

Are Anaesthetists Still Living in the Past?

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Abstract. Changes have occurred in the doctor patient relationship over the last 20 years. However, it seems that guidance published by the Royal College of Anaesthetists (RCOA) is not in line with patients' wishes.

1 Extended Abstract

"Patient knows best", "patient triumphs over paternalistic doctors" and "doctors need to listen to what patients want, not dictate" are anecdotal straplines which give a flavour of the changes that have occurred in the doctor patient relationship in medicine over the last 20 years where the emphasis is now on the public to take a much more active role in their health utilising the shared model of the patient-doctor relationship and decision making [1].

The General Medical Council requires doctors to undergo revalidation every five years. This includes feedback from patients on the doctor's politeness, listening skills, ability to explain conditions and treatments, honesty and ability to inspire confidence [2]. Guidance was published by the Royal College of Anaesthetists (RCOA) in 2014 regarding feedback [3]. Anecdotal evidence suggested that this advice was not what patients preferred in our unit. We therefore undertook a study aimed at gathering preliminary evidence to identify the time in a patient's pathway that was considered as most appropriate from the patient perspective to provide such feedback and is in keeping with the ethos of having the patient voice at the centre of our healthcare services [4].

The results showed a contradiction between what the RCOA suggests and what patients want. In total, 106 patients responded, with 99% willing to give feedback. Most felt that providing feedback for the anaesthetist would be somewhat (39%, n=41) or very useful (59%, n=63). Fifty-nine percent of patients (n= 62) felt it was appropriate to be asked for feedback in the postoperative period, and 44% (n=46) felt this was the single best time, compared to after going home (21%, n=22), on the ward before the operation (18%, n=19) or after pre-assessment (15%, n=16). Patients were most likely to feel able to assess the doctor's performance after the operation (67%, n=70) as opposed to after pre-assessment (29%, n=30). Only 15% (n=16) of patients felt that current guidelines matched their preference.

Current RCOA guidance recommends gathering feedback after pre-assessment. Contrary to this expert guidance the results from our case study suggest patient support for feedback to be collected later in the patient journey. This professional guidance may represent professional opinion rather than patient wishes and if true needs to be rectified. Guidelines must always be cognisant of what the patient wants- the so-called wisdom of the crowd [5]. Other guidelines including anaesthetics and other health related bodies should be reviewed with this approach in mind.

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