

STU-SOP-TS-005 – Standard Operating Procedure on Risk Assessment

1. Purpose

This Standard Operating Procedure (SOP) describes the procedure of evaluating the potential risks and hazards in STU adopted interventional research projects and to document how identified risks will be mitigated and managed to reduce their potential impact.

STU adopted projects which require a comprehensive risk assessment (RA) are Clinical Trials of Investigational Medicinal; Products (CTIMPs), regulated device projects and any other interventional research project which has been assessed by the sponsor as requiring a RA and this has been delegated to Swansea Trials Unit (STU).

This SOP will be used as guidance for any STU research projects completing a RA.

2. Background

The UK Policy Framework for Health and Social Care Research indicates the responsibility to manage risk and comply with proportionate Good Clinical Practice (GCP) for all research undertaken within its remit and covers both clinical and non-clinical research. A RA should be conducted at an early stage of project development so that any required modifications to mitigate risks are incorporated into the project.

All interventional research projects contain a level or risk. Identified risks should be continually assessed and managed at each stage of the research project to ensure the safety, rights and wellbeing of participants and research staff and the integrity and successful completion of the project.

3. Roles and Responsibilities

Sponsor has responsibility to facilitate and confirm acceptance of an appropriate RA, and for overseeing the project and ensuring ongoing review the RA. Some tasks may be delegated to the CI.

Swansea Trials Unit (STU) when assigned by CI or sponsor, are responsible for ensuring that sponsors responsibilities are met by coordinating the RA process for adopted interventional research projects.

Chief Investigator (CI) is responsible for undertaking the analysis of the risks required and to assess the mitigations and management of these required to reduce their potential impact.

Trial Manager (TM) or delegate is responsible for ensuring that the RA is completed and revisited during the life cycle of the project and for keeping a log of the revisions made.

External use of SOP: this SOP and Associated Documents (AD) may be used for research projects not adopted by STU where Swansea University (SU) staff and associated NHS organisations require guidance. In such instances, oversight responsibility for any associated tasks will not be the responsibility of STU.

4. Procedure

4.1 Initiation of the risk assessment

The Risk Assessment Decision Flowchart (Appendix 1) should be used by STU in conjunction with the CI to assess if a formal RA using the Risk Assessment Proforma (STU-AD-TMP-049) should be completed.

All interventional projects identified as low risk will complete an adapted process. Any adaptations will be considered and documented as part of the risk assessment.

4.2 Completing the risk assessment documentation

Following delegation, STU with the CI and TM (if appointed) will complete the RA Proforma (STU-AD-TMP-049) or an equivalent sponsor template during project development. Expertise will be sought from other parties as appropriate to their role in the research project e.g. Sponsor, R&D, pharmacy.

Project specific questions will be added to the RA proforma when appropriate. Consideration will be given to: Participant Risk; Project Risk; Organisational Risk; resources and finances. Interventional projects not considered to adequately address all of these considerations are unlikely to be adopted by STU.

The concerns associated with each risk should be assessed and compared to standard care or equivalent practices and categorised based on the likelihood of occurrence and the severity of the impact on participants and/or data collection. Decisions and mitigations to be implemented will be captured on the RA Proforma (STU-AD-TMP-049).

It is the CI's responsibility to ensure that the RA is finalised and signed prior to confirmation of project initiation by the sponsors.

The completed RA should guide the development of a monitoring plan, alongside oversight by the Trial Management Group, Trial Steering Committee and Data Monitoring Committee as applicable for the research project.

At each project amendment, the RA should be revisited by the TM to mitigate any change to project risk.

Signed final versions of the RA will be filed in the Trial Master File (TMF).

4.3 Clinical Trials of Investigational Medicinal Products (CTIMPs)

STU will review whether risk adaptations can be made to a CTIMP following guidance from the MHRA risk adapted approaches document.

Risk adaptation, categorises studies and the monitoring required based on the risk to participant safety in relation to the Investigational Medicinal Product as below:

- Type A – no higher than the risk of standard medical care (low intensity monitoring)
- Type B – somewhat higher than the risk of standard care (moderate intensity)
- Type C – markedly higher risk than the risk of standard medical care (high intensity).

Justification for the category assigned should be provided on the RA Proforma (STU-AD-TMP-049) which will be sent with the application to the regulatory body for a clinical trial authorisation.

Risk adaptations implemented in a CTIMP must be described in the final clinical trial report.

4.4 Site Risk Assessment

A RA will cover local issues at all sites via a roles and responsibilities section of the site contract. Local risks identified will be reviewed alongside the study-wide RA. Sites outside the UK may require input from a sponsor's legal team.

In all instances, the TM (or delegate) will facilitate this local RA, with the Principal Investigator (PI) and his research team. The completed contract should be signed by the local PI and filed in the Investigator Site File.

4.5 Continued Risk Assessment Review

The project RA should be reviewed at least annually from the date of sign off.

The RA should also be reviewed following:

- Substantial amendments made to the research project that change protocol procedures, benefits/risks to participants or update reference safety information;
- Deviations or violations of the protocol;
- Serious breaches of GCP;
- Significant changes to the monitoring plan or case report forms.

Where an amendment to the RA is required, this should follow the procedures in section 6 and be recorded on the project version control log (STU-AD-TMP-003). Should no update be required to the RA following review, this will be recorded in the amendment log section of the RA proforma (STU-AD-TMP-049).

The revised RA will supersede the previous version and will be filed in the TMF.

4.6 Sponsor overview of the risk assessment

Sponsor procedures will be followed for the review of all completed RA proformas (STU-AD-TMP-049). This will be coordinated by the TM.

All projects which retain medium or high likelihood risk scores following mitigations, will have a moderate or high intensity monitoring. A monitoring plan which is project specific and based on the RA will be completed.

There may be some instances, where no acceptable mitigations can be found. In such cases, the Sponsor must decide whether to continue as Sponsor or refuse sponsorship until such time as appropriate mitigations are put forward.

5. References

- Health Research Authority website (HRA) - <http://www.hra.nhs.uk/>
- Medicine and Healthcare products Regulatory Agency website (MHRA) - <https://www.gov.uk/government/organisations/medicines-and-healthcare-products-regulatory-agency/services-information>
- UK policy framework for health and social care research (2017) - <https://www.hra.nhs.uk/planning-and-improving-research/policies-standards-legislation/uk-policy-framework-health-social-care-research/>
- UK Medicine for Human Use (Clinical Trials) Regulations 2004 - <http://www.legislation.gov.uk/uksi/2004/1031/contents/made>
- MRC/DH/MHRA Joint Project Risk-adapted approaches to the management of Clinical Trials of Investigational Medicinal Products (CTIMPs) - https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/343677/Ri

[sk-adapted approaches to the management of clinical trials of investigational medicinal products.pdf](#)

It is assumed that by referencing the principal regulations that all subsequent amendments are included in this citation.

6. Associated Documents

Number	Title	Location
STU-AD-TMP-049	Risk Assessment Proforma	Q-Pulse

7. Abbreviations

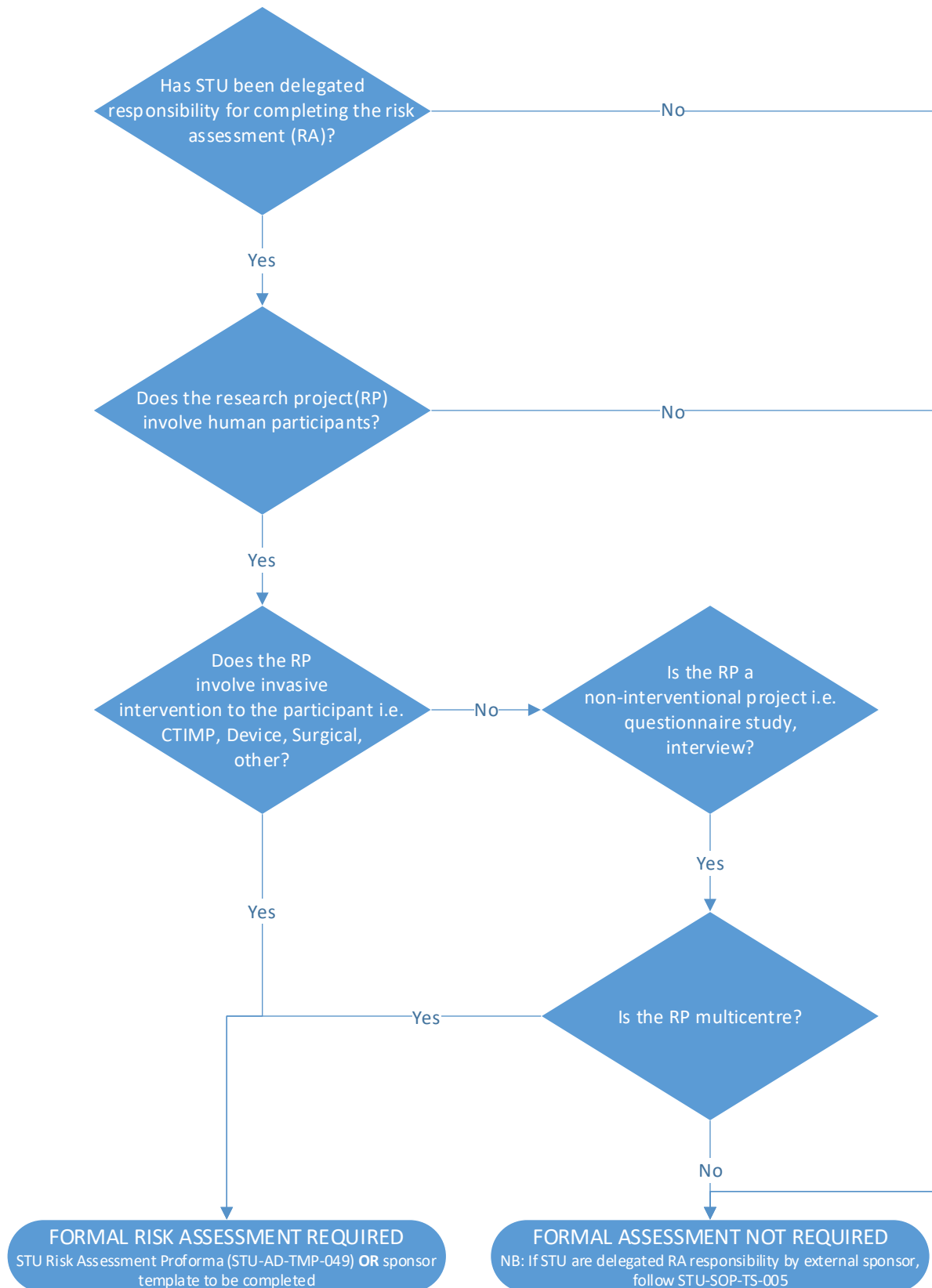
List of Abbreviations	
CI	Chief Investigator
CTIMP	Clinical Trial of an Investigational Medicinal Product
DH	Department of Health
GCP	Good Clinical Practice
MHRA	Medicines and Healthcare products Regulatory Agency
MRC	Medical Research Council
PI	Principal Investigator
RA	Risk Assessment

8. Appendices

Appendix 1: Document History

Version No:	3	Effective Date:	26-Mar-2024
Description of changes:	Applied to SOP template v5		

Appendix 2: Risk Assessment Decision Flowchart



Appendix 3: Risk Assessment Flowchart

