

Feasibility study on the use of telemedicine for psychiatric patients

Submission date 26/05/2015	Recruitment status No longer recruiting	<input type="checkbox"/> Prospectively registered
		<input type="checkbox"/> Protocol
Registration date 25/06/2015	Overall study status Completed	<input type="checkbox"/> Statistical analysis plan
		<input type="checkbox"/> Results
Last Edited 02/02/2018	Condition category Mental and Behavioural Disorders	<input type="checkbox"/> Individual participant data
		<input type="checkbox"/> Record updated in last year

Plain English summary of protocol

Background and study aims

We are carrying out a study to investigate the use of telepsychiatry/teleconsultation for the care of patients with chronic mental illness in the community. We will be using videoconferencing facilities approved by the Hospital Trust Board. We will want to look for benefits from the use of this technology in improving the quality of patient care, including improving access to care for certain patient groups with poor engagement, within a community setting.

Who can participate?

Participants between the ages of 18 and 65, who are well known to their clinicians (Community Psychiatric Nurses or CPNs), with diagnoses of chronic mental illnesses, from a community mental health team base in Leicestershire.

What does the study involve?

Over a period of six months, all participants alternate their routine face-to-face reviews with teleconsultations. The consultations, both face to face and teleconsultation, are conducted by their respective CPNs. This method was chosen as it helps both patient and clinician (CPN) evaluate the risks and benefits. The frequency of both face to face and teleconsultations is at the discretion of the clinician and the patient. Both patient and clinicians are trained to use the teleconsultation software.

What are the possible benefits and risks of participating?

One potential benefit to patients taking part in this study is that they will receive treatment, even when they are not able to attend their outpatient clinic appointments and medication reviews (due to for example, childcare issues, physical health issues such as pain or a mental health issue, such as a phobia). They will also benefit from a reduction in the time spent travelling and reduced costs from travel. Other potential long term benefit is frequent contact with their clinicians, potentially reducing relapses and hospital admissions. Clinicians may benefit from a reduction in time taken, and money spent, to travel to visit their patients. Risks include a patient's mental state or circumstances changing suddenly and making teleconsultation unsuitable. Patients and clinicians may also find that teleconsultations are untherapeutic and may not want to continue with the study.

Where is the study run from?

The study will be run from a community mental health team base within Leicestershire Partnership NHS Trust (UK)

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

June 2015 to January 2016

Who is funding the study?

Leicestershire Partnership NHS Trust (UK)

Who is the main contact?

Dr Suneeta James

Contact information

Type(s)

Scientific

Contact name

Dr Suneeta James

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Contact details

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Additional identifiers

EudraCT/CTIS number

IRAS number

ClinicalTrials.gov number

Secondary identifying numbers

14/NW/0100

Study information

Scientific Title

A feasibility study on the effectiveness of teleconsultation in monitoring patients with mental illness by the Community Mental Health Team

Study objectives

Is it feasible to develop a trial investigating the use of telemedicine to monitor patients with severe mental illness in the community?

Ethics approval required

Old ethics approval format

Ethics approval(s)

NRES Committee North West - Preston, 18/02/2014, ref: 14/NW/0100

Study design

Single-centre interventional trial

Primary study design

Interventional

Secondary study design

Non randomised study

Study setting(s)

Community

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

Improving the quality of patient care, including improving access to care for certain patient groups with poor engagement, within an outpatient setting

Interventions

1. Each patient alternates between both interventions i.e., regular face to face contact and teleconsultation, to help both patients and clinicians evaluate the risks and benefits effectively
2. Participants who agree to participate in the study will be offered face to face contact alternating with teleconsultations with their Community Psychiatric Nurses (CPN)
3. 20 participants will be recruited in total. Patients will be asked to complete the consent form before entering into the study. Treatment for those declining to participate in the study will be offered as per normal practice.
4. Both participant and CPNs will be asked to complete a Service User Evaluation form and a Clinician Satisfaction form after each consultation.

Intervention Type

Device

Primary outcome measure

1. To assess the feasibility of the method (teleconsultation) with this group of patients (Service user Satisfaction Questionnaire), the recruitment and application of the clinical care using telemedicine

2. To ascertain the number of non attendances and/or cancellations
3. To ascertain the reason for drop-outs in this study. This will be explored via short interviews with therapists
4. Numbers of participants recruited in this feasibility study
5. Time saved from travelling
6. Clinical feedback after sessions

Secondary outcome measures

1. Clinician satisfaction on tele-consultation as measured on Clinician Experience Form
2. Cost analysis based on Clinician time sheets for service users and clinicians

Overall study start date

15/06/2015

Completion date

15/01/2016

Eligibility

Key inclusion criteria

1. Patients diagnosed with a psychiatric disorder and who are looked after by the community mental health team
2. Patients between the age of 18 and 65 years
3. Patients who have been known to a Community Psychiatric Nurse for duration of at least 3 months
4. Patients who have not had any acute episodes (admission) for one year
5. Patients who are clinically stable with no significant risk to themselves or others
6. Patients should have access to internet and wifi at home and should have basic computer literacy (as judged by the CPN)

Participant type(s)

Patient

Age group

Adult

Lower age limit

18 Years

Upper age limit

65 Years

Sex

Both

Target number of participants

20

Key exclusion criteria

1. Patients who are acutely unwell with a diagnosis of a major mental disorder such as psychosis or bipolar disorder requiring significant community care or immediate hospital admission
2. Patients requiring urgent assessment and intervention or a home visit
3. Patient not capable of consenting
4. Patients with no wifi at home
5. Patients who are at moderate to severe risk of self harm

Date of first enrolment

15/06/2015

Date of final enrolment

15/07/2015

Locations

Countries of recruitment

United Kingdom

Study participating centre

Leicestershire Partnership NHS Trust

United Kingdom

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Sponsor information

Organisation

Research and Development Office, Leicestershire Partnership NHS Trust

Sponsor details

Lakeside House
4 Smith Way
Grove Park
Enderby
Leicester
England
United Kingdom
LE19 1SS

Sponsor type

Hospital/treatment centre

ROR

<https://ror.org/045wcpc71>

Funder(s)

Funder type

Hospital/treatment centre

Funder Name

Charitable Funding from Leicestershire Partnership NHS Trust (UK)

Results and Publications

Publication and dissemination plan

The trial results will be published on completion of the trial. I am unable to give a publication date presently as the trial has not yet commenced.

Intention to publish date

Individual participant data (IPD) sharing plan

IPD sharing plan summary

Available on request

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
HRA research summary			28/06/2023	No	No