Designing a Demographics-Based Onboarding Satisfaction Survey of CTO Staff to Identify Areas to Reduce Turnover

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1. Background
In October 2020, a REDCap survey for staff in onboarding was implemented by the University of Cincinnati Cancer Center Clinical Trials Office (UCCC CTO). The onboarding survey was issued at one, three, six, and 12 months. This survey was confidential but not anonymous. In 2021, it was updated to include more employee demographics such as remote vs in-person, and years of work experience, research work experience and experience in oncology research.

2. Goals
1.) To determine if general onboarding satisfaction changes over time (i.e., at one, three, six, and 12 months into onboarding)
2.) To determine if general onboarding satisfaction differs by potential demographic factors (i.e., position, work location, prior work experience)
3.) To determine what, if any, the relationship between general onboarding satisfaction, employee demographics, and percent turnover.

3. Solutions and Methods
The onboarding survey was issued from REDCap to new staff (Clinical Research Coordinators/Data Coordinators, Financial, Regulatory, CTO Manager and Finance) from October 2020 through December 2023. The CTO Data Project Manager acted as an honest broker for all submissions to maintain confidentiality of responses. New staff were emailed by the data in the PM, and periodically reminded by their managers and preceptors to complete surveys but no formal reminder methods were employed.

4. Outcomes
Of the 95 eligible staff issued the onboarding surveys for 380 potential survey responses at all timepoints the following metrics were observed:
- Overall response rate by survey completion (partial completions were not included)
  - 18.4% (70/380 total surveys completed at all timepoints):
    - 6% (24 1-month surveys completed)
    - 6% (23 3-month surveys completed)
    - 5% (19 6-month surveys completed)
    - 1% (4 12-month surveys)
- Overall response rate by individuals:
  - 52% response rate for completion of at least 1 timepoint (49 individuals)
  - 33% response rate for completion of at least 2 timepoints (16 persons)
  - 4% response rate for completion of at least 3 timepoints (2 persons)
  - 0% response rate for completion of all 4 timepoints.

Fiscal year (July to June) turnover rates
- FY21 = 12% turnover
- FY22 = 16% turnover
FY23 = 15% turnover  
FY24 = 17%

The survey consisted of approximately 45 questions. For non-demographic and narrative response questions, scoring on a scale of 5 (most satisfied) to 1 (least satisfied) was used. Notable findings included:

- Satisfaction based on work location was not variable (4 – onsite, 4.5 - remote, 4 – hybrid)
- Staff with self-reported oncology experience were slightly more satisfied at 1 month (4.5) when compared to 3-, 6-, and 12-months whose median score averaged to a 4.
- Data staff (n=10 survey respondents) were least satisfied at initial survey completion (3.5) versus CRCs (4), Regulatory (5), QA (5), Fiscal (4), Managers (4).
- Generally, our staff is satisfied with the general onboarding process (4 or better) however we were unable to determine a relationship to turnover.

5. Lessons Learned and Future Directions
The response rates for the survey completion and individual respondents were lower than anticipated. To improve this, survey results will be publicly reported at staff meetings quarterly to generate interest and buy-in and a small incentive for offering a small incentive for survey completion (UCCC gifts) at later timepoints or multiple timepoints. Improvements in tracking implementation dates for changes made in resources/format/process within our office is needed to provide more robust interpretation of data in the future. A relationship to turnover was unable to be determined due to this poor response rate at later timepoints (high satisfaction rates at one month did not meaningfully relate to turnover at 12 months or later).

We intend going forward to provide additional onboarding structure and support to data staff to increase satisfaction with their initial general onboarding.