



Executive Summary & Recommendations

Professional behaviours and communication across the Primary & Secondary Care Interface

interface.amrcw.org.uk

A report from the AMRCW Interface working Group led by Dr Jane Fenton-May FRCGP
25th July, 2017

Executive Summary & Recommendations

Many patients cross the primary/ secondary care interface in the course of the management of both acute and chronic conditions. Good communication between clinicians and between clinicians and patients is an essential prerequisite for safe and effective care.

Led through a working group and exploring a narrative of members in primary and secondary care, This report has identified some areas where doctors themselves can make a difference to ease the problem in terms of ensuring appropriate attitudes and behaviours regarding sharing or transferring appropriate information and activity round patient care. It recognises there are significant system and process changes needed to improve efficiency. These are by no means insurmountable but they will need a willingness to recognise that collaboration and good patient care requires cooperation, mutual respect and a need to give and take. Improved IT will undoubtedly help but work patterns may also need to change.

Issues include inadequate information in referral communication, inflexible care pathways designed without input from all relevant stakeholders, delays in patients receiving appointments and long waiting lists. Responsibility for ordering and responding to investigations or providing prescriptions and drug monitoring is not consistently agreed. Letters from secondary care after inpatient or outpatient care are sometimes delayed and incomplete. Patients requiring certificates for insurance or work purposes are unsure who will provide these.

Many clinicians are feeling workload pressures and the need to off load or avoid activity, whilst understandable, may create excess pressures elsewhere in the system. There may be a failure to consider the implications on colleagues across the interface. This harms professional morale and effectiveness of individual and team working.

This paper identifies the issues causing concern and considers to how the behaviour of doctors may contribute to the problem and subsequently sets principles to improve communication and maintain good relationships.

It recognises that many issues are related to system barriers, and the AMRCW recognise that process and system enablers are absolutely essential for some of the key attitudes and behaviours to be put into practice.

Whilst identifying several system barriers throughout consultation, the AMRCW aims to further explore these areas in future work, identifying how they can be overcome and set recommendations.

*Timescales of proposed future work will be updated - www.interface.amrcw.org.uk

Principles to improve effective communication and maintain good relationships

- 1.** Always be respectful of colleagues in front of patients and other colleagues.
- 2.** When transferring a patient to the care of another colleague (or seeking an opinion) ensure that all the information that colleague may need is sent to them in a clear format, preferably electronic if available.
- 3.** Give clear guidance to the patient as to what is the problem, what has been done so far and what it is intended to do. The patient should have an appreciation of what they themselves need to do. Do not commit other teams to any particular action or timescale without checking that is reasonable and practicable.
- 4.** Try not to hand over work to a colleague in another team if you or a member of your team can do it unless you are sure that the task can be done more effectively or efficiently elsewhere. When handing over care, check that all tests and treatment plans have been instigated and plans are in place to forward additional information when available.
- 5.** The individual who orders a test is responsible for reviewing the result and taking appropriate action. If not able to review the result the individual should check another person will take on this responsibility in their team.
- 6.** If one colleague is unsure whether another can take responsibility (eg for ongoing care, prescribing or monitoring), get in touch directly by email or phone.
- 7.** If contacted by a professional colleague, make every effort to respond to them as quickly as possible or pass them onto another individual who can do so.
- 8.** If a doctor makes or is aware of changes in treatment or there is a change in the status of the patient whilst under the continuing care of another colleague, it is important to update all who need to know.

Academy of Medical Royal Colleges Wales

c/o Academy of Medical Royal Colleges,

10 Dallington Street,

London EC1V 0DB

United Kingdom

Telephone: 07759169268

Website: amrcw.org.uk

interface.amrcw.org.uk



© The Academy of Medical Royal Colleges Wales 2017

All rights reserved