

Workforce Development:

Opportunities to Engage and Retain Talent in Clinical Research

Webinar Summary

February 25, 2025

The webinar opened with a brief history of the Convergence Project, including the 8 domains (Public Awareness and Communication, Community Engagement and Investment, Site Enablement, Workforce, Trial Participation and Access, Comprehensive Data, Funding Resources and Support, Accountability) in "[Towards A National Action Plan To Improve Representation In Clinical Trials](#)," and a timeline of meetings as follows:

- June 12, 2023 (virtual, invited) **Kickoff**: Outlining the Convergence Project
- Sept 22, 2023 (hybrid, invited) **8 Domains**: Development of the Domains for a National Action Plan and Key Collective Actions
- November 6, 2023 (in-person, invited) **8 Domains**: Refinement of the Domains and Key Collective Actions; Policy Priorities for Convergence
- May 20, 2024 (hybrid, public) **Community Engagement**: Lessons learned; **National Action Plan**: Launch and Discussion
- December 9, 2024 (virtual, public) **Accountability**: Planning for 2025 and Beyond
- February 25, 2025 (virtual, public) **Workforce Development**: Opportunities to Engage and Retain Talent in Clinical Research

Welcome and Opening Remarks

Dr. Barbara Bierer (Faculty Director and the MRCT Center) then started the opening remarks by conveying how important it is for each individual to have the right diagnosis, the right test, and the right treatment. To enable this robust future for clinical research, we must plan and fund programs to support the most talented and innovative workforce possible. Dr. Bierer then introduced the keynote speaker, Dr. Jonathan Watanabe (Professor Jere E. Goyan Presidential Chair for the Advancement of Pharmacy, Department of Clinical Pharmacy at the UCSF School of Pharmacy), to give his remarks.



Dr. Watanabe started by stating that this might be one of the most important moments for this topic in history and provided a reference to his work with many colleagues over the last few years to support the workshop and report on "[Preparing the future workforce in drug research and development](#)." He discussed how we don't want to leave any "benefit on the table" (e.g., potential innovators in clinical research who don't know how to get into the field), the need for the workforce to be trustworthy to the communities that they serve, and how we need to think more regionally and locally to inform and recruit people with the different skill sets (e.g., science, technology, data, supply chain management, communications, etc.) needed in clinical research.

Session I: Building Early Career Pathways and Pipelines

Moderator:

Dr. Willyanne DeCormier Plosky - *Program Director at MRCT Center*

Panelists:

Sharleen Traynor - *Director, Clinical Trials Research Associate Program, Durham Technical Community College.*

Lora Black - *Vice President, Clinical Research, Sanford Health*

Dr. DeCormier Plosky began by concurring with earlier remarks by Drs. Bierer and Watanabe that we need to recruit into clinical research the best and brightest individuals with a wide variety of skills and experiences (e.g., former participants in trials, caregivers for people with complex medical conditions), and who know local systems, processes, and languages. However, many people simply do not know about clinical research as a career path; for example, a science student who thinks they can only work as an engineer or a new parent looking for a career change but believes that jobs in clinical research require a four-year degree.

Dr. Traynor described the Clinical Trials Research Associate Program at Durham Technical Community College as an academic program housed in a local community college that began in 1988 as one of the first academic programs for students interested in pursuing a career in clinical research. Students in the program can obtain an associate of applied science degree or pursue certificate options (if they already have a bachelor's degree). Their certificate programs are online (such as post-bac certificates) and can include [virtual] simulated experiences, while the associate's program has a mix of in-person (such as labs) and online components. Durham Tech was part of the conversation to establish the [Joint Task Force for Clinical Trial Competency](#) so they have a standard curriculum. At the associate degree level, they partner with 4-year colleges to support continuing education, which also



helps students in the 4-year colleges to learn about clinical research. They are also starting a new venture in partnership with Durham Public Schools, called the Durham Early College of Health Sciences, to train high school students (through coursework and credentialing) in healthcare pathways, one of which is clinical research.

Lora Black began by introducing the audience to Sanford Health, based in South Dakota, which is the largest rural health system in the United States, serving 1.4 million patients across over 250,000 square miles. Sanford Health has been doing clinical research at the community level for nearly 40 years. During the COVID pandemic they saw the need to start new methods for recruiting and recruiting clinical research staff for two reasons. The first is that some clinic site and community worker staff were leaving their positions for jobs that could be done fully online. The second is the traditional clinical research model had traditionally recruited nurses into research coordinator and patient navigator roles, but during COVID, nurses were drawn into an exclusive focus on clinical care. Therefore, in partnership with The University of South Dakota, Sanford Health started a new [12-credit certification program](#) (over 4 semesters) that is online and complemented by practical experience. The first group of students is graduating this May. The program is now thinking about the next steps, how to be nimble in reaching new audiences, and potential opportunities to engage with high school populations.

In the moderated discussion following the panelist presentations, the focus was on the types of support that the panelists have found to be the most helpful in establishing and growing their workforce development programs. These include collaborating with the Association for Clinical Research Professionals ([ACRP](#)) on curriculum development, educating student advisors and career counselors at academic institutions about clinical research as a pathway, involving local high school science teachers, working closely with organizational leadership at their institutions to understand the commitment to, and vision for, the workforce programs, and engaging with the community of professionals across the country that champion clinical research workforce development. Then, the discussion turned to challenges students most often describe as impediments to starting or continuing a career in clinical research. These include not knowing about clinical research in the first place (one panelist mentioned that over half of the students in their program come from other disciplines), a lack of internships where students are paid for their work and able to cover the costs of travel/relocation, housing, and other living expenses, the catch-22 of employers only wanting to hire people with experience but that students can't get experience without getting hired, lack of part-time or other flexible work arrangements, and extensive onboarding programs (9+ months) that would be less stressful if the students were more prepared with that type of content in their academic or preparatory programs.



Session II: Recruitment and Retention Strategies

Moderator:

Morgan Hanger - Executive Director at Clinical Trials Transformation Initiative (CTTI)

Panelists:

Dr. Reshma Jagsi - Lawrence W. Davis Professor, Chair, Department of Radiation Oncology at Emory University School of Medicine, Winship Cancer Institute

Dr. Luther Clark - Executive Director, Patient Innovation & Engagement Value & Implementation Global Medical and Scientific Affairs at Merck

Deanna Broussard - Supervisor in Clinical Research at Ochsner Health

Morgan Hanger opened Session II on Recruitment and Retention Strategies by highlighting the multifaceted nature of clinical research, which requires diverse skills and offers various pathways into the field. She introduced the panelists, who would share their experiences with evidence-driven recruitment practices, offering different perspectives, levers, and resources. Hanger emphasized the session's focus on exploring scalable approaches that can be applied across other organizations.

Dr. Jagsi began her career at the University of Michigan, where she was part of an initiative called **STRIDE** that was started to ensure the recruitment of the most talented individuals, no matter where they came from. Dr. Jagsi communicated that the work in workforce development is never done, even at the point of entering faculty. Every stage of promotion, from the student level through the faculty/senior scientist level, needs to be addressed thoughtfully. She advocated that patients, communities, and institutions want the people doing the work that we do to be drawn from the full talent pool and stated that in her role involving interviewing 90 applicants a year for residency programs, she sees the future as bright.

Dr. Clark expressed that Merck is dedicated to advancing healthcare, in part through fostering workforce development broadly that reflects the population that Merck serves. He echoed that there are many types of careers (marketing, engineering, supply chain, data) and opportunities in clinical research. Dr Clark focused his remarks on two workforce development programs that Merck is involved with.

The first is the [OneTen](#) program (part of the [skills-first talent community](#)), launched in 2020, described on the website as a "skills-first movement to unlock career opportunities for talent without four-year degrees," which is to say encouraging hiring for skills and not just degrees. More than 60 employers (e.g., American Express, Amgen, Delta) are part of the program and have hired over 122,000 individuals who didn't have a college degree. The second is the





[Merck Physician Scientist Program](#), which offers a two-year in-depth training on clinical trial planning and conduct for MDs who have completed residency. These are full-time jobs, the participants are integrated into CT teams, and each physician-scientist is paired with a mentor.

DeAnna Broussard from Ochsner Health discussed a [Clinical Research Internship Program](#) in New Orleans created to address staff retention and recruitment challenges before COVID. The program connects the community to clinical research opportunities, targeting local colleges like Louisiana State University (LSU) and Southeastern Louisiana University, high schools, and certification programs such as Certified Nursing Assistants (CNAs) and medical technicians. It offers a six-week internship with rotations through departments like research, finance, regulatory affairs, and the Institutional Review Board s(IRBs). The program focuses on exposure, certification, and education, with practical training, simulation labs, and guest lectures. Interns earn various certifications, preparing them for careers in clinical research.

The discussion highlighted the importance of exposure, flexibility, and inclusivity in recruiting and training talent for healthcare and clinical research roles. DeAnna emphasized that patient-facing experience is more valuable than medical experience in job descriptions, as it helps interns develop key skills. Luther noted the need to broaden recruitment efforts and focus on skills rather than just resumes, providing exposure to various roles and promoting continuous learning. Reshma shared how inclusivity in research, particularly in breast cancer care, has led to new findings and changes in healthcare guidelines. Both DeAnna and Luther agreed that talent can come from unexpected backgrounds, and flexible programs allow individuals to explore different career paths. The conversation also touched on the cultural shift when transitioning from academia to industry but with the shared goal of improving lives. The takeaway was the value of broadening recruitment and being open to varying backgrounds to drive innovation.



Session III: Cross-Sector Collaborations to Support Workforce Inclusion

Moderator:

Lisa Lewis - *Director at FasterCures, Milken Institute Health*

Panelists:

Dr. Tracie Locklear - *Research Assistant Professor, Biomanufacturing Research Institute and Technology Enterprise (BRITE), Department of Pharmaceutical Sciences, North Carolina Central University*

Tracey Newman - *Assistant Vice President, Global Programs & Doctors in Clinical Trials Research, National Medical Fellowships*

Dr. Joy L. Jones - *Executive Director, Robert A. Winn Excellence in Clinical Trials Award Program, VCU Massey Comprehensive Cancer Center*

Lisa Lewis opened the session by emphasizing the importance of cross-sector partnerships in building a stronger clinical research workforce. She highlighted how collaboration between sectors is key to creating a more effective research environment. Lewis then introduced each speaker, who would share their strategies for strengthening the workforce and expanding access to opportunities across sectors.

Dr. Tracie Locklear discussed the [Clinical Research Science Program](#) at North Carolina Central University, located in the heart of the fourth-largest life sciences hub in the U.S. She explained how the program offers both a certificate and a Bachelor's degree in Clinical Research, aligned with the MRCT's Joint Taskforce guidelines. The program focuses on providing undergraduates, graduates, and community members with the skills needed for careers in clinical research. The university fosters strong industry, academic, and professional collaborations, including with organizations such as the ACRP and BWICR. Dr. Locklear emphasized the importance of experiential learning and community engagement to create deeper connections and provide students with real-world research exposure. Dr. Locklear also called on employers and potential jobseekers to join the [Consortium of Academic Programs in Clinical Research](#).

Tracey Newman provided an overview of the National Medical Fellowships (NMF), which has been supporting medical professionals since 1946 through scholarships, mentorship, and leadership training. She introduced the [NMF Doctors in Clinical Trials Research \(DCTR\)](#) program, which aims to increase access to clinical trials for underrepresented communities. Since its launch in 2021, DCTR has trained over 200 clinicians to serve as Principal Investigators. Tracey highlighted the program's core components, such as investigator





training, the Site Success Initiative, and continuous convenings for emerging investigators. She also discussed NMF's collaborations with various organizations, including the Coalition for Clinical Trial Equity, to advance policies and ensure broader representation in clinical research.

Dr. Joy Jones discussed the [Robert A. Winn Excellence in Clinical Trials Award Program](#), which was created to address the underrepresentation of patients from underserved communities in clinical trials and the lack of diversity and training in the clinical research workforce. Partnering with the [Bristol Myers Squibb Foundation](#), with support from Amgen, Gilead, and Genentech, the program focuses on training physician-scientists to become community-oriented clinical trialists. The program includes various initiatives, such as the Winn Career Development Award for early-stage investigators and the Clinical Investigator Pathway Program for medical students. Dr. Jones emphasized the importance of building partnerships with funding organizations, implementation partners, and advisory groups to support the training and development of the next generation of clinical trial leaders.

In the discussion, the speakers addressed key barriers in clinical research careers and how their programs are helping. Dr. Jones highlighted the lack of mentorship and institutional support for early-career faculty, noting that protected time has enabled quicker career advancement. For medical students, she emphasized the lack of exposure to clinical research, which her program addresses through stipends and mentorship. Tracey Newman shared a market study showing time and financial barriers, stressing the need for mentorship and early industry exposure and providing stipends to help offset living costs. Dr. Locklear discussed the challenges undergraduates face in gaining hands-on experience and emphasized the importance of partnerships with pharma companies for internships and certifications. The speakers encouraged exposure, collaboration, and networking and noted the importance of financial support and clinical trial budgeting skills in preparing future researchers.

Hayat Ahmed, Program Manager at the MRCT Center, provided the closing remarks summarizing the discussion and told participants to stay tuned for the next webinar by the Convergence project that will be hosted by Milken Institute Health- FasterCures in June 2025.

