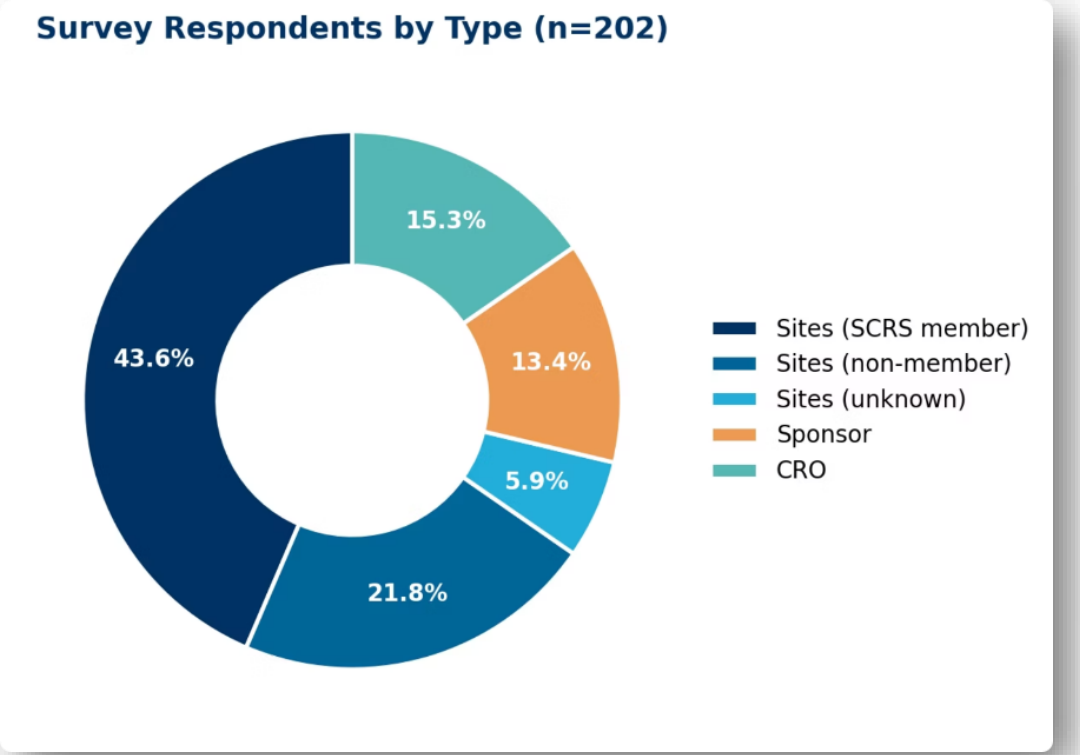
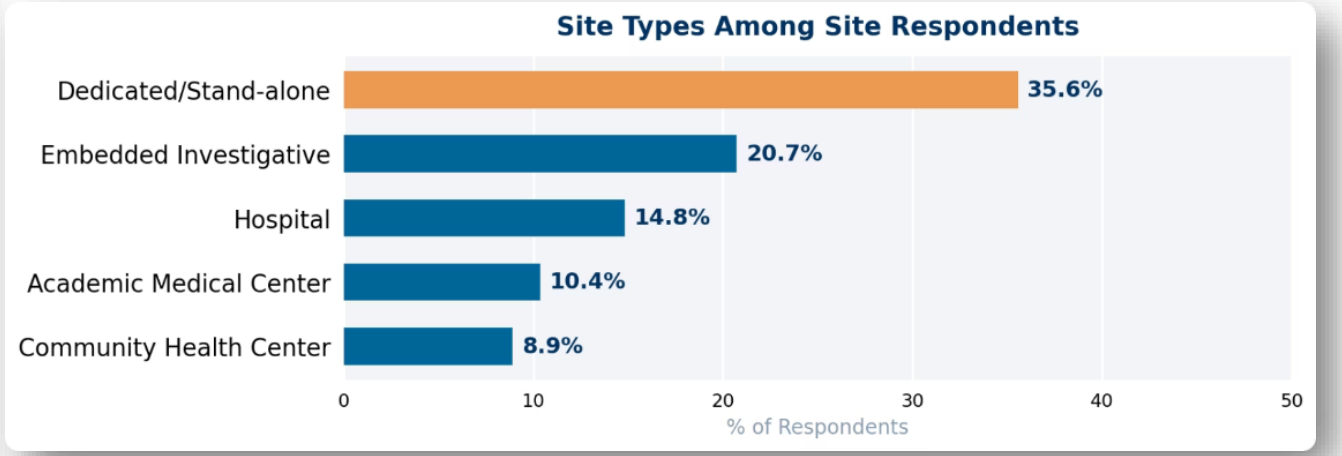
The SCRS Site Landscape

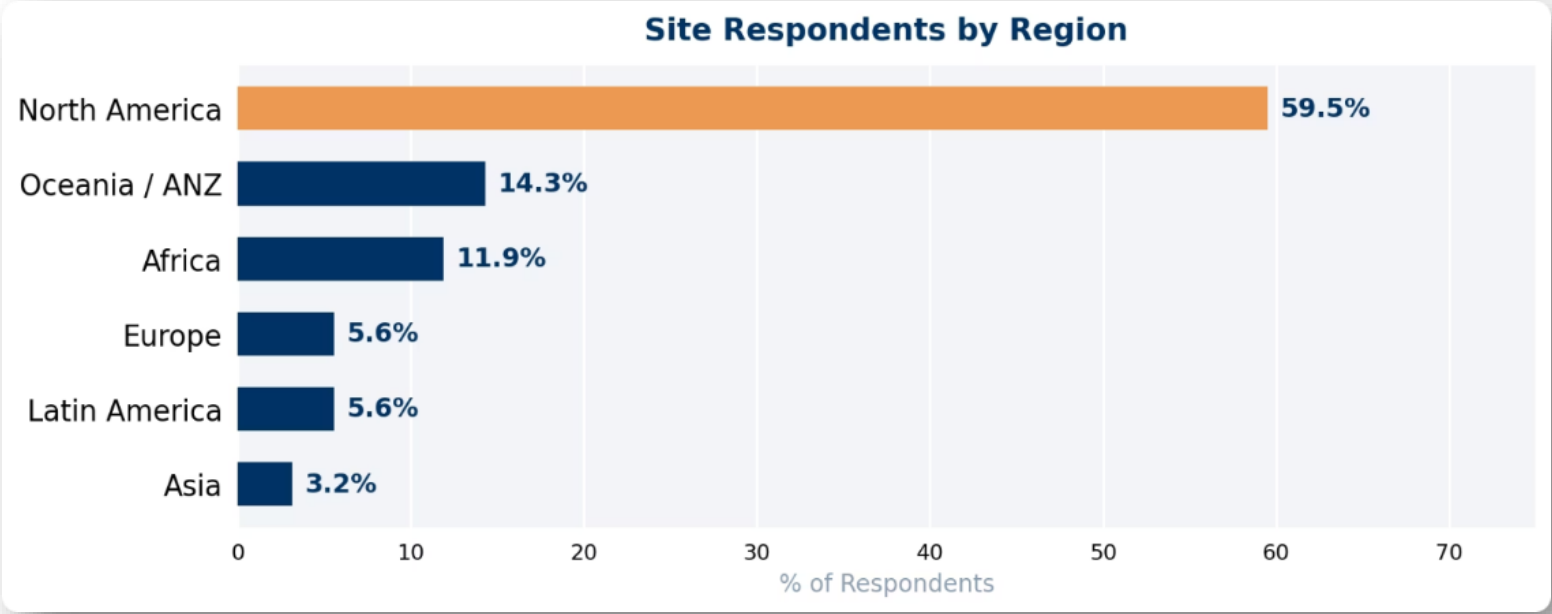
SCRS
Society for Clinical Research Sites

About This Survey: Who Responded





Site Respondents by Region



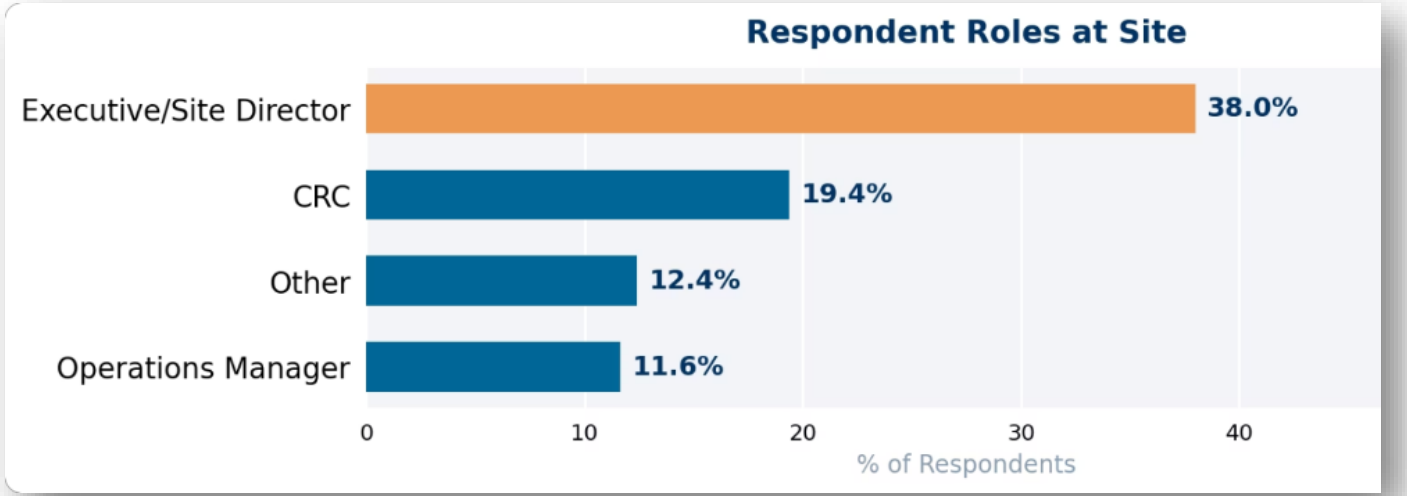
North America
59.5% of respondents — 75 sites. The United States is the dominant geography.

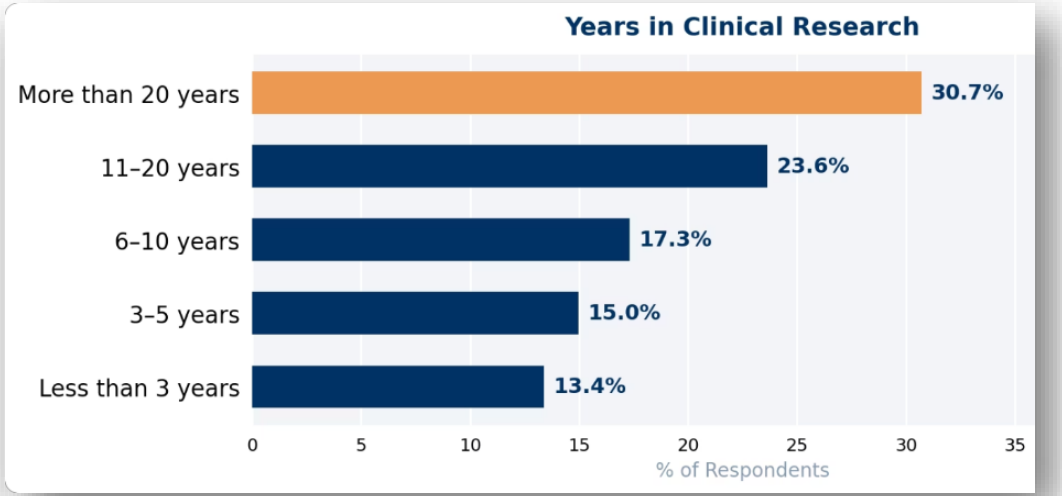
Africa
11.9% of respondents. South Africa leads at 53%, with Tanzania at 20%.

Europe
5.6% of respondents. Ukraine (43%), UK (29%), and Germany (29%).

Latin America
5.6% of respondents. Mexico leads at 57%, followed by Argentina at 29%.

Site Experience & Respondent Roles

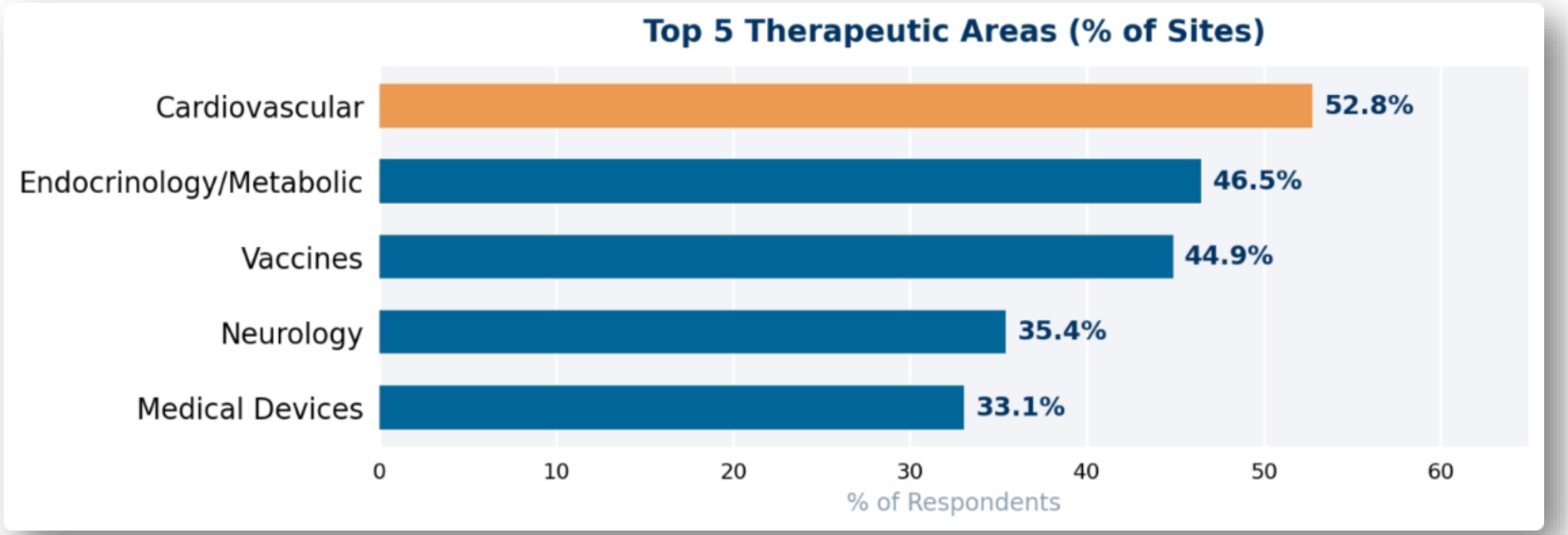




Years in Clinical Research

54% of responding sites have 11+ years of clinical research experience, and 31% have 20+ years. This is a tenured, operationally mature respondent pool — data reflects decisions made by people who have navigated the system for a long time.

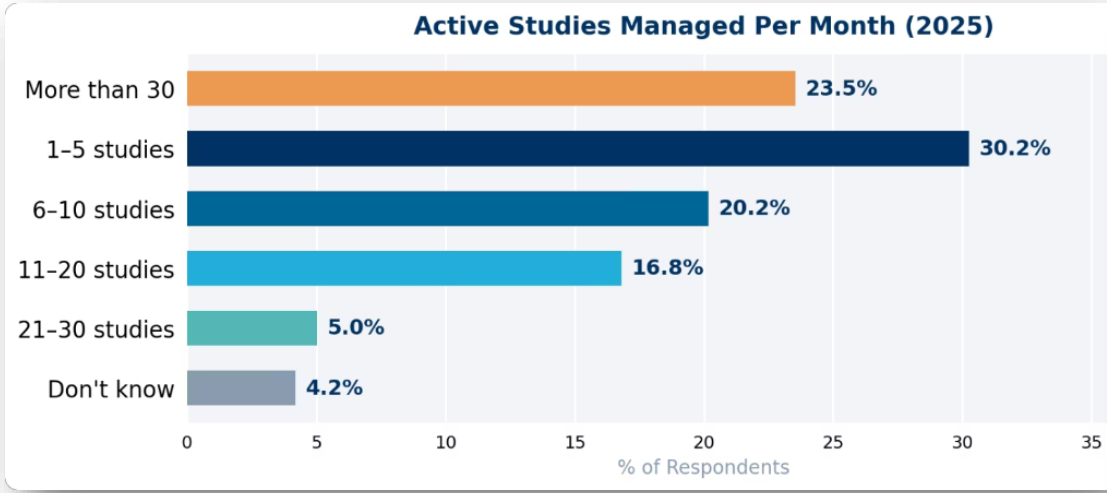
Site Therapeutic Focus: Top 5 Areas

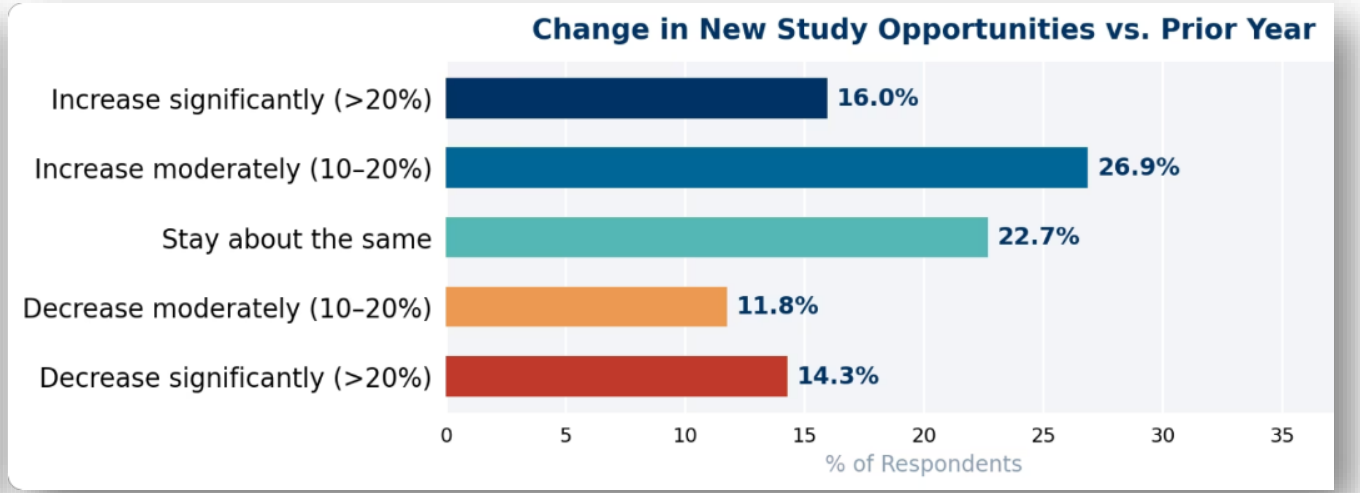


Research Operations

The average responding site is active across multiple therapeutic areas — underscoring the need for flexible operations and scalable training that doesn't assume a single TA focus.

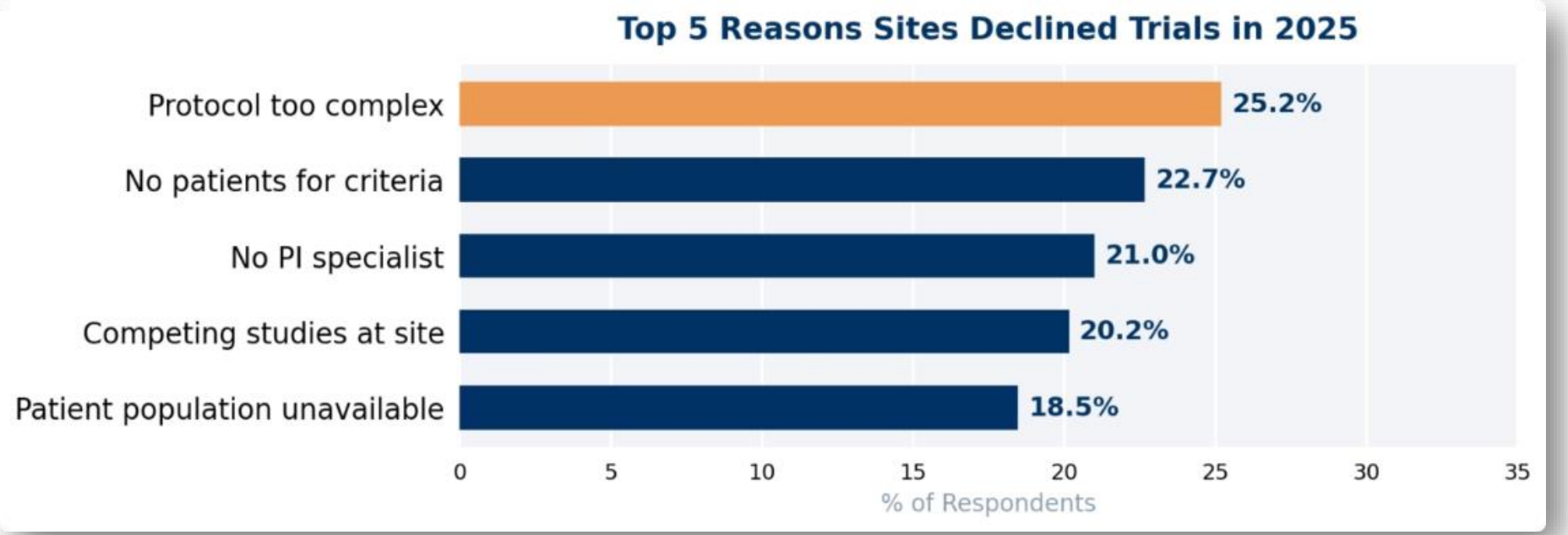
Study Volume & New Opportunity Trends (2025)





The site landscape is bifurcated: 30% manage 1–5 studies/month, while 23.5% manage 30+. New opportunity flow is mixed — 43% of sites saw increases in 2025, but 26% saw declines. Sites at the lower volume end face real pressure; larger networks are becoming increasingly selective.

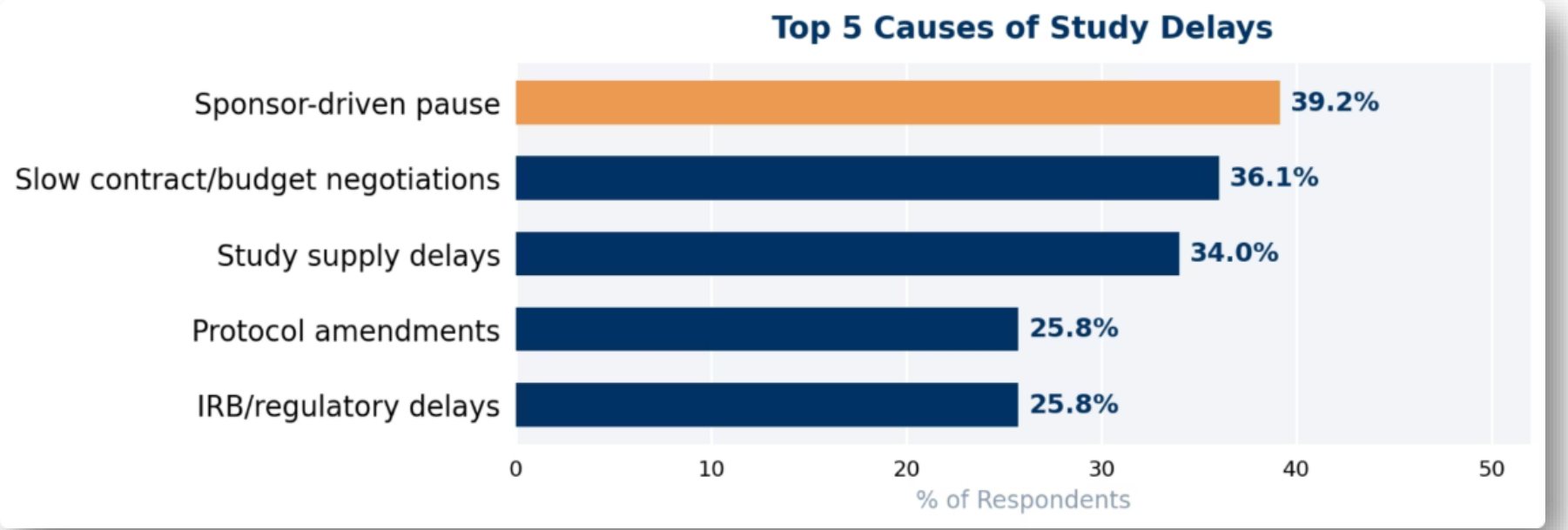
Why Sites Decline Trials: Top 5 Reasons



Protocol design and patient access — not budget — are the primary drivers of trial decline.

Sites are making strategic, capability-based decisions. Protocol complexity (25.2%) and patient criteria fit (22.7%) top the list. Sponsors who invest in smarter protocol design and more realistic inclusion/exclusion criteria will see materially better site acceptance rates and faster enrollment.

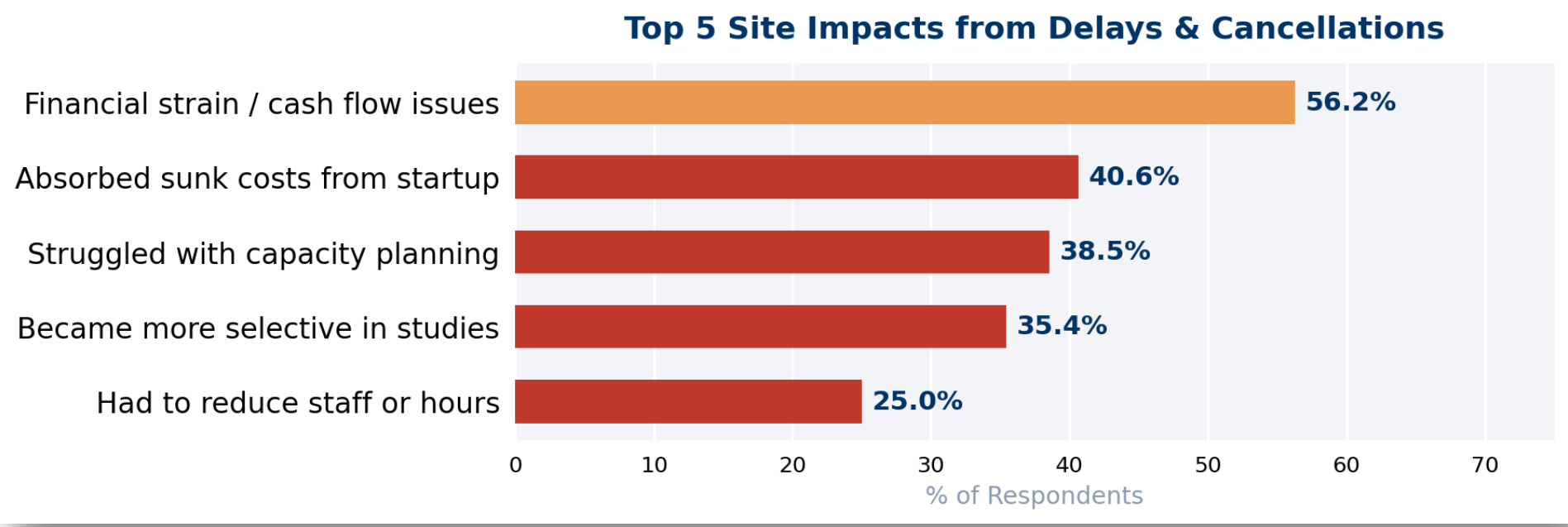
Top 5 Causes of Study Delays at Sites



External, sponsor-driven factors dominate. The top two causes are both largely outside site control.

Sponsor-driven pauses (39.2%) and slow contract/budget negotiations (36.1%) are followed by study supply delays (34%). Sites are absorbing timeline risk they didn't create — and the downstream consequences fall on their operations, their staff, and their patients.

Site Impact: Study Delays & Cancellations



56.3% of sites experienced financial strain or cash flow issues as a direct result of delays.

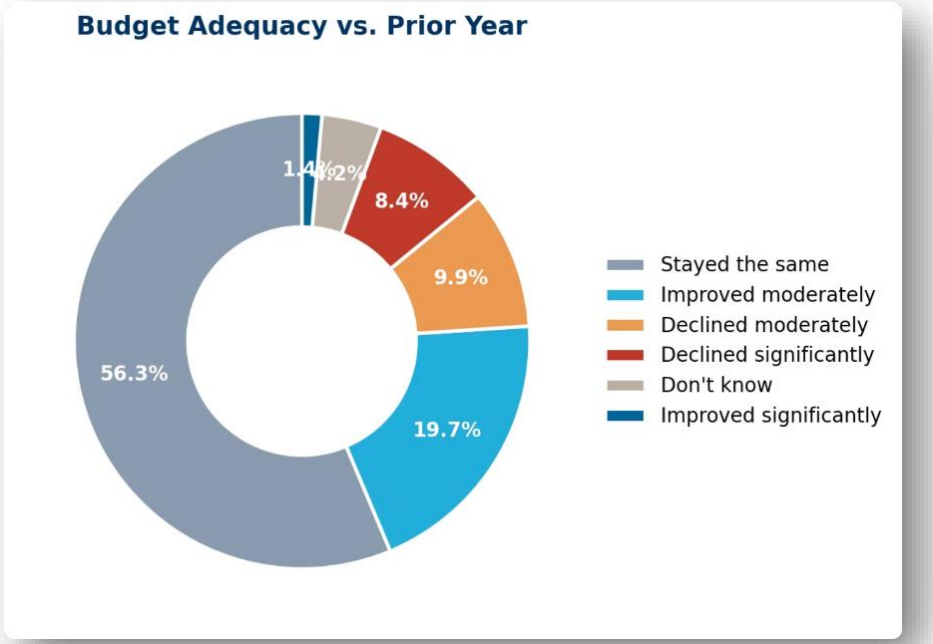
40.6% absorbed sunk startup costs on cancelled studies. Over a third became more selective about which sponsors they work with. Delays don't just create operational inconvenience — they permanently shift site behavior and erode the sponsor-site relationship.

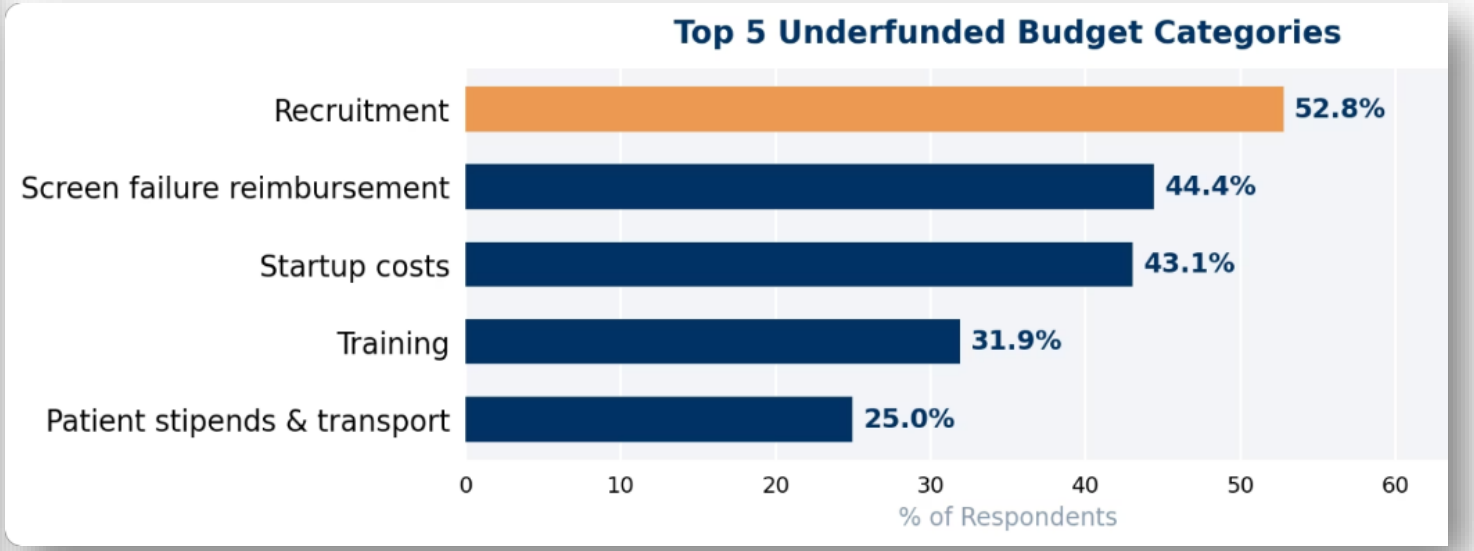
Budgets • Contracts • Payment Realities

Financial Pressures

SCRS
Society for Clinical Research Sites

Budget Adequacy: A Persistent Gap

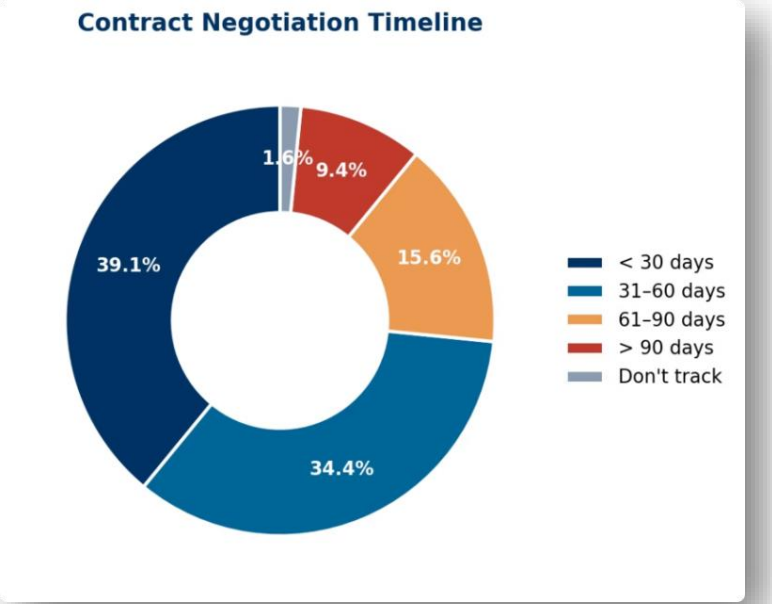


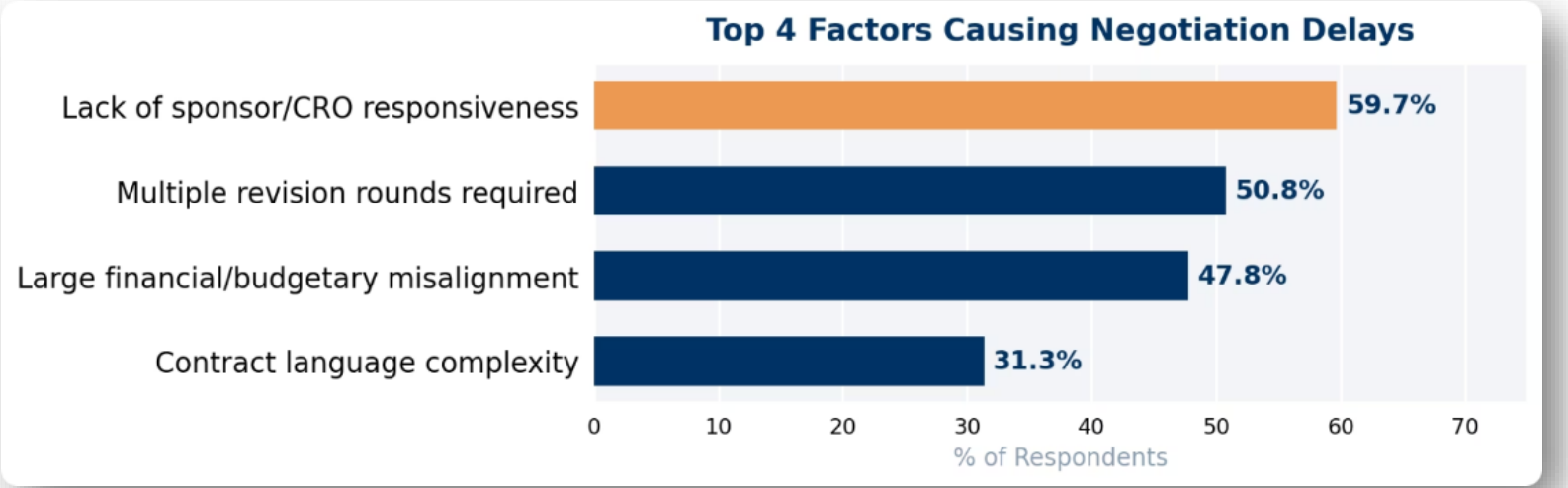


0% of respondents said budgets are generally adequate.

Only 21% saw improvement vs. 2024. Recruitment is the most underfunded category at 52.8%, followed by screen failure reimbursement (44.4%) and startup costs (43.1%). Sponsors are consistently underfunding the activities that most directly drive enrollment.

Contract Negotiations: Timelines & Causes

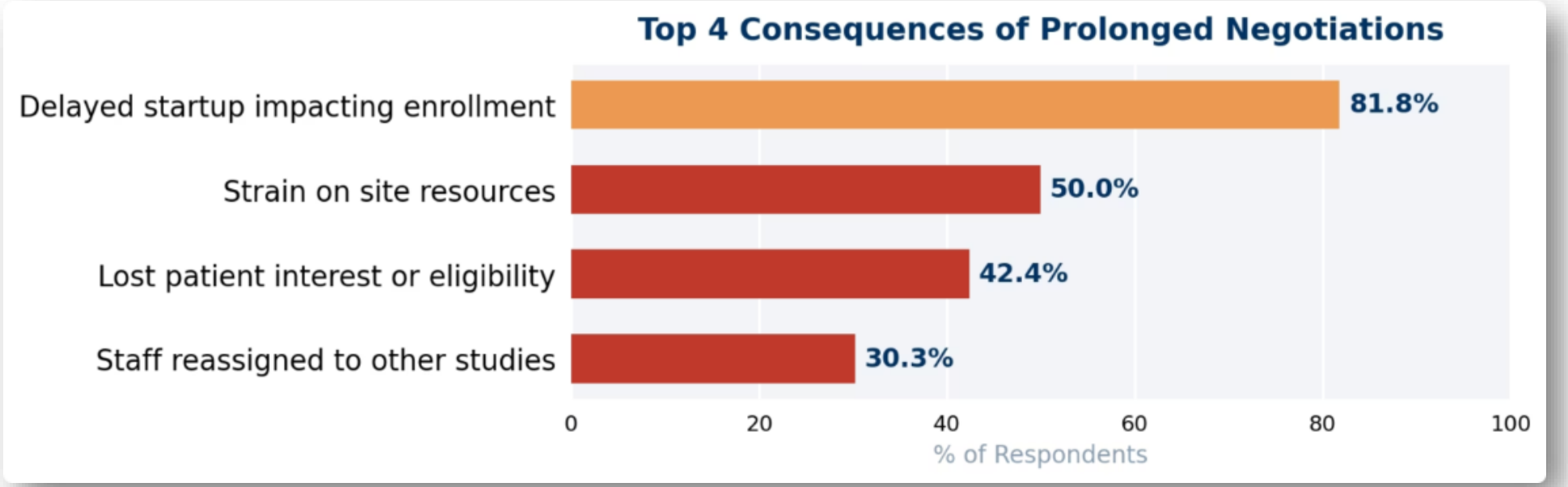




39% close in under 30 days, but 25% take 61+ days.

Sponsor/CRO unresponsiveness is the #1 cause at 59.7% — nearly double the next factor. The biggest delays are structural and sponsor-driven, not site-driven. Every week of delay has a direct cost to enrollment timelines.

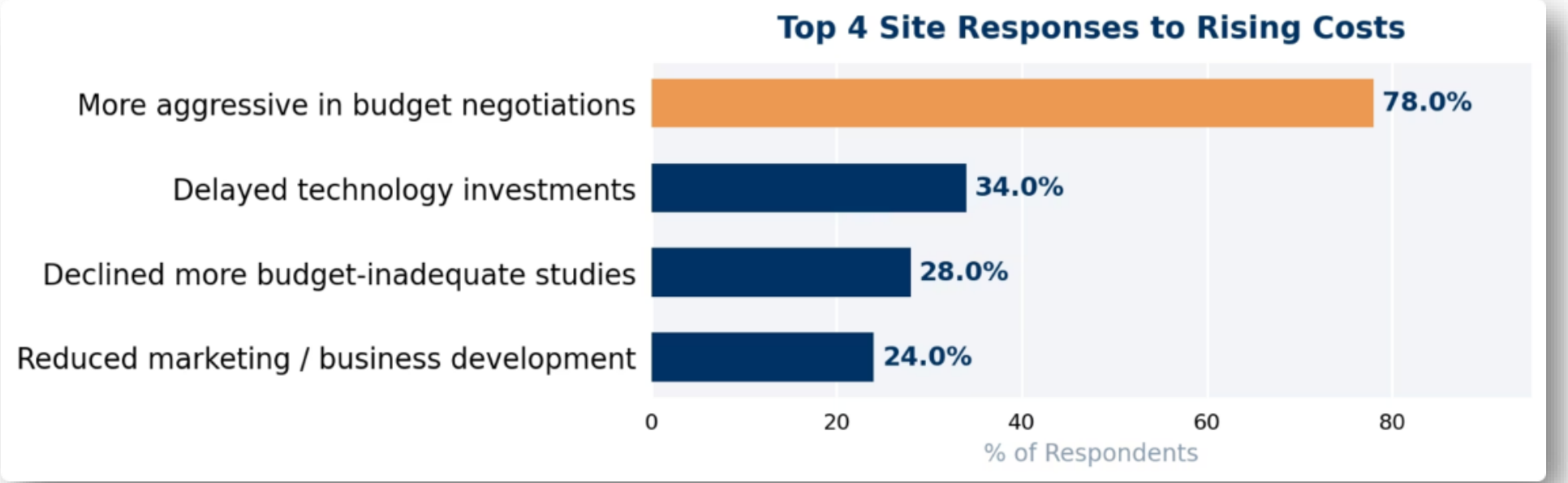
Consequences of Prolonged Contract Negotiations



81.8% experienced delayed study startup, impacting enrollment timelines — the highest single consequence rate in the entire survey.

42.4% lost patient interest or eligibility windows during the delay period. Prolonged negotiations don't just delay paperwork — they destroy clinical value that cannot be recovered once a patient window closes.

Site Responses to Rising Costs



78% of sites became more aggressive in budget negotiations — an essentially universal response to cost pressure.

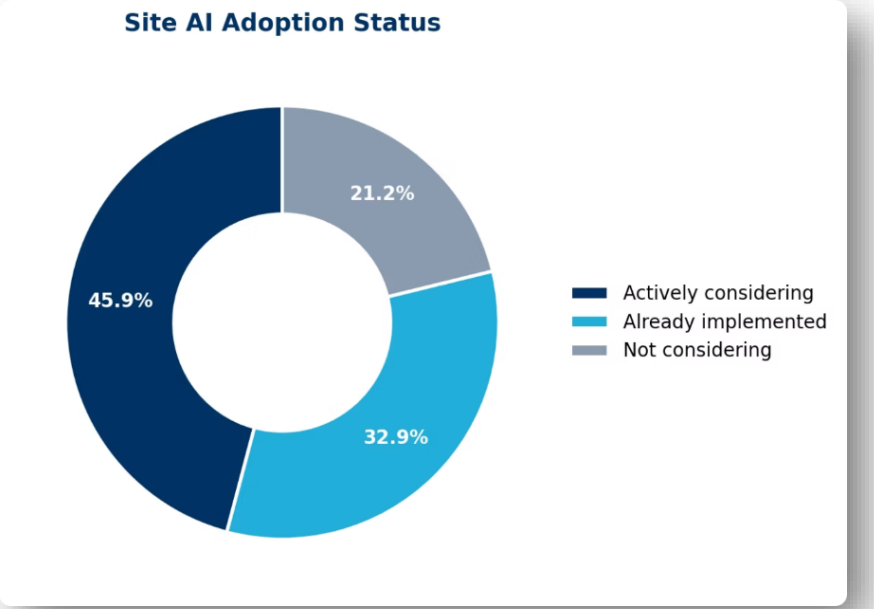
34% delayed technology investments and 28% declined more budget-inadequate studies. Rising costs are directly suppressing site innovation investment — the sites that most need to modernize are the ones least able to afford it.

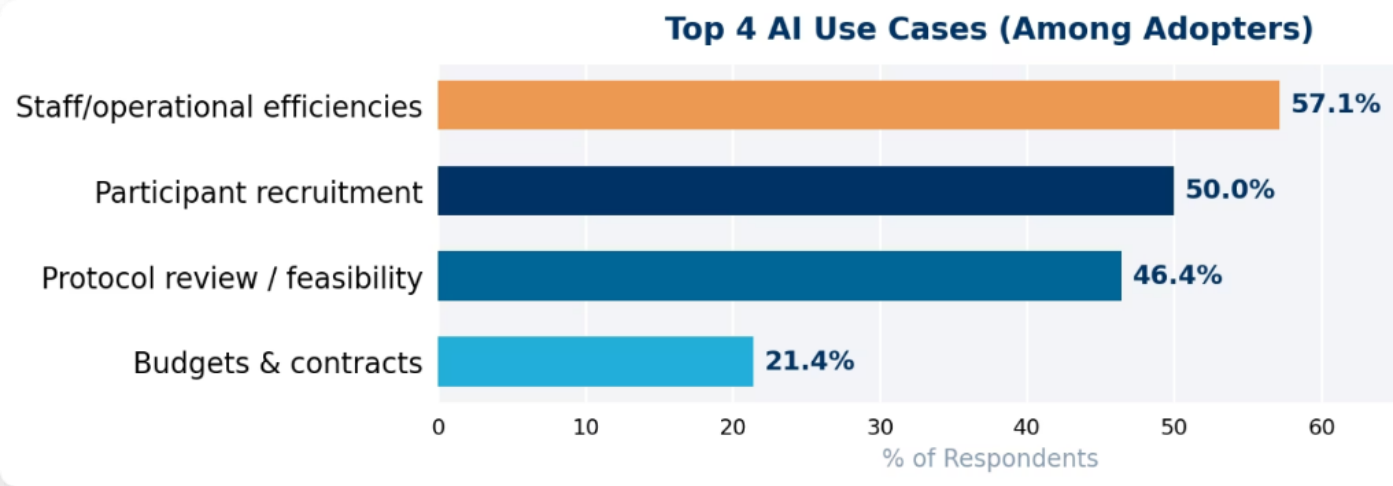
The Innovation Frontier for Clinical Research Sites

AI & Technology

SCRS
Society for Clinical Research Sites

AI Adoption at Sites: State of Play

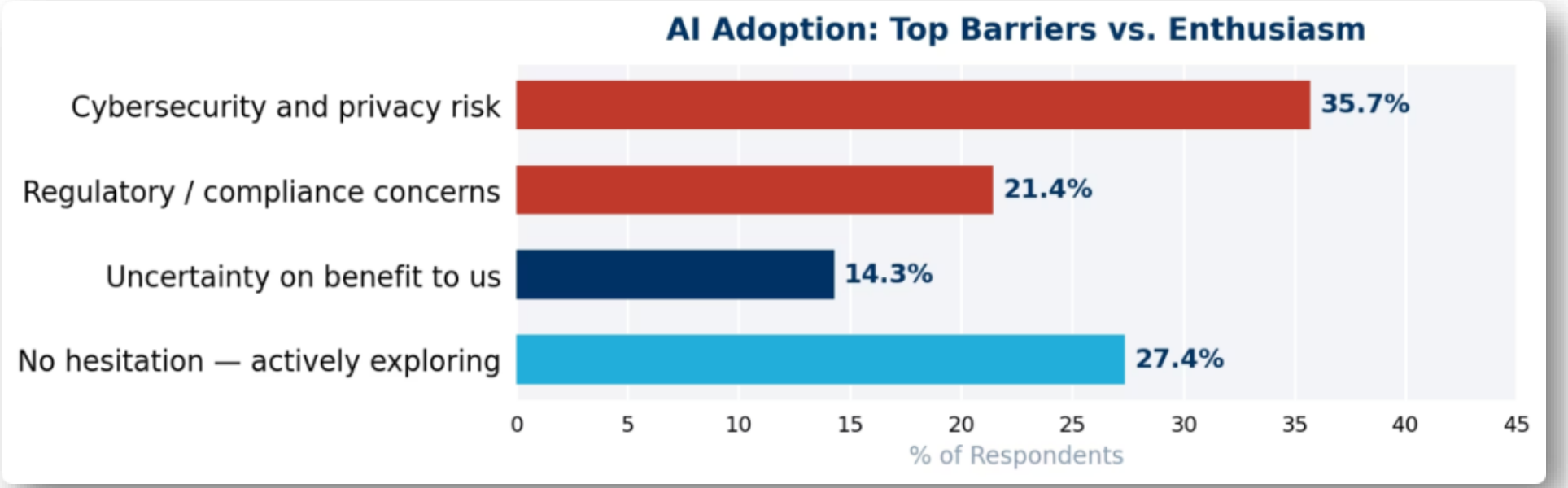




45.9% of sites are actively considering AI — the largest single cohort, larger than those already using it.

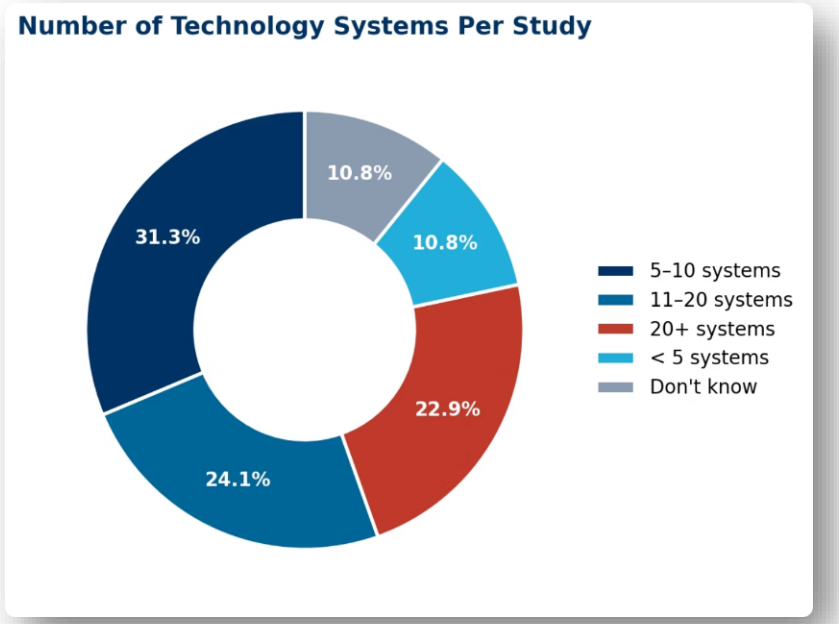
Among adopters, operational efficiency (57.1%), recruitment (50%), and protocol feasibility (46.4%) are the primary use cases. Sponsor-provided AI has almost no traction: only 3.6% of sites have deployed it. Sites are moving ahead independently.

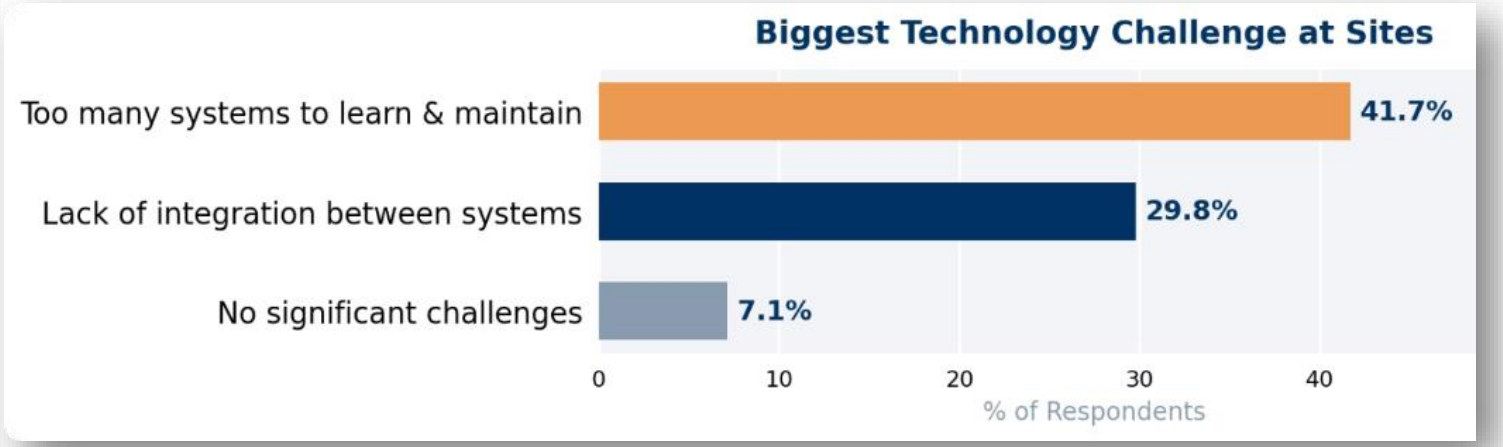
AI Adoption: Barriers vs. Enthusiasm



Cybersecurity and privacy risk (35.7%) is the dominant barrier — more than double regulatory concerns (21.4%). Critically, 27.4% of sites say they have no hesitation and are actively exploring AI. Both sides of the industry cite security as the primary barrier — pointing to a shared governance challenge. Industry frameworks and sponsor acceptance policies for site-owned AI tools would unlock the largest cohort: the 45.9% actively considering adoption.

Technology: System Proliferation & Integration Gaps

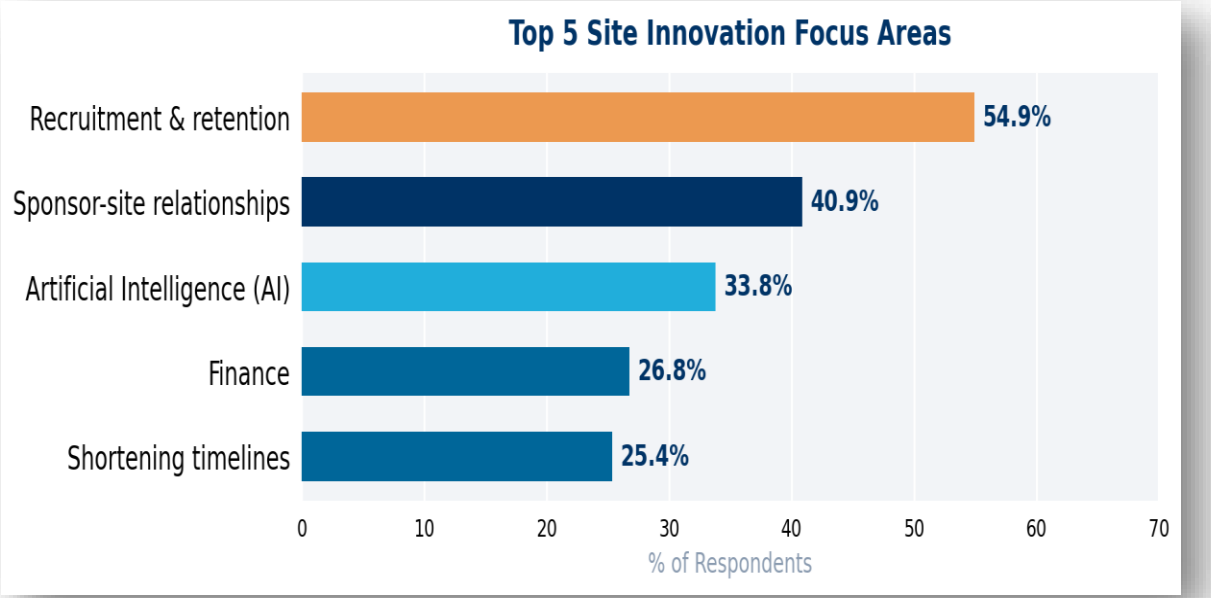


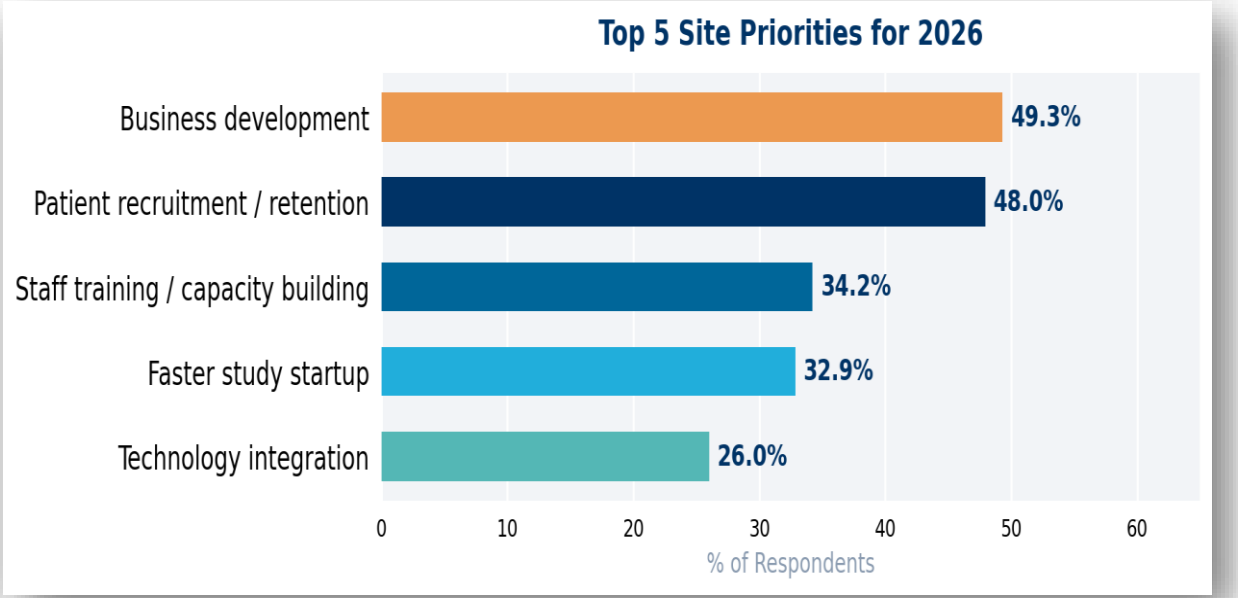


Only 10.8% of sites use fewer than 5 systems. 71% are managing 5–20+ systems per study.

41.7% cite 'too many systems to learn and maintain' as their top challenge. 29.8% cite lack of integration. 38.4% of sites list technology as 'more burdensome than helpful' as a pressing industry issue. The ask is not more tools — it is fewer, better-integrated ones.

Where Sites Are Innovating & What They Prioritize for 2026

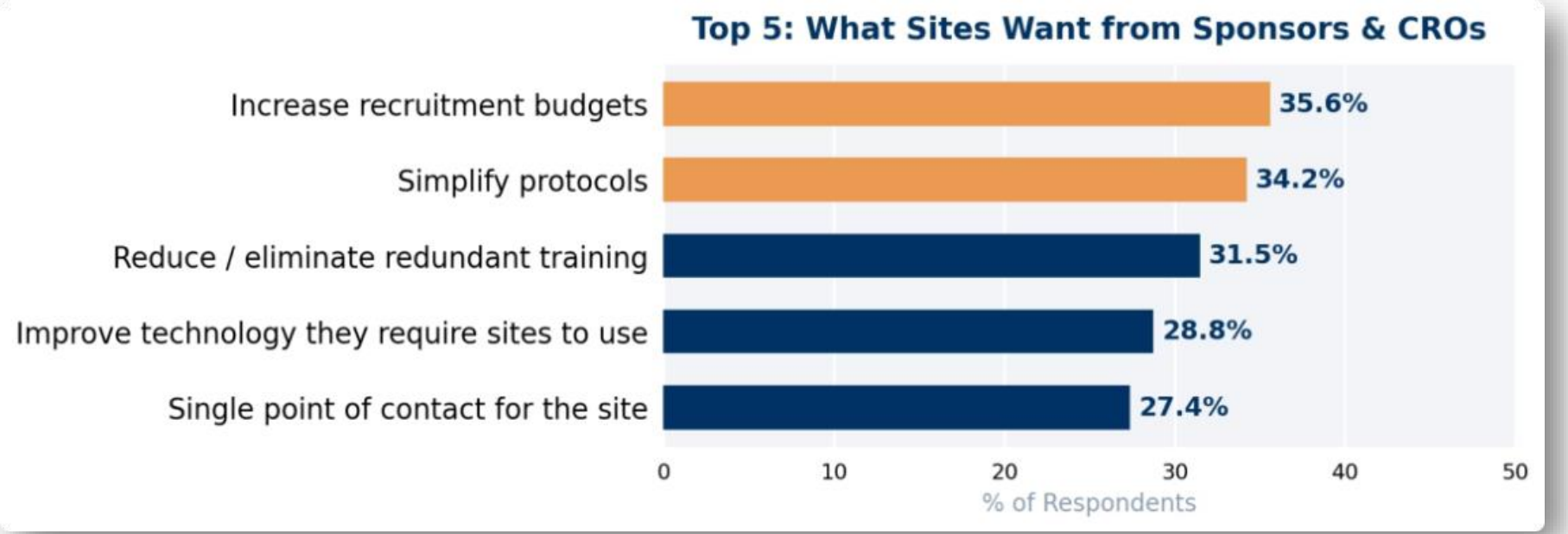




Recruitment and retention lead innovation focus (54.9%). AI ranks third at 33.8% — a signal that sites are making real budget and operational decisions around it.

Business development and patient recruitment top the 2026 priority list. Technology integration ranks 5th — underscoring that sites want to solve the integration problem, not just acquire more tools.

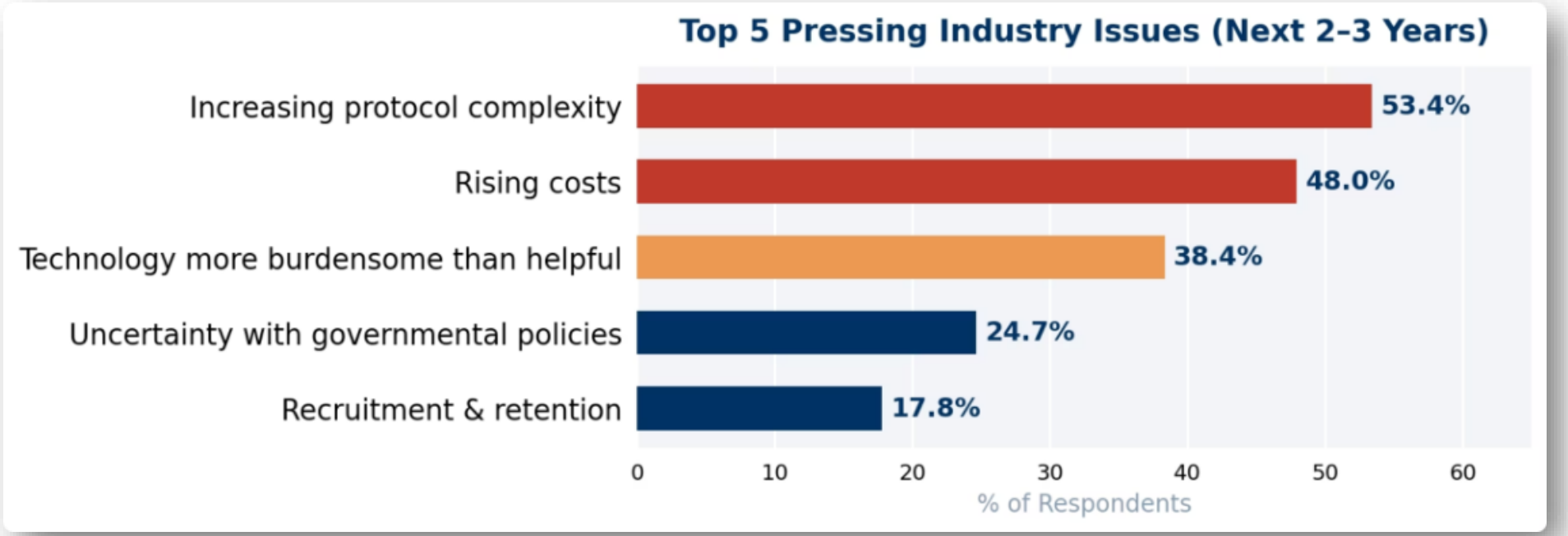
Top 5: What Sites Want from Sponsors & CROs



Increased recruitment budgets (35.6%) and simplified protocols (34.3%) top the list — directly reflecting the two biggest barriers to site performance identified throughout this survey.

Reducing redundant training (31.5%), improving required technology (28.8%), and providing a single point of contact (27.4%) round out the top five. Sites are asking for operational respect — streamlined requirements, reliable relationships, and tools that actually work.

Top 5 Pressing Industry Issues: Next 2–3 Years



Protocol complexity (53.4%) and rising costs (47.9%) are the two dominant systemic concerns — structural problems that no single stakeholder can solve alone.

Technology burden (38.4%) outranks staffing, recruitment, and regulatory complexity combined — a telling signal about where the industry's frustration is concentrated. Sites see technology as the most immediate unresolved challenge after protocol design and economics.