

MRC-NIHR Trials Methodology Research Partnership: Webinar recording

### Informed Consent Complexities and Ways Forward: Methodological Work From Around the Globe

Presented, on behalf of the Global Health Network, by: Elizabeth Allen (Global Health WG TMRP & Partnerships, the Global Health Network) Kerry Hood (UKCRC Registered Centre for Trials Research, Cardiff University) Victoria Shepherd (Cardiff University) Amy Russell (University of Leeds) Julia Wade (University of Bristol) Tanya Symons (Clinical Trials Consultant, T Symons Associates PTY LTD) Tsaone Tamuhla (South African National Bioinformatics Institute)

### 27 March 2023

The slides are available below.

For any queries, please contact <a href="https://www.uktmn@nottingham.ac.uk">uktmn@nottingham.ac.uk</a>

### https://youtu.be/Epm2TL0Oank

# **Trials Methodology Research Partnership**

Webinar series: UK Trial Managers' Network

# Informed consent complexities and ways forward: methodological work from around the globe

Global Health and Trial Conduct Working Groups



https://www.methodologyhubs.mrc.ac.uk/

https://tghn.org/













# **Global Health Working Group**

- Raising awareness & supporting methodology researchers in LMICs
  - Small project grants
  - Attendance at International Clinical Trials Methodology conferences







Contemporary Clinical Trials Communications Volume 29, October 2022, 100959

The practice of pilot/feasibility studies in informing the conduct of HIV related clinical trials in sub-Saharan Africa: A scoping review

Sylivia Nalubega <sup>a</sup> 옷 평, Lawrence Obado Osuwat <sup>a</sup> 평, Poku Brenda Agyeiwaa <sup>b</sup>평, Catrin Evans <sup>c, d</sup> 평, John Bosco Matovu Junior <sup>e</sup> 영















# Postgraduate Diploma in Global Health Research



Strengthening clinical trials to provide high-quality evidence on health interventions

Strengthening clinical trials to provide high-quality evidence on health interventions and to improve research quality and coordination

Implementation of the resolution on clinical trials WHA 75.8



# **TMRP Trial Conduct Working Group**







Trials Methodology TRIALS Methodology Research Partnership



**IHR** National Institute for Health Research

- Develop research ideas/projects
- Identify need for practical guidance
- Develop applications for funding
- Support each other's research projects
- Propose activities for dissemination & awareness creation

# **Examples of funded projects**



### Recruitment and Retention Sub-group

Using Machine Learning with user feedback to improve ORRCA Anna Kearney

**Communication Sub-group** 

Understanding the language and complexity of informed consent in clinical trials and identifying participant preferences for key trial processes Frances Shiely



Beyond "must speak English": In search of a fairer way to operationalise patient screening for language proficiency in trial recruitment Talia Issacs



Qualitative Research in Trials Sub-group

Qualitative data sharing practices in clinical trials in the UK and Ireland: Towards the production of good practice guidance Catherine Houghton

### Inclusivity/Recruitment Sub-group

Minority ExpeRiences In Trials (MERIT): Understanding why ethnic minority groups are under-represented in trials through a rapid qualitative evidence synthesis, and mapping evidence to find solutions

Heidi Gardner

### Cross-working group projects

- Qual Share
- e-Consent
- PILs for Adaptive designs

# **TCWG outputs**

### **Publications**

Preprints are preliminary reports that have not undergone peer review. They should not be considered conclusive, used to inform clinical practice, or referenced by the media as validated information

**Open Access** 

Complex and alternate consent pathways in clinical trials: methodological and ethical challenges encountered by underserved groups and a call to action

Amv M. Russell



Abstract

Background: The sources of information on clinical trial monitoring do not give information in an accessible language and do not give detailed guidance. In order to enable communication and to build clinical trial monitoring tools on a strong easily communicated foundation, we identified the need to define monitoring in accessible

### **SWAT Protocols**

SWAT 181: What is the impact on participant retention when an electronic reminder is integrated into the design of a randomised trial?

#### Objective of this SWAT

1) To evaluate the effects of an electronic reminder, compared to no electronic reminder, on participant retention in randomised trials 2) To evaluate the cost-effectiveness of an electronic reminders, compared to no electronic reminder, on participant retention in randomised trials

Study area: Retention, Follow-up Sample type: Participants, Patients Estimated funding level needed: Low

Rackground

### **Webinars**





in collaboration with the MRC-NIHR Trials Methodology Research Partnership (TMRP) Trial Conduct Group welcome you to attend

Webinar: Improving randomised controlled trials through drawing: what creative methods can teach us about process and outcomes

Presenter: Dr Jenevieve Mannell

Tues 27th April 2020, 1-2pm (GMT)





IMPROVING RANDOMISED CONTROLLED TRIALS THROUGH DRAWING: WHAT CREATIVE METHODS CAN TEACH US ABOUT PROCESS AND OUTCOMES

Introducing the INCLUDE Socioeconomic Disadvantage Framework

Join us as we introduce the new INCLUDE Framework, developed to support trial teams to design and conduct trials with and for people experiencing socioeconomic disadvantage.

When? Tuesday 24th January, 11am-1pm GMT Register: https://bit.ly/3VtBOqg Contact: sherratt@liverpool.ac.uk



### Guidance



To join go to:

https://www.methodolo gyhubs.mrc.ac.uk/about /working-groups/







## Informed consent: methodological work from around the globe Complex and alternate consent pathways in clinical trials

Julia Wade, Amy M. Russell, Vicky Shepherd





# Background

Complex and alternate consent pathways within Trials research

- 23 members: trials methodology, healthcare professions, bioethics, qualitative research, social science
  - Adults with communication, hearing and sight disabilities
  - Adults whose capacity fluctuates or is lost during a trial
  - Adults who lack capacity
  - Adult and paediatric emergency and urgent care trials



# Background

Complex and alternate consent pathways within Trials research

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Promoting interdisciplinary and cross-institutional collaboration to address ethically / methodologically challenging issues for consent to trials



#### MRC-NIHR Trials Methodology Research Partnership



Medical Research Council

# Activities and outputs

- Map existing resources, publications and content experts
- Make existing resources readily available
- Paper describing <u>current</u> <u>challenges and future research</u>
- Identify topics for future research and funding bids

#### NIHR National Institute for Health and Care Research



You are in: Home » About this site » Recent changes

### **Recent changes**

May 2022 - Further reading updated within the Informed Consent station. November 2021 - Content update within the Informed Consent station.

### Informed Consent (ct-toolkit.ac.uk)

#### Russell et al. Trials (2023) 24:151 https://doi.org/10.1186/s13063-023-07159-6

#### COMMENTARY

Complex and alternate consent pathways in clinical trials: methodological and ethical challenges encountered by underserved groups and a call to action

Amy M. Russell<sup>11</sup>, Victoria Shepherd<sup>2+</sup> , Kerry Woolfall<sup>3</sup>, Bridget Young<sup>3</sup>, Katie Gillies<sup>4</sup>, Anna Volkmer<sup>5</sup>, Mark Jayes<sup>6</sup>, Richard Huxtable<sup>7</sup>, Alexander Perkins<sup>8</sup>, Nurulamin M. Noor<sup>9</sup>, Beverley Nickolls<sup>10</sup> and Julia Wade<sup>11</sup>



Trials

**Open Access** 





# Communication

- Stroke Aphasia
- Visual impairment
- Hearing impairment
- D/deaf
- Learning disability
- Brain injury
- Dementia
- Progressive neurological conditions

- Difficulties in accessing and understanding information
- Difficulties in communicating wishes
- Communication ability is interpreted as capacity

- Skills & confidence of recruiters
- Format of information
- Format to give & record consent
- Time & Cost



# Fluctuating Capacity

## Causes

- Pain
- Medication effects
- Dementia
- Serious Mental Illness
- Learning disability
- Task specific



## Challenges

- Assumptions of fluctuating capacity
- Do our processes or environments exacerbate it?
- Retention & Exclusion
- Unfamiliarity with legislation
- Multi country trials subject to multiple legislation



# Solutions

- <u>Co-production:</u>
  - Format of information, to express & record consent
  - Who takes consent?
  - Time of day
  - Environment
  - At what point in research?
  - Justify innovation in methods

- Reconceptualise consent iterative & on-going not a one-off event
  - At what point should you revisit consent?
- Plan ahead express wishes
- Design with INCLUDE frameworks
- Explore alternative formats
- Researcher/recruiter training
- Clear guidance
- https://www.capacityconsentresearch.com/



# Adults lacking capacity to consent - challenges

- Gatekeeping complexity of ethical and legal frameworks, paternalism
- Involvement of alternative decision-maker personal or professional
- Identification, knowing preferences, lack of guidance, decisional/emotional burden
- REC approvals justification for inclusion, issues with consistency/accuracy



# Emergency trials in adults and children - challenges

- Additional consent complexities in time-critical trials essential to avoid delays
- Parent/alternative decision-maker may not be present or may be distressed
- Research without prior consent (RWPC) may be permitted
- Jurisdictional differences, contextual/cultural factors
- Complexity of 'middle ground' cases



# Methodological innovations

- Researchers NIHR INCLUDE Impaired capacity to Consent Framework
- Families decision aid being evaluated in CONSULT SWAT
- Individuals exploring 'advance research planning'
- Adult emergency research Perspectives Study guidance, CoMiTED video on RWPC
- Paediatric and neonatal trials CONNECT guidance
- Informing bereaved families in RWPC ENHANCE



# Conclusions

Range of concrete outputs with ongoing research



Identifying other work in complex consent pathways in trials



Global issue with shared challenges and contextualised solutions



Requires collaboration – call to action!



Russell et al. Trials	(2023) 24:151	
https://doi.org/10.1	186/s13063-023-07159-6	

#### COMMENTARY

Open Access

Trials

Complex and alternate consent pathways in clinical trials: methodological and ethical challenges encountered by underserved groups and a call to action

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### https://bit.ly/2VMWsGx



# Incorporating patient values and preferences into research consent

Tanya Symons, PhD T Symons Associates Pty Ltd



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# Participant Information/Consent Forms (PICFs)

Random national sample of 248 interventional PICFs (without consent forms)

**7/18** (Non-commercial/commercial)

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(Flesch-Kincaid Grade Level/SMOG)

11/13

Anti-XX is <0.7/>1.0u/	'ml ultr	astructure	subcut	taneous formulation
Correlative research	relational co	ontinuity	mediastinal m	ass
correlative research	submaximal	oxidative str	ress	free radical injury

Symons T & Davis J. S. (2022). *Trials*, *23*(1), 794–794.



## Layered (Integrated) Consent

UK's Health Research Authority Concept



**A Concise PICF/Discussion** 



**Optional Supplementary Information** 



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## Simple, patient-centred PICFs

### Focus groups tested UK 'layered consent'

- **SNAPCHAT**: Low-risk trial (SNAP)
- InFORMed Project: Other risk levels
   Revised national template
- Publish the methods and materials for the focus (discussion) groups

emplate released by HRA (version 1)	Symons et al. Trials (2022) 23:1055 https://doi.org/10.1186/s13063-022-07023-z	Trials
standard pack and should also be given verbally by th information provided to the patient about the research collection and use, additional risks etc.) can be relative		
	RESEARCH	Open Access
This also applies to pragmatic trials involving 'unlicen used outside the terms of their UK licence or which h commonly used in some areas of medicine, particula are due to the absence of suitable licensed treatmen	Consumer perspectives layered consent for a lo	
Where the outcome data can be extracted anonymour patient's HCP, the consent process can be focussed of towever, in other studies, where it is not possible to a way, informed consent will also need to be sought for dentifiable data and/or samples in addition to the inte	pragmatic trial	wen <sup>567</sup>
The following is an example of a short Participant Info used in a pragmatic trial conducted to compare two m outinely prescribed within the NHS.	Adam G. SUFF	
N.B. Whilst the example here is presented in a traditional temore user-friendly multimedia format. This PIS may also be	Backgro	
We are inviting you to take part in a research (	PACHOO	10.000
You do not have to take part if you do not war	We aime making in a more recently on the additional opportunity	cision-
Please read this information which will help ye	elicited consumers' views on the optimal content and la Bavesian adaptive platform trial (the SNAP trial).	yout of the layered consent materials for a large and complex
Research Title: [e.g. A research study to find out if [X] i medical condition]].	Methods: We conducted a qualitative multicentre studing adolescent and adult survivors of Staphylococcus au	y (4 focus groups and 2 semi-structured interviews) involv- eus bloodstream infection (22) and their carers (2). Interview
RAS Reference Number: EudraCT No./EU trial number <sup>32</sup> /Other registry No. [AS ap	transcripts were examined using inductive thematic and Results: Consumers supported a layered approach to o	lysis. consent. The primary theme that emerged was the value of nt of information read before the consent form is signed.
Why am I being asked to take part in this rese	Three other themes emerged; the need to prioritise par	nt of information read before the consent form is signed. icipants' information needs; the importance of health literacy; ver its risks) for decision-making and the interplay between
You and your doctor have agreed that you would benefit fro	the two.	
[X] and [Y] are [two] licensed/commonly used treatments ro condition] and they are believed to be equally good. Howev	the development of PICFs in countries like Australia. Con	y challenge the one-size-fits-all approach currently applied to sumers supported a layered approach to consent that offers leciding whether to enter a trial. A 3-page PICF was consid-
In order to find out whether [X] or [Y] is better we are invitin project in which some patients will be given [X] and some p compared.		ovided that further information was available and accessible.
Although you would not receive any extra benefit from takin improve the treatments and care provided to all patients no		Background Although informed consent is a key ethical require-
Do I have to take part?	*Correspondence: Joshua Davis@menutes.edu.au	<ul> <li>ment for research, questions remain about the utility of Participant Information and Consent Forms (PICFs)</li> </ul>
No.	<sup>9</sup> School of Medicine and Public Health, The University of Newcastle, Newcastle, Australia Full list of author information is available at the end of the article	produced to support the trial consent process and doc- ument that consent has been received. PICFs should
<sup>1</sup> See the General Medical Council's 'Good practice in prescribin		s article is licensed under a Coublee Commons Attribution 4.0 International License, which
Prescribing unlicensed medicines: http://www.gmc-uk.org/guidank information Required by forthcoming EU Clinical Trials Regulation	Permits use, sharing additation, databa	a mote internate or that a construct common common and that and a manufacture of a mote and the production in any memory and indicates of the production of the program of the time or a link to the Creative Commons loance, and indicate if changes were made. The images or to included in the article's Coalitive Commons loance, unless indicated otherwise in a creat line of the article's callede Commons loance and your infanded use is not permitted by statutory
	regulation or exceeds the permitted use	you will need to obtain permission directly from the copyright holdar. To view a copy of this y/conservby#40/ The Osative Commons Public Domain Dedication water http://roativeco.

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## PICF with 'sufficient information'



<sup>1</sup> Including the voluntary nature of research

<sup>2</sup> For some research, the dual purpose (treatment and generalisable knowledge)
<sup>3</sup> How research alters what would have been experienced in clinical care

## **SNAP PICF - Inclusivity**



# Background to *Staph aureus* bloodstream infections

Learn more about why we're studying treatments for *S. aureus* bloodstream infections in the SNAP trial.

SNAP Trial Resource

0

Read More



Staphylococcus aureus Network Adaptive Platform

# AT

### **Background to SNAP**

Learn more about why we're studying treatments for *S. aureus* bloodstream infections in the SNAP trial.

#### SNAP Trial Resource





### **Patient Pathway**

What does taking part in SNAP mean for participants?

#### SNAP Trial Resource



## **Ethics issues with long PICFs**

### **The Nocebo Effect**

Some people may choose not to participate because **they're scared off**...

...people they might look at that and assume the survey itself is as complex as the form ...**a bit of a turn-off**.

One 42-page PICF had a 13-page risk section

#### Section 2 2.1 What will happen if I don't want my baby to carry on with the study?

You are free to stop your baby from taking part in this study at any time without giving a reason and without affecting your baby's treatment. Any information, including results from tests already performed will be used in the study unless you ask for these data to be destroyed.

The study doctor or Consultant in charge of your baby's care may also choose to withdraw your baby from the study if they feel it is in your baby's best interests.

If it's 12 pages long, reads like a contract, and I have to sign.... What are they **hiding**?

2.3 Will my baby's taking part in this study be kept confidential? All information collected about your baby as a result of taking part in the study will be kept strictly confidential. All personal and medical information will be kept in a secured file and be treated in the strictest confidence. You may ask to see your baby's personal information at any time and correct any errors if necessary.





# A REDCap Template For Tiered Electronic Consent (e-consent) Framework

### Tsaone Tamuhla

South African National Bioinformatics Institute University of the Western Cape South Africa





## Introduction

- Move from broad consent to tiered consent
- Shift to more collaborative research and data sharing among researchers
- Foster ethical use of biospecimens and data in research
- Ensure that participants give truly informed consent





## **Purpose of the framework**

Designed to meet the needs of both participants and researchers by:

- 1. Providing a comprehensive list of information to include in the main consent and withdrawal of consent documents
- 2. Providing a use case example of human genomic research language that is easy for participants to understand





## Framework design

- REDCap allows for the standardization of data capture tools in survey format
- We adapted the tiered consent model (Nembware et al., 2019) with some modifications
- No centralized collection of data
- Framework template can be downloaded and imported into REDCap (<u>https://github.com/CIDRI-Africa/e-Consent-framework</u>)





## **Benefits to participants**

Why are we doing this study?

We want to study something called "genes". These "genes" are present in all of us and are the same in all parts of our bodies. "Genes" are sometimes also called DNA, which is the name of the material they are made from. Genes are responsible for why people in families are often more like each other, and different from other families. For example, some families are generally taller or shorter than others. This kind of information is passed from both the father and the mother to their children and on to their grandchildren, from one generation to the next. Some of these genes may prevent some people from getting certain illnesses. Other genes may be one of the reasons why some people get sick or have side effects from some medicines when others do not. We are still learning how genes might contribute to different diseases, and how they work together with our lifestyle and other factors - such as our environment or what we eat - to affect our health. We want to explore whether genes may affect (specific health phenotype under study) in (specific target population if relevant).

What do we do to decide if you are eligible to be take part?

In our study, we want to learn more about [specific disease phenotype] in [target study population] so we are approaching any person who fits this description because they are the type of people who we want in our study.

How many people will take part in the study?

There will [insert number] of participants including yourself if you agree to participate in the study.





## **Benefits to participants**

Sometimes what we find from a study like this might lead to new studies being done in the future. Can other researchers contact you in the future to invite you to take part in other research studies?

⊖ Yes ⊃ No

If yes, how would you like to be contacted?	○ Telephone
	⊖ Letter
	🔿 Visit
	🔿 Email

Can my samples and information be used in research outside the country?

There is an international study that is combining the results from [specify disease] studies like ours that are taking place around the world. The information from samples donated from everyone around the world will be made available to researchers in a large data storage resource in Europe called the European Genome Archive (EGA) and will be provided to other researchers who want to do more studies using the combined genetic and health information.

We will ask you if you would like your sample and health details to be included in this international study - you do not have to agree to join the international study, it is your choice.

Do you agree for us to share your DNA sample for genetic analysis together with your health information for International studies being done to better understand [specific disease]? Your genetic data and health data may be shared with other international researchers for other studies in the future

⊖ Yes 🛛 No





## **Benefits to researchers**

- Data is captured directly without the need for transcription from paper to database
- Easier to identify consenting participants

Consent dashboard for dial	betes
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<b>PID</b> pid	Event Name redcap_ event_ name	Study ID Number study_ id_v2	Date of consent consent_ date_v2	Do you agree for us to collect these body fluid samples and your he might affect type 2 diabetes? consent_ data_ collection_ v2	We would like to know more about your general health. Do you agree its to health care facilities? consent_ health_ information_ v2	Do you agree for us to use your medical record number to access your health information? consent_ medical_ record_ number_v2	Sometimes, what we find from our research might include new informa y directly affect your health? consent_ new_info_ contact_v2	Would you like us to contact you again if there is some kind of act elp you with the health issue? consent_ new_tx_ consent_ v2	Would you like us to contact you again if there is NO kind of actio elp you with the health issue? consent_ no_tx_ consent_ v2	Sometimes researchers combine the genetic information from everyone al individuals in this study)? consent_ grouped_ data_v2	Do you agree for us to use your genetic samples together with your t of genes on type 2 diabetes? consent_ samples_ future_ use_ specific_ pheno_v2	Do you agree for us to use your genetic samples together with your related biological processes? consent_ samples_ future_use_ other_or_ related_v2	Sometimes what we find from a study like this might lead to new stu art in other research studies? consent_ future_ research_ contact_v2
214	Data collection (Arm 3: Diabetes example)	T2D_001	01-09- 2021	Yes (1)	Yes (1)	Yes (1)	Yes (1)	Yes (1)	Yes (1)	Yes (1)	Yes (1)	Yes (1)	Yes (1)





Search

## **Benefits to researchers**

UNIVERSITY of the

WESTERN CAPE

South African National Bioinformatics Institute

Withdrawal of study consent		Page 1
PID		
Withdrawal of consent		
Date		
Do you wish to withdraw your consent to participate in the entire study or parts of the study?	<ul> <li>Complete withdrawal</li> <li>Partial withdrawal</li> </ul>	
Reason(s) for withdrawing consent		
The participant is not obliged to give a reason, therefore if r	o reason is given type "none given"	
Participant signature		
Participant signature		
Participant signature		



## Conclusion

Tamuhla et al. BMC Medical Ethics (2022) 23:119 https://doi.org/10.1186/s12910-022-00860-2 **BMC Medical Ethics** 

### DATABASE



**Open Access** 

An e-consent framework for tiered informed consent for human genomic research in the global south, implemented as a REDCap template

Tsaone Tamuhla<sup>1</sup>, Nicki Tiffin<sup>1,2,3\*</sup> and Taryn Allie<sup>1</sup>

https://github.com/CIDRI-Africa/e-Consent-framework



