Evaluation of a critical care discharge information pack

Submission date	Recruitment status	Prospectively registered
20/10/2011	No longer recruiting	∐ Protocol
Registration date	Overall study status	Statistical analysis plan
20/10/2011	Completed	[X] Results
Last Edited	Condition category	Individual participant data
30/11/2015	Mental and Behavioural Disorders	

Plain English summary of protocol

Background and study aims

Discharge from critical care (intensive/high dependency care) can cause high levels of anxiety in patients and their family members. Effective information can help reduce this anxiety, but the best way to provide this is currently unclear. This study investigates whether a discharge information pack called UCCDIP can, in comparison to ad-hoc verbal information and/or a standard discharge information booklet, improve the critical care discharge experience and reduce levels of anxiety and depression on the ward.

UCCDIP (User Centred Critical Care Discharge Information Pack) consists of:

- 1. A 'lay' patient discharge summary
- 2. Separate sections for core patient and relative information
- 3. Prompts for patients/families to identify and record individual needs and questions
- 4. Opportunities for reflection
- 5. A list of support resources

Who can participate?

Adult patients 18 years and over (and a nominated family member) who have spent over 72 hours in a critical care unit and are ready for discharge to a general ward can participate if:

- 1. They are able to speak, read and understand English.
- 2. They are for discharge to a ward within King's College Hospital
- 3. They are medically discharged from critical care Monday-Friday between 08.00-22.00hrs All those taking part are required to provide informed written consent

What does the study involve?

Verbal or written information about going to the ward will be given by the bedside nurse in critical care. One week after discharge to a ward and again at hospital discharge, patients and family members will be asked to complete questionnaires, which assess their levels of anxiety, depression and coping, and ask about their discharge experience.

What are the possible benefits and risks of participating?

There are no known risks to participants. All participants will receive some form of information about discharge to a general ward, which may reduce their anxiety. Those in the intervention group will additionally receive personalised information, which is expected to enhance recovery.

Where is the study run from?

This is a single centre study taking part at King's College Hospital NHS Foundation Trust, London.

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

This study started recruiting on 8th August 2011. Recruitment will continue for 6 months or until at least 150 patients have participated.

Who is funding the study?

National Institute of Healthcare Research (NIHR) Research for Patient Benefit (RfPB).

Who is the main contact?
Suzanne Bench (study co-ordinator)
suzanne.bench@kcl.ac.uk

Contact information

Type(s)

Scientific

Contact name

Mrs Suzanne Bench

Contact details

Florence Nightingale School of Nursing and Midwifery School of Medicine King's College London James Clerk Maxwell Building 57 Waterloo Road London United Kingdom SE1 8WA

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suzanne.bench@kcl.ac.uk

Additional identifiers

EudraCT/CTIS number

IRAS number

ClinicalTrials.gov number

Secondary identifying numbers 10091

Study information

Scientific Title

A user centred critical care discharge information pack (UCCDIP) for adult critical care patients and their families at the point of discharge from critical care to the ward: an evaluation of feasibility and effectiveness.

Acronym

UCCDIP

Study objectives

This single centre pragmatic cluster randomised controlled trial (RCT) evaluates the feasibility and effectiveness of a 'user centred critical care discharge information pack' (UCCDIP) designed to help patients better understand their experience and progress, enhance coping and improve psychological well-being of both patients and relatives in the early recovery period.

On 09/05/2012 the overall trial end date was changed from 29/02/2012 to 19/11/2012.

Ethics approval required

Old ethics approval format

Ethics approval(s)

National Research Ethics Service Committee London - Queens Square, 23/12/2010, ref: 10/H0716 /75

Study design

Prevention, process of care, interventional, randomised trial

Primary study design

Interventional

Secondary study design

Cluster randomised trial

Study setting(s)

Hospital

Study type(s)

Prevention

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

Generic Health Relevance, Disease: Critical Care

Interventions

- 1. Intervention group: receive UCCDIP prior to discharge from critical care, delivered by bedside
- 2. Control group: receive ad-hoc verbal information from the bedside nurse about discharge to the ward
- 3. Attention control group: receive an information booklet produced by icuSteps, which includes

information about discharge to the ward and ongoing recovery, given to them by the bedside nurse.

All participants will be followed up until hospital discharge.

Intervention Type

Other

Phase

Not Applicable

Primary outcome measure

Patient hospital anxiety and depression measured one week after critical care discharge and hospital discharge or after 28 days

Secondary outcome measures

- 1. Feasibility measured after end of trial period
- 2. Patient and relative coping measured one week post critical care discharge and hospital discharge or after 28 days
- 3. Patient enablement measured one week post critical care discharge and hospital discharge or after 28 days
- 4. Relative anxiety and depression measured one week after patient critical care discharge and hospital discharge or after 28 days
- 5. User experience measured at hospital discharge

Overall study start date

08/08/2011

Completion date

19/11/2012

Eligibility

Key inclusion criteria

- 1. Adult patients and family members/carers, more than 18 years of age
- 2. Elective or emergency admissions who have been in critical care (intensive or high dependency care) for at least 72 hours
- 3. Critical care patients identified for discharge to a general ward setting
- 4. Elective discharges between the hours of 0800-2200
- 5. All critical care and ward nurses (from wards who have received patients discharged from critical care during the study period) will also be invited to participate in part of the study 6. Male and female participants

Participant type(s)

Patient

Age group

Adult

Lower age limit

18 Years

Sex

Both

Target number of participants

Planned Sample Size: 200; UK Sample Size: 200; Description: Three groups, each with a minimum of 50 participants

Key exclusion criteria

- 1. Patients for whom active treatment has been withdrawn
- 2. Inability to communicate verbally in or read English
- 3. Involvement in the phase I focus group study

Date of first enrolment

08/08/2011

Date of final enrolment

08/02/2012

Locations

Countries of recruitment

England

United Kingdom

Study participating centre

Florence Nightingale School of Nursing and Midwifery

London United Kingdom SE1 8WA

Sponsor information

Organisation

King's College London (UK)

Sponsor details

The Florence Nightingale School of Nursing and Midwifery James Clerk Maxwell Building 57 Waterloo Road London England United Kingdom SE1 8WA

Sponsor type

University/education

Website

http://www.kcl.ac.uk/nursing/index.aspx

ROR

https://ror.org/0220mzb33

Funder(s)

Funder type

Government

Funder Name

National Institute for Health Research (NIHR) UK PB-PG-0110-21026

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

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?

Results article results 27/11/2015 Yes

No