

Site Solutions Summit™

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Site SparkSM Presentations

September 29th, 2025



Faculty Disclosure

In compliance with ACCME Guidelines, I hereby declare:

I do not have financial or other relationships with the manufacturer(s) of any commercial services(s) discussed in this educational activity.

Speaker Name, Organization

Speaker Name, Organization

Speaker Name, Organization

Speaker Name, Organization





Criteria for Awarding Contact Hours

Applicants must be present during the "live" event, contact hours are not issued for recordings.

Applicants must attend the activity the whole time, missing no more than ten minutes of the activity.

Applicants must complete the post-meeting survey with a score of at least 70%.

Applicants must complete the post meeting survey evaluation questions.

Society for Clinical Research Sites, Inc. is accredited as a provider of nursing continuing professional development by the American Nurses Credentialing Center's Commission on Accreditation.

2025 Judges



Greg AdamsPfizer



Batisha AnsonSyneos Health



Mohammad Millwala

DM Clinical Research



Lisa Moneymaker Medidata



2025 Finalists





Andres Alvarez
Baptist MD Anderson Cancer Center





Joshua Carey Emeritus Clinical Research





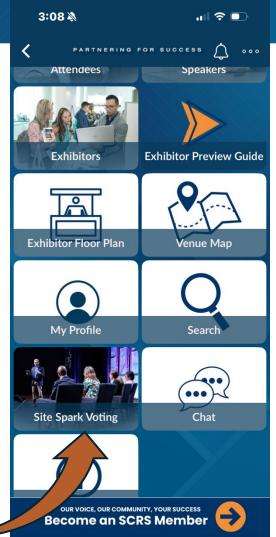
Helen CombsMedovation Clinical Research

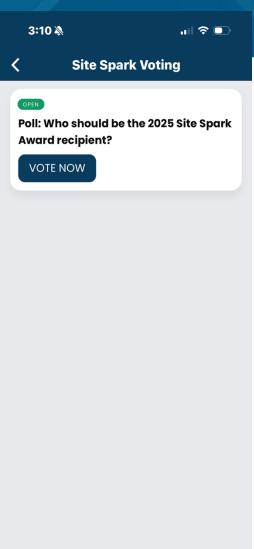


Voting Process









Medovation Clinical Research





- Mission: Simplifying clinical research for all—patients, physicians, and sponsors to improve engagement.
- Specialties: ENT, Dermatology, Cardiology, Neurology, Sleep Medicine, and more.
- Footprint across Alabama, Florida, Georgia, and Tennessee with multiple active research sites.



- Only ~10% of U.S. physicians are engaged in clinical research, limiting patient access to breakthrough therapies.
- High barriers for physicians to enter research due to staffing, infrastructure, and compliance requirements.
- High failure rates. Of those physicians that enter the industry—66% doing their first trial are also doing their last.
- Patients are losing as traditional research models often exclude underserved communities



- Research Ready program for emerging investigators. Truly integrating into the practice.
- Wraparound Site Support: Infrastructure, SOPs, staffing, regulatory, and financial systems for physicians.
- Point-of-Care Trials: Delivering research directly in community practices where patients already receive care.
- Diversity Commitment: Focus on including historically underrepresented patient populations.







Implementation & Impact of Innovation

- Execution through integrated site management and staffing. Onsite and centralized full spectrum support services, including turnkey CTMS, regulatory, billing compliance, and recruitment.
- Also requires a team with deep experience in research and strong business development as sponsors are still leery of naïve investigators.
- Physicians can begin conducting trials without disruption to clinical practice, resolving the shortage in investigators and expanding access to underserved communities and populations.
- We want replication of this model to create robust, full circle support to ensure investigators succeed and support sponsor needs so that more patients can win!



- Over 30 active studies in one year, showcasing the value sponsors see in this model
- Average recruitment for all completed studies is 110%, highlighting the importance of community-based physician partners
- 9 sites research ready and actively conducting trials is just one year
- Trusted by physicians: Dr. William R. Blythe calls Medovation "professional, honest, and supportive," "allowing physicians to engage in research with a continued focus on patient care."
- Sponsor confidence: Partners like KARL STORZ praise Medovation's responsiveness and trustworthy communication.
- Industry Validation: Management Services Organization partner described the model as a "game-changer" for practices.



Key Takeaways

1

What You Learned

- Embedding research at the point of care expands access for patients and reduces trial costs.
- A wraparound support model enables research-naïve physicians to become highperforming investigators.
- Diversity in patient recruitment is not optional—it is central to high-quality, ethical research.

2

How Others Can Implement

- Partner with local practices
- Provide robust infrastructure
- Prioritize diversity and physician engagement.
- Build strong partnerships with sponsors, build trust

3

Final Note

 Lifting-up naïve investigators is not easy, but critical to the success of sponsors and the impact on patients across all communities.



BAPTIST MD Anderson





WHO WE ARE

- Baptist MD Anderson Cancer Center a ·
 premier cancer program in
 Jacksonville, Florida.
- Built through a unique partnership with MD Anderson Cancer Center and Baptist Health, the region's most comprehensive health system.
- We combine world-class research and compassionate care, embedding clinical trials as standard of care for every patient.



PROBLEM SOLVED

- Research was siloed: patients weren't consistently screened or offered trials at first encounter.
- Activation was slow: fragmented processes delayed trial starts and patient access. Expedited study startup
- Equity gaps persisted: underserved communities had limited opportunity to participate in research.
- Results at a Glance: 41%→98% screening ·
 182→90d activation (-50%) · 34/q (+23% QoQ, 15
 NRG) · underserved 18%→39%



INNOVATION OVERVIEW

- Embedded Research into CareEpic alerts, Aldriven trial matching, and CRC workflows ensure 100% of eligible patients are screened at first encounter.
- Streamlined Operations eRegulatory, eConsent, standardized SOPs, and digital dashboards cut activation time, trials launched in 100 days or less.
- Expanded Equity & Access Deployed eConsent in satellite hospitals, mobile outreach, and bilingual CRCs to boost participation from underserved communities.

Replicable Across Any Site





Implementation & Impact of Innovation

- Integrated into Clinical Workflow: Embedded Epic alerts, standardized order sets, and eRegulatory systems made research part of routine patient care.
- Scalable & Replicable: Processes rely on existing EMR tools, SOPs, and staff training, adaptable by any community
 or academic site.
- **Measurable Impact**: Increased trial screening to near 100%, reduced activation timelines, and improved enrollment among underserved populations. 98.7% eligible screened at first encounter (↑ from 41% in FY24 Q2).



Evidence Of Success

- Evidence #1 X Achieved a double digit increase in patient enrollment across cooperative group trials within the past quarter, driven by streamlined workflows and expanded prescreening. +43% NRG enrollments in Q3 vs Q2.
- Evidence #2 Cancer Registry across all communities, breaking barriers to participation and ensuring every patient has a voice in discovery.

Key Takeaways



1

2

3

What You Learned

- Embed research into routine care to expand trial access for every patient.
- Leverage digital tools like
 eConsent and Epic integration to
 accelerate activation and
 compliance.
- Foster cross-team collaboration to sustain equity, quality, and scalability in research operations.

How Others Can Implement

- Start with your EMR: Use alerts, order sets, and templates to embed research into routine care.
- Adopt digital tools: Implement eConsent and eRegulatory platforms.
- Build a rapid activation model: Standardize SOPs and timelines.
- Innovation is not technology alone, it's culture. Building a research first mindset among physicians, coordinators, and patients is what sustains impact long after the tools are in place.

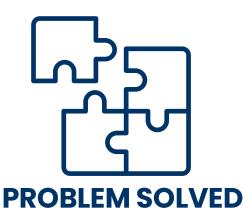
Emeritus Research





WHO WE ARE

Emeritus Research is a private clinical trial site group that has been conducting clinical studies for over 25 years. Now the largest, by capacity, within Australia, Emeritus can scale and proactively implement effective strategies to ensure our partners objectives are met while maintaining focus on the patient safety and experience.



We set out to address the disconnect between traditional education methods — such as SOPs and guidelines — and the way our team actually learns. Our goal was to develop a tool specifically tailored to meet the unique needs of our team, while also empowering them to take ownership of their learning and development.



INNOVATION OVERVIEW

- Developed the Education and Resource
 Library (EARL) to support meaningful,
 team-driven learning.
 - Built using accessible platforms in collaboration with team leaders.
 - Designed to empower our people, avoiding generic and costly solutions.







Implementation & Impact of Innovation

- Built a secure, team-first site using Canva,
 based on learning gaps identified by the staff and team leads.
- Examples:
 - Poor SOP absorption
 - Undocumented knowledge

 Centralised all resources—including expert-led summaries (Playbooks, Video Library) and existing documents—making education consistent and available anytime.



- Since launching in late July, EARL has been **accessed over 1,200 times by staff** (as of 15 Sep 2025). All sections of the site are actively used—from Playbooks and the booking calendar to the video library and consent resources.
- Staff feedback has been overwhelmingly positive, with EARL now part of their everyday
 workflow. The platform is seen as easy to access, simple to navigate, and a genuine benefit to
 the business.







Key Takeaways

1

What You Learned

 Collaborating with staff from the outset boosted engagement and led to far more content than originally planned, making EARL a truly team-driven resource. 2

3

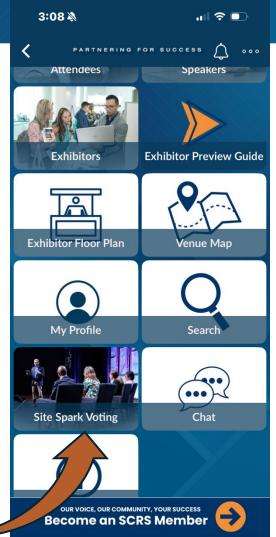
How Others Can Implement

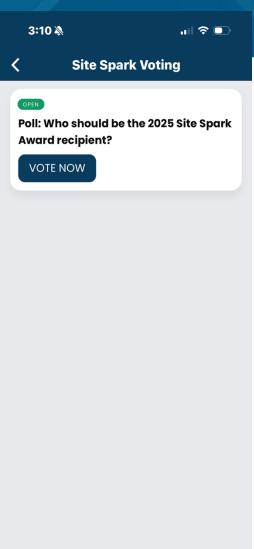
- Take a moment to reflect on your strengths and areas for growth—consider where you can improve, and what tools you already have versus what you still need.
- Make the most of available technology—there are plenty of safe, user-friendly platforms that can enhance learning and streamline processes.

Voting Process











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