Enhancing Clinical Trial Participation through Interdisciplinary Team Huddles



Ramy Mahmoud, Ojaswini Sharma, Allya Elgayar, Emily Mitchell, Amanda Kreitman, Anna Blangiardo, Donna Catamero, Alex Lieberman-cribbin, Erick Herrscher, Amishi Dhadwal

BACKGROUND

The progression of medical research and the potential discovery of groundbreaking treatments are propelled by individuals actively participating in clinical trials. However, various obstacles hinder optimal enrollment in these trials, such as limited availability, the presentation of the option to participate, and a general need for more awareness regarding clinical research. Consequently, barriers emerge within the research facility itself.

GOALS

Our aim is to overcome this obstacle by closing the information gap and collaborating with the clinical teams to ensure they are well informed about the options available to patients.

METHODS

Previously, the clinical research coordinators (CRCs) within the multiple myeloma (MM) research team relied solely on email referrals from the clinical team to identify potential patients for clinical trials. However, the CRC team implemented a new approach on Wednesday, October 25, 2023. The CRCs now actively participate in the MM physician's pre-clinic huddles, which are brief meetings where the clinical team receives updates on patient health, discusses treatment plans and addresses any changes in disease progression. This active involvement allows the CRCs to directly engage with the clinical teams, discuss available clinical trial options, and increase the number of patients referred for "prescreening," where their eligibility is thoroughly assessed for clinical trials.

RESULTS

By attending physician huddles, the MM Research team saw a significant increase in referrals for prescreens compared to prior months. The average number of prescreen referrals in the last quarter (October – December) was 24 as compared to the average from the first 3 quarters (January – September), which was 12.5. The implementation of huddles demonstrated a 92% increase in the amount of referrals per month in 2023.

As the newly implemented process of participating in huddles became fully incorporated into the CRCs workflow in 2024, the dominance of prescreen referrals originating from huddle vs email continued. In the first quarter of 2024 (January-March), 71 out of 104 prescreen referrals originated from huddle, constituting 68% of the total.

Prescreen referrals

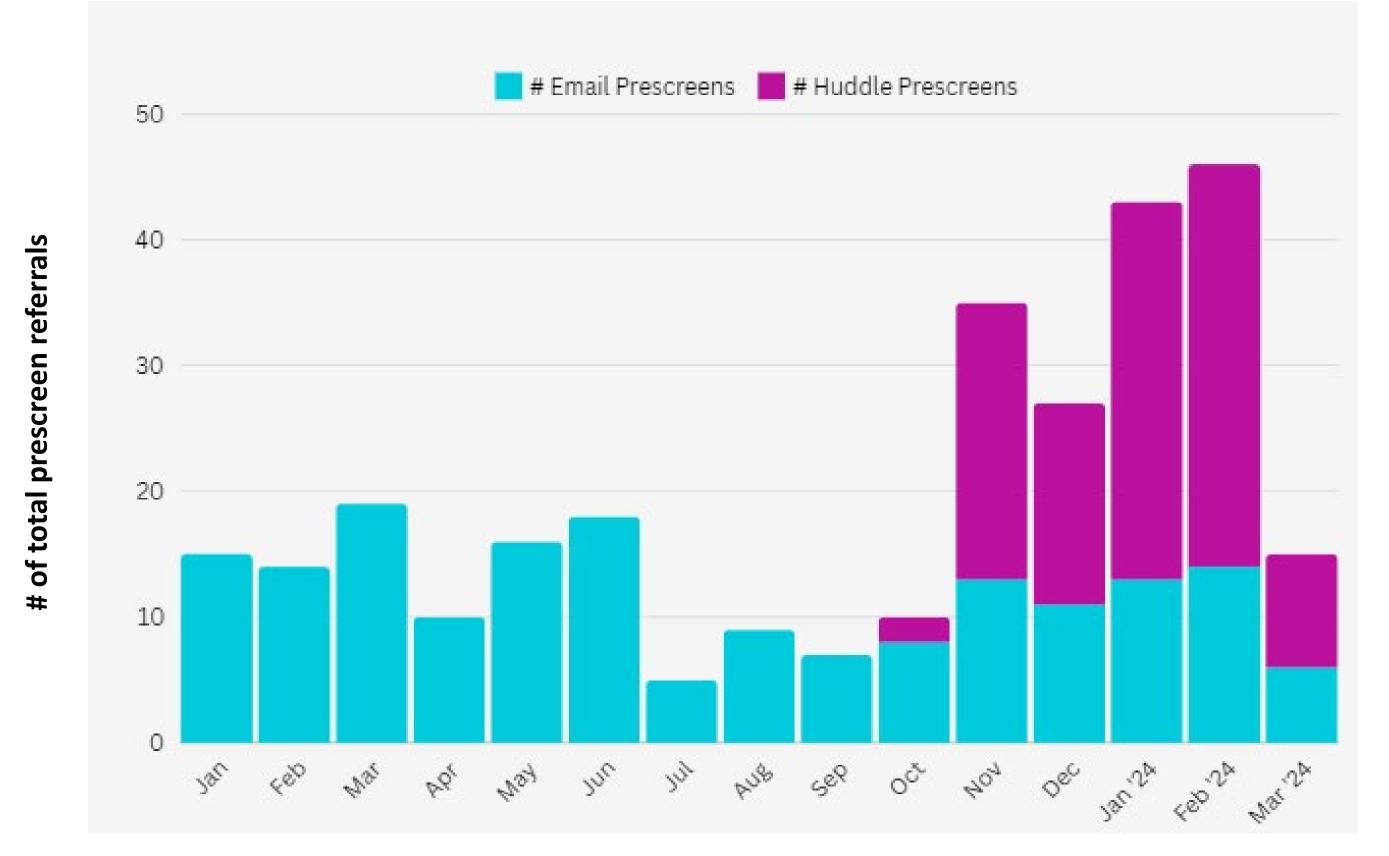


Figure 1. There was a total of 195 prescreen referrals for the year of 2023. After CRC participation in huddles, 22/35 prescreen referrals for the month of November were from huddle. In December, 16/27 prescreen referrals were from huddle. Carrying into the new year, 71/104 prescreen referrals in Q1 were originated from huddle.

Comparing the first quarters of 2023 and 2024, there were 56 more referrals this year (n=104) than last year (n = 48), representing a 117% increase in prescreen referrals. 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.

CONCLUSIONS

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 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.

Amidst a rapidly evolving medical research landscape, the constant evaluation and adaptation of research center workflows is not just important, it's crucial. By committing to regular reviews of engagement strategies and maintaining flexibility in the face of new developments, research centers can harness innovative processes that keep patients at the forefront of healthcare advancements. This fusion of proactive participation, interdisciplinary collaboration, and a commitment to change forms a powerful framework for increasing clinical trial participation and improving patient care.