

MNCCTN: Challenges to Opening a State-Wide Network and the Pathway to Success - A 2 Year Perspective

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1. Background

People living in rural areas face barriers to high quality cancer care. Additionally, these patients are often diagnosed with more advanced disease and have been shown to have worse outcomes than those living in urban areas.

Often, cancer clinical trials are offered at large, academic institutions in urban areas. For patients willing and able to travel, participation can mean frequent long drives and logistical challenges, but for many, participation is not an option. 42% of Minnesotans live beyond the practical reach of the state's two NCI-designated comprehensive cancer centers; the Masonic Cancer Center, University of Minnesota and Mayo Clinic Cancer Center.

2. Goals

The Minnesota Cancer Clinical Trials Network (MNCCTN) aims to reduce the burden of cancer on all Minnesotans through greater access to cancer clinical trials. MNCCTN allows sites that have not previously offered their patients access to cancer clinical trials the opportunity to do so.

3. Solutions and Methods

Partnering with five of Minnesota's largest healthcare providers, MNCCTN provides funding for infrastructure necessary to conduct cancer clinical trials. This includes research staff (physicians and coordinators), equipment, and capital upgrades.

Acting as a research coordinating center, MNCCTN brings forward studies from the Masonic Cancer Center, the Mayo Clinic Cancer Center, and Hormel Institute in which sites can choose to participate.

4. Outcomes and Future Directions

1. MNCCTN has awarded funding to 27 sites to be opened by 2020. To-date, 11 sites have enrolled 137 patients onto 29 unique cancer clinical trials.
2. 79 personnel are actively working on MNCCTN throughout the state. 21 research coordinators have been hired and trained.
3. MNCCTN developed a clinical trial educational video that aired statewide and a broad suite of study-specific and general educational brochures and media materials.
4. Three investigator-initiated studies are open to enrollment at 9 sites.

Working with distinct and competing healthcare organizations requires transparency and consistent communication to establish mutually agreeable procedures and to maintain productive working

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relationships. MNCCTN places a daily emphasis on continually strengthening and reinforcing the MNCCTN partnership.

MNCCTN works with partners to understand the needs of sites. Staffing and education are two areas of focus.

1. Rural sites can have difficulty hiring and retaining qualified research staff, and once hired, these staff can be pulled in competing directions. MNCCTN works with sites to ensure protected research time and on methods for integrating research into the site's daily operations.
2. MNCCTN offers funding for research staff training and education to assist in maintaining engaged, quality staff. MNCCTN places a strong focus on research education, emphasizing both clinical and regulatory compliance practices and leads educational initiatives for research and clinic staff.

MNCCTN's current priorities focus on standardization and efficiency.

1. Expanding standardized procedures and documents will streamline the start-up process, make reporting more efficient, and ensure quality.
2. Several options exist for IRB review of multi-site studies including local approval, sIRB review at an MNCCTN partner, and a commercial IRB. MNCCTN is piloting each of these methods to evaluate cost, efficiency, and general compliance with the aim of balancing compliance, costs, and time.