

Improving communication and cooperation between obstetrical professionals in the Netherlands

Gepubliceerd: 28-10-2013 Laatste bijgewerkt: 18-08-2022

We hypothesize that multidisciplinary team training, to support implementation of a structured referral between obstetrical professionals, will result in better collaboration and thereby to a decrease in adverse perinatal outcomes

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

Samenvatting

ID

NL-OMON26515

Bron

NTR

Verkorte titel

LOCoMOTive study: Local Obstetrical Collaboration Multidisciplinary On-site Team training effectiveness

Aandoening

Perinatal morbidity and mortality / Perinatale morbiditeit en mortaliteit

Maternal morbidity and mortality / Maternale morbiditeit en mortaliteit

Deliveries (in particular those involving unplanned referral from primary to secondary- or tertiary care) / Bevallingen (betreffende een ongeplande overdracht van eerstelijns zorg naar tweede- of derdelijns zorg)

Ondersteuning

Primaire sponsor: VU medical Centre

Overige ondersteuning: ZonMw

Onderzoeksproduct en/of interventie

Uitkomstmaten

Primaire uitkomstmaten

Perinatal and maternal morbidity and mortality rates

Toelichting onderzoek

Achtergrond van het onderzoek

The obstetrical care system in the Netherlands is performing suboptimal. Building on the same level of scientific knowledge, other Western-European countries have lower perinatal mortality rates. The objective of this research project is to improve perinatal outcomes by improving the quality of the referral process as well as the collaboration between professionals involved in the chain of obstetrical care. Moreover, a multidisciplinary team training aimed at the implementation of structured referral procedures will be developed and tested.

The research design is a longitudinal multicentre one, using continuous measurements of the primary outcomes and pre- and post-intervention measurements for other outcome measurements (see information above). The effects of the multidisciplinary team training will impact the organisation of obstetrical care at different levels. Therefore, Kirkpatrick's framework was adopted to measure outcomes at the level of the participants in the intervention, changes in attitudes, knowledge, and skills, changes in behaviour, and changes in patient outcomes and organisational practice. The start of the study is January 2013, the first multidisciplinary team training sessions for LOCs will be held in October 2013, the follow-up period will extend until June 2016.

Doel van het onderzoek

We hypothesize that multidisciplinary team training, to support implementation of a structured referral between obstetrical professionals, will result in better collaboration and thereby to a decrease in adverse perinatal outcomes

Onderzoekopzet

The intervention period, including the implementation and follow-up phase, takes 24 months for each LOC. For each LOC, five measurement periods are planned

Pre intervention: SAQ, IPCMS and patient satisfaction after intrapartum referral [timepoint: 3 months]

Post intervention: evaluation questionnaire [6 months], Vignettes study [6 / 24 months], Monitoring communication during referrals and measuring patient satisfaction after intrapartum referral [8 / 12 / 24 months], SAQ and IPCMS [12 / 24 months]

Continues data; Perinatal and maternal morbidity and mortality rates

Onderzoeksproduct en/of interventie

Five LOCs participate in the study intervention using a stepped wedge design. The intervention is a stepwise implementation programme of the SBAR (Situation - Background - Assessment - Recommendation) tool for structured referrals, using a multifaceted implementation strategy. A crucial part of the implementation strategy is a multidisciplinary team training based on crew resource management principles. The intervention period, including the implementation and follow-up phase, takes 24 months for each LOC. At 3-month time intervals a new LOC starts with the intervention.

Contactpersonen

Publiek

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Wetenschappelijk

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Deelname eisen

Belangrijkste voorwaarden om deel te mogen nemen (Inclusiecriteria)

All patients of five Local Obstetrical Collaboratives (LOCs) in the Netherlands; Including all antenatal and perinatal unplanned referrals by primary care midwives to clinical care in a secondary or tertiary hospital after 22 weeks of gestation and up until 2 hours postpartum

Belangrijkste redenen om niet deel te kunnen nemen (Exclusiecriteria)

All antenatal and perinatal unplanned patient referrals by primary care midwives to clinical care in a secondary or tertiary hospital before 22 weeks of gestation and more than 2 hours postpartum

Onderzoeksopzet

Opzet

Type:	Interventie onderzoek
Onderzoeksmodel:	Anders
Toewijzing:	Gerandomiseerd
Blindering:	Open / niet geblindeerd
Controle:	N.v.t. / onbekend

Deelname

Nederland	
Status:	Werving nog niet gestart
(Verwachte) startdatum:	01-11-2013
Aantal proefpersonen:	10000
Type:	Verwachte startdatum

Ethische beoordeling

Positief advies

Datum: 28-10-2013

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	NL4013
NTR-old	NTR4256
Ander register	ZonMw : 209020001
ISRCTN	ISRCTN wordt niet meer aangevraagd.

Resultaten

Samenvatting resultaten

N/A