Improving Profile Recording in General Practice

The QUICK WINS

Ensure you are using the correct ethnicity template.

Lambeth DataNet has developed standardised templates for the capture of profiling data in GP EHR systems.

Combining templates.

Have you considered combining the patient profile template with one of your main templates e.g. Your chronic disease management templates?

Flagging patients with no profile data.

Most practice IT systems allow customised alerts to be placed on patients records, these can inform reception staff of the need for a patient to complete an IPRP form.

Can your staff answer queries related to profile collection?

Are you reception staff aware of the reasons this data is collected and safeguards put in place to protect patients.

Do you have patient profile leaflets?

Leaflets for patients detailing the rationale for profiling collection and safeguards in place are available from the DataNet team.

Do you have translated leaflets?

We also have profiling leaflets translated into Spanish, Portuguese, French, Polish, Somali, Hindi, Vietnamese, Arabic, Cantonese and Tigrinya.

For more information or assistance improving recording levels in your practice please contact: David Whitney (DataNet Facilitator) d.whitney@nhs.net 020 3049 4473

References

2. The Parliamentary Office of Science and Technology (2007), POSTNOTE (no276) Ethnicity and Health
5. Ayusha A, Nat Wright and Maggie Rae (2008), Addressing Health inequalities A guide for general practitioners
8. Carers UK, in poor health, the impact of caring on health, 2004

Understanding health needs and inequalities is a vital factor in improving health in Lambeth.

Ethnicity doesn’t tell the full story.

The Individual Patient Registration Profile (IPRP) provides a more in-depth picture of our population and their health needs.
**Ethnicity**

“Health inequalities […] are more strongly related to ethnicity than to social deprivation.”

- “Large-scale surveys like the Health Survey for England show that BME groups as a whole are more likely to report ill-health, and that ill-health among BME people starts at a younger age than in the White British.”

- “Type 2 diabetes is up to 6 times more common in people of South Asian descent and up to 3 times more common amongst those of African and African-Caribbean origin.”

- Research carried out using DataNet data has shown that black patients with long term conditions in Lambeth have poorer BP control than their white counterparts.

**Language & Communication Needs**

‘Good communication is important and valuable in terms of health care, clinical outcomes and efficiency.’

- DataNet data shows over 90 languages are spoken in Lambeth with over 20% of the GP registered population having main language other than English.

- It is very likely that suboptimal problem-solving across language barriers without an interpreter leads to increased costs in the longer term because the patient's health problems are unlikely to be resolved.

**Carers**

Patients with a carer

Knowing if a patient has a carer can be a proxy indicator for physical disability which may not always be recorded consistently in patients histories.

Patients acting as carers

“Analysis of the Census shows that nearly 21% of carers providing over 50 hours of care [per week] say they are in poor health compared to nearly 11% of the non-carer Population.”

**Religion**

“Research suggests that attention to the religious and cultural needs of patients and service users can contribute to their wellbeing.”

- Research has established that uptake of cervical screening may be lower for certain religious groups, crude analysis of DataNet data shows a possible correlation.

- A 2004 systematic literature review concluded that low literacy is associated with many adverse health outcomes.

- A survey commissioned by Mencap showed that 30% of GPs did not have information in a format accessible to those with learning difficulties in their surgeries.

- Research has shown people with hearing loss have a higher risk of depression and that over 35% have difficulty communicating with GPs.

**Country of Birth**

Ethnicity is a poor proxy indicator of migration.

“The circumstances in which people are born and brought up will have consequences throughout their lives. Therefore general practitioners practising family medicine are ideally placed to influence the consequences of intergenerational factors.”

- “The risk of dying from CHD is 50% higher in people born in Bangladesh, India and Pakistan than the general population.”

- “Different cultural expectations among migrants can contribute to health seeking behaviour which is perceived as inappropriate.”