

## **Implementation of Small Group Trainings to Expedite Initial Onboarding for Clinical Research Staff and Increase Connection Between New Employees**

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### **1. Background**

The Knight Cancer Institute (KCI) provides 1:1 onboarding for new clinical research staff members. The onboarding program consists of approximately 50 topics, requiring completion of about 30 one-hour individual sessions. The target timeline for initial onboarding completion is approximately five months, which requires one to two training sessions per week to accomplish. When fully staffed, KCI employs two full-time trainers, and each trainer can conduct about 20-25 training sessions per week. Maintaining an ideal pace, each trainer can handle a maximum caseload of 20-25 trainees (40-50 trainees total).

In late 2019, one trainer changed jobs, leaving a vacancy that unfortunately remained unfilled before OHSU implemented a soft hiring freeze in early 2020 due to COVID-19 and uncertain financial projections. Like other medical facilities, KCI experienced high clinical research staff turnover, and the hiring freeze was not lifted until fall 2020. Multiple new clinical research staff members were hired from August to December 2020, and a second trainer was hired in January 2021. Although again fully staffed with two trainers, the number of new trainees had grown to the highest totals the program had ever seen (110 trainees). Due to the imbalanced trainer-trainee ratio, onboarding time increased to approximately 12 months and trainees sometimes went weeks between training sessions. Additionally, COVID-19 modified operations requiring remote work for non-essential workers hindered connection among clinical research staff.

### **2. Goals**

The primary goal was to decrease onboarding completion time by increasing trainer touchpoints per employee. Another goal was to increase staff connection and engagement, in light of increased remote work.

### **3. Solutions and Methods**

Group trainings were implemented in August 2021. Prior to implementation, the trainers discussed small group training with clinical research managers and received buy-in and input. The trainers identified approximately 30 topics as amenable to group trainings, with the remainder to be covered during 1:1 sessions. Each group consisted of two to four trainees based on start date, role, and availability. Each group was scheduled for a weekly recurring meeting for 12 weeks, which could be extended if needed. The trainers continued to meet with each trainee for 1:1 training sessions to ensure all initial onboarding training topics were covered.

### **4. Outcomes**

Thus far, our evaluations indicate positive results following implementation of this new training strategy. Due to trainer touchpoints increasing per employee, trainees in a group are now completing onboarding in about seven months. Trainees are also communicating with their group members for answers to questions and resources. Additionally, group members are showing interest in meeting each other when they are on site.

### 5. Lessons Learned and Future Directions

The trainers re-reviewed training topics in early 2022. One topic was removed from the group list, three were added, and one was divided up for both individual and group content.

Group training appointments were extended on average from 12 weeks to 14 weeks. Going forward, the recurring group meetings will be scheduled initially for 16 weeks.

Formal feedback from group members is planned and will be solicited in an objective survey in fall 2022.

Figure:

