## Abstract

Despite the trend of increased workplace cultural competency and implicit bias training, clinical researchers nonetheless fail to adequately consider the barriers to minority participation in clinical research. Black, Indigenous, and Latino populations are disproportionally affected by health disparities, yet they remain critically underrepresented in clinical research. The purpose of this quality improvement project was to integrate a 6-week cultural competency educational program into a large clinical research setting to enhance minority participation in clinical research. This project used a pre/post design with a sample of 24 clinical staff involved in clinical research activities to evaluate the effects of the educational program. The measurements were based on the Stratis Health's Implicit Bias Quiz and Cultural Diversity Questionnaire for Nurse Educators (CDQNE-Revised). Descriptive statistics were used to assess the feasibility of integrating the program into the organization's onboarding training. Statistically significant improvements were exhibited in the post-implicit bias scores (Mdn = 0.25, z = 0.535, p = 0.593), while cultural competency was unchanged (Mdn = -34, z = -2.028, p = 0.043). Non-white and Spanish-speaking participants had higher cultural competency and implicit bias scores. The feasibility results were favorable, with participants supporting its integration into training to improve minority participation in clinical research.The educational intervention improved implicit bias awareness and knowledge scores but did not affect cultural competency scores. Based on feasibility results and organizational feedback, this project could serve as a foundation for future tools/guidelines to educate clinical research staff. To improve minority participants' recruitment, enrollment, engagement, and retention. More exploration and a larger sample size is is necessary to develop and adopt a standardized cultural competency educational tool.

Keywords: research, cultural competency, implicit bias, quality improvement, minority