

Research Trials Review Committee: Supporting Non-Treatment Trials, A New Approach

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BACKGROUND

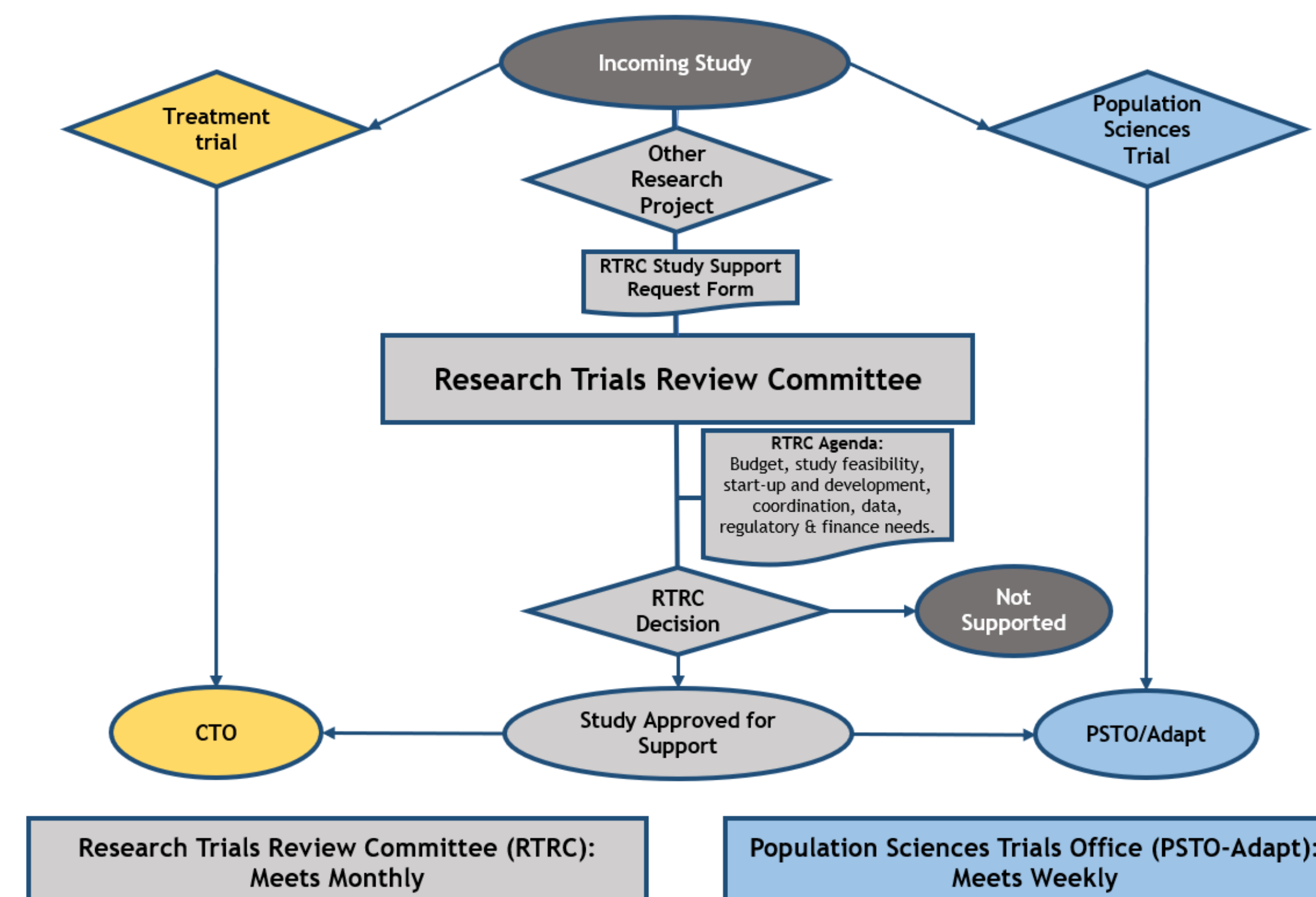
Huntsman Cancer Institute established a multidisciplinary group of administrative leaders to review proposals for non-treatment, non-population science-based research projects or clinical trials, called the Huntsman Cancer Institute Research Trials Review Committee (RTRC). Huntsman Cancer Institute has two mature clinical trial offices: one for treatment trials and the other for population sciences. The RTRC is charged with centrally supporting research proposals from various disease centers that need regulatory, finance, data, or clinical coordination support for projects that do not clearly fit within one of these two offices. Investigators are interested in numerous projects that extend beyond these traditional domains.

GOALS

The goal was to establish a formal review body to allocate staffing resources and expertise for projects and trials that were outside the scope of treatment or population science-based research to support investigators from across the cancer research continuum. An additional goal was to allow for formal review for investigators that have broad interest in cancer research and need staff resources to ensure compliance with local and federal guidelines for conducting clinical research.

SOLUTIONS AND METHODS

The proposal of a new committee named the Research Trial Review Committee (RTRC) was formally presented and endorsed by the Clinical Research Executive Committee. The committee consists of senior directors of both clinical and population-based science as well as administrative officers, directors, and managers that span clinical research, population sciences, and disease centers areas. The review by the RTRC takes place prior to the PRMC and most qualify for expedited/administrative review.



OUTCOMES

Evolving and growing infrastructure to support the RTRC-approved projects has allowed for expert regulatory, finance, and contracting as well as data system building, analysis, and patient coordination. In addition to funding for individual research projects and trials, the disease centers financially support some of the coordination resources required for the projects in this space, and the cancer center supports the central administration for other core functions. In 2024, the committee reviewed 11 total trials, 10 of which were approved for support and only 1 declined. This is a significant improvement from 2023, when the committee reviewed 9 studies, 6 of which were declined due to limited staff resources.

LESSONS LEARNED AND FUTURE DIRECTIONS

The investment in the RTRC program has successfully led to fewer research projects being declined due to a lack of resources and has successfully supported numerous projects annually since its launch. We are considering additional protocol writing resources to facilitate the development and maintenance of future research projects within this domain.