

2014 ANNUAL REPORT

Academy of Clinical
Research Professionals



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MESSAGE FROM THE CHAIR OF THE ACADEMY OF CLINICAL RESEARCH PROFESSIONALS



AS I WAS PREPARING for the 2015 ACRP Global Conference, I reflected back on my 20 years of being an ACRP Certified Clinical Research Coordinator (CCRC). So much has changed in my personal journey, in the clinical research industry, and in keeping with those changes ACRP's Academy has changed and evolved over time.

In 2014, the Academy continued its successes by committing to the quality and awareness of the certification programs. We have received confirmation of our success from several varied sources, including but not limited to, a survey conducted in collaboration with CenterWatch showing that sites with certified staff initiated more studies and invoiced a larger amount of study grants versus those with fewer certified staff. In addition, the Academy conducted an independent survey of supervisors which revealed that a majority prefer to hire and promote ACRP certified staff.

ACRP Certification remains the industry standard. In 2014, the total number of current ACRP certified research professionals reached over 13,600 certificants; 68% of whom are coordinators, 28% who are monitors and 5% who are investigators. ACRP's certification program remains the only clinical research-specific certification program that is accredited by the National Commission for Certifying Agencies. In 2014, the process was initiated to maintain our CCRC® and CCRA® accreditation, which was granted in April of 2010. The CPI certification program is due for reaccreditation in 2017.

Our CPI designation has experienced a change as well. The Academy accepted a recommendation by a CPI/

CCTI task force to expand the eligibility requirements for the CPI exam to include all those with doctorate level degrees. The change was made to reflect a focus on clinical research competencies for investigators, not medical knowledge. This change required a change in the CPI designation title to the Certified Principal Investigator.

In 2014 the Academy launched its first annual essay contest asking certificants to discuss how certification is making a difference in their lives and the field of clinical research. This continues our focus on the value of certification and puts our certificants themselves in the spotlight. They are our best advocates for the value of certification.

As a further example of the growth and development of the Academy, we have developed our very own independent strategic plan. Previously the Academy's goals were part of the ACRP's overall plan. Having our own plan provides a specific focus for the Academy Board to advance the Academy and its certification programs. The Plan outlines strategic goals over the next three years, designed to maintain the quality and credibility of our programs while continuing to enhance and expand their value.

ACRP Certification programs would not be as successful without the people behind them - from volunteer certification exam committees, item writers, multiple working group members, Academy Board members, and the ACRP staff who make ACRP Certification the premier certification for the clinical research profession.

I look forward to 2015 being a productive and challenging year.

Sincerely,

A handwritten signature in black ink that reads "Susan H. Warne, LVN, CCRC". The signature is written in a cursive, flowing style.

Susan H. Warne, LVN, CCRC
Academy Board Chair

MESSAGE FROM THE DIRECTOR OF CERTIFICATION



2014 WAS AN EXCITING YEAR for the Academy. Led by the Board of Directors and the adoption of a new strategic plan focused entirely on the credentialing process, the Academy gained new momentum. We topped more than 30,000 clinical research professionals certified since the program's inception, engaged more volunteers than ever in the test development process, and found new evidence of the value of certification.

ACRP Certification received recognition from outside sources that confirm the value of our designations, including:

- Recognition by TransCelerate that all three programs - CCRA[®], CCRC[®], and CPI[®] - are equivalent to GCP training for trials conducted by TransCelerate-member companies. This eliminates unnecessary repetition of GCP training or testing for certificants working on those studies.
- The American Nurses Credentialing Center (ANCC) recognized the CCRC[®] and CCRA[®] designations toward assisting a hospital in meeting requirements of its Magnet Recognition Program. If you work in hospital-based research, earning your designation enhances your value.
- CenterWatch /ACRP's *Financial & Operating Benchmarks for Investigative Sites* identified a number of benefits of certification at the site level. (See Figure 1)

Figure 1

ACRP CERTIFICATION BOOSTS SITE PERFORMANCE

Average Amount of Total Study Grants Invoiced in 2013



\$=\$100,000

Average Number of Clinical Trials Initiated in 2013



■ Fewer Certified Staff ■ More Certified Staff

Evidence also emerged that employers overwhelmingly support certification. An Academy survey showed:



62.5%

of Employers
Prefer or Require
ACRP Certification
for Employment



15.3%

**Increase pay
or give bonus**
for ACRP
Certification

The Academy volunteers are predominantly related to maintaining the quality of ACRP certification exams, and ensuring exam content keeps up with changes in practice. The concerted effort to engage a wide range

of volunteers from diverse practice settings all over the world is evident in the number of individuals who are recognized in this Annual Report for serving as item writers and exam committee members. The hard work they have put into the quality of exams is also documented in the enclosed Annual Exam Report.

I have the distinct pleasure of serving with dedicated volunteers who are truly passionate about their profession and steadfastly devoted to assuring the integrity and credibility of voluntary certification for the clinical research profession. They are representative of the strength of the CCRA, CCRC and CPI credentials - it is the certificants themselves who make it strong with the care with which they do their work on a daily basis and the commitment they have made to quality research.

If you have not yet chosen to pursue ACRP certification, I challenge you to consider it as a way of demonstrating that clinical research is indeed a profession with a unique body of knowledge. If you are already ACRP certified, I ask that you step up to carry a leadership role and encourage your colleagues to set themselves apart. Together, we can give the skills and dedication of clinical research professionals the recognition they deserve.

Morgan M. Hirt, ACA
Director of Certification



*Certification means you choose to **stand apart** from others in the industry and commit to the best practices in our field.*

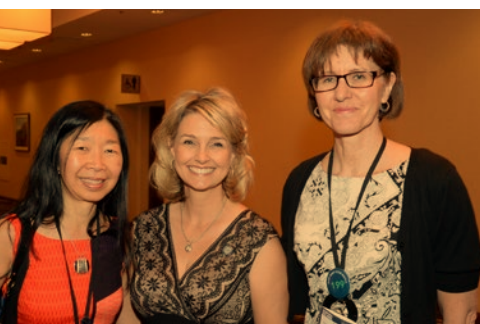
Cynthia Studenko Forrest, BBA, CCRC

STRATEGIC PLAN

A significant accomplishment for the Academy in 2014 was the development and approval of its first independent strategic plan. Previously, as an affiliate organization, Academy objectives were included in the larger ACRP plan. Developing its own plan provides the specific focus and direction necessary for the Academy Board to advance the Academy itself and its certification programs.

As part of that strategic planning process, the Academy reviewed its mission statement and made refinements to focus its purpose on the certification process. Because of its close linkage and affiliation with ACRP, the Academy chose to adopt ACRP's vision statement as the Academy's vision statement, as well.

The Academy Board adopted four strategic goals to define its work over the next three years. These strategic goals are then used to develop our annual operating plans.



ACADEMY 2015-2018 STRATEGIC PLAN VISION, MISSION, GOALS

About the Academy

ACRP Certification is administered by the Academy of Clinical Research Professionals (The Academy), an independent affiliate of ACRP whose mission is to promote and maintain high standards and best practices of clinical research by recognizing those professionals who demonstrate a well-defined competency through valid and reliable credentialing programs.

Vision

Clinical research is performed responsibly, ethically, and professionally worldwide.

Mission

Promote and maintain high standards and best practices of clinical research by recognizing those professionals who demonstrate a well-defined competency through valid and reliable credentialing programs.

Organizational Values

➤ PROFESSIONAL EXCELLENCE

We exemplify a commitment to ethical practice by conducting our activities in a transparent, professional and responsible manner that promotes workforce excellence.

➤ INTEGRITY

We ensure fairness, accuracy, validity and reliability in the development and administration of the certification program to ensure it meets the highest standards as defined by experts in the field.

➤ SERVICE

We expect excellence, innovation, continual organizational review and improvement in delivering our programs to meet and exceed expectations.

➤ COMMUNITY AND COLLABORATION

We work together with those whom we lead, serve, and partner with to promote competence and enhance the clinical research community.

Strategic Goals

By 2018, the Academy will focus on maintaining the high standards of credentialing programs, enrich awareness of those programs, enhance competency for credentialed professionals in clinical research and sustain the organization's viability.

GOAL 1. Continue to develop, maintain, and administer valid and reliable credentialing programs. [focus on maintaining high standards]

GOAL 2. Promote greater recognition of the value of professionals credentialed by valid and reliable programs. [focus on enriching awareness]

GOAL 3. Increase the reach of current certification offerings and expand the scope of credentialing programs for clinical research professionals. [focus on enhancing competency]

GOAL 4. Ensure adequate resources to support and advance the mission of the Academy. [focus on organizational viability]



Certification means I'm an accomplished professional with the knowledge needed to lead and inspire world-class teams of researchers.

Jennifer Catena
Davis, CCRA

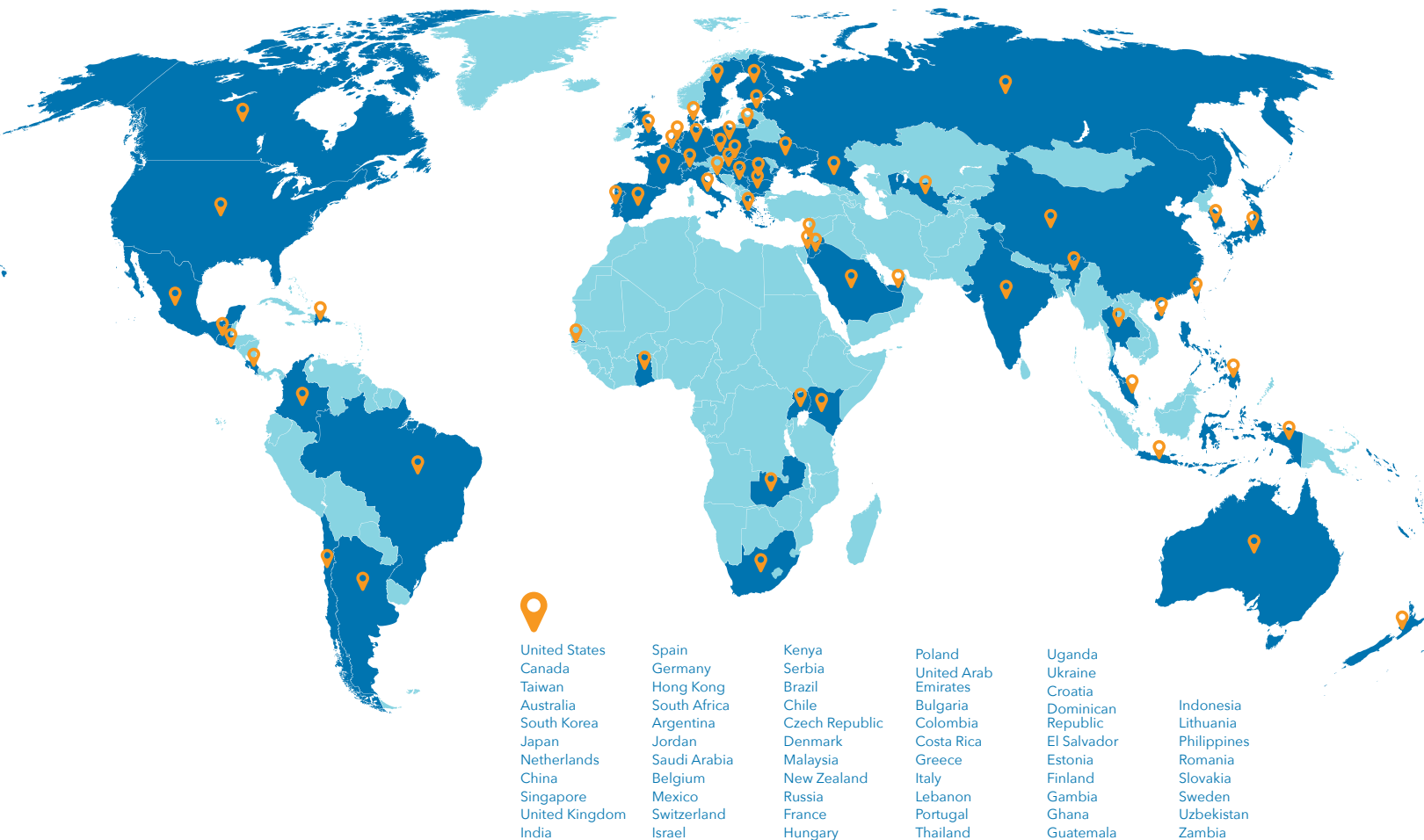
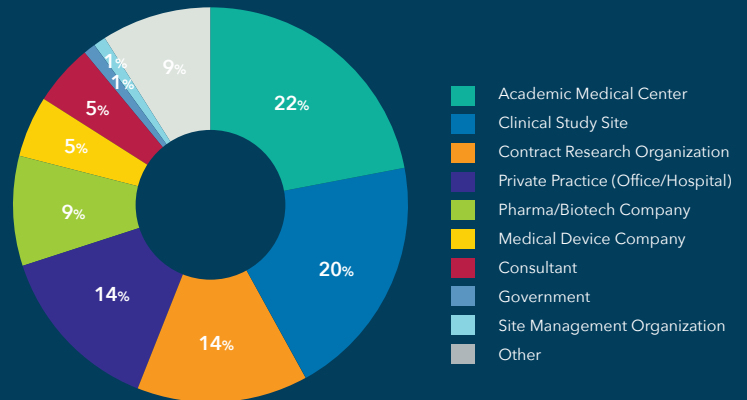


WHO ARE OUR CERTIFICANTS?

Distribution of ACRP Certificants Around the World

When the ACRP certification programs were introduced in 1992, all candidates were from North America. The first certificant from outside North America was a CCRA from the Netherlands in 1998. As of December 31, 2014, the program has 13,348 certificants in 61 nations around the world.

Where Do ACRP Certified Clinical Researchers Practice?





ACADEMY OF CLINICAL
RESEARCH PROFESSIONALS

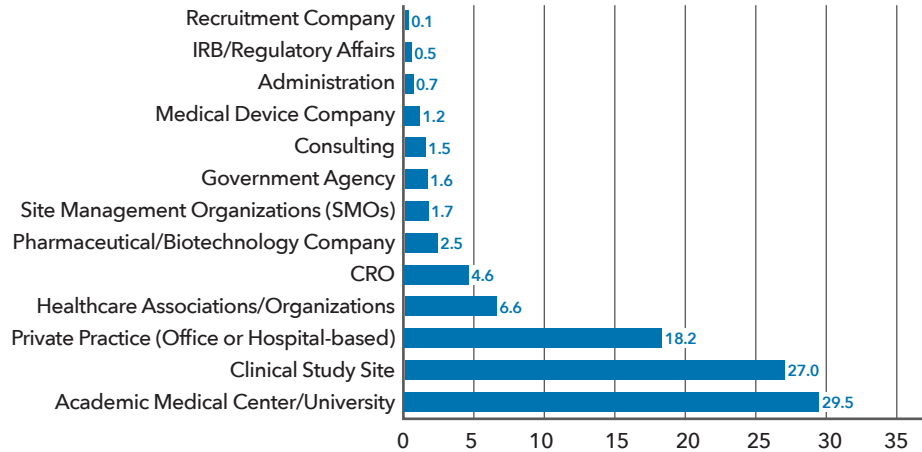
9,032
TOTAL
CERTIFICANTS

29
COUNTRIES

The typical
CCRC® certificant
is a female,
approximately
46 years of
age, who has
eleven years of
experience in
clinical research.

A PROFILE OF CERTIFIED CLINICAL RESEARCH COORDINATORS (CCRC®)

Current Practice Setting by Percent of Respondents

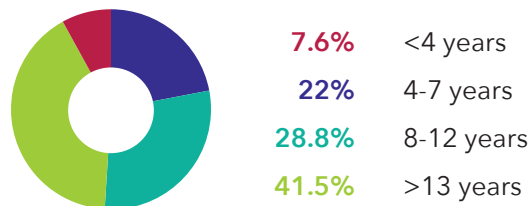


Predominant Areas of Research

The majority of CCRCs report they work in diverse areas of research, with 23.4% reporting they don't spend a significant portion of time in any one indication. However, 13% report working in cardiology and 12.85% in Oncology/Radiation Oncology. All other areas fell well into the single digits in terms of percentages.

CCRC® Profile of Experience

Current CCRC® certifiants are well-tenured in the field of clinical research and bring with them a wealth of experience.



Over the past several years, there has been an increase in the interest of establishing more formal education programs for those entering the clinical research profession. The Consortium of Academic Programs in Clinical Research (CoAP-CR) was established in 2003 for the purpose of providing a forum for communication among educators of clinical research professionals and to facilitate the development of high-quality, credit-granting academic programs. In 2014, a Council on Accreditation was formed to work toward establishing formal accreditation standards for academic programs in clinical research.

Number of CCRCs by Highest Degree Completed

HIGHEST EDUCATIONAL LEVEL	NUMBER	PERCENT
High School Diploma	61	9.8%
Associates/2 year Degree	1,564	17.6%
Bachelor's Degree	4,169	46.8%
Master's Degree	1,943	21.8%
Doctorate Degree	363	4.1%



ACADEMY OF CLINICAL RESEARCH PROFESSIONALS

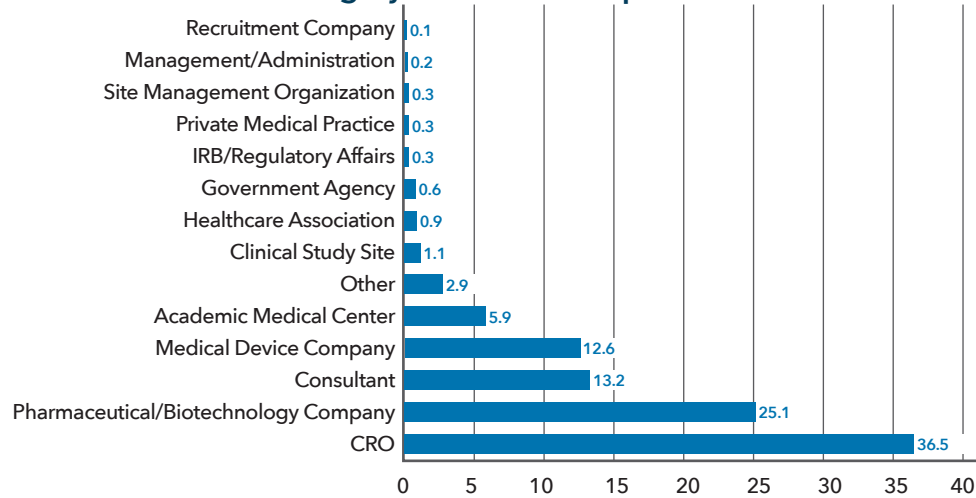
3,710
TOTAL
CERTIFICANTS

55
COUNTRIES

The typical CCRA® certificant is a female, approximately 45 years of age, who has thirteen years of experience in clinical research, although not necessarily as a CCRA®.

A PROFILE OF CERTIFIED CLINICAL RESEARCH ASSOCIATES (CCRA®)

Current Practice Setting by Percent of Respondents

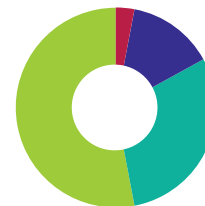


Predominant Areas of Research

CCRAs are often called on to monitor trials for a variety of indications and types of investigational product. In fact, 16.1% of CCRA® certificant report that they do not focus in any one area. However, several areas did draw a large percentage of CCRAs: Oncology/Radiation Oncology (18.5%); Pharmaceuticals (16.1%); Cardiology (11.7%) and Devices (9.8%).

CCRA® Profile of Experience

Current CCRA® certificant are well-tenured in the field of clinical research and bring with them that wealth of experience.



2.8% <4 years
14.3% 4-7 years
29.5% 8-12 years
53.4% >13 years

CCRA® Diversity

CCRA® certificant are the most diverse group of Academy certificant. In addition to living in 55 different countries, 11.2% report speaking another language other than English as their first language. They speak 40 different languages, in fact, with the highest percentages speaking Spanish (16.6%), Chinese (16.3%), Dutch (7.7%), French (7.0%), Korean (5.8%) and German (5%).

Number of CCRAs by Highest Degree Completed

HIGHEST EDUCATIONAL LEVEL	NUMBER	PERCENT
High School Diploma	61	1.7%
Associates/2 year Degree	199	5.4%
Bachelor's Degree	1,971	53.5%
Master's Degree	1,273	34.5%
Doctorate Degree	183	5.0%



ACADEMY OF CLINICAL
RESEARCH PROFESSIONALS

583
TOTAL
CERTIFICANTS

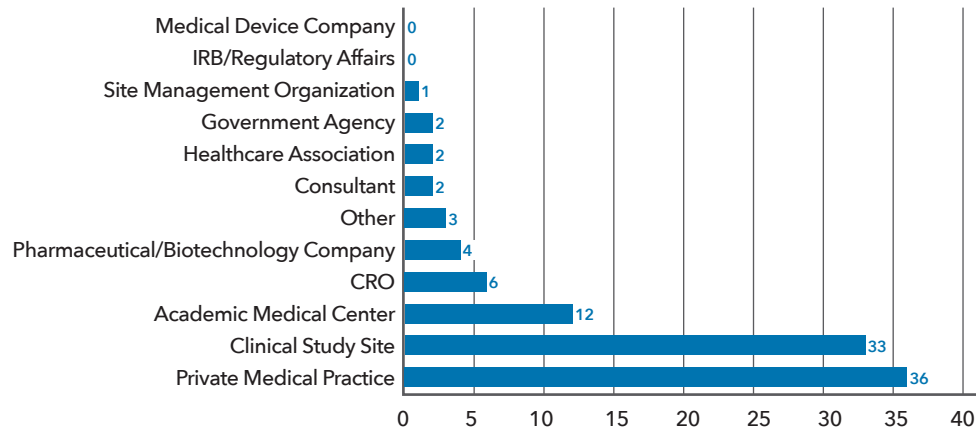
18
COUNTRIES

The typical
CPI® certificant
is a male,
approximately
55 years of
age, who has
fourteen years
of experience in
clinical research.

A PROFILE OF CERTIFIED PHYSICIAN INVESTIGATORS (CPI®)

In October 2014, the Academy Board voted to revise eligibility criteria for the investigator program to recognize the fact that the exam and certification are not designed to assess medical knowledge, but rather, specific clinical research knowledge. As a result, the Academy opened eligibility up to those who have been serving in the capacity of investigator but have a doctorate degree other than a medical degree (PharmD, PhD, etc.) The active medical license requirement was also dropped. The title of the designation was then appropriately changed to Certified Principal Investigator, retaining the CPI® designation but allowing for the certification and recognition of excellent work done as investigators by non-physicians.

Current Practice Setting by Percent of Respondents



Predominant Areas of Research

As is the case in many areas of the industry, investigators do not seem to focus on a specific therapeutic area, with 15.8% reporting no special focus. Internal Medicine and Family Practice both drew 15.2% of investigator respondents, with Asthma/Allergy (11.0%), Psychiatry (6.8%) and Obstetrics/Gynecology (5.5%) being the other larger areas of focus.

CPI® Profile of Experience

In 2014, the CPI® eligibility requirements dictated that candidates have earned a medical degree and have an active medical license, although the program is not designed to assess medical knowledge. All candidates had to show proof of an MD, MBBS, DO, DDS, or MBChB.



2.8%	<4 years
11%	4-7 years
25%	8-12 years
61.2%	>13 years

FINANCIAL STATEMENT

The Academy derives 97% of its revenue from candidate fees for both initial certification and maintenance. The remaining 3% is made up of practice exam sales and fees paid by Supporting Partners to gain access to the credential at reduced rates for their employees.

All revenue is put back into the program to ensure the validity, credibility, and sustainability of the exam.

Academy of Clinical Research Professionals Financial Statement

REVENUE	2014	2013
Initial Certification	\$732,62	\$809,934
Maintenance of Certification	\$1,203,642	\$1,155,098
Exam Practice Exercise	\$62,812	\$65,000
Other	\$4,750	\$13,281
Dual Certification Discount	(\$5,821)	(\$4,350)
Total Revenue	\$1,998,008	\$2,038,963
EXPENSES		
Management Fee	\$699,303	\$713,738
IP Licensing Fee	\$640,681	\$651,398
Promotion/Marketing	\$145,752	\$159,634
Board/Governance Operations	\$18,582	\$8,351
Exam Development & Services	\$217,940	\$283,159
Board/Exam Committee Travel	\$109,797	\$85,652
Food and Beverage	\$57,626	\$59,674
Professional Services	\$28,494	\$17,520
Office Supplies/Postage/Shipping	\$73,981	\$52,361
Bank Fees	\$69	\$93
Professional Development	\$1,450	\$1,425
Temporary Help	\$-	\$2,867
Total Expenses	\$1,995,137	\$2,035,872
Change in Net Assets	\$2,871	\$3,091



*Certification lets others in the industry know that you are **committed** to your profession, **ethics, and quality.***

Roxanne Kujanson, RN, CCRP, CCRC



EXAM ANNUAL REPORT

A total of 1,765 applicants applied for certification as a clinical research coordinator, clinical research associate, or a physician investigator in 2014. Of the 1,716 (97%) that were found eligible to test, 1,439 individuals tested at numerous computer-based testing locations in more than 38 countries. During 2014, a total of 1,092 individuals were granted initial certification bringing the total number of individuals currently certified to 13,573, and to 30,386 certified over the past 22 years.

THE FOLLOWING STATISTICS ARE FOR EACH CERTIFICATION PROGRAM ADMINISTERED IN 2014:

Certified Clinical Research Coordinator (CCRC)[®]

Total Number of applicants	1173
Total Number of eligible candidates (not all eligible candidates actually test)	1051
Total Number of test takers	1020

Certified Clinical Research Associate (CCRA)[®]

Total Number of applicants	538
Total Number of eligible candidates (not all eligible candidates actually test)	511
Total Number of test takers	458

2014 Certified Clinical Research Coordinator (CCRC[®]) Program

Form Number	8730031101	8730031201
Total # Candidates Tested on Form	495	525
% of Candidates Passing	77.15	80.24
Total Scored Items on Exam	100	100
Total Scaled Score Possible	800	800
Scaled Passing Point	600	600
Scaled Mean Score of Candidates	653.5	654.03
Range of Scaled Scores	308 - 788	312 - 786
KR-20 Reliability Coefficient	.88	.88
Standard Error or Measurement	3.78	3.78
Mean Item Difficulty (P+)	.79	.78
Mean Item Discrimination (Biserial)	.42	.42

2014 Certified Clinical Research Associate (CCRA[®]) Program

Form Number	8730061101	8730061201
Total #Candidates Tested on Form	254	204
% of Candidates Passing	62.17	58.92
Total Scored Items on Exam	100	100
Total Scaled Score Possible	800	800
Scaled Passing Point	600	600
Scaled Mean Score of Candidates	610.83	610.04
Range of Scaled Scores	224 - 746	300 - 739
KR-20 Reliability Coefficient	.85	.87
Standard Error or Measurement	3.97	3.87
Mean Item Difficulty (P+)	.75	.76
Mean Item Discrimination (Biserial)	.44	.41

Certified Physician Investigator (CPI®)

Total Number of applicants **79**

Total Number of eligible candidates **74**
(not all eligible candidates actually test)

Total Number of test takers **57**



2014 Certified Physician Investigator (CPI®) Program

Form Number	8730090601
Total #Candidates Tested on Form	57
% of Candidates Passing	56.10
Total Scored Items on Exam	100
Total Scaled Score Possible	800
Scaled Passing Point	600
Scaled Mean Score of Candidates	599.70
Range of Scaled Scores	446 - 733
KR-20 Reliability Coefficient	.87
Standard Error of Measurement	3.80
Mean Item Difficulty (P+)	.74
Mean Item Discrimination (Biserial)	.42



60%



STRONGLY AGREE
ACRP Certification Enhances Professional Credibility

92.5%

OF ACRP CERTIFICANTS AGREE:
ACRP Certification Validates Job-Specific Knowledge



EXPLANATION OF TERMS

TOTAL SCORED ITEMS ON EXAM: the current examination length is 125 questions. However, 25 of those are pre-test questions. The pre-test questions are being evaluated for possible inclusion in an exam at a later date. Information on how candidates perform on those questions is being collected without the question affecting a candidate's score.

TOTAL SCALED SCORE POSSIBLE: This is the highest score possible and represents a perfect score. The Academy uses a scaled score. Scaled scoring is a common practice among certification programs with multiple forms of the exam.

SCALED PASSING POINT: This is the score a candidate must receive in order to pass the examination. The passing score is a scaled score of 600. The score of 600 correlates to the number of questions a candidate must answer correctly, based on which form of the exam the candidate is taking. That number can differ from form to form. The number of questions that must be answered correctly is determined by evaluating the overall difficulty level of the exam. The more difficult the exam, the fewer questions a candidate would have to answer correctly in order to be assessed as having mastered the content. The Academy uses the Modified Angoff method to establish the passing point. The exam is not scored on a "curve" and there is not predetermined number or percentage of candidate that will pass. The passing score is set for each form of the exam.

SCALED MEAN SCORE: This is the average score of all candidates who took a specific form of the exam during 2012. A passing score is 600. The Academy uses criterion-referenced scoring. This means that the passing point is set for the first exam and does not change between exam administrations. The exam is not scored on a curve. This means it does not matter how many candidates test or what the make-up of the testing group is. The Academy does not pre-determine the number of people it will certify in a given year - performance, and therefore passing the exam, is up to the candidate.

RANGE OF SCORES: This shows the range of candidate scores between the lowest scoring candidate and the highest. The Academy's exams demonstrate is a fairly typical range for a professional certification program. No

one has scored a 200, which would indicate the candidate guessed at all the questions and no one has scored a perfect score either. This indicates that the difficulty level of the exam is generally appropriate for the candidate population at large.

KR-20 RELIABILITY COEFFICIENT: This is one of the most important program statistics. It indicates the reliability and consistency of the exam, or how well the exam distinguishes between candidates who have mastered the content and those who have not yet mastered the content covered. Professional certification programs strive for KR-20 results of 0.80 or higher. The statistics for the Academy's exams indicate a high level of reliability and mean that the exam is quite dependable for assessing a candidate's mastery of the information tested.



*ACRP Certification
validates that I have the
knowledge and skills to
work as a clinical research
professional.*

Linda Kathleen
Hunt, MSc, CCRA



STANDARD ERROR OF MEASUREMENT: The standard error of measurement yields an estimate of the average amount of error associated with a test score received on an Academy exam. A large standard of error indicates a significant amount of error can exist in the score received. The small standard of error for the Academy exams suggest that the Academy exams are a precise measure of the knowledge and skill required to carry out the role-specific duties of a clinical research coordinator, a clinical research associate and a physician investigator.

MEAN ITEM DIFFICULTY (P+): The p-value is an estimate of item difficulty calculated as a percentage of candidates answering an item correctly. Each item has its own p-value. The Academy tracks the mean p-value of each exam form, making an effort to develop equated forms of exam.

MEAN ITEM DISCRIMINATION (BISERIAL): This is the most common discrimination index and provides an indication of the relationship between performance on an individual item and the exam as a whole. For an exam to be valid and reliable, we look for a positive correlation between those who answer an item correctly and those who score higher on the exam as a whole. Items with a negative correlation do not assist the Academy in determining whether or not a candidate has mastery of the content being tested. For voluntary certification exams, the Academy's exams have a high mean item discrimination value which means the individual test questions do a good job of identifying masters from non-masters, which is the goal of the certification exam process.

Each designation's exams are overseen by a Global Exam Committee made up of currently certified clinical research professionals who work with a professional testing agency to develop each exam. The exams for each program (CCRC, CCRA, CPI) go through several review steps by each Global Exam Committee before being released for administration. In addition, the passing standard is set by a diverse panel of currently certified clinical research professionals.

Currently, there are 139 active Subject Matter Experts (SMEs). SMEs are Academy certificants who participate in special training in how to write multiple choice test questions, or participate in the Exam Committee for each program. In-person training is offered each year at ACRP's Global Conference. Every draft test question must be linked to a topic area found on the Detailed Content Outline (DCO) for a specific designation, as the Outlines are specific to each job role. Each question must also be referenced directly to a specific section of the ICH Guidelines E2A, E6, E8 or E9. In 2013, 281 draft items were submitted and reviewed. References are designed to provide supporting evidence for the correct answer. On average, fifty-three percent of draft items are approved for addition to the item pool as a pre-test items. Pre-test items are used to collect data on the item before the item impacts a candidate's score. Each exam administered includes 25 pre-test questions, out of the 125 items on the exam. The Academy has set minimum performance standards for pre-test items which help determine whether the item advances to be included as a scored item on a future exam, must be revised and then pre-tested again, or archived.



*Certification has signaled to colleagues a level of **expertise** and has enabled me to continue to **grow** and learn.*

Robert J. Greco, BS, RPh, MPH, CCRA

VOLUNTEER LISTING

2014 Academy Board of Trustees

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Sarrison Clincial Research, LLC
Cary, NC

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Profil Institute for Clinical Research, Inc.
Chula Vista, CA

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CCRA
Clinical Pathways, LLC
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Phoenix HealthCare Associates
Coral Springs, FL

Peter M. Wehmeier, MD, CPI

Vitos Weilmuenster
Weilmuenster GERMANY

ACRP APPOINTED TRUSTEE

Kathryn L. Kimmel, CCRC, CCRA
PAREXEL
Mead, WA

2014 ACADEMY NOMINATING COMMITTEE

The Academy Nominating Committee holds responsibility for leading the recruitment process for qualified candidates that address the current needs of the Academy, thoroughly reviewing and scoring each candidate's application, and submitting its recommended slate of candidates for Board approval.

CHAIR

Randall R. Stoltz, MD, CPI
Covance
Evansville, IN

VICE CHAIR

Mindy Owen, RN, CCM (Academy Board
Public Member)
Phoenix HealthCare Associates
Coral Springs, FL

Dennis DeRosia, PA, MA, CCRA (Academy
Board Liaison, Immediate Past Chair of
Academy Board)

Profil Institute for Clinical Research, Inc.
Chula Vista, CA

Kelly Cairns, MA, BASc, CCRA, APMR

Boehringer Ingelheim Canada
Burlington, ON, CANADA

Mary Ann Gergits, RN, MS, CCRC

Northampton County Community College
Allentown, PA

Sandra J. Saadeh, MA, MT(ASCP), CCRA

Wilmington, NC

2014 GLOBAL EXAM COMMITTEES

The mission of the Global Exam Committees is to use psychometrically sound practices to develop examinations that meet the current test specifications as determined by the most recent Job Task Analysis. Exam Committee members review and revise draft test questions; provide feedback and support for item writers; approve final forms of the exam for administration; monitor exam and item performance.

Certified Clinical Research Associate (CCRA) Exam Committee

Robert J. O'Connor, MS, CCRA (Chair)

Procter & Gamble Co
Cincinnati, OH

Jennifer Catena Davis, CCRA (Vice Chair)

PPD
Washington, DC

MeeLee Tom, MS, CCRP, CCRA

Rutgers University
Newark, NJ

Rebecca Hill, BSc, CCRA

AbbVie
Montreal, QC

Naoki Tsutsumi, CCRA

AstraZeneca
Osaka, JAPAN

Pam Dellea-Giltner, CCRA

Norwich Clinical Research Associates LTD
Norwich, NY

Sofia Keim, CCRA

Janssen Pharmaceutical Companies of
Johnson & Johnson
Barcarena, PORTUGAL

Certified Clinical Research Coordinator (CCRC) Exam Committee

Barbara C. Lambeth, RN, CCRC, CCRP (Chair)

Banner MD Anderson Cancer Center
Mesa, AZ

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Item Writers are subject matter experts who have been trained in the art and science of item writing. They are responsible for developing draft text questions for potential inclusion on future exams. Item writing training takes place face-to-face and item writing is done remotely. Item writers reflect the diversity of practice settings and experiences of our candidates. Currently, 119 individuals serve as active Item Writers for the Academy.

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2014 WORKING GROUPS

Certified Physician Investigator (CPI) Eligibility Working Group

The Working Group was responsible for reviewing the current parameters of the Certified Physician Investigator (CPI) program and the former Certified Clinical Trial Investigator (CCTI) program to determine the feasibility of combining the programs into a single credential for principal investigators.

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Clinical Research Associate (CRA) Working Group

The CRA Working Group is responsible for investigating the changing role of the clinical research associate as it impacts the global clinical research industry and what potential impact this may have on the CCRA certification program.

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CERTIFICATION SUPPORTING PARTNERS

The Certification Supporting Partner (CSP) program is designed to support organizations committed to conducting responsible and ethical clinical research by encouraging employees to earn their ACRP Certification. Participating organizations are provided with tools and resources to make access to becoming ACRP Certified and maintaining that Certification easy and more affordable for their employees, as well as invaluable public recognition of their dedication to quality clinical research. Aggregate exam performance data is provided to serve as a guide for developing training.



Benchmark Research

Benchmark Research is an integrated site network comprised of therapeutically diverse, dedicated, multi-therapeutic research centers that specialize in conducting vaccine clinical trials. We have sites located in Austin, TX; Fort Worth, TX; San Angelo, TX; New Orleans, LA; Sacramento, CA; and San Francisco, CA.



Holston Medical Group

Holston Medical Group is known across the nation for excellence in clinical research. Today, the HMG Clinical Research team consists of more than three dozen professionals, including principal investigators, sub-investigators, RNs, LPNs, medical assistants, and medical laboratory technicians. HMG actively participates in Phase II, Phase III and Phase IV clinical research studies.



Blanchard & Associates

Blanchard & Associates offers Clinical Research Operations and Regulatory services to Companies, Organizations and Institutions who conduct or plan to implement Clinical Research in Latin America.



Horizon BioAdvance

Horizon BioAdvance is a biomedical research company in Lafayette, Ind., with multiple specialties in clinical and translational research. Horizon BioAdvance remains independent while maintaining integral clinical and research affiliations to Indiana University, Purdue University, and major biotech industries. Horizon BioAdvance has recently stepped on the stage internationally with an office located in Dubai, United Arab Emirates.



Hospital Corporation of America

HCA is the nation’s leading provider of healthcare services, a company comprised of locally managed facilities that includes about 165 hospitals and 115 freestanding surgery centers in 20 states and England and employing approximately 204,000 people. Approximately four to five percent of all inpatient care delivered in the country today is provided by HCA facilities.



PMG Research

PMG Research is an Integrated Site Network (ISN) - a fully integrated network of sites solely dedicated to clinical research. Our unique site-focused organization ensures consistency, compliance and the highest quality performance and results across the network.



MedTrials

MedTrials, Inc. is a full-service contract research organization that offers a full spectrum of specialized solutions with expertise in clinical trial management. Our services are tailored to meet specific project needs, globally, and are delivered with reliability, accountability and integrity. What differentiates us among other CROs is our people and approach to performing clinical research services.



Profil Institute

Profil Institute is world-renowned as a Center of Excellence for diabetes and obesity early phase clinical research. The company's advances in early phase drug research and its specific focus on diabetes, obesity and cardiometabolic diseases as it relates to the diabetic patient population have led Profil Institute to be the most highly regarded clinical research institute for early phase diabetes drug trials.



Medtronic

Medtronic is the world’s largest medical technology company, offering therapies from its cardiac and vascular, restorative therapies, and diabetes business units to fulfill its mission of alleviating pain, restoring health, and extending life. Medtronic is committed to using evidence-based research to bring safe, effective medical therapies to patients; clinical trials, which Medtronic conducts and sponsors within and across several geographic areas, play an essential role in this process. Medtronic launched the MCRI in 2011 to accommodate significant changes in global clinical research driven by broad healthcare reform and government cost containment mandates.



SERRG, Inc.

SERRG, Inc. is a clinical research organization that is distinctly different from any research organization you’ve ever worked with. SERRG, Inc. is a true Multi-Specialty Research Organization, with a “hands-on” approach from contract to close-out. Every aspect of the research process is managed by our highly specialized and dedicated teams.