

Impact of an hospital-based palliative care service in the community.

Submission date 23/01/2004	Recruitment status No longer recruiting	☐ Prospectively registered ☐ Protocol
Registration date 23/01/2004	Overall study status Completed	☐ Statistical analysis plan ☒ Results
Last Edited 14/12/2007	Condition category Signs and Symptoms	☐ 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

Protocol serial number
NCP/J01

Study information

Scientific Title

Study objectives

This project aims to evaluate the cost and effectiveness of an hospital based palliative care service on subsequent care of advanced cancer patients in the community, in terms of length of index hospital admission, and need for re-admission, quality of symptom control on discharge and at home, quality of life and functional status at home, patient and carer satisfaction, impact on general practitioner/district nurse workload, and eventual place of death. The effects of such a service on the professional satisfaction of the primary care team will also be assessed. The study will be a randomised controlled trial of two levels of intervention by the palliative care team in the United Bristol Healthcare Trust. Assessments will be undertaken both during the hospital admission and after discharge over a 5 month follow-up period or to death.

Ethics approval required

Old ethics approval format

Ethics approval(s)

Not provided at time of registration

Primary study design

Interventional

Study design

Randomised controlled trial

Study type(s)

Quality of life

Health condition(s) or problem(s) studied

Symptoms and general pathology: Pain

Interventions

1. The visiting service: (the usual service delivered by the Palliative Care Team.) Initial assessment by a specialist doctor/nurse with detailed advice about problems identified in patient's case notes. Follow-up by telephone and in-person consultations with patient, family and medical and nursing staff caring for patient. Liaison also with community-based health professions and palliative care outpatient follow-up if appropriate. Advice and support provided only but over and above the normal service provided to hospital patients.
2. The telephone service: A more limited form of intervention devised as the control. No direct contact between the Palliative Care Team and the patient or family. Telephone consultation took place within one working day of referral between a senior medical PCT member and the referring doctor and also between a clinical nurse specialist and a member of the ward nursing staff involved in the patient's care. A second telephone consultation could be made if necessary but with no further follow-up or advice offered.

Patients randomised to either the visiting service or the telephone service in order to compare: pain, symptom control and global health-related 'quality of life'; satisfaction of patients, carers and health professionals; and use of health service resources.

Intervention Type

Other

Phase

Not Specified

Primary outcome(s)

Not provided at time of registration

Key secondary outcome(s)

Not provided at time of registration

Completion date

31/12/2001

Eligibility

Key inclusion criteria

1. Patients 18 and over newly referred to PCT
2. Able to understand instructions and provide written consent within one day of referral
3. Physically and emotionally well enough to consider participating in a study and to reflect on their illness experience with a researcher
4. Not likely to be discharged with 24 hours of referral. PCT advice requested urgently
5. No strong preference expressed by the patient or patient's clinician for the visiting service of the PCT only
6. Aware of diagnosis
7. Willing to answer questions and be followed up for 4 weeks

Participant type(s)

Patient

Healthy volunteers allowed

No

Age group

Not Specified

Lower age limit

18 Years

Sex

Not Specified

Key exclusion criteria

Written consent not provided within one day of referral.

Date of first enrolment

01/01/2001

Date of final enrolment

31/12/2001

Locations

Countries of recruitment

United Kingdom

England

Study participating centre

Department of Palliative Medicine

Bristol

United Kingdom

BS2 8ED

Sponsor information

Organisation

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

Funder(s)

Funder type

Government

Funder Name

NHS Cancer National Research and Development Programme (UK)

Results and Publications

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	23/09/2002		Yes	No