

# Virtual Outreach: a randomised controlled trial and economic appraisal

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|----------------------------------------|---------------------------------------------------|---------------------------------------------------------------------------------------------------|
| <b>Submission date</b><br>09/01/2002   | <b>Recruitment status</b><br>No longer recruiting | <input type="checkbox"/> Prospectively registered<br><input checked="" type="checkbox"/> Protocol |
| <b>Registration date</b><br>09/01/2002 | <b>Overall study status</b><br>Completed          | <input type="checkbox"/> Statistical analysis plan<br><input checked="" type="checkbox"/> Results |
| <b>Last Edited</b><br>25/08/2009       | <b>Condition category</b><br>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

**Protocol serial number**  
HTA 96/02/05

## Study information

**Scientific Title**

## Study objectives

The project was designed to evaluate the feasibility of teleconferenced medical consultations (TMCs) at the interface between primary and secondary care. The key research objectives were:

1. To determine the views of specialists, GPs and patients about TMCs
2. To test the feasibility of TMCs
3. To determine which specialties are most suited to TMCs
4. To make plans for a randomised controlled trial of TMCs.

The key issues of interest related to the relative value of real time teleconferenced medical consultations (TMCs) as an alternative to routine outpatient referral. The study was designed to evaluate the potential of TMCs to improve patients' health and satisfaction, and to lead to more efficient usage of health service resources in terms of tests and investigations, procedures, operations and prescriptions. We were particularly interested to find out whether the joint consultations could reduce the number of outpatient and GP consultations following the index consultation. In addition, the study was designed to examine the educational and organisational impact of TMCs. The pilot study was carried out in order to test the feasibility of a full-scale trial. In particular we wished to find out whether we could recruit adequate numbers of patients, whether standard instruments could be used effectively to measure the key outcomes, and whether we would be able to measure the educational and organisational impact of introducing TMCs.

## 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)

Other

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

Teleconferenced medical consultations

## Interventions

Videoconference link (tele-consultation) versus routine hospital outpatients consultation

## Intervention Type

Other

## Phase

Not Applicable

## Primary outcome(s)

The following instruments were used in the trial:

1. A patient demographic and personal details questionnaire
2. S F12 generic measure of well-being

3. Ware Specific Visit Questionnaire (SVQ) for patient satisfaction
4. Speiberger Standing State Anxiety Inventory (STAI)
5. A patient cost questionnaire
6. Duke Severity of Illness questionnaire (DUSOI) to measure the co-morbidity or burden of illness
7. Protocol specifically designed to extract data for hospital and GP records

**Key secondary outcome(s)**

Not provided at time of registration.

**Completion date**

31/10/2001

## Eligibility

**Key inclusion criteria**

All patients referred by the participating general practitioners for a hospital specialist opinion in the following specialty areas: ENT medicine, general medicine (including endocrinology and rheumatology), gastroenterology, orthopaedics, neurology and urology

**Participant type(s)**

Patient

**Healthy volunteers allowed**

No

**Age group**

Not Specified

**Sex**

All

**Key exclusion criteria**

Not provided at time of registration.

**Date of first enrolment**

01/06/1998

**Date of final enrolment**

31/10/2001

## Locations

**Countries of recruitment**

United Kingdom

England

**Study participating centre**  
**Department of Primary Care and Population Sciences**  
London  
United Kingdom  
NW3 2PF

## Sponsor information

**Organisation**  
Department of Health (UK)

**ROR**  
<https://ror.org/03sbpja79>

## Funder(s)

**Funder type**  
Industry

**Funder Name**  
NIHR Health Technology Assessment Programme - HTA (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? |
|------------------------------------|----------------------------------------------------|--------------|------------|----------------|-----------------|
| <a href="#">Results article</a>    | main results                                       | 08/06/2002   |            | Yes            | No              |
| <a href="#">Results article</a>    | results                                            | 12/07/2003   |            | Yes            | No              |
| <a href="#">Protocol article</a>   | protocol                                           | 11/01/2002   |            | Yes            | No              |
| <a href="#">Other publications</a> | publication on design and performance of the trial | 11/01/2002   |            | Yes            | No              |
| <a href="#">Other</a>              | HTA monograph                                      |              |            |                |                 |

[publications](#)

01/12/2004

Yes

No