NCI’s CIRB: Streamlining IRB Processes

Presented to Cancer and Leukemia Group B Clinical Research Associates

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Agenda

• Background of Initiative

• Enrollment and Utilization Data

• Evaluations – past, present, future

• How it works
The NCI CIRB Initiative - Background

Established in 1999 as recommended in the Armitage Report from the NCI’s Clinical Trials Program Review Group:

• Help NCI create a more efficient and effective clinical research effort
  – Streamline or eliminate redundant processes and procedures

http://deainfo.nci.nih.gov/ADVISORY/bsa/bsa_program/bsactprgmin.htm

The NCI CIRB Initiative

Target questions:

– **Primary**: Could a CIRB *reduce* the significant local administrative burdens for multi-site trials while maintaining a high level of human subjects protection

– **Secondary**: Would a CIRB *enhance* the protection of research participants by providing consistent expert IRB review at the national level before the study is distributed to local investigators
The NCI CIRB Initiative - Background

- **Initial/start-up phase**
  - Frequent consultations with OHRP
  - Review model decision
    - OHRP (OPRR) allows for different centralized IRB models
        http://www.hhs.gov/ohrp/humansubjects/guidance/local.htm
    - **Model A**
      - Appropriate where no local IRB exists
      - Understanding of local context obtained via site visits, audits, teleconferences
    - **Model B**
      - More appropriate where local IRB already present
      - Can utilize LIRB for understanding of local context
      - No need for site visits, etc.

The NCI CIRB Initiative - Background

- **Initial/start-up phase (continued)**
  - NCI chose Model B where CIRB and LIRB share regulatory responsibilities – a partnership
    - CIRB’s primary function is *initial and continuing review* of studies, including amendments and Group-distributed AEs
    - The local institution’s primary function is *consideration of local context, oversight of local performance, review of locally occurring adverse event*
    - Developed a new review term called “Facilitated Review” – the review during which the local IRB reviews the CIRB-approved study for local context considerations.
Adult Board Composition

- One Chair and 17 Voting Members (18 total)
  - PATIENT ADVOCATES: 22% (4)
  - PHYSICIANS: 39% (7)
  - Other Professionals: 39% (7)
    - NURSES: 2
    - PHARMACISTS: 2
    - STATISTICIAN: 2
    - ETHICIST: 1

Source: EMMES Current as of 04/30/2009

Enrollment and Utilization Data Summary

- Total Number of Enrolled Institutions: 338
- Total Number of Enrolled Institutions including other institutions relying on their IRB: 481
- Number of Studies Available for Facilitated Review (adult only): 139
- Number of Facilitated Reviews utilized: 8,976
  - Adult Studies: 5,695
  - Pediatric Studies: 3,281

Source: EMMES Current as of 04/30/2009
CIRB Approved and Group Activated Studies with Facilitated Review Usage (Since Start of Initiative)

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<tr>
<th>Source: EMMES</th>
<th>Current as of 04/30/2009</th>
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![Bar Chart](chart.png)

**Number of Studies**

- ACOSOG: 3281
- CALGB: 1027
- COG: 1559
- ECOG: 538
- GOG: 448
- NCCTG: 848
- NCICTG: 548
- NSABP: 12,844
- RTOG: 1027
- SWOG: 161

**Number of FR**

- ACOSOG: 5
- CALGB: 61
- COG: 28
- ECOG: 30
- GOG: 10
- NCCTG: 5
- NCICTG: 4
- NSABP: 12
- RTOG: 18
- SWOG: 27

**Adult Institutions Conducting 50 or more Facilitated Reviews**

1. Advocate Health Care Network Institutional Review Board (AHCNIRB)
2. Aultman Hospital
3. Aurora Health Care
4. Borgess Medical Center
5. Bronson Methodist Hospital
6. Cancer Center of Kansas
7. Georgetown University
8. Gundersen Clinic, Ltd.
9. Marshfield Clinic
10. Mission Hospitals, Inc.
11. Mt. Sinai Medical Center
12. Nevada Cancer Research Foundation-CCOP
14. Ochsner Clinic Foundation (CCOP)
15. Provena St. Mary’s Hospital
16. Providence Hospital
17. Saint Joseph Mercy Health System
18. St. James Hospital and Health Centers
19. St. Vincent Hospital
20. Thomas Jefferson University
21. University Medical Center of Southern Nevada
22. University of New Mexico Health Sciences Center
23. Washington University School of Medicine
24. West Michigan Cancer Center

Current as of 04/30/2009
**Evaluations Performed**

- **External Evaluation Panel** recommended four components of evaluation plan
  - **Metrics of Enrollment and Utilization**: Satisfaction Surveys (local site IRB and research staff); Cost Analysis - Todd Wagner, PHD, Stanford University economist; Obtain AAHRPP Accreditation
- **‘Satisfaction’ Survey results** (Research Triangle Institute)
  - 80% felt that participating in the CIRB saved them some or a lot of time and effort
  - Overall experience = 65% good - very good
- **‘Barriers to Using CIRB’ results** (Science and Technology Policy Institute)
  - Pursue AAHRPP Accreditation
  - Develop model SOP for incorporating CIRB into local processes
- **Costs and Benefits of CIRB** (Todd Wagner, PHD, Stanford University economist)
  - Preliminary results show CIRB saves IRB and investigator time and effort

**Investigator Perspective**

- **IOM National Cancer Policy Forum: Multi-Center Phase 3 Clinical Trials and NCI Cooperative Groups, July 2008**
  - **Alan Keller, MD**, Cancer Care Associates,
    **“Multi-site Clinical Trials in the Community: Models and Methods: What Works, What Doesn’t and Why”**
  - promoted use of the CIRB as key to reduce redundancy, cost, variability, time and to increase oversight and safety
  - encouraged mandating use of Central IRB
Research Staff Perspective

- Hahn, Kimberly. Measuring IRB Efficiency: Comparing the Use of the National Cancer Institute Central IRB to Local IRB Methods, SoCRA SOURCE, May 2009
  - “Retrospective analysis demonstrated an increase in productivity with fewer staff hours after initiation of the Central IRB.”
  - “IRB process is most efficient and provides increased benefits in terms of time, costs, and patient safety, as well as other measures when Central IRB is utilized.”

How does the NCI CIRB model work for local IRB and investigators/research staff?

- Local investigator is notified of new study via:
  - Routine Group/CTSU activation announcement
  - CIRB semi-monthly “Website Posting Update” email

- If the local investigator decides to open study:
  - OPTION 1: Investigator or CRA downloads the completed application, protocol, and informed consent document from the CIRB website and submits documents to local IRB
  - OPTION 2: IRB staff download all the documents and submit to Chair for review
How does the NCI CIRB model work – site? (2)

- Chair/subcommittee assesses CIRB review documents and decides whether local considerations are addressed (called “facilitated review”)
  - If local considerations are not addressed, must review study per local procedures
  - If local considerations are addressed, notifies CIRB via CIRB Website

- The CIRB becomes the IRB of record for study at that site and is responsible for reviewing amendments, continuing reviews, adverse events distributed by the Group, recruitment materials, etc.

What to expect when enrolling in the CIRB? Enrollment Form and Authorization Agreement

- Important local institution information to be included on the Enrollment Form:
  - Names of IRB(s) that review NCI Cooperative Group clinical trials
  - Names of other institutions that rely on those IRBs for review of Cooperative Group trials, if any
  - Contact information for local investigator(s), research staff, and IRB

- Authorization Agreement
  - States that the “reviews, approvals, and continuing oversight performed by the NCI CIRB satisfy the requirements of the DHHS regulations for the protection of human subjects as 45 CFR 46…”
  - Requires institution to sign indicating their agreement to rely on the CIRB reviews as outlined in the ‘Division of Responsibilities’ document
  - Include IRBs relying on institution’s IRB
  - Send two original, signed documents for NCI to execute
What to expect when enrolling in the CIRB? 

Communications

- Identify all IRB and research staff that will need access to the CIRB website
  - Everyone identified will receive user names and passwords
  - IRB office staff who are designated by the IRB to accept facilitated review have unique level of access
- Broadcast emails which include the semi-monthly Website Posting Update, if desired
- Other communication pathways
  - NCI CIRB website (www.ncicirb.org)
  - Frequently Asked Questions available on the website
  - CIRB Helpdesk 1-888-657-3711 or ncicirbcontact@emmes.com

CIRB - Benefits of Participation

- Research Participants
  - Oncology-specific multidisciplinary Board
  - Dedicated review for study participant protections
  - Facilitated review allows local sites to open studies within days
  - Encourages sites to consider opening studies in rare diseases for those patients
CIRB - Benefits of Participation (continued)

- Investigators/Research Staff and IRBs
  - Streamlined processes
    - Reduced workload – fewer submissions and reviews
    - Completed IRB Application provided
  - Elimination of full Board review
    - Reduced workload on local IRB members
  - Decreased local IRB time and costs
    - CIRB becomes the IRB of record for the complete life-cycle of the protocol – advantages are cumulative over the many years a phase 3 study lasts

CIRB Website Tour

- Tour of the following:
  - Homepage
  - Restricted-access “Participant’s Area”
  - CALGB-30607
    - Initial Review
    - Amendment Review
    - Continuing Review
    - SAE Review
Welcome to the Central IRB Initiative

Central IRB (CIRB) Initiative is designed to help reduce the administrative burden on local IRBs and investigators while continuing a level of protection for human research participants.

A key feature of the CIRB is an electronic review mechanism that allows investigators to enroll patients into adult and pediatric Cooperative Group clinical trials significantly faster than when employing a traditional method of IRB review.

CIRB Initiative is sponsored by NCI in consultation with the Office of Human Research Protections (OHRP).

What's New

- New CIRB Study Activity Update (05/15/2009)
- CIRB Study Activity Update (04/23/2009)
- CIRB Study Activity Update (04/15/2009)
- CIRB Study Activity Update (03/31/2009)
- CIRB Study Activity Update (03/06/2009)
- CIRB Study Activity Update (02/28/2009)

How to Join

back to top
Contact the NCI CIRB

Click here for Facilitated Reviews previously accepted at your Institution

RB Studies List

Search Criteria for Study List

Choose a Group

Choose a Study

Enter a Group Activation Date Range

[ ] (start) 

[ ] (end)

Display Criteria for Study List

Display by

Quick Group List

AC000 | CALGB | COG | ECOG | 000 | 001C02 | NCICT | NSABP | RT00 | SRR00 |
LGB-3607
Randomized, Phase III, Double-Blind Placebo-Controlled Trial of Sunitinib (NCT #736511, NID 74110) as Maintenance Therapy in Non-Progressing Patients Following an Initial Four Cycles of Platinum-Based Combination Chemotherapy in Advanced, Stage IIIB / IV Non-Small Cell Lung Cancer

Current Study Documents (view/print document)
- Protocol/Informed Consent Documents
  - Protocol Version Date 02/10/09
  - Informed Consent Document for Protocol Version Date 02/10/09 (1p)

To download the Local IRB Facilitated Review Packet, click here.

In order for the IRB to be the IRB of Record for this study at your site, you must:
1. Conduct Facilitated Review
2. Submit the Facilitated Review Acceptance Form (click here), which informs the IRB of your request for it to be the IRB of Record.

Initial Review Amendment Reviews Continuing Reviews SAE Reviews (Back to Study List)

Update #1 (Protocol Version Date 02/10/09)
- Amendments
  - 02/21/09: CALGB Change Name
  - CIRC Application
    - CIRC Application (Protocol Version Date 02/10/09)
    - Correspondence
      - 02/24/09: CIRC Update 1 Approval Letter (Protocol Version Date 02/15/09)
      - 02/24/09: Suntinib Action Letter Notice
  - Support Documents
    - CHRP: IRB Review of Protocol and Informed Consent Changes
  - Protocol
    - Protocol Version Date 02/10/09
    - Informed Consent

Continuing Review September 2008
- Continuing Review Forms
  - CIRC Continuing Review Application (Protocol Version Date 05/15/09)
  - Correspondence
    - 09/09/08: CIRC Continuing Review Approval Letter (Protocol Version Date 05/15/09)
    - 08/07/08: Continuing Review Reminder Notice
  - Protocol
    - Protocol Version Date 05/15/08
  - Informed Consent
    - Informed Consent Document for Protocol Version Date 05/15/08 (For Sap 08 CR)
The NCI CIRB Initiative – Summary of Rationale

- Emphasis on speed of trial activation, while important, is but one factor to consider regarding the IRB process

- Other factors include:
  - IRB costs of review
  - Physician/nurse/CRA time to complete IRB application; duplicate IRB submission, etc.
  - IRB members’ time and effort
  - Number of patients at a site with specific cancer
    - Easier to open clinical trials for rare diseases
6 Easy Steps – Summary of Enrollment

- Complete the CIRB Enrollment Form
- Modify institution’s FWA to include the CIRB
- Sign the Authorization Agreement
- Return Enrollment Form/Auth. Agreement to CIRB
- Create a local IRB SOP for utilizing the CIRB
- Notify local investigators of the new process

Contact the NCI CIRB

Website: http://www.ncicirb.org
Email: ncicirbcontact@emmes.com
CIRB Toll-free Number: 888-657-3711
Fax Number: 301-560-6538

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