

Home treatment for acute mental healthcare in Ticino, Switzerland

Submission date 29/10/2020	Recruitment status No longer recruiting	<input type="checkbox"/> Prospectively registered
Registration date 17/11/2020	Overall study status Completed	<input checked="" type="checkbox"/> Protocol
Last Edited 20/06/2022	Condition category Mental and Behavioural Disorders	<input type="checkbox"/> Statistical analysis plan
		<input checked="" type="checkbox"/> Results
		<input type="checkbox"/> Individual participant data

Plain English summary of protocol

Background and study aims

Crisis Resolution and Home Treatment (CRHT) teams represent a community-based mental health service offering a valid alternative to hospitalisation for short term mental illness. The evaluation of several home-treatment experiences shows promising results; however, it remains unclear which specific elements and characteristics of CRHT are more effective and acceptable. This study aims to assess the acceptability, effectiveness and cost-effectiveness of a new CRHT intervention in Ticino, Southern Switzerland.

Who can participate?

Patients aged 18 to 65 living in two districts of Southern Switzerland ("Bellinzona e Valli" versus "Lugano") with diagnosis of acute mental illness requiring hospital admission and eligible for home treatment.

What does the study involve?

Patients in the northern area of the region will be offered the CRHT service and be defined as the intervention group; patients in the southern area of the region will act as the control group and receive care as usual for a 48 month period.

Individual interviews with patients receiving the home treatment intervention and their family members will be conducted. Participants will complete questionnaires and for some participants an interview of an hour. CRHT team members will also be interviewed.

What are the possible benefits and risks of participating?

No direct benefits or risks. Findings from this study will allow local services to improve their effectiveness in a challenging domain of public health and contribute to improving access to more effective care for people with severe mental disorders.

Where is the study run from?

Clinica Psichiatrica Cantonale (Switzerland)

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

March 2017 to May 2019

Who is funding the study?
Swiss National Science Foundation

Who is the main contact?
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Contact information

Type(s)
Public

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Additional identifiers

Clinical Trials Information System (CTIS)
Nil known

ClinicalTrials.gov (NCT)
Nil known

Protocol serial number
NRP74 407440_167375

Study information

Scientific Title
Home treatment for acute mental healthcare in Ticino: protocol of the Foresight study

Acronym
Foresight

Study objectives
Crisis Resolution and Home Treatment (CRHT) teams represent a community-based mental health service offering a valid alternative to hospitalisation. The evaluation of several home-treatment experiences shows promising results; however, it remains unclear which specific elements and characteristics of CRHT are more effective and acceptable. This study aims to assess the acceptability, effectiveness and cost-effectiveness of a new CRHT intervention in Ticino, Southern Switzerland.

Ethics approval required

Old ethics approval format

Ethics approval(s)

Approved 28/03/2017, Ethica Committee of the Canton Ticino (Ufficio di sanità, Via Orico 5, 6501 Bellinzona, Switzerland; +41 918143057; michaela.gutacker@ti.ch), ref: Basec 2017-00247

Study design

Interventional non randomised quasi-experimental study

Primary study design

Interventional

Study type(s)

Treatment

Health condition(s) or problem(s) studied

Acute mental illness requiring hospital admission to the psychiatric hospital

Interventions

Crisis Resolution Home Treatment (CRHT) arm:

Patients from the Bellinzona area will typically be visited at home on a daily basis for approximately 1 h, with the option for multiple visits a day (or night) if necessary. Interventions will be individually tailored but include typical ingredients of acute care, such as crises intervention, pharmacotherapy, psychoeducation, brief psychotherapy and social care. The CRHT team base is situated in the heart of Bellinzona, where an existing community mental health team is already operating. The CRHT provides services for 14 patients, aged 18 -65 years who without the presence of the CRHT would be typically admitted to a psychiatric hospital on a voluntary basis. Staff are available 24 hours per day, 7 days a week. The service brings together different health and social care professionals, including three physicians, ten mental health nurses, one team manager, one social worker and one clinical psychologist). The services offered by the home treatment team include all those provided by a multidisciplinary approach within an inpatient setting: providing daily reviews by nurses and psychiatrists, performing ad hoc physical examination, blood tests and ECGs in liaison with general medical practitioners, facilitating access to further physical health investigations and medical consultations via the local access and emergency department, refining diagnostic formulations, offering the possibility of neuropsychological assessments, prescribing and administering pharmacological treatment, actively monitoring compliance to prescribed medication, time structuring, psychoeducation with patients family and carers. Patients will typically be visited at home on a daily basis for approximately 1 h, with the option for multiple visits a day (or night) if necessary. Interventions will be individually tailored but include typical ingredients of acute care, such as crises intervention, pharmacotherapy, psychoeducation, brief psychotherapy and social care.

Traditional inpatient treatment arm with patients from the Lugano area:

Patients for the Lugano area will be admitted to a psychiatric hospital (CPC) with the presence of a mental health team (psychiatrists, mental health nurses, social worker and psychologist) 24 hour 7 days a week. They are treated by multidisciplinary approach providing multiple visits by nurses and psychiatrists, performing ad hoc physical examination, blood tests and ECGs in the hospital, facilitating access to further physical health investigations and medical consultations via the local access and emergency department, refining diagnostic formulations, offering the possibility of neuropsychological assessments, prescribing and administering pharmacological

treatment, actively monitoring compliance to prescribed medication, time structuring by a team of sociotherapists, psychoeducation with patients family and carers and social care.

Intervention Type

Behavioural

Primary outcome(s)

1. Number of inpatient days (taken from the patient record) be measured every six months during a two-year follow-up period
2. Total days in treatment and other service utilization (taken from the patient record) measured every six months during a two-year follow-up period
3. Direct cost (data will be delivered by the health insurance company) measured every six months during a two-year follow-up period
4. HoNOS Health of Nation Outcomes Scales collected at intake and discharge
5. Brief Symptom Checklist (BSCL) collected at intake and discharge

Key secondary outcome(s)

1. Perception of Care (PoC – Inpatient Questionnaire) collected at discharge
2. Satisfaction of patients' relatives (Perceptions of Care-18 questionnaire) collected at discharge
3. Serious incidents involving deliberate self-harm and violence towards others. Routinely collected, will be measured every six months during a two-year follow-up period
4. Satisfaction of the resolution team (institutional questionnaire and focus group) questionnaire collected in summer 2018, focus group after the end of qualitative study

Completion date

10/05/2019

Eligibility

Key inclusion criteria

1. Patients aged 18 to 65
2. Living in two districts of Southern Switzerland ("Bellinzona e Valli" versus "Lugano")
3. Diagnosis of acute mental illness requiring hospital admission to the CPC from January 2017
4. Eligible for home treatment input according to a given operational definition of crisis

Participant type(s)

Patient

Healthy volunteers allowed

No

Age group

Adult

Lower age limit

18 years

Sex

All

Total final enrolment

237

Key exclusion criteria

1. Highly suicidal patients
2. Patients with alcohol or drug problems [F10–F19]
3. Compulsory admission of a patient

Date of first enrolment

01/01/2017

Date of final enrolment

31/05/2019

Locations**Countries of recruitment**

Switzerland

Study participating centre**Clinica Psichiatrica Cantonale**

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6850 Mendrisio

Switzerland

6850

Sponsor information**Organisation**

Swiss National Science Foundation

ROR

<https://ror.org/00yjd3n13>

Funder(s)**Funder type**

Research organisation

Funder Name

Schweizerischer Nationalfonds zur Förderung der Wissenschaftlichen Forschung

Alternative Name(s)

Schweizerischer Nationalfonds, Swiss National Science Foundation, Fonds National Suisse de la Recherche Scientifique, Fondo Nazionale Svizzero per la Ricerca Scientifica, Fonds National Suisse, Fondo Nazionale Svizzero, Schweizerische Nationalfonds, The Swiss National Science Foundation (SNSF), SNF, SNSF, FNS

Funding Body Type

Private sector organisation

Funding Body Subtype

Trusts, charities, foundations (both public and private)

Location

Switzerland

Results and Publications

Individual participant data (IPD) sharing plan

All data generated or analysed 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		17/06/2022	20/06/2022	Yes	No
Protocol article		09/11/2021	10/11/2021	Yes	No
Participant information sheet	version v1	25/10/2018	02/12/2020	No	Yes
Participant information sheet	version v3.6	13/03/2017	02/12/2020	No	Yes
Participant information sheet	Participant information sheet	11/11/2025	11/11/2025	No	Yes
Preprint results		19/11/2021	14/03/2022	No	No