

Evaluating a risk factor checklist and training video for GPs as a means of reducing practice variation in referral for glue ear.

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 21/12/2009	Condition category Ear, Nose and Throat	☐ 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
PSI B-6

Study information

Scientific Title

Study objectives

To evaluate the effect of a risk factor checklist and educational training video on glue ear for general practitioners in reducing practice variation and improving the appropriateness of referral to ENT.

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

Study type(s)

Other

Health condition(s) or problem(s) studied

Glue ear; otitis media

Interventions

Each practice was randomised to one of the following groups:

1. Control
2. Video only
3. Checklist only
4. Video and checklist.

Intervention Type

Other

Phase

Not Applicable

Primary outcome(s)

Overall mean GP and practice referral rates for OME or related conditions remained stable, simplifying the comparisons related to intervention. There was no reduction in variability amongst practices receiving any intervention, compared with practices receiving none. In those receiving both the video and checklist compared with those receiving only one or no intervention, there was a significant improvement in the quality of referrals, as given by more referrals having bilateral HL >20 dB when sent at ENT (ANCOVA for linear trend assuming 0, 1, 2 interventions and adjusting for the period the child waited to be seen at ENT; $p = 0.010$). No difference was found between the intervention and non-intervention groups in parent satisfaction scores. However, irrespective of intervention group, parents of children who received more information from their GP about glue ear had higher satisfaction scores than those that did not ($p = 0.022$). Disseminating information on glue ear to GPs in a multi-channel approach can improve the quality of referrals to ENT but appears to make little impact on the parent's satisfaction with the information provided by their GP. Much of the variation in GP glue

ear referrals and ENT consultants; VT insertion rates is still not accounted for, reducing the ability to produce suggestions on how best to compress it. This study provides a worthwhile basis for further large-scale work using such interventions, particularly when used in combination with one another, provided the appropriate outcome measures are used including the patient's perspective.

Key secondary outcome(s))

Not provided at time of registration

Completion date

01/05/1999

Eligibility

Key inclusion criteria

Fifty general practices from Trent Region and the West of Scotland were recruited into a cluster-randomised controlled trial.

Participant type(s)

Patient

Healthy volunteers allowed

No

Age group

Other

Sex

All

Key exclusion criteria

Does not match inclusion criteria

Date of first enrolment

01/02/1997

Date of final enrolment

01/05/1999

Locations

Countries of recruitment

United Kingdom

England

Study participating centre

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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 Primary and Secondary Care Interface 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	01/07/2001		Yes	No