The effect of an outreaching care programme on the number of hospitalisation days and readmissions in patients hospitalized two times or more in the previous 12 months.

Published: 03-11-2016
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Reducing the number of readmissions in the revolving door patients diagnosed with COPD by means of an outreaching care nurse.

Ethical review	Approved WMO
Status	Pending
Health condition type	Respiratory disorders NEC
Study type	Interventional

Summary

ID

NL-OMON43675

Source
ToetsingOnline

Brief title
Breaking through the revolving door syndrome

Condition

- Respiratory disorders NEC

Synonym
COPD emphysema

Research involving
Human

Sponsors and support

Primary sponsor: Medisch Centrum Alkmaar
Source(s) of monetary or material Support: unive

Intervention

Keyword: COPD, exacerbation, outreaching care, readmission

Outcome measures

Primary outcome

number of hospitalisation days and (re)admissions

Secondary outcome

quality of life of patients measured by the CCQ outcomes

Study description

Background summary

Expenses of an Hospitalisation are high. Relatively many hospitalizations are caused by a small number of patients (revolving door syndrome).
Dutch health policy aims on a reduction of the number of admission days by 25% in 2017.

Study objective

Reducing the number of readmissions in the revolving door patients diagnosed with COPD by means of an outreaching care nurse.

Study design

Randomised Clinical Trial

Intervention

An outreaching pulmonary nurse visits the patient during hospitalization to get acquainted and to make an appointment to visit the patient at home (2-3 days after discharge). In the next 6 months she will visit the patient at home up to 5 visits.

Study burden and risks

low burden and risks

Contacts

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Trial sites

Listed location countries

Netherlands

Eligibility criteria

Age
Adults (18-64 years)
Elderly (65 years and older)

Inclusion criteria

hospitalisation due to an exacerbation COPD
at least three times or more in the last 12 months

Exclusion criteria

unable to give consent
life expectancy less than 3 months

Study design

Design

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

Primary purpose: Prevention

Recruitment

NL

Recruitment status:	Pending
Start date (anticipated):	01-11-2016
Enrollment:	300
Type:	Anticipated

Ethics review

Approved WMO

Date:	03-11-2016
Application type:	First submission
Review commission:	METC Amsterdam UMC

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	NL53030.094.15