

### Spectrum

Center for Clinical and Translational Research and Education

Research Participant Engagement Program

EngageParticipants@stanford.edu

June 2023

Stanford's Research Participant Engagement Program is supported by the Stanford CTSA Award Number UL1TR003142 from the National Center for Advancing Translational Science (NCATS), a component of the National Institutes of Health. PI: Ruth O'Hara



https://med.stanford.edu/spectrum/researcher-resources/participant-engagement.html

### **Problem Statement**

Majority of studies don't draw enough participants!



- Participant recruitment is one of the greatest challenges to successful clinical research. Stanford has needed tools and processes that can significantly increase participation while ensuring patient privacy and data security.
- Clinical trials also suffer from a lack of diversity and inclusion.
   Stanford is seeking ways to adequately represent diverse populations in clinical studies.



# Participant Engagement Team

**Katherine Connors**, Associate Director

Andrea Bolanos, Program Coordinator

Maya Berdichesky, Trial Innovation Network Hub Manager



John Maul, PEP Project Manager



Technology & Digital Solutions Stanford Health Care and School of Medicine

Sijo Thomas, Tricia Ning, Children's Research Informatics



Lucile Packard Children's Hospital Stanford

Faculty Advisors:

Aruna Subramanian



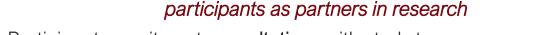
**Anisha Patel** 





# Research Participant Engagement Program

provide resources and tools... with a focus on engaging participants as partners in research









- Participant Engagement Platform (PEP) honest broker study invitations
  - Direct Email, Children's Epic MyChart, Postal Mail, and now... SHC Epic MyHealth



Beyond Stanford outreach: social media resources, tabling events, and our Stanford Research Registry – REDCap database of ~11K research volunteers



**Community engagement** guidance and referrals to our Office of Community Engagement, Community Advisory Board (CAB) for Clinical Research, and Maternal & Child Health Community-Engaged Research



Guidance about other resources at Stanford and externally, such as the CTSA Trial Innovation Network

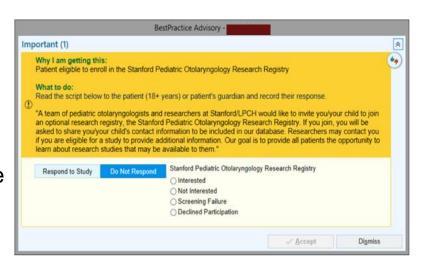
See resources including "Recruitment Strategizing Worksheet" here:

https://med.stanford.edu/spectrum/researcher-resources/participant-engagement/engagement-tips-and-resources.html

# Additional Children's Epic Patient Engagement Resources

### Best Practice Alerts (BPAs)

 Pop-up appears for Provider during patient visit, indicating patient may be eligible for a study.
 Provider notifies Patient and if Patient interested, a MyChart message (perhaps with screening link) can be sent, and/or Provider can share a QR code appearing in the Alert.



### "Bulk MyChart" study invitations

- Study invitation is sent from Clinic/Provider (vs honest broker) to all likely eligible patients within clinic
  - E.g.: "Sincerely, Dr. <name> and your Pediatric Diabetes Care Team"
- Requires documented clinic leadership endorsement
- May include PCHA/Tri-Valley patients



### IRB Recruitment Guidance

https://researchcompliance.stanford.edu/panels/hs/policies/guidances
 See "General guidance on participant recruitment"

		1
Stanford University		GUI-33
HRPP Policy	Recruitment	001 00
	Reclutiment	1/2
Guidance		1/2

### **Initial Contact with Potential Participants**

- When there has been no previous contact with a potential participant, care must be taken to ensure that
  the potential participant understands how the researcher acquired private information about them, and
  that the information was obtained in a legitimate manner. For example, if the participant was referred to
  the researcher by the individual's physician or other treating health care professional, the researcher can
  cite that referral as a reason for the contact.
- Extreme caution should be exercised when potential participants are identified through chart reviews or
  through STRIDE under a Waiver of HIPAA Authorization for recruitment, as these avenues to PHI are less
  familiar to participants, and can lead to complaints to the Privacy Office when misconstrued as illegal use
  of PHI. In these cases, the researcher might first consider sending a letter to participants, signed by a
  health care provider or hospital department that would be recognizable to the potential participant, and
  providing a telephone number or other means that the potential subject can use to verify that the study
  constitutes Stanford research.

### Outreach Methods – What is Honest Broker

	Pros	Cons
<ul> <li>Current Methods</li> <li>Pl/Physician contact</li> <li>Physician referrals</li> <li>Clinic visit</li> <li>Flyers</li> <li>Community Events</li> </ul>	Often promotes physician- patient relationship, trusted advisor, coordinator of care	<ul> <li>Time intensive for physicians and study team</li> <li>Not scalable for large outreach efforts</li> <li>Not applicable for all studies</li> </ul>
Additional Method –  "Honest Broker"  • An honest broker (trusted 3rd party) conducts outreach on behalf of the study team/investigators	<ul> <li>PHI not shared with study team until patient expresses interest; Privacy and Compliance</li> <li>Service provided following SOP and recruitment best practices</li> <li>Access to data and tools support scalable, large outreach efforts</li> </ul>	Does not leverage treating relationship

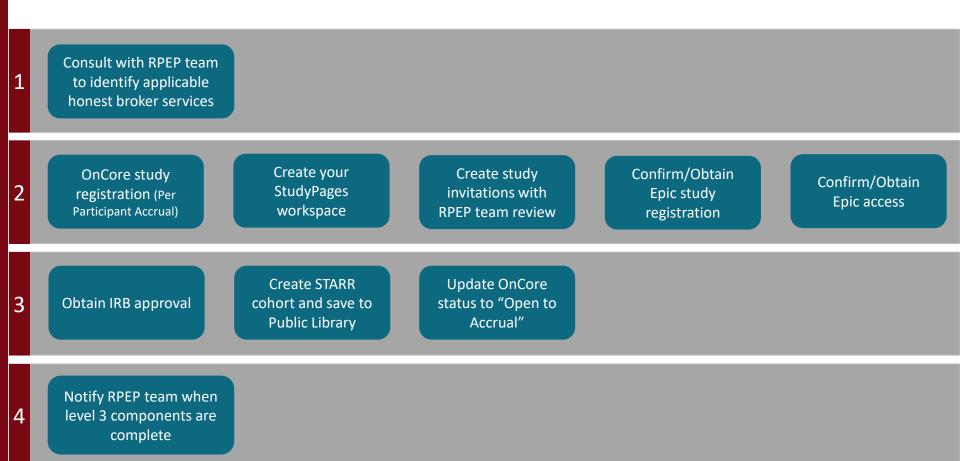
# Participant Engagement Intake

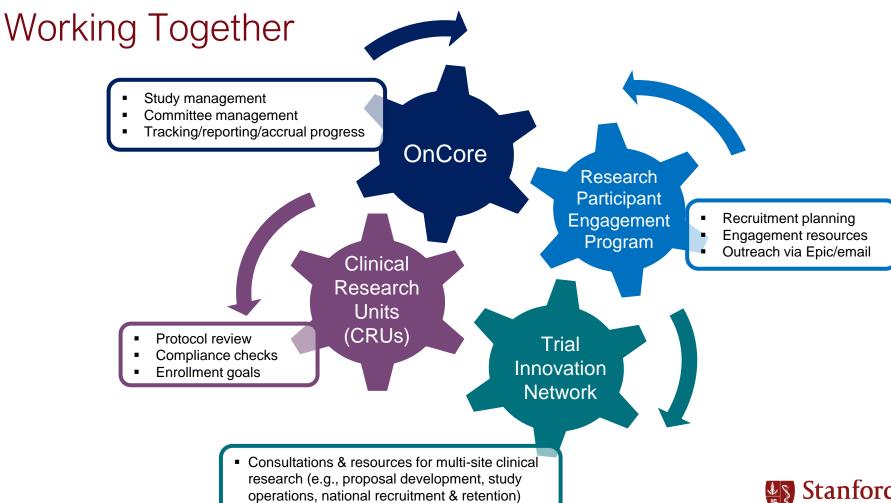
- Contact <u>EngageParticipants@stanford.edu</u>
- Review:
  - Study synopsis, IRB # if available
  - Inclusion/exclusion criteria
  - Timeline; Enrollment goal and status
  - If applicable, recruitment strategies tried and recruitment materials/language
  - Onboarding capacity = # potential participants study team can screen/schedule in 24-48 hours
  - Other relevant information, such as compensation
- Discuss recruitment strategies and available services.
  - Confirm OnCore registration Per Participant Accrual
  - Provide guidance for IRB modifications, STARR cohort creation, Epic registration





### Study Team Order of Procedures





Stanford











### **DEMOGRAPHICS**

Current Age



Race









### **CLINICAL EVENTS**



Procedure



Laboratory Test



Drug Ingredient/Brand Drug Class



Clinical Documents



Encounter **Admission** 



Vital Status







### **BIOSPECIMENS**

Precision Health Biobank

# Stanford Research Repository (STARR) Tools

- https://med.stanford.edu/starr-tools.html
- Stanford Medicine's approved resource for working with clinical data for research purposes
- Pulls EHR data from both hospitals and ancillary clinics daily
- The home of two web tools:
  - Cohort Discovery
    - Pre-IRB, de-identified data, patient counts based on criteria, including key words from clinical documents/notes
  - Chart Review (self-provisioned or custom with Research Informatics Center (RIC)) Requires IRB/Privacy approval
- Can only outreach to own patients\*. Enter honest broker!

# Participant Engagement Platform (PEP)

 Our PEP workflow identifies potential participants by applying the study inclusion/exclusion criteria to Stanford's STARR database.



- If study team wishes to use Epic MyChart/MyHealth, Direct Email, and/or Postal Mail, PEP determines best method of contact based on participants' Epic (MyChart/MyHealth account/usage), email, or postal mail address availability.
- Participant Engagement team serves as the Honest Broker through the PEP
- PEP tracks age/race/sex metrics. We can modify outreach to increase representation.





# Better Data for Diversity, Equity, Inclusion

We Ask Because We Care: A Stanford Medicine initiative to capture and include more precise demographic questions and educate patients, providers, and staff on why we ask, specifically as they relate to:

Phase 1 (FY22)

Race, Ethnicity, Preferred Language

Phase 2 (FY23)

Sexual Orientation and Gender Identity

Phase 3 (FY23)

Disability Status and Accommodation Needs

More inclusive, granular data to support informed cohort evaluation and study design



# New PEP feature: Demographic Optimization

- To help diversify participant populations, target percentages for race, ethnicity, and sex categories can be entered into PEP.
- When preparing outreach, PEP will automatically continue to prioritize the underrepresented demographics, recalibrated for each wave, until the percentage goals are met.
- Demographics to be tracked at the current time are:

Race	Ethnicity	Sex
<ul> <li>White</li> <li>Black/African American</li> <li>Asian</li> <li>Native American/Alaskan</li> <li>Pacific Islanders</li> <li>Two or more/Other</li> </ul>	<ul><li> Hispanic</li><li> Non-Hispanic</li><li> Unknown</li></ul>	<ul><li> Male</li><li> Female</li><li> Other/Unknown</li></ul>

Additional categories such as age ranges, pregnancy status, disabilities, SOGI (sexual orientation and gender identity), and comprehensive racial breakdown will be added in next phases.

### Participant Engagement Outreach



### Participant Engagement Platform (PEP) honest broker services

Stanford patients (STARR)

- 1. Direct Email using Qualtrics for studies including healthy controls Feb 2020
- 2. Epic MyChart (Children's) secure portal Mar 2020
- 3. Epic MyHealth (SHC) secure portal Sept 2022
- 4. Other Honest Broker services:
  - Postal Mail May 2020
  - Phone Calls ("Deputized" Honest Broker for COVID) May 2021
  - Text Messages 2024

Beyond Stanford

- 1. Research Registry Apr 2020
- 2. Social Media



<sup>\*</sup>Registry is an "opt-in" model

### Participation Engagement Platform workflow



- Pulls Cohorts from Stanford's Electronic Health Record research database (STARR)
- Validates study is Open to Accrual in OnCore prior to outreach
- Screens outreach against on study participants in OnCore and from a global opt-out list to prevent inappropriate outreach
- Identifies best outreach channel (Epic MyChart/MyHealth, Direct Email, Postal Mail)
- Generates system friendly participant listing to be used by outreach software (e.g. Qualtrics)
- Tracks the outreach progress for studies



Stanford Medicine Research Office <no-reply@stanford.edu>
Help with new eye research

To Katherine J. Connors

SM



A note from the team: You are receiving this message because you or your family is cared for at Stanford HealthCare or Stanford Children's Hospital. This message comes from the Stanford's Research Participation Program. Stanford University's Institutional Review Board (IRB) approved this way of finding people to join the study. The IRB is a group that protect the rights and welfare of people in research studies. This message meets state and federal rules for research studies. Your contact information has not been shared with any doctor or member of the research team.

We are writing to invite you to participate in a new research study. We are looking for participants 18 years and older who have been diagnosed with glaucoma (or possible glaucoma), <u>as well as</u> patients who have no glaucoma or other significant eye diseases for comparison.

#### Name of Project:

Glaucoma Pathways

#### What we are trying to do:

The study is focused on finding new ways to detect and monitor glaucoma and its treatments.

#### Who is in charge of the project:

Dr. Jeffrey Goldberg will be in charge of this project. Dr. Goldberg is a Professor and Chair in the Department of Ophthalmology at Stanford Medicine. He is very excited to continue to partner with families and individuals like you.

#### What we would need from you:

- One 1-2 hour visit at Byers Eye Institute and the Spencer Center for Vision Research (Palo Alto, CA), which may include:
  - vision exams
  - o non-invasive pictures of your eyes
  - non-invasive brainwave recording
  - If you have done any of the above as part of your recent clinical care, you do not have to repeat them.

No treatment or medications will be given as part of this study.

#### What you get for your time:

If you are eligible, upon completion of your visit, we will reimburse you \$20 per hour.



#### Where you can learn more:

If you would like to learn about other research studies, please visit the <u>Stanford Clinical Trials Website</u>. We look forward to talking to you soon.

Sincerely.

The Stanford Research Participation Program, on behalf of Dr. Jeffrey Goldberg

If you would prefer not to receive email correspondence from Stanford's Research Participation Program, you can <u>Unsubscribe</u> or contact us at <u>joinresearch@stanford.edu</u> or by phone 650-497-3612. For Participant's rights questions, contact 1-866-680-2906. Reference IRB#: 38931. Invitation email generated on December 9, 2020 12:47:48 PST

#### "Email tickler" Notification of MyChart message:

Sender: DONOTREPLY@STANFORDCHILDRENS.ORG
Email subject: New Research Opportunity

Hello <first name last name>,

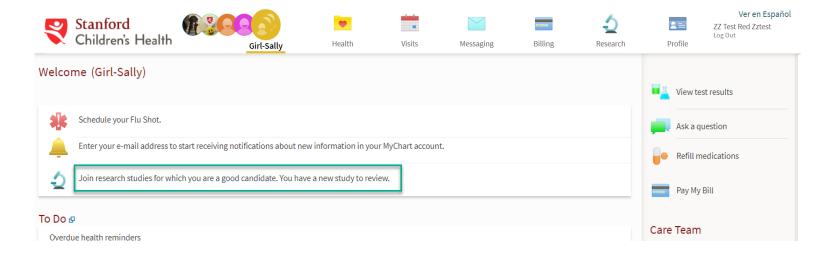
["You have"] a new message regarding a research opportunity. Please respond by logging into your MyChart account. If you do not want to receive emails like this in the future, you can update your participation preferences after logging in.

Healthy regards,

Stanford Children's MyChart Online Care Team

<LOG IN NOW>

\*\*This is an automated message. Please do not reply to this message.\*\*\*











Visits



Messaging



Billing







Log Out

Ver en Español ZZ Test Red Zztest

### Research Studies

#### Welcome!

#### Stanford Medicine MyChart Research

Research studies help medical teams discover new treatments for patients.

The following Stanford Medicine studies may be of interest to you or related to your health and health care. These are being suggested to you based on an automated search. Your contact information has not been shared with any research teams.

If you have questions, you can contact the Research Participation Team at joinresearch@stanford.edu.

Please select your preference for receiving MyChart research invitations from the Research Participation Team:

### Participation Preferences ^

May we cor	ntact you about opportunities to participate in research studies?
You	can choose how to be contacted in Notifications.

OK to contact

Do not contact

Undecided

### Your Studies

Based on your medical record, you have been identified as potentially eligible for these studies. Click "I'm Interested" to notify the research team that you may want to participate in the study.

### Learning and Memory Study

I'M INTERESTED

NO, THANK YOU

Can learning and memory contribute to the persistence of the pain process?...details

Dear [Parent/Guardian of <Child's Name>].

We are excited to tell you about a new research study. We are looking to partner with families who have children that are between 10 and 24 years.

### **Participation Preferences**

Your preferences will help us let you know about research opportunities that might interest you. Your care team might discuss additional opportunities with you.

#### Related Links



Specify how you would like to receive MyChart notifications for research

# Response options (Direct Email or Epic MyChart)

- 1. "Yes, I'm interested" → participant contact preference passed on to study team for follow-up within 24-48 hours
- 2. "No, thank you" → recipient will no longer be contacted about **this** study
- 3. "Unsubscribe" → recipient will no longer be contacted via Research Participation for **any** study
- 4. No response → may be re-invited a max of 2 times, 2+ weeks apart (Direct Email only)



# Beyond Stanford: Stanford Research Registry

The goal of the Research Registry is to support Stanford research participant engagement, originally with a focus on COVID-19 studies, but designed for all types of studies.

Population: focused on Bay Area beyond Stanford, and open to everyone.

http://goto.stanford.edu/StanfordRegistry

Launched April 2020

As of June 2023: >10,800 registrants

\*\*Now also available in Spanish\*\*

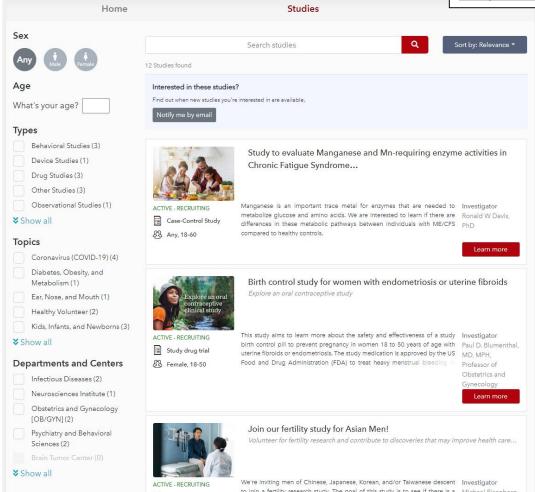


In 2020, the "COVID Long Haul Study" documenting persistent symptoms of COVID-19 infections recruited >90 participants using the Registry. In 2021, the Pfizer pediatric COVID vaccine trials recruited >2,000 families using the Registry.



https://studypages.com/stanford

Researcher Login





### Study Page



### 100% At-Home Clinical Study to Help Patients with Atrial Fibrillation Stay Protected on their Blood Thinner Medications

Stanford University





"We're looking for people that are currently taking a blood thinner for Atrial Fibrillation receive a free wireless BP cuff & EKG machine!"

Take survey to see if you qualify

Share stu













Rajesh Dash MD PhD, Director of SSATHI & CardioClick Stanford Medicine View profile

📇 Age: 55 years and older

9♂ Gender: Any

Keywords: Atrial Fibrillation, AFib, AF, Telehealth, At home study, remote study, home devices, heart rhythm study, Blood thinner, Anticoagulation

Type: At-home clinical study

Target: 100 Participants

#### Description

Are you taking a blood thinner medication for Afib (atrial fibrillation) or AFlutter (atrial flutter)?

Stanford University researchers are conducting a 100% at-home clinical study to help patients with atrial fibrillation stay protected on their blood thinner medications.

The goal of the study is to help you keep track of your blood thinner medication and help you learn more about your condition. Participate in this exciting new study without ever having to leave your home!

Using a study app plus a wireless home EKG sensor and blood pressure cuff, and regular app-based communications, we will help you understand your condition

### 

Study duration and period

This study takes approximately 6 months

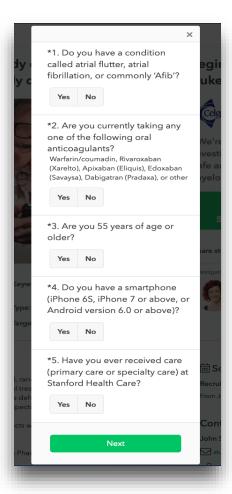
#### Contact

Jasmine LaCoursiere

jaslacou@stanford.edu

**3** (650) 800-8023

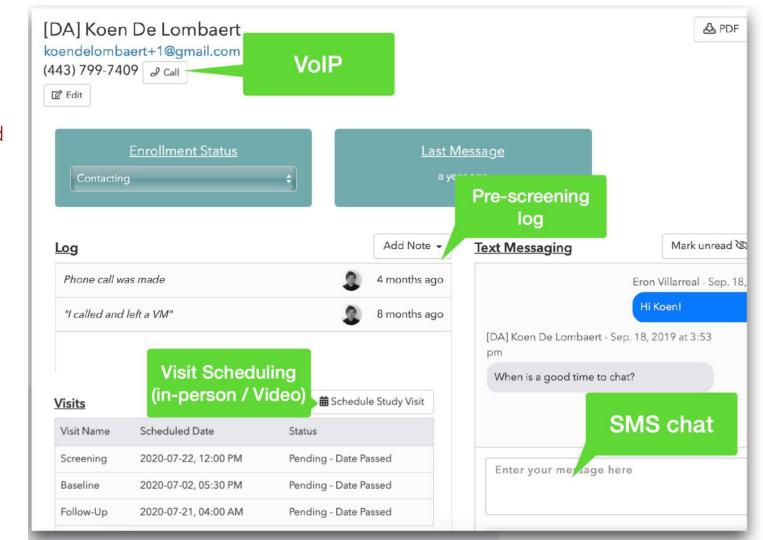
### Pre-screen





### StudyPages Workspaces

for participant management and communication



# Community Outreach & Engagement

- Connect with our Community Engagement colleagues for recommendations on building community partnerships
  - Is this for simply advertising a study or working more in partnership?
  - "Best to build a partnership when you're not asking for something"



https://app.smartsheet.com/b/form/7d48678c125c418fbecd9ca2b61b2995

- The Stanford Community Advisory Board (CAB) aims to:
  - enable community members to participate in research planning and dissemination of findings.
  - provide feedback to researchers on recruitment strategies, including reaching specific populations.

### Contacts:

<u>communityengagement@stanford.edu</u> (adult) <u>dongmei@stanford.edu</u> (maternal child)





# Engaging Underrepresented Minorities (URMs)

<u> </u>					
Barriers to participation among racial/ethnic minorities	Potential solutions to overcome barrier				
Logistical					
Lack of awareness of clinical trials	<ul> <li>Recruit in community locations in partnership with local agencies</li> <li>Patient navigators can increase awareness of clinical trials</li> <li>Providers and staff can ensure that racial/ethnic minority patients are aware of clinical trial participation options</li> </ul>				
Costs associated with participation in trials	<ul> <li>Plan for adequate compensation to overcome logistical barriers</li> <li>Communicate research related costs early and clearly</li> </ul>				
Psychosocial					
Lack of trust in the Stanford healthcare system, and medical research in general	<ul> <li>Publicly acknowledge and apologize for past wrong doings</li> <li>Patient navigators can increase trust</li> <li>Diverse healthcare delivery staff</li> <li>Extremely clear consenting process is important</li> <li>Cultural competency training related to racial/ethnic minority participation in clinical trials</li> </ul>				

# Engaging Underrepresented Minorities (URMs)

Barriers to participation among racial/ethnic minorities	Potential solutions to overcome barrier				
Psychosocial (cont'd)					
Fear of risks/adverse effects associated with being in a trial	- Extremely clear communication and consenting process is important				
Structural	tructural				
Language barriers (study materials, study staff, etc.)	<ul> <li>Ensure accessibility related to language for all study materials and activities</li> <li>Provide better access to, and expansion, of hospital interpreter services</li> </ul>				
Exclusion criteria that disproportionately limit eligibility among racial/ethnic minority patients	- Examine exclusion criteria with a disparities lens to identify criterion that may limit racial/ethnic minority participation				

Adapted from Stanford's Office of Community Engagement

# Trial Innovation Network (TIN)

A national network within the CTSA Program that provides support for multi-site clinical research

Multi-site = 3 or more sites

- Expert methodological and logistical guidance
- Competitive funding advantage
- Access to the entire CTSA network





# Trial Innovation Network (TIN)

TIN offers investigators consultations and resources for multi-center clinical research including:

- Protocol development
- Community engagement studios
- Recruitment planning
- Feasibility assessment
- Recruitment materials
- EHR-based tools & resources
- Trial budgeting guidance



393 Total Proposals
Submitted

76 Therapeutic
Areas Represented





61 CTSAs Submitted Proposals

20 NIH Institutes and Centers Engaged



# Trial Innovation Network (TIN)

### Two ways to get involved in the TIN:

- The local TIN Liaison Team will connect investigators with multi-site clinical trials initiated by other network sites
- 2. Stanford investigators may submit proposals for multi-site trials to the TIN



### Contact:

Stanford TIN Liaison:

Maya Berdichesky, <u>mayab2@stanford.edu</u>

### To learn more:

https://med.stanford.edu/spectrum/researcher-resources/trial-innovation-network.html https://trialinnovationnetwork.org



### Research Participant Engagement Program Expands

- In response to increased demand from study teams and to better serve the greater Stanford research community
- To increase opportunities to participate in research for people of all backgrounds
- Our model includes one-hour free consultations and an array of services for study teams, including Direct Email, Epic MyChart, Postal Mail, and Stanford Research Registry outreach.
- Visit our website for Standard and Add-On Services and their associated costs, as well as for Participant Engagement Tips and Resources and a "How to Plan a Recruitment Budget" template.



# How to Plan a Participant Recruitment Budget

- Staff effort and costs associated with participant recruitment almost always underestimated
- Incorporating sufficient funding into grant proposal budget is essential for attaining enrollment goals
- If you haven't already, brainstorm using our <u>Recruitment Strategizing Worksheet</u> to get started.

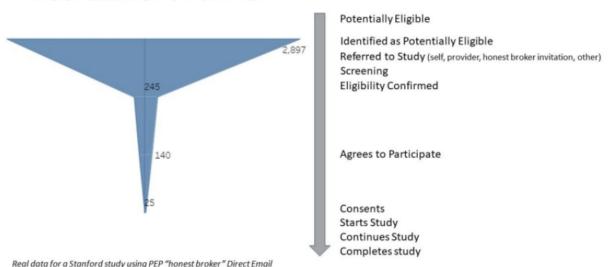
### For planning your budget, consider:

- Study population: Is the pool of eligible participants large or limited? Stanford patients or beyond Stanford?
  - For large participant populations, consider broad approaches, such as social media, newspaper ads, and posting flyers in high visibility areas. Our Stanford Research Registry or Direct Email "honest broker" outreach may also be a good fit.
  - For highly specific participant populations, consider budgeting for more staff time to conduct chart reviews, clinic recruitment, and outreach to relevant patient advocacy/support groups.
     Our Epic MyChart "honest broker" outreach may also be a good fit.

# How to Plan a Participant Recruitment Budget (cont'd)

- Estimated Eligible Rate: How many people will you have to screen to identify eligible participants?
  - Recruitment is always harder than anticipated. If you estimate a 6:1 screening to enroll rate, budget for 10:1. Consider the "Recruitment Funnel" below. For example, if your enrollment goal is 100 participants, how will you engage 1,000 potentially eligible participants?

### Recruitment Funnel





# Participant Engagement Budget Planning Template

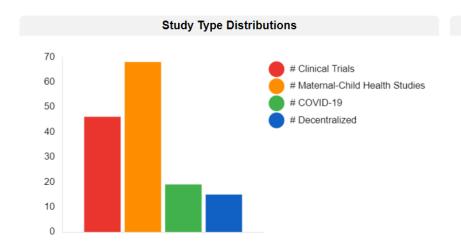
	Unit Cost (e.g. per		Effort					
Recruitment Method	print, week, letter)	Number	(hours)	Total Cost	Notes			
		Stanford p	atients	1	طباه ما المراه م المراه التي المراه المراع المراه المراع المراه المراه المراه المراه المراه المراه المراه المراه المراع المراه المراع المراه المراه المراه المراه المراه المراه المراه المراه المراع المراه ا			
PI invites own patients					At patient visits? Individual MyHealth messages? Letters? Phone Calls?			
PI-Provider co-invitations					Using STARR Chart Review and/or PI network?			
PEP "honest broker" Direct Email								
or Epic MyChart (up to 6 waves)	\$704- \$1,799	1		\$704- \$1,799				
PEP "honest broker" Postal Mail								
(1 wave)	\$454- \$908	1		\$454- \$908				
Flyers/brochures/postcards for					Obtain clinic leadership endorsement			
clinic waiting rooms (\$/print)					and document this in your IRB protocol			
		Beyond St	anford	1				
Stanford Research Registry (up to					Ideal for healthy volunteers and common			
2 waves)	\$386- \$772	1		\$386- \$772	conditions			
					Consider Facebook, Instagram, Twitter,			
Social Media ads (\$/week)	\$50	24		\$1,200	others			
Flyers (\$/print)	\$0.64	200		\$128				
Reach out to local patient								
support/advocacy groups								
Craigslist/Nextdoor study listing					Nextdoor could be free or paid			

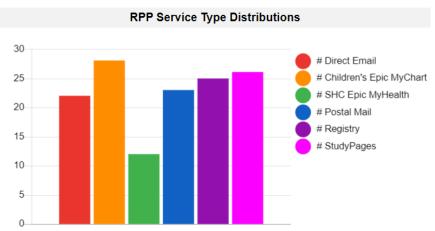
# Participant Engagement consults



185
Total Initial Consults
Aug 2019 - June 2023

(SHC MyHealth launched Sept 2022)







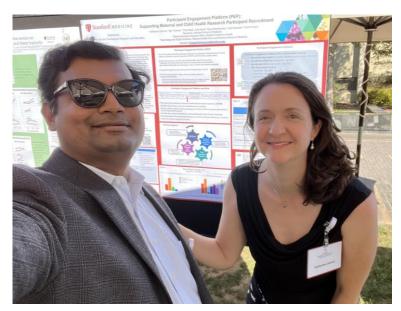
# PEP, BPAs, Research Registry, and StudyPages Per Channel Totals

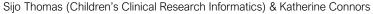
As of May 2023

	# Studies	# Invitations	# Interested	% Interested	% Interested Range	Date Launched	
Direct Email	12	92,824	1,578	1.7%	0.1 - 7.7%	Feb 2020	
Children's Epic MyChart	26	43,741	1,487	3.4%	0.6 - 21.4%	Mar 2020	
Postal Mail	17	7,005	154	2.2%	1.0 - 31.6%	May 2020	
SHC Epic MyHealth	8	12,475	337	2.7%	1.1 - 10.3%	Sep 2022	
PEP Total (unique studies)	46	156,045	3,556	2.3%			
Children's Epic BPAs	3	5,805	1,444	24.9%	22.8 - 38.5%	May 2020	
Stanford Research Registry	27	21,275	3,270	15.4%	0.2 - 66.7%	April 2020	
SRR- not COVID related	22	14,311	1,107	7.7%			
SRR- COVID related	5	6,964	2,163	31.1%			
StudyPages	89	Views/Clicks:	Sign-ups:	Of Views:		lan 2019	
StudyPages	03	274,587/16,025	13,127	4.8%		Jan 2018	

# Thank you. Questions? EngageParticipants@stanford.edu Research Participant Engagement Program









Center for Clinical and Translational Research and Education