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Case study to employ a research
co-ordinator: MacKay Base
Hospital Trials Tribe model

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Purpose of document:

This document provides a case study of how to strengthen clinical research culture in an anaesthetic department using the trial tribe model at Mackay anaesthetics department. This document is for ANZCA fellows, trainees, and emerging investigators. It draws on the experience of Ms Tracy Hess, who was the clinical research coordinator at Mackay Hospital and was responsible for managing clinical trials at the anaesthetics department using the trial tribe model.

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The development of the Anaesthesia Research Coordinator Network (ARCN) and ANZCA CTN toolkit is being led by the CTN office team, in collaboration with the ARCN sub-committee and the CTN executive. We gratefully acknowledge the contributions of the ANZCA CTN members, CTN office, ARCN sub-committee, and CTN executive in the creation, preparation, development, and review of this document.

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1.0	Tracy Hess Karen Goulding Gillian Ormond	Louise de Prinse Natalie Hird A/Prof Lis Evered	17/9/2025	Creation

Case study to employ a research co-ordinator: MacKay Base Hospital Trials Tribe model

Situation

When the clinical director of Mackay Anaesthetics committed to supporting two clinical trials, he saw an opportunity to integrate research into routine practice. His goal was to enhance patient recruitment and retention while ensuring the trials' success. In the process, he identified a group of early-career doctors whose potential was underutilised. This led to the creation of the Trial Tribe Model. Junior medical officers (JMOs), including interns, require direct supervision in their early anaesthetic rotations to develop essential clinical skills. However, he also saw an opportunity for them to increase competencies requiring indirect supervision through active participation in clinical trials. By engaging in research, JMOs could refine analytical skills, improve documentation, and gain deeper insight into clinical trials, benefitting both their professional growth and research quality. This approach strengthened clinical research within the department while empowering early-career doctors with valuable expertise beyond traditional medical training. This then embeds research into the culture of the department.

Actions taken

A dedicated Clinical Research Co-ordinator (CRC) is responsible for managing anaesthetic department clinical trials, overseeing daily trial operations and supporting the Principal Investigator (PI) with trial management and regulatory compliance. Their role includes handling expressions of interest for clinical trials, conducting site feasibility assessments and fulfilling regulatory requirements for Human Research Ethics Committees (HREC) and governance submissions. The CRC collaborates with stakeholders across departments in the hospital to ensure seamless trial execution. Budgeting and forward projections may also be within the CRC scope.

Day-to-day the CRC assists and provides overview of the trial tribe members with an overview of clinical trial activities to screen potential participants, review recruitment and consent processes, maintain data accuracy, manage database entries, address queries and protocol deviations, and report adverse events. The CRC also conducts any internal liaising with other departments such as pathology. Additionally, the CRC fosters effective communication between the research team and the coordinating centre, ensuring streamlined trial processes and successful outcomes.

To integrate JMOs into the trial tribe, they receive clinical trial education at the beginning of their anaesthetic rotation. The CRC delivers this training, covering all aspects of trial protocols, including eligibility criteria, screening and consent procedures, study intervention administration, and data collection. Before participating in any study activities, each JMO must complete their Good Clinical Practice (GCP) certification, and provide a signed dated current CV to ensure adherence to regulatory standards and research integrity.

Assigning JMOs as trial tribe members to daily research activities ensures consistent screening, recruitment, data collection, and follow-up. The CRC is available Monday to Friday, offering timely support for any issues or questions. Through their involvement in clinical trials, JMOs gain valuable experience in obtaining thorough informed consent and accurately administering study interventions, while learning the intricacies of clinical trials.

This novel, yet consistent approach to research ensures protocol adherence while strengthening patient recruitment and retention, as demonstrated by the department's success in expanding their clinical trial activity. It also provides JMOs with professional growth which may lead to future research roles or leadership opportunities in clinical research.

Regular meetings between PIs and the CRC enable ongoing assessment of trial progress, allowing recruitment and retention strategies to be refined and any issues or safety reports to be addressed promptly.

Beyond trial management, the CRC may play a key role in registries, collaborative studies, and commercially sponsored trials across various departments within the organisation. It is common for the CRC to coordinate eight or more clinical trials at any one given time. Additionally, they oversee clinical audits and provide support to clinicians embarking on

research, offering opportunities to develop their own expertise in line with the clinical research nurse standards of practice. This broader scope strengthens both research quality and organisational capability.

Outcome

Higher recruitment rates help maintain clinical trial timelines, with the dedicated CRC ensuring ethical standards remain a priority. As trial tribe members progress in their anaesthetic training, they consistently introduce clinical trial opportunities to patients during pre-anaesthetic appointments, fostering a strong research culture within the department. This approach has enhanced the department's reputation within the broader research community, leading to an expansion in clinical trial capacity from two studies to eight.