

Population-oriented ICT-supported preventive care: Coping with local circumstances

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Computerized decision support (CDSS) for tailoring prevention to the local circumstances using the guidelines of the Dutch college of general practitioners has impact on preventive activities in the primary care setting

Ethische beoordeling	Positief advies
Status	Werving nog niet gestart
Type aandoening	-
Onderzoekstype	Interventie onderzoek

Samenvatting

ID

NL-OMON22726

Bron

NTR

Verkorte titel

SUNRISE

Aandoening

Prevention, Primary care, computerized decision support, Electronic health record

Ondersteuning

Primaire sponsor: Dr Jacobus T van Wyk

Prof Johan van der Lei

Dr Marc AM van Wijk

Mees Mosseveld

Overige ondersteuning: Non specific grant from ZonMW project 6100.0011

Onderzoeksproduct en/of interventie

Uitkomstmaten

Primaire uitkomstmaten

The change in preventive activities performed by general practitioners in the participating practices during the study compared to the year preceding the study. That is the number of preventive activities that should be performed against the number of preventive activities that were performed as determined by the SUNRISE system. This is logged in the EHR during the study.

Toelichting onderzoek

Achtergrond van het onderzoek

Prevention is usually positioned as a separate, disease-specific activity (prevention of diabetes mellitus, prevention of cardiac diseases, etc.). In daily practice, workers in the health care system and often even the target groups themselves have to integrate (or select between) these separate preventive activities and merge them with other activities (e.g., curative care). Information and Communication Technology (ICT) is increasingly used to support preventive tasks. The intervention strategies developed for this purpose, however, are also characterized by a fragmented, disease oriented approach (one software module for cardiovascular screening, another module for diabetes, etc) -- even though the risk factors for individual diseases may overlap. Ideally, ICT aids an individual practitioner to deliver an effective, integrated set of preventive activities tailored to the special characteristics of the population served by that individual practitioner. As illustrated by the separate disease-specific modules, current intervention strategies that use ICT to support preventive tasks are based on the prevention in the setting of an individual disease; these interventions do not address the issue of providing, in an environment characterized by limited resources, the optimal set of preventive activities for an individual population over all diseases. In this study we will investigate the impact of an ICT-based intervention that allows the practitioner to tailor preventive activities to a local population and to local procedures. The intervention takes as

starting point the generic activity prevention rather than prevention based on an individual disease.

Rather than support preventive care in the context of an individual disease, we propose an intervention

that supports selecting and tailoring prevention over multiple diseases to the characteristics of the local

population in the light of the local circumstances.

In this study we will conduct a randomized trial to study the feasibility of the intervention.

Doel van het onderzoek

Computerized decision support (CDSS) for tailoring prevention to the local circumstances using the guidelines of the Dutch college of general practitioners has impact on preventive activities in the primary care setting

Onderzoeksopzet

- 2007 - construction software
- up to 2008/03 - validation
- up to 2008/04 - recruitment
- 2008/04 - 2009/03 - trial
- 2009 Analysis

Onderzoeksproduct en/of interventie

Software module (SUNRISE) in the group randomized to receive intervention that alerts users to the preventive activities needed in their population based on the recommendations of the Dutch college of general practitioners. This module will be installed at the GP practices randomized to receive the intervention for 360 days or until GP stops using the HEThis GP information system. The preventative activities can be tailored to the local practice profile and practice preference.

Contactpersonen

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Deelname eisen

Belangrijkste voorwaarden om deel te mogen nemen (Inclusiecriteria)

1. Primary care practices in the Netherlands that use the HetHIS (Microbias) EHR to record patient encounters

Belangrijkste redenen om niet deel te kunnen nemen (Exclusiecriteria)

1. Practices that have been working with the HetHIS EHR for less than a year preceding enrollment
2. Practices that use paper to record patient interactions

Onderzoeksopzet

Opzet

Type:	Interventie onderzoek
Onderzoeksmodel:	Parallel
Toewijzing:	Gerandomiseerd
Blinding:	Enkelblind

Controle: Placebo

Deelname

Nederland
Status: Werving nog niet gestart
(Verwachte) startdatum: 01-04-2008
Aantal proefpersonen: 50
Type: Verwachte startdatum

Ethische beoordeling

Positief advies
Datum: 17-03-2008
Soort: Eerste indiening

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	NL1182
NTR-old	NTR1227
Ander register	ZONMW : 6100.0011
ISRCTN	ISRCTN wordt niet meer aangevraagd

Resultaten

Samenvatting resultaten

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dermatitis in the Netherlands: an international comparison. British Journal of Dermatology 2002;147(4):716-24.

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