

SWAT 111: Staff training to improve participant recruitment into surgical randomised trials

Objective of this SWAT

To evaluate the feasibility of undertaking a SWAT of a recruitment training intervention for staff recruiting participants into surgical trials, across multiple host trials, to answer:

1. Can we recruit multiple surgical host trials to undertake the training SWAT simultaneously?
2. Can we enrol recruiting staff to the SWAT and follow them up?
3. Are recruiting staff in the intervention group likely to attend the face-to-face training course?
4. Is the training intervention acceptable?
5. Does the training impact staff confidence with RCT recruitment?
6. Can we collect recruitment data?
7. What is the likely impact of the training on recruitment rates?

Study area: Recruitment

Sample type: Participants

Estimated funding level needed: Medium

Background

Fewer than 50% of randomised trials recruit to target and those evaluating surgical interventions are especially challenging. Training trial recruiters was identified as the top priority topic for recruitment research by the Directors of UK Clinical Trials Units, but there is very limited evidence-based training for staff recruiting patients into surgical trials.[1,2]

The University of Bristol's Qualitative research integrated within Trials (QuinteT) team[3,4] have developed a one-day ConDuCT-II training course for staff recruiting into surgical trials. This training looks promising for increasing confidence with recruitment, raising awareness of hidden challenges, and impacting positively on recruitment practice[5]. To test the intervention, surgical trials recruiting participants will be invited to be host trials. Site staff (surgeons, nurses and allied health professionals) recruiting participants to the host trials in hospitals will be asked about their interest in attending a training workshop.

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Interventions and comparators

Intervention 1: Offer of face-to-face training, provision of a 'key tips' document for optimising recruitment into surgical RCTs, and a link to an online recruiter training video (GRANULE - GeneRAtiNg StUdent Recruiters for Surgical TrialS,) also developed by QuinteT team in collaboration with the University of Birmingham.

Intervention 2: No special training (i.e. continued usual recruitment practice; control group).

Index Type: Method of Recruitment, Staff training

Method for allocating to intervention or comparator

Randomisation

Outcome measures

Primary: Recruitment of multiple surgical host trials simultaneously

Secondary: Percentage of staff randomised; numbers of staff attending recruitment training; acceptability of the training workshop; staff confidence in recruiting; collection of screening and recruitment data; and recruitment rate

Analysis plans

Baseline data will be reported descriptively by SWAT group, using counts and percentages for categorical data, and mean and standard deviation for continuous data. The paired t-test will be used to compare pre- and post-training workshop responses, and two sample t-tests will be used

to compare the change in response from baseline to follow-up between the two groups. Recruitment rate will be compared using linear regression, adjusting for host trial.

Possible problems in implementing this SWAT

This SWAT needs clear coordination across multiple host trials. It may not be possible to recruit host trials. Staff may not attend the training course.

References

1. Delaney H, Devane D, Hunter A, et al.. Limited evidence exists on the effectiveness of education and training interventions on trial recruitment; a systematic review. *J Clin Epi* 2019; 113: 75-82.
2. Townsend D, Mills N, Savović J, Donovan JL. A systematic review of training programmes for recruiters to randomised controlled trials. *Trials* 2015; 16: 432
3. Donovan JL, Rooshenas L, Jepson M et al. Optimising recruitment and informed consent in randomised controlled trials: the development and implementation of the Quintet Recruitment Intervention. *Trials* 2016; 17: 283.
4. Rooshenas L, Scott LJ, Blazeby JM, et al. The QuinteT Recruitment Intervention supported five randomized trials to recruit to target: a mixed-methods evaluation. *J Clin Epi* 2019; 106: 108-20.
5. Mills N, Gaunt D, Blazeby JM et al. Training health professionals to recruit into challenging randomized controlled trials improved confidence: the development of the QuinteT RCT Recruitment Training Intervention. *J Clin Epi* 2018; 95: 34-44

Publications or presentations of this SWAT design

Parker A. Staff training to improve participant recruitment into surgical randomised controlled trials: a feasibility study embedded within four randomised controlled trials. 5th International Clinical Trials Methodology Conference, Brighton, UK. 6-9 October 2019.

Examples of the implementation of this SWAT

People to show as the source of this idea: Dr Adwoa Parker, Dr Nicola Mills, Dr Leila Rooshenas, Dr Marcus Jepson, Prof Jenny Donovan, Mrs Catherine Arundel, Miss Elizabeth Coleman, Mrs Laura Clark, Miss Laura Doherty, Prof Catherine Hewitt, Prof David Torgerson

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