

Impact of a digital interdisciplinary consultation platform for GPs and specialists on referrals to secondary care in the Netherlands.

No registrations found.

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

Summary

ID

NL-OMON23624

Source

NTR

Brief title

GPconsult

Health condition

Orthopaedic related diseases, mainly shoulder, knee and hip symptoms

Sponsors and support

Primary sponsor: ZonMW, UMCG, Hein Hogerzeil Stichting

Source(s) of monetary or material Support: ZonMW, UMCG

Intervention

Outcome measures

Primary outcome

number of opened DBCs and/or (adequate) referrals for orthopaedic surgery in Isala

Secondary outcome

user satisfaction, cost-effectiveness, barriers and facilitators, patient experience

Study description

Background summary

General Practitioners (GPs) play a crucial role in the Dutch healthcare system. They have a gatekeeper function for the patient- access to specialists if needed. Despite the guidelines that GPs use in their daily practice (NHG) and the (time-challenging) telephonic advices given by specialists, a number of patients is still unnecessarily referred to the hospital or referred to the wrong department. After visiting a specialist, a group of patients only receive a conservative treatment which could also have been given by the GP. In the current situation, there is a lack of (time) convenient communication and discussion between GPs and specialists on daily patient care. This results in inadequate referrals for patients and as a result the time, costs and waiting lists growing.

The PRISMA digital interdisciplinary consultation platform, is designed to fill in that gap. It offers an asynchronous consultation for GPs to specialists, not limited to one-on-one communication, as this group of GPs can read and learn from each-others casus. A single centre pilot on PRISMA in Nijmegen-region has proven a considerable decrease in referrals to specialist, but it was a small group and lacked a controle group.

Our randomized controlled trial has a stepped-wedge design where over 1 year time, GPs in Zwolle-region will receive access to the PRISMA platform. will be compared to the standard care. Number of (inadequate) referrals to Isala Movement Center will be evaluated based on hospital registry. Next, user satisfaction, cost-effectiveness will be analyzed based on hospital registry plus routine care data from GPs on basis of data of the Academic GP Network (AHON). Last, inventory barriers and facilitators for use of PRISMA will be evaluated by use of questionnaires filled out by GPs, specialists as well as a qualitative analysis using interviews and focus groups to evaluate patient opinions and experiences.

Study objective

With use of this platform by GPs in Zwolle-region, the number of unnecessary referrals to Isala Movement Centre will decrease.

Study design

During the first year, every 12 weeks a new group of GPs will have access to Prisma for their digital consultations. In a stepped wedge design, 4 groups will start. Data on DBCs, referrals, app use, patient en user experience will be analysed between users and non-users of Prisma in a period of 2 years time.

Intervention

a Stepped wedge access of GPs to the use of the PRISMA platform

Contacts

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Eligibility criteria

Inclusion criteria

GPs of region Zwolle

Exclusion criteria

GPs of other regions or GPs that already started using PRISMA platform

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): 20-09-2021

Enrollment: 155

Type: Anticipated

IPD sharing statement

Plan to share IPD: Yes

Plan description

anonymised collected data from hospital registration, referral lettres, platform use, could be share if a request is done. Informed consent has to be signed. data storage safety has to be guaranteed.

Ethics review

Positive opinion

Date: 03-06-2021

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

NTR-new

Other

ID

NL9704

METC UMCG : METC2021/288

Study results