

## Recall and Reminder Systems

A resource for the general practice team

Sections include:  
Basic definitions  
RACGP 3<sup>rd</sup> Edition standards  
Steps to implement systems  
Elements of effective systems

This resource can also be found on our website:  
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*This resource was developed by GP down south based on resources from RACGP, AGPAL and Central Sydney General Practice Network.*

## What are Recalls and Reminders?

### Reminders

- A reminder is usually for preventative care
- Only patients who normally attend practice should receive reminders
- Seek patient permission before placing on reminder register
- The recall of patients at appropriate intervals for preventative care is recommended
- It is sufficient to send one reminder, but you may want to send more or have a multi-pronged approach

### Recalls

- A recall is usually for abnormal results where it is essential that the patient return to the practice.
- Recall notifications should only be for a specific aspect of continuing care
- There is a clear obligation on the doctor to recall patients who have failed to follow up abnormal tests

## Why have a Recall and Reminder system?

Effective systems for reminders and recalls can offer the practice improved health outcomes and better provision of services to patients. They promote a systematic approach to preventative care and early detection of disease. They also form an important part of the planned management of patient care, particularly for patients with a chronic health condition.

Reminder and recall systems encourage a commitment from your patients to be loyal to your practice and promote continuity of care.

Functional recall and reminder systems are also relevant for practices whom are seeking accreditation under the RACGP Standards for General Practice.

## Recalls and RACGP Standards for General Practice

The following information are selected excerpts from the 3<sup>rd</sup> Edition standards in relation to Criterion 1.5.4: Our practice has a system for follow up and review of abnormal test results

Follow – up can have several meanings:

- Following up the information – following up on tests and results that are expected to be, but have not yet been received by the practice

- Following up on the patient – chasing or tracing the patient to discuss the report, test or results after they have been received by the practice and reviewed or if the patient did not attend as expected

While practices are not expected to follow-up every test ordered – nor to contact patients with the results of every test or investigation undertaken – there may be considerable risk in not following up clinically significant tests and results.

The practice needs a system aimed to ensure that:

- All received test results and clinical correspondence relating to a patients care are reviewed
- Clinically significant tests and results are followed up.

The nature and extent of responsibility for following up...will depend on what is reasonable in the circumstances.....probability of harm...overall context of patients history and presenting problems.





Accreditation assessors look for the following when assessing practices against Criterion 1.5.4:



- The practice has a clear written policy for the review and management of results/reports/correspondence
- The practice has a clear written policy for follow-up and recall (of patients with clinically significant results)
- Evidence of systems through patient health records (Tests, reports and correspondence has been reviewed by GP, initialed and acted on as appropriate/timely)
- Evidence of systems through interviews with GPs and staff (are staff aware of the system, do all staff have the same understanding of the system)

## Setting up a Recall or Reminder system

1	Agree the purpose of the system	Consider if the system is a recall or reminder and what patients are to be targeted
2	Map the workflow of the system	Work out the sequential steps of your system (see sample flow chart at the end of this booklet)
3	Appoint a staff member to be accountable for operating the system	Who is responsible for generating the list of patients due for recall / reminder? Who contacts patient? All doctors / clinical staff should know how to enter recalls into the system. Administration / nursing staff should know how to generate recall / reminder lists and letters as appropriate to their role
4	Decide on the method and resources required for the system	Methods could include: Post cards, Letters, Phone calls, Emails, Birthday cards, Mail outs, Opportunistic, SMS Letter templates can be set up in the practice clinical software. Use words and terms that are understandable for the patient
5	Determine timing and schedule of activities	How often will the recall / reminder be prompted? How often will they be checked against appointments made, results received etc. Staff should be able to dedicate set time on a regular basis to action and review recalls and reminders.
6	Agree on benchmarks for performance	The system should be reviewed for success at set intervals. How many appointments are being generated through reminders?

## What constitutes a good system?

	<p>Reminder and recall system have two elements:</p> <p>A. Recall or Remind– the system to recall the patient for an abnormal test result or to remind the patient to attend the practice</p> <p>B. Tracking – the system to track that the patient has attended the appointment or (for tests and referrals) to track when the results come in and that patient has been notified.</p>
	<p>The whole general practice team has a role in making sure recall/reminder systems are working effectively.</p> <ul style="list-style-type: none"> <li>• Clinical – GP makes the decision to recall the patient</li> <li>• Administrative – practice staff track and generate recall</li> </ul> <p>All staff members should understand their role (who generates list, who contacts patient, who notifies GP when initial attempts not successful). Staff need to have dedicated time to this function.</p>
	<p>Clinical information systems</p> <ul style="list-style-type: none"> <li>• Make sure the patient database is accurate and maintained (data cleansing).</li> <li>• Make sure the right people know how to enter the recall/reminder.</li> <li>• Understand the limitations of your clinical information system – how reliable is it? what is the fall back system?</li> <li>• Use Templates – make sure letters are easy to understand for patients</li> <li>• Are there safeguards in the system to ensure people don't get lost - flexibility to deal with a variety of circumstances</li> </ul>
	<p>Timeliness</p> <ul style="list-style-type: none"> <li>• How often will reminders/recalls be sent? What is the appropriate timeframe between contacts?</li> <li>• How often will they be checked against appointments made?</li> </ul>

	<p>Effective administration</p> <ul style="list-style-type: none"> <li>• Make sure the recall/reminder is direct and detailed</li> <li>• Make sure your patient databases are accurate (patient contact details, active patients)</li> </ul>
<input checked="" type="checkbox"/>	<p>Ability to analyze the system</p> <ul style="list-style-type: none"> <li>• how do you know if your system is effective?</li> <li>• how effective / consistent is record keeping (in patients health record)?</li> <li>• find out why patients are not responding (changed addresses, no longer attend your practice, personal circumstance)?</li> </ul>
	<p>Recall systems should make sure all attempts to contact a patient are documented in the patients record.          Following up the patient should involved</p> <ul style="list-style-type: none"> <li>• Telephoning at different times of day and on different days (3 phone calls)</li> <li>• Letters</li> <li>• Registered mail is advised if having difficulty contacting patient</li> <li>• If patient does not attend, doctor should be notified and advice sought from Medical Defence Organisation</li> </ul> <p>The recall is not complete until the specific matter is discussed with the patient by the doctor.</p> <p>Decide on how many contacts are made for preventive reminders (eg immunisations, pap smears due) and include in a practice policy. Multiple reminders are more effective.</p>

## Sample generic workflow chart for recalls

