STANDARD OPERATING PROCEDURE FOR

ADVANCED THERAPY AND GENE MODIFICATION SAFETY COMMITTEE APPROVAL FOR CLINICAL RESEARCH

SOP NUMBER:	TASC SOP067 v2
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1. PURPOSE

An Advanced Therapy Medicinal Product (ATMP) is defined as a medicinal product which is either cells, genes or tissue as explained below:

- Whole living cells – cells or tissues that have been manipulated to change their biological characteristics or cells or tissues not intended to be used for the same essential functions in the body. They can be used to cure, diagnose or prevent diseases.
- Gene therapy – a modified sequence of nucleic acid (recombinant gene) that may be inserted directly into the body or indirectly via a vector such as an attenuated virus; can be used to treat a variety of diseases, including genetic disorders, cancers or long-term diseases.
- Tissue engineered - contain cells or tissues that have been modified so they can be used to repair, regenerate or replace human tissue.

In addition, some ATMPs may contain one or more medical devices as an integral part of the medicine, which are referred to as combined ATMPs. An example of this is cells embedded in a biodegradable matrix or scaffold.

The purpose of this Standard Operating Procedure (SOP) is to outline the approval process for applications to the Advanced Therapy and Gene Modification Safety Committee (ATGMSC) for research studies involving an Advanced Therapy (Investigational) Medicinal Product (ATIMP) or gene therapy or genetically modified organism/microorganism (GMO/ GMM) conducted in NHS Tayside (NHST). Review of any amendments to these studies is also included. The risk assessment of these research studies is overseen by the ATGMSC who provide expert opinion as required.

2. SCOPE

This SOP applies to any clinical research study involving an ATIMP or gene therapy or GMO/ GMM to be conducted in NHST.

Research studies involving GMO/GMM must be reviewed by the NHST ATGMSC.

NHST must hold authority from the Health and Safety Executive (HSE) to undertake Class 1 research involving Genetically Modified Microorganisms

Some research projects may involve plasmids (i.e. naked nucleic acid, vaccines) which do not constitute GMM, however it is considered best practice to follow the procedure detailed in this SOP and seek the opinion of the local ATGMSC.

3. RESPONSIBILITIES

NHST Research & Development (R&D) Office: to inform the committee of any ATGM clinical research studies (commercial and non-commercial) that are planning to be undertaken locally within NHST.

Principal Investigator (PI) at site: to complete a Risk Assessment and provide essential study documents for review and approval by NHST ATGMSC.

PI and Research team: to ensure all study activities comply with the regulations (the Genetically Modified Organism (contained use) Regulations 2014, the Genetically Modified Organisms (Deliberate Release) (Scotland) Regulations 2002), study protocol and local NHST procedures.

Biological Safety Officer (BSO): to supervise the co-ordination and safety of GMO/GMM contained use. Advise management and liaise with the Competent Authority (HSE) where relevant.

ATGMSC: to review the Risk Assessment. To be responsible for assessing the risks associated with the research study (including amendments where applicable). To advise and provide local approval regarding the Risk Assessment's accuracy for local ATIMP or gene therapy or GMO/GMM use.

ATGMSC Secretary: to convene committee meetings with appropriate membership in attendance. To electronically file the Risk Assessment Form, Risk Assessment Report and ATGMSC correspondence including ATGMSC approval letter.

ATGMSC for GMO/GMM approval is in addition to NHS Tayside R&D Management Approval. R&D approval cannot be given until the former is in place.

4. PROCEDURE

4.1 The NHST R&D Office will notify the ATGMSC Secretary of the requirement for an ATGMSC review and risk assessment.

4.2 The BSO shall be notified immediately when there is the potential that any clinical research study may involve GMO/GMM. The majority of GMMs used in human studies shall fall into the lowest level of activity classification i.e. Class 1.

Note that GM contained use involving Class 2, 3 or 4 is NOT permitted under the current NHST Premises Notification. The BSO must be informed and will liaise with HSE regarding Class 2, 3 or 4 applications.

4.3 If the study involves GMO, the ATGMSC Secretary, or delegate, will send the Risk Assessment Form A (Doc Ref 130 Part 1) to the site PI for completion and convene a full safety committee.

4.4 If the study does not involve GMO, the ATGMSC Secretary, or delegate, will send the Risk Assessment Form B (Doc Ref 131 Part 1) to the site PI for completion and convene only a smaller core committee.

4.5 Other expert members may be co-opted onto the committee for specialist advice if required.

4.6 The site PI may obtain advice from the study Sponsor, BSO and local ATGMSC to assist with completion of the Risk Assessment.

4.7 The ATGMSC Secretary, or delegate will arrange a meeting of the ATGMSC upon receipt of the Risk Assessment and the required essential documentation listed below:

- Protocol
- Investigator Brochure/details
- Integrated Research Application System (IRAS) Project information Sheet
- relevant publications related to the GMO (if applicable)
- CV of PI and relevant sub-Investigators
- Documents submitted to Gene Therapy Advisory Committee (GTAC) with favourable opinion letter (for gene therapy only).

A hybrid/MS Teams meeting may be conducted if considered appropriate.

4.8 The ATGMSC Secretary, or delegate, will forward the required documentation to the relevant ATGMSC members at least one week prior to the meeting. If the completed Risk Assessment is not received at least one week prior to the meeting date, the meeting will be rescheduled. If a committee member is unable to attend the review meeting, they should provide written comments to the ATGMSC Secretary, or delegate, for circulation to the other relevant committee members and discussion at the review meeting as required.

4.9 The ATGMSC Secretary, or delegate, will invite the site PI, or delegated Co-investigator, to attend the review meeting, to provide clarity on any queries the committee may have.

4.10 The review shall result in one of the following:

- Approval of the research study by ATGMSC

- Approval with conditions that must be met before start of study. A request for clarification or further information to be provided to the ATGMSC will result in subcommittee and Chair review as per 4.12.
- Rejection of the research study by ATGMSC.

4.11 The committee's findings, including any recommendations for mitigation and contingency planning, will be documented in a ATGMSC Risk Assessment Report/Minutes of Meeting and circulated to committee members and the PI by the Secretary, or delegate. Separate minutes will be produced if any other committee matters are discussed at the meeting.

4.12 Any amendments to the Risk Assessment will be made by the PI and resubmitted to the ATGMSC Secretary, or delegate, for committee and/or Chair review and approval. This may be done by email. Committee can sub delegate review and approval to the Chair.

4.13 The last version (may still be the original version if no changes) of the Risk Assessment Form Part 1 and the corresponding Risk Assessment Form Part 2 (Doc Ref 131), signed by all parties, will be submitted to the ATGMSC Secretary.

4.14 The committee decision letter will be emailed to the PI along with the last version of the Risk Assessment and any necessary correspondence relating to the proceedings of the committee. NHST R&D (and TASC Research Governance if it is a locally sponsored clinical research study) will be informed of the decision. The Secretary will electronically file all documentation

Once approved by the local ATGMSC, a research study may only commence once all the other applicable research approvals e.g. REC, GTAC, Medicines and Healthcare products Regulatory Agency (MHRA) and NHST R&D Management Approval, are also in place.

4.15 Should there be any future study protocol amendments that require changes to information contained in the Risk Assessment, an updated Risk Assessment will be submitted to the ATGMSC. The chair will request the committee to re-convene if necessary.

4 ABBREVIATIONS & DEFINITIONS

ATGMSC	Advanced Therapy and Gene Modification Safety Committee
ATMP	Advanced Therapy Medicinal Product
ATIMP	Advanced Therapy (Investigational) Medicinal Product
BLS/ALS	Basic Life Support/Advanced Life Support
BSO	Biological Safety Officer
GMO/GMM	Genetically Modified Organism/Genetically Modified Microorganism
GTAC	Gene Therapy Advisory Committee
HSE	Health and Safety Executive
IRAS	Integrated Research Application System
MHRA	Medicines and Healthcare products Regulatory Agency

NHST	NHS Tayside
PI	Principal Investigator
R&D	Research and Development
REC	Research Ethics Committee
SOP	Standard Operating Procedure
TASC	Tayside Medical Science Centre

5. ASSOCIATED DOCUMENTS & REFERENCES

TASC Doc Ref 130: Risk Assessment Form A Genetically Modified Organisms (Part 1&2)

TASC Doc Ref 131: Risk Assessment Form B Advanced Therapy Investigational Medicinal Products (not GMOs) (Part 1&2)

Genetically Modified Organism (contained use) Regulations 2014

Genetically Modified Organisms (Deliberate Release) (Scotland) Regulations 2002

HSE Scientific Advisory Committee on Genetic Modification (SACGM) Compendium of guidance (Part 6: Guidance on the use of genetically modified micro-organisms in a clinical setting)

6. DOCUMENT HISTORY

Version Number:	Reviewed By (Job Title):	Effective Date:	Details of editions made:
1	Valerie Godfrey (TASC Quality Assurance Manager)	07/02/2024	New
2	Valerie Godfrey (TASC Quality Assurance Manager)	19/02/2025	Doc Ref 130 and 131 have been split into Part 1 and Part 2 and the use of each is explained in the text.

8. APPROVALS

Approved by:	Date:
Dr Valerie Godfrey, TASC Quality Assurance Manager, on behalf of TASC Clinical Research Guidelines Committee	18 Feb 2025