

RESEARCH SUMMARY

GDPs' opinions of responses from specialists after a referral

A survey of general dental practitioners' opinions of response letters received from hospital specialists following a referred patient's first appointment **P. Tomlinson and R. McAndrew** *Br Dent J* 2006; 200: 621–623

Objectives

To discover what dentists require of a hospital response letter with regards to content and timeliness.

Design Postal survey.

Setting South Wales.

Subjects and methods

A postal questionnaire was issued to all dentists ($n = 256$) who had referred a patient to the dental hospital between 1 January 2003 and 1 March 2003.

Results

The response rate was 60.2% (154). The preferred time frame for the receipt of a letter following a patient's appointment was one to three weeks for 96.4% ($n = 133$) of respondents, but 58.4% believed that they currently do not receive responses within this time frame. The preferred method of communication remained the letter ($n = 82$, 53%), followed by the telephone ($n = 58$, 38%). E-mail accounted for eight percent ($n = 12$) of communication. Most respondents (70%, $n = 107$) were satisfied with the letters' content. Eight of the ten items of information suggested as being appropriate in a response letter were considered essential by 53.2% of dentists ($n = 82$), and 55.8% ($n = 76$) believed the remaining two items to be desirable.

Conclusions

Dentists agree closely on the information required in a response letter and most are satisfied with the content of current response letters. However, many dentists believe response letters arrive later than three weeks after their patient's appointment.

COMMENT

Communication between different members of the dental team being good practice is an oft quoted axiom. This study attempts to look at both the timeliness of communication between the specialist, to whom a patient had been referred, and the referring practitioner together with the level of detail contained in that communication.

The study was undertaken as a postal survey polling all the dentists ($n = 256$) who had referred patients to the Cardiff Dental Hospital in a 2 month period from 1 January 2003. It used a questionnaire that had initially been piloted on a group of dentists who were not included in those targeted in the study. The questionnaire was modified in light of their feedback. The final questionnaire comprised a series of closed questions with single response tick boxes, and an area for open comment prompted to address all or specific hospital departments. Return envelopes were marked with a unique identifier but questionnaires were anonymised. The response rate was 60% ($n = 154$). This figure is considerably higher than one might often get from a 'cold mailing' but nonetheless is not large enough to necessarily be representative of the whole referring population.

Most of the responding dentists (96%) expected to receive a response communication within three weeks of their patient's first consultation, although more than half (58%) felt that this was not achieved. The majority (70%) reported that they were satisfied with the content of the letters; only a small proportion (16%) requiring more information. Sadly no information was available on the content of the letters. Useful though these data would have been it would have been difficult to meaningfully categorise this with the present sample size as the letters will have come from different staff (and perhaps different grades) from within each of eight disciplines. Nevertheless, broad categories of information that the dentists would expect to see in the correspondence clearly illustrated the type and the depth of information that should be included in all letters of this nature.

The area where some disquiet was felt was at the timeliness of the replies from the specialists but despite this few dentists wished to change from letters to e-mail or phone conversations. It would seem appropriate, in a patient centred service, that the referring dentist should receive correspondence relating to their patients within three weeks of the consultation. In the current climate, perhaps we should be heartened that as many as 42% felt they did.

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IN BRIEF

- The survey results presented should contribute to improved communication between GDPs and Hospital Specialists.
- The results confirmed good practice in some aspects of communication in this hospital and identified areas of potential improvement.
- The results can be used as the basis for audit in other parts of the UK.