

Social Work Intervention following Self-Harm

Submission date 18/11/2013	Recruitment status No longer recruiting	<input checked="" type="checkbox"/> Prospectively registered
Registration date 29/01/2014	Overall study status Completed	<input checked="" type="checkbox"/> Protocol
Last Edited 18/12/2020	Condition category Mental and Behavioural Disorders	<input type="checkbox"/> Statistical analysis plan
		<input type="checkbox"/> Results
		<input type="checkbox"/> Individual participant data
		<input type="checkbox"/> Record updated in last year

Plain English summary of protocol

Background and study aims

The aim of the study is to investigate if a new social intervention can help people who have self-harmed (for example: taken an overdose of tablets) or may have thoughts of doing so.

Who can participate?

People who have been attending hospital following an episode of self-harm, or who have been referred by their GP to primary mental health care services because of self harm or thoughts of self harm.

What does the study involve?

Participants are randomly allocated to either receive the intervention or treatment as usual. Participants receiving the intervention have contact with a trained professional for 4-6 weeks. The help provided is basically a talking therapy, and participants are encouraged to engage with other services who can help them with social issues (for example with relationships or finances). The practitioner makes referrals where necessary and supports the person in contacting services where relevant. Both groups are assessed three times over three months to see if there is any difference between those who receive the intervention and those who do not.

What are the possible benefits and risks of participating?

We hope that the intervention will lead to fewer re-hospitalisations and improved quality of life. Participants will be paid £10 in high street vouchers after the first assessment and then at the end of the study when they have completed both the 4-week and 12-week assessments they will receive a further £20 in vouchers. The only risks are that the participants will already be in an emotional state and might find the help provided causes them some further upset; however, to help them to learn to cope with their life events this is an essential part of the process and the researchers working on this project are experienced mental health workers.

Where is the study run from?

Swansea University (UK)

When is the study starting and how long is it expected to run for?

January 2014 to May 2016

Who is funding the study?
National Institute for Social Care and Health Research (UK)

Who is the main contact?
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Scientific

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Additional identifiers

Protocol serial number
16229

Study information

Scientific Title

Social Work intervention following self-harm: a feasibility study for a replication of a successful intervention developed in Australia

Acronym

SWISH

Study objectives

Current hypothesis as of 02/02/2016:

A social intervention will produce better outcomes in depression and wellbeing than treatment as usual.

Previous hypothesis:

That the SWISH intervention produces better outcomes than treatment as usual.

Ethics approval required

Old ethics approval format

Ethics approval(s)

South West Wales Ethics Committee (Wales REC 6), 28/05/2014, ref: 14/WA/0074

Study design

Parallel randomised controlled trial

Primary study design

Interventional

Study type(s)

Treatment

Health condition(s) or problem(s) studied

Deliberate self-harm and/or suicidal ideation

Interventions

Current interventions as of 02/02/2016:

Participants are randomised to either receive the intervention or treatment as usual.

The intervention is a 4-6 week contact programme comprised of a mix of face to face and telephone contact. Patients are encouraged to discuss the circumstances that led to their presentation with the SWISH practitioner and identify social factors which can be addressed. The SWISH practitioner will help the patient engage with community services. SWISH is more than signposting, it assertively links individuals with existing support services. Additionally it keeps patients engaged with services as they wait for appointments which they may have been referred to as part of their treatment as usual.

Treatment as usual ranges from discharge with no further follow up; discharge to general practitioner; signposting to community services

Previous interventions:

Participants are allocated randomly to the SWISH intervention or treatment as usual. A research

worker will assess 60 eligible candidates at baseline, six weeks and three months. The intervention was developed in Australia, and consists of an individualised talking therapy and practical help. It has now been manualised and this will form the basis of our intervention.

Intervention Type

Other

Phase

Not Applicable

Primary outcome(s)

Current primary outcome measures as of 02/02/2016:

Symptoms of depression measured using Beck Depression Inventory. Measured at baseline, four weeks and three months.

Previous primary outcome measures:

Symptoms of depression measured using Beck Depression Inventory. Measured at baseline, six weeks and three months.

Key secondary outcome(s)

Current secondary outcome measures as of 02/02/2016:

1. Manchester Short Assessment of Quality of Life (MANSA)
2. Service contacts that the person has had in a defined period measured using Client Service Receipt Inventory (CSRI)

Measured at baseline, four weeks and three months.

Previous secondary outcome measures:

1. Manchester Short Assessment of Quality of Life (MANSA)
2. Service contacts that the person has had in a defined period measured using Client Service Receipt Inventory (CSRI)

Measured at baseline, six weeks and three months.

Completion date

31/05/2016

Eligibility

Key inclusion criteria

Current inclusion criteria as of 02/02/2016:

Person aged 18 or over who presents to Mental Health Services (either directly at hospital or indirectly through referral from General Practitioner to Local Primary Mental Health Support Services) with self-harm and/or suicidal ideation

Previous inclusion criteria:

1. Admitted with first episode of self-harm
2. No contact with psychiatric services in the last two years

Participant type(s)

Patient

Healthy volunteers allowed

No

Age group

Adult

Lower age limit

18 years

Sex

All

Key exclusion criteria

Current exclusion criteria as of 02/02/2016:

Anyone who, following a psychosocial assessment by a Mental Health Practitioner, is:

1. Unable to give informed consent
2. So unwell that they have to be admitted to a psychiatric bed
3. Requires secondary mental health services
4. Assessed as high risk for violence
5. Known or assessed to have a severe mental illness and require other services
6. Is under a current and active care treatment plan with Adult Mental Health Services
7. Is unable to communicate in English

Previous exclusion criteria:

1. Too unwell to participate according to direct care staff
2. Referred for psychiatric assessment or treatment
3. Unable to communicate in English or Welsh

Date of first enrolment

01/01/2015

Date of final enrolment

31/12/2015

Locations

Countries of recruitment

United Kingdom

Wales

Study participating centre

Glangwili General Hospital

Swansea

United Kingdom

SA31 2AF

Study participating centre

Prince Philip Hospital
United Kingdom
SA14 8QF

Sponsor information

Organisation

Swansea University (UK)

ROR

<https://ror.org/053fq8t95>

Funder(s)

Funder type

Research organisation

Funder Name

National Institute for Social Care and Health Research

Alternative Name(s)

Sefydliad Cenedlaethol ar Gyfer Ymchwil Gofal Cymdeithasol ac Lechyd, NISCHR

Funding Body Type

Government organisation

Funding Body Subtype

National government

Location

United Kingdom

Results and Publications

Individual participant data (IPD) sharing plan

IPD sharing plan summary

Available on request

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
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Protocol article	protocol	14/09/2016	Yes	No
HRA research summary			28/06/2023	No