

HOMe Visits after Stroke

Submission date 10/02/2011	Recruitment status No longer recruiting	<input type="checkbox"/> Prospectively registered
Registration date 17/03/2011	Overall study status Completed	<input type="checkbox"/> Protocol
Last Edited 08/09/2014	Condition category Circulatory System	<input type="checkbox"/> Statistical analysis plan
		<input checked="" type="checkbox"/> Results
		<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
10031

Study information

Scientific Title
A survey and feasibility randomised clinical trial (RCT) of pre-discharge occupational therapy home visits for stroke patients

Acronym
HOVIS

Study objectives

This study aims to investigate the effects of pre-discharge occupational therapy home visits for stroke patients. These visits are a common component of occupational therapy practice, yet relatively little research has been completed. We wish to conduct a feasibility study in order to test whether randomisation is acceptable to patients and clinicians and thus whether a multi-centre trial would be possible in order to examine the effectiveness and costs of such visits.

Ethics approval required

Old ethics approval format

Ethics approval(s)

Berkshire Research Ethics Committee 1, 17/05/2010, ref: 10/H0505/41

Study design

Single-centre single-blind feasibility randomised controlled trial

Primary study design

Interventional

Study type(s)

Treatment

Health condition(s) or problem(s) studied

Stroke

Interventions

Predischarge home visit with an occupational therapist versus predischarge in-hospital interview with occupational therapist. Participants will be randomised to receive either a predischarge home visit or a predischarge in-hospital interview.

Intervention Type

Other

Phase

Not Applicable

Primary outcome(s)

Independence in activities of daily living: Nottingham Extended Activities of Daily Living (NEADL) at 1 month

Key secondary outcome(s)

1. Mood (GHQ28 and SADQ)
2. Caregiver strain (Caregiver Strain Index)
3. Economic analysis (EQ5D)
4. Falls, hospital readmissions and use of primary and community care services at one month

Completion date

12/10/2011

Eligibility

Key inclusion criteria

Patients who have had a stroke and are transferred to the stroke rehabilitation unit at the trial site

Participant type(s)

Patient

Healthy volunteers allowed

No

Age group

Adult

Sex

All

Key exclusion criteria

1. Patients who are discharged directly from the acute stroke unit and who are not transferred for rehabilitation
2. Patients who are on an end of life care pathway
3. Patients being discharged out of the Derbyshire area
4. Patients who do not speak English
5. Patients who receive a pre-discharge occupational therapy access visit only
6. Patients who the ward clinicians decide must have a pre-discharge home visit as specified by agreed criteria will not be eligible for randomisation. However, these patients will be approached separately for consent to be followed up as home visit essential participants

Date of first enrolment

12/07/2010

Date of final enrolment

12/10/2011

Locations**Countries of recruitment**

United Kingdom

England

Study participating centre

The University of Nottingham

Nottingham

United Kingdom

NG7 2UH

Sponsor information

Organisation

University of Nottingham (UK)

ROR

<https://ror.org/01ee9ar58>

Funder(s)

Funder type

Government

Funder Name

National Institute for Health Research (NIHR) (UK) - Collaboration for Leadership in Applied Health Research and Care - Nottinghamshire, Derbyshire and Lincolnshire (CLAHRC NDL)

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	01/05/2013		Yes	No
HRA research summary			28/06/2023	No	No
Study website	Study website	11/11/2025	11/11/2025	No	Yes