

Transforming Clinical Trial Participation through Interdisciplinary Team Huddles

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1. Background

Participation in clinical trials facilitates the advancement of medical research and can lead to new treatments. Several factors contribute to suboptimal clinical trial enrollment, including clinical trial availability, being presented with the option to enroll in a trial, and lack of awareness of clinical research. Therefore, barriers exist within the research facility.

2. Goals

We wish to address this barrier by bridging the knowledge gap and proactively engaging with the clinical teams to make them aware of patients' options.

3. Solutions and Methods

Within the multiple myeloma (MM) research team, email referrals sent by the clinical team to the clinical research coordinators (CRCs) were the only method of referral for clinical trials. Beginning on Wednesday, October 25, 2023, however, CRCs started actively participating in the MM physician's pre-clinic huddles. These huddles are short meetings in which the clinical team is briefed on current patient status. These discussions include health updates, treatment plans, and treatment changes for progression of disease. By actively participating in pre-clinic huddles, the CRCs can directly and efficiently engage with the clinical teams about the patients, discuss available clinical trial options, and maximize the number of patients referred for "prescreening" – a process in which patient eligibility is more thoroughly assessed for a potential trial.

4. Outcomes

By attending physician huddles, the MM research team saw a significant increase in referrals for prescreens compared to prior months. November referrals for prescreening increased by 184 percent, and December referrals for prescreening increased by 120 percent. Implementing this new process demonstrated an overall improvement in the consideration of clinical trial options for patients, which in turn helps improve patient access to clinical research.

5. Lessons Learned and Future Directions

The MM research team's CRCs initiative to participate in pre-clinic huddles has led to several significant findings and pathways forward. First, the proactive communication between CRCs and referring physicians has led to heightened awareness and consideration of available trials, thus increasing the value of patient care through interdisciplinary cooperation. This initiative also highlights the importance of early inclusion of research options in patient treatment plans, preparing both patients and healthcare providers for potential treatment shifts. The model's effectiveness in boosting patient referrals to the MM team showcases a promising approach that could serve as an example for other disease groups seeking to enhance referrals. By adopting similar methods, there is potential for expanding access to breakthrough treatments for a broader and more diverse patient population.

Additionally, constant evaluation and adaptation of the research center's existing workflows is crucial, especially within a rapidly evolving medical research landscape. By committing to regular reviews of

engagement strategies and maintaining flexibility in the face of new developments, research centers can utilize innovative processes that ensure that patients remain at the forefront of healthcare advancements. The fusion of proactive participation, interdisciplinary collaboration, and a commitment to change forms a powerful framework for increasing clinical trial participation and improving patient care.

Figure

