

What is the effect of telephone aftercare for elderly patients, who are discharged home from the Emergency Department of a large inner-city hospital?

No registrations found.

Ethical review	Positive opinion
Status	Pending
Health condition type	-
Study type	Interventional

Summary

ID

NL-OMON20052

Source

Nationaal Trial Register

Brief title

TAFEL-study

Health condition

older adults, emergency department, adverse outcomes, aftercare, patient discharge, elderly
ouderen, spoedeisende hulp, nazorg, oudere patient

Sponsors and support

Primary sponsor: Haaglanden Medisch Centrum

Source(s) of monetary or material Support: Jacobus Stichting

Intervention

Outcome measures

Primary outcome

The difference in hospital admissions within 30 days after ED discharge between the intervention and the control group.

Secondary outcome

The difference in unanticipated avoidable hospital admissions within 30 days after ED discharge, unanticipated, avoidable ED return visits within 30 days after ED discharge, difference in functional outcome 30 days after ED discharge and difference in patient satisfaction between the two groups and cost-effectiveness.

Study description

Background summary

Elderly patients, discharged to a home setting from the Emergency Department (ED) may be at high risk for adverse outcomes. To improve their outcome, telephone aftercare was started in our hospital. We would like to assess whether telephone aftercare for patients of ≥ 70 years after ED discharge to a home setting leads to reduction in hospital admissions and return ED visits within 30 days, better patient satisfaction and cost-effectiveness. We will conduct a comparative study with two groups: an intervention group, who will receive a telephone call from a specialized ED nurse during which discharge instructions are reviewed, follow-up appointments and care are facilitated and patient satisfaction will be scored, and a control group who will receive a patient satisfaction survey telephone call. After 30 days health service use of all patients will be evaluated.

Study objective

We hypothesize that telephone aftercare for patients of 70 years and older within 24 hours after discharge to a home setting from the ED will lead to a reduction in hospital admission, in avoidable, unanticipated hospital admissions and ED visits within 30 days after the ED visit; that it will improve patient satisfaction; and that it will be cost-effective. We hypothesize that for patients with cognitive impairment and hazardous alcohol use telephone aftercare will not be as effective, whereas decreased general daily functioning and crowding in the ED during discharge of the patient will predict a positive effect of telephone aftercare.

Study design

30 days after ED discharge

Intervention

Patients in the intervention group will receive a telephone call from a specialized ED nurse within 24 hours after ED discharge during which discharge instructions are reviewed and

follow-up appointments and care are facilitated if needed. Patients will also be asked to give a satisfaction score for the treatment they received in the ED. Patients in the control group will receive a patient satisfaction survey telephone call within 24 hours after ED discharge.

Contacts

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Eligibility criteria

Inclusion criteria

ED patients (1) age 70 years and older (2) returning to a home setting after ED discharge and (3) willing to participate.

Exclusion criteria

ED patients will be excluded if they are <70 years of age, admitted to the hospital, transferred to or from another hospital, discharged to a nursing home, or if they do not have a telephone.

Study design

Design

Study type:	Interventional
Intervention model:	Factorial

Allocation:	Randomized controlled trial
Masking:	Open (masking not used)
Control:	Placebo

Recruitment

NL	
Recruitment status:	Pending
Start date (anticipated):	01-03-2018
Enrollment:	5328
Type:	Anticipated

Ethics review

Positive opinion	
Date:	07-11-2017
Application type:	First submission

Study registrations

Followed up by the following (possibly more current) registration

No registrations found.

Other (possibly less up-to-date) registrations in this register

No registrations found.

In other registers

Register	ID
NTR-new	NL6598
NTR-old	NTR6815
Other	METC Zuidwest Holland : 17-028

Study results