Nurse Practitioner Service to nursing and residential home patients.

Submission date Recruitment status Prospectively registered 23/01/2004 No longer recruiting [] Protocol [] Statistical analysis plan Registration date Overall study status 23/01/2004 Completed [X] Results Individual participant data **Last Edited** Condition category 25/07/2011 Other

Plain English summary of protocol

Not provided at time of registration

Contact information

Type(s)

Scientific

Contact name

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Contact details

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Additional identifiers

EudraCT/CTIS number

IRAS number

ClinicalTrials.gov number

Secondary identifying numbers SPGS632

Study information

Scientific Title

Study objectives

Is it possible to improve the health of nursing and residential home older residents by the provision of a Nurse Practitioner Service?

Hypothesis 1. There will be a measurable gain in the health and the well-being of the patients in the study group.

Hypothesis 2. There will be a reduction in GP visits to the patients in the study group.

Hypothesis 3. There will be a reduction in hospital admissions.

Hypothesis 4. There will be a reduction in pharmaceutical interventions.

Hypothesis 5. Continuous monitoring and assessment by a Nurse Practitioner will prove to be a cost-effective service for this section of the population.

Ethics approval required

Old ethics approval format

Ethics approval(s)

Not provided at time of registration

Study design

Randomised controlled trial

Primary study design

Interventional

Secondary study design

Randomised controlled trial

Study setting(s)

Not specified

Study type(s)

Not Specified

Participant information sheet

Health condition(s) or problem(s) studied

Not applicable: Service delivery

Interventions

- 1. Nurse Practitioner Service regular fortnightly clinic in each of the 14 homes plus access to the Nurse Practitioner 9am-5pm weekdays, for any health concern or query from either patients or staff.
- 2. Standard care

The intervention was found to reduce the number of GP visits per patient by an average of 1.50 visits per person per year (95% CI 0.64 to 2.36). It was also found to reduce the number of district nurse visits by an average of 1.27 visits per patient per year (95% CI:0.02-2.52). Further analysis is required to determine cost-effectiveness.

Intervention Type

Other

Phase

Not Specified

Primary outcome measure

Not provided at time of registration

Secondary outcome measures

Not provided at time of registration

Overall study start date

01/11/1998

Completion date

01/11/2000

Eligibility

Key inclusion criteria

Residents of nursing or residential home within the catchment area.

Participant type(s)

Patient

Age group

Not Specified

Sex

Not Specified

Target number of participants

Not provided at time of registration

Key exclusion criteria

Not provided at time of registration

Date of first enrolment

01/11/1998

Date of final enrolment

01/11/2000

Locations

Countries of recruitment

England

United Kingdom

Study participating centre
Sussex Weald and Downs NHS Trust
Chichester
United Kingdom
PO19 4FX

Sponsor information

Organisation

NHS R&D Regional Programme Register - Department of Health (UK)

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.doh.gov.uk

Funder(s)

Funder type

Government

Funder Name

NHS Executive South East (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

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Results article	results			Yes	No