Achieving ‘Time and Target’: Lessons Learnt from a community based, observational multi-site NIHR portfolio research study

Conference or Workshop Item

How to cite:

For guidance on citations see FAQs.

[not recorded] https://creativecommons.org/licenses/by-nc-nd/4.0/

Version: Version of Record

Link(s) to article on publisher’s website:
http://dx.doi.org/10.13140/2.1.2085.3126
https://www.clahrc-oxford.nihr.ac.uk/upcoming-events/health-services-research-network-hsrn-symposium

Copyright and Moral Rights for the articles on this site are retained by the individual authors and/or other copyright owners. For more information on Open Research Online’s data policy on reuse of materials please consult the policies page.
Achieving ‘Time and Target’: Lessons Learnt from a community based, observational multi-site NIHR portfolio research study

Mrs Gemma Sinead Ryan; Mrs Gail Melvin; Mrs Lynne Hartwell; Mr Thomas Pringle; Dr Munib Haroon
University of Derby; Leicestershire Partnership NHS Trust
Senior Lecturer Nursing & Healthcare Practice / Head of Health & Social Care Research Group; Honorary Research Fellow LPT
Email: g.ryan@derby.ac.uk Funders: Shire AG

Background
Performance metrics for NIHR portfolio studies link directly to approvals and ‘time and target’ recruitment. Lessons learnt for recruitment on a portfolio multi-site observational study across three community NHS Trusts were evaluated.

Methods
Access was provided to a Attention Deficit Hyperactivity Disorder information website and baseline and post-access knowledge assessed. Participants were parents/carers of children with diagnosed/suspected ADHD [target n=99]. Healthcare and educational staff also participated. Follow-up occurred 4 weeks after recruitment.

Recruitment Results
At the lead site the first participant was recruited 1 day post-approval, four weeks after R&D and NIHR portfolio application. Total recruitment was 260% of target [n=257]. Portfolio status attracted two additional sites after initial approval.

Follow up phone-calls were time consuming but minimised loss to follow-up [n=21, 8%].

Lessons Learnt
- Recruitment targets should be realistic and sensible; consult clinical staff
- Consult clinical teams to decide recruitment procedures and methods before seeking approvals
- Use time between permission application and confirmation to alert teams of the potential project and inclusion criteria
- Standard Operating Procedures ensure continuity and consistency
- Create a ‘flowchart’ for clinical and administration staff to aid understanding and recruitment
- On-going targets should be set and regularly reviewed by the team
- A nominated person should report recruitment to the NIHR monthly
- An on-going lessons learnt log should be maintained and shared with all sites via a clear communications strategy
- The experience and skills of CLRN infrastructure staff are essential in the successful delivery of such studies

Plan, Record, Review, Relay, Repeat

Graph 1 - Cumulative recruitment & recruitment by site

<table>
<thead>
<tr>
<th>Month</th>
<th>Lead Site</th>
<th>Site 2</th>
<th>Site 3</th>
<th>Cumulative Recruitment [Secondary Axis]</th>
</tr>
</thead>
<tbody>
<tr>
<td>February</td>
<td>27</td>
<td>50</td>
<td>6</td>
<td>144</td>
</tr>
<tr>
<td>March</td>
<td>32</td>
<td>1</td>
<td>6</td>
<td>153</td>
</tr>
<tr>
<td>April</td>
<td>44</td>
<td>103</td>
<td>6</td>
<td>253</td>
</tr>
<tr>
<td>May</td>
<td>50</td>
<td>138</td>
<td>19</td>
<td>290</td>
</tr>
<tr>
<td>June</td>
<td>16</td>
<td>154</td>
<td></td>
<td></td>
</tr>
<tr>
<td>July</td>
<td>19</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>August</td>
<td>8</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>