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Anticipatory care planning in primary care for people living at home or in a care home

Submission date
12/04/2022

Recruitment status
No longer recruiting

Registration date
13/04/2022

Overall study status
Completed

Last Edited
17/01/2025

Condition category
Other

[X] Prospectively registered
[_] Protocol
[_] Statistical analysis plan
[X] Results
[_] Individual participant data

Plain English summary of protocol
Background and study aims
This research looks at improving care planning in the community for people living at home or in a care home. It will help more people talk with professionals and make a personal care plan. 'What matters to me' is central to planning care and shared decision-making with people and their families. Care planning aims to help people get the right treatment and care in line with how they would like looked after. People with long-term health problems or a serious illness can get ill suddenly and need urgent care. Some may die from these conditions, or other illnesses including coronavirus. They often lack an up to date plan for complications or changes in their health and care. While the NHS and social care continue to deal with COVID-19 and try to maintain other health and care services, people-centred care planning really matters. Better ways to do personal care planning will have longer-term benefits too.

Who can participate?
Patients, care home residents, families and primary care teams in up to 24 GP practices in four Scottish Health Boards

What does the study involve?
This study looks at four actions needed for good care planning:
1. GP practice records are searched regularly to help primary care teams find people who could benefit from care planning, extra support, and in some cases - palliative care.
2. GP practice teams prioritise people and families with the greatest needs.
3. GPs, nurses or senior care home staff have individual care planning discussions with people at home or in a care home and/or those close to them.
4. Care plans agreed with the person (or proxy) and shared with health and care professionals in the community and hospitals via a secure electronic record system.

What are the possible benefits and risks of participating?
For the GP surgeries taking part, there is the benefit of additional tools and resources to assist them in conducting anticipatory care planning: a core part of their work. There are no discernible risks but there will be some administrative overhead. For patients, carers and professionals taking part in the interviews there are no direct, personal benefits or identifiable risks of taking part.

Where is the study run from?
The University of Edinburgh (UK)

When is the study starting and how long is it expected to run for?
November 2020 to November 2023

Who is funding the study?
Marie Curie (UK)

Who is the main contact?
Dr Kirsty Boyd
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Contact information

Type(s)
Principal investigator

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Type(s)
Scientific

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Additional identifiers

Integrated Research Application System (IRAS)
291779

Study information

Scientific Title
Implementation of an integrated care planning and electronic care coordination intervention in primary care for people living at home or in a care home at risk of deteriorating or dying: a mixed-method study across Scotland (4-ACP)

Acronym
4-ACP

Study objectives
The aim is to implement anticipatory care planning in the community provided by primary care teams for people living at home or in a care home across Scotland using the 4ACP process in a sample of GP surgeries in four diverse regions of Scotland.

Ethics approval required
Old ethics approval format

Ethics approval(s)
Approved 18/02/2022, South East Scotland Research Ethics Committee 02 (2nd Floor, Waverley Gate, 2-4 Waterloo Place, Edinburgh, EH1 3EG, UK; +44 (0)131 536 9000; sandra.wyllie@nhslothian.scot.nhs.uk), ref 22/SS/0017

Primary study design
Interventional

Study design
Multi-centre mixed-methods implementation study with qualitative evaluation

Study type(s)
Screening

Health condition(s) or problem(s) studied
Advance/anticipatory care planning for people at risk of serious illness or death due to a pre-existing long-term condition or frailty

Interventions
As an implementation study, the intervention treats GP surgeries as the "participants" in the intervention. A package of support materials (4-ACP) is made available to participating GP surgeries to use in assisting screening, identification and conduct of anticipatory care planning. Participating GP surgeries will be convenience-sampled based on expressions of interest and recommendations from the four GP leads. There is no randomisation involved in this process.

Each GP surgery will make use of the 4-ACP toolkit, including running the screening tool AnticiPal for up to 12 weeks.

Intervention Type
Mixed

Primary outcome(s)
Patient and/or linked informal carer attitude about the acceptability of anticipatory care planning (ACP), assessed using qualitative interviews at two timepoints within 6 and 12 weeks of having an ACP conversation. Inductive thematic analysis is used to determine qualitative content.

Key secondary outcome(s)
There are no secondary outcome measures

Completion date
30/11/2023

Eligibility

Key inclusion criteria
GP surgeries participating in the implementation:
1. Located in one of the four participating health boards
2. Currently delivers anticipatory care planning

Patients taking part in qualitative interviews to evaluate the impact of anticipatory care planning:
1. Registered with participating practices
2. Has had an ACP conversation at the participating practice within the last 6 months or is a proxy for someone who has
3. Adult (over the age of 16 years)
4. Has the capacity to consent

Healthcare professionals taking part in qualitative interviews:
1. Working at a participating GP surgery
2. Has the capacity to consent

Healthy volunteers allowed
No

Age group
Mixed

Lower age limit
16 Years

Sex
All

Total final enrolment
34

Key exclusion criteria
For participating practices there are no exclusion criteria

For individuals:
1. Lacking the ability to consent
2. Lacking the ability to communicate
3. Interview considered physically or emotional risky by a healthcare professional with knowledge of the patient
4. Interview considered potentially risky to the researcher by a healthcare professional with knowledge of the patient
5. Participant under the age of 16 years

Date of first enrolment
01/09/2022

Date of final enrolment
30/09/2023

Locations

Countries of recruitment
United Kingdom

Scotland

Study participating centre
NHS Lothian
Waverley Gate
2-4 Waterloo Place
Edinburgh
United Kingdom
EH1 3EG

Study participating centre
NHS Greater Glasgow and Clyde
J B Russell House
Gartnavel Royal Hospital
1055 Great Western Road Glasgow
Glasgow
United Kingdom
G12 0XH

Study participating centre
NHS Highland
Reay House

17 Old Edinburgh Road
Inverness
United Kingdom
IV2 3HG

Study participating centre
NHS Forth Valley
33 Spittal Street
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FK8 1DX

Sponsor information

Organisation
University of Edinburgh

ROR
https://ror.org/01nrxwf90

Organisation
NHS Lothian

ROR
https://ror.org/03q82t418

Funder(s)

Funder type
Charity

Funder Name
Marie Curie

Alternative Name(s)
Marie Curie Cancer Care, MarieCurieUK

Funding Body Type
Private sector organisation

Funding Body Subtype
Trusts, charities, foundations (both public and private)

Location
United Kingdom

Results and Publications

Individual participant data (IPD) sharing plan
The datasets generated during and/or analysed during the current study are/will be available upon request from the project's chief investigator Dr Kirsty Boyd for up to 7 years from conclusion of the study.

IPD sharing plan summary
Available on request

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Basic results		28/12/2024	17/01/2025	No	No
Other publications	Online public information about advance care planning: An evaluation of UK and international websites		07/08/2024	Yes	No
Other publications	Scoping review		07/08/2024	Yes	No
Participant information sheet	Participant information sheet	11/11/2025	11/11/2025	No	Yes
Study website	Study website	11/11/2025	11/11/2025	No	Yes