Enhancing Accruals via Automated Performance Monitoring

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1. Background

The University of Florida Health Cancer Center (UFHCC) Clinical Research Office (CRO) is a rapidly expanding research unit which oversees a portfolio of approximately 300 actively accruing studies. Prior to 2016, accrual to interventional studies averaged 330 subjects per year with treatment accruals comprising approximately 75% of enrollments. The UFHCC's Disease Site Groups (DSG), which were formalized in 2016, are charged with management of their group's research portfolio and ensuring that activated trials can be successfully accrued. The CRO created the DSG Performance Dashboard to establish DSG level enrollment targets and facilitate transparency and awareness of trial activity.
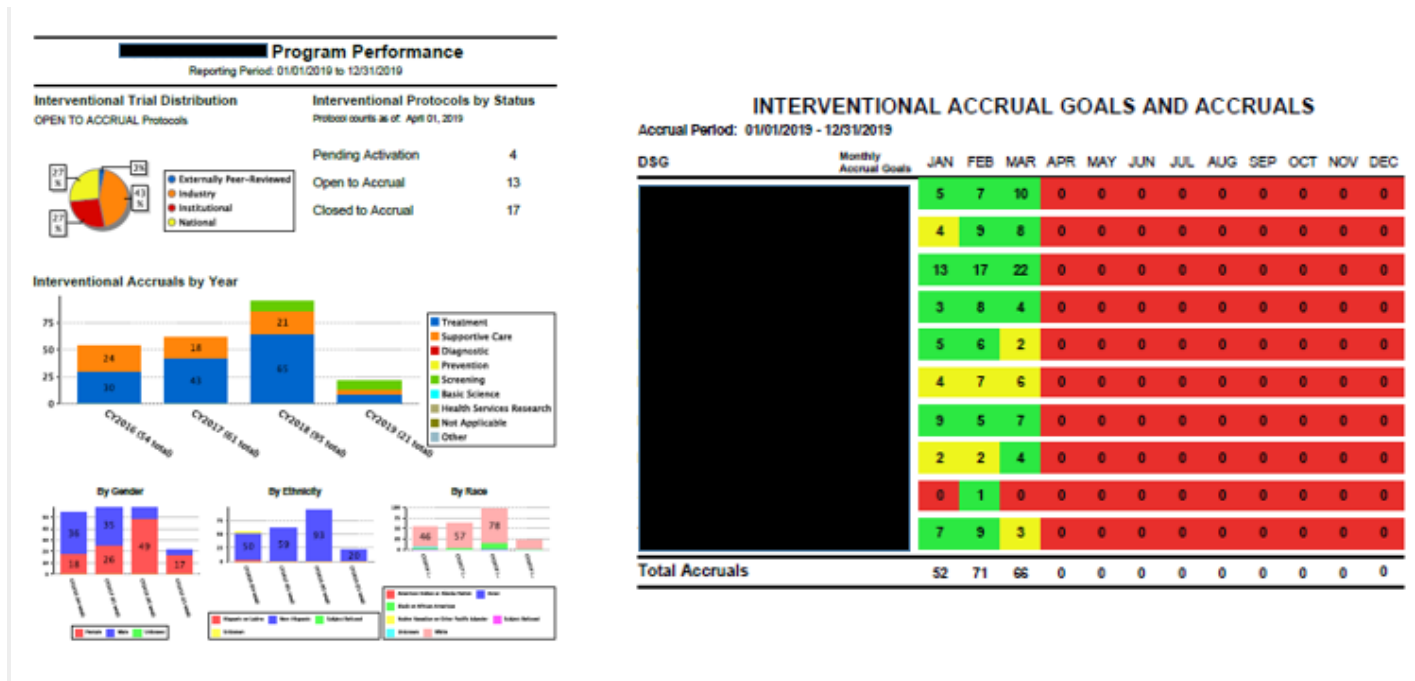
2. Goals

- Enhance investigator awareness of the available research portfolio
- Enhance investigator awareness of trial progress in meeting enrollment goals
- Provide automation and transparency in metric reporting

3. Solutions and Methods

Leveraging OnCore, the CRO developed a monthly DSG dashboard report that is distributed to leaders of the DSG, CRO and UFHCC. This dashboard provides real-time data and reflects the current DSG research portfolio of studies by type, year to date accrual (with historical trends), and enrollments by study, gender, race and ethnicity. These latter data are critical for DSGs to maintain awareness of enrollment disparities. Monthly enrollment targets are benchmarked for each DSG with accruals displayed in a "stoplight" report with a clear green (>75% monthly enrollment goal met), yellow (between 25-75%) or red (<25%) designations. These dashboards provide transparency and offer opportunities to monitor performance trends across and between DSGs. Friendly DSG competition has provided measurable results. This report is distributed monthly via email to UFHCC, DSG, and CRO leadership via an automated OnCore report.

4. Outcomes and Future Directions

Overall, since implementation of the DSG Performance Dashboard, interventional treatment enrollments increased 2.6-fold from 2016 to 2018 with enrollments to Cancer Population Science interventional studies increasing by 1.7 fold. DSG leader (n=8) survey results showed that 87.5% review the Dashboard on a monthly basis. In addition, while only 62.5% noted they believed the Dashboard had impact on DSG operations, 87.5% reported that they felt that publication of the Dashboard had contributed to increasing accruals.

Future directions include integrating data regarding underperforming studies and routine review by UFHCC's Community Outreach and Engagement director to better analyze alignment of enrollments with catchment area demographics as well as identifying trials that might benefit from COE resources.