

Pilot & Feasibility Testing

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Learning goals

- Identify approaches to evaluating the capabilities of the partner healthcare system and testing key elements of various types of interventions
- Q & A with attendees



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Important things to know

- Pilot testing the ePCT methods increases likelihood of completing the trial and can prevent silly mistakes
- You need a biostatistician in the pilot/feasibility stage
- “Process issues” can derail the ePCT
- Use the pilot study to maximize acceptability, maintain affordability, and consider scalability of your intervention

ePCTs are not efficacy trials

- ePCTs bridge research into clinical care
- Intervention is integrated into real-world healthcare settings
- Involves streamlined data collection
- Pragmatic does not always mean low cost



During the pilot phase

- Establish close partnerships with healthcare system personnel
- Test and validate EHR data collection and extraction
- Evaluate whether generalizable patient population can be identified and enrolled with available healthcare systems
- Assess how well the intervention can be integrated into the clinical workflow
- Identify multiple local champions at each study site

Build partnerships

- Is the intervention aligned with the priorities of the partner healthcare system?
- How ready is the partner?
 - Are extra resources needed to support the intervention, identify participants, and extract necessary data?
 - How many sites are available to fully participate?
 - How much provider training will be needed, and can training use existing healthcare system infrastructure?
- If the intervention proves successful, what adaptations would be needed to implement it in other healthcare settings?



Aspects of feasibility that can be piloted

Verify that target population can be identified via the EHR

Test phenotypes needed for sample identification

Validate data quality, collection, extraction methods & accuracy

Evaluate if generalizable patient population is available

Coordinate processes with local champions

Test the training materials for frontline providers & staff

Test appropriateness & usability of study toolkits or other materials

Evaluate informed consent materials

Evaluate whether fidelity/adherence measures can be achieved to justify the full scale ePCT

Use what you learn to design the ePCT

Evaluate power calculations



If cluster randomization is involved, collect data to confirm estimate of the intraclass correlation coefficient (ICC) for power calculations

Quantify feasibility for pilot study aims

- Eligibility
- Recruitment
- Randomization
- Adverse events
- Retention
- Missing data
- Intervention fidelity

Keep in mind realistic targets for the study's patient population



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Quantifying example 1



Demonstrate effective recruitment and retention, which we define as the ability to

- Recruit an average of 10 patients per month per site
- Retain 80% of participants for final data collection at 6 months



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Quantifying example 2

Determine whether the intervention can be delivered with reasonable feasibility, which we define as 70% of the enrolled participants engaging in the intervention



Determine whether the smoking cessation intervention can be delivered with reasonable feasibility, which we define as 20% of the approached participants engaging in the intervention

Quantifying example 3

Demonstrate ability to collect primary outcomes and minimize missing data to less than 5% of primary outcome measures



Demonstrate ability to collect primary outcome of depression symptoms (patient-reported) and minimize missing data to less than 10% of primary outcome measures

Ensuring trial readiness

- Troubleshooting and iterative testing
- Flexibility to accommodate local conditions and changes over time
- Continuous engagement with healthcare system
- Readiness tasks
 - Recruitment plans are finalized with backup plans available
 - Ethical/regulatory aspects are addressed
 - Intervention is fully developed and finalized
 - Data collection methods are adequately tested
 - Budget and timeline are realistic and feasible



Readiness checklist

Milestone	Completed
<i>Recruitment plans are finalized</i>	
All sites identified (documentation of site commitment)	
Methods for accurately identifying participants validated	
All agreements for necessary subcontracts in place	
<i>Ethical/regulatory aspects are addressed</i>	
Coordinated IRB oversight in place	
Finalized plans for informed consent or waiver of informed consent	
Finalized data and safety monitoring plan	
<i>Intervention is fully developed and finalized</i>	
Finalized intervention (including materials and training at sites) ready for site implementation	
Finalized protocol is IRB approved (informed consent and data collection forms, if applicable)	
<i>Data collection methods are adequately tested</i>	
Validated methods for the electronic health record information	
Validated study surveys, interviews, or other data collection modes	
Demonstrated quality assurance and harmonization of data elements across healthcare systems/sites	
Statistical and data analysis methods have been adequately developed	
<i>Budget is realistic, feasible, and accounts for potential changes</i>	

Implementation Readiness Checklist available on the [Living Textbook](#)



In the end, good planning will help

- Avoid silly mistakes
- Maximize acceptability
- Maintain affordability
- Remember scalability

Important things to do

- Conduct a pilot or feasibility study of the intervention to inform the final design of the ePCT
- Work with a great biostatistician and an informatician (if needed)
- Develop a partnership approach to working with your healthcare systems
- Identify multiple local champions for all your sites
- Anticipate, identify, and make a plan to address changes in the healthcare system

Resources

- Healthcare system partnerships: [Establishing Close Partnerships with Healthcare System Leaders and Staff](#)
- Trial readiness criteria: [Implementation Readiness Checklist](#)
- Pilot and feasibility testing: Assessing Feasibility: [Pilot Testing and Feasibility Assessment Scenarios from the Collaboratory's Demonstration Projects](#)

From the *Living Textbook of Pragmatic Clinical Trials*
www.rethinkingclinicaltrials.org

