

Background

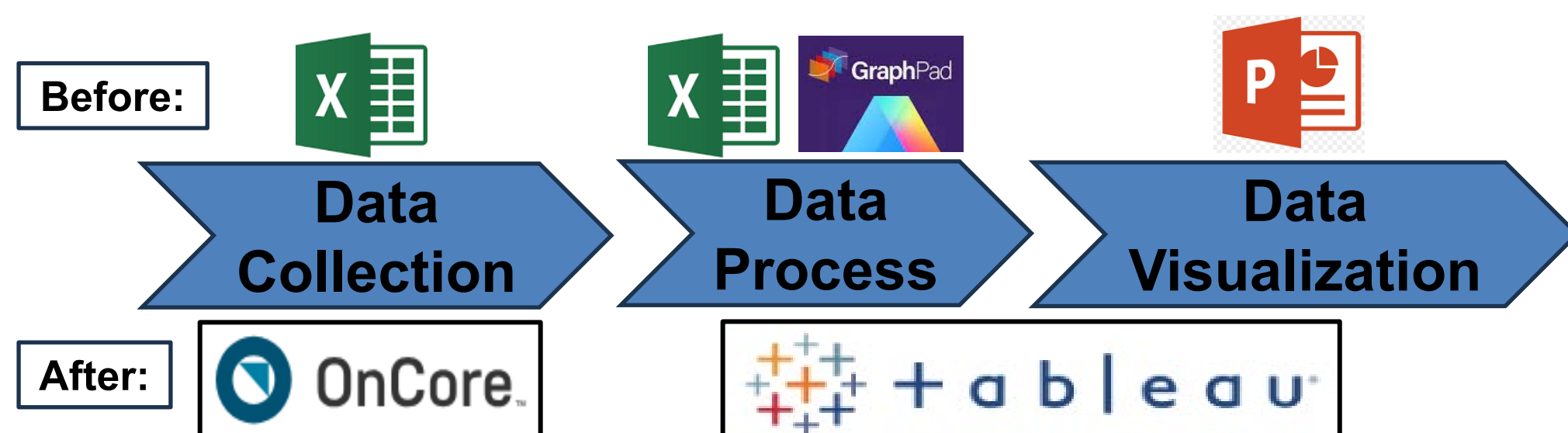
According to the State Health Registry of Iowa 2023-2024 Cancer Report, Iowa continues to have the second highest and fastest growing rate of new cancer in the USA. Access to alternative clinical trials in addition to standard treatments is a benefit to Iowans. Due to the competitive nature of pharmaceutical research and rapidly evolving biotechnology landscape, sponsors are requiring shorter activation timelines. These factors magnify the need to improve the transparency of our activation system and to open trials faster and more efficiently.

We sought to investigate the use of external IRBs to reduce activation burden, as well the utilization of a task management tool to dashboard metrics and generate reports. These tools are essential for decision-making among various stakeholders, facilitating better tracking of activation and reducing the time required for the process.

Goals

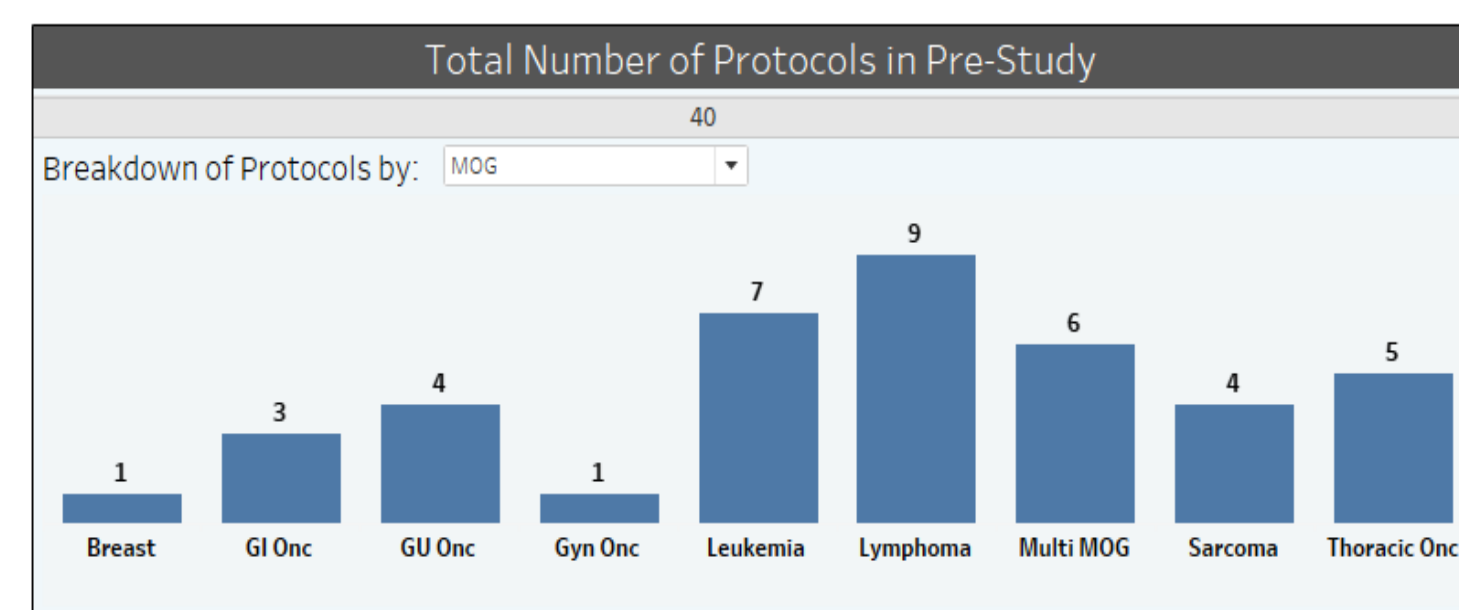
- 1 Pilot data collection of key activation metrics, including internal and external IRB approval timelines.
- 2 Create a method to standardize the collection of required data points and metrics.
- 3 Create a dashboard for enhanced stakeholder transparency and accessibility, leveraging data interpretation for decision-making and process improvement benchmarks.

Methods

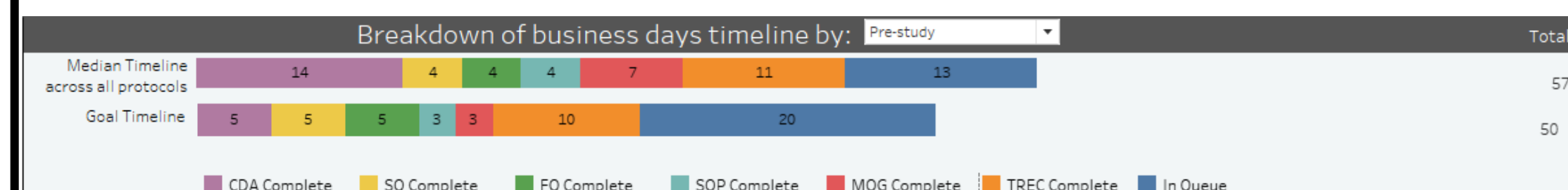


Outcomes

Pre-Study Dashboard

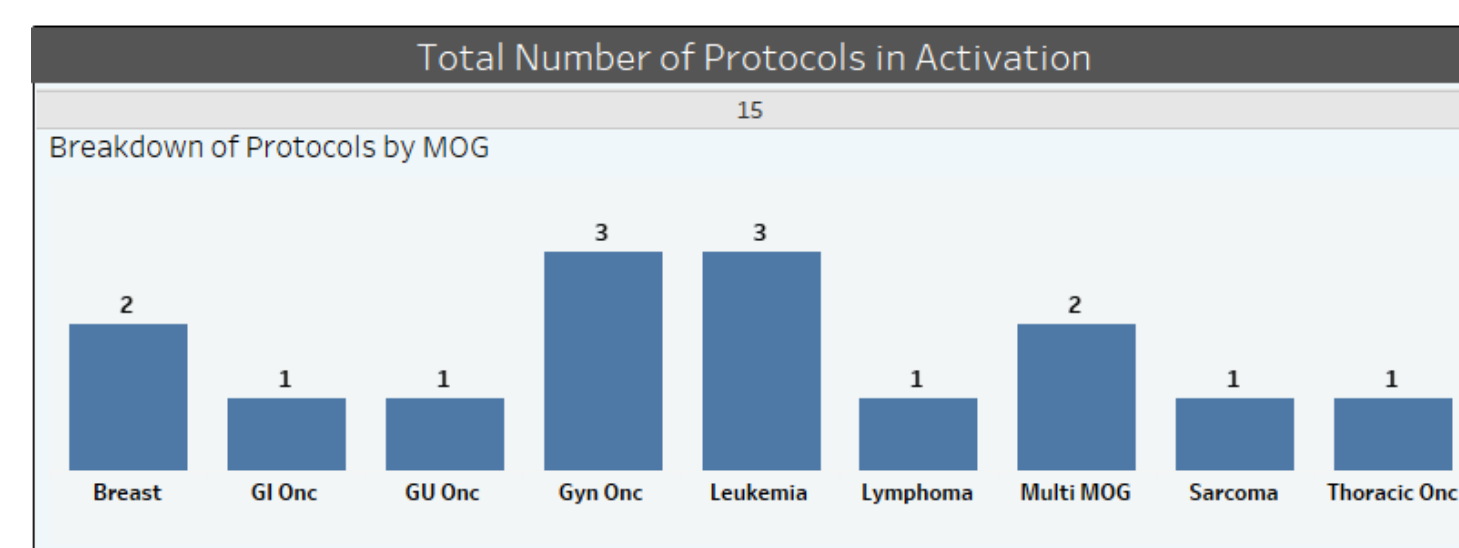


Count of studies within each oncology group

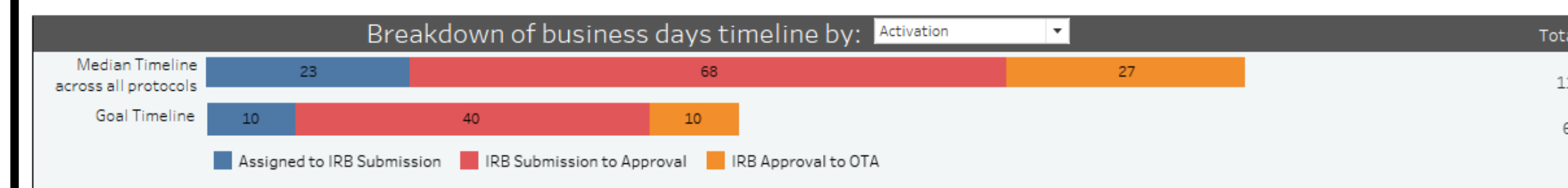


Pre-study milestones and timelines

Activation Dashboard



Count of studies within each oncology group



Activation milestones and timelines

Data Collection:

- Identify necessary datapoints to build metrics and reports.
- Build digital infrastructure with existing electronic systems.
- Create task lists in CTMS to collect additional required datapoints.

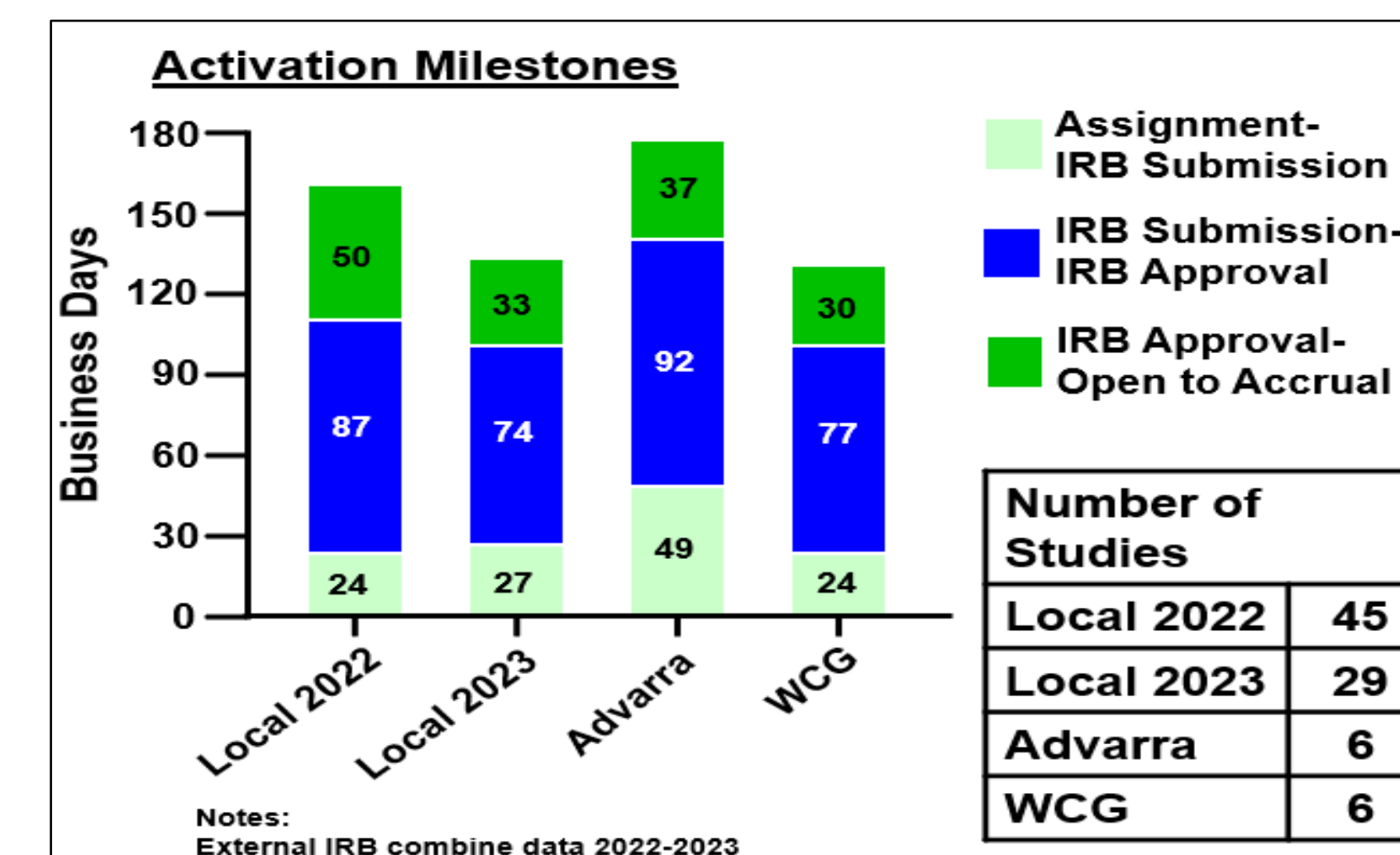
Data processing and reporting:

- Consolidate datapoints, automate calculations and generate reports.

Data visualization:

- Create Dashboard using Tableau software.

Outcomes cont.



Number of Studies	
Local 2022	45
Local 2023	29
Advarra	6
WCG	6

Pilot phase comparing milestones between local and external IRBs:

- 2023 local IRB was 27 days shorter than 2022 local IRB.
- External IRBs did not show advantage in reducing activation timeline.

Key Improvements

- Consolidate and minimize data entry to one system.
- Increase metric accuracy and data transparency.
- During pre-study phase, new metrics are available to assess workload, study timelines, and number of declined studies.
- Accessibility to study status progress and milestones.
- Led to changes in our committee approvals to reduce time.

Future Directions

- Explore strategies to streamline and expedite the external IRB approval process.
- Track progress and identify areas for improvement continuously.
- Expand metrics and dashboard visuals across study types.
- Integrate data sources and dashboard to allow for real-time visuals and reports.
- Explore interfacing with Microsoft Teams.

Acknowledgement: We want to thank the Quality Improvement Engineer/QuIP for their assistance in this project.