Study Set-Up and Initiation of an Investigator Site

POLICY DETAILS	
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Originally Prepared by	Jackie Pullen
Reviewed by	Sophie Espinoza, Quality Manager
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Relevant regulations/legislation/guidelines	Statutory Instrument 2004 no 1031 Statutory Instrument 2006 no 1928 (*as amended from time to time)*

Date	Version Number	Change details	Approved by
22nd February 2013	2.0	Re-branding of JCTO Addition and removal of glossary terms. CRA responsibilities section amended and addition of further CRA requirements.	Jackie Powell

10th February 2016	3.0	Scheduled review and minor adjustment to reflect revised practice including addition of CRA responsibilities.	Jackie Pullen
17 Aug 2018	4.0	SOP amended to include study set up activities. Glossary updated to include HRA definition.	Jackie Pullen
01 Oct 2018	4.1	Minor amendment to include trials managed by KHP-CTO	Jackie Pullen
05 Nov 2021	4.2	Amended to include changes required for remote SIVs	Jackie Pullen
20 October 2025	5.0	Comprehensive update for scheduled review	Ann Marie Murtagh

Table of Contents

1.0 BACKGROUND AND PURPOSE

This SOP sets out the standardised procedures for study set-up and site initiation for clinical trials supported by the KHP-CTO. It ensures trials sponsored by one or more King's Health Partners organisations (or where sponsor responsibilities are delegated to KHP-CTO) are conducted in compliance with UK law, Good Clinical Practice (GCP), protocol requirements, and applicable guidance.

Initiation confirms all approvals, essential documents, and systems are in place, and that the protocol, trial procedures, and roles are understood by the Investigator and site team and the applicable regulatory requirement(s).

Initiation is a critical quality control (QC) step underpinning trial integrity and participant safety.

2.0 SCOPE

This SOP applies to all clinical trials sponsored by one or more King's Health Partners organisations, or trials for which KHP-CTO performs sponsor functions. An initiation visit (SIV) must be completed before Sponsor Green Light is issued and prior to any participant recruitment.

Kick-off meetings and initiation visits will be conducted by the KHP-CTO CRAs and overseen by the Quality Manager or a delegate. From time to time, as required, initiation visits may be contracted out to external organisations/CRAs, but oversight will be retained by the KHP-CTO.

Trial sites will be initiated in both single and multi-centre trials as documented in the monitoring plan.

3.0 STUDY SET UP PROCEDURE

For clinical trials covered by the scope of this SOP, the CRA is the main line of communication between the KHP-CTO (on behalf of the Sponsor(s)) and the Investigator. The KHP-CTO Quality Team ensures that the Investigator conducts the clinical trial in compliance with the final protocol and subsequent protocol amendments, if any, as well as GCP, applicable safety reporting and regulatory requirements and SOPs. All CTIMP trials will have a kick-off meeting once there has been

- Confirmation of funding and,
- Agreement of sponsorship in principle and
- A CRA has been allocated to work on the trial.

The CRA will schedule the kick-off meeting, which will be attended by key stakeholders, including but not limited to, the Chief Investigator, research nurse, R&D and University contract negotiator, pharmacy representative, and an R&D representative. The Kick-off Meeting Checklist will be used to structure the agenda and guide the discussion

Example Topics for Discussion at the Kick-off Meeting

Topic	Notes / Discussion Points
IMP Supply	Arrangements for ordering, storing, and dispensing IMP
Data Management	How data will be collected, entered, and managed
Database Provider	Details of the EDC or database system used
Emergency Unblinding (if applicable)	Procedures and contacts for unblinding
Randomisation (if applicable)	Randomisation method and access instructions
Essential Documents	Status of essential documents and required submissions
Data Monitoring and Ethics Committee & Trial Steering Committee	Roles, composition, and meeting timelines
Obtaining Regulatory Approvals	Status and responsibilities for MHRA, REC, etc.
Obtaining Sponsorship	Confirmation of sponsor and contractual arrangements
Site Visits and Monitoring	Planned monitoring schedule and visit logistics
Sample Analysis and Processing	Labs involved, processing requirements, and logistics
Trial Master File	TMF location, maintenance responsibilities
Vendor Oversight and Contracts	Contracts in place and oversight plans for third parties
Statistical Analysis	Planned statistical methods and timelines
Final Study Report and Publications	Authorship plan and dissemination strategy

Following the kick-off meeting, a summary of the meeting will be produced by the R&D contract negotiator or delegated individual, which will be circulated to all attendees and other relevant stakeholders.

Study set-up activities will continue until all necessary approvals have been in place (or obtained), enabling the initiation visit to proceed as outlined in Section 5.0

4.0 INITIATION PROCEDURE

All sites that have issued initial confirmation of capacity and capability for the particular clinical trial and are expected to receive IMP during the course of that clinical trial will be initiated. Sites that will not be involved in handling or administering IMP will be assessed on a case-by-case basis by a Senior CRA or delegate.

In some rare circumstances, i.e. the site is a control site with no investigational medicinal product (IMP), site initiation may be performed for these sites during the Investigator meeting if all aspects of the initiation visit checklist can be completed, except for the Pharmacy Visit section. This must be agreed in advance by the Quality Manager or delegate and fully documented in the monitoring plan (MP).

The initiation visit will be performed as soon as all required approvals, documentation and procedural information are in place at each study site expected to obtain or receive IMP. Sites that will not be involved in handling or administering IMP will be assessed on a case-by-case basis by a Senior CRA or delegate to determine if SIV is necessary.

The initiation visit will be conducted/performed once all required approvals, documentation, and procedural information are in place at the study site, and confirmation of capacity and capability (C&C) has been received from the site R&D department. The issuing of a confirmation of C&C by research sites is required for all studies where this is noted on the Health Research Authority (HRA) Approval letter.

The visit may take place over multiple days; however, a single, final Site Initiation Visit Report must be completed per site, covering all days of the visit. Recruitment at the site must not commence until the initiation process is fully completed and the Site Initiation Checklist has been signed by the Quality Manager or delegate. A trial Investigator Meeting is not a substitute for a Site Initiation Visit (SIV), but rather an additional opportunity to deliver trial-specific training to Investigators.

4.1 CRA Responsibilities

1. The CRA or delegate will act as the main line of communication between the KHP-CTO (on behalf of the Sponsor(s)) and the Investigator.

   Prior to the Initiation Visit

2. The CRA will facilitate the collection and verification of all required approvals, essential documentation, and applicable items in accordance with the Site Initiation Visit Checklist. This includes ensuring that all necessary documents are available to support the proper conduct of the initiation visit and to meet applicable regulatory requirements

3. The CRA will confirm that the Chief/Principal Investigator (CI/PI) and all relevant site staff have completed up-to-date training in all applicable areas. This includes verifying that the CI has completed all mandatory training in accordance with UK regulatory requirements. Good Clinical Practice (GCP) training must be up-to-date and no older than two years at the time of site initiation
.
4. The CRA must confirm the final eCRF is available for use and appropriate materials for training of site team are available (screenshots, sandbox environment etc.).

The CRA will ensure that the Investigator and all relevant Study Site Staff, including the Pharmacist (if applicable), have been informed of the Site Initiation Visit and are available to attend. Attendance by the PI is mandatory.

5. The CRA will ensure that the trial is appropriately recorded in the MATTS or EDGE database. and that the entry for the trial is up to date.

6. The CRA will ensure that all site-specific contracts have been fully executed prior to site initiation and before any trial-related activities, including recruitment, can begin.

7. The CRA will ensure that other associated documents are reviewed for accuracy and consistency, finalised, and sent to the site prior to the SIV for localisation (e.g. patient emergency contact cards).

8. The CRA will ensure that the trial-specific risk assessment and monitoring plan prepared by the Senior CRA or delegate have been reviewed and finalised prior to the Site Initiation Visit.

9. The CRA will prepare the SIV presentation and collate all documents required for completion during the meeting.

During the Initiation Visit

10. If the Investigator has attended an Investigator Meeting for the trial, the CRA will review the training provided and ensure that copies of any minutes or certificates are filed in the Trial Master File (TMF) and/or Investigator Site File (ISF). Depending on the trial risk assessment and trial type, sites handling an IMP may require a full site initiation visit (SIV) to confirm that IMP storage conditions and accountability procedures are satisfactory.

11. The CRA or delegate will review the protocol with the Investigator, ensuring that they are aware of the current version and its effective date and that it is the version to be followed.

12. The CRA will verify that all required approvals and essential documentation are available for filing in the TMF/ISF in accordance with the Site Initiation Visit Checklist and sponsor requirements.

13. The CRA will discuss the planned recruitment methods for the trial (as detailed in the protocol and/ or IRAS form) and review the current versions of the PIS and ICF. In addition, the CRA will go over GCP-compliant informed consent procedures with the Investigator and relevant site personnel.

14. The CRA will ensure that the Investigator has completed the Delegation of Duties and Authorised Signature Log. Where possible, the CRA will also verify that all delegated tasks have been appropriately assigned and documented for other site staff. This log must be maintained throughout the trial by the Investigator and delegated team members.

15. The CRA will verify that an up-to-date signed and dated Curriculum Vitae (CV) has been provided by the Investigator and is no older than two years. Where possible, the CRA will also confirm that up-to-date CVs for other staff listed on the Delegation Log have been filed. The delegation Log must be maintained at the site and filed in the ISF, with a copy also retained in the TMF to assist sponsor oversight.

16. The CRA will verify that all identified trial staff have received appropriate training in both GCP and the trial protocol and will ensure attendance at the SIV is documented in the SIVR.

17. The CRA will confirm that the Investigator has clearly defined what constitutes source data and that this has been accurately documented on the Source Document Location List.

18. The CRA will discuss with the Investigator their responsibility to provide direct access to the source data for each participant and how this will be achieved.

19. The CRA or delegate will provide training on electronic Case Report Form (eCRF) completion and correction to all applicable personnel attending the Site Initiation Visit.

20. The CRA will ensure that, for trials utilising an eCRF, site personnel are aware of the process for obtaining their login credentials (usernames and passwords).

21. The CRA will ensure that the Database Plan is in place for the trial (see SOP 18 Data Management in Clinical Trials).

22. During the visit, the CRA or delegate will verify that the relevant site staff have been trained on the KHP-CTO Pharmacovigilance (PV) Policy and will outline the basic safety reporting requirements. This training is provided in addition to and does not replace the formal KHP-CTO Chief Investigator's Responsibilities training.

23. If applicable, the CRA will ensure that the Investigator and relevant site staff are informed of the study's emergency code-break and unblinding procedures.

24. The CRA will ensure that the Investigator is aware of their ongoing responsibility to maintain communication with the Research Ethics Committee (REC) and the local Research and Development (R&D) Department.

25. The CRA will review the safety profile for the IMP as outlined in the Investigator Brochure (IB) or Summary of Product Characteristics (SmPC) and will verify that the current Reference Safety Information is available at the site.

26. Depending on the trial type, the CRA may review all IMP procedures, including but not limited to receipt, storage, dispensing, accountability, return and destruction.

27. The CRA will check the storage conditions for the IMP regardless of whether the IMP is physically present at the site at the time of the visit.

28. If applicable, the CRA will verify that adequate facilities and supplies are in place to support the trial's laboratory requirements, in accordance with the protocol and any relevant Laboratory Manual.

29. The CRA will ensure that procedures for allocation of participant numbers and, if applicable, randomisation have been reviewed.

30. The CRA will ensure that the Investigator is aware of the monitoring requirements for the trial. This will include the requirements for each visit and the estimated frequency of visits. The level of monitoring required is defined according to risk assessment performed by the Quality Manager (or delegate) and will be detailed in the trial-specific Monitoring Plan.

31. The CRA will ensure that Investigator sites are aware of the requirement to notify the KHP-CTO immediately if they are informed of any upcoming regulatory or internal inspections or audits.

32. The CRA will ensure that the Investigator is aware of their responsibility for the ongoing maintenance of trial documentation, including all relevant correspondence in the TMF / ISF.

33. The CRA will ensure that the Investigator is aware of any contractual obligations for reporting to external parties.

34. Archiving arrangements and retention of pertinent documentation for the trial will be discussed during the SIV.

35. The CRA will ensure that the Investigator is aware of their responsibility to arrange adequate cover during periods of absence and to maintain ongoing oversight of the trial.

36. The CRA will ensure that the Investigator is aware that assessment of patient eligibility and inclusion in the trial is a medical decision that must be clearly documented by an appropriately delegated medical professional.

4.2 Investigator and Site Initiation Visit Report

Following the Site Initiation Visit, the CRA will promptly complete the SIV Checklist and prepare a written report, using the SIV Checklist and Investigator and SIVR templates found on the KHP-CTO website.

The report will be reviewed promptly after the visit or communication and signed by an authorised individual within the KHP-CTO (Quality Manager, Senior CRA or their delegate), as well as the CRA and the Investigator. The original signed report will be filed in the TMF with a copy retained in the Sponsor files. Participant recruitment may not be commence until the SIV Checklist has been signed by the Quality Manager or their delegate.

The Investigator will be informed in writing of the discussions held during the visit, along with any identified follow-up actions. These actions will be tracked and followed through the completion.

Sponsor Green Light is evidenced by an email sent by the site CRA and will only be granted when the KHP-CTO is satisfied that relevant queries raised during the Site Initiation Visit have been resolved.

In the event of evidence indicating a systematic failure to comply with GCP, the Sponsor will be notified, and procedures outlined in KHP-CTO SOP 6.0 Notification of Serious Breach of GCP will be followed.

5.0 RELATED TEMPLATES

5.1 Investigator and Site Initiation Visit Report

5.2 Host site Initiation Visit Checklist

5.3 Monitoring Plan

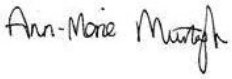
5.4 Source Document Location List

5.5 Authorised Site Signature and Delegation Log

5.6 Site Initiation Visit Attendance Log

5.7 Kick Off Meeting Checklist

6.0 APPROVAL AND SIGNATURE



_____ _____ _____20/10/2025_____

Ann-Marie Murtagh
Director
King's Health Partners Clinical Trials Office

Date

Appendix 1

GLOSSARY

Blinding - The practice of keeping the trial participants, care providers, those collecting data, and sometimes even those analysing data unaware of which intervention is being administered to which participant. Blinding is intended to prevent bias on the part of study personnel.

Chief Investigator (CI) - The chief investigator is the overall lead researcher for a research project (Outside the UK the term Coordinating Investigator or Investigator may be used). In addition to their responsibilities if they are members of a research team, chief investigators are responsible for the overall conduct of a research project

Case Record Form (CRF) - A printed, optical, or electronic document designed to record all of the protocol-required information to be reported to the sponsor on each trial participant.

Clinical Research Associates (CRAs) – A professional who organises and monitors clinical trials to assess the safety and effectiveness of new or existing drugs, medical devices, or treatments. CRAs play a vital role in ensuring that clinical trials are conducted ethically, safely, and in accordance with established protocols and regulations. CTO CRA's monitor compliance, for clinical trials where regulatory oversight has been delegated to the KHP CTO.

Clinical Trial of an Investigational Medicinal Product (CTIMP) - a type of clinical trial that investigates the safety and efficacy of a drug or other medicinal product that is not yet authorised for general use. It can also involve studying how the drug is absorbed, distributed, metabolised, and excreted, or identifying any adverse reactions.

Confirmation of Capacity and Capability (C&C) – The formal confirmation provided by an NHS organisation's Research & Development (R&D) department that a site has the necessary resources, approvals, and infrastructure in place to safely and effectively conduct a clinical trial. C&C is required only for studies where it is indicated in the Health Research Authority (HRA) Approval Letter and must be in place before any study-related activities can begin at that site.

Co-Sponsors – Where two or more organisations take responsibility for the initiation, management and financing (or arranging the financing in relation to) a clinical trial. Co-Sponsors should decide which organisation will assume responsibility for carrying out the Sponsor functions of that trial and document this accordingly.

Curriculum Vitae (CV) - A summary of a person's education, professional history, and job qualifications.

Good Clinical Practice (GCP) – an international ethical and scientific quality standard for designing, conducting, recording, and reporting clinical trials. GCP emphasizes participant well-being, proportionality, quality by design, risk-based quality management, and data governance across the full lifecycle. It ensures the safety, well-being, and rights of trial participants are protected while maintaining the credibility and accuracy of trial data. GCP is crucial for safeguarding trial participants and ensuring clinical trials produce reliable, scientifically valid results.

Health Research Authority (HRA) – An authority in England established in 2011. The authority exercises functions in connection with the facilitation and promotion of research and the establishment of research ethics committees.

Informed Consent Form (ICF) – The document, which is signed by the participant/legal representative as well as the person who conducted the informed consent discussion, confirms the participant's willingness to participate in the particular trial, having been informed of all aspects of the trial that are relevant to their decision.

Investigator Brochure (IB) – Is a compilation of the clinical and non-clinical data on the investigational product(s) that are relevant to the study of the product(s) in humans.

Investigator Site File (ISF) - A standard filing system which contains all essential documents held by Principal Investigator(s) conducting a trial, which individually and collectively permit the evaluation of the conduct of a trial and the quality of the data produced.

Investigational Medicinal Products (IMP) - a pharmaceutical form of an active ingredient or placebo being tested or used as a reference in a clinical trial. This includes products with marketing authorisation when used in a way different from the approved form, for an unapproved indication, or to gain further information about an approved use

King's Health Partners (KHP) – King's Health Partners brings together research, education and clinical practice across three NHS Foundation Trusts - Guy's and St Thomas', King's College Hospital and South London and Maudsley - and a world-leading university, King's College London

King's Health Partners Clinical Trials Office (KHP-CTO) – Established in 2006 by King's College London, Guy's & St Thomas' NHS Foundation Trust, South London and Maudsley NHS Foundation Trust and King's College Hospital NHS Foundation Trust to provide a streamlined approach for all aspects of trial administration. The King's Health Partners CTO has two sections: the Commercial Team which provides a single interface for those wishing to conduct trials sponsored by the pharmaceutical industries and the Quality Team that supports investigators at King's Health Partners institutions who undertake CTiMP trials where King's Health Partners are the sponsor or co-sponsor.

MATTS – MedSciNet's Active Trial Tracking System. An electronic Clinical Trial Portfolio Management System.

Medicines & Healthcare products Regulatory Agency (MHRA) – the UK's regulatory body responsible for ensuring the safety and effectiveness of medicines, medical devices, and blood components for transfusion. It operates as an executive agency sponsored by the Department of Health and Social Care.

Monitoring Plan (MP) – A document written by the CRA detailing how all the monitoring activities for the trial will be carried out based upon the trial risk assessment.

Principal Investigator (PI) – the individual primarily responsible for the conduct of a research study at a specific research site

Participant Information Sheet (PIS) – Explains all relevant study information to assist the trial participant in understanding the expectations and requirements of participation in a clinical trial.

Pharmacovigilance (PV) – The science and activities relating to the detection, assessment, understanding and prevention of adverse effects or any other drug-related problem.

Quality Control (QC) – The operational techniques and activities undertaken within the quality assurance system to verify that the requirements for quality of the trial-related activities have been fulfilled.

Research & Development Dept (R&D) – NHS department responsible for confirmation of capacity and capability for all clinical research.

Research Ethics Committee (REC) – An independent body consisting of healthcare professionals and non-medical members, whose responsibility is to protect the rights, safety and well-being of human trial participants s involved in a trial and to provide public assurance of that protection by, among other things, expressing an opinion on the trial protocol, the suitability of the investigators and the adequacy of facilities, and on the methods and documents to be used to inform trial trial participants and obtain their informed consent

Site Initiation Visit (SIV) – A meeting conducted at the trial site (or remotely) before the start of participant recruitment to ensure that the site is prepared to conduct the study in compliance with the protocol, GCP, and regulatory requirements. During the SIV, the trial procedures, documentation, roles, and responsibilities are reviewed with the Investigator and site staff to confirm readiness for trial initiation.

Standard Operating Procedures (SOPs) – Detailed, written instructions to achieve uniformity of the performance of a specific function. SOPs are the basis on which Quality Systems and Processes are conducted and monitored.

Summary of Product Characteristics (SmPC) – Once an investigational product has a marketing approval, the IB is superseded by the Summary of Product Characteristics (SmPC), unless an IMP has been developed, licensed and manufactured by King's Health Partners. This reference document is produced for health professionals and details how to use a medicinal product safely and effectively.

The Regulations – The Medicines for Human Use (Clinical Trial) Regulations 2004 which transposed the EU Clinical Trials Directive into UK legislation, as Statutory Instrument 2004 no 1031**.** An amendment to implement Directive 2005/28/EC was made to the Regulations as Statutory Instrument 2006 no 1928. As amended from time to time.

Trial Master File (TMF) – a standard filing system which allows the effective storage and location of essential documents, that is the large volume of regulatory documents and approvals needed for clinical research. The filing system can be in the form of a single project file or a number of files/filing cabinets, depending on what is deemed most appropriate for a particular clinical trial, given its size and complexity. The regulatory documents and approvals within the TMF will be maintained alongside case report forms and source documentation.