# 2025 Clinical Research Site Challenges Report

Data-Driven Insights to Navigate the Clinical Research Landscape, Create Solutions to Support Site Success, and Accelerate Research.

wcg™

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Clinical research sites are at a transformative juncture, facing heightened demands to deliver trials with greater speed, efficiency, and uncompromising quality than ever before. As the industry embraces rapid innovation, digital transformation, and more complex protocols, pressures are intensifying at the site level, where budget constraints, funding cuts, and operational demands continue to grow. Today's research sites must navigate a multifaceted landscape, contending with fragmented communications, persistent technology changes, and the need to recruit and retain skilled talent, among other obstacles.

In response to these mounting changes, WCG undertook our third annual comprehensive survey of hundreds of clinical research sites worldwide. The result is WCG's 2025 Clinical Research Site Challenges Report, our yearly report which showcases the top obstacles facing sites today and offers actionable recommendations for overcoming these barriers.

At WCG, we recognize the indispensable role that sites play in advancing clinical research and improving patient outcomes. Our goal with this report is to empower the clinical research industry by providing the insights, data, and solutions necessary to address key site challenges, create solutions to support site success, and advance the delivery of breakthrough therapies. By sharing these findings, we aim to break down silos, foster collaboration, and accelerate research, together.

SECTION 1

# Survey Background and Demographics

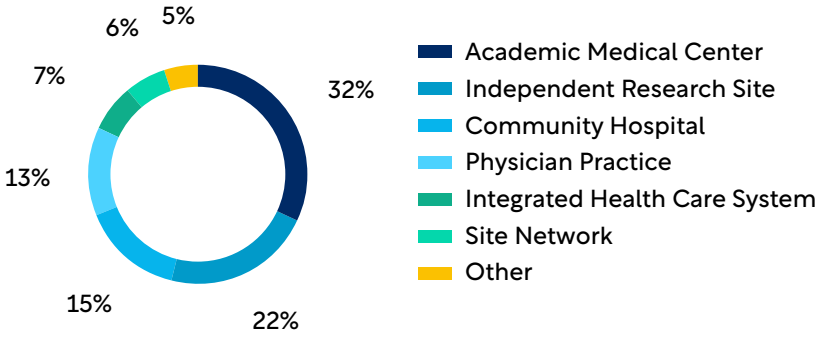
Between July and September 2025, 611 clinical research sites participated in a global WCG survey, providing key insights into the top challenges, solutions they've implemented, and more.

WCG's 2025 Site Challenges Survey gathered insights from a wide range of clinical research sites. Respondents included those from academic medical centers, health systems, or community hospitals, which together made up the largest group at 60%. Independent sites, physician practices, and site networks accounted for 35% of participants, while other types of research sites comprised the remaining 5%.

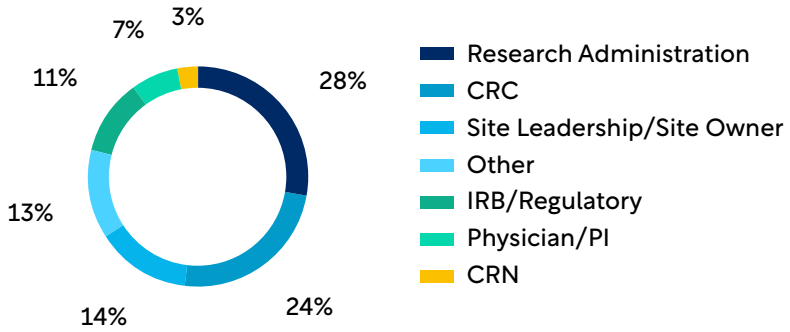
Responses were collected from a wide range of professionals working in clinical research sites, representing various roles and levels within their organizations. The respondents were diverse, with 28% working in research administration, 27% Clinical Research Coordinators/Clinical Research Nurses (CRCs/CRNs), and 14% in site leadership positions. Additionally, 11% of respondents handled IRB and regulatory matters, 7% were Principal Investigators (PIs), and the remaining 13% were in other job types.

The survey respondents were geographically diverse, representing multiple regions around the world. 80% of the survey respondents were in the United States, while the other respondents were distributed across major regions, including 3% in Mexico and Canada, 10% in Latin America, 4% in Europe, Middle East, and Africa, and 3% in Asia-Pacific.

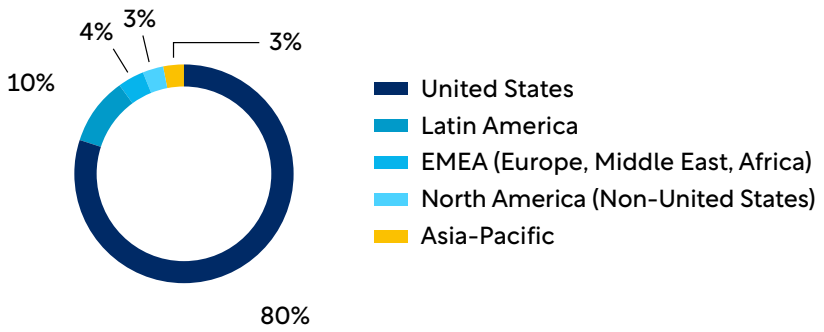
## What type of research site do you represent?




## What is your role at your research site?




## What region is your site based in?



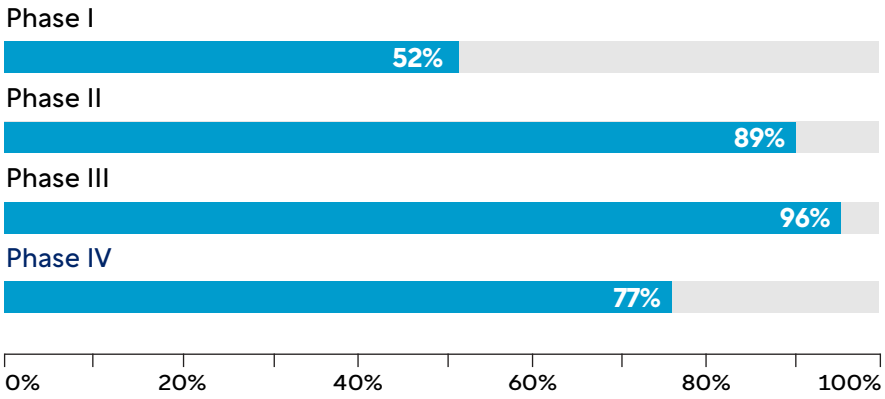


All sites that responded to the 2025 Site Challenges Survey are actively engaged in clinical trials across all Phases. While over half (52%) of sites surveyed support early-stage Phase I studies, most sites support Phase II and III studies, coming in at 89% and 96%, respectively. Furthermore, more than three-quarters (77%) of sites are involved in conducting Phase IV studies.

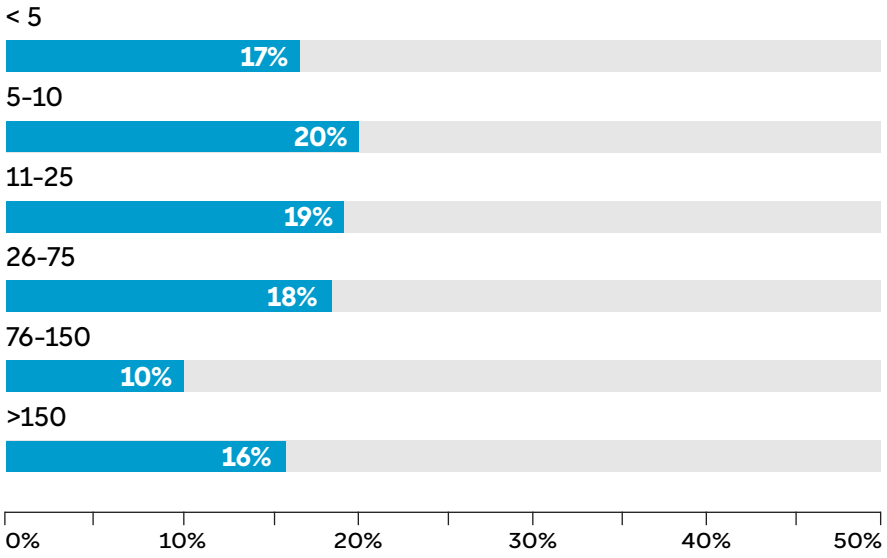
Survey respondents provided data on the number of open and enrolling trials, as well as therapeutic areas, currently at their site(s). Seventeen percent had fewer than five open and enrolling trials, while 20% had 5-10 trials. Another 19% of sites were managing a moderate-sized portfolio, with 11-25 trials. Eighteen percent of sites had a larger portfolio of 26-75 trials, and a portion of the sites surveyed had even more, with 10% having 76-150 trials and 16% having more than 150 trials.

The top three therapeutic areas were hematology/oncology, cardiovascular, and endocrinology. Other notable top therapeutic areas in which surveyed sites conducted trials included gastroenterology, respiratory, and infectious disease.

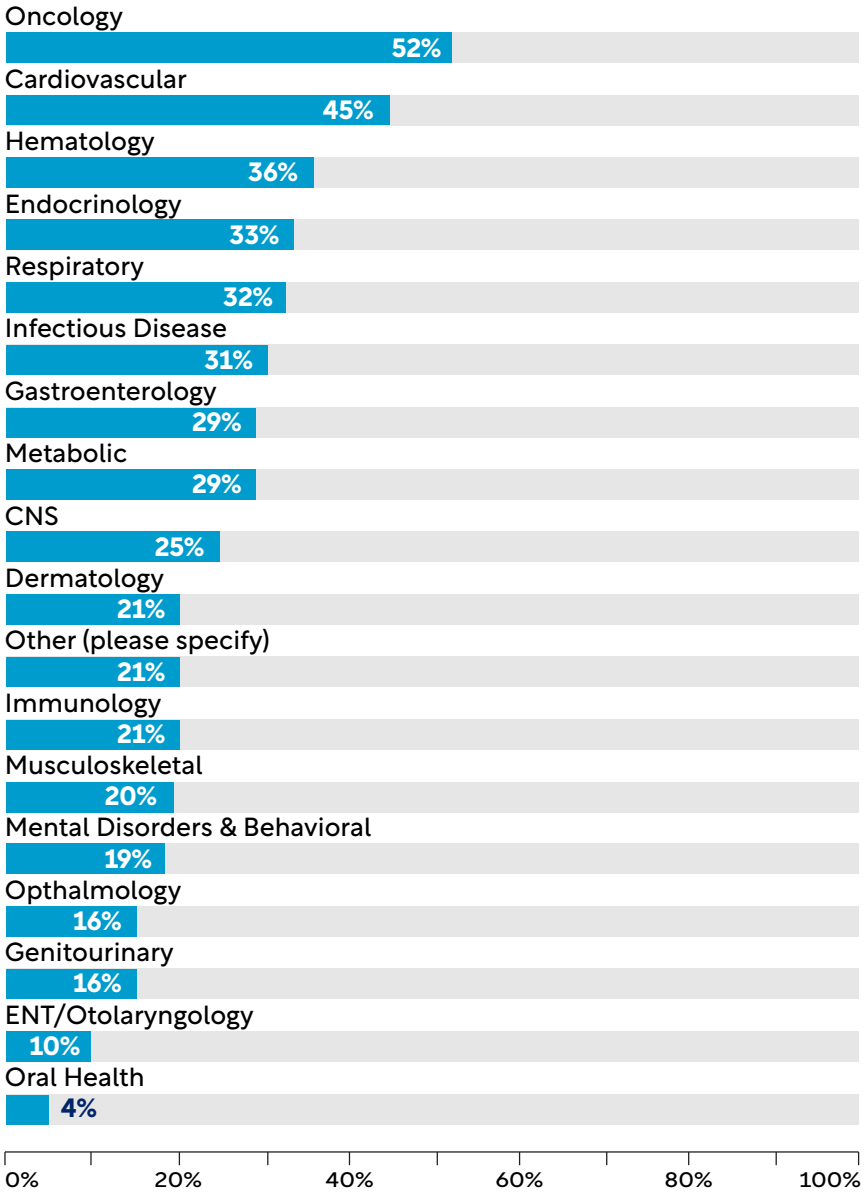
## What study phases does your site support? (Please check all that apply)




## Please select the current number of open and enrolling trials at your site:




## What therapeutic areas did your site conduct trials in over the last year? (Please select all that apply)



SECTION 2

# The Top Challenges Clinical Research Sites are Facing in 2025

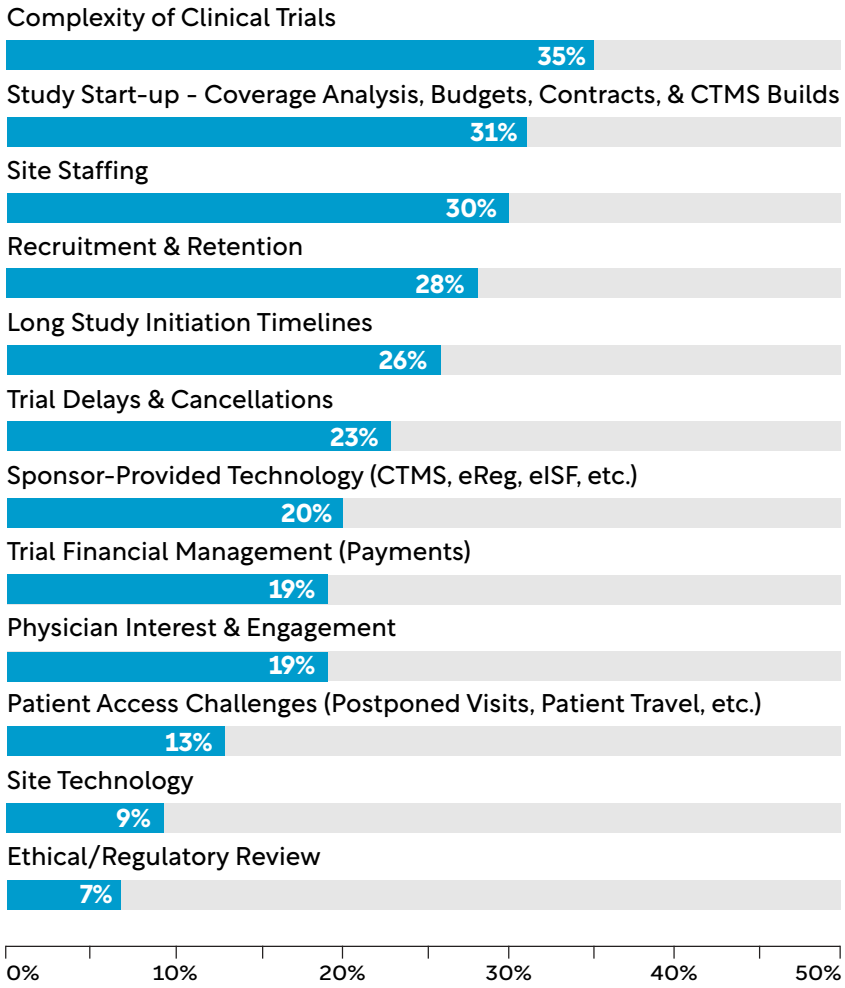
Clinical research sites of all sizes continue to encounter a variety of challenges, with the following four challenges emerging as the most widespread:

1. **Complexity of Clinical Trials (35%):** The complexity of clinical trials continues to be the leading challenge faced by sites, maintaining the top position from 2024 into 2025. In 2025, 35% of sites identified this as their primary challenge, compared to 38% in 2024. Some contributing factors of this persistent challenge may include increasingly complex protocol designs, a higher number of endpoints, stringent inclusion/exclusion criteria, burdensome technology requirements, frequent protocol amendments, and more. Growing clinical trial complexity is a nuanced challenge, and one we will explore in greater detail later in this report.

2. **Study Start-up (31%):** Study start-up has remained a consistent top challenge for research sites, with 31% of sites citing it as a top issue in 2025, compared to 35% in 2024. Sites of all sizes continue to struggle with study start-up processes, such as coverage analysis, budgets, and contracts, as these are often the largest drivers of delays during start-up and require highly specialized skills to complete. Streamlining these study start-up processes while working to improve negotiations and communication between sites, sponsors, and CROs is essential to addressing start-up delays.

**2025** ALL SITE DATA

What are the top issues impacting your research site today? (Please select your top three)

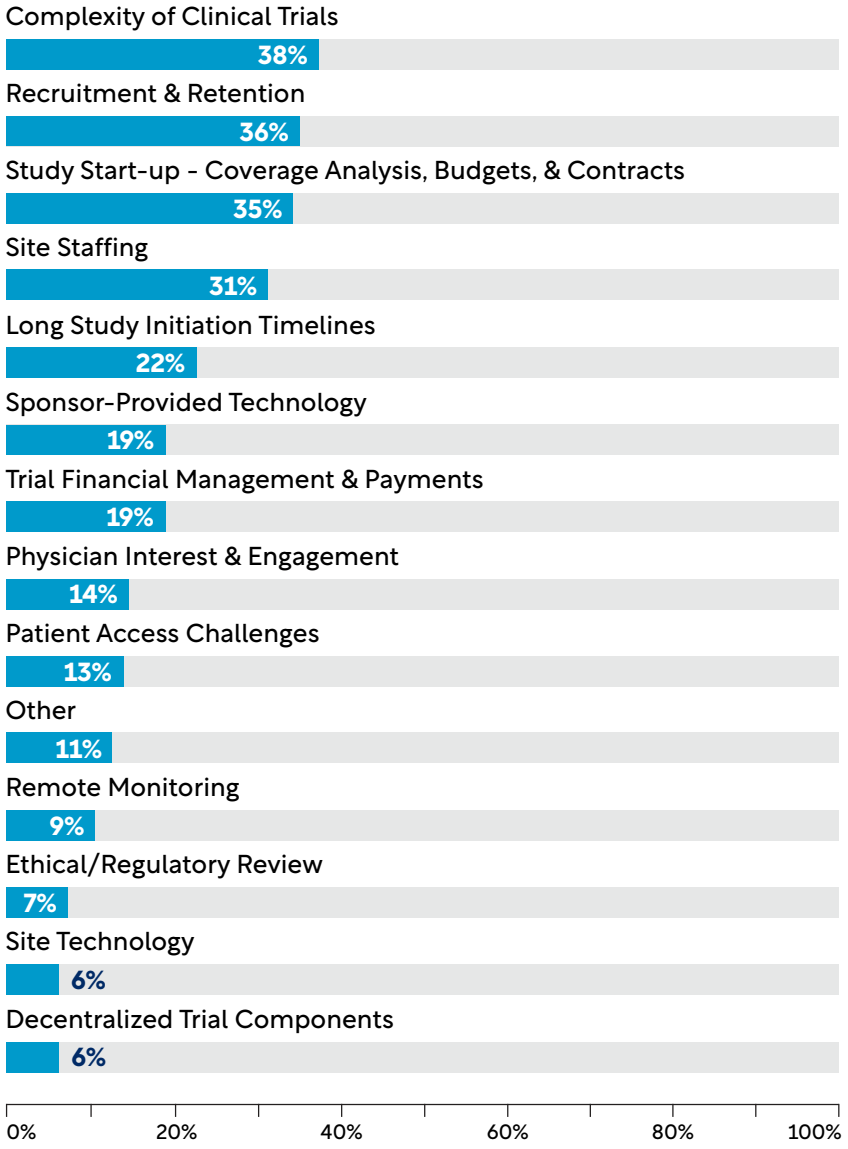


3. **Site Staffing (30%):** Site staffing continues to be a top challenge for clinical research sites, with 30% of sites identifying site staffing as one of their top concerns, a figure nearly unchanged from 31% in 2024. This trend underscores the persistent difficulties research sites face in recruiting, training, and retaining qualified personnel amid increasing trial complexity and competition for skilled staff. Addressing site staffing challenges with innovative and sustainable solutions is essential to support site teams, as adequate staffing directly impacts trial timelines, data quality, and the successful advancement of clinical research.

4. **Recruitment and Retention (28%):** Recruitment and retention continue to be major challenges for clinical research sites, with 28% of sites saying it is one of their top challenges, compared to 36% in 2024. This is an 8% improvement from 2024; however, recruitment and retention remain critical challenges for many sites, highlighting the need for more effective strategies to attract, enroll, and retain participants. Sponsors and CROs can play a crucial role in helping sites combat these challenges by providing targeted resources, tools, and expertise to drive enrollment success. Solutions such as centralized participant outreach campaigns, access to additional technology and resources, and enhanced training for site staff can further empower sites in overcoming recruitment and retention challenges.

## **2024** ALL SITE DATA

What are the top issues impacting your research site today? (Please select your top three)



## Top Challenges by Site Type: Larger vs. Smaller Sites

Clinical research sites differ widely in size, structure, and operational complexity, all of which can greatly impact the kinds of challenges they face. The survey data highlights clear distinctions between the primary challenges reported by larger sites, such as academic medical centers, health systems, community hospitals, and site networks, and those encountered by smaller sites, including independent sites and physician practices. Understanding these differences is essential, as it can empower sponsors and CROs to design more targeted site support strategies and tailor their resources to the specific needs of different sites.

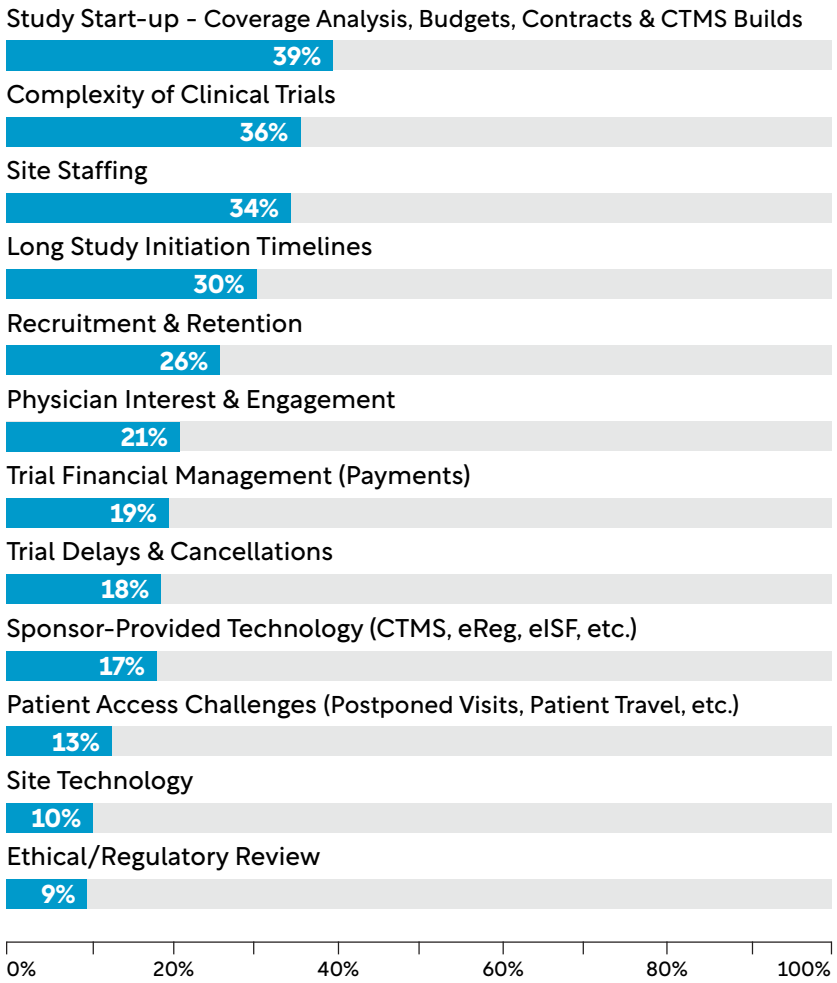
## Top Challenges Faced by Academic Medical Centers, Health Systems, Community Hospitals, and Site Networks

Larger sites, including academic medical centers, health systems, community hospitals, and site networks, face a distinct set of challenges compared to their smaller site counterparts, with study start-up, complexity of clinical trials, site staffing, and long study initiation timelines being their top concerns.

Study start-up was cited as the top challenge by 39% of larger sites, compared to only 18% of smaller sites, likely due to larger research sites often having to coordinate among more stakeholders and departments, a lack of centralization of research administration services, and complex regulatory requirements. Additionally, 36% of larger sites say that the

ACADEMIC MEDICAL CENTER, HEALTH SYSTEM, COMMUNITY HOSPITAL & SITE NETWORK DATA

What are the top issues impacting your research site today? (Please select your top three)



complexity of clinical trials is a top challenge, likely due to their larger number of open trials and involvement in more complex therapeutic areas like oncology, with 67% of larger sites being involved in oncology trials compared to only 24% of smaller sites. Furthermore, 34% of larger sites identify site staffing as a primary challenge, reflecting the complexities of overseeing a larger, specialized workforce within more bureaucratic organizational structures. In contrast, smaller sites tend to have fewer staff members, which can result in different staffing dynamics and challenges.

Larger sites may also struggle with staffing due to the unpredictability of trial pipelines and funding, making it difficult to accurately forecast staffing needs and resulting in periodic under- or over-staffing. Additionally, 30% of larger sites report long study initiation timelines as a top challenge for them.

Similar to challenges faced during study start-up, larger sites may face longer study initiation timelines compared to smaller sites due to their more complex organizational structures and administrative processes that can slow down approvals, negotiations, and resource allocation.

## Top Challenges Faced by Independent Sites and Physician Practices

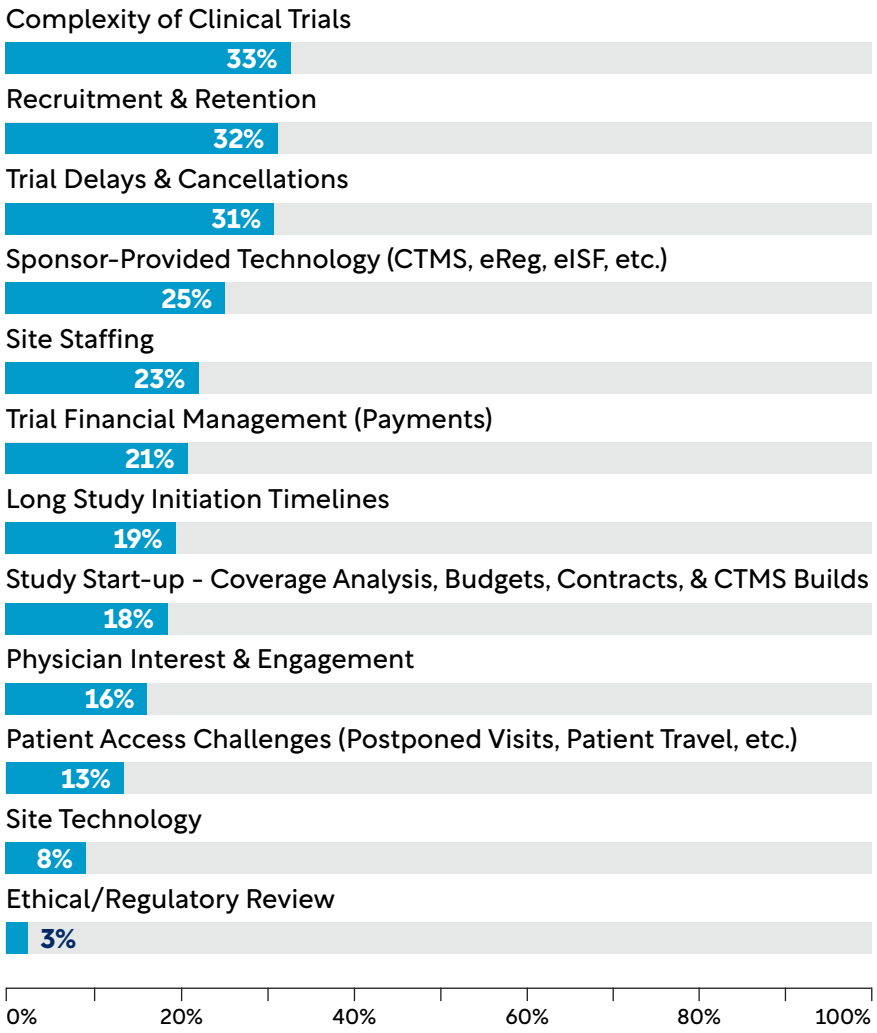
Smaller sites, including independent sites and physician practices, face a unique set of challenges in comparison to their larger site counterparts, with the complexity of clinical trials, recruitment and retention, trial delays and cancellations, and sponsor-provided technologies being their top concerns.

When it comes to the complexity of clinical trials, 33% of smaller sites said it was a top challenge, which may be due to more limited resources, fewer specialized staff members, and less infrastructure than large sites. Additionally, 32% of smaller sites cited recruitment and retention as a top challenge, which can stem from having more limited resources, less brand recognition, and smaller patient databases compared to larger sites.

Trial delays and cancellations were identified as one of the top challenges by 31% of smaller sites, in comparison to only 18% of larger sites. This worrying trend underscores the disproportionate impact that trial delays and cancellations can have on smaller sites.

Difficulties with sponsor-provided technologies were reported by 25% of smaller sites, compared to only 17% of larger sites. This disparity suggests that smaller sites may require more support and training from sponsors and CROs to more effectively utilize the sponsor-required technologies.

### What are the top issues impacting your research site today? (Please select your top three)



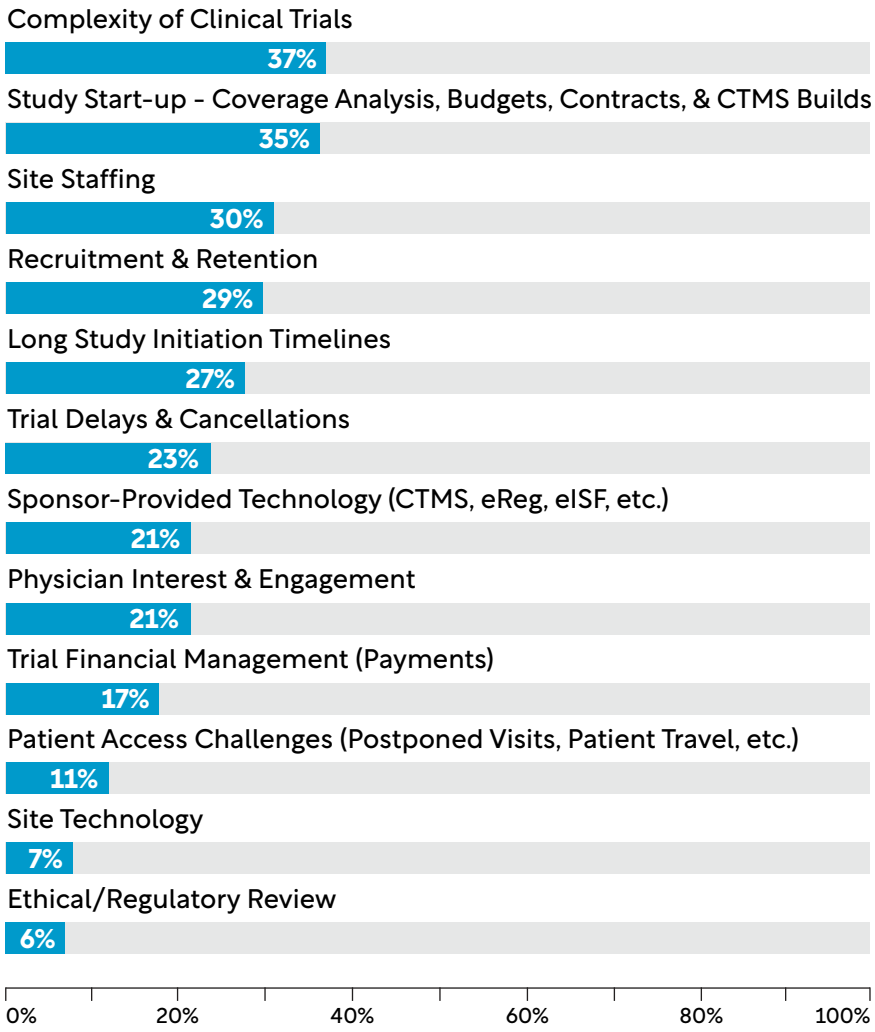
## Top Challenges of US-Sites Compared to Ex-US Sites

While there are many similarities between the top challenges faced by clinical research sites in the U.S. and those outside of the U.S., there are some notable differences. U.S.-based sites reported the complexity of clinical trials (37%), study start-up (35%), and site staffing (30%) as their top challenges. In contrast, ex-U.S. sites ranked trial financial management and payments as their top challenge (30%), followed by the complexity of clinical trials (26%), and site staffing (26%). Notably, study start-up was cited by significantly fewer ex-U.S. sites (17%) as a top challenge.

Ex-U.S. sites can sometimes face greater challenges in receiving payments for their clinical trial work due to factors such as varying international regulations, complex cross-border financial processes, and differences in contractual standards, which can result in delayed or complicated payment flows compared to their U.S. counterparts. Addressing these payment barriers is essential to ensure global sites remain engaged and motivated.

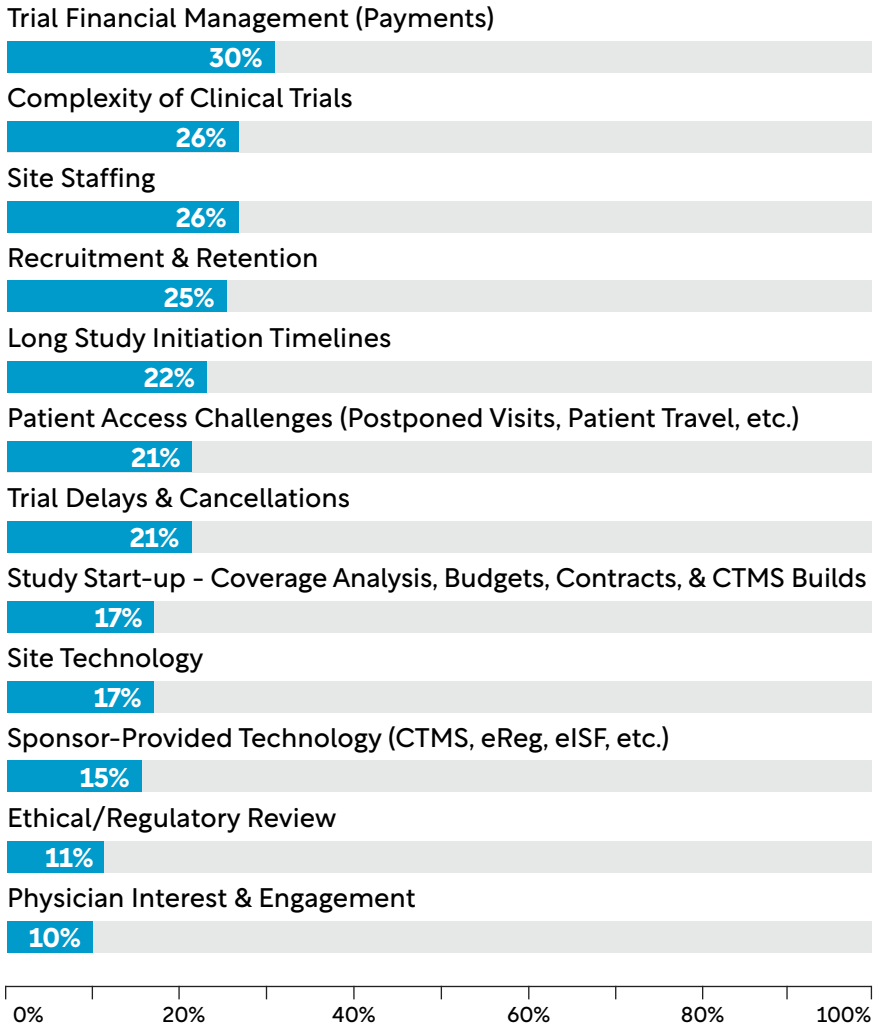
## US SITE DATA

### What are the top issues impacting your research site today? (Please select your top three)




## EX-US SITE DATA

### What are the top issues impacting your research site today? (Please select your top three)



SECTION 3

# Exploring the Causes Behind the Increasing Complexity of Clinical Trials

The complexity of clinical trials continues to be the number one challenge for research sites as shown by the latest survey results. If left unaddressed, this persistent issue could significantly impact sites, sponsors, CROs, and the overall efficiency of clinical research. Therefore, it is crucial to closely examine the key factors that research sites identify as driving this complexity.

As the clinical research landscape has evolved in recent years, sites have taken on greater responsibilities amidst increasing trial complexity. While they have shown remarkable adaptability in responding to shifting demands, additional support is necessary to ensure their continued success. To enable sites to meet expectations while maintaining the highest standards of quality and safety, a high degree of collaboration will be needed between sites, sponsors, and CROs, matched with more investments in better protocol designs, support, and resources for sites, training, and infrastructure.

*As the clinical research landscape has evolved in recent years, sites have taken on greater responsibilities amidst increasing trial complexity.*

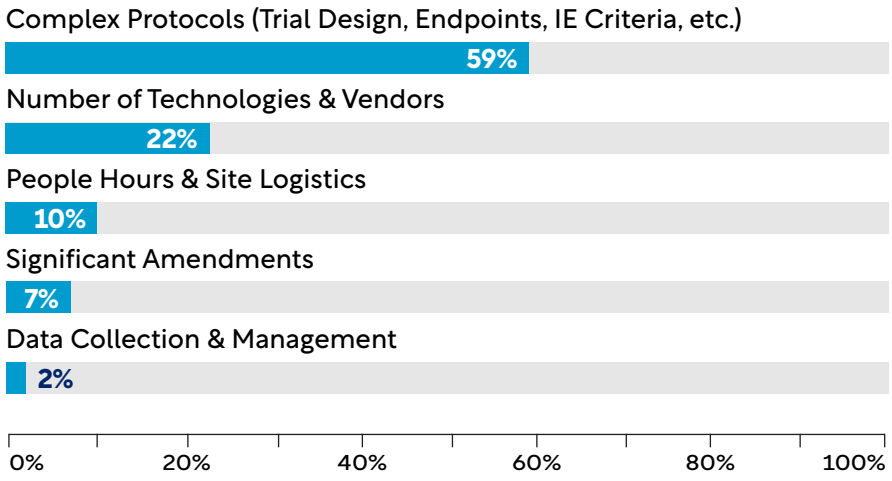
## What Do Sites Feel is Driving Complexity?

There are many factors driving the increasing complexity of clinical trials, including more intricate study protocols, a steady rise in amendments and endpoints, increased demands for data collection, and the rapidly evolving technological landscape. To gain deeper insight into the factors that sites perceive as driving clinical trial complexity, we asked respondents to rank five key contributors based on their perceived impact on overall trial complexity.

Overwhelmingly, sites said that complex protocols (i.e., trial design, endpoints, inclusion/exclusion criteria, etc.) are the largest driver of complexity in clinical trials, with 59% of sites ranking it as number one. Complex protocols often require more extensive training, frequent amendments, and heightened administrative burden, all of which can contribute to confusion, delays, and increased workload for sites. Moreover, complicated trial designs may demand specialized equipment and additional visits, while more endpoints increase data collection needs, further straining site resources and directly impacting operational efficiency. Additionally, stringent inclusion/exclusion criteria can have a direct impact on participant recruitment, making it more challenging and slowing enrollment timelines.

The number of technologies and vendors required for their clinical trials was recognized as the greatest driver of complexity by 22% of sites. This highlights the growing need for more streamlined, integrated technology solutions and vendor management strategies that can reduce operational burdens, improve efficiency and collaboration, and enable research sites to focus on delivering high-quality patient care.

Which of the following factors contributes the most to complexity in your clinical trials?




Personnel hours and site logistics were identified by 10% of clinical trial sites as their primary sources of trial complexity. Meanwhile, 7% pointed to significant protocol amendments as their main challenge, and 2% cited data collection and management as the predominant factor contributing to increasing trial complexity.

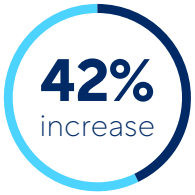
## Endpoints, Amendments, and Protocol Complexity

According to the Tufts Center for the Study of Drug Development in their May/June 2023 Impact Report, the mean number of protocol deviations and substantial amendments has increased across all clinical trial phases since 2015[1]. This trend is particularly pronounced in Phase III trials, which have seen a 42% increase in required procedures, a 37% increase in average planned study visits per participant, and a 37% increase in the number of endpoints since 2015[1].

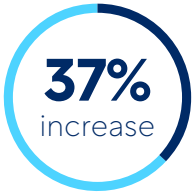
This continued complexity is taking a toll on sites, which are struggling to manage the added burdens of more intricate trials. In fact, 47% of sites surveyed in the Tufts Center for the Study of Drug Development January/February 2023 Impact Report cited "simplifying protocol complexity" as a top area for sponsors to address when it comes to their site's operating viability[2]. Additionally, 46% of sites surveyed said they want sponsors to solicit site input on study design and implementation[2].

## Technology Demands: Examining the Escalating Burden on Sites

The persistent technology burden facing sites has continued throughout 2025 and will likely continue. According to the WCG 2025 Site Challenges Survey, 22% of sites report that the number of technologies and vendors required for their trials is the greatest driver of clinical trial complexity. Additionally, results from the SCRS 2024 Site Landscape Survey showed that 55% of sites say the biggest challenge when participating in technology-enabled trials is supporting a variety of technologies, leading to operational inefficiencies and added complexity[3]. Furthermore, 67% of sites said stronger budgets are their most pressing need for managing technology-enabled trials, along with 55% saying they need more effective technical support, and 53% saying they need more integrated and consistent technology[3].




in procedures required in phase III trials since 2015.




in number of endpoints in phase III trials since 2015.


site "simplifying protocol complexity" as a top area for sponsors to address when it comes to their site's operating viability.


say "soliciting site input on study design and implementation" is a top area for sponsors to address.

Source: Tufts Center for the Study of Drug Development [1,2]

*Technology providers, in turn, should focus on developing user-friendly, integrated, and interoperable systems, particularly those that interface with the platforms sites use most frequently.*



## What Support Sites Want & Need for Technology-Enabled Trials:

**67%** Stronger & more robust budgets.

**55%** More effective site technical support.

**53%** Integrated & consistent technology.

Source: SCRS 2024 Landscape Survey[3]

To reduce the technology-related burdens faced by sites, the industry should prioritize enhanced collaboration between sponsors, CROs, and sites, while supporting the standardization and simplification of technology solutions. Additionally, sponsors and CROs can better understand site-specific needs by proactively engaging with sites when implementing new technology solutions and offering comprehensive support and training for required platforms.

Technology providers, in turn, should focus on developing user-friendly, integrated, and interoperable systems, particularly those that interface with the platforms sites use most frequently. These approaches can significantly reduce administrative burdens and duplicate data entry, empowering sites to deliver high-quality research more efficiently.

SECTION 4

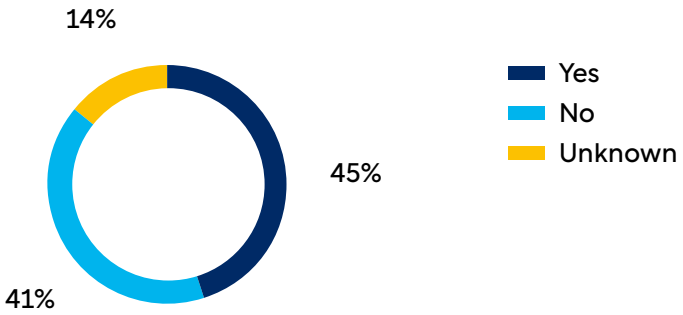
# Impacts on New Study Participation, Trial Opportunities, and Physician Availability

The top challenges faced by clinical research sites are continuing to have an impact on a clinical trial sites' ability to participate in new studies. Survey results show that nearly half (45%) of sites reported that these challenges are restricting their capacity to agree to participate in new studies.

When comparing the results of this question between large and small sites, 49% of larger sites say these challenges are impacting their ability to participate in new studies, while only 39% of smaller sites say the same. Additionally, when comparing U.S. site data and Ex-U.S. site data, 48% of U.S. sites say their top challenges are impacting their ability to participate in new studies, while only 34% of Ex-U.S. sites say the same. These findings highlight the significant differences smaller sites and Ex-U.S. sites are seeing compared to larger sites and sites within the U.S.

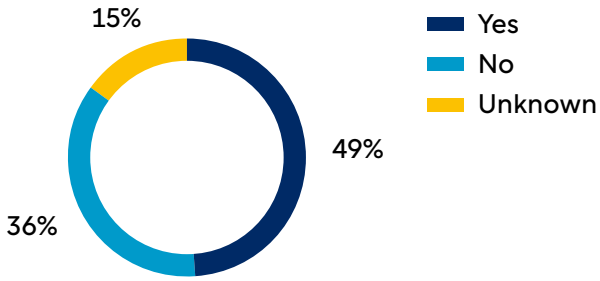
## ALL SITE DATA

### Are these challenges impacting your site's ability to participate in new studies?



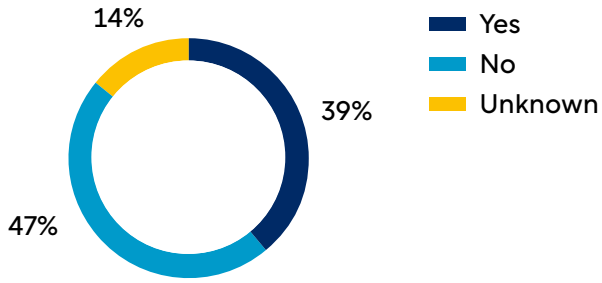

## ACADEMIC MEDICAL CENTER, HEALTH SYSTEM, COMMUNITY HOSPITAL & SITE NETWORK DATA

### Are these challenges impacting your site's ability to participate in new studies?



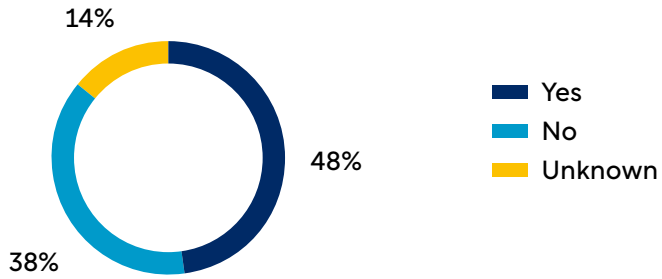

## INDEPENDENT SITE & PHYSICIAN PRACTICE DATA

### Are these challenges impacting your site's ability to participate in new studies?

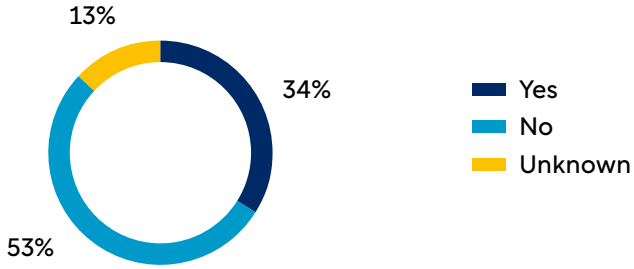


## Are these challenges impacting your site's ability to participate in new studies?

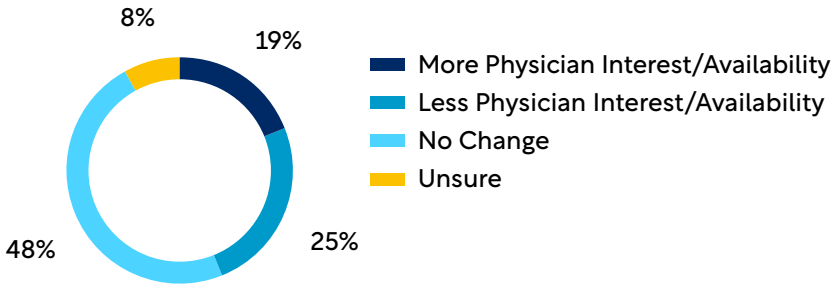
### US SITE DATA




### EX-US SITE DATA




## Over the last year, has your site experienced changes in physician availability or interest in serving as Principal Investigators (PIs)?

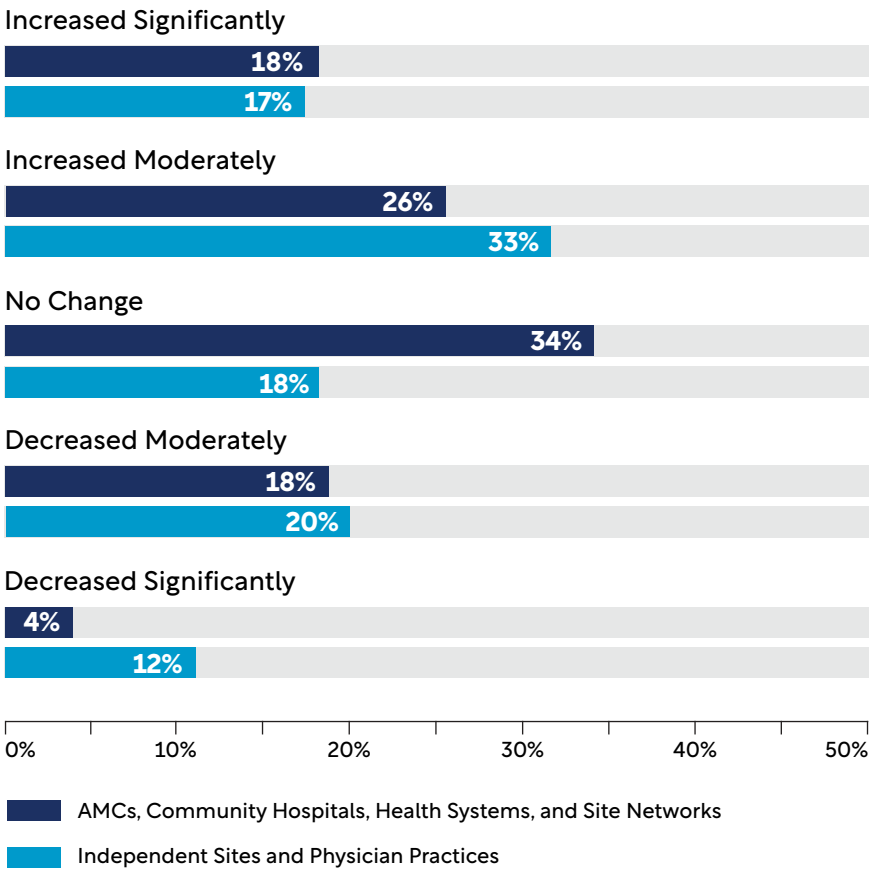



Survey respondents were also asked to share how the number of clinical trial opportunities that have been offered to their site has changed over the last year. This included 28% of sites responding that the number of trial opportunities offered to their site has increased moderately, while 19% said they have decreased moderately. Additionally, when comparing larger and smaller sites, larger sites were more likely to respond that there hadn't been a significant change, in contrast to smaller sites, who reported their opportunities had increased more in the last year. Furthermore, Ex-U.S. sites overwhelmingly responded that the number of clinical trial opportunities offered to them in the last year had increased either moderately or significantly, in comparison to U.S. sites, who mostly saw no change or moderate increases/decreases.

In addition to asking survey respondents about new study participation and study opportunities, we also asked them to share if their site has experienced changes in physician availability or interest in serving as Principal Investigators (PIs). Nearly 48% of sites responded that there had been no change, while 19% responded that they have more physicians interested or available to conduct clinical trials, and 25% responded that they have fewer physicians interested or available to conduct clinical trials.

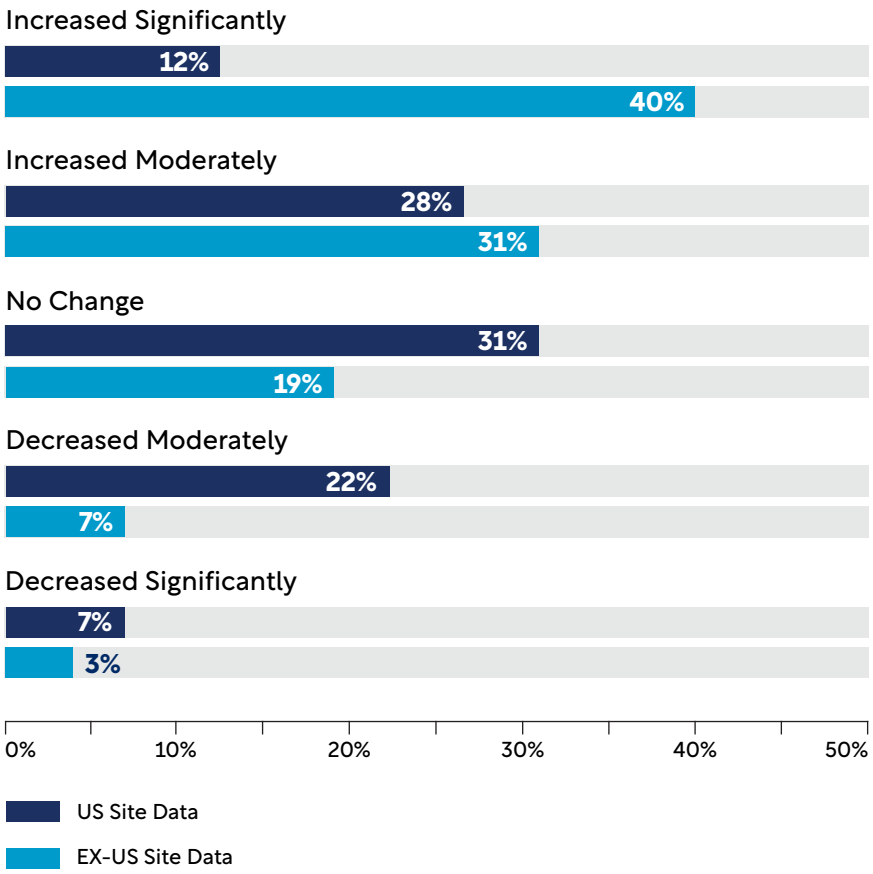
## LARGE VS. SMALL SITE DATA

During the last year, how has the number of clinical trial opportunities offered to your site changed?




## US VS. EX-US SITE DATA

During the last year, how has the number of clinical trial opportunities offered to your site changed?



SECTION 5

# Clinical Trial Funding Cuts, Pauses, and Cancellations

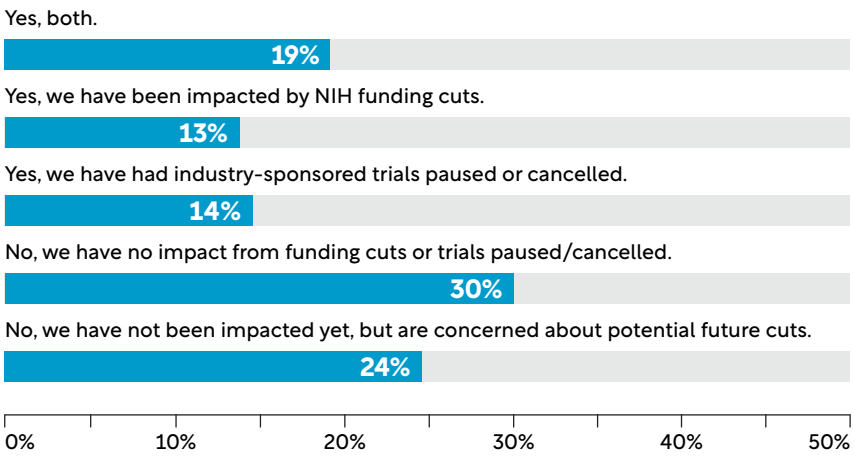
2025 has been a turbulent year for clinical research, with many sites facing new challenges due to a significant number of funding cuts, including National Institutes of Health (NIH) cuts, and industry-sponsored trial pauses and cancellations. Additionally, economic uncertainty and constrained budgets have led many sponsors, CROs, and sites to re-evaluate their pipelines. This challenging environment underscores the importance of and need for strategic collaboration across the industry and resource optimization to continue the advancement of clinical research.

To gain a better understanding of how sites have been impacted by NIH funding cuts or industry-sponsored trial pauses/cancellations, we asked our survey respondents to share more about what they are seeing at their sites. Results show that 19% of sites reported being impacted by both NIH cuts and industry-sponsored trial pauses/cancellations, while 13% reported being impacted only by NIH cuts, and 14% reported being impacted by only industry-sponsored trial pauses/cancellations. While 30% of sites reported not being impacted by NIH cuts or industry-sponsored trial pauses/cancellations, and 24% reported they haven't yet been impacted but are concerned about potential future cuts.

When comparing the differences between large and small sites, we see a significant difference in responses to this question. Both NIH cuts and industry-sponsored trial pauses/cancellations have impacted 24% of larger sites, in comparison to only 9% of smaller sites. Additionally, only 22% of larger sites responded that they hadn't been impacted by either NIH cuts or industry-sponsored trial pauses/cancellations, in comparison to 45% of smaller sites. This discrepancy could largely be attributed to the number of NIH-funded trials that typically occur at larger Academic Medical Centers and Health Systems in comparison to independent sites and physician practices, but it is a concerning trend, nonetheless.

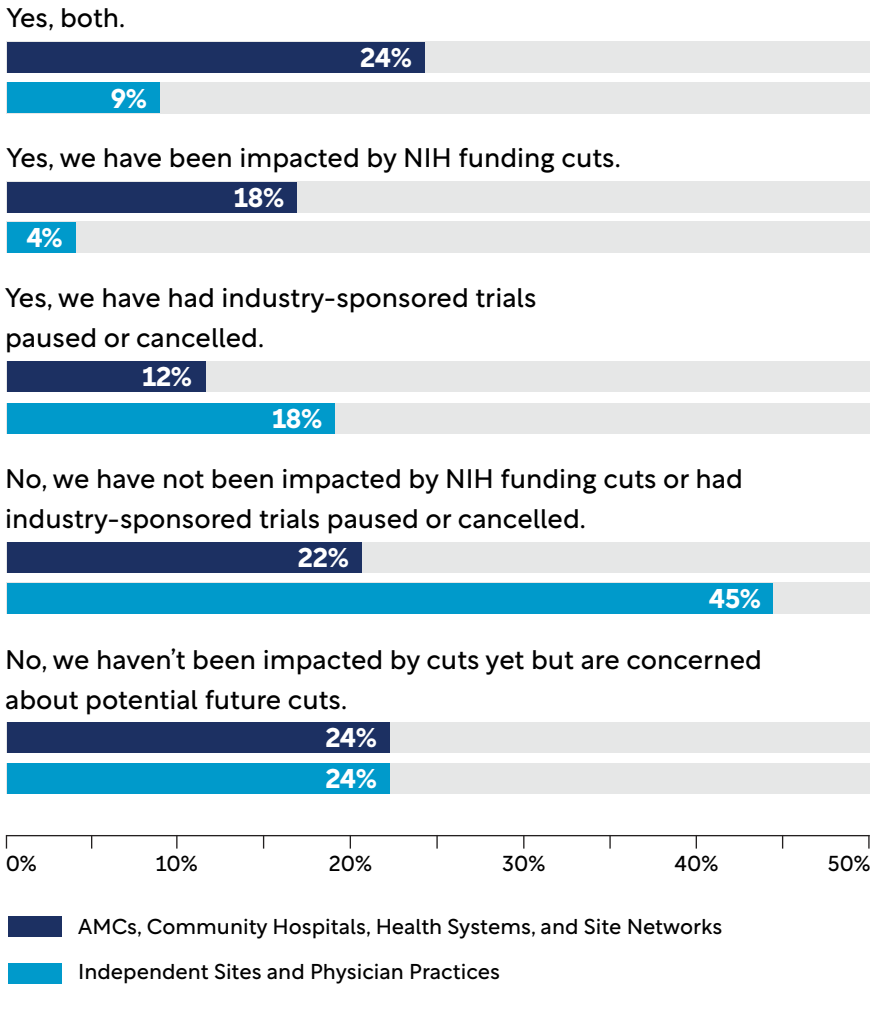
## ALL SITE DATA

### Over the last year, has your site been impacted by NIH funding cuts or had industry-sponsored trials paused/cancelled?



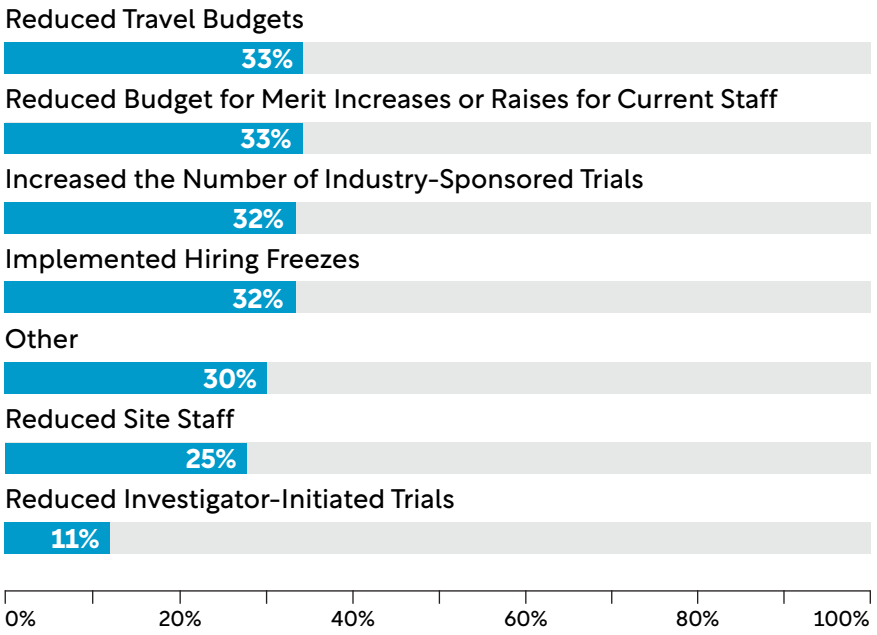

## LARGE VS. SMALL SITE DATA

### Over the last year, has your site been impacted by NIH funding cuts or had industry-sponsored trials paused/cancelled?





## If your site has been impacted by NIH funding cuts, what has your site done to offset the impact?




Sites that have been impacted by NIH funding cuts or industry-sponsored pauses/cancellations were asked to share what they have been implementing to offset the impact of these cuts. The most common strategies being implemented by sites include reducing travel budgets, reducing budgets for merit increases and raises for current staff, increasing the number of industry-sponsored trials they participate in, implementing hiring freezes, reducing site staff, and more.

SECTION 6

# Site Staffing Trends

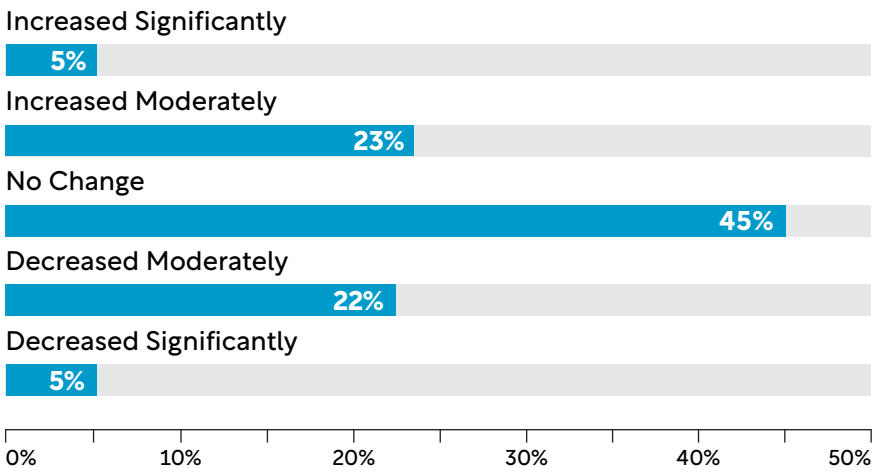
Our survey data suggests a favorable shift in site staffing rates in 2025. Overall, 45% of sites reported no change in their site staffing levels over the last year, indicating a potential improvement in site staff retention.

One trend worth noting is the difference between Ex-U.S. and U.S. site responses, with 44% of Ex-U.S. sites reporting a moderate increase in their site staffing levels over the last year, in comparison to only 18% in U.S. sites.

Many clinical research sites continue to face challenges in sourcing research professionals with the expertise necessary to ensure high-quality and accurate trial outcomes, making comprehensive staff training an ongoing priority. To maintain optimal staffing levels, site leaders may need to increase their focus on employee retention strategies and explore innovative approaches to attract and sustain top talent. In a recent Healthcare Workforce Trend Report, 55% of healthcare employees admitted to looking at switching jobs in the next year, underscoring the critical need for employee retention efforts, long-term career development, and training in order to retain skilled talent[4].

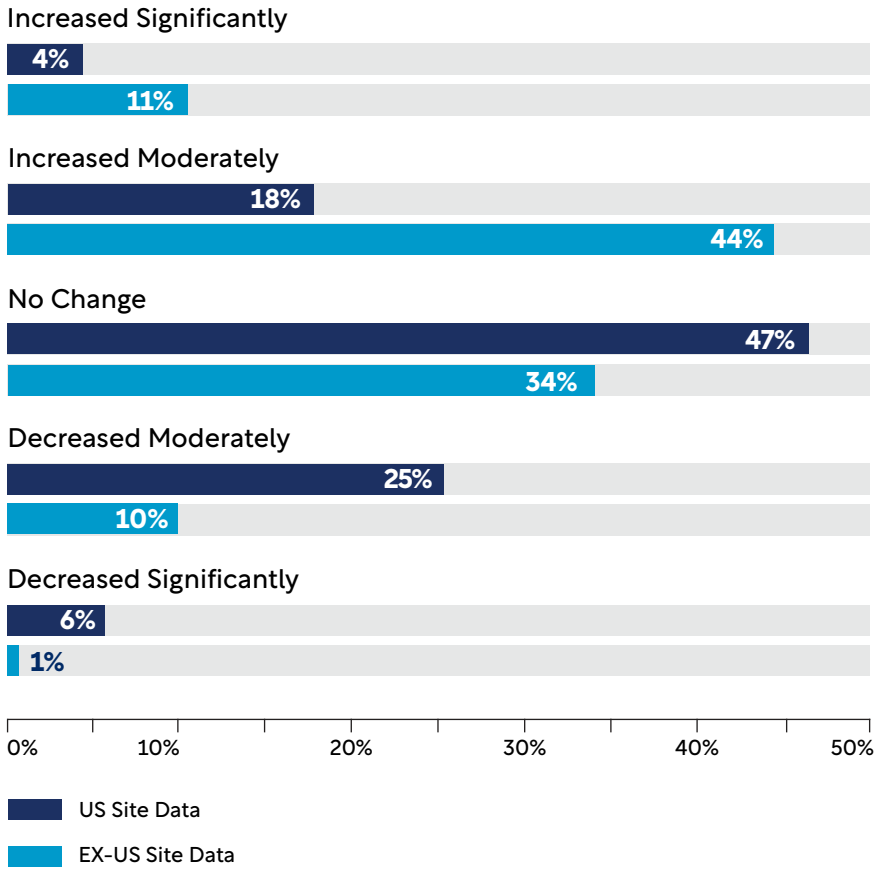
## ALL SITE DATA

### How have your site's staffing levels changed over the last year?




## US VS. EX-US SITE DATA

### How have your site's staffing levels changed over the last year?



SECTION 7

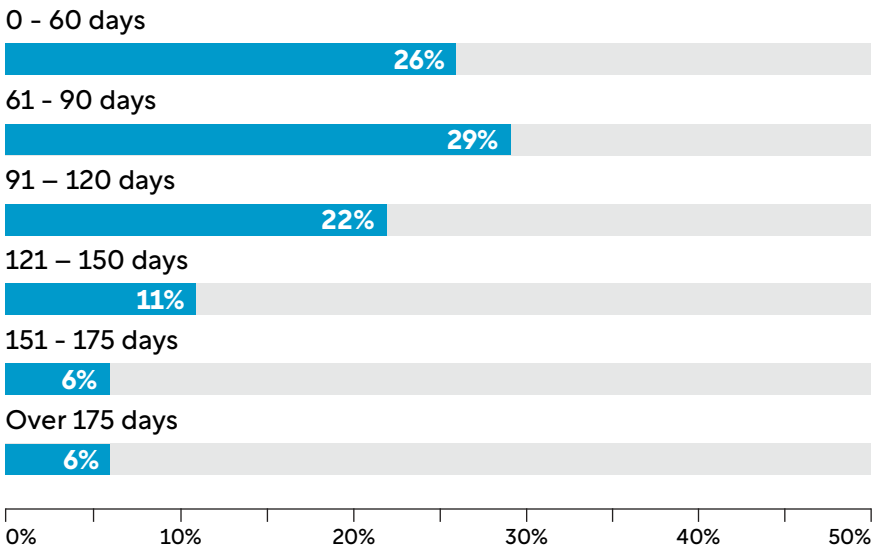
# The Persistent Challenge with Study Start-up

Study start-up continues to be a significant challenge for all stakeholders in the clinical trial industry, and despite advances in technology and processes, it remains a major bottleneck for sites of all sizes, highlighting the need for more efficiency and innovations.

The length of reported study start-up timelines varies significantly across different types of clinical research sites. Notably, independent sites and physician practices tend to have faster start-up timelines, with 54% reporting that they can initiate studies in under 60 days. In contrast, academic medical centers, community hospitals, health systems, and site networks typically face longer timelines, with only 9% saying their study start-up timelines take less than 60 days.

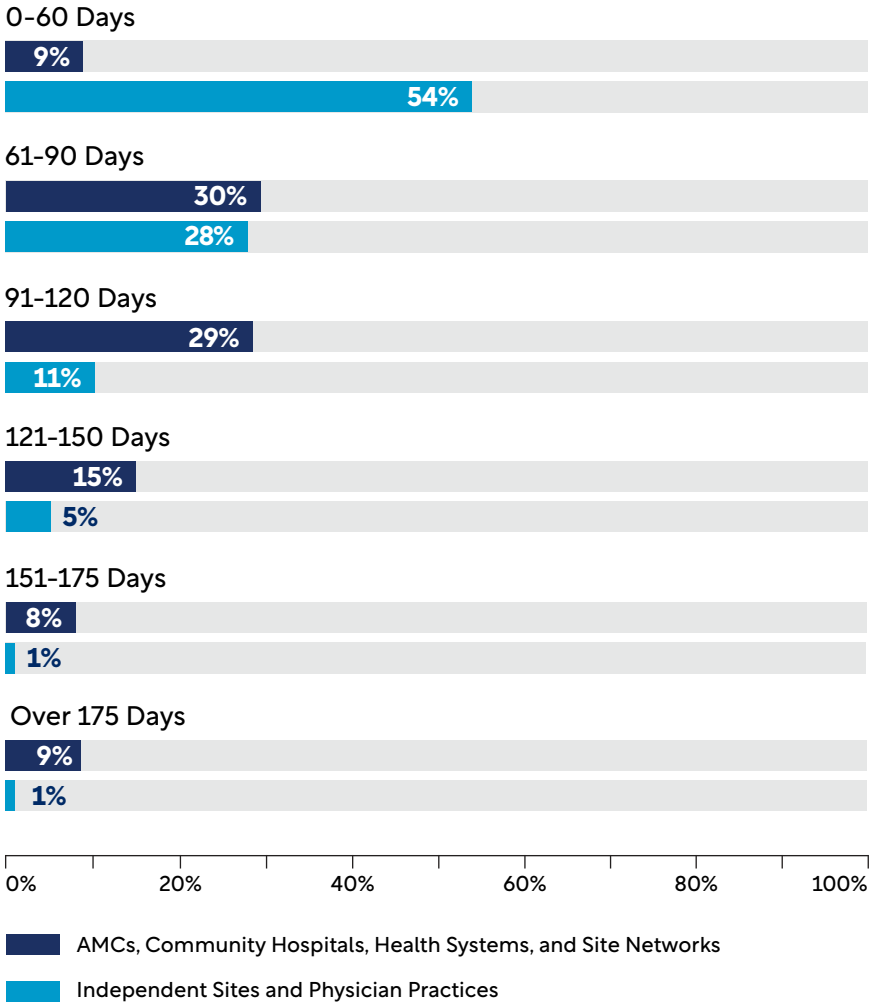
## ALL SITE DATA

### On average, how long did your site's study start-up process take last year?




## LARGE VS. SMALL SITE DATA

### On average, how long did your site's study start-up process take last year?

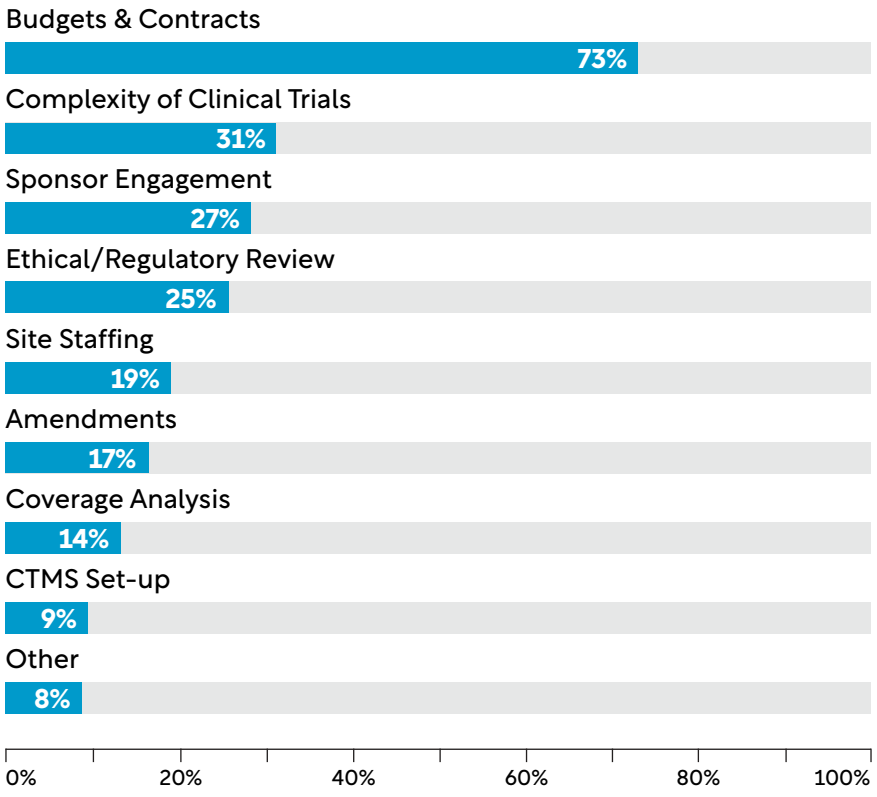




## Examining the Largest Contributors to Site Study Start-Up Timelines

Across all categories of clinical research sites, budgets and contracts emerged as the leading factors contributing to delays in study start-up timelines, impacting 73% of respondents. The complexity of clinical trials and sponsor engagement were the second and third largest contributors to site start-up timelines, coming in at 31% and 27%, respectively.

### What was the largest contributor to your study start-up timelines last year? (Please select your top three)



Notably, 28% of larger sites cited ethical/regulatory review as the third highest contributor to their start-up timelines, in comparison to only 17% of smaller sites. Additionally, over half (51%) of Ex-U.S. sites reported ethical/regulatory review as one of the largest contributors to their start-up timelines.

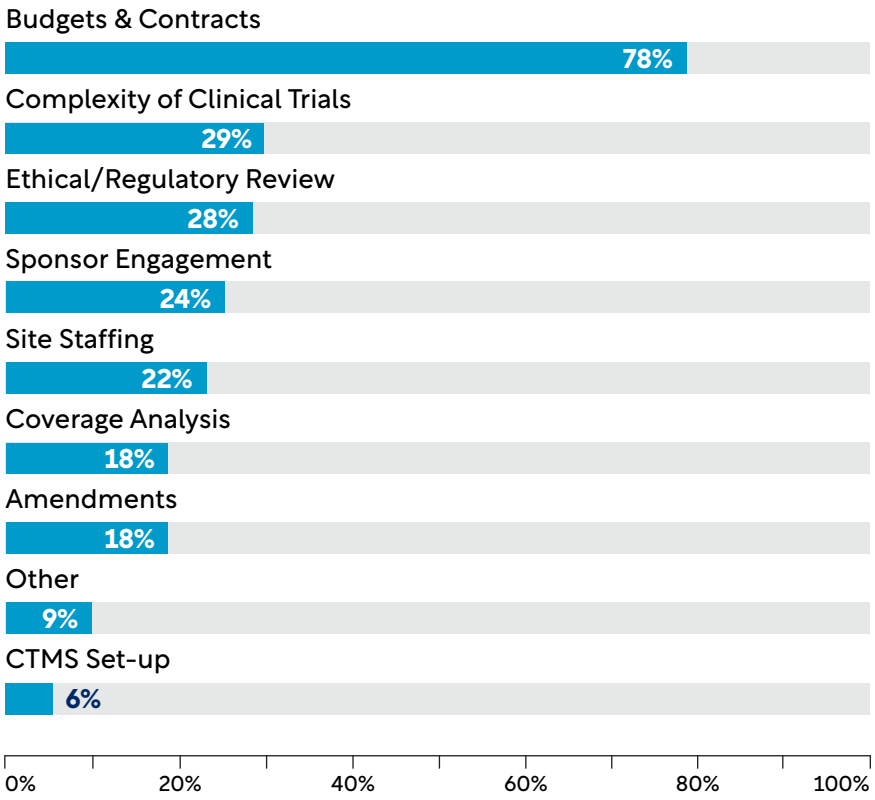
These findings underscore the importance of improving efficiency and communication among sites, sponsors, CROs, and service providers during study start-up.

*Along with the need for improvements in the budgeting and contracting processes, these results showcase how timely ethical and regulatory review, better sponsor/CRO engagement, and effective management of amendments are crucial to ensuring a smooth study launch.*

Addressing these aspects through clear processes and open collaboration can help reduce start-up delays, improve compliance, and enhance study quality for all stakeholders.

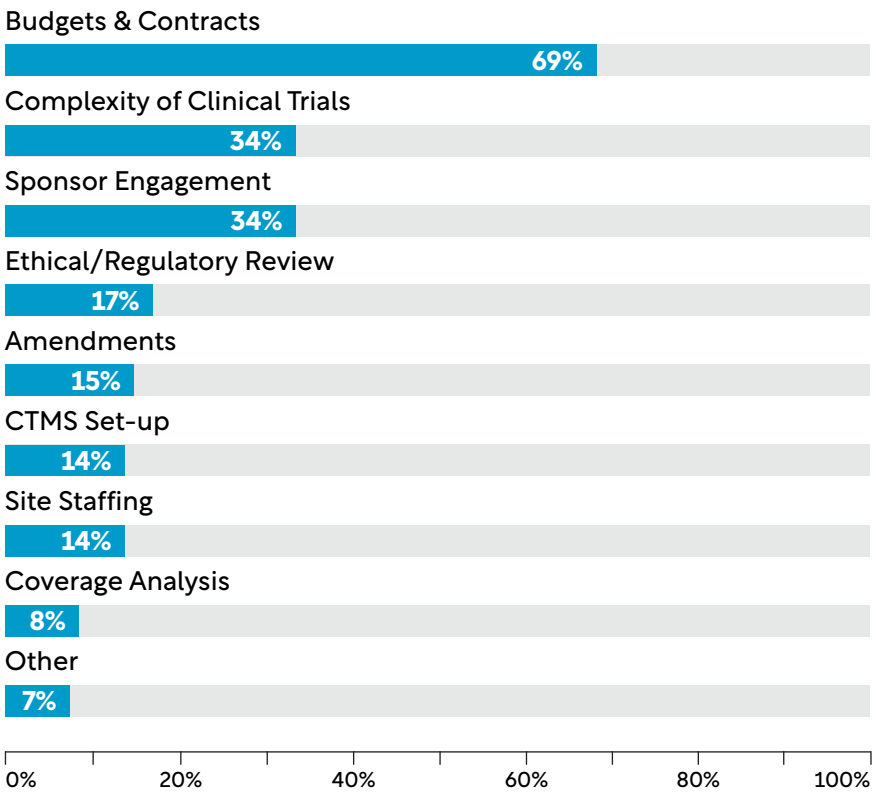
## ACADEMIC MEDICAL CENTER, HEALTH SYSTEM, COMMUNITY HOSPITAL & SITE NETWORK DATA

### What was the largest contributor to your study start-up timelines last year? (Please select your top three)



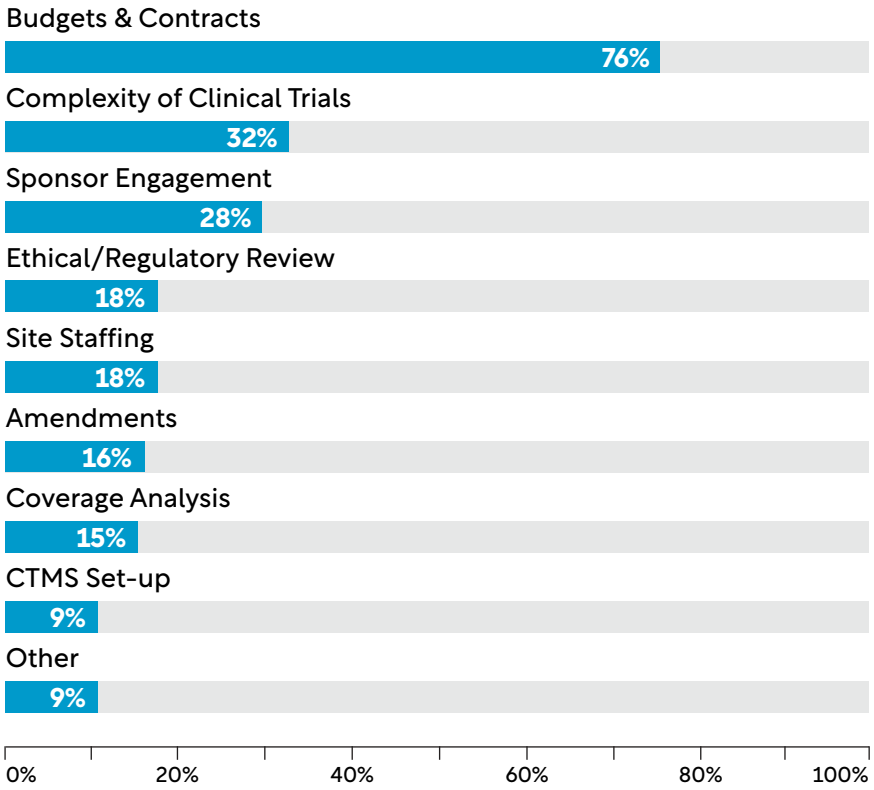

## INDEPENDENT SITE & PHYSICIAN PRACTICE DATA

### What was the largest contributor to your study start-up timelines last year? (Please select your top three)



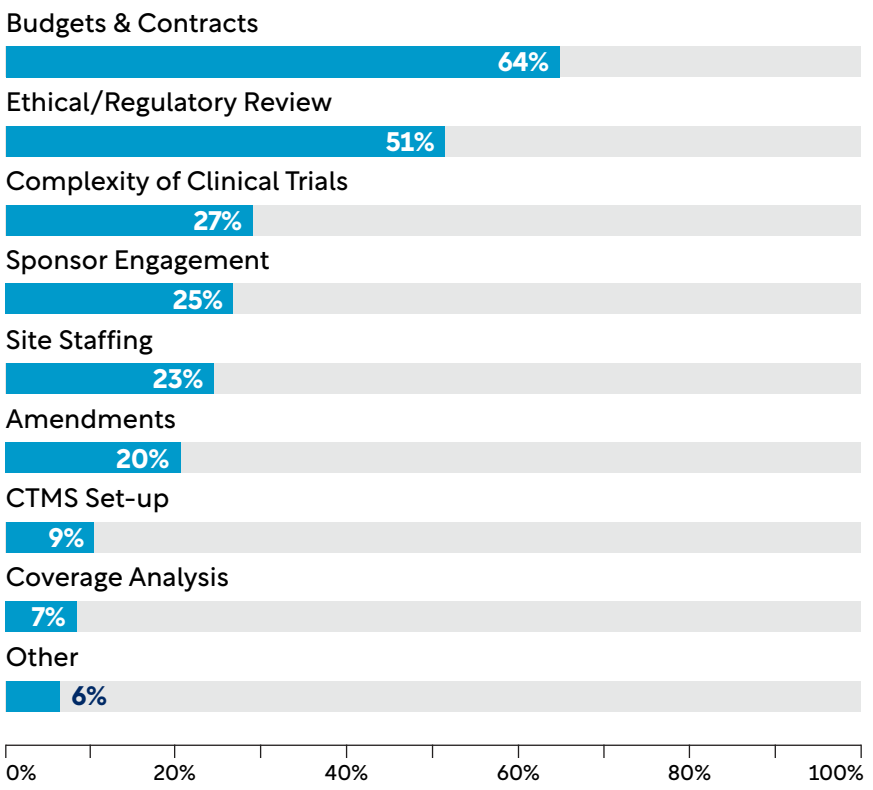
## US SITE DATA

### What was the largest contributor to your study start-up timelines last year? (Please select your top three)




## EX-US SITE DATA

### What was the largest contributor to your study start-up timelines last year? (Please select your top three)



SECTION 8

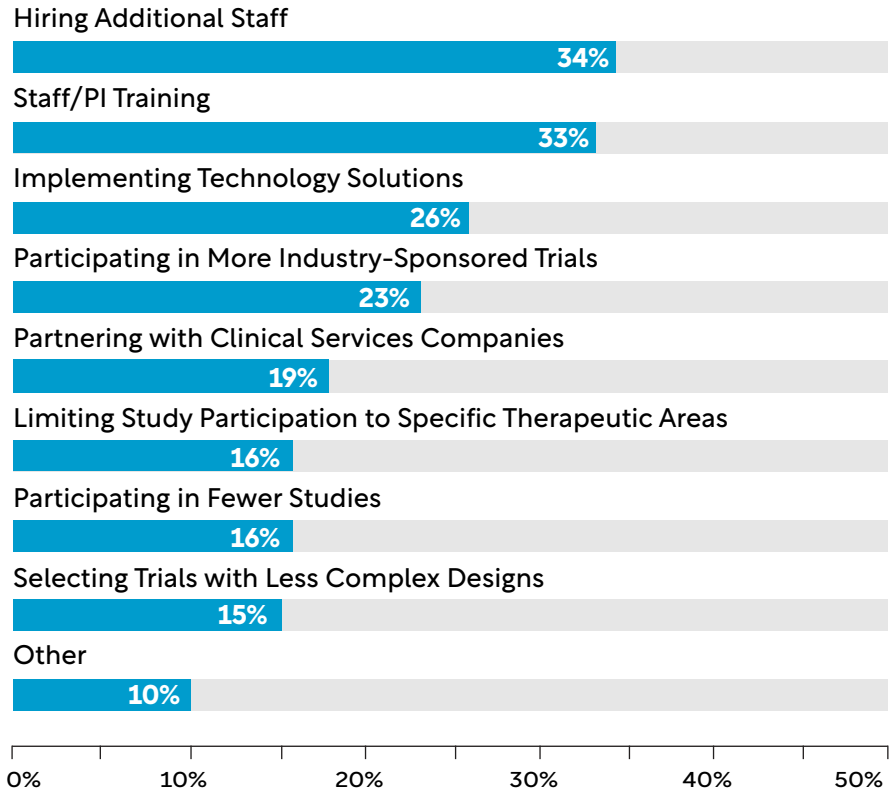
# Solutions Being Implemented by Sites to Combat Challenges

While clinical research sites continue to encounter persistent challenges, many are proactively addressing these issues. Our survey reveals that the most widely adopted strategies include hiring additional staff and prioritizing staff training. Notably, 34% of sites identified expanding their teams as their primary solution, while 33% emphasized enhanced staff training as their next most common approach.

Additionally, 26% of sites are implementing technology solutions to help them overcome their challenges, 23% are participating in more industry-sponsored trials, and 19% are partnering with clinical services companies.

Partnering with clinical research technology and service providers can grant sites access to expert personnel, advanced technology, and best-in-class processes. By outsourcing non-core administrative tasks, such as budgets, contracts, and CTMS study builds, sites can minimize administrative burdens and enable staff to focus on higher-value activities. External providers also offer scalability and flexibility, helping sites quickly adapt to changing study demands, unexpected setbacks, or sudden increases in workloads.

## What solutions has your site implemented to address these challenges? (Please select all that apply)



SECTION 9

# Recommendations for Sites, Sponsors, and CROs

# 10 Recommendations for Sites:



To overcome their primary challenges, research sites must embrace a culture of resilience, innovation, and adaptability. As a driving force behind scientific progress, clinical research sites thrive when they proactively evolve to meet the demands of a changing landscape. By focusing on these critical areas, research sites can strengthen their capabilities, drive impactful results, and continue to advance clinical research to bring therapies to market that can improve and save lives.

1 **Focus on the Participant Journey:** Prioritize an exceptional participant experience by implementing diversity, equity, and inclusion (DE&I) strategies, and harnessing data and technology to optimize recruitment, enrollment, and retention.

2 **Invest in Staff Training and Retention:** Prioritize comprehensive staff training and implement strategies to enhance retention through ongoing educational opportunities and professional networking.

3 **Enhance Operational Efficiency:** Streamline, document, and standardize routine workflows while actively tracking key metrics against industry benchmarks to uncover opportunities for continuous improvement.

4 **Build Relationships and Communicate with Purpose:** Cultivate relationships and foster open, proactive communication with sponsors and CROs to help ensure better collaboration and timely response to your site's needs.

5 **Leverage Technology for Success:** Invest in technology systems that optimize your workflows and streamline research operations and designate an IT liaison to oversee research-related technology systems at your site.

6 **Accelerate and Streamline by Strategically Outsourcing:** Analyze your site's workflows to pinpoint areas where gaps or bottlenecks exist and explore opportunities to outsource non-core functions like study start-up, study identification, and data entry to clinical services companies.

7 **Clearly Define Roles and Responsibilities:** Clearly define and communicate the roles and responsibilities for each trial to your site staff, ensuring everyone is well-informed and equipped to work together effectively.

8 **Ensure Quality and Compliance:** Adopt a quality management system and identify best practices to ensure regulatory requirements are met and quality metrics are evaluated.

9 **Engage in Strategic Partnerships:** Participate in forums and conversations with sponsors, CROs, and service providers to build stronger relationships and enhance transparency about operational needs, technology solutions, and best practices.

10 **Think Innovatively:** Innovate for the future, not from the past. Launch pilot projects to test new ideas, experiment, and discover better solutions for tomorrow.

# 10 Recommendations for Sponsors & CROs:



To better support sites and enhance the success of clinical trials, sponsors and CROs must shift their focus toward addressing the unique challenges sites face. By prioritizing site and participant needs and working to overcome the obstacles that hinder their success, sponsors and CROs can help pave the way for more efficient and effective clinical research. By doing so, we can collectively advance the clinical research industry and bring new treatments to market faster.

1 **Utilize Data, Insights, and AI Efficiently:** Efficient utilization of operational and performance data, predictive intelligence, and expert benchmarking during study planning is essential to help minimize protocol complexity, reduce site burden, and elevate trial quality, ultimately enabling faster, smarter trials.

2 **Design Patient-Centric Protocols:** Create protocols that prioritize patient and site experience by assessing burden early on, incorporating participant and site input, and releasing the final protocol in a complete state to minimize the site having to address amendments during or shortly after trial initiation.

3 **Support Site Development:** Foster site growth and broaden the pool of potential investigators, research professionals, and clinical trial participants by empowering new and less experienced sites and investigators with targeted support and resources.

4 **Establish Realistic Timelines and Budgets:** Develop achievable study start-up timelines, ensure site budgets accurately reflect the work required, and explore pay-for-performance models to encourage swift site activation.

5 **Streamline Study Operations:** Optimize study planning, start-up, and study execution by streamlining critical processes such as ethical review, feasibility assessments, budgeting, contracting, clinical trial training, recruitment, and safety reporting.

6 **Ensure Prompt and Accurate Site Payments:** Prioritize delivering timely and precise payments to research sites to help support their financial stability and foster more productive partnerships.

7 **Deliver Tailored Site Support:** Offer flexible, adaptive solutions by identifying the unique needs of your sites site and providing customized support, whether through dedicated personnel, optimized processes, or innovative technology, to ensure site success.

8 **Enhance Recruitment and Retention Support:** Drive site success by providing robust recruitment and retention support, addressing a vital need identified by 41% of sites, who cite 'expanded patient recruitment and retention services' as a top priority for sponsors to address to ensure site operational viability[2].

9 **Minimize Technology Burden:** Proactively evaluate and address the technology requirements for your clinical trials by carefully evaluating new solutions, delivering targeted training on commonly used platforms, and collaborating with sites to optimize existing infrastructure.

10 **Foster Site Engagement and Collaboration:** Promote site engagement and collaboration by establishing open communication channels, actively seeking site feedback, and fostering a culture of continuous improvement and innovation.

SECTION 10

# How WCG Can Help

# How does WCG help clinical research sites run their trials more efficiently?



WCG partners with research sites to provide comprehensive, integrated Site Enablement solutions designed to optimize and accelerate their clinical trials. These solutions include:

1. IRB Review
2. IBC Review
3. Study Identification
4. Study Start-up
   - Coverage Analysis and Billing Compliance
   - Budget Development and Negotiation
   - Contract Review and Negotiation
   - CTMS Study Build and Support
5. WCG eResearch CTMS
6. Site Resource Augmentation
7. Financial Management
8. Avoca Quality Consortium

# How does WCG help sponsors and CROs reduce the burden on their sites to help them run trials more efficiently?



WCG partners with sponsors and CROs to help them tackle their challenges efficiently and intelligently by providing solutions to improve study planning and review, optimize study operations, and drive strategic decision-making with industry-leading data and insights. These solutions include:

1. IRB & IBC Review
2. Benchmarking & Performance Management
3. Trial Design & Protocol Planning
4. Site Feasibility & Selection
5. WCG Site Network
6. Clinical Trial Training
7. Participant Recruitment & Retention
8. Safety Letter Distribution
9. Endpoint Adjudication
10. Data Monitoring Committees
11. Imaging Core Lab
12. Quality & Compliance Consulting

# Citations:


1. Tufts Center for the Study of Drug Development, “Impact Report - Impact Report - Protocol Design Scope and Execution Burden Continue to Rise, Most Notably in Phase III,” May/June 2023.

2. Tufts Center for the Study of Drug Development, “Impact Report - Global Sites Optimistic About the Future of Clinical Trials Despite Ongoing Challenges,” Jan./Feb. 2023.

3. Society for Clinical Research Sites, “The 2024 Site Landscape Survey,” 2024.

4. Strategic Education, Inc. 2025 Healthcare Workforce Survey. https://www.strategiceducation.com/healthcare-workforce-survey/

WCG is a global leader of solutions that measurably improve and accelerate clinical research. Biopharmaceutical and medical device companies, contract research organizations (CROs), research institutions, and sites partner with us for our unmatched expertise, data intelligence, and purpose-built technology to make informed decisions and optimize study outcomes, while maintaining the highest standards of human participant protection. WCG raises the bar by pioneering new concepts, reimagining processes, fostering compliance and safety, and empowering those who perform clinical trials to accelerate the delivery of medical therapies and devices that improve lives. For more information, please visit wcgclinical.com or follow us on Twitter @WCGClinical or LinkedIn.