Copying general practitioner referral letters to patients: a study of patients' views

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SUMMARY

Over the past decade there has been a significant shift towards greater involvement of patients in their health care and this has highlighted many areas relating to doctor–patient communication. One area of communication that has not been extensively researched is the referral letter between general practitioners (GPs) and their patients. This small study of patients' views suggests that patients value receiving a copy of their GP outpatient letter, appreciating greater understanding of, and involvement in, the referral process.

Keywords: patients' views; doctor-patient relationships; referral letters.

Introduction

OVER the past decade there has been a shift towards greater public accountability within the health service and more patient involvement in decisions affecting their health and health care. It has been argued that one of the benefits of the 'Bristol Case' may be a move towards patients being treated as equals in discussion of their health care. Provision of appropriate information for patients is critically important but research has yet to clarify the type of information that is most helpful to patients in making decisions about their health.

The communication between doctors and patients in relation to referral has not been the focus of extensive investigation. One study of 420 patients referred to hospital demonstrated increased patient satisfaction when patients were involved in decision-making and provided with information.⁴ Another study documented satisfaction when patients had their clinic letter dictated in front of them.⁵ However, a recent study has not shown any difference in attendance rates if general practitioner (GP) referral letters are copied to patients.⁶ The aim of this pilot study was to explore the views of patients on the potential advantages and disadvantages of receiving a copy of their GP's referral letter when they are referred to a hospital outpatient clinic.

Method

This was a small, qualitative study involving two GPs and 20 patients in a practice of 10 000 patients serving a population of mixed affluence and deprivation. Over a two-week period the doctors invited a selection of patients — covering a range of problems, ages, and social class backgrounds — to participate in the study. All these patients received a copy of their referral letter with a covering letter explaining again the purpose of the research and an invitation to contact the referring GP if they had any concerns about the content of the letter.

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A research assistant with nurse training, but unconnected with the practice, carried out telephone interviews with the patients using a fixed schedule of open-ended questions on receipt of the letter and after they had attended their appointment. Responses were recorded verbatim and subjected to thematic analysis.

Results

Seven men and 13 women took part in the study (age range = 3 to 78 years). Fourteen different consultants were involved in nine specialties. Patients came from a broad range of socioeconomic groups as judged by their housing location. Only two patients were deliberately excluded from the study by the doctors — one requesting termination of pregnancy in distressing circumstances and the other with early onset dementia. No patients refused to participate in the study.

Overall, there was a high level of satisfaction with the referral letters as written, with few patients reporting inaccuracies, omissions or terms they could not understand to the researcher. Most patients made specific positive comments about receiving the letter in both the interviews — several mentioned 'appreciating greater involvement' in their own care. After the clinic visit, all the patients felt satisfied with the communication between the clinic doctor and themselves and thought that seeing a copy of the referral letter had been useful. Few patients discussed the letter with the hospital doctor but most commented that it had helped them understand what was going on during the consultation and what to expect. A 72-year-old woman referred with suspected breast cancer reported:

'I thought the letter was a good idea because I knew exactly what had been written about me. I knew there was a chance that I had cancer in my breast before the appointment so I wasn't shocked when the consultant began talking about radiotherapy and chemotherapy. I think it's a good idea because it really put my mind at rest.'

A number of patients expressed reservations about routinely copying letters to all patients, feeling some exceptions would have to be made. They suggested that patients could worry unnecessarily about a GP's unconfirmed suspicions, especially if they had to wait a few weeks for the clinic appointment.

Discussion

This study, although too small to be the basis for any generalisation, highlights some important issues that inform the current debate on 'partnership with patients'. Patients certainly valued receiving a copy of their referral letter. However, if this was to become routine practice issues of readability, use of medical terminology and workload implications would need to be addressed. The two doctors involved in this study did not report any significant difficulties in adjusting their writing style for patients or any great increase in time needed to write the letters or respond to patient queries. However, all these issues will require further study in which the views of larger numbers of patients, GPs, and hospital consultants are explored in greater depth. There are also issues for hospital consultants, a few of

whom were interviewed in a small telephone follow-up to this study. Several wondered how suspicions of serious disease could be successfully communicated to the consultant without unnecessarily worrying the patient. Others suggested that editing a letter to allow patient comprehension might reduce its usefulness to the hospital doctor.

This study does indicate that these patients appreciated receiving a copy of their GP referral letter, but it also raises a number of questions for doctors and patients should copying referral letters to patients become routine practice.

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