



2024

CDISC JAPAN  
INTERCHANGE

TOKYO

12-13 JUNE: CONFERENCE & EXPO | 10-11 JUNE: TRAININGS

Unleashing your eTMF with advanced TMF metrics and KPIs  
Framework

Presented by Franciska Darmer, Darmer LS Advisory



# Meet the Speaker

Franciska Darmer

**Title:** Clinical Advisor

**Organization:** Darmer LS Advisory

*With more than 25 years of experience within the life science industry, Franciska has worked for numerous Life Science organizations and technology vendors, supporting customers on their strategic digitalization journeys across clinical operations and data management. Specialising in TMF Management and process optimisation, Franciska now works as an independent advisor providing TMF Management services to global Life Science organizations*



# Disclaimer and Disclosures

- *The views and opinions expressed in this presentation are those of the author(s) and do not necessarily reflect the official policy or position of CDISC.*
- *The author(s) have no real or apparent conflicts of interest to report.*



Inspection Ready

Optimized

*and...*

***Completeness***

***Quality***

***Time***

***Overall compliance***

***Risk Based eTMF Management***

***Long-term process optimization***

***Generating business Value***



# Foundational eTMF Metrics

Using data to ensure Inspection Readiness

# Ensuring Inspection Readiness

## IN 2014 THE MHRA UPDATED THEIR DEFINITION OF A CRITICAL FINDING TO INCLUDE TMFs THAT ARE NOT READILY AVAILABLE, ACCESSIBLE OR INCOMPLETE

Critical & major eTMF related inspection findings, are often the result of insufficient focus on business processes and oversight, with seemingly small omissions leading to significant compliance risks



*Where provision of the TMF does not comply with Regulation 31A 1-3, as the TMF is not readily available or accessible, or the TMF is incomplete to such an extent that it cannot form the basis of inspection and therefore impedes or obstructs inspectors carrying out their duties in verifying compliance with the Regulations \*<https://www.gov.uk/guidance/good-clinical-practice-for-clinical-trials>*



The TMF was not adequately defined to ensure all relevant documentation for an SAE case could be located



There were many documents missing from the eTMF, for example, signature sheets, correspondence, emails and previous versions of documents



...the TMF did not contain all the essential documents required to enable the reconstruction of trial events and demonstrate compliance...



The eTMF was incomplete and unreliable with emails incomplete, duplicate documents, blank/incomplete documents, the same name for many different documents, same document under different names and in different locations and missing documents.



Where the TMF maintenance had been contracted out to a third-party contractor, there was limited information available in the organisation's own files to demonstrate effective oversight of clinical trial activities

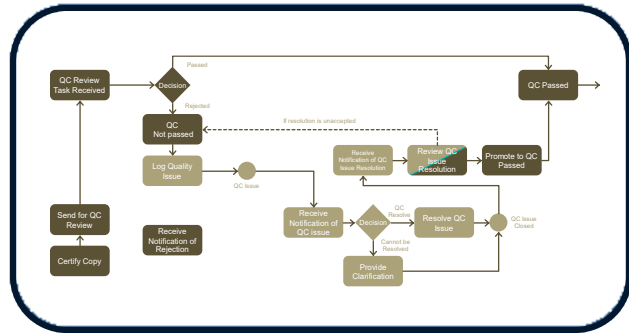
# eTMF Management Today

## Average QC Management efforts – Phase III Trial

|  |        |
|--|--------|
| Average no. of documents in phase 3 trial  | 15.000 |
| Minutes per document to scan, index and upload   | 4      |
| Minutes to QC a TMF documents  | 2      |
| Document Transfer Error Rate   | 20%    |
| Average QI resolution time in minutes  | 4      |
| <b>Total efforts for basic TMF Management</b><br>$15,000 \times (4+2) + (15,000 \times 20\% \times 4) = 1.700 \text{ hours}$ |        |

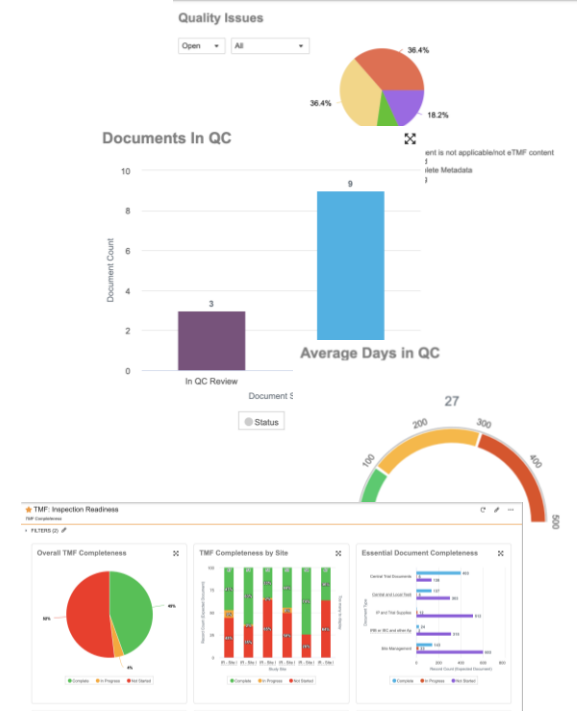
# The Data in Records Management

Purpose built eTMF systems drive data generation:



Sample QC workflow: Certified copy → QC Review and Issue Resolution

**+200 Data Points:**  
 System users  
 Timestamps  
 Document classification  
 Document date  
 Document attributes  
 Associated vendor  
 Quality Issue (QI) type  
 QI details  
 QI resolution  
 Timeliness  
 QI ageing  
 Review cycle  
 Etc..



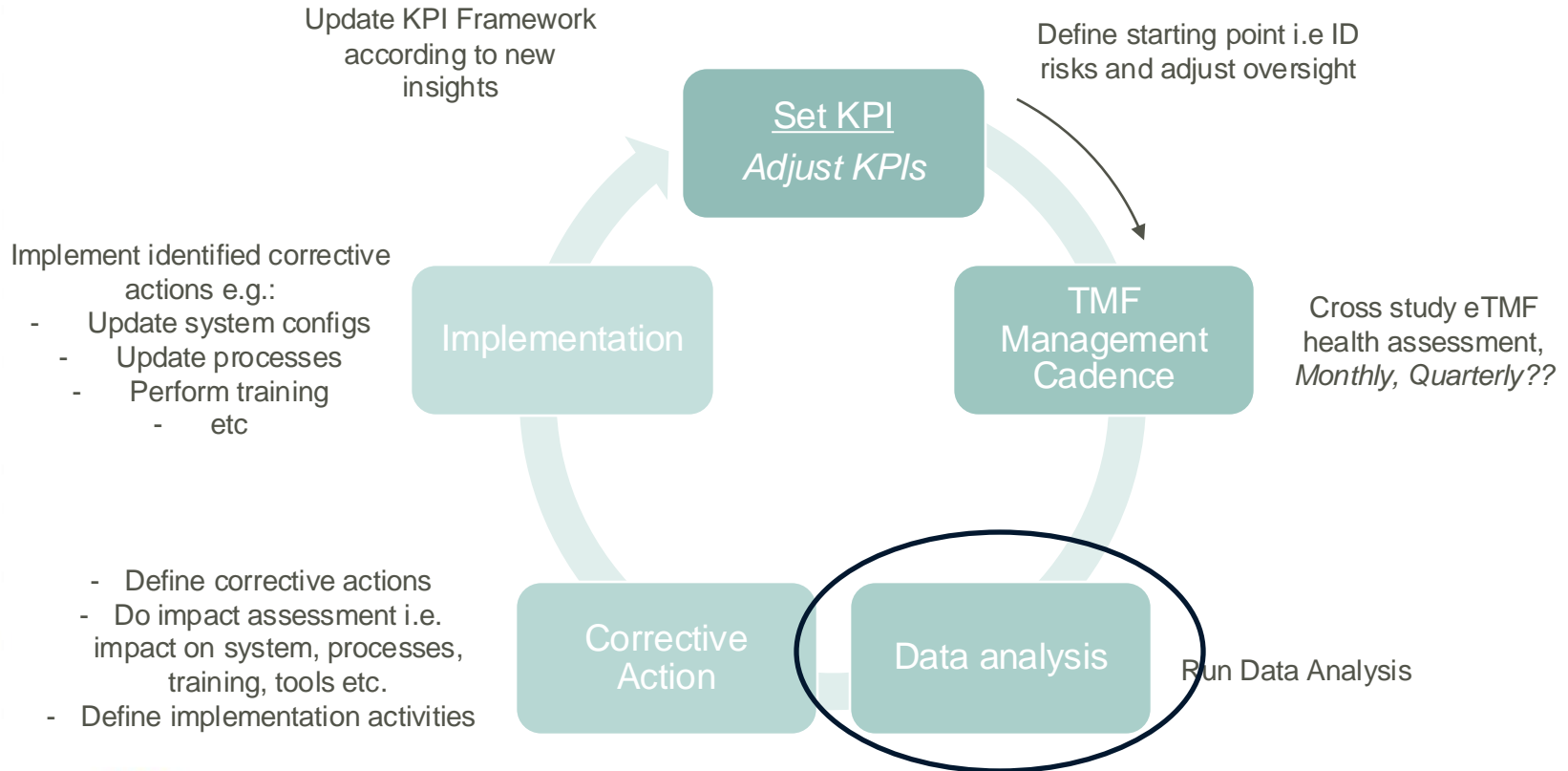


# Understanding your data maturity...

What is your QI Rate?

- Do you have a QI threshold defined?
- What happens when you exceed your QI threshold?
- Which corrective actions might be performed?
- Do you track QI rates over time?

# Using eTMF data to accelerate Inspection Readiness



# Performing Data Analysis on eTMF Data

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Extract eTMF data

| Classification  | QC    |
|---|-------|
| Investigator Brochure   | 18390 |
| 01.01.01 Investigator Brochure  | 108   |
| 01.01.02 Product Risk Language  | 77    |
| 01.01.03 Investigator Brochure Review Form  | 72    |
| 01.01.03.001 Substantial Amendment Determination Form                                   | 24    |
| 01.01.04 Investigator Brochure Summary of Changes                                       | 17    |
| 01.01.05 Investigator Brochure Local Language Translation Documents                     | 107   |
| 01.01.06 Investigator Brochure Other  | 27    |
| 01.02.01 Investigational Medicinal Product Dossier (IMPD)                               | 10    |
| 01.02.02 Investigational Medicinal Product Dossier (IMPD) Translation Documents         | 2     |
| 01.04.01 Governance Committee Meeting Materials   | 26    |
| 01.05.01 Restricted Development Safety Update Report (DSUR)                             | 25    |
| 01.05.01.001 Restricted Site Monthly Line Listing (SLL)                                 | 25    |
| 01.05.01.002 Unrestricted Blinded Line Listing (BLL)                                    | 37    |
| 01.05.01.003 Unrestricted Suspected Unexpected Serious Adverse Reaction (SUSAR)         | 124   |
| 01.05.01.004 Restricted Suspected Unexpected Serious Adverse Reaction (SUSAR)           | 609   |
| Submission to IRB and IEC   | 21    |
| 01.05.01.005 Unrestricted Suspected Unexpected Serious Adverse Reaction (SUSAR)         | 3     |
| 01.05.01.007 Unrestricted Suspected Unexpected Serious Adverse Reaction (SUSAR) Listing | 10    |
| 01.05.01.012 Unrestricted Site-Monthly Line Listing (SLL)                               | 1     |
| 01.05.01.013 Restricted Suspected Unexpected Serious Adverse Reaction (SUSAR)           | 2     |
| 01.05.02 Correspondence   | 46    |
| 01.05.02.001 Unrestricted Urgent Safety Measure (USM) Letter                            | 9     |
| 01.05.03 Tracking Information   | 15    |
| 01.05.04 Meeting Material   | 27    |
| 01.05.06 Hierarch   | 90    |
| 01.01.01 Trial Master File (TMF) Management Plan  | 124   |
| 01.01.01.001 Trial Master File (TMF) Review Form  | 1713  |
| 01.01.01.002 Trial Master File (TMF) Transfer Form                                      | 2     |
| 01.01.01.003 TMF Study Lock Request Form  | 2     |
| 01.01.01.005 TMF Oversight Plan   | 5     |
| 01.01.01.006 TMF Startup or Update Form   | 3     |
| 01.01.01.007 TMF Migration Related Documents  | 13    |
| 01.01.02 Project Management Plan  | 144   |
| 01.01.02.001 Regulatory Affairs Management Plan   | 39    |
| 01.01.02.002 Other Plans  | 346   |
| 01.01.03 Study Quality and Risk Management Documents                                    | 155   |
| 01.01.04.001 Study Data Quality and Risk Management Documents                           | 24    |
| 01.01.04.002 List of SOPs Current During Trial  | 70    |
| 01.01.04.003 SOP Walkers  | 127   |
| 01.01.05 Operational Procedure Manual   | 172   |

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Identify Repeating Patterns

|                                   | #QIs   | QIs % |
|-----------------------------------|--------|-------|
| 05 Site Management                | 167792 | 47%   |
| 04 IRB or IEC and other Approvals | 45376  | 13%   |
| 02 Central Trial Documents        | 37742  | 10%   |
| 01 Trial Management               | 26323  | 7%    |
| 06 IP and Trial Supplies          | 19827  | 6%    |

| QI Type 'Other' – QC Comment Based Breakdown | Approximately #QIs |
|--|--------------------|
| Incorrect Title                              | 15513              |
| Incorrect or Missing Language                | 9155               |
| Incorrect Date                               | 4344               |
| Incorrect or Missing Version                 | 2666               |
| Incorrect or Missing Metadata                | 2643               |

| Title Incorrect or Incomplete                             | Data Incorrect  | Classification incorrect                                 |
|---|---|--|
| 05.02.07 Site Staff Qualification Supporting Information  | 05.02.07 Site Staff Qualification Supporting Information  | 05.05.01 Correspondence                                  |
| 05.02.10 Financial Disclosure Form                        | 02.02.03.G02 Site Specific Informed Consent Form          | 05.04.05 Additional Monitoring Activity                  |
| 04.01.02 IRB or IEC Approval                              | 05.05.01 Correspondence                                   | 01.05.03.G01 CRO Meeting Material                        |
| 05.04.03 Interim Monitoring Visit Report                  | 04.01.02 IRB or IEC Approval                              | 05.02.03 Protocol Amendment Signature Page               |
| 05.04.03.G01 Interim Monitoring Visit Confirmation Letter | 05.04.03.G01 Interim Monitoring Visit Confirmation Letter | 04.01.02 IRB or IEC Approval                             |
| 05.04.03.G02 Interim Monitoring Visit Follow-up Letter    | 05.03.03 Site Evidence of Training                        | 04.03.02 IRB or IEC Progress Report                      |
| 05.02.05 Sub-Investigator Curriculum Vitae                | 05.04.03 Interim Monitoring Visit Report                  | 05.03.03 Site Evidence of Training                       |
| 04.01.01 IRB or IEC Submission                            | 05.04.03.G02 Interim Monitoring Visit Follow-up Letter    | 02.02.03.G02 Site Specific Informed Consent Form         |
| 05.02.11 Data Privacy Agreement                           | 05.04.06 Important Protocol Deviation (IPD) Form          | 02.02.03.G01 Country Specific Informed Consent Form      |
| 02.02.03.G02 Site Specific Informed Consent Form          | 08.01.01 Certification or Accreditation                   | 05.02.07 Site Staff Qualification Supporting Information |

# Performing Data Analysis on eTMF Data

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Do Root Cause Analysis

| Qualification   | POC   |
|---|-------|
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| 00.05.01.007 Unrestricted Suspected Unexpected Serious Adverse Reaction (SUSAR) Listing                   | 3     |
| 00.05.01.009 Restricted Country Specific Listing  | 10    |
| 00.05.01.012 Unrestricted Six-Monthly Line Listing (SLL)  | 1     |
| 00.05.01.013 Restricted Suspected Unexpected Serious Adverse Reaction (SUSAR)                             | 2     |
| 00.05.02 Correspondence   | 46    |
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Identify most impactful cause for error

Ask why!

80:20 - Identify 20% cause for 80% effect:

Example:

- Limited use of Autonoming
- Limited guidance material available
- High turnover at CRO

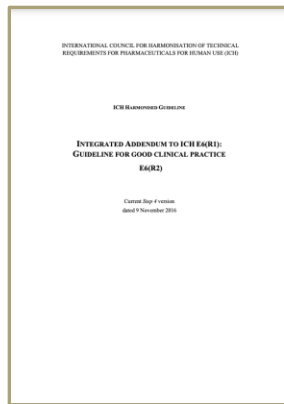


# Risk Based Approach to TMF Management

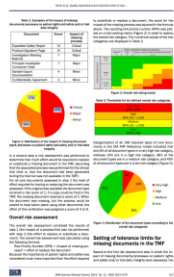
When good enough is good enough

# Risk Based Approach – An industry perspective

Applying a Risk Based Approach (RBA) to TMF Management to improve quality, ensure safety and overall data integrity... and **reduce effort?**



*ICH E6 (R2) – Public review June 2015, Published Nov 2016*



*GMS German Medical Science 2015, Vol. 13, ISSN 1612-3174*



*Vendor Presentation*



*V1.1. February 2024*



CDISC TMF Risk Based working group - Adoption of Montrium Risk-based TMF Management Framework?

# Realizing Business Benefits of RBA

| Document Applicability /Outsourced | Impact on Patient Safety/Data Integrity TBD | Primary QC (Indexer)         | Secondary QC (via QC workflow) | Inspection Readiness /Additional Periodic Reviews (Post-approval QC) |
|------------------------------------|---|------------------------------|--------------------------------|--|
| Core /Outsourced                   | Critical<br>Major<br>Minor<br>No Impact     | 100%<br>100%<br>100%<br>100% | 100%<br>100%<br>0%<br>0%       | 10%<br>10%<br>10%<br>0%  |
| Core /In-house                     | Critical<br>Major<br>Minor<br>No Impact     | 100%<br>100%<br>100%<br>100% | 100%<br>100%<br>0%<br>0%       | 10%<br>10%<br>10%<br>0%  |
| Recommended /Outsourced            | Critical<br>Major<br>Minor<br>No Impact     | 100%<br>100%<br>100%<br>100% | 100%<br>100%<br>0%<br>0%       | 10%<br>10%<br>10%<br>0%  |
| Recommended /In-house              | Critical<br>Major<br>Minor<br>No Impact     | 100%<br>100%<br>100%<br>100% | 100%<br>100%<br>0%<br>0%       | 10%<br>10%<br>10%<br>0%  |

# Realizing Business Value with eTMF Data

## Example of impact of RBA to eTMF on Quality Management

|  |        |
|--|--------|
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=

15-20% reduction in effort

**1700h → 1445h**

Impact of descoping all Minimal and No  
Impact artifacts





# Thank you!

Franciska Darmer

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**LinkedIn:** <https://www.linkedin.com/in/franciska-darmer/>



**Thank You!**

**cdisc**