NIH StrokeNet Network
Standard Operating Procedure

SOP Number: GCP 10
SOP NAME: Trial Recruitment
Effective Date: 19-Jul-2016

1. Policy
The purpose of this SOP is to describe the general process of recruiting and enrolling subjects into NIH StrokeNet research studies.

2. Definitions and Abbreviations

**CIRB**  Central Investigational Review Board
**FDA**    Federal Drug Administration
**GCP**   Good Clinical Practice
**HIPAA**  Health Insurance Portability and Accountability Act
**HSR**  Human Subjects Research
**PI**  Performance Site Principal Investigator
**PPI**  Protocol Principal Investigator
**PHI**  Personal Health Information
**GCP**  Good Clinical Research Practice

3. Scope
The policies and procedures described in this SOP apply to parties involved with NIH StrokeNet research. Study personnel will use this SOP as a guide to meet study enrollment goals while fulfilling ethical responsibilities for protecting the rights and welfare of participants. Site are expected to comply with their own institutional guidelines if procedures conflict, however, all recruitment strategies must be approved by the CIRB.

4. Procedures
A. Recruitment strategies
1. Participants can be recruited from a variety of sources including, but are not limited to, individual research teams (PI and coordinator/nurses), self-referrals via Web sites and advertisements, primary caregivers, individual teams and central resources, volunteer registries, and subcontractors at outside recruiting agencies. Clinicians can be notified about research studies by letter or by word of mouth.
2. Many researchers maintain a database of patients or former research participants from which they identify potential participants for new research. If potential participants are identified through the researcher’s database, researchers must follow local requirements for contacting and recruiting subjects.
3. Researchers who get referrals from physician colleagues may not contact these referrals directly unless patients have agreed to be contacted. The physician colleagues of the researcher may also inform their patients of the research and
encourage their patients to contact the researcher.

4. Researchers may identify potential participants for research from hospital medical records by getting an approved waiver of authorization from the CIRB and the Institutional Privacy Board, if locally required. Cold calling is not an approved recruitment technique. The research study should be introduced to the potential research subject by an individual who, by virtue of his/her position, would normally have access to the potential subject’s confidential information.

5. Financial or other incentives provided to research staff by sponsors based on numbers of participants recruiting or enrolled are strictly prohibited.

B. Recruitment Materials

1. Materials directed to patients or the general public with the intent of recruiting them to participate in clinical research must be submitted to the CIRB for review and approval. These may include but are not limited to announcements, advertisements, flyers, phone scripts for screening, oral scripts for consenting participants, newspaper ads, videos, radio and television announcements, bulletin board tear-offs, internet or social media postings, and posters.

2. Information about specific HSR studies may be posted on publicly available websites.
   a. The following study-specific basic descriptive information may be posted without CIRB review.
      1. Study title
      2. Purpose of the study
      3. Protocol summary
      4. Basic eligibility criteria
      5. Study site location(s)
      6. How to contact the study site for further information

3. Information exceeding such basic descriptive information includes, but is not limited to, descriptions of risks and potential benefits, or solicitation of identifiable information. Information that exceeds the listed basic descriptive information must be approved by the CIRB before it may be posted.

4. Clinical trial listing services that do not need CIRB approval include, but are not limited to, the National Institutes of Health (NIH) ClinicalTrials.gov website, the NIH National Cancer Institute's cancer clinical trials listing (Physician Data Query [PDQ]), and the government-sponsored AIDS Clinical Trials Information Service (ACTIS).

5. In sponsored research, the sponsor must also approve all recruitment materials.

6. Advertisements may include but are not limited to:
   a. A statement that the study involves research
   b. A brief description of the disorder that the study is investigating
   c. Eligibility criteria (in summary form)
   d. A truthful description of potential benefits, if any, to the subject from study participation
   e. The name of the institution conducting the study
   f. The name and phone number of person to be contacted for further information
   g. Advertisements may not include:
a. Any direct or implied claim that the purpose of the research is to treat the condition or that the study medication is safe or effective
b. Any expressed or implied claim that the research will improve the subject’s medical condition
c. Expressed or implied statement that the research is FDA-approved
d. Use of the term “new” unless modified, i.e. new research medication, or new investigational medication

7. If potential participants who respond to advertisements will be queried to determine whether they meet inclusion/exclusion criteria, the telephone script used by researchers must also be reviewed and approved by the CIRB. Any questions about criteria should be referred to the Protocol Principal Investigator (PPI). All such contacts/discussions must be documented.
   a. The recruitment process conducted must not be coercive or misleading. Subjects should be provided with the opportunity to volunteer in an environment that is free of coercion, and those persons considered vulnerable should have additional protections in this process.

8. In addition to submitting recruitment materials to the CIRB, the PI must describe in the protocol the way in which the materials will be used and any other methods that will be used to recruit participants to the study.

C. Enrollment Procedures
   1. The PPI or designee will ensure that all study team members are trained in the study protocol specifics, recruitment requirements, and human subjects’ protection.

2. Recruitment rates should be regularly evaluated during the recruitment period, with reassessment of the strategy when recruitment targets are not being met. When there is competitive enrollment, recruitment must be continually reassessed to manage screening of participants.

3. The clinical research coordinator/nurse will keep records of recruitment and screening activity. Every person who is considered a potential candidate for the study should be entered in the paper or the electronic Screening and Enrollment Log (based on study inclusion and exclusion criteria). Note whether individuals have enrolled in the study and, if not, document the reason. The PPI, project manager and site monitors will have access to this electronic record information.

4. Subjects screened from records or in person using a CIRB waiver of informed consent for whom PHI is collected and retained for later contact need to be documented on a local site paper screening list. All lists containing PHI must be stored in a GCP confidential manner. All PHI collected should be destroyed once it is determined the subject no longer meets eligibility criteria.
   At the screening visit, the potential participant must give informed consent prior to any screening procedures. Signed informed consent forms from subjects who terminated their participation in the study during the screening process should be retained. Screening logs will clearly indicate consented but not randomized subjects. The CIRB will require documentation of those subjects at the time of the
trials continuing review by the CIRB. After screening and/or randomization, the participant’s code/ID number should be entered in the Screening and Enrollment Log (see attachment). The Enrollment Log can serve as the coded subject list, which must be archived at the end of the study. If there is no Screening and Enrollment Log included in the study, a master log must be kept of all subjects randomized in the trial, with subject name, address, year of birth, and treatment allocation or treatment package number. The definition of how subjects will be screened can vary by trial but the recruitment plan including this plan should be included in the trial protocol and approved by the CIRB. Any site deviation from the approved plan should be approved on a site by site basis by the CIRB.

D. Early Termination due to Subject Requested Withdrawal
1. Subjects who have consented to participate in a trial but later request withdrawal of that consent after “treatment” has been begun can and should be encouraged to complete subject follow-up visits. If the subject refuses he will be considered lost to follow-up. All lost to follow-up subjects are reported to the CIRB at the time of continuing review.

5. Applicable Regulations and Guidelines

21 CFR 312.50 General Responsibilities of Sponsors

ICH E6 The Principles of ICH GCP

6. References to Other Applicable SOPs


University of Cincinnati Human Research Protection Program Institutional Review Board Procedure Number: 106 Participant Outreach


University of Iowa IRB Expectations for a Successful Research Recruitment Portfolio, http://hso.research.uiowa.edu/iii-cold-calling

7. Attachments and References


Screening Enrollment Log

University of Cincinnati Human Research Protection Program (HRPP) Guidance on Recruitment
8. Document History

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ELECTRONIC SCREENING and ENROLLMENT LOG (Example)

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