Result Management (recall procedure) Theory of Change

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1 Introduction

A 'Theory of Change' is described, where the goal of a timely action and discussion of results follows from the 'input' of a clinician marking a result as requiring action.

Parallels are described between the theory of change and the recall flowchart shown in draft version 2 of the recall procedures.

The relationship between some key stages of the theory of change and the **Current** recall procedure are compared and contrasted with proposal to add reminders (**Proposal.A**). Potential minimal changes to resolve the issues addressed by **Proposal.A** are described in **Minimal.Change.B**.

Notes describe how to view lists of results which are marked as 'non-urgent' and not yet notified.

2 Theory of Change

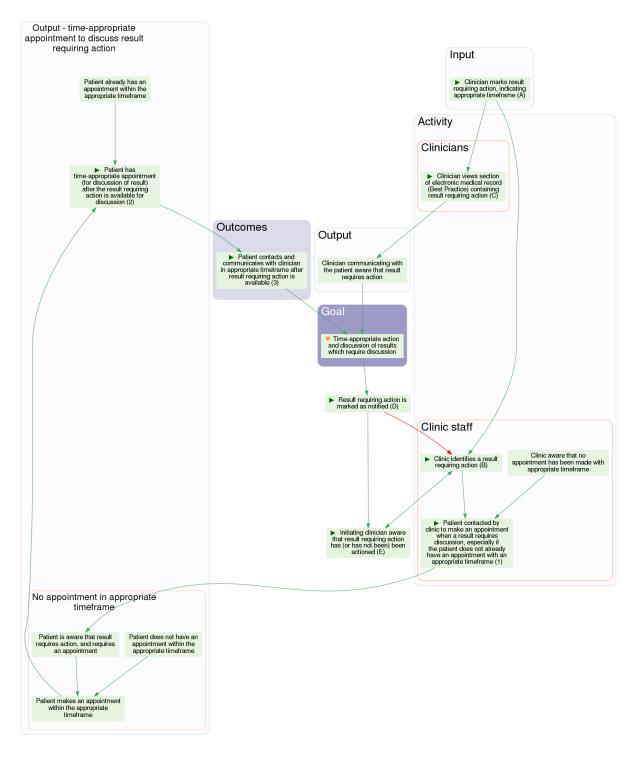


Figure 1: Theory of Change - Result management, created with Theorymaker

3 Relationship between Theory of Change and Recall flowchart

Recall flowchart from version 2 of draft recall procedure.

Only a few relationships are described, with the letters A, B and D and numbers 1, 2 and 3.

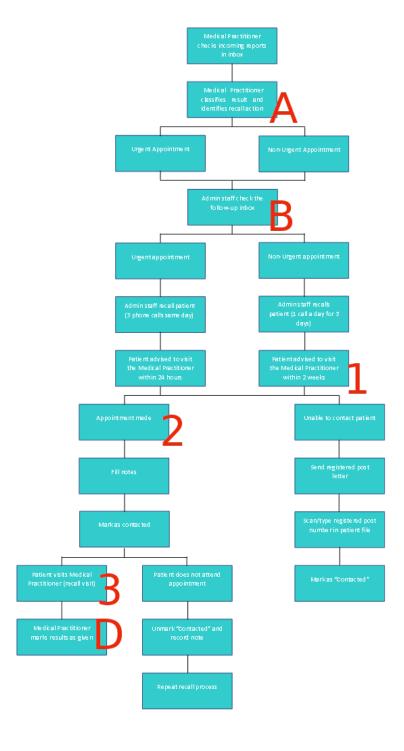


Figure 2: Recall flowchart (follow-up system)

4 Relationship between Theory of Change and current, proposed or potential procedures

- Current : Recall system procedure for non-urgent results (2020 draft version 2)
- Proposal.A: Recall system using 'reminders' for non-urgent results
- Minimal.Change.B: Recall system based on Current, possible changes to fulfil aims of Proposal.A

Procedure	Current	Proposal.A	Minimal.change.B
A Clinician marks result requiring action	Result marked 'non-urgent'	Result marked 'non-urgent', and same result marked for 'reminder'	Result marked 'non-urgent', and optionally same result marked for 'action'
B Clinic identifies result requiring action	Administration checks 'follow-up' inbox, same as for 'urgent' results	Administration checks 'reminders', same as for cervical screening and follow-up colonoscopies	Same as for 'Current'
C Clinician views section of Best Practice containing result requiring action	Clinician checks investigation section of Best Practice during/before each appointment	Clinician sees 'reminder' notice at head of Best Practice page	Same as for 'Current' or Clinician sees 'action' notice at head of Best Practice page or Clinician sees 'red' warning button in Doctor's Control Panel
D Result requiring action is marked as notified	Clinician marks result as notified on investigation page	Same as 'Current', and clinician removes reminder	Same as 'Current'
E Initiating clinician aware result notified or not	No procedure defined	Clinician (or admin) searches for overdue reminders	Clinician (or admin) searches for old results not notified

5 Notes

5.1 List of results marked 'non-urgent' and not yet notified

5.1.1 Follow up inbox (Best Practice)

From Best Practice main menu, choose Clinical - Follow up inbox

- Choose required date range
- Filter by action 'Non-urgent appointment'
- Filter by status 'Nil status' (i.e. not 'Given'/notified)
 - May also need to check 'Contacted' (by administration staff, but still not 'Given'/notified by clinician)
- Choose the clinician who 'checked' the result ('Checked by')

5.1.2 GPstat! Result Management

GPstat! (written by David Fong) allows viewing of results, filtered by clinician(s) seen, date range checked, action and actioned status. Comments attached to the result, and upcoming appointments for the patient can also be viewed.

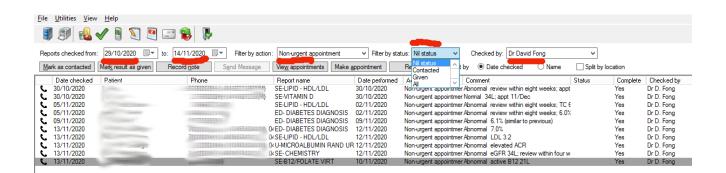


Figure 3: Follow up inbox

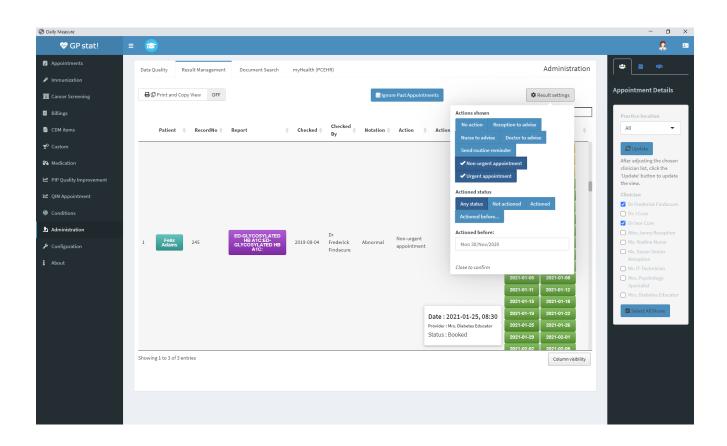


Figure 4: GPstat! result management