Trial Description

Title

Digital communication assistance tool for non-German speaking patients in border refugee camp Friedland - a feasibility study

Trial Acronym

DICTUM-Friedland

URL of the trial

http://www.dictum.med.uni-goettingen.de/index-en.html

Brief Summary in Lay Language

Communication with patients who cannot speak German or speak at best very little is considered one of the biggest challenges facing health care professionals in Germany.

The digital communication assistance tool facilitates collecting a structured medical history from patients in 13 languages and dialects. This happens by giving intuitive input on a Tablet PC, before meeting the doctor (e.g. while in the waiting room). Right after that the doctor gets a translated summary of the history.

The digital communication assistance tool will be tested and evaluated in the primary healthcare center at transit border camp Friedland.

A comparison of persons who use this tool and those who do not use it (people who do not speak any of the 13 languages or do not want for other reasons) may serve to illustrate to what extent the tool improves mutual understanding.

Brief Summary in Scientific Language

Communication with patients who cannot speak German or speak at best very little is considered one of the biggest challenges facing health care professionals in Germany.

The digital communication assistance tool facilitates collecting a structured medical history from patients in 13 languages and dialects. This happens by giving intuitive input on a Tablet PC, before meeting the doctor (e.g. while in the waiting room). The tool can automatically encode the consultation reason as ICPC-2 code on the basis of the data entered by the patient. Right after that the doctor gets a translated summary of the history.

The digital communication assistance tool will be tested and evaluated in the primary healthcare center at transit border camp Friedland. The aim will be to analyze the extent to which the digital communication assistance tool improves mutual understanding. The rates of re-consultation as well as the total costs for the general medical care serve as indicators. In addition, we gather the subjective impression of practitioners and patients by means of different questionnaires and several qualitative interviews. Due to decreasing numbers of refugees and existing recruiting problems, we had to adjust the initially estimated number of cases from 2000 to a calculated number of cases of 880.

Do you plan to share individual participant data with other researchers?
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[---]*

Description IPD sharing plan
[---]*

Organizational Data

- DRKS-ID: DRKS00013076
- Date of Registration in DRKS: 2017/09/29
- Date of Registration in Partner Registry or other Primary Registry: [---]*
- Investigator Sponsored/Initiated Trial (IST/IIT): yes
- Ethics Approval/Approval of the Ethics Committee: Approved
- (leading) Ethics Committee Nr.: 16/3/17, Ethik-Kommission der Medizinischen Fakultät der Georg-August-Universität Göttingen

Secondary IDs

- Universal Trial Number (UTN): U1111-1202-5973

Health condition or Problem studied

- Free text: primary medical care

Interventions/Observational Groups

- Arm 1: Patients who speak one of the 13 available languages and use the digital communication assistance tool for the purpose of medical history
- Arm 2: Patients who do not use the digital communication assistance tool because they do not speak any of the 13 available languages or for other reasons

Characteristics

- Study Type: Interventional
- Study Type Non-Interventional: [---]*
- Allocation: Non-randomized controlled trial
- Blinding: [---]*
Study Type: **Interventional**  
Study Type Non-Interventional: [---]*  
Allocation: **Non-randomized controlled trial**  
Blinding: [---]*  
- Who is blinded: [---]*  
- Control: **Control group receives no treatment**  
- Purpose: **Other**  
- Assignment: **Other**  
- Phase: **N/A**  
- Off-label use (Zulassungsüberschreitende Anwendung eines Arzneimittels): **N/A**

### Primary Outcome

**What?**: Applicability and reliability of the digital communication assistance tool  
**What exactly?** Test run without patients: Troubleshooting and verification upon the completeness regarding the questions for medical history  
**When?**: 09/2017 (before use in patients)  
**How?**: Feedback from doctors (in writing, by telephone and verbal = no scientific question only feedback)  

AND

**What exactly?** Consistency of medical impression (clinical picture) and software-generated ICPC-2 code  
**When?**: During the entire duration of the project  
**How?**: Comparison of the ICPC-2 codes generated by the tool and the medical diagnoses (ICD10)

### Secondary Outcome

**What?** Rate of re-consultation, mutual understanding & costs  
**When?**: One year after starting the intervention (11/2018, for all patients)  
**How?**: Registration at each consultation; questionnaires for patients, doctors and practice staff, qualitative interviews with doctors and practice staff

### Countries of recruitment

- **DE Germany**

### Locations of Recruitment
Recruitment

- Planned/Actual: **Actual**
- (Anticipated or Actual) Date of First Enrollment: **2017/11/01**
- Target Sample Size: **880**
- Monocenter/Multicenter trial: **Monocenter trial**
- National/International: **National**

Inclusion Criteria

- Gender: **Both, male and female**
- Minimum Age: **no minimum age**
- Maximum Age: **no maximum age**

Additional Inclusion Criteria

**People who use the service of the First Aid Station at the transit border camp Friedland**

Exclusion criteria

**Patients who do not understand any of the 13 languages / dialects can only participate in the control group**

Addresses

- **Primary Sponsor**

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- **Contact for Scientific Queries**

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Sources of Monetary or Material Support

- Private sponsorship (foundations, study societies, etc.)

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- Public funding institutions financed by tax money/Government funding body
  (German Research Foundation (DFG), Federal Ministry of Education and
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Status

- Recruitment Status: Recruiting complete, follow-up complete
- Study Closing (LPLV): 2018/12/31

Trial Publications, Results and other documents