# Clinical decision making and outcome in routine care for people with severe mental illness

Submission date 11/08/2010	<b>Recruitment status</b> No longer recruiting	<ul> <li>Prospectively registered</li> <li>[X] Protocol</li> </ul>
<b>Registration date</b> 15/09/2010	<b>Overall study status</b> Completed	<ul> <li>Statistical analysis plan</li> <li>[X] Results</li> </ul>
Last Edited 25/01/2017	<b>Condition category</b> Mental and Behavioural Disorders	Individual participant data

# Plain English summary of protocol

Not provided at time of registration

#### Study website http://www.cedar-net.eu

# **Contact information**

**Type(s)** Scientific

**Contact name** Dr Bernd Puschner

## **Contact details**

Ulm University Department of Psychiatry II Ludwig-Heilmeyer-Str. 2 Günzburg Germany 89312 +49 (0)8221 962 866 bernd.puschner@bkh-guenzburg.de

# Additional identifiers

EudraCT/CTIS number

**IRAS number** 

ClinicalTrials.gov number

# Study information

## Scientific Title

Clinical decision making and outcome in routine care for people with severe mental illness: a multicentre observational longitudinal study

#### Acronym

CEDAR

## Study objectives

The main objective of this project is to develop a methodology to assess the scope and quality of clinical decisions in the care of people with severe mental illness (SMI) from both the patient and clinician perspective, and to specify how and to what degree clinical decision making (CDM) in routine care affects patient behaviour and short- and long-term treatment outcome.

The main study hypotheses are:

1. The quality of CDM is positively related to treatment outcome in the routine care of people with SMI

2. The quality of CDM can be adequately described by taking into account decision making styles, satisfaction with decision making, and type of decision making ("paternalistic" versus "shared" versus "informed")

3. Actual CDM in routine care depends on the context, i.e. varies for different kinds of decisions and is susceptible to change over time

4. The relation between quality of CDM and outcome is affected by a number of covariates

#### **Ethics approval required**

Old ethics approval format

#### Ethics approval(s)

Ulm University Ethics Commission, 15/12/2008, ref: 241/08

#### Study design

Multicentre observational longitudinal panel study

#### **Primary study design** Observational

Secondary study design

Cohort study

**Study setting(s)** Hospital

**Study type(s)** Diagnostic

Participant information sheet

Can be found at http://www.cedar-net.eu

## Health condition(s) or problem(s) studied

Severe mental illness

#### Interventions

Before the start of recruitment, specific instruments were developed to measure CDM style, key elements of CDM in routine care, as well as CDM involvement and satisfaction from patient and therapist perspectives. Together with established instruments to assess outcome, these are being put to use in the longitudinal study in order to examine the study hypothesis. Total duration of observation per subject is 12 months.

#### Intervention Type

Other

**Phase** Not Applicable

#### Primary outcome measure

Needs (Camberwell Assessment of Need Short Appraisal Schedule [CANSAS]), measured at timepoints t0 - t6

#### Secondary outcome measures

1. Quality of life (Manchester Short Assessment of Quality of Life [MANSA]), measured at timepoints t0 - t6

2. Service use (Client Sociodemographic and Service Receipt Inventory - European version [CSSRI]), measured at timepoints t0 and t6

3. Symptomatic impairment (Health of the Nation Outcome Scales [HoNOS] and Outcome Questionnaire [OQ-45]), measured at timepoints t0 and t6

#### Overall study start date

01/11/2009

#### **Completion date**

31/10/2011

# Eligibility

#### Key inclusion criteria

1. Adult, aged 18 - 60 years at intake, either sex

2. Main diagnoses mental disorder of any kind established by case notes or staff communication using Structured Clinical Interview for Diagnostic and Statistical Manual of Mental Disorders, 4th Edition (DSM-IV) (SCID) criteria

3. Presence of severe mental illness based upon validated criteria including symptom severity (Threshold Assessment Grid [TAG] greater than or equal to 5) and illness duration (greater than or equal to 2 years)

4. Expected contact with mental health services (excluding inpatient services) during the time of study participation

5. Sufficient command of the host country's language

6. Capable of giving informed consent

# Participant type(s)

Patient

#### **Age group** Adult

AUUIL

#### **Lower age limit** 18 Years

**Sex** Both

**Target number of participants** 560

## Key exclusion criteria

 Main diagnosis of mental retardation, dementia, substance use or organic brain disorder
 Cognitive impairment severe enough to make it impossible to give meaningful information on study instruments
 Treatment by forensic psychiatric services

Date of first enrolment 01/11/2009

Date of final enrolment 31/10/2011

# Locations

**Countries of recruitment** Denmark

Germany

Hungary

Italy

Switzerland

United Kingdom

**Study participating centre Ulm University** Günzburg Germany 89312

# Sponsor information

**Organisation** European Commission (Belgium)

#### **Sponsor details**

Research Directorate General Directorate F2 - Public Health CDMA 2/30 Brussels Belgium 1049

**Sponsor type** Government

Website http://cordis.europa.eu/fp7/health/

ROR https://ror.org/00k4n6c32

# Funder(s)

**Funder type** Government

**Funder Name** Seventh Framework Programme (HEALTH-2007-3.1-4) (ref: 223290)

# **Alternative Name(s)** EC Seventh Framework Programme, European Commission Seventh Framework Programme, EU Seventh Framework Programme, European Union Seventh Framework Programme, FP7

**Funding Body Type** Government organisation

Funding Body Subtype National government

Location

# **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?
Protocol article	protocol	10/11/2010		Yes	No
Results article	results	04/02/2013		Yes	No
Results article	results	01/02/2015		Yes	No
Results article	results	01/03/2015		Yes	No
Results article	results	01/05/2015		Yes	No
<u>Results article</u>	results	23/01/2017		Yes	No