

**Decentralised Clinical Trial
Supervision Plan**
Satellite Sites Management for Protocol NUMBER XXXX
TRIAL TITLE
XXXXXX

This Supervision Plan applies to:	
Primary Site	
Satellite Site	

Background

This document details the supervision plan to enable recruitment of participants to a clinical trial using the Decentralised Clinical Trial (DCT) model at satellite sites (SS).

The supervision plan may change over time as the SS becomes experienced with clinical trial activities. These changes are agreed upon by the Primary Site (PS) and SS and will be documented in Appendix B. Re-submission of the Supervision Plan to the local research governance organisations is at the discretion of the Principal Investigator (PI).

Under the DCT Model, in New Zealand, the Co-ordinating Investigator (CI) is the health professional, who is the Investigator at one of the Primary sites, who is assigned the responsibility for the conduct of the study, and coordination of Investigators at different sites participating in a multicentre trial under the International Committee on Harmonization of Good Clinical Practice (ICH GCP) guidelines. (MEDSAFE uses the term Principal Investigator for the CI role). The Principal Investigator is the Investigator responsible for the conduct, management, monitoring, and reporting of a trial at their own site.

Complementary documents and processes

This supervision plan is complementary to:

- the feasibility assessment
- the site selection process
- site initiation
- the protocol
- the delegation log
- standard processes according to ICH-GCP
- the NZ national teletrial guidelines and SOPs at PS and SS

Cluster

Cluster refers to the group of sites involved in undertaking the clinical trial including the primary site (PS) who assumes overall responsibility for the conduct of the clinical trial and one or more SS, which conduct the trial under the direction of the PS using the DCT Model.

The PS and SS for this supervision plan are:

1. The Primary site:
2. Satellite sites:

General guidance for completing supervision plan

All sections of the supervision must be completed or marked as 'not applicable'. The column labeled 'insert plan and trial logistics' should detail the specific information for each item, including the parties responsible and the level of support being provided to the SS.

Document History

Date	Activity	Responsible parties (Primary Site and Sponsor or CRO)
XX/XX/20XX	Initial Document	PS

Responsibilities Matrix

CLINICAL TRIAL ACTIVITY	RESPONSIBLE PARTY – INSERT INITIALS OF STAFF (As per Appendix A)		INSERT PLAN AND TRIAL LOGISTICS	
	PRIMARY SITE	SATELLITE SITE		
Communication				
Coordination of regular meetings to discuss participant care and trial progress				
<p><i>Guidance: to be deleted from final document</i> Responsibility usually resides with PS. The frequency and duration of meetings will depend on the complexity of the trial, and accrual of participants. The required PS and SS at these meetings should be defined and documented. The following agenda items should be considered and documented in the column 'insert plan and trial logistics': Trial status, Site status, Participant status at SS, Study updates</p>				
Coordination of sponsor visits to SS				
<p><i>Guidance: to be deleted from final document</i> Consider detailing the following information as appropriate. If the sponsor or CRO will monitor or visit the SS, they can liaise directly with the SS. The PS should be aware of all planned visits prior to them occurring, and may wish to be present via telehealth.</p>				
Training				
Ensure all staff at PS and SS are appropriately trained.				
<p><i>Guidance: to be deleted from final document</i> Consider detailing the following information as appropriate. Responsibility of ensuring SS are trained in appropriate aspects of: The trial and protocol, ICH-GCP, SOPs, Amendments. Responsibility of ensuring delegation logs are up to date and accurate.</p>				

CLINICAL TRIAL ACTIVITY	RESPONSIBLE PARTY – INSERT INITIALS OF STAFF (As per Appendix A)		INSERT PLAN AND TRIAL LOGISTICS	
	PRIMARY SITE	SATELLITE SITE		
Funds Management				
Management of payments to SS				
<p><i>Guidance: to be deleted from final document</i></p> <p><i>The process for agreed funding will vary between sites. The funding agreement between the PS and SS will be outlined in the tele-trials subcontract and over-all sign-off will be agreed upon by the authorised representative at both PS and SS and is separate to this supervision plan.</i></p> <p><i>Consider detailing who will manage the payment process at both PS and SS, and other details as appropriate.</i></p>				
Research governance at SS - initial application and amendments				
Completion of local Site-Specific Application (SSA) form				
Creation of site-specific documentation				
Obtaining local site Head of Dept. sign offs as required by region				
Obtaining local research office sign offs as required by region				
Obtaining local Māori research review as required by region				
Amendment management				
Research governance at SS – start up				
Satellite site start up – General				
Satellite site start up – Pharmacy				
Satellite site start up – Pathology				
Satellite site start up – Medical Imaging				
Satellite site start up – Laboratory				

CLINICAL TRIAL ACTIVITY	RESPONSIBLE PARTY – INSERT INITIALS OF STAFF (As per Appendix A)		INSERT PLAN AND TRIAL LOGISTICS
	PRIMARY SITE	SATELLITE SITE	
Research governance at SS – start up-continued			
Provision of other trial related equipment			
Other third party provider / supplier			
Investigational Product (IP) for Satellite Site			
Ordering of IP Identify what triggers both initial and resupply shipment of IP, by whom and when.			
Transport and Delivery of IP Identify who is responsible for the delivery of IP			
Receipt of IP Record whether SS receive IP directly from sponsor or PS. IP is stored as per Trial requirements at the SS.			
Ordering of IP Identify what triggers both initial and resupply shipment of IP, by whom and when.			
Dispensing of IP Identify who dispenses IP			
Return and Reconciliation of IP Identify who reconciles IP			
Screening of Potentially Eligible Participants at Satellite Site			
Screening (Inclusion / exclusion criteria)			

CLINICAL TRIAL ACTIVITY	RESPONSIBLE PARTY – INSERT INITIALS OF STAFF (As per Appendix A)		INSERT PLAN AND TRIAL LOGISTICS
	PRIMARY SITE	SATELLITE SITE	
Consent and Randomisation of Participants at SS			
Consent Identify if consent will occur at SS or remotely via telehealth with PS and with what supports			
Reconsent			
Documentation of consent and recruitment process in medical records			
Randomisation			
Data / eCRF management for Participants at SS			
Storage and management of source documents			
Managing data entry (not eCRF)			
Managing eCRF entry			
Storage of site documents at SS			
Participant Trial Involvement at SS			
Scheduling of next visit			
Notification of participant of next visit			
Scheduling of trial tests / procedures			
Booking of trial tests / procedures with relevant department(s)			
Notification of participant of trial tests			

CLINICAL TRIAL ACTIVITY	RESPONSIBLE PARTY – INSERT INITIALS OF STAFF (As per Appendix A)		INSERT PLAN AND TRIAL LOGISTICS
	PRIMARY SITE	SATELLITE SITE	
Participant Trial Involvement at SS -continued			
Management of trial visit(s) requirements e.g., physical exam, tests etc. Need for telehealth technology visits will be documented			
Trial consultation and assessments			
Clinical Care Decisions			
Trial Related Treatment Decisions and Management of Hospitalised Participants at SS (e.g., determination of progression, treatment discontinuation, consideration of additional investigations and out of hours management)			
Emergency Unblinding procedures			
Staff Cover at SS			
Arrangement of back up staff for SS, as required			
Safety Reporting and Safety Management at SS			
Reporting of safety events to sponsor and CI			
Reporting of protocol deviations and violations to sponsor and CI			

CLINICAL TRIAL ACTIVITY	RESPONSIBLE PARTY – INSERT INITIALS OF STAFF (As per Appendix A)		INSERT PLAN AND TRIAL LOGISTICS
	PRIMARY SITE	SATELLITE SITE	
Safety Reporting and Safety Management at SS -continued			
Reporting of safety events, including protocol deviations/violations, to SS Research Governance Group			
Reporting of safety events, including protocol deviations/violations, to HDEC			
Management of protocol violations, and other serious concerns at SS			
Satellite site close out			
SS close out			
SS close out – Pharmacy			
SS close out – Pathology			
SS close out – Medical imaging			
SS archiving			

Appendix A –Trial Staff

Example: Supplying Pharmacy End-to-End Process

(To be used in conjunction with delegation log)

Title	First name	Surname	Role in Trial	Initials	Comments

Appendix B - Log of Changes to Supervision Plan Post Submission to Research Governance Office

CHANGE TO CLINICAL TRIAL ACTIVITY	PS RESPONSIBLE INSERT INITIALS OF STAFF	NEW PLAN AND TRIAL LOGISTICS	COMMENTS
<p><i>Example:</i> Recruitment and consenting Pre-Screening for eligibility will be undertaken jointly by the PS and the satellite site.</p>		Pre-Screening for eligibility will be undertaken by satellite site.	Satellite site now familiar with pre-screening and will undertake the activity unsupervised

CLINICAL TRIAL ACTIVITY	CHANGE TO RESPONSIBLE PARTY – INSERT INITIALS OF STAFF (AS PER APPENDIX A)		CHANGE TO PLAN AND TRIAL LOGISTICS	COMMENTS
	PRIMARY SITE (PS)	SATELLITE SITE		

Signatures to the Agreement of the Supervision Plan:

Primary site Principal Investigator PI signature:

Primary site Clinical Research Coordinator CRC signature:

Satellite Site Sub I:

Satellite site Clinical Research Coordinator CRC or Nurse signature:

Additional Signatures if required:

Primary Site Pharmacist:

Satellite Site Pharmacist: