**Delegation Log where wet signature not possible**

This Log is to accompany Paper Delegation Logs already in use, but due to circumstances, cannot easily be updated with wet signatures.

It should be confirmed that this acceptable to the Sponsor.

It can be amended as required and can be forwarded to a Sponsor/CRA as requested

**Instructions**:

Trial Manager/Research nurse, or as relevant, completes this Delegation Log

It should include all research staff that are not on the paper log

It should be used to update any changes that would be made to the paper log- i.e adding new tasks for an individual or entering End Dates

1 The draft completed Log should be emailed to the PI for review and agreement and a copy of the email retained in Outlook

2 On receiving email confirmation from the PI that they are happy with the proposed delegation, the date of the email must be added to the log. This then becomes the Master Electronic Delegation Log

The PI’s confirmation email must be retained in Outlook

3 The Master Electronic Delegation Log must be password protected with limited access. Its location may be added to the Trial Master File Index. The PI must be fully aware of the location of the Log so that it is easily accessible for audit.

4 Once the confirmation of the delegated duties is received and entered onto the Log, an email is then sent to the delegate(s) detailing the proposed delegation.

This can be a copy of the Log that was sent to the PI, or a version that details only the recipients’ delegation.

A copy of the email retained in Outlook.

5 The Delegate must email back saying they are happy to take on these responsibilities.

The date of their response email must be added to the Master Electronic Delegation Log and the email retained in Outlook

**Delegation Log where wet signature not possible**

**This Delegation Log was implemented on xxxxxx to accompany the Paper Delegation Log, for this study, in place from xxxxxx**

|  |  |
| --- | --- |
| **Study Title** |  |
| **Sponsor** |  |
| **REC Ref** |  |
| **Site ID** |  |
| **Name of PI** |  |
| **Email of PI** |  |
|  |
| **Name of Delegate** | **Delegated Tasks** | **Date CI/PI confirmed, by email, this is appropriate delegation** | **Date when delegate emailed acceptance of these tasks** | **Date when responsibility for these tasks ended** |
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**Include a Key to delegated duties, for example**

1- Informed Consent 2-Eligibility confirmation 3- ECG 4-Vital signs

**All duties delegated to an individual must be listed separately and not grouped- i.e. 1,4,7,8.9 NOT 1,4,7-9**