

Acute Geriatric Community Hospital (AGCH) - in Dutch: 'WijkKliniek'

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In acutely hospitalized patients of 65 years and above admission to the AGCH will have a lower 3-month readmission rate compared to hospital care as usual.

Ethische beoordeling	Positief advies
Status	Werving gestart
Type aandoening	-
Onderzoekstype	Observationeel onderzoek, zonder invasieve metingen

Samenvatting

ID

NL-OMON26196

Bron

Nationaal Trial Register

Verkorte titel

Acute Geriatric Community Hospital (AGCH) - in Dutch: 'WijkKliniek'

Aandoening

Community hospitals, geriatric conditions, intermediate care, health care provision.

Ondersteuning

Primaire sponsor: Amsterdam University Medical Centers, location Academic Medical Center (AMC), Amsterdam

Overige ondersteuning: Parties providing funding and/or providing care at AGCH: Cordaan; Zilveren Kruis; Amsterdam UMC, location AMC

Onderzoeksproduct en/of interventie

Uitkomstmaten

Primaire uitkomstmaten

The primary outcome measure is the 3-month unplanned readmission rate to the AGCH or

hospital.

Toelichting onderzoek

Achtergrond van het onderzoek

In 2018 the first geriatrician-led care Acute Geriatric Community Hospital (AGCH) in Dutch 'WijkKliniek' was introduced in the Netherlands. Care at the AGCH is focused on: treatment of acute disease, comprehensive geriatric assessment, setting patient-led goals, early rehabilitation and stream-lined transitions of care. This prospective cohort study compared with two historical control groups will investigate the effectiveness of care delivery at the AGCH on patient outcomes, by comparing the AGCH to usual hospital care. Propensity score matching will correct for potential population differences. The primary outcome is the three month unplanned readmission rate. Secondary outcomes include: functional decline, time to readmission, and all-cause mortality. Measurements will be conducted at baseline, during admission, at discharge and at one, three and six months after discharge. Furthermore, an economic evaluation and qualitative process evaluation to assess facilitators and barriers for implementation is planned. We aim to recruit 576 patients in this study. The historic control groups consist of the: Transitional Care Bridge study (674 participants recruited between 2010-2014) and the Hospital-ADL study (401 participants recruited between 2015-2017).

Doel van het onderzoek

In acutely hospitalized patients of 65 years and above admission to the AGCH will have a lower 3-month readmission rate compared to hospital care as usual.

Onderzoeksopzet

All outcomes will be measured at one, three and six months after discharge.

Onderzoeksproduct en/of interventie

Patients admitted to the AGCH will receive a full Comprehensive Geriatric Assessment (CGA) and comprehensive multidisciplinary care, focusing on early mobilization and discharge planning.

Contactpersonen

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Wetenschappelijk

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Deelname eisen

Belangrijkste voorwaarden om deel te mogen nemen (Inclusiecriteria)

Patients who have been admitted to the AGCH can be included in the study, admission is based on following criteria:

1. Patients requiring hospital admission for both a common medical problem as a geriatric problem;
2. 65 years and older;
3. Living in the catchment area around the Amsterdam UMC, location AMC.
4. Not requiring additional diagnostics or hospital treatment that cannot be provided at the AGCH.

Belangrijkste redenen om niet deel te kunnen nemen (Exclusiecriteria)

Patients are excluded from the study if: 1) the attending physician judges that the patient is too ill to participate e.g. is terminally ill 2) the patient or legal representative does not consent to participate. 3) the patient or legal representative does not speak or understand Dutch or English.

Onderzoeksopzet

Opzet

Type:	Observationeel onderzoek, zonder invasieve metingen
Onderzoeksmodel:	Anders
Toewijzing:	N.v.t. / één studie arm
Blinding:	Open / niet geblindeerd
Controle:	N.v.t. / onbekend

Deelname

Nederland	
Status:	Werving gestart
(Verwachte) startdatum:	01-02-2019
Aantal proefpersonen:	576
Type:	Verwachte startdatum

Voornemen beschikbaar stellen Individuele Patiënten Data (IPD)

Wordt de data na het onderzoek gedeeld: Nog niet bepaald

Toelichting

N/A

Ethische beoordeling

Positief advies	
Datum:	24-07-2019
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

NTR-new

Ander register

ID

NL7896

METC AMC : W17_474 # 19.001

Resultaten

Samenvatting resultaten

N/A