Yale School of Medicine’s Integrative Approach to Recruit a Diverse Patient Population for Research

BACKGROUND

The Yale Center for Clinical Investigation (YCCI) serves as a hub for clinical and translational research at Yale School of Medicine. As an institution, the Yale School of Medicine has been focused on building an integrated approach to clinical research and clinical research participation aimed to create a partnership that included both the University health system and the larger community.

In 2006, an NIH grant helped YCCI support the growth of clinical trials by over 850%. As part of this exponential growth, diversification of clinical trials became a key objective.

APPROACH

The YCCI utilized a multipronged approach to diversifying the clinical trials and research it support.

Cultural Ambassador Program

The goal of the Cultural Ambassador Program is to foster partnerships between community leaders and investigator teams. Partnerships were formed with the Connecticut African Methodist Episcopal Zion Churches (AME Zion), one of the oldest African American Congregations in the U.S., and with Junta, one of the first Latinx community based non-profits in New Haven.

Connecticut AME Zion and Junta partners select the Cultural Ambassadors who provide bidirectional collaboration. Ambassadors receive about 200 hours in research training to assist in research operations and provide feedback on community needs, ideas, and interest. Their roles include:

- Hosting activities in the community to raise awareness about ongoing research
- Assistance in and input on recruitment campaigns and plans
- Assessment of protocols during the design phase
- Translation of study material and informed consent forms
- Participation in monthly community grand rounds
Leveraging patient portals for research

Yale also focused on direct to patient innovations using the Epic electronic health record, including the conversion of the “Help Us Discover” volunteer profile. The volunteer profile was converted from paper to an electronic profile and made available through a Yale research tab in their MyChart patient portal.

Without any direct advertisements at first, the MyChart research profiles resulted in more than 3,329 new volunteers for clinical trials, with 2,603 subjects referred to and screened for a study.

Later, YCCI rolled out new direct to patient recruitment functionality through MyChart. This functionality allows the EHR to automate high level matching of patients based on study inclusion/exclusion criteria and sends alerts directly to the patient’s MyChart.

RESULTS

Each study that engaged with the Cultural Ambassadors had improvements in participation of underrepresented groups, ranging from 22% - 91%, with one exception at 12% underrepresented participation.

The “Help Us Discover” volunteer and recruitment platform has been used in 40 studies. Data from those screened and enrolled showed that underrepresented minorities made up 35% of the interested respondents:

57% of the underrepresented minority respondents came after business hours or on weekends, suggesting that digital outreach may enhance underrepresented recruitment by being available 24 hours a day.

CONCLUSION

These efforts from YCCI illustrates that long-term community partnerships with local organizations have extensive overarching benefits. The value of this includes:

- building trust among historically underserved communities
- improving the biomedical research landscape by incorporating diverse voices into shaping research questions
- increasing recruitment and retention efforts for clinical trials.

This case study also highlights the importance of and opportunities within an integrative multi-pronged methodology that links healthcare to research through patient portals.

Additionally, having after-hour and weekend options for patients interested in research eliminates the burden for patients to take time off of work and enables them to explore their options around participating in and volunteering for research.

For citations and more information on this case, please see the MRCT Center toolkit.