



Clinical Research Unit

Presentation to CMRC Leadership Meeting

9/15/11



Background/History



- GCRC funding for clinical research infrastructure at CMH from 1999 to 2007
- CTSA Consortium funded by National Center for Research Resources (NCRR), NIH
- NUCATS awarded CTSA funding in 2008
- NU FSM committed monies as part of proposal
- 1 of 60 institutions nationwide with CTSA

Local and National Competition

- Nation's top children's hospitals all have clinical research units
- Most all with designated pediatric units
- U of C, UIC, and CHOW have CTSA funding
- CHOW with designated pediatric CRU comparable to CMH
- U of C, CRU is for both pediatrics and adults

Current CRU Functions



- Currently support 34 Investigators (Attendings, fellows, APNs) across 19 divisions
- Perform tasks prescribed as part of a clinical research study, including:
 - Serial blood sampling over as many as 12 hours
 - Investigational drug infusion
 - Oral glucose tolerance testing
 - Phlebotomy
 - ECG
 - Allergy skin testing
 - Specialized chart review
 - Limited regulatory support

Year	OP visit	IP visit	Grant \$	\$/visit	# studies	# PIs	# divisions
97-98	11	0	92,419	8,401	1	1	1
98-99	4	9	94,799	7,292	2	2	2
99-00	0	3	105,051	35,017	1	1	1
00-01	0	27	111,559	4,131	2	2	1
01-02	41	48	194,165	1,961	6	3	2
02-03	250	35	270,165	947	19	10	7
03-04	775	90	418,000	483	29	15	10
04-05	803	55	366,254	427	20	17	13
05-06	1,598	101	406,518	239	12	16	10
06-07	1,300	8	399,560	305	25	19	12
07-08	1,408	0	457,191	325	18	13	8
08-09	1,115	37	693,734	602	41	27	16
09-10	2,099	4	658,155	313	55	31	18
10-11	1,943	1	771,627	397	70	35	18
11-12	1,999	7	501,810	250	59	38	19

CTSA/NU Budget Cut



- In October 2010 the FSM Dean's Administration support of NUCATS was reduced by 65% (as part of the overall FSM remediation plan)
- NUCATS funding for the CMH CRU was cut by 37.5%. (\$308,000)



Supplemental Support

- The CRU has received supplemental support from the CMRC and from CMH to cover approximately 2/3 of the CRU deficit.

Cost Reductions Implemented

Since fall of 2010

- Vacated 0.5 FTE RN left open
- RN position reduced from 0.9 FTE to 0.6 FTE
- Applied RN time and salary to other studies
- Down staffed RN's during low volumes
- Floated RN's to patient care areas during low volumes



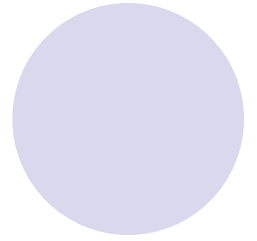
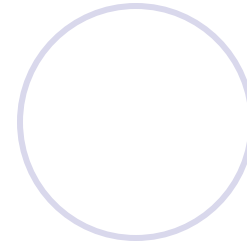
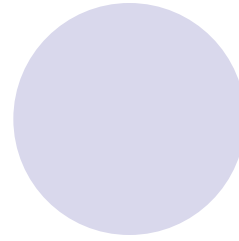
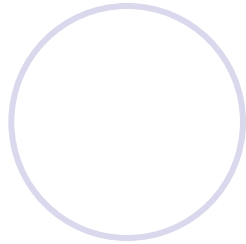
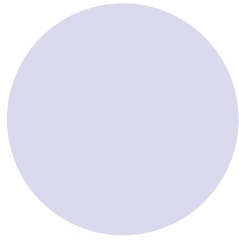
Planned Cost Reductions

- Decrease RN FTE from 4.2 to 3.0
- Reduce Research Project Coordinator (M) position to Research Coordinator (K)
- Decrease Lab Technician from 1.0 to 0.5
- Add 1.0 FTE CNA
- Shift job responsibilities
- Staffing shift to be completed by November 1



Future Goals

- Maintain current level of services.
- Expand activity anticipating our move to the Lurie Children's Hospital of Chicago.
- Contribute to the successful re-competition of the NU CTSA grant.
- Assure that the CRU remains a key asset in attracting a physician leader for clinical research. This is a key goal for the CMRC strategic plan in FY12.



Questions ?