



### **Recruitment Plan Guidance**

Please write in prose of ½-2 pages an individualized recruitment plan that captures the strategies proven or intended for your site by imagining tracing a possible SHINE patient from presentation to the ED through completion of final handoff to receiving RN on the bedding floor. Please include all aspects of the process you feel are relevant to successful recruitment at your site and be sure to address the following:

- Who spots the potentially eligible patient in the ED or floor if transfer, whose job is it to recognize the patient may be eligible for SHINE?
- Whose job is it to call study team for screening?
- How does that person know whom to call?
- How is the study team scheduled to make a responder or responder team available 24/7 or reasonable equivalent (what is your reasonable equivalent of 24/7 study team availability if not fully 24/7)?
- Are days different than nights & weekends?
- Who determines if the patient is competent to consent, who tracks down the LAR and in what mediums may LARs be consented (face-to-face, phone, fax, etc. Can you consent LARs who are at remote sites anticipating transfer? If so, how?)
- What people / what roles respond to a potential SHINE recruitment call? How many, why in terms of division of labor: Who consents, who randomizes, who is responsible for the time bridge until getting the treatment started?
- Who shadows the patient to his or her bedding unit and makes excellent hand off to receiving RN?

### **Retention issues:**

- What are your rescue plans for dealing with a difficult follow up?
- What are your plans to ensure a “blinded” study personnel is available for 6 week and 3 month follow ups

For further guidance on this plan, please contact Dr. Christiana Hall at [Christiana.Hall@UTSouthwestern.edu](mailto:Christiana.Hall@UTSouthwestern.edu).