Effect of triage in the Dutch Preventice Child Health Care on methods of signaling and health care

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The objective of this study is to gain insight in the effects of the triage method on the identification of children with mental or physical problems, the basic JGZ care for children age 4-12, the extra care for children with mental or physical...

Ethical review	Approved WMO
Status	Recruitment stopped
Health condition type	Other condition
Study type	Observational non invasive

Summary

ID

NL-OMON35191

Source
ToetsingOnline

Brief title
Triage effect study

Condition

- Other condition
- Vision disorders

Synonym
overweight/obesity and psychosocial problems. However, The focus is on children with visual problems, these problems are not the subject of the research itself: the focus is on comparing triage and PGO.

Health condition

psychosociale stoornissen en overgewicht/obesitas

Research involving
Human

Sponsors and support

Primary sponsor: TNO
Source(s) of monetary or material Support: Via het ZonMW-programma Vernieuwing uitvoeringspraktijk JGZ

Intervention

Keyword: child health care, effect study, screening, triage

Outcome measures

Primary outcome

For the first research question:

- Amount of new incidences for PGO and triage:

o Visual problems

o Obese/overweight

o Psychosocial problems

- Age of the child when one of the three mentioned problems

is reported.

- Correctness of the reported problems for PGO and triage,

for children who are referred (for visual problems only if the child was

referred based on the gut feelings of the JGZ professionals rather than

according to the guideline).

- Use of health care: amount and types of contacts

o Show / no show

o All contacts with JGZ up until one year after the first time a problem

(visual, overweight/obesity or psychosocial) is identified by the JGZ

professional.

o Amount of children that are directed to external health care professionals

for visual problems, overweight/obesity and/or psychosocial problems

o Number of children already being in treatment for visual

problems, overweight/obesity and/or psychosocial problems before the

conventional group 2 and 7 examination

o Amount of children that are send to the JGZ outside of the conventional

group 2 and 7 examination (zij-instroom)

- Personal data of the children (zip code, education of parents, gender, place

of birth)

For research question 2:

- Costs of different care *products* (basic care and extra care) for triage and

PGO, in terms of time of staff * gross salary of employee.

o Activities within basic care and extra care of doctors, nurses, assistants,

secretariat, planning.

Secondary outcome

Additionally, the expert opinion of members of the advice committee concerning

the results of the study is collected.

Study description

Background summary

The main focus of the Youth Health Care (JGZ) is protecting and promoting the health and the physicial, mental and social development of young people (0-19

years old) through the Basic Child Health Care Tasks (basistaken) 0-19 (Ministry VWS 2003). All children are examined on a certain age by a JGZ doctor or nurse in a preventive health research (PGO). Some of the GGD*s (municipal health organizations) work according to triage, a new protocol that is developed by Hulpverlening Gelderland Midden (HGM, Bezem 2006; HGM 2008). For the same age groups as for the regular PGO, children are preselected by the doctor*s assistant based on their care needs. Children who appear healthy will not be sent to the doctor by the doctor*s assistant, children with care needs are send to the doctor for further examination. The aim of the triage method is to provide more efficient health care, by paying more attention to identify and monitor children that might be at risk.
The effects of the triage method in the JGZ are not studied yet. In 2009/2010 TNO, HGM, GGD Zuid-Holland West and Centrum Jeugdgezondheid conducted a pilot study in which the possibilities of (effect) research focused on the triage method were explored (Kocken, 2010). The pilot showed that the data that is registered by the GGD*s can be used for analysis. There is a urgent need for studies focused on the effects of the triage method. This study therefore is a follow-up of the small scale pilot study.

Study objective

The objective of this study is to gain insight in the effects of the triage method on the identification of children with mental or physical problems, the basic JGZ care for children age 4-12, the extra care for children with mental or physical problems and the costs of JGZ, in order to be able to make an informed choice concerning the way the JGZ care and the identification of children at risk by the JGZ can be organized.
The study will provide insight in:
1. The effectiveness of the identification of children with mental or physical problems in the JGZ basic care provided following the triage method and the regular PGO;
2. The basic and extra care that is provided to children by the GGD*s that work according to the triage method and the regular PGO;
3. Time and costs that are spend on basic care and extra care by the GGD*s that work according to the triage method and the regular PGO.

Research questions:
1. What is the effect of the triage method on the identification of children with mental or physical problems and care by the JGZ?
1a. Do JGZ professionals working according to the triage method find a similar percentage of children with mental or physical problems as JGZ professionals working according to the regular PGO?
1b. What is the effect of the triage method on the basic care and care for children with mental or physical problems in comparison to the regular PGO?
2. What is the effect of the triage method on the costs of care?
3. What recommendation can be made based on this study concerning the

implementation and use of the triage method?

Study design

This is an observational study, in which two methods, triage and PGO, are compared in terms of effectiveness (quality of care, time, costs).

The project planning contists of four phases.
Phase 1: April 2011 - May 2011

1a. Mapping the care process of the GGD*s: protocols and methods, use of digital files (digitaal dossier). Deciding which GGD*s can participate.
1b. Deciding what data should be collected. Analysis of digital files, in order to decide what data can be registered in the digital files and what data should be collected separately. Designing forms for separate data collection.
1c. Contact METC
1d. Organization of secretariat of project team and setting up advisory team.

Fase 2: May 2011 * November 2011

2a. Planning registration of necessary data
- Design of database (preferably within digital file) and if necessary registration form for identification of visual problems, overweight/obese and psychosocial problems
- Design of letter and selection of questionnaire for parents of children that are invited for triage/PGO or that are send to the JGZ outside of the conventional group 2 and 7 examination (zij-instroom)
- Design of non response questionnaire for JGZ professional
- Designing sample selection process for this study
- Designing sample selection process for CBCL questionnaire

2b. Planning of registration of health care use
- Designing method to measure health care use for children with visual problems, overweight/obese and psychosocial problems
- Designing questionnaire for JGZ professionals for examination on indication
- Designing questionnaire and letter for external care professional
2c. Designing registration of time and costs
2d. Organization of secretariat of project team and advisory committee

Phase 3: December 2011 * June 2012
3a. Briefing GGD*s
- Setting up briefing
- Setting up meeting for each GGD separately
- Provide GGD with necessary documents

3b. Sending CBCL questionnaire to parents
- Making sample for CBCL

- Sending questionnaires together with invitation letter for examination by GGD
3c. Collecting data (intake January/February, follow-up until one year after intake)
- Collecting CBCL
- Collecting questionnaires
- Collecting registration forms and registration in digital file
- Collecting non response data
- Measure costs of health care for triage/PGO

3d. Contact external care professional for questionnaires
3e. Delivering first dataset
3f. Process data
- Data entry
- Linking files
- Checking for missing data
- First analysis
3g. Organization of secretariat of project team and advisory committee

Phase 4: July 2012 * March 2013
4a. Delivering final data set
4b. Process data
- Data entry
- Linking files
- Checking for missing data
- Data analysis
4c. Analyse data
- Identification of mental and physical problems
- Use of health care
- Costs of health care
4d. Organization of focus group interview with parents
- Deciding what parents can participate
- Contacting parents
- Organizing focus group interview
- Reporting results focus group interview

4e. Organization of meeting with advise group to discuss results
- Formulating recommendations

4f. Writing report

4g. Organization of secretariat of project team and advisory committee

Study burden and risks

This study is an observational study, in which the regular health examination for children in group 2 and 7 is observed. The children experience no differences caused by this study.

A selection of the parents of the children will be asked to fill out a questionnaire (CBCL). One third of the parents of the children in the sample will receive this questionnaire, as well as the parents of children for which the JGZ professionals observe a psychosocial problem. Filling out the questionnaire takes approximately 15 minutes.

Contacts

Public
TNO

Wassenaarseweg 56
2333 AL Leiden
NL
Scientific
TNO

Wassenaarseweg 56
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Trial sites

Listed location countries

Netherlands

Eligibility criteria

Age
Children (2-11 years)

Inclusion criteria

Children that are invited for the regular health care examination of the Dutch Preventive Child Health Care:
- An equal distribution of children in class 2 and 7 of elementary school
- A distrubition based on SES scores (Social Economic Status) of the schools
o 3 classes with a high SES score
o 3 classes with an average SES score

o 4 classes with a low SES score
- An equal distribution of rural and urban schools
- +/- 16% of the total amount of participating childrens' parents are immigrants

Exclusion criteria

Children that are not in class 2 and 7 of elementary school

Study design

Design

Study type:	Observational non invasive
Intervention model:	Other
Allocation:	Non-randomized controlled trial
Masking:	Open (masking not used)
Control:	Active
Primary purpose:	Health services research

Recruitment

NL

Recruitment status:	Recruitment stopped
Start date (anticipated):	10-01-2012
Enrollment:	1720
Type:	Actual

Ethics review

Approved WMO

Date:	26-10-2011
Application type:	First submission
Review commission:	METC Leiden-Den Haag-Delft (Leiden) metc-ldd@lumc.nl

Approved WMO Date:	09-02-2012
Application type:	Amendment
Review commission:	METC Leiden-Den Haag-Delft (Leiden)
	metc-ldd@lumc.nl

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
CCMO	NL37417.058.11