# Roles and responsibilities of parents and therapists in a Kindergarten Treatment Centre

No registrations found.

Ethical review	Positive opinion
Status	Recruitment stopped
Health condition type	-
Study type	Observational non invasive

## **Summary**

### ID

NL-OMON21797

Source NTR

#### **Health condition**

family centered care, communication, kindergarten

### **Sponsors and support**

**Primary sponsor:** Zuyd University of Applied Sciences **Source(s) of monetary or material Support:** Zuyd University of Applied Sciences

### Intervention

### **Outcome measures**

#### **Primary outcome**

The aim of the study is 1) to gather insights into the current procedure used to coordinate/determine the roles and responsibilities between parents and therapists from a Kindergarten Treatment centre in The Netherlands with respect to the treatment and support of the children and 2) to examine parents and professionals experience in this procedure.

#### Secondary outcome

Experiences with the contact between parents and therapists in general

# **Study description**

#### **Background summary**

Introduction Family centred practice is regarded as best practice in achieving positive outcomes for children and families. Literature states it is important to establish roles in collaboration and responsibilities jointly determined rather than dictated by health care providers. A common problem is that it is not clear what expectations parents and professionals have towards each other considering collaboration with respect to treatment and support of a child. The organisation's vision is mutual self-reliance. Nevertheless there are doubts about if the current procedure is family centred and beneficial to establish mutual self-reliance.

Aim This study explores the problems parents and therapists experience with the current procedure for determining roles and responsibilities at Kindergarten Treatment centre 't Steyntje and which aspects of the procedure they would like to change, and an exploration of desires to use technology to facilitate collaboration.

Methods Semi-structured interviews were conducted at one Kindergarten Treatment Centre in the South of the Netherlands with therapists and parents of children with an intellectual disability with or without physical disabilities and/or behaviour problems. The interviews focussed on the process of collaboration in determining parents' and therapists' roles and responsibilities. Data analyses were conducted by directed content analysis.

Results 5 therapists and 4 parents participated in this research. There is no fixed procedure to initiate and maintain contact with parents and to determine parents' and therapists' roles and responsibilities. The only fixed moment is the support plan meeting between the parents of the child and all professionals involved in the child's Kindergarten treatment centre. Occasionally, there is an additional meeting when there are important issues to discuss. Most therapists and parents want a clear and fixed procedure with more contact between both parties to gain insights into the child's actions during treatment and at home, and to improve the development of the child. Technology is suggested as a tool to facilitate this contact. However, personal and environmental factors such as time pressure, motivation, parents' attendance during drop-off and pick-up of their child, overburden, self-efficacy, cognition, confidence, personality, financial possibilities and policies, can make it difficult to achieve this preferred contact.

Conclusion Parents and therapists at Kindergarten Treatment centre 't Steyntje desire to agree on a clear procedure to gain more insight into the child's life and treatment and to improve the development of the child by determining roles and responsibilities. Although the desire for more collaboration exists, this study involved a small number of parents which effects the generalization to other Kindergarten Treatment centres.

### **Study objective**

The hypothesis is that all procedures look different per therapist and parent collaboration and all experiences are different. Nevertheless, there possibly will be similarities in experiences and wishes for the future.

#### Study design

Semi structured interviews: March 2017-April 2017. Transcribe interviews etc.: March 2017-May 2017. Analyze data: May 2017- June 2017. Write thesis (results, discussion, conclusion): June 2017

#### Intervention

It is expected that from March 2017 until April 2017 semi structured interviews will be conducted involving parents (n=10) of children between 0 and 7 years old with intellectual disabilities who receive treatment from one or more therapists of the Kindergarten Centre. Furthermore, semi structured interviews will be conducted with all of the employed therapists (n=5).

# Contacts

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# **Eligibility criteria**

### **Inclusion criteria**

Parents will only be included if their child receives therapy for at least three months and will receive treatment until at least July 2017. The parents of one child were excluded because the executive researcher knew them personally. It is intended to include 10 parents from 10 different children and 5 therapists. The therapists already confirmed verbally to participate in this research. This sample size is chosen to gather first ideas about the current procedure.

### **Exclusion criteria**

Parents who do not speak Dutch and do not have someone who can translate for them.

# Study design

### Design

Study type:	Observational non invasive
Intervention model:	Crossover
Allocation:	Non controlled trial
Masking:	Open (masking not used)
Control:	N/A , unknown

#### Recruitment

NL	
Recruitment status:	Recruitment stopped
Start date (anticipated):	13-03-2017
Enrollment:	15
Туре:	Actual

# **Ethics review**

Positive opinion	
Date:	09-02-2017
Application type:	First submission

4 - Roles and responsibilities of parents and therapists in a Kindergarten Treatment ... 9-05-2025

# **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	NL6327
NTR-old	NTR6519
Other	Zuyderland Zuyd : 17-N-22

# **Study results**

#### Summary results

\* Development of PARO Interventions for Dementia Patients in Dutch Psycho-geriatric Care <br>

\* Onderwijs in technoologie bij opleidingen ergotherapie<br>

\* Stimuleren van bewegen bij mensen met verstandelijke beperkingen: een voorstudie naar de mogelijkheden van technologieën