

The Coordinated Campaign for Cancer Clinical Trials

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Describe your solution. We are proposing a solution that can be replicated across the country (and quite possibly the world). Our proposal has the advocacy group at the heart of a coordinated campaign effort to recruit patients to participate in cancer clinical trials.

How will you do it? To implement this plan, we will first create an advocacy that will roll out the campaign in three phases: hospital partnership, community partnership, and media.

How does it work? • What does it look like? • How will you implement it? The *first* phase of the campaign has the advocacy group partnering with research hospitals hosting open clinical trials for cancer treatments. They will encourage doctors and administrative staff in the hospital to utilize the data they already collect on their patients to identify which patients would make good candidates for open clinical trials that the hospital is hosting. By focusing on research institutions and the patients they already see, we can cut down on costly travel expenditures that can be involved when recruiting patients that live far away from the hospital. The advocacy group will not look at the data, rather encourage and teach doctors and administrators how to analyze and use data, unless explicitly HIPAA-compliant and allowable by law. The advocacy group will also work with doctors on how to approach this subject with their patients. The advocacy group can host meetings and trainings with doctors who would like help in expressing clinical trials as a first-option treatment method rather than a last resort, as well as training them on how to help their patients sign up for the trials and navigate that system.

The *second* phase of the campaign is partnering with the local community. Many research hospitals across the country are paired with universities. Many of these universities have a very active student body with students who already volunteer in the oncology departments of these hospitals. The advocacy group should reach out to the students on campus as partners on the campaign. The advocacy group should utilize the existing campus infrastructure (i.e.- pre-med club) to recruit volunteers in support of this campaign. The advocacy group will train these volunteers to handle any conversations or questions that may come up when visiting patients that are currently considering participation in a clinical trial.

The *third* phase of the coordinated campaign is to engage the larger community through a media campaign. The campaign will utilize paid and earned media in order to deliver positive messaging surrounding clinical trials happening at the research hospital. Earned media will include word-of-mouth from former patients who participated in clinical trials, letters to the editor of local papers, blogs, videos, and other forms of free media online. Paid media will include targeted ad buys in local papers, TV, and radio stations. Paid media will be the final phase of the campaign, as it will likely be the most costly.

Where will you implement it? We have a specific institution in mind for a pilot-program. This institution has a research hospital, a university, a very-active student body with existing volunteer infrastructure in the hospital, and a large community bond outside of the institution. They are currently hosting over ten open clinical trials for lung cancer research. We look forward to approaching them in the implementation phase of this challenge and then expanding to other locations nationwide.

Who will be involved (stakeholders)? There are several stakeholders involved in this campaign, including the advocacy group leading the campaign, the research hospital, the university associated with the research hospital, local media outlets, and the surrounding community.

How much will it cost to create the solution (an estimation)? We estimate the start up costs to be \$50,000.00. This is to include a salary for a campaign lead within the advocacy group if a dedicated volunteer cannot be found or an existing staff member cannot take on the project, workshop and trainings costs (materials, food and beverage for meetings, etc.), and travel costs.

How much will it cost to implement the solution (an estimation)? We estimate to fully implement all phases of the campaign in one area, costs could reach \$500,000.00 depending on the amount of targeted ad buys purchased through paid media. Some media markets are not as costly as others.

How many people will be impacted? We estimate 2,000 people will be impacted in the first year.

How long will it take to create the proposed solution? We estimate that it will take one year to see measureable results in our targeted area.

Why will it work? Why is it viable? It will work because it doesn't require any new technology and utilizes existing infrastructure in the hospital ecosystem and community at large. It also has low costs associated with the campaign because it relies primarily on volunteers and people who already earn a living through other stakeholders. Finally, the campaign is all about organizing and relies on human connection, which in the face of an already difficult diagnosis is incredibly important.