



UTOPIAN Clinical Research Group Meeting – *Minutes*

Thursday, September 29th, 2021, from 4:00 p.m. to 5:00 p.m., Zoom teleconference

Item	Topic	Minutes	Action	Responsible
1	Introductions (Andrew Pinto)	Andrew Pinto introduced those present via Zoom and on the phone		
2	Review and approval of June 17, 2021, draft meeting minutes (All)	Minutes of the previous meeting were approved by those present	Approved	All
3	UTOPIAN Clinical Research infrastructure update and work plan for 2021-22 (Andrew/Jamie)	 Strengthening UTOPIAN Clinical Research: To support primary care providers who think of an intervention that emerges from real-world clinical work to test it rigorously using the best science, including RCTs, as PI To support primary care providers be thoughtful site investigators for studies To build a community of practice, and ultimately create more efficient and effective research Work Plan for 2021/2021 Objectives:		
		 Finances (e.g. research costs centre) 		

		 Recruitment processes: posters, emails, staff, on-site, pre-authorization to be contacted Process to communicate about the trial to the site Data storage & consent documentation Site Initiation Visit Drug storage: standard operating procedures, temp. monitoring, logs Insurance Process to address any new identified health concerns, crisis management Peter Selby: Add in data sharing agreements to site preparation and readiness checklist (4:20 pm) 	
		Areas of focus Human resources Dept Head, Research Lead, Office Manager Site Investigator(s) Research and EMR data staff Institutional review and oversight REB: review/approval process, key contacts, CTO, training Contracts/agreements: research contract, DTA Research infrastructure and processes Research specific guidance/policies Tracking research interests Accessing to new research opportunities Preferred recruitment process Space, capacity What UTOPIAN can do to support the site? Proposed site assessment plan:	
		 1 site per month via Zoom To invite SAC rep, site Research Lead, etc Trial for a few sites, e.g. SMH in Oct NYFHT in Nov Platinum in Dec Known site-specific information will be pre-populated for confirmation 	
4	Status of Clinical Trials (Jamie)	SARTAN-AD: Looks at the hypertensive medications proving protective benefits in slowing down Alzheimer's disease (and mild to moderate cognitive decline) We have updated the new protocol with broader eligibility criteria Currently, reconsenting physicians at UTOPIAN sites to increase our patient recruitment numbers and re-doing chart reviews with a fresh database query	

 Patient referrals will be updated by the end of 2021, after chart reviews are completed, contact patients and get recruitment going

PCSAR-EDU (Primary Care Severe Asthma Registry and Education project)

- o Led by Dr. Tony D'Urzo
- 4 phase study aiming to improve the collaborative management of severe asthma as well as related EMR data capture
- Currently, in phase 1 of 4, which involves developing a severe asthma registry in primary care
- o Subsequent phases will include:
 - conducting patient and physician needs assessments for which we will be recruiting through UTOPIAN
 - developing an education program for primary care providers, which will be piloted at UTOPIAN sites
 - expanding implantation and engaging in a continuing quality improvement cycle of the education program and ultimately provider behaviour

• Advanced Care Planning (ACP):

- Being conducted in partnership with PBRNs in the USA and Canada, with sites in the GAT (UTOPIAN sites) and some sites in Quebec
- The study investigates whether advanced care planning is best conducted using a team-based model or individual commissioned -based model
- Study involved 4 UTOPIAN sites and patients/care partners across those sites
- Follow-up is largely concluded, now moving into data cleaning and results presentation phase

• SPIDER:

- o CIHR funded project
- Led by Dr. Michelle Greiver and 5 Co-PIs across 7 PBRNs across 5 provinces
- Feasibility phase is coming to an end, now in the RCT phase across 5 PBRNs
- To date we have recruited 5 physicians from community-based practices from the Toronto and Ontario area
- The pandemic has given us the opportunity to test a virtual collaboration between 2 networks the intervention will be managed and delivered by another network and recruitment will be across all networks
- In Ontario, we are in contact with several sites through POPLAR networks

• ANTICIPATE:

RCT that is testing proactive outreach that integrates social, physical, and psychological health

		 It involves Platinum, Markham FHT and Barrie FHT
		 MEDOTATE: Led by Dr. Abhimanyu Sud Testing the impact of a (virtual) meditation intervention on people living with chronic pain or depression (total sample = 160) Involves a pain clinic that Dr. Sud is based at and the St. Michael's FHT
5	Proposals for New Projects (All)	 Peter Selby Have been looking at STOP data Will be approaching 300,000 patients Have done RCTs: 1) Looking at automating alcohol screenings and interventions. Can see alcohol distribution by FHT/by region (can map it by severity). Have also done similarly with PHQ-9 and depression. Have noticed that there is lack of next steps with that Study question – what is the impact of direct to depressed patient interventions versus through their provider on their use of existing investments in mental health supports. Andrew: Within the DFCM and UTOPIAN, there is interest in mental health. Could we organize a workshop for these individuals to think about study ideas and working together to put some of these into grant applications. Moreover, have people/sites share the responsibilities. This could be a collaboration between the UTOPIAN trials group and the DFCM Research to put out the call to assemble interested individuals. Timeline: next CIHR project grant call Have this meeting to think through priorities
		 Carolyn Have been doing early exploratory work as part of the AMS fellowship she received (2021). Not a clinical trial just yet. Trying to understand how digital health tools are relationship mediators within primary care relationships? How are people able to sustain or build therapeutic relationships with patients when they are working almost entirely over the phone or virtual? How are interdisciplinary teams either bale to build or maintain professional relationships? Partnered with Sunnybrook FHT and Mount Sinai FHT and have been able to do some observations of virtual visits, follow up interviews with patients. Also, connected to some CHC's To generate some guidelines or recommendations on how to do better relational, compassionate care delivery using virtual tools

- This will be very conducive to an implementation study or trials later on
 - Will share preliminary findings with the group early in 2022 to do some ideating around an implementation study that we could possibly do across multiple sites
- Better Women (Aisha Lofters and Noah Ivers WCH):
 - Have received funding for a study called, Better Women
 - Looking to study this in a randomized control trial

 which randomizes women to the Better

 Intervention which helps women come up with

 an action plan around preventive care, plus a peer
 health coach versus Better and being on a waitlist
 for the coach
 - They are recruiting at WCH, will soon start at Barrie FHT and Summerville FHT
 - Are there sites that would be interested?
 - If you are at a site that has a strong interest in women's health.
 - Note: Aisha Noah will help with paper work, have staff to help with REBs
 - Reach out to: <u>aisha.lofters@wchospital.ca</u>
- Population Health Management (Ross Upshur, Andrew pinto):
 - How can we bring population health ideas into primary care organizations?
 - Hoping to engage sites to study this over a period of time
 - Larger study of a set of primary care organizations who were part of a larger practice-based research network where we could tap into the data we have and extract and use this in a way to engage in population health management.
 - This intersects with what OHTs are working on and charged with.
 - We are looking at sites that are integrated with OHTs and that would be interested in being a part of population health management

Meeting adjourned at 5:00 p.m.

Next meeting: October 28, 2021; 4:00 p.m.-5:00 p.m. (virtual)