

CTSA Program Common Metrics *Implementation Success Stories*

Virginia Commonwealth University Wright Center for Clinical and Translational Research

*Unpacking IRB workflow to shorten
protocol review times.*



- VCU is an urban-serving, research university located in Richmond Virginia and the only CTSA program institution in the state.
- Awarded a CTSA in 2010, the Wright Center for Clinical and Translational Research is a smaller hub that has made informatics an area of focus, spearheading the coordination of intuition-wide informatics efforts into a comprehensive research support enterprise.
- A focus on accountability helped the evaluation team successfully partner outside of the Wright CCTR and meaningfully engage IRB subject matter experts.
- The RBA framework was also taken up by Wright CCTR's informatics core to adapt and refine institutional data collection and focus on

Area of Success: The C. Kenneth and Dianne Wright Center for Clinical and Translational Research (CCTR) at Virginia Commonwealth University (VCU) kicked off its implementation of the Common Metrics Initiative by focusing on the Median IRB Review Duration metric.

Initiatives to increase translational and interdisciplinary research, one of the primary themes of VCU's 'Quest for Distinction' Strategic Plan, have helped substantially expand the university's research endeavors, intensifying the need for timely and efficient review processes. According to Dr. Deborah DiazGranados, of Wright CCTR's Evaluation Core, recently added administrative systems made data available but the Common Metrics Implementation (CMI) process was an opportunity to accelerate meaningful improvement.

Among the first steps was involving a broad-enough set of internal and external partners. Wright CCTR became the focal point for meetings that included staff from its evaluation, informatics, and education cores, along with the IRB office's leadership. Further in-depth reviews convened by the IRB office and leadership included IRB Chairs and board members, IRB office staff and research coordinators. DiazGranados credits the Results Based Accountability (RBA) framework with providing a unifying language that helped shorten learning curves and build a shared sense of accountability among the diverse collaborators -- key ingredients for developing a strategy that is both comprehensive and coherent.

Data related to various tasks in the IRB workflow was assessed by the IRB office. Through root cause analysis, specific training needs were identified for IRB staff as well as board members. These are being systematically addressed by IRB staff professional development and as part of an ensemble of the Wright CCTR educational and informatics initiatives addressing broader needs among the entire VCU research community.

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What They Did: To facilitate improvements in the human subject review process, the action plan developed by the IRB office and its partners includes:

“Data from the CMI showed our IRB leadership how we can use analyses of IRB processes to enhance efficiency. This was a win-win for all involved.”

- Gerry Moeller, MD, Director, Wright Center for Clinical and Translational Research, Associate Vice President for Clinical Research

- Targeted training to address knowledge gaps that kept IRB members from effectively using VCU’s electronic review management system.
 - New workshops and online training guides to help study teams work through the IRB process.
 - Expanded efforts to educate and assist investigators, including through Wright CCTR’s recent development of a new Scientific Review Committee to help ensure that the human research protocols going to IRB panels are scientifically sound and operationally feasible.
 - Training to facilitate more frequent use by the IRB of conditional approval.
- Deadlines for certain tasks in the workflow for convened IRB review of studies, such as screening new full-board studies, completing meeting minutes, and communicating with principal investigators.
 - Refining Research Innovator Portal, a dashboard for monitoring VCU’s research-related business practices; the informatics team used the RBA framework to define and operationalize dashboard metrics.

The Take-Away: The Common Metrics Initiative provided an impetus to systematically address the root cause of issues contributing to an extended time to IRB approval. Wright CCTR focused on working with its partners to fully understand the metric, employing the RBA process “to take a deeper dive” into what was being measured in a way that fosters alignment across institutional goals, explained Dr. DiazGranados.

About the CTSA Program Common Metrics Initiative

The Common Metrics Initiative is part of the Clinical Translational Science Award (CTSA) Program funded by the National Center for Advancing Translational Sciences (NCATS), one of 27 Institutes and Centers at the National Institutes of Health (NIH). To advance their shared mission of accelerating the translation of scientific discovery into improved clinical care and public health, CTSA program institutions are collaborating on standardized ways of measuring their efficiency.

The Tufts Clinical and Translational Science Institute is helping implement these Common Metrics as part of a data-driven management framework to stimulate process improvement and practice innovation. Tufts CTSI and its Common Metrics implementation work are funded by NCATS Award Number UL1TR001064. VCU Wright CCTR is funded by NCATS Award Number UL1TR000058.

For more information on the Common Metrics initiative visit: www.tuftsctsi.org. For more information on the success strategies at VCU Wright CCTR contact: deborah.diazgranados@vcuhealth.org

