**1. Purpose**

The purpose of this Standard Operating Procedure is to define the management relationship between the NorCal Regional Coordinating Center at UCSF (RCC-13) and Satellite Sites (SS) and Clinical Performance Sites (CPS) within the NorCal regional network.

The goal of this SOP is to delineate the roles, responsibilities, and processes that will support all aspects of clinical trial performance and NIH StrokeNet activities within the NorCal regional network, including but not necessarily limited to:

1. Compliance with Good Clinical Practice SOPs
2. Compliance with cIRB and local IRB reporting requirements
3. Compliance with completion of feasibility assessments and coverage analyses for each trial performed by the CPS or SS
4. Adherence to trial specific protocols and MOPs
5. Accurate and timely submission of clinical research data into WebDCU™ for NIH StrokeNet trials
6. Maintenance of an accurate Information Confirmation Sheet and Ongoing Contact List per StrokeNet NCC guidelines
7. Communication between the NorCal RCC at UCSF and trial performance sites

**2. Scope and Responsibilities**

This SOP applies to the NorCal RCC at UCSF and all trial performance sites within the NorCal regional network.

**3. Definitions and Abbreviations**

RCC - Regional Coordinating Center

NCC - National Coordinating Center (University of Cincinnati)

NDMC - National Data Management Center (Medical University of South Carolina)

SS - Satellite Site – An administrative site with an executed Master Trial Agreement and direct relationship to the NorCal RCC with one or more clinical performing sites.

CPS - Clinical Performing Site – A site where clinical trial participants are recruited and study procedures and activities take place. A CPS may also be a Satellite Site.

cIRB - Central institutional review board

MOP- Manual of Procedures

GCP - Good Clinical Practice

PI - Principal Investigator

NIH - National Institutes of Health

NINDS - National Institute of Neurological Disorders and Stroke

**4. Roles and Organizational Structure of the NorCal RCC**

**4.1 Role of NorCal RCC at UCSF**

The NorCal RCC will provide scientific leadership, regular communication regarding protocols and study progress, administrative and technical support for protocol initiation and conduct at SSs and CPSs, and technical assistance for the development of compelling clinical research applications from SSs and CPSs.

**4.2 SS Role**

Satellite sites are administrative entities that support clinical research activities at one or more clinical performance sites and are the primary administrative entity that enters into master trial agreements with the NCC and execute protocol trial agreements. SSs are jointly responsible for StrokeNet activities at associated CPSs and in most cases are also CPSs.

**4.2.1 “Virtual” SSs and Role**

A “virtual” SS is an internal administrative unit that defines an administrative subset of CPSs associated with a given SS, but without requiring a separate MTA or protocol trial agreement. The prototypical example of a virtual SS from the NorCal regional network is UCSF Fresno, which shares key administrative functions with UCSF, but does not enter into a separate MTA with the NCC, but also oversees two CPSs. Another example would be UCSF virtual SS, which oversees activities at both SFGH and UCSF Medical Center campuses and shared common administrative functions, but does not necessitate a separate MTA for the SFGH CPS. (See organizational chart).

**4.3 CPS Role**

Clinical performing sites will be directly involved in establishing infrastructure, personnel, for actual clinical trial performance activities including training and trial initiation, trial execution, and trial closeout. In some cases, a SS will also administer a CPS at the same location.

**4.4 Hierarchy of the RCC to oversee day-to-day operations for conducting clinical trials**

RCC PI

RCC Study Coordinator

SS/CPS PI

SS/CPS Study Coordinator

**5. NorCal Regional Network Administrative Operations**

**5.1 RCC Communication Plan**

**5.1.1 Conference/Videoconference Calls**

The primary organizational communication method between NorCal SSs and CPSs and the RCC will be via teleconference/videoconference and will take place quarterly and more often if deemed necessary by either the RCC or the satellites sites for performance improvement. The RCC Study Coordinator and SS or CPS Study Coordinators will teleconference monthly.

**5.1.2 Contact Lists / Changes in Personnel**

SSs and CPSs will provide and maintain complete and accurate telephone and email contact lists for key personnel at the respective SS and CPS and provide such a list for use by the NCC, NDMC, NorCal RCC, NorCal SSs, and NorCal CPSs.

SSs and CPSs will notify the NorCal RCC in writing of any changes in key personnel (e.g. site principal investigator, study coordinator, co-investigators).

**5.1.3 NorCal Regional Network Annual Meeting**

The RCC will coordinate an annual meeting of key personnel across the regional network to share best practices, plan for future studies, and develop new clinical research proposals.

**5.2 Adding New SSs and CPSs to the NorCal Regional Network**

Any NorCal SS or CPS may propose or forward inquires from potential new satellites or new clinical performance sites to the NorCal RCC PI for consideration.

The NorCal RCC at UCSF will provide technical assistance to SSs that are proposing to add a CPS and will conduct an internal evaluation of any candidate CPSs and SSs for the NorCal regional network.

New CPS sites under an existing SS may not be submitted to the NCC and to the NIH/NINDS for approval without the express approval of the SSs PI.

In addition, the NorCal RCC will be responsible for the ultimate decision on whether a candidate CPS or SS will be submitted to the NCC and to the NIH/NINDS for final approval to join the NorCal regional network.

**5.3 Notification of Concurrent Non-NIH StrokeNet Trials for Acute Stroke Treatment, Stroke Prevention, and Stroke Recovery at SSs and CPSs**

Each SSs and CPSs will be responsible for maintaining and updating an up-to-date list of ongoing non-NIH StrokeNet clinical trials in acute stroke treatment, stroke prevention, and stroke recovery with the RCC.

SSs and CPSs will confer with the RCC if a new non-NIH StrokeNet clinical trials in acute stroke treatment, stroke prevention, and stroke recovery is being considered.

**5.4 Terminating and closing out SSs and CPSs in the NorCal Regional Network**

The NorCal RCC will review performance metrics for SSs and CPSs including participation in NIH StrokeNet clinical trials, screening activities, enrollment activities, protocol violations, clinical trial data quality and data query responses, and participation in NIH StrokeNet and NorCal regional network activities on an annual basis.

NorCal RCC will also review available infrastructure at each SS and CPS including availability and accessibility of specific stroke patient populations, availability and accessibility of principal investigators, co-investigators, and study coordinators, and ongoing participation in cIRB.

A material change in these parameters may prompt a review of SSs and CPSs activities and infrastructure by the NorCal RCC.

The NorCal RCC at UCSF will be responsible for the final decision on whether a candidate clinical performance site or satellite site will be proposed to the NCC and to the NIH/NINDS for removal as a SS or CPS in the NorCal regional network.

**6. NorCal Regional Network Clinical Trial Activities**

Although the NCC and NDMC will provide operational support for NIH StrokeNet clinical trials for subcontracts for capitated payment, protocol-specific site training, and site monitoring, the RCC will also provide specific support for these activities.

**6.1 Selection of Trials, Feasibility Assessment and Coverage Analysis**

The RCC will be responsible for disseminating information about new proposed trials to SSs and CPSs within the NorCal regional network.

Each SS or CPS will conduct or facilitate accurate feasibility assessments and according to their institutional policies and complete a full coverage analysis prior to final execution of any protocol trial agreement. This coverage analysis will include a plan for demonstrating how research charges will be linked to the research study for that institution.

**6.2 Process for Activating New NIH StrokeNet Trials**

At each enrolling hospital (other than UCSF-MC and SFGH) a designated co-PI and coordinator

will be identified at the same time as the initial UCSF/SFGH study initiation plan is developed.

The NorCal-CSC lead coordinator will communicate regularly by both e-mail and phone with the network hospital coordinators, to assist with study start-up activities however possible at their institutions.

Prior to study initiation, there will be a meeting between NorCal-CSC and network hospital investigators and coordinators to develop a specific plan for identifying and screening patients, staff education, and site specific enrollment instructions and order sets. The RCC will assist all study sites with such aspects of study start up including providing support with regulatory readiness, standing order preparation, educational materials for clinical staff and investigational pharmacy education, and other activities as needed.

The RCC will confirm that all study-specific required trainings as well as WebDCU™ training will be completed and documented prior to site activation, and the RCC will provide assistance to SSs and CPSs to complete these study start-up tasks as needed.

All study sites will be responsible for obtaining approval of local ancillary committees, e.g. radiation safety, stem cell, committee, nursing management etc, as appropriate prior to site activation.

The RCC will walk through the enrollment and management of a mock study patient prior to their site being activated, in order to help identify potential operational issues that may not have been previously noted.

**6.3 StrokeNet Study Site** **Trial Execution**

All CPSs and SSs will be responsible for all aspects of coordinating NIH StrokeNet trials including but not limited to providing adequate staffing for the successful conduct of the study, maintenance of regulatory records in WebDCU™, establishing a notification system for screening potential patients, obtaining informed consent, performing study procedures per study protocol, data extraction, data entry, data query resolution, subject payment (when applicable), event reporting, preparation and response to study monitoring visits by the NDMC, set-up and verification of accurate research billing for each subject enrolled, and study closeout activities. Assurance of data quality is the joint responsibility of the RCC and the SSs.

CPSs and SSs will have a written policy in place outlining their procedure for following subjects through the end of study to minimize subjects being lost to follow-up. This should be in accordance with their institutional guidelines. The RCC will assist in the process of developing such a plan, if necessary, and will coordinate with the NDMC to monitor adherence during visits to the study site.

SSs will be jointly responsible for data collection and investigational drug monitoring with each of the CPSs.

Procedures for data collection and investigational drug monitoring must be described in writing in a “trial readiness plan” and approved by the NorCal RCC, including who is responsible for data management overall; what is the source of records for the specific trial (e.g., hospital, office, clinic, registry); who will register patients on trials; how will the information flow; who will enter data on primary patient records and study forms (e.g., nurses, physicians, data managers, secretaries); who will collect and send patient materials (e.g., pathology slides, port films, etc.) to the centers if required; and what systems are in place for electronic data transfer stressing the importance of HIPAA compliance.

**6.4 CIRB Reliance and Event Reporting**

All CPSs and SSs will follow existing cIRB reliance agreements, any additional requirements from the local IRB, and applicable state and federal regulations with regards to regulatory reporting requirements.

**6.5 Site Monitoring Activities by RCC**

Although the NDMC will be primarily responsible for formal site visits and monitoring of CPSs, the UCSF RCC will support these NIH StrokeNet activities as follows:

1. The UCSF RCC staff will make a baseline visit to each NorCal site prior to the start of that site’s participation in any NIH StrokeNet trial in order to tour the facility and meet the Site PI, lead coordinator, and other study team members.
2. The UCSF RCC staff will also visit each NorCal site after the site has enrolled the first participant in any NIH StrokeNet clinical trial, monitoring for subject eligibility, consent process, and data integrity, and after every 5th patient enrolled or every 6 months, whichever comes first. If there are concerns, a follow-up visit will take place with the next enrolled subject. The PI or co-PI will communicate monthly via email or telephone with the lead investigator at each enrolling hospital and the PI or co-PI will conduct an annual in-person site visit to each enrolling spoke hospital. Site data and regulatory adherence will also be monitored remotely by the RCC using systems in place in WebDCU.

**7.0 Frequency of Review**

These SOPs will be reviewed on an annual basis.

**Document History**

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Description of Modifications: Initial Version

Approved By: (pending Wade Smith, Anthony Kim, Michele Meeker)

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