

Winthrop P. Rockefeller Cancer Institute



Matthew Kovak, M.S., C.C.R.P., Laura Hutchins, M.D., Daisy Wade, B.A., C.C.R.P., Beth Scanlan, M.A., C.C.R.P., Brittany Lehman, B.S., C.C.R.P., Aaron Holley, B.S., Priscilla Newman, Sandy Annis, B.A., C.C.R.P. Cancer Clinical Trials and Regulatory Affairs, Winthrop P. Rockefeller Cancer Institute, University of Arkansas for Medical Sciences, Little Rock, AR

# Background

Record storage for our office had become a challenge. We were out of space and out of money. All of our regulatory records were maintained on paper for close to 300 studies. Paper binders were taking up physical space and printing and binding materials were costly.

# Metrics & Goals to be Achieved

The electronic system is a shared folder on the University's Network Server that is accessible only to those in the Cancer Clinical Trials and Regulatory Affairs Office (CCTRA). This project needed to address these goals:

**Goal 1**: Establishing a consistent method of storing regulatory binders electronically. **Goal 2:** Establishing an official process for monitoring access.

### **Methods**

An organizational system for the electronic binders was created by the CCTRA regulatory team. This organizational system included the following:

- Creating trial folders with consistent naming conventions
- Creating an SOP for monitors

Once these items were created, setting up prospective trials that hadn't started yet were implemented into this structure at the time of study start up. Space was a clear concern for us. We decided we needed a stopping point for all ongoing clinical trials. This allowed us to have a uniform mechanism for accessing regulatory binders. We chose an implementation date and then took the following steps:

- Placing a note to file for every trial that had a paper binder
- Training all regulatory team members on the new format
- Reviewing the new system at a staff meeting for all staff
- Creating an SOP for external monitors.

During the initial transition, monitors struggled with the new concept but adapted with time. We are now completely electronic except for the few items that are stored with original signatures.

# Outcomes

We went from a file room with several hundred binders of regulatory documents to using manila folders to hold all wet signature documents must still be kept on paper at this time. The regulatory team can keep these files in one locked drawer at their desk. Although the project had an initial increase on staff workload during the transition, staff are now fully engaged. Many of the records they receive are already in an electronic format and can be saved rather than printing and filing. Costs are significantly lower for supplies and the electronic storage costs have been minimal.

# **Electronic Regulatory Binders – A Homegrown System**

# Figure 1 – UAMS CCTRA E-Reg Schema

Establish consistent method of stor pro

Place a note to file for every trial tha

Training all regulatory team mem

Reviewing the new electronic regulato (Nurses, Coordina

Creatin

# **Lessons Learned & Future Directions**

It was not a quick process for transitioning all paper documents to the electronic format; the process took several months for the full regulatory team to complete (5 FTEs). Since then, we have participated in several demonstrations for companies who supply electronic regulatory binders. We have found that these systems are costly and not as easy to manage as our homegrown system. We feel that we saved significantly with our homegrown process.

### Contact

### Matthew Kovak, M.S., C.C.R.P **Assistant Director of Regulatory Affairs & Finance** Cancer Clinical Trials and Regulatory Affairs Office Winthrop P. Rockefeller Cancer Institute University of Arkansas for Medical Sciences 4301 West Markham, Slot 724 Little Rock, AR 72205 (501) 686-8274 – mrkovak@uams.edu

ing regulatory binders electronically and establish an official cess for monitoring access.
It had a paper binder as well in the new electronic regulatory binder.
nbers on the new format for electronic regulatory binders
ory binder system in our clinical trials staff meeting for all staff ators, Finance, Regulatory, and Managers).
g an SOP for external monitors.



University of Arkansas for Medical Sciences