Enhancing Support for Clinical Trial Research Staff: Lessons Learned and Future Directions

B. Raposo Corradini, H. Cho, E. Shelton, D. Moscarda, E. Bentlyewski

Herbert Irving Comprehensive Cancer Center, Columbia University Irving Medical Center

1. Background

It is often underestimated, even by experienced healthcare professionals, the emotional toll of caring for patients with potentially terminal illnesses. The feeling of being a hero and the desire to save these patients can add to this challenge, particularly when early-stage drugs fail to work, and patients succumb to their underlying diseases. Research Nurses and Investigators may have more experience with the loss of patients due to clinical training, while this is often the first experience for research coordinators. Many entry-level clinical research coordinator positions, generally filled by younger individuals for whom this is their first job experience. In response to the mental challenges of clinical research, healthcare organizations, including Columbia University Irving Medical Center (CUIMC), have implemented well-being and psychological support initiatives. Despite their value, the Herbert Irving Comprehensive Cancer Center (HICCC) team at CUIMC found these initiatives insufficient and underutilized in addressing grief, loss, and enhancing team resilience and perceptions of a supportive environment. It was believed that the inter-departmental support offered was too formal and distant to be truly effective. Consequently, there was a recognized need to develop a more personalized and intimate solution to address grief, daily stress, and overall staff support.

2. Goals

Promote staff well-being and resilience by addressing grief and stress with a robust program that will identify and promote available resources, implement peer-led bereavement and stress support groups, create a manager grief training toolkit, and provide a safe outlet for staff expression regarding these topics.

3. Solutions and Methods

The Clinical Protocol and Data Management (CPDM) team, in partnership with the CUIMC psychology-led wellbeing initiative, created intra-departmental training and resources tailored to our staff's specific needs. Primarily focusing on early identification, support, and training on loss, grief, stress, and burnout, along with peer support groups (facilitated by our staff members) where employees can feel connected through shared experiences.

4. Outcomes

In progress – The aim is to develop training programs and provide spaces for open and honest discussions. This is intended to create a more inclusive and supportive environment where staff at all levels can share and connect based on their personal struggles in their professional roles. The goal is to identify departmental improvement opportunities early on and address maladaptive coping mechanisms among staff. This approach may help in reducing burnout, stress, and disenfranchised grief.

5. Lessons Learned and Future Directions

Our experience highlights the importance of recognizing and addressing the emotional challenges faced by clinical trial research staff, especially those in entry-level positions. Despite well-intentioned initiatives, such as well-being and psychological support programs, there remains a gap in effectively supporting staff in dealing with grief, stress, and the emotional toll of their work. Our efforts to create a more informal and supportive environment have shown promise, but ongoing evaluation and adaptation

are crucial. Moving forward, we aim to further integrate peer-led support groups and manager training into our program, enhancing early identification and mitigation of burnout, stress, and disenfranchised grief. Additionally, we recognize the need for continued collaboration with psychology-led initiatives and ongoing evaluation (tools to be developed) to ensure our efforts remain effective and sustainable in promoting staff well-being and resilience.