Mount Sinai Beth Israel Medical Center

D2d RECRUITMENT STRATEGY AND PROGRESS
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LEONID PORETSKY, MD PI
KAMALA MANTHA-THALER STUDY COORDINATOR
MAHMOUD HASSAN RESEARCH ASSISTANT

Screen Fails: 35
Baseline: 17
Randomized: 8
Withdrew Consent: 2
Total Screens: 52

Recruitment Process

- Electronic medical record search: search consisted of medical records of all three hospitals (Beth Israel, St'Lukes and Roosevelt). Search criteria included A1C, BMI, medication lists, etc. Once an eligible subject was identified, providers were contacted through the EMR for permission to contact the patient.
- Coordinator spent time at General Medical Associates (GMA) screening eligible patients when they came for PCP appointments
- Posters, flyers and pamphlets were posted and distributed at the GMA and in each of the provider exam rooms
- Announcements in hospital newsletter called "Connections"
- Placing posters, flyers and announcements at the satellite out-patient sites of Beth Israel.

Recruitment Process Cont.

- Placing adds in “NY Metro” newspaper monthly (so far March and April)
- Adds placed in Craig’s list
- Outreach conducted on Diabetes Day; provided free diabetes at risk assessment to Beth Israel staff
- Posted blog advertisement on community boards and Friedman Diabetes Institute website

Recruitment Success

- Advertisement in the NY Metro has been the most successful (#125 calls within 2 months, 42 screens, 13 baseline, 5 randomized)
- Endocrinology provider referrals (12 providers, 7 referrals 4 screens, 2 baseline and 2 randomized)
- GMA (15 referrals, 4 screens, 1 baseline and 1 randomized).

Future Steps and Challenges

Future Steps

- Continue advertisement in “Metro” , EMR search and presence at GMA
- Additional advertisement in “Village Voice” and Spanish language newspapers
- In the process of identifying volunteers to assist with subject recruitment
- Sending letter to Friedman Diabetes Institute patients to refer friends and family members.
- Monthly outreach and screening for hospital staff

Challenges

- Have had no response from Craig's list
- Need more volunteers in assisting with phone calls and recruiting patients.
- Volume of calls versus the number screens and number randomized

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Recruitment Strategy

4/8/14

Active Recruitment Strategies Used

- Emails to internal database of past participants from previous studies
- BCM web site for research volunteers
- MD speaking at clinic meetings
- Craig's list
- Press releases with an interview with PI, Dr. John Foreyt
- Flyers at YMCA & Baylor Clinics
- Screening EMRs at Baylor Clinics
- Wellness and Health Fairs
- Diabetes Walk

Evaluation

Most Successful

- Press release with interview from PI, Dr. John Foreyt
- Screening EMR

Least Successful

- Other strategies have limited response
- Consideration of return on investment

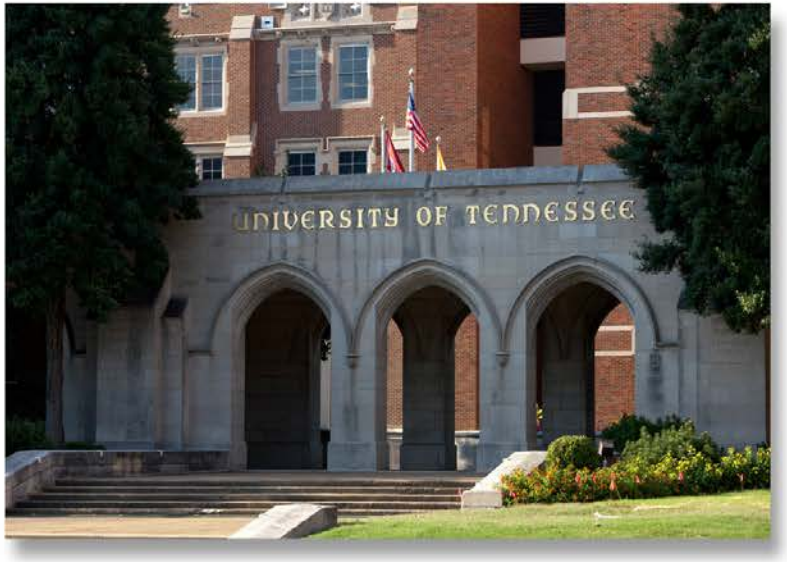
Recruitment Summary

- Screened = 25; Screen Fails = 13
- BL visits completed = 11; BL Fails = 5
- BL outcomes pending = 1
- BL scheduled =1
- Randomized = 4
- Scheduled for randomization = 1

Recruitment Strategies Pending

- Radio ads
- Screening EMR at another health care system
- Contacting other wellness clinics at other corporations

D2d Recruitment



Current Strategies

- Postcard mailings – Can choose by zip code, age and BMI in the Memphis metro area
- Craig's List
- Health Fairs
- Community Outreach – Contact health fairs that we cannot attend to ask if they will display D2d materials at their event
- Local listservs

Future Strategies

- Doctor to Doctor – Visits with practices to explore the possibilities of emailing patients, including a D2d ad in the practice newsletter, mailing to patients or displaying materials in the waiting area
- Reaching Out – Developing a plan to reach out to community and neighborhood organizations
- Radio Ads – Researching demographics for local radio stations and funding options and which will take PSAs

Challenges

- Two large hospitals here have purchased multiple practices making it difficult now to gain EMR access at these practices until the hospital administration has come to a decision about what type of access they will allow, if any
- Marginal funding available to D2d sites without access to EMR
- Time away from work is difficult for those who are between the ages of 30 and 60 and working
- Fasting blood sugars in younger population under 60 are too low