Research Portfolio Management: The Protocol Performance Monitoring Dashboard

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Background

❖ As an NCI-designated comprehensive cancer center, Memorial Sloan Kettering (MSK) is required per Cancer Center Support Grant (CCSG) guidelines to have a Protocol Review and Monitoring System (PRMS), responsible for monitoring ongoing institutional research.

❖ Historically, MSK's PRMS Committee (PRMC) was responsible for monitoring the scientific progress of our clinical research portfolio.

❖ More recently, MSK's PRMC created a Protocol Monitoring sub-committee whose sole responsibility is carrying out their mission by evaluating accrual rates, scientific progress, and patient need and determining trials' potential for completion.

Goal/Methods

❖ To accomplish its task of closing protocols with low potential for completion, the sub-committee needed a real-time reporting tool to aid in identifying underperforming trials.

❖ This tool could be used by department leadership to assess their portfolio and preemptively close underperforming trials that may otherwise be identified by the committee.

❖ In collaboration with MSK's Clinical Research Informatics and Technology, we developed a user-friendly dashboard to assist with assessing protocol performance.

❖ Leveraging data from multiple systems, the dashboard blends comprehensive metrics, including protocol lifespan, estimated time to study completion (ETC), and accrual rates.

Dashboard Features

❖ The pop-out provides context, showing a clear picture of accrual performance for patients accrued with MSK Oversight (internal locations and participating sites) which assists the committee when making decisions about closures.

❖ Multiple filters make it easy to isolate key protocols. E.g., Can isolate protocols that have accrued 0 patients or have been open for an extended period (determined by the user) and may no longer be scientifically relevant.

Next Steps

❖ Broaden utilization to other institutional leaders (i.e., department heads) and provide education to increase transparency and promote collaboration of portfolio management between PRMS and departments.

❖ Reassess needs to identify improvements and new tools.

Select any protocol on the dashboard and a new graph appears showing the # of accruals by month over the lifetime of a study

Protocol Performance Monitoring
Data Source Updated: 3/8/2022 8:13:40 AM

Protocol Count — 31

Main Graph Details
➢ Horizontal Axis - percentage of completed accruals.
➢ Vertical Axis - years open to accrual.
➢ Each dot on the graph represents a protocol and is encoded by color based on ETC.
➢ ETC estimates the amount of time (in years) in which a protocol will complete accrual based on the completed accruals and time open.
➢ Protocols with 0 accruals are listed as unknown.
➢ Over target protocols have met or exceeded planned accruals.

ETC: ■ < 5 Years   ■ >=5 Years   ■ Over Target   ■ Unknown

Table Details
➢ Includes important details such as:
  • Regulatory sponsor
  • Principal investigator
  • Last accrual date
  • Number of target and actual accruals
  • ETC
  • Protocol type/category
  • Title
  • Information about prior underperforming notices (i.e., # of NP Notices)
  • When the last notice was issued (i.e., Last NP Date)

Phase	Protocol Type	Protocol Category	Sponsors	Last Notice Cycle	OTA Date	Last Accrual Date	Total Accrual in the Last 6 Months (MSK Oversight)	Target Accrual Overall	Total Target Accrual (MSK Oversight)	Total Accrual (MSK Oversight)	Target Accrual at MSK	Actual Accrual at MSK	ETC	# of NP Notices	Last NP Date
					2/11/22	4	400	400	267	400	267	7.6	1	2/16/2021
					4/14/21	0	339	339	302	Null	275	1.6	0	Null
					3/2/22	6	400	400	318	Null	318	2.3	2	7/15/2021
					2/4/22	2	256	50	58	50	58	-0.7	1	2/10/2022
					12/6/21	1	48	48	34	41	29	1.7	0	Null
					5/28/21	0	51	30	28	30	28	0.3	0	Null
					2/23/22	6	30	30	26	20	20	0.5	0	Null
					11/30/21	2	350	20	8	20	8			
					7/28/21	0	114	15	14	15	14			
					1/5/22	6	175	25	32	25	32	-0.7		
					11/30/21	1	70	25	9	25	9	5.7		
					1/26/22	0	100	20	16	20	16			
					2/9/22	8	24	24	26	24	26	-0.2		Null

Spring 2022
First time used by the new subcommittee