

9.14 Enhancing the Quality of External Referrals to Thoracic Surgery in a Tertiary Referral

Centre

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Background: To perform a closed loop audit and quality improvement initiative to improve the quality of referrals to our local thoracic surgery department.

Methods: A pre-intervention cycle was performed evaluating the quality of referrals (as compared to the York University Thoracic Surgery Referral Proforma) in consecutive patients referred over an 8-week period. A departmental thoracic surgery referral proforma was then designed. Thereafter, a post-intervention cycle was then performed over the subsequent 8-week period, where the referral proforma was shared with the referring doctor at the time of referral.

Results: In the preintervention cycle, 30 referrals were evaluated, compared to 21 in the post-intervention cycle. There was significant improvement in the quality of referrals made in the post-intervention cycle, where 93.2% (411/441) of York University criteria were included versus 63.0% (416/660) in pre-intervention referrals ($P<0.001$). A significant improvement was observed in recording referral date ($P=0.001$), patient's addresses ($P=0.007$), patient's location ($P<0.001$), the urgency of referrals ($P<0.001$), details regarding patient imaging ($P<0.001$), dates of relevant imaging ($P=0.013$), other investigation details ($P<0.001$), general practitioner names ($P<0.001$) and contact numbers ($P<0.001$).

Conclusion: This closed loop audit demonstrates the value of using a standardised thoracic surgery referral proforma to improve the quality of referrals to our service. We recommend our colleagues in other units adopting a similar template to improve the quality of prospective referrals to their service.

Keywords: thoracic surgery, referrals, standardisation, proforma

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