1 - PUBLIC HEALTH INSTITUTIONS AND THE RESEARCH GOVERNANCE OFFICE
Research Governance and Research Support Function

Research governance comprises those processes used by an institution for the assessment, authorisation and oversight of research conducted at one of its sites or under its auspices. It includes a raft of overarching responsibilities built around Australian and international codes of research conduct. A robust governance framework enables investigators to manage and conduct their clinical trials in a manner that protects the rights, safety and well-being of participants as well as the integrity, quality, and accuracy of the trial data generated.

For clinical trials, a public health institution often has two distinct roles (Figure 1):

- As the **sponsor** for non-commercial (investigator-initiated/collaborative group) trials\(^1\)
- As an **investigational site** for all clinical trials it conducts

![Figure 1: Responsibilities of the institution for clinical trials](image)

The duty of care owed by public health institutions continues to apply when their patients and service users take part in clinical trials and the following sections outline the roles and responsibilities that they assume when conducting trials. The institution’s senior management is responsible for creating a research strategy, assessing the capacity and resources required to meet this strategy and mapping out how (and by whom) each responsibility will be operationalised. The institution should then ensure that research-related activities are appropriately delegated to the relevant support functions or individuals. In most cases, many of the roles outlined below are delegated to the Human Research Ethics Committee (HREC), the HREC secretariat, the research governance office or investigators.

1. **Generic responsibilities**

- Ensure that the institution builds, maintains and effectively manages research capacity and capability by:
  - Developing and delivering the institution’s local research strategy\(^3\) in line with state and national objectives.
  - Providing a safe working environment in which to conduct research.
  - Defining the institution’s overall commitment to research, including promoting and supporting research career pathways and the mentorship and supervision of research trainees.
  - Promoting trial awareness, participation in, and use of high quality research.

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\(^1\) See Document 3-Clinical Trial Sponsor for Non-Commercial Trials.

\(^2\) An internally sponsored trial is one where the institution takes on the role of sponsor for the clinical trial.

\(^3\) This strategy could define the institution’s research strengths, priorities and risk tolerance level (e.g. the institution will accept/will not accept the sponsor role for multicentre trials, phase I trials, etc.).
Promoting a quality research culture.

Ensuring adequate resourcing and management of the required research infrastructure, e.g. research governance offices, research units, coordinating centres, clinical research facilities, biobanks, and databanks etc.

Effectively managing research income and expenditure and the reinvestment of research income back into research through agreed policies and arrangements.

Ensuring appropriate numbers of research personnel are in place with clear position descriptions and lines of accountability, e.g. research nurses, trial coordinators, clinical trial pharmacists etc.

Ensuring that clinical staff have research recognised in their job plans/position descriptions, where applicable.

Developing partnerships with external institutions such as life science companies, universities, Advanced Health Research and Translation Centres, research networks and others, to promote the institution as a research provider and to foster opportunities for research commercialisation.

- Put in place and maintain quality systems for trial conduct and management including:
  - Standard operating procedures (SOPs)/policies\(^4\) to promote adherence to, and awareness of the relevant regulatory and governance requirements and research guidelines, including Good Clinical Practice (GCP), the National Statement on Ethical Conduct in Human Research, and the Australian Code for the Responsible Conduct of Research.
  - Induction and training programmes (e.g. GCP training) and communication and support strategies to ensure research personnel have the knowledge and skills to deliver high quality research.
  - Audit and other processes to identify breaches of good clinical practice, including fraud and misconduct, and when appropriate, to facilitate the implementation of corrective and preventative actions.
  - Key performance indicators (KPIs) and reportable metrics where required, and use this information to inform and manage a continuous cycle of process improvement.

- Maintain a record of all clinical trials activity within the institution, including details of trial status (e.g. set-up, active recruitment, follow-up, closure etc.).
- Promote consumer engagement opportunities in research by ensuring that information about research is readily available to consumers, and promote opportunities for consumers to participate in research.
- Ensure, the IT infrastructure supports research and research governance activities.
- Manage complaints and disputes in accordance with local policy and the Australian Code for the Responsible Conduct of Research.
- Provide mechanisms to identify, declare and manage conflicts of interest that may arise during the research process.
- Ensure appropriate procedures and facilities to manage and archive trial documentation and materials in line with institutional requirements, Australian legislation and where applicable, international requirements.
- Promote the communication and translation of research findings.
- Engage with, and report to Executive Boards and jurisdictional Departments of Health.

\(^4\) SOPs/policies relating to both trial design and management (sponsor responsibilities) and trial conduct (investigator responsibilities).
2. Roles and responsibilities when hosting an HREC

- Implement systems to promote the efficient ethics review of trials and minimise any unnecessary duplication in the review of that research.
- When applicable, ensure that the HREC is registered with the National Health and Medical Research Council (NHMRC), and if participating in the National Mutual Acceptance process, ensure that the HREC is certified by the NHMRC.
- Ensure a continuing education program is in place for HREC members and support personnel to ensure they are up to date with current legislation, policy directives and guidelines pertaining to human research.
- Ensure adequate resourcing and management of the HREC and the HREC secretariat.

3. Roles and responsibilities when hosting commercial or non-commercial trials

- Confirm to investigators their roles and responsibilities, including local reporting requirements, through the establishment of policies and procedures.
- Provide investigators with practical support and advice on trial set-up (e.g. trial feasibility, ethics and governance requirements), to ensure all activities are completed within agreed timeframes.
- Undertake an early assessment of operational requirements for the conduct of the trial to ensure there are proportionate systems in place to mitigate and manage any identified operational risks.
- Ensure that the institution has both the capability and capacity to complete the trial based on protocol requirements.
- Define levels of access and pre-engagement checking for trial activities e.g. honorary appointments, letters of access.
- Ensure support departments have an opportunity to engage with the trial at an early stage and, facilitate trial delivery by managing issues that may arise throughout the trial lifecycle.
- Agree on a budget for the delivery of the trial.
- Maintain effective escalation processes to manage trial issues that may impact on trial authorisation or institutional risk, with clear lines of communication and decision making.
- Ensure that insurance and indemnity arrangements are appropriate for the research.
- Ensure that arrangements, as described in the approved protocol, are in place for identifying and approaching potential participants, including managing any transfers or referrals of patients.
- Implement research governance review of the site specific assessment (SSA), and issue site authorisation following confirmation of ethics approval.
- Monitor recruitment milestones and implement strategies to help ensure the trial is completed on time.
- Ensure that research requirements are considered when hospital systems are procured (e.g. electronic medical records systems that incorporate clinical trial/GCP requirements for source data).
- Monitor whether the trial is being conducted in compliance with internal policies and procedures and manage any complaints or research misconduct incidents that are identified.
- Review and categorise protocol amendments and confirm that the site authorisation is still valid following an amendment or, in discussion with an external sponsor where relevant, withdrawing from participation in the trial if the amendment adversely affects the capacity and capability of the institution to deliver the research.
4. Roles and responsibilities as a trial sponsor

- Encourage investigators to discuss their proposed trials with ethics and/or governance staff at an early stage, to identify and address poorly designed or planned clinical trials.
- Implement a process to assess each investigator-led/collaborative group trial to determine whether the trial is consistent with the institution’s research priorities and risk tolerance level before agreeing to act as sponsor (e.g. assessment of the trial by a research governance committee).
- Ensure that the importance and relevance of the research question and validity of the proposed setting and methodology has been assessed through scientific/peer review and the trial team and trial sites are suitable.
- Ensure that coordinating principal investigators have access, where appropriate, to support, expertise and tools relating to any trial management activities delegated to them (e.g. support to develop grant applications, protocols\(^5\), safety monitoring plans, randomisation and blinding systems and data management and analysis plans).

- Promote patient-centred research by supporting and enabling active consumer involvement\(^6\) for example, by:
  - Collaborating in priority setting partnerships\(^7\)
  - Providing opportunities for consumers to input on the design and management of planned trials (including how best to disseminate trial findings to participants)
  - Where the clinical trial involves or impacts on Aboriginal and Torres Strait Islander Peoples, undertaking community consultation and engagement in accordance with the National Statement and the Australian Code for the Responsible Conduct of Research.

- Ensure that any sponsor functions that are delegated to coordinating principal investigators (or other third parties), are clearly documented and understood.
- For trials where sponsor responsibilities are shared amongst a group of organisations, ensure that the allocation of sponsor responsibilities is agreed and documented.
- Ensure that proportionate arrangements are in place for the monitoring and audit of internally sponsored trials.
- Ensure agreements with third parties consider any funding, indemnities, insurances, confidential information, intellectual property, ownership and authorship related to the trial.
- Promote the communication and translation of research findings and encourage good reporting practices for clinical trials through the use of the CONSORT Statement and Checklist and compliance with the requirements of Australian Code of Responsible Conduct.
- Monitor, though final reporting mechanisms, whether trials findings are disseminated to both the scientific community and the public in accordance with the trial’s publication/dissemination policy.

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\(^5\) By ensuring that all scientific, ethical, and administrative elements are addressed in clinical trial protocol by promoting the use of SPIRIT-compliant protocol templates and guidance.

\(^6\) Consumer involvement ensures that research is more likely to be relevant to the people it is trying to help, beneficial in terms of delivering meaningful outcomes for patients and conducted in a way that is sensitive to the needs of the participants – through better patient information, recruitment processes and general management of the project.

\(^7\) Example: Exploring research priorities in chronic kidney disease (University of Sydney).
5. Role of the Research Governance Officer/Office within the institution

The term Research Governance Officer (RGO) is often used to describe the individual appointed within a Public Health Institution who coordinates the management of applications for site authorisation and the oversight of authorised research projects. Although the precise roles within a research governance office may differ among institutions, the following illustrates the typical roles delegated to staff within the Research Governance Office.

Pre-authorisation:
- Offer advice and guidance in research governance practices and the preparation of applications for governance review, e.g. Site Specific Assessment (SSA).
- Advise on compliance with local and jurisdictional research policies/procedures (e.g. information governance requirements, safety reporting requirements etc.)
- Advise on compliance with the National Statement and the Australian Code for the Responsible Conduct of Research.
- For internally sponsored trials, direct coordinating principal investigators to the relevant support or guidance for protocol development and provide advice on how to obtain scientific peer review.
- Where applicable, work with site staff to ensure that trial set up processes are completed in a timely fashion.
- Ensure appropriate contracts/agreements are in place (e.g. clinical trial research agreements [CTRAs], materials transfer agreements, data sharing agreements).
- Clarify any ‘declarations of interest’ made by research staff.
- Ensure service agreements (e.g. with any third party suppliers) are reviewed as appropriate, obtaining legal advice where required.
- Review indemnity/insurance arrangements on behalf of the site obtaining legal advice where required.
- Ensure an assessment has been made by the appropriate personnel (e.g. Department Heads) to confirm that the trial is feasible and that there is an adequate budget and resources to complete the trial.
- Confirm that all relevant support departments have signed off on the trial, having determined their capacity and capability to support the trial based on a clear understanding of any resources that are required.
- Ensure evidence of ethics review/approval is present.
- If required locally, administrate the institutional Therapeutic Good Administration (TGA) Business Services (TBS) account for internally sponsored CTX/CTN trials.
- Review site specific aspects of study documentation, e.g. site participant information and consent form, to ensure the documents comply with institutional requirements (e.g. site contact details, site logo).
- Prepare briefs regarding the recommendation for authorisation, if required locally, for the CE/delegate and provide advice on any site risk posed by a trial.
- Document all research governance decisions and maintain a current record on the prescribed information technology (IT) system.
- Ensure collection of appropriate fees for research governance review in accordance with institutional policy.

Post-authorisation
- Oversee the conduct of research within the sites through the review of periodic progress reports submitted by the investigator (at least annually).
- Oversee end of trial activities through the review of final reports.
- Keep under review, any special conditions imposed on the conduct of research.
• Review, authorise and manage amendments related to authorised research projects that have implications for the site, e.g. amendments to trial documentation, contract amendments and change in personnel amendments.
• Manage queries related to study conduct, e.g. the assessment of safety reports.
• Review any reports of serious breaches of GCP or the protocol and significant safety issues, and escalate any issue as required.
• Process complaints relating to fraud and misconduct and the conduct of research at the site in accordance with institutional policy and Australian guidance.
• Conduct or coordinate audits of research projects, where required.
• Ensure internally sponsored trials are managed, monitored, reported and results disseminated as agreed and in accordance with the protocol, good clinical practice and Australian guidance.
• Ensure collection of appropriate fees for post-approval research governance review in accordance with institutional policy.

Other:
• Ensure there is an open communication channel with the reviewing HREC, sponsors, investigators and their support staff.
• Administer any electronic research management and governance systems and run reports from the systems.

6. References:
National Statement on Ethical Conduct in Human Research (2007)
Australian Code for the Responsible Conduct of Research (2007)
Research Governance Handbook (2011)
The Note for Guidance on Good Clinical Practice (CPMP/ICH/135/95) as annotated by the TGA
NHMRC Good Practice Process (2015)
Values and Ethics: Guidelines for Ethical Conduct in Aboriginal and Torres Strait Islander Health Research (NHMRC 2003) and Guidelines for Ethical Research in Indigenous Studies (Australian Institute of Aboriginal and Torres Strait Islander Studies 2012)