Shared Decision Making in Mental Health with Routine Outcome Monitoring (ROM) as an information source.

No registrations found.

Ethical review Positive opinion

Status Pending

Health condition type -

Study type Interventional

Summary

ID

NL-OMON29464

Source

NTR

Brief title

Geen

Health condition

Shared Decision Making, Routine Outcome Monitoring, Breakthrough project, Mental Health, Doorbraak project, ROM, gedeelde besluitvorming, gezamenlijke besluitvorming, GGZ

Sponsors and support

Primary sponsor: Performance: Trimbos-institute and VU(MC)

Source(s) of monetary or material Support: Breakthrough implementation project is funded by the Network for Quality Development in the Mental Health

Intervention

Outcome measures

Primary outcome

The client's perception of shared decision making

Secondary outcome

Client-practitioner relationship

Client's commitment to the treatment

Reduction of symptoms, the improvement of functioning in the society or quality of live

Study description

Background summary

Although up to now results of Shared Decision Making in mental health are comparable with physical health settings, few studies have been conducted in mental health. Besides the appliance of ROM as an information source in Shared Decision Making between client and practitioner is an innovative intervention in mental health. To our knowledge research to the usage of ROM in Shared Decision Making has not been available yet. One of the purposes of the Dutch Breakthrough ROM-project, funded by the Network for Quality Development in the Mental Health, is to implement ROM as a source in Shared Decision Making by teams in Mental Health Organisations and self-employed practitioners. Because there is little known about the effects of this intervention, it is desirable to evaluate the effects of the implementation of ROM as a tool in Shared Decision Making. In this study, we aim to research the appliance of ROM in Shared Decision Making about treatment options between client and practitioner.

Study objective

In this study, we aim to research the appliance of ROM in Shared Decision Making about treatment options between client and practitioner. We will compare two different conditions. In one condition, the Breakthrough-intervention teams, Shared Decision Making with ROM will have been implemented before this study will start. In the other condition, the Shadow-control teams will implement Shared Decision Making with ROM in a later phase, after data collection for this study.

The primary outcome measure will be the client's perception of shared decision making. The secondary outcome parameter will be the client-practitioner relationship. Additionally we will investigate the influence on the client's commitment to the treatment. Depends on the patient population we also look at the effects on the reduction of symptoms, the improvement of functioning in the society or quality of live. Overall we expect positive effects on the primary, secondary and additional outcome parameters in the Breakthrough teams

which will implement shared decision making with ROM at first.

Study design

Three measurement points in 6 months:

T0 (baseline), T1 (+/- 3 months), T2 (+/- 6 months) Inclusion patients in 3-4 months

Intervention

Appliance of Routine Outcome monitoring in Shared Decision Making about treatment options between client and practitioner.

Routine Outcome Monitoring refers to regular measurements of clients' progress in clinical practice, using standardized instruments, aiming to evaluate and, if necessary, adapt treatment.

Breakthrough, intervention teams, receive training in SDM & ROM model, support and coaching in the implementation.

Contacts

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Eligibility criteria

Inclusion criteria

Teams which are participating in the Dutch Breakthrough ROM network (project).

Inclusion of clients which are receiving treatment (through the participating teams/practioners) and will give informed consent.

Exclusion criteria

Clients who are nog able to speak and read Dutch.

Clients who don't agree with participating in the study (no informed consent)

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): 01-08-2015

Enrollment: 364

Type: Anticipated

Ethics review

Positive opinion

Date: 24-06-2015

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 NL5033 NTR-old NTR5262

Other WC EMGO VUMC, number will be expected: METC VUMC 2015.237

Study results

Summary results

not yet