

LEARNING FROM PCORI AWARDEES AND PARTNERS

Roles of Patient and Stakeholder Partners in Patient-Centered Research

Using data collected from awardees, patients, and other stakeholders who serve as research partners on PCORI-funded projects, PCORI learns how researchers and partners work together to conduct patient-centered research.

RESEARCH PARTNERS COME FROM DIFFERENT COMMUNITIES AND SERVE A VARIETY OF ROLES

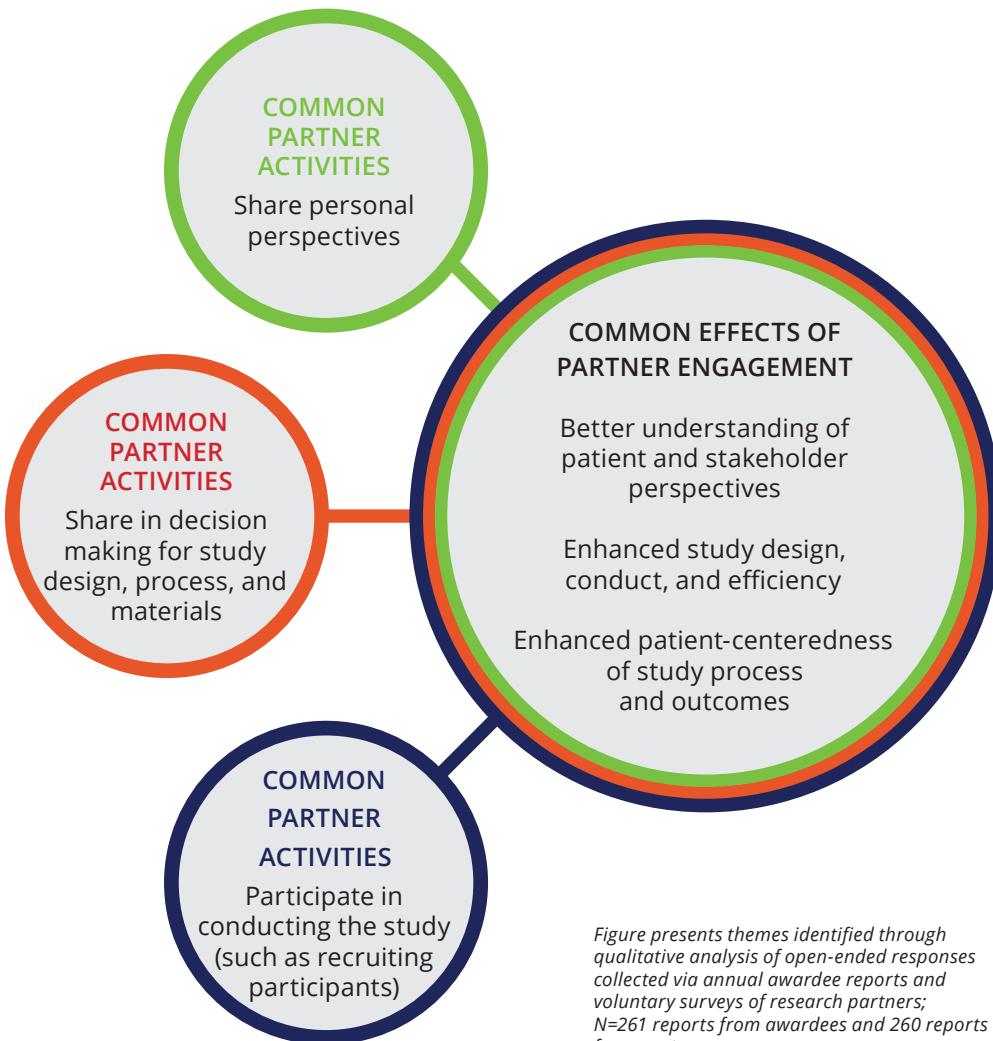
Nearly all PCORI projects (96 percent) engage with **patients, caregivers, and/or advocacy organizations representing patients or caregivers**, and most projects (92 percent) engage with **clinicians**. PCORI projects also engage with a range of other healthcare stakeholders, including **health systems, community-based organizations, policy makers, payers, training institutions, industry representatives, and purchasers**. Nearly all PCORI projects (98 percent) engage with **partners from more than one stakeholder community**.

Partners are commonly involved as members of the **research team** (87 percent of projects), as **co-investigators** (50 percent of projects), and/or through **advisory groups** (86 percent of projects).

Information collected via annual awardee reports; N=305 awardees: 70 projects at project year one, 116 projects at project year two, 119 projects at year three

RESEARCH PARTNERS MAKE A DIFFERENCE

PCORI awardees and research partners described ways partners get involved in the research process and the difference they make. The figure below presents common partner activities and effects of partner engagement.



EXAMPLES OF EFFECTS OF PARTNER ENGAGEMENT AT EACH STUDY PHASE

| Study phase | Effects of engagement |
|--|--|
| PLANNING THE STUDY | Development or refinement of research topics and/or research questions <ul style="list-style-type: none"> • Confirm the importance of research topics being pursued • Inspire the pursuit of specific research questions • Refine the research questions' relevance and alignment with patients' and/or other stakeholders' priorities |
| | Selection or refinement of interventions and/or comparators <ul style="list-style-type: none"> • Refine interventions and/or comparators to be more patient-centered • Adapt materials or interventions to be culturally or linguistically appropriate • Modify the intervention to be less burdensome to participants |
| | Selection or refinement of outcomes and/or measurement <ul style="list-style-type: none"> • Select primary and secondary outcomes that matter to patients and other information users • Identify and/or refine measures of these outcomes |
| CONDUCTING THE STUDY | Recruitment and/or retention <ul style="list-style-type: none"> • Suggest changes to recruitment strategies, such as adding or changing recruitment locations, refining inclusion/exclusion criteria, and using culturally appropriate ways to recruit specific populations • Shape study materials and consent forms (e.g., simplifying or adding more information about risks and benefits) • Enhance recruitment and retention of participants by providing guidance on ways to communicate with participants, and contributing to greater perceived value of study participation among enrolled patients/caregivers |
| | Data collection <ul style="list-style-type: none"> • Select specific modes of data collection (e.g., electronic versus phone) • Inform decisions about timing, such as appropriate follow-up periods • Inform changes to data collection as part of clinic work flow • Increase sensitivity around data collection (e.g., provide insights about why racial/ethnic minorities may be hesitant to share personal information) |
| | Data analysis and/or results review <ul style="list-style-type: none"> • Provide input on the analysis plan • Use personal perspective to enhance interpretation of study results • Contribute to decisions about additional analyses to conduct |
| Sharing study information and/or results | <ul style="list-style-type: none"> • Identify new ways to share results and new audiences to reach • Improve communication with different audiences • Increase credibility of the results |

Data from open-ended responses collected via annual awardee reports and voluntary surveys of research partners; N=261 reports from awardees and 260 reports from partners

AWARDEE

"Our decision to pursue this study and, in particular, the patient population ... was driven by requests from patients and providers who noted a clear gap in knowledge and absence of treatment guidelines for this distinct patient group."

AWARDEE

"As members of the research team, patient stakeholders were key to the development of the survivorship care plan tool and measures of effectiveness. Their involvement has ensured a truly patient-centered tool and relevance of potential findings to the patient audience."

PATIENT PARTNER

"We changed the language of recruitment materials to make it easier for the patient and family to understand what they were agreeing to."

Further information about PCORI's framework for assessing research engagement and early findings about effects of engagement:
L. Forsythe, A. Heckert, M.K. Margolis, S. Schrandt, & L. Frank. Methods and Impact of Engagement in Research, from Theory to Practice and Back Again: Early Findings from the Patient-Centered Outcomes Research Institute. *Qual Life Res.* 2017 May 12. doi: 10.1007/s11136-017-1581-x