Is it practical to deliver reminders about diabetic retinopathy screening in general practices?



Retinopathy screening attendance rates are below the recommended levels in many countries, including Ireland. As people with diabetes visit their GP regularly, we wanted to see if it was practical for staff in general practices to identify and remind patients about the national screening service, Diabetic RetinaScreen.

How did we carry out the study?



We carried out our study in eight general practices across Ireland over a six-month period



Four practices carried out an audit of screening attendance

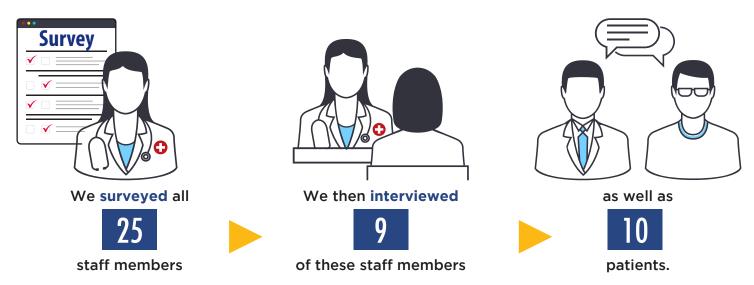


They added alerts to the electronic records of patients who did not take part in screening

REMINDER

Staff reminded these patients either in person, on the phone, or by letter, and gave them a short leaflet with messages from the practice about why they should go. To support practices to introduce these changes, they were reimbursed and provided with manuals and training.

To find out what people thought about this new approach





What did we find?

In the four practices that introduced the changes:

In the four practices that did **not** introduce the changes:



47 of 52

who were not registered with RetinaScreen at the start of the study were registered by practice staff during the six months.



22 of 71

who had not attended RetinaScreen at the start of the study had attended screening by the end of the study.



22 of 25

who were not registered with RetinaScreen at the start of the study were registered by practice staff during the six months.



15 of 87

who had not attended RetinaScreen at the start of the study had attended screening by the end of the study.



Our results suggest the new approach could be a practical way to improve attendance. However, it was a very small study, and we would need a larger study to be certain that the approach improves attendance.

What factors influenced patients to take part in screening?

REMINDER



Having received reminders, several factors influenced patients to take part in the screening programme. These factors included trust in the GP or nurse who delivered the reminder and the timing of the reminder (whether patients were ready to act based on their attitudes to their health, concerns, and priorities at that time).

What did staff think about this new approach to promote screening in the practice?



Staff thought that the new approach was a good idea and feasible, but this depended on whether they could manage their time. They found ways to make the changes fit with their usual way of working and existing skillset. For example, the new approach was less challenging in practices where staff had more experience doing audits.



