

# Hospital at Home (HAH) for palliative care: an evaluation

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<b>Registration date</b> 23/01/2004	<b>Overall study status</b> Completed	<input type="checkbox"/> Statistical analysis plan <input checked="" type="checkbox"/> Results
<b>Last Edited</b> 21/12/2009	<b>Condition category</b> Other	<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**  
PSI10-19

# Study information

## Scientific Title

### Study objectives

To evaluate a Hospital at Home (HAH) service for palliative care. Research questions:

1. Compared to standard care
  - 1.1. Was quality of care better under HAH care?
  - 1.2. Were patients more likely to die at home under HAH care?
  - 1.3. Was pattern of other NHS service use different for patients under HAH care?
2. What were health professionals' views of HAH?
3. Did the characteristics and care pathways of HAH patients differ from that of other patients?
4. What were the support needs of patients with lung and colorectal cancer who were likely to become eligible for HAH support?

HAH is a service which offers up to 24 hour hands on nursing care in the home, under the medical supervision of the GP, for up to two weeks for adult terminal patients of all diagnoses. It also offers respite care for patients with cancer, MND and AIDS. Factors of interest were place of death, assessment of patient benefits and quality of care under HAH, characteristics and care pathways of patients referred to HAH.

### 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

Symptoms and general pathology: Pain

### Interventions

1. Individual Randomised Controlled Trial (RCT) of HAH care versus standard care
2. Survey of health professionals' views of HAH, based on pilot study semi-structured interviews

3. Record linkage of electronic data from Cancer Registry, primary and secondary care databases to assess:

3.1. Service use under HAH care versus standard care (incorporated into RCT)

3.2. The characteristics and care pathways of patients referred to HAH versus those not referred

4. Prospective, longitudinal study of colorectal and lung cancer patients eligible for HAH care, and their family carers, beginning when patient care switched from curative to palliative according to hospital

## **Intervention Type**

Other

## **Phase**

Not Specified

## **Primary outcome measure**

1. Randomised controlled trial: place of death, rated symptom severity and adequacy of care, GP visits, care input from NHS primary and secondary care services during the last two weeks of life

2. Survey: ratings of the importance, benefits and disadvantages of HAH

3. Record linkage: demographic and clinical variables (age, sex, socio-economic status, survival, diagnosis, cause of death), service input variables (contact with oncology services, amount and start date of primary and secondary care NHS input in the last year of life)

4. Longitudinal study: prospective and retrospective expressed need and satisfaction with care, activities of daily living, contacts with health professionals, standard measures of health and quality of life (SF-36, EORTC QLQ-C30), and carer strain (CADI)

## **Secondary outcome measures**

Not provided at time of registration

## **Overall study start date**

01/04/1995

## **Completion date**

31/12/1999

# **Eligibility**

## **Key inclusion criteria**

1. 186 palliative care patients allocated to HAH and 43 palliative control patients. Comparison between HAH and standard care including both primary and secondary NHS input

2. Survey: 78 community nurses, 136 GPs. Assessment of community care only

3. Record linkage: 121 cancer patients referred to HAH, 206 cancer patients not referred to HAH. Both primary and secondary NHS input included

4. Longitudinal study: 54 lung cancer patients, 46 colorectal cancer patients. Both primary and secondary NHS input included.

## **Participant type(s)**

Patient

## **Age group**

Other

**Sex**

Both

**Target number of participants**

229

**Key exclusion criteria**

Does not match inclusion criteria

**Date of first enrolment**

01/04/1995

**Date of final enrolment**

31/12/1999

**Locations****Countries of recruitment**

England

United Kingdom

**Study participating centre**

HSRG, General practice and Primary Care Research Unit

Cambridge

United Kingdom

CB2 2SR

**Sponsor information****Organisation**

Record Provided by the NHS R&D 'Time-Limited' National Programme Register - Department of Health (UK)

**Sponsor details**

The Department of Health

Richmond House

79 Whitehall

London

United Kingdom

SW1A 2NL

**Sponsor type**

Government

**Website**

http://www.doh.gov.uk

## Funder(s)

**Funder type**

Government

**Funder Name**

NHS Primary and Secondary Care Interface National Research and Development Programme (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?
<a href="#">Results article</a>	results	04/12/1999		Yes	No