# An Update on the All of Us Research Program









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#### Appreciation to the All of Us Research Program Advisory Panel

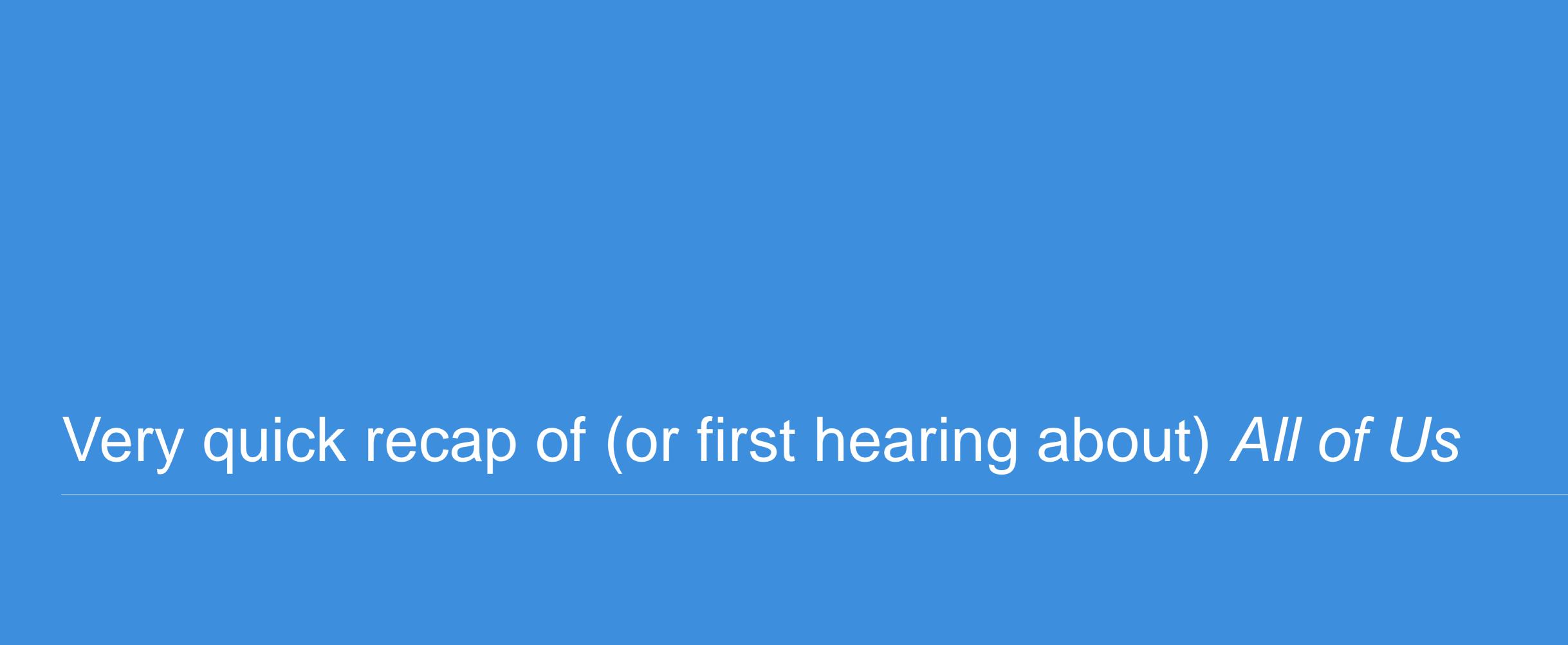
- All of Us Advisory Panel is a working group of the Council of Councils
- Recently included three participant representatives: Miriam Guzman, Ana Carolina Dantas Machado, and Zachary Orlov
- Advisory Panel spearheaded three working groups to gather information and options around critical issues:
  - Genomics chaired by Lon Cardon
  - Child Enrollment Scientific Vision chaired by Tina Cheng and Marie Lynn Miranda
  - Tribal Collaboration chaired by Lynn Malerba and Spero Manson

#### **Advisory Panel Members:**

- Teresa Zayas Cabán
- Rob Califf
- Lon Cardon
- Tina Lee Cheng
- Rory Collins
- Jonathan Epstein
- Alejandra Gepp
- Miriam Guzman
- Sachin Kheterpal
- Ana Carolina Dantas Machado
- Terry Magnuson
- Marie Lynn Miranda
- Zachary Orlov
- Bray Patrick-Lake
- Marylyn DeRiggie Ritchie
- Gregory Simon
- Sharon Terry
- David Williams

#### Agenda

- Very brief overview of All of Us
- Quick updates on progress and challenges
  - Strategy to ramp to 1M
  - Genomics/Return of information
  - Recruiting children
  - Launch of Research Portal



#### **Mission and Objectives**

#### **Nurture relationships**

with one million or more participant partners, from all walks of life, for decades



of researchers and funders hungry to use and support it



#### **Our mission**

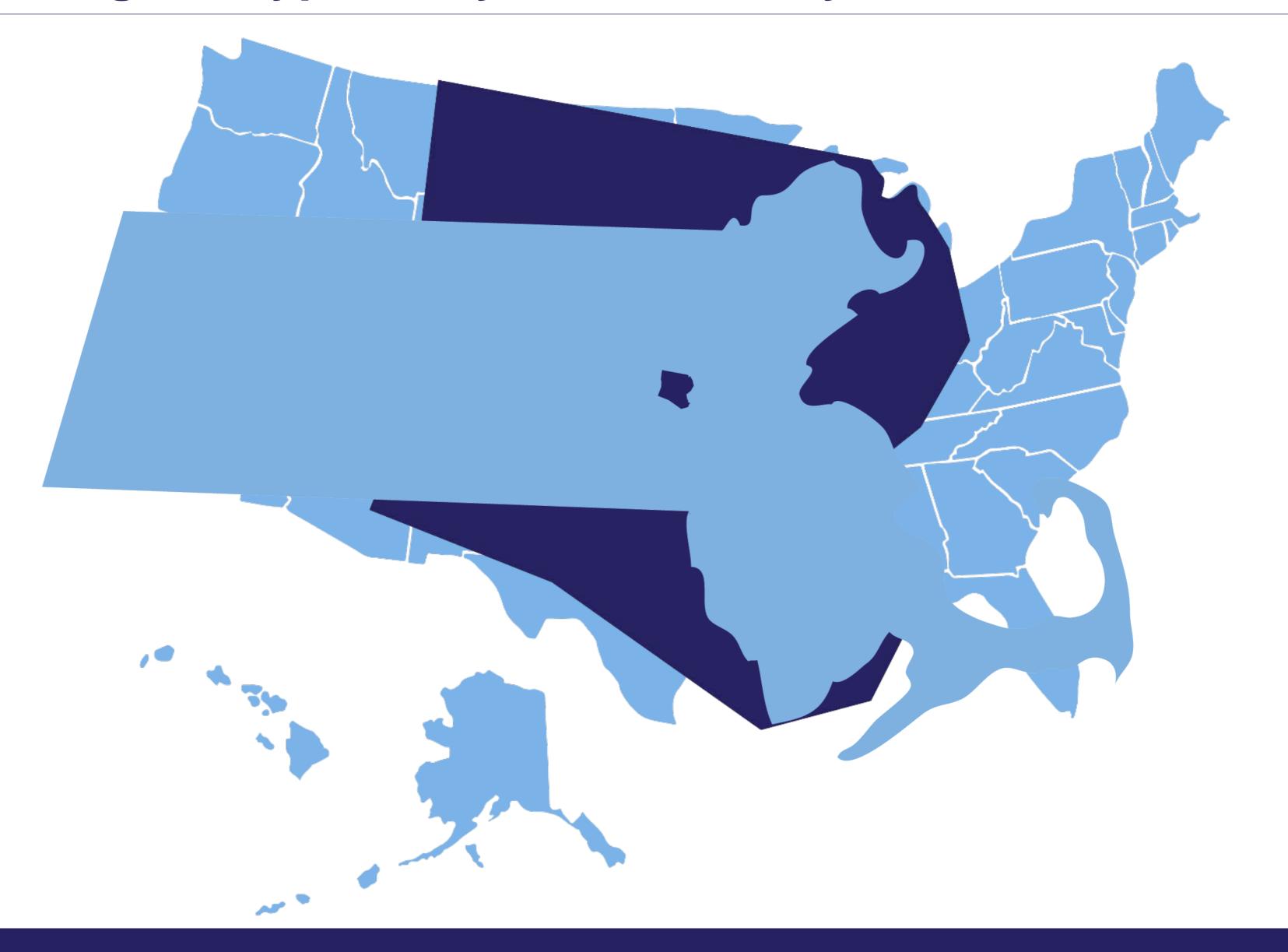
To accelerate health research and medical breakthroughs, enabling individualized prevention, treatment, and care for all of us



## Deliver the largest, richest biomedical resource ever,

making it as easy, safe, and free to use as possible

#### Expand Framingham type study to the country and all conditions



1. Diversity of people at scale; 2. Diversity of data; 3. Participant-centeredness; 4. Open resource for all

#### Major building blocks of the All of Us Research Program consortium

## DATA AND RESEARCH CENTER

Big data capture, cleaning, curation, & sharing in secure environment

Vanderbilt, Verily, Broad Institute

#### **BIOBANK**

Repository for processing, storing, and sharing biosamples (35+M vials)

Mayo Clinic

#### PARTICIPANT TECHNOLOGY SYSTEMS CENTER

Web and phone-based platforms for participants

Vibrent Health

## PARTICIPANT CENTER / DV NETWORK

Direct volunteer participant enrollment, digital engagement innovation, and consumer health technologies

Scripps Research Institute (with multiple partners)

## HEALTH CARE PROVIDER ORGS NETWORK

HPOs with clinical & scientific expertise, enrollment & retention of participants

30+ regional medical centers, FQHCs, VA, and future awards to grow network

## COMMUNICATIONS & COMMUNITY NETWORK

Communications, marketing, and design expertise; engagement coordination and community partners network

Wondros, HCM, 34 community partner orgs, and future awards to grow network

#### Current consortium members (beyond community partners)

**DV Network** 











**Biobank** 



(Direct Volunteers)







patientslikeme<sup>®</sup>



#### **HPO Network**

(Health Care Provider Organizations)

**RMCs** 

California Precision Medicine Consortium

UC San Diego Health



Keck Medical Center of USC









UCSF

Illinois Precision Medicine Consortium











New England Precision Medicine Consortium









Trans-American Consortium for the Health Care Systems Research Network









**New York City Precision Medicine** Consortium









#### Southern All of Us Network











HUNTSVILLE HOSPITAL

UNIVERSITY OF SOUTH ALABAMA
HEALTH SYSTEM









SouthEast

**Enrollment Center** 

**EMORY** UNIVERSITY

MOREHOUSE SCHOOL OF MEDICINE

UNIVERSITY OF MIAMI MILLER SCHOOL of MEDICINE

















#### University of Pittsburgh





















**Development** 















#### **Community Partners Network**





































































#### What are the potential activities asked of participants in the current protocol?



#### **Enroll, Consent and Authorize EHR**

- Recruiting 18+
   years old initially;
   plan to include
   children in 2019
- Online, interactive consent
- Includes
   authorization to
   share Electronic
   Health Record
   (EHR) data



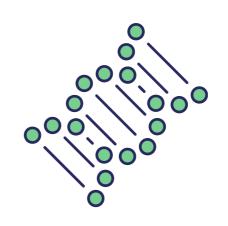
## **Answering Surveys**

- Five initial surveys:
   The Basics,
   Overall Health,
   Personal Habits,
   Health Care
   Access &
   Utilization, Family
   Medical History
- Additional surveys will be released on an ongoing basis.



### Physical Measurements\*

- Blood pressure
- BMI
- Heart rate
- Height
- Hip circumference
- Waist circumference
- Weight



## Provide Biosamples\*

- Blood (or saliva, if blood draw is unsuccessful)
- Urine specimen
- Biosamples will be stored at the program's biobank



## Wearables and Digital Apps

- Share data from wearable fitness devices, starting with FitBit
- Share data about mood & cardiorespiratory fitness through integrated apps
- More integrations to come

\*Based on diverse sampling and capacity

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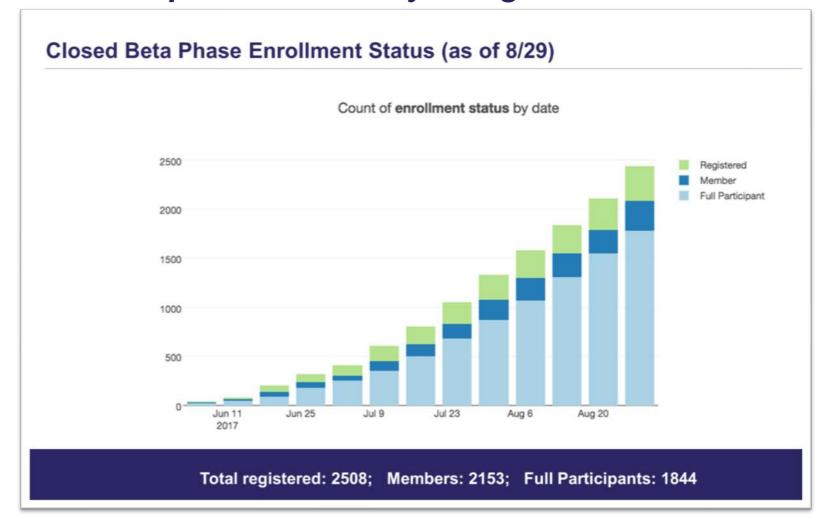
Coming soon

## Quick updates

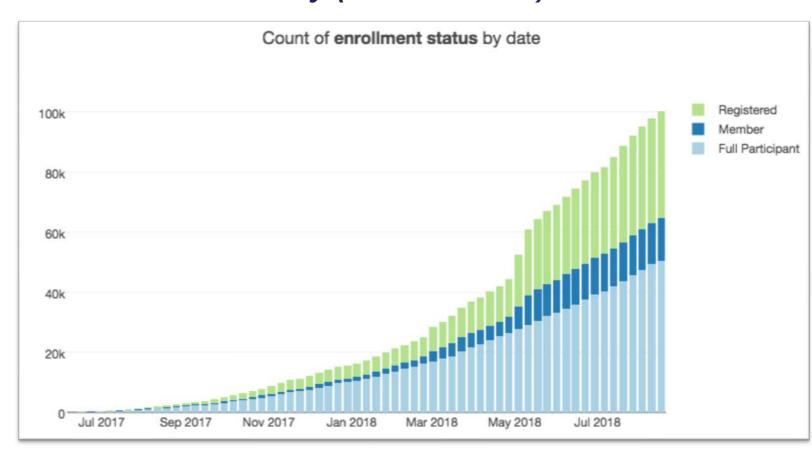
#### Since I presented last fall...

- Last update was 9/1/17: had 2,508 participants across ~12 sites back then!
- Now we've completed beta testing and launched nationally!
- Total #s of participants in process: >100K, of which >50K have completed full protocol (all 50 states!)
- Doing very well on Underrepresented in Biomedical Research (UBR): 76% of participants UBR, 48% racial/ethnic diversity
- ~200 sites up in 20 states
- Launched program in Spanish, including website, call center & materials
- Established partnerships with 30 new community, provider, advocacy orgs & NLM to help educate and engage diverse populations
- Initial EHR data evaluations underway now
- Mobile health partnerships in development with Fitbit and Apple; Mood app in testing
- Improving Direct Volunteer capabilities, with partners like Walgreens & Quest opening sites
- Hosted a Research Priorities Workshop to allow researchers to share >1,300 use cases that will inform future protocol iterations

#### A time capsule from one year ago...



#### Where we are today (as of 8/16/18)...



#### Launch day across the country













If you are 18 or older, you can sign up at <u>JoinAllofUs.org</u>. I hope you will give it careful consideration!

#### Scaling up to 1 Million: 4 strategies to get us there

#### Deliver value to participants ASAP

- Accelerate capabilities to do return of information
- Figure out best way to deliver on their desire for community

#### Finish build out of clinic and recruitment capacity

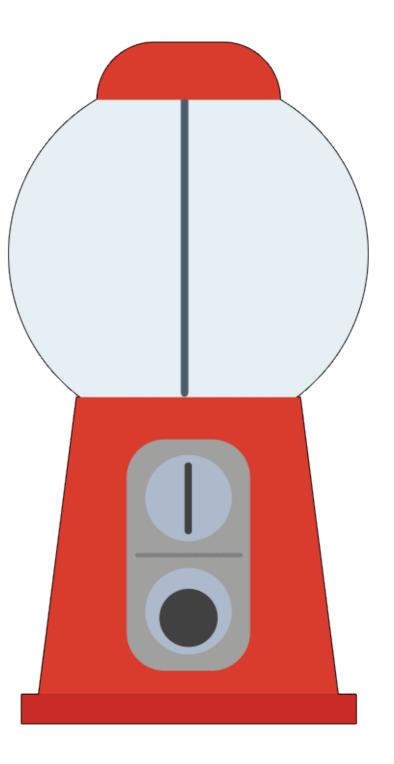
- 135 remaining clinic sites planned for
- Remove barriers to scaling Direct Volunteer mechanism to 25 more markets
- Comparative analysis of home visit vs. HPO vs. drugstores

#### Deploy and test multiple marketing approaches

- Improved websites & participant portal
- Finish precision digital marketing approvals & infrastructure

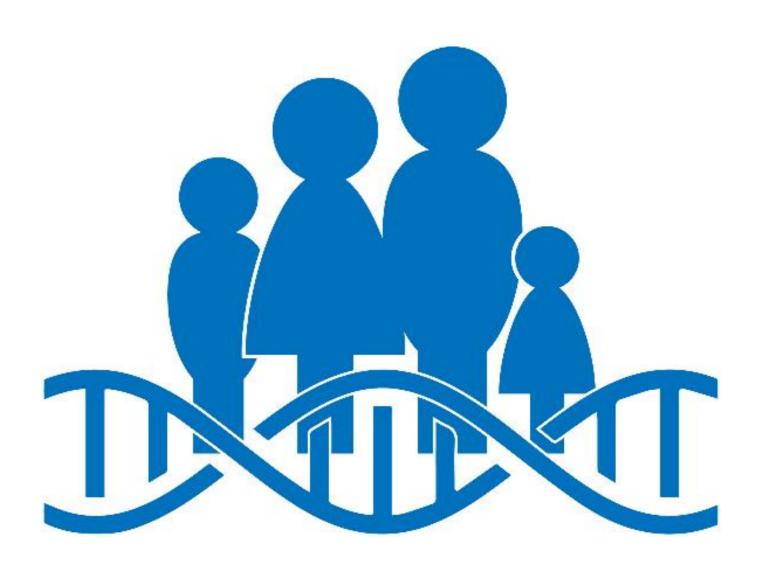
#### Shift more of protocol to lower touch paradigms

- Salivary pilot, pilot of home blood kit
- Explore how to make "physical measures" a DIY kit
- Distribute other tests in patient's normal workflow (time of their physical, coming in for another purpose)



#### **Genomics progress**

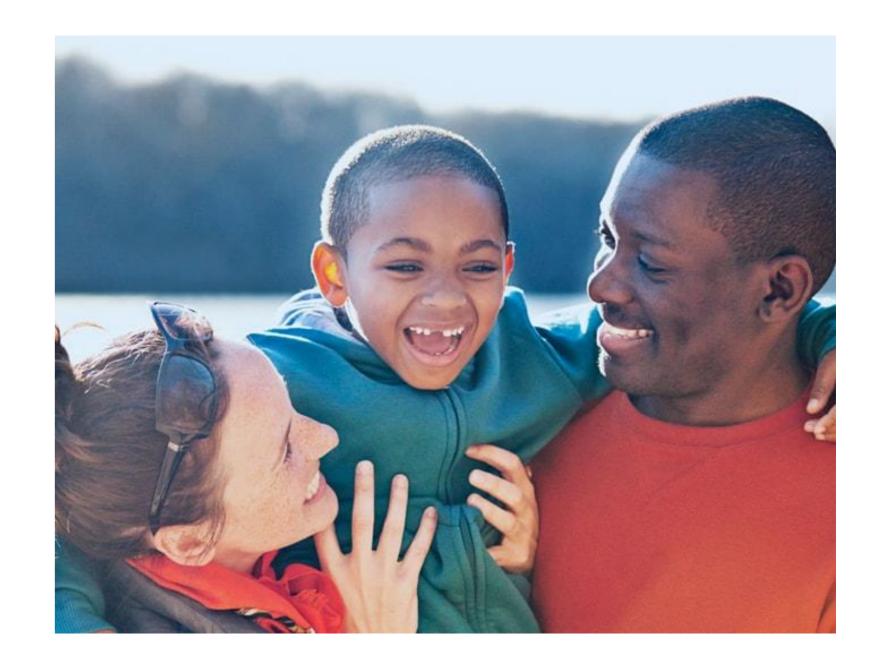
- Consent for use of DNA released before national launch
  - Working on re-consent plan for earlier beta participants
- Frequent FDA discussions (on omics committee) about IDE
- Funding opportunity for Genome Centers closed on July 12<sup>th</sup>
  - Review meeting: mid-August
  - Awards expected: late September
  - 1-2 genomic centers, using OT mechanism
- Genetic Counseling Resource funding opportunity expect to release fall 2018; award in 2019
- Pilot of Genetic ROI and consent w/ 20k diverse participants
  - Compare approaches (from preference engine to messaging)
  - Scope: 1) Pathogenic/Likely pathogenic ACMG variants; 2) Report of no pathogenic ACMG variant observed; 3) PGx report; 4) Access to data file
- On track for starting genomic data collection by end of 2018; responsible ROI pilot trending later '19



#### **Child Enrollment progress**

#### Our aims

- Generate protocols for children that are "parallel" to adult protocol
- Expect ~10-18% of cohort of 1 million will be <18 years old</li>
- Phased enrollment by age: birth to 6 years; 7 to 12, 13 to 17
- NICHD and ECHO members on our committee to drive synergies
- Aiming for launch of birth to 6 years old in Spring/Summer 2019
  - This age range has least complexity of legal/ethical/tech challenges
  - Any child may enroll, even if parent/guardian not enrolled
  - Any child completely enrolled after completion of:
    - Creation of an account by their parent/guardian
    - Parent/guardian consent
    - EHR consent
    - Donation of biospecimen sample and physical measurements
    - Participant (parent/guardian)-Provided Information
- Exploring family-based enrollment



#### Researcher Portal Plans & Aspirations

- Completed needs-finding for researchers
  - Surveys
  - Segmentation Model / Personas
- Developed research access policies & committee
  - Approved 3 tier approach for data (public, registered, controlled)
  - Passport model for individuals wanting access
  - Developing policies on access to samples & cohort
  - Developing procedures for allowing citizen scientist access to controlled tier
- Basic model of the Research Portal is
  - Entry page with description of program, policies & procedures, values, data, and tools
  - Public data browser
  - Research workspace, with cohort builder, Jupyter notebooks, & common analytic tools
- Initial research website (with research priorities workshop use cases)
   launched last month
- Alpha and beta testing our data cleaning, curation processes as well as Research Portal apps fall '18
- On track to launch 1<sup>st</sup> curated dataset 1<sup>st</sup> half of '19; access to cohort and samples to come later

