Continuing the Drive: Sustaining our Core Team Collaboration by Adding a Comprehensive Focus to Study Development Acceleration

M. Althuis Wrenn, L. Hanson, T. Galloway, A. Maguire, S. Voitik, D. Harwood, C. Griffin

Mayo Clinic Comprehensive Cancer Center, Florida

1. Background
Interactive communication between teams is essential for timely opening of clinical research studies at our site, a large academic institution. As clinical trials become increasingly complex, involving expansive multidisciplinary teams, streamlined and consistent communication across research departments becomes imperative for our success. This enhanced communication fosters optimal efficiency, ensures accurate and transparent information exchange, greatly improves readiness and accountability, and ultimately accelerates development timelines.

Since its inception in 2022, the Core Team Collaborative (CTC) leadership meeting has significantly improved real-time communications that resulted in a reduction of milestone roadblocks. We recognize the weekly CTC meetings as pivotal in fostering departmental collaboration and expediting study development.

2. Goals
Looking ahead to 2024, our aim is to enhance our teams’ awareness, particularly during the site selection and document collection phases. Effective departmental interactions play a key role in forecasting the staffing needed for future studies, which is equally vital to preparing for the imminent launch of clinical trials. Both scenarios necessitate training and integrating team members; therefore, ensuring ample time for hiring and onboarding a 'bench' for all study types, including complex trials, is crucial for achieving timeline success, to which we aim to reduce by 50 percent. Notably, a study delayed in opening due to limited staffing availability is as detrimental to our patients as one stalled in contract negotiations or other roadblocks. Our goal, thusly, is to promote proactive planning and streamline handoffs between trial development and activation, including clear communication of the staffing requirements essential for successful study openings. Additionally, we aim to prioritize support for internally funded studies, ensuring responsible stewardship of our resources. The CTC meeting is an optimum forum for such discussions.

3. Solutions and Methods:
As we enter our third year of the weekly CTC leadership meetings, we are looking to further build on the success of this communication channel by adding agenda items focused on predicted staffing needs. Ahead of these meetings, the leadership of our study coordinator units will assess their teams, evaluating their readiness to handle the complexity and workload of upcoming studies. During the CTC meeting, this evaluation can then be discussed with broader leadership, considering career advancement opportunities, with a focus on staff retention and succession planning.

4. Outcomes
Opening departmental communications involving study handoffs to include staff readiness aims to reduce study timelines by 50 percent, resulting in expedited access for patients to novel treatments that may otherwise be unavailable to them outside of clinical trials.
5. Lessons Learned and Future Directions
It’s our hope that in the future, the CTC will broaden its focus of optimizing communication channels and staff preparedness even more, ensuring efficient study development and timely delivery of treatments to our patients. Expanding on our current model, we envision incorporating topics such as quality assessment reviews and audit readiness into our CTC framework. Additionally, we aim to synchronize closeout activities across all units transforming the CTC into a forum to address study issues from initiation of study development all the way through the lifecycle of the trial.

Reference