

CORRECTION

Open Access



Correction: The Transdiagnostic Intervention for Sleep and Circadian Dysfunction (TranS-C) for serious mental illness in community mental health part 1: study protocol for a hybrid type 2 effectiveness-implementation cluster-randomized trial

Laurel D. Sarfan¹, Emma R. Agnew¹, Marlen Diaz¹, Lu Dong², Krista Fisher¹, Julia M. Spencer¹, Shayna A. Howlett¹, Rafael Esteva Hache¹, Catherine A. Callaway¹, Amy M. Kilbourne³, Daniel J. Buysse⁴ and Allison G. Harvey^{1*}

Correction: *Trials* 24, 198 (2023)

<https://doi.org/10.1186/s13063-023-07148-9>

After publication of this article the authors spotted minor errors in the “**Planned Analyses**” section and (Table 1) of the original publication. As described in the original preregistration on clinicaltrials.gov (NCT04154631): the measures referenced in the analyses below were never planned to be assessed at 6-month follow-up, consistent with the Method section and Figures of the original publication.

The incorrect and correct information is shown in this correction article. The original article has been updated [1].

The original article can be found online at <https://doi.org/10.1186/s13063-023-07148-9>.

*Correspondence:

Allison G. Harvey
aharvey@berkeley.edu

¹ Department of Psychology, University of California, Berkeley, CA, Berkeley, USA

² RAND Corporation, Santa Monica, CA, USA

³ University of Michigan and VA Ann Arbor Healthcare System, Ann Arbor, MI, USA

⁴ Department of Psychiatry, University of Pittsburgh, Pittsburgh, PA, USA

Incorrect

- The level 1 equation will include dummy-coded time indicators as the predictor (0=pre-treatment, 1=post-treatment, and 2=6FU)...Significant interactions will be interpreted using planned contrasts (i.e., treatment effects on change from pre-treatment to post-treatment and pre-treatment to 6FU) and graphs.
- Linear regression will be used to test treatment condition (Adapted vs. Standard TranS-C) predicting patient perceptions of TranS-C’s credibility at post-treatment and 6FU.
- The level 1 equation will include the moderator and dummy-coded time indicators as the predictors (0=pre-treatment, 1=post-treatment, and 2=6FU). A significant interaction indicates a moderating effect and will be probed with planned contrasts (e.g., moderating effects on the differences between treatments in change from pre-treatment to post-treatment or pre-treatment to 6FU) and graphs.



© The Author(s) 2023. **Open Access** This article is licensed under a Creative Commons Attribution 4.0 International License, which permits use, sharing, adaptation, distribution and reproduction in any medium or format, as long as you give appropriate credit to the original author(s) and the source, provide a link to the Creative Commons licence, and indicate if changes were made. The images or other third party material in this article are included in the article's Creative Commons licence, unless indicated otherwise in a credit line to the material. If material is not included in the article's Creative Commons licence and your intended use is not permitted by statutory regulation or exceeds the permitted use, you will need to obtain permission directly from the copyright holder. To view a copy of this licence, visit <http://creativecommons.org/licenses/by/4.0/>. The Creative Commons Public Domain Dedication waiver (<http://creativecommons.org/publicdomain/zero/1.0/>) applies to the data made available in this article, unless otherwise stated in a credit line to the data.

Table 1 SPIRIT Depiction of Timing and Measures Collected for Implementation Phase

	Screening	Post-Training	Pre-Treatment	Mid-Treatment	Post-Treatment	6-Months Post-Treatment
Patient						
Sociodemographics			x		x	x
Eligibility Items	x					
PROMIS-SD ^P	x		x	x	x	x
PROMIS-SRI			x	x	x	x
DSM-5 Cross-Cutting			x		x	x
SDS			x		x	x
Sleep Health Composite			x	x	x	x
PHENX Toolkit			x		x	x
CEQ					x	
Provider						
Sociodemographics		x				
Occupation		x				
Acceptability ^P		x		x	x	
Appropriateness		x		x	x	
Feasibility		x		x	x	
Number of Sessions					x	

Note: Allocation to Adapted or Standard TranS-C occurs at the county level and prior to enrollment of any participants in that county (i.e., patients or providers). Enrollment of patients and allocation to immediate TranS-C or delayed TranS-C (UC-DT) occur after the screening and before the pre-treatment assessment. Enrollment of providers after the training

Note: PROMIS-SD is only assessed during the pre-treatment assessment if done more than one month after the screening to minimize burden for patients

^P Primary Outcome, *PROMIS-SD* PROMIS-Sleep Disturbance, *PROMIS-SRI* PROMIS-Sleep Related Impairment, *SDS* Sheehan Disability Scale, *CEQ* Credibility/Expectancy Questionnaire

Correct

- The level 1 equation will include dummy-coded time indicators as the predictor (0=post-training, 1=post-treatment)...Significant interactions will be interpreted using planned contrasts (i.e., treatment effects on change from post-training to post-treatment) and graphs.
- Linear regression will be used to test treatment condition (Adapted vs. Standard TranS-C) predicting patient perceptions of TranS-C's credibility and perceived improvement at post-treatment.
- The level 1 equation will include the moderator and dummy-coded time indicators as the predictors (0=pre-treatment, 1=post-treatment). A significant interaction indicates a moderating effect and will be probed with planned contrasts (e.g., moderating effects on the differences between treatments in change from pre-treatment to post-treatment) and graphs.

Published online: 14 August 2023

Reference

1. Sarfan LD, et al. The Transdiagnostic Intervention for Sleep and Circadian Dysfunction (TranS-C) for serious mental illness in community mental health part 1: study protocol for a hybrid type 2 effectiveness-implementation cluster-randomized trial. *Trials*. 2023;24:198. <https://doi.org/10.1186/s13063-023-07148-9>.

Ready to submit your research? Choose BMC and benefit from:

- fast, convenient online submission
- thorough peer review by experienced researchers in your field
- rapid publication on acceptance
- support for research data, including large and complex data types
- gold Open Access which fosters wider collaboration and increased citations
- maximum visibility for your research: over 100M website views per year

At BMC, research is always in progress.

Learn more biomedcentral.com/submissions

