

Evaluation of the DEM-DISC: An ICT tool for customized advice on care and welfare services.

No registrations found.

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

Summary

ID

NL-OMON20257

Source

NTR

Brief title

DEM-DISC; DementieWijzer

Health condition

Dementia, caregivers, needs, burden, quality of life, user-friendliness & usefulness
Dementie, mantelzorgers, behoeften, Kwaliteit van leven, gebruiksvriendelijkheid en
bruikbaarheid

Sponsors and support

Primary sponsor: VU University Medical Center Amsterdam

Source(s) of monetary or material Support: Stichting tot Steun VCVGZ, ZON-MW

Intervention

Outcome measures

Primary outcome

Met and unmet needs in persons with dementia and carers (CANE), quality of life of persons

with dementia (QoI-AD), burden of carer (SSCQ), perceived self-efficacy (Mastery scale) of carers.

Secondary outcome

The user friendliness, usability and satisfaction with DEM-DISC is assessed (USE Questionnaire) in both informal and formal carers.

Study description

Background summary

OBJECTIVES:

A wide variety of care and support services are available for the growing number of community-dwelling people with dementia and their informal carers. However, they do not (effectively) use the available care and support because often they are not aware of the range of services available, are not referred to it by health care and welfare professionals or expect that the service will not meet their needs. To provide carers of persons with dementia with tailored information, the DEMentia Digital Interactive Social Chart (DEM-DISC) was developed. DEM-DISC is a demand-orientated, web-based, social chart for dementia care, which is easy accessible at anytime, anywhere by the Internet. A pilot version was tested in a controlled trial and the results were positive: compared to a control group the persons with dementia and informal carers using DEM-DISC reported more met, and less unmet needs and the informal carers felt better able to fulfil their care task (higher sense of competence). The aim of the present study was first to further improve the pilot version of the DEM-DISC, so that advices on care and support services would be given in a more tailored way, and second, to evaluate the user-friendliness, usefulness and effects of the improved DEM-DISC among (in)formal caregivers and people with dementia, and third to study barriers and facilitators of the implementation of DEM-DISC.

METHODS:

A randomized controlled trial is conducted to evaluate the effects on (in)formal caregivers and people with dementia. People in the experimental group are using DEM-DISC for at least half a year to one year, people in the control group receive information regarding available services as usual (via general practitioner, newspaper, internet). Primary outcome measures are met and unmet needs of persons with dementia and informal caregivers, sense of competence of informal caregivers, and the experienced added value of DEM-DISC in professional caregivers. The user-friendliness and usefulness of DEM-DISC is measured by the USE-questionnaire administered in both informal and professional carers. A process evaluation is conducted using semi-structured interviews with stakeholders, to get

insight into barriers and facilitators of implementation of the DEM-DISC. The study is performed in four regions of the Netherlands.

Study objective

It is expected that using the DEM-DISC will decrease the number of unmet needs and increase the number of met needs in people with dementia and their informal caregivers. Informal caregivers using DEM-DISC are expected to feel less burdened and will show improvements in self-efficacy compared to informal caregivers who receive information as usual. People with dementia are expected to show an increase in quality of life. Professional caregivers are expected to value the DEM-DISC as an addition to their work and to appreciate the website as user-friendly and useful.

Study design

The primary outcome measures will be assessed at T=0, T=6 months and T=12 months.

At 6 months the casemanagers will be interviewed on their use of the DEM-DISC. Secondary outcome measures will be assessed at T=6 and T=12.

Intervention

The intervention group receives access to DEM-DISC for one year and is guided by their casemanager in the use of this application. The casemanagers of the intervention group also use the DEM-DISC to help them refer their clients more effectively to relevant care and welfare organisations.

The control group does not receive access to DEM-DISC and searches for information about care and welfare services as usual (internet search, general practitioner, paper guides) The casemanagers of persons with dementia/caregivers in the control group do not have access to DEM-DISC themselves.

Contacts

Public

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Eligibility criteria

Inclusion criteria

Caregivers of community-dwelling people with dementia that have a computer at home with internet access and know how to use this.

Exclusion criteria

Caregivers of people with dementia that don't have internet access or do not know how to use internet.

Study design

Design

Study type:	Interventional
Intervention model:	Parallel
Allocation:	Randomized controlled trial
Masking:	Open (masking not used)
Control:	Active

Recruitment

NL	
Recruitment status:	Recruiting
Start date (anticipated):	01-07-2010

Enrollment: 140
Type: Anticipated

Ethics review

Positive opinion
Date: 20-02-2012
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	NL3155
NTR-old	NTR3299
Other	ZonMw : 313080201
ISRCTN	ISRCTN wordt niet meer aangevraagd.

Study results

Summary results

N/A