CLINICAL TRIAL SOP 3: Investigator Site File

Purpose

To describe the procedures related to the maintenance of the Investigator Site File (ISF), which may also be referred to as the Study Master File (SMF), held at all clinical research sites/units, according to ICH GCP E6 (R2) Section 8 to ensure it is current at all times for the duration of the clinical study.

Scope

This SOP applies to all Investigators (Principal and Sub-Investigator), Study Coordinators, visiting medical officers (VMO), and other Research staff and volunteers who propose to undertake, administrate, review and/or govern human research involving patients/participants and staff. All study personnel involved in the clinical study must operate within their scope of practice.

Cabrini Health policies and regulatory requirements

This SOP should be read in conjunction with policies and other documents provided by the Cabrini Research Governance Office (CRGO) relevant to the conduct of clinical research at Cabrini Health including but not limited to:

- Aboriginal and Torres Strait Islander Health – asking for Aboriginal and Torres Strait Islander identity
- Monitoring of Research Policy
- Research Integrity and Misconduct Policy
- Safety Monitoring and Reporting in Research Policy
- Cabrini Research Data Management, Access and Sharing Policy
- Data Classification and Labelling Standard
- Cabrini Authorship and Publications for Research Policy
- Research Participants Complaints and Compliments Procedures Policy
- Cabrini Research Governance Handbook

Researchers at Cabrini must foster quality research and abide by the following directives:

- The National Clinical Trials Governance Framework (NCTGF)
- National Statement on Ethical Conduct in Human Research (2023)
- Catholic Health Australia Code of Ethical Standards
- Act in accordance with Cabrini Research policies in order to protect the rights, safety and welfare of research participants
- Support patient and family carer involvement in their own research participation through abidance with the Australian open disclosure policy, and Charter of healthcare rights.
- Agree to comply with all reasonable directions and policies by Cabrini Research for Cabrini to meet or exceed the requirements of the NCTGF. To the extent that the NCTGF applies to the position, compliance with the specified roles and functions of the workforce, as set out by the NCTGF.

Procedure

3.1 The Investigator Site File – Principal Investigator Responsibilities

The Principal Investigator must:

- Ensure an ISF is created, if not provided by the Sponsor, prior to study commencement and ensure that it contains at a minimum the Essential Documents listed:

CABRINI GUIDANCE: INVESTIGATOR SITE FILE FOR CLINICAL TRIALS	
1.	**STUDY CONTACT LISTS**
1.1	Study Team Contact List
2.	**PROTOCOL AND AMENDMENTS**
2.1	Protocol (current/updates/tracked and superceded)
2.2	Protocol amendment(s) and protocol version tracker
2.3	Signed protocol and protocol amendment signature page(s)
2.4	Protocol deviations, serious breaches, and corrective and preventative action plans (CAPA)
2.5	Protocol clarification letters
3.	**INVESTIGATOR BROCHURE (where applicable)**
3.1	Investigator's Brochure (current/updates and superceded)
3.2	Signature page(s)
4.	**INFORMED CONSENT DOCUMENTATION**
4.1	Approved participant information sheet and consent forms (PICFs)
4.2	Superseded and tracked Cabrini site PICFs
4.3	Signed and dated PICFs
5.	**TRIAL TEAM INFORMATION**
5.1	Delegation of authority log
5.2	Signed and dated CVs for all team members (and updates)
5.3	Medical Licence
5.4	Training certificates (GCP certificates, etc)
6.	**FINANCIAL DOCUMENTATION**
6.1	Financial disclosure forms
6.2	Invoices, receipts and payments
7.	**AGREEMENTS/CONTRACTS/REGULATORY INFORMATION**
7.1	Confidential disclosure agreement
7.2	Clinical trial research agreement, including budget schedules
7.3	TGA/CTN notification and correspondence

8.	**INSURANCE AND INDEMNITY**
8.1	Insurance certificate
8.2	Indemnity documents
9.	**LABORATORY DOCUMENTS**
9.1	Reference ranges and any updates
9.2	Accreditation certificate
9.3	Lab manual
9.4	Shipment forms/biospecimen collection logs/temperature logs (if required)
10.	**MONITORING DOCUMENTS**
10.1	Monitor visit log/documentation
10.2	Site Initiation Visit (SIV) Report (Copy)
10.3	Site initiation training material
10.4	Date agreements or electronic data capture systems checklists
10.5	Protocol deviation log
11.	**TRAINING DOCUMENTATION**
11.1	Training log
11.2	Other training material/records (such as electronic data capture training certificates)
12.	**SCREENING**
12.1	Participant screening and enrolment logs
12.2	Site recruitment and enrolment documentation
12.3	Cohort management plan (if applicable)
13.	**SUBJECT/PATIENT DOCUMENTATION**
13.1	Master subject identification code list
14.	**ETHICS COMMITTEE**
14.1	HREC approval and amendment approvals
14.2	HREC correspondence
14.3	Annual progress reports, and HREC acknowledgement of reports
14.4	HREC acknowledgement of safety information (annual safety report/significant safety issue)
14.5	HREC notification of study completion
15.	**GOVERNANCE APPROVAL**
15.1	Cabrini Research Governance Office Approval
15.2	Cabrini Research Governance Office correspondence

15.3	Progress/Annual report/Close-out report and acknowledgment
16.	**eCRF/CRF DOCUMENTATION**
16.1	Sample eCRF/CRF
16.2	eCRF/CRF completion guidelines
16.3	EDC user manual
16.4	EDC training certificates for site staff
17.	**INVESTIGATIONAL PRODUCT**
17.1	Memo to file – All investigational product information filled in pharmacy binders
18.	**SAFETY REPORTING**
18.1	Blank safety reporting forms and completion guides
18.2	Completed safety report forms
18.3	Annual safety reports (DSUR Exec Summary)
18.4	Investigator notifications/Safety updates/Dear Investigator letters (SUSARs/Significant Safety Issues)
18.5	Safety review committee charter/Data safety monitoring board correspondence
19.	**CORRESPONDENCE**
19.1	Correspondence with sponsor, including site selection letter, site initiation visit
19.2	Memo/note to File(s)/Dear Investigator Letters
19.3	Audit/Inspection documentation and correspondence (if applicable)
19.4	Team communication including meeting minutes, emails, meaningful/significant correspondence

- Establish prior to the commencement of the trial and maintain a current record of the location of all Essential Documents including Source Documents. The storage system used during the study and for archiving (irrespective of the type of media used) should provide for document identification and location, version history, search-ability and retrieval for the length of the archiving retention time.
- File Essential Documents in a timely manner.
- Maintain a current contact list of all Study Personnel, clearly identifying the Primary Site and any external service provider.
- Ensure study documentation is kept and archived as specified in SOP 09 Site Close-Out and Archiving.

3.2 The Investigator Site File (ISF)

- Study related Essential and Source Documents generated will be filed in the ISF.
- The ISF may be in hard copy, electronic or combination format.
  The ISF shall be securely stored in a lockable cabinet (paper format) or password protected on Cabrini servers with limited access permissions (electronic format). The key or password shall only be shared with authorised study team members. The ISF shall not be stored on

local desktop or drives, removable storage devices or on open shared drive without adequate access restrictions and/or without any password protection.

- The ISF should be prefaced with an index of contents as well as indicate the location(s) of all Essential/Source Documents.
- If the ISF and index are not provided by the sponsor, the Cabrini Guidance: Investigator Site File for Clinical Trials template (above) may be utilised and adapted.
- Where financial documentation, such as the Clinical Trial Agreement may be filed in a separate location to the ISF, the location is to be recorded on the ISF index.
- Investigational Product handling documentation e.g. shipping, receipt, Interactive Voice Response System (IVRS), Interactive Web Response System (IWRS), codes, randomisation list and accountability and destruction documents etc. may be kept in a separate file e.g. at the clinical trials pharmacy. In this case the location is to be recorded on the ISF index. However, the records must be made available to Sponsors, monitors, auditors and regulatory agencies at any time. The Investigational Product documentation will be archived with the ISF after completion of the study.
- Sample handling procedures such as a laboratory manual may be filed in a separate location and documented in the index. They are to be clearly documented if performed e.g. in a laboratory manual.
- Other study related materials handling documentation are filed in the ISF.

Current Version

DOCUMENT ID:	CLINICAL TRIAL SOP 3: Investigator Site File
VERSION:	1.0
EFFECTIVE DATE:	01 October 2024
REVIEW DATE:	01 October 2026

Document Approval

NAME	POSITION	SIGNATURE	DATE
Professor Gary Richardson	Group Director, Cabrini Research		18 September 2024

Document History

VERSION NUMBER	EFFECTIVE DATE	DETAILS OF AMENDMENTS /EDITIONS