

CTTI RECOMMENDATIONS: GOOD CLINICAL PRACTICE (GCP) TRAINING FOR INVESTIGATORS

Recommended minimum essential elements for a GCP training program:

- The <u>13 elements</u> from the investigator section of the ICH E6 Good Clinical Practice Consolidated Guidance.
 - Other training topics may be considered if needed, depending on the nature and scope of proposed research
- GCP training programs should provide a framework for clinical research conduct.
 - Training programs should emphasize topics that are:
 - Outside the scope of medical practice (e.g., safety reporting, IRB review, research informed consent)
 - Areas of recurring non-compliance
 - Avoid redundancy of topics covered in protocol-specific training
 - More advanced and role-based GCP training should be considered for those who have completed initial GCP training.

Training Frequency:

- GCP training is recommended to occur at a minimum of every 3 years. The frequency of training should be sufficiently flexible to accommodate different experience levels, gaps in training, etc., and should not be the same course every time.
- The training should be mutually accepted across organizations so that trainees may qualify for the time period without needing retraining for each new trial or sponsor.

Training Format:

- There are no specific recommendations on format.
- An online format may be the most practical to impart GCP training

Evidence of Training Completion:

 Satisfactory completion of a training program (such as a certificate, test score, or other formal confirmation of training received) should be documented.

These recommendations are based on results from the <u>GCP Training Project</u> and are aimed at investigator training, though some areas may apply to training of other site personnel.

[▶] CTTI's Executive Committee approved the recommendations.

[►] Released in January 2015