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May 8th, 12:30 PM - 1:30 PM

## Framing Hospital Engagement for the Recruitment of a Birth Cohort for the NCS: Lessons Learned for Ensuring Collaboration in Worcester County

Marianne E. Felice  
*University of Massachusetts Medical School*

*Et al.*

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Felice ME, Moore Simas TA, Sepavich DM, Brenckle L, McLaughlin TJ, Aupont O. (2013). Framing Hospital Engagement for the Recruitment of a Birth Cohort for the NCS: Lessons Learned for Ensuring Collaboration in Worcester County. UMass Center for Clinical and Translational Science Research Retreat. Retrieved from [https://escholarship.umassmed.edu/cts\\_retreat/2013/posters/59](https://escholarship.umassmed.edu/cts_retreat/2013/posters/59)

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## **Framing Hospital Engagement for the Recruitment of a Birth Cohort for the NCS: Lessons Learned for Ensuring Collaboration in Worcester County**

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Marianne Felice<sup>1</sup>, Tiffany Moore Simas<sup>1</sup>, Deidre Sepavich<sup>1</sup>, Linda Brenckle<sup>1</sup>,  
Thomas McLaughlin<sup>1</sup>, Onesky Aupont<sup>1</sup>

**Context:** In 2011, three designated NCS Study Centers began preparatory work for field implementation of a planned recruitment strategy called Provider Based Sampling (PBS). In each PBS primary sampling unit, three hospitals were selected to test the feasibility of recruiting a cohort of 125 women and their babies around delivery time. The selected hospitals for Worcester account for nearly 80% of County births and can be categorized into three distinct facility types and patient catchment areas: an academic medical center; a university-affiliated but independent community hospital; and a private for-profit community hospital with market share competitor of the academic medical center.

**Methods:** We used tailored negotiations and engagement strategies to gain the cooperation and engagement of targeted hospitals/birthing centers.

**Preliminary Conclusions:** The lessons learned from this exercise are:

- Time to gain hospital engagement and clearance to initiate study activities ranges anywhere from 2 weeks to 2 months and depends largely upon the type of the institution, the profile of the Negotiator, and the nature of the scope of work.
- A greater likelihood of hospital engagement in the NCS seems to be associated with the depth of existing relationships between the Study Center and targeted hospitals.
- Thoughtful interactions and timely discussions with the key institutional stakeholders (either individually or in groups) are important to achieve collaboration and engagement.
- Balancing sensitivity to clinical cultures and settings while preserving research integrity is essential for study implementation in busy hospital/clinical environments.
- Planning for site compensation and/or the ability to support local clerical staff to help with study activities must be considered as a means to facilitate negotiations and site engagement.
- Adequate resources must be planned for successful implementation and execution of research activities in settings (e.g community hospitals) unfamiliar with research activities.
- Involvement of nursing personnel is crucial for successful implementation of any protocol.

***Funding: Worcester County PBS Pilot Funding provided by NICHD Contract No. HHSN275201200028C***

<sup>1</sup>University of Massachusetts Medical School, Department of Pediatrics, National Children's Study Worcester County.

**Contact Information:** Onesky Aupont MD, MPH, PhD  
Department of Pediatrics,  
National Children Study,  
Chang Building - 222 Maple Avenue  
Shrewsbury, MA 01545  
[Onesky.aupont@umassmed.edu](mailto:Onesky.aupont@umassmed.edu)