Category: Clinical Trial Operations – Work in Progress

There and Back Again: A Satellite Site Operations Tale

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1. Background

Of all National Cancer Institute (NCI)-Designated Comprehensive Cancer Centers in the United States, Huntsman Cancer Institute (HCI) serves the largest geographic region. Three HCI satellite locations were established at community clinics to better reach and care for patients. The availability of clinical trials at our satellite locations helps expand treatment opportunities for our patients. Although it may be more convenient for patients, having multiple locations poses unique challenges to managing clinical trials. At HCI, the clinical trials office has coordination teams that focus on particular disease groups. However, the satellite team works with multiple disease groups and a variety of providers. Challenges to this model include miscommunication and maintaining continuity in trials across different teams.

2. Goals

There are currently 230 trials open to accrual at HCI, with 45 open at our satellite locations. We want to expand the portfolio of trials available at the satellite locations and see continued growth in patient visits and accruals.

3. Solutions and Methods

It is critical that coordinators communicate and work together across sites when enrolling, transferring, or screening patients. We have established ongoing training and created processes to better facilitate communication when coordinating trials across locations. Patient transfers from the main HCI to a satellite location require special attention. There is a level of continuity of care insomuch as our providers are consistent between sites. We have established a patient transfer process outlining timelines and dictating responsibilities for when patients change study locations permanently or for one visit. This process ensures the patient is cared for, scheduled appropriately, and that study procedures are completed consistently across sites and study teams. Additionally, the satellite site team has a dedicated project administrator. This position provides oversight for all aspects of satellite site operations, acts as a liaison between teams and locations, and coordinates process improvement activities. New hires attend a satellite operations training course with the project administrator. This course dictates the collaboration needed between the teams. Ongoing training through MasterControl requires all study teams to review the calendar template and work practice document outlining the patient transfer process.

4. Outcomes

The graph below reflects the lack of consistent growth in patient accruals to clinical trials at HCI satellite locations over time. Although some of these variations can be attributed to changes in provider and trial availability, we anticipate a steady increase in accruals in upcoming years. This growth is projected since implementing the transfer process, hiring a dedicated project administrator to manage satellite operations in 2019, and opening the new Sugar House location in 2020.

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5. Lessons Learned

We would like to see growth in the number of patients accrued at the satellite locations while maintaining quality and consistency across all of the HCI locations. Additionally, the COVID-19 pandemic has led to widespread use of instant messaging and conference calls, which has the positive impact of increasing collaboration between the satellite and disease group teams. We have learned the critical nature of maintaining communication and integrating teams across locations. This integration continues to occur through training, communication, process development, and quality improvement.

Figure:

Number of patients accrued to interventional treatment trials each year at an HCI satellite site.