

The effective components of feedback from Routine Outcome Monitoring (ROM) in youth mental health care.

No registrations found.

Ethical review	Positive opinion
Status	Pending
Health condition type	-
Study type	Interventional

Summary

ID

NL-OMON29233

Source

Nationaal Trial Register

Brief title

-

Health condition

randomized controlled trial (RCT)/gerandomiseerd vergelijkend onderzoek, Routine Outcome Monitoring (ROM)/monitoren van zorg, feedback, children/kinderen, adolescents/adolescenten, parents/ouders, mental health care/geestelijke gezondheidszorg (GGZ), clinical support tools, treatment support measure (TSM), case consultation/intervisie, symptom severity/ernst van de klachten, quality of life/kwaliteit van leven, satisfaction/tevredenheid, number of sessions/aantal sessies, length of treatment/duur van de behandeling, dropout/uitval, not on track (NOT)

Sponsors and support

Primary sponsor: Radboud University Nijmegen Medical Centre, Pro Persona Jeugd Arnhem, Pro Persona Jeugd Ede, Pro Persona Jeugd Nijmegen, Pro Persona Jeugd Tiel.

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Source(s) of monetary or material Support: ZON-MW, The Netherlands Organization for Health Research and Development

Intervention

Outcome measures

Primary outcome

Our primary outcome is symptom severity and will be measured with the Dutch version of the Strengths and Difficulties Questionnaire (SDQ).

Secondary outcome

- 1) Quality of life : measured with the KIDSCREEN-27 parent version and the KIDSCREEN-52 child-adolescent version.
- 2) Satisfaction with treatment: measured with the Jeugdthermometer child version and the Jeugdthermometer parent versions about the treatment of the child and about the parenting skills training.
- 3) Number of sessions: will be counted for each client.
- 4) Length of treatment: will be registered in days for each client.
- 5) Dropout: will be calculated as the percentage of clients that abandon treatment (registered as unilateral decision to end treatment) in each feedback group.

We will also examine the role of being not on track (not responding to treatment).

Study description

Background summary

The aim of our study is to investigate several potential effective components of feedback from ROM in youth mental health care in the Netherlands. We will examine three different forms of feedback through a three-arm parallel group randomized controlled trial. 432 children and adolescents (age 4 to 17 years) and their parents, who are referred to mental health care institution Pro Persona, will be randomly assigned to the feedback conditions. Randomization will be stratified by age of the child or adolescent (4-11 and 12-17 years old) and department (Arnhem, Ede, Nijmegen and Tiel). All participants fill out questionnaires at the start of treatment, one and a half months after the start of treatment, each three months during treatment and at the end of treatment. Participants in the second and third feedback condition fill out an additional questionnaire regarding possible obstacles to a good outcome. In condition 1, clinicians receive basic feedback regarding symptoms and quality of life (control condition). In condition 2, the feedback of condition 1 is extended with feedback about the results of the additional questionnaire and with practical suggestions (youth clinical

support tools). In condition 3, the feedback of condition 2 is discussed with colleagues on the basis of a standardized format for case consultation. The primary outcome is symptom severity and secondary outcomes are quality of life, satisfaction with treatment, number of sessions, length of treatment and dropout. We will also examine the role of being not on track (not responding to treatment).

Study objective

Routine Outcome Monitoring (ROM) refers to regular measurements of clients' progress in clinical practice, aiming to evaluate and (if necessary) adapt treatment. Clients fill out questionnaires and clinicians receive feedback about the results. Studies concerning feedback in youth mental health care are extremely scarce. The effects of feedback, the importance of specific aspects of feedback and the mechanisms behind the effects of feedback are unknown. The aim of our study is to investigate several potential effective components of feedback from ROM in youth mental health care in the Netherlands. We compare three different feedback conditions. We expect that in the second and third feedback condition symptoms of children and adolescents decrease more, symptoms of children and adolescents decrease faster, quality of life of children and adolescents increases more and children, adolescents and parents are more satisfied at the end of treatment than in the first feedback condition (feedback as usual). Besides that, we expect that in the second and third feedback condition treatments are shorter and contain fewer sessions. Also, we expect that in the second and third feedback condition children, adolescents and parents drop out of treatment less often. Furthermore, we expect the largest effects of feedback in the third feedback condition. Additionally, we expect that feedback is most effective when children, adolescents and parents are not on track (NOT), that is not progressing well through treatment.

Study design

- 1) At the start of treatment (baseline assessment)
- 2) One and a half months after the start of treatment
- 3) Each three months during treatment
- 4) At the end of treatment

Intervention

We will examine three different forms of feedback from ROM in youth mental health care through a three-arm parallel group randomized controlled trial. Randomization will be stratified by age of the child or adolescent (4-11 and 12-17 years old) and department (Arnhem, Ede, Nijmegen and Tiel). All children, adolescents and parents fill out questionnaires at the start of treatment, one and a half months after the start of treatment, each three months during treatment and at the end of treatment. Children, adolescents and parents in the second and third feedback condition fill out an additional questionnaire

regarding possible obstacles to a good outcome that the client may be facing. Clinicians receive feedback about the results and have to discuss this feedback with their clients during treatment. In condition 1, clinicians receive basic feedback regarding symptoms and quality of life of the client (feedback as usual/control condition). In condition 2, the feedback of condition 1 is extended with feedback about the results of the additional questionnaire and with practical suggestions to improve treatment (youth clinical support tools). In condition 3, the feedback of condition 2 is discussed with colleagues on the basis of a standardized format for case consultation.

Contacts

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Eligibility criteria

Inclusion criteria

The study takes place in all outpatient youth departments (in Arnhem, Ede, Nijmegen and Tiel) of a large mental health care institution in the eastern part of The Netherlands. All families with children and adolescents between 4 and 17 years that are referred to these youth departments receive information about the study. If the child is between 4 and 11 years old, then parents are approached to participate in the study. If the child or adolescent is between 12 and 17 years old, then the child or adolescent is approached to participate in the study. We will include children and adolescents with all kinds of mental health problems (e.g developmental disorders, anxiety disorders and mood disorders) and all kinds of treatment (e.g individual treatment and group treatment, cognitive-behavioral treatment and solution-focused treatment, frequent or irregular treatment) in the study. The children, adolescents and parents that agree to participate sign an informed consent form.

Exclusion criteria

The only exclusion criterion is insufficient understanding of the Dutch language by the child, adolescent or parents.

Study design

Design

Study type:	Interventional
Intervention model:	Parallel
Allocation:	Randomized controlled trial
Masking:	Open (masking not used)
Control:	Active

Recruitment

NL	
Recruitment status:	Pending
Start date (anticipated):	01-01-2014
Enrollment:	432
Type:	Anticipated

Ethics review

Positive opinion	
Date:	04-11-2013
Application type:	First submission

Study registrations

Followed up by the following (possibly more current) registration

No registrations found.

Other (possibly less up-to-date) registrations in this register

No registrations found.

In other registers

Register ID

NTR-new NL4090

NTR-old NTR4234

Other ECG2012-1304-031 (Radboud University Nijmegen) : 80-82470-98-006-08
(ZonMw)

ISRCTN ISRCTN wordt niet meer aangevraagd.

Study results

Summary results

N/A