

## **Optimizing Trial Portfolio Management: Implementing the “Parking Lot” Framework at UF Health Cancer Center**

E. Monari, A. Ivey, A. Anderson, K. Calbart, G. Kim, T. George, P. Crispen

*University of Florida Health Cancer Center*

### **1. Background**

It is important for cancer centers to right-size trial portfolios based on their community. To ensure the University of Florida Health Cancer Center (UFHCC) portfolio contains the appropriate number of trials to enroll, and provide appropriate resources dedicated to each disease type, the “parking lot” framework was devised and implemented in 2022.

### **2. Goals**

The parking lot aimed to (a) support treatment trial accruals by tailoring the trial portfolio to the unique makeup of the outpatient population, (b) right-size Disease Site Groups (DSG) portfolios relative to patient populations reflected in Data Table 3 and (c) encourage DSGs to be discerning about trials brought forward, so that Clinical Research Office (CRO) resources can focus on trials most likely to succeed, while allowing for some flexibility to consider some smaller, targeted studies.

### **3. Solutions and Methods**

Each DSG has a dedicated “parking lot,” in which they are allowed to place studies. The number of spaces in each parking lot is driven by the DSG’s number of reportable cases. Because the goal is to focus CRO staff effort, trials supported by non-CRO staff are not subject to parking lot rules. CRO staff are assigned to DSGs partly based on treatment trial activity, so the parking lot also helps assess where new staff may need to be assigned, as well as how well each DSG is covering its effort costs.

Parking Lot Rules:

- All parking lot spaces are reserved for treatment studies.
- Trials are dedicated a single space; however, study complexity may require use of two spaces (e.g., CAR-T, Phase 1, basket-type studies, etc.).
- Studies exit their space once permanently closed to accrual.
- Studies can enter development prior to space availability; however, cannot open to accrual without a dedicated space.
- Additional spaces are awarded by meeting or exceeding accrual targets or extramural dollars to support additional effort.
- To support cost recovery, parking lots should contain at least 1/3 industry trials.

### **4. Outcomes**

UFHCC leadership meets with DSG leaders quarterly to review activity, including parking space availability. DSG parking lots are designed to allow growth (a target of 15 percent treatment trial participation), rather than as an effort to limit trial activation. Exceeding enrollment goals is rewarded with additional dedicated resources. There have been exceptions requested, for DSGs growing with limited spaces; based on DSG performance and needs, a workflow was established to grant exceptions. In 2023, treatment trial accruals increased 21 percent from 2022, indicating DSG mindfulness since parking lot development. DSGs have been able to open smaller trials of interest as well, supported by larger trials within their parking lot.

## **5. Lessons Learned and Future Directions**

We hope to further refine when studies would require multiple parking spaces. Workload and study complexity evaluation tools are being explored for this assessment. Another development consideration will be how to treat Investigator Initiated Trials in development, and timing for space allocation prior to study activation.