# Can a targeted letter and leaflet sent to households living in areas with high rates of non-urgent A&E attendance reduce A&E attendance rates in these areas?

Submission date	Recruitment status	<ul><li>Prospectively registered</li></ul>		
18/03/2015	No longer recruiting	Protocol		
Registration date	Overall study status	Statistical analysis plan		
21/05/2015	Completed  Condition category	Results		
Last Edited		Individual participant data		
01/06/2018	Other	[] Record updated in last year		

## Plain English summary of protocol

Background and study aims

Emergency (A&E) Departments have been under particular pressure this winter. We know that there are many factors causing A&E pressure. One reason is the demand on A&E from patients with minor ailments that could have been treated elsewhere. An audit by the National Audit Office reports that one in five A&E attendances could have been treated by GPs or by other professionals outside of hospitals. This study aims to test whether a letter intervention can reduce demand on A&E by patients coming with minor problems that could be treated elsewhere. We are sending a letter and leaflet to households in Medway in areas where people use A&E much more than average. These areas tend to be closer to the hospital. We will look at whether the areas that are sent the letter have lower use of A&E for minor reasons, compared to similar areas that did not get sent the letters. We will look at the effect of the letters 1, 3 and 6 months after the letters are sent.

## Who can participate?

50,000 households with the highest use of A&E in Medway. These households are located in 73 target areas close to the hospital.

## What does the study involve?

The target areas will be divided into two groups: the intervention group (who are sent the letter) and the control group (who are not sent the letter). We will study the effect of the intervention by comparing the intervention and control areas. People living in the target areas will not know that they are joining the study. Letters will be sent on or around 4 April. The letter includes a leaflet and map giving information on all the local health services that can help with urgent medical problems.

What are the possible benefits and risks of participating?

The benefits of participating in this study include the fact that patients who receive the intervention letter and leaflet will be better informed about the many local healthcare options

available when they next have an urgent health problem. The results of the study will help improve the information and communication for patients about NHS services. We anticipate no risks to the people included in the study, either those receiving the letter (intervention group) or those who do not (control group). In the past, a range of letters that have intermittently been sent to local residents and no adverse events have resulted previously. The letter is a small part of a larger communications campaign run by the local NHS trying to reduce pressure on Medway Hospital's A&E. An ethics panel has looked at the study design and agreed that it is not necessary for patients to give consent to this study because of this.

Where is the study run from? Medway Foundation Trust (UK).

When is the study starting and how long is it expected to run for? From April 2015 to April 2016.

Who is funding the study? Department of Health (UK).

Who is the main contact? Ms Laura Freeman

# Contact information

# Type(s)

Public

#### Contact name

Ms Laura Freeman

#### **ORCID ID**

https://orcid.org/0000-0001-6212-7961

#### Contact details

Department of Health Richmond House 79 Whitehall London United Kingdom SW1A 2NS

# Additional identifiers

**Protocol serial number** N/A

# Study information

#### Scientific Title

Can a letter and leaflet sent to households in Medway neighbourhoods identified as having high A&E use for minor ailments reduce Category D (i.e. minor) A&E attendance rates in those areas?

## Acronym

Medway A&E - CCG letter

## **Study objectives**

A letter based on behavioural insights sent to areas with high baseline A&E attendance for non-urgent reasons can reduce attendance rates for non-urgent reasons in these areas.

## Ethics approval required

Old ethics approval format

## Ethics approval(s)

IRAS project ID 174817, REC number 15/WM/0119

## Study design

Single-centre interventional cluster randomised controlled trial

## Primary study design

Interventional

## Study type(s)

Other

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

Non-urgent attendance at A&E

#### **Interventions**

The treatment arm will receive a targeted letter and leaflet highlighting local alternatives to A&E which can be used in non-urgent situations. The control group will receive no letter or leaflet.

## Intervention Type

Other

# Primary outcome(s)

Attendance rates at Medway Maritime Hospital from the intervention neighbourhoods compared to the control neighbourhoods. Attendance rates for minor ailments (Category D as defined in our protocol) per capita at baseline, 1, 3 and 6 months after the letter is sent. Attendance rates are routinely available from the Hospital Episode Statistics data available to DH via HSCIC.

# Key secondary outcome(s))

Overall A&E attendance rates per capita at baseline, 1, 3 and 6 months after the letter is sent. This data is also available via HSCIC. Both primary and secondary outcomes will be analysed for any interaction with deprivation using postcodes as proxy.

# Completion date

04/04/2016

# **Eligibility**

## Key inclusion criteria

Live in a neighbourhood with high levels of non-urgent attendance at Medway Hospital A&E based on HES statistics

# Participant type(s)

All

# Healthy volunteers allowed

No

## Age group

All

## Sex

All

## Key exclusion criteria

Those not living in target neighbourhoods

## Date of first enrolment

02/03/2015

## Date of final enrolment

06/04/2015

# Locations

## Countries of recruitment

**United Kingdom** 

England

# Study participating centre Medway Foundation Trust (Medway Maritime Hospital)

Gillingham United Kingdom ME7 5NY

# Sponsor information

# Organisation

Department of Health

#### **ROR**

https://ror.org/03sbpja79

# Funder(s)

# Funder type

Government

## Funder Name

Department of Health (UK)

## Funder Name

Medway Clinical Commissioning Group

# **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?
HRA research summary			28/06/2023	No	No