Recalls and Reminders in General Practice

The content is current at the time of recording – October 2019

We acknowledge the Aboriginal and Torres Strait Islander Peoples as the Traditional Owners of the lands. We wish to pay our respects to their Elders – past, present and emerging – and acknowledge the important role Aboriginal and Torres Strait Islander people continue to play within our community.

This webinar has been developed by Eastern Melbourne PHN on behalf of the

Victorian and Tasmanian PHN Alliance, which is a collective platform for the

seven PHNs in Victoria and Tasmania.

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Objectives

- Differentiate between recalls and reminders

- Understand the requirements of the RACGP Standards for General Practice 5th edition in relation to recalls and reminders

- Describe the key components of a recall and reminder system

- Understand the role of technology in streamlining contact with patients

RACGP Standards for General Practice 5ᵗʰ edition

Recall or reminder?

Recall - Occurs when a GP decides a patient needs to be reviewed within a specified period

- ➤ A clinically significant test result is received

- ➤ After significant referrals

- ➤ After diagnosis of a significant condition

Reminder - a prompt to a patient to make an appointment for a preventative health activity

- ➤ Eg. cervical screen, immunisation, health assessment, care plan review

Criterion GP 2.1B: You must have a process for recall

- The practice must have a written policy

- Include a strategy for informing patients about how to obtain results
  - Does the patient need to have a consultation?
  - Will results be released by phone?
  - Who is authorised to release results?

- Recall processes must be done in a timely manner

- There must a system for checking results and correspondence when GPs are absent

Criterion GP2.2B: our practice recalls patients who have clinically significant results

- Practices must have a clear process for contacting patients

- Nominate a team member who is responsible for the recall process

- If reception staff contact patients, have a well constructed dialogue for everyone to use

- Some software allows you to flag recall appointments – these must be followed up if the patient cancels or fails to attend

Criterion GP2.2E: High-risk (seriously abnormal and life-threatening) results identified outside normal opening hours are managed by our practice

You must:

- Give diagnostic services the contact details of the practitioner ordering the investigation

- Have a process of managing high-risk results identified outside of normal opening hours

Recalls

- Clinically significant results need to be communicated quickly and appropriately

- Pathology results, imaging reports, investigation reports and clinical correspondence must be:
  - ➢ reviewed
  - ➢ notated
  - ➢ acted upon (if required)
  - ➢ added to the patient record

- GPs must review test results and take action in a timely manner

- Preferably inform patients of clinical significant results in a consultation

Why have a recall system?

- Patients may not follow through with investigations or results

- Patients are more likely to come back for follow up care

- Helps to protect against litigation

Recall policy inclusions

- Definition of a clinically significant result

- Statement that the patient's GP is responsible for reviewing results and deciding if they are clinically significant

- System for recalling patients including roles & responsibilities

- Guidelines around what information needs to be documented

- Standard forms and letters for recalling patients

The practice induction process for new staff must cover the recall and reminder system.

Clinical significance

- The GP makes a judgement as to whether information is or is not clinically important for a particular patient in the context of that patient's healthcare

- The health professional who ordered the test is responsible for reviewing the results
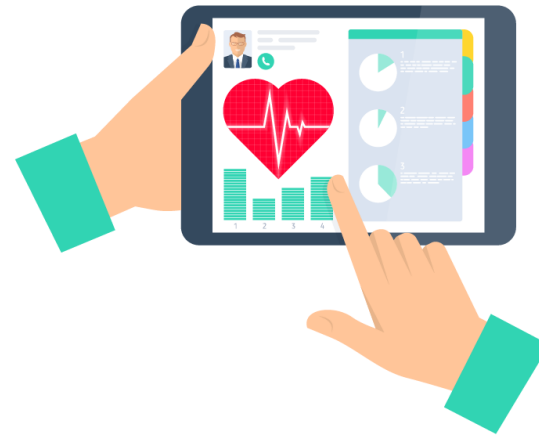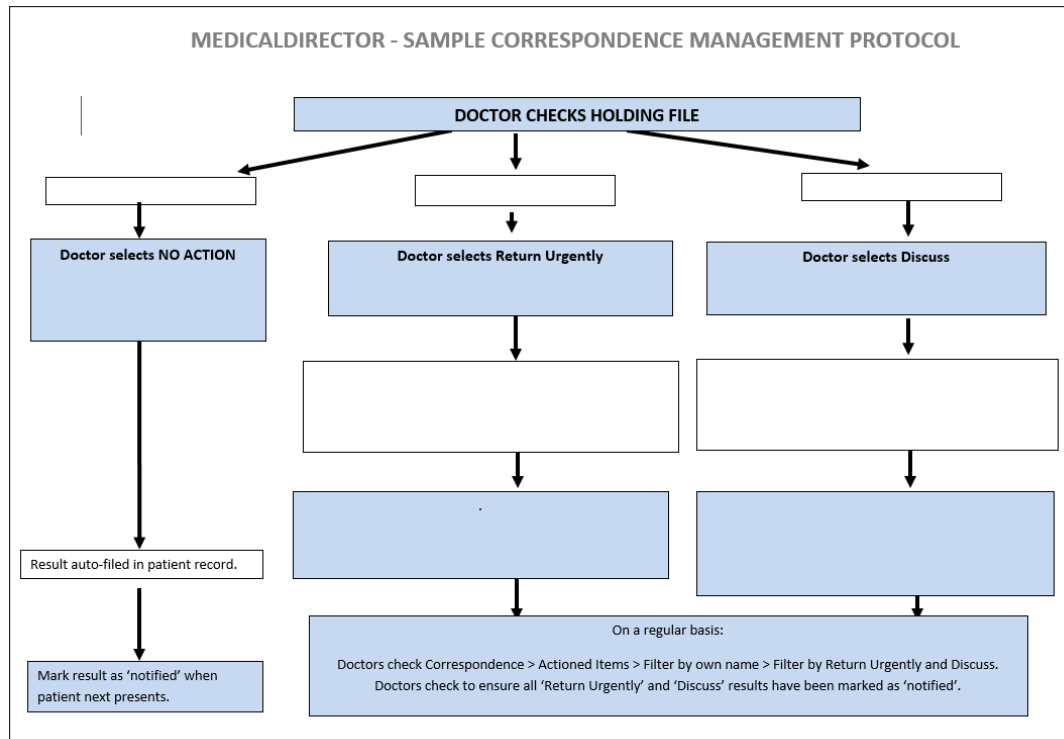
Following up results

- Have a clear process for results that the GP has marked as 'requiring follow up'
  - ➢ Who is responsible?
  - ➢ How often is it done?
  - ➢ What process is followed for contacting patients?

- GPs may use categories such as:
  - ➢ No action
  - ➢ Discuss
  - ➢ Urgent recall

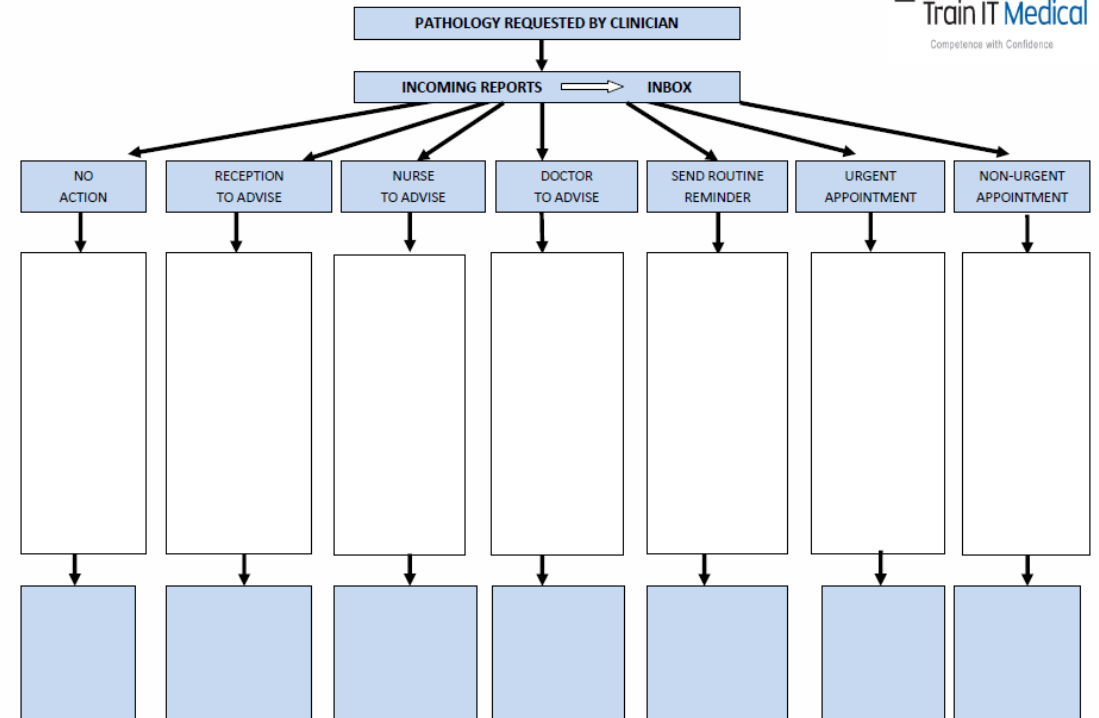- All staff must have a clear and consistent understanding of each category and what action is expected

Workflow templates

Used with permission of Train IT Medical

Patient reminders

- Reminder helps ensure patients return for a routine check or screen

- Does not require a follow up if the patient doesn't make an appointment

- Could be by letter, SMS, secure email or phone call

- Patients may elect not to receive reminders but this does **not** apply when the patient needs **URGENT** follow up

Managing the recall and reminder process

Accuracy of clinic data is important for all aspects of patient care:

- **demographic details** are used to contact patients

- **clinical records** ensure that recalls or reminders are appropriate and relevant

Managing the recall and reminder process

- Staff can generate lists for *preventative reminders* if clinical data is accurate

- Have a list of agreed reasons for recall

- Use software system to manage recall reasons

- The recall and reminder system should be included in new staff orientation and staff meetings

Risk Management

- Review your processes if a recall incident occurs eg. a recall is missed or not followed up

- Consider potential risks and how they can be mitigated

- Do not remove patients from recall lists until the review has taken place

- The recall/reminder should be marked as performed when the patient attends

Managing Patient recalls/reminders

- Recalls and reminders are regularly generated into lists and followed up

- Timeframes for generating recall/reminder lists are determined by the practice

- GPs should act on medical software recall/reminder alerts during consultations

Contacting patients

- Refer to your policy for the minimum number of contact attempts **to recall patients about a clinically significant result/referral**

- Best practice is at least 3 phone contact attempts at different times of the day, and registered post letter if phone contact is unsuccessful

- Record all attempts

- **Reminders** for preventative activities need one reminder unless your policy states otherwise

- Ensure patient privacy and confidentiality - use 3 practice approved identifiers prior to discussing anything over the phone

Opting out of reminders

- Patients need to be informed that the practice sends reminders and how this is done

- Patients can choose to opt out of receiving reminders

- Record a patient's decision to opt out in the medical software

- **Patients cannot opt out of receiving a recall for a clinically significant result or referral**

Reminder or Recall?

Beware of the reminder that is actually a recall

- Practices need a process for differentiating between a clinically significant recall and a reminder

Using technology

- If you start using text messaging for recalls/reminders, advertise widely

  - waiting room
  - practice website
  - practice newsletter
  - direct discussion with patients

- Have a practice policy on the use of SMS

Using technology

Your policy should include:

- Who is authorised to send/receive SMS

- How patient consent is obtained and documented

- What processes are in place to regularly verify patient mobile numbers

- What information should be included or not included in the message

- How messages are incorporated into the patient's health record

- Whether the messages are sent offering goods or health services

Using technology

- Consider using a messaging system that require patients to log in to view the message

- Text messages should clearly identify the organisation and contact details

- Track contact attempts in the patient's file

- Patients can choose to opt out of receiving recalls/reminders via text messaging

Inactive patients

- When a patient transfers their record to another GP, include active recalls/reminders

- Remove recalls/reminders for deceased patients

- When inactivating patients, be aware of any active recalls/reminders

Summary

- Recall and reminder policy – align with the RACGP Standards for General Practices 5th edition

- All staff should be familiar with recall & reminder processes and responsibilities

- Patients should be informed about how to access their results

- Record patient consent or opt-out for receiving reminders

- Record how and when patients are contacted

- Consider options if using text messaging

- Incidents – discuss, document, adjust policy, consult medical defence advisory service

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