Improving Ophthalmology Outpatient Letters

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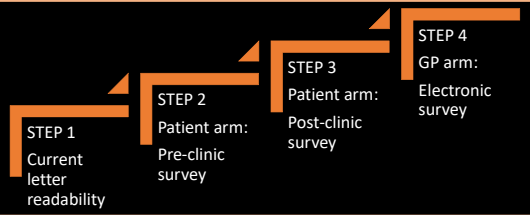
INTRODUCTION

Correspondence to GPs following outpatient appointments is mandatory. Including patients is recommended. Published reports suggest that outpatient letter readability is suboptimal for both.

Aim - To determine if Ophthalmology outpatient letters are informative to GPs and patients and whether there is scope for improvement for both.

METHOD

Recruitment – All patients attending face-to-face follow-up appointments in one consultant's clinics in July and August 2020 and all GPs in the local Clinical Commissioning Group were invited to participate.



Four Steps -

1. Calculation of Flesch Reading-Ease Score for each patients' most recent past clinic letter
2. The survey analysed patients' historic experience of clinic letters
3. The survey determined patient preference for three letter formats (Table 1) generated by clinicians after clinic attendance:
   - Structured GP-oriented
   - Unstructured GP-oriented
   - Patient-oriented
4. The survey analysed GPs' experience and preferences using three specimen letters (formatted as per step 3)

Letter type	Layout
Structured GP-oriented letter	• Subheadings: Diagnosis, Medication, Examination, Follow-up arrangements
Un-structured GP-oriented letter	• Diagnosis list • Appointment summary in prose
Patient-centred	• Diagnosis list • Appointment summary in prose in lay terms

Table 1. Outline of the letter format presented to patients and GPs

RESULTS

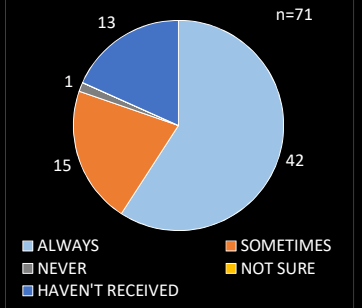
During recruitment, 259 patients attended. All patients attending face-to-face follow-up appointments were included (104 patients) and 155 patients were excluded due to the following reason codes: new patient, did not attend, telephone consultation, hospital/patient cancelled, inpatient, pre-operative assessment. Seventy-one (68%) of the eligible patients participated, of which 28 patients (27%) returned both surveys.

Flesch Reading-Ease score

The mean score for participants' past clinic letters was 59.6, equivalent to a reading age of 16-18years, indicating that the mean reading level of clinic letters is more advanced than the recommended reading age of 11years which is advised by national literacy datasets.

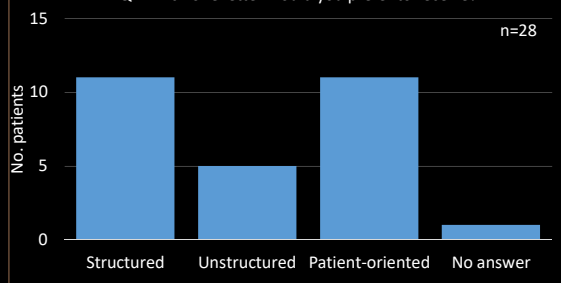
Patient arm – Pre-clinic Survey

Q: Did you understand the past clinic letters?

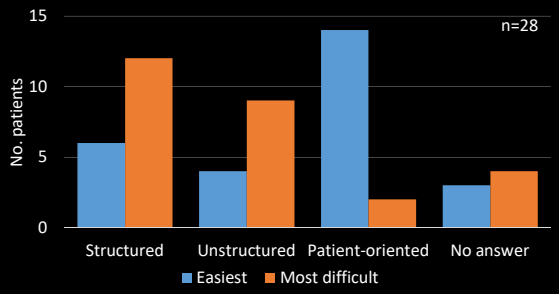


Patient arm – Post-clinic Survey

Q: Which one letter would you prefer to receive?

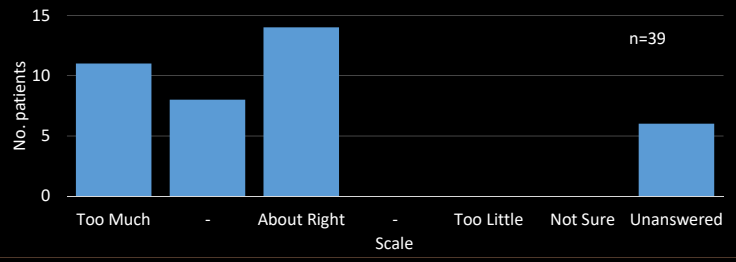


Q: Which letter structure is the easiest/most difficult to understand?

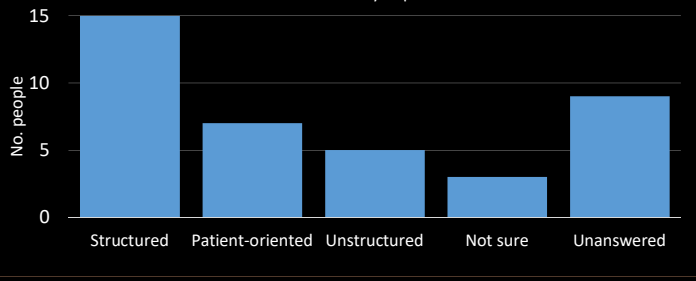


GP arm – Electronic Survey

Q: How do you find the use of **Ophthalmic-specific terms** in outpatient letters?



Q: Which one letter would you prefer to receive?



CONCLUSIONS

- Past clinic letter Flesch readability scores are too advanced for many of the public. However, patients reported greater understanding of letters than the published reports indicate
- Patients frequently opt for GP-oriented information despite reduced understanding
- GPs find letters informative although specialty jargon is over-used. GPs prefer structured GP-oriented letters
- Making letters simpler to read for patients and GPs without forgoing structure and detail frequently favoured by both is advised.

ACKNOWLEDGEMENTS AND DISCLOSURE

No disclosures. Many thanks to the Glaucoma team for facilitating the survey