**
 |
| * + 1. Current
 | Current Template Patient Diaries (*if applicable*) |  |  |
| * + 1. Superseded
 | Superseded versions of Patient Diaries (*if applicable*) |  |  |
| * 1. **Other**
 | Other (e.g., posters, leaflets) (*if applicable*) |  |  |
| * 1. **Correspondence**
 | General correspondence |  |  |
| 1. **INVESTIGATIONAL MEDICINAL PRODUCT (IMP)**
 |
| * 1. **SODA/ATIMP Management Plan**
 |
| * + 1. Current
 | Current Summary of Drug Arrangements (SODA)/ Advanced Therapy Investigational Medicinal Product (ATIMP) Management Plan and associated documents |  |  |
| * + 1. Superseded
 | Superseded SODA/ ATIMP Management Plan and associated documents |  |  |
| * 1. **Safety Document (IB/SmPC)**
 |
| * + 1. Current
 | Current IMP Safety Information document (Investigator Brochure (IB) or Summary of Product Characteristics (SmPC)) |  |  |
| * + 1. Superseded
 | Superseded version of IMP Safety Information document (IB or SmPC) |  |  |
| * + 1. nIMP
 | Safety document for unlicensed non-Investigational Medicinal Product (nIMP) *(if applicable)* |  |  |
| * 1. **IMP Prescription Template**
 | Trial Specific IMP Prescription Template  |  |  |
| * 1. **Other**
 | Other IMP Specific Forms / SOPs |  |  |
| * 1. **Correspondence**
 | General correspondence |  |  |
| ***\*For trials not using a separate PHARMACY FILE the following IMP documents should be filed in the ISF\**** |
| * 1. **Packaging and Labelling**
 | Approved MHRA Label Text *(if applicable)* |  |  |
| * 1. **QP Release**
 | QP Certificate *(if applicable)* |  |  |
| * 1. **IMP Accountability Log**
 | IMP Accountability Log Template (if applicable)  |  |  |
| * 1. **IMP Destruction**
 | Destruction Log |  |  |
| Destruction certificates *(if applicable)* |  |  |
| * 1. **Storage**
 | Temperature Logs (or location if held elsewhere) |  |  |
| Notification of Temperature Deviation Template |  |  |
| Sponsor notification / confirmations of Temperature Deviations |  |  |
| Thermometer calibration / service certification / File note (or location if held elsewhere) |  |  |
| * 1. **Dispensing**
 | Local Dispensing Guidelines |  |  |
| Master Prescription |  |  |
| Completed Prescriptions |  |  |
| * 1. **Randomisation / Unblinding**
 | Randomisation Notification / Confirmation *(if applicable)* |  |  |
| Emergency Contact details for unblinding *(if applicable)* |  |  |
| * 1. **Recalls**
 | IMP Recalls |  |  |
| 1. **DATA MANAGEMENT**
 |
| * 1. **CRF**
 |
| * + 1. Current
 | Current Approved CRF |  |  |
| * + 1. Superseded
 | Superseded versions of CRF |  |  |
| * + 1. CRF Instructions
 | CRF Completion Instructions *(if applicable)* |  |  |
| * 1. **Data Queries**
 | Data Query Documentation (e.g., forms, logs etc.) *(if applicable)* |  |  |
| * 1. **Deviations (Protocol, GCP, SOP)**
 | Log of Deviations, Violations, Potential Serious Breaches, Serious Breaches, Urgent safety measures |  |  |
| * 1. **Completed CRFs**
 | Completed CRFs |  |  |
| Completed Diaries *(if applicable)* |  |  |
| Completed Quality of Life Questionnaires *(if applicable)* |  |  |
| * 1. **Correspondence**
 | General correspondence |  |  |
| 1. **SCREENING & RECRUITMENT**
 |
| * 1. **Logs**
 | Subject Identification and Code List  |  |  |
| Subject Screening Log |  |  |
| Subject Enrolment, Withdrawal and Completion Log |  |  |
| Subject Randomisation Log *(if applicable)* |  |  |
| Subject Randomisation System Emails / Notifications *(if applicable)* |  |  |
| * 1. **Correspondence**
 | General correspondence |  |  |
| 1. **PHARMACOVIGILANCE**
 |
| * 1. **Trial Adapted Templates**
 |
| * + 1. Current
 | Current trial adapted Serious Adverse Event (SAE) Reporting Form Template |  |  |
| Current trial adapted Pregnancy Reporting Form Template  |  |  |
| Current trial adapted Serious Adverse Event (SAE) Recording Log Template *(if applicable)* |  |  |
| * + 1. Superseded
 | Superseded trial adapted Serious Adverse Event (SAE) Reporting Form Template |  |  |
| Superseded trial adapted Pregnancy Reporting Form Template |  |  |
| Superseded trial adapted Serious Adverse Event (SAE) Recording Log Template *(if applicable)* |  |  |
| * 1. **SAE Log**
 | Completed SAE Recording Log *(if applicable)* |  |  |
| * 1. **SAEs**
 |
| * + 1. [Trial Participant ID#\_SAE term]
 | Completed SAE Reporting Forms and correspondence |  |  |
| Completed Suspected Unexpected Serious Adverse Reaction (SUSAR) Reporting Forms and submission documents from Sponsor  |  |  |
| * 1. **Pregnancy**
 |
| * + 1. [Trial Participant ID#]
 | Completed Pregnancy Reporting Forms and correspondence |  |  |
| * 1. **Other Safety Information**
 | Notification of Safety Information to Investigators (e.g., SUSAR reports from other sites) |  |  |
| * 1. **Unblinding (if applicable)**
 | Documentation of Emergency Un-blinded cases |  |  |
| * 1. **Correspondence**
 | General correspondence |  |  |
| 1. **MONITORING & AUDIT**
 |
| * 1. **Site Initiation**
 | Trial Site Initiation Slides |  |  |
| Trial Site Initiation Report |  |  |
| Site Initiation Attendance Log |  |  |
| * 1. **Monitoring Visits**
 | Sponsor Monitoring Reports / Summary Letters / Follow-up |  |  |
| Trial Monitoring Visit Log |  |  |
| * 1. **UK Regulation Compliance Forms (Part 2) (if applicable)**
 | Completed UK Compliance Forms |  |  |
| CI’s review of PI UK Compliance Reports |  |  |
| JRO review of CI/PI UK Compliance Reports |  |  |
| * 1. **Site Close Out**
 | Close Out Report / Close out Compliance Form and associated documents  |  |  |
| Declaration of Site Close Down Form *(if applicable)* |  |  |
| Confirmation of Site Close Out Email / Letter  |  |  |
| * 1. **Source Document List**
 | Source Document List |  |  |
| * 1. **Audits**
 | Audit Summary Report for Site  |  |  |
| * 1. **Inspections**
 | Regulatory Inspections documentation |  |  |
| * 1. **Correspondence**
 | General correspondence |  |  |
| 1. **LABORATORIES / SAMPLES**
 |
| * 1. **Local Labs**
 |
| * + 1. Accreditation Certificates
 | Local Laboratory Certification/Accreditation |  |  |
| * + 1. Ranges
 | Local Laboratory Normal Ranges  |  |  |
| * 1. **Laboratory /Sample Processing Manual**
 | Laboratory /Sample Processing Manual  |  |  |
| * 1. **Samples**
 | Record of retained samples |  |  |
| Sample Shipment Records  |  |  |
| * 1. **Correspondence**
 | General correspondence |  |  |
| 1. **PROCEDURAL DOCUMENTS**
 |
| * 1. **Trial SOPs/ Plans**
 |
| * + 1. Current
 | Current Trial Specific SOPs / Plans (e.g., Randomisation Plan, Unblinding Plan, Sample Management Plan, Dose Decision and Dose Escalation Plan) |  |  |
| * + 1. Superseded
 | Superseded Trial Specific SOPs / Plans  |  |  |
| * 1. **JRO SOPs**
 | JRO SOPs (e.g., SOP for the Recording, Management and Reporting of Adverse Events by Investigators, SOP for the Recording & Reporting of Deviations, Violations, Potential Serious Breaches, Serious Breaches and Urgent Safety Measures) |  |  |
| * 1. **JRO SOP training logs**
 | JRO SOP training logs |  |  |
| * 1. **Local procedures / SOPs**
 | Local procedures / SOPs |  |  |
| * 1. **Correspondence**
 | General correspondence |  |  |