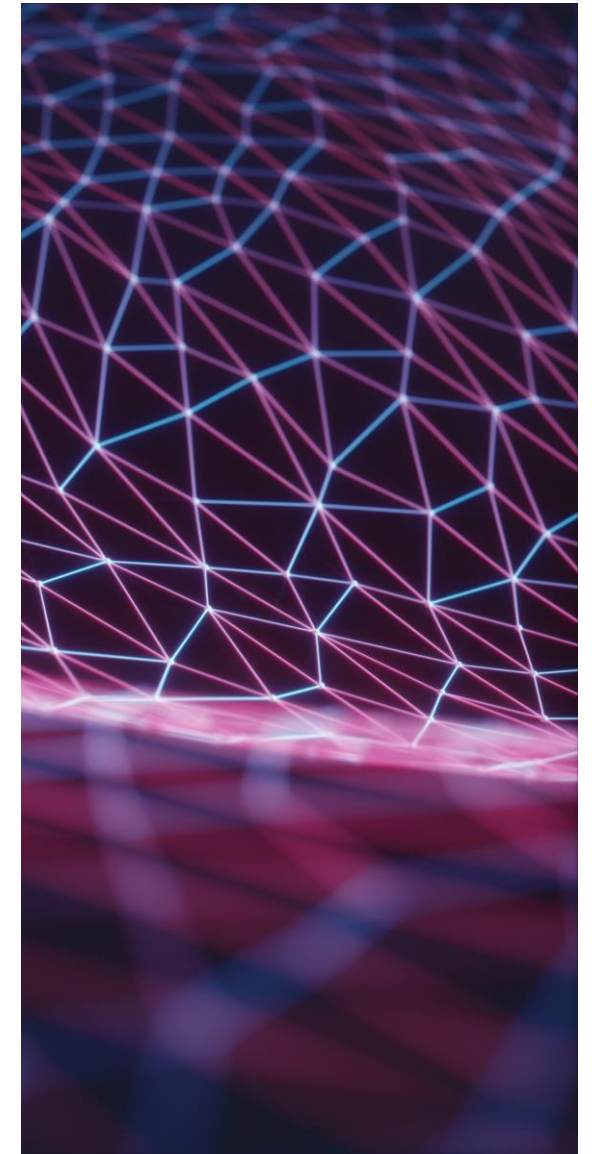


# Participant Recruitment : Guidelines for multisite PR using EHR-Derived Cohorts

- Molly Belinski, UCSF

October 15, 2019



# Guidelines and best practices for multisite EHR recruitment

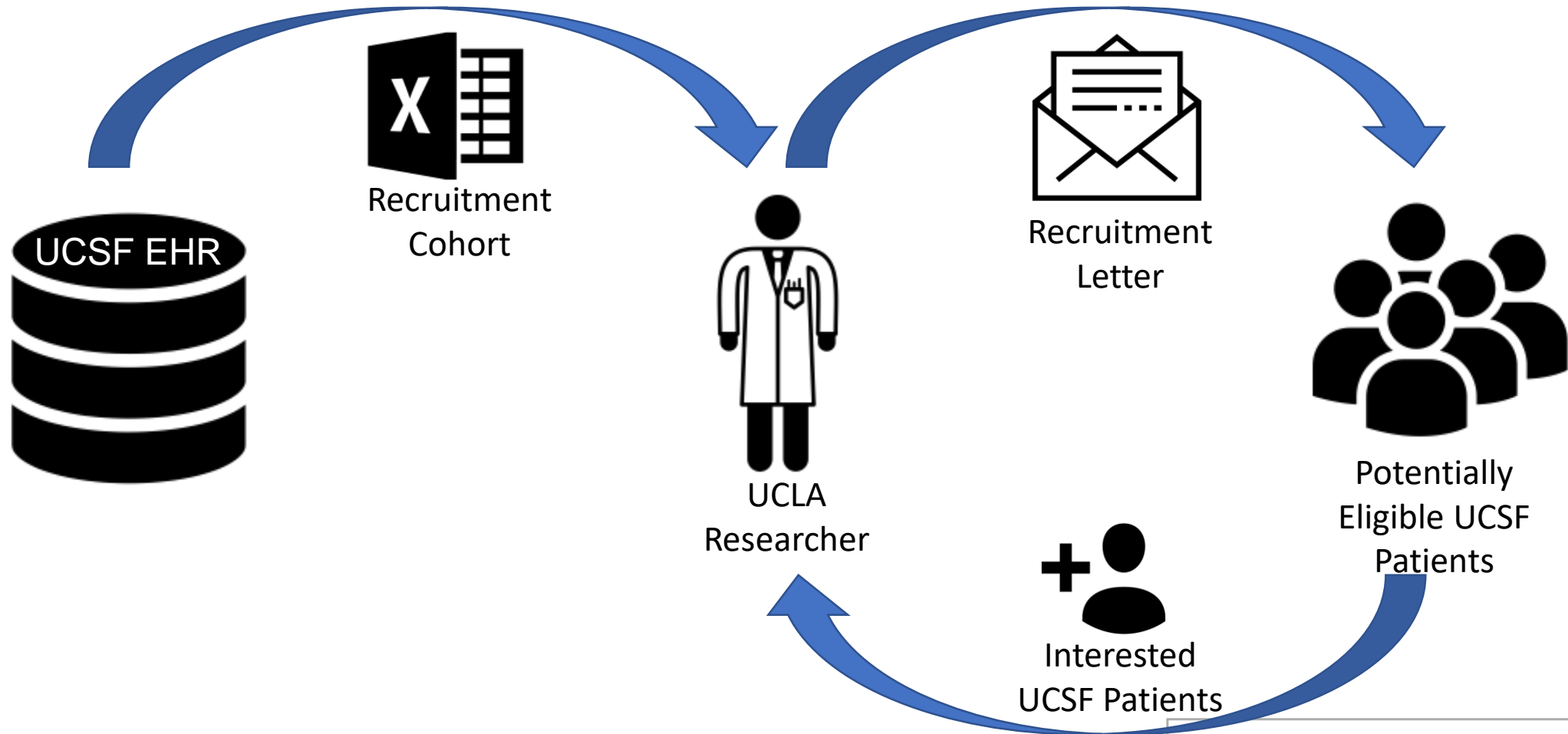
**The problem:** there is a need for mutual understanding of best practices and guidelines for sharing EHR-Derived Cohorts for recruitment in multi-site trials between UCs.

## Why this project?

1. UC Rely and upcoming NIH Reliance mandate
2. Increased use of EHR-derived recruitment cohorts
3. Technically possibly but logistically difficult

# Multisite EHR Recruitment

## Use case: UCLA and UCSF



# Using these guidelines

- The vision:
  - Researchers use these guidelines and best practices to create respectful, compliant recruitment plans
  - Create common understanding and acceptance of what this means
  - Establish a streamlined pathway for multisite EHR recruitment

# Achievements

- Working draft developed by Work Group members
- Consultations and buy-in from privacy, compliance, IRB, informatics stakeholders at each campus and UCOP
- Input from Community Advisory Boards at UC Riverside and UC San Diego

# Example best practices guidelines: Developing the recruitment message

## Best practices:

- *Avoid language that includes diagnosis or makes a patient feel singled out.*
- *Ensure that the recruitment message prominently references the home institution where the patient receives care.*
- *Use template letters (included in guidelines document)*

# Feedback from UC BRAID Stakeholders



- Universal agreement on communications best practices
- Data transfer compliance requirements is a work in progress; parallel effort underway at UCOP
- Campus interest in “opt out” process sharing

# Next six months

- Beta release of guidelines
- Use case – UCSF Multisite study with Davis, Irvine, San Diego
- Incorporate researcher feedback and UCOP data sharing policies



# Are We Future Ready?

## Opportunities:

- Centralized recruitment data pulls from the UC Data Warehouse
- Intercampus sharing of patient research contact preference processes
- Continued collaboration and information sharing

# Partnerships - Thanks

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