

Minimum numbers of psychiatric beds and the importance of contextual factors: a Delphi process

Submission date 26/08/2020	Recruitment status No longer recruiting	<input type="checkbox"/> Prospectively registered <input checked="" type="checkbox"/> Protocol
Registration date 12/09/2020	Overall study status Completed	<input type="checkbox"/> Statistical analysis plan <input checked="" type="checkbox"/> Results
Last Edited 24/01/2022	Condition category Mental and Behavioural Disorders	<input type="checkbox"/> Individual participant data

Plain English summary of protocol

Background and study aims

International consensus is lacking on how many psychiatric beds (number of patients that can be accommodated on a psychiatric ward) are needed for the optimal functioning of a balanced mental health system. The availability of psychiatric beds varies widely between countries and part of this variability could be due to the heterogeneity in the definitions of 'psychiatric bed'.

Based on the consensus of experts, Canadian and American organizations have recommended approaching an objective of 50 psychiatric beds financed with public funds per 100,000 inhabitants in high-income countries (HIC). However, to date there is no systematic methodological consensus of experts that has a broad geographical and disciplinary representation regarding universal definitions of psychiatric beds, nor regarding minimum rates for short and long stay units, or specific units for special populations.

There are specific methodologies to reach a consensus of experts. One of them is the Delphi method, which involves defining a group of experts (the Delphi panel) who are invited to provide anonymous sequential and structured responses to questionnaires and surveys presented in multiple rounds. This process is usually designed by a central advisory committee that unifies and conducts the procedures (survey administration and information processing). After each round, participants are allowed to check their responses in the light of the feedback provided by knowing the means of the responses of all experts from the Delphi panel. The objective is for the group to converge towards a consensus.

The aim of this study is to reach an expert consensus on the optimum number of psychiatric beds for both adult and child and adolescent populations, as well as for the setting. The study also aims to establish ranges of psychiatric bed rates for optimum service provision with the lower margin as a minimum number for required beds as well as ranges for three zones of scarcity as mild, moderate, and severe scarcity of psychiatric beds. The expert opinion regarding differential recommendations for countries or geographic regions based on socio-economic, cultural or epidemiological context will be explored. The goal is to generate recommendations for mental health service development.

The study also aims to establish, whether or not, there is consensus regarding specialized inpatient units: for populations with specific needs, such as forensic populations, older people, and people with substance use problems or intellectual disabilities; and in special settings such as hospital-based and non-hospital based.

Who can participate?

Survey respondents who are proposed by members of a Scientific Advisory Board, built for the purposes of this study and comprised by experts on mental health resources research.

What does the study involve?

Experts are invited to be part of a group of a Delphi panel and are requested to provide anonymous responses to questionnaires and surveys via the online platform SurveyMonkey. There will be multiple rounds of surveys with the first-round survey in September 2020, and the second survey round expected to be available in November 2020. Both surveys will be online during the entire month. Further rounds will be considered following the outcomes of the first two rounds.

What are the possible benefits and risks of participating?

Delphi panel members who will respond to the surveys will not directly benefit from their participation in this study. However, the collected information will be useful to learn more about the subject under study. There are no specific risks of adverse events in this study. Email and phone contact of the principal investigator and the ethics committee will be provided for any study participant who might feel the need to discuss the study or express discomfort.

Where is the study run from?

Diego Portales University (Chile)

When is the study starting and how long is it expected to run for?

From September 2020 to January 2021

Who is funding the study?

National Fund for Scientific and Technological Development (Chile)

Who is the main contact?

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Scientific

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Additional identifiers

Clinical Trials Information System (CTIS)
Nil known

ClinicalTrials.gov (NCT)
Nil known

Protocol serial number
Nil known

Study information

Scientific Title
Minimum numbers of psychiatric beds and the importance of contextual factors: a study protocol to reach expert consensus using a Delphi process

Study objectives
To explore the expert's opinion and try to reach consensus regarding the importance of contextual factors for estimating minimum and optimum psychiatric bed numbers

Ethics approval required
Old ethics approval format

Ethics approval(s)
Approved 23/07/2020, the Research Ethics Committee of the Diego Portales University of Santiago de Chile (Manuel Rodríguez Sur 415, Santiago 8370179, Chile; no telephone; comitedeetica@mail.udp.cl), ref: 013-2020

Study design

A modified Delphi and cross-sectional survey study.

Primary study design

Observational

Study type(s)

Other

Health condition(s) or problem(s) studied

Mental health resources

Interventions

Structured, sequential questioning with controlled feedback of Delphi method will be used in this study. A Scientific Advisory Board that unifies and conducts the procedures (survey design and administration as well as information processing) has already been established.

Experts are being invited to be part of a group of a Delphi panel who are requested to provide anonymous sequential and structured responses to questionnaires and surveys presented in multiple rounds (the online platform SurveyMonkey will be used to respond to the surveys).

A first round survey will be available in September 2020, and the second round survey will be performed in November 2020. Further rounds will be considered following consensus criteria.

Intervention Type

Other

Primary outcome(s)

1. Minimum requirement of psychiatric beds per 100,000 inhabitants for the optimal functioning of a balanced mental health system measured by expert consensus collected as anonymous sequential and structured responses to questionnaires and surveys at 0 and 2 months

Key secondary outcome(s)

1. Optimum requirement and shortage levels of psychiatric beds per 100,000 inhabitants for the optimal functioning of a balanced mental health system measured by expert consensus collected as anonymous sequential and structured responses to questionnaires and surveys at 0 and 2 months
2. Established contextual factors for local and regional recommendations on psychiatric bed numbers measured by expert consensus collected as anonymous sequential and structured responses to questionnaires and surveys at 0 and 2 months

Completion date

30/01/2021

Eligibility

Key inclusion criteria

1. Survey respondents are proposed by members of a Scientific Advisory Board, built for the purposes of this study and comprised by experts on mental health resources research who are one of the following:

- 1.1. Mental health researchers with participation in scientific articles of international journals related to the availability of mental health resources
- 1.2. Mental health managers at a local (institutional) or regional/national administration level
- 1.3. Mental health professionals from different disciplines (i.e. psychiatrists, health professionals, psychologists, mental health nurses, etc)

Participant type(s)

Health professional

Healthy volunteers allowed

No

Age group

Adult

Sex

All

Total final enrolment

65

Key exclusion criteria

1. Not proposed by any member of the Scientific Advisory Board

Date of first enrolment

01/06/2020

Date of final enrolment

31/08/2020

Locations**Countries of recruitment**

Chile

Study participating centre

Diego Portales University
Manuel Rodríguez Sur 415
Santiago
Chile
8370179

Sponsor information**Organisation**

Diego Portales University

ROR

<https://ror.org/03gtdcg60>

Funder(s)

Funder type

Government

Funder Name

Fondo Nacional de Desarrollo Científico y Tecnológico

Alternative Name(s)

National Fund for Scientific and Technological Development, El Fondo Nacional de Desarrollo Científico y Tecnológico, FONDECYT

Funding Body Type

Government organisation

Funding Body Subtype

National government

Location

Chile

Results and Publications

Individual participant data (IPD) sharing plan

The datasets generated and/or analysed during the current study during this study will be included in the subsequent results publication

IPD sharing plan summary

Other

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Results article		21/01/2022	24/01/2022	Yes	No
Protocol file			08/10/2020	No	No