



Joint Task Force for Clinical Trial Competency (JTF): Biannual Global Meeting

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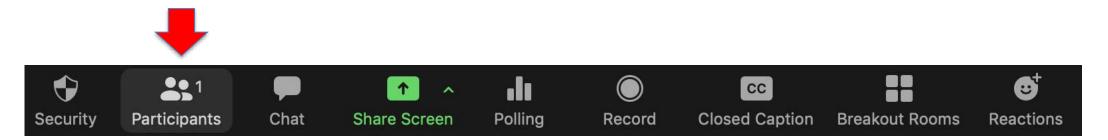
Carmen Aldinger, PhD

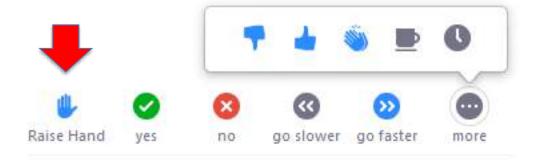
Senior Administrative and Training Manager,

MRCT Center

Virtual Meeting

- Please keep video on
- Please mute yourself unless you are speaking
- If you would like to speak, please unmute and speak or 'raise your Zoom hand' (and introduce yourself)







This meeting

- We are recording this meeting for internal purposes of note taking only.
- Recording will not be posted and will be deleted after the executive summary is finalized.

- We do wish to post slides and an executive summary of the meeting.
- We will follow up regarding permission to post the slides.



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- We are committed to autonomy in our research and to transparency in our relationships. The MRCT
 Center—and its directors—retain responsibility and final control of the content of any products,
 results and deliverables.
- We have no personal financial conflicts of interests with the content of this presentation.
- Today's meeting will be recorded for internal purposes.



The Multi-Regional Clinical Trials Center (MRCT Center)

The MRCT Center is a research and policy center focused on addressing the conduct, oversight, ethics and regulatory environment for clinical trials.

Our Vision

Improve the integrity, safety, and rigor of global clinical trials.

Our Mission

Engage diverse stakeholders to define emerging issues in global clinical trials and to create and implement ethical, actionable, and practical solutions.











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Agenda

Time	Topic	Speaker / Facilitator								
9:00-9:15	Introduction Overview	Barbara Bierer, MD Co-Chair, JTF Faculty Director, MRCT Center								
JTF Updates and disc	cussion									
9:15-9:30	Data Management Quick Update: Results from Delphi	Manju Bikkanuri, MD, MPH Clinical Research Informatics Specialist University of Texas (UT) Health San Antonio, Long School of Medicine, Department of Population Health Sciences								
9:30-9:45	Workforce development for clinical research	Susan Landis, BA Executive Director Association of Clinical Research Professionals (ACRP)								
9:45-10:00	Emergency Preparedness: Proposed Rapid Response Appendix	Barbara Bierer, MD Faculty Director MRCT Center								
10:00-10:15	Competencies for non-interventional research projects in the Swiss regulatory context	Melanie Glaettli, PhD Scientific Coordinator, Swiss Clinical Trial Organisation (SCTO)								
10:15-10:30	Update on the use of the JTF framework in Canada under 3CTN Update on the Arabic translation	Christine Samara, MSc Manager, Quality Assurance and Education, Odette Cancer Center Clinical Research Program, Sunnybrook Research Institute, Toronto, Canada Member on the 3CTN Performance Strategy Sub- Committee, Canadian Cancer Clinical Trial Network (3CTN), Canada Coordinating the Arabic Translation with the Ministry of Health and Prevention, United Arab Emirates								
10:30-11:00	Open discussion	Stephen Sonstein, PhD & Barbara Bierer, MD Co-Chairs, JTF								

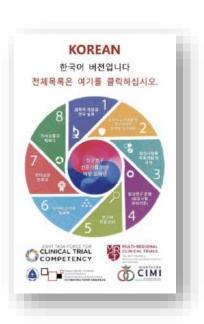


Introduction



JTF dissemination and impact

- Current translations (10):
 - English
 - Spanish
 - French
 - Japanese
 - o **Thai**
 - Bahasa Indonesia
 - o <u>Italian</u>
 - o **Chinese**
 - Vietnamese
 - Korean



- Current CIOMS initiative:
 - International Guidelines for Education in Medicines Development
 - Working group has met 6 times
 - JTF has helped inform direction of competencies in education



Data Management Update: Manju Bikkanuri



Quick Update

JTF Data Management Competencies

Meredith Nahm Zozus, PhD

Professor, Div. Chief and Director of Clinical Research Informatics Joe R. and Teresa Lozano Long School of Medicine University of Texas Health Science Center San Antonio

Manju Bikkanuri, MD, MS

Clinical Research Informaticist
Joe R. and Teresa Lozano Long School of Medicine
University of Texas Health Science Center San Antonio

Goal:

to update the Data Management and Informatics JTF Competencies.

Competencies are for Clinical Research Professionals such as

- Site Pls,
- Study Coordinators,
- Clinical Trial Monitors,
- Statisticians,
- Site Data Managers, ...

AKA:

What every Clinical Research Professional should know about Informatics and Data Management

Delphi Process Status

Round 1: Free text, "Blue Sky" input re leveled Data Management and Informatics competencies for Clinical Research Professionals.

Round 2: Two-dimensional rating

- (1) importance of the competency regardless of the indicated level and
- (2) level of agreement with the competency at each indicated level

PLUS comment fields to explain low importance and disagreement

Round 3: participants receive their results versus aggregate and are free to change their two-dimensional rating.

Round 4:

<u>If significant disagreement</u>: calls with individual participants to discuss their remaining differences and to perform additional member-checking if needed.

If minor disagreement or group is split on issues: from 1 to 3 group calls

<u>Analysis following Round 4</u>: group vetted draft competencies

Peer-review of results: review of the initial draft by the larger JTF. Early next year.

Resulting Competencies

Data Management, Informatics and Statistics

Data Definition and Generation

Data
Collection and
Processing

Data Use

Statistical Analysis

Data Re-use

Information System Selection, Application, Use and Evaluation

Delphi Round 1 Results

Draft Competencies for Domain 6: Data Management, Informatics and Statistics:

 Data Definition and Generation Data definition Data generation Data quality Source data Form design Metadata definition 	 Data Collection and Processing Data flow & Workflow Data Privacy Data Processing Identify & Resolve Data Problems Change control 	 Data Use Data Interpretation Databases Data Mining and ML Structured & unstructured data Handling Bad & Missing Data Data Surveillance
 Statistical Analysis Descriptive Statistics Inferential Statistics Statistical Analysis Plans Applications to Clinical Trials DSMB Reports Evidence Based Medicine and 	 Data Re-use Data sharing Fitness for use Research and results Registration Data Privacy Data Use Agreements 	 Information Systems (ISs) Information System use Information System Development Lifecycle Information System Security Automation and decision support Interoperability

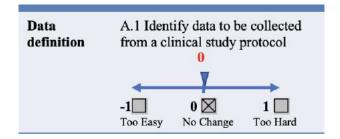
Synthesis

Delphi Round 3

Round 3

Participants receive their results versus aggregate and are free to change their two-dimensional rating.

- The aggregate score for each leveled sub-competency is calculated taking into consideration the participants comments.
- Each sub-competency at each indicated level is marked with aggregate score along with individual response for review and feedback.
- Next Step: Delphi Round 4 and analysis



Workforce Development for Clinical Research: Susan Landis



LET'S TALK ABOUT THE CLINICAL RESEARCH WORKFORCE

Susan P. Landis **Executive Director** Susan.landis@acrpnet.org +1.703.723.7924

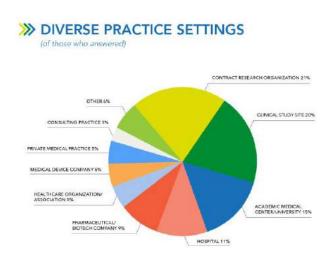




Advancing People Advancing Health™

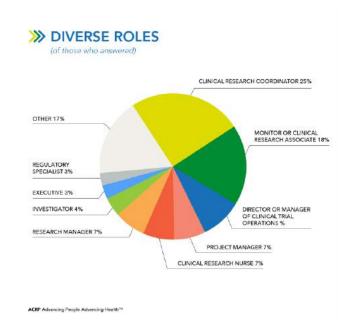
ACRP is moving the people and practice of clinical research forward™ by:

Being the Most Passionate Advocate for the Clinical Research Profession Providing the Tools Clinical Research Professionals Need to Build Their Own Career Journeys Creating Connections through Community Giving Employers the Confidence to Know They're Hiring the Best of the Best Leading the Way for Workforce Development in Clinical Research



ACRP Advancing People Advancing Health™









>>> JTF & ACRP Education



			Core Competenc	y Description	Corrected to			it. ethods	,			Confestered Introde			3 5°		Self Assmt Progression Rating Scale: 1 = Low Confidence through 5 = High Confidence. ✓ when High Confidence Achieved						Mgr. Assmt		
Priority	Competency	CRC Functional Tasks / Responsibilities	What Foundational Knowledge is Needed?	What <u>Skills / Abilities</u> are Needed?	•	O	•	•	•	Link to Internal Training Resources	-	•	+		_	Link to Internal Competency Assessment Resources	Pre-Training	Post-Training	After XX	√ 1onths OTJ	Date Achieved Completed	/	Date Achieved / Completed		
l-High		Conduct and document informed consent discussions	hypotheses, study objectives and endpoints for a variety of clinical	Explain the study design as it relates to conducting informed consent discussions with subjects	•	0	•	•)			•	+	*	•										
1-High		Support subject privacy and confidentiality protections	explain site level standard	Comply with subject privacy and confidentiality guidelines and requirements	•	0		•			•	•		*											

TALENT ASSESSMENT

ACRP Clinical Research Knowledge Assessment™

FOUNDATIONAL TRAINING

ACRP Early Talent Training Program

FOUNDATIONAL TRAINING

ACRP CRC Core Competency Foundations™ Training Program

TALENT ASSESSMENT

ACRP Project Management Best Practices™ Training Program

FOUNDATIONAL TRAINING

ACRP Competency-Based Approach to PI Responsibilities™ Training Program

FOUNDATIONAL TRAINING

ACRP CRA Core Competency Foundations™ Training Program

Individuals Provided ACRP Membership through Organization Membership Receive Complimentary Access to the Following Training, Continuing Education, and Certification Exam Preparation Modules

24 Training Modules

- 1. Good Clinical Practice Simulation
- 2. Introduction to Decentralized Clinical Trials (DCTs)
- 3. Informed Consent Simulation
- 4. ACRP Clinical Research Knowledge Assessment (CRKA)
- 5. Risk-Based Monitoring: The Essentials
- 6. Ethics and Human Subject Protection: A Refresher Course
- 7. Investigator Responsibilities
- 8. Improving Recruitment, Accrual, and Retention in Clinical Trials
- 9. Trial Feasibility and Selection: Their Impact on Accrual
- 10. Implementing a Patient-Centered Informed Consent Process
- 11. Using Metrics to Improve Subject Recruitment and Retention
- 12. Introduction to Clinical Trials
- 13. Site Quality Management Tools: SOPs, Metrics, and Training
- 14. Inspection Readiness: Best Practices for Managing Clinical Trial Inspections
- 15. Mastering the Event Reporting Cycle: Understanding Your Impact on Patient Safety
- 16. Understanding Clinical Trial Protocols: Key Considerations for Effective Development and Feasibility Review
- 17. Theory to Practice: Operationalize Your Clinical Study Protocol
- 18. Mastering Budgeting at Your Site: Building and Negotiating Clinical Trial Budgets that Make Sense
- 19. Key Skills for Ensuring Quality Control through Risk-Based Decision Making
- 20. Form FDA 1572: Get It Right the First Time
- 21. Ethics and Human Subject Protection: A Comprehensive Introduction
- 22. The Drug Development Process: Improving Trial Feasibility and Exploring Your Growth Potential
- 23. Building Quality Management Systems for Sites and Sponsors: Root Cause and CAPA
- 24. eResearch: Managing Clinical Trials in an Electronic Environment

200+ Continuing Education Modules

- All Available Live Webinars
- All Available Recorded Webinars
- · All Available Recorded Sessions from ACRP Annual Conference
- All Available Home Study Tests

Certification Exam Preparation Resources

- Certification Exam Practice Exercise
- ICH Gap Analysis
- · ACRP Certification Exam Preparation eLearning Course

>>> WORKFORCE DEVELOPMENT

The industry has the opportunity to address the workforce issue in a way that it never has looked at it before.



"Solve difficult problems with great people."







>>> WORKFORCE DEVELOPMENT



A glaring disconnect is evident between the visionary discourse on how to revolutionize the clinical research enterprise and the sober recognition that operationalization of any such vision rests on the shoulders of a workforce that's in dire straits."



Just as clinical research is the bedrock of drug and device development, sites are the bedrock of clinical research operations so, when sites cannot perform, the entire industry suffers."



Alongside these costly delays, the workforce crisis imperils the quality of clinical research, including compliance with good clinical practice and the integrity of the data generated."

—JOURNAL FOR THE SOCIETY OF CLINICAL TRIALS, JUNE 2023





>>> SHARING OUR VISION FOR THE FUTURE



Increased awareness of the profession, career pathways, and how to get the training and experience needed to advance



Greater collaborations across industry groups (e.g., ACRP, CTTI, CoAPCR, MRCT, SCRC, TransCelerate, etc.) to align efforts, share best practices, develop standards



Globally recognized entry level competencies established with registered site organizations accepting this as their standard



Pipelines between grade schools, high schools, and colleges or training programs; pipelines between colleges and employers; more internships and mentorship



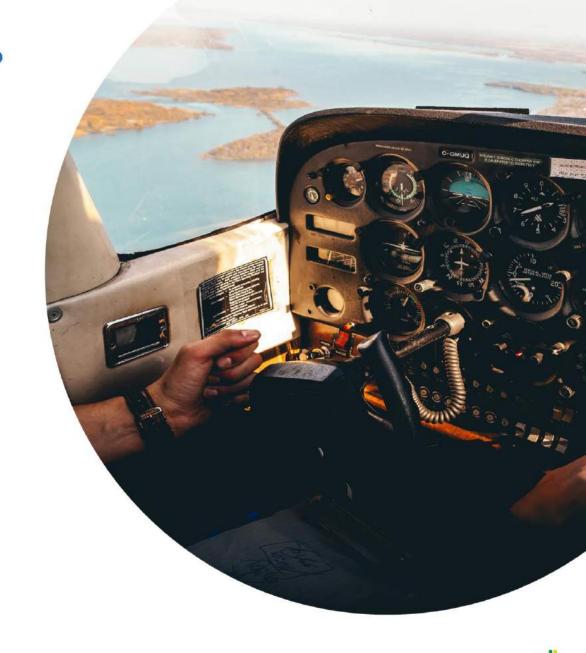




>>> WHO IS FLYING YOUR CLINICAL TRIAL?

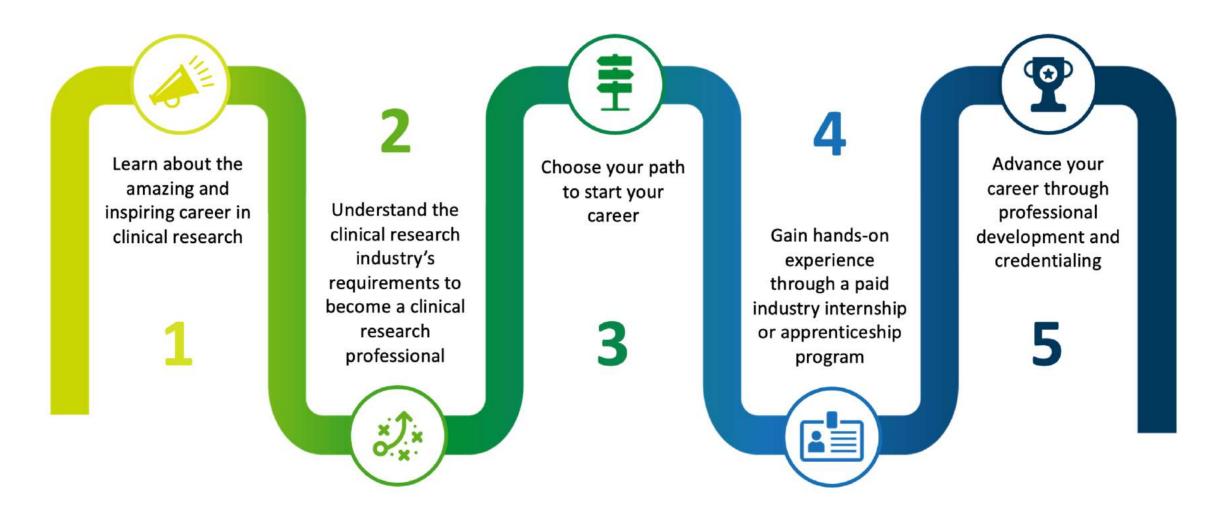
HOW TO BECOME A COMMERCIAL PILOT

- 1. Earn Private Pilot Certificate
- 2. Add Instrumental Rating
- 3. Earn Commercial Pilot Certificate
- 4. Earn Flight Instructor Certificate
- 5. Add Multi-Engine Rating
- 6. Gain Experience & Interview
- 7. Commercial Pilot Job





>>> IT'S TIME TO BUILD A CLEAR PATH FOR A CAREER IN CLINICAL RESEARCH





>>> WHO IS A CLINICAL RESEARCH PROFESSIONAL?

- Diverse candidate
- Hired based on skills first vs. years of experience in clinical research
- Competent in clinical research foundational knowledge
- Proven hands-on experience through an internship or apprenticeship
- Seeking an opportunity for mentorship

"I heard about the amazing clinical research profession, and I chose to pursue a career in clinical research. I am confident that I will be hired because I followed the pathway to gain the knowledge that is expected by companies and organizations who hire clinical research professionals."





>>> PARTNERS ADVANCING THE CLINICAL RESEARCH WORKFORCE

Ensure a diverse, research-ready and sustainable clinical research workforce essential to advancing therapies that improve global human health

STRATEGIC PRIORITIES



BUILD AN IDENTITY

Build a powerful brand and professional identity for the clinical research profession



CHANGE HOW WE HIRE

Drive Industry-wide adoption of a (competency-based) approach to hiring entry-level clinical research professionals



OPEN DOORS TO A NEW CAREER

Ensure access for all to education, training, and professional development in the clinical research industry



Thank you!





Emergency Preparedness: Barbara Bierer





Proposed Rapid Response Appendix to the JTF Framework

Barbara Bierer, MD

Professor of Medicine, HMS Faculty Director, MRCT Center bbierer@bwh.harvard.edu With special thanks to:

Sarah Evenson, MRCT Center
Jack Ferdman JD, MRCT Center
Sandor Kerpel Fronius, Semmelweis
University

14 Nov 2023

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- The opinions contained herein are those of the authors and are not intended to represent the position of Brigham and Women's Hospital or Harvard University.
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- We are committed to autonomy in our research and to transparency in our relationships. The MRCT
 Center—and its directors—retain responsibility and final control of the content of any products, results and deliverables.
- I have no personal conflicts of interests with the content of this presentation.

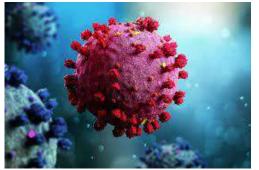


Emergencies are unpredictable but should now be anticipated



















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Crisis-Borne Disruptions in Clinical Research Take Many Forms

Communicable Diseases

- COVID-19
- Ebola

Natural Disasters

HurricaneKatrina

Acts of War or Violence

Russian invasion of Ukraine

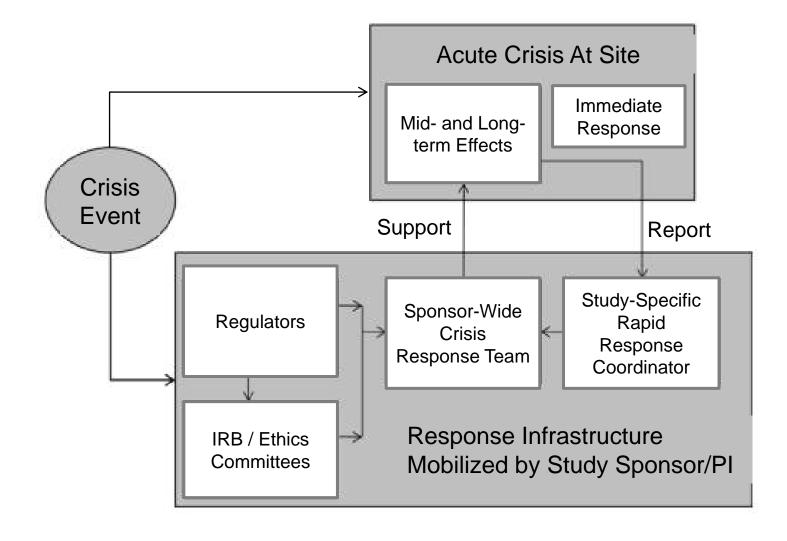
- OCharacter
- Timing: Onset, Length, Resolution
- Olntensity

- oImpact on Research
 - Ongoing (e.g., modified, paused, discontinued)
 - ➤ New research on disruption itself

Crisis-borne disruptions may implicate all JTF Core Competencies but may do so differently depending on type, location, and severity of disruption

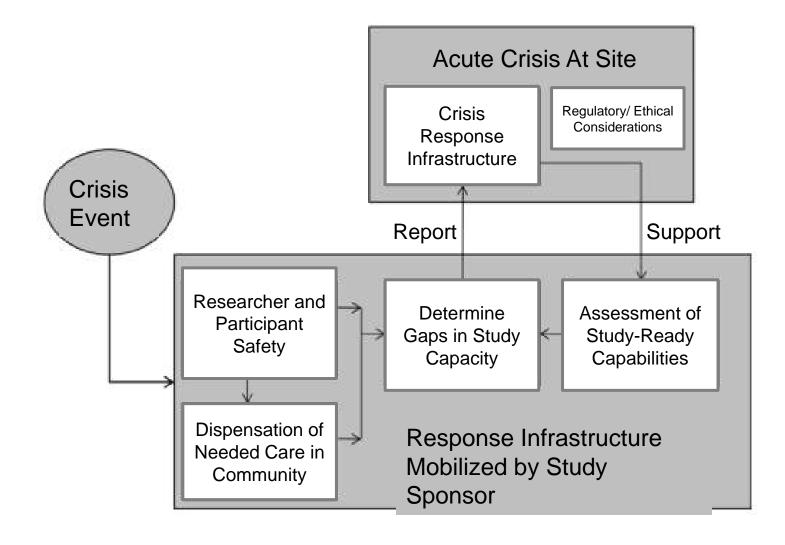


Effective Crisis Responses Require Crisis Capacity Building at Sponsor Level





Effective Responses Require Skilled Dynamic Assessment at Site Level





Matrix of Competencies and Concerns: Sponsor Level

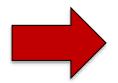
Core Competency	Sponsor Level Implication
Scientific Concepts and Research Design	Are protocol deviations warranted to maintain scientific rigor?
Ethical and Participant Safety Considerations	Is study question still in equipoise following crisis disruption?
Medicines Development and Regulation	Can study treatments be safely received and samples for further study safely shipped out from distal site?
Clinical Trials Operations and Good Clinical Practice	Are pre-crisis records accessible and post-crisis records able to comport with GCP requirements?
Study and Site Management	Can researchers and participants relocate outside of crisis area?
Data Management and Informatics	Are cloud-based record redundancies built into study protocols complete?
Leadership and Professionalism	Have study sponsors built response training into staff onboarding and participant recruitment processes?
Communication and Teamwork	Do crisis response teams have clearly established chains of command and information cascades to enable rapid crisis responses?

14 Nov 2023 42

Matrix of Competencies and Concerns: Site Level

Core Competency	Site Level Implication
Scientific Concepts and Research	Has crisis compromised scientific rigor in sample collection or
Design	storage?
Ethical and Participant Safety Considerations	Medical professionals duty-bound to deliver care as needed in crisis situation
Medicines Development and Regulation	Can study treatments be adequately stored and safely dispensed?
Clinical Trials Operations and Good Clinical Practice	Has the integrity of site-based clinics been compromised?
Study and Site Management	Can researchers and participants safely access study sites?
Data Management and Informatics	If internet access disrupted, when were records last backed up?
Leadership and Professionalism	Site-level leaders need access to well established crisis response plan even with no power and/or internet access
Communication and Teamwork	Do participants and lower-level staff understand where and how to access study-specific crisis information and support?

14 Nov 2023 43



In our assessment, there are specific questions that arise, and specific roles and responsibilities that must be defined, but it is unclear whether any of these represent new competencies requiring a revision of the JTF Framework itself.

An appendix could annotate the application of competencies to an emergency response.

Thoughts?

Questions and Discussion







Competencies for non-interventional clinical research projects in the Swiss regulatory context

JTF Strategic Global Meeting, November 14, 2023 Melanie Glaettli, Swiss Clinical Trial Organisation (SCTO)





Prepared under the aegis of the Federal Office of Publicular Education, Research and Innovation (SERI); the STU Network; the MD-PhD Graduate Schools in Clinical Research; the Zurich and Medical Sciences (SAME)

Final version, September 2016

Roadmap 2016—2021 for develop generation of clinical researchers

Clinical Research Core
Competencies Framework
for clinical trials



Implemented on <u>cr-careers.ch</u>

Clinical Research Careers

Core competencies



The stakeholders in the field of clinical research¹,

in support of the Federal Council's efforts to strengthen biomedical research and technology in Switzerland:

conscious of the fact that clinical research? is the critical link between bench and bedside, and a prerequisite for advancing our understanding, prevention and treatment of disease:

appreciating the efforts to strengthen clinical research in Switzerland that have been made in recent years;

recognising the particular importance of scientifically well-educated and well-trained research-oriented physicians for biomedical research, technology and innovation;

taking into account the recommendations of the 2014 SAMS/FOPH report on promoting the development of young physicians in the field of clinical research;

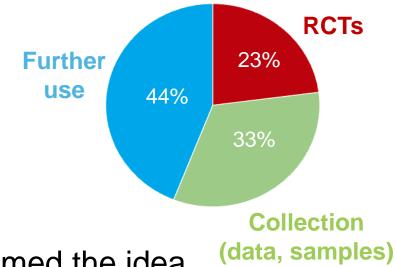
with the objective of providing educational and training structures and opportunities that make it possible to attract more and better trained junior staff into the pipeline for clinical research;

hereby declare their joint intention to design and implement systematic support for clinical research-oriented physicians at each stage of their career path.



Why is an adaptation to non-interventional research projects interesting?

- > 75% research projects submitted to ECs are noninterventional
- More accessible and suitable for young researchers



- Consulted physician-scientists welcomed the idea
- Useful for other health researchers (not only MDs)
- Mandate from our Board of CTU Directors (BCD) → develop tools to enhance quality of non-interventional research projects

Raise the awareness of developing the competencies necessary to conduct non-interventional research projects



Swiss legal framework for human research

Human Research Act (HRA)

with human beings

without human beings

Clinical Trials
Ordinance
(ClinO)

Ordinance on Clinical Trials with Medical Devices (ClinO-MD) Ordinance on Human Research with Exception of Clinical Trials (HRO)





- Other clinical trials
- Transplant products, transplantation
- Gene therapies



Medical devices



- Collection of data and/or biological material (chap. 2)
- Further use of data and/or biological material (chap. 3)



How did we adapt the Framework?

We aimed for a **simple framework** with:

- 8 JTF domains
- shorter competency statements (some needed to be removed, e.g., referring to clinical equipoise, investigational product, etc.)
- no reference to GCP (not mandatory for HRO projects in CH)
- no proficiency levels
- 2 columns to differentiate between



Collection of data and/or biological material (HRO, chapter 2)



Further use data and/or biological material (HRO, chapter 3)





3.1 Historical context for the development of regulatory processes

Collection of data and/or samples (HRO, chapter 2)	Further use of data and/or samples (HRO, chapter 3)
1. Identify and understand historical and current events that have influenced national and international guidelines and regulatory processes concerning human research.	Statements for HRO chapter 2 also apply to HRO chapter 3 research projects.
2. Be able to apply and explain contents of national and international guidelines.	
Example: Researcher understands why informed consent is necessary for research projects (e.g. non-information scandal of Tuskegee study) and develops a protocol which is compliant with the Swiss regulations on research projects (Human Research Act (HRA) and Human Research Ordinance (HRO)).	





4.7 Monitoring and audits

Collection of data and/or samples (HRO, chapter 2)	Further use of data and/or samples (HRO, chapter 3)
 Consider whether monitoring, quality check, and audits may be of added value for the research project. Develop policies and SOPs in response to monitoring and audit findings. Example: Given an audit report, researcher creates a comprehensive CAPA plan to respond to audits and develops appropriate SOPs. 	Statements for HRO chapter 2 also apply to HRO chapter 3 research projects. Even data quality checks can be relevant in large reuse of data and biological material research projects (e.g. registry projects).

4.5 Safety reporting requirements

Collection of data and/or samples (HRO, chapter 2)	Further use of data and/or samples (HRO, chapter 3)
5 statements and 1 examples	Statements for HRO chapter 2 projects are not applicable for HRO chapter 3. Safety is not applicable in further use of data and biological material research projects.



2.4 Evolution of Requirements for Informed Consent Form

further use project can be carried out with the use of GC.

Collection of data and/or samples (HRO, chapter 2)	Further use of data and/or samples (HRO, chapter 3)
Identify the historical events and key documents, which have led to the development of the current informed consent regulations.	Statements for HRO chapter 2 also apply to HRO chapter 3 research projects. Further statements need to be considered:
2. Recognise the critical nature of communicating the potential risks or hazards as well as the benefits of a research project using terminology and a manner that is understandable by potential participants during the informed consent process.	1. Investigate whether sites to be included in the research project have implemented the General Consent (GC) allowing the further use of health-related data and biological material already collected during standard of care for research purposes.
3. Apply knowledge of the current national and international regulations, especially concerning data protection measures, when drafting an ICF for a research project.	2. Develop an appropriate information form (and/or consent form) according to the type of data (genetic versus non-genetic and coded versus uncoded) to be reused in the project (HRO, <u>Art. 28-32</u>).
4. Implement processes and control measures to ensure participant protection regulations' requirements are met.	3. Assess surrogate consent by the ethics committee (HRA Art. 34) allowing exceptional further use of data without consent by participants.
Example : Researcher composes and evaluates the ICF in relationship to the protocol to assure that it not only	Example : Researcher contacts person in charge of the institutional General Consent (GC) to assess whether

meets current regulations and guidelines but also

provides the information needed for a potential

participant to make an informed decision.



Review performed with several stakeholders

Review by JTF biannual global meeting participants

→ ANY COMMENT?

 Implementation on <u>cr-careers.ch</u> and further dissemination via newsletters, publication, etc.





Thank you for your attention



Melanie Glaettli



Laura Di Petto



Aurélie Fayet



Caecilia Schmid



Andreja Vujicic Zagar



Verena Küppers



Claudia Fila



Simone Kälin



Antoine Poncet



Sven Trelle

Update on the use of the JTF Framework in Canada under 3CTN & Update on the Arabic Translation: Christine Samara



3CTN Objectives

Christine Samara, 3CTN PSC member Performance Strategy Sub-Committee (PSC)



Overview of 3CTN

The Canadian Cancer Clinical Trials Network (3CTN) is a pan-Canadian initiative to improve recruitment, efficiency and quality of academic clinical trials

Member Cancer Centres

- Contribute to/access the 3CTN Academic Cancer Trial Portfolio, report on Portfolio trials' performance and accrual.
- Collaborate on common initiatives and share best practices via the innovative Network structure

Patient and Public Involvement (PPI)

- Patient Representatives, Patient Groups, Advisory Committees
- Contribute a crucial perspective to clinical trials by providing feedback, insight, expertise and support towards trial activities and initiatives

Governance and Scientific Oversight

- Scientific Advisory Board and Directors ensure the appropriateness and optimal impact of the Network strategic plan and activities
- Governance Committees provide oversight for 3CTN management and support key functions: The trials Portfolio, Performance, PPI

Coordinating Centre

Central support for operations, project management, strategic planning & governance and communications



Cancer Centre Site – Research Core Competencies

Improving the performance and quality of academic, multi-centre trials on the 3CTN Portfolio is a shared priority for the current business period, 2022-2027

Develop the clinical research professional core competency framework & development strategy for Network sites

Network-wide implementation of the Joint Task Force Core Competency Framework aims to

- Promote the capacity for high-quality cancer clinical research
- > Highlight identified core competency gaps both locally and shared, and
- Link to available, best-practice training and education resources by core competency domain/sub-domain





Joint Task Force Core Competency Framework



JTF Core Competency framework defines core knowledge and skills necessary for conducting clinical research.

- Support onboarding, orientation and core training of staff
- > Inform role descriptions, performance evaluations, career ladders





Network Approach to Core Competency

On a Global scale:

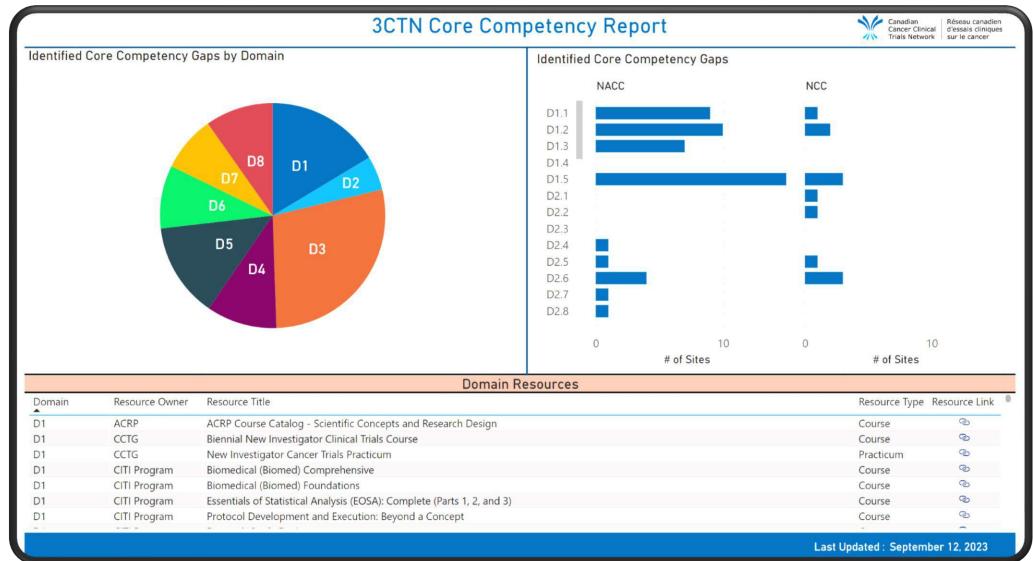
Support for validation and proof-reading of JTF's French translation to enable use by CRPs in jurisdictions where it would be of value

National progress to date:

- Identified overall Network priorities to address reported gaps
- Facilitated sharing of best practice learning and training resources, expertise across the Network
- Created the 3CTN Core Competency Report to enable:
 - Direct links to learning resources associated with each sub-domain into a single tool
 - Visualization of Network-wide, regional, or site-specific strengths and gaps
 - Trial unit management in highlighting support needs for individual/team development









Future Directions

- Manuscript pending for publication
- Support training targeted to address priority core competency domains
- Develop evaluation framework:
 - # of sites that have used framework in staff development plans
 - Track overall changes for competency statement gap areas from 2022 survey and identify emerging gaps
 - Capture a measure of competency levels within each statement

62

 Assess effectiveness of initiatives to support Network learning objectives

November 2023





Integration of the JTF as a 3CTN Objective and its utilization at the Odette Cancer Center in Toronto, Canada.

Sunnybrook Research Institute Sunnybrook Health Science Center

Christine Samara

Manager, Quality Assurance and Education

Odette Cancer Centre Clinical Research Program



Tertiary Hospital Toronto, Ontario. Canada





HEALTH SCIENCES CENTRE

- Internationally recognized health science center
- Affiliated with University of Toronto (U of T)
- Leading research institute







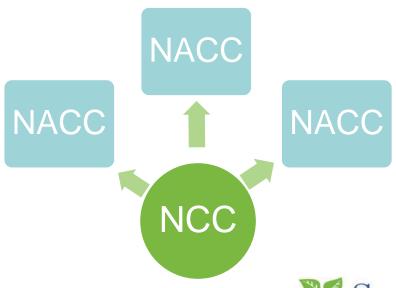
Sunnybrook as a NCC (3CTN)

The Odette Cancer Center (OCC) is one of the 3CTN Network Cancer Centers (NCC) with 2 affiliate sites as Network Affiliate Cancer Centers (NACCs) & 1 in the pipeline.

NCCs are larger centres with capabilities to recruit cancer patients to a broad portfolio of trials, and to work with Network Affiliated Cancer Centres (NACCs) to ensure broader patient access to trials.

OCC Clinical Research Program

- Around 55 staff
- Largest research group within the hospital









New Training Initiative Focused on the JTF Core competencies for CRP @ SRI OCC CR

- SRI OCC CR implemented the JTF in July 2021 as part of the onboarding of new staff
- 3CTN Grant Cycle (2022-2027): Ongoing efforts to improve the efficiency and effectiveness of clinical trial sites across the Network
 - Diagnostic tool for sites to assess areas of competency and deficiency within their clinical trial staff
 - Promote a competency framework for clinical research professionals
 - Identify area (s) of potential improvement for their trial unit







CRP and **CR** Workforce

- BandAid' solutions
- Unlike Pls, CRPs are generally overlooked as key stakeholders in the clinical research ecosystem
- Most CRPs find their way into the profession by chance
- Increase in the number and complexities in clinical trials
- Few institutional oversight mechanism

Table 1. Key areas for workforce regeneration.

Imperatives

- Prioritize the creation of a strong and clear identity for the clinical research professional and promote visibility, recognition, and value of CRPs in interprofessional collaboration
- · Establish a baseline global standard of excellence in training and qualification for CRPs
- Elevate and standardize clinical research roles across all the enterprise to support salary equity and ensure funding keeps pace with workforce growth
- Raise awareness of the clinical research profession as a distinct career goal for both future generations and professional lateral movers
- Establish universal, competency-based definitions of clinical research roles to support equitable assessment of workforce readiness among entry-level applicants and professional advancement throughout clinical research careers
- Ensure a diverse workforce by providing access and advancement in training for historically underserved communities

CRP: clinical research professionals.

The JTF Core Competency Framework—a matrix of competency domains that objectively define the knowledge, skills, and attitudes necessary for conducting safe, ethical, and high-quality clinical research

Ibrahim, S. (2022). Adapting the Joint Task Force Core Competency Framework for Clinical Research Professionals: A Canadian Paediatric Research Perspective, SRAI. https://www.srainternational.org/blogs/srai-jra2/2022/10/14/adapting-the-joint-task-force-core-competency-fram

Freel SA, Snyder DC, Bastarache K, et al. Now is the time to fix the clinical research workforce crisis. Clinical Trials. 2023;20(5):457-462. doi:10.1177/17407745231177885

https://journals.sagepub.com/doi/10.1177/17407745231177885

November 2023











Define Professional Roles

Revised Job Titles and Job Description

Created a mechanism for growth



Data Manager

CRAI*

CRA II *

Supervisor *

*Protocol Activator



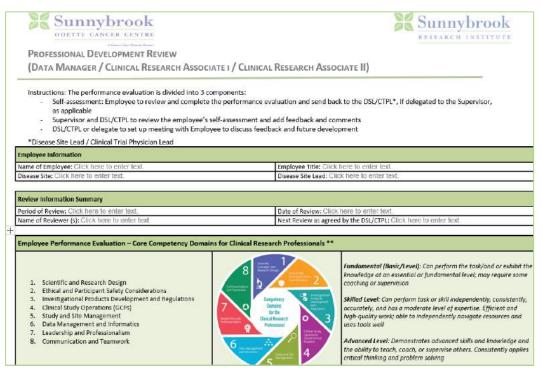








- Initiated draft in Summer 2022
- Pilot conducted in Q2 2023
- Revisions being made following the pilot phase Q3 2023





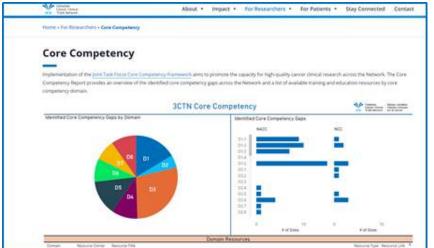








- Changed from "Employee Performance" to "Professional Development"
- Added guidance for the staff with examples for self assessment
- Minor edits to the content in terms of applicability to the different job roles
- Added ink to the 3CTN Core Competency Report for training resources





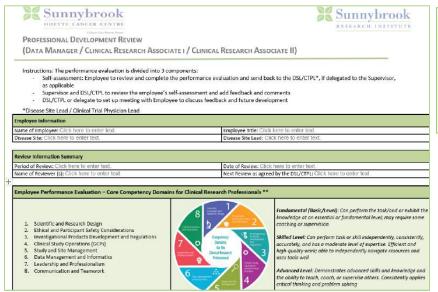








Implement across the Odette Cancer Centre Clinical Research Program – Q4 2023













Two level review

- Self assessment
- Review of self assessment by DSL/CTPL (along with Supervisor feedback, as applicable)

Self assessment

- √ Honest assessment
- ✓ Self reflect / consider strengths and areas of improvement
- ✓ Personal growth
- ✓ Self awareness
- ✓ Opportunity to list goals and objectives for the upcoming year

Reviewers

- √ Feedback from employee
- ✓ How employee see themselves (team and organization)
- ✓ Motivation (beyond salary)
- ✓ Achievements
- ✓ Growth







Next Steps

- > Institution
 - ➤ Implement the Performance Evaluation across the Odette Cancer Centre Clinical Research Program – Q4 2023 & Q1 2024

- > 3CTN network sites
 - Collaborate with leading research sites to assess training needs and create training material for CRPs









Deploying the JTF framework across the world

Arabic Translation

Christine Samara





UNITED ARAB EMIRATES MINISTRY OF HEALTH & PREVENTION



الإمارات العربية المتحدة وزارة الصحة ووقاية المجتمع

Arabic translation of the MRCT JTF Core Competency Framework

- Coordinated by Christine Samara
- Translation has been conducted by the UAE Ministry of Health and Prevention
 - Dr. Khalil Qayed, Director National Center for Health Research
 - Dr. Ahmed Radeef Ibrahim Alosi, Research Consultant





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Identified the organization for collaboration **Translation Plan** Initial contact & agreement with Dr. **Translation Phase** Discussed the plan for Khalil Qayed. **Validation / Proof** document translation reading Phase Completed the initial & progress with Dr. draft for all domains. Qayed and Dr. Alosi. Ongoing validation / Initial contacts made Received preliminary **Proof reading Phase** validation phase. draft of 3 domains. November – December 2022 May – September February – April 2023 2023 October – December 2023





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- **➤** Validation expected to be finalized by December 2023
- > Target to publish the Arabic Translation Q1 2024
- > Organizations / Institutions involved in the Validation / Proof reading Phase

Country	Organization / Institution	Contributors
Gulf, Levant and North Africa	Phoenix Clinical Research	Georges Labaki Racha Aaraj
Lebanon	Lebanese American University	Dr. Joseph Stephan Karmen Baroudy
Levant and Iraq	Sanofi	Dr. Marie-Therese Sawaya

Open Discussion



Discussion

- Further comments and questions on presentations
- Emerging issues
- Future issues that the JTF might address



Questions, Comments, Suggestions



Questions and discussion

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