

Organising Support for Carers of Stroke Survivors (OSCARSS): a National Cluster Randomised Controlled Trial (cRCT) with embedded Process Evaluation



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In the UK, informal caregivers for stroke survivors provide care worth up to £2.5 billion per year at great personal cost¹ ².

We co-developed an intervention to support carers' needs and are investigating its clinical and cost-effectiveness, and implementation into UK practice.

AIM OF OSCARSS

- Determine the clinical- and cost-effectiveness of our co-developed intervention, **compared** to a **control** of standard practice.
- Understand implementation into practice: see process evaluation poster OG08

CO-DEVELOPED INTERVENTION

Carer-led, staff-facilitated approach to needs assessment and support.

- Identify carer
- Highlight support is for them
- Introduction

Shared Action

Use of **tool** (held by carer)

- Record of actions
- Plans for review

METHODS

Longitudinal, pragmatic multi-site cRCT with health economic analysis and embedded process evaluation (see OG08 poster).

Clusters = Stroke Association services randomised to new approach & trained (intervention) or standard practice (control).

Research Participants = Consenting adult carers referred to clusters **Primary Outcomes** = Carer strain (self-report) at 3 months (FACQ)³

Secondary Outcomes (measured at 3 and 6 months)

- Caregiver distress and positive appraisals (FACQ)
- Satisfaction with Stroke Services
- Anxiety and depression scale (HADS)

cRCT STUDY PROCESS

Intervention clusters (N = 18)

Carers offered new approach

Stroke Association support

OSCARSS Consent:

demographics + clinical data

3 month outcomes

(postal questionnaires)

Primary end point

6 month follow up outcomes

(postal questionnaires)

Health Economic Outcomes (measured at 3 and 6 months)

Quality of Life (EQ-5D-5L) & Health and Social Care service use

Control clusters (N = 17)

Carers offered standard Stroke

Association support

OSCARSS Consent:

demographics + clinical data

3 month outcomes

(postal questionnaires)

Primary end point

6 month follow up outcomes

(postal questionnaires)

PROGRESS

Carer recruitment

Closed to referrals on 31st July 2018

414 recruited

(209 intervention; 205 control)

(123 intervention; 142 control)

• 355 / 414 (86%) returned **3 month outcomes** (178 intervention; 177 control)

• 265 / 414 (64%) returned **6 month outcomes**

Results due 2019

Next steps

- Data collection ends December 2018
- Data analysis early 2019
- First look results in Spring 2019

OSCARSS will contribute to knowledge of the unmet needs of informal stroke caregivers and inform future stroke service development.

A lay report on results will be made available via the CLAHRC website: https://www.clahrc-gm.nihr.ac.uk/projects/oscarss

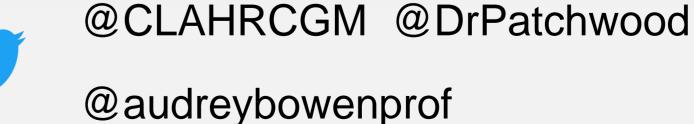
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Review Plan

Carer-led prioritisation, using tool as 'ramp'

- ID tailored support inputs. May include:
- Reassurance and information

Normalise reflection on own needs

Use needs assessment tool as

conversation ramp

Carer

considers

needs

Assessment

conversation

- Family support / self-management
- Signposting / referral

Staff behaviour change facilitated by a toolkit and training

The Carer Research User Group (RUG)

The OSCARSS-specific RUG has worked in partnership with researchers since Dec 2015 to develop, design and manage the study (please see poster OG13 for info).



- ¹ Luengo-Fernandez et al. (2006) "Cost of cardiovascular diseases in the United Kingdom." Heart 92(10): 1384-9
- ² Saka, O., A. McGuire, et al. (2009). "Cost of stroke in the United Kingdom." Age Ageing 38(1): 27-32
- ³ Cooper et al (2006) "Development and validation of a family appraisal of caregiving questionnaire...". Psychooncology 15(7): 613-22.

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