

# **Standard Operating Procedure (SOP)**



## **Chettinad Academy of Research and Education Institutional Human Ethics Committee CARE-IHEC**

**CDSCO Registration Number:** ECR/212/Inst/TN/2013/RR-16

**Version no:** SOP/CARE-IHEC/003

**Dated:** 22/10/2019

**Effective date:** 08/11/2019

**Valid for:** 3 years

**Next Review Date:** 07/11/2022

## 1 Review and Authorization

We, the undersigned have reviewed the working Standard Operating Procedure (SOP) of “Chettinad Academy of Research and Education – Institutional Human Ethics Committee (CARE-IHEC)” and authorize that it complies with “New Drugs and Clinical Trials Rules, 2019”, “Indian Good Clinical Practice”, “Indian Council of Medical Research's (ICMR) National Ethical Guidelines for Biomedical Research” and ICH – Good Clinical Practices.

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## **4 Introduction**

Chettinad Academy of Research and Education (CARE) is a Deemed to be University having Chettinad Hospital and Research Institute, a MCI recognized Medical College and Chettinad College of Nursing, an Indian Nursing Council recognized Nursing College as Constituent Colleges. The Medical College Hospital has 1180 beds, more than 28 speciality departments and more than 300 doctors working. The University is headed by the Honorable Vice Chancellor and the colleges are headed by the Dean / Principal.

The Ethics Committee is constituted to review and approve the research proposals conducted by the students and faculty. The committee will be known as “Chettinad Academy of Research and Education – Institutional Human Ethics Committee (CARE-IHEC)”. The committee will review clinical trials and academic proposals to ensure that the rights, safety and well being of the participants are ensured. CARE-IHEC has obtained registration from “Drug Controller General (India)”.

The Committee functions within the campus of the University located in Rajiv Gandhi Salai, Kelambakkam, Kancheepuram Dt – 603103, Tamilnadu. The CARE-IHEC contact number is 044-47413331 and fax number is 044-47413300.

The committee will evaluate the research proposals for Clinical evaluation of Drugs/Procedures/ Devices/ Diagnostics/ Vaccine/Herbal Remedies, Bio-Availability /Bio-Equivalence studies, Research Projects other than Phase studies involving human subjects, including student projects and Investigator initiated non-sponsored studies, Observational and Non-Interventional clinical studies.

CARE-IHEC is established in accordance with the applicable Indian & International regulatory guidelines & regulations such as “New Drugs and Clinical Trials Rules, 2019”, “Indian Good Clinical Practice”, “Indian Council of Medical Research's (ICMR) National Ethical Guidelines for Biomedical Research” and ICH – Good Clinical Practices and in accordance with the cultural & ethical values and principles of India.

## **5 Authority to constitute CARE-IHEC**

- The Head of the Institution has the authority to constitute the Ethics Committee.
- The Head of Institution of “Chettinad Academy of Research and Education” is the Honorable Vice Chancellor (VC).
- CARE-IHEC is constituted by the Honorable Vice Chancellor (VC) who will appoint the qualified, experienced and eligible members, both the affiliated and non-affiliated members, including the chairperson of the Ethics Committee.

## **6 Procedure for constitution of CARE-IHEC**

- Chettinad Academy of Research and Education – Institutional Human Ethics Committee (CARE-IHEC) is constituted by the Honorable Vice Chancellor of the Institution.
- The Vice Chancellor will appoint the Chairperson and Member Secretary based on their competence, experience and integrity.
- The chairperson of the Committee will be from outside the Institution to maintain the independence of the Committee. The Member Secretary will belong to the same institution and will conduct the business of the Committee.
- All other EC members are appointed by the Head of the Institution in consultation with chairperson and / or Member Secretary. The members will be a mix of medical / non-medical, legal, scientific and non-scientific persons and also include members of public to reflect the differed view points.
- During the constitution, it will be ensured that at least 50% of the members are not affiliated to the Institute.
- The CARE-IHEC may call upon subject experts as independent consultants who may provide special review of selected research protocols, if needed. These experts may be specialists in ethical or legal aspects, specific diseases or methodologies, or represent specific communities.

## **7 Purpose**

The purpose of this Standard Operating Procedure (SOP) is to prescribe the terms of reference (TOR) for the constitution, member selection and membership requirements, roles and responsibilities of the CARE IHEC.

## **8 Objective**

The objective of CARE-IHEC is to safeguard the rights, dignity, safety, and well-being of clinical research participants without considering any direct financial or other material benefit from the research as the outcome of the review.

CARE-IHEC will ensure quality and consistency in review of clinical research proposals not only with the initial review of the clinical trial/proposals but also has a continual responsibility of regular monitoring of the approved projects to foresee the compliance of the ethics during the period of the project. The Goal of research, however important, will never be permitted to override the health and well being of the research participants.

## **9 Scope**

The SOP is applicable for the constitution and operational aspects of Chettinad Academy of Research and Education – Institutional Human Ethics Committee (CARE-IHEC).

All the clinical research studies including clinical trials at CARE and its constituent and affiliated Institutes should be initiated only after the ethics committee approves the proposals.

The EC may offer EC review services to CROs and other hospitals that do not have an Institutional Human ethics committee. If other centers would like to obtain the review services of CARE, they should be willing to abide by the terms and conditions defined in this SOP under various executive aspects.

The executive part of the SOP is applicable to all the clinical research proposals reviewed by the EC whether the studies are conducted at CARE or other hospitals or CROs as long as the research proposals are reviewed and approved by CARE-IHEC.



## **10 Roles and Responsibilities of CARE-IHEC**

The basic responsibility of CARE-IHEC is to ensure a competent review of all ethical & scientific aspects of the Research project received and execute the same free from any bias and influence that could affect its objectivity.

The following are the roles and responsibilities of CARE-IHEC.

- To protect the dignity, rights, safety and well-being of the potential research participants.
- To ensure that universal ethical values and international scientific standards are expressed in terms of local community values and customs.
- To assist in and tune the development and education of research community according to the local health care requirements.
- The CARE-IHEC will ensure that all the cardinal principles of research ethics viz. Autonomy, Beneficence, Non - maleficence and Justice are taken care of, in planning, conduct and reporting of the proposed research.
- For this purpose, CARE-IHEC shall look into the aspects of informed consent process, risk benefit ratio, distribution of burden and benefit and provisions for appropriate compensations wherever required.
- CARE-IHEC shall review the proposals before start of the study as well as monitor throughout the study.

## **11 Composition of CARE-IHEC**

CARE-IHEC should be Multidisciplinary and multi- sectorial. There should be adequate representation of age and gender. It shall be ensured that at least 50% of the Members are nonaffiliated to the Institute. The number of Members in an EC should be between 7 and 15. The EC should have a balance between medical and non-medical members/ Technical and non-technical members depending up on the needs of the institution.

- IHEC will have a Chairperson from outside the organization
- The Chairperson, the member secretary and other members are appointed by the Head of the Institution.

- IHEC will have a minimum of Seven (7) members. It is mandatory to have the following category of members to represent multidimensional structure.
  - Basic Medical scientists (Preferably one Pharmacologist)
  - Clinicians
  - Legal experts (Advocate / retired Judge)
  - Social scientists or representatives of nongovernmental voluntary agency or philosophers or ethicists or theologians
  - Lay persons from Community
- The appointing authority may further appoint a EC secretary or EC coordinator to help conduct the business of the CARE-IHEC who will not be a member of the EC.

### **Criteria for Selection of Members**

Members are selected based on their personal capacities, the interest, ethical and/or scientific knowledge and expertise, experience in domain field and profile.

The following qualities are sought in CARE-IHEC members:

- Education, Experience and Interest
- Commitment and availability
- Respect for divergent opinions
- Integrity and diplomacy

### **Appointments**

- The Vice Chancellor of the Institution will appoint the Chairperson and Member Secretary.
- The Chairperson & the Member Secretary who are appointed by the Vice Chancellor will be responsible to see the completeness of the membership composition.
- Invitation letter will be sent to all the members by the Vice Chancellor /Chairperson.

- Members will confirm their acceptance by signing the Invitation letter and providing all the documents required for membership (Curriculum Vitae, certificates and 1 photograph).

## **12 Roles and Responsibilities of CARE-IHEC Members**

Members are appointed to the EC for a particular role. They cannot substitute for the role of any other member who is absent for a meeting. The role of Chairperson/Member Secretary is an additional activity to their primary responsibility based on their qualifications.

(For example if the Chairperson is a lawyer, she or he can serve as both the Lawyer and the Chairperson)

- The Committee's primary responsibilities will be protection of safety, rights and confidentiality of the research participants. Special attention will be paid to trials that may include Vulnerable Subjects, for example, involving children, pregnant and lactating women, and those with diminished autonomy.
- Members of CARE-IHEC are expected to approach this position with the seriousness and professionalism, to show interest and motivation, commitment and availability, respect for divergent opinions and ability to work as a team, integrity, diplomacy and ability to maintain confidentiality.
- Participate in the CARE-IHEC meeting.
- Review all research documents Submitted for approval before the Meeting.
- The CARE-IHEC shall thoroughly review the information regarding compensation in case of trial related injury or illness, or death, is set forth in the written Informed Consent Form and any other written information to be provided to subjects. Further, it shall also confirm that the sponsor, CRO or the Principal Investigator (PI) shall provide complete medical care along with compensation for any injury or death caused by the study drug/device under investigation as per the Govt. regulations.

- The CARE-IHEC will review both the financials proposed to be paid and method of payment to subjects.
- Review progress reports and monitor ongoing studies.
- Monitor SAEs and recommend appropriate action(s).
- Maintain confidentiality of the documents and deliberations of the EC meetings.
- Declare conflict of interest, if any
- Remaining impartial and objective when reviewing protocols.
- Carry out work delegated by the Chairperson and/or Member Secretary.
- Participate in continuing education activities in biomedical ethics and biomedical research and Provide information and documents related to training obtained in biomedical ethics and biomedical research to the IEC secretariat.
- Respecting each others' views and the deliberative process.
- Members should not make copies of any material provided to them and ensure destruction or return of all materials sent for review after the Ethics Committee meetings.

### **Chairperson**

Chairperson will be Nonaffiliated. A well respected person from any background with prior experience of having served/ serving in an EC.

### **Roles and Responsibilities of Chairperson**

- Conduct EC Meetings and be accountable for independent and efficient functioning of the committee
- Ensure active participation of all members (particularly non-affiliated, non-medical/ non-technical) in all discussions and deliberations
- Ratify minutes of the previous meetings
- In case of anticipated absence of Chairperson at a planned meeting, the Chairperson should nominate a committee member as Acting Chairperson

or the members present may elect an Acting Chairperson on the day of the meeting. The acting Chairperson should be a non-affiliated person and will have all the powers of the Chairperson for that meeting.

- Seek Conflict of Interest declaration from members and ensure quorum and fair decision making.
- Handle complaints against researchers, EC members, conflict of interest issues and requests for use of EC data, etc
- Assess the need to obtain prior scientific review, invite independent consultant, patient or community representatives.

### **Member Secretary**

Member Secretary will be affiliated to the institution. He / she should be a staff member of the institution, having knowledge and experience in clinical research and ethics, motivated and having good communication skills and able to devote adequate time to this activity.

### **Roles and Responsibilities of Member Secretary**

- Organize an effective and efficient procedure for receiving, preparing, circulating and maintaining each proposal for review
- Ensure training of EC secretary / Coordinator and EC members
- Ensure SOPs are updated as and when required
- Ensure adherence of EC functioning to the SOPs
- Prepare for and respond to audits and inspections
- Ensure completeness of documentation at the time of receipt and timely inclusion in agenda for EC review.
- Assess the need for expedited review or full review

### **Basic Medical Scientist**

Medical scientist can be Affiliated/ non-affiliated. He/she should be a medical person with PG medical qualifications in basic medical sciences. In case of EC reviewing clinical trials with drugs, the basic medical scientist should preferably be a pharmacologist. The representative of Medical scientist category should have

postgraduate qualification (minimum MD/MS) & adequate experience in their respective fields.

### **Roles and Responsibilities of Basic Medical Scientist**

- Scientific and ethical review with special emphasis on the intervention, benefit-risk analysis, research design, methodology and statistics, continuing review process, SAE, protocol deviation, progress and completion report

### **Clinician**

Clinician can be affiliated/ non-affiliated. He/she should be individual/s with recognized Post Graduate medical qualification, expertise and training

### **Roles and Responsibilities of Clinician**

- Scientific review of protocols including review of the intervention, benefit-risk analysis, research design, methodology, sample size, site of study and statistics
- Ongoing review of the protocol (SAE, protocol deviation or violation, progress and completion report)
- Review medical care, facility and appropriateness of the principal investigator, provision for medical care, management and compensation.

### **Legal expert**

Legal Expert can be Affiliated/ non-affiliated with the institution. He / She should have a basic degree in Law from a recognized university, with experience.

### **Roles and Responsibilities of Legal expert**

- Ethical review of the proposal, ICD along with translations, MoUs, Clinical Trial Agreement (CTA), regulatory approval, insurance document, other site approvals, researcher's undertaking, protocol specific other permissions, compliance with guidelines etc.

**Social scientist or representative of nongovernmental voluntary agency or philosopher or ethicist or theologian**

Non-affiliated / affiliated persons with social/ behavioral science/ philosophy/ religious qualification and training and/or expertise and be sensitive to local cultural and moral values. He / she can be from an NGO involved in health-related activities.

### **Roles and Responsibilities of Social Scientist**

- Ethical review of the proposal, ICD along with the translations
- Assess impact on community involvement, socio–cultural context, religious or philosophical context, if any
- Serve as a patient/participant/ societal / community representative and bring in ethical and societal concerns.

### **Lay person**

Non-affiliated and Literate person from the public or community, Has not pursued a medical science/ health related career in the last 5 years, May be a representative of the community from which the participants are to be drawn, Is aware of the local language, cultural and moral values of the community and Person involved in social and community welfare activities are desirable. The person may have basic school education (SSLC) or basic non medical / non scientific UG / PG degrees.

### **Roles and Responsibilities of Lay person**

- Ethical review of the proposal, ICD along with translation(s).
- Evaluate benefits and risks from the participant's perspective and opine whether benefits justify the risks.
- Serve as a patient/participant/ community representative and bring in ethical and societal concerns.
- Assess on societal aspects if any

### **Independent Consultants**

The IHEC may call upon, or establish a standing list of, independent consultants who may provide special expertise to the IEC on proposed research protocols, when the Chairperson / Member secretary or the IHEC members determine that a study will involve procedures or information that is not within the area of

expertise of the IHEC members. These consultants may be specialists in ethical or legal aspects, specific diseases or methodologies (e.g. genetic disorders, stem cell research etc.), or they may be representatives of communities, patients, or special interest groups. These consultants must sign the confidentiality agreement regarding meeting, deliberations, and related matters. These consultants or subject experts cannot vote for a decision. A formal invitation letter will be sent to the consultant and confidentiality also will be signed before submitting the study documents. Updated CV of the independent consultant will be collected and filed.

### **13 Membership Requirements:**

- All members will serve for a period of 3 years and the tenure may be extended through consensus among the members.
- There is no limit to the number of times that the membership can be extended.
- New members will be appointed to replace members.
- New members will be included in the committee in such a way that there will be a mix of recently included members and members with some years of experience.
- A member can tender resignation of his /her office of membership from the committee to the Chairperson/member secretary.
- Conflict of interest, if any, must be disclosed.
- Members are required to sign the confidentiality disclosure agreement (Annexure II) at the start of their term and maintain absolute confidentiality of all discussions during the meeting.
- Willing to undergo training or update their skills/knowledge during their tenure
- Members must provide their training certificates on human research protection or GCP to the EC.

### **Resignation/Replacement Procedure**



- Member can resign from the committee after giving written notification to the Chairperson / Member Secretary
- A member can be replaced in the event of death or long-term assignments outside the country or for any misconduct deemed unfit for a member.
- A member can tender resignation with proper reasons to do so, in writing to the Chairperson / Member Secretary of Ethics committee.
- A new member with suitable background may be appointed to replace an outgoing member.
- Membership will be updated and notified to the Regulatory authority periodically

### **Training of the Members**

The CARE-IHEC members will be encouraged to keep abreast of all national and international developments in ethics through orientation courses on related topics. The training can be provided by the EC / Institution or external members or agencies so that they become aware of their role and responsibilities.

- Members will be trained on their roles and responsibilities in the committee.
- SOP training will be completed, before participation.
- Members will be trained by the Chairperson/Member secretary /Other Members/ Experts from outside regarding the new developments /Guidelines/Regulations.
- Any change in the regulatory requirements will be brought to the attention of the CARE-IHEC members as and when required.
- Prior notice will be given to the members regarding the date of Training
- Attendance will be recorded and maintained.
- Training letter will be prepared and the same will be maintained at the CARE-IHEC.
- New members will be trained.

### **Responsibilities of the Secretariat/Administrative staff**

- The supporting staff such as EC secretary / EC Coordinator of the CARE-IHEC will be appointed by the Vice Chancellor who will report to the Member Secretary.
- Member Secretary/Chairperson will delegate following function. To the support staff but not limited to,
  - Organizing CARE-IHEC meetings regularly, Maintaining attendance,
  - Preparation of agenda and minutes of the meetings, Approval letter
  - Communicating with CARE-IHEC members and Institution/Site/Investigator
  - Arrangement of training for personnel and CARE-IHEC members
  - Providing necessary administrative support for CARE-IHEC related activities to the Member Secretary.
  - Pre and post arrangements of CARE-IHEC meetings
  - Answering queries of the investigators
  - Filing study related documents, Maintenance of study files and Archiving
  - Performing Site audit visit. Organizing an effective and efficient tracking procedure for each proposal received.
  - Training for IHEC members and/or IHEC staff.
  - Participate in the development and subsequent implementation of SOPs

### **14 CARE-IHEC fee details and honorarium to members**

- For sponsored clinical trials, a specific amount will be collected from the Sponsor/CRO/ Investigator. Payment should be made along with the submission letter.
- For academic proposals, there will be a subsidized fee which may be at times waived at the discretion of the EC / Institute.

- Ethics Committee fee is collected for its functioning, maintenance and to meet any administrative requirements (for example stationary)
- CARE-IHEC Fee details are given in Annexure XI.
- Honorarium for the external members and transport arrangement / allowance will be fixed based on the Institute's recommendations.
- There will not be any Honorarium and transport support for internal members.

## **15 Procedure for writing, reviewing, distributing & amending SOPs for the Ethics Committee**

- The SOP will be prepared according to the applicable regulatory requirement
- The objective is to contribute to the effective functioning of the CARE-IHEC, so that a quality and consistent ethical review mechanism for health and biomedical research is put in place for all proposals dealt by the Committee as prescribed by the Ethical guidelines for biomedical research on human subjects.
- It is the responsibility of the Chairperson to appoint a member or team to formulate the SOPs. The need of revision of SOP will be discussed in the IHEC meeting and Chairperson will appoint SOP writing Team to revise the SOP.
- The draft SOP will be reviewed and approved by the Chairperson of the ethics committee.
- The validity of the SOP will be three years from the date of its implementation and will be revised once in three years. SOP will also be revised time to time to meet the new regulatory requirements or to incorporate any relevant Gazette notification from the regulatory body.
- Approved SOPs will be implemented from the effective date.
- All members of Ethics Committee should review the SOPs.
- Training on new SOP will be conducted for all members.

- The Member Secretary will discuss the approved SOPs with the administrative staff and instruct them to implement the SOP accordingly.

## **16 Procedure for conducting CARE-IHEC meetings**

- CARE-IHEC Meetings usually will be held once in 4- 8 weeks, except for emergency or special meeting.
- The Member Secretary or secretariat Staff is responsible for the conduct of meetings, maintaining the records and communicating with all the members of the Committee.
- Meeting dates will be informed by the Secretariat Staff/Member Secretary in advance to all the Members and/or Investigators.
- After confirmation from the all the members or majority members, Meeting date will be decided.
- Agenda will be prepared by the secretariat Staff and signed by the Member Secretary.
- Agenda will have the following - The date, time, purpose of the meeting and Protocol that are going to be reviewed in the meeting. (Refer attachment for IV for draft Agenda)
- Agenda will be circulated to the members and/or Investigator.
- The Chairperson will preside over the meetings.
- Investigator/ Co Investigator may be invited to present the proposal or elaborate on specific issue.
- In case of the academic projects, the postgraduate or undergraduate student or faculty shall be informed that they can do the presentation only along with the guide's presence.
- Attendance will be maintained.
- Meeting will be conducted only if the quorum is present. A minimum of five persons is required to form the quorum without which a decision regarding the research would not be taken and if taken, it is not valid.

### **Quorum Requirements**

Minimum of five members are required to compose a quorum for the CARE-IHEC meeting of which at least one member will be from outside the institution, and one member will be a non-scientific member. For review of each protocol the quorum of CARE-IHEC shall have the following representations:

- One Basic medical scientist
- One Clinician
- One Legal expert
- One social scientist or representative of nongovernmental voluntary agency or philosopher or ethicist or theologian
- One Lay person

#### **Conflict of Interest Declaration for CARE-IHEC members**

- Members shall declare to the Committee any interests they may have in relation to an application for ethical review or any other matter for consideration at that meeting. Such a declaration may be made orally at the meeting, prior to the matter being considered or in writing to the Chair prior to the meeting.
- If any member has Conflict of interest, they will not be participating in the voting procedure.
- Secretariat staff is responsible to collect all the signed conflict of interest form.
- All such forms are filed in the CARE-IHEC binders.
- If a CARE-IHEC member is the key investigator/collaborator in a research proposal, the member may be asked to leave the meeting room and take no part in the voting. The minutes should record all declarations of interest and the decision of the CARE-IHEC on the procedure followed.

### **17 Procedure for submission of research project**

- An application for review of proposed biomedical research should be submitted by a qualified applicant responsible for the ethical and scientific conduct of the research. Principal Investigator can submit the documents

for CARE-IHEC for review under any of the 5 categories mentioned below :

- Initial Review Application
  - Resubmission of Study with Corrections
  - Protocol Amendment or any other amendments
  - Annual Status Reports /Continuing Review of the study
  - Study Completion / Termination
- The CARE-IHEC prefers that all the research projects should be addressed to the Member secretary/Chairperson for Submission.
  - All the research projects should be submitted at least 2 weeks prior to the meeting
  - For Certain Studies like BA/BE Studies or in certain extra ordinary situations, exemption in 2 weeks timeline will be provided. EC application can be submitted at least 7 days before the EC meeting in those situations, provided the study drug/protocol was reviewed and approved by the EC earlier.
  - Two copies of the Submission/ covering letter duly signed by the Principal Investigator (PI) or Co-investigators needs to be submitted along with the research documents. The submission letter should clearly mention all the list of documents that are enclosed and also the pending documents that needs to be submitted for review. Refer annexure V– for draft Submission template.
  - Two (2) Hard copies of all the research documents should be enclosed along with the submission letter. A soft copy of all the submitted documents should be sent to CARE-IHEC email ID – [ihec@chettinadhealthcity.com](mailto:ihec@chettinadhealthcity.com). The EC members will receive only the softcopy of the submitted proposals by email to review.
  - Prescribed fee as per the Fee Structure should be remitted along with the application.

- Refer Annexure VI for List of minimum required documents that has to be submitted with the submission letter.
- The date of CARE-IHEC meeting will be intimated to the Principal Investigator to attend the meeting. The Principal Investigator/Designee should send the Protocol presentation atleast 3 days before the scheduled meeting. Secretariat Staff will circulate the Protocol presentation to the members.
- Agenda will be prepared by EC office and distributed to all EC members atleast 3 days prior to the meeting.
- The Principal Investigator will present the protocol. When the PI is not available any of the co-Investigators can present the protocol and clarify the points raised by the members.
- In case of the academic projects, the postgraduate or undergraduate student or faculty shall do the presentation only along with the guide.
- The decision of the committee on the proposal will be communicated in writing. If revision is to be made, the revised document in required number of copies will be submitted within a stipulated period of time as specified in the communication.

#### **Receipt of submission packages**

- The procedure for the receipt of documents (2 hard copies and 1 soft copy by mail) is as follows
- The office of the EC will review the documents submitted comparing with the submission checklist and verify by ticking the EC receipt section in the check list
- If any missing documents are there EC will inform the applicant to submit the required documents
- If the application is intact, the member secretary will give acknowledgement in the submission letter by signing and stamping for investigator use.
- Every valid application will receive a unique CARE-IHEC reference number for further correspondence.

- The Member Secretary/Secretariat Staff will acknowledge the receipt of the submission/covering letter and a copy of the same will be handed over to the concerned person. The Secretariat staff will circulate the research documents to the members by email.
- One hard copy will be labeled and stored at EC office and this copy will be archived at EC office. The other copy will be handed over to the Investigator with approval or disapproval stamp.

## **18 Procedure for reviewing the research projects**

- The submitted proposal shall be reviewed both for scientific content and ethical principles.
- The Following aspects will be considered during Review of Research Proposal:
  - Scientific design and conduct of the study.
  - Approval of appropriate scientific review committees.
  - Patient information sheet and informed consent form in English and regional language.
  - Procedure for selection of participants including inclusion/exclusion, withdrawal criteria and other issues like advertisement details.
  - Potential benefits to the study subjects
  - Predictable risks to the study subjects
  - Compensation to subjects for participating in the study
  - Justification for use of placebo, if any.
  - Management of research related injuries, Such as adverse events/Serious Adverse events.
  - Monitoring of serious adverse events
  - Compensation for study related injury
  - Protection of privacy and confidentiality.
  - Involvement of the community, wherever necessary



- Plans for data analysis and reporting
  - Adherence to all regulatory requirements and applicable guidelines.
  - Competence of investigators, research and supporting staff.
  - Facilities and infrastructure of study sites.
- The IHEC will assess the appropriateness of the Investigator for the conduct of respective clinical trial. The suitability of the Investigator to conduct the trial will be assessed based on the educational qualification, clinical experience, clinical trials experience and training in clinical research.
  - At the time of review of clinical trial protocols, the EC will assess the appropriateness of the trial site for the conduct of respective clinical trial. The suitability of the trial site to conduct the trial will be assessed based on infrastructure, equipment, doctors available, number of in-patients and out-patients and the experience of the investigators in conducting the trials.
  - The Ethics Committee shall undertake through review of the informed consent forms and patient information sheets in English and vernacular language whenever the clinical trial protocols are reviewed.
  - The EC will ensure that all study related injuries (AE/SAE) are treated free of the cost by the investigator. There shall be no cost imposed on the patient for investigations, medical or surgical treatment or hospital expenses.
  - In case of SAEs, the EC will review the protocol for appropriate section defining the compensation for SAEs. The EC will ensure that the compensation for SAEs is as per the guidelines provided in “New Drugs and Clinical Trials Rules, 2019”.
  - The review will be done through formal meetings and will not resort to decision through circulation of proposal.
  - If required Principal Investigator and/or Designee will leave the meeting hall for further discussion of EC Members.
  - If required Independent consultants/experts will be invited to offer their opinion on specific research proposals.

- Experts will give their specialized views but will not take part in the decision making or voting.
- These consultants must sign the confidentiality agreement before participating in the deliberations.

## **19 Expedited Review**

- An expedited review will be conducted when the Research documents for a new Protocol are submitted later than the period for a normal submission, (i.e., within 1 week prior to the day of the meeting - excluding the day of dispatch and the day of the meeting).
- An expedited review shall be conducted in the following categories of research proposal also,
  - Research investigations that present no more than minimal risk to the study participants.
  - Minor amendment in previously approved research during the period for which approval was granted.
  - Definitions of “minimal risk” and “minor amendment” will be based upon accepted guidelines/categories and/or at the discretion of the Chairperson/Member secretary.
- All revised proposals, submitted will be reviewed for expedited review.
- Review will be conducted by the Chairperson or Member Secretary or by any other nominated member.
- The committee should keep all members of the committee informed of these approvals under the expedited review procedure.

## **20 Procedure for decision making and communicating the decision**

- Decisions will be made only in meetings where quorum is complete.
- Only members can make the decision. The expert consultants will only offer their opinions.
- Decisions will be taken by consensus after discussions, and whenever needed voting will be done.

- Any Opinions of absent members that are transmitted by mail or telephone or fax may be considered by the attending members during discussion but may not be counted as votes or quorum for formally convened full board meetings.
- Any member with a conflicting interest in a proposal will abstain from deliberations and in decision making process on that proposal, except to provide information as requested by the committee.
- Such abstentions will be recorded in the minutes.
- Deliberations will be done in the absence of the Investigators /representatives.
- Decision of the meeting on the proposals will be communicated by the Member Secretary/ Secretariat staff.
- The Principal Investigator/ Team should clarify the queries-if any raised during the meeting within a stipulated time as communicated.
- The clarification from the Principal Investigator will be circulated to the members by the secretariat Staff.
- Decision may be to approve/ conditionally approve / reject / modify the proposals.
- If the proposal is approved then the approval letter will be sent to the respective Principal Investigator.
- If the proposal is rejected, then a letter with reason for its decision will be sent.
- If the approval of the project is kept pending for any clarifications, it will be intimated in writing to the Principal Investigator.
- In case CARE-IHEC revokes its approval accorded to a trial protocol, it will record the reasons for doing so and at once communicate such a decision to the Investigator as well as to the Licensing Authority.
- All the details of the discussions and deliberations in the meetings will be minuted, and signed by the Member Secretary /Chairperson.

## **Minutes of the Meeting**

- Secretariat Staff is responsible to prepare the minutes.
- The draft document will be sent to the Member secretary, Chairperson and other members for approval.
- The minutes of the meeting shall contain a record of the following:
  - The members present
  - Proposals discussed
  - Any decision taken by the Committee
  - Comments by members
  - The decision on the applications
  - The outcome of voting, if any.

**Note:** Minutes of Meeting are the internal documentation and will not be circulated to the outside parties.

## **Procedure for approval**

- The Chairperson should ensure that one of the opinions is taken for every application considered at CARE-IHEC meeting.
  - “Approval” or “Rejection” or “Conditional Approval” subject to receipt of further information or modifications.
- Where the CARE-IHEC decides that further information or clarification is required, the Chairperson/member secretary ensures that the further information or clarification required reaches the committee.
- The Secretariat Staff will prepare the draft approval letter as per CARE-IHEC approval template given in Annexure–VII.
- Approval draft will be sent to Chairperson for any correction.
- The Approval letter will then be signed by the Member Secretary / Chairperson.
- The Signed Approval letter will be sent to the Investigator by the Member secretary/secretariat staff within 2 weeks after the meeting.

- Copy of the Approval Letter is maintained in the specific study file at CARE-IHEC.
- The positive decision can be changed after receiving any information that affects the benefit/ risk ratio.
- Duration of the Approval Validity for the Research project will be 1year from the date of approval. In the case of the project continuing beyond the validity period, the Principal Investigator should apply for continued approval of the same within 30 days prior to the date of expiry of validation.

### **Research protocol amendments and other study related documents**

Any change to a protocol shall be considered as a protocol amendment.

- The amendments shall be classified as Major or Minor.
- Major: Amendment that alters the potential risk of the safety of the trial subjects, change in the Protocol design etc. Minor: any administrative amendment.
- The Member Secretary in consultation with Chairperson will decide whether to Carry out a full board meeting or not.
- The Investigator /Designee should submit one copy of the Amended protocol or any other study related documents along with the covering letter duly signed by the Investigator to the Secretariat Staff. Soft copy of the same should be sent to CARE-IHEC email-Id. The modification should be highlighted.

### **Procedure for continuing research projects**

- Approval Validity for the Research project will be 1year from the date of approval. In the case of the project continuing beyond the validity period, the Principal Investigator should apply for continued approval of the same within 30 days prior to the date of expiry of validation.
- The Investigator or the study team should submit the Application for Renewal of Approval for Continuing the Research to the CARE-IHEC in the format given in Annexure VIII or Investigator can use own format but

all the information should be furnished. The renewal fee has to be submitted along with the application, if applicable.

- The Secretariat staff will verify the completeness of the submission letter for extension of approval of the project. Member secretary will acknowledge the receipt. If required the Principal Investigator/Designee will be invited.
- The submission will be tabled in the meeting.

## **21 Procedure for monitoring the approved research**

- Once the study is approved, CARE-IHEC starts monitoring the Research.
- The Approved Study/Research has to be conducted as per protocol, adhere to the ICH-GCP, Indian GCP and New Drugs and Clinical Trials Rules 2019, and other applicable national and International Guidelines.
- The EC shall ensure that the Investigator uses only the EC approved informed consent form and patient information sheet. The EC will also instruct the Investigator to obtain informed consent before start of any trial related procedures in a particular study participant. There will be on site assessment by the EC to ensure informed consent is administered properly by the Investigator.
- Any amendment to the protocol/study documents should be resubmitted for renewed approval. Any new information related to the study should be communicated by the Investigator to the EC.
- All SAEs occurred and the interventions undertaken at Investigator's site must have to be notified within 24 hours. All other sites' SAEs have to be notified as per the timelines given in the guidelines or within 7 days of receipt. All the SAEs will be reviewed by the CARE-IHEC and appropriate action will be taken as & when required.
- All Protocol deviation/Violation/ non-compliance/waiver have to be notified. All Such notification will be circulated to CARE-IHEC members, reviewed & assessed by the committee during the meeting for the seriousness of the deviation / Non-Compliance / Violation with respect to

the safety & health aspects of the subjects and the necessary actions will be taken by the committee accordingly.

- Investigator or designee has to inform periodically the status of the study once in 6 months. Status report of the study has to be submitted in the given format mentioned in annexure X or Investigator can use own format but all the information should be furnished.
- Premature termination of study should be notified with reasons along with summary of the data obtained so far.
- Change of investigators / sites should be informed.
- Final report should be submitted at the end of study.
- The Secretariat staff will verify the completeness of all the reports sent to CARE-IHEC. The reports will be circulated in the meeting.
- CARE-IHEC has the authority to stop the conduct of the research project if there is any misconduct pertaining to the trial or safety issues for the trial participants.
- If the Investigator is audited by the sponsor or external body it has to be informed to the CARE-IHEC and Audit report from the sponsor or external body has to be submitted and also resolution for audit report has to be notified to the CARE-IHEC.

## **22 Procedure for review of safety reports**

- The Principal Investigator/Co-Investigator will submit the safety updates of the research projects.
- All SAEs have to be notified to the CARE-IHEC within 24 hours from the time of occurrence of the event. The Investigator shall submit a detailed follow up report within 14 days of occurrence of the SAE to the EC.
- SAE has to be notified using the SAE form given in Annexure IX or the investigator can use his site specific template for SAE notification, provided all the necessary information as prescribed in the CARE-IHEC SAE form are made available. The SAE form should be compliant to the rules defined in New Drugs and Clinical Trials Rules 2019.

- All other site SAEs, SUSARs, CIOMS and any other safety information pertaining to the trial have to be notified to CARE-IHEC as per the timelines given in the guidelines or upon within 7 days of receipt.
- Safety Reports will be acknowledged by the Member Secretary and copy will be retained in the CARE-IHEC study file/binder.
- All the safety Reports or updates will be circulated to the members by the member secretary during the meeting. If any Clarification required related to the SAE, it will be raised to the Investigator and Investigator should clarify within required time frame.
- The SAE will be reviewed in the routine meeting or a special meeting can be arranged for reviewing the submitted SAE, if considered necessary based on the safety issues of the study participants.
- The EC will do due analysis of causality assessment of the SAEs and will classify the event as related or unrelated based on established scientific practices and published literature and drug labels.
- The EC will calculate the compensation for SAEs as prescribed in New Drugs and Clinical Trials Rules 2019 and will recommend to the CDSCO for the agency to consider the view of the EC while it is analyzing the SAE reports.
- The views and the decision made by the CARE-IHEC on the submitted SAE including the causality assessment and compensation will be communicated to the regulatory authorities within 30 days of occurrence of the SAEs.
- Ethics Committee has an authority to suspend or terminate approval of research project that has been associated with unexpected serious harm to subjects.

## **23 Procedure for documentation and record retention**

- For each project a separate file will be maintained.
- All the research related documents and communications of CARE-IHEC will be dated and filed in the respective binders.



- All the Documents pertaining to the committee will be separately filed. The CARE-IHEC documents are as follows,
  - Invitation Letter/Acceptance Letter, CV and certificates, Training Records, Appointment letters/Resignation letter, Signed Confidentiality agreement, and any declaration by members.
  - Membership, Attendance, Meeting agenda and Minutes
  - SOP
  - Copies of all communications
- All the Study related documents will be filed in the respective study specific binders. Each Study file will contain the CARE-IHEC Reference Number, Protocol No, and Investigator's Name.
- Secretariat Staff is responsible for secured maintenance of documentation.
- After receiving the study completion report from the Investigator, the study specific file will be archived.
- Documents that will be maintained by the CARE-IHEC during archival.
  - One Copy of all the study documents submitted for review and approval. All additional copies of document will be destroyed, in order to ensure confidentiality.
  - Copy of - Composition of the committee, Minutes of the meeting.
  - Copy of the decision sent to the applicants.
  - Copy of all correspondence with investigators and regulatory bodies, if any. All other documents received during the study. All relevant AEs and SAEs, Study progress reports
  - Final report of the approved projects and other microfilms, CDs, Videos submitted to the committee.
- All the completed study related documents will be archived in a separate cupboard.
- Member Secretary/Secretariat staff will have an access to the documents and are responsible for Archival of records.

- Upon receiving request in writing from the relevant authorities, documents will be made available for the inspection/audit.
- Confidentiality will be maintained in Retention and Archival of documents.
- All the Approved study documents will be archived for the period of 5 years and Non-approved study documents will be archived for a period of 1 year.
- Documents will be discarded after the archival period.

## **24 Procedure for review of external projects**

- An External Institution can form alliance with CARE-IHEC for their research proposals that are to be carried out in their institutions for the review & approval by the CARE-IHEC.
- External Institution which requires facility of CARE-IHEC should submit the request letter from the Head of the Institute and Investigator addressing to the Member Secretary/Chairperson of CARE-IHEC for reviewing the research proposal. Member secretary/Secretariat Staff will acknowledge the receipt and forward the request letter to chairperson.
- The Institutional profile and brief Curriculum vitae of the Investigator will be collected and forwarded to the chairperson and upon acceptance the project would be undertaken for review by CARE-IHEC.
- If required Member secretary/Secretariat Staff will conduct the site visit to verify the suitability of the facility to conduct the research activities. Other members may also participate in this feasibility assessment.
- Memorandum of Understanding (MoU) will be made by the External Institution and CARE-IHEC. Refer Annexure XII for draft MoU.
- MoU will be signed by the Chairperson or Member Secretary on behalf of CARE-IHEC.
- All other process will be similar as that of internal research project and external Institution has to follow the SOP of CARE-IHEC.
- Periodic review of the external institution will be performed. CARE-IHEC will conduct audits at the External site as and when required. If the audit is

planned, Investigator and the team will be given prior notice or in some situations, a surprise audit can also be conducted by the CARE-IHEC.

- CARE-IHEC has authority to terminate or withheld the conduct of the research project at the external institution if there is any misconduct pertaining to the trial.

## **25 Monitoring of the own conduct of CARE-IHEC**

- The EC is open for any external audit / inspection by the sponsor or regulatory agency.
- Periodic internal audit is scheduled once in 6 months.
- During internal audits, the functioning of the EC will be assessed for compliance to the EC SOP and regulatory requirements. The scope of the audit will also include the timely disposal of cases for which the adherence of timelines specified in the SOP and regulatory requirements will be scrutinized.
- The records and registers will be scrutinized and if needed appropriate corrective and preventive actions will be initiated.
- The Chairperson in consultation with the member secretary will appoint any one of the members CARE-IHEC or any technically competent person from the Institute “Chettinad Academy of Research and Education” or outside of the Institute to audit and submit the report.
- The audit report will be placed in a full board EC meeting and discussed regarding the status of operational compliance to SOP and regulatory requirements and documentation practice prevailing.
- The EC shall decide suitably if any corrective action is required for any of the deviations and an action plan will be drawn and implemented.

## **26 Responsibilities of the investigator**

- Investigator should not start the study unless and until the final approval is obtained from CARE-IHEC. And in case of conditional Approval as the necessary information/documents should be submitted before the study starts.

- Investigator should conduct the study in accordance with all applicable national and international guidelines.
- Investigator should adhere to the study protocol which is approved by the CARE-IHEC throughout the conduct of the study.
- Audio Video of Informed consent should be obtained from all the participants before their participation in the trial. Copy of the Patient Information Sheet and duly filled Informed Consent Form shall be handed over to the subject or his / her attendant.
- The Investigator should submit written summaries of the research status to the CARE-IHEC as mentioned in the SOP.
- Any breaches of investigator undertaking should be immediately notified to the CARE-IHEC and the actions will be taken by the committee as appropriate.
- Final Clinical Study Report should be submitted at the end of the study.
- All SAEs should be intimated within 24 hours from the time of receipt of information by the investigator and within 14 days, a detailed report should be submitted to the EC.
- Protocol deviation, if any, should be informed with adequate justifications.
- Any amendment to the protocol should be resubmitted for approval.
- Trial budget should be submitted and approved by CARE-IHEC before commencing the study. There should be a transparent financial transaction during the trial.
- Any new information related to the study should be notified.

## **27 Information to research participants**

- Investigators have a responsibility to keep the research participants informed of the progress of research by appropriate means, at suitable time-frames in simple and non-technical language.

- The Investigator shall provide information to the clinical trial subject through informed Consent process and the subject's right to claim compensation in case of trial related injury or death.
- Investigator should inform when:
  - the research study is terminated or cancelled
  - any changes occur in the context of the research study that alter the potential benefits or risks
  - the research project is completed
  - Results of the research are available.

### **Informed consent form requirements**

- Site Specific Informed Consent Form is Mandatory
- ICF along with translation in regional languages is mandatory.
- Back translation and translation certificate is required.
- All elements of consent form should be present as per regulatory guidelines
- Details of Ethics Committee and the contact person should be printed on the ICF.
- ICF amendments should be submitted for approval.
- However administrative changes can be submitted for notification provided the basic ICFs are reviewed and approved by CARE-IHEC earlier for that particular study.

## **28 Guidelines for Compensation for Research Participants**

CARE-IHEC strongly claims that issuing suitable compensation to the Research Participants whenever applicable is the primary obligation of the Sponsor be it a pharmaceutical company, a government agency, or an institution.

### **Compensation in case of injury or death during clinical trial**

- In the case of an injury occurring to the clinical trial subject, he or she shall be given free medical management as long as required.

- In case the injury occurring to the trial subject is a SAE and related to the clinical trial, such subject shall also be entitled for financial compensation as per New Drugs and Clinical Trials Rules 2019, and the financial compensation will be over and above any expenses incurred on the medical management of the subject.
- In the case of clinical trial related death of the subject, his/her nominee(s) would be entitled for financial compensation , as per the order of the licensing authority defined in New Drugs and Clinical Trials Rules 2019, and the financial compensation will be over and above any expenses incurred on the medical management of the subject.
- The expenses on medical management and the financial compensation in the case of clinical trial injury or death of the trial subject shall be borne by the sponsor of the clinical trial.
- Any injury or death of the subject occurring in clinical trial due to following reasons shall be considered as clinical trial related injury or death and the subject or his/her nominee(s), as the case may be, are entitled for financial compensation for such injury (SAE) or death:
  - Adverse effect of investigational product(s);
  - Violation of the approved protocol, scientific misconduct or negligence by the sponsor or his representative or the investigator;
  - Failure of investigational product to provide intended therapeutic effect;
  - Use of placebo in a placebo-controlled trial;
  - Adverse effects due to concomitant medication excluding standard care, necessitated as part of approved protocol;
  - For injury to a child in-utero because of the participation of parent in clinical trial;
  - Any clinical trial procedures involved in the study.
- The Sponsor or his representative, whosoever had obtained permission from the Licensing Authority for conduct of the clinical trial, shall provide

financial compensation, if the injury or death has occurred because of any of the above reasons.

- The Sponsor, whether a pharmaceutical company or an institution shall give an undertaking along with the application for clinical trial permission to the licensing authority defined in clause (b) of Rule 21, to provide compensation in the case of clinical trial related injury or death for which subjects are entitled to compensation.
- In case the sponsor fails to provide medical management for the injury to the subject and / or financial compensation to the trial subject for clinical trial related injury or financial compensation to the subject's nominee(s) in case of clinical trial related death of the subject, the licensing authority may after giving an opportunity to show cause why such an order should not be passed, by an order in writing , stating the reasons thereof, suspend or cancel the clinical trial and / or restrict sponsor including his representative(s) to conduct any further clinical trials in the country or take any other action deemed fit under the rules.

### **Responsibilities of Sponsor**

- Any report of serious adverse event of death occurring in clinical trial, after due analysis shall be forwarded by the sponsor to chairperson of the Ethics Committee and Chairman of the Expert Committee constituted by the Licensing authority with a copy of the report to the Licensing Authority and the head of the institution where the trial has been conducted within 14 calendar days of occurrence of the serious adverse event of death.
- The report of the serious adverse event other than death , after due analysis, shall be forwarded by the sponsor to the Licensing authority , Chairperson of the Ethics Committee and the head of the Institution where the trial has been conducted within 14 calendar days of occurrence of the serious adverse event.
- In case of injury or death occurring to the clinical trial subject, the sponsor (whether a Pharmaceutical Company or an institution) or his representative, whosoever had obtained permission from the Licensing authority for conduct of the clinical trial, shall make payment for medical

management of the subject and also provide financial compensation for the clinical trial related injury or death in the manner as prescribed in the New Drugs and Clinical Trials Rules 2019.

- The sponsor (whether a Pharmaceutical Company or an institution ) or his representative, whosoever had obtained permission from the Licensing authority for conduct of the clinical trial, shall submit details of compensation provided or paid for clinical trial related injury or death to the Licensing Authority within thirty days of the receipt of the order of the Licensing Authority.

#### **Responsibilities of the Investigator(s):**

- During and following a subject's participation in a trial, the investigator should ensure that adequate medical care is provided to the participant for any adverse events.
- Investigator(s) shall report all serious and unexpected adverse events to the Licensing Authority, Sponsor or his representative, whosoever had obtained Permission from the Licensing Authority for conduct of the clinical trial and the Ethics committee that accorded approval to the study protocol, within twenty four hours of their occurrence.
- The report of the serious adverse event of death, after due analysis shall be forwarded by the Investigator to chairperson of the Ethics Committee and Chairman of the Expert Committee constituted by the Licensing Authority with a copy of the report to the Licensing Authority and the head of the institution where the trial has been conducted within 14 calendar days of occurrence of the serious adverse event of death.
- The report of the serious adverse event other than death, after due analysis shall be forwarded to the Licensing Authority, Chairperson of the Ethics Committee and the head of the Institution where the trial has been conducted within 14 calendar days of occurrence of the serious adverse event.

#### **Responsibilities of the Ethics Committee**



- In case of serious adverse event of death occurring to the trial subject, the Ethics Committee shall forward its report on the serious adverse event of death, after due analysis, along with its opinion on the financial compensation, if any, to be paid by the Sponsor or his representative, whosoever had Obtained permission from the Licensing for conducting the clinical trial, to the Chairman of the Expert committee Constituted by the Licensing Authority with a copy of the report to the Licensing Authority within 30 calendar days of the occurrence of the Serious adverse event of death.
- In case of serious adverse event other than death occurring to the clinical trial subject, the Ethics Committee shall forward its report on the serious adverse event after due analysis along with its opinion on the financial compensation, if any, to be paid by the sponsor or his representative, whosoever had obtained permission from the Licensing Authority for conducting the clinical trial, to the Licensing Authority within 30 calendar days of the occurrence of the serious adverse event.

### **Serious Adverse Event**

- A serious adverse event is an untoward medical occurrence during clinical trial that is associated with death , in patient hospitalization (in case the study was being conducted on out-patient), prolongation of hospitalization (in case the study was being conducted on in-patient), persistent or significant disability or incapacity, a congenital anomaly or birth defect or is otherwise life threatening.

## **29 Protection of Vulnerable Population in Clinical Trial**

CARE-IHEC emphasize & exercise particular care to protect the rights, safety and well-being of all Vulnerable subjects participating in the study, e.g., members of a group with hierarchical structure (e.g. prisoners, armed forces personnel, staff and students of medical, nursing and pharmacy academic institutions), patients with incurable diseases, un-employed or impoverished persons, patients in emergency situation, ethnic minority groups, homeless persons, nomads, refugees, fetuses/neonates, pregnant women, minors or others incapable of personally giving consent.

CARE-IHEC will take all possible efforts to ensure that individuals or communities invited for research be selected in such a way that the burdens and benefits of the research are equally distributed such as,

- Research on genetics should not lead to racial inequalities;
- Persons who are economically or socially disadvantaged should not be used to benefit those who are better off than them;
- Rights and welfare of mentally challenged and mentally differently able persons who are incapable of giving informed consent or those with behavioral disorders must be protected and hence CARE-IHEC will take all necessary safeguarding measures for the same. Appropriate proxy consent from the legal guardian should be taken after the person is well informed about the study, need for participation, risks and benefits involved and the privacy and confidentiality procedures. The entire consent process should be properly documented- CARE-IHEC may even ask the Investigator for the copy of the ICF signed by such participants along with the ICF administration process and may also oversee the ICF administration & consent process taking place at the site;
- Adequate justification is required for the involvement of participants such as prisoners, students, subordinates, employees, service personnel etc. who have reduced autonomy as research participants, since the consent provided may be under duress or various other compelling reasons.

#### **Research involving Pregnant Women & Foetuses**

- Research involving pregnant women and fetuses should involve the least possible risk.
- The CARE-IHEC will document specific findings to minimize the potential for risk or harm to the fetus, and additional attention must be given to the conditions for obtaining informed consent.
- CARE-IHEC Vigilantly ensures that the Pregnant or nursing women should in no circumstances be the participant of any research unless the research carries, the objective of obtaining new knowledge about the fetus, pregnancy and lactation, the design to protect or advance the health of

pregnant or nursing women or fetuses or nursing infants, and for which women who are not pregnant or nursing would not be the suitable participants.

- CARE-IHEC demands a proper justification for participation of Pregnant or nursing women that they should not be deprived arbitrarily of the opportunity to benefit from investigations, drugs, vaccines or other agents that promise therapeutic or preventive benefits. Example of such trials are, to test the efficacy and safety of a drug for reducing prenatal transmission of HIV infection from mother to child, trials for detecting foetal abnormalities and for conditions associated with or aggravated by pregnancy etc.
- CARE-IHEC always makes sure that women should not be encouraged to discontinue nursing for the sake of participation in research and in case she decides to do so, harm of cessation of breast-feeding to the nursing child should be properly assessed except in those studies where breast feeding is harmful to the infant. Compensation in terms of supplying supplementary food such as milk formula should be considered in such instances.
- CARE-IHEC ensures that pregnant women who desire to undergo Medical Termination of Pregnancy (MTP) could be made participants for such research as per The Medical Termination of Pregnancy Act, GOI, 1971.
- CARE-IHEC in the event of research related to pre-natal diagnostic techniques, will ensure that such research is limited to detect foetal abnormalities or genetic disorders and not for sex determination as per the Prenatal Diagnostic Techniques (Regulation and Prevention of Misuse) Act, GOI, 1994

### **Research Involving Children**

CARE-IHEC has strong concerns on undertaking the research on Children by the Investigator and also ensures the following,

- Children will not be involved in research that could be carried out equally well with adults;

- The purpose of the research is to obtain knowledge relevant to health needs of children. For clinical evaluation of a new drug, the study in children should always be carried out after the phase III clinical trials in adults. It can be studied earlier only if the drug has a therapeutic value in a primary disease of the children;
- A parent or legal guardian of each child has given proxy consent;
- The assent of the child should be obtained to the extent of the child's capabilities such as in the case of mature minors from the age of seven years up to the age of 18 years.;
- Research should be conducted in settings in which the child and parent can obtain adequate medical and psychological support;
- Interventions intended to provide direct diagnostic, therapeutic or preventive benefit for the individual child participant must be justified in relation to anticipated risks involved in the study and anticipated benefits to society;
- The child's refusal to participate in research must always be respected unless there is no medically acceptable alternative to the therapy provided/ tested, provided the consent has been obtained from parents / guardian;
- Interventions that are intended to provide therapeutic benefit are likely to be at least as advantageous to the individual child participant as any available alternative interventions;
- The risk presented by interventions not intended to benefit the individual child participant is low when compared to the importance of the knowledge that is to be gained.

### **30 Request for CARE-IHEC SOP**

- Investigator/Site/CRO can send a mail for request of SOP.
- It is understood that the SOP is a confidential and private document of CARE-IHEC and shall not be made accessible/available to anyone outside the recipient's organization.

## **31 References**

- New Drugs and Clinical Trials Rules, 2019
- Indian Good Clinical Practice
- Indian Council of Medical Research's (ICMR) National Ethical Guidelines for Biomedical Research, 2017
- ICH – Good Clinical Practices

## **Annexure 1: Template for Membership List**

**List of CARE-IHEC Members will be in the format given below**

<b>S.No</b>	<b>Name</b>	<b>Qualification with Specialization</b>	<b>Current Organization</b>	<b>Designation</b>	<b>Mailing Address with contact details</b>	<b>Affiliation with Institution</b>

## **Annexure 2: Template for Confidentiality Disclosure Agreement**

As Chair/member of CARE-IHEC, I hereby declare that,

1. I will strictly follow the confidentiality regarding the committee and Research Projects.
2. I will not disclose any information disclosed at CARE-IHEC meetings
3. I will use confidential information only to fulfill the obligations of reviewing proposals.
4. I will not reproduce information disclosed during CARE-IHEC deliberations.
5. I will not disclose any confidential information to third party

This applies for a period of 3 years from my acceptance.

Signature:

Name:

Designation in Committee:

Date:

### **Annexure 3: Conflict of Interest Declaration Form**

In accordance of the policy of the CARE-IHEC,

I have a conflict of interest, and shall not participate in the review, comment or approval of any activity.

Please mention reason – If any

Signature: -----

Name: -----

Date: -----



## **Annexure 4: Template for IEC meeting Agenda**

**Date:**

**Venue:**

Conference Hall,  
Registrar Office,  
Chettiand Academy of research and Education,  
Rajiv Gandhi Salai, Kelmabkkam, Kanchipuram Dt  
Tamil Nadu.

**Meeting Date:**

**Time:**

**General Discussion:**

Please mention list of topics for General discussion

**Protocol for Discussion:**

Please mention Protocols for discussion including Investigator details

The soft copy / hard copy of the study documents for above mentioned Protocol(s) were submitted for your review.

The Principal Investigator/Designee will present the protocols during the meeting.

**Member Secretary**

## **Annexure 5: EC submission template**

“On Institution/ Investigator Letter Head”

**Date:**

**To**

Member Secretary

<EC Address>

**Protocol #/Protocol Title**

**Subject:** Submission of Clinical Study Documents for Review and Approval

**Dear Sir/Madam,**

Please find enclosed study documents with version number for the above mentioned study for review and approval in the forthcoming Ethics committee meeting.

<Mention list of documents enclosed>

Thanking you,

**Sincerely**

**Principal Investigator (Name and Signature)**

## **Annexure 6: List of documents to be enclosed with EC submission**

The following documents are to be enclosed but not limited to,

- Submission letter/ Request letter in the Institutional letter head along with the 2 hard copies of the study documents and 1 soft copy (preferably sent via email to [ihec@chettinadhealthcity.com](mailto:ihec@chettinadhealthcity.com))
- Trial protocol(s)/amendment(s) – Full text of the Protocol, Protocol should contain all the elements as per Regulatory requirements.
- Investigator's Brochure (IB), Results of Previous trials and Available safety information.
- Patient information sheet and Informed consent form in English and local language(s)- All the elements of the Informed consent should be present as per Regulatory Requirement and Ethics committee details should be printed.
- Any other study material such Subject questionnaires, follow - up cards, Patient diary, advertisements etc.
- Back Translations & Translation Certificates for all Subject related documents.
- Annotated Case report forms,
- Copy Insurance policy details or Certificates
- Investigator's current curriculum vitae with research experience and/or other documentation evidencing qualifications and Letter of undertaking
- Copy of Regulatory Approval and any regulatory clearances required.
- Clinical Trial Agreement(CTA) duly signed by all the stakeholders of the study or draft CTA
- CTRI Number
- Information about payments and compensation available to subjects.
- Statement of conflicts of interest, if any.
- Procedure for seeking and obtaining informed consent(SOP)

- If the study is Placebo controlled then Justification for the use of placebo
- MoU (for external project).

**Note:** The above information and enclosures should be furnished wherever necessary depending upon the nature of study proposal.

## **Annexure 7: Format for approval letter**

**Date**

**To**

“Principal Investigator Name and Site Address”

**Ref No:**

**Dear Dr.”Investigator Name”,**

**Sub: Approval Letter for protocol #**

With reference to your submission letter, the below mentioned documents were received.

The Chettinad Academy of Research and Education – Institutional Human Ethics Committee reviewed and discussed your application to conduct the clinical trial titled “Protocol title” on “date of the Meeting”.

The following documents were reviewed:

*“List of documents reviewed on Meeting”*

The following members of the ethics committee were present at the meeting held on “date” at “time“ in the conference Hall, Registrar Office, Chettiand Academy of Research and Education, Rajiv Gandhi Salai, Kelmabkkam, Kanchipuram Dt.

<b>Sl.No</b>	<b>Name of the Member</b>	<b>Qualification/Designation</b>	<b>Affiliation with the Institution</b>

This is to confirm that neither Principal Investigator nor the study staff participating in this study was involved in the voting procedures and decision making process.

**“Status of the Approval”**

**The CARE-IHEC expects to be informed,**

- (i)Progress of the study,
- (ii)If any SAE occurring in the course of the study it should be informed within  
24hours.
- (iii)Any change in the protocol and subject information/informed consent
- (iv)Any Protocol deviation/Violation,
- (v)Copy of the final report.

**Yours sincerely,**

**Member Secretary**

## **Annexure 8: Details to be submitted in the Application for Renewal of approval**

- CARE-IHEC Reference number
- Title of the research proposal
- Name of the Principal Investigator (PI) with qualification and designation
- Approval date
- Date study initiated, if no, specify reason
- Has subject recruitment begun?
- If subject recruitment has not begin, give reasons
- How many subjects have been screened?
- How many subjects have been randomized?
- How many Screen failures and or droupouts? Reason
- Is subject recruitment continuing?
- Is the Subjects completed the study, if no number of pending visits.
- Expected date for study completion?
- Have there been any adverse events/ Serious Adverse Events? If yes, give details
- Any Protocol deviation/Violations?
- Have there been any unanticipated study-related problems? If yes, give details.
- List of attachments for review, if any
- Remarks, if any
- Signature of the Principal Investigator with date.

### **NOTE**

- Investigator can use own format but all the information should be furnished.
- Investigator should attach the renewal fee along with the application.

## **Annexure 9: SAE Notification Template**

(On the Institution or Investigator Letter Head)

**Date:**

**To**

Member Secretary

CARE-IHEC

**CARE-IHEC Ref Number:**

**Protocol #/ Title:**

**Subject:** Notification of SAE to CARE-IHEC

**Dear Sir/Madam,**

We would like to notify the SAE occurred for one of the participants at our site. The details of SAE are given below.

- Subject Information (includes Subject #/ Initials, hospital/OPD record number, Gender, Age and/or date of birth ,Height and Weight)
- Event Term and description of the event in detail
- Start date of the event and stop date
- Criteria for SAE
- Is the Event related to study/ study drug
- Details of the study drug/Investigational Product administered to the subject during the trial: (includes Generic name of the drug, Indication(s), dose given, Route of administration, Start date, Stop date,)
- Other Treatment(s) : Provide the same information for concomitant drugs (including non- prescription/OTC drugs) and non-drug therapies, as for the study drug(s).
- Action taken with the study drug



- Medical History of the patient
- Dechallenge and rechallenge information – If any
- Outcome (Information on recovery and any sequelae; results of specific tests and/or treatment that may have been conducted, Resolved date, If Hospitalized, discharge summary)
- Details about the Investigator
- Date of reporting the event to Licensing Authority:
- Date of reporting the event to Ethics Committee overseeing the site:
- Report type – Initial/Follow-up
- Is the subject continuing his/her participation in the study?

(Attach SAE form given by the sponsor with this notification – If any)

Kindly review and do revert for any other information or clarification.

Thanking you

Sincerely,

(Signature with date)

(Principal Investigator/ any other Investigator) and Site Address.

**NOTE:**

- Investigator can use CARE-IHEC format or format given by the Regulatory Authority.
- SAE Form sent to the Sponsor should be attached along with this notification.

## **Annexure 10: Information to be submitted in the status report**

- CARE-IHEC Reference number
- Title of the research proposal
- Principal Investigator and contact details
- Changes in the Study team details, if any.
- Total No of Sites and Total No. of Subjects – Overall
- Date study initiated, if no, specify reason
- Number of subject Screened and enrolled in the study
- Number of subjects screen failure/drop outs
- Number of subjects Ongoing/Completed
- Total Number of subjects discontinued with reason,
- SAE - if any with details
- Any Protocol Deviation/Violation – if yes, give details.
- Other issues, if any- give details

### **Annexure 11: CARE-IHEC fee for review**

<b>Review type (Phase trial I, II, III and IV ) / BABE studies / any Industry sponsored trial</b>	<b>Amount in (Rupees)</b>
EC review fee (Initial review – full board meeting)	30, 000
Review of Major amendments (for full board meeting)	30, 000
Ratification of minor amendments to protocol	5,000
Expedited review	40, 000
Review of SAE reports and communication to DCGI on compensation (full board meeting)	30, 000
Renewal of Approved Research/Protocol	10,000
<b>For Academic projects</b>	
A payment of Rs 300 to be paid by the students and faculty during initial submission and Rs 200 for resubmission.	

#### **NOTE:**

- All the Payment is excluding the TDS. After deducting the tax Payment mentioned above should be made to CARE-IHEC.
- Payment should be made along with the submission letter. The action will be made by the EC only after realization of the deposited payment.
- Payment should be made as demand draft or at par cheque.

## **Annexure 12: MoU draft between CARE-IHEC & External site**

### **C1 PARTIES**

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This MoU made and entered into on -- <Date> (effective date) between

**AAA**, a company incorporated under the Companies Act, 1956 of India and having its registered office “---” of the first part,

AND

**Chettinad Academy of Research and Education – Institutional Human Ethics Committee, (CARE-IHEC), Chettinad Academy of Research and Education, a Deemed to be University, Rajiv Gandhi Salai, Kelambakkam, Kancheepuram Dt – 603103, Tamilnadu**

(Herein after called “CARE-IHEC” which expression shall, where the context so admits, include its successors and permitted assigns) of the second part.

### **C2 BACKGROUND**

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- C2.1 WHEREAS **CARE-IHEC** and **AAA** are desirous of collaborating with each other using the facilities and expertise that is specific to the collaborative work proposed (hereinafter called the PROJECT) as per the scope of the work detailed in section C.3.2
- C2.2 The parties have identified that a strong relationship between them is mutually beneficial and wish to establish a more formal relationship through this MOU.

### **C3 SCOPE OF THE MOU**

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- C3.1 The MOU details the terms and conditions, financial arrangements, modalities of collaboration, responsibilities and obligations of CARE-IHEC and **AAA** pertaining to the collaboration undertaken under the PROJECT.
- C3.2 **AAA** will submit their clinical trial or BA/BE study protocols to CARE-IHEC for ethical review. The submission, review and decision making will be in compliance to the guidelines stipulated in “New Drugs and Clinical Trials Rules, 2019”, “Indian Good Clinical Practice”, “Indian Council of

Medical Research's (ICMR) National Ethical Guidelines for Biomedical Research” and ICH – Good Clinical Practices.

#### **C4 FINANCIAL ARRANGEMENTS**

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- C4.1 AAA has decided to accept CARE-IHEC as its Ethics Committee to execute the clinical trial or BA/BE study together, each party contributing their knowledge and expertise to the project.
- C4.2 AAA will provide fee to CARE-IHEC to cover the costs of services as outlined in Appendix 1.
- C4.3 CARE-IHEC ethics committee and AAA are to undertake this project at their own risk.

#### **C5 MODALITIES OF COLLABORATION**

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- C5.1 CARE-IHEC will enjoy all the rights of an institutional ethics committee and AAA is agreeable to have CARE-IHEC as their ethics committee to achieve the goals of the PROJECT.
- C5.2 The CARE-IHEC hereby agrees that it will be acting, in the performance of this MOU, as an independent contractor. The Services will be performed directly by the CARE-IHEC who will provide the Services in a timely, competent and professional manner having at all times due regard to the AAA business operations.

#### **C6 RESPONSIBILITIES**

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- C6.1 Both the parties shall engage the necessary manpower, infrastructure, materials, etc., required for undertaking the PROJECT.
- C6.2 Neither party shall be responsible for any damage to the property/material of the other party caused by its personnel during or consequent to the work carried out under this MOU.

#### **C7 COMPLETION**

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- C7.1 The work envisaged to be done by AAA/ CARE-IHEC shall be deemed to have been successfully completed by AAA/ CARE-IHEC on submission of the Final Report / fulfillment of its / their responsibilities as detailed in the PROJECT.

## **C8 RESULTS OF PROJECTS**

- C8.1 Any intellectual property rights patents / design / trademark / copyrights obtained by the parties hereto pertaining to the PROJECT prior to signing of the MOU shall remain the property of the respective party.
- C8.2 The procedural formalities for securing and maintaining the intellectual property rights (patents / trademark / copyright) if any, shall be the joint responsibility of AAA and CARE-IHEC.

## **C9 CONFIDENTIALITY**

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- C9.1 During the tenure of the MOU and for six months thereafter both AAA and CARE-IHEC undertake on behalf of their subcontractors / employees / representatives / associates to maintain strict confidentiality and prevent disclosure thereof, of all the information and data exchanged / generated pertaining to work under this MOU for any purposes other than in accordance with this MOU.

## **C10 FORCE MAJEURE**

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- C10.1 Neither party shall be held responsible for non-fulfillment of their respective obligations under this MOU due to the exigency of one or more of the force majeure events such as but not limited to Acts of God, war, flood, earthquakes, strike, lockouts, epidemics, civil commotion, etc., provided on the occurrence and cessation of any such events, the party affected thereby shall give a notice in writing to the other party within one month of such occurrence or cessation. If the force majeure conditions continue beyond 6 months, the parties shall then mutually decide the future course of action.

## **C11 EFFECTIVE DATE, DURATION, TERMINATION OF THE MOU**

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- C11.1 The MOU shall be effective from the effective date written above and shall remain in force for a period of ---- **years** from the said date, in the first instance.
- C11.2 The MOU shall terminate on the expiry of the period, as in clause 12.1, unless extended by both the parties.

- C11.3 During the tenure of the MOU, parties hereto can terminate the MOU either for breach of any of the terms and conditions of this MOU or otherwise by giving 1 months' notice in writing to the defaulting party. Failure of either party to terminate the MOU on account of breach or default by the other shall not constitute a waiver of that party's right to terminate this MOU.
- C11.4 In the event of termination vide clause C12.3, the rights and obligations of the parties thereto shall be settled by mutual discussion;
- C11.5 Even if the agreement is terminated, the indemnity clause will be binding on both the parties as defined in clause 17 with regard to the studies reviewed by CARE-IHEC.

## **C12 NOTICES**

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- C12.1 All notices and other communications required to be served on CARE-IHEC under the terms of this MOU shall be considered to be duly served if the same shall have been delivered to, left with or posted by registered mail to CARE-IHEC at its address mentioned in this document. Similarly, any notice to be given to the AAA shall be considered as duly served if the same have been delivered to, left with or posted by registered mail to the AAA at its registered address mentioned in this document.

## **C13 AMENDMENTS TO THE MOU**

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- C13.1 No amendment or modification of this MOU shall be valid unless the same is made in writing by both the parties or their authorized representatives and specifically stating the same to be an amendment of this MOU. The modifications / changes shall be effective from the date on which they are made / executed, unless otherwise agreed to.

## **C14 ASSIGNMENT OF THE MOU**

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- C14.1 The rights and / or liabilities arising to any party to this MOU shall not be assigned except with the written consent of the other party and subject to such terms and conditions as may be mutually agreed upon.

## **C15 ARBITRATION**

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C15.1 In the event of any dispute arising out of or in connection with this MOU, the parties wish to seek an amicable settlement as per the laws of India and Tamilnadu within the legal jurisdiction of Chennai.

## **C16 INDEMNITY**

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C16.1 AAA indemnifies the current members of the CARE-IHEC and will keep indemnified all the current members of CARE-IHEC against all claims, liabilities, demands, charges, loss, injuries, costs and expenses in respect of all and any decisions taken in good faith and acts done as members of the towards the review and / or approval of the clinical trial, as detailed in the CARE-IHEC approved study protocol and documents.

C16.2 This Indemnity will cover the said members during their tenure of office and also cover claims etc. made after their tenure.

C16.3 As and when there are fresh nominations to the Ethics Committee this Indemnity will cover such members also.

## **SEAL OF PARTIES**

In witness whereof the parties hereto have signed this MOU on the day, month, and year mentioned hereinabove.

### **Parties**

For and on behalf of

**AAA**

Signature

Name:

Designation:

Seal

For and on behalf of

**CARE-IHEC**

Signature

Name

Designation

Seal



**Appendix-1**  
**Services and Payment schedule**

<b>Item</b>	<b>Amount (Rs)</b>
EC review fee (Initial review – full board meeting)	Rs. 30, 000
Review of amendments (for full board meeting, any number of amendments)	Rs. 30, 000
Expedited review	Rs. 40, 000
Review of SAE reports and communication to DCGI on compensation (full board meeting)	Rs. 30, 000
Site inspection fee (for single visit; transport and logistics should be borne by the site/sponsor)	Rs. 10, 000
Ratification of minor amendments to protocol (without formal board meeting)	Rs. 5, 000

Payment should be made in single installment.

Payment should be made as demand draft or at par cheque .

The action will be made by the EC only after realization of the deposited payment.

For and on behalf of

**AAA**

Signature

Name:

Designation:

Seal

For and on behalf of

**CARE-IHEC**

Signature

Name

Designation

Seal

**NOTE:** (MoU - only for External projects)

- MoU Should be made between the CARE-IHEC and Site/Institution
- AAA represents the Site/Institution where trial will be conducted
- MoU should be printed on 100/200 rupees Stamp paper (Probably 1<sup>st</sup> page on Stamp paper and other pages on legal paper).
- MoU should be signed before the Start of Study.