

## **Eliminating Silos to Improve Activation**

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### **1. Background**

Expansion of reach for clinical trials is a part of the current strategic framework for MD Anderson Cancer Center. Two hundred forty-one treatment/interventional clinical trials were activated at MD Anderson in Calendar Year 2023, providing a significant volume of research options for patients. To successfully make trials available for patients to access research for their disease types in a timely manner, MD Anderson has an activation goal of 100 days. However, the average time to activation in CY2023 exceeded this goal by several weeks.

### **2. Goals**

There are several teams throughout the institution that must complete processes prior to activation. These teams have traditionally worked in siloed environments with varying roles and priorities. This has led to a lack of information sharing and low investment in improving activation times. To address this, we aim to:

- Increase communication and knowledge sharing among teams
- Encourage follow ups/escalations from teams who had not previously held to activation timelines
- Build a sense of community and common goals

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

We have established a 30-minute weekly meeting that includes stakeholders from each team required for successful activation of a clinical trial. At this meeting, we discuss specific protocols and inquire about issues that may be affecting each team and how we may collaborate to address delays. This "Activations Huddle" includes members from the activation team, legal services, clinical research finance (including both the coverage determination team and the budget team), the clinical trial management system team, the informed consent editing team, investigational pharmacy, the Clinical and Translational Research Center laboratory, and two different teams who have roles with treatment plan builds.

### **4. Outcomes**

Since the meetings began in September 2023, we have noticed a more consistent approach to escalating delays to industry sponsors, study teams, and our own Huddle members. We have been able to better communicate studies that are either moving rapidly or are of a high priority; and to identify studies with issues that may not make activation feasible. This has resulted in better communication between departments, decreases in time to completion for certain teams' tasks, and increased ownership of the role everyone plays in activation.

### **5. Lessons Learned and Future Directions**

We plan to continue the weekly Activations Huddle meeting and continue to track metrics (time to completion for specific tasks) from each of the teams. As delays in other areas are identified, additional members may be added to the team.