Holland Bloorview
Kids Rehabilitation Hospital

	REB REVIEW OF RESEARCH		
POLICY: REB-406	**PROTOCOL DEVIATION**		
This policy pertains to:	The activities of researchers under the authority of the Bloorview Research Institute and the Research Ethics Board (REB) operating under the authority of Holland Bloorview Kids Rehabilitation Hospital		
Responsibility for executing this policy:	Chair, Holland Bloorview REB (or designate)		
Approval authority:	Research, Teaching & Learning Advisory Committee (RTLAC) of the Holland Bloorview Board of Trustees		
Effective date:	January 2016	**Supersedes document date:**	V3: July 2014
Approved:	Chair of the REB		

1. PURPOSE

This SOP describes the policy for protocol deviation submission and review by the Holland Bloorview REB.

2. POLICY

A Principal Investigator (PI) who deviates from the REB-approved protocol either inadvertently or to eliminate an immediate hazard(s) to participants or others without prior REB approval must notify the REB using appropriate procedures.

3. DEFINITION

Protocol Deviations

A protocol deviation is an unanticipated or unintentional divergence or departure from the expected conduct of an approved study that is not consistent with the currently approved research protocol, consent document or study addenda.

REFERENCES

Health Canada Food and Drugs Act, Div 5
ICH GCP 3.3.7 and 4.5.2.

Examples of protocol deviations include:

- Changes in procedures initiated to eliminate immediate hazards to study participants;
- Enrolment of participants outside protocol inclusion/exclusion criteria;
- Over-enrollment (exceeding the target number of participants approved by the REB);
- Medication/intervention errors (i.e. incorrect drug/intervention, incorrect dosage of the drug);
- Inadvertent deviation in specific research intervention procedures or timing of the research intervention;

- Breach of confidentiality or privacy without a need to know, or by data exposure (computer security breach, documents left unsecured), and;
- Deviation from the consenting process.
- Failure to follow REB SOPs

4. SPECIFIC PROCEDURES

The PI should not implement any deviation from, or changes to the protocol without prior REB approval, except where necessary to eliminate an immediate hazard(s) to participants, or when the change(s) involves only logistical or administrative aspects of the research (e.g. change of telephone number(s)).

CAN/CGSB-191.1-2013 – (4.4.6.5), (4.4.6.7)

4.1 Procedures to Report Protocol Deviations

The procedure to report a protocol deviation to the REB depends upon whether it is a 'primary' or 'secondary' change in the approved protocol.

4.1.1 Reporting primary protocol deviations

Primary protocol deviations include unanticipated or unintentional protocol changes that:

U.S. Code of Federal Regulations
Title 21 Part 56.108 (a) (4)
Title 45 Part 46.103 (b) (4)
Appendix 7

- Eliminate an immediate hazard(s) to participants or others;
- Affect participant rights, welfare, or level of risk;
- Impact the scientific integrity of the study;
- Alter research participant eligibility; or
- Compromise the privacy of research participants, confidentiality of data.

The timeframe to report a primary protocol deviation depends upon its nature. Changes to the protocol to eliminate immediate hazards to study participants must be reported to the REB using the Protocol Deviation Report Form within 5 (five) calendar days of discovery. Other primary deviations must be reported to the REB using a Protocol Deviation Report Form within 15 (fifteen) calendar days of discovery.

Protocol Deviation Report Forms must be completed and signed by the Local PI for the study concerned. The report must include at least the following content:

- A description of the deviation that occurred with an explanation of the circumstances that lead to the deviation and the resulting problem.
- An explanation as to whether or not the deviation

compromised the scientific integrity of the study
- An explanation of whether or not the deviation increased the risk or the possibility of risk for the research participant;
- A description of steps taken or that will be taken to correct/address the problem resulting from the deviation, and;
- A plan to mitigate the risk that a similar deviation does not occur in the future.

If required, the Protocol Deviation Report Form should be submitted to the study sponsor and to regulatory authorities.

4.1.2 Reporting secondary protocol deviations

Secondary protocol deviations include other inadvertent protocol changes that do not meet the criteria for a primary protocol deviation, as described in section 4.1.1, including:

- Isolated cases of a study procedure that occurs outside of the required timeframe;
- Isolated cases of missed required lab tests;
- Isolated cases of missed/late study medication doses;
- Failure of the research participant to return study medication;
- Lost medication diaries.

All secondary protocol deviations must be documented in the study files using a protocol deviation log within 15 days of discovery. The PI is required to explain and sign off on all secondary protocol deviations in the log.

The PI must submit the protocol deviation log that lists secondary protocol deviations as an attachment to the annual (interval) renewal form. The list of secondary protocol deviations must include the following tabulated information:
- The date of deviation discovery;
- A description of the deviation that occurred with an explanation of the circumstances that led to the deviation; and,
- A description of steps taken to correct/address the problem resulting from the deviation;
- Dated acknowledgement by the Local PI..

4.2 Review of Protocol Deviations by the REB

All protocol deviation reports submitted by investigators are reviewed by the REB Chair or designee. The REB Chair or designee may request additional information from the investigator regarding the protocol deviation, as needed.

The REB Chair or designee reviews the appropriateness of any proposed corrective actions or preventative measures by the principal investigator and/or study sponsor. The REB may recommend additional appropriate preventative measures.

Revision History

V3/July 2014: CAN/CGSB-191.1-2013 references incorporated to reflect compliance. Changed Research Advisory Committee to Research, Teaching & Learning Advisory Committee.

V4/January 2016: Defined protocol deviations as either primary or secondary. Described procedures for Local PIs to report both types of protocol deviations.