

Defining best practice in Quality Management

“Overview of Quality systems”

MRC conference

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Clinical Lab Accreditation Schemes

- **Accreditation schemes have been the dominant influence in clinical laboratories**
- **Most labs are CPA-accredited if they were doing chemical pathology in the UK, CPA is co-owned by the Royal College of Pathologists (RCPATH), the Institute of Healthcare Management (IHM), the Institute of Biomedical Science (IBMS), the Association of Clinical Pathologists (ACP), the Association of Clinical Biochemists (ACB) and a representative organisation for the Independent Sector**
- **CAP if they were providing central laboratory services or based in the USA or ISO 17025 if they were performing laboratory tests.**

**Distinguish between accreditation of
technical ability to perform tests**

**And the quality management elements of
GCP and GCLP.**

Clinical Laboratories

- **Quality Standards in this area are associated with compliance with Good Clinical Practice (GCP), and Good Clinical Laboratory Practice (GCLP)**

What is Good Clinical Practice & how does it apply?

- **It is a ethical & scientific standard.**
 - **Safeguarding the Rights, Integrity, Safety, Wellbeing and Confidentiality of study subjects**
 - **Ensuring the Integrity, Accuracy, Credibility & Quality of data.**

International Conference On Harmonisation(ICH)

Good Clinical Practice (GCP)

- “A standard for the design, conduct, performance, monitoring, auditing, recording, analyses, and reporting of clinical trials that provides assurance that the data and reported results are credible and accurate, and that the rights, integrity, and confidentiality of trial subjects are protected.”
- **Although a standard for clinical studies, the principles can be applied to any analysis of human samples.**

ICH E6 GCP specifically regarding labs

2.13 Systems with procedures that assure the quality of every aspect of the trial should be implemented.

Section 8 Essential Documents parts 8.2.12 and 8.3.7 – “To document competence of facilities to perform required tests and support reliability of results”

Good Clinical Laboratory Practice (GCLP)

Where did it come from?

In 2003 the British Association for Research Quality Assurance published its “Good Clinical Laboratory Practice (GCLP); A Quality System for Laboratories which undertake the Analyses of Samples from Clinical Trials” (**BARQA**)¹, 2003 ISBN 1-904610-00-5.

This has now been adopted by the WHO.

In July 2009 the **MHRA** published its guidance on “**GCP Guidance laboratories that perform the analysis or evaluation of clinical trial samples.**”

The **EMA** GCP Inspectors workgroup are proposing to issue their paper on GCLP soon.

MHRA

GOOD CLINICAL PRACTICE Guidance on the maintenance of regulatory compliance in laboratories that perform the analysis or evaluation of clinical trial samples.

July 2009 Issue 1.

“ . It ... provide information on the **expectations of the MHRA’s inspectors who may be assigned to inspect facilities** that perform work in support of human clinical trials.”

What are the particular GCP aspects (in brief)?

- **Consent**
- **Confidentiality**
- **Reporting Serious Breaches of GCP**
- **Reporting Urgent Safety Measures**
- **Training**
- **Documenting chain of custody**
- **SOPs**
- **Maintaining blind (if applicable)**
- **Computer systems**
- **Retaining data/documentation**
- **Quality Assurance**

Informed Consent

Section 4.9 (Informed Consent)

“... all laboratory personnel that perform work in support of clinical trials must exercise due diligence to ensure that the work they have been contracted to conduct is covered by the consent given by the trial subjects. Mechanisms implemented to address this concern may include a review of the approved clinical protocol, or a documented dialogue with the sponsor to confirm that the consent process covers the work that will be undertaken by the laboratory. It may also be appropriate to include a clause in the contractual agreement between the sponsor and the laboratory which stipulates the need for informed consent to cover any laboratory analysis or evaluation.”

Informed Consent Cont.

“There should be a mechanism to ensure that the laboratory is informed in a timely manner if consent is withdrawn to ensure that no further data is generated or collected. While the responsibility for providing this information primarily resides with the sponsor, the clinical laboratory must exercise due diligence. It is therefore recommended that these factors be considered and documented in the contractual agreement or other relevant documentation prior to the initiation of any analytical work.”

“It is critical that the work instruction only includes work that is covered by the informed consent given by the trial subjects”.

Section 4.10 (Sample Receipt & Chain of Custody)

“If samples are poorly labelled, missing or if unexpected samples are received, the study sponsor or their representative should be contacted in order to investigate and resolve the issues. **It is imperative that samples are not analysed until their identity is confirmed. Policies for dealing with missing, unexpected or poorly labelled samples should be documented.**”

“On arrival, or prior to processing, each sample should be examined to ensure that its label does not display information which may identify the trial subject. **If information is recorded on the label which may compromise the trial subject’s right to privacy, it should be masked or deleted.** Care should be taken not to obliterate other information which may be needed to identify the sample during analysis or evaluation.”



Section 4.10 (Sample Receipt & Chain of Custody)

“It would not be appropriate to permanently delete information on a label if there was no other way of identifying the sample. In such cases, the trial subject’s personal details should be masked and a unique identifier assigned to the sample by the laboratory. The sponsor or their representative should be notified of all instances of inappropriate labelling of clinical trial samples as soon as is practically possible.”

Confidentiality Cont.

Section 4.5 (Study Conduct)

“Where there is potential for a deviation to impact on the integrity or reliability of the trial data, patient confidentiality, patient consent or patient safety, appropriate procedures should be implemented to ensure the issue is reported to the study sponsor or their representative immediately.”

Page 8, Section 4.1 (Organisation)

“If any serious breaches of GCP are identified, they must be reported to the sponsor or their representative immediately. In some circumstances it may be necessary for laboratory personnel to report serious breaches directly to the MHRA. The laboratory should maintain a documented procedure to describe the actions that would be taken in the event of a serious breach.”

Page 9, Section 4.3. (Serious Breaches)

“It is the responsibility of the sponsor of a clinical trial to notify the licensing authority in writing of any serious breach of the conditions and principles of GCP or of the clinical protocol. If the laboratory becomes aware of circumstances that may potentially constitute a breach, the relevant information must be communicated to the sponsor or, if appropriate, directly to the MHRA. For example, in cases where fraudulent activity is suspected. An effective mechanism should be established to ensure the reporting of incidents that may constitute a “serious breach” is performed in a timely manner.”



Page 11, Section 4.5 (Study Conduct)

“Appropriate procedures should be implemented to ensure effective and timely communication with the sponsor or their representative, regarding any serious deviations from the work instruction, clinical protocol or contract/agreement. Timely reporting will ensure that the sponsor or their representative are able to determine the significance and impact of the deviation on the safety and well being of the trial subjects and on the integrity and reliability of the trial data. Additionally, it will also allow them to determine if the deviation constitutes a serious breach as described in the Clinical Trials Regulations.”