

An innovative peer assessment program to improve evidence based practice in physical therapy.

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Peer assessment, as a educational guideline implementation strategy, results in more improvement of evidence based reasoning than case based discussion.

Ethische beoordeling	Niet van toepassing
Status	Werving gestopt
Type aandoening	-
Onderzoekstype	Interventie onderzoek

Samenvatting

ID

NL-OMON21539

Bron

NTR

Verkorte titel

n.v.t.

Aandoening

Peer assessment, guideline adherence, evidence based practice, physical therapy

Ondersteuning

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Overige ondersteuning: Koninklijk Nederlands Genootschap voor Fysiotherapie (KNGF), Amersfoort.

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Onderzoeksproduct en/of interventie

Uitkomstmaten

Primaire uitkomstmaten

Outcome measures:

1. Evidence based clinical reasoning;

2. Self-reflection and insight;

3. Commitments to change.

Outcome measures are conducted at baseline and follow up after 6 months.

Measurement instruments:

1. Assessment of evidence based reasoning; an online questionnaire based on 4 clinical vignettes (cases). Evidence based reasoning is assessed by a set of closed questions and a 3-pt response format. Questions represent pre-set quality indicators for guideline adherence;

2. Self-reflection and insight scale (SRIS). At baseline participants will be asked to fill out the online Self-Reflection and Insight Scale (SRIS). The SRIS is a validated 20-item closed questionnaire in which respondents use a 5-point Likert scale. Commitments To Change Statements measurement. CTS statements have been successfully used in medicine to measure practice change in clinical practice. CTC statements are administered by an online open questionnaire.

Toelichting onderzoek

Achtergrond van het onderzoek

Introduction:

The Royal Dutch Society of Physical Therapy (KNGF) promotes the development and implementation of clinical guidelines for diagnoses and treatment. However, guideline adherence in daily practice appears to be limited. Several strategies have been developed to improve guideline adherence. Peer assessment is considered a promising implementation strategy.

Aim:

In this study the effectiveness of an innovative peer assessment program to implement physical therapy guidelines will be compared to the regular program case-discussion

program.

Design:

Exploratory clustered randomized controlled trial with 1) peer assessment (PA) as intervention and 2) traditional case based discussion as control.

Methods:

20 groups of Physical Therapists were randomly assigned to the intervention group (peer assessment) and the control group (case-based discussion).

Outcome measures were evidence based reasoning according to pre-set guideline quality indicators, commitment to change statements, reflection and insight, perceived guideline adherent practice.

The essence of the peer assessment method is that physical therapists assess their peers for competences in clinical reasoning and hands-on expertise for diagnosis and treatment. Moreover they judge the quality of their peers patient records.

Doel van het onderzoek

Peer assessment, as a educational guideline implementation strategy, results in more improvement of evidence based reasoning than case based discussion.

Onderzoeksopzet

Baseline: 01-02-2012;

Follow-up: 01-07-2012.

Onderzoeksproduct en/of interventie

Intervention:

The educational program for both groups contained four meetings of 3 hours over a period of 6 months, starting in February 2012. At baseline all participants received an introductory letter, a program schedule, a program manual and a link to the Practice Guidelines. At February 8, all participants received a link to the online baseline assessment. Follow up measurement will be in July 2012.

Intervention group:

The peer groups were provided with a manual that contained a highly structured program, guidelines for giving and receiving feedback and a scoring form, based on quality indicators.

During the peer assessment meetings, participants performed in the role of physical therapist and in the role of assessor. In the physical therapist role they demonstrated diagnostic and therapeutic reasoning and skills based on written cases. Cases covered the content domain of the guidelines on shoulder complaints.

In the assessor role they observed the performance of their peers and provided them of improvement feedback.

The peer assessment meetings were tightly scheduled and discussion time was limited. The peer assessment process was coached by a trained external assessor (n = 4) who presented short clinical cases on the spot (not in advance) accompanied by a small set of questions. The external assessor only provided additional feedback when necessary.

When the program was finalized, all participants received a written answering key to the questions by email.

Control group:

The case based discussion groups also received a program manual that was loosely structured and allowed for more discussion time. Detailed clinical cases and questions to guide the discussion process, were provided in advance to allow for preparation. There was no external coach to guide the discussion process. When the program was finalized, all participants received a written answering key to the questions by email.

Contactpersonen

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Deelname eisen

Belangrijkste voorwaarden om deel te mogen nemen (Inclusiecriteria)

All by KNGF registered Communities of Practice (COP's). The trial was limited to 20 COP's (10+10). After 20 applications of COP's, registration was closed. There were no restrictions for registration of COP's. The program started in February 2012.

Belangrijkste redenen om niet deel te kunnen nemen (Exclusiecriteria)

N/A

Onderzoeksopzet

Opzet

Type:	Interventie onderzoek
Onderzoeksmodel:	Parallel
Toewijzing:	Gerandomiseerd
Blinding:	Open / niet geblindeerd
Controle:	Geneesmiddel

Deelname

Nederland	
Status:	Werving gestopt
(Verwachte) startdatum:	01-02-2012
Aantal proefpersonen:	174
Type:	Werkelijke startdatum

Ethische beoordeling

Niet van toepassing

Soort:

Niet van toepassing

Registraties

Opgevolgd door onderstaande (mogelijk meer actuele) registratie

Geen registraties gevonden.

Andere (mogelijk minder actuele) registraties in dit register

Geen registraties gevonden.

In overige registers

Register	ID
NTR-new	NL3314
NTR-old	NTR3461
Ander register	KNGF : 8203
ISRCTN	ISRCTN wordt niet meer aangevraagd.

Resultaten

Samenvatting resultaten

Submission article of this study: January 2013.

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