Site initiation visit (SIV) training to improve practitioners’ confidence in recruiting to a challenging critical care trial

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Aim
To evaluate the effectiveness of site initiation visit (SIV) training on healthcare practitioners’ (HCP) confidence in the recruitment of patients to EcLiPSE. The interactive SIV training included:

- protocol presentations from the trial team;
- screening and randomisation simulation (video and real-time); and
- a video of the consent recruitment conversation informed by feasibility work with parents (CONNECT study), and
- a question and answer session.

EcLiPSE is an un-blinded pragmatic, randomised and controlled trial that compares the use of levetiracetam versus phenytoin in the treatment of status epilepticus in children.

Challenges to the success of EcLiPSE include: a vulnerable target population (children aged 6 months to <18 years); the need to administer the intervention without prior informed consent (termed, ‘deferred consent’); and the use of levetiracetam, a relatively new anti-epileptic medication which is not traditionally usually used in this acute clinical setting.

Findings
- For most sites EcLiPSE was their first Emergency Department led paediatric clinical trial.
- Before training, over half (69/115, 60.2%) of practitioners anticipated that there would be practical or logistical difficulties issues in participating in EcLiPSE.
- Practitioners spoke of the importance of getting all staff “on board” and enthused.
- Following training there was a significant positive change in practitioners’ confidence in explaining: the study (p<0.001); randomisation (p<0.001), research without prior consent (p<0.001), and responding to parents who object to the study (p<0.001).
- Valued aspects: videos, parent perspectives, and the number of EcLiPSE team members involved in training and attending the SIV.

“Good to see how nurse handled difficult questions” (P27, Research nurse)
“I think enough of you (EcLiPSE team) turned up” (P4, Principal investigator)

Conclusions
Interactive site training can effectively assist important practitioners ‘buy in’ for challenging clinical trials. Our findings highlight how pre-trial feasibility work with parents can improve practitioners confidence in recruitment and consent seeking in a paediatric critical care trial.

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