

Remote drug and alcohol services evaluation during COVID-19 in Leeds

Submission date 26/08/2021	Recruitment status No longer recruiting	<input type="checkbox"/> Prospectively registered
		<input checked="" type="checkbox"/> Protocol
Registration date 09/09/2021	Overall study status Completed	<input type="checkbox"/> Statistical analysis plan
		<input type="checkbox"/> Results
Last Edited 12/07/2024	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

The COVID-19 pandemic meant that there needed to be substantial changes to the delivery of drug and alcohol support services across Leeds. This included stopping, or significantly reducing, face-to-face support services, and a move to remote delivery of key drug and alcohol support services. Remote service delivery means delivering services mostly over the phone or using technology such as smartphone apps, video chats or instant messaging, rather than face-to-face. Before COVID-19, face-to-face delivery had been a core part of many of the drug and alcohol support services. Although there has been disruption to the usual way of delivering support services, there is some evidence that aspects of remote delivery have been experienced positively by some drug and alcohol support staff and some service users. The aim of this study is to understand the impact of COVID-19 on the drug and alcohol services in Leeds, and the changes that staff and service users experienced, in order to come to an informed decision about how best to design services in the future.

Who can participate?

Staff and service users from Forward Leeds, aged 18 years and over

What does the study involve?

Participants share their experiences of services during the pandemic in one-to-one interviews, group discussions, text messaging and email conversations with service users plus creative case studies creation with staff who work with on-street sex workers. Anonymised existing service data gathered as standard by drug and alcohol services between March 2019 and March 2021 is also used.

What are the possible benefits and risks of participating?

Service users have been involved throughout the design of this project, adding their insight to help the researchers answer the questions important to them in an accessible way. They will also help with understanding the results of this evaluation and sharing them. The local authority which commissions drug and alcohol services, the service providers and those who engage in service use will all benefit from this research, as the knowledge produced will provide an understanding of how drug and alcohol support services can best be designed, drawing on lessons learnt during the COVID-19 pandemic. There will also be important lessons for the

effective remote delivery of the support service in sectors beyond drug and alcohol support. It is possible that staff or service users may become distressed or upset when talking about difficult experiences they have had during the pandemic. Staff have a clear protocol to follow to support anyone if this happens. There are no other risks of participating.

When is the study starting and how long is it expected to run for?
September 2020 to February 2022

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

Who is the main contact?
Prof. Katherine Brown
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Contact information

Type(s)
Scientific

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Additional identifiers

Clinical Trials Information System (CTIS)
Nil known

ClinicalTrials.gov (NCT)
Nil known

Protocol serial number
NIHR131537, NIHR133206

Study information

Scientific Title

Central Public Health Interventions Responsive Studies Team (PHIRST): Evaluation of the move to remote models of service delivery by drug and alcohol services in Leeds during the COVID-19 pandemic (Leeds COVID-19 DASE Project)

Acronym

Leeds COVID DASE

Study objectives

To understand the impact that the required changes to drug and alcohol services in Leeds due to COVID-19 had on services, staff and service users in order to inform the optimised design of services in the future.

Ethics approval required

Old ethics approval format

Ethics approval(s)

Workstream 2 Approved 07/01/2021, University of Hertfordshire, Health, Science, Engineering and Technology Ethics Committee with Delegated Authority (Hatfield, AL10 9AB, UK; +44 (0) 1707 286 006; hsetecda@herts.ac.uk), ref: HSK/SF/UH/04423

Workstream 3 Approved 20/04/2021, University of Hertfordshire, Health, Science, Engineering and Technology Ethics Committee with Delegated Authority (Hatfield, AL10 9AB, UK; +44 (0) 1707 286 006; hsetecda@herts.ac.uk), ref: HSK/SF/UH/04535

Study design

Single-centre mixed-methods retrospective longitudinal cohort study

Primary study design

Observational

Study type(s)

Treatment

Health condition(s) or problem(s) studied

Substance misuse

Interventions

The researchers are using quantitative data collected as standard by drug and alcohol services in Leeds. They are comparing the 12 months pre-pandemic to the 12 months from when the pandemic hit and brought about a change to service delivery. They are also recruiting staff and service users to participate in qualitative data collection methods. The 'intervention' is changes to service delivery for those accessing drug and or alcohol support services. This includes but is not limited to receiving one-to-one support and/or group therapy by phone and/or video conferencing facilities instead of face-to-face, changes to the way prescriptions were accessed and taken, reduction in recovery support services.

Intervention Type

Behavioural

Primary outcome(s)

Substance use measured using the Treatment Outcomes Profile (TOP) at entry into service, 6 monthly intervals where relevant and at exit from service

Key secondary outcome(s)

1. Physical health measured using the Treatment Outcomes Profile (TOP) at entry into service, 6 monthly intervals where relevant and at exit from service
2. Psychological wellbeing measured using the Treatment Outcomes Profile (TOP) at entry into service, 6 monthly intervals where relevant and at exit from service
3. Quality of life measured using the Treatment Outcomes Profile (TOP) at entry into service, 6 monthly intervals where relevant and at exit from service
4. Meaningful activity including education, work and/or volunteering measured using the Treatment Outcomes Profile (TOP) at entry into service, 6 monthly intervals where relevant and at exit from service

Completion date

28/02/2022

Eligibility

Key inclusion criteria

Adults aged 18 years and over who are either:

1. Staff involved in managing and delivering drug and alcohol services or supporting service users to access these services in Leeds before and during the COVID-19 pandemic, or
2. Drug and alcohol service users who experienced service delivery before and during the COVID-19 pandemic

Participant type(s)

Mixed

Healthy volunteers allowed

No

Age group

Adult

Lower age limit

18 years

Sex

All

Key exclusion criteria

1. Service users aged under 18 years
2. Service users who are clearly under the influence of alcohol or drugs when they attend a data collection event may be asked to re-schedule their involvement

Date of first enrolment

01/02/2021

Date of final enrolment

30/11/2021

Locations

Countries of recruitment

United Kingdom

England

Study participating centre

Forward Leeds

74 Kirkgate

Leeds

United Kingdom

LS2 7DJ

Sponsor information

Organisation

University of Hertfordshire

ROR

<https://ror.org/0267vjk41>

Funder(s)

Funder type

Government

Funder Name

National Institute for Health 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

Individual participant data (IPD) sharing plan

The quantitative dataset will be provided by the service organisation in Leeds and they do not want this data to be made publicly available as it has some commercial sensitivity for them. The anonymised data will be held securely by the Central PHIRST at the University of Hertfordshire but must be deleted by 30/06/2025 according to the data-sharing agreement.

IPD sharing plan summary

Not expected to be made available

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Participant information sheet			09/09/2021	No	Yes
Protocol file	version 3.0	07/06/2021	09/09/2021	No	No
Study website	Contains all study outputs available		12/07/2024	No	No
Study website	Study website	11/11/2025	11/11/2025	No	Yes