Quality of General Practitioners’ Referral Letters to Emergency Department of Tertiary Care Center in Kosova: Room for Improvement

Zef Komani1, Donjeta Pilana1, Lul Raka2,3
Health Inspectorate, Ministry of Health, Government of Kosova, Prishtina, Kosova1
Medical School, Prishtina University, Prishtina, Kosova2
National Institute for Public Health of Kosova, Prishtina, Kosova3

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SUMMARY
Background: Referral letters are an essential mode of communication between general practitioners to specialist consultants. Poorly composed letters may result in unnecessary repetition of diagnostic procedures, delays in treatment and increased costs. Aim: To assess the quality of referral letters written by general practitioners to Emergency department of University Clinical Center of Kosova (UCCK) and to seek the views of patients, general practitioners and managers on the importance of referral system. Methods: A random sample of 951 referral letters from general practitioners to Emergency Centre in UCCK, Prishtina were analysed over a one month period (April 15–May 15, 2007). Letters were audit to determine appropriateness of referrals and administrative content. Retrospective analysis of referrals was extracted from Patients’ Book conducted at five Main Centers of Family Medicine. Results: Overall 4878 patients were treated in Emergency Centre. Examination of 951 referral letters from Primary care revealed that majority of patients came from regions of Prishtina (685/72%) and Mitrovica (130/13.7%). Thirty six percent of referral letters didn’t meet completely all administrative items. Information that was relatively poorly represented in the letters included referring institution’s name (14.7%), doctors’ facsimile (5.9%) and patient’s living place (3.6%). There were 879 consecutive referrals recorded over a one month period from primary care into UCCK. The most common referral diagnoses were related to neuropsychiatric (7.1%), urogenital (4.8%) and cardiovascular diseases (4.7%). Conclusions: The results of this study were used by decision makers for determining new policy of the referral system. Appropriate training of family physicians will increase their knowledge and ability to diagnose and treat a broad range of problems and to improve the level of referral system.

Keywords: Kosova, referral letter, family medicine

1. BACKGROUND
Referral letters of patients from primary care to medical specialist care comprise an important mean of communication in the pyramid of health care services. Appropriate referring letters can facilitate the further diagnosis and management of patients by consultants increasing efficiency and cost-benefits of the medical care systems (1,2). On the other hand, poorly composed letters may result in unnecessary repetition of diagnostic procedures, delays in treatment and poor management. Within referral letters, administrative tasks are continuously increasing in the health systems within the primary care.
Many studies have examined the quality and content of referral letters to hospital outpatient or emergency departments and to consultants in various specialties (3). A common pitfall noticed in those studies was the failure of adequate communication between the referring doctor and the consulted doctor. Appropriateness of forms and documents for hospital referral is questionable and often informations in those documents are lacking. The processes for referral are far from ideal consuming resources that could have been used to provide and advance other services.
Across Europe delivering and financing care in the primary care sector is differently organized. Eastern Europe’s medical systems are changing in an attempt to match increasing health demands with limited resources(4). Kosovo, as the most underdeveloped economy in Europe, is not an exception from these trends. Currently, the health care system in Kosovo consists of primary health care centers located in thirty municipalities; six secondary health care facilities at the regional level (hospitals); and the only tertiary care center – University Clinical Center of Kosovo.
After the war in Kosovo in 1999, the WHO took the responsibility to manage the health care system. Amongst key recommendation was to strengthen and re organise primary care service. This principle was emphasised in the Health Policy for Kosovo, which resulted in upgrading capabilities in primary care through Center for Development of Family Medicine. The connection between primary care and specialized care consist an important organizational item in Kosova health care system (5).

Within the package of basic care dedicated to primary care level, 80% of services are anticipated to be offered at this level. There was a notice that a large number of referrals from primary care was directed to emergency care consultations at the third level bypassing services in secondary care at the regional level.

In Kosova so far no study was done regarding the optimal content of referral letters and assessing the quality of referral letters written by GPs to emergency department of tertiary care level. This study therefore attempts to audit the content of general practitioners’ referral letters to Emergency Center at the University Clinical Center(UCCK) of Kosova. The secondary aim of this survey was to seek the views of patients, general practitioners and managers on the importance of referral system.

2. METHODS

UCCK is the only tertiary health-care center for approximately 2.1 million inhabitants. Emergency center is specialized unit within UCCK. Also all other regional centers have their corresponding emergency departments. A random sample of 951 referral letters from general practitioners to Emergency Centre in UCCK, Prishtina were analysed over a one month period (April 15–May 15, 2007). Letters were audited to determine appropriateness of referrals and administrative content.

The letters checklist consisted of the following items: generalies, place of living, birthdate, parents, register number, date of referral, facsimile, stamp, referral doctor, referral institution, admitting institution and referral diagnosis. The number and the percentage of them which did not include each specific item in the checklist was noted. The referral letters were judged by a panel of two health inspectors with medical background and two specialists of emergency medicine.

Retrospective analysis of referrals was extracted from Patients’ Book conducted at five Main Centers of Family Medicine (two in capital city, Prishtina and others in Gjilan, Gjakova and Vushtrri) over the same period of time. Semi-structured interviews were conducted with patients and questionnaires were completed by physicians and managers of primary care. The catchment area in primary care covers ¾ of all kosovar population.

Patients gave their consent for this study.

3. RESULTS

A total number of 4878 referral letters were received in the Emergency Centre during one month of study. A random examination of 951 referral letters from Primary care revealed that majority of patients came from regions of Prishtina (685/72%) and Mitrovica (130/13.7%). Key figures are presented in table 1. Thirty six percent of referral letters didn’t meet completely all administrative items. Information that was relatively poorly represented in the letters included history of presenting complaints(95.6%), parent’s name (84.4%), patient’s living place (50.1%) and referring institution’s name (32.6%). Other missing or incorrect informations includes, doctors’ facsimile (11.6%), birthday (5.3%), register number(38.2%), date (6.1%), stamp (6.0%) and patient’s name (1.7%). The percentage of referral letters without diagnosis was 14.1%. Based on referral diagnosis and professional opinions of emergency medicine specialists, 69% of referral visits were inappropriate to the tertiary care level. The total number of medical visits at the primary centers and corresponding percentage of the referred patients at the tertiary level were as follow: Prishtina I–320 visits and 30% referred; Prishtina II 980 visits and 62% referred; CFM Vushtrri- 544 (22% referred); CFM Gjilan 458 (7.2%) and CFM Gjakova-2100 patients with 0.1% referred.

There were 879 consecutive referrals recorded over a one month period from primary care into UCCK. A majority was refered from Prishtina Main Center of
Family Medicine (607 / 69.1%). The most common referral diagnoses were related to neuropsychiatric (7.1%), urogenital (4.8%) and cardiovascular diseases (4.7%). Five managers and 35 physicians in primary care reported that main reasons for inappropriate referrals of patients to the hospital were the patient's pressure for treatment in higher level (45%) and poor motivation for work due to low salaries (21%). Interviewed patients regarding the measures for improvement of health care services in primary care, were in favour of decreasing the waiting time (27.9%) and more privacy during examination (25.8%).

Most of the physicians in primary (GP) care felt that they could not have given the patients the care and investigations they received in hospital. Whereas the specialists reported that the GP could have done more tests and examinations prior to referring the study patient in 54% of referrals.

One hundred fifty two patients were interviewed in all centers. Patients' expectations regarding the referrals mostly referred to diagnosis, including increased diagnostic certainty (61%), detailed information about the illness (56%) and exclusion of serious illness (42%).

4. DISCUSSION

The contents of GPs' referral letters to hospital outpatient and emergency departments and to consultants of various specialties have been audited in many studies (6, 7). The emergency centre was chosen for this study because it represents the best example of improper function in the referral system. The majority of the referrals comes from the public sector as Emergency Center is a public specialist facility. Lack of referrals from private practitioners is due to the fact that most patients who consult private practitioners are usually referred or self-refer themselves to public sector. In this study the most referral letters have included the date, stamp and patient's name, but almost all of them have not mentioned the history of presenting complaints and parent's name of the patient.

Similar results on the percentages of omission of items such as medical history, physical findings, investigations and medications are found in other studies (6, 7, 8, 9, 10, 11). One explanation why the referral letters are so badly written may be that GP are always in hurry and easily forget to write all the essential points in the letters. The connection between primary health care (PHC) providers and specialized care represents one of the main organizational problems of health care services everywhere in the world. Access control to secondary and tertiary care is a matter of concern for most health care authorities.

It has been proven that two thirds of the referrals from PHC facilities to emergency ward is inadequate. In our country there is no program available for improvement of referral system from primary care.

The majority of referral patients came from two PHC centers in Prishtina, capital city and Mitrovica.

This can be explained by the fact that tertiary care center is located in capital city, which doesn't have any secondary care facility. Whereas, Mitrovica is divided city and also have no access to the regional hospital, which is not under Kosova government's control. Low number of referral patients from other two regional centers located in western part of the country (Peja and Gjakova) can be explained by better capacities of primary care settings and larger distance from the capital city compared with other regional centers.

5. CONCLUSIONS

Good referral letters from GPs are important for further patient management by specialists. The contents of referral letters from the general practitioners to the EC were found to be inadequate. The results of this study were used by decision makers for determining new policy of the referral system. Adoption of further recommendations based on these findings could lead to reduced health care costs in health care institutions. Appropriate training of family physicians will increase their knowledge and ability to diagnose and treat a broad range of problems and to improve the level of referral system.

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