The Trauma Survivors Outcomes & Support: UH2-UH3 Lessons Learned

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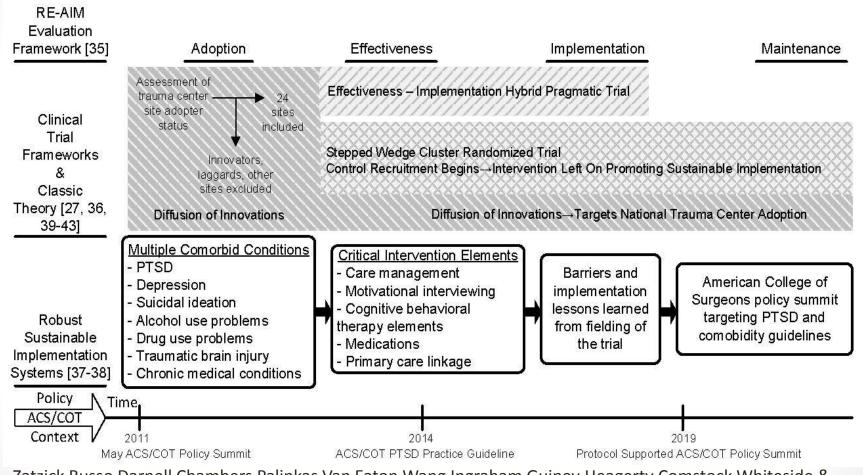
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TSOS Barriers Scorecard

Barrier	Level of Difficulty					
	1	2	3	4	5	
Enrollment and engagement of patients/subjects			X			
Engagement of clinicians and Health Systems		X				
Data collection and merging datasets			X			
Regulatory issues (IRBs and consent)				X		
Stability of control intervention	X					
Implementing/Delivering Intervention Across Healthcare Organizations			Anticipated			

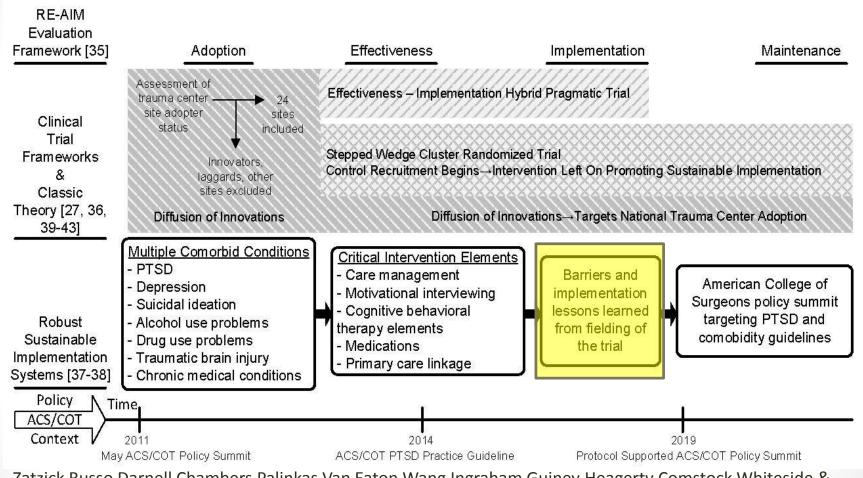
TSOS UH3 Update

- Recruitment update and lessons learned
- Major challenge: Site variability/regulatory delays and stepped wedge design
- Anticipating site intervention implementation variability



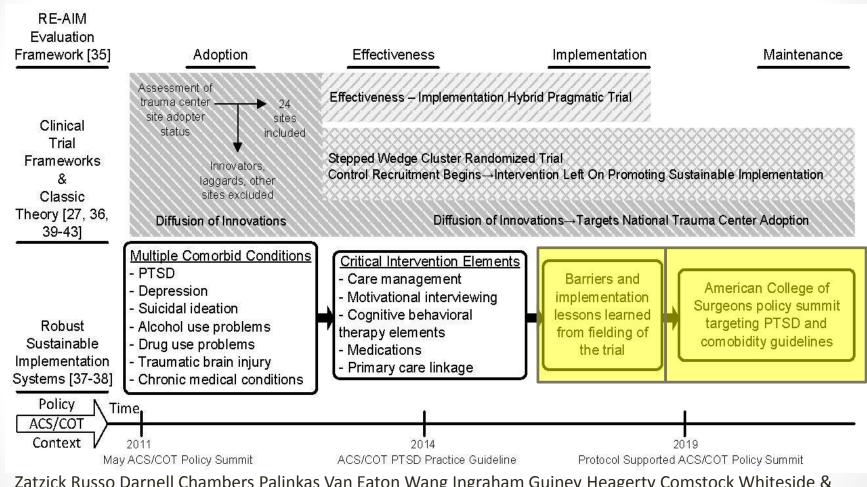
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Recruitment Update & Lessons Learned

- 20 sites ≥ 1 patient recruited
- 2 additional sites with automated recruitment workbook data transfer
- 2 sites regulatory delays: IRB re-review

TSOS EHR PTSD Screen Domains

- Female gender
- Non-White race/ethnicity
- Low income (insurance status as proxy)
- Intentional injury (e.g., assault, gunshot)
- ICU admit
- History of PTSD diagnosis
- History of other mental health diagnosis
- History of alcohol/drug use problems, positive BAC
- Tobacco use
- Prior inpatient admissions

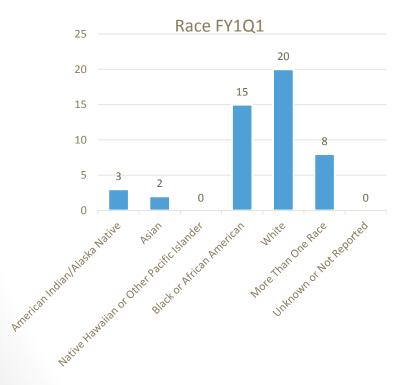
Study: UH3 Project: Trauma Survivors Outcomes

and Support

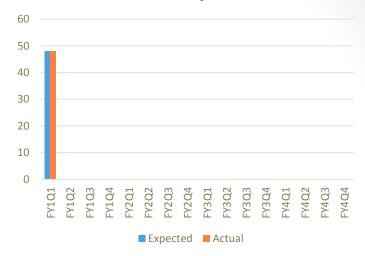
Principal Investigator: Douglas Zatzick, MD

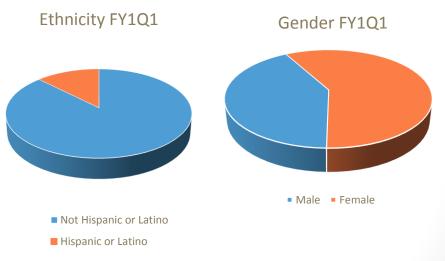
NIH Grant Number: UH3 MH106338-02

UH3 Award Date: August 2015



Total Active Subjects to Date





TSOS Minority & Gender Recruitment (N = 48)

Anticipated % Actual %

Minority 21% 58%

Female 24% 58%

Major Challenge: Regulatory & Other Delays Contribute to Site Recruitment Variability

- Some sites rapid: Complete control recruitment all in one period
- Some sites delayed may not complete control recruitment before intervention switched on
- Scientific tension between stepped wedge design integrity & site implementation flexibility
- Initial solution
 - 4 minimum patients per period
 - 12 maximum patients per period

Additional Modifications to Address Site Start-up Variability

- 25th site randomized from wait-list
- First period extended by 2 months
- High performance site(s) asked to recruit more control patients

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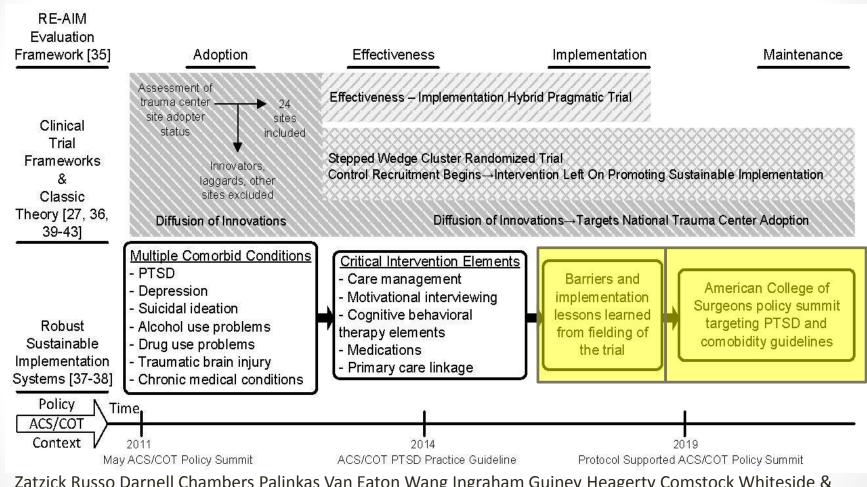


1 = little difficulty

5 = extreme difficulty

Emerging Scientific Issue for Effectiveness-Implementation Hybrid Pragmatic Trial Design

 Anticipating site variability in intervention implementation and related sustainable maintenance of screening and intervention procedures



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