

Table 2: Recruitment information for projects

Project	Participant Information	RECRUITMENT METHODS				Recruitment Rate	Representative Advisory Groups	Incentives	Time Required to Recruit	Flexible Strategies
		Dillman / Modified Dillman	Use of Local Opinion Leader	Face to Face Recruiters	Responsible for Recruitment					
COMP-PC (2004-2006)	Practices: 137 recruited All CHC, HSO, & FHN in Ontario +197 randomly selected FFS-FHG Providers: 363 (surveyed) 46 (interviewed) Patients: 5361 (surveyed) 24 (interviewed)	Dillman / Modified Dillman Modified Dillman (invitation material mailed and combination of methods for follow-up)	Use of Local Opinion Leader Yes - limited to end of study - regional leaders made phone calls	Face to Face Recruiters Yes - response rate much higher-done only at end of study	Responsible for Recruitment Practice recruitment by investigators with support from central organizations. Practices invited eligible providers. Patients recruited through front desk.	Avg Practices (45%) of 365 eligible practices. 82% of 6522 eligible patients Provider participation not tracked if >50%	Yes - very useful. Had stakeholder advisory group- at least 2 members of each group studied	<i>Financial:</i> \$2,000 for quantitative component - \$500 for qualitative <i>Non Financial:</i> Token gifts for period of data collection	9 months - targets not reached entirely	Invitation letters, follow-up letters, emails & telephone calls. Finally, face to face recruitment
IDOCC (2007-current)	Practices: Approached = 372 Recruited = 93 Physicians: Approached = 1077 Recruited = 200	Modified Dillman (invitation material mailed and combination of methods for follow-up)	Step 1 - yes Step 2 - no	Yes - project staff (outreach facilitators) visited providers who had not responded - challenging strains on physician time	Lead physicians were sent letters and asked if interested in IDOCC. Physician investigator made follow-up phone call if necessary.	Avg Practices (25%) of 372 eligible practices. 19% of 1077 eligible physicians.	Yes- stakeholder advisory group	<i>Non Financial:</i> Assistance with practice improvement	Step 1 - almost 10 months Step 2 - 4 months	No
ICFPC (2004-2005)	Practices: Eligible = 99 Recruited = 30 Physicians: Eligible = 164 Recruited = 58	Modified Dillman (invitation material mailed and combination of methods for follow-up)	Yes	No	Contact made through lead physician at each site. If interested all other physicians were contacted.	Avg Practices (30%) of 99 eligible practices. 100% of eligible physicians (58 of 58 physicians from recruited practices).	No	No	9 months	No
CHAP (2001-current)	Communities: Identified = 41 Eligible = 39 Participated = 39 20 Communities in CHAP average 17.1 physicians. 19 Communities in Control average 19.1 physicians.	No (Information session, physician meeting, letters & follow-up)	Yes - physician opinion leader model used	Yes - local opinion leaders used at start - called community meeting - local coordinators traveled to physician office	Opinion leader physicians used to recruit colleagues	Physicians (49%) of approximately 700.	Yes, in some areas, not everywhere	<i>Non Financial:</i> Feedback on individual participants sent directly to physicians	Unsure	Yes
FWS (1999-2006)	Family Physicians recruited	Modified Dillman	No	No	No	Physicians (20.2%)	No	No	Repeat mailings and reminders (5 in total)	No