ACTIVE AND PASSIVE MONITORING

SANBS
Registration No. 2000/026390/08

1. Purpose

1.1. The Human Research Ethics Committee (HREC) should have appropriate means of monitoring the research it approves. Researchers are expected to provide appropriate information to the HREC to facilitate monitoring. The frequency and type of monitoring, whether active or passive, will be determined by the extent of risk of harm to participants.

1.2. The HREC is mandated by the National Human Research Ethics Committee (NHREC) to perform both active and passive monitoring.

1.3. Passive monitoring is generally paper-based, using reports and other information. This is mandated for every research study given ethical approval.

1.4. Active monitoring requires a site visit. A site visit is expected for the investigation of adverse events, serious adverse events for high-risk research, as well as other occurrences that prompt concerns for HRECs.

2. References

2.1. Constitution of The Republic of South Africa No. 108 of 1996;

2.2. The National Health Act of Act 61 of 2003 and its regulations;

2.3. Protection of Personal Information Act 4 of 2013 and its regulations;

2.4. Material Transfer of Human Biological Materials (National Health Act, 2003 - Act No. 61 of 2003);

2.5. South African Ethics in health research: principles, processes and structures, third edition, 2024.

2.6. South African Good Clinical Practice: Clinical Trial Guidelines (SA DOH, 3ed 2020);

2.7. National Regulations Relating to Research with Human Participants R719 of 2014, Gazette No 38000, 19 September 2014, Vol 591 No 10268;

2.8. Regulations relating to the import and export of human tissue, blood, blood products, cultured cells, stem cells, embryos, foetal tissue, zygotes and gametes, R181 of 2012, Gazette No 35099, 2 March 2012;

2.9. Ethical principles for medical research involving human subjects: Declaration of Helsinki (WMA (World Medical Association), 2013);

2.10. Research on Health Databases, Big Data and Biobanks: Declaration of Taipei (WMA);

2.11. International Ethical Guidelines for Health-related Research Involving Humans, 2016, CIOMS (Council for International Organisations of Medical Science);

2.12. International Conference on Harmonisation Good Clinical Practice Guideline, (10 November 2016);

2.13. International Committee of Medical Journal Editors (ICMJE) guidelines for authorship (http://www.icmje.org/recommendations/browse/roles-and-responsibilities/defining-the-role-of-authors-and-contributors.html);

2.14. Other relevant legislation, company documents and policies.

3. Definitions

3.1. **Adverse Event (AE):**

3.1.1. Any negative or untoward occurrence that may present during the study intervention but which does not necessarily have a causal relationship with the research undertaken.

3.2. **Serious Adverse Events (SAE):** defined as any negative or untoward occurrence. It may:

3.2.1. Result in death.

3.2.2. Be life-threatening.

3.2.3. Require participant hospitalisation or prolongation of existing hospitalisation.

3.2.4. Result in persistent or significant disability/incapacity (social harm for displacement from the home).

3.2.5. Any other experience that suggests a significant hazard, contraindication, side-effect, or precaution that may require medical or surgical intervention to prevent one of the outcomes listed above.

3.2.6. In all instances, the researcher has to indicate whether the SAE is related or unrelated to the study.

3.3. **Deviation:**

3.3.1. Any alteration or modification to the approved research without prospective HREC Approval**.**

3.3.1.1. **Minor Deviation**: A minor or administrative deviation does not have the potential to negatively impact the rights, safety, or welfare of participants or others or the scientific validity of the study.

3.3.1.2. **Major Deviation**: A major deviation is one that does have the potential to negatively impact the rights, safety, or welfare of participants or others or the scientific validity of the study.

3.3.2. Protocol violations, are any unapproved changes, deviations or departures from the study design or procedures of a research project that are under the investigator's control and that have not been reviewed and approved by the HREC. The violation is wilful on the part of the investigator(s). It involves serious or continuing non-compliance with HREC and/or NHREC policies.

3.4. **Principle Investigator (PI):**

3.4.1. This is the main investigator for the study/project or research.

4. Passive Monitoring

Passive monitoring is largely paper-based and includes a review of:

4.1. An annual submission to the HREC of study progress documented in SOP-HREC- 003, refers to an annual monitoring form and request for renewal and recertification.

4.2. Reports of adverse events (AE).

4.3. Serious adverse events (SAE).

4.4. Protocol deviations and protocol violations.

4.5. The HREC approval will be extended for a period of 1 year following receipt of the annual report.

4.6. Failure to submit an annual progress report within 1 month of the due date, will result in the study being suspended until further notice.

5. Adverse Events

5.1. Reports on adverse events (AEs) and serious adverse events (SAEs) should be reported in writing to the HREC, the study sponsors, SANBSHSRC line management and any regulatory authority (where appropriate), within seven working days of the occurrence.

5.2. In all instances, the researcher has to indicate whether the SAE is related or unrelated to the study.

6. Protocol violations and protocol deviations

6.1. Protocol violations and deviations shall be reported in the same manner as adverse events.

7. Active Monitoring

7.1. When Active Monitoring should be performed:

7.1.1. High risk research.

7.1.2. When active monitoring of the protocol is indicated by the SANBS HREC.

7.1.3. When the Investigator does not submit the annual report.

7.1.4. When irregularities are detected when reviewing the annual progress report.

7.1.5. When irregular activity is suspected at the study site.

7.1.6. When there are many applications submitted by an individual PI.

7.1.7. When there are frequent protocol deviations and violations reported to the HREC.

7.1.8. When there are several SAEs without a plan of management.

7.2. Active monitoring will be performed through inspection of research sites and includes but is not limited to:

7.2.1. Monitoring of data and signed informed consent documentation.

7.2.2. Monitoring the informed consent process.

7.2.3. Inspection of the application of study selection criteria (exclusion and inclusion criteria).

7.2.4. Monitoring of recorded individual or focus group interviews.

7.2.5. Inspection of enrolment and researcher-participant engagement areas to ensure respect for privacy.

7.2.6. Inspection for compliance of researchers to SOPs and other approved procedures.

7.2.7. Inspection of participant records and the application of the data management plan.

7.3. The HREC should ensure that:
  7.3.1. Appropriate feedback is given to the PI.
  7.3.2. The PI be given an opportunity to address identified gaps.
  7.3.3. Recommend and adopt any additional types for monitoring, such as random inspection.

8. Suspension or termination of approval

8.1. The HREC may suspend or terminate approval of a study that is not being conducted in accordance with prevailing HREC or South African Department of Health ethical requirements and communicate this in writing to the PI and any other HREC where applicable.

8.2. The primary justification for suspension or termination of approval should be the safety of the participants.

8.3. Such suspension or termination of approval must be authorized by the HREC Chairperson in consultation with an HREC subcommittee and/or other co-opted parties as soon as possible, but not more than seven days after receipt of relevant information by the Chairperson.

8.4. Such discussions should be fully minuted.

8.5. Such action must be reported to the HREC at the next quarterly meeting and to the CEO of SANBS.

9. Investigator/PI

9.1. The PI must notify the HREC if a research study is prematurely suspended or terminated. A summary must be communicated regarding the reasons for the suspension or termination before the anticipated date of termination.

9.2. The PI must provide information as per the *Research Application* (CP-TRR-001), *Active Monitoring Form* (FRM-HREC-004), *Annual Progress Report/Renewal* (FRM-HREC-001),Human Research Ethics Committee Responses To Human Committee Comments (FRM-HREC-003) and *Research Ethics Committee Application For Ethics Approval Of Amendments* (FRM-HREC-002).

Revision Summary

VERSION NUMBER	REVISION DETAILS
0	• New document.