

Evaluation of the rate of outgoing GP correspondence from a Dublin adult community psychiatric service: a completed audit cycle

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Background

There is limited data or specific guidance on the frequency of general practitioner (GP) update letters sent by outpatient psychiatry clinics. In our clinic, we have a standard of sending a GP update letter at minimum once every six months and routinely following a medication change.

Objectives

Audit of the rate of letters sent to GPs from an urban, Dublin, adult community psychiatric outpatient clinic before and during the COVID-19 pandemic.

Methods

Retrospective analysis of the rate of GP update letters sent during a six month period in 2019 from a random sample of patient files. Compliance was determined against the clinic's minimum standard for GP correspondence. Following the initial audit, as an intervention, this standard was emphasised to new doctors being inducted to the clinic. The audit was repeated for 2020. Due to the use of telepsychiatry in 2020 during the COVID-19 pandemic, we stratified the results for in-person and telephone consultations.

Results

122 files were reviewed for 2019 and 114 for 2020. In 2019, 67/122 (54.9%) contained a letter to the patient's GP compared to 45/114 (39.4%) in 2020. 72/122 (59%) patients in 2019 had medication changes and 50/72 (69.4%) had a GP update letter compared to 25/33 (75.8%) in 2020.

In 2020, 60/114 (52.6%) patients had at least one in-person review. The remainder had only telephone reviews. For the former group, 40/60 (66.7%) had a GP update letter compared to 5/54 (9.3%) of patients reviewed only by telephone. 28/60 (46.7%) patients seen in-person had a medication change with 23/28 (82.1%) of whom also having a GP update letter in their file. 5/54 (9.3%) of patients reviewed by telephone had medication changes, 2/5 (40%) of whom had a GP update letter.

Table 1 Proportion of files containing letter or medication changes during periods examined (n=no of files)

	Pre-pandemic (n=122)	During pandemic (total) (n=114)	During pandemic (patients seen in-person) (n=60)	During pandemic (patients reviewed only by phone) (n=54)
Letter in file	67 (54.9%)	45 (39.5%)	40 (66.7%)	5 (9.3%)
Medication change	72 (59%)	33 (28.9%)	28 (46.7%)	5 (9.3%)

Table 2 Proportion of files containing medication change during periods examined also including outgoing GP correspondence (n=no of files with medication change)

	Pre-pandemic (n=72)	During pandemic (total) (n=25)	During pandemic (patients seen in-person) (n=28)	During pandemic (patients reviewed only by phone) (n=5)
Medication change AND letter	50 (69.4%)	25 (75.8%)	23 (82.1)	2 (40%)

Conclusions

Lack of quality medical correspondence is correlated with increased errors, delays in care and patient dissatisfaction¹. We found that adherence to the clinic's standard was suboptimal in both groups sampled with an overall decrease in the rate of letters sent in 2020. This was likely impacted by service disruption during the pandemic, including the use of telepsychiatry, which was associated with fewer letters sent. However, it is important to note that this group of patients may have had fewer appointments and likely represented a more stable cohort. Nevertheless, this report highlights the importance of reviewing the frequency of correspondence to GPs by community psychiatric clinics to support safe clinical practice.

References

1. Vermeir P, Vandijck D, Degroote S, Peleman R, Verhaeghe R, Mortier E, Hallaert G, Van Daele S, Buylaert W, Vogelaers D. Communication in healthcare: a narrative review of the literature and practical recommendations. *International journal of clinical practice*. 2015 Nov;69(11):1257-67.

Consent was obtained for completion of this clinical audit.

