Preparing a telephone survey for use in the next flu pandemic (Flu TElephone Survey Template - Flu TEST)

Submission date	Recruitment status No longer recruiting	[X] Prospectively re	
06/09/2012		[] Protocol	
Registration date	Overall study status Completed	Statistical analys	
10/09/2012		[X] Results	
Last Edited 10/03/2016	Condition category Infections and Infestations	[_] Individual partici	

Plain English summary of protocol

Background and study aims:

During the swine flu pandemic in 2009/10, the British Government used a large advertising campaign to ask members of the public to do several different things to help reduce the spread of illness. These included washing hands more often, taking medicines such as Tamiflu if ill and, for some people, being vaccinated. To check how many people were doing these things and what impact their adverts were having, the Government and academic researchers conducted several telephone surveys during the pandemic. These surveys were very useful. However, because they had to be put together quickly, there was room for improvement in the questions that were asked. In this research, we will spend some time before the next pandemic thinking about what guestions to ask in future surveys and checking that the guestions make sense to members of the public.

We will be conducting two, linked, studies. In the first, we will use a series of interviews with volunteers from the public to test out the wording for our new questions and check that they are clear and unambiguous. In the second, we will ask a professional market research company to conduct a telephone survey with randomly selected members of the public, to test whether our questions work during a normal flu season. By surveying the same members of the public at two time points, one week apart, we will be able to tell whether our questions result in the same answers when they are repeated. This is a good test of whether a particular question works properly.

Who can participate?

Anyone can participate in either study if they aged 18 or over and speak English fluently. People will also be able to complete our survey study in Welsh, if they prefer.

What does the study involve?

The interview study involves taking part in one interview that will last around one hour. This will be done over the telephone. During the interview, we will read out the questions that we have written for our new survey. The participant will answer the questions and also to explain why they have given that particular answer. For example, if we ask How worried are you about catching flu on a scale of 1 (not at all) to 5 (very worried), we would like to know where the

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participant puts themselves on that scale and also why. Sometimes, we will also ask a participant to repeat a question back to us, but in their own words. We will do this to check whether the question makes sense to them. We would also like participants to tell us if they spot any problems with a question, such as a piece of jargon that people might not understand or a question that seems vague or difficult to answer. Any feedback on the questions will be very welcome.

In the survey study, the market research company will use a process called random digit dialling to randomly select telephone numbers to call. People who answer the telephone will be asked if they are willing to take part in a survey concerning flu. If they are happy to proceed, they will be asked to answer our new questions about flu. They will then be called back one week later and asked to answer the same questions again. Each interview will take about 15 minutes to complete.

What are the possible benefits and risks of participating?

There are no major benefits or risks associated with taking part in either study. Because taking part in our cognitive interviews may be lengthy (around an hour), we will give participants in that study £20 as a thank you.

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

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

The study will start recruiting participants for the interviews on 1 October 2012. The interviews will take place over the space of two months. The telephone surveys will be run during January and February 2013.

Who is funding the study? National Institute for Health Research (UK)

Who is the main contact? G James Rubin gideon.rubin@kcl.ac.uk

Contact information

Type(s) Scientific

Contact name Dr James Rubin

Contact details

King's College London Department of Psychlogical Medicine Weston Education Centre Cutcombe Road London United Kingdom SE3 7QH

Additional identifiers

EudraCT/CTIS number

IRAS number

ClinicalTrials.gov number

Secondary identifying numbers 11/46/21

Study information

Scientific Title

Evaluating and improving communication with the public during a pandemic, using rapid turnaround telephone surveys

Acronym

FluTEST

Study objectives

1. To select outcome measures for a new telephone survey that will allow researchers and policy makers to track the uptake of key behavioural recommendations among the general public during a future influenza pandemic

2. To select predictor variables for these outcomes that are well-grounded in psychological theory and are amenable to change using a multimedia communications campaign

3. To test and refine the clarity and reliability of the outcome and predictor variables during a normal influenza season

4. To test the feasibility of using a sampling strategy for the telephone survey that incorporates a prospective design

More details can be found at http://www.hta.ac.uk/project/2889.asp

Ethics approval required

Old ethics approval format

Ethics approval(s)

King's College London Psychiatry, Nursing and Midwifery Research Ethics Committee, 25 July 2012, ref: PNM/11/12-139

Study design

Cognitive interviews to test questionnaire wording, and one cross-sectional telephone survey of the general public, using random digit dial, followed by a one-week follow-up of the same sample.

Primary study design Observational

Secondary study design

Cross-section survey

Study setting(s) Hospital

Study type(s) Screening

Participant information sheet

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

Health condition(s) or problem(s) studied

Influenza

Interventions

Cognitive Interviews: Up to three rounds of cognitive interviews will be used to test our newly developed items for their comprehensibility, face validity and usability in the context of a telephone interview. Participants will be asked to take part in a telephone interview. They will be read each item in turn, asked to provide their answer and asked to explain the reasoning behind their response. Where required, they will also be asked to explain what they believe the question is asking and / or to suggest an alternative wording for the question. This process will allow us to assess the comprehensibility and usability of the questions. By assessing whether participant perceptions of the meaning of items matches our own interpretation of them, we will also be able to assess the face validity of the items. Items which are identified as being difficult to understand or answer will be reworded. These revisions will then be tested in the next round of interviews.

Telephone surveys: After we have produced a list of useable predictor and outcome variable items, we will test these further in a telephone survey of a representative sample of the general population of Britain, with a follow-up survey of the same sample occurring seven days later. We will use the first survey to assess the factor structure and internal consistency of any scales and to produce baseline data for eventual comparison against data collected during a pandemic. We will use the follow-up survey to assess the test-retest reliability of our items and scales, and to assess the possible non-response bias associated with a follow-up survey in this context. The first survey will be conducted during a normal flu season and will use random digit dialling and proportional quota sampling, with quotas based on the most recent Census data for age, gender, geographical region and social grade.

Intervention Type

Other

Phase Not Applicable

Primary outcome measure

Our primary outcomes are the reliability and validity of our new questionnaire measures. We will use exploratory factor analysis to assess the clustering of those items that we intend to use as scales using data derived from the first survey. Internal reliability of scales will be tested using Cronbachs alphas, item-total correlations and inter-item correlations. Test-retest reliability will be calculated using intra-class coefficients and weighted Kappa coefficients.

Secondary outcome measures

We will assess predictors of non-response for our follow-up survey

Overall study start date 01/10/2012

Completion date 01/03/2013

Eligibility

Key inclusion criteria

- 1. Participants must be aged 18 or over and able to speak English.
- 2. Participants will also be able to complete our telephone survey in Welsh, if they prefer.

Participant type(s) Patient

Age group Adult

Lower age limit 18 Years

Sex Both

Target number of participants Cognitive interviews: 30 to 90 participants. Telephone survey: 1,067

Key exclusion criteria Does not meet inclusion criteria

Date of first enrolment 01/10/2012

Date of final enrolment 01/03/2013

Locations

Countries of recruitment England

United Kingdom

Study participating centre

King's College London London United Kingdom SE3 7QH

Sponsor information

Organisation King's College London (UK)

Sponsor details Strand London England United Kingdom WC2R 2LS

Sponsor type University/education

Website http://www.kcl.ac.uk/

ROR https://ror.org/0220mzb33

Funder(s)

Funder type Government

Funder Name NIHR Health Technology Assessment Programme - HTA (UK) ref: 11/46/21

Results and Publications

Publication and dissemination plan Not provided at time of registration

Intention to publish date

Individual participant data (IPD) sharing plan

IPD sharing plan summary Not provided at time of registration

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
<u>Results article</u>	results	01/11/2014		Yes	No