



QUALITY OF LIFE, QUALITY OF CARE, AND PATIENT SAFETY

## A NOVEL PEDAGOGIC APPROACH ASSESSING QUALITY OF CARE

*Mini Singh<sup>(1)</sup> - Olivia George<sup>(2)</sup>*

*University Of Manchester, The Dermatology Centre, Manchester, United Kingdom<sup>(1)</sup> -*

*University Of Manchester, Manchester Medical School, Manchester, United Kingdom<sup>(2)</sup>*

**Background:** Interventions that support the family physicians' decision-making skills to accurately assess, diagnose and manage common skin disease are fundamental to securing high quality care for patients, clinician and services. Research in clinical decision-making provides a framework for assessing these skills. Analysing the content of referrals from family physicians provides a snap shot into these abilities; identify knowledge gaps and some of the underlying determinants of demand on specialist services.

**Objective:** Apply a novel pedagogic approach to assess clinicians' decision-making skills, measure the quality of referrals for dermatological problems and identify educational needs to improve quality of care for patients.

**Methods:** The clinical reasoning cycle by Levitt et al. provided a framework to assess the clinical decision-making skills of referrers. This was applied to 353 sequential referral letters sent by family physicians to a large UK dermatology department. Measures included accuracy in assessment, diagnoses and management of the dermatological problem in comparison with specialist assessment in the patient records.

**Results:** 80% of all referrals were query malignant lesions, 20% were rashes. 21% of all referrals did not include a dermatological description or diagnosis of the problem. Within the lesion-referred group 40% were common benign lesions. Risk assessment for malignancy was not performed in 80% of referrals. 13% of all malignancies identified by specialists were not included in the referral letter (20% of all melanomas and 17% all SCC). 41% of common rashes were correctly diagnosed, 17% included appropriate clinical assessment and 40% received appropriate first-line treatment.

**Conclusions:** This study provides a methodological approach to evaluating referral quality. It identified clear skills gaps (dermatological assessment, under diagnosis of skin malignancies). By studying clinical decision-making, one can identify key areas to target educational activity and improve quality of care at first point of contact for patients.

