Ontario Cancer Research Ethics Board

OCREB Team

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- Overview of OCREB as an REB and how we work
- Definitions of Provincial Applicant vs Central Applicant
- OCREB Review types and Review of some of the CTO application forms
- Q & A



What is OCREB?

- Centralized oncology-specific REB for Ontario; started in 2003
- Board Members are from across Ontario
- OCREB provides a single review of a study that can be conducted at multiples sites
- Studies are submitted to OCREB through an online system - CTO Streamline



Provincial Applicant

Who can be Provincial Applicant (PA)?

- A site is identified as a PA after an agreement between PI & Sponsor
- First Ontario site ready to activate the study



Provincial Responsibilities

- Provincial Applicant will submit:
 - The initial study
 - Any changes to the study and study documents (i.e., study protocol, IB, consents, etc)
 - Study reportable events
 - Study ethics approval renewal



Provincial Applications

- Provincial Initial Application (PIA)
 - Application with study specific information/questions (e.g. objectives, eligibility criteria, statistical analysis details, study procedures, etc.)
 - all study documents (protocol, provincial consent form, participant materials, IBs, Questionnaires, etc.)
 - PIA <u>must</u> be signed by the PI at the initial submission; Delegated study staff can sign resubmissions



Provincial Applications

- Provincial Amendment (PAM)
 - Updates to questions that are study-specific (e.g. objectives; eligibility criteria; statistical analysis details; study procedures; etc.)
 - Changes to study documents (consents; participant materials; IBs; Questionnaires; etc.)



Provincial Applications

- Provincial Reportable Events (PRE)
 - Reportable events such as DSMB/C and IA results
 - Any new information that would impacting the overall conduct of the study or cause the sponsor to modify study documents Safety Notice/Report)
- Provincial Continuing Review (PCR)
 - PCR must be submitted once per year to ensure continuous ethics approval of the study



Centre Applicants

- Any Centre or site in Ontario that would like to conduct the study (including the Provincial applicant site)
- 1st step > Centres must submit a Centre Initial Application any time <u>after</u> PIA is approved
- Once the CIA is approved, an approval letter will list all provincially-approved documents (consents, protocol, IBs, participant materials, etc.)
- Same version dates for all study documents (including consents) are used at all sites



Centre Applications

- To submit Centre-specific information:
 - Confirm standard of care at the centre
 - Describes conduct of the study at the site: consenting process; recruitment processes, etc.
 - Privacy policies/identifiers
 - Conflict of interest declarations
 - Reimbursements
 - Plan to disseminate of study results



Centre Applicant responsibilities

- Submission of <u>centre-specific applications</u>:
 - <u>Centre Initial Application (CIA)</u>: Initial application to join a provincially approved study
 - <u>Reportable Events (CRE)</u>: Local SAEs, privacy breaches, protocol deviations
 - <u>Centre-Specific Amendments (CAM)</u>: Change in centre PI; centre-specific recruitment methods;
 - <u>Centre Continuing Review (CCR)</u>: Annual centre renewals



Provincial vs Centre

Activities/Responsibilities	PROVINCIAL	CENTRE
Approval	Study is ethically sound; study is REB- approved in Ontario	Study can now be conducted at the site
Initial application	YES	YES
Amendment application:		
Protocol changes	YES	-
Consent changes	YES	-
Translated materials	YES	-
Updated IB	YES	-
Change in PI	YES	YES
Change in reimbursement		YES
Change in consenting process		YES



OCREB study reviews

- Full Board vs Delegated review
- Examples of applications reviewed by OCREB



Full Board Review

- Provincial Initial Applications (PIAs) OR;
- Any changes to a study that increases the risk for participants
- OCREB FB meetings > held on the 2nd Friday of each month
- Board members are from across Ontario
 - Scientific members including oncologists and statisticians
 - Clinical trial staff
 - Bioethicists and lawyers
 - Community



Full Board Review - PIA

Deadlines & Meeting Dates

Submission Deadline (12pm on the following days)	Meeting Date	Continuing Reviews for studies expiring
Tuesday, November 26, 2024	Friday, December 13, 2024	December 13 to January 9
Tuesday, December 10, 2024 *	Friday, January 10, 2025	January 10 to February 13
Tuesday, January 28, 2025	Friday, February 14, 2025	February 14 to March 13
Tuesday, February 25, 2025	Friday, March 14, 2025	March 14 to April 10
Tuesday, March 25, 2025	Friday, April 11, 2025	April 11 to May 8
Tuesday, April 22, 2025	Friday, May 9, 2025	May 9 to June 12
Tuesday, May 27, 2025	Friday, June 13, 2025	June 13 to July 10
Tuesday, June 24, 2025	Friday, July 11, 2025	July 11 to August 7

* Modified to accommodate the holiday schedules



Full Board Review - PIA

- Goes to a Full Board Meeting
- Review letter and consent revisions sent back to applicant
- OCREB review letter notification from system access under 'History' tab
- Response re-submitted by PA
- OCREB final review and APPROVAL



Full Board Review – PI Response to OCREB

- To create PI response, copy and paste the questions and provide a response to <u>each</u> question
- For application questions, letter should confirm changes were made & application form should be revised as requested



Example of PI Response Letter

This letter serves as a response to the OCREB review letter sent on XXXXX, for the CTO Project ID:XXX sponsor study ID XXXX

Required Modifications:

1) Section 2.12 - Please confirm if GMALL is offered in Ontario as standard of care for this participant population. If GMALL is not considered SOC in Ontario, please remove all reference to this regimen from the ICF, and revise response in this Section accordingly.

Response: I confirm that both HyperCVAD and GMALL regimens are offered in Ontario as standard of care for this patient population. As discussed during the call with Sponsor and OCREB, several participating sites located in Ontario have chosen to offer GMALL as their SOC for this study.

2) Section 2.18 - As tumor imaging may be done as per Schedule of Activities, please also select "Radiation"

Response: Provincial initial application has been revised. The imaging performed in this study is as follows: 1) ECHO or MUGA; 2) Ultrasound, CT scan, or MRI of liver (to identify hepatic stenosis); 3) Imaging assessments to be conducted per SOC (i.e.: PET, CT) in case of suspicion for extramedullary disease. <u>Therefor</u>, while the imaging being performed is not necessarily of the tumor itself, radiation may be applicable given the imaging assessments described (ECHO, MUGA, Ultrasound, CT, MRI, PET).

8) Section 7.9 - Please select NO, this is referring to secondary database aside from those that have been listed in Section 7.9.1

Response: Provincial initial application has been revised



PIA Re-Submission and PI Response Letter

▲ SECTION 1.0 – GENERAL INFORMATION

1.0 *Is this a resubmission in response to a request from the Research Ethics Board to make changes to your application?
 Choose an item.

HELP TEXT: If this is the FIRST TIME this application is being submitted please select "No". If this is a re-submission for modifications requested by the REB please select "Yes".



PIA Re-Submission and PI Response Letter

SECTION 10.0 - RE-SUBMISSION INFORMATION

- 10.1 Upload Provincial Applicant Response to REB request for modification letter (if applicable): Upload Document - Document Type: Response to REB letter
- 10.2 If changes have been made to a previously submitted consent/assent form at the request of the REB, please upload <u>track-changes</u> versions of all proposed consent and/or assent <u>form(e.g. screening, main, optional)</u>, if applicable: Upload Document - Document Type: Track Changes Version Document
- 10.3 Upload any additional materials requested by the REB (if applicable): Upload Document - Document Type: Other materials
- 10.4 Please provide any additional comments for the REB to consider (if applicable): Click here to enter text.





- Study is ethically sound and approval criteria have been met (i.e. risks to participants are minimized; risk-benefit ratio is acceptable; participant selection is equitable; free and informed consent is sought; research plan is adequate as far as data monitoring, data protection and confidentiality, etc.)
- Study <u>CANNOT</u> be conducted at any site yet
- A site or Centre in Ontario who would like to conduct the study needs to submit a Centre initial application (CIA) and obtain CIA approval



Full Board Review – Provincial Amendment

- PAMs receive either Full Board or Delegated Review
- <u>FB PAMs:</u> Amendments that increase the risk to study participants (i.e., addition of a new cohort, new significant tissue samples are being collected, IB has significant change in risks, or moving from dose escalation to dose expansion for Phase 1 trials)



PAMs - When a study has <u>active participants and</u> <u>consent changes are made:</u>

- Consent Update Form is required if amendments include changes to the ICF and there are currently enrolled participants
 - A Consent Update Form outlines any relevant changes made to the Main ICF that would affect currently enrolled participants
- Should follow OCREB template
- Should only include relevant new information



Consent Update Form

- How to communicate this new information in the consent update is Sponsor/PI driven
- OCREB may ask for changes/clarification
- Several options:
 - Q# 5.11 : Describe how this information will be communicated to participants who are currently enrolled in the study and receiving study treatment or intervention: choose one of the following options:

Contact participant (via phone) to provide new information orally (using the approved consent update form). Document in health record. At next visit, provide consent update form and obtain signature
At next visit, provide consent update form and obtain signature
At next visit, provide consent update form. Document in health record.



Consent Update Form

 Q# 5.12: Describe how this information will be communicated to participants who are currently being followed for the purposes of the study but are no longer receiving study treatment or intervention: choose one of the following options:

•Contact participant (via phone) to provide new information orally (using the approved consent update form). Provide consent update form at next visit.

•Contact participant (via phone) to provide new information orally (using the approved consent update form). Document in health record. Mail the consent update form (if no further visits are scheduled) and confirm receipt.

•At the next visit, provide consent update form. Document in health record.

•Mail consent update form. Document in health record. Confirm receipt at next visit.



Provincial Amendment Form: Study Status

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		REVIEW	CTO Stream Work Area Meetings Contacts Help Ms. Beren Avci (Beren Avci@oicr.on.ca) •	•
V	Vork Area	>		2
	Actions 🗸		SECTION 2.0 - AMENDMENT DETAILS	9
Previous	Next	✓ Navigate	If <u>"activated/open to</u> If <u>"permanently</u> <u>enrollment</u> " is closed to selected, submit enrollment" is	
Timeline	Print	Documents	2.1 selected, submit selected, submit selected, submit only the consent only the consent	0
O Panel Comments	0 Changes	1 Form Comments	(if applicable) update (if applicable) 2.1 "What is the current overall status of this study at participating centres in Ontario?	0
New Comment			 Not yet activated Activated, but no participants enrolled to date Activated/open to enrollment, participants have been enrolled but none are currently receiving study treatment/intervention Activated/open to enrollment with one or more study participant(s) receiving study treatment/intervention Permanently closed to enrollment, one or more study participant(s) receiving treatment/intervention Permanently closed to enrollment, no participants are receiving treatment/intervention, and all study participants are in long term foll collection continues Study completed (i.e., no further involvement of study participants and no further data collection) Prematurely terminated Other 	low up or data
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Provincial Amendment Approval

- Applies to all participating sites
- Center amendments NOT required
- For consents: same process as with initial approval
- Sites 'adopt' the Provincially approved template



Delegated Reviews

- Delegated review:
 - Research projects that involve no more than minimal risk
 - Minor or minimal risk changes to approved research
 - Continuing review of approved minimal risk research
 - Changes to consent documents that do not affect the rights and welfare of research participants or involve increased risk, or affect data integrity, or require significant changes in research procedures
 - Reportable events, including adverse events and safety updates such as reports from Data and Safety Monitoring Boards



Delegated Reviews

- Application types
 - Central initial application
 - Provincial and Centre Amendments
 - Provincial and Centre Reportable Events
 - Centre Continuing Reviews



Investigators & Research Teams



List of Studies and Participating Study-Centres

· For a list of active studies, please contact one of the OCREB office personnel.

Annotated Versions of the CTO Stream Application Forms

To assist Applicants with the interpretation of the questions in the CTO Stream Application Ferms, OCREB has prepared application forms with notes or comments added to explain many of the questions:

- CTO Provincial Initial Application (PIA) Annotated Application 20-Apr-2021
- CTO Centre Initial Application (CIA) Annotated Application Form 14-Dec-2023 **REVISED**
- CTO Provincial Amendment (PAM) Annotated Application Form 22-Apr-2021
- CTO Centre Amendment (CAM) Annotated Application Form 10-Mar-2021
- CTO Provincial Reportable Event (PRE) Annotated Application 20-Apr-2021
- CTO Centre Reportable Event (CRE) Annotated Application Form 10-Mar-2021
- CTO Provincial Continuing Review (PCR) Annotated Application 20-Apr-2021
- CTO Centre Continuing Review (CCR) Annotated Application Form 10-Mar-2021
- CTO Provincial Study Closure (PSC) Annotated Form 20-Apr-2021
- CTO Centre Study Closure (CSC) Annotated Application Form 10-Mar-2021

Ontario Cancer Research Ethics Board

About OCREB

What's New?

Guidelines, Templates and SOPs

Policies & Procedures Committee

Investigators & Research Teams

Monthly Centre Meetings - 2023

Monthly Centre Meetings - 2022

Monthly Centre Meetings - 2021

Monthly Centre Meetings – 2020

Monthly Centre Meetings - 2019

Monthly Centre Meetings - 2018

Sponsors & CROs

Research Participants and Public

Meetings and Membership

Call for Members

Publications

Resources

Advisory Committee



4.9	*Does this site require any Yes No	y changes (other than inclusior	of centre letterhead and local contact info	ormation) to the approved provincial/CHEER consent form(s)?			
4.9.1	*Explain:						
	See OCREB Guidance for	r approved 'administrative changes'	See OCREB approved centre-specific changes doo	cument			
		approtod deminioù auto onangoo :					
4.10							9
4.10	*Upload the proposed SI	ITE-SPECIFIC consent form(s)	with the proposed site-specific changes tr	racked:			
Туре		Document Name		File Name	Date Version	Size	View
-	• Changes Version Documents		npt from CTO ICF screening The Ottawa Hospital			Size 593.9 KB	
-	Changes Version Documents		npt from CTO ICF screening The Ottawa Hospital	File Name			
-	•		mpt from CTO ICF screening The Ottawa Hospital	File Name			
Track		000. Memo_OCREB Centres exer	npt from CTO ICF screening The Ottawa Hospital	File Name			
Track 4.11	*Upload a clean version	000. Memo_OCREB Centres exer		File Name			
Track 4.11 4.11 Type	*Upload a clean version	000. Memo_OCREB Centres exer of the proposed SITE-SPECIF ocument Name		File Name 00 . Memo_OCREB Centres exempt from CTO ICF screening The Ottawa Hospital.pdf d site-specific changes accepted):		593.9 KB	Download



Guidelines, Templates and SOPs

Despite the change in the online submission system, all OCREB requirements as found in its policies, procedures and consent form templates remain in effect. This includes the pre-approval of all centre-specific consent forms without the requirement for OCREB review. For any questions related to OCREB's policies, procedures, please contact the OCREB Research Ethics Officer.

Guidelines

- Guidance for pre-approved administrative changes [April 1, 2024] **NU
- Guidelines for Protocol Deviation Reporting [September 25, 2018]
- Guidelines for Managing Conflict of Interest [April 4, 2014]
- Guidelines_for_Providing New Information [March 23, 2018]
- OCREB Withdrawal Template Sample Guidance for Documenting Participant Withdrawal
- Memo Pre-Screening Consent Criteria
- Memo DIL and Protocol Clarification Letters

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A(•	Study Information and Informed Consent Form See Instruction Guide Study Title for Participants: (Insert Lay Title here)	
•	Official Study Title for Internet Search on http://www.ClinicalTrials.gov : (Insert Study Number, "Insert Official Study Title")	ed tion
	Trial Code/study #: (insert here)	
•	Study Doctor: Dr.	ator
	Sponsor: (Sponsor name)	Г
	<i>If an REB approved French consent is not used at your institution remove this statement</i> . Le formulaire de consentement est disponible en français sur demande.	nce to ne
	A 24-7 phone number is required for studies that include greater than minimal risk research procedures or interventions.	
	EMERGENCY contact number (24 hours/day 7 days/week):	
	Non-Emergency contact numbers are at the end of this document in the "Where can I get more information?" section	



6.0 *What (if any) Personal Information or Personal Health Information will be SENT TO or COLLECTED BY the lead researcher/research group/sponsor for the purposes of this study (select all that apply)? □None, study participant ID only

<- responses pre-populate from the PIA.

Partial initials NFull date of birth Partial date of birth Full date of death Partial date of death Age □Sex and/or gender Full postal code First 3 digits of postal code □ Pathology specimen number Medical device identifier Admission date Discharge date Medical record number Health card number Driver's license number Address Telephone number Fax number

Full name

Full initials



6.2 *As per institutional privacy policies, which of the identifiers that were approved provincially/CHEER (study-wide) (shown above in guestion 6.0) are you authorized to disclose on the study data collection tools leaving the institution?

□None, study participant ID only Full name Full initials Partial initials Full date of birth Artial date of birth Full date of death Partial date of death Age □Sex and/or gender Full postal code First 3 digits of postal code Pathology specimen number Medical device identifier Admission date Discharge date

Medical record number

Health card number

Q6.2: (NEW)

Please select what identifiers your site will be collecting and disclosing outside the institution for study purposes, and as per your institutional policies. If the response or the identifiers chosen here DO NOT match the identifiers approved at the Provincial level (as noted in Q#6.0), then please also select: OTHER, and specify in Q#6.2.1 what identifier/s is/are collected and provide an explanation for the discrepancy

Other: Partial DOB collected instead of Full DOB because institution does not permit full PHI leaving

8.1 *Will study participants and/or substitute decision makers (SDMs) be provided with compensation or reimbursement in a different amount or method than that described in the Provincial Initial Application/CHEER Initial Application?

□Yes □No *If 'Yes':* (NEW) 8.1 Please always respond YES here

8.1.1 *Please Describe: Click here to enter text.

(NEW) 8.1.1: Provide details on how your participants will be reimbursed, including what they will be reimbursed for ; approximate \$ amount that may be provided and any other information that will be added to the <u>Compensation/reimbursement section</u> of your Centre consent form. If no reimbursement is provided, then please indicate that the template statement ('You will be reimbursed for...) will be removed from the Centre consent.



- × 🔊 Stream Review 🔊 Stream - Review × | + Stream - Review → C
 review.ctostream.ca/submissionReview/Page/1956?submissionReviewId=48536 0 1 P Stream - Review Ms. Beren Avci (Beren.Avci@oicr.on.ca) -Work Area Meetings Make sure the CIA Work Area > SECTION 11.0 - AGREEMENT & APPROVAL is signed by the Actions ¥ study PI and \bigotimes (\mathbf{i}) 4 institutional reps Previous Next Navigate (initial submission Ē Ø SIGNATURES only) Timeline View as PDF Documents $\left(\right)$ $\left(\right)$ 2 11.1 Centre Principal Investigator Panel Comments Changes Form Comments • I attest that, to the best of my knowledge, the information in this application is complete, current and accurate; • I attest that I am appropriately gualified to conduct this trial, entitled to provide medical oversight under the applicable laws (if applicable), and that I am a member in good standing with my respective regulatory authority. 0 Following the initial submission of this application form, a member of the research team may submit edits to this application on my behalf. I New Comment acknowledge that I remain ultimately responsible for REB submissions and the overall conduct of the study in accordance with the currently approved documents. I attest that, should a designate sign on my behalf, the responsibility for corresponding with the REB has been appropriately delegated, and the delegation has been documented. As the Centre PI: I assume full responsibility for the scientific and ethical conduct of the trial at this institution I agree to conduct this trial in compliance with TCPS2 (2nd edition of Tri-Council Policy Statement: Ethical Conduct for Research Involving Humans); AND with the provisions of all other applicable laws, regulations or guidelines (e.g., Food and Drugs Act and applicable Regulations; International Conference on Harmonization Guidance E6: Good Clinical Practice): I attest that I have sufficient space, time and resources to conduct this trial; I certify that all researchers and other personnel (research team) involved in this project at this institution are appropriately qualified and experienced, or will undergo appropriate training to fulfill their role in this project; I acknowledge that I am responsible for promptly reporting to the REB, through the Clinical Trials Ontario Streamlined Research Ethics Review System, any proposed site-specific:
 - modifications or amendments, such as changes in Centre PI, centre-specific required changes to the consent form, etc.;
 - all local reportable events that meet the REB reporting criteria, including but not limited to local unexpected, serious adverse events (SAEs), privacy breaches, protocol deviations and any new information that may adversely affect the safety of the participants or significantly affect the conduct of the trial;



Delegated Provincial Amendment

2.3 *Which of the following changes are included in the Amendment(s) (select all that apply):

- Changes to the protocol
- Changes to biological specimen collection/use
- □ Changes to the consent form(s), assent form(s), debriefing material(s)
- Changes to participant materials (such as study instruments/questionnaires, recruitment
- materials, participant diaries, wallet cards, etc.)
- Updated/new Investigator Brochure (IB) or Product Monograph (PM)
- Translation of approved materials
- Change to the data collected and/or how data is accessed, collected, used or stored
- \Box Changes in study funding, participant compensation/reimbursement, provision or access to
- product(s)/device(s), and/or financial pressure(s)/incentive(s)
- \Box Change/updates relating to the communication of results
- \Box Change in clinical trial registry information
- \Box Change in US regulatory information
- Change(s) to Provincial Applicant or Provincial Co-Applicant; and/or change in study information
- (i.e., study title, study acronym/nickname/short name, sponsor's study ID)
- New information about a refusal to approve the study by another REB



Delegated Centre Amendment

2.1

2.1 *Type of amendment: (Select all that apply):

- Site-specific changes to the consent/assent form(s) used at this site
- Changes in the informed consent/assent process at this site
- Site-specific translation of approved material(s)
- Changes in recruitment methods and/or recruitment material(s) (e.g., telephone, web or email scripts, flyers, brochures, etc.) used at this site
- Changes to other site-specific material(s) that will be given to study participants (including surveys/questionnaires/scripts, diaries and wallet cards)
- Changes to how personal information or personal health information is being accessed, collected, used, stored or transferred at this site
- Changes in the conflict of interest information previously provided to the REB for any of the investigators, study staff or members of their immediate families
- Changes in participant reimbursement and/or communication of study results
- Changes in site-specific study conduct (including location of visits/procedures, standard of care, and protocol implementation)
- Change in Principal Investigator
- Change(s) to contact details for the Principal Investigator and/or the name/contact details for the centre administrative study contact, or institution representative(s)
- Other changes



Ontario Cancer Research Ethics Board... safeguarding the rights and well-being of cancer research participants

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Provincial Reportable Events

- The Researcher is also responsible for submitting to OCREB other types of reportable events
 - DSMB/C Reports
 - Safety notice or action letter that would cause the sponsor to modify the research and/or study documents
 - A change to the research that was initiated without prior REB review to eliminate an apparent immediate hazard to a research participant



Centre Reportable Events

Reportable Event Information:

1.4 *Type of Event Local (Internal) serious adverse event (SAE) Protocol deviation/violation Privacy breach Audit/inspection report

A **local SAE** is considered reportable by a centre, when the SAE meets **ALL** the following criteria:

- 1) Event is serious
- 2) Event is unexpected
- 3) Event is related to participation in research
- 4) Event suggests that research puts participants at higher risk

A **protocol deviation** is considered reportable by a centre, when **ANY** of the following criteria are met:

1) Eligibility Waiver

ocreb

- 2) Increased risk or possibility of risk for the research participant(s)
- 3) Compromises the scientific integrity (e.g., study validity or data)
- 4) OTHER, Specifically, a deviation in the consenting process (i.e., incorrect version date of the ICF used)

Other Resources

https://ocreb.ca/

https://ocreb.ca/about-ocreb/investigatorsresearch-teams/







