INITIATE: Increased mobility in hospital after hip fracture

Submission date	Recruitment status	[X] Prospectively registered
16/07/2024	Recruiting	☐ Protocol
Registration date	Overall study status	Statistical analysis plan
22/07/2024	Ongoing	Results
Last Edited	Condition category	Individual participant data
20/10/2025	Musculoskeletal Diseases	[X] Record updated in last year

Plain English summary of protocol

Background and study aims

Each year there are 70,000 new hip fractures in the UK, with an ongoing annual cost to health and social care services of £3 billion. After this injury, mobility and independence are so badly affected that one in six people never return home. This downward spiral of immobility and dependence contributes to a quarter of people dying within one year of the injury. National mobility targets have been set for hospitals. Firstly patients should be helped out of bed within 48 hours of receiving surgery and secondly, they should receive two hours of rehabilitation per week. Patients whose care exceeds these targets seem to recover more quickly than other patients. Consequently, patients and their carers have asked if increasing ward-based mobilising would allow people to get back home more quickly and to continue living independently. This study wants to find out if more ward-based mobilisation activity after hip fracture surgery allows people to get home quicker and allows them to stay living in their own homes longer.

Who can participate?

Adults aged \geq 60 years having surgery for a fracture of the hip

What does the study involve?

Study participants will provide additional data to the research team at baseline (during their hospital stay), and then around 30 days and 120 days after their surgery.

What are the possible benefits and risks of participating?

There is no specific advantage to taking part in this study. However, the study results will help to improve the care of patients with a broken hip in the future.

Where is the study run from?

The study is run by the Oxford Trauma and Emergency Care research group, which is part of the Nuffield Department of Orthopaedics, Rheumatology and Musculoskeletal Sciences of the University of Oxford.

When is the study starting and how long is it expected to run for? April 2024 to November 2026

Who is funding the study? National Institute for Health and Care Research (NIHR) through its Health Technology Assessment (HTA) programme

Who is the main contact?

- 1. Prof Matt Costa, matthew.costa@ndorms.ox.ac.uk
- 2. Prof Rebecca Kearney, becky.kearney@bristol.ac.uk

Contact information

Type(s)

Public, Scientific

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Principal investigator

Contact name

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Additional identifiers

Clinical Trials Information System (CTIS)

Nil known

Integrated Research Application System (IRAS)

336892

ClinicalTrials.gov (NCT)

Nil known

Protocol serial number

NIHR150983, CPMS 62672, IRAS 336892

Study information

Scientific Title

INITIATE: Increased mobility in hospital after hip fracture

Acronym

WHITE 15: INITIATE

Study objectives

To determine whether a usual care rehabilitation strategy or usual care with an additional mobility-focused intervention is superior for patients aged \geq 60 years, after hip fracture surgery.

Ethics approval required

Ethics approval required

Ethics approval(s)

approved 03/07/2024, Yorkshire & The Humber - Leeds East Research Ethics Committee (2 Redman Place, Stratford, London, E20 1JQ, United Kingdom; +44 (0)207 104 8171, (0) 2071048137, (0)207 104 8357; leedseast.rec@hra.nhs.uk), ref: 24/YH/0113

Study design

Multi-centre two-arm unblinded cluster randomized controlled trial with embedded process and economic evaluations

Primary study design

Interventional

Study type(s)

Health condition(s) or problem(s) studied

Mobility in hospital after hip fracture

Interventions

INITIATE is a multi-centre, two-arm, unblinded, cluster randomised controlled trial (RCT) with embedded process and economic evaluations.

The study will recruit 2310 patients (1155 in each of 2 groups) who have received surgery for a fracture of the hip, from approximately 22 NHS hospitals in the UK.

Recruitment centres will be cluster randomised to either Intervention or Control. Recruitment centres will be allocated in a 1:1 ratio using a computer-generated randomisation minimisation sequence.

Intervention: Usual care with additional ward-based mobilisation activities.

Control: Usual care.

Participants will provide data to the research team about their injury and recovery at baseline (during their hospital stay), and then around 30 days and 120 days after their surgery.

Follow-up contacts at 30 and 120 days post-surgery will be completed with the participant or a proxy either via telephone interviews by a member of the central research team, or through electronic means.

A process evaluation will take place to determine to what extent the cluster RCT protocol is operationalised within the orthopaedic trauma units and determine the extent to which the INITIATE intervention has been delivered per protocol (fidelity) and implemented (adherence). The process evaluation will take place in all intervention sites.

Intervention Type

Behavioural

Primary outcome(s)

DAH30 (days alive and at home up to 30 days post-hip fracture surgery) will be measured using participant questionnaires and medical records at 30 days

Key secondary outcome(s))

- 1. DAH120 (days alive and at home up to 120 days post-hip fracture surgery) will be measured using participant questionnaires and medical records at 120 days
- 2. Health-related quality of life will be measured using EQ-5D-5L pre-injury, at 30 days, and 120 days
- 3. Mobility will be measured using mNMS (modified New Mobility Score) pre-injury and at 30 days
- 4. Basic mobility at discharge will be measured using CAS (Cumulated Ambulation Score) at discharge
- 5. Residential status, mortality, rate of complications, rate of falls resulting in fracture or head injury, and resource use will be using participant questionnaires and medical records at 30 days and 120 days
- 6. The extent to which the cluster RCT protocol is operationalised within the orthopaedic trauma units and the extent to which the INITIATE intervention is adopted and embedded will be measured through intervention analysis and intervention adherence, based on a thematic analysis of interviews with participants (and relative/friend/informal carer as required) and interviews and focus groups with recruitment centre staff during the embedded process and economic evaluations part of the study

Completion date

Eligibility

Key inclusion criteria

- 1. Aged 60 years and over
- 2. With and without capacity
- 3. Presenting to a WHITE recruitment centre for treatment of a hip fracture or who has received surgery for a hip fracture in the past 48 hours

Participant type(s)

Patient

Healthy volunteers allowed

No

Age group

Mixed

Lower age limit

60 years

Sex

All

Key exclusion criteria

A patient will not be eligible for the study if ANY of the following apply:

- 1. A fracture caused by an area of abnormal bone (e.g., a tumour)
- 2. A pre-existing contraindication to mobilising after surgery
- 3. A patient who had severely limited mobility prior to injury (i.e confined to bed, transfer from bed to chair only)
- 4. Previous participation in INITIATE or actively engaged in other hip fracture research with contralateral hip fracture

Date of first enrolment

01/08/2024

Date of final enrolment

31/12/2025

Locations

Countries of recruitment

United Kingdom

England

Wales

Study participating centre John Radcliffe Hospital

Headley Way Headington Oxford United Kingdom OX3 9DU

Study participating centre Southmead Hospital

Southmead Road Westbury-on-trym Bristol United Kingdom BS10 5NB

Study participating centre Stepping Hill Hospital

Stockport NHS Foundation Trust Poplar Grove Hazel Grove Stockport United Kingdom SK2 7JE

Study participating centre Leicester Royal Infirmary

Infirmary Square Leicester United Kingdom LE1 5WW

Study participating centre Royal Berkshire Hospital

London Road Reading United Kingdom RG1 5AN

Study participating centre

University Hospital Coventry & Warwickshire

Clifford Bridge Road Walsgrave Coventry United Kingdom CV2 2DX

Study participating centre Musgrove Park Hospital (taunton)

Musgrove Park Hospital Taunton United Kingdom TA1 5DA

Study participating centre Hull Royal Infirmary

Anlaby Road Hull United Kingdom HU3 2JZ

Study participating centre St George's Hospital

Blackshaw Road Tooting London United Kingdom SW17 0QT

Study participating centre Airedale General Hospital

Skipton Road Steeton Keighley United Kingdom BD20 6TD

Study participating centre The Royal Victoria Infirmary

Queen Victoria Road Newcastle upon Tyne United Kingdom TS1 4LP

Study participating centre Cumberland Infirmary

Newtown Road Carlisle United Kingdom CA2 7HY

Study participating centre University Hospital of North Durham

University Hospital of Durham Dryburn Hospital North Road Durham United Kingdom DH1 5TW

Study participating centre Heartlands Hospital

Bordesley Green East Bordesley Green Birmingham United Kingdom B9 5ST

Study participating centre Queens Medical Centre, Nottingham University Hospital

Derby Road Nottingham United Kingdom NG7 2UH

Study participating centre Darent Valley Hospital

Darenth Wood Road Dartford United Kingdom DA2 8DA

Study participating centre Royal Preston Hospital

Sharoe Green Lane North Fulwood Preston United Kingdom PR2 9HT

Study participating centre George Eliot Hospital

Lewes House College Street Nuneaton United Kingdom CV10 7DJ

Study participating centre Countess of Chester Hospital

Countess of Chester Health Park Liverpool Road Chester United Kingdom CH2 1UL

Study participating centre Gwynedd Hospital (ga)

Ysbyty Gwynedd Penrhosgarnedd Bangor United Kingdom LL57 2PW

Study participating centre Wrexham Maelor Hospital

Croesnewydd Road Wrexham Technology Park Wrexham United Kingdom LL13 7TD

Sponsor information

Organisation

University of Oxford

ROR

https://ror.org/052gg0110

Funder(s)

Funder type

Government

Funder Name

Health Technology Assessment Programme

Alternative Name(s)

NIHR Health Technology Assessment Programme, Health Technology Assessment (HTA), HTA

Funding Body Type

Government organisation

Funding Body Subtype

National government

Location

United Kingdom

Results and Publications

Individual participant data (IPD) sharing plan

The datasets generated during and/or analysed during the current study are/will be available upon request. Any requests for data sharing will be submitted to Prof Matt Costa (matthew. costa@ndorms.ox.ac.uk) and Prof Becky Kearney (becky.kearney@bristol.ac.uk) and decided on a case-by-case basis. No data will be released for sharing until after the trial has closed to recruitment and been analysed.

IPD sharing plan summary

Available on request

Study outputs

Output type **Details** Date created Date added Peer reviewed? Patient-facing?