

Category: Clinical Trial Access (Network, Satellite, and Other Multisite Accrual Enhancement Efforts) - Work in progress

Design and Execution of Community Trial Network: the Jefferson Enterprise SKCCC Experience

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1. Background

Between 2018 and 2024 Jefferson Health expanded to include 17 hospitals (Legacy Jefferson), which created new initiatives and opportunities to develop and expand access to clinical trials in the community. Early efforts focused on regions where Gynecologic Oncology and Woman's Oncology were strengths. In 2021 this effort was formalized by the appointment of a Medical Director and later an Administrative Director to focus the development of clinical trials across all sites that focused around five community Regional Research Sites (RRS), and to expand trial involvement across all cancer specialties. We will present the multifaceted approach implemented from 2021 – 2025 to improve access and enrollment in community based clinical trials.

2. Goals

- Establish expanded access to clinical trials across 17 hospitals spanning Southeastern Pennsylvania and southern New Jersey by building local research staffing models and clinical trials support infrastructure within each community site
- Educate and engage community-based Oncologists in clinical trial design and execution and the importance of clinical trial participation as part of high-quality cancer care
- Integrate community oncologists with Jefferson University Hospital physicians to emphasize the value and specific needs of community-based clinical trials, supporting the expansion of the Sidney Kimmel Comprehensive Cancer Center (SKCCC) trial portfolio into a unified, system-wide operation

3. Solutions and Methods

- Developed a network of local clinical trials office (CTO) staff embedded at each RRS supported by the main CTO staff to ensure consistent onboarding, training, and troubleshooting to enable shared learning and oversight for managing community –based trial challenges
- Assignment of a medical lead at each site in partnership with the site Project Manager to educate and encourage local medical staff participation in the identification and enrollment of patients on clinical trials

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- Integrate local MDs with the Jefferson SKCCC Multidisciplinary Disease Groups (MDGs) to help align research priorities and develop and expand the research portfolios to ensure it reflects the needs and demographics of the community patient populations

4. Outcomes

Over the past five years, the RRS at SKCCC have undergone significant expansion from one to five research sites. The number of clinical trials opened at the sites increased substantially from 25 to 81 trials across the five sites, showing the deliberate efforts to broaden trial availability within the community setting. This has resulted in an increase of 50 percent in interventional treatment clinical trial enrollments across the RRSs in 2025. The increase in clinical trial availability represented multiple disease types (from 1 to over 10) and an increase in number of patients referred and screened for clinical trials across the enterprise.

5. Lessons Learned and Future Directions

- Physician engagement has been essential to building a clinical trial portfolio aligned with community patient needs
- Investigator-Initiated trials can effectively increase enrollment and address unmet gaps but often lack funding to support required staffing
- Additional education of industry sponsors is needed to ensure logistical support—such as shipping investigational product and lab kits—to community sites
- Despite system-wide education efforts, meaningful cultural change required direct involvement from medical and MDG Leads to increase community physician engagement and patient participation
- With current threats to trial funding, expanding sponsored trial support will be critical for sustained growth