

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 ☒ Protocol
Registration date 14/02/2006	Overall study status Completed	☐ Statistical analysis plan ☒ Results
Last Edited 28/09/2012	Condition category Other	☐ Individual participant data

Plain English summary of protocol

Not provided at time of registration

Contact information

Type(s)

Scientific

Contact name

Dr M. Boorsma

Contact details

Westfriese Zorggroep de Omring
Verpleeghuis Lindendael
Koepoortsweg 35
Hoorn
Netherlands
1624 AB
ma.boorsma@wxs.nl

Additional identifiers

Protocol serial number

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

Primary study design

Interventional

Study design

Multicentre randomised open label active controlled crossover group trial

Study type(s)

Quality of life

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(s)

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

Key secondary outcome(s)

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

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

Healthy volunteers allowed

No

Age group

Senior

Sex

All

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 (Westfrieze Zorggroep de Omring) (Netherlands)

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 (Westfrieze Zorggroep de Omring) (Netherlands)

Results and Publications**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?
Results article	results	09/08/2011		Yes	No
Protocol article	protocol	07/07/2008		Yes	No
Other publications	cost-effectiveness analysis	01/08/2012		Yes	No