# Investigating the effectiveness of inpatient mental health rehabilitation services in the NHS and independent sector

Submission date	Recruitment status Recruiting	<ul><li>Prospectively registered</li></ul>		
08/07/2022		[X] Protocol		
Registration date	Overall study status	Statistical analysis plan		
01/11/2022 Last Edited	Ongoing  Condition category	Results		
		Individual participant data		
28/01/2025	Mental and Behavioural Disorders	[X] Record updated in last year		

#### Plain English summary of protocol

Background and study aims

Mental health rehabilitation services provide specialist treatment to people with particularly severe and complex problems. These services include inpatient units and supported accommodation in the community. Over half of the 4400 mental health inpatient rehabilitation beds in England are provided by the independent sector, but there have been no studies investigating the effectiveness of inpatient rehabilitation services that have included the independent sector. Our study aims to address this gap.

#### Who can participate?

Any patient with an adequate understanding of English at one of the mental health inpatient rehabilitation units selected for this study.

#### What does the study involve?

A research interview which takes about 30 min where participants will be asked a series of questions about how satisfied they are with different aspects of their life, how they spend their time, the freedom they have to make day-to-day decisions, and how they feel about the care you receive from the inpatient rehabilitation service. The research team will also invite participants to a brief 5 min interview at 6, 12, and 18 months after the first interview. These interviews will be done over the telephone or video call (e.g. Zoom or Microsoft Teams).

The research team will also ask participants for their permission to ask a staff member about their abilities, needs, any specific difficulties they may have, their activities in the community, and whether they have been at risk or posed any risk to others. The research team will then contact staff involved in the participant's healthcare at regular intervals over the next 18 months to see if they have been discharged from the inpatient rehabilitation service, and, if they have been discharged, details of where they have been discharged to and whether they have had any readmissions. Participants may ask the researcher to see a copy of these questions.

The research team would also ask participants for their permission to collect some information from their healthcare records about the care they have received from mental health services in the past.

What are the possible benefits and risks of participating?

By participating in this study, participants will help the research team to assess the effectiveness of NHS and independent sector inpatient mental health rehabilitation services. It is hoped that the information collected from this study will help to improve inpatient rehabilitation services in the future. Each participant will be offered £20 in recognition of the time they have given to be involved in the study.

Where is the study run from? University College London (UK)

When is the study starting and how long is it expected to run for? From December 2019 to June 2026

Who is funding the study? National Institute for Health and Care Research (NIHR) Health Services Delivery Research programme (UK)

Who is the main contact? Christian Dalton-Locke (Project Manager) c.dalton-locke@ucl.ac.uk

#### Study website

https://www.ucl.ac.uk/psychiatry/acer

#### **Contact information**

#### Type(s)

Principal Investigator

#### Contact name

Prof Helen Killaspy

#### **ORCID ID**

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#### Type(s)

#### Scientific

#### Contact name

Dr Christian Dalton-Locke

#### Contact details

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#### Additional identifiers

#### **EudraCT/CTIS** number

Nil known

#### **IRAS** number

311434

#### ClinicalTrials.gov number

Nil known

#### Secondary identifying numbers

CPMS 52629, IRAS 311434, award ID: NIHR130693

#### Study information

#### Scientific Title

Assessing the Clinical and cost-Effectiveness of inpatient mental health Rehabilitation services provided by the NHS and independent sector (ACER)

#### Acronym

ACER V1.0

#### Study objectives

- 1. Do sociodemographic and clinical characteristics of patients differ between people receiving inpatient rehabilitation in the NHS and the independent sector?
- 2. Does service quality differ between inpatient rehabilitation units provided by the NHS and the independent sector?
- 3. Do the experiences of treatment and care, from the perspectives of patients, informal carers and staff, differ between inpatient rehabilitation services provided by the NHS and the independent sector?
- 4. Is inpatient rehabilitation clinically more effective at preventing readmission when provided by the independent sector or the NHS, after adjusting for differences between the sectors in terms of patient characteristics and length of stay?

5. Is inpatient rehabilitation more cost-effective when provided by the independent sector or the NHS, after adjusting for differences between the sectors in terms of key predictors of costs such as patient characteristics and length of stay?

#### Ethics approval required

Old ethics approval format

#### Ethics approval(s)

Approved 08/06/2022, North East - Newcastle & North Tyneside 2 Research Ethics Committee (NHS BT Blood Donor Centre, Holland Drive, Newcastle upon Tyne, Tyne and Wear, NE2 4NQ; +44 (0)2071048086; newcastlenorthtyneside2.rec@hra.nhs.uk), ref: 22/NE/0067

#### Study design

Observational cohort study

#### Primary study design

Observational

#### Secondary study design

Cohort study

#### Study setting(s)

Hospital

#### Study type(s)

Treatment

#### Participant information sheet

Not available in web format, please use the contact details to request a patient information sheet

#### Health condition(s) or problem(s) studied

Mental health

#### **Interventions**

As we cannot compare NHS and independent sector services through a randomised trial, our programme will draw together findings from four components to assess the effectiveness of these services:

- 1. Survey of 60 inpatient mental health rehabilitation services across England (30 NHS and 30 independent sector)
- 2. In-depth interviews with users, relatives/carers, staff, and commissioners of these services to explore their experiences and perspectives
- 3. Cohort study to compare outcomes for 600 patients of the NHS and independent sector rehabilitation services surveyed in Component 1, using statistical methods that take account of any differences between them such as the severity of their mental health problems
- 4. Health economic evaluation to assess the cost-effectiveness of inpatient rehabilitation services provided by the NHS and the independent sector

#### Survey:

We aim to recruit 500 patients from 60 inpatient mental health rehabilitation units across England (30 NHS and 30 independent sector) over a 12-month period to participate in a survey

(patients at this stage will be asked to consent to take part in Components 1 and 3). Once selected services have agreed to participate, researchers will visit the unit and describe the project to staff. The staff will be asked to introduce the patients to the researchers who will then provide the patient with a Participant Information Sheet. The study will be fully explained to the patient, including the purpose of the study, what their participation would involve, what data will be collected and how it will be collected, and that they are free to withdraw from the study at any point without it affecting their clinical care. The patient will have at least 24 hours to consider whether they would like to participate and have the opportunity to ask the researcher any questions. Patients who provide their informed consent by completing the consent form will then participate in a research interview where data will be collected using standardised measures regarding their quality of life (DIALOG, Recovering Quality of Life, EQ-5D-5L), autonomy (Resident Choice Scale), engagement in activities (Time Use Diary), satisfaction with care (Client Assessment of Treatment), and healthcare costs (Client Receipt Inventory). In addition, staff will be asked to complete standardised measures on the patient's social functioning (Life Skills Profile), challenging behaviours (Special Problems Rating Scale), alcohol and drug use (Clinical Alcohol and Drug Scale), needs (Camberwell Assessment of Needs, and activities (Time Use Diary). Sociodemographic, healthcare service use, current and previous risk, and engagement in community-based activities will be collected from the patient's healthcare records. Also, researchers will complete the QuIRC with the managers of each service. The QuIRC is a quality assessment tool developed specifically for inpatient mental health rehabilitation units.

#### In-depth interview (qualitative) study:

We will select and invite 10 inpatient rehabilitation units (5 NHS and 5 independent sector) participating in Component 1 to participate in Component 2. We will invite all staff from these services to participate in a focus group and ask about their experience and perspective of working in these services. We will also conduct additional staff interviews, including interviews with senior service managers, commissioners, and community care coordinators, to expand on any themes not adequately covered in the focus group, including the decision-making process about where an individual receives their inpatient rehabilitation.

From these participating services, we will also aim to interview between three and five patients from each service (between 30 and 50 in total) and ask about their experiences and perspectives on the care they are receiving. We will ask these patient participants for permission to contact and invite their relatives/carers to participate in an in-depth interview. We aim to recruit around 20 relatives/carers in total. Interviews with relatives/carers will take place via telephone or videoconferencing.

#### Cohort study:

Participants recruited into Component 1 will comprise the cohort for Component 3. The researchers will contact the services managers of the inpatient rehabilitation units participating in Component 1 once a month for 18 months to ask if any of the participants have been discharged from the unit, and if they have been discharged, information about where they have been discharged to including contact details of relevant staff (i.e. their 'key informant') who we may complete future monthly follow-ups with. We expect on most occasions this will be the participant's community care coordinator. We will invite all participants to a short research interview via telephone or video call (Teams of Zoom) at six, 12, and 18 months to complete two quality of life measures (Recovering Quality of Life and EQ-5D-5L). In addition, at six, 12, and 18 months we will ask key informants of participants who have been discharged from the inpatient rehabilitation service they were recruited from about any subsequent inpatient service use, and social care costs (use of supported accommodation and any individual 'care packages').

#### Health economic evaluation:

Using data collected in Components 1 and 3 analyses will be conducted to investigate the cost-effectiveness of NHS and independent inpatient rehabilitation services by calculating quality-adjusted life-years.

#### Intervention Type

Other

#### Primary outcome measure

Cohort study:

Successful discharge from inpatient rehabilitation, defined as being discharged to the community without readmission, measured using staff reports collected at 6, 12, and 18 months

#### Health economic evaluation:

Incremental cost-effectiveness ratio (ICER) comparing rehabilitation in the independent sector and rehabilitation in an NHS service calculated using cost-utility analysis (CUA) where the QALYs are measured using patient responses to the EuroQol 5-dimension 5-level (EQ-5D-5L) questionnaire collected at baseline, 6, 12, and 18 months

#### Secondary outcome measures

Cohort study:

Total inpatient days over the follow-up period measured using staff reports collected at 6, 12, and 18 months

#### Overall study start date

20/12/2019

#### Completion date

30/06/2026

#### **Eligibility**

#### Key inclusion criteria

Patients:

- 1. Inpatients at rehabilitation units that are participating in the study
- 2. Provide informed consent to participate in the study. All efforts will be made to maximise the capacity of each patient to be able to provide informed consent for the study (for example, by explaining the purpose and process of the study in simple terms and over a number of meetings), and any patient with capacity who declines participation will not be included. However, for eligible patients who lack capacity to give informed consent we will seek advice from a consultee on their participation. Further detail on the procedure for seeking informed consent and assessing capacity is provided in section 8. Research data for participants lacking capacity will be collected via staff interview and healthcare records (as described above), but these participants will not be asked to participate in an interview themselves. The researchers expect only a minority of eligible patients to lack capacity (around 8% based on the REAL study) but it is important they are included in the study in order to prevent sample bias.

#### Services:

- 1. High dependency, community, or longer-term high dependency rehabilitation units
- 2. Community rehabilitation units will only be included if they are registered with CQC as an inpatient unit (rather than supported housing or residential care)

#### Participant type(s)

Patient

#### Age group

Adult

#### Sex

Both

#### Target number of participants

Planned Sample Size: 500; UK Sample Size: 500

#### Key exclusion criteria

#### Patients:

- 1. Unavailable during the researcher's visit, because they are on leave from the ward during the visit or are otherwise unavailable
- 2. Do not have an adequate understanding of English to understand the main purpose of the research and what participating would involve for them

#### Services:

- 1. Highly specialist units that focus on sub-groups (such as people with a diagnosis on the autism spectrum or those with neurodegenerative disease)
- 2. Specialist forensic mental health units (i.e. low secure rehabilitation units) as they do not form part of the standard mental health rehabilitation care pathway and are subject to specialist commissioning by NHS England

#### Date of first enrolment

08/06/2022

#### Date of final enrolment

30/09/2025

#### Locations

#### Countries of recruitment

England

United Kingdom

## Study participating centre Camden and Islington NHS Foundation Trust St Pancras Hospital

4 St Pancras Wav

London United Kingdom NW1 0PE

#### Study participating centre Avon and Wiltshire Mental Health Partnership NHS Trust

Bath NHS House Newbridge Hill Bath United Kingdom BA1 3QE

## Study participating centre Birmingham and Solihull Mental Health NHS Foundation Trust

Unit 1 50 Summer Hill Road Birmingham United Kingdom B1 3RB

### Study participating centre Central and North West London NHS Foundation Trust

Trust Headquarters 350 Euston Road Regents PLACE London United Kingdom NW1 3AX

#### Study participating centre

Coventry and Warwickshire Partnership NHS Trust

Wayside House Wilsons Lane Coventry United Kingdom CV6 6NY

## Study participating centre Cumbria, Northumberland, Tyne and Wear NHS Foundation Trust

St Nicholas Hospital Jubilee Road Gosforth Newcastle upon Tyne United Kingdom NE3 3XT

#### Study participating centre Devon Partnership NHS Trust

Wonford House Hospital Dryden Road Exeter United Kingdom EX2 5AF

#### Study participating centre

Greater Manchester Mental Health NHS Foundation Trust

Prestwich Hospital Bury New Road Prestwich Manchester United Kingdom M25 3BL

## Study participating centre Herefordshire and Worcestershire Health and Care NHS Trust

Unit 2 Kings Court Charles Hastings Way Worcester United Kingdom WR5 1JR

#### Study participating centre Leeds and York Partnership NHS Foundation Trust

2150 Century Way Thorpe Park Leeds United Kingdom LS15 8ZB

Study participating centre
Lincolnshire Partnership NHS Foundation Trust
St George's

Long Leys Road Lincoln United Kingdom LN1 1FS

#### Study participating centre Mersey Care NHS Foundation Trust

V7 Building Kings Business Park Kings Drive Prescot United Kingdom L34 1PJ

#### Study participating centre North Staffordshire Combined Healthcare NHS Trust

Lawton House Bellringer Road Trentham Stoke-on-trent United Kingdom ST4 8HH

## Study participating centre Nottinghamshire Healthcare NHS Foundation Trust

The Resource, Trust Hq Duncan Macmillan House Porchester Road Nottingham United Kingdom NG3 6AA

#### Study participating centre Pennine Care NHS Foundation Trust

225 Old Street Ashton-under-lyne United Kingdom OL6 7SR

#### Study participating centre

#### Rotherham Doncaster and South Humber NHS Foundation Trust

Woodfield House Tickhill Road Doncaster United Kingdom DN4 8QN

## Study participating centre South London and Maudsley NHS Foundation Trust

Bethlem Royal Hospital Monks Orchard Road Beckenham United Kingdom BR3 3BX

## Study participating centre South West London and St George's Mental Health NHS Trust

Springfield Hospital 61 Glenburnie Road London United Kingdom SW17 7DJ

## Study participating centre Sussex Partnership NHS Foundation Trust

Trust Hq Swandean Arundel Road Worthing United Kingdom BN13 3EP

## Study participating centre Tees, Esk and Wear Valleys NHS Foundation Trust

Trust Headquarters West Park Hospital Edward Pease Way Darlington United Kingdom DL2 2TS

#### Study participating centre St Andrew's Healthcare

Billing Road Northampton United Kingdom NN1 5DG

## Study participating centre Priory Group

Priory Head Office Floor 5 Hammersmith Road London United Kingdom W14 8UD

## Study participating centre Barnet, Enfield and Haringey Mental Health NHS Trust

Trust Headquarters Block B2 St Ann's Hospital St Ann's Road London United Kingdom N15 3TH

## Study participating centre Oxleas NHS Foundation Trust

Pinewood House Pinewood PLACE Dartford United Kingdom DA2 7WG

#### Study participating centre Lancashire and South Cumbria NHS Foundation Trust

Sceptre Point Sceptre Way Walton Summit Preston United Kingdom PR5 6AW

#### Study participating centre Hampshire and Isle of Wight Healthcare NHS Foundation Trust

Tatchbury Mount Hospital Calmore Southampton United Kingdom SO40 2RZ

#### Sponsor information

#### Organisation

Camden and Islington NHS Foundation Trust

#### Sponsor details

St Pancras Hospital 4 St Pancras Way London England United Kingdom NW1 0PE +44 (0)20 7685 5949 sponsor.noclor@nhs.net

#### Sponsor type

Hospital/treatment centre

#### Website

http://www.candi.nhs.uk/

#### **ROR**

https://ror.org/03ekq2173

#### Funder(s)

#### Funder type

Government

#### **Funder Name**

National Institute for Health and Care Research

#### Alternative Name(s)

National Institute for Health Research, NIHR Research, NIHRresearch, NIHR - National Institute for Health Research, NIHR (The National Institute for Health and Care Research), NIHR

#### **Funding Body Type**

Government organisation

#### **Funding Body Subtype**

National government

#### Location

United Kingdom

#### **Results and Publications**

#### Publication and dissemination plan

Planned dissemination of findings through peer-reviewed scientific journal publications by the end of 2025, hosting two webinars for participating services at key stages during the study to report on the progress of the study, and also presentation of the main findings at conferences.

#### Intention to publish date

30/06/2026

#### Individual participant data (IPD) sharing plan

The data sharing plans for the current study are unknown and will be made available at a later date

#### IPD sharing plan summary

Data sharing statement to be made available at a later date

#### **Study outputs**

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
<u>Protocol file</u>	version 1.3	07/06/2022	05/08/2022	No	No
HRA research summary			26/07/2023	No	No
Protocol article		06/02/2024	07/02/2024	Yes	No