

Government of Western Australia Department of Health

# Navigating the WA Health Research Governance Service (RGS) as a researcher for Research Monitoring



Katherine Coltrona, Senior Policy Officer Department of Health CAHS & NMHS 27/8/2018

## Changes to RGS Current Functionality

Tasks	New look My Tasks – merge current, overdue and archive.
User Profile	Qualifications and Expertise limited to 500 words so that only 500 words can populate into Project Details/WAHEAF.
Create a Project	Assign a CPI Delegate when creating a project.
WASM	CPI Delegate can authorise.
Application Documents	Document placeholders no longer created for AIRed docs; 'Attach' Documents only - no longer authorise requirement.
SSA Form	Notification for PI to sign SSA Form following completion.
Letters	Close button; Tooltip on Attach Documents to Letters; Letters Grid sortable.
Complaint	Finalising a Complaint – word change; unlock; remove invitations. Un-invite from a complaint. Complaint actions – unlock; finalise rows added.
Summary Tab	Project Summary relocated.
Additional Guidance	Blue text when submitting External Ethics to RGO; reference to my projects in New Project Confirmation Email.
Ethics Tab	Allow EEO (RGO NMA) to Update Project Ethics Approval Status when there is a pending RGO validation except for the status of Withdrawn.
Forms & Documents Tab	Changed to Applications & Monitoring

# Tasks – New Look & Merged

#### UAT - My Tasks

	Group	Task Type	Subject	From	Due Date	Notes 🔍
	A	Invitation to Provide Quote and Authorise/Decline in Budget Form	Invitation to Provide Quote and Authorise/Decline in Budget Form	Katherine Coltrona	3/02/2017	D
	A	Invitation to Sign Declaration	Invitation to Sign Declaration	Katherine Coltrona	8/02/2017	D
	A	Additional Information Requested	Additional Information Requested: RGS0000000056	Katherine Coltrona	14/02/2017	
7 days over	A	Additional Information Requested	Additional Information Requested: RGS0000000056	Katherine Coltrona	14/02/2017	D
due	A	Invitation to Sign Declaration	Invitation to Sign Declaration	Katherine Coltrona	9/03/2017	D
	<b>A</b>	Additional Information Requested	Additional Information Requested: RGS0000000056	Katherine Coltrona	8/08/2017	
	A	Additional Information Requested	Additional Information Requested: RGS0000002128	Katherine Coltrona	19/0 <mark>1/201</mark> 8	D
		Invitation to Join Project	RGS0000002146	Mary Davies	17/08/2018	D
		Invite to HREC Meeting	Invite to HREC Meeting: CMR0000003169	Jane Dowe	5/12/2018	D
		Invite to HREC Meeting	Invite to HREC Meeting: CMR0000003171	Jane Dowe	5/12/2018	D

		New User Access Request	Khurram DurraniC		8/08/2018	
	A 241	Request for a New Site, Division and Department	Igsuat+11@gmail.com	Leanne HA	21/09/2017	Notes
	<b>A</b>	Request for CE/Delegate Authorisation	Request for CE/Delegate Authorisation: RGS0000000005	Katherine Coltrona	13/08/2017	
	A 224	Update Details Approval		Leanne Greenham	20/09/2017	
A 2 Edit 1 A 2 From	<b>Fask Notes</b> Type: N∈ :	ew User Access Request	Due	Date: 08/08/2018	3/12/2017 3/12/2017	
Edit 1 Task From B	Task Notes Type: Ne : I <u>U</u>	ew User Access Request	Due Γ Ω ]≣ :≣ \+≣ +]≣	Date: 08/08/2018	3/12/2017 3/12/2017 3/12/2017	
Edit 1 Task From B	Task Notes Type: Ne : <u>I U</u> am investiga	ew User Access Request	Due [ Ω ]≣ :≣   ⊰≣ ⊰≣ eerson.	Date: 08/08/2018	3/12/2017 3/12/2017 3/12/2017 3/12/2017	
Edit 1 Task From B A 2 I	Task Notes Type: Ne : I U	ew User Access Request	Due I Ω ]≣ :≣   स≣ स≣ person.	Date: 08/08/2018	3/12/2017 3/12/2017 3/12/2017 3/12/2017 8/08/2018	

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# How to sort/filter Tasks

UAT - My Tasks



Archived Tasks will be hidden unless accessed through the Filter

# Types of Tasks

	ing root					
Group	Task Type	Subject	From	Due Date	Notes	Ð

me i AT -	A Tasks Research Information My Tasks	Meeting	Group	Task Type Invitation to Sign Declaration Invitation to Sign Declaration Invitation to Provide Quote and Authorise/Decline in Budget Form	Subject RGS0000002146, SSA Form RGS0000002146, AR Form RGS0000002146, Cardiology	From Margaret Brown Margaret Brown Margaret Brown	Due Date           20/08/2018           20/08/2018           20/08/2018           20/08/2018	Notes	Q
Group	Task Type	Subject		From	Due Date Notes 🗨				
	Request for CE/Delegate Authorisation	RGS000002146		Matilda Clarke	20/08/2018 📮		CE Tas	ks	

# **Create Project**

1. Add CPI Delegate name

2. Email to CPI Delegate and CPI

<ol> <li>I will nc another</li> <li>I will nc more se</li> <li>Except i authoris</li> <li>I will nc apparer</li> </ol>	It use the data to attempt to person for those purposes to make any unauthorised n eparate projects. in the form of conclusions of sed for the research project	o identify or make , herger of the data drawn from the da	unauthorised contac with any other data s	t with any individual c et, including informat	r to provide the data to	
<ol> <li>I will nc more se</li> <li>Except authori:</li> <li>I will nc apparer</li> </ol>	ot make any unauthorised n eparate projects. in the form of conclusions of sed for the research project	herger of the data	with any other data s	et, including informat		
<ol> <li>Except authori:</li> <li>I will no apparer</li> </ol>	in the form of conclusions of sed for the research project	drawn from the da			on files provided for two or	
7. I will nc apparer			ta, I <mark>will n</mark> ot <mark>disclos</mark> e	any data to any persor	n other than another person	
publica	nt publish any data provideo nt or can be reasonably asc tion.	d by WA Health, o ertained unless the	derived from that d individual has giver	ata, from which the ide their written consent	entity of an individual is to be identified in the	
8. I will co	mply with all obligations se	t out in the currer	t <i>Department of Hea</i> Department of Heal	th Practice Code for the	e Use of Personal Health he project.	
9. If I beco	ome aware of any loss or m	isuse of the data I	will immediately info	rm the Research Gove	rnance Officer responsible f	or
the WA	Health site.					
10. At the c and cor	conclusion of the research p nfidential destruction of the	oroject and within data provided to	the period approved me for the purpose o	for retention of the da of the project.	ita, I will ensure the complet	e
]I have read an	d agree to the Declaration	of Confidentiality*				
o you want to r	nominate a CPI Ves	~				
elegate at this	time?*					
CPI Delegate m pport. The CPI	ust already be a RGS Resea Delegate will only be invite	irch User. If you ca d to the project w	nnot find a person, p orkspace once this fo	lease ensure they are rm is approved.	signed up for RGS, or conta	t RG
GS user:	Mary Davies		🎝 💷			
	If you cannot find a persor	n, please contact RGS	Support.			
I acknowledge	e that the person invited to	join this research	project is aware of th	e confidentiality requi	ements regarding this proje	ct.*
I acknowledge	e that the person invited to	join this research	project is aware of th	e confidentiality requi	rements regarding this proje	(

# Create Project

- CPI Delegate task to join Project
- CPI Delegate has a sign up form



UAT -	Project Invitation Acceptance
PRN:	RG5000002146
Project title:	Test 2A: Monitoring UAT Test - NMA - Lead WA Health HREC with WA Specialist HREC
Your Details	
Name:	Mary Davies
Membership status:	Invited
Role(s) and S	ite(s)
Role	Site(s)
CPI Delegate	All
Membership	Acceptance
Are you acting as employee on this	s a WA Health No 🗸
	WA HEALTH DECLARATION OF CONFIDENTIALITY
	(for research personnel who are not WA Health employees)
GUIDELINES	
The WA Heal employees of	th Declaration of Confidentiality must be completed by all research personnel (including students) who are not WA Health, who will be:
<ul><li>Conduc</li><li>Accessi</li></ul>	ting a research project within WA Health; or ng WA Health participants, their tissue or data.
The Declaratio with.	n of Confidentiality must be completed by the non-WA Health employee for each research project they are involved
declaration ✓I have read an	d agree to the Declaration of Confidentiality
☑ I agree that in	accepting access to this research project I will be bound by confidentiality requirements regarding the project.
Accept	Decline

## Documents automatically authorised

Sites	Members	Project	Details !	Applications	Monito	ring
Declarations	Comments	Let	tters	Publications	Summ	ary
Timeline	History					
thics Approval			Find informat	ion on Research Aut	thorisation and Moni	toring Fo
Active						
Forms						
orms must be authorised be	fore they can be submitte	ed.				
orm Name		Version	Status Loo	cked By	Updated By	Sele
VA Specific Module (WA	SM)	1.0	Pending			
Add Remo	ve Authorise	Unauthorise	Print			
Documents				Find recommmen	ded document temp	lates <u>he</u>
ocuments must have a state	us of authorised before th	ey can be submitted.				
oc ID Document Na	me	Versio Date	on / Status	Attached By	Date Attached	Sele
i506 Human Resea	rch Ethics Application	1.0 10/08	Authorised /2018	Alex Roberts	10/08/2018	

## CPI Delegate can authorise WASM

Site	s	Members	Projec	t Details I	Applications	Monito	ring
Declara	tions	Comments	Le	etters	Publications	Summ	ary
Timel	ine	History					
Ethics App	roval			Find inform	nation on Research Au	thorisation and Monit	toring For
- Active							
Forms							
Forms must b	e authorised before th	ey can be submitted.					
Form Name	e 🧲		Version	Status	Locked By	Updated By	Sele
WA Specifi	c Module (WASM)		1.0	Completed		Mary Davies	
Descore							page in the page
Docume Documents m	mts nust have a status of a	uthorised before they	r can be submitted	í.	Find recommen	ided document temp	lates <u>her</u>
Doc ID	Document Name		Vers Date	ion / Status	Attached By	Date Attached	Sele
6506	Human Research E	thics Application	1.0 10/0	Authoris 08/2018	sed <u>Alex Roberts</u>	10/08/2018	

## PI Delegate can authorise Budget & PI Task to sign SSA Form

Section 2 of 3 - Site Project	ct Budget							0
Total Actual Costs:	\$98,750.00	Authorised Costs:	[€] Total Funding: \$98,750.00		[€] Shortfall (oi \$101,750.00	r Surplus):	\$3,000	.00
🖃 Royal Perth Hospit	al							
Proposed number of participan *Participant also includes a person's	nts in this site: 5 data, information or biological sample.					Expected project timefrar	ne for t <mark>his site:</mark> 2 y	ear(s)
Research Department								
Cardiology						Authorised	Oliver Walker 1	3/08/2018 😗
Major Category	Service & Support Item Provided 🔞	Cost Description	Cost per Item 🕧	Quantity 🕧	Total Cost 🔞	Cost Type 🚯	Overhead Charge?	Select
Clinical services	Overhead Charge - percentage		20.00%	1	\$15000.00	Project specific	No	
Ethics approval	Ethics review		\$2,000.00	1	\$2,000.00	Project specific	No	
Clinical resources	are processing and review Investigator time - Principal Investigator		\$5,000,00	5	\$25,000,00	Project specific Shared	NO Yes	
Clinical resources	Clinical research coordinator (non- research nurse) time		\$10,000.00	5	\$50,000.00	Shared	Yes	
								Unlock
Supporting Department								
Pharmacy						Authorised -	<u>George Wright</u> 1	3/08/2018 🕧
Major Category	Service & Support Item Provided 🕧	Cost Description	Cost per Item 🕕	Quantity 🕧	Total Cost 🔞	Cost Type 🕧	Overhead Charge? 🕧	Select
Pharmacy/Investigation drug related	Drug preparation and dispensing – complex		\$300.00	5	\$1,500.00	Project specific	No	
Pharmacy/Investigation drug related	Stock management – expiry management		\$50.00	5	\$250.00	Project specific	No	
Other	Other	Annual Service Charge	\$1,000.00	2	\$2,000.00	Project specific	No	
								Unlock
General Comments (mand	datory in cases of shortfall)							
BIUXBB	<ul> <li>♦     <li>♦     <li>Ø     <li>III     <li>III     <li>III     <li>III     <li>III     <li>III     </li> </li></li></li></li></li></li></li></li></ul>							
								Words: 0/5000 "
<< Previous Next >>	Save Save and Close Ca	incel	Authorise					

UAT - My Tasks



Group	Task Type	Subject	From	Due Date	Notes	€
	SSA Form Completed	RGS000002146	Alex Roberts	16/08/2018		

# New RGS Functionality

Dashboard
Amendment Form
Governance Only Amendment Form
Safety Form
Progress Report
Site Final Report
Project Final Report

## **Researcher Dashboard**

#### UAT - My Dashboards

	Phase	PRN	Title	CPI	Project Status	Risk	Q
	Applicati 🔻				All selected		* <b>T</b> X
	6	RGS0000002121	Test 1: National Mutual Acceptance - External Lead HREC without Specialist HREC	Katherine Coltrona	New Project	¥	Fil
onitoring	6	RGS000000095	Test 3: National Mutual Acceptance - External Lead HREC without Specialist HREC	Katherine Coltrona	New Project	¥	
		RGS0000002146	Test 2A: Monitoring UAT Test - NMA - Lead WA Health HREC with WA Specialist HREC	Jane Dowe	Pending Ethics Review	¥	
lications	2	RGS000002119	Test Project 108: Sites_Long Name without space distort the page. Sites, Approve Project, Create Project screen, Add Member PI/AI, AR/SSA Forms etc is affected.	John Smith	Pending Ethics Review	¥	
	6	RGS0000002113	Test 1: National Mutual Acceptance - External Lead HREC with Specialist HREC	Jane Dowe	AIRed by Ethics	÷	
	Ē	RGS000000050	Can metformin be used safely in dialysis patients?	John Smith	AIRed by RGO	¥	
		RGS000000055	Research Governance Service Test Project 1.1.	Katherine Coltrona	Monitoring	¥	
	6	RGS0000002109	Test 1: National Mutual Acceptance -	Jane Dowe	Monitoring	¥	

#### Ethics Approved - require site authorisation

#### UAT - My Dashboards

Researcher	1					
Phase	PRN	Title	СРІ	Project Status	Risk	
Applicati *				All selected		۳
9	RGS0000002146	Test 2A: Monitoring UAT Test - NMA - Lead WA Health HREC with WA Specialist HREC	Jane Dowe	Governance not Submitted	↓	

#### Aired by RGO

UAT -	My Da	shboards				
Phase	PRN	Title	СРІ	Project Status	Risk	Q
Applicati *				All selected *	v	T×
6	RGS0000002146	Test 2A: Monitoring UAT Test - NMA - Lead WA Health HREC with WA Specialist HREC	Jane Dowe	AIRed by RGO	¥	

## Monitoring Tab

	Home Research Info	ormation 🔻	Meeting Calendar	Document Templates	Contacts Help Wiki
My Tasks My Dashboards My Projects Create Project Projects Search I Profile Management Complaints Archived Tasks	PROJECT   Test 2A: Monitor Click on the arrows below to g Feasibility Assessment D PRN: RGS0000002146 Project type: Research Protocol number: 2018AZC External HREC ref: None My Role(s): CPI Delegate	oring UAT Test get step by step g ocument Prepara Pro Sho DGH#\$-1 Acr Lea Spe	NMA - Lead WA Health uidance. Submission and Rev ect status: Active rt title: Test 2A 2 WA HREC onym: 2AMUAT d HREC: Royal Perth Hospit cialist HREC: Department o	HREC with WA Specialist HR view Approval and Authorisat Project ethics approva CS CPI: Jane Dowe tal HREC (EC00270) of Health WA Human Research Ed	thics Committee (EC00422)
	Sites	Membe	rs Project De	tails Applications	Monitoring
	Declarations	Commer	its Letters	s Publications	Summary
	Timeline	History			
	+ Forms			Find information on Research A	Authorisation and Monitoring Forms
	Documents				
					Submit

PRN: RGS000002146 Proje		tatus: Active	us: Approved	
Project type: Research Protocol number: 2018AZE External HREC ref: None My Role(s): CPI Delegate	Short titl OGH#\$-1 Acronym Lead HRI Specialis	le: Test 2A 2 WA HRECs n: 2AMUAT EC: Royal Perth Hospital t HREC: Department of F	CPI: <u>Jane Dowe</u> HREC (EC00270) Health WA Human Research Ethics (	Committee (EC00422)
Sites	Members	Project Deta	ils Applications	Monitoring
Declarations	Comments	Letters	Publications	Summary
Timeline	History			
- Forms		Fi	nd information on Research Autho	risation and Monitoring Forms
Form Name				Q
Documents				Add
Document Name			Туре	Q
				Add
				Submit

## Add Monitoring Forms

Add Project F	orms	×
RN:	RGS000002146	
Project title:	Test 2A: Monitoring UAT Test - NMA - Lead WA Health HREC with WA Specialist HREC	
Select Monitor	ing Forms	
Form Name		Select
Amendment Fo	rm	0
Progress Report		0
Site Final Repor	t	0
Safety Report		0
Project Final Re	port	0
Governance On	ly Amendment Form	0

## Add Amendment Form

Add Project F	orms	Add Project	Forms	×
PRN: Project title: Select Monitori	RGS0000002146 Test 2A: Monitoring UAT Test - NMA - Lead WA Health HREC with WA Specialist HREC ing Forms ge from webpage	PRN: Project title: Select N Form Na Amendn	RGS000002146 Test 2A: Monitoring UAT Test - NMA - Lead WA Health HREC with WA Specialist HREC age from webpage  Before adding an Amendment Form, ensure that:  Information in the Project Details tab is accurate;	Select
Amendr Progress Site Fina Safety R Project Final Rep	You are unable to create a monitoring form until at least one site has been authorised under the Administration – Governance tab.	Progress Site Fina Safety R Project F	All required changes have been made in the Sites tab; and     All required membership changes have been accepted. Click OK to proceed or click Cancel and make the necessary changes. OK Cancel	000000
Governance Only Add Selected Fo	y Amendment Form	Governance Of Add Selected F	Form To Project Cancel	0

- Forms			Find int	formation on Res	earch Authorisati	on and Monitori	ng Form
Form Name	RPH HREC	DoH HREC	SCGOPHCG	EMHS RGO	SMHS RGO	DoH RGO	Q
Amendment Form	15000°	2220	1922	9210	1212	0.12	
Documents						A	Add

### Form can be added and edited by all PMs

#### Amendment Form

	Form is checked out to you for editing
Next >>	Index: 1. Form Information 2. Declarations
1. Project Details	()
1.1 PRN:	RGS000002146
1.2 External HREC ref:	None
1.3 Project title:	Test 2A: Monitoring UAT Test - NMA - Lead WA Health HREC with WA Specialist HREC
1.4 Lead HREC:	Royal Perth Hospital HREC (EC00270)
1.5 Site:*	Select all that apply
1.6 CPI:	Jane Dowe
1.7 Date of last Annual Progress Report submission:	N/A ()
2. Change to Project Documentation	
Does the amendment involve a change to project documentation?*	Please select 🔽
3. Change to Project Investigators	()
Does the amendment involve a change to project investigators?*	Please select 🗸
4. Addition of a Site	(C
Does the amendment involve the addition of a site?*	Please select 🖌
5. Extension of Approval	
Does the amendment involve an extension of approval?*	Please select 🗸

## Add Project Documents through Form

#### 2. Change to Project Documentation

Does the amendment involve a change to project documentation?\*

/es

Please consider that changes to the project may impact on other project documents or forms within the project e.g. Budget Form, Research Agreement.

~

For changes to approved documentation, please submit a Summary of Changes document outlining the changes in the updated version.

Use the table below to select all documents applicable to this form. You can add additional documents via the 'Add' button.

Doc ID	Document Name	Version	Status	Attached By	Date Attached	Select	Add Project	Doc
							Project title:	Te
						Add	Monitoring I	Docui
2.1 Reason	for change:*	B I	<u>u</u> ][% [	: ē   ← →] (		0	Document category:*	E
							Document type:	* P
							Document name	e:* N
			_		Words: 0	<sup>0/5000</sup>		re) it
								us
							Status:	N
							Document D	Petails
							Version number	:* 2.0
								The lette
							Is this a hard co	py (pa
							Upload Soft	Сору
							Select file:*	:\Users
							Allo	wed Ty sible
							Add	CL

Project title:	Test 2A: Monitoring UAT Test - NMA -	Lead WA He	ealth HREC with WA	A Specialist HREC
Monitoring Do	cument			
Document category:*	Ethics documents			0
Document type:*	Participant Information Sheet and Cor	nsent Form (M	Master)	~
Document name:*	Master Participant Information and C	onsent Form		
	The document name entered here will a reflect the information in the footer of y it cannot be changed by the administra using underscores.	appear in the rour documer tors. Do not e	final approval letter nt. Please ensure it i enter the file name o	r and should s correct as and avoid
Status:	Not attached			
Document Det	ails			۲
Version number:*	2.0 Ve	rsion date:*	13/08/2018	
Is this a hard copy	The version number and version date enti- etter, Please ensure it is correct as it canr (paper) or soft copy (electronic) docum	ered here will not be change nent?* Si	appear in the final ed by the administra oft copy (electronic	approval tors.
Select file*				
IC:/U	sers\Kate\Desktop\RGS Browse			
Allowe	d Types: DOC, DOCX, PDF, PPT, PPTX, XLS, X. e	LSX - Please pr	rovide a word docume	nt if
Add	Close			

## Select Project Documents in Form

#### 2. Change to Project Documentation

Does the amendment involve a change to project documentation?\*

Yes	~

Please consider that changes to the project may impact on other project documents or forms within the project e.g. Budget Form, Research Agreement.

For changes to approved documentation, please submit a Summary of Changes document outlining the changes in the updated version.

Use the table below to select all documents applicable to this form. You can add additional documents via the 'Add' button.

Doc ID	Document Name	Version	Status	Attached By	Date Attached	Select
6533	Master Participant Information and Consent Form	2.0	Authorised	Mary Davies	14/08/2018	
6534	Protocol	2.0	Authorised	Mary Davies	14/08/2018	
6535	Summary of Changes	1.0	Authorised	Mary Davies	14/08/2018	
6536	Victorian Module	1.0	Authorised	Mary Davies	14/08/2018	



#### 2.1 Reason for change:\*



## Added Form & Docs in Monitoring Tab

My Role(s): CPI Delegate

Sites	Member	rs	Project De	tails	Applicatio	ns	Monitoring	į
Declarations	Commen	its	Letters		Publications		Summary	
Timeline	History							
- Forms				Find information	on on Researc	h Authorisation	and Monitorin	g Fori
Form Name	RPH HREC	DoH HR	EC SCGO	PHCG EMI	IS RGO	MHS RGO	DoH RGO	Q
Amendment Form		5222	232	1110	5-	<u></u>	222)	
- Documents							Ad	bb
Document Name	Туре	RPH HREC	DoH HREC	SCGOPHCG	EMHS RG	SMHS RGO	DoH RGO	Ð
Summary of Changes	Other				(224)			ľ
Protocol	Protocol	1.000	<del></del>	(. <del></del> )	10000 N	2775	00000	ľ
Vlaster Participant Informat on and Consent Form	Participant Information Shee and Consent Forr (Master)	 t n	855 (				57773	Ċ
an add							Ad	bb
							Sub	omit

### Lists all PMs - select applicable one

#### 3. Change to Project Investigators

Does the amendment involve a change to project investigators?\*

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Yes

Use the table below to select all investigators applicable to this form.

Role	Name	Qualifications and Expertise Relevant to the Project 🕧	GCP Certified	Student?	Name and Location of Student Supervisor	Site(s) for Which the Investigator Is Responsible	Select
125		Haematologist.					
	<u>Ms Jane</u>	There is a researcher within all of us just waiting to be let loose Being 'good' according to the Oxford English Dictionary can be aligned with a multitude of properties of which "high quality", "competent" and "skillful" are amongst those listed to name a few. We believe that the qualities required to be good researcher can be broken down into more specific core competencies. Here are the thoughts of the Mustard team, in no particular order					
	The	"As a market researcher you are constantly analysing a				_	$\overline{}$
CPI	University of Western Australia	variety of factors. Why does the client ultimately want to do this research? What is the appropriate methodology? When should this research take place? What are the appropriate questions to ask and how? Why did the respondent say that? What are the findings telling us? Why are they telling us that? How do I best communicate the findings? etc. On a daily basis researchers must be able to take a step back and analyse the situation presented to them. The obvious answer is not necessarily the right one" (Gareth Hodgson) "You have to be able to see the bigger picture as well as the detail. People often find it easier to do one or the	Yes	No		All	

#### health.wa.gov.au

### Lists all Sites - select applicable one

V

Yes

#### 4. Addition of a Site

Does the amendment involve the addition of a site?\*

ate Name	Organisation Type	Jurisdiction	Region	Site Status	Select
Department of Health	Public	WA	Department of Health	Authorised	
iona Stanley Hospital	Public	WA	South Metropolitan Health Service	Authorised	
Royal Perth Hospital	Public	WA	East Metropolitan Health Service	Authorised	
ir Charles Gairdner Hospital	Public	WA	North Metropolitan Health Service	Authorised	
The Alfred Hospital	Public	VIC	South Division	Pending	
he Royal Melbourne Hospital	Public	VIC	South Division	Pending	

4.1 Reason for change:\*

21	
21	

C

## **Extension Approval & DoH Update**

Does the amendment involve an extension of approval?*	Yes 🗸	
5.1 Approval expiry date:	13/08/2023	0
5.2 Requested approval date:*	13/08/2023	6. Department of Health Data Collections - Data and/or Linkage Update
5.3 Reason for change:*	BIUX	Does the amendment involve Department of Health data collections?*
	Follow up with cor	Please discuss all data amendment requests with Data Services prior to completing this form. Amendment applications may require submission of new or amended documentation to reflect the changes in your data application. Projects approved over 12 months ago may require a new Application for Data Form with all attachments. Moreover, ongoing, regular updates of data are only available if these were specified in the original application. Extraction updates should not request data past the current year. Requests for identifiable data will require an amendment to project documentation. It should include updated version of the Application for Data Form and the Protocol, with a Summary of Changes document outlining the changes.
		6.1 Security Plan
		6.1.1 Has the location of where the data is stored/analysed been changed?*
		6.2 Data Details
		6.2(a) The change to the project relates to:*
		6 2/b) Select which data collections are
		impacted by this amendment:*

Next >>

Save

Save and Close

Mark Complete

Words: 84/5000

Lorem ipsum dolor sit amet, consectetur adipiscing elit. Etiam

Cancel

consectetur luctus metus, id sollicitudin mi bibendum id. Donec id suscipit turpis. Morbi euismod, dolor id varius feugiat, tellus dolor finibus justo, eget dapibus magna massa condimentum ligula. Pellentesque pulvinar,

#### Mark Complete only keeps selected information

3. Change	to Project Inv	vestigators							1
Does the amo project invest	endment involve tigators?	e a change to	Yes						
Role	Name	Qualifications an Relevant to the P	d Expertise roject 🕧	GCP Certified	Student?	Name and Student St	Location of	Site(s) for V Investigato Responsible	Vhich the r Is e
PI Delegate, RGM	<u>Ms Sarah</u> <u>Wilson</u> Sir Charles Gairdner Hospital			Yes	No			RGM: Sir Cl Gairdner Ho	harles ospital
3.1 Reason fo	or change:		Joined proj	ject will have	access to id	lentifiable da	ta.		0
4. Additio	n of a Site								٢
Does the ame site?	endment involve	the addition of a	Yes						
Site Name			Organisatio	on Type	Juris	sdiction	Region		Site Status
The Royal M	elbourne Hospita	al	Public		VIC	9	South Div	ision	Pending
4.1 Reason fo	or change:		Add The Re	oya <mark>l</mark> Me <mark>l</mark> bou	rne Hospital	as an additic	onal site under	NMA.	0

#### Alternative to adding a doc through a Form – Add a doc through the Monitoring Tab

My Role(s): RGM, PI De	egate							
Sites	Memb	ers	Project D	)etails	Application	s	Monitori	ing
Declarations	Comme	ents	Lette	rs	Publication	s	Summa	iry
Timeline	Histo	гу						
- Forms				Find information	on on Research	Authorisation	n and Monito	oring Form
Form Name	RPH HREC	DoH H	REC SCG	OPHCG EMH	IS RGO SM	IHS RGO	DoH RGO	Q
Amendment Form								
- Documents								Add
Document Name	Туре	RPH HREC	DoH HREC	SCGOPHCG	EMHS RGO	SMHS RGO	DoH RG	io Q
Victorian Module	Other	835	65554	10000	855	1757	1.57.5	C
Summary of Changes	Other						0466	ď
Protocol	Protocol	328	1222.0	1223	222	(2223)	8-2014 	C
Master Participant	Participant	222					0.000	Ľ
Information and Consent Form	Information Sl and Consent F	heet Form						
	(Master)							
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							S	Submit
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				Asso	ociate	è		
				with c		$\sim$		
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## **Document Added**

My Role(s): RGM			88					
Sites	Member	s	Project De	etails	Applic	ations	Monitoring	
Declarations	Commen	ts	Letters		Public	Publications		
Timeline	History							
🖃 F <mark>o</mark> rms				Find inform	ation on Res	earch Authorisatio	on and Monitorin	g Forms
Form Name	RPH HREC	DoH HR	EC SCGO	PHCG E	MHS RGO	SMHS RGO	DoH RGO	Q
Progress Report	12221	12/201	8 <u>212</u> 3	122	2	022	45269	
Amendment Form	1000	8555	1000	1070	a.	7.77	(777)	
Documents							Ad	dd
Document Name	Туре Г	RPH HREC	DoH HREC	SCGOPHC	G EMHS	RGO SMHS RO	O DoH RGO	Q
Data Application Form	Data Application Form	, 1 <u>910</u> 9	1111	522	12121	1922 C	992 V.	2 1
Victorian Module	Other							ľ
Summary of Changes	Other	12223	1223	35252	12221	1922		C
Protocol	Protocol	1.777	(5 <b>555</b> )	7.73		2 <del>555</del>		Ø
Master Participant Information and Consent Form	Participant Information She and Consent For (Master)	et m	1992.00	202	19225	2000	y	ď

Forms and Docs can be removed if form has <u>not</u> been authorised or doc has <u>not</u> been attached to a form (you have to un attach a doc from the form prior to deletion)



#### health.wa.gov.au

#### All Monitoring Forms can be authorised by the CPI, CPI Delegate, PI or PI Delegate from any site

#### My Role(s): RGM, PI Delegate

Sites	Members	Project Details	Applications	Monitoring
Declarations	Comments	Letters	Publications	Summary
Timeline	History			

#### Amendment Form

<< Previous	Edit	Print	Close	Index:	2. Declarations	۲
			0.000			

#### 7. Declarations

I declare that:

- 1. The information provided is true and accurate
- 2. All new project investigators are made aware of and comply with the ethical and governance requirements of the project; and conditions of ethics approval and site authorisation, including amendments
- Any further changes to the project documentation, timeline, personnel or sites will be notified in writing to the reviewing HREC(s) and/or the RG Office for any site impacted by the amendment.

This form can be signed and authorised by the CPI, CPI Delegate, PI or PI Delegate.

	- 1		
<< Previous	Edit	Close	Sign & Authorise

#### Authorised and ready to Submit (click on the --- to see the status of a form/doc)

My Role(s): RGM, PI Delegate

Sites	Members	5	Projec <u>t De</u>	tails	Applicatior	15	Monitoring	
Declarations	Comment	s	Letter	;	Publication	ıs	Summary	
Timeline	History					74		1
- Forms				Find informat	ion on Research	Authorisation	and Monitorin	g Forms
Form Name	RPH HREC	DoH HF	REC SCGO	PHCG EM	HS RGO SI	MHS RGO	DoH RGO	Q
Amendment Form		(777)	ate)	1000	( <del>) (</del>	5		
Documents							Ad	ld
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Victorian Module	Other							ď
Summary of Changes	Other	12222	12223	622	12020	222	<u>999</u>	ď
Protocol	Protocol	(7772)	1957		(777)			ľ
Master Participant Information and Consent Form	Participant Information Shee and Consent For (Master)	et m			(ana)	(and a		ď
	(Master)							



#### Statuses Examples for a Site Final Report

	e V	ersion Status	Lock	ed By Upda	ated By Sul Dat	omitted te	Validation Date	n Review Completio Date	Approval on Decision I	Date
Site Final Re Departmen	eport for 1 t of Health	In use	Marg Brow	aret Marg n Brow	garet /n					
View History for	Site Final R	eport for Departm	ent of Healt	th						
Form Name	Version	Status	Locked By	Updated By	y Submitte Date	d Vali Date	dation e	Review Completion Date	Approval Decision Date	
Site Final Report for Department of Healt	1 h	Completed		Margaret Brown						
		View History for	Site Final Repo	ort for Departme	ent <mark>o</mark> f Health					
		Form Name	Version	Status	Locked By	Updated By	Submitted Date	Validation Date	Review Completion Date	Approval Decision Date
		Site Final Report for Department of Healt	1 h	Authorised		Margaret Brown				

#### Select Form & Docs to submit and click submit – docs will be auto selected if imbedded in form – can be deselected

PRN: Project title:	RGS0000002146 Test 2A: Monitoring UA1 HREC	Test - NMA - Le	ead WA Health HF	REC with WA Speci	alist		
	(	RPH HREC	DoH HREC	SCGOPHCG	EMHS RGO	SMHS RGO	DoH RGO
Amendment Fo	orm			(1)	•		•
Data Applicatio	on Form						
Victorian Modu	ule						
Summary of Cl	nanges						
Protocol		$\checkmark$	$\checkmark$				
Master Particip Form	ant Information and Consen	t 🔽					

# Successful submission onscreen message, and email to person who clicks submit. Status can be checked & green arrows shown

My Role(s): RGM, PI Dele	gate							
Sites	Member	rs	Project Det	ails	Applic	ations	Monitorin	g
Declarations	Commen	its	Letters		Publica	ations	Summary	6
Timeline	History							
- Forms				Find informa	tion on Rese	earch Authorisati	on and Monitori	ng Forms
Form Name	RPH HREC	DoH HREC	SCGOP	HCG EN	IHS RGO	SMHS RGO	DoH RGO	Q
Amendment Form 14/08/2	018 🖸	0			ē		212.0	
- Documents							A	١dd
Document Name	Туре	RPH HREC	DoH HREC	SCGOPHCG	EMHS	RGO SMHS RO	30 DoH RGO	Q
Data Application Form	Data Applicatior Form	n O	0					
Master Participant Information and Consent Form	Participant Information She and Consent For (Master)	et rm	0	<u>, 111</u> 3	NULL.		12228	
Protocol	Protocol	0	0	12/201	-212		12223	
Summary of Changes	Other	0	0		1000		1000	
Victorian Module	Other	0	0	22222	19222			
							F	Add

Submit

#### Submitted Form and Document Details and Statuses

	🖃 Docume	ints													
	Document I	Vame	Туре	RPH HREC	DoH HREC	SCGOPHCG	EMHS RGO	SMHS RGO	DoH RGO	Q					
		tion Form	Data Application Form	0	0										
View H	listory for Data Appli	ication Forr	n												
DocId	Document Name	Version / Date	Status	Attached By	Date Attached	Submitted Date	l Validation Date	n Re <mark>vi</mark> ew Complet Date	Approv ion Decisio	val on Date					
6539	Data Application For m	2.0 14/08/2018	Submitted	Margaret Brown	14/08/201	14/08/2	018								
							Thank y	ou. Your moni	toring submis	sion was succes	ssful.				
-							🖃 Forms				Find	l information on P	esearch Author	isation and Monito	ring Forms
							Form Nam	10	RPH H	REC DoH H	REC SCGOPHC	G EMHS RGC	SMHS RO	O DoH RGO	Đ,
Ξ.									2018 🔘	0					
					View His	tory for Am	nendment Fo	orm 14/08/20	18						
					Form Nam	ie in in	Version	Status	Locked By	Updated By	Submitted Date	Validation Date	Review Completion Date	Approval Decision Date	
					Amendme 8/2018	nt Form 14/0	1	Submitted			14/08/2018				D
														С	lose

#### Can't submit to RG Office an (Ethics) Amendment Form or Gov Only Amendment Form (with ethics info) until Ethics Amendment form is approved by Ethics.

		RPH HREC	DoH HREC	SCGOPHCG	EMHS RGO	SMHS RGO	DoH RGO
1	Progress Report						
Ħ	Amendment Form 14/08/2018	0	0	•		•	
W	Data Application Form	0	Message from w	ebpage	0	0	23
	Master Participant Information and Consent Form	0	The subn	Amendment Form n nitted to governance	nust be approved b	y ethics before it car	n be
2	Protocol	0					
W	Summary of Changes	0					ок
w	Victorian Module	0	0				

NB: Can submit an Ethics Amendment to Gov if no additional governance docs required, no need for a Gov Only Amendment

# Amendment Forms and Docs validated by Ethics & email sent to person making submission. Dashboard updated.



#### Forms and Documents can be AIRed either on Validation or Review – an email will be sent on Validation and Letter on Review to CPI/CPI Delegate or PI/PI Delegate



#### Forms and Documents can be AIRed – check the status in the view history by clicking on the ? Mark. Click new version to add a new version of the Document.

View History for CAHS Participant Information and Consent Form

DocId	Document Name	Version / Date	Status	Attached By	Date Attached	Submitted Date	Validation Date	Review Completion Date	Approval Decision Date
6496	CAHS Participant Information and Consent Form	2.0 19/07/2018	AIR	Samantha Grogan	31/07/2018	31/07/2018	01/08/2018 View	01/08/2018	

#### Add existing doc with new version for AIR

X

#### Add Project Document

PRN:	RGS000000072	
Project title:	Parent access to hospital services. Do they know how to get the services they need	
Monitoring Do	cument	
Document category:*	Ethics documents	0
Document type:*	Participant Information Sheet and Consent Form (Master)	
Document name:*	CAHS Participant Information and Consent Form	
	The document name entered here will appear in the final approval letter and should reflect the information in the footer of your document. Please ensure it is correct as it cannot be changed by the administrators. Do not enter the file name and avoid using underscores.	
Status:	Not attached	
Document Det	ails	Û
Version number:	Version date:	
7 b	'he version number and version date entered here will appear in the final approval etter. Please ensure it is correct as it cannot be changed by the administrators.	

# Governance Only Amendment Form – can only be completed by PMs associated with site

#### Governance Only Amendment Form 001

		Form is	checked out to you for editing.
Next >>		Index:	1. Form Information
1. Project Details		1	1. Form Information 2. Declarations
1.1 PRN:	RGS000002146		
1.2 External HREC ref:	None		
1.3 Project title:	Test 2A: Monitoring UAT Test - NMA - Lead WA H HREC	Health HR	REC with WA Specialist
1.4 Lead HREC:	Royal Perth Hospital HREC (EC00270)		
1.5 RG Office:*	Please select		Y
1.6 Site:*	Select all that apply		
1.7 CPI:	Jane Dowe		
1.8 Date of last Annual Progress Report submission:	14/08/2018	rasuat	t.health.wa.gov.au says
2. Change to Project Documentation	te	Vou da	pp
2.1 Does the amendment involve a change to project documentation?*	Please select  Please select	select a	a RG Office associated with your site.
3. Change to Budget Form			ОК
3.1 Does the amendment involve a change to the Budget Form?*	Please select	тал	
4. Attach an Amendment Form			
4.1 Do you need to attach an ethics approved Amendment Form for reference?*	Please select <b>*</b>		
Next >> Save Save and Clo	ose Mark Complete Cancel		

# Governance Only Amendment Form – update docs and ensure progress reports are up to date

Governance Only .	Amendmer	t Form 00	1	face distant						
Next >>		I	ndex: 1. Form Informat	tion						
1. Project Details				1						
1.1 PRN:	RGS000002146			4						
1.2 External HREC ref:	None									
1.3 Project title:	Test 2A: Monitoring UAT T HREC	fest - NMA - Lead WA Hea	Ith HREC with WA Spec	ialist						
1.4 Lead HREC:	Royal Perth Hospital HREC	C (EC00270)								
1.5 RG Office:*	East Metropolitan Health	Service Research Ethics an	d Governance Unit	~						
1.6 Site:*	Royal Perth Hospital 🗙	Over	due annual progress re	enorts may affer	t the processing of amend	ments				
1.7 CPI:	Jane Dowe	Over	uue annuai progress re		t the processing of amend	inchis.				
1.8 Date of last Annual Progress Report submission:	14/08/2018			0		Add Project D	ocuments			ı ×
2. Change to Project Documentation						PRN:	RGS000002146			
2.1 Does the amendment involve a change to project documentation?*	Yes					Project title:	Test 2A: Monitoring UAT Tes	st - NMA - Lead WA Health HREC with WA S	Specialist HREC	
Please consider that changes to the project may Research Agreement.	impact on other project docu	uments or forms within the	e project e.g. Budget Forr	m,		Monitoring Do	cument			
For changes to approved documentation, please version.	submit a Summary of Chang	es document outlining the	e changes in the updated	i		Document category:*	Governance documents (fin	al) 🗸	G	2
Use the table below to select all documents app	licable to this form. You can a	dd additional documents	via the 'Add' button.			Document type:*	Insurance Certificate of Curr	rency	~	
Doc ID Document Name	Version Status	Attached By	Date Attached	Select		Document name:*	Insurance Certificate			L.
6540 Insurance Certificate	2.0 Authorised	<u>Margaret Brown</u>	15/08/2018			1	The document name entered reflect the information in the it cannot be changed by the using underscores.	here will appear in the final approval letter a footer of your document. Please ensure it is a administrators. Do not enter the file name an	ind should correct as d avoid	
						Associated site:*	Department of Health ×	Royal Perth Hospital 🗙		
						Status:	Not attached			
						Document Det	ails		()	
						Version number:*	2.0	Version date:* 15/08/2018		
							The version number and version etter. Please ensure it is correct	n date entered here will appear in the final ap t as it cannot be changed by the administrato	proval vrs.	L
						Is this a hard copy	(paper) or soft copy (electron	ic) document?* Soft copy (electronic)	~	
						Upload Soft Co	opy (Electronic) File			
						Select file:* C:\U	sers\Kate\Desktop\RGS Bro	wse		
						Allowe	d Types: DOC, DOCX, PDF, PPT, P	PTX, XLS, XLSX		~
						· ·				

#### Governance Only Amendment Form – update budget

				body		Please ensure	an updated version of	the Budg
3. Char	nge to Budget	Form						(1)
3.1 Does t	the amendment	involve a c	hange to	Yes 🗸				
Select the	Budget Form th	at requires	amendment:					
Form Na me	Sites	Version	Status	Submission Date	Validation Date	Review Completion Date	Authorisation Decision Date	Select
Budget F orm	Royal Perth Hospital	1.0	Authorised	13/08/2018	13/08/2018	13/08/2018	13/08/2018	
The Budge amendme	et Form must be nt form.	updated vi	a the placeho	older link created or	n the Monitoring	g Tab and must be sub	mitted together with thi	
3.2 Keaso	n for change:*			BIU	<u>x</u> 6 🕯	<ul> <li>♠</li> <li>♦     <li>Ω     <li>!=     </li> </li></li></ul>		
				Updated Rese	arch Departmer	nt Costs		

#### Governance Only Amendment Form – update budget

								1	
				body		Please ensure	an updated version of t	he Budget I	Form is submitted with the ame
3. Chan	ge to Budget	Form						Û	
3.1 Does t	he amendment i t Form?*	nvolve a c	hange to	Yes 🗸					
Select the	Budget Form tha	t requires	amendment:						
Form Na me	Sites	Version	Status	Submission Date	Validation Date	Review Completion Date	Authorisation Decision Date	Select	
Budget F orm	Royal Perth Hospital	1.0	Authorised	13/08/2018	13/08/2018	13/08/2018	13/08/2018		
The Budge amendmer 3.2 Reasor	t Form must be unt form. • for change:*	updated via	a the placeho	older link created or	the Monitoring	a Tab and must be sub	mitted together with this	0	
The Budge amendmen 3.2 Reasor	it Form must be u nt form. n for change:*	updated vi	a the placeho	older link created or	arch Departmer	a Tab and must be sub	mitted together with this	0	



Sponsor can view GOA Form but can't view Budget

#### health.wa.gov.au

Sites	Members	P	roject Details	Applica	ations	Monitorin	g	
Declarations	Comments		Letters	Publica	ations	Summary	<i>,</i>	
Timeline	History							
🖃 Forms			Find inf	ormation on Rese	earch Authorisatio	on and Monitor	ing Forms	
Form Name	RPH HREC	DoH HREC	SCGOPHCG	EMHS RGO	SMHS RGO	DoH RGO	Q	
Governance Only Amendmen orm 001	tF	(533)	1.555	555	555	6773) 6		
Amended Budget Form 001	1115	12222	82023	613	3225	12224		
Progress Report 14, 08/2018	0	0	0	0	0	0		
Amendment Form 14/08/2018	8 🔘	0		200	1202	12223		
My Role(s): RGM, PI Delegate			0					
Sites Members Summary Timeline	Project Detai History	s Applicatio	ons Monitor	ing Declara	ations Corr	ments	Letters	Publications
Amended Budget	Form 001							
Next >> Print Close	]							Index: 1. Department(s) Selection
	1							Can't find a department? Contact RGS Support
Section 1 of 3 - Department(s) Selection	1							
Royal Perth Hospital								
Proposed number of participants in this site: 5 *Participant also includes a person's data, information	or biological sample.						Expected projec	t timeframe for this site: 2 year(s)
Department Name Type		Head Of Dept	Invitation Status	Invited By	HoD Delegate	Invitation Status	Invited	By Authorisation Status
Cardiology Research Dep	artment	Oliver Walker	Accepted	Margaret Brown				Authorised
Pharmacy Supporting De	epartment	George Wright	Accepted	Margaret Brown				Authorised
Next >> Close				Unauthorise				

#### Amendment Forms and Docs approved by Ethics can then be attached to Gov Only Amendment for RGOs

Use the table below to select all documents applicable to this form. You can add additional documents via the 'Add' button.



#### Nominate RGO and submit

#### Submit Project Project PRN: RGS0000002146 Project title: Test 2A: Monitoring UAT Test - NMA - Lead WA Health HREC with WA Specialist HREC SCGOPHCG EMHS RGO DoH RGO RPH HREC DoH HREC SMHS RGO Governance Only Amendment Form 001 M • ~ ------Amended Budget Form 001 ~ -Ĩ -------O 0 m Amendment Form 14/08/2018 Insurance Certificate Data Application Form 0 O Master Participant Information and Consent 🕤 O $\Box$ Form 0 0 Protocol $\square$ 23 Message from webpage You must submit both the GA and ABF together for first submission. b add comments about this submission, please go to the Comments tab. Submit Cancel OK

### Safety Report

My Role(s): Sponsor Applications Publications Safety Report Form is checked out to you for editing. 1. Report Information Index: 1. Report Information 2. Declarations 1. Project Details 1.1 PRN: RGS000002146 1.2 External HREC ref: None Test 2A: Monitoring UAT Test - NMA - Lead WA Health HREC with WA Specialist 1.3 Project title: HREC 1.4 Lead HREC: Royal Perth Hospital HREC (EC00270) 1.5 Site:\* Fiona Stanley Hospital X 1.6 CPI: Jane Dowe 1.7 Sponsor organisation name: 2. Serious Breach 2.1 Do you need to report on a serious Please select... \* breach?\* 3. Significant Safety Issue 3.1 Do you need to report on a significant Please select... \* safety issue?\* 4. Local SUSAR or USADE 0 4.1 Do you need to report on a local SUSAR or Please select... \* USADE?\* 5. Annual Safety Report and/or Updated Investigator Brochure (IB) 5.1 Do you need to report on an Annual Safety Report and/or updated investigator brochure Please select... ▼ (IB)?\*

#### Safety Report – contains guidance who to submit to

A SSI is a safety issue applies to: Urgent impact on the continued ethical acceptability of the trial. The PI must report to the impact on the continued ethical acceptability of the trial. The PI must report to the event, all SAEs (as per protocol), conjenital abnormality / birth defect, and any USM instigated at the site. - as specified by the protocol all Safety Critical Adverse Events. - RG Office – within 72 hrs of becoming aware of the event, all SAEs (as per protocol), conjenital abnormality / birth defect, and any USM instigated at the site. - as specified by the protocol all Safety Critical Adverse Events. - RG Office – within 72 hrs of becoming aware of all SSIs. - An Amendment within 15 days of making a decision to halt / term suscipit turpis. Morbi euismod, dolor id varius feugiat, tellus vestibulum bibendum. Phasellus auctor facilisis nunc, vel mollis diam pellentesque vel. - end is finibus. Nullam lacreet magna aliquam, a pellentesque vel. - end - Measures taken: - Morbi euismod, dolor id varius feugiat, tellus dolor finibus justo, eget dapibus magna massa condimentum ligula. - Pellentesque pulvinar, turpis nec convaliis luctus, dolor nunc consecteur tellus, eu gravida sem neque et purus. Proin tincidunt nec urum aid finibus. Nullam lacreet magna aliquam, a pellentesque vel. - B I U Morbi euismod, dolor id varius feugiat, tellus dolor finibus justo, eget dapibus magna massa condimentum ligula. - Pellentesque pulvinar, turpis nec convaliis luctus, dolor nunc consecteur tellus, eu gravida sem neque et purus. Proin tincidunt nec urum aid finibus. Nullam lacreet magna aliquam, a pellentesque vel. - body - Words: 84/5000 - 5. Further actions planned: - or pellentesque vel. - body - Words: 84/5000 - 5. Further actions planned: - or pellentesque vel. - body - or pellentesque vel. - body - or pellentesque vel. - body - or pellentesque vel.	.1 Do you need to report on a significant after a significant a signific	Yes	This section is applicable to both ethics and governance.	
The PI must report to the: <ul> <li>Sponsor – within 24 hrs of becoming aware of the event, all SAEs (as per protocol), congenital abnormality / bith defect, and any USM instigated at the site.</li> <li>as specified by the protocol all Safety Critical Adverse Events.</li> <li>Reasons for action:</li> <li>B I U C C C C C C C C C C C C C C C C C C</li></ul>	2 Significant safety issue applies to:*	Urgent S	A SSI is a safety issue that could adversely affect the safety of participants or mater impact on the continued ethical acceptability of the trial.	ially
<ul> <li>Sponsor nust report to the HREC (through the CPI), PI, and TGA:</li> <li>as specified by the protocol all Safety Critical Adverse Events.</li> <li>RG Office – within 72 hrs of becoming aware of all SSIs.</li> </ul> 3 Reasons for action: <ul> <li>B I U I I I I I I I I I I I I I I I I I</li></ul>		Tempora Reasons	The PI must report to the:	
B Reasons for action:   B I U K C C An Mendment within 72 hrs of the measure being taken. • Any USM within 72 hrs of the measure being taken. • Any USM within 72 hrs of the measure being taken. • Any USM within 72 hrs of the measure being taken. • Any USM within 72 hrs of the measure being taken. • Any USM within 72 hrs of the measure being taken. • An Mendment within 15 days of making a decision to halt / term trial. Pellentesque pulvinar, turpis nec convalis luctus, dolor nuc consectetur tellus, eu gravida sem neque et purus. Proin tincidunt nec uma id finibus. Nullam laoreet magna at magna aliquam, a pellentesque vel. body Words: 84/5000 4 4 Measures taken: I U K C C An Angendment tellus, dolor id varius feugiat, tellus dolor finibus justo, eget dapibus magna massa condimentum ligula. Pellentesque pulvinar, turpis nec convalis luctus, dolor nuc consectetur tellus, eu gravida sem neque et purus. Proin tincidunt nec uma id finibus. Nullam laoreet magna at magna aliquam, a pellentesque orci vestibulum. Pellentesque euismod, dolor id varius feugiat, tellus dolor finibus justo, eget dapibus magna massa condimentum ligula. Pellentesque pulvinar, turpis nec convalis luctus, dolor nuc consectetur tellus, eu gravida sem neque et purus. Proin tincidunt nec uma id finibus. Nullam laoreet magna at magna aliquam, a pellentesque orci vestibulum. Pellentesque euismod nulla vitae vestibulum bibendum. Phasellus auctor facilisis nunc, vel mollis diam pellentesque vel. body Words: 84/5000 2 6 Further actions planned:		Early Ter Reasons	<ul> <li>Sponsor – within 24 his or becoming aware of the event, all SAEs (as per protocol congenital abnormality / birth defect, and any USM instigated at the site.</li> <li>as specified by the protocol all Safety Critical Adverse Events.</li> <li>RG Office – within 72 hrs of becoming aware of all SSIs.</li> </ul>	),
B I U       Image: Section 10 and 10 an	Reasons for action:*		The sponsor must report to the HREC (through the CPI), PI, and TGA:	
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### Safety Report – add documents

Add Project <mark>E</mark>	)ocuments		>
Monitoring Do	ocument		~
Are you adding a i document?*	new version of an existing No		
Document category:*	Ethics documents	0	
Document type:*	Other		
Document name:*	Annual Safety Report		
Status:	reflect the information in the footer of your document. Please ensure it is correct as it cannot be changed by the administrators. Do not enter the file name and avoid using underscores. Not attached		
Document De	tails		
Version number:	1.0 Version date: 15/08/2018		
Is this a hard copy	The version number and version date entered here will appear in the final approval letter. Please ensure it is correct as it cannot be changed by the administrators. (paper) or soft copy (electronic) document? Soft copy (electronic)		
Upload Soft C	opy (Electronic) File		
Select file:* C:\L	Isers\Kate\Desktop\RGS Browse		
Allowe	d Types: DOC, DOCX, PDF, PPT, PPTX, XLS, XLSX		
Add	Close		~

# Safety Report – can submit Form and Docs to HREC & RG Office at same time – select what Docs go with Form

- P	roject								
P	RN:	RGS000002146							
P	roject title:	Test 2A: Monitoring UA HREC	T Test - NMA - I	Lead WA Health	HREC with WA Spe	cialist			
			RPH HREC	DoH HREC	SCGOPHCG	EMHS RGO	SMHS RGO	DoH RGO	
	Safety Report								
Ĩ	Governance On 15/08/2018	ly Amendment Form 001	(***)	(3444) (3444)		0		0	
Ĩ	Amended Budg	et Form 001 15/08/2018	<del></del>	(19 <del>64)</del>		0		0	
1	Amendment Fo	rm 14/08/201 <mark>8</mark>	0	0	(1)	•		•	
	Investigator Bro	ochure							
9	Executive Sumn	nary							
2	Annual Safety R	leport							
2	Insurance Certif	licate				0		0	
9	Data Applicatio	n Form	0	0					
	Master Participa Consent Form	ant Information and	0	0					
2	Protocol		0	0					
9	Summary of Ch	anges	0	0					
A	Victorian Modu	le	0	0					

#### **Progress Report**

×

HREC with WA

Add Project Forms

PRN:	RGS000002146
Project title:	Test 2A: Monitoring UAT Test - NMA - Lead WA Health
	Specialist HREC

Select Monitoring Forms

Form Name	Select
Amendment Form	0
Progress Report	۲
Site Final Report	0
Safety Report	0
Project Final Report	0
Governance Only Amendment Form	0

An active (un-submitted) Progress Report exists for this project. You must submit or remove the current Progress Report before adding a new one.

Add Selected Form To Project Cancel

Rer

m

My Role(s): CPI Delegate

eport

- Edit and complete, prepopulated from Project Details.
- Update Project Details if wrong
- All PMs can complete Project section.
- 2nd Progress Report will populate from 1<sup>st</sup> Report e.g. Participants

		Form is	s checked out to you for editing.
	Next >>	Index:	1. Whole of Project 2. Project at Site 3. Declarations
	1. Project Details		o. Doularanons
ninder	1.1 PRN:	RGS0000002146	
	1.2 External HREC ref:	None	
onth &	1.3 Project title:	Test 2A: Monitoring UAT Test - NMA - Lead WA Health HREC with WA Specialist HREC	
Neek	1.4 Lead HREC:	Royal Perth Hospital HREC (EC00270)	
_	1.5 CPI:	Jane Dowe	
	2. Project Summary		
	2.1 Approval expiry date:	13/08/2023	0
	2.2 Project summary:		0
	Pradaxa (dabigatran) is an anticoagulant that work rhythm (atrial fibrillation). Preventing these blood of	s by blocking the clotting protein thrombin. Pradaxa is used to prevent blood clots from forming because o clots helps to reduce the risk of a stroke. Side effects of Pradaxa include:	f a certain irregular heart

·bruising and minor bleeding (such as nosebleeds and bleeding from cuts),

#### Progress Report – Site Report

- Can only be completed by PMs associated with site.
- CPI Delegate must complete information for sites outside WA.
- Black square indicates comments are included.

My Role(s): CPI Delegate										
Progress R	leport									
	1						Form is	checked o	ut to you for	editing
<< Previous Nex	τ >>						Index:	2. Project	at Site	~
7. Site Report										
Actual Start Date	Expected Participant Numbers	Actual Participant Numbers Recruited to Date	Actual Date of First Participant Recruitment	Expected Date of Last Participant Recruitment	Recruitment Status	Issues With Recruitment Since Last Report?	Site Spec Safety Is: Since Las	cific sues st Report?	Site Specific Amendmen Since Last R	ts teport?
Department of Health										
14/08/2018	20	20	14/08/2018	14/08/2018	Active, not recruiting	No	No	~	Yes 🗸	
Fiona Stanley Hospital										
14/08/2018	5	1	14/08/2018	15/08/2018	Enrolling by invitation	Yes 🔽 📕	Yes	<b>~</b>	Yes 🗸	
Royal Perth Hospital										
14/08/2018	5	2	14/08/2018	15/08/2018	Enrolling by invitation	No	No	~	Yes 🗸	
Sir Charles Gairdner Hospi	tal									
14/08/2018	5	5	14/08/2018	15/08/2018	Enrolling by invitation	No	No	~	Yes 🗸	
The Alfred Hospital										
14/08/2018	5	1	14/08/2018	15/08/2018	Enrolling by invitation	Yes 🔽 🗭	No	~	Yes 🗸	

### Site Final Report to RG Office

My Role(s): RGM, PI Deleg	jate			
Sites	Members	Project Details	Applications	Monitoring
Declarations	Comments	Letters	Publications	Summary
Timeline	History			
Site Final R	eport		Form is chi	ecked out to you for editing. Report Information
1. Project Summary			2	Declarations
1.1 PRN:	RG	S000002146		
1.2 External HREC ref:	No	ne		
1.3 Project title:	Tes HR	t 2A: Monitoring UAT Test - N EC	IMA - Lead WA Health HREC	with WA Specialist
1.4 Lead HREC:	Ro	al Perth Hospital HREC (EC00	270)	
1.5 CPI:	Jan	e Dowe		
1.6 Approval expiry date:*	13	/08/2023		0
1.7 Project summary:				0
Pradaxa (dabigatran) is an ar forming because of a certain effects of Pradaxa include: •bruising and minor bleeding •nausea, •abdominal or stomach pain •stomach upset, •indigestion, •heartburn, •diarrhea, •skin rash, or •itching. Tell your doctor if you have s	nticoagulant that works by n irregular heart rhythm (at g (such as nosebleeds and ), serious side effects of Prac	blocking the clotting protein rial fibrillation). Preventing the bleeding from cuts), laxa including:	thrombin. Pradaxa is used to ese blood clots helps to reduc	prevent blood clots from te the risk of a stroke. Side

### **Project Final Report to HREC**

My Role(s): RGM, PI Delegate

Sites	Members	Project Details	Applications	Monitoring	
Declarations	Comments	Letters	Publications	Summary	
Timeline	History				
Project Fina	al Report				
5	1		Form is	s checked out to you for e	diting
Next >>			Index:	1. Report Information	~
1. Project Summary	RG	5000002146			
1.2 External HREC ref:	No	ne			
1.3 Project title:	Tes HRI	t 2A: Monitoring UAT Test - N EC	MA - Lead WA Health HI	REC with WA Specialist	
1.4 Lead HREC:	Roy	al Perth Hospital HREC (EC002	270)		
1.5 CPI:	Jan	e Dowe			
1.6 Approval expiry date:*	13	/08/2023			0
1.7 Project summary:					0

1.7 Project summary:

Pradaxa (dabigatran) is an anticoagulant that works by blocking the clotting protein thrombin. Pradaxa is used to prevent blood clots from forming because of a certain irregular heart rhythm (atrial fibrillation). Preventing these blood clots helps to reduce the risk of a stroke. Side effects of Pradaxa include:

#### Project Final Report – submit & email

PRN:	RGS00000	02146					
Project title:	Test 2A: M HREC	onitoring UAT Test - NMA -	Lead WA Health	HREC with WA Spe	cialist		
		RPH HREC	DoH HREC	SCGOPHCG	EMHS RGO	SMHS RGO	DoH RGO
Project Final Rep Project Final F	port	Dear Ms Margaret Brown			End and	- State	
Project Final Rep	port	Dear Ms Margaret Brown PRN: RGS000002146 Project Title: Test 2A: Monit Protocol Number: 2018AZD Your submission for the abo This email is to confirm that	oring UAT Test - NMA - GH#\$-1 ve project has been reco the following forms and	Lead WA Health HREC eived in RGS.	with WA Specialist HRI	EC	
Project Final Re	port	Dear Ms Margaret Brown PRN: RGS000002146 Project Title: Test 2A: Monit Protocol Number: 2018AZDO Your submission for the abor This email is to confirm that Form or Document Name	oring UAT Test - NMA - GH#\$-1 ve project has been reco the following forms and Version: Submitted	Lead WA Health HREC eived in RGS. I documents have been	with WA Specialist HRI	EC	

The RGS Team

#### HREC and RG Office approval status for Forms

#### - Forms

Need help using this page?

Find information on Research Authorisation and Monitoring Forms

Form Name			Chulle DCO	Dellarca	
		DON HKEC	SIVINS KOU	DON KOU	4
Safety Report					
Governance Only Amendment Form 003 1 5/08/2018	N/A	N/A	0		
Governance Only Amendment Form 002 1 5/08/2018	N/A	N/A		0	
Amendment Form 14/08/2018	0	0	×	×	
Site Final Report for Department of Health	012	<u>222</u> 53		0	
Site Final Report for Fiona Stanley Hospital			٢		
Project Final Report	0	0		Sec. 1	
Safety Report 15/08/2018	0	0	0		
Governance Only Amendment Form 001 1 5/08/2018	N/A	N/A		0	
Amended Budget Form 001 15/08/2018	N/A	N/A		0	
Progress Report 14/08/2018	0	0	0	0	
Site Final Report for Royal Perth Hospital					
Site Final Report for Sir Charles Gairdner Ho spital	[ <sup></sup>	1002) 1		5110 <sup>-</sup>	
Governance Only Amendment Form 004 1 5/08/2018	N/A	N/A	(	(a)	
Governance Only Amendment Form 005 1 5/08/2018	N/A	N/A			