DATA PRIVACY PROTECTION IN CLINICAL RESEARCH: Questionnaire 1

The sponsor must fill and sign this document. The CTC central desk for UCLouvain will provide it at the first contact with the sponsor.

According to the Belgian law of 30/07/2018 (art.100), any data collected in the context of a clinical study must be recorded in such a way that third parties outside the clinical trial site team cannot identify the subject.

The CTC central desk will analyze answers to the questions below against the General Data Protection Regulation (GDPR 2016/679). If necessary, the desk will send the document “GDPR - Additional Questionnaire” to the sponsor/CRO and a subsequent evaluation by the DPO[[1]](#footnote-1) will be mandatory. The DPO's opinion will be attached to the initial submission file if it is sent to the CUSL-UCL Hospital-Faculty Ethics Committee.

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| --- | --- |
| 1) Will the data be transferred outside of Cliniques universitaires Saint-Luc (CUSL) or UCLouvain? | YES  NO |
| * If YES, specify the transfer modalities : Cliquez ou appuyez ici pour entrer du texte. |
| 2) Will the data be transferred outside of EU? | YES  NO |
| 3) Will data be collected identifying the study subject (name, administrative number, NISS, phone, email, facial image, address, account number, video conference, sounds, etc.)? | YES  NO |
| * If YES, will this data be shared outside of CUSL or UCLouvain? | YES  NO |
| * If YES, specify : Cliquez ou appuyez ici pour entrer du texte. |
| 4) Does any application or software need to be installed on a CUSL or UCLouvain computer? | YES  NO |
| * If YES, specify : Cliquez ou appuyez ici pour entrer du texte. |
| 5) Answer only if you are a UCLouvain academic sponsor, otherwise check "NA"  a) Will you use a database meeting the following conditions:  - password protection  - backup done  - located on a or UCLouvain server  b) Which database is it? Cliquez ou appuyez ici pour entrer du texte. | YES  NO  NA |
| 6) Does the sponsor provide electronic equipment to the patient for data recording, either on-site or at home (pc, tablet, phone, connected watch, etc.)? | YES  NO |
| 7) Will the patient use his/her own equipment (pc, tablet, phone, connected watch, etc.) for the study? | YES  NO |

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| --- | --- |
| 8) Does the study involve the use by the patient of a mobile App, web-app, portal, website, online form, email, etc. to collect source data directly from the patient | YES  NO |
| * If YES, specify : Cliquez ou appuyez ici pour entrer du texte. |
| * Is this clearly stated in the information and consent document?   Please give us a copy of ICF | YES  NO |
| 9) Will the patient have to use an online platform for reimbursement of study-related expenses (travel, etc.)? | YES  NO |
| * If YES, specify : Cliquez ou appuyez ici pour entrer du texte. |
| * Is this clearly stated in the information and consent document?   Please give us a copy of ICF | YES  NO |
| If the answers to questions 6, 7, 8 and 9 are "NO", check "NA" in the questions below | |
| 9) Is any information shared with the patient via his/her own e-mail address? | YES  NO  NA |
| * If YES, specify : Cliquez ou appuyez ici pour entrer du texte. |
| 10) Will source data collected directly from the patient using specific electronic equipment or using a mobile app, web-app, portal, website, online form, email, etc. be added to the patient's medical record if the investigator deems it useful for medical follow-up (manual transcription or document storage) ? | YES  NO  NA |
| 11) Will data collected from the patient using specific electronic equipment be stored in an ISO27001 or HIPAA environment? | YES  NO  NA |
| 12) Will the patient's IP or FSM-MAC addresses be accessible by the sponsor/CRO? | YES  NO  NA |
| * If YES, specify : Cliquez ou appuyez ici pour entrer du texte. |

As [representative of][[2]](#footnote-2) the study promoter, I confirm that collection and processing during clinical trials is done in full compliance with the European Regulation 2016/679 of 27 April 2016 on the protection of natural persons with regard to the processing of personal data and on the free movement of such data (GDPR).

STUDY NUMBER/ACRONYM :

INVESTIGATOR’S NAME, SURNAME:

SPONSOR's NAME :

DATE AND SPONSOR'S SIGNATURE :

1. DPO : Data Protection Officer [↑](#footnote-ref-1)
2. Delete as appropriate or remove [ ]. [↑](#footnote-ref-2)