The use of audit and feedback to improve patient care and reduce practice variation in paediatric tonsil surgery

No registrations found.

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

Summary

ID

NL-OMON20894

Source Nationaal Trial Register

Brief title TBA

Health condition

Tonsillitis, OSAS, Upper respiratory tract infections

Sponsors and support

Primary sponsor: Citrienfonds Source(s) of monetary or material Support: Citrienfonds (doen of laten)

Intervention

Outcome measures

Primary outcome

Highest surgical rate (hospital)/Lowest surgical rate (hospital)

Secondary outcome

Study description

Background summary

Rationale: In international guidelines, it is recommended to only perform a tonsillectomy for recurrent throat infection if there have been more than seven episodes in the past year, more than five episodes per year in the past two years, or more than three episodes per year in the past three years. Additionally, it is recommended to perform a watchful waiting strategy instead of adenoidectomy in case of upper respiratory tract infections only. Despite these recommendations, practice variation remains problematic. It is thought that awareness can reduce practice variation. Therefore, this study aims to reduce practice variation in tonsillectomies and adenoidectomies by using audit and feedback to otolaryngologists and general practitioners (GPs). The study consists of 2 phases: 1. Development and evaluation of an implementation strategy to reduce practice variation in tonsillectomy and adenoidectomy using data from the LOGEX Benchmark Database. We will perform a randomized controlled trial on the effect of the implementation strategy. Fifteen randomly selected hospitals from the LOGEX Benchmark Database will receive an invitation to participate in our study. We will compare clinical practice before and after the intervention in the participating hospitals, and we will compare the intervention hospitals with the control group, which consists all other hospitals from the LOGEX Benchmark Database, 2. Analysis of practice variation in GPs referral pattern using data from the ELAN Datawarehouse (Den Haag). We will present the outcomes to the GP practices included in the analysis. We will evaluate the effectiveness of audit and feedback on practice variation, process variation, outcomes and costs in the treatment of tonsillitis and upper respiratory infections in children to otolaryngologists and GPs.

Main study parameters/endpoints: Main outcome is practice variation in tonsillectomy and adenoidectomy treatment for children with upper respiratory tract infections before and after giving audit and feedback to otolaryngologists. Also, changes in clinical practice (both treatment choices and treatment processes) will be analysed using difference-in-difference analysis comparing intervention hospitals with the control group. Hospital characteristics will be compared with the opinion of physicians on the topic. Furthermore, we will evaluate practice variation in GP practices concerning the treatment of children with upper respiratory tract infections.

Study objective

We hypothesize that providing feedback to hospitals will reduce practice variation

Study design

We measure ongoing (per months) from 6 months before until 6 months after the last feedback cycle

Intervention

Audit and feedback, 4 times, during 1 year

Contacts

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Eligibility criteria

Inclusion criteria

LOGEX Benchmark hospitals

Exclusion criteria

University Hospitals

Study design

Design

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

Control:

Active

Recruitment

NL	
Recruitment status:	Pending
Start date (anticipated):	07-07-2020
Enrollment:	5
Туре:	Anticipated

IPD sharing statement

Plan to share IPD: No Plan description n.a.

Ethics review

Positive opinion	
Date:	07-07-2020
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	NL9676
Other	METC Leiden Den Haag Delft : N20.001

Study results