



Three-Fold Solution

Site start-up can be a lengthy procedure due to the number of parties involved. Miscommunication and retraining cause the largest complications, however leadership and oversight can remedy these

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Astonishingly, the same four problems that delayed trial start-ups 20 years ago are still doing so today; very little has changed. Sponsors, CROs and investigator sites consistently name redundant training and certification, budgeting and contracting issues, vendor relations and scheduling concerns as the top reasons that site activation can take up to a year (1).

Certainly, these are not the only issues that cause stoppage. Feasibility studies, regulatory matters and institutional review board (IRB) approvals play their part, but the 'big four' remain the same. However, stakeholders can embrace a three-fold solution to speed up trial start dates, which has the potential to slash site activation times to as little as 30 days.

The 'Big Four'

Before turning to the solution, having a clear understanding of the problems preventing swift site activation is important.

Training Frustrations

This process continues to be a major hurdle. To fulfil trial protocols, sites have to teach and re-certify personnel and equipment for every study. Lab, paper and electronic data

capture training all take time – sometimes up to 30 hours per person.

A sponsor may be running 10 trials at a single site with the same drug to investigate mild deviations. Regardless, each study needs to complete its own training and certification. No industry-accepted procedure exists where one can simply 'check the box' that a site or person is qualified to run or work in akin trials. Similarly, this cannot be done between sponsors, even if the requirements are identical.

The result of this is a waste of time and consistent delay in site activation. Personnel are often frustrated over the training and retraining procedures with which they are perfectly familiar. Thus, although resistance to this process is not uncommon, it does further postpone study start-up.

Contract Woes

Budgeting and contracting interruptions have various origins. Sponsors or CROs may have inexperienced negotiators working for them. Sites may use a study coordinator or a receptionist to handle expense matters. Little communication may exist between clinical staff and financial teams. Follow-up may be poor, allowing matters to sit for days, or even weeks, without being



addressed. Lastly, one of the greatest time wasters of all, every study is usually entered into as if it is the first one the CRO or site has ever done with the sponsor, even if it is the 50th or 100th. Stakeholders tend to not leverage the history and partnership between them to streamline the negotiating and contracting process.

Merchant Mismanagement

Third-party vendors provide various services for a clinical trial, such as:

- Study and protocol design and review
- Case report form production
- Trial master file creation and management
- Database development and control
- Sample size calculations and power analysis
- GCP audits and training

Unfortunately, if the site, sponsor or CRO drops the ball on choosing vendors, arranging for supplies or ensuring required training completion, activation can be postponed until further notice.

Scheduling Slowdowns

Sponsors, CROs and sites can be beset with a negative mentality when scheduling. They believe they cannot do this until:

- The budget is finalised
- Training is complete

- The IRB approval is granted
- The contract is signed
- All material is on site, alongside the drug itself

With this mentality, actually beginning a trial can feel like a miracle.

The Key Three

Site activation delays cause significant consequences, such as:

- Increased study budgets
- Setbacks in getting needed drugs to patients
- Reduced time for market exclusivity
- A potential revenue loss of millions of dollars per day

Although it can appear so, realising stoppages are not any single stakeholder's fault is imperative. Sponsors may point the finger at CROs or sites, the CRO may blame the sponsor or the site and sites, in their turn, put the responsibility in the sponsor or CRO's lap. In fact, delays are every stakeholder's responsibility, and each one shares the obligation to work towards a solution.

In some ways, speeding up activation is straightforward. However, despite that fact, the solution requires constant vigilance and effort to implement – as evidenced by the continued delays plaguing all those involved. The three-fold method entails leadership, oversight and communication.

	The solution in action			
	Training and certification	Budgets and contracts	Vendor relations	Scheduling
Leadership	Sets the tone for the start-up, positioning a need for training, certification and an environment where people are motivated to accomplish required tasks	Establishes a partner relationship between stakeholders to streamline contract negotiations by building on past experience, rather than treating each project as an isolated event	Determines priorities relating to vendors, such as which need to be contacted first and which must deliver supplies first	Replaces a negative mentality with positivity, driving schedules forward despite obstacles
Oversight	Plans what measures have to take place at what point, working backward from the desired start date. These activities are monitored and managed, ensuring timely completion	Ensures that items are followed up on promptly, avoiding delays and creating procedures that enhance budgeting and contracting negotiations	Tracks vendor contracts, training, certifications, approvals, supplies and more	Prioritises schedules across all sites and manages tasks, ensuring that project milestones are met
Communication	Emphasises importance of instruction and accreditation and the role these play in a trial's success. This ensures that people will be more inclined to engage in the required tasks	Maintains open connections between stakeholders and facilitates, both in terms of clarity and collaboration	Bridges the gap between CROs, vendors and sites to build a team working toward a single goal	Helps personnel identify needs and find solutions to move past 'I cannot' to 'I can'

Table 1: Fixing delays in site activation: A 'how-to' guide to addressing the 'big four' critical issues

“ While project managers excel at tracking the details of what is being accomplished and what still needs to be done, leaders proactively drive matters forward to get the job done by supplying strategy, motivating employees, removing obstacles and securing resources ”

Leadership at Every Level

In the study start-up process, leadership is required at all stages: sponsor, CRO and site. In particular, sponsors need to provide it in the form of delivering the goal and vision for the trial. CROs and sites need to have a clear picture of where they are going to plan this journey effectively, as well as thinking beyond project management and coordination to true leadership by taking responsibility for the myriad of tasks necessary for a timely start-up. While project managers excel at tracking the details of what is being accomplished and what still needs to be done, leaders proactively drive matters forward to get the job done by supplying strategy, motivating employees, removing obstacles and securing resources.

Powerful and Engaged Oversight

With so many players – sponsor, CRO, vendors, sites, clinical operations, etc – dropping the baton during start-up is easy. For example, a CRO may send an email to a vendor requesting certain information. Two weeks later, the sponsor realises that start-up has been delayed because the vendor has not provided the information and no one followed up.

This is where project managers and coordinators for each stakeholder come into their own. Rather than passing the baton and sitting back to wait for a reply, oversight involves project managers and coordinators following up promptly if a required action is not forthcoming. Essentially, oversight means taking responsibility not just for the tasks on hand, but also for those that may have been passed on to another stakeholder.

Constant Communication

Dialogue is the lifeblood of every clinical trial. Firstly, to facilitate good practice of this, streamlining points of contact between stakeholders is critical. If eight people from the sponsor are talking to 10 people at the CRO who are in contact with six people at the site, then ample opportunities exist for misalignment, misinformation, mismanagement and missed timelines.

Secondly, strong communication depends on setting up regular checkpoints, such as meetings between stakeholders to discuss timelines, accomplishments and obstacles to ensure that start-up stays on track.

Strengthening the Chain

Leadership, oversight and communication need to be a priority for every stakeholder: sponsor, CRO, vendor and site. Ultimately, a start-up's speed and success will depend on the weakest link in the chain. Embracing this three-fold solution to successful start-up begins with the following:

- Identifying key leaders who can interface with sponsors and site staff to deliver a clear trial vision and plan
- Investing in dedicated project management personnel to provide oversight of execution timelines, including feasibility, budgets and contracts, site start-up and patient recruitment
- Developing a communication tree to proactively engage with all stakeholders on a regular basis

While these solutions are not difficult concepts to grasp, they can be very challenging to implement. Nevertheless, the return on investment is more than adequate, as improving the site activation process significantly speeds up trial start dates, setting a solid foundation for a successful study.

Reference

1. Visit: www.clinicalinformaticsnews.com/2016/09/13/the-struggle-to-speed-start-up.aspx

About the author



Sean Stanton is Senior Vice President Global Operations at Bioclinica Research Network. He has dedicated the last 25 years of his career to creating successful, high-performing research sites and, to date, has led the start-up of 25 trial sites, six inpatient hospitals and 19 outpatient clinics. More than 5,000 trials have been conducted at these sites, leading to over 50 drug approvals, and, in these, he directed recruitment for the screening of 2,000 to 6,000 patients annually. A sought-after industry expert, Sean has brought innovative thinking to research in all aspects of site practice, from purchasing and resourcing to the use of benchmarking and metrics in business planning to guide trial growth.

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