

**Health and Disability Ethics Committee “COVID-19 Emergency Response: Ethical Review Operating Procedures (eSOP)**

**Version 4.0**

**17 May 2022**

**Introduction**

Knowledge generated through high-quality research in the anticipation of, during, and after an outbreak is critical to help prevent ongoing outbreak of illnesses, exacerbation of disability and death, and to support the recovery process, including that of the New Zealand health system[[1]](#footnote-2).

The purpose of this eSOP is to ensure that there are practical and effective actions put in place to ensure that a robust but rapid research ethics review is undertaken. Given the public health emergency, this guidance is being implemented without prior public comment because the Health and Disability Ethics Committees (HDECs) have determined that prior public participation for this guidance is not feasible or appropriate.

Only new ethics research applications that have a COVID-19 research element and meet the scope of HDEC review (Section 3 Of the HDEC SOPs), and the scope as defined within this document will be covered by this emergency SOP. All other research applications will continue to be reviewed under the HDEC SOP.

While COVID-19 is a public health emergency, the ethical principles and values that are at the centre of New Zealand’s health and disability ethical review processes must continue to be upheld. The HDEC acknowledges that in the DHB context, human resources may need to be regularly assessed, with research staff being pulled into essential clinical practice. This may mean that certain monitoring and reporting duties and quality assurance activities related to clinical trials may also need to be reassessed.

This eSOP must be read in conjunction with the relevant statutes, legislation and standards listed in the Standard Operating Procedures for Health and Disability Ethics Committees (HDEC SOPs version 3.0, December 2019) and the National Advisory Ethics Committee “Getting Through Together: Ethical values for a pandemic” (July 2007)[[2]](#footnote-3).

**General Disclaimer: COVID-19 is rapidly evolving both internationally and within New Zealand. This eSOP may be updated. Users of the eSOP should pay attention to the version number on the front page of this document and check the HDEC web page for updates.**

**Activation and Duration of the eSOP**

1. The Manager of the Ministry of Health (the Ministry) Ethics Team in conjunction with the HDEC will be responsible for activating and deactivating this eSOP.
2. This eSOP will remain active from the date of its approval until the date of deactivation. The date of deactivation of the eSOP will be communicated to the HDEC by the Manager. These dates will be made available on the HDEC website at <https://ethics.health.govt.nz/>
3. All studies related to COVID-19 that fit the scope of this eSOP will be assigned to the Northern B (NTB) HDEC for ongoing monitoring post-approval.
4. Unless otherwise stated in the eSOP, **all** provisions of the HDEC SOP remain in force.
5. To be easily identified, “COVID-19” should be in the study title and researchers are required to email the Secretariat at the same time as submission.
6. The Secretariat will keep a spreadsheet of applications and substantial amendments reviewed under the eSOP for reporting purposes.

**Scope of Review and Timeframes**

1. Only new ethics research applications that have a COVID-19 research element and meet the scope of HDEC review (Section 3 Of the HDEC SOPs) and the scope of this eSOP will be covered by this eSOP. This does not include amendments made to comply with government requirements or otherwise mitigate risk for studies that are not seeking to answer a COVID-19 related research questions, in these circumstance that usual HDEC SOPs will apply.
2. The scope of studies to be reviewed under this eSOP must relate to the treatment or transmission in the event of COVID-19 outbreak in New Zealand, clinical trials of vaccine candidates in New Zealand, safety/roll-out issues in the Government-approved vaccine(s), or other monitoring of COVID-19 to help improve the health and safety of New Zealand.
3. Amendments or other post-approval submissions to studies reviewed under the eSOP Emergency Review Pathway are to be reviewed in accordance with Section 12 of the HDEC SOPs.
4. If the amendment is urgent, please contact the Secretariat with a justification to ask that they prioritise it.
5. Application requirements and Secretariat validation of new applications will be in accordance with Section 4 of the HDEC SOPs, with the exception of the 15 or 35-day review clock.
6. Upon submission, researchers must email the Secretariat with justification of how their study fits the scope of this eSOP to request eSOP review.

 **The Emergency Review Pathway**

1. All applications must receive an initial decision within 5 working days from validation. Any responses to provisional approvals or declines must also be provided within 5 working days.
2. Meetings will be established electronically, using a COVID-19 specific sub-committee under the NTB HDEC.
3. The emergency review pathway involves members of the HDEC reviewing a new COVID-19 application.

Transparency

1. The Secretariat will prioritise assigning COVID-19 applications to the emergency review committee over business-as-usual HDEC work. The HDEC will be requested to prioritise the review of items assigned to the emergency review committee, however this committee is additional to standard HDEC meetings to reduce the impact on existing HDEC submissions.

Quorum

1. The quorum for any HDEC meeting is five members (including the chair). At least two members must be lay members and at least two non-lay members.
2. In the event that an application has a quorate and consensus decision in the electronic meeting prior to a scheduled teleconference meeting, the Secretariat may action that decision to the applicant without the teleconference.
3. The NTB Chair will be the default Chair. In the absence of the NTB Chair another HDEC Chair will appointed to assume the role.

Application Submission/Meeting Process

1. Submissions must use the Ethics Review Manager.
2. All applications will be reviewed by HDEC members online. Appointed members may wish to meet via teleconference to discuss the application. Such meetings will occur at an agreed time as required. Each member should enter a summary of their notes in the electronic meeting **before** the meeting.
3. The Chair will notify the Secretariat which applications need to be discussed at a teleconference meeting as soon as possible.
4. At the time of validation, the researcher will be notified that the application is under eSOP review. In some cases, where the HDEC needs to discuss ethical issues with the researcher directly, the Secretariat will notify the researcher of a time and date for the review of their application via teleconference.
5. The discussion during the meeting must balance the time pressures relating to emergency research with the application of NEAC Standards.
6. Minutes will be taken for each application and recorded online. In the event that a meeting does not take place, comments from the reviewers will be recorded online. The content of the minutes will be as per paragraph 95 for the HDEC SOPs.
7. Minutes from the meeting will be uploaded to the HDEC website every two months.

Decisions Open to the HDEC under the eSOP

1. The HDEC should communicate a final decision within five business days of an application being received. In the event that this is not communicated within this time frame the researcher should contact the Secretariat.
2. The decisions open to the HDEC must be made in accordance with Section 7 of the HDEC SOPs
3. When a provisional approval decision is made the researcher will have up to 90 days to submit their response. However, the researcher will need to email the Secretariat a indicate that their response has been submitted in order to ensure it is reviewed in a timely matter.

**COVID-19 Impact Amendments to Approved Studies**

1. The following applies to any studies which require amendment due to impacts caused by COVID-19.
2. All amendments to studies are reviewed by their assigned HDEC and not the COVID-19 specific subcommittee.

Guidance for Amendments to Existing Approved Studies Impacted by Wider COVID -19 Response[[3]](#footnote-4)

1. Ensuring the safety of trial participants and study staff is paramount. Co-ordinating Investigators should consider each circumstance, focusing on the potential impact on the safety of trial participants and staff, and modify study conduct accordingly.
2. Study decisions may include those regarding continuing trial recruitment, continuing use of the investigational product for patients already participating in the trial, and the need to change participant monitoring during the trial. In all cases, it is critical that trial participants are kept informed of changes to the study and monitoring plans that could impact them.
3. It may be the case that a participant’s safety, welfare, and rights are best served by continuing their participation in the trial as per the protocol or by discontinuing the administration or use of the investigational product or even their participation in the trial. Such decisions will depend on specific circumstances, including the nature of the investigational product, the ability to conduct appropriate safety monitoring, the potential impact on the investigational product supply chain, and the nature of the disease under study in the trial.
4. Since trial participants may not be able to come to the investigational site for protocol-specified visits, sponsors, researchers, and sites should evaluate whether alternative methods for safety assessments (e.g. phone contact, virtual visit, alternative location for assessment, including local labs, imaging centres) could be implemented when necessary and feasible, and would be sufficient to ensure the safety of trial participants.
5. Co-ordinating Investigators should determine if in-person visits are necessary to fully assure the safety of trial participants (for example, to carry out procedures necessary to assess safety or to ensure the safe use of the investigational product) and should follow hospital policy in doing so. In making the decision to continue the use or administration of the investigational product, the sponsor should consider whether the safety of trial participants can be assured with the implementation of the altered monitoring approach.
6. In some cases, trial participants who no longer have access to the investigational product or the investigational site may need additional safety monitoring (e.g. withdrawal of an active investigational treatment).
7. The need to put new processes in place or to modify existing processes will vary by the protocol and local situation. For example, this assessment could include consideration of whether it is appropriate to delay some assessments for ongoing trials, or, if the study cannot be properly conducted under the existing protocol, whether to stop ongoing recruitment, or even withdraw trial participants.
8. It is not in accordance with the NEAC Standards to amend inclusion/exclusion criteria of a study to exclude potential participants due to their COVID-19 vaccination status unless there is a scientific reason to exclude them.

Amendment Requirements and Process

1. Substantial study amendments are typically not implemented before review and approval by the HDEC. Co-ordinating Investigators are encouraged to engage with the HDEC as early as possible when urgent or emergent changes to the protocol or informed consent are anticipated as a result of COVID-19.
2. Such changes to the protocol or investigational plan to minimise or eliminate immediate hazards or to protect the life and well-being of research participants (e.g. to limit exposure to COVID-19) may be implemented without HDEC approval or before filing an amendment to the HDEC but are required to be reported afterwards as protocol deviations or violations.
3. The HDEC encourages sponsors and Co-ordinating Investigators to establish procedures to prioritize the reporting of deviations that may impact the safety of trial participants
4. The implementation of alternative processes should be consistent with the protocol to the greatest extent possible, and sponsors and Co-ordinating Investigators should document the reason for any contingency measures implemented.
5. Sponsors, researchers, and sites should document how restrictions related to COVID-19 led to the changes in study conduct and the duration of those changes and indicate which trial participants were impacted and how those trial participants were impacted.
6. If researchers have submitted and received approval for an amendment of protocol under Level Three or Four of the (and have since reverted back to the pre COVID-19 approved protocol in Level One or Two) you are not required to submit an amendment again if the National COVID-19 alert level increases. Instead the HDEC asks that this this be communicated to the HDEC in the next annual progress report.

Reporting Requirements for Substantial Changes

1. Current studies requiring a substantial amendment due to COVID-19 in accordance with Section 11 of the HDEC SOPs will not be expedited under the Emergency meeting pathway.
2. A risk-based approach must be used to determine whether a change is so significant that it requires ethics review prior to implementation. This is likely to apply to prepared changes to studies that will add a COVID-19 element to their conduct.
3. If the research team fails to submit a substantial amendment prior to implementation this will be treated as a substantial protocol deviation or violation and will require submission as soon as practicable.
4. It may be appropriate for some deviations to the study protocols to occur without prior notification to the HDEC. Where they are required for urgent safety measures, they must be reported to the HDEC as soon as practicable but must be reported within a month of the deviation. However, where the deviations are due to government requirements and do not significantly impact on participant safety (such as verbal/electronic consent, remote check-ups etc, these can be reported as a summary as part of the annual progress report process.

Reporting Requirements for Non-substantial Changes

1. Notification to the HDEC is not required for non-substantial amendments as defined in Section 11 of the HDEC SOPs. All cases of minor changes must be reported to the HDEC in the next annual progress report.

**When the eSOPs are Active**

1. The eSOP remains active to prioritise COVID related research until the Manager of Ethics discontinues it.

**COVID-19 Protection Framework (traffic lights)**

1. Approved HDEC studies must follow the guidance and rules of the COVID-19 Protection Framework.
2. If a study requires amendments to meet the rules of the COVID-19 Protection Framework see *Guidance for Amendments to Existing Approved Studies Impacted by Wider COVID -19 Response[[4]](#footnote-5)*
3. The HDEC acknowledge that the vaccine passport requirements of institutions may create barriers to access to HDEC approved studies. The institutional requirements of localities conducting health and disability research should not be used to change the inclusion and exclusion criteria for studies.
1. Saxena, A., Horby, P., Amuasi, J., Aagaard, N., Kohler, J., Gooshki, E., Denis, E., Reos. A.. The ALERRT-WHO Workshop and Ravinetton, R (2019). Ethics Preparedness: Facilitating ethics review during outbreaks- recommendations from an expert panel. *BMC Medical Ethics*. 20:29. [↑](#footnote-ref-2)
2. NEAC (2007) <https://neac.health.govt.nz/publications-and-resources/neac-publications/getting-through-together-ethical-values-pandemic> [↑](#footnote-ref-3)
3. Adapted from FDA Guidance on Conduct of Clinical Trials of Medical Products during COVID-19 Pandemic 2020 [↑](#footnote-ref-4)
4. Adapted from FDA Guidance on Conduct of Clinical Trials of Medical Products during COVID-19 Pandemic 2020 [↑](#footnote-ref-5)