CONFERENCE ABSTRACT

To text or not to text?... Implications for general practice: A mixed methods investigation

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Dorothy Leahy¹, Aoife Lyons², Matthias Dahm³, Diarmuid Quinlan⁴,⁵

1: Department of Epidemiology and Public Health, University College Cork, Ireland;
2: Ballincollig Family Practice, Ballincollig, Cork, Ireland;
3: Emmet Square Surgery 12 Emmet Square Clonakilty Co. Cork, Ireland;
4: Woodview Family Doctors, Glanmire, Cork, Ireland;
5: Department of General Practice, University College Cork, Ireland

Introduction: Texting has become more prevalent in general practice as a tool to communicate with patients. The ICGP issued guidelines on the use of texting in general practice in 2007, however, the Data Protection Commission Office, suggested that texts should be limited to appointment reminders and general announcements e.g. flu vaccines. The main objectives of this study were to: assess extent of use and purpose of texting by General Practitioners (GPs) to communicate with their patients and to determine the attitudes of GPs and patients in regards to the perceived risks and benefits of texting in general practice.

Methods: A mixed methods study based in Cork City and County from November 2015 to September 2016 that involved: GP phone surveys (n=389) to determine the number of GPs that use texts to communicate with their patients; further GP phone surveys were carried out with ‘texters’ (n=25), and ‘non-texters’ (n=26); a patient satisfaction survey (n=78) was conducted in 3 practices and a focus group with GPs (n=6).

Results: The total number of ‘texters’ included 38% (n=148) of all GPs contacted, however the majority were ‘non-texters’ at 62% (n=241). Time management was identified as the most important advantage of texting among ‘texters’ (80%) and non-texters (50%) and confidentiality was reported to be the biggest disadvantage among both groups at 32% and 69% respectively. The majority of ‘texters’ (76%) did not have a written policy about texting in their practice. 53% of ‘non-texters’ suggested that they would use texting if it was endorsed by the ICGP or their medical indemnifier. Most patients (99%) were happy to receive texts from their GP, fast test results were identified as the biggest advantage (32%) and 53% of patients did not identify any disadvantage to receiving texts from their GP. The main themes from the focus group included the risks and benefits of texting, the main risks were: incorrect phone numbers, confidentiality and consent issues. The benefits of texting included: communicating general practice information, time saving and the use of GP software to facilitate fast communication via texting.
Discussion: Texting is a common method used by GPs to communicate with their patients. In a busy practice setting, texting can facilitate time management strategies for GPs and provide patients with fast test results. However, GPs need further support and advice if they are to communicate safely with patients through texting. Collaborative efforts are required from medical indemnifiers, the ICGP and the Data Protection Commission to provide clear guidelines for GPs to protect patient confidentiality.

Limitations: The results from the GP surveys should be interpreted with caution due to the relatively small sample size, however the key findings from surveys with patients and GPs compared favourably with the main themes identified in the focus group with GPs.

Suggestions for future research: National surveys with GPs and patients are required to determine the generalisability of the current findings. Additionally, focus groups with representatives from the ICGP, medical indemnity firms and the Data Protection Commission would provide a useful forum to establish safe communication guidelines with patients for GPs.

Keywords: texting and general practice; patient communication and confidentiality; data protection