

PROBLEMS AND PROGRESS IN MEDICAL CARE
Essays on Current Research

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This volume, the second in a series, is a collection of essays emanating from research projects and programs sponsored by the Nuffield Provincial Hospitals Trust. As in the first volume, the range in subject matter is wide—a reflection of the scope of interests of the Trust. Eleven papers are presented, grouped into three major categories: Part I: Studies of Hospital Out-patient Services; Part II: Studies of Function and Organization; and Part III; three review articles under the general heading, “Examining the Bases of Policy.”

The four studies of outpatient services reported in Part I were principally descriptive undertakings employing similar research strategies and techniques and all serving to highlight the nature and magnitude of the key problems in the provision of adequate ambulatory services. The first essay, written by Richard Scott and Margaret Gilmore of the University of Edinburgh, reports on the four-phased Edinburgh Out-patient Enquiry in South-Eastern Scotland. The study had as its purposes the determination of the composition of the population attending the outpatient departments of Edinburgh hospitals, the reasons for referrals, and the satisfactions and dissatisfactions with the services on the part of the general practitioners and patients. Methods included the employment of special record cards in the clinics and in a sample of the general practi-

tioners' offices, and interviews with all general practitioners in the city and with a sample of patients. The results of the study pointed out "substantial" ineffective use of the outpatient department by the referring physicians, internal inefficiencies in the departmental appointment system, and need for improvement in communication between the general practitioner and hospital.

The second essay, by Jocelyn Chamberlain of the General Practice Research Unit at Guy's Hospital Medical School, highlights a complementary set of issues facing the modern hospital. Her study involved an assessment of the use of outpatient services of groups of facilities in two greatly different areas in Southeast England; the first is in a "poor" section of London, serving a population composed primarily of semiskilled and unskilled workers, with almost no private practice; the second is a geographically larger, more prosperous area with a variety of special facilities and a "fair" amount of private practice. The general methods employed by Chamberlain were similar to those of Scott and Gilmore. The findings are hardly surprising. Among them: in the "poor" area the number of new outpatients has been increasing while in the "prosperous" area it has remained level; the population served by the group of facilities in the "poor" area was primarily local and from lower socioeconomic segments; the general practitioners referring to the "prosperous" area were better qualified, more often in partnership and more often held hospital appointments; the standard of communication between general practitioners and hospital was much higher in the prosperous area; proportionately more patients were discharged after their first attendance in the "prosperous" area; more patients were seen by a consultant in the "prosperous" area.

The third study, reported by E. M. Backett, G. Sumner, J. Kilpatrick and I. Dingwall-Fordyce, concentrates on referrals to outpatient departments of hospitals in the Northeast Scotland Region. It provides an interesting example of what can be done with routinely available data in clinic records, although the authors are quick to point out the inadequacies of some of the information. The form of analysis is similar to that of the two previous studies, and, in general, the major findings and authors' interpretation reinforced the con-

cern raised in the other studies for the need to reassess the role of the outpatient department vis-à-vis the general practitioner, the general hospital and other special facilities, in addition to continuous appraisal of the adequacy of the internal departmental procedures and communications with referring practitioners.

The final essay in Part I, written by W. J. Butterfield and M. E. J. Wadsworth, presents the results of an analysis of outpatient attendances at Guy's, a teaching hospital in London. The study was based on a sample of over 1,500 new patients during 1962. Demographic data, certain information on the referral process and reports on how the patients spent their time in the clinic were obtained upon their departure from the clinic. Clinical detail and referral communications were abstracted from case notes at a later time. The results of the analysis place the overall pattern of attendances somewhere between those found by Chamberlain in her comparison of the two groups of hospitals. Guy's served a disproportionate number of patients between 15 and 64 years of age, and from the higher socioeconomic segments of the population. Here the hospital was serving the needs of the local population, but in addition was drawing patients from distant areas. According to the authors, "the factors determining choice of Guy's were: proximity of home, proximity of work, and the influence of Guy's trained doctors."

Placement of the four reports side by side makes many of the findings and recommendations at first appear repetitious, but the independent observations serve to drive home the importance of further research into, and continuous monitoring of the communication network among referring physician, specialist and appropriate facilities.

The first paper in Part II, "Studies of Function and Organization" discusses the transitional hostel, or halfway house, in the rehabilitation of the mentally ill. The author, R. Z. Apte, points out that although fewer than 50 hostels were in England and Wales at the time of his study, by 1974 251 will be in operation under local authorities. This article is principally designed to provide descriptive information on the organization and administration of existing hostels and the services offered. In commenting on the future develop-

ment of the hostel, the author points out the desirability of controlled experimentation with alternative methods of care, rather than constructing long-range programs on the basis of inadequate experience.

The second paper, by W. Carson and T. W. Mauer of the Hospital Engineering Research Unit at the University of Glasgow, outlines some of the basic principles in cost-effectiveness analysis and gives examples of its application in hospital engineering.

D. J. Newell, A. Zinovieff, and L. W. Hunt are authors of an interesting report on the evaluation of an experimental pre-discharge ward in one hospital. The unit, simply stated, was designed to accommodate adult patients of both sexes and all specialties during the last few days of their stay if demand for beds for emergency admissions exceeded capacity in any of the separate specialty services. The authors document the difficulties involved in the assessment of the "pure" impact of the experimental unit, but unequivocally state that it made a valuable contribution to the efficiency and quality of care offered by the hospital.

An experiment with a telephone-answering and recording service linking the general practitioner and the hospital is reported by C. J. H. Mann of the University of Aberdeen. Although the cost of the service was relatively high during the pilot phase, many of those involved in the system believe it has had a favorable effect on the quality of the referral process.

The third major section of the book contains three extremely provocative position papers: "The Future of the Maternity Services," by Richard Shegog of the Trust; "Cervical Cytology: A Scrutiny of the Evidence," by E. G. Knox of the University of Birmingham; and "The Level of Dental Health: The Field for Study," by N. D. Richards of the London Hospital Medical College and A. J. Willcocks of the University of Nottingham. As Gordon McLachlan points out in the Introduction, the Trust frequently commissions position papers on subjects of crucial importance to sharply focus the present state of knowledge and areas of needed research. The three papers, although widely different in subject matter, are similar in their excellence. The paper on cervical cytology in particular is a masterpiece of the epidemiological method. The papers should

both excite potential researchers in these areas and instruct policy-makers on the value of careful inquiries as prerequisites to planning.

The explosion of research into the medical care process has resulted in a raft of publications in the professional and trade literature, making the task of the discriminating reader an increasingly difficult one. More often than not, unfortunately, the best works in the field are shelved for future reference simply because time is too short to read everything one should. Hopefully, this will not be the fate of this book. Every reader should find at least one of the essays stimulating and right to the heart of his interests.

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