Raising the Bar in Clinical Trials Monitoring

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A Compilation of Highly Effective Clinical Research Monitors

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Effective Monitors

In Raising the bar in Clinical Trials Monitoring version 1.0 we read contributions from some of Australia's most effective Monitors. Each updated Raising the bar version to showcase Monitors recommended by Sites and company Directors, as being highly impactful in their role.

As an industry, with an accelerated pipeline of product development and the need to resource this research and development there is a demand to consider the way we operate.

Yes, there are guidelines, laws, regulations, policies and procedures to be bound by; however, there is also a challenge on our industry to vastly improve on how we have always operated.

There is a tried-and-tested process, with often varied rates of e-Clinical engagement, and altered approaches to Monitoring, particularly since early 2020.

Found within are insights and thoughts of Monitors who have a proven track record in their positions, who are valued by their respective companies; and are respected by the team members they work most closely with, the Site staff.

The desire of these contributions is to provide some perspective to new Monitors starting out in our industry, and to provide some inspiration to those who have been in the trenches for many years.

Our initial group of Monitors were asked to provide some insights into the following types of topics:

- what they believe helps them to be an effective Monitor
- some practical processes they follow to assist them in achieving more, in less time
- how they are working effectively with Site staff and colleagues
- some tools that they use to make light-work of their outputs
- advice given them by an early mentor that helped them to be an effective Monitor
- advice they could offer a new Monitor

Our contributors were also requested to keep it to 250 words – some couldn't resist the opportunity to share more, and to the reader's advantage.

The contributing Monitors have taken different approaches to their responses, which also represents the variability of styles and methods of each Monitor.

Most organisations will have well developed mentoring programmes to support knowledge-share; transcending the project, process, and regulatory understanding, and so the desire of this initiative is to support role specific mentoring, from this expanding group of effective Monitors.

Karen Rodger, MSD Australia

What makes you an effective Monitor from the perspective of the Trials Site and your Line Management?

Trial Site:

- Be supportive and understanding of their workloads
- Adapt to different personalities and styles of working
- Have a strong knowledge of the protocol and processes to help the Site team maintain their compliance
- Be organised for the visit and prepare your points before you meet with the staff

Line management:

- Meet your metrics
- Be proactive
- Share your knowledge and experience to new staff

What are some practical processes you have in place that enables you to achieve more in less time, considering the various tasks as a Monitor?

- I use OneNote to organise my study notes and monitoring visits. I create an agenda for each upcoming visit and during study team meetings I drag and drop key updates into the visit agenda to ensure my sites are being informed and I am focused on what needs follow-up.
- Have a realistic plan of what you want to achieve during your monitoring visit. Schedule your visits to ensure there is appropriate time onsite. Preparation is key!
- I also use OneNote to create a monthly snapshot of all my studies/monitoring visits/site personnel availabilities, system downtime periods, database lock timelines etc. This allows me to stay organised in an environment where we are constantly juggling priorities for multiple studies. It also allows me to easily re-prioritise when unforeseen events arise. A bonus - this also helps when completing monthly timesheets.

What is your approach to working with the various Site team members?

- The ability to build a great working relationship with the site staff is always my priority. Understand their individual style of working and adapt. Know when support is needed or when to back off.
- The ability to make a challenging study much easier to manage for the site staff. When you're able to make the site staff feel supported, you can remove a lot of the stress involved in conducting the study at their end. This helps to build your relationship with the site and ultimately leads to better quality outcomes with fewer deviations.

I always take interest in what their priorities are on this day/week or month etc especially with the increasing demands of database locks. Most likely your study is one of many trials they are working on. When you are more considerate of their workload, they are more likely to take your urgent requests when asked. Be thoughtful in your follow-up to sites. Know what days they have clinic days and avoid booking or planning monitoring visits on those days.

What approach do you follow to work effectively with your Project Managers?

- Be responsive to their email requests and provide input in team meetings. Be an active contributor.
- If there is an action required by a due date, add it to your calendar. If it can't be achieved by a specific timeframe, provide a reasonable alternative to your PM so you can prioritise the task.
- When faced with a problem that requires input from the PM, I always ensure I provide my opinion/stance on the matter along with any justification.
- Reference some types of tools that you use that make light-work of your outputs.
- I create my own patient assessment trackers for each study, whether it would be on an excel spreadsheet or OneNote.

Karen Rodger, MSD Australia

This will give me a snapshot of where each patient is up to, so I'm prepared for each visit or when the site staff call. Trackers are only effective if it works with your style of monitoring- remember to work smarter not harder and continue to develop and improve your own tools to ensure they work effectively for you.

What advice did someone give to help you Monitor more effectively?

- Not quite something somebody told me, but something I learned from overhearing site staff quibbling about Monitors. Building quality relationships with site staff is key! You will get the most out of site staff if you are able to learn how they like to work and adapt to their style. Some peoples style can be blunt and to the point, while others are more personable and like to build deeper relationship with you. Understanding the personality, you are working with at site and how to "manage" that personality will breed good outcomes. Ultimately this benefits the study, our organisations reputation and makes life easier for you in the long run. Your work style needs to be malleable and not rigid, otherwise it will be impossible for you to get the best out of your working relationships with every site.

What is one piece of advice you would offer a new Monitor?

- Establish a great work life balance because you can easily burn yourself out regarding travel and competing deadlines.

Sowmya Gopichandran - BeiGene Australia

A Clinical Trial Monitor (or CRA) is well-organised, proactive, meticulous, and provides quality work within timelines. While good monitoring skills are essential, soft skills play a pivotal role in becoming an effective CRA. I received advice at the beginning of my CRA journey that building good relationships with sites, and CRA colleagues is an essential skill to master for a successful CRA career. Understanding the preferred communication style of PI and site staff (email or phone, and frequency), actively listening to the site's questions or concerns, being reliable and following-through helped me build effective relationships and overcome challenges. For example, I recently performed a remote close out visit (due to COVID19 restrictions) where I reviewed the site files with the Study Coordinator via a zoom call over 2 hours.

This was a challenging task. Couple of things that helped me successfully close this site, were proactively communicating the plan with the Study Coordinator, and being well prepared with a solution focused mindset, as well as advice from my management team. Additionally, keeping study team proactively well-informed on sites' status, and communicating our current workload with management is essential to mitigate potential issues.

There are various tasks we perform every day. Having a well-organised calendar and a to-do list helps prioritise important tasks and achieve study milestones. I use OneNote and Outlook calendar extensively to manage my workload. Lastly, providing quality work takes an extra minute the first time and while it may seem a bit tedious, it saves a lot of everyone's time in the long run. I try to practise this, and it has certainly helped me save time and stay on top of my work.

Josy Rinaldi, Avance Clinical, Australia

Effectiveness in this industry boils down to good communication, both written and verbal and understanding your role and where you fit in the clinical trial process.

An effective CRA will plan their monitoring visit.

Think it through beforehand and set realistic goals on what you hope to achieve. If you're disorganised and erratic in your monitoring, the site staff will pick up on this and it will work against you. 'If you fail to plan, you can plan to fail'.

I am still finding that concise and organised email communication immediately after a visit is the best way to ensure actions are initiated by site staff to resolve issues in good time, even before you send out your FUL.

Make a concerted effort to understand the therapeutic area you are working in and the tests being used to ascertain clinical outcomes. Most Study Coordinators can spot inexperience in a Monitor. The last thing they need is to have to hold a Monitor's hand and guide them on how to monitor their data. I am sure my best lessons have been learnt listening to experienced study coordinators and nurse managers explain their patient's situations and challenges. Learning from them makes you a more knowledgeable and capable Monitor.

Talk to your staff and the PI about protocol deviations (PDs) and the reasons for their occurrence and put them into perspective. Do this proactively. Don't just accept PDs as a trial standard, they are not, they are aberrations to the data and can skew results. Feedback

those reasons to your Protocol Development team to improve those protocols and make them more realistic, clinically.

To those new to the CRA profession:

- Pace yourself; don't plan too many visits in succession leaving you insufficient time to do that all important follow-up and write your reports
- Don't cut corners – it's tempting to close those queries just because they're answered, even if you are not convinced the data are accurate. Keep seeking the correct data entry that makes sense. Back yourself, always. You need to be able to explain your work.
- Talk to your line manager about how you are coping with workload, and they should help you put things into perspective and help you map out a way forward
- Communicate with your PM – if it looks like your MV report is might exceed the due date, let them know the efforts you're making to complete it. They too need to set time aside for review. Remember, it's not all about you – it's about getting that report out on time to the Sponsor.
- Communication and consideration of your team members is crucial, as is the reputation of the company you are working for.

Jay Exenberger
Avance Clinical, Australia

What makes you an effective Monitor from the perspective of the trials Site?

- Never make the site feel it is a 'me' and a 'them' in the study partnership. I work to make site feel it is a team effort and my passion for their patients mirrors their own – which at the end of the day is why we are all here.
- Monitor effectively by picking up issues that are relevant and important – explain findings and work with site to help resolve it. I listen to Site staff's explanations and don't get bogged down in small or irrelevant issues. Monitor in a way that is systematic and organised. I respect that the real world doesn't always follow the ideal world of a protocol, particularly when dealing with paediatric participants. When issuing queries, I am always fair and respectful of the coordinator ensuring I do not 'over-query' on every field. There are ways to query, without being burdensome
- Site staff have described me in the following ways:
    - An extremely good communicator, making things clear and succinct. Very approachable and reasonable, willing to receive calls about protocol questions and going out of my way to ensure they are answered, never making site staff feel silly about any query they have had. Taking the time for a monitoring visit summary and discussion of findings (something not all monitors do). Reviewing queries and issues together with the site and potentially 'fixing' issues on the day.
    - Good time management - always responding to any query quickly - even if it is just an email to let site know the progress.
    - Showing a great deal of empathy towards the patients whose records I am reviewing. In the site's opinion, this empathy is valuable in monitoring as putting myself in the shoes of one of the site's families can go a long way to realising, for example, why perhaps a survival follow up was a few days late.

What makes you an effective Monitor from the perspective of your Line Management?

Line Management have found me to be approachable, great communication skills, team player, reliable, attention to detail, exceptional high standard of work, respectful of timelines and budgets, consistently meeting deadlines and Customer focused. These qualities would be supportive of any Monitor and their relationship with Management

What are some practical processes you have in place that enables you to achieve more in less time, considering the various tasks as a Monitor?

- Create a "cheat sheet" of Protocol for all studies: A one or two page document containing: Mechanism of action of IP, Study design, Visit schedule (with windows), IP summary, Lab samples (collection requirements and which abnormal urine samples require microscopy), Normal ranges (vitals/ECG), order of assessments, AE/SAE/AESI reporting, special eCRF requirements, which HREC/Governance used, monitoring frequency – a one- stop reference especially when I have multiple Protocols running at the same time
- Use eCRF reports
    - Monitor/CRA report: know what to SDV – helps me pre-populate confirmation letter and helps prioritize visit
    - Missing fields report -what is expected to be entered – alert site prior to visit to enter data and maximize SDV performed at site
    - AE report: review for potential SAEs/AESIs not reported (Patient safety)
    - AE report: review for ongoing AEs which should possibly have resolved (don't leave this till the end of study/till subject off study)
    - Work with Data Management team:
    - flag unnecessary data points firing queries at first MV/ review of first subject – saves site/CRA time
    - Flag items not flagged by system – missed assessment/ PDs or missing eCRF fields required by Protocol

Jay Exenberger
Avance Clinical, Australia

- Request to be part of the User Acceptance Testing (UAT) – opportunity to iron out eCRF issues from CRA perspective

- Pre-populate visit reports prior to visits – add items which occur between visits e.g. HREC annual report submission done/new lab manual release/IB release
  - Helps with preparation for visit
  - Facilitates discussion/training points with the sites
  - Speeds up report submission timelines to PM to ensure no deviations to SOPs (late visit reports)
- Summarise visit items for site feedback as day progresses – end off visit with clear summary and site/PI actions
- Send a summary email to site day after visit – this gets items resolved quickly and site does not need to wait till they received FU letter. This way items can be resolved as "POST VISIT" notes to the report which minimises open action items
- HREC documents: Create folders for each HREC which contain pertinent SOPs/Guidance documents (SAE reporting, Protocol Deviation reporting etc) – quick to reference all in one spot
- DO NOT attend Company or Study team calls while on site: I put my out-of-office on. A sponsor would appreciate it if I did not attend another Sponsor's call while monitoring for their study. Inform my LM that I am on site and cannot attend a Company meeting (listen to a recording or read minutes for missed meetings)
- Switch off Outlook while at site – very distracting. I scan emails every 3 hours for anything very urgent
- Batch tasks per visit: Ensure all items around a visit are completed: Example: Timesheet completion and expense claims around a visit are part of activities for that visit Request help – review SDV status and flag the need for support (co-monitor) sooner rather than later

What are some practical processes you have in place that enables you to achieve more in less time, considering the various tasks as a Monitor?

- Only direct items of major importance to the Principal Investigator (AE/SAE, major PDs, poor recruitment). Be

flexible and speak with the PI over the phone and don't always insist on "in person" meetings. Do not copy PI on day- to -day emails with site – this way PI will be more responsive when he gets an email from me

- Show the site I am supportive of the site and operating as a team (not the sponsor vs the site)
- Gauge my Study Coordinator's experience and mange and guide them accordingly
- Pharmacists – use their knowledge and background as Pharmacist to assist with IP management (if you yourself are not a Pharmacist by training) - listen to their suggestions/ concerns and relay these back to the Team e.g. request their review of IP accountability logs prior to study start as they know what works/does not work

What approach do you follow to work effectively with your Project Managers?

- Respond to emails/requests in a timely manner. Acknowledge when PMs request me to do something – just a one liner "Noted" then the PM knows it has been actioned
- Update trackers regularly – PMs refer to study trackers as this gives them a "real-time" central point of gathering information without running after CRAs – trackers tell the story
- Come with solutions to a PM – I pose my questions, but also suggest answers (provide the source where I have a potential answer, for their ease of reference)
- Supportive – don't shy away from pointing out items that are incorrect – PMs appreciate an extra set of eyes, and this avoids issues further down the line
- Remind PM of report deadlines – use MS teams or call PM to alert of deadline – A PM's inbox can get flooded

Reference some types of tools that you use that make light-work of your outputs

- Trackers:
    - Monitoring visits: tracks dates: confirmation letter sent, date of visit, report due, FU letter due – avoids

Jay Exenberger
Avance Clinical, Australia

SOP deviations and helps me plan visits around CMP requirements

- Subject visit trackers: Populate screening and dosing Day 1 dates– this then pre-populates expected and actual subsequent visits – flags PDs – share this tool with the site
- Protocol time point event trackers: Track important timepoints: Example Blood draws required post dose escalation: To ensure subject safety not compromised

Outlook: Set reminders for tasks/block out time: MV report due dates, preparation time for MVs, HREC annual progress report due dates etc.

What did someone tell you once that helped you more than anything with effective Monitoring?

"If it is not documented….it is not done". Document, document, document!

What advice would you offer a new person in this role?

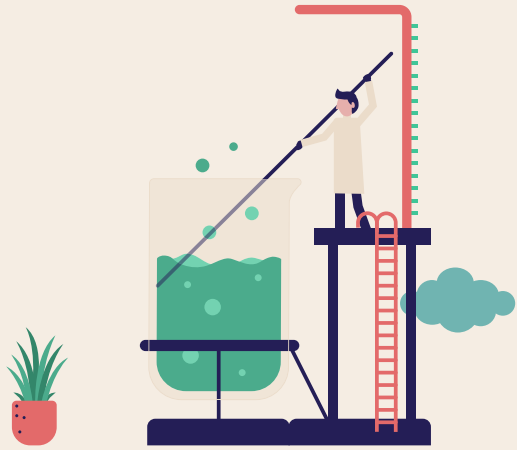
Don't assume you know it when you have read it once …. documents, processes and procedures constantly change, and you need to re-visit reference documents regularly. This is a very fast changing Industry, and you need to be up to speed with the latest processes.

James Yu, BeiGene Australia

What I have learnt over the years is that every monitor is different, and we all have our own signature way of getting things done. One key factor that made me into an effective monitor is being trained by the best mentors I have met and taking elements from their style that has worked effectively and implemented it into my own style. It doesn't come instantly but a gradual uphill learning process, you won't be right all the time, but time perfects all.

As monitors we should live by "Proper Preparation prevents Poor Performance – by James Baker" which "proper preparation" is key to being effective. We should also always have trackers. Trackers for visits, trackers for tracking and for secure login and passwords for different systems; the list goes on. I found its more effective to have individual trackers for each site in combination using OneNote to detail monitoring visits and pending action items. This has served me well so far.

I know many of you have heard of soft skills. These skills are essential in your communication to study coordinators & PIs it will be the key factor that separates you from a good CRA to an excellent CRA. Communication needs to be concise, short pieces of digestible information and do not spam your study coordinator/site. If it's something simple or urgent – pick up the phone give them a call. If it's a detailed response do put it in an email with a summary of changes and a timeline when it is due by."

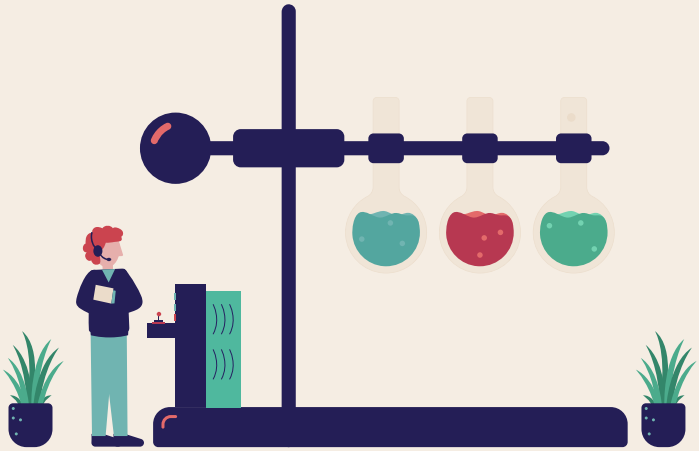


Raising the bar in Clinical Trials Monitoring

This compilation of wonderful contributors was initiated by Allan Bukuya, who reached out to a number of Site teams, Sponsors and CROs, seeking Monitors to provide their insights and thoughts to this topic. The Monitors names were gladly and proudly put forward, for their welcomed contribution.

There are distinct themes with these entries, relating to the collaborative manner of working with internal teams, the flexible approach of aligning with site personalities, and of course the organisation and tools developed for executing their responsibilities efficiently.

The purpose of this e-book initiative is to showcase the approach and thinking of highly effective Monitors, to benefit of Clinical Trials Monitors, both new and experienced. We would also welcome further contributions to version 2.0 by additional SCRAs who are represented by their Company Directors and by Site teams as having stand-out qualities.



Allan Bukuya has launched and developed companies out of the determination to approach Clinical Trials differently and in a way that supports Individuals, Sites, Sponsors, Universities and CROs alike.

As the founder and co-owner of ***TrialDocs International***, he launched their cornerstone product SiteDocs Portal, to enhance Remote Monitoring and Teletrials, supporting both Sites and Industry.

Managing Director of the Clinical Research Advocacy, ***Future Clinical***, Bukuya advocates for CROs and Sponsors with Monitoring staff (local and international), supportive of Monitors and their effort, and respectful of CRO business objectives.

Thank you to the contributors of this initiative, as it has enriched the capabilities of Monitors, their project teams and Site groups. This has been a direct and indirect opportunity to provide perspective for Raising the bar in Clinical Research Monitoring.

raise the bar

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