



The Royal New Zealand
College of General Practitioners

Changes in Community Laboratory Services in Auckland:

Feedback from the College's Surveys

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The Labtests service in Auckland has improved a great deal since its start date in September 2009, but further improvements are needed.

Making the right diagnosis, often assisted by timely laboratory results, is a major function of general practice. So when the established laboratory services were changed in the Auckland region in September last year, the College was concerned to ensure that the 40% of its members practising in the region could continue to provide the highest possible care. Three surveys were conducted between the start of the new Labtests services and the end of 2009. This is a report of the main results from these surveys.

What College did

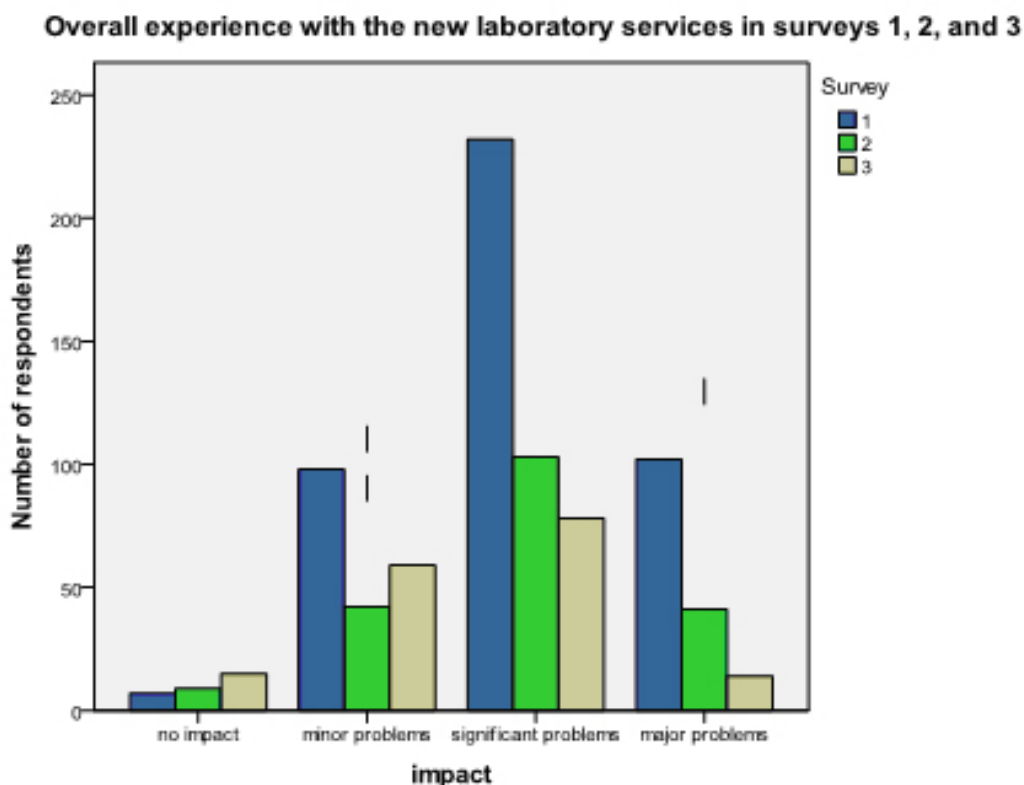
The College invited all 1135 members practising in Auckland to complete a web-based survey about their experiences of the new laboratory service one, six and twelve weeks after the new service started. Retired GPs, affiliated members and GPs who may not have experienced the new laboratory services were included. There were 442 responses to the first survey, 196 to the second, and 166 to the third: 345 responses (43%) came from GPs practising in the Auckland DHB, 270 (34%) from Waitemata GPs, and (11%) from GPs in Counties Manukau DHB.

What the College found

Over 70% of GPs responding to the first and second surveys indicated they had experienced 'significant' or 'major' problems with the new laboratory service. In the third survey, this decreased to 55%. Figure 1 shows GPs' overall experience with the new laboratory services in surveys 1, 2 and 3.

In survey 2, 64% of GPs reported an improvement in services since the start of September and 68% reported an improvement in survey 3. The laboratory service had become 'much better' for 14% in survey 2 and 23% in survey 3.

Figure 1



Problem areas

Given a choice of eight potential problems with the new laboratory service, the mean number of reported problems reduced from 3.2 at survey 1 to 3.0 in survey 2 and 2.0 in survey 3. Table 1 shows changes in respondents' experience in the three surveys of problems in the eight areas listed on the survey forms.

In six areas GPs seemed to experience a definite improvement across the three surveys. Delayed access to laboratory tests was the most widespread concern initially, but by the third survey, more GPs had problems with 'incorrect results' or 'suspected incorrect results'. Across the three surveys there was no change in the proportion having problems with the return of incorrect results and there was a significant increase in the proportion suspecting that they received incorrect results. In survey 3, in every area except 'suspected incorrect results' a greater percentage of respondents thought the problem had improved rather than worsened. A third of GPs responding to the third survey were still experiencing delayed test results.

Table 1: Percent of respondents indicating experience with the eight problem areas listed on the three survey forms

	Percent reporting problems			p-value for change across surveys
	Survey 1	Survey 2	Survey 3	
Delayed access to tests or results	75.4	61.4	33.1	<0.001
Problems with home tests	50.3	50.3	24.7	<0.001
Problems for patients in accessing tests and results	47.4	35.0	27.1	<0.001
Problems with information about the new service	40.4	25.9	13.9	<0.001
Problems with patient confidentiality or misdirected results	36.3	36.5	21.1	0.001
Uncertainty or problems regarding the range of tests or services provided	28.7	26.4	18.1	0.029
Suspected incorrect results	23.3	40.1	41.6	<0.001
Incorrect results	21.2	23.4	19.9	0.712

Why the College initiated the surveys

The College conducted this work in response to concerns raised by Auckland members about the changes in community laboratory services in the region. Hard data were needed about how widespread these concerns were and what problems were being experienced by significant numbers of GPs. The survey was intended to swiftly gather enough information from Auckland GPs to ensure that advocacy by the College on behalf of members could not be perceived as anecdotal or based on isolated cases. The large number of responses, particularly to the first survey (442 responses), indicated that the change in laboratory services was an important issue for many Auckland GPs.

The College has already shared early survey results with the Auckland DHBs and Labtests to ensure that member concerns have been directly considered in any changes and efforts to improve the services provided under the new contract. The DHBs have conducted a further survey of GPs and midwives to obtain more specific information about some areas of the new service—this survey built upon the information gathered in the College surveys. The survey results have also informed the College's representative to the Auckland laboratory services QSTAT steering committee. The surveys were influential with the DHBs and Labtests and were an important tool for ensuring action to address GPs' concerns.

Comment

These three surveys give snapshots in time of the experience of Auckland general practitioners with their new laboratory services. They do not track the experience of individuals and such surveys are notorious for attracting responses from the disaffected. Nevertheless, they do paint a picture of some calamities in laboratory services that were experienced by a large number of GPs at the start of the new services, followed by an improvement in services as the new Labtests contract bedded down. Continued effort on the part of Labtests is needed if they are to establish widespread credibility within the general practice sector.

There are important messages for primary health services—their funders and providers—in this experience. For the funder, the nature of community laboratory services as an integral diagnostic tool was completely misunderstood. Prior to the new service initiation, better communication with the laboratory's clients, GPs, was identified as a process weakness. Following its introduction, serious threats to patient safety emerged as the main concern. The need for transparent evaluation of new and changed services should be a lesson well learned by all health service providers and funders involved in the change in Auckland community laboratory services.