

PROJECT BRIEF

Project name INTERACT
Increasing recruitment in Host Trust

Release Draft v5 – 14th February 2013

Author:	Adam Smith, DeNDRoN PMO
Project Director:	Dr Peter Brindle, LRN Director
National Project Board Champion:	Xx
Accountable Body:	South West DeNDRoN LRN

Executive Summary

This sub-project is one of a series taking place across the country under the wider INTERACT Project. Together they will test approaches for embedding research into clinical practice.

This project is a targeted approach to addressing recruitment in the Host Trust (AWP). It will look to improve recruitment from the Host Trust and ensure all patients are given the opportunity to participate in a SW DeNDRoN study or consent list. This project aims to overcome local challenges and reach an agreement with the Host Trust to provide improved access to research. In the first instance the project will focus on identifying the barriers both real and perceived, and then work with senior Host Trust staff to overcome the issues to improve recruitment.

The project will specifically target individuals and groups within the Host Trust, to improve understanding of how DeNDRoN can support the Host Trust, and bring about a change in practice to improve recruitment to studies and consent lists.

This project will enable DeNDRoN South West to consider alternative approaches to recruitment and other projects in the remainder of 2012. Starting in January 2012 this project will take place over a 18 month period, and if successful will provide increased access to research for patients with dementia and neurodegenerative diseases.

Revision History

Revision date	Author	Summary of Changes	New Version
09/11/11	Adam Smith	Produce first draft	1
14/11/11	Mary Griffin	Updated after comments from Peter Brindle	2
18/11/11	Mary Griffin	Updated after comments from Julian Walker & Mark Walker	3
03/01/12	Mary Griffin	Project has a success measure which directly relates to recruitment to a specific portfolio study	4
14/02/13	A Beardmore	Formatting	5

Project Definition

Objectives

The objective of this project is to improve patient recruitment in the Host Trust (AWP Mental Health NHS Trust), directly ensuring that patients of this Trust are screened, and offered opportunities to participate in SW DeNDRoN research studies/RAFT. The process of this project will identify the real and perceived barriers to recruitment, and ensure no patients are disadvantaged through limitations in the Host Trust.

Scope / Exclusions

- The scope will extend to Dementia and Neurodegenerative Diseases with a main focus on Dementia within the Host Trust (AWP).
- The spread of geographical engagement will be contained to the Host Trust (AWP).
- The project will be undertaken and led by South West DeNDRoN.
- The project will take place between February 2012 and June 2013.
- The cost of delivery will be found from existing LRN and AWP budgets.

Project Deliverables

DELIVERABLES		TIMESCALE
SW3.1	Establish baseline measures and produce high-level delivery plan.	Feb 2012
SW3.2	Complete detailed Trust/stakeholder analysis, with individuals and groups (current position / future position)	Feb-Mar 2012
SW3.3	Identify barriers to recruitment in the Host Trust, and agree local solutions	Mar-Apr 2012
SW3.4	Produce Trust / stakeholder engagement / delivery plan (activities to get Host Trust from current position to future position)	May 2012
SW3.5	Undertake and implement stakeholder engagement / delivery plans (will require on-going review and refinement of approach).	Jun-Sep 2012
SW3.6	Completed initial implementation of all identified improvements (detailed in stakeholder engagement plan / delivery plan)	Sep 2012
SW3.7	Complete final project report, case studies and plans for 2012	Dec 2012
SW3.8	On-evaluation again success measures	Dec-Mar 2013

Governance / reporting requirements:

1. Establish local governance and project management arrangements.
2. Provide monthly highlight report to national project board (1st of each month)
3. Maintain a project risk register using <https://portal.nihr.ac.uk/sites/dendron/dp>
4. Participate in INTERACT Delivery Team meetings (alternate monthly TC / F2F)
5. Provide ad-hoc reports and updates as required.

Interfaces

- Trust Medical / Clinical Directors
- Trust R&D Manager
- Trust R&D Director
- CLRN
- Trust Board
- Trust Communications
- Other stakeholders
- DeNDRoN Communications

Success Measures

1. %age increase in recruitment in AWP to SW DeNDRoN studies.
2. %age increase in size of portfolio at AWP.
3. As a direct result of this study, AWP to act as a PIC site for RICE and recruit 3 AWP participants to the DeNDRoN 073 study.
4. As a direct result of this project, AWP recruit 5 participants to the Euro-HD Registry study.
5. As a direct result of this project, at the end of the intervention period, AWP has an increase of 5 participants recruited per year compared against recruitment pattern prior to intervention for the following studies:
 - BDR
 - Dendron 066
 - Dendron 055
 - Categorising AD
6. %age increase in research income from DeNDRoN industry studies.
7. Referral pathway for participants to be recruited from AWP to RICE.
8. X participants identified to participate in current studies, from subject organisations and memory clinics, as a direct result of this project.
9. %age increase in the proportion of AWP memory clinics recruiting patients either as PICs or full consenting sites.
10. %age increase total number of patients entering a study / RAFT directly from memory clinics (to be measured upon registration).
11. Per patient recruitment cost from project vs. non-project.

Trust Identified

Supporting tools to aid success measures

These are anticipated by-products of the project and will not be used to define success:

1. Record of total number of patients recruited to DeNDRoN studies in AWP (measured quarterly).
2. Measure of service delivery income generated (i.e. multiply number of recruits in category 1, 2 and 3 by relevant amounts – approx £100, £250 and £1000) to give a total income.
3. Number of different staff in liaison/contact with CSOs regarding studies in network/disease area.

4. Creation of and %age increase in number of staff added to 'research-interested staff' database.
5. Increase in number of studies where feasibility completed/study initiated/recruitment takes place/recruitment target hit/exceeded.

Delivery Plan

This Delivery Plan will initiate action that is consistent with the increasing engagement with the Host Trust and the research networks to increase the rate of participant recruitment to clinical studies and consent lists.

The project brief has been included in this document to inform the delivery plan. Details of the project brief have been agreed by the Interact National Project Board are not subject to amendments.

Deliverable SW3.1: Establish baseline measures and produce high-level delivery plan.

Reason for intervention: To measure what happened currently to compare against activity post project.

Date of completion: February 2012

Local sub objective SW3.1.1 Establish baseline measures

Action (how we will achieve this)	Operational leads and individuals involved	Executive Lead
1. Liaise with Host Trust R&D Dept and SW DeNDRoN team to map current activity.		MG
2. Document current activity.		MG

Measure of success

1. Development of work themes that will be addressed within Host Trust.

Evidence

1. Agreed work themes that inform project over 12 months.

Local sub objective SW3.1.2: Production of delivery plan

Action (how we will achieve this)	Operational leads and individuals involved	Executive Lead
1. Draft delivery plan in line with deliverables.		MG
2. Agree delivery plan with Host Trust stakeholders		MG
3. Delivery plan to be agreed by local Interact Project Board.		MG

Measure of success

1. Production of delivery plan.

Evidence

1. Delivery plan in use

Deliverable SW3.2: Complete detailed Trust/stakeholder analysis, with individuals and groups (current position / future position).

Reason for intervention: To consult with stakeholders and inform work plan.

Date of completion: Feb-March 2012

Action (how we will achieve this)	Operational leads and individuals involved	Executive Lead
1. Create survey to send to stakeholders to document current and future position.		MG
2. Write up survey and use finding to formulate work programme.		MG
3. Agree work programme with R&D Manager and Director.		MG

Measure of success

1. Survey completed by 50% of respondents.

Evidence

1. Results of survey used to inform barriers and solutions.
2. Agreement obtained from 50% of stakeholders.

Deliverable SW3.3: Identify barriers to recruitment in the Host Trust, and agree local solutions.

Reason for intervention: To identify barriers and find solutions.

Date of completion: March-April 2012

Local sub objective SW3.3.1: Identify barriers to recruitment in the Host Trust

Action (how we will achieve this)	Operational leads and individuals involved	Executive Lead
1. Workshop barriers and solutions to recruitment with Host Trust R&D Team.		MG
2. Create survey to send to stakeholders to identify barriers and solutions.		MG

Measure of success

1. Concise list of barriers identified.

Evidence

1. Documented list of barriers plus solutions to address barriers.

Local sub objective SW3.3.2: Agree local solutions

Action (how we will achieve this)	Operational leads and individuals involved	Executive Lead
3. Write up list of barriers with proposed solutions to be carried out to address them.		MG
4. Circulate to team for comment.		MG
5. Send to Host Trust R&D Management for sign off.		MG

Measure of success

1. Buy in from R&D Manager, Director and SBU Director.

Evidence

1. Local solutions signed off by R&D Manager, Director and SBU Director.

Deliverable SW3.4: Produce Trust/stakeholder engagement/delivery plan (activities to get Host Trust from current position to future position).

Reason for intervention: To have a detailed plan for the project.

Date of completion: May 2012

Action (how we will achieve this)	Operational leads and individuals involved	Executive Lead
1. Planning and research		MG
2. Consultation with relevant stakeholders.		MG
3. Document learning from workshops and consultation to form a delivery plan.		MG
4. Develop delivery plan.		
5. Risk management.		

Measure of success

1. Production of delivery plan
2. Risk register.

Evidence

1. Risk register updated.
2. Delivery plan in use.

Deliverable SW3.5: Undertake and implement stakeholder engagement/delivery plans (will require on-going review and refinement of approach).

Reason for intervention: To implement actions as detailed in delivery plan and assess impact.

Completion date: Jun-Sept 2012

Action (how we will achieve this)	Operational leads and individuals involved	Executive Lead
1. Agreed start date for implementation of plan.		MG
2. Advertise plan to relevant stakeholders in Trust.		MG
3. Agree responsibilities for team.		MG

The following activities will be conducted as part of the engagement project and themed accordingly:

Developing the workforce		
Action (how we will achieve this)	Operational leads and individuals involved	Executive Lead
1. Host Trust increases the number of generic CSOs to work across the research networks.	Host Trust	MG
2. Host Trust provide tailor made training programme for new and existing research staff.		MG
3. Host Trust to organise open day (1/2 day) to showcase what we do. R&D dept is opened up to all members of the Trust-consider invite to members of the public.		MG
4. R&D staff member to attend Trust induction, on a monthly basis. A rota for attendance is required. Dates of induction to be documented and staff attending noted.		MG
5. Research networks to have a higher profile in the Host Trust Annual report.		MG

Raising the profile of R&D		
Action (how we will achieve this)	Operational leads and individuals involved	Executive Lead
6. Splash page on a regular basis on network (quarterly if the demand for pages is high, monthly if not). Contact Simon Gerard in Communications Team. Splash page to include SW DeNDRoN logo, link to website and coincide with National dementia week from 20-26 May 2012.		MG
7. R&D Trust road show to be set up. Once a month allocate a “drop in” session for researchers to come and ask questions. Slot is for one hour and venue rotates throughout Trust. Advertised on the intranet and goes into the Trust diary as an event. Rota for R&D staff.		MG
Raising the profile of the research networks		
Action (how we will achieve this)	Operational leads and individuals involved	Executive Lead
8. Updated and informative SW DeNDRoN web pages on intranet.		MG
9. Splash page on a regular basis on network (quarterly if the demand for pages is high, monthly if not). Contact Communications Team.		MG
10. Attendance at induction (Frequency twice a month) to promote role of network. To be done each month starting X 2012 and attendance shared by all members of the team. Materials and information to be standardised so that each induction set receives the same information in the same format.		MG
11. Attendance at meetings throughout the Trust. List of meetings need to be		MG

documented for whole calendar year, with contact details of organisers.		
12. Attendance at Foundation Trust (FT) and Local AWP events (eg. South Glos Family Fun Day & Armed Forces Day) to publicise research opportunities. Article in Spring FT Newsletter.		
13. Spree event (need frequency). Organiser is Christine Dean		MG
14. Attendance at Tmag meeting (need frequency). Organiser is Christine Dean		MG
15. Attendance at Medical Trainee's Meeting. Organiser Elizabeth O'Mahony		
16. Attendance at annual nurse conference in November. Organiser is Liz Bessant, Head of Nursing and Infection, Prevention & Control.		MG
17. Discuss research informing practice and use the BEST project. Look at the questions and answers they have received and contact the enquirers.		MG
18. Draft a poster with team picture on in for display in clinical areas where we are actively recruiting.		MG
19. Development of good news stories and entry onto the AWP Hall of Fame.		MG
20. Folder of version controlled resources is maintained as part of the project. This will include any presentation used and documents created. Photographs of table displays of stands are to be taken and recorded so there is a consistent standard in the way materials are presented at conferences etc.		MG
Improving recruitment to clinical studies		

21. Send updates of clinical studies to team secretaries (please specify what is sent and to whom)		MG
22. Talk to teams, CMHTs		MG
23. Feedback of all network study results to be advertised on website and newsletter.		MG
24. Put people interested in becoming PI's in touch with the Research Director's. <i>This will be added to the recruitment tool.</i>		MG
25. Blocks to recruitment to be documented and discussed with R&D Manager and Director if appropriate.		MG
26. Consider wider publicity for research such as use of mobile library, to publicise in rural areas.		MG
27. Engage with Primary Care Liaison Team.		MG
28. R&D Dept to highlight studies to research network when approved.		MG
29. Leaflets to be provided to clinicians.		MG
30. Slot in newsletter and on website to say thanks to clinicians who have referred participants (AWP only in first instance).		MG
31. CSOs to be based in clinics. Where notes have been screened and patients identified, CSO should go to clinic to see patients face to face.		MG
32. Attendance at Alzheimer's Cafes within the AWP area.		
Improving recruitment to consent lists		
33. Creation of a dementia consent list as part of Bristol Dementia Research Collaborative Group		MG
Strategic direction and widening collaboration		
34. Coordinated thinking with other networks.		MG

35. Get more involved with the Universities.		MG
Other		
36. Put results of clinical trials that Dendron have helped recruit to on website and in newsletter.		MG

Measure of success

1. All activities carried out in accordance with plan.
2. Risk log in place.
3. Record of what works and what does not work recorded (lessons learned).
4. Deviations from delivery plan recorded.

Evidence

1. Monthly highlight report to DeNDRoN.
2. Risk log updated.
3. Lessons learned completed.
4. Exception reports completed.
5. Notice on website.

Deliverable SW3.6: Completed initial implementation of all identified improvements (detailed in stakeholder engagement plan/delivery plan)

Reason for intervention: To allow time for evaluation after implementation phase.

Date of Completion Sept 2012

Action (how we will achieve this)	Operational leads and individuals involved	Executive Lead
1. All tasks completed and evidence of success and/or failure documented.		MG
2. Record of modified implementation if plan changed.		MG

Measure of success

1. Successful completion of timetable of activities in stakeholder engagement plan.
2. Record of what works and what does not work recorded (lessons learned).
3. Deviations from delivery plan recorded.

Evidence

1. Monthly highlight report to DeNDRoN submitted.
2. Risk log updated.
3. Lessons learned completed.
4. Exception reports completed.

Deliverable SW3.7: Complete final project report, case studies and plans for 2013.

Reason for intervention: To ensure that all information regarding the project is recorded.

Date of Completion Dec 2012

Action (how we will achieve this)	Operational leads and individuals involved	Executive Lead
3. Write up final report.		MG
4. Identify case studies.		MG
5. Identify plans for 2013.		

Measure of success

1. Production of final report.
2. Identified case studies written up and sent to DeNDRoN.
3. Recruitment strategy produced in light of new evidence.

Evidence

1. Final report submitted to submit to Adam Smith (DeNDRoN).
2. Case study articles.
3. Trust specific recruitment strategy produced.

Deliverable SW3.8: On-evaluation again success measures.

Reason for intervention: To evaluate success of project.

Date of completion: Dec-March 2013

Action (how we will achieve this)	Operational leads and individuals involved	Executive Lead
1. Evaluate success of project by comparing before and after measures of success.		MG
2. Ensure documentation is up-to-date.		MG
3. Publicise and implement findings.		MG

Measure of success

1. %age increase in recruitment in Host Trust to SW DeNDRoN studies.
2. %age increase in size of portfolio at Host Trust.
3. As a direct result of this study, Host Trust to act as a PIC site for RICE and recruit 3 Host Trust participants to the DeNDRoN 073 study.
4. As a direct result of this project, Host Trust recruits 5 participants to the Euro-HD Registry study.
5. As a direct result of this project, at the end of the intervention period, Host Trust has an increase of 5 participants recruited per year compared against recruitment pattern prior to intervention for the following studies:
 - BDR
 - Dendron 066
 - Dendron 055
 - Categorising AD
6. %age increase in research income from DeNDRoN industry studies.
7. Referral pathway for participants to be recruited from Host Trust to RICE.
8. X participants identified to participate in current studies, from subject organisations and memory clinics, as a direct result of this project.
9. %age increase in the proportion of Host Trust memory clinics recruiting patients either as PICs or full consenting sites.
10. %age increase total number of patients entering a study / RAFT directly from memory clinics (to be measured upon registration).
11. Per patient recruitment cost from project vs. non-project.

Evidence

1. SW DeNDRoN local recruitment figures.
2. SW DeNDRoN portfolio figures.
3. RICE recruitment figures for DeNDRoN 073 study.
4. Euro-HD recruitment figures for Host Trust.
5. SW DeNDRoN local recruitment figures compared to similar period in 2010/11.
6. Calculation of research income based on complexity of study multiplied by and compared to increase in service support allocation from CLRN.
7. Documentation of referral pathway agreed and circulated and put on DeNDRoN website.
8. Clear recording of recruitment from Host Trust participants into studies.
9. Clear recording of source of recruitment from Host Trust participants into studies.
10. Establish a consent list.
11. SW DeNDRoN local recruitment figures and per participant costs compared to similar period in 2010/11.

