# **AMWA** RECOMMENDED TRAINING OUTLINE FOR REGULATORY WRITERS

# Documents

# Core Knowledge



Soft Skills

The Resource for Medical Communicators

## **RECOMMENDED TRAINING OUTLINE FOR REGULATORY WRITERS**

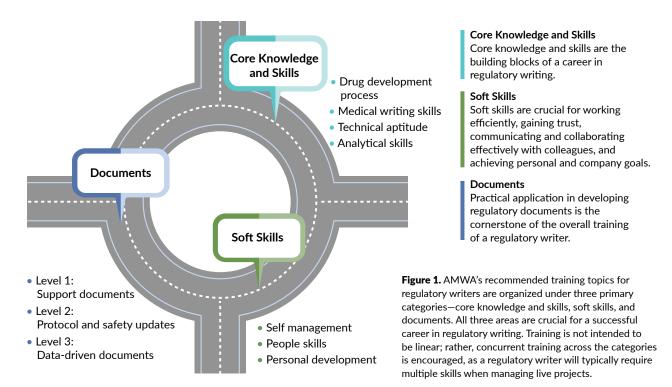
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## **Overview**

At AMWA's inaugural Medical Writing Executives Forum: Preparing for the Future of Medical Writing in Pharma and Biotech, participants identified several challenges in training and retaining skilled regulatory writers. Forum participants noted that the baseline experience of regulatory writers is uneven or absent due to the lack of formal, standardized training in many organizations. Such training is needed but is difficult to create because it consists of intensive structured education with different components, including hands-on training, and covers multiple years.

To address this lack of standardized training, AMWA established the AMWA Workforce Training Committee, which was charged with identifying the educational content needed to prepare medical communicators for a successful career in regulatory writing. Drawing on their professional experiences as writers and managers, the Committee members reviewed a list of training topics drafted by AMWA and the 2018 DIA Competency Model<sup>1</sup> to create a list of recommended training topics as well as set priorities for training, from entry level to more advanced levels. AMWA will review this training outline periodically to ensure that it conforms with current industry requirements and trends.

In developing this outline, the Committee recognizes that strong medical writing skills and knowledge of the drug development process are only two aspects of a successful regulatory writer. Rather, professional success, especially at advanced levels, depends on a host of other skills and proficiencies that enhance the value of regulatory writers and make them vital members of the team (Figure 1).



In addition to the outline, the Committee also compiled a list of independent reading that provides essential background knowledge that regulatory writers need while developing their skills in the recommended training topics. Also included is a template checklist for recommended training that medical writing managers and mentors can use to customize training to fit the unique needs of their regulatory writers and company.

#### **Categories of Topics**

The training topics are organized under three primary categories—core knowledge and skills, soft skills, and documents, with the order of topics representing what the Committee believes is the order in which an entry-level regulatory writer should master the training topics in these three areas. Regulatory documents are listed according to how new regulatory writers typically train on documents and the frequency with which the documents are developed. Note that nonclinical documents, pharmacokinetic reports, medical device documents, and other specialized documents are not included in the list. Specialized documents can be added when customizing the training checklist to reflect the needs of specific regulatory writers and/or companies.

The Committee acknowledges that real-world training needs vary across companies. Although the order of topics within each of the three primary categories appears to be linear, training across the categories may be concurrent based on an individual's learning abilities and corporate needs and work opportunities. For example, training on a topic within soft skills can occur before or be concurrent with training on topics within core knowledge or documents. This is, in fact, encouraged, as a regulatory writer will typically require multiple skills when managing live projects.

#### **Levels of Topics**

The list of training topics also includes levels, with Level 1 indicating foundational skills and Level 2, advanced skills. These skills follow an order that matches the skills needed for the deliverables in each level in the document category. For documents, the levels align with the level of the regulatory writer, starting with support documents and moving to protocols and safety updates and data-driven documents that require interpretation and messaging. The level of a specific document may change according to its complexity. For example, a protocol that is simple will be a Level 1 document, whereas a complex protocol may be a Level 2 document.

The AMWA Medical Executives Council and the AMWA Board of Directors reviewed the list of recommended training topics and provided feedback.

## **AMWA Recommended Training Outline**

#### Core Knowledge and Skills

Training in the area of core knowledge and skills is fundamental to success as a regulatory writer. Writers are expected to know and advise on the latest requirements and best practices for regulatory writing, disclosure, etc. They should be able to confidently lead project teams to produce documents that are submission ready, even at the early stages of development (ie, protocols), as the initial development writing has downstream effects. Although the knowledge and skills noted here focus on clinical documents, the list should be modified for situations in which regulatory writers work in other areas (eg, preclinical).

### **Drug Development Process**

All regulatory writers should have a high-level knowledge of the drug development process and understand how regulatory documents fit in that process.

- Ethics and Good Clinical Practice (GCP)
- Overview of global regulatory agencies
- Transparency and disclosure
- Key documents in the drug lifecycle
  - Clinical development plan
  - General investigational plan
  - Common technical document (CTD) (overview)
  - Clinical trial initiation documents (eg, Investigational New Drug [IND] application, Clinical Trial Application [CTA] and registration applications (New Drug Application [NDA] and Marketing Authorisation Application [MAA]) (overview)

### Medical Writing Skills

Strong medical writing skills are a core competency for all medical communicators. Consolidating contributions and input from project teams into focused and clear deliverables will demonstrate the value of a writer and facilitate his or her integration into a matrix team.

- Basic writing and editing mechanics
- Principles of writing
- Writing to specific audiences
- Clear communication of complex concepts

## **Technical Aptitude**

Regulatory writers must be proficient with technology and adept at working with a variety of programs and systems used in the regulatory writing environment. Frequently, team members are hesitant to work within required systems and rely on the writer to do so. The knowledge and skills needed for software and other tools will be company-specific and will vary.

Level 1

- MS Word
- Collaborative/Coauthoring tools
- Document management systems
- Adobe Acrobat
- Document review systems
- Table creation and formatting
- Reference/bibliography management
- Appendices quality review and management
- Secure file and information transfer methods

#### Level 2

- Clinical Data Interchange Standards Consortium (CDISC) Glossary
- Structured authoring
- Template creation and formatting
- Project management
- Visual communication: figures and graphs

## Analytical Skills

Training in analytical knowledge and skills is necessary to enhance regulatory writers' understanding of the context of their writing and to help them remain current with emerging research concepts and processes. In addition, writers need to create and link key messaging to study outcomes for reviewers to efficiently digest and validate a substantial amount of trial data.

#### Level 1

- Evolving clinical trial designs
- Quality control review
- Basic statistical concepts
- Pharmacokinetics and pharmacodynamics
- Basic data interpretation
- Lean authoring

#### Level 2

- Advanced data interpretation
- Advanced statistical concepts

## Soft Skills

Soft skills are crucial for working efficiently, gaining trust, communicating and collaborating effectively with colleagues, and achieving personal and company goals. As regulatory writers become proficient in soft skills, their teams' confidence (as well as their own) will enable them to be a valued and integral member.

#### Self-Management

Level 1

- Time management
- Developing connections and maintaining high productivity
  - -Remote working
  - -Working cross-functionally

#### Level 2

• Critical thinking, decision-making, and problem-solving

## People Skills

#### Level 1

- General project management (leading the document development process)
- Interpersonal communication (includes email)
- Leading meetings
- Leading teams through document review: best practices (includes editing, publishing, and quality control at the end of the document process)
- Working within a multifunctional team structure (matrix environment)
- Collaborating virtually and in person
- Working across cultures
- Dealing with difficult/unexpected situations or personalities

#### Level 2

- Leading without authority
- Influencing and persuading
- Project management negotiation
- Managing conflict
- Demonstrating the value of the medical writer
- Managing a team of writers (for complex projects, such as submissions)

#### **Personal Development**

- Stress management
- Resilience and flexibility
- Self-confidence
- Composure under pressure
- Empathy
- Saying 'no' while maintaining positive relationships

#### Documents\*

Practical application in developing regulatory documents is the cornerstone of the overall training of a regulatory writer. (\*The complexity of a specific document is a factor in assigning a level. If a Level 1 document is complex, it should be categorized as Level 2.)

Level 1

- Patient narratives
- Investigator's Brochure and updates
- Informed consent forms
- Simple protocols and clinical study reports (CSRs)

#### Level 2

- Lay summaries and other patient- and public-facing documents
- Basic results and trial disclosure reporting
- Simple study initiation document sections
- Simple CTD modules (5.2, 2.7.5, 2.7.6)
- Safety updates: Risk Management Plans (RMPs), Drug Safety Update Reports (DSURs), Periodic Adverse Drug Experience Reports (PADERs), and Periodic Benefit-Risk Evaluation Reports (PBRERs)
- Complex protocols

#### Level 3

- Complex CSRs
- Complex study initiation document sections
- CTD efficacy summary (module 2.7.3) and Integrated Summary of Efficacy
- CTD safety summary (module 2.7.4) and Integrated Summary of Safety
- CTD clinical overview (module 2.5)
- Health authority response documents
- Briefing documents

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#### References

1. Clemow DB, Wagner B, Marshallsay C, et al. Medical Writing Competency Model—Section 2: knowledge, skills, abilities, and behaviors. *Ther Innov Regul Sci.* 2018;52(1):78-88.

#### About the American Medical Writers Association

Founded in 1940, the American Medical Writers Association (AMWA) is the leading professional organization for writers, editors, and other communicators of medical information. AMWA serves as a resource for professional medical communicators, promoting excellence in medical communication and providing educational resources in support of that goal. AMWA represents more than 4,000 members in the US, Canada, and 30 other countries who are committed to accurately and ethically making information about health and medicine clear and meaningful.

AMWA is committed to the overall value of continuous learning and offers a variety of educational resources, including workshops, onsite training, monthly webinars focusing on practical topics, and interactive online learning activities designed to enhance medical communication skills. AMWA's premier event, the Medical Writing & Communication Conference, offers more than 100 learning opportunities through its education sessions, roundtable discussions, and posters. You can learn more about AMWA at www.amwa.org.

## **Recommended Independent Reading\***

#### Core Knowledge and Skills

#### Overview

Handbook for Good Clinical Research Practice (GCP). Guidance for Implementation; World Health Organization, 2005

E6(R2) Good Clinical Practice: Integrated Addendum to ICH E6(R1). Guidance for Industry; US FDA, March 2018

World Medical Association Declaration of Helsinki. Ethical Principles for Medical Research Involving Human Subjects. JAMA. 2013;310(20):2191-2194.

**CDISC Global Regulatory Requirements** 

External guidance on the implementation of the European Medicines Agency policy on the publication of clinical data for medicinal products for human use (EMA policy 0070), version 1.4; European Medicines Agency, October 2018

"What you need and when—the key documents in the drug lifecycle" [includes documentation roadmap]

M4 Organization of the Common Technical Document for the Registration of Pharmaceuticals for Human Use. Guidance for Industry; US FDA, October 2017

Providing Regulatory Submissions in Electronic Format—Certain Human Pharmaceutical Product Applications and Related Submissions Using the eCTD Specifications. Guidance for Industry (revision 7); US FDA, February 2020

FDA: Investigational New Drug (IND) Application

FDA: New Drug Application (NDA)

#### Analytical Skills (Level 1)

Guidance for Industry. E9 Statistical Principles for Clinical Trials; US FDA, 1998

#### Documents

Level 1

CDISC Glossary

Chen A-W, Tetzlaff JM, Altman DG, et al. SPIRIT 2013 statement: Defining standard protocol items for clinical trials. *Ann Intern Med.* 2013;158(3):200-207.

TransCelerate Common Protocol Template

McNally T, Whitsell R. The TransCelerate Clinical Protocol Template. AMWA J. 2018;33(4):170-177.

#### Level 2

Guidance for Industry. E2F Development Safety Update Report; US FDA, 2011.

Summaries of Clinical Trial Results for Laypersons, version 2; Expert Group on Clinical Trials for the Implementation of Regulation (EU) No. 536/2014 on Clinical Trials on Medicinal Products for Human Use, February 2018

Federal Plain Language Guidelines; Plain Language.gov, May 2011

#### Level 3

TransCelerate CSR Template

Hamilton S, Bernstein AB, Blakey G, et al. (on behalf of the Budapest Working Group [BWG]). Critical review of the TransCelerate Template for clinical study reports (CSRs) and publication of Version 2 of the CORE Reference (Clarity and Openness in Reporting: E3-based) Terminology Table. *Res Integr Peer Rev.* 2019;4:16.

CORE (Clarity and Openness in Reporting: E3-based). An Open Access Resource to Support Authoring of Clinical Study Reports for Interventional Studies; CORE, 2016

Guideline for Industry. Structure and Content of Clinical Study Reports; ICH3, 1996

Guidance for Industry. E3 Structure and Content of Clinical Study Reports. Questions and Answers (R1); US FDA, January 2013

Electronic Code of Federal Regulations, Part 312– Investigational New Drug Application

Guide for Industry. M4S: The CTD–Safety; US FDA, August 2001

Schwartz DN, Umen MJ, Nomides K, Vanderhoof M. Understanding the differences and effectively transitioning between the US Integrated Summaries of Effectiveness and Safety (ISE/ISS) and the CTD Summaries of Clinical Efficacy and Safety (SCE/SCS). Drug Inform J. 2010;44:641-648.

European Medicines Agency. Human regulatory: overview

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\*All readings in this list are available in the AMWA Member Resource Library.

## **AMWA Recommended Training Outline Checklist**

Customize this checklist to fit the needs of an individual regulatory writer and/or your specific company.

Торіс	Training Completed		
	External	In-house	Hands-on
Core Knowledge/Skills			
Drug development process			
Ethics and GCP			
Overview of global regulatory agencies			
Transparency and disclosure			
Key documents in the drug lifecycle			
Clinical development plan			
General investigational plan			
CTD (overview)			
Study initiation documents (eg, IND application, CTA) and registration applications (eg, NDA, MAA) (overview)			
Medical writing skills			
Basic writing and editing mechanics			
Principles of writing			
Writing to specific audiences			
Clear communication of complex concepts			
Technical aptitude <sup>a</sup>			
Level 1			
MS Word			
Collaborative/Coauthoring tools			
Document management systems			
Adobe Acrobat			
Document review systems			
Table creation and formatting			
Reference/bibliography management			
Appendices quality review and management			
Secure file and information transfer methods			

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Level 2		
CDISC Glossary		
Structured authoring		
Template creation and formatting		
Project management		
Visual communication: figures and graphs		
Analytical skills		
Analytical skills Level 1	1	
Evolving clinical trial designs		
Quality control review		
Basic statistical concepts		
Pharmacokinetics and pharmacodynamics		
Basic data interpretation		
Lean authoring		
Level 2		
Advanced statistical concepts		
Advanced data interpretation		
Soft Skills		
Self-management		
Level 1		
Time management		
Developing connections and maintaining high productivity		
Remote working		
Working crossfunctionally		
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Level 2		
Critical thinking, decision-making, and problem-solving		

People skills		
Level 1		
General project management (leading the docu- ment development process)		
Interpersonal communication (includes e-mail)		
Leading meetings		
Leading teams through document review: best practices (includes editing, publishing, and quality control at end of document process)		
Working within a multi-functional team structure (matrix environment)		
Collaborating virtually and in person		
Working across cultures		
Saying "no" while maintaining positive relationships		
Dealing with difficult/ unexpected situations or personalities		
Level 2		
Leading without authority		
Influencing and persuading		
Project management negotiation		
Managing conflict		
Demonstrating the value of the regulatory writer		
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Personal development	1	
Stress management		
Resilience and flexibility		
Self-confidence		
Composure under pressure		
Empathy		
	l	 
Documents <sup>b</sup>	1	
Level 1		
Patient narratives		
IBs and updates		
Informed consent forms		
Simple protocols and CSRs		

Level 2		
Lay summaries and other patient-and public- facing documents (as well as plain language and health literacy principles)		
Basic results and trial disclosure reporting		
Simple study initiation document sections		
Simple CTD modules (5.2, 2.7.5, 2.7.6)		
Safety updates: RMPs, DSURs, PADERs, PBRERs		
Complex protocols		
Level 3		
Complex CSRs		
Complex study initiation document sections		
CTD efficacy summary (module 2.7.3) and ISE		
CTD safety summary (module 2.7.4) and ISS		
CTD clinical overview (module 2.5)		
Health authority response documents		
Briefing documents		

<sup>a</sup>The software and tools a regulatory writer will use will be company-specific and will vary.

<sup>b</sup>Add specialized documents as appropriate to meet the unique needs of your company. For example, if regulatory writers develop nonclinical documents or documents for medical devices, add those documents to the list. Also, move documents to a different level depending on their complexity. For example, a simple yearly update to an Investigator's Brochure may be a Level 1 document, but a substantial revision may be a Level 2 document. GCP = Good Clinical Practice, CTD = Common Technical Document, IND = Investigative New Drug, NDA = New Drug Application, CTA = Clinical Trial Application, MAA = Marketing Authorisation Application, CDISC = Clinical Data Interchange Standards Consortium, IB = Investigator's Brochure, CSR = Clinical Study Report, RMP = Risk Management Plans, DSUR = Drug Safety Update Report, PADER = Periodic Adverse Drug Experience Report, PBRER = Periodic Benefit-Risk Evaluation Report, ISE = Integrated Summary of Efficacy, ISS = Integrated Summary of Safety.



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