

AMARA N. WILLIAMS, MPH

CLINICAL RESEARCH PROGRAM MANAGER

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Accelerate Trial Execution, Expand Patient Access, and Deliver Inspection-Ready Evidence.

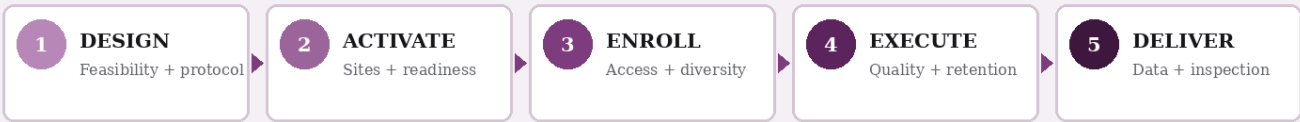
SITE ACTIVATION	ENROLLMENT LIFT	DIVERSE PARTICIPATION	DATA QUALITY
168 → 74 Days	+62%	21% → 47%	98.7%

PHASE I-IV TRIAL OPERATIONS • MULTI-SITE PROGRAM LEADERSHIP • SITE STARTUP • PATIENT RECRUITMENT DIVERSITY & COMMUNITY ENGAGEMENT • ICH-GCP • FDA/IRB READINESS • VENDOR OVERSIGHT • DATA INTEGRITY

Patient-centered *Clinical Research Leader* with **16+ years** of experience in directing oncology, rare-disease, cardiovascular, and population-health programs across academic, sponsor, and community settings. Translate complex protocols into executable site strategies, aligned investigators, inclusive recruitment, disciplined budgets, and inspection-ready evidence. Recognized for rescuing underperforming studies, building high-trust community partnerships, strengthening protocol adherence, and developing clinical teams that consistently deliver safe, timely, and defensible results.

THE CLINICAL RESEARCH ACCELERATION MODEL

A patient-centered operating system that moves trials from protocol readiness to defensible evidence



RESEARCH LEADERSHIP VALUE

Clinical Portfolio & Program Governance
Protocol Translation & Site Activation
Participant Access, Enrollment & Retention
Clinical Quality, Compliance & Inspection Readiness
Investigator, CRO, Vendor & Community Partnerships

PROGRAM SCALE

\$42M Phase I-IV portfolio
27 research sites across 14 states
18 concurrent protocols
46-person matrixed organization
9 clean sponsor / regulatory audits

PROFESSIONAL EXPERIENCE

EVERWELL PRECISION MEDICINE INSTITUTE

\$42M clinical research portfolio • Oncology, rare disease, and cardiovascular trials • Boston, MA

Clinical Research Program Manager| 2022–Present

27 Sites • 18 Protocols • 46-Person

Direct strategy and execution for 18 concurrent Phase I-IV protocols across 27 academic and community sites in 14 states. Lead site feasibility, activation, enrollment, participant retention, budget, quality, data review, vendor governance, and inspection readiness. Partner with principal investigators, sponsors, CROs, IRBs, biostatistics, pharmacy, nursing, informatics, and community organizations while managing a 46-person matrixed team.

Rebuilt a clinical-trial network into a faster, inclusive, inspection-ready research operation—accelerating site activation, enrollment, and evidence delivery without sacrificing patient safety or protocol fidelity.

→\$42M trial portfolio
→ 27 sites / 14 states
→ 94% participant retention
→ Zero critical audit findings

- Shortened median site activation from 168 days to 74 and launched 27 sites within 10 months by installing a milestone-based startup office, and escalating investigator dependencies through weekly readiness huddles.
- Increased aggregate enrollment 62% above baseline and doubled screen-to-enrollment conversion from 18% to 36% through site-specific feasibility, digital prescreening, coordinator coaching, and real-time funnel analytics.
- Returned four rescue studies from red status to milestone compliance within 90 days by rebuilding recovery plans, resolving 820 overdue participant visits/data actions, resetting vendor accountability, and restoring sponsor confidence.
- Reduced portfolio budget variance from 14% to 3% and prevented \$4.8M in projected overspend via enrollment-linked forecasting, contract change control, investigator-payment reconciliation, and monthly financial risk reviews.

CLINICAL PROGRAM IMPACT SCORECARD

Portfolio stewardship • network scale • participant retention • financial control

TRIAL PORTFOLIO	RESEARCH NETWORK	RETENTION	BUDGET CONTROL
\$42M	27 sites	94%	14% → 3%
18 PROTOCOLS	14 STATES	+12 POINTS	\$4.8M AVOIDED

MERIDIAN ONCOLOGY RESEARCH NETWORK*Regional academic-community oncology consortium • 16 sites • Philadelphia, PA***Senior Clinical Research Manager | 2018–2022****16 Sites • 12 Trials • 31-Person Team**

Oversaw startup, enrollment, monitoring readiness, data quality, and closeout for 12 oncology trials spanning 16 academic and community sites. Managed eight direct reports and a 31-person research organization; served as operational liaison among sponsors, investigators, IRBs, pharmacy, pathology, and patient-advocacy partners.

- **Recovered a six-month enrollment deficit within two quarters** and moved the network from 17th to third among 42 participating cohorts by segmenting site performance, and focusing outreach on high-opportunity disease populations.
- **Activated eight community oncology practices and added 1,240 eligible patients** to the annual referral pool by creating a turnkey site-readiness model covering contracts, lab logistics, source workflows, and investigator engagement.
- **Cut central-lab specimen turnaround 38% and held sample-loss below 1%** by redesigning collection kits, pickup schedules, temperature monitoring, chain-of-custody controls, and escalation pathways across 16 sites.
- **Created a real-time portfolio dashboard that reduced milestone-risk discovery from 21 days to five** and enabled investigators and sponsors to resolve enrollment, deviation, data, and vendor risks before they threatened study timelines.

GREAT LAKES ACADEMIC HEALTH SYSTEM*1,100-bed teaching health system and research enterprise • Chicago, IL***Clinical Research Manager | Clinical Research Coordinator | 2013–2018****9 Studies • 6 Departments**

Advanced through progressively responsible roles supporting investigator-initiated and industry-sponsored cardiovascular, oncology, and population-health studies. Coordinated cross-department workflows, participant recruitment, informed consent, regulatory submissions, safety reporting, data collection, and study closeout.

- **Opened six studies 41% faster than the department average** by creating reusable startup checklists, regulatory document libraries, budget assumptions, staff training plans, and pre-submission quality reviews.
- **Enrolled 1,860 participants at 118% of target** while lowering screen-failure cost 29% through EHR cohort identification, physician referral education, centralized prescreening, and plain-language participant communications.
- **Reduced data-query turnaround from 11 days to three and achieved 100% on-time safety reporting** by clarifying ownership, building aging dashboards, and embedding daily review checkpoints into coordinator workflows.
- **Selected to lead the system's transition to remote trial operations** during a public-health disruption, implementing eConsent, tele-visits, direct-to-patient supplies, and revised safety escalation without losing active participants.
- **Governed more than 1,200 informed-consent and reconsent events** with no major consent findings by introducing plain-language review, version controls, teach-back validation, interpreter coordination, and weekly consent-file audits.

BLUE HARBOR PUBLIC HEALTH COLLABORATIVE*Community-based prevention and health-equity research organization • Baltimore, MD***Research Coordinator | 2010–2013****Community Health • Prevention Research**

Coordinated diabetes and cardiovascular prevention studies serving medically underserved neighborhoods. Managed outreach, consent, enrollment, field data collection, participant education, community-health-worker schedules, and partner reporting.

- **Increased monthly enrollment 73% and tripled attendance at prevention workshops** by partnering with faith institutions, food-access programs, schools, and neighborhood clinics to deliver trusted, bilingual outreach.
- **Trained and deployed 28 community health workers** while achieving 97% inter-rater reliability through competency-based instruction, field observation, scripted education, and recurring calibration of screening and data-collection methods.
- **Produced outcomes evidence and continuation proposals that secured \$2.1M in renewed grant funding**, translating recruitment, health-behavior, and community-partnership results into clear funder reports and sustainability plans.

SELECTED RESEARCH PORTFOLIO**PRECISION ONCOLOGY RESCUE**

4 studies restored to milestone compliance in 90 days • 820 overdue visits and data actions resolved

PRAGMATIC CARDIOVASCULAR TRIAL

1,860 participants enrolled • 118% of target • screen-failure cost reduced 29%

RARE-DISEASE ACCESS MODEL

27-site inclusive recruitment infrastructure • underrepresented participation increased to 47%

COMMUNITY PREVENTION COHORT

96% two-year follow-up completion • monthly enrollment increased 73% • \$2.1M funding renewed

EDUCATION

Master of Public Health (MPH), Epidemiology | Emory University, Rollins School of Public Health
Bachelor of Science, Biology | Howard University

CREDENTIALS

Certified Clinical Research Professional (CCRP) | Project Management Professional (PMP)

TECHNOLOGY

Medidata Rave | Veeva Vault CTMS / eTMF | REDCap | Epic | OnCore | Tableau | Power BI | MS 365

LEADERSHIP

Community Advisory Board Facilitator | Research Workforce Mentor | Research Operations Forum