



# Utilizing a Central Screening Process to Enhance Accrual at a Community NCORP

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Research Consortium NCORP



*Bringing the advantages of cancer research to the community*



# Background

- Metro-Minnesota Community Oncology Research Consortium (MMCORC)
  - NCORP of twenty-five hospital and clinic community sites, serving the Twin Cities metropolitan area and greater non-metropolitan Minnesota and western Wisconsin
  - Staffs one research nurse at each site; additional research coordinators & cancer control specialists at larger sites; 22 support staff at central office



# Purpose

Enhance accrual of community-based patients to national clinical research by:

- 1) Developing and implementing a centralized work process for systematic pre-screening of patients for clinical trials
- 2) Leveraging technologies of a clinical trial management system (CTMS) and health system electronic medical records (EMR)



# Methods and Monitoring

- Establish a central screening process for cancer control and care delivery clinical trials
  - Initial scope of protocols targeted = 2; initial scope of clinic sites targeted = 3
  - Potential patients were identified at the central office by 1 research support staff with access to all pilot site EMR systems (8 EMRs)
  - When potential patient identified, auto-generated CTMS email with brief eligibility note sent to clinic staff 2-3 business days prior to the patient's visit

# Methods and Monitoring, cont.

- Site research staff received email alert, determined final eligibility, and conferred with investigator
- If applicable, patient was contacted prior to appointment; Otherwise, patient approached at clinic appointment
- Standard practice of offering clinical trial participation to patient ensued



# Methods and Monitoring, cont.

- Central screening pilot team met bi-weekly to monitor progress, results, and made adjustments as needed:
  - Expanded to include 5 additional protocols and 8 additional clinic sites, based on accrual goals of the program
  - Conducted on-going monitoring and standing meetings to adjust communication approach based on site staff feedback
  - Site nurse managers and administration updated continuously on adjustments to scope

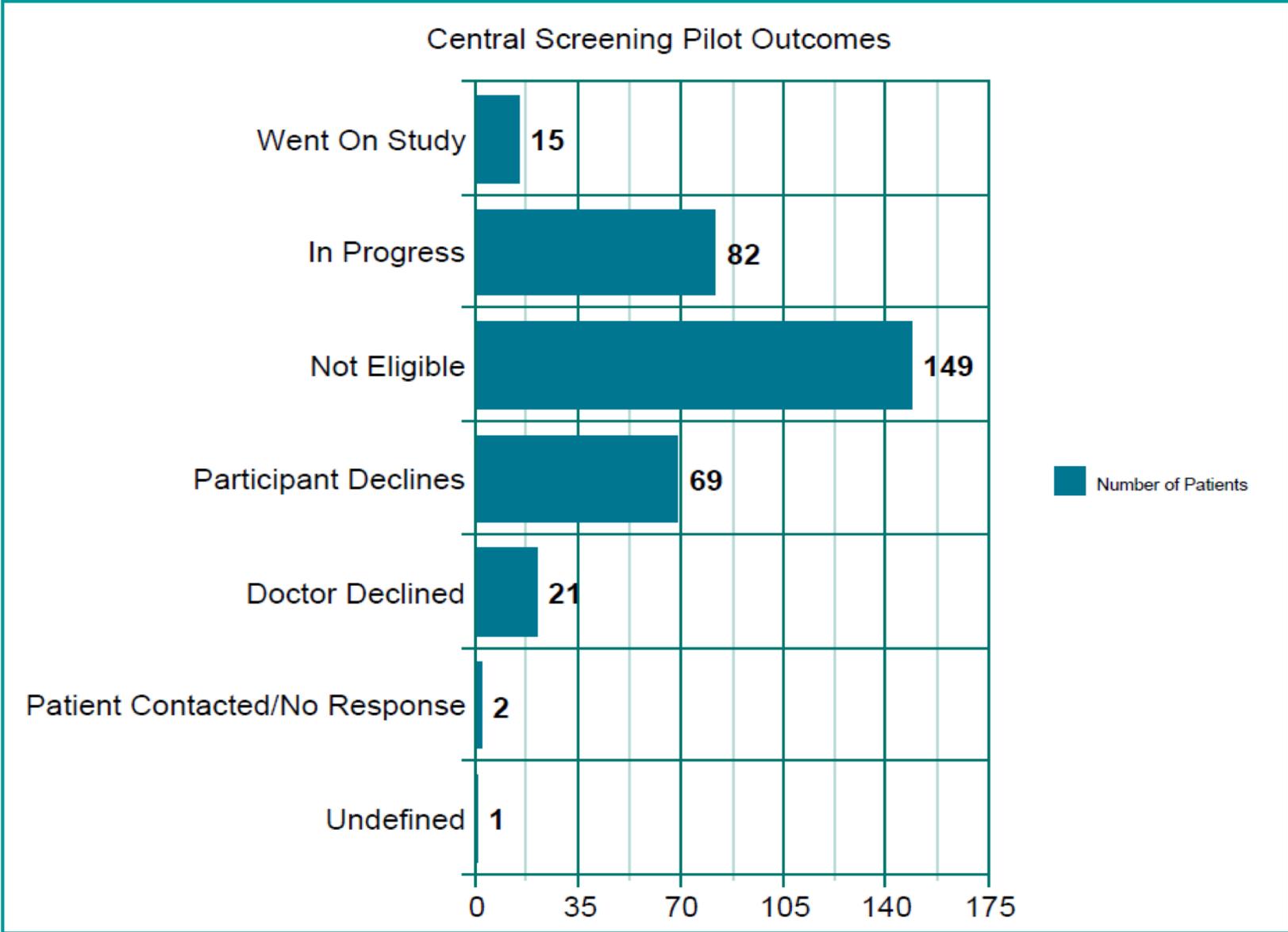


# Results

- Over a 6-month period, a daily average of 315 charts were reviewed centrally by research support staff.
  - 339 total patients were identified during this period, meeting key eligibility criteria
  - 15 patients were successfully identified and enrolled to a clinical trial
- See Figure 1



# Figure 1



# Results, cont.

- Reporting periods prior to the pilot demonstrated an average of 1400 patients entered into the CTMS
- During pilot period:
  - Patient screenings increased by 39.6%
  - Central screening comprised 17% of all screened patients within our CTMS
- See Table 1

# Table 1

Pre-Pilot Reporting Period	Patients Screened
February 1, 2017 – July 31, 2017	1486
August 1, 2017 – January 31, 2018	1347
Pilot Reporting Period	Patients Screened
February 1, 2018 – July 31, 2018	1977



# Conclusion

- Our Community NCORP successfully:
  - 1) Developed and implemented a centralized work process for systematic pre-screening of patients for clinical trials
  - 2) Removed the barrier of patients missing the opportunity to be identified as a potential clinical trial patient



# Conclusion, cont.

- Ongoing monitoring and communication with various teams was crucial to success
- Utilizing a central screening process increased the number of potential research patients identified
- MMCORC exceeded their NCI target accrual for Cancer Control (100.54%) and meet 72% of the Cancer Care Delivery Research (CCDR) program goal of 36 patients



# Resources

- A Quality Improvement Program to Improve Cancer Clinical Trial Recruitment, Accrual, and Retention. Education Network to Advance Cancer Clinical Trials (ENACCT). November 2012
- How to Improve Your Clinical Trial Patient Recruitment: A Panel Discussion. Beth Harper and Kelly Anastasio. Forte. Oct 24, 2017
- Barriers to Patient Enrollment in Therapeutic Clinical Trials for Cancer A Landscape Report. American Cancer Society Cancer Action Network. 2018

