



Helpful Hints: Recruitment

Acknowledgement

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Recruiting GPs

Suggestions to improve GP and site recruitment:

- Use both your personal and your Study Management Team's networks of health professionals to identify Practitioners who may be able to assist with recruiting patients for your study.
- Try cold-calling Practices and utilise 'snowballing': the latter is where GPs involved in previous or current studies advise of other GPs or Practices that may be interested in being approached to participate in your study.
- Utilise Practice-Based Research Networks (PBRNs) such as APCReN. PBRNs are groups of primary care practitioners, academic GPs and researchers that work together to conduct primary care research: they may be able to direct you to health professionals likely to be interested in recruiting for your study.
- Actively follow up with potential sites and clinicians (i.e. call, organise a time to meet in person, or email): health providers are busy people and are often involved with more than one project, so simply posting information to them will not be enough.
- Use cancer registries to help you to identify geographical regions to target for recruitment:
 - Australian Institute of Health and Welfare (fees are charged)
 - Northern Territory Cancer Registry
 - NSW Cancer Registry Statistical Reporting
 - Queensland Cancer Registry
 - South Australian Cancer Registry
 - Tasmanian Cancer Registry
 - Victorian Prostate Cancer Clinical Registry
 - Western Australian Cancer Registry

Selling your study:

- Target your strategies for site recruitment to the different roles in the Practice. For example, emphasising the benefit of the study for patients (i.e. patient testimonials) to the clinicians, reassuring Practice Managers that there is no additional cost, and demonstrating there is no additional work for administrative staff may be effective.
- Find a 'peer champion' and provide active support for them to sell the study. For example, draft a letter of endorsement for them to edit and sign, help them to circulate it to their colleagues or patients, or hold a dinner meeting hosted by your champion for their colleagues.
- Provide GPs with any evidence that supports your study – you may have pilot data or you're replicating a study from overseas: always provide a brief (one page max) summary.
- Create a Frequently Asked Questions pamphlet. Anticipating the questions and providing the answers will help to promote the study and will be a useful resource for potentially interested groups.
- Develop some promotional materials to introduce the program to the site: for example, make a PowerPoint presentation or some brochures.
- Consider offering Continuing Medical Education (CME) points, for example, by including a Clinical Audit as part of the study design: GPs need CME points for vocational registration with the Royal Australian College of General Practice (RACGP) - visit the RACGP website for more information.
- Patient confidentiality will be a key issue so be prepared to explain how the study will protect it: for example, you may pledge to de-identify all data onsite and demonstrate appropriate processes for obtaining patient consent.
- If funds are available, consider offering a small fee as a Practice Incentive.

Maintaining relationships with GPs and site staff:

- Support from Practices is critical to the success of a study, and establishing trust with Practice staff is key: establish good personal relationships, be persistent and be honest.
- Try to make their jobs as simple as possible and minimise any workload: for example, develop pro forma documents for the GPs to complete easily and staff can fax to the Study Team
- Keep communications with GPs brief and personal: for example, hand deliver any resources
- Limit the duration of their participation: minimise both the workload and time commitment, and don't ask them to participate in consecutive studies!
- Take a 'tangible reward' (e.g. yummy food), especially for your site contact person.

Avoid bias and contamination:

- Be selective about which GP practices are invited to participate to avoid bias issues around demographics, i.e. participants in more affluent areas may be more adaptive to change.
- Be aware of possible contamination within a single Practice: consider having the Practices as the unit of randomisation rather than the GP by using a cluster randomised controlled trial or stepped wedge study design.

Communication:

- Use a study-specific letter head (not the Practice letter head) for correspondence with participants.
- Avoid introducing bias by standardising all communications and reminders to patients – use the same script/wording in your letters or emails.
- If a patient or GP moves Practices, make appointments to see both the new GP (at the old practice) and the Practice Manager (at the new Practice) to establish relationships.

Recruiting patients

- Consider how to frame your request to participate: for example 'you'll be helping other people with cancer'.
- Use multiple avenues (not just one) to contact potential participants.
- Know your audience: tailor your communication strategies to their needs and preferences. This may mean creating electronic patient questionnaires, using large print for older participants (55+ years), and considering participants' preference for envelopes (handwritten or typed, stamped or reply paid).
- Look for recruitment pools beyond hospitals and clinics: it may be appropriate to promote the study directly to patients, for example through social media, newspaper articles etc.
- Ask patients their preference for mode of follow up – this could be via email, post, phone, Facebook, SurveyMonkey, or something else.
- SurveyMonkey is a useful tool to set up a questionnaire online, and often preferred by people to filling out and posting a paper-based survey, however be mindful that some participants may not have computer access or literacy and always be able to provide a hard copy.

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