SWAT 120: The impact of audio-recording study discussions on recruitment rates: the audio study

Objective of this SWAT

The aim of this study is to investigate the association between being provided with an audiorecorded research consultation and consenting to the trial.

The secondary research aim is to assess the extent to which patients are willing to be audiorecorded.

Study area: Recruitment Sample type: Participants Estimated funding level needed: Low

Background

Recruitment is one of the most important challenges for trials. Various techniques have been developed and tested to try to help [1] and new methodologies are continuing to be developed. Providing an audio-recorded research recruitment consultation to the patient may help with the way the information is provided and therefore improve the likelihood that they will consent to join a trial [2]. This will be evaluated in this SWAT, which is embedded in the GAP trial (ISRCTN63614165). It might also be embedded in other trials (to be confirmed).

Interventions and comparators

Intervention 1: Audio-recorded research recruitment session Intervention 2: Standard research recruitment session, without audio-recording

Index Type: Method of Recruitment, Participant Information

Method for allocating to intervention or comparator

Randomisation

Outcome measures

Primary: Consent to the host trial Secondary: Consent to the Audio SWAT

Analysis plans

The primary analysis for the audio study will compare numbers and proportions of participants who agree to join the host trial in each of the two intervention arms (audio-recorded research consultation versus standard research consultation). The outcome will be summarised descriptively by allocated group and overall. The outcome will be modelled using linear mixed effects methodology with the treatment group fitted as fixed effects and recruiter as random effects. Intervention effects and 95% confidence intervals will be reported.

Possible problems in implementing this SWAT

Audio-recording of trial participants is integral to a number of studies run through the Bristol Clinical Trials Unit to identify obstacles during recruitment. There are very limited additional potential harms associated with participating in the SWAT, because it only involves talking to hospital staff (as is routine practice for the trials). Previous studies involving audio-recordings have suggested that it might raise some discomfort and distress. If this happens, participants will be asked if they wish to have the audio-recorder turned off or to stop the consultation.

References

1. Treweek S, Pitkethly M, Cook J, et al. Strategies to improve recruitment to randomised trials. Cochrane Database of Systematic Reviews 2018; (2): MR000013.

2. Rogers C, Paramasivan S, Elliott D, et al. Audio-recording recruitment consultations - an exploratory study in two RCTs to investigate the impact on randomisation rates. Trials 2017; 18 (Suppl 1): O54.

Publications or presentations of this SWAT design

Rogers C, Paramasivan S, Elliott D, et al. Audio-recording recruitment consultations - an exploratory study in two RCTs to investigate the impact on randomisation rates. Trials 2017; 18 (Suppl 1): O54.

Examples of the implementation of this SWAT

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