

The Out-and-About trial: Improving quality of life by increasing outings after stroke

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Background

- One third of Australians need help to walk or travel outdoors after a stroke
- Community rehabilitation helps stroke patients to get out more often
- Fewer than 20% of stroke patients receive multiple sessions to improve outcomes
- Evidence-practice gap demonstrated
- The *Out-and-About* implementation program

Aims of the Study

- To determine the **efficacy and cost effectiveness** of an **implementation program to change team behaviour and improve outdoor journeys by stroke patients**

Methods

- Cluster RCT, 3 years
- 20 community rehabilitation teams and their stroke patients (n=300)
- Experimental Group: The '*Out-and-About*' implementation program
 - Guideline recommendations, education and audit feedback
- Control Group: Guideline recommendations
- Primary outcome: % of people with stroke receiving 4 or more sessions targeting outdoor journeys (12 mth outcome)

Project Team (6 CIs, 2 AIs) & Track Record

- **Multidisciplinary:**
 - McCluskey (OT), Ada (PT) & Middleton (Nursing)
- Health Economist (S Goodall)
- Statistician (P Kelly)
- International C-RCT triallist (J Grimshaw)
- Original RCT being implemented (CI: P Logan)
- Feasibility: NSW Stroke Services (M Longworth)

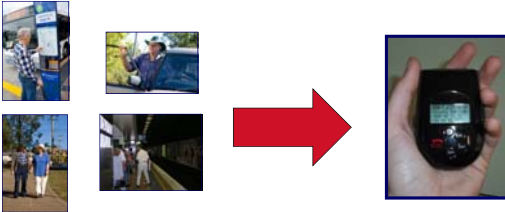
Feasibility

- **Pilot sites (n=5)** (conference paper; 'in preparation')
 - 'We have demonstrated that it is safe and feasible for rehabilitation teams to deliver multiple sessions without additional resources or adverse patient events'
- **Barriers to implementation** ('under review')
 - Patient and family expectations, therapist lack of knowledge and skills, role expectations
- **Patient outcomes (n=23)** at 3 months
 - Two thirds getting out as often as they wanted compared to 1/3 at baseline, and 1/3 of controls



Innovation

- GPS device
- Objective method of measuring outdoor travel
- Alternative to self-report diaries



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Budget requested: \$670,975

- FTE - project coordinator x 3 years
 - FTE RA – file audits x 2.5 years
 - Blinded assessor 80% x 3 years
 - Taxi travel for people with stroke (**\$60,000**)
 - Travel costs (staff) (**\$15,000**)
 - GPS x 20: hardware, web monitoring (**\$10,000**)
 - Data linkage (**\$5,000**)
 - Plus other smaller items
- \$556,000**
- Awarded \$556,000**



Reviewer Comments

- 'High standard of preparation for a clinical trial'
- 'Proposal builds on, and extends previous work'
- 'Potential to contribute significantly to delivery of services and translation of research into practice'
- 'Novel aspect: Use of GPS to track patients'
- 'Cost analysis is being undertaken: V important'
- 'CIA: 'Emerging track record'

Category 6 ranking



Reviewer Questions: GPS

- 'Does any member of the team have the experience to work with the novel GPS measurement?'
- 'Do you envisage any difficulties for participants using the technology?'
- 'Are they 'fool proof' and easy for older people to use?'



Main Messages

- Read LOTS of successful grants
- Start writing drafts early: Submit for review to a mentor - revise, revise, revise
- Pilot data: Essential
- Novelty/innovation: Essential (need a hook)
- Strong team: Medical doctor not essential but health economist and statistician often are
- 'Emerging researcher' as CIA: Acceptable
- Realistic budget: Don't underfund your project



Contact Details

The Out-and-About trial

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