# Practical Approaches to Improving Diversity in Clinical Trials

Wednesdays 11AM -12noon ET



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<b>Recording available</b>	Community Awareness, Access, Knowledge
<b>Recording available</b>	Workforce Development
<b>Recording available</b>	Study Design, Eligibility, Site Selection & Feasibility
December 9, 2020	Study Conduct (Recruitment, Retention)
January 13, 2021	Data Standards and Analysis
January 27, 2021	Stakeholder Roles and Responsibilities
February 10, 2021	Role of Data in Diversity: Genetics & Real World Data

#### Today's topic

#### Study Conduct (Recruitment, Retention)

December 9, 2020 11AM -12noon ET



Laura Meloney, MSc, MPH Moderator Program Manager, MRCT Center

Quita Beeler Highsmith, MBA

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Vice President and Chief Diversity Officer Genentech



Anne Marie Inglis, PhD Senior Director Global Development Operations Mallinckrodt

#### MULTI-REGIONAL CLINICAL TRIALS THE MRCT CENTER OF BRIGHAM AND WOMEN'S HOSPITAL OH MARVARD

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Practical Approaches to improving Diversity in Clinical Trials



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# The Multi-Regional Clinical Trials Center (MRCT Center)

#### **Our Vision**

Improve the integrity, safety, and rigor of global clinical trials.

#### **Our Mission**

Engage diverse stakeholders to define emerging issues in global clinical trials and to create and implement ethical, actionable, and practical solutions.





#### Leadership and Guidance

- RADM Richardae Araojo, PharmD, MS, U.S. FDA
- Barbara E. Bierer, MD, MRCT Center
- Luther T. Clark, MD, Merck & Co., Inc.
- Milena Lolic, MD, U.S. FDA
- David H. Strauss, MD, Columbia University
- Sarah White, MPH, MRCT Center

#### MRCT Center staff:

- Carmen Aldinger, PhD, MPH
- Hayat Ahmed, MS
- Laura Meloney, MS, MPH
- Joshua Smith-Sreen, MBE

Achieving Diversity, Inclusion, Equity In Clinical Research

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And the invaluable contributions of >50 workgroup members, representing:

- Patients, Patient Advocates
- Academia
- Pharmaceutical companies
- CROs
- Non-profit organizations
- Trade associations
- Government agencies
- Research institutes

#### Each serving in their individual capacity.



# Guidance Document

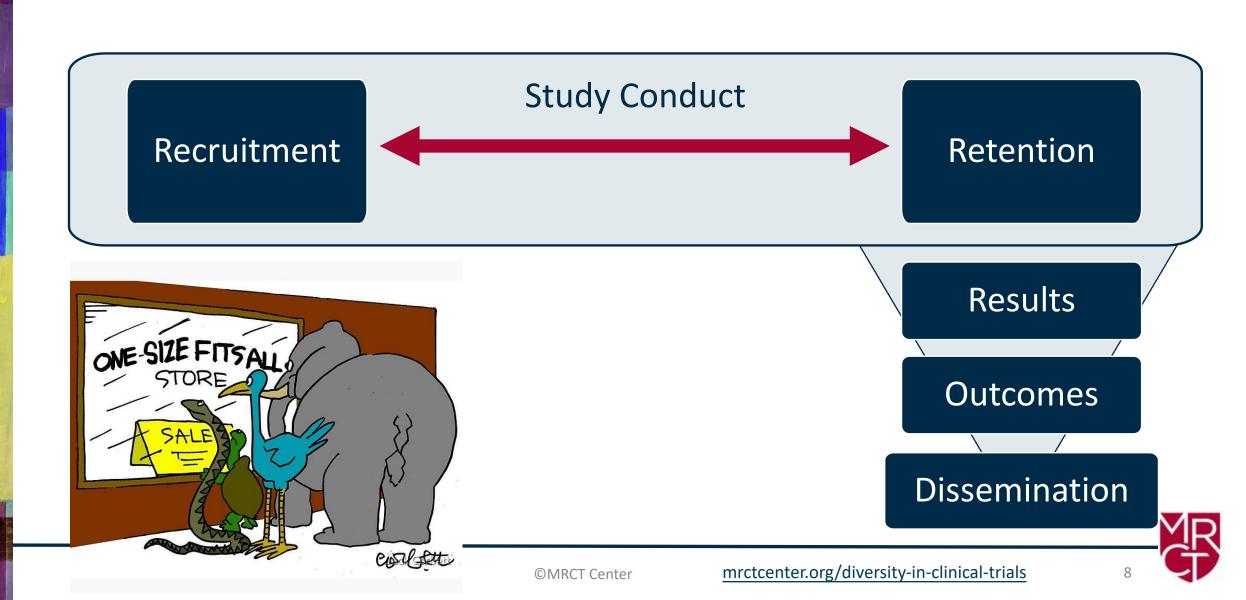
- Multi-stakeholder contributions and consensus
- Practical and actionable recommendations
- Accountability section considers how each stakeholder can change the paradigm
- Toolkit provides adaptable resources not easily found elsewhere



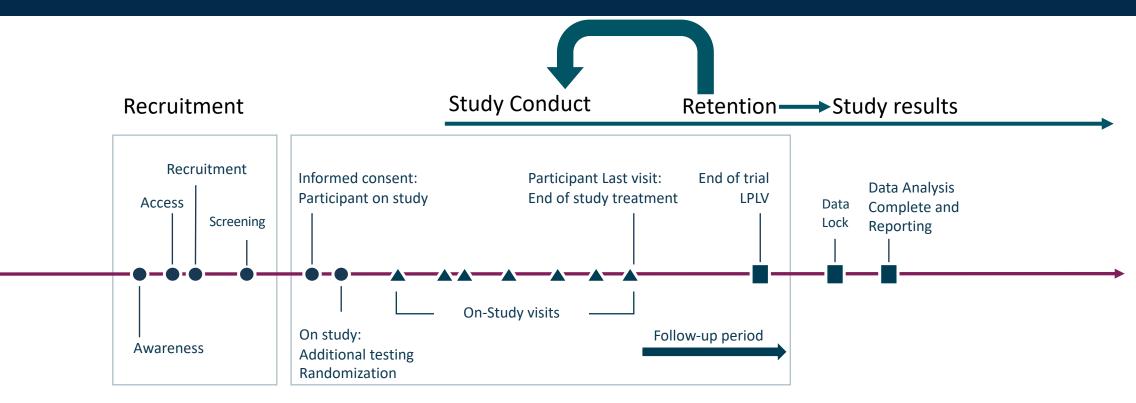


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### Today's agenda



# Participant Trial Journey

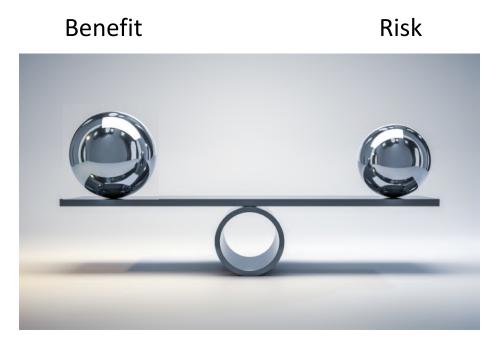


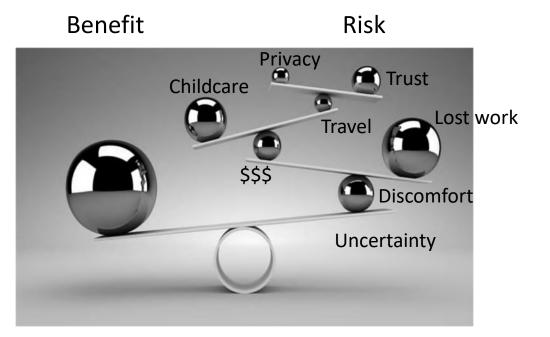
Study Design Informed consent simplification Logistical issues Decentralized trials Payment, transportation, childcare, etc. Post-trial access to medicines Return of results

#### Recruitment – Making the decision to participate

# Sponsor/Investigator/IRB view

### Potential participant's view

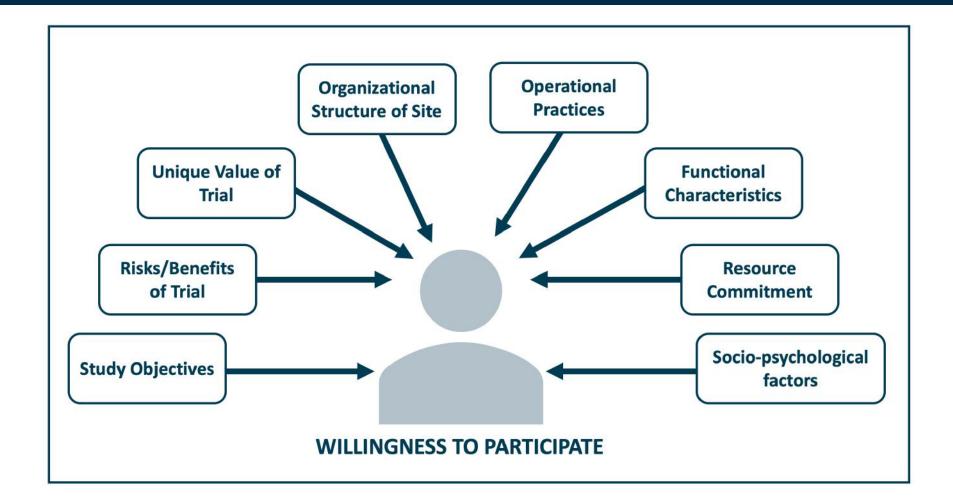






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# Study Conduct



All influential variables need to be considered in one's decision

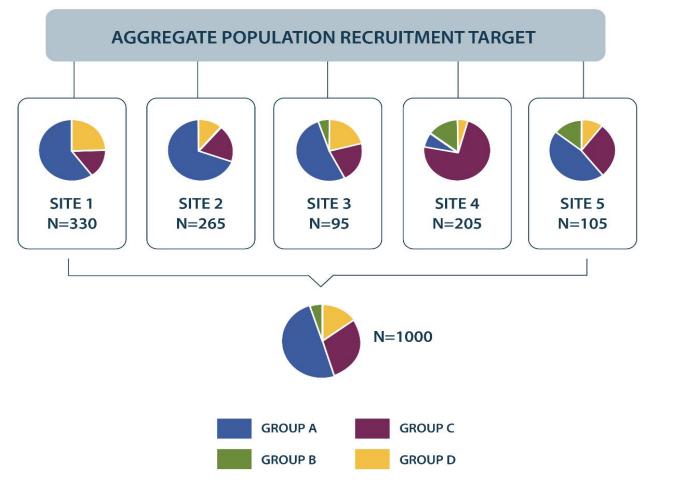


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#### Recruitment

- Requires advanced planning
- Specific to site population, trial population, and associated subpopulations
- Consider epidemiological data, as available, and in advance of implementation



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#### Recruitment

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	Output indicators
Sponsor Logo	<ul> <li>Trial-level recruitment plan for diversity available at site, including all the proposed elements to consider (See Achieving Diversity, Inclusion and Equity in Clinical Trials Guidance Document, Table 12, Part E, Section 13.5)</li> <li>Site-specific recruitment plan for diversity available at site</li> </ul>
Recruitment Strategy Document	Monitoring mechanisms for recruitment targets by demographic established
Study Title	Suggested recruitment strategies tailored to target population(s) available at site
Protocol #	Outcome indicators
NCT #	Site investigator-reported understanding of diversity enrollment objectives
Recruitment Strategy Document (RSD)	Data on demographic profile of enrolled participants available to sponsor in a suitable amount of time
https://mrctcenter.org/diversity-in- clinical-trials/download/523/	In the case that demographic profile data indicate site will not meet target enrollment of target subpopulation, contingency plan implemented

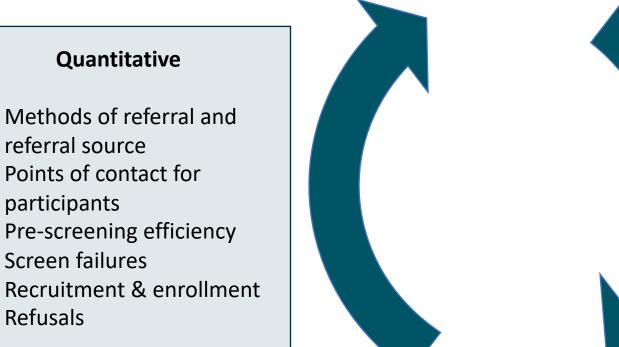
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# Recruitment – informing activities and strategies

#### • Relationship between qualitative and quantitative strategies



#### Qualitative

- Physician engagement
- Social media postings
- Language and culturally appropriate materials
- Bilingual staff and translators
- Participant navigators
- Informed consent process
- **Outreach** activities



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Quantitative

referral source

Screen failures

participants

Refusals

#### Retention

- The longer a participant is in a research study, the more valuable their information
- Reduce attrition by identifying impediments and barriers in advance



# "

What should we understand to make your participation easier?



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#### Retention - Reducing Burden

- Provide information in a language understandable to the participant
- Maintain engagement with the individual
- Minimize disruptions
- Maximize flexibility
- Provide support (e.g., childcare, eldercare, transportation, etc.)
- Reimburse promptly, preferably prepared or debit card



### Recommendations – Study Conduct, Recruitment, and Retention

- Understand the participants (i.e., their needs, their culture, their values)
- Train staff conduct, bias, and behaviors
- Flexibility in scheduling and conducting study visits offer choices
  - Minimize asks, visits, and procedures (e.g., sample collection)
  - Decentralize trials to the extent possible
  - Utilize technology if helpful
- Use quantitative metrics and tracking to inform qualitative strategies and approaches for recruitment and retention
- Develop an agile, continuous improvement cycle to learn and improve



### Recruitment and Retention – Key Performance Indicators

#### Recruitment, Conduct and Retention – Potential Key Performance Indicators (KPIs)

#### **Output indicators**

- E
- Proportion screen failures of target population(s) (available during study implementation)
- Tailored recruitment materials for target population(s) available at site



Tailored recruitment strategies piloted in target population(s)



Evidence of prioritization of participant convenience in study protocol and site-specific recruitment plan



Evidence of patient input in recruitment strategies

#### **Outcome indicators**



- Data on screen failures informs recruitment modifications
- Tailored recruitment strategies/materials inform targeted recruitment at site
- Recruitment and retention of target subpopulation(s) meet enrollment objectives as defined in recruitment plan



# Today's speaker



# **Quita Beeler Highsmith, MBA**

Vice President and Chief Diversity Officer, Genentech

Please refer to the <u>webinar recording</u> for presentation.



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### Today's speaker



# Anne Marie Inglis, PhD

Senior Director Global Development Operations Mallinckrodt



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### From a Sponsor Clinical Operations Professional.....

- Have a goal, a plan to get there and track progress against it!
- Design and operationalize your study to be attractive to underrepresented diverse participants
  - Know your population
  - Consider inclusion/exclusion criteria
  - Make study procedures as flexible as possible to fit into as many different lives as possible
  - Provide health literate materials in multiple languages from the start
  - First ask, and then be considerate of the barriers to enrolment and continued participation



#### The Clinical Trial Site – Where the Rubber Meets the Road

#### • Select sites with access to the population

- Keep metrics for sites regarding their access to, enrolment of and retention of different demographic populations
- Geomapping can help to identify sites not previously used
- Select sites with a desire to recruit and retain that population
  - "Human touch" changes behavior and supports building trust in communities!
  - Site staff looks like the patient population
  - Site staff is culturally competent understands how decisions are made within the community, and key barriers to participation
  - Site staff asks curious questions throughout the study process "What barriers exist for you?"
  - Site staff have links to the community or links to others close to the community



### The Clinical Trial Site – Where the Rubber Meets the Road

#### Supporting Sites

- Engage with sites during study design
- Clarity on both what is expected, and why
- Help sites to understand barriers and facilitators to participation within the population
- Develop a shared recruitment and retention plan with each site independently
- Share ongoing metrics routinely

# Support People Bringing Research to Underserved Communities





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# **Discussion and Questions**

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