UCSF Helen Diller Family Comprehensive Cancer Center

University of California, San Francisco
Helen Diller Family Comprehensive Cancer Center

Policy for Single and Multi-Patient Expanded Access Treatment

Policy outlining FDA and UCSF IRB requirements for single and multi-patient expanded access therapy using investigational medical products to treat oncology patients.

Table of Contents

Purpose

The purpose of this Helen Diller Family Comprehensive Cancer Center (HDFCCC) policy is to outline all requirements, per the Food and Drug Administration (FDA) and the University of California, San Francisco (UCSF) Institutional Review Board (IRB), for single and multi-patient expanded access therapy using investigational medical products (IP) to treat oncology patients.

Scope

This policy applies to single and multi-patient expanded access treatments that do not involve research and/or publication/presentation aims. Expanded access protocols that contain scientific aims with research endpoints, statistical analysis plans, sample size calculations, and/or data collection with the goal of presentation/publication do not meet the requirements for this policy and must proceed through the HDFCCC and UCSF research study activation pipeline. The Expanded Access Policy does not apply to protocols with these characteristics. Multi-patient expanded access protocols providing IP to a mixture of oncology and non-oncology patients may or may not be deemed oncologic; see Alternate Procedure below.

Definitions

Expanded Access (sometimes referred to as '*compassionate use'*): A potential pathway for a patient with an immediately life-threatening condition, or serious disease or condition, to gain access to IP outside of a clinical research study when no comparable or satisfactory alternative therapy options are available. Expanded access may be appropriate when all of the following apply:

- Patient has a serious disease or condition, or whose life is immediately threatened by their disease or condition.
- There is no comparable or satisfactory alternative therapy to diagnose, monitor or treat the disease or condition.
- Patient enrollment in a clinical research study is not possible.
- Potential patient benefit justifies the potential risks of treatment.
- Providing the investigational medical product will not interfere with investigational studies that could support a medical product's development or marketing approval for the treatment indication.

Investigational Medical Product (IP): Medical products such as drugs, biologics, or medical devices that have not been approved by the FDA or have been approved yet are used or assembled differently from the approved form or indication(s).

Emergency Use: a subset of expanded access and applies when a patient requires expanded access treatment due to a life-threatening situation and in which there is not sufficient time to obtain IRB approval.

Background

The HDFCCC centrally monitors and approves all requests for expanded access treatments for oncology patients. Expanded access provides patient access to investigational treatments for those most in need. Expanded access can only occur if the manufacturer agrees to provide the IP for expanded access use and the FDA cannot require that a manufacturer do so. Though the FDA is known to approve the majority of expanded access requests, the preferred method of providing IP is through a clinical research study and the FDA can require that a clinical research study be implemented if multiple similar expanded access requests are made.

Procedures

The procedures described below are performed to ensure regulatory compliance, timely activation, and resource management for expanded access protocols at the HDFCCC.

1.0 HDFCCC Requirements

a) Site Committee Chair Approval

Providers must obtain Site Committee Chair approval before providing single or multi-patient expanded access treatment. Site Committee Chair approval is issued via the Site Committee Expanded Access Approval Form; completed by the provider and signed by Site Committee Chair or Co-Chair.

All providers must email the signed form to the HDFCCC Clinical Research Support Office (CRSO) Director before moving forward with the proposed treatment.

b) CRSO Approval

For programs with CRSO oversight, the CRSO Director or designee must approve the completed Site Committee Expanded Access Approval Form before moving forward with patient treatment. HDFCCC fees will be applied based on who initiated the expanded access request (treating provider or an industry sponsor).

c) Investigational Drug Services (IDS) Fee and Approval

For programs that require IDS support, a fee based on the current department fee schedule is required prior to work being initiated by IDS. Upon approval of the Site Committee Expanded Access Approval Form, IDS should be consulted to confirm the fee for services. https://ids.ucsf.edu/fees

d) Multi-patient Expanded Access Adjudication

The Deputy Director, along with the CRSO Medical Director, will assess the suitability of any multi-patient expanded access treatment. If the expanded access criteria are not met, providers may be asked to develop a clinical research study protocol as a pathway for treatment of multi-patient proposal (See Scope).

The CRSO Director will coordinate the adjudication and communicate the decision to the provider.

e) Industry Partner Approval

The provider must confirm agreement with any applicable industry partner(s) to use the IP in an expanded access setting. The industry partner will connect with the UCSF Office of Sponsored Research for contract negotiation.

f) Office of Clinical Trial Activation (OCTA)

For all expanded access treatments, after Industry Partner and HDFCCC approvals are obtained, study teams must complete the Coverage Analysis Determination Form. OCTA will review the protocol/documents and, if coverage analysis is needed, OCTA will complete the OnCore calendar build, coverage analysis, and budget (if applicable). If the protocol for the EA treatment is not yet developed or finalized, the study team should wait until the protocol is complete before submitting this request.

If OCTA determines that coverage analysis is not required, the study team will submit an APeX build request through OCTA.

g) OnCore Data Entry

The provider is responsible for registering and maintaining data in OnCore for the duration of treatment until IRB closure. See Appendix 1 for data requirements (Note: 'Data Table 4 Report Type' and 'Protocol Type' differ for single patient and multi-patient protocols).

h) Semiannual Reporting

Every 6 months (January, July), HDFCCC leadership (CRSO Medical Director, Deputy Director, Protocol Review and Monitoring Committee (PRMC) Chair, DSMC Chair, CRSO Director, PRMS Manager, DSMC Director, CRSO Operations Director, CRSO Regulatory Supervisors and Managers, and IDS Manager), will receive a comprehensive report of all active expanded access treatments.

2.0 Regulatory Requirements

Providers are responsible for following all applicable regulatory requirements, including IRB and FDA approvals and reporting. References to regulations, policies, and guidance are included in this policy.

CRSO programs must contact the Protocol Development Team to assist with regulatory requirements. Expanded Access applications completed by the Protocol Development Team will be charged a fee by the CRSO to cover the staff effort related to regulatory preparation and submissions. Details can be found on the Site Committee Expanded Access Approval Form.

Policy Exemptions

Studies meeting the definitions for PRMC review exceptions, as per the Protocol Review and Monitoring Committee (PRMC) Review Policy, do not need to follow the HDFCCC requirements outlined in Section 1 above. All Expanded Access Treatment Studies must follow the Regulatory Requirements in Section 2. The PRMC will confirm non-oncologic designation for all studies meeting the exemption requirements.

References

FDA

- Expanded Access to Investigational Drugs for Treatment Use — Questions and Answers Guidance for Industry
- Information about Expanded Access
- Emergency Use of an Investigational Drug or Biologic - Information Sheet
- CFR Title 21 Part 50, Sections 20-27 and 50-56; Part 56, Sections 101-104; Part 312, Sections 32-40, and 300-320
- IND Application Reporting: Overview
- Expanded Access for Medical Devices
- Device Follow-up Reporting
- IDE Reporting Requirements
- FDA Project Facilitate: (240) 402-0004, OncProjectFacilitate@fda.hhs.gov

IRB

- UCSF IRB Website: Emergency Use and Compassionate Use of Experimental Drugs and Devices

Appendices

APPENDIX 1: Expanded Access Registration and Data Maintenance in OnCore

Policy Approval

This policy document was approved by the following personnel on the following dates:

DocuSigned by:
Rahul Aggarwal
E870F084A5CA4CC...

Rahul Aggarwal, MD
Acting Medical Director, Clinical Research Support Office
Helen Diller Family Comprehensive Cancer Center

5/21/2024
Date

DocuSigned by:
Matthew Gubens
6DFC861990674E4...

Matthew Gubens, MD, MS, FASCO
Chair, Protocol Review and Monitoring Committee
Helen Diller Family Comprehensive Cancer Center

5/21/2024
Date

DocuSigned by:
Eric Small
7ECB32D327E3438...

Eric Small, MD
Deputy Director
Helen Diller Family Comprehensive Cancer Center

5/22/2024
Date

DocuSigned by:
Kate Shumate
80D38159E89D41B...

Kate Shumate, MPA, CCRP
Director, Administration and Planning
Helen Diller Family Comprehensive Cancer Center

5/21/2024
Date

Policy contact:
Andrea Skafel, Clinical Research Support Office Director
andrea.skafel@ucsf.edu; +1 415 502 5805

Appendix 1 – Expanded Access Registration and Data Maintenance in OnCore

OnCore records must be entered through the PC Console instead of ePRMS Console, which is only required for Oncology research protocols. The following data are required for all expanded access treatments.

OnCore Record Registration and Maintenance

< PC Console: Main >

- Details Tab
  - **Library**: Choose '*Oncology'*
  - **Department:** Choose the Principal Investigator's home department
  - **Title**: Must begin with '*Expanded Access'*
  - **Summary Accrual Info. Only:** Choose *'Yes'*
  - **Protocol Type:**
    - **For single patient protocols:** Choose *'Compassionate Use'*
    - **For multi-patient protocols:** Choose 'Other'
  - **Data Table 4 Report Type:**
    - For single patient protocols: Choose *'Not Applicable'*
    - For multi-patient protocols: Choose 'Interventional'
  - **Protocol Target Accrual:** Enter the # patients that will be enrolled
- Management Tab
  - **Management Group(s):**
    - Choose the managing program - mark as 'principal'
    - CRSO programs: Choose 'CRSO Regulatory Affairs' for externally-sponsored protocols or 'CRSO Protocol Development' for investigator-sponsored protocols (not marked as 'principal')
- Institution Tab
  - **Institutions:** Choose *'University of California San Francisco'*
- Staff Tab
  - **Principal Investigator:** List the treating physician
  - Add all assigned staff
- Sponsor Tab
  - **Sponsor:** List the IND or IDE holder as the principal sponsor
- IND/IDE Tab
  - **Investigational Drug/Investigational Device?**: Choose *'Yes'* or *'No'* as applicable
  - **IND/IDE Details**: All fields must be completed for each IND or IDE submission (including the **Expanded Access** field- choose *'Yes'*)

< PC Console: Status >

- **Protocol Status**: Add status updates in real-time, as applicable

Additionally, all fields required by the OnCore system must be completed: Protocol Number, Primary Completion Date (anticipated date of last patient visit or treatment), Age, Investigator Initiated Protocol (choose *'Yes'* or *'No'*), RC Total Accrual Goal (Upper), and Accrual Duration.

Patient and Adverse Events Data Entry

Providers must update OnCore in real-time to include completion of the following:

- Summary accrual
- Status of patient treatment
- Adverse Events/Serious Adverse Events

Clinical Research Policy Revision
Summary of Changes

Policy Title: Policy for Single and Multi-Patient Expanded Access Treatment

Version Date: 05/21/2024
Version Number: Revision 6

Section(s)	Summary of Change	Rationale
All sections	Replaced “clinical trial” with “clinical research study”	Wording inclusive of all clinical research trial types
Procedures 1.b)	CRSO fees will be assessed based on who initiated the expanded access study.	Higher fees will be charged if the expanded access protocol was initiated by a pharmaceutical company
Procedures 1.c)	Updated requirements for IDS review and fees	Ensure IDS is aware of expanded access protocols early and has the appropriate resources to operationalize the program.
Procedures 1.d)	Updated wording for multi-patient expanded access program review	Updated rationale for adjudication and next steps if expanded access is not appropriate.
Procedures 1.f)	Added OCTA coverage analysis requirements	OCTA may require a coverage analysis or budget if some procedures are billed to the participant’s insurance
Procedures 1.g)	Update OnCore data entry requirements	OnCore data entry requirements differ for single patient vs. multi-patient expanded access programs.
Procedures 1.h)	Updated reporting requirements	Leadership reporting changed to semi-annually. Since the volume of expanded access trials is small, semi-annual reporting is adequate to review accrual and study status updates.
Policy approval	Updated signatories	Updated based on new titles and faculty in leadership positions.
Appendix 1	Update OnCore data entry requirements	OnCore data entry requirements differ for single patient vs. multi-patient expanded access programs.

DocuSign

Certificate Of Completion

Envelope Id: 68A538FBFED54DB0968445BC9D78068A
Status: Completed
Subject: Complete with DocuSign: HDFCCC_Exp_Access_Policy_FINAL_2024MAY21.pdf
Source Envelope:
Document Pages: 9
Signatures: 4
Certificate Pages: 2
Initials: 0
AutoNav: Enabled
EnvelopeId Stamping: Disabled
Time Zone: (UTC-08:00) Pacific Time (US & Canada)

Envelope Originator:
Andrea Skafel
1855 Folsom St
Suite 601
San Francisco, CA 94103
andrea.skafel@ucsf.edu
IP Address: 128.218.42.98

Record Tracking

Status: Original
5/21/2024 8:45:48 AM
Holder: Andrea Skafel
andrea.skafel@ucsf.edu
Location: DocuSign

Signer Events	Signature	Timestamp
Eric Small Eric.Small@ucsf.edu Professor University of California, San Francisco Security Level: Email, Account Authentication (Optional)	DocuSigned by: Eric Small 7FCB32D327E3438... Signature Adoption: Pre-selected Style Using IP Address: 128.218.42.214	Sent: 5/21/2024 8:48:26 AM Viewed: 5/22/2024 5:17:11 PM Signed: 5/22/2024 5:17:27 PM
Electronic Record and Signature Disclosure: Not Offered via DocuSign		
Katherine Shumate kate.shumate@ucsf.edu Chief of Staff, Director of Administration University of California, San Francisco Security Level: Email, Account Authentication (Optional)	DocuSigned by: Kate Shumate 80D38159E89D41B... Signature Adoption: Uploaded Signature Image Using IP Address: 128.218.42.235	Sent: 5/21/2024 8:48:27 AM Viewed: 5/21/2024 4:17:41 PM Signed: 5/21/2024 4:17:59 PM
Electronic Record and Signature Disclosure: Not Offered via DocuSign		
Matthew Gubens Matthew.Gubens@ucsf.edu Professor University of California, San Francisco Security Level: Email, Account Authentication (Optional)	DocuSigned by: Matthew Gubens 6DFC861990674E4... Signature Adoption: Pre-selected Style Using IP Address: 64.54.15.151	Sent: 5/21/2024 8:48:27 AM Viewed: 5/21/2024 9:52:36 AM Signed: 5/21/2024 9:55:05 AM
Electronic Record and Signature Disclosure: Not Offered via DocuSign		
Rahul Aggarwal rahul.aggarwal@ucsf.edu Rahul Aggarwal, MD Professor of Medicine University of California, San Francisco Security Level: Email, Account Authentication (Optional)	DocuSigned by: Rahul Aggarwal E870F084A5CA4CC... Signature Adoption: Pre-selected Style Using IP Address: 128.218.42.240	Sent: 5/21/2024 8:48:28 AM Viewed: 5/21/2024 9:02:38 AM Signed: 5/21/2024 9:02:43 AM
Electronic Record and Signature Disclosure: Not Offered via DocuSign		

In Person Signer Events	Signature	Timestamp

Editor Delivery Events	Status	Timestamp

Agent Delivery Events	Status	Timestamp

Intermediary Delivery Events	Status	Timestamp

Certified Delivery Events	Status	Timestamp

Carbon Copy Events	Status	Timestamp

Witness Events	Signature	Timestamp

Notary Events	Signature	Timestamp

Envelope Summary Events	Status	Timestamps
Envelope Sent	Hashed/Encrypted	5/21/2024 8:48:28 AM
Certified Delivered	Security Checked	5/21/2024 9:02:38 AM
Signing Complete	Security Checked	5/21/2024 9:02:43 AM
Completed	Security Checked	5/22/2024 5:17:27 PM

Payment Events	Status	Timestamps