# SWAT 235: Evaluating the effect of sending participants a personalised 'Thank you' card on postal questionnaire response rate

# Objective of this SWAT

To evaluate the impact on questionnaire response rate of sending participants a personalised 'Thank you' card with a postal follow-up questionnaire.

## **Additional SWAT Details**

Primary Study Area: Retention

Secondary Study Area: Incentives and engagement Who does the SWAT intervention target: Participants Estimated resources needed to conduct the SWAT: Low

Estimated cost of the SWAT (£):

# Findings from Implementation of this SWAT

Reference(s) to publications of these findings:

Primary Outcome Findings:

Cost:

## **Background**

Poor response rates to follow-up questionnaires present a challenge in clinical research. They may threaten trial validity and lead to increased costs because of the need for further contact with participants, in an effort to receive their response. Given that personalisation and monetary incentives have been shown to increase questionnaire response rate [1], this Study Within a Trial (SWAT) [2] will examine whether a personalised, non-monetary incentive increases likelihood of response. 'Thank you' cards are a simple, low-cost means of giving a personalised incentive to participants, which may motivate them to respond to a postal questionnaire.

Host Trial Population: Adults

Host Trial Condition Area: Critical Care

## **Interventions and Comparators**

Intervention 1: A personalised 'Thank you' card sent to participants with the questionnaire at 90-day follow up. The design and message in the card will be developed with a Patient and Public Involvement (PPI) representative. The participant's name and a named sign off will be handwritten in wet ink. Participants will also be sent a cover letter, newsletter, and pre-paid envelope, as is standard practice.

Intervention 2: No thank you card (control group). A questionnaire, cover letter, newsletter, and pre-paid envelope will be sent to participants at 90-day follow up (standard practice).

Method for Allocating to Intervention or Comparator: Randomisation

#### **Outcome Measures**

Primary Outcomes: Response rate to the 90-day follow up questionnaire.

Secondary Outcomes: Completeness of 90-day questionnaire (%) [EQ-5D-5L questionnaire data only], and proportion of patients that moved on to telephone follow-up.

## **Analysis Plans**

Primary analysis will compare the proportion of questionnaires returned in the two SWAT groups using logistic regression adjusting for baseline covariates. The primary outcome measuring response rates in the two groups and the secondary outcome of the proportion of patients that went to telephone follow-up will be analysed using logistic regression, adjusting for treatment group in the host trial. The secondary outcome of completeness of questionnaires will be analysed using t-tests to compare the mean completeness across the two groups.

The sample size for the SWAT will be constrained by the sample size of the host study. In the UK-ROX trial of two approaches to oxygen therapy in intensive care units (ISRCTN13384956), 2500 patients will be recruited for follow up at 90 days. Assuming a loss of 40% for patients who die before 90 days or have not consented to follow-up, a final sample of 1500 patients would give 75% power to detect an absolute difference of 5% in response rates between the SWAT groups, with a rate of 75% in the control group.

## **Possible Problems in Implementing This SWAT**

The main challenge in conducting this SWAT will be the time taken by staff to hand write cards. However, only the participant's name and a sign off will need to be handwritten, because the main message in the card will be printed in bulk.

# **References Cited in This Outline**

1. Edwards PJ, Roberts I, Clarke MJ, et al. Methods to increase response to postal and electronic questionnaires. Cochrane Database of Systematic Reviews 2023;(11):MR000008.

2. Treweek S, Bevan S, Bower P, et al. Trial Forge Guidance 1: what is a Study Within A Trial (SWAT)? Trials 2018;19(1):139.

## **References to This SWAT**

## **Source of This SWAT**

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