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ICMR GUIDELINES FOR

COMMON ETHICS REVIEW OF

MULTICENTRE RESEARCH

2019

Indian Council of Medical Research

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7 **1. Introduction:**

8 Collaborations in biomedical and health research has gained a great momentum in recent
9 years. It provides a great opportunity to present meaningful outcomes for the country and
10 actively engages researchers, communities and/ or policy makers in the research process from
11 start to finish. Researchers are increasingly collaborating with colleagues who have the
12 expertise and/or resources needed to carry out a specific research. This could be inter-
13 departmental/inter-institutional or international and also multicentric involving public and/or
14 private research centres and agencies. Multicentre research collaborations offer opportunities
15 to engage diverse scientific expertise to address important research questions pertaining to
16 wider population groups. However, there are ethical issues surrounding collaborations such as
17 sharing techniques, ownership of materials and data, IPRs, joint publications, managing
18 research findings, managing COI and research outcomes with commercial potential.

19

20 Every biomedical and health research must be reviewed by an Ethics Committee (EC) before it
21 is initiated. At present in India, all centres are required to obtain approval from their
22 respective ECs, which would consider the local needs and requirements of the population and
23 safeguard the dignity, rights, safety and well-being of the participants. In the ICMR National
24 Ethical Guidelines for Biomedical and Health Research Involving Human Participants, 2017, a
25 process for common ethics review for multicentre research has been suggested. These
26 guidelines provide a detailed procedure for common ethics review to be carried out through
27 the Designated Ethics Committees (DEC) and ECs of participating centres (PECs) by improving
28 coordination amongst them in order to effect a timely review process without compromising
29 quality of that review as well as autonomy of individual ECs.

30

31 **2. Purpose:**

32 The purpose of this guidance is to describe the process for a common ethics review of a
33 multicentre research proposal. This method can be adopted as an option by ECs engaged in
34 multicentre research. The guidance is intended to address a variety of issues related to
35 common ethics review so that research can proceed expeditiously without compromising
36 ethical principles for ensuring protection of human research participants.

37

38 **3. Scope:**

39 This guidance applies to ECs, investigators, and other stakeholders involved in multicentric
40 biomedical and health research. Clinical trials requiring approval from CDSCO are excluded
41 from common ethical review and should abide by the rules and regulations under Drugs and
42 Cosmetics Act and Rules as amended from time to time. These guidelines serve as annexure to
43 the main ICMR National Ethical Guidelines for Biomedical and Health Research Involving
44 Human Participants, 2017, the reference document.

45

46 **4. Designated Ethics Committee (DEC):**

47 4.1 The EC which assumes the responsibility to undertake a common review of the research
48 proposal with mutual agreement of all the ECs of participating centres in a multicentre
49 research shall be called as the Designated Ethics Committee.

50 4.2 Each DEC will be research study specific and may be formalized through Letter of
Agreement (LOA)/Letter of Understanding (LoU) between the participating institutes.

51 4.3 The EC of the Coordinating centre may serve as the DEC, if agreeable to all participating
52 centres.

53 4.4 The EC is required to fulfil the following criteria to be identified as the DEC.

54 4.4.1 **Essential criteria:**

- 55 • Should be one of the centre for the multicentre research.
- 56 • Should be located in India and be willing to conduct ethical review of specific
57 research for all participating Indian centres.
- 58 • Have minimum 3 years of experience in reviewing research protocols.
- 59 • Registered with the regulatory authority such as CDSCO and/or DHR (as per
60 New Drugs and Clinical Trials Rules, 2019).

61 4.4.2 **Desirable criteria:**

- 62 • Accredited by NABH or AAHRPP or has undergone SIDCER recognition/ other
63 ethics committee quality assurance programs.

64 **4.5 Responsibilities of DEC:**

65 The National Ethical Guidelines for Biomedical and Health Research Involving Human
66 Participants, 2017 prescribes the roles and responsibilities of the EC under section 4.7. In
67 addition, the following are the responsibilities of DEC.

68 4.5.1 To conduct a detailed initial review of the study proposal/ master protocol which
69 is common for all centres involved in a multicentre research.

70 4.5.2 To review the study proposal/ master protocol and also application form
71 (Annexure 5 – application form part A and local issues of DEC through part B).

72 4.5.3 To ensure representation from at least 50% or five [5] (whichever is less) PECs to
73 participate in deliberations of the DEC. This participation can be in person or
74 through electronic means including Skype or other mechanisms. These special
75 invitees do not have voting rights but can participate in DEC meeting to provide
76 their comments and respective local perspectives. The names of representatives
77 and the PECs represented by them shall be recorded in the minutes of the
78 meeting as well as in the decision letter issued by the DEC.

79 4.5.4 To provide recommendations to the participating centres after the review.

80 4.5.5 To be transparent, accountable, competent, sensitive and consider the local
81 socio-cultural issues.

82 4.5.6 To review policy for publication/data sharing between centres/benefit
83 sharing/post research results with all involved participants.

84 4.5.7 To review continuing review reports, annual reports at the DEC centre.

85 4.5.8 To review serious adverse events related to the study, causality assessment,
86 protocol deviations, unanticipated problems involving risks to participants or
87 others, significant complaints/any potential non-compliance as reported to DEC
88 from other centres.

89 4.5.9 To maintain and update a repository of copies of site specific documents, which
90 include the submissions made by the site PIs to their PECs, the centre specific
91 consent forms and decision letters issued by the PECs.

92 4.5.10 To form a network for improved communication amongst centres by involving
93 Member Secretaries of all the participating centres.

94
95
96

97 **5. Ethics Committees of the participating centres (PEC):**

98 The Participating Centre ECs in a multicentre research are located at the participating centres
99 (including DEC). They should ensure respect of participants and communities; incorporate
100 changes in informed consent document if necessary, translations in local language and
101 monitor research as per local requirements of their respective Centres.

102 **5.1 Responsibilities of PECs:**

103 The National Ethical Guidelines for Biomedical and Health Research Involving Human
104 Participants, 2017 prescribes the roles and responsibilities of the EC under section 4.7. In
105 addition, the following are the responsibilities of PEC:

106 5.1.1 To identify a representative/nominee to attend the common review meeting
107 of DEC who will communicate the specific concerns at their centre, if any.

108 5.1.2 To attend the DEC meeting through Skype or any other mechanism
109 whenever possible.

110 5.1.3 To review participating centre specific information and related modifications
111 in the study proposal/ master protocol through full committee
112 meeting/expedited review depending on the importance of local consent
113 related issues involved specific to the centre and as per SOP of the institute
114 Member Secretary in consultation with Chairperson may take a call on the
115 above. PEC also reviews the recommendations of the DEC and suggest
116 modifications, if need be.

117 5.1.4 If a particular PEC wishes to change the master protocol, the coordinating PI
118 of the project may take a call on the continuation of this centre in the
119 multicentric study.

120 5.1.5 To issue the final decision letter for the study at the centre to PIs.

121 5.1.6 To review serious adverse events related to the study, causality assessment,
122 protocol deviations at the centre, unanticipated problems involving risks to
123 participants or others, significant complaints/any potential non-compliance.

124 5.1.7 To decide if serious adverse events related to the study, causality
125 assessment, protocol deviations at the centre, unanticipated problems
126 involving risks to participants or others, significant complaints/any potential
127 non-compliance must be reported to DEC.

128 5.1.8 To ensure good and prompt communications to DEC as per requirement or if
129 there are specific concerns that may impact other centres as well.

130

131 **6. Coordinating PI:**

132 Coordinating PI is the one who takes an overall responsibility for the conduct of the
133 multicentre research along with PIs from all the participating centres and ongoing
134 communication between DEC and PIs of other participating centres. In general, the EC of
135 her/his centre becomes the DEC.

136

137 **6.1 Responsibilities of Coordinating PI:**

138 6.1.1 To submit the study proposal/ master protocol to DEC for review using the
139 common forms for EC review.

140 6.1.2 To submit the application form for multicentre research for her/his centre
141 through (Annexure 5 – application form - part A and part B) to DEC.

- 142 6.1.3 To function as a link between DEC and PIs to communicate the
143 recommendations of DEC to PIs and the PECs.
- 144 6.1.4 To submit serious adverse events, causality assessment, protocol deviations
145 at the centre, unanticipated problems involving risks to participants or
146 others, significant complaints/any potential non-compliance to DEC as per
147 requirement or if there are specific concerns that may impact other centres
148 as well.
- 149 6.1.5 To communicate with Steering/Monitoring committee and Technical
150 advisory committee/ sponsors.
- 151 6.1.6 To communicate the concerns received from one centre to other centres (if
152 required) depending on the type of concern such as adverse event or
153 specific concerns that may impact other centres as well.

154 **7. Principal Investigator (PI):**

155 The PI is the person who takes an overall responsibility for the conduct of multicentre
156 research at her/his participating centre. Each centre can have additional co-investigator(s),
157 who may conduct the study within the centre (*please refer to glossary for multicentre
158 research*).

159 **7.1 Responsibilities of PI:**

- 160 7.1.1 To submit the study proposal/ approved master protocol along with any
161 participating centre specific changes/modifications through Annexure 5 –
162 application form - part B to respective PECs for review using Common forms
163 for full committee or expedited EC review.
- 164 7.1.2 To function as a link between PEC and Coordinating PI to communicate the
165 recommendations of PEC to Coordinating PI.
- 166 7.1.3 To participate in the DEC meeting along with respective EC representative to
167 communicate the PEC views, if necessary.
- 168 7.1.4 To submit serious adverse events related to the study, causality assessment,
169 protocol deviations, unanticipated problems involving risks to participants or
170 others, significant complaints/any potential non-compliance to PEC and DEC
171 as per requirement.
- 172 7.1.5 To initiate the study at the local centres as and when the approval from PEC
173 is obtained for their Centre. (*Please note: For certain types of research, study
174 should be initiated simultaneously at all centres and this has to be decided
175 by DEC according to the need.*)
176

177 **8. Letter of Agreement (LOA) /Letter of Understanding (LoU) for Common Review of
178 Multicentre Research**

- 179 **8.1** A signed document/agreement/email should be made to support and validate the
180 agreed roles and responsibilities of the DEC and the PECs. Signature/ affirmation can be
181 obtained from Member Secretaries of ECs of participating institutes on behalf of
182 Chairperson or concerned Chairpersons.
- 183 **8.2** This should be in the form of LoA/LoU, documenting the roles, responsibilities,
184 communication and publication plans between the PECs for common review.
- 185 **8.3** If any additional centre is added after the initiation of the study, the LoA/LoU should be
186 revisited. The additional PEC should be explained the terms and conditions and should

187 be asked to sign the LoA/LoU. The copy of revised agreement shall also be circulated to
188 other PECs for record.

189 **8.4** If the EC of the coordinating PI is not serving as the DEC, the relationship of
190 coordinating PI with DEC has to be worked out to address logistic issues.

191 **8.5** The LoA/LoU shall come in to effect on the date of its signature by all centres and shall
192 remain in force for the specified duration of research.

193 **8.6** If any existing centre is suspended or terminated for any reasons, the other centres
194 should be informed. A template of LoA/ LoU for common review of multicentre
195 research is given at the Annexure-3 for reference.
196

197 **9. Timelines for Review:**

198 9.1 Study proposals/master protocol will be submitted to DEC and all the PECs.

199 9.2 The protocol may be reviewed by all the Centres according to their convenience and
200 procedures.

201 9.3 The DEC meeting will be attended by representatives of all PECs – PI and or any EC
202 member. The PECs can also participate in the DEC meeting by Skype or any other
203 mechanism so that concerns of individual Centres may also be discussed to arrive at a
204 consensus decision.

205 9.4 The DEC approved master protocol along with any centre specific changes through
206 Annexure 5 – application form - part B will be submitted to PEC again.

207 9.5 The final approval for individual Centres will be provided by the concerned PEC.

208 9.6 Reasonable and mutually agreed timelines should be allotted for the review process. A
209 maximum of 30 days to DEC for approval of study proposal/ master protocol and
210 application form (Annexure 5 – application form - part A and B). A maximum of 30 days
211 to PEC for approval of local participating centre specific review.

212 **10. Protocol Amendment: Submission and Review Process:**

213 10.1 Major amendments in the protocol will be submitted to DEC for review, the decision of
214 which shall be communicated to PECs.

215 10.2 Minor amendments in the protocol not affecting the study will be submitted to
216 concerned PEC for review.

217 10.3 All amendments should be communicated to the DEC for information by all Centres at
218 the earliest.
219

220 **11. Serious Adverse Events, Adverse Events, Deviations and Other Types of Reportable Events,
221 Suspension and Termination of studies:**

222 11.1 Reporting of Serious Adverse Events, Adverse Events, Deviations and other types of
223 Reportable Events for each centre may be done in accordance with the SOPs of the EC
224 and ICMR National Ethical Guidelines, 2017.

225 11.2 The PEC can suspend or terminate the approval of studies in accordance to its policies
226 and procedures.

227 11.3 The PEC can convey their concerns and decision, if any, to DEC for consideration. The
228 DEC may advise the centres regarding the same.

229 11.4 If the research as a whole is suspended or terminated by the DEC, the coordinating PI
230 will promptly notify all the PECs of the suspension or termination.
231

232 **12. Record Keeping and archiving**

233 12.1 Access to all the records and its control will be maintained by PECs and DEC for a
234 minimum period of 3 years following completion or termination of the study.

235 12.2 The PIs and PECs should refer to their local institutional SOPs or sponsor requirements
236 for record keeping and archiving beyond 3 years.
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238 **Glossary:**

239 **Designated Ethics Committee (DEC):**

240 The participating EC, which assumes the responsibility of undertaking a common initial and
241 continuing review of the multicentre research proposal with mutual agreement of all the
242 participating centres, is called as the Designated Ethics Committee.

243 **Participating Centre Ethics Committee (PEC):**

244 The Participating Centre ECs are located at the participating centres in a multicenter research
245 (including DEC) and are responsible for detailed review of research according to the local
246 requirements and dignity, rights, safety and well-being of their research participants.

247 **Study proposal/ Master protocol:** The common protocol with uniform core objectives, methods,
248 and measurement tools approved by the DEC. The Master protocol is to remain consistent across
249 the sites but site PECs may modify consent form according to local and cultural context and also
250 have the liberty to add objective(s) / questions for fulfilling essential local requirements.

251 **Principal Investigator (PI):**

252 The PI is the person who takes the responsibility of conducting research at her/his centre as part of
253 multicentre research. Each centre can have additional co-investigator(s), who may conduct the study
254 with in the centre in association and/or in the absence of the PI.

255 **Coordinating Principal Investigator (PI):**

256 Coordinating PI is one who takes an overall responsibility of conducting multicentre research along
257 with PIs from all the participating centres and is also responsible for ongoing communication
258 between DEC and PIs at other participating centres.

259 **Multicentre Research:** Multicentre research is conducted at more than one centre by different
260 researchers following a common protocol. However, certain research proposals may also be
261 considered as multicentre research where each centre with a PI is involved in a different defined role
262 as per the objective/methodology such as quality control and data management etc. Each centre can
263 have multiple sites from which participants can be recruited. However, each site should have a
264 responsible nodal person as applicable at local level i.e. one PI for different sites in that centre.

265 **Steering/Monitoring Committee:** This committee includes experts from funding
266 agencies/sponsors/partners from the centre or region as per requirement. The committee ensures
267 smooth functioning and implementation of the study protocol and monitoring

268 **Technical (Scientific) Advisory Committee:** This committee includes a group of independent subject
269 experts who are not investigators of the research/member of funding agencies/sponsors or its
270 representatives/monitors. The experts undertake scientific review and provide guidance for the
271 progress of the study.

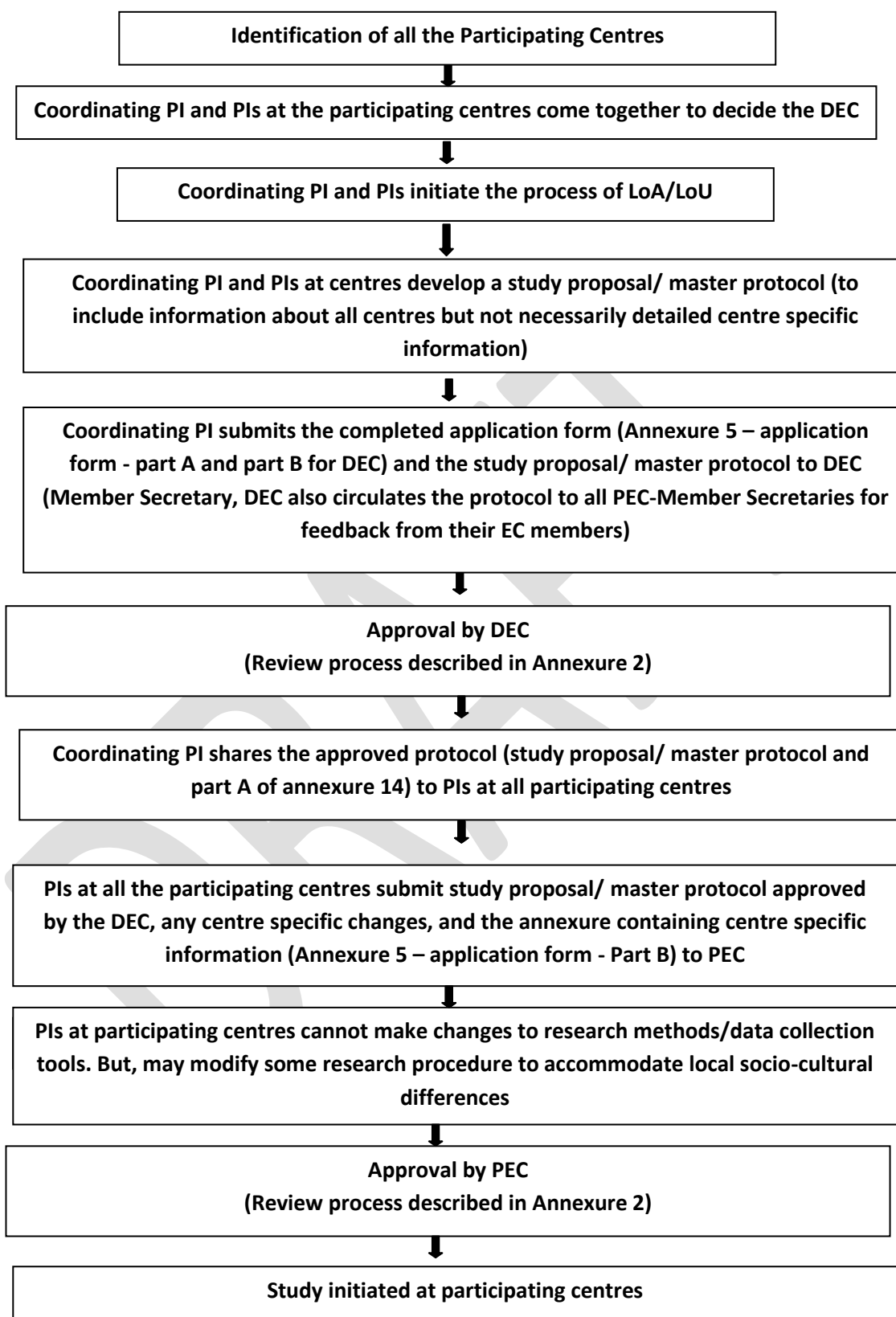
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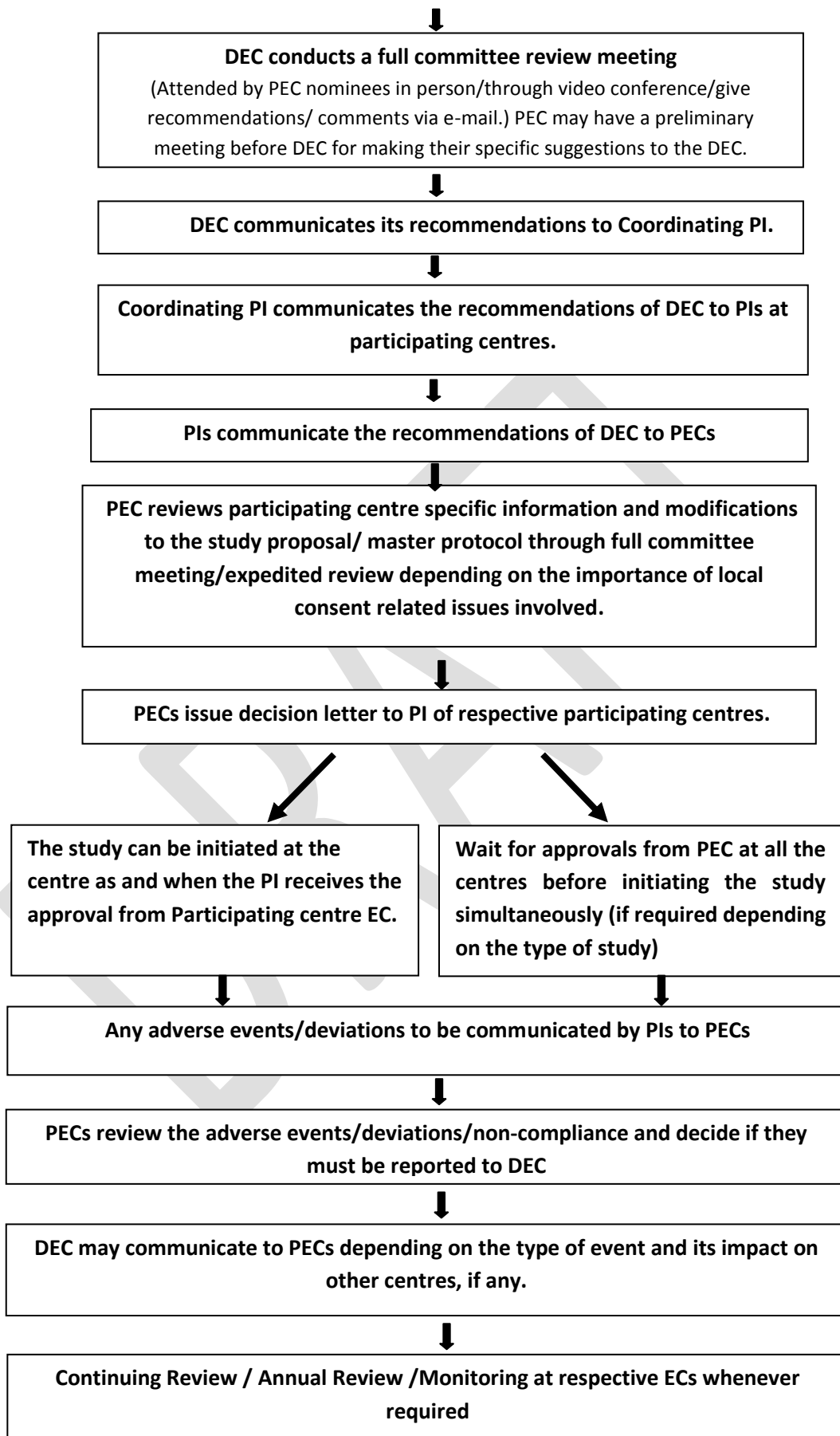
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Annexure 1: Flow chart for submission process of a multicenter proposal to EC

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Annexure 2: Flow chart for Common Review Process of Multicentre Research



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321 **Annexure- 3 Draft – LoA/ LoU format for Common Review of multicenter research**

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323 **Designated EC**

324 Name of EC:

325 Name (Institution/ Organization):

326 EC Registration No, if any:

327

328 **Participating Centre ECs** *(Add additional sheets according to the number of centres involved)*

329

330 Name of EC:

331 Name (Institution/ Organization):

332 EC Registration No, if any:

333

334 The Officials signing below agree that Participating centre EC of

335 (Name of the institution) will accept the

336 review of the Designated EC

337 (Name of the institution)

338 for efficient Common Ethics Review of Multicentre Research protocols.

339 It is understood that Designated Ethics Committee would undertake full ethics committee review.

340 Ethical issues related to local centres may be reviewed by Participating Centre EC in expedited or

341 full committee review meetings and communicated to DEC which also participate in DEC meeting

342 through their representatives or any other mechanism and the final decision communicated to

343 Centre with intimation to the Designated Ethics Committee. The LoA/LoU is valid from

344 _____ to _____. (Life of this study, i.e., proposed date of common

345 review meeting to tentative date of submission of project completion report to DEC).

346 This agreement is specific to the following Proposal(s):

347 Title of Research Proposal:

348

349 Name of / Coordinating PI:

350 Name of principal Investigator/ Co-investigator

351 Sponsor or Funding Agency:

352 The responsibilities of centres will be fulfilled as per the ICMR Guidelines and related regulations

353 ensuring compliance with the same.

354 **For Designated Ethics Committee:**

355

<p>356 Signature of Chairperson/Member Secretary:</p> <p>357 Date:</p> <p>358 Name:</p> <p>359 Address:</p> <p>.....</p> <p>.....</p>

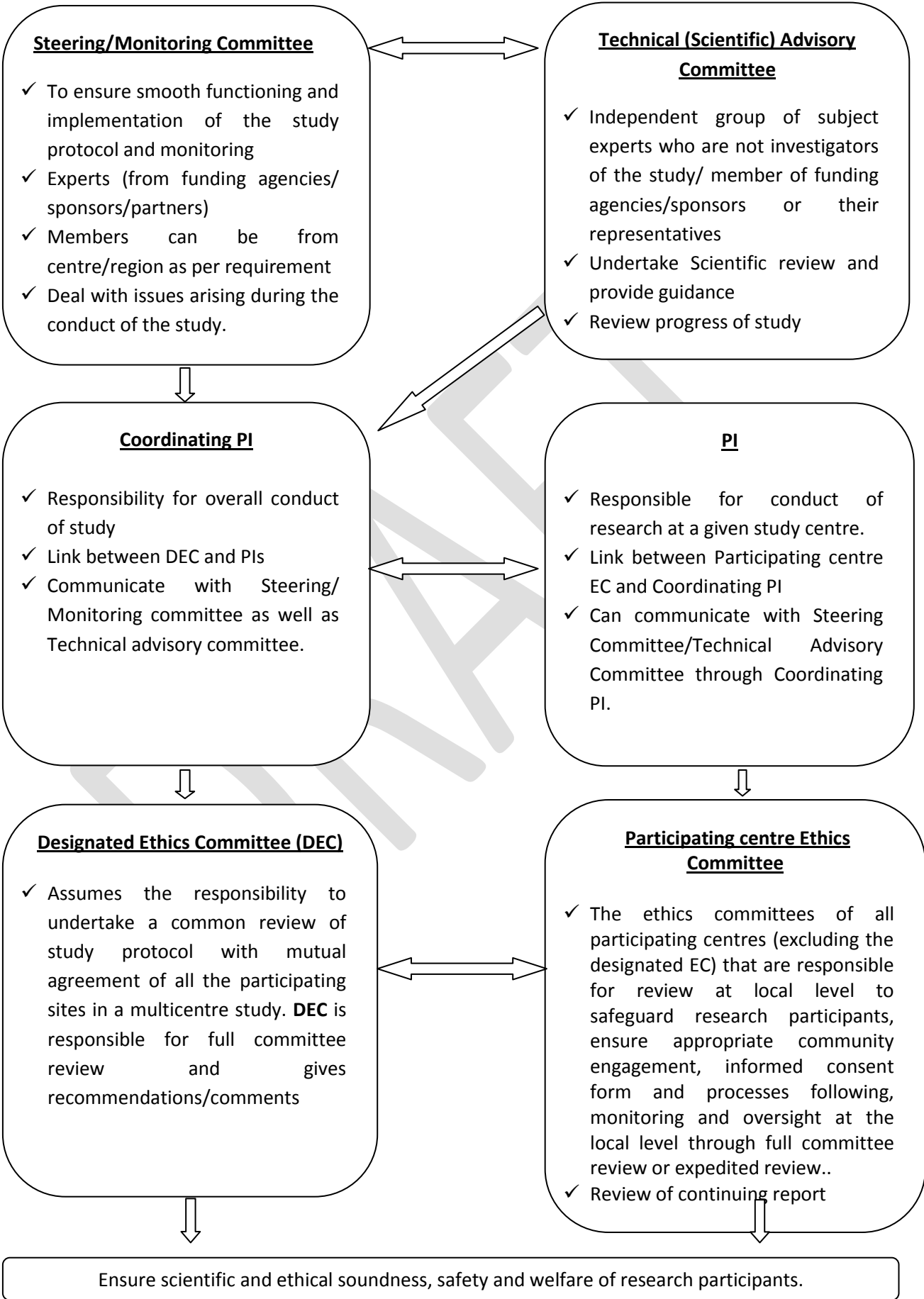
360 **For Participating Centre EC:**

361

<p>361 Signature of Chairperson/Member Secretary:</p> <p>Date:</p> <p>Name:</p> <p>Address:</p> <p>.....</p> <p>.....</p>

Annexure 4: Suggested Governance Mechanism for large Multicentre Research

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391 **Annexure 5: SOP and Application Form for Common Review of Multicentre Research**

392
393 **Standard Operating Procedure (SOP)**

394
395 **Title: Common Review of Multicentre Research**

396
397 **1. Purpose:**

398 The purpose of this SOP is to describe the process for a common ethics review of a
399 multicentre research proposal. This SOP may be adopted by ECs engaged in multicentre
400 research.

401
402 **2. Scope:**

403 This SOP applies to concerned ECs, investigators, and other stakeholders involved in
404 multicentric, biomedical and health research. It is intended to provide a process for common
405 combined review so that review process can be expeditious without compromising ethical
406 principles for protection of human research participants.

407
408 **3. Responsibilities:**

409 **i. Designated Ethics Committee (DEC):**

- 410 • To conduct a detailed initial review of the study proposal/ master protocol
- 411 which is common for all centres involved in a multicentre research.
- 412 • To review the study proposal/ master protocol and also application form
- 413 (Annexure 5 – application form - part A and local issues of DEC through part B)
- 414 • To invite representatives from participating centre Ethics Committees (PECs) to
- 415 discuss local ethical issues (if required). These special invitees do not have
- 416 voting rights but can participate in DEC meeting to provide their comments and
- 417 respective local perspectives.
- 418 • To provide recommendations to the participating centres after the review.
- 419 • To be transparent, accountable, competent, sensitive and consider the local
- 420 socio-cultural issues.
- 421 • To review policy for publication/data sharing between centres/benefit
- 422 sharing/post research results with all involved participants.
- 423 • To review continuing review reports, annual reports at the DEC centre.
- 424 • To review serious adverse events related to the study, causality assessment,
- 425 protocol deviations, unanticipated problems involving risks to participants or
- 426 others, significant complaints/any potential non-compliance as reported to DEC
- 427 from other centres.
- 428 • To form a network for improved communication amongst centres by involving
- 429 Member Secretaries of all the participating centres.

430
431 **ii. Participating Centre Ethics Committee (PEC):**

- 432 • To review participating centre specific information and modifications in the
- 433 study proposal/ master protocol through full committee meeting/expedited
- 434 review depending on the importance of local consent related issues involved
- 435 specific to the centre and as per SOP of the institute. Member Secretary in

436 consultation with Chairperson may take a call on the above. The meeting can be
437 held before or after the DEC meeting.

- 438 • To identify a representative/nominee to attend the common review meeting of
439 DEC who will communicate the specific concerns at their centre, if any.
- 440 • To issue the final decision letter for the study at the centre to PIs after reviewing
441 the DEC decision.
- 442 • To review serious adverse events related to the study, causality assessment,
443 protocol deviations at the centre, unanticipated problems involving risks to
444 participants or others, significant complaints/any potential non-compliance.
- 445 • To decide if serious adverse events related to the study, causality assessment,
446 protocol deviations at the centre, unanticipated problems involving risks to
447 participants or others, significant complaints/any potential non-compliance must
448 be reported to DEC.
- 449 • To ensure good and prompt communications to DEC as per requirement or if
450 there are specific concerns that may impact other centres as well.

451

452 **iii. Coordinating PI:**

- 453 • To submit the study proposal/ master protocol to DEC for review using the
454 common forms for EC review.
- 455 • To submit the application form for multicentre research for her/his centre
456 through (Annexure 5 – application form - part A and part B) to DEC.
- 457 • To function as a link between DEC and PIs to communicate the
458 recommendations of DEC to PIs at the PEC.
- 459 • To submit serious adverse events, causality assessment, protocol deviations at
460 the centre, unanticipated problems involving risks to participants or others,
461 significant complaints/any potential non-compliance to DEC as per requirement
462 or if there are specific concerns that may impact other centres as well.
- 463 • To communicate with Steering/Monitoring committee and Technical advisory
464 committee/ sponsors.
- 465 • To communicate the concerns received from one centre to other centres (if
466 required) depending on the type of concern such as adverse event or specific
467 concerns that may impact other centres as well.

468

469 **iv. Principal Investigator (PI):**

- 470 • To submit the study proposal/ approved master protocol along with any
471 participating centre specific changes/modifications through Annexure 5 –
472 application form - part B to respective PECs for review using Common forms for
473 EC review.
- 474 • To function as a link between PEC and Coordinating PI to communicate the
475 recommendations of PEC to Coordinating PI.
- 476 • To submit serious adverse events related to the study, causality assessment,
477 protocol deviations, unanticipated problems involving risks to participants or
478 others, significant complaints/any potential non-compliance to PEC and DEC as
479 per requirement.

- 480
- To initiate the study at the local centres as and when the approval from EC is obtained. *(Please note: For certain types of research, study should be initiated simultaneously at all centres and this has to be decided by DEC according to the need.)*
- 481
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485 **4. Review process:**

486 **i. Review process by DEC:**

- 487
- The DEC assumes the responsibility to undertake a common review of study proposal/ master protocol with mutual agreement of all the participating centres in a multicentre research.
- 488
- The coordinating PI of the study submits the study proposal/ master protocol along with application form (Annexure 5 – application form - part A and B) to DEC.
- 489
- DEC conducts a detailed initial review of the proposal which is common for all centres involved in a multicentre research and provides its recommendations to the participating centres.
- 490
- DEC invites representatives from PECs to discuss local ethical issues and/or specific requirements (if required). These special invitees do not have voting rights but can participate in DEC meeting to provide their comments and local perspectives.
- 491
- The PECs can participate in the DEC meeting through their representatives or via Skype/ video conferencing.
- 492
- DEC reviews local issues specific to the centre through part B, changes in informed consent document, translations and monitor research as per local requirements.
- 493
- Reviews policy for publication/data sharing between centres/benefit sharing/post research results with all involved participants.
- 494
- Reviews continuing review reports and annual reports for DEC.
- 495
- Reviews serious adverse events, protocol deviations, unanticipated problems involving risks to participants or others, significant complaints/any potential noncompliance as reported to DEC from other centres.
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512 **ii. Review process by PEC:**

- 513
- PIs at all the participating centres submit study proposal/master protocol with any centre specific changes and the Annexure 5 – application form - part B containing centre specific information to PEC.
- 514
- Reviews participating centre specific information and modifications in the study proposal/ master protocol through full committee meeting/expedited review depending on the importance of local consent related issues involved specific to the centre and as per SOP of the institute. Member Secretary in consultation with Chairperson may take a call on the above. The meeting may be held before or after the DEC meeting.
- 515
- The DEC's final recommendations are reviewed by the PECs through full committee or expedited review to grant site specific approval for the study.
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524 • Reviews serious adverse events, protocol deviations, unanticipated problems
525 involving risks to participants or others, significant complaints/any potential
526 noncompliance at the centre and decide about reporting them to DEC.

527

528 **5. Communication between ECs, Coordinating PI and PIs:**

- 529 • DEC communicates the recommendations to coordinating PI
530 • Coordinating PI functions as a link between DEC and PI's
531 • PI communicates the recommendations of DEC received from coordinating PI to
532 PEC and functions as a link between both.
533 • PI communicates with Steering/Monitoring committee and Technical advisory
534 committee through Coordinating PI.
535 • PEC may communicate with DEC as per requirement or if there are specific
536 concerns that may impact other centres as well.

537

538 **6. Final decision of the common review process:**

- 539 • PECs issue the final decision letter for the study at the participating centre to
540 PIs.
541 • In consultation with Coordinating PI, PI to initiate the study at the local centre
542 as and when the approval from PEC is obtained.
543 • For certain types of research, study at all centres should be initiated
544 simultaneously and this has to be decided by DEC according to the need.

545

546

Application form for Common Review of Multicentre Research *

Logo of
the
Institute

Name of the Institute

EC Ref. No* (For office use):

Instructions to fill the form:

- Coordinating Principal Investigator should fill both Part A and part B of the form and submit to DEC
- Principal Investigators at the participating centres should fill Part B of the form and submit to respective PECs and also to coordinating PI
- May attach additional sheets wherever necessary

Protocol number: Version number:

Title of study:

.....

.....

Coordinating Principal Investigator (Name, Designation and Affiliation)

.....

.....

Part A

1. Date of proposal submission:

dd	mm	yy
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2. Please provide details of the participating centres in the table below.

S.No	Name and address of the participating centre / Institution	Name and contact details of PI at the participating centre

3. Provide details of Designated Ethics Committee (DEC) identified for common review for this study (Address and contact details of member secretary)

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.....

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Signature of Coordinating PI

dd	mm	yy
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**This is to be filled in addition to application form for initial review*

Protocol number: Version number:

Title of study:

Principal Investigator at the participating centre (Name, Designation and Affiliation)

Part B

1. Are there any sites involved locally at each study centre for recruitment purposes? If yes, please provide details. Yes No

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.....
.....

2. Please provide details of the study team involved in research at the centre in the following table:

Type of Role	Number of personnel

3. Are there any local socio - cultural issues that might impact the study at this centre? If yes provide details. Yes No

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.....

4. Are there any specific local laws or institutional requirements that apply? If yes, provide details. Yes No

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.....

5. Are there any oversight committees at the participating centres to oversee and monitor the research? If yes, provide details about the committees and their members. Yes No

.....
.....

6. Has translations been done for the informed consent form? If yes, list the languages in which translations were done. If no, please justify. Yes No

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.....
.....

7. Who will be obtaining the informed consent?

PI

Nurse/counsellor

Research Staff

Other (*please specify*)

.....

8. Is there local capacity to manage the adverse events?

Yes No

9. What are the local arrangements for emergencies? Please limit your response to 150 words.

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10. Provide details of the person to be contacted during emergencies (in case PI is not available)

.....
.....

Signature of PI.....

dd	mm	yy
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DRAFT