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Does the introduction of discrepancy meetings in an Accident and Emergency Department reduce the number of missed injuries by Accident and Emergency clinicians?

Submission date	Recruitment status	[ ] Prospectively registered
29/09/2006	No longer recruiting	[ ] Protocol
Registration date	**Overall study status**	[ ] Statistical analysis plan
29/09/2006	Completed	[ ] Results
Last Edited	**Condition category**	[ ] Individual participant data
30/09/2014	Injury, Occupational Diseases, Poisoning	[ ] Record updated in last year

Plain English summary of protocol
Not provided at time of registration

Contact information

Type(s)
Scientific

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Additional identifiers

EudraCT/CTIS number

IRAS number

ClinicalTrials.gov number

Secondary identifying numbers

N0672168538

Study information

Scientific Title

Study objectives
Do the discrepancy meetings in the Accident and Emergency Departments reduce the number of missed injuries of the referring clinicians?

Ethics approval required
Old ethics approval format

Ethics approval(s)
Not provided at time of registration

Study design
Interventional study with a pre-test and post-test quasi-experimental group design

Primary study design
Interventional

Secondary study design
Randomised controlled trial

Study setting(s)
Hospital

Study type(s)
Prevention

Participant information sheet

Health condition(s) or problem(s) studied
Missed injuries by Accident and Emergency clinicians

Interventions
The method used will be an interventional study with a pre-test and post-test quasi-experimental group design. The word 'quasi' means as if or almost, so a quasi-experiment means almost a true experiment. For various reasons to do with ethics, small numbers and the difficulties of randomising, true experimental designs are not always possible in the 'real world' of social and health service provision. Therefore, in a clinical and educational context quasi-experiments have thus proved useful. Quasi-experimental designs have some of the properties of true experiments and they are relatively strong in terms of internal validity. Matching instead of randomisation of the groups is used. For the purpose of this study the two groups are matched as two groups of accident and emergency referrers. The pre-test group is not technically a control group, but a comparison group, and this type of matching is sometimes

called a non-equivalent group design. Inferences about relationships among variables are made from an assumed variation of an independent variable, in this case in introduction of discrepancy meetings.

Intervention Type
Other

Phase
Not Applicable

Primary outcome measure
That the introduction of discrepancy meetings in the A&E Department reduces the number of missed injuries by A&E clinicians

Secondary outcome measures
Not provided at time of registration

Overall study start date
05/09/2005

Completion date
11/11/2005

Eligibility

Key inclusion criteria
It is predicted that the likely total will be approximately 1300. The first examinations will then be selected for inclusion in the study.

Participant type(s)
Patient

Age group
Not Specified

Sex
Not Specified

Target number of participants
1,300

Key exclusion criteria
Not provided at time of registration

Date of first enrolment
05/09/2005

Date of final enrolment
11/11/2005

Locations

Countries of recruitment
England

United Kingdom

Study participating centre
Scunthorpe General Hospital
Scunthorpe
United Kingdom
DN15 7BH

Sponsor information

Organisation
Record Provided by the NHSTCT Register - 2006 Update - Department of Health

Sponsor details
The Department of Health, Richmond House, 79 Whitehall
London
United Kingdom
SW1A 2NL
+44 (0)20 7307 2622
dhmail@doh.gsi.org.uk

Sponsor type
Government

Website
http://www.dh.gov.uk/Home/fs/en

Funder(s)

Funder type
Government

Funder Name
Northern Lincolnshire and Goole Hospitals NHS Trust (UK)

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