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Preventive effects of Transmural Integrated Care (TIC, 'ketenzorg') on disabled persons within homes of the elderly

Submission date 14/02/2006	**Recruitment status** No longer recruiting	[_] Prospectively registered [X] Protocol [_] Statistical analysis plan [X] Results [_] Individual participant data
Registration date 14/02/2006	**Overall study status** Completed	
Last Edited 28/09/2012	**Condition category** Other	

Plain English summary of protocol
Not provided at time of registration

Contact information

Type(s)
Scientific

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Additional identifiers

EudraCT/CTIS number

IRAS number

ClinicalTrials.gov number

Secondary identifying numbers
NTR544

Study information

Scientific Title

Acronym
Pikov

Study objectives
Transmural integrated care is effective on quality of life, functional health and disability.

Ethics approval required
Old ethics approval format

Ethics approval(s)
Received from local medical ethics committee

Study design
Multicentre randomised open label active controlled crossover group trial

Primary study design
Interventional

Secondary study design
Randomised controlled trial

Study setting(s)
Other

Study type(s)
Quality of life

Participant information sheet

Health condition(s) or problem(s) studied
Activities of daily living (ADL) disabled, chronic disorder

Interventions
TIC is operationalised in three sequential elements:
1. An in home multidimensional assessment is carried out by trained staff of the patient's functional health and care needs with the resident assessment instrument (RAI)
2. The assessment outcomes are discussed in a multidisciplinary consultation (MC). The MC presents individualised care plans to manage or treat modifiable disabilities and risk factors.
3. Consultation by a nursing home physician and psychologist is offered to the frailest residents at risk for nursing home admission (according to the RAI)

The control subjects receive care as usual.

Intervention Type
Other

Phase
Not Specified

Primary outcome measure
1. Quality adjusted life years
2. Functional health
3. Disability
4. Cost effectiveness

Secondary outcome measures
1. Admission to hospital and nursing home
2. Mortality
3. Patients care satisfaction

Overall study start date
01/01/2006

Completion date
01/01/2008

Eligibility

Key inclusion criteria
Persons who have at least one chronic disorder and are ADL-disabled.

Participant type(s)
Patient

Age group
Senior

Sex
Both

Target number of participants
166

Key exclusion criteria
Terminally ill

Date of first enrolment
01/01/2006

Date of final enrolment
01/01/2008

Locations

Countries of recruitment

Netherlands

Study participating centre
Westfriese Zorggroep de Omring
Hoorn
Netherlands
1624 AB

Sponsor information

Organisation
West Fresian Area Care Group (Westfriese Zorggroep de Omring) (Netherlands)

Sponsor details
Lindendael Nursing Home (Verpleeghuis Lindendael)
Koepoortsweg 35
Hoorn
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1624 AB

Sponsor type
Hospital/treatment centre

ROR
https://ror.org/0180s3q15

Funder(s)

Funder type
Hospital/treatment centre

Funder Name
VU University Medical Centre (VUMC) (Netherlands)

Funder Name
Netherlands Organisation for Health Research and Development (ZonMw) (Netherlands)

Alternative Name(s)
Netherlands Organisation for Health Research and Development

Funding Body Type
Private sector organisation

Funding Body Subtype
Other non-profit organizations

Location
Netherlands

Funder Name
West Fresian Area Care Group (Westfriese Zorggroep de Omring) (Netherlands)

Results and Publications

Publication and dissemination plan
Not provided at time of registration

Intention to publish date

Individual participant data (IPD) sharing plan

IPD sharing plan summary
Not provided at time of registration

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Protocol article	protocol	07/07/2008		Yes	No
Results article	results	09/08/2011		Yes	No
Other publications	cost-effectiveness analysis	01/08/2012		Yes	No