

Patient involvement in improving the evidence base on inpatient care: changing service configuration - the 'triage' model

Submission date 10/06/2008	Recruitment status No longer recruiting	<input checked="" type="checkbox"/> Prospectively registered
Registration date 24/07/2008	Overall study status Completed	<input type="checkbox"/> Protocol
Last Edited 19/06/2017	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
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

N/A

Study information

Scientific Title

Patient involvement in improving the evidence base on inpatient care: changing service configuration - the 'triage' model

Study objectives

The aims of this study are to:

1. Explore the effects of different models of triage in terms of their effects on bed use and costs
2. Explore the perceived benefits and costs viewed by service users and staff
3. Identify factors that might guide the development of the most effective and sustainable triage model

Ethics approval required

Old ethics approval format

Ethics approval(s)

Bexley and Greenwich NHS Research Ethics Committee, 27/11/2007, ref: 07/H0809/49

Study design

Multicentre comparison of two psychiatric inpatient models

Primary study design

Interventional

Secondary study design

Randomised controlled trial

Study setting(s)

Hospital

Study type(s)

Treatment

Participant information sheet

Not available in web format, please email emese.csipke@iop.kcl.ac.uk to request a patient information sheet

Health condition(s) or problem(s) studied

Acutely mentally ill patients

Interventions

A comparison of outcomes for staff/patients in these two models of inpatient 'triage':

Model 1:

It is a separate ward accepting all inpatient admissions for a maximum of seven days.

Stabilisation takes place over three days, the home treatment team is consulted at days three and four and a decision to admit to longer term care or home treatment is made with a resulting discharge or transfer by day seven. This service has a dedicated 'triage' consultant.

Model 2:

This consists of a triage system in every ward involving a management round with senior medical input on a daily basis. The home treatment team is managed separately but will liaise with teams in each ward.

Intervention Type

Other

Phase

Not Specified

Primary outcome measure

1. User perceptions of inpatient services (currently being developed)
2. Staff perceptions of inpatient services (currently being developed)
3. Clinical service outcomes:
 - 3.1. Readmission rates
 - 3.2. Length of stay and mental health act detention

To be assessed at baseline, month 6, month 12 and month 18.

Secondary outcome measures

1. Client Service Receipt Inventory for Inpatient Care (CSRI-I): to provide details of services which will be linked to costs
2. Nursing care data: frequency of 1:1 nursing, use of agency staff
3. Ward Atmosphere Scale
4. Maslach Burnout Inventory to measure burn out and positive attributes of the work place
5. Routine incident reporting from electronic records
6. Service level data: number of admissions, length of stay, bed occupancy etc.
7. Staff movement: measured as length of stay, number of new staff and their ward origin

To be assessed at baseline, month 6, month 12 and month 18.

Overall study start date

01/11/2008

Completion date

31/10/2012

Eligibility

Key inclusion criteria

All adult psychiatric inpatients aged between 18 and 65 years, either sex

Participant type(s)

Patient

Age group

Adult

Lower age limit

18 Years

Sex

Both

Target number of participants

400

Key exclusion criteria

No exclusion criteria

Date of first enrolment

01/11/2008

Date of final enrolment

31/10/2012

Locations

Countries of recruitment

England

United Kingdom

Study participating centre

Institute of Psychiatry, King's College London

London

United Kingdom

SE5 8AF

Sponsor information

Organisation

Institute of Psychiatry, King's College London (UK)

Sponsor details

De Crespigny Park

London

England

United Kingdom

SE5 8AF

Sponsor type

University/education

Website

<http://www.iop.kcl.ac.uk/>

ROR

<https://ror.org/0220mzb33>

Funder(s)

Funder type

Government

Funder Name

Programme Grants for Applied Research (ref: RP-PG-0606-1050)

Alternative Name(s)

NIHR Programme Grants for Applied Research, PGfAR

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	01/06/2014		Yes	No

