Data Monitoring Committee & Trial Steering Committee Charters

Document No.:	CR015 v4.0
Author:	Lorn Mackenzie
Issue Date:	30 JAN 2025
Effective Date:	13 FEB 2025

1 Introduction

1.1 The Academic & Clinical Central Office for Research & Development (ACCORD) is a joint office comprising clinical research management staff from NHS Lothian (NHSL) and the University of Edinburgh (UoE).

1.2 The use of Data Monitoring Committees (DMC) and Trial Steering Committees (TSC) form part of the oversight and management of a trial. Both can be considered to be part of the monitoring strategy to mitigate other risk factors in clinical trials as identified by conducting a risk assessment.

2 Purpose

2.1 To describe the procedure for preparing DMC and/or TSC Charters in accordance with ICH-GCP E6 (R2) principles and applicable regulatory requirements.

3 Scope

3.1 This SOP applies to clinical researchers designing and participating in studies sponsored by NHSL and/or the UoE, and to ACCORD personnel involved in sponsorship review and risk assessment.

4 Responsibilities

4.1 It is the responsibility of the Chief Investigator (CI) and the Sponsor to establish whether a DMC and/or TSC is required for a trial.

4.2 It is the responsibility of the CI to initiate a DMC and/or TSC, and create a DMC and/or TSC Charter, if considered appropriate, and ensure members of the DMC/TSC agree

to this and have access to the fully signed document. In addition, the CI is responsible for ensuring DMC and/or TSC meetings are conducted as per proposed schedule.

4.3 The Sponsor Representative, or designee, is responsible for ensuring a charter is in place for the DMC and/or TSC, and for reviewing and signing the DMC/TSC Charter(s) and associated amendments, if applicable.

4.4 The Clinical Trials Monitor will ensure evidence of DMC and/or TSC meetings are filed in the corresponding study file.

4.5 The assigned TSC Sponsor Representative is responsible for attending TSC meetings and filing TSC minutes in the Trial Master File (TMF) and/or Sponsor File

5 Procedure

5.1 DMC Charter

5.1.1 The Investigator, or designee, will establish a DMC, if required, to review data arising during the study for example safety data, unblinded interim analysis for futility/efficacy, trial conduct data i.e. violation reports.

5.1.2 When deciding if a DMC is required, the Investigator and/or Sponsor should take the following into consideration;

- The safety profile of the study drug;
- The size of the trial;
- Data review requirements;
- The potential for high morbidity or mortality during the trial;
- Vulnerable populations

5.1.3 The Investigator, or designee, will document the requirements of the committee in the protocol or in a DMC Charter.

5.1.4 The Investigator, or designee, will base the DMC Charter on template CR015-T01 (DMC Charter) unless otherwise agreed with the Sponsor Representative.

5.1.5 The requirements of the DMC and the data that will be reviewed, as detailed in the protocol or DMC Charter, should include details on the following;

- The communication plan between the research team, DMC, the Sponsor, the Investigators team(s) and the support departments involved e.g. pharmacy;
- What data will be reviewed by the DMC
- How unblinded data will be transferred to the DMC, and how reports from the DMC will be produced to safeguard the blind (if applicable);
- How often the DMC will meet (planned and triggered meetings);
- How decisions will be taken i.e. what activities should take place during closed sessions and what will be the voting process;
- How DMC recommendations are reported, approved and addressed in the required timeframe;
- Who is responsible for producing and circulating the DMC documentation during the trial and filing this information in the TMF.
- Any other requirements of the trial e.g. Phase I studies, dose escalation decisions (see section 5.3).

5.1.6 The Investigator will ensure that the Sponsor Representative is provided with the opportunity to review the DMC Charter prior to finalisation. This review may form part of the ACCORD Combined Risk Assessment procedure, if the documentation is available at this time(GS002 Combined Risk Assessment).

5.1.7 The DMC Charter will be prepared and authorised prior to Sponsor Authorisation To Open (SATO) (CM001 Site Initiation and Sponsor Authorisation).

5.1.8 The CI, or designee, will ensure that all members of the DMC have access to the DMC Charter prior to the first meeting. The DMC charter will be signed by members prior to Sponsors Authorisation to Open (SATO).

5.1.9 If an amendment to the DMC Charter is requested by DMC members, this will be reviewed and approved by the Sponsor Representative prior to signature by the Investigator and DMC members.

5.2 TSC Charter

5.2.1 The Investigator, or designee, will establish a TSC, if required, to provide overall supervision of the trial including adherence to the protocol, subject safety and considerations for new information e.g. recommendations made by the DMC.

5.2.2 The TSC may be inclusive of personnel directly involved in the trial and/or individuals who are independent of the trial to provide unbiased oversight.

5.2.3 When deciding if a TSC is required, the Investigator and/or Sponsor should take the following into consideration;

- Risks associated with the study drug;
- Any safety implications;
- The size of the trial;
- Complexity of the protocol.

5.2.4 The Investigator, or designee, will document the requirements of the committee in the protocol or in a TSC Charter.

5.2.5 The Investigator, or designee, will base the TSC Charter on template CR015-T01 (TSC Charter) unless otherwise agreed with the Sponsor Representative.

5.2.6 The requirements of the TSC, as detailed in the protocol or TSC Charter, should include details on the following;

- The members and core quorum of the TSC,
- The responsibilities of the TSC, including any key decisions it will have to make,
- How meetings and decisions will be formally documented and circulated, and by whom,
- Who is responsible for maintaining the TSC documentation during the trial, and as part of the TMF.

5.2.7 The Investigator will ensure that the Sponsor Representative is provided with the opportunity to review the TSC Charter prior to finalisation. This review may form part of the Combined Risk Assessment procedure, if the documentation is available at this time (GS002 Combined Risk Assessment).

5.2.8 The TSC Charter will be prepared and authorised prior to SATO (CM001 Site Initiation and Sponsor Authorisation).

5.2.9 The Investigator, or designee, will ensure that all members of the TSC have access to the TSC Charter prior to the first meeting. The TSC charter will be signed by members prior to Sponsors Authorisation to Open (SATO).

5.2.10 If an amendment to the TSC Charter is requested by TSC members, this will be reviewed and approved by the Sponsor Representative. prior to signature by the Investigator and TSC members

5.3 TSC Meetings

5.3.1 A TSC Sponsor Representative will be assigned for studies that have undergone risk assessment in accordance with SOP GS002 (Combined Risk Assessment), and other non-risk assessed studies where considered appropriate, at the monthly ACCORD Sponsorship meeting.

5.3.2 The assigned TSC Sponsor Representative will communicate directly with the research team regarding TSC meeting attendance, attend TSC meetings and communicate any study updates at the monthly ACCORD Sponsorship meeting.

5.3.3 The assigned TSC Sponsor Representative will file the TSC meeting agenda, minutes and associated documents in the appropriate TMF/Sponsor File.

6 References and Related Documents

- CR015-T01 Data Monitoring Committee Charter Template
- CR015-T02 Trial Steering Committee Charter Template
- GS002 Combined Risk Assessment
- CM001 Site Initiation and Sponsor Authorisation
- Health Research Authority EMA 'Guideline on Data Monitoring Committees'

7 Document History

Version Number	Effective Date	Reason for Change
1.0	14 FEB 2017	New SOP. DMC charter template (CR007-T10) moved from CR007 to CR015 and renamed (CR015-T01 v1.0).
2.0	15 APR 2019	Responsibility added for the CI to ensure DMC/TSC meetings are scheduled as per proposed timings. Clarification added that DMC/TSC charters must be signed prior to SATO being issued. Clarity added that amendments to the DMC or TSC charter must be reviewed by the CI and Sponsor prior to signing

		by members. Minor administrative changes made throughout to SOP and CR015-T01 and CR015-T02.
3.0	04 JAN 2023	Section 5.3.1 updated to clarify that TSC Sponsor Representatives may attend meetings for non-risk assessed studies, where considered appropriate.
4.0	13 FEB 2025	Change of author. SOP and associated documents transferred to new ACCORD template - CR015-T01 now v4.0 and CR015-T02 updated to v3.0

8 Approvals

Sign	Date
L. Mackenzie AUTHOR: Lorn Mackenzie, QA Manager, NHS Lothian, ACCORD	Jan 23, 2025
Heather Charles Heather Charles (Jan 23, 2025 15:32 GMT) APPROVED: Heather Charles, Head of Research Governance, NHS Lothian, ACCORD	Jan 23, 2025
Gavin Robertson (Jan 28, 2025 16:10 GMT) AUTHORISED: Gavin Robertson, QA Coordinator, NHS Lothian, ACCORD	Jan 28, 2025

CR015 DMC and TSC Charters v4.0

Final Audit Report 2025-01-28

Created:	2025-01-23 (Greenwich Mean Time)
By:	Roisin Ellis (v1relli8@exseed.ed.ac.uk)
Status:	Signed
Transaction ID:	CBJCHBCAABAAasWqXewqz3BlPZTNiRb-6FuYnWMaGVzz

"CR015 DMC and TSC Charters v4.0" History

Document created by Roisin Ellis (v1relli8@exseed.ed.ac.uk)
2025-01-23 - 3:24:21 PM GMT- IP address: 62.253.82.233

Document emailed to Gavin Robertson (gavin.robertson@nhslothian.scot.nhs.uk) for signature
2025-01-23 - 3:25:57 PM GMT

Document emailed to Lorn Mackenzie (lorn.mackenzie@nhslothian.scot.nhs.uk) for signature
2025-01-23 - 3:25:57 PM GMT

Document emailed to heather.charles@nhslothian.scot.nhs.uk for signature
2025-01-23 - 3:25:57 PM GMT

Email viewed by heather.charles@nhslothian.scot.nhs.uk
2025-01-23 - 3:32:14 PM GMT- IP address: 52.102.17.85

Signer heather.charles@nhslothian.scot.nhs.uk entered name at signing as Heather Charles
2025-01-23 - 3:32:34 PM GMT- IP address: 62.253.82.232

Document e-signed by Heather Charles (heather.charles@nhslothian.scot.nhs.uk)
Signature Date: 2025-01-23 - 3:32:36 PM GMT - Time Source: server- IP address: 62.253.82.232

Email viewed by Lorn Mackenzie (lorn.mackenzie@nhslothian.scot.nhs.uk)
2025-01-23 - 4:34:12 PM GMT- IP address: 52.102.18.21

Document e-signed by Lorn Mackenzie (lorn.mackenzie@nhslothian.scot.nhs.uk)
Signature Date: 2025-01-23 - 4:34:25 PM GMT - Time Source: server- IP address: 82.4.25.149

Email viewed by Gavin Robertson (gavin.robertson@nhslothian.scot.nhs.uk)
2025-01-28 - 12:35:43 PM GMT- IP address: 84.69.137.180

Document e-signed by Gavin Robertson (gavin.robertson@nhslothian.scot.nhs.uk)
Signature Date: 2025-01-28 - 4:10:27 PM GMT - Time Source: server- IP address: 62.253.82.231

Agreement completed.

2025-01-28 - 4:10:27 PM GMT

Adobe Acrobat Sign