SOP Number: ADM 09
SOP NAME: RCC Management of Satellites and Performance Sites
Effective Date: 3-Jun-2014 (rev 14-Jun-2023)

1. POLICY

The purpose of this Standard Operating Procedure (SOP) is to define the expectations for Regional Coordinating Centers (RCCs), the National Coordinating Center (NCC) and the National Data Management Center (NDMC) in the management of Satellite Sites (SS) and Performance Sites (PS). The RCC Principal Investigator (PI) (or her/his delegate) is responsible for the identification and management of any RCC affiliated Satellites or PS. This responsibility is inclusive of all aspects of clinical trial performance and NIH StrokeNet Network activities, including but not limited to execution of Clinical Trial Agreements with the National Coordinating Center (NCC), execution of Reliance Agreements with a Central Institutional Review Board (CIRB), service agreements with Performance Sites (PS) is applicable, and the maintenance of required documents in WebDCU™.

2. DEFINITIONS AND ABBREVIATIONS

Abbreviations:

CIRB	Central Institutional Review Board (StrokeNet CIRB or Commercial CIRB)
CTA	Clinical Trial Agreement
MPI	Multiple Principal Investigator
NCC	National Coordinating Center at the University of Cincinnati
NDMC	National Data Management Center at the Medical University of South Carolina
NIH	The National Institutes of Health
NIH StrokeNet	The NINDS Stroke Trials Network
NINDS	The National Institute of Neurological Disorders and Stroke
PI	Principal Investigator
PPI	Protocol Primary Investigator
PS	Performance Site
RA	Reliance Agreement
RCC	Regional Coordinating Centers
SS	Satellites Sites
SOP	Standard Operating Procedure
WebDCU™	Web Data Coordination Unit at the Medical University of South Carolina

Definitions:

Central/Single Institutional Review Board (cIRB/sIRB): Use of a cIRB/sIRB for the U.S. sites of the NIH-funded multi-site studies where each site will conduct the same protocol involving non-exempt human subjects research is required by the NIH policy.

Performance Site: A clinical location that is engaged in research for a clinical trial.

Reliance Agreement: A formal, written document that provides a mechanism for an institution engaged in research to delegate institutional review board (IRB) review to the CIRB.

Regional Coordinating Center (RCC): An institution designed and directly funded by the NINDS/NIH to provide leadership for the NIH StrokeNet on a regional level.

Satellite Site (SS): An institution that is not legally affiliated with the awarded RCC but named by an RCC as a branch of its regional network. SS may or may not be a site for a clinical trial for StrokeNet affiliated studies.

StrokeNet Out-of-Network Sites: Satellites and Clinical Performance Sites not in StrokeNet under an RCC but participates in a particular trial. The Prime Awardee for the trial acts in the "role of the RCC" for support and oversight. Can join a StrokeNet RCC after one year of trial participation and acceptance into a StrokeNet RCC network.

WebDCU™: An integrated web-based clinical trial management system developed by NDMC for clinical trial data management and full scope trial operations management.

3. SCOPE

This policy applies to all Regional Coordinating Centers with infrastructure awards from the NIH.

4. PROCEDURES

A. RCC Rights and Responsibilities

1. The RCC, through the RCC Principal Investigator (PI) has primary authority and responsibility to develop, implement and maintain a Regional Coordinating Stroke Center (RCC) for the NIH StrokeNet.
2. The RCC has primary and lead responsibilities for recruiting satellite centers to participate in RCC supported trials and providing scientific leadership and regular communication to satellite centers regarding protocols and study progress and for providing administrative and budget support for protocol initiation.
3. RCC request to add Satellite and PS outside of their NINDS designated geographic area requires the approval of the StrokeNet MPIs.
4. The RCC has the responsibility for providing leadership for the NIH StrokeNet activities at the RCC, including implementation of studies, coordinating with the central/single Institutional Review Board (IRB), monitoring RCC performance and quality control, participating in the preparation of

publications and presentations, and collaborating with NIH StrokeNet clinical investigators and interacting with non-StrokeNet investigators.

5. Exceptions or additions to such activities can be made by the Network Steering Committee.
6. The RCC will manage and conduct the proposed clinical trial (or "study") in compliance with all established DHHS, NIH, NINDS policies and procedures.
7. The RCC will be responsible for protecting patient safety and obtaining adequate patient recruitment to complete the study.
8. It is the RCC's responsibility (1) to ensure that all sites engaged in research involving human subjects have an appropriate OHRP-approved Assurance and an IRB approval of the research consistent with 45 CFR Part 46 and (2) to retain documentation of compliance with the requirements of 45 CFR Part 46.
9. It is the responsibility of the RCC to comply with FDA policies and regulations as relevant to clinical trials and as published at 21 CFR Parts 50 and 312.
10. The RCC or his/her designee will ensure that the RCC information entered into the [Regional Coordinating Center] tab is current in the WebDCU™ on a yearly basis or within 30 days of a change.
11. The RCC is responsible for acting as a resource for any local questions regarding ongoing NIH StrokeNet trials within the RCC.
12. The RCC is responsible for assessing the SS/PS to understand their infrastructure and processes that are in place. This meeting should include an overview of the NIH, the NIH StrokeNet, the network website www.NIHStrokeNet.org/, and a directory of key contact personnel at the RCC, NCC and NDMC.
13. Roles of the local pharmacies and the local IRBs must be assessed for ways to expedite clinical trial implementation for NIH StrokeNet trials.
14. Clinical trial metrics will be maintained in the WebDCU™ for all RCCs, SS, and PS. For the NIH StrokeNet Network metrics, refer to SOP ADM 08: Network Process for RCC Performance Review.

B. SS or a PS Rights and Responsibilities

1. SS must have current registration in SAM.gov.
2. The SS/PS must execute a RA with the CIRB of record.
3. The SS/PS must keep current and accurate information about study personnel updated in the WebDCU™.
4. PS will recruit into NIH StrokeNet trials under the same Clinical Trial Agreements (CTAs) as the participating RCC or SS.
5. SS will recruit into NIH StrokeNet trials under its own CTAs.
6. SS/PS will provide quality data, documentation of conflict of interests, good clinical practice, human subject protection and protocol training for participating investigators.
7. All travel to RCC meetings or NIH StrokeNet meetings must be paid by the SS/PS except as covered for travel related to trials as a recruitment site. Any other coverage of travel expenses would be at the discretion of the RCC PI. SS/PS must provide a site representative to attend all required investigator meetings and trial conference calls.

8. The SS/PS must complete required enrollment documentation for any trial and complete payment milestone tasks prior to receiving payment.
9. Each Performance Site will be responsible for:
    a. Complying with all local, and federal requirements for the initiation and ongoing performance of a clinical trial per the principles of Good Clinical Practice as defined in ICH Consolidated Guidance (ICH E6) and Title 45 and part 46 Federal Policy for the Protections of Human Subjects "Common Rule."
    b. Complying with the trial investigational plan as defined in the protocol and approved by the CIRB of record and the NINDS appointed DSMB.
    c. Obtaining appropriate central IRB and local IRB acknowledgement of CIRB review.
    d. Reporting of required adverse events to CIRB and to the WebDCU™ for central trial review in compliance with defined procedures.
    e. Responsiveness of site PI or in his/her absence, another designated investigative team member, to email correspondence within 5 days.
    f. Completion of internal logistics necessary to execute the trial.
    g. Assurance that standard medical care and management of adverse events will be provided for all subjects randomized.
    h. Assuring that the expenses for research related procedures are not billed to the subject.
    i. Receipt, storage, and accountability of study provided supplies in compliance with defined procedures.
    j. Handling and administration of study supplies to subjects in compliance with defined procedures
    k. Assurance of access to subject medical records for site monitoring visits per institutional and trial procedures.
    l. Data collection entered into WebDCU™ in a time frame consistent with the MOP.
    m. Compliance with all study policies and procedures published in the trial MOP. MOP will be available under Project Documents in the WebDCU™ as maintained by the NCC.

C. NCC Rights and Responsibilities

1. The NCC will execute a CTA with each RCC and SS so that the per-patient cost associated with specific Stroke Network protocols can be efficiently administered.
    a. Direct costs for approved Stroke Network trials are supported by grants from NINDS or other funding sources.
    b. The NCC will distribute the per-patient cost to the Stroke Network sites as total fixed unit basis.
2. The NCC will be responsible for fiscal oversight for overall project finances and protocol specific funding.
    a. The NCC is responsible for providing payment directly to RCCs and SS for dispersal to the appropriate PS. Payments will be determined by the per patient budget and a password protected version will be available on the StrokeNet website. Payments will be conditional on data completion/quality criteria and may be withheld until all issues are resolved.

3. This SOP along with ADM SOP 7 specifies budgeting guidelines for Stroke Network studies (industry and non-industry trials) including reconciliation and reporting plans that incorporates the following guidelines:
    a. The NCC will execute a CTA for RCC/SS/PS chosen to participate in StrokeNet studies, so that the per-patient cost associated with specific StrokeNet protocols can be efficiently administered.
4. Clinical Trial Site Selection
    a. The NDMC will disseminate StrokeNet proposals surveys to all RCCs to allow sites the option to participate in each StrokeNet supported study.
    b. The RCC is responsible for ensuring the clinical sites follow approved protocols and maintain quality control of data and ensure participant safety.
    c. Any problems concerning the compliance of clinical sites in the protocol or quality control of data should be reported immediately to StrokeNet leadership.
    d. For those clinical trials supported by a third party (any non-academic, commercial, advocacy, or philanthropic entity), the RCC must obtain the written documentation or agreement from all participating sites that they will abide by the terms of the agreement between a third party and the NINDS, including but not limited to special publication procedures and data sharing as well as the intellectual property options.
    e. Collaborations with a third party may have unique conditions, so the RCC, as well as the SS, should confirm the details of each collaboration with NINDS.
5. The NCC is responsible for assessing the SS/PS performance as part of the larger RCC performance measurement.

D. NIH Requirement for CIRB/Single IRB Use for Multi-site Studies

1. In collaboration with the NINDS, the NCC will implement all procedures required to establish and implement a CIRB for all StrokeNet trials.
2. This includes coordinating a CIRB of record and managing all required IRB communication and documentation including, but not limited to, tracking approval, maintaining regulatory documents, communicating with site IRBs, and handling adverse event reporting and notifications.
3. The RCC PI is responsible for complying with CIRB requests and implementing the approved protocol, including obtaining informed consent for all study participants at the clinical site.

E. NDMC Responsibilities

1. Is responsible for development of the regulatory document module for a trial, and the module will track missing and/or expired trial specific regulatory documents on behalf of the SS/PS and non-StrokeNet sites and the responsible RCC.
2. The NDMC is responsible for the management of data for a trial and will notify the site and the responsible RCC of data quality issues including but not limited to missing data, missed data entry timelines, protocol deviations and protocol violations and other criteria as defined by the network or PPI.
3. The NDMC will collaborate with the NCC in developing SS/PS start-up checklist to assist with initiation of new PS in an RCC.
4. The NDMC will develop a database for site management, including site metrics and invoicing.

5. APPLICABLE REGULATIONS AND GUIDELINES

21 CRF 312.57	Recordkeeping and Record Retention
ICH E6, 2.13	The Principles of ICH GCP
ICH E6, 5.1	Quality Assurance and Quality Control
ICH E6, 5.5	Trial Management, Data Handling and Recordkeeping
RCC NOA	RCC Notice of Grant Awards (2023)
45 CFR Part 46	Protection of Human Subjects
21 CFR Parts 50	FDA Policy and Regulations
21 CFR 312	FDA Policy and Regulations

6. REFERENCES TO OTHER APPLICABLE SOPS

ADM 02	Process for Reporting Financial Conflict of Interest
ADM 06	Process for Documenting Essential Financial and Federal Compliance
ADM 07	Per Subject Payments and Development of Clinical Trial Budgets
ADM 10	Process for Inclusion of New Satellite Sites for RCC
ADM 11	Process for CIRB Reliance
ADM 12	Process for CIRB Reporting
ADM 13	Process for Medical and Safety Monitoring
ADM 15	Network Communications
ADM 16	Process for Trial “Master” and “Site” Regulatory file Management

7. ATTACHMENTS AND REFERENCES

8. DOCUMENT HISTORY

Version	Description of Modification	Completion Date	Issue Date	Effective Date
1.0	Final	3-Jun-2014	3-Jun-2014	3-Jun-2014
1.1	Biannual review with minor administrative changes	16-Sep-2016		
2.0	Final	19-Dec-2016	19-Dec-2016	19-Dec-2016
3.0	Further define roles in site management	26-Sep-2018	04-Oct-2018	04-Oct-2018
4.0	Inclusive of past MTA language	20-Apr-2020	20-Apr-2020	20-Apr-2020
5.0	Process updates	14-Jun-2023	29-Jun-2023	29-Jun-2023

NIH StrokeNet Network

Standard Operating Procedure (SOP)

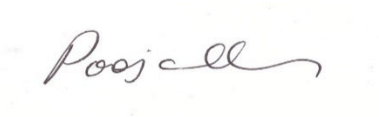
RCC Management of Satellites and Performance Sites

Standard Operation Procedures

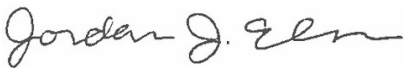
Version 5.0

ADM #9

Reviewed and Approved by:



Pooja Khatri, MD, (StrokeNet NCC Principal Investigator)



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