## **NeuroNEXT Network**

## **Standard Operating Procedure (SOP)**

Specifications Development, Testing Plans, and Validation Documentation Version 3.0

# SOP NN DM 1004

Originators: NeuroNEXT CCC and DCC Personnel

Reviewed and Approved by:	
Signature and Date:	
DocuSigned by Christopher Coffey	
Christophur Coffey   1 approve this document 17-Feb-2023   3:48:29 PM PST	17-Feb-2023
C68AC8DD80334CF982AED1200765F147	
Name and Title: Christopher S. Coffey, Db	C (DCC Dringing) Investigator)
Name and Title: Christopher S. Coffey, PhI	(DCC FILICIPAL INVESTIGATOL)
Signature and Date:	
DocuSigned by Merit Cudkowicz	
Murit Cudkowicz   1 approve this document 17-Feb-2023   9:29:17 AM EST	17-Feb-2023
9F8FE4180E504C6AB0A67B835E80C644	
Name and Title: Merit E. Cudkowicz, MD N	ISC (CCC Principal Investigator)
Signature and Date:	
DocuSigned by Marianne Chase	
Marianne (Lease   approve this document 17-Feb-2023   1:24:17 PM EST	17-Feb-2023
58FE690F6BCA4F2390E3DA15BCE3F578	
Name and Title: Marianne Chase, BA (CCC	C Senior Director of Clinical Trials Operations)

Signature and Date:	
DocuSigned by DIXIE ECKLUND	
Lipprove this document  17-Feb-2023   4:23:18 PM PST	17-Feb-2023
-7006AF622EFC40B6A067A08EC02591B6	
Name and Title: Dixie J. Ecklund, RN	MSN MBA (DCC Associate Director)
Signature and Date:	
DocuSigned by Stacey Grabert	
Stacy Grabert   22-Feb-2023   11:07:16 AM EST	22-Feb-2023
60CC52B0747A44E6B2208D8D880698C0	
Name and Title: Stacey Grabert, Phar	m.D, MS, (CCC Director of Quality Assurance)
Signature and Date:	
-DocuSigned by Joan Ohayon	
Joan Chayon   1 approve this document 21-Feb-2023   6:34:40 AM PST	24 5 1 2222
72C6AAFD8CC4485582ACA0700072901A	21-Feb-2023
Name and Title: Joan Obayon PN M	SN, CRNP, MSCN (NINDS, NeuroNEXT Program
Official)	

### NN DM 1004

### NEURONEXT NETWORK STANDARD OPERATING PROCEDURE FOR SPECIFICATIONS DEVELOPMENT, TESTING PLANS, AND VALIDATION DOCUMENTATION

#### 1. POLICY

The Data Management (DM) Team at the NeuroNEXT Data Coordinating Center (DCC) participates in all aspects of clinical data management, including the development of User Specifications and Testing Plans for electronic CRFs and protocol websites, the testing of these applications, and the creation of validation documentation. Validation documentation consists of two primary components: 1. The FogBugz® tracking system, which provides a tracking mechanism and case history for specifications and testing plan development, testing results, and the location of the validation documentation (screenshots); and 2. The 'Validation Document' which contains screenshots representing testing results for each requirement listed in the testing plan.

#### 2. SCOPE

This SOP has been developed to be in alignment with federal regulations and Good Clinical Practices (GCP) as set forth in the 2016 Integrated Addendum to ICH E6(R1): Guideline for Good Clinical Practice E6(R2). The policies and procedures described in this SOP apply to the NeuroNEXT Clinical Coordinating Center (CCC) and DCC within the context of their oversight and advisory roles for the NeuroNEXT Network, and to all NeuroNEXT investigators, staff, subcontractors, or other entities associated with the NeuroNEXT Network who manage, oversee, and conduct research regulated by FDA and/or applicable review committees.

#### 3. ROLES AND RESPONSIBILITIES

For most projects, the DCC is generally responsible for the following aspects of data management: development of User Specifications and Testing Plans for electronic CRFs and protocol websites, the testing of these applications, and the creation of validation documentation.

The responsibility to conduct any or all of these activities may be delegated at the discretion of the Sponsor to the DCC or to subcontractors of the DCC, where applicable. Those individuals and entities also take on responsibility for meeting regulatory requirements on behalf of the Sponsor, but the Sponsor has the ultimate responsibility, and must therefore supervise those delegated activities effectively.

#### 4. APPLICABLE REGULATIONS AND GUIDELINES

ICH E6	Good Clinical Practice: Consolidated Guidance, April 1996
ICH E6, 2.10	The Principles of ICH GCP
ICH E6, 5.1	Quality Assurance and Quality Control
FDA Guidance	Computerized Systems Used in Clinical Investigations, FDA, May 2007
FDA Guidance	Computerized Systems Used in Clinical Trials, FDA, April 1999
FDA Guidance	21 CFR Part 11, Electronic Records; Electronic Signatures – Scope and Application, FDA, August 2003
FDA Guidance	General Principles of Software Validation; Final Guidance for Industry and FDA Staff, January 2002
REFERENCES TO	O OTHER APPLICABLE SOPs

- NN CS 702 Application Development and Validation
- NN DM 1001 Clinical Data Management
- NN DM 1002 Data Management Plan Development
- NN DM 1003 Case Report Form Development
- NN DM 1005 Data Collection and Data Handling

5.

#### 6. ATTACHMENTS AND REFERENCES

NN DM 1004 – A Document History

#### 7. TERMS AND ABBREVIATIONS

The following terms and abbreviations are used in this document:

CCC	Clinical Coordinating Center at Massachusetts General Hospital
Clinical Study Site (CSS)	Clinical site that conducts research for a NeuroNEXT protocol within or outside the Network
DCC	Data Coordinating Center at The University of Iowa
DM	Data Management Team at the DCC
IT	Information Technology Team at the DCC
Protocol Principal Investigator (PPI)	Principal Investigator of a NeuroNEXT protocol

#### 8. SPECIFIC PROCEDURES

#### A. Specifications Development for eCRFs

After the paper CRF templates for a project are approved by the CRF Development Committee and the Sponsor (if applicable), a user specifications document is created for each CRF template. User specifications (specs) are created by the DCC DM Team in consultation with the Study Team, and describe the user requirements for an electronic Case Report Form (eCRF) or website module.

To maintain continuity and to track the evolution of an eCRF application or website module throughout its life cycle, only one specifications document is used for each eCRF or module that is developed. A change table is added to each newly created user specifications document so that later modifications may be tracked. Modifications are inserted into the original specification document.

#	Who	Task	Attachment/ Reference	Related SOP
1.	DCC DM	Create only one specifications document for use throughout the life of an eCRF or website module. Collaborate with the IT Team during the spec development process to ensure that specifications clearly define and describe the user requirements.		NN DM 1001 NN DM 1002 NN DM 1003
2.	DCC DM	Develop the specification document.		
3.	DCC DM	Track future modifications to an eCRF in the change table in the spec document, and insert any modifications to the requirements into the spec document.		

#### **B.** Creation of Testing Plans

Comprehensive testing is critical for ensuring that an eCRF or other application is functioning according to specifications. For each specification document, a corresponding testing plan is created that describes the testing

conditions for thoroughly testing all of the requirements that are detailed in the specifications document. The testing plan contains the following components that must be completed for each of the testing conditions:

Sequence Number – a unique identifier for each test condition.

Requirement Number – the same requirement number used in the Specifications Document.

Testing Conditions - the instructions to be followed in order to test the requirement.

**Expected Result** – the expected result after the test condition is completed.

**Test Result (Pass/Fail)** – a Pass/Fail result is recorded in this column at the time of the test. Pass indicates that the testing condition performed as expected.

**Comments** – any comments associated with the test; generally used to describe what happened when a test failed.

An electronic testing plan workbook is created to document the testing of an eCRF or website module throughout its life cycle. Each sheet in the workbook represents the testing that has been completed for a particular work effort within a specific testing environment. For new eCRF development, the testing plan worksheet contains test conditions for all user requirements. For modifications to an eCRF, the subsequent worksheets that are added to the testing plan refer only to test conditions for the modified or added requirements.

#	Who	Task	Attachment/ Reference	Related SOP
1.	DCC DM	Create a testing plan that describes the testing conditions that are used to test all of the requirements detailed in the specifications document. An Excel® spreadsheet workbook is the preferred tool that is used by the DCC to create testing plans.		NN DM 1001
2.	DCC DM	For form modifications, refer only to the modified requirements in subsequent testing plan worksheets.		

#### C. Application Development and Testing

After specifications have been finalized and a testing plan has been created, a case is created in the FogBugz® application to initiate the process of IT development, testing, and the eventual move of the application to the Production environment, where the application is made available to Clinical Study Sites (CSS).

Prior to application development, the DM and IT Team Leads prioritize and batch together cases for development into a FogBugz® Milestone. Cases are then assigned to the IT Developers for coding. Internal correspondence between Data Managers and Developers is tracked in the associated development case during the application development and testing process.

When the case is available for testing, the tester completes each test condition listed on the testing plan worksheet, documents whether the test passed or failed, and adds comments to describe the nature of an error or bug. Once testing is completed, the testing plan worksheet is attached to the appropriate FogBugz® case.

#	Who	Task	Attachment/ Reference	Related SOP
1.	DCC DM	After the specifications have been finalized and a testing plan has been created, create a case in the FogBugz® application to initiate the IT development and testing process.		NN DM 1001

#	Who	Task	Attachment/ Reference	Related SOP
2.	DCC DM	Follow the procedures described in NeuroNEXT SOP NN CS 702 to test the application in the Test and Stage environments, and document all testing results in the testing plan workbook.		NN CS 702
3.	DCC DM	For failed test conditions, provide clear descriptions of what was tested, the result, and how the result differed from the expected result (if applicable) in the testing plan workbook.		
4.	DCC DM	If necessary, meet with the developer to clarify testing issues or to discuss possible modifications to the user specifications.		

#### D. Validation Document

The 'Validation Document' is generated during testing in the Stage environment.

#	Who	Task	Attachment/ Reference	Related SOP
1.	DCC DM	After testing is completed, create a validation document, if applicable.		NN DM 1001
2.	DCC DM	Create screen shots to document the testing of each requirement, when appropriate.		
3.	DCC DM	Label each screen shot with the corresponding Requirement number, the Sequence number tested, and the date of the screenshot.		

#### E. Save/Audit Testing

This testing ensures that each data item on an eCRF maps to the correct data field and data table in the database. Save/Audit Testing is performed by using the electronic data capture (EDC) website and SAS® software (SAS Institute Inc®, Cary, NC).

#	Who	Task	Attachment/ Reference	Related SOP
1.	DCC DM	Perform save/audit testing for all new studies and/or new eCRF development.		NN DM 1001

#### F. Milestone Review

While the Milestone is in the Stage environment, the DCC DM team performs targeted testing to help ensure that the application has not been affected by programming changes.

#	Who	Task	Attachments /References	Related SOP
1.	DCC DM	Create a FogBugz case to track the Milestone review.		
2.	DCC DM Tester	<ul> <li>Perform a Milestone review in the Stage environment (using a Milestone checklist, if applicable) to check the functionality of all modules and the general performance of the website to ensure that the application has not been affected by programming changes. Reviews may include, but are not limited to, checks of: <ul> <li>Website access</li> <li>Website configurations</li> <li>eCRF submissions</li> <li>Adverse Event Reporting System</li> <li>Post-complete change functionality</li> </ul> </li> </ul>		
3.	DCC DM Tester	Meet with DCC DM Lead to discuss any issues that were discovered during the review.		
4.	DCC DM Lead	Determine if issues are significant enough to delay the move to Production, or can be addressed in a subsequent Milestone.		
5.	DCC DM Tester	In the FogBugz case, describe the issues to be addressed and assign the case to the DCC IT developer.		
6.	DCC IT	Resolve the issues described in the FogBugz case, and assign the case to the DCC Tester.		
7.	DCC DM Tester	Ensure that all issues have been resolved before assigning to the DCC IT Lead or designee for the move to Production.		

#### **Certificate Of Completion**

Envelope Id: A9A317AB19724135B0AA949B947CED75 Status: Completed Subject: Complete with DocuSign: NN DM 1004 Specifications Development, Testing Plans, and Validation Do... Source Envelope: Document Pages: 7 Signatures: 6 Envelope Originator: Certificate Pages: 6 Initials: 0 Tania Leeder

AutoNav: Enabled Envelopeld Stamping: Disabled Time Zone: (UTC-05:00) Eastern Time (US & Canada)

#### **Record Tracking**

Status: Original 2/17/2023 8:33:14 AM

#### Signer Events

Christopher Coffey

christopher-coffey@uiowa.edu

Security Level: Email, Account Authentication (Required), Login with SSO

Holder: Tania Leeder TLEEDER@PARTNERS.ORG

Signature

Christopher Coffey

Signature Adoption: Pre-selected Style Signature ID: C68AC8DD-8033-4CF9-82AE-D1200765F147 Using IP Address: 128.255.113.139

With Signing Authentication via DocuSign password With Signing Reasons (on each tab): I approve this document

Tania Leeder TLEEDER@PARTNERS.ORG IP Address: 73.123.188.5

Location: DocuSign

#### Timestamp

Sent: 2/17/2023 8:35:06 AM Viewed: 2/17/2023 6:48:19 PM Signed: 2/17/2023 6:48:33 PM

Electronic Record and Signature Disclosure: Accepted: 2/17/2023 6:48:19 PM ID: 22c8fdda-883c-4394-80cf-1faf4d72a2cc

#### DIXIE ECKLUND

dixie-ecklund@uiowa.edu

Security Level: Email, Account Authentication (Required), Login with SSO



UND Sent: 2/17/2023 8:35:06 AM I approve this document 17-Feb-2023 | 4:23:18 PM PST Signed: 2/17/2023 7:23:20 PM

-7006AF622EFC40B6A067A08EC02591B6

Signature Adoption: Drawn on Device Signature ID: 7006AF62-2EFC-40B6-A067-A08EC02591B6 Using IP Address: 128.255.112.230

With Signing Authentication via DocuSign password With Signing Reasons (on each tab): I approve this document

Electronic Record and Signature Disclosure: Accepted: 2/17/2023 7:21:28 PM ID: eb99cbd3-aec3-422d-9a63-7f99f41fefd5

## DocuSign

Signer Events	Signature	Timestamp
Joan Ohayon		Sent: 2/17/2023 8:35:08 AM
ohayonj@ninds.nih.gov	Joan Oliayon	Resent: 2/21/2023 8:25:00 AN
Security Level: Email, Account Authentication		Viewed: 2/21/2023 9:34:28 AM
(Required)		Signed: 2/21/2023 9:34:43 AN
	Signature Adoption: Pre-selected Style	-
	Signature ID:	
	72C6AAFD-8CC4-4855-82AC-A0700072901A	
	Using IP Address: 156.40.137.188	
	With Signing Authentication via DocuSign password	
	With Signing Reasons (on each tab):	
	I approve this document	
Electronic Record and Signature Disclosure: Accepted: 2/13/2023 2:03:22 PM ID: 385a0a53-0f0c-4395-88f6-d5700c36e050		
Marianne Chase		Sent: 2/17/2023 8:35:07 AM
MCHASE@mgh.harvard.edu	Marianne (hase	Viewed: 2/17/2023 1:23:52 PM
Sr Director, Clinical Trial Operations		Signed: 2/17/2023 1:24:21 PM
•		oigneu. 2/11/2023 1.24.21 PM
Insight OBO The Massachusetts General Hospital	Signature Adoption: Pre-selected Style	
Security Level: Email, Account Authentication (Required), Logged in	Signature ID:	
	58FE690F-6BCA-4F23-90E3-DA15BCE3F578	
	Using IP Address: 73.114.253.109	
	With Signing Authentication via DocuSign password	
	With Signing Reasons (on each tab):	
	I approve this document	
Electronic Record and Signature Disclosure: Not Offered via DocuSign		
Merit Cudkowicz	DocuSigned by Merit Cudkowicz	Sent: 2/17/2023 8:35:07 AM
cudkowicz.merit@mgh.harvard.edu	Munit Cudkowicz   I approve this document 17-Feb-2023   9:29:17 AM EST	Viewed: 2/17/2023 9:29:08 AM
Chief of Neurology	17-Feb-2023   9:29:17 AM EST	Signed: 2/17/2023 9:29:20 AM
Security Level: Email, Account Authentication (Required), Logged in	9F8FE4180E504C6AB0A67B835E80C644	
	Signature Adoption: Pre-selected Style	
	Signature ID:	
	9F8FE418-0E50-4C6A-B0A6-7B835E80C644	
	Using IP Address: 68.239.56.73	
	With Signing Authentication via DocuSign password	
	With Signing Reasons (on each tab):	
	I approve this document	
Electronic Record and Signature Disclosure: Accepted: 2/17/2023 9:29:08 AM		
ID: d14d9783-53b0-4887-a585-29e96d5c6b74		

Signer Events	Signature	Timestamp
Stacey Grabert sgrabert@mgh.harvard.edu Director QA Stacey Grabert	Stacey Grabert	Sent: 2/17/2023 8:35:08 AM Resent: 2/21/2023 8:25:00 AM Viewed: 2/22/2023 11:07:04 AM Signed: 2/22/2023 11:07:19 AM
Security Level: Email, Account Authentication (Required)	Signature Adoption: Pre-selected Style Signature ID: 60CC52B0-747A-44E6-B220-8D8D880698C0 Using IP Address: 132.183.56.49 With Signing Authentication via DocuSign password With Signing Reasons (on each tab):	
Electronic Record and Signature Disclosure: Accepted: 7/20/2020 8:50:14 AM ID: 5ebadf74-e399-40fd-be82-9c7ca902061b	I approve this document	
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 Certified Delivered Signing Complete Completed	Hashed/Encrypted Security Checked Security Checked Security Checked	2/17/2023 8:35:09 AM 2/22/2023 11:07:04 AM 2/22/2023 11:07:19 AM 2/22/2023 11:07:19 AM
Payment Events	Status	Timestamps
Electronic Record and Signature Disclosure		

## ELECTRONIC RECORD AND SIGNATURE DISCLOSURE

From time to time, Insight OBO The Massachusetts General Hospital (we, us or Company) may be required by law to provide to you certain written notices or disclosures. Described below are the terms and conditions for providing to you such notices and disclosures electronically through the DocuSign system. Please read the information below carefully and thoroughly, and if you can access this information electronically to your satisfaction and agree to this Electronic Record and Signature Disclosure (ERSD), please confirm your agreement by selecting the check-box next to 'I agree to use electronic records and signatures' before clicking 'CONTINUE' within the DocuSign system.

## **Getting paper copies**

At any time, you may request from us a paper copy of any record provided or made available electronically to you by us. You will have the ability to download and print documents we send to you through the DocuSign system during and immediately after the signing session and, if you elect to create a DocuSign account, you may access the documents for a limited period of time (usually 30 days) after such documents are first sent to you. After such time, if you wish for us to send you paper copies of any such documents from our office to you, you will be charged a \$0.00 per-page fee. You may request delivery of such paper copies from us by following the procedure described below.

## Withdrawing your consent

If you decide to receive notices and disclosures from us electronically, you may at any time change your mind and tell us that thereafter you want to receive required notices and disclosures only in paper format. How you must inform us of your decision to receive future notices and disclosure in paper format and withdraw your consent to receive notices and disclosures electronically is described below.

## Consequences of changing your mind

If you elect to receive required notices and disclosures only in paper format, it will slow the speed at which we can complete certain steps in transactions with you and delivering services to you because we will need first to send the required notices or disclosures to you in paper format, and then wait until we receive back from you your acknowledgment of your receipt of such paper notices or disclosures. Further, you will no longer be able to use the DocuSign system to receive required notices and consents electronically from us or to sign electronically documents from us.

## All notices and disclosures will be sent to you electronically

Unless you tell us otherwise in accordance with the procedures described herein, we will provide electronically to you through the DocuSign system all required notices, disclosures, authorizations, acknowledgements, and other documents that are required to be provided or made available to you during the course of our relationship with you. To reduce the chance of you inadvertently not receiving any notice or disclosure, we prefer to provide all of the required notices and disclosures to you by the same method and to the same address that you have given us. Thus, you can receive all the disclosures and notices electronically or in paper format through the paper mail delivery system. If you do not agree with this process, please let us know as described below. Please also see the paragraph immediately above that describes the consequences of your electing not to receive delivery of the notices and disclosures electronically from us.

## How to contact Insight OBO The Massachusetts General Hospital:

You may contact us to let us know of your changes as to how we may contact you electronically, to request paper copies of certain information from us, and to withdraw your prior consent to receive notices and disclosures electronically as follows: To contact us by email send messages to: jhenrique@mgh.harvard.edu

## To advise Insight OBO The Massachusetts General Hospital of your new email address

To let us know of a change in your email address where we should send notices and disclosures electronically to you, you must send an email message to us at jhenrique@mgh.harvard.edu and in the body of such request you must state: your previous email address, your new email address. We do not require any other information from you to change your email address.

If you created a DocuSign account, you may update it with your new email address through your account preferences.

## To request paper copies from Insight OBO The Massachusetts General Hospital

To request delivery from us of paper copies of the notices and disclosures previously provided by us to you electronically, you must send us an email to jhenrique@mgh.harvard.edu and in the body of such request you must state your email address, full name, mailing address, and telephone number. We will bill you for any fees at that time, if any.

## To withdraw your consent with Insight OBO The Massachusetts General Hospital

To inform us that you no longer wish to receive future notices and disclosures in electronic format you may:

i. decline to sign a document from within your signing session, and on the subsequent page, select the check-box indicating you wish to withdraw your consent, or you may;

ii. send us an email to jhenrique@mgh.harvard.edu and in the body of such request you must state your email, full name, mailing address, and telephone number. We do not need any other information from you to withdraw consent. The consequences of your withdrawing consent for online documents will be that transactions may take a longer time to process.

## **Required hardware and software**

The minimum system requirements for using the DocuSign system may change over time. The current system requirements are found here: <u>https://support.docusign.com/guides/signer-guide-signing-system-requirements</u>.

## Acknowledging your access and consent to receive and sign documents electronically

To confirm to us that you can access this information electronically, which will be similar to other electronic notices and disclosures that we will provide to you, please confirm that you have read this ERSD, and (i) that you are able to print on paper or electronically save this ERSD for your future reference and access; or (ii) that you are able to email this ERSD to an email address where you will be able to print on paper or save it for your future reference and access. Further, if you consent to receiving notices and disclosures exclusively in electronic format as described herein, then select the check-box next to 'I agree to use electronic records and signatures' before clicking 'CONTINUE' within the DocuSign system.

By selecting the check-box next to 'I agree to use electronic records and signatures', you confirm that:

- You can access and read this Electronic Record and Signature Disclosure; and
- You can print on paper this Electronic Record and Signature Disclosure, or save or send this Electronic Record and Disclosure to a location where you can print it, for future reference and access; and
- Until or unless you notify Insight OBO The Massachusetts General Hospital as described above, you consent to receive exclusively through electronic means all notices, disclosures, authorizations, acknowledgements, and other documents that are required to be provided or made available to you by Insight OBO The Massachusetts General Hospital during the course of your relationship with Insight OBO The Massachusetts General Hospital.