

Acceptance and Commitment Therapy (ACT) for Recovery (ACTfR)

Submission date 26/01/2013	Recruitment status No longer recruiting	<input type="checkbox"/> Prospectively registered
Registration date 25/02/2013	Overall study status Completed	<input type="checkbox"/> Protocol
Last Edited 21/09/2020	Condition category Mental and Behavioural Disorders	<input type="checkbox"/> Statistical analysis plan
		<input checked="" type="checkbox"/> Results
		<input type="checkbox"/> Individual participant data

Plain English summary of protocol

Background and study aims

The ACT for Recovery (ACTfR) study is an evaluation of Acceptance and Commitment Therapy (ACT) group workshops for users of community mental health recovery and early intervention psychosis services in South East London and their caregivers. ACT is a talking therapy that aims to help people to do the things that they value in life, by teaching them how to change the way they relate to their problems. ACT involves learning how to accept difficult feelings or thoughts when they happen, rather than getting caught up in trying to change or avoid them, which can lead to feeling more upset. People with psychosis often have upsetting experiences such as hearing voices, or worrying that other people may want to harm them in some way. Caregivers often feel upset by the day to day impact of psychosis on their lives and relationships. We would like to find out whether taking part in ACT group workshops improves wellbeing and reduces costs to the service. Group workshops will be delivered by experienced facilitators, alongside two trainee facilitators: a staff member and a service user peer supporter. We will evaluate whether co-facilitating a group is an effective way of training new facilitators to deliver ACT groups. We will compare people taking part in the ACT group workshops straight away, with people taking part after a three month wait (the waitlist control group). We predict that service user and caregiver participants will find the intervention acceptable and will show improvements in wellbeing, compared to the waitlist control group. We predict that co-facilitators will show an improvement in knowledge and skills, compared to staff and peer supporters who wait three months before receiving the training. We also predict that service users will show improvements in recovery and reductions in service use.

Who can participate?

All service users and caregivers in Promoting Recovery or Early Intervention services in the Psychosis Clinical Academic Group of the South London & Maudsley NHS Foundation Trust can take part, providing they can participate in a group, and can understand spoken and written English well enough. Staff of mental health or related services and service user or caregiver peer supporters is eligible to participate in the training evaluation.

What does the study involve?

For service users and caregivers, taking part in the study will involve completing questionnaires measuring current wellbeing and coping. Participants will be offered the ACT group workshops

straight away, or after a three month wait. Who joins in straight away and who has to wait will be decided randomly, by a process a bit like tossing a coin.

The ACT workshops will be four 2-hour sessions, taking place weekly, followed by two booster sessions, eight weeks later. We expect six to eight service users or caregivers to attend each workshop. We will use the questionnaires to measure change in service user and caregiver wellbeing from before the start of the groups (week 0), after the first four workshops (week 4) and after the booster sessions (week 12). We will compare people receiving the ACT intervention with people waiting for the intervention. For staff and peer supporter co-facilitators, taking part in the study will involve completing questionnaires measuring their knowledge of ACT. They will co-facilitate straight away or after a three month wait.

What are the possible benefits and risks of participating?

We hope that the ACT workshops will be helpful, and do not expect there to be any particular risks associated with taking part.

Where is the study run from?

The study is taking place in the Psychosis Clinical Academic Group in the South London and Maudsley NHS Foundation Trust, which is part of the Academic Health Sciences Centre, Kings Health Partners.

When is study starting and how long is it expected to run for?

We aim to deliver 16 ACT intervention groups to 48 service users and 48 caregivers, over a year. We will also train 16 members of the Community mental Health team staff and 16 service user peer supporters to facilitate ACT interventions. We will be recruiting participants from February 2013 until the end of December, 2013.

Who is funding the study?

The study is funded by a grant from the Maudsley Charity (ref. 764).

Who is the main contact?

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Contact information

Type(s)

Scientific

Contact name

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Additional identifiers

Protocol serial number
V1 081012

Study information

Scientific Title

ACT for Recovery: A study of training to promote recovery through facilitated and peer support Acceptance and Commitment Therapy (ACT) courses for service users and caregivers in community services

Acronym

ACTfR

Study objectives

1. Service users and caregivers will find the intervention acceptable and will show improvements in wellbeing, compared to the waitlist control group.
2. Co-facilitators will show an improvement in knowledge and skills, compared to those not receiving the training.
3. Service users will show improvements in recovery and reductions in service use, compared to the waitlist control group.

Ethics approval required

Old ethics approval format

Ethics approval(s)

Camberwell St Giles NHS REC, 18/12/12, ref:12/LO/1789

Study design

Randomised waitlist controlled evaluation with two arms

Primary study design

Interventional

Study type(s)

Quality of life

Health condition(s) or problem(s) studied

Mental health

Interventions

Arm 1: ACT group workshops. Participants will take part in four sessions of Acceptance and Commitment therapy, each lasting two hours, delivered weekly, and two further 'booster' sessions taking place eight weeks later, delivered one week apart. Total duration of the intervention will be 12 hours, over a total of 12 weeks.

Arm 2: Waitlist control. Participants will receive their usual treatment. After completing the 12-week assessment, they will be able to join in with the ACT intervention.

Intervention Type

Other

Phase

Not Applicable

Primary outcome(s)

1. Service user and caregiver wellbeing: Warwick-Edinburgh Wellbeing Scale (Tennant et al., 2007), CORE-10 (Barkham et al., 2008)
2. Co-facilitator knowledge and skills

Comparison of change from 0 to 12 weeks between groups

Key secondary outcome(s)

1. Cost-effectiveness and service use:
 - 1.1. Client service receipt inventory (Beecham & Knapp, 1992)
 - 1.2. Service use in preceding 3 months
2. EQ5D (EuroQuol group, 1990)

Compared for week 12 to week 0, and from week 0 to week 12.

Completion date

31/12/2013

Eligibility

Key inclusion criteria

Inclusion criteria are broad any service user or caregiver within the Promoting Recovery service, with sufficient English to participate in the study.

Participant type(s)

Patient

Healthy volunteers allowed

No

Age group

Adult

Sex

All

Key exclusion criteria

1. Participants who are not users of the local service
2. Who do not have sufficient English to participate in a therapeutic group conducted in English
3. Whose clinical presentation makes participation in a moderate duration, moderately high demand group activity inappropriate

Date of first enrolment

07/02/2013

Date of final enrolment

31/12/2013

Locations

Countries of recruitment

United Kingdom

England

Study participating centre

PICUP CLinic

London

United Kingdom

SE5 8AF

Sponsor information

Organisation

South London and Maudsley NHS Foundation Trust (UK)

ROR

<https://ror.org/015803449>

Funder(s)

Funder type

Charity

Funder Name

Maudsley Charity (UK) Ref: 764

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	01/11/2020	21/09/2020	Yes	No