Delegation of Sponsor Duties

NJRO-REG-SOP-016

Contents

1. Background/Introduction

The Medicines for Human Use (Clinical Trials) Regulations 2004 (as amended) defines the sponsor as 'the person who takes responsibility for the initiation, management and financing (or arranging the financing) of that trial.'

The Regulations state that 'prior to initiating a trial the sponsor should define, establish and allocate all trial-related duties and functions'. Furthermore, 'a person who is sponsor of a clinical trial in accordance with this regulation may delegate any or all of their functions under these regulations to any person but any such arrangement shall not affect the responsibility of the sponsor' (The Medicines for Human Use (Clinical Trials) Amendment Regulations, 2006).

As such, when The Newcastle upon Tyne Hospitals NHS Foundation Trust (NuTH) acts as a clinical trial sponsor, any sponsor related duties can be delegated however the trust remains accountable. It is therefore critical that NuTH implements procedures to ensure the oversight of any trial-related sponsor duties and functions carried out on its behalf; and that any delegated duties are clearly documented and agreed by all applicable parties involved.

2. Purpose

This SOP therefore outlines the method to be followed when delegating sponsor related duties as set out in the Delegation of Duties schedules 1(a) and (b).

See associated Delegation of Duties Schedules:

- NJRO-REG-T-024 (Delegation schedule to be used when delegating sponsor duties to Newcastle Clinical Trials Unit and/or the Chief Investigator)
- NJRO-REG-T-028 (Delegation schedule to be used when delegating sponsor duties to external Clinical Trials Units and the Chief Investigator)

The main purpose is to ensure a robust management and governance framework is in place to support the running of the clinical trial. This document clarifies the roles and delegated duties of involved parties to ensure the results are credible and accurate and the rights and integrity of participants are protected. It is particularly relevant to members of the Regulatory Compliance Team (RCT) within the Newcastle Joint Research Office (NJRO) with responsibility for delegating and overseeing sponsor related duties in NuTH sponsored high risk trials.

3. Scope of Document

This SOP applies to all Clinical Trials sponsored by NuTH that fall under the RCT within the NJRO, whereby the Sponsor wishes to delegate sponsor related duties to the Chief Investigator (CI), an assigned Clinical Trials Unit (CTU)/trial management team, other relevant parties within the University and/or other third parties where applicable. Examples of some delegated duties may include:

- Trial set-up, conduct and management from the point of funding award
- Management of trial data and analysis
- Pharmacovigilance
- Application, approvals and authorisations
- Quality Assurance & Monitoring
- Publication
- Contracting
- Third party vendor assessments

4. Definitions

AE: Adverse Event
APR: Annual Progress Report
ATIMP: Advanced Therapy Investigational Medicinal Product
CAG: Confidentiality Advisory Group
CAPAs: Corrective and Preventative Actions
CFM: Contract Financial Management
CI: Chief Investigator
CRF: Case Report Form
CTIMP: Clinical Trial of an Investigational Medicinal Product
CTU: Clinical Trials Unit
DMC: Data Monitoring Committee
DSUR: Development Safety Update Report
ETC: Excess Treatment Cost
EudraCT: European Union Drug Regulating Authorities Clinical Trials Database
G&C: Grants and Contracts
GCP: Good Clinical Practice
HRA: Health Research Authority
IMP: Investigational Medicinal Product
IRAS: Integrated Research Application System
MHRA: Medicines and Healthcare products Regulatory Agency
NIHR CRN: National Institute of Health Research Clinical Research Network

NJRO: Newcastle Joint Research Office
NuTH: The Newcastle upon Tyne Hospitals NHS Foundation Trust
OID: Organisation Information Document
QA: Quality Assurance
REC: Research Ethics Committee
RCT: Regulatory Compliance Team
R&D: Research and Development
RSI: Reference Safety Information
SADE: Serious Adverse Device Effect
SAE: Serious Adverse Event
SIV: Site Initiation Visit
SmPC: Summary of Product Characteristics
SoE: Schedule of Events
SoECAT: Schedule of Events Cost Attribution Template
SOF: Sponsor Oversight File
SOP: Standard Operating Procedure
SUSAR: Suspected Unexpected Serious Adverse Reaction
TMF: Trial Master File
TMG: Trial Management Group
TOC: Trial Oversight Committee
TSC: Trial Steering Committee
USADE: Unanticipated Serious Adverse Device Effect

5. Roles & Responsibilities

The RCT within the NJRO are responsible for putting in place a Delegation of Duties Agreement and Schedule for all NuTH sponsored, high risk trials where sponsor duties are to be delegated. This includes NuTH sponsored CTIMPs, ATIMPs, Clinical Investigations of Medical Devices, randomised surgical trials and international trials that fall under the remit of the RCT.

6. Procedures

Following the confirmation of funding award, the Delegation of Duties Agreement/Schedule is usually discussed at an early Trial Management Group (TMG) meeting (or equivalent), or via email if deemed appropriate.

The initial TMG group (or equivalent) will often comprise, at a minimum, of the Chief Investigator, CTU personnel (e.g. Senior Trial Manager and/or Trial Manager), Statistician (where applicable) and a sponsor representative.

Other support departments may also be in attendance at the TMG, but not routinely invited. e.g. Pharmacy, Grants and Contracts, Trust R&D Finance etc. Separate discussions may take place with these groups outside of the TMG (e.g. via email), however any relevant correspondence generated in relation to the Delegation of Duties shall be saved in the Sponsor Oversight File.

The Delegation of Sponsor Duties Agreement is made up of two parts (although these may be combined to make one document depending upon the requirements of parties involved):

- Overarching Delegation Contract/Agreement (e.g. NJRO-REG-T-027)
- Delegation of Duties Schedule (NJRO-REG-T-024 and NJRO-REG-T-028)

The delegation of sponsor related tasks will be in accordance with schedule 1(a) as documented within the relevant Delegation of Duties Schedules (NJRO-REG-T-024 and NJRO-REG-T-028). The RCT as sponsor will lead any discussions relating to the Delegation of Duties and will draft an initial version of the schedule (and contract where appropriate) which will be circulated for wider review and discussion.

Individual trial related duties and functions will be agreed, allocated and documented as per the below guidance.

6.1. Completion of Schedule 1(A) and 1(B)

This section aims to provide guidance on the completion and agreement of the Delegation of Duties Schedule (as contained within NJRO-REG-T-024 and NJRO-REG-T-028).

In order to provide clarification when two or more parties are selected for the same task the lead party must be highlighted with an asterisk (*). The comments section of schedule 1(a) should also be used to provide further clarification on any delegated tasks where required.

The list of delegated duties in schedule 1(a) may be updated/amended for the purpose of ongoing improvements or to suit the requirements of the trial. Individual tasks may also be amended to meet the needs of the study, but this will be done in agreement with the relevant parties to the Delegation of Duties Schedule, who will sign the document to provide their confirmation once finalised.

- **Section 1.0: Contracting and Contract Amendments**

Research requires different contractual arrangements to be put in place between the organisations involved in the sponsorship, funding, management and delivery of a study. This ensures compliance with the Clinical Trial Regulations and organisational governance. This section identifies the parties responsible for the contracting aspects of the study.

Depending on the organisation that leads on the proposal, the following duties will either be led by the Sponsor (including NuTH R&D finance) or the University Grants & Contracts (G&C) team:

- Contract with main funder
- Collaboration agreement (including finances)
- Prepare financial appendix for site agreements

The Sponsor will prepare the following irrespective of the lead organisation:

- Delegation of Duties Agreement

The following should be decided on an individual study basis, but for avoidance of doubt the duty will be discussed and clarified within this section:

- Draft investigator site agreements
- Issue investigator site agreements
- Respond/address queries

The Sponsor holds overall responsibility for managing vendors. However, where a Clinical Trials Unit (CTU) utilises a third party to complete their delegated duties, the CTU retain responsibility for conducting the relevant vendor assessment and putting in place any appropriate agreements. These may be requested by the sponsor team for oversight purposes. As a result, the following tasks will be allocated on an individual study basis:

- Prepare third party vendor contracts
- Issue third party vendor contractors

- **Section 2.0: Protocol and Patient Information**

A study protocol is a document which describes how the research will be conducted. It describes a range of activities including, but not limited to, the trial background, methodology, oversight, data collection, analysis etc.

The Chief Investigator (CI) is responsible for the following areas of 1) protocol and 2) patient information:

- Design/Development/Methodology
- Review
- Agreement

Members of the TMG, such as statistics (where appropriate) will support the following aspects of protocol development:

- Design
- Review

The CTU/trial management team will support the following aspects (although this may be delegated to the CI if a CTU or trial manager is not involved):

- Administration and document preparation

The CTU/trial management team may also support the methodology aspects, but this will usually be agreed at funding application stage.

The finalised protocol will be agreed by the following parties:

- Sponsor
- Statistics (where appropriate)
- CI
- CTU/trial management team

Statistics may not always input into the patient documentation, however any involvement will be clearly documented within the Delegation of Duties Schedule.

- **Section 3.0 – Applications, Approvals & Authorisations**

All relevant approvals must be obtained before commencement of the clinical trial. This section assigns the duties concerned with obtaining the required regulatory approvals.

The CI is responsible for:

- Obtaining any study related regulatory approvals

The CTU/trial management team supports the CI by preparing the following documents:

- IRAS dataset (or equivalent paperwork) for MHRA/REC/HRA submission, and any other relevant applications e.g. CAG

Following completion of the regulatory applications the following parties will undertake a review prior to authorising for submission to the relevant regulatory authorities:

- Sponsor
- CI
- CTU/trial management team

The CTU/trial management team is delegated the task of submitting and tracking the progress of the regulatory approvals. They are also delegated the task of completing the sponsor oversight tracker report.

For multi-site studies the HRA require a Schedule of Events (SoE)/SoECAT and Organisation Information Document (OID). This document involves assigning research costs and timings for study procedures. This aspect must be supported by the CI or other clinically experienced individuals.

- **Section 4.0 - Amendments**

Amendments are changes to research after a REC favourable opinion/HRA approval/MHRA authorisation has been granted. This section assigns the duties for preparation, review, and submission of study amendments for regulatory approval.

The CI is responsible for:

- Obtaining all relevant approvals for study amendments

The CTU/trial management team and other relevant support teams e.g. stats (if required) support the CI by preparing the following documents:

- Amendment tool (and equivalent documentation) for MHRA, HRA and REC (as required)

Amendments are reviewed prior to authorising for submission to the relevant regulatory authorities by:

- Sponsor
- CI
- Statistics (where appropriate)

The CTU/trial management team is delegated the task of submitting and tracking progress of the amendments and the associated regulatory approvals. Once approvals

are issued the CTU will issue amendment confirmation and relevant paperwork to participating sites for review.

- **Section 5.0 – Selection of Investigator Sites**

An assessment of the suitability of the site must be conducted via completion of a site feasibility assessment. This aspect is delegated to the CTU/trial management team. The Chief Investigator will suggest suitable sites and review completed questionnaires and select sites accordingly.

- **Section 6.0 – Site Initiation**

Prior to authorising the start of a clinical trial and the initiation of a research site, all approvals, contracts, and necessary documentation must be in place.

The CTU/trial management team is delegated the following:

  - Performing regulatory green light procedure
  - Conduct of Site Initiation Visit (SIV)
  - Submit finalised SIV documentation to Sponsor for review
  - Open site to recruitment

- **Section 7.0 – Third Party Vendor Assessments**

The Sponsor may delegate a range of trial functions (management, laboratory analysis, data management, statistics etc.). Irrespective of the duties delegated to external vendors the Sponsor retains overall responsibility and must maintain adequate oversight of activities to ensure compliance with all applicable legislation, GCP and approved trial documentation. The CI is responsible for identifying the trial functions which may need to be delegated to an external vendor.

The allocation of the following tasks will be decided by the Sponsor and other relevant stakeholders on an individual study basis:

  - Issue vendor assessment questionnaire
  - Review completed questionnaire
  - Identify/resolve potential issues
  - Issue and complete Technical Agreement (where appropriate)
  - Carry out site visit, if required
  - Confirm vendor selection

Where a CTU utilises a third party to complete their delegated duties, the CTU retain responsibility for conducting the relevant vendor assessments and putting in place

appropriate agreements. These may be requested by the sponsor team for oversight purposes.

- **Section 8.0 – Database Management**

The data management process typically covers the design, production and management of data collection and preparing final dataset(s) ready for analysis.

The CI will usually take on the following duties which will be supported by both the CTU/trial management team and Statistics:

- Preparation of data management plan
- Review of data management plan
- CRF design
- Database specification/development (including data validation checks)
- Database user acceptance testing
- Input to randomisation schedule and randomisation system sign off, if applicable

The CTU/trial management team will be responsible for the following duties:

- Submit copy of database authorisation documents to sponsor
- Submit copy of randomisation system authorisation documents to sponsor

The other aspects of database management will be discussed and agreed depending on the specification/requirements of the study.

- **Section 9.0 – Quality Assurance & Monitoring**

QA and monitoring are designed to ensure the study conforms to the requirements of Good Clinical Practice (GCP) and all relevant legislation.

The CI (with CTU/trial management support) is responsible for:

- Drafting the study risk assessment document as per the applicable SOP (see NJRO-REG-SOP-004).
- Drafting any required updates to the risk assessment.

The Sponsor will:

- Review and provide feedback and ensure any issues are resolved before approving the risk assessment and any subsequent updates.
- Complete the sponsor risk assessment appendix (NJRO-REG-T-026) as necessary as per the Sponsor SOP (NJRO-REG-SOP-004).

- Complete the continuous risk assessment reviews (NJRO-REG-T-003) as and when necessary, as per the Sponsor SOP (NJRO-REG-SOP-004).
- Conduct co-monitoring if required

The CTU/trial management team will:

- Draft the monitoring plan, and any subsequent amendments/addendums, with the support of the CI.
- Conduct study monitoring and ensure monitoring reports are sent to the Sponsor for review and the follow up of any actions identified.

The Sponsor and CTU will both:

- Review and authorise the monitoring plan, including any subsequent amendments/addendums.
- Review and authorise monitoring visit reports.

The Sponsor will review and provide feedback and ensure identified issues are resolved before approving the monitoring plan (and any subsequent amendments/addendums). The monitoring plan must be in place before the first patient is recruited to the study.

- **Section 10 - Pharmacovigilance**

Safeguarding the dignity, rights, safety, and wellbeing of research participants must be a consideration in any research project. The reporting of safety events is one of the most important aspects of clinical trial management and quality control.

The task of Pharmacovigilance is delegated to Chief Investigator. The individual delegated tasks are as follows:

- Keep records of all adverse events & reactions relating to the trial
- Report all Serious Adverse Events (SAEs) to the Sponsor
- Report Suspected Unexpected Serious Adverse Reactions (SUSARs) to the Sponsor
- Record and notify Sponsor of all pregnancy-related adverse events, including outcome of pregnancy
- Review of SAEs and SUSARs for Seriousness, Expectedness and Causality
- Review and approve Urgent Safety Measures, if required
- Notify any urgent safety measures taken to the appropriate authorities (Part 4, Regulations 30)
- Review adverse event data for trends that collectively may indicate a Serious Adverse Event or Reaction

- Review and approve Annual Development Safety Update (DSUR)
- Determine appropriate Reference Safety Information (RSI)
- Undertake a check on the status of the SmPC
- Undertake clinical review of risk/safety benefit to determine if update to RSI is required

The CTU provides the necessary support to the CI to ensure the following tasks are undertaken to completion:

- Retain records of all adverse events & reactions relating to the trial
- Ensure all Serious Adverse Events (SAEs) and Suspected Unexpected Serious Adverse Reactions (SUSARs) are reported to the Sponsor within agreed timelines
- Record and notify Sponsor of all pregnancy-related adverse events, including outcome of pregnancy
- Review SAE information, add to study database and ensure SAE is followed up in a timely manner to allow review by Sponsor
- Provide confirmation to Sponsor that the 'medical reporter' is authorised to review and sign off SAEs at the reporting site
- Support the reporting report aggregated AE and SAE events to trial oversight committee
- Notify any urgent safety measures taken to the appropriate authorities, and provide information to all participating sites
- Timely preparation of annual Development Safety Update Report (DSUR) to MHRA and REC Submission of DSUR to MHRA
- Inform competent authority of updated RSI via substantial amendment
- Circulate updated RSI information to participating sites in the appropriate reporting period

The statistics team will:

- Generate aggregated reports for AE and SAE events for the trial oversight committee

The Sponsor or CTU/trial management team (to be agreed within the delegation of duties schedule) will be responsible for reporting SUSARs to the MHRA and REC.

Additional reporting required as part of Investigator Initiated Trials to the IMP manufacturer will discussed as necessary and recorded within the delegation of duties schedule.

- **Section 10.1 - Advanced Therapy Investigational Medicinal Products (ATIMPs)**

In addition, for ATIMPs the Chief Investigator (with the support of the CTU/trial management team) is delegated the following tasks:

  - Ensure those SAEs requiring expedited reporting are listed in the protocol and forwarded to sponsor within 24 hours
  - Ensure each participant is given a trial alert card with contact details for the clinical team
  - AEs related to product failure are reported to sponsor
  - Notify sponsor of any issues relating to the ATIMP

Other duties to be agreed and listed at the time of discussion.

- **Section 11 – Trial Medication**

This section covers the management and accountability of IMP at a site level.

The following tasks are delegated to Chief Investigator:

  - IMP to be made freely available to participants
  - Notify sponsor of any issues relating to IMP

The following individual delegated tasks are undertaken by CTU (with support from sponsor pharmacy where appropriate):

  - Ensure IMP/ ATIMP handling/ custody is compliant with regulatory and GCP requirements
  - Ensure labelling of IMP/ATIMP in accordance with regulatory approval
  - Ensure that IMP is appropriately stored in secure conditions
  - Ensure the control and accountability of IMP and Placebo
  - Ensure preparation of the IMP is in accordance with the Trial Specific Procedure for study medication preparation
  - Code Break Procedures
  - IMP tracking
  - Ensure blinding of IMP and relevant personnel
  - Notify sponsor of any issues relating to IMP

Any additional duties in relation to the trial medication will be documented on a trial-by-trial basis.

- **Section 12 - TRIAL DEVICE**

This section outlines the duties aligned to the conduct of NuTH sponsored Clinical Investigations of Medical Devices. It is essential the appropriate management is in place and all adverse events which occur during the course of a study are recorded and reported appropriately in order to ensure that patient safety is maintained.

The following tasks are delegated to the Chief Investigator:

- Obtain letter of No Objection from MHRA for use of Device, if required
- Ensure that sufficient product is available for the planned number of participants
- Ensure that investigational medicinal devices are not used for any purpose other than those described in the protocol
- Review Serious Adverse Events (SAEs), Serious Adverse Device Events (SADEs) and Device Deficiencies that could have led to a SADE
- Report to sponsor all Unexpected Serious Adverse Reactions (USARs) & Unexpected Serious Adverse Device Events (USADEs) with 24 hours of becoming aware of the event
- Review of SAE/SADEs for Seriousness, Expectedness and Causality
- Review adverse event data for trends that collectively may indicate a Serious Adverse Event or Reaction

The CTU will support the CI in the above tasks, but also ensure the following is undertaken:

- Keep records of all adverse events & reactions relating to the trial which are reported by Investigators
- Records are kept relating to storage, movement, return to manufacturer and destruction of medical devices
- Appropriate secure storage of medical devices
- Ensure site personnel are adequately trained on use of medical device

The Sponsor will:

- Notify the relevant regulatory bodies of SAEs/USARs/USADEs (as required) in accordance with expedited timeframe (although this may also be delegated to the CTU/trial management team as appropriate).

- **Section 13 – Progress Reports**

The preparation and submission of Annual Progress Reports (APR) to the Research Ethics Committee (REC) is required throughout the study. The CI/CTU will also provide other metric data as agreed by the TMG.

The duty of APR reporting is delegated to the Chief Investigator.

The CTU will support the Chief Investigator with the following tasks:

- Preparation and review of the REC APR
- Provision of accrual data to NIHR CRN (if portfolio-registered)
- Provide newsletters/study updates to investigator sites, if applicable
- Preparation of funder reports

- **Section 14 - Communication**

This section identifies parties responsible for liaising with the funders, regulatory bodies, oversight committees and participating sites.

The following duties will be led by the CI with support from either the Sponsor, University (G&C) team or other support teams.

- Primary contact with main funder (financial)
- Primary contact with funder (project management/milestone reporting)

The CTU will act as the main point of contact with the following:

- HRA and REC
- Independent Data Monitoring Committee (DMC)
- Primary contact with other study related committees: as agreed
- Trial Oversight Committees
- Primary contact with investigator/participating sites

The Sponsor will act as the main point of contact with the following:

- MHRA

The CI and/or CTU must inform the sponsor and finance of:

- Any extension, amendment, possible issue or early closure

Other key communication channels may also be listed on a trial-by-trial basis where appropriate.

- **Section 15 – Statistical Support**

This section sets out the duties involved in the planning, preparation, and analysis of the statistical aspects.

The following tasks are often delegated out to an appropriate statistics unit/team or group, but with support of the Chief Investigator (although for some trials these may be delegated solely to the CI).

- Statistical analysis plan preparation
- Statistical analysis plan review
- Statistical analysis plan sign off
- Interim analysis
- Annual funding body reports
- Write statistical end of trial report
- Preparation of oversight committee reports (open and closed)

The CTU will support the following areas:

- Statistical analysis plan review
- Preparation of oversight committee reports (open and closed)
- Annual funding body reports
- Review statistical end of trial report

- **Section 16 – Publications / Final Report Writing**

The task of publication is delegated to the CI as lead but supported by Statistics (where appropriate) and the CTU/trial management team.

- Preparation of the publication plan
- Preparation of publication, abstracts, and presentations
- Review and approval of primary publication, abstracts, and presentations
- Prepare and submit final study report to Funder
- Preparation of final study report for REC
- Posting of clinical trial summary results (End of Study) in European Clinical Trials Database (EudraCT) or equivalent database.

The CTU undertakes responsibility for:

- Submission of the End of Trial Declaration to the REC and MHRA where appropriate.
- Submission of the final study report to REC and MHRA where appropriate.

- Submission/upload of clinical trial summary results to EudraCT or equivalent database within the required regulatory timeframes.

The Sponsor is also responsible for reviewing the publication plan and draft final publication.

- **Section 17 - GCP and Conduct of Trial**

This section delegates the tasks for the set up and conduct of NuTH sponsored studies to ensure compliance with ICH GCP, the Medicines for Human Use (Clinical Trials) Regulations 2004 (as amended) and/or the Medical Device Regulations 2002 (as amended).

The Chief Investigator is responsible for the following duties:

- Ensure appropriately qualified medical personnel are available to advise on trial related medical questions at each site.
- Ensure each Investigator is qualified by training and experience to conduct the trial
- Produce trial specific written SOPs, if required
- Notify deviations, violations, and serious breaches of GCP or protocol to the Sponsor
- Ensure that the conditions and principles of Good Clinical Practice are satisfied or adhered to
- Ensure that the trial is conducted in accordance with the protocol and subsequent amendments.
- Ensure no Protocol waivers or any associated departure from the protocol inclusion/exclusion criteria.

The Sponsor is responsible for:

- Reviewing deviations, violations, and serious breaches from a sponsor perspective
- Reporting Serious Breaches to the MHRA, and/or REC as required (the expedited reporting of serious breaches may be delegated to a CTU/trial management team, where deemed appropriate, however the sponsor team must review all suspected serious breaches including associated CAPAs

and provide final confirmation regarding the categorisation of a serious breach).

- **Section 18 – Trial Administration and Management**

Section 18 relates to the general trial tasks regarding set-up, maintenance, storage and trial administration.

The Sponsor holds responsibility for ensuring:

- Appropriate compensation arrangements are in place in the event of harm to research participants
- Appropriate independent expert review is performed
- Maintaining the Sponsor Oversight File

The CTU/trial management team is delegated the following (although in some cases these may be delegated to the CI where a CTU is not involved in the trial):

- Maintenance and management of Trial Master File (TMF)
- Preparation of TMF for archiving
- Archiving of TMF
- Create template Site Investigator File and provide to participating sites

The following areas are delegated to the CI, with the support of the CTU/Trial Management Team:

- Check funder requirements regarding trial oversight committees (TOC)
- Nominate TOC members
- Prepare Charter(s) for TOC
- Review and approve TOC charter(s)
- Establish Trial Management Group (TMG) members
- Coordinate TMG Meetings
- Coordinate Investigator Meetings
- Notify all relevant bodies of the conclusion of the trial within the specified timeframes

NB. The Sponsor will have the final decision on the formation of the TOC. The TOC will either take the form of a separate Trial Steering Committee (TSC) and Data Monitoring Committee (DMC) or a Combined/Joint oversight committee. The proposed

format will be confirmed by the Sponsor, via discussion with CI, CTU and Statistics as appropriate. The format of the TOC will be documented within this schedule.

- **Section 19 – Sample Collection**

Sample collection will be detailed in the study protocol, but for purpose of clarification delegated duties may be detailed within this section as appropriate.

- **Section 20 – Financial Reporting (where applicable)**

Each funder will have their own requirements for financial reporting. This information will be detailed in the contract between the funder and lead organisation.

The CI is delegated the following duties, with support if required:

- Prepare and submit annual funder financial report
- Prepare and submit the final expenditure report to the funder
- Prepare study-wide forecast of expenditure

However, depending on lead organisation, the duties will either be supported by the Sponsor (Trust R&D finance) or the University (Contract Financial Management (CFM).

- **Section 21 - Funding**

ICH GCP states that for any funded clinical trial, adequate resources should be available to support the planned investigation.

The CI is delegated the following duties:

- Ensure adequate funding is in place to deliver the study necessary to perform the Clinical Trial
- Ensure agreement to support funding of Excess Treatment Costs (ETC)
- Ensure agreement with sites & collaborators for any additional costs identified during the study (i.e., as a result of an extension)
- Negotiation with investigator sites and collaborators to ensure funding for any additional costs identified during the course of the Clinical Trial

The administration of payments to participating sites and collaborators will be dependent on the organisation which leads on the award.

The following duties will either be led the Sponsor (Trust R&D finance) or University (CFM) team.

- Payments to collaborators
- Payments to participating sites

- **Section 22 – Additional Duties (as required)**

An additional section may be added to list any additional duties that have not already been listed within the delegation schedule.

For example, where a CTU is involved, additional CTU delegated tasks may be listed to avoid the need to put in place a separate Technical Agreement (see Vendor Management SOP: NJRO-REG-SOP-014). Examples of these are provided within the relevant Delegation of Duties Templates (NJRO-REG-T-024 & NJRO-REG-T-028).

- **SIGNATURES**

Upon agreement of the delegated duties by all parties the following representatives will sign to approve content of the finalised schedule 1 (a) & (b) as required.

  - Sponsor representative
  - CTU representative (where appropriate)
  - Statistics (where appropriate)
  - Chief Investigator
  - Other relevant personnel as required (e.g. NJRO Quality Assurance, Project Manager etc.)

The Schedule will then be counter signed by the authorised signature on behalf of the Sponsor, University and any other relevant third party. However, where required by external organisations the schedule may be combined with the overarching Delegation Agreement/Contract to avoid the need for duplicated signatures. This will be discussed and agreed on a trial-by-trial basis.

Once fully executed a copy of the schedule will be stored within the following locations:

  - NJRO Sponsor Oversight File (SOF)
  - TMF

A copy will be held by both the Sponsor and the CTU/trial management team (where appropriate). The University will retain a fully executed PDF version. The Sponsor shall ensure that all parties receive a copy of the fully executed agreement by:

  - Uploading a PDF version to the SOF
  - Sending a PDF version to CTU/trial management team/CI (as appropriate) for storage in the TMF
  - Distributing a fully executed copy to all relevant parties/signatories.

7. References

The Medicines for Human Use (Clinical Trials) Regulations 2004 (as amended).

MHRA Good Clinical Practice Guide 2012.

8. Appendices

N/A