## **Duke** Clinical Research Institute

## An Institute Grounded in Mentorship

**ROBERT CALIFF:** From the beginning, really the forte of the DCRI was putting trainees into the mix of actually getting trials and outcomes studies done working with the study coordinators and the data experts and the statisticians to learn how it's done.

When it came to starting a research institute in this—at the time, new—area of large clinical trials and outcome studies, we knew there was going to be the need for tremendous growth in the workforce and people who learn new skills coming from our training programs. So fellowship and training at all levels was built into the beginning of the organization.

In the early days of the DCRI, we were really a cardiology shop, so we had a bunch of cardiologists in training. They were people who were very excited about this new method, particularly of doing large clinical trials and outcomes studies.

They would do part of their time in a mentoring relationship with a senior faculty member who might be running a big trial or an outcomes study. And then they would get didactic training in what became the clinical research training program, which we started because of the need for didactics, really, in learning the theory, in addition to the practical skills.

As the DCRI grew, first of all, it became obvious that we needed expertise in almost every specialty. So we opened up the program to fellows in specialties ranging from anesthesiology to primary care to pediatrics. And in addition to that, we grew a quantitative sciences program that was focused on biostatistics, bringing in a lot of master's trained people who became the go-to people for analyses and learned a lot in this mix of the team sport of clinical research.

Now that we're entering the era where everything is digitized, we're going to need an entire workforce to deal with a blend of digital technology and human skills needed to advance knowledge. I'm very hopeful that we'll have a revolution in evidence generation, so that we have a much better idea of what we're doing as we practice medicine or as individuals we try to stay healthy in our everyday lives.

In order for that to happen, there's going to need to be an evolution of the training program so that people learn about digital technologies, quantitative skills, how to manage the very large amounts of data that are now available, but never leaving behind the really fundamental skills of how to work with a research site, how to engage with a research participant so that there's confidence as we do generate this evidence.