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Quality indicators for diagnosis and treatment of respiratory tract infections in general practice: a RAND appropriateness method

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Background: Antimicrobial resistance is currently one of the most important public health problems in the world and it is closely related to inappropriate use of antibiotics. in Denmark, primary care accounts for 90% of antibiotic prescriptions. Respiratory tract infections (RTIs) represent about 2/3 of all infections seen by the general practitioners (GPs) and they are responsible for the majority of antibiotics prescribed. in order to improve the use of antibiotics in Denmark valid and specific instruments are necessary to assess the quality of care provided. Quality indicators (QIs) can approach and point out quality problems, and they have proved to be an important stimulus for quality improvement. During the last five years Danish GPs have been using QIs in their daily work with different chronic diseases, however, no Danish QIs for antibiotic prescribing exists. Aim. To develop QIs for diagnosis and treatment of respiratory tract infections, tailored Danish general practice setting.
Method: A RAND/UCLA Appropriateness Method (RAM) was used. Sixty-four QIs for diagnosis and treatment of RTI were carried out based on clinical evidence and national guidelines. A survey was created and mailed to 9 expert comprising mainly GPs, asking them to rate the relevance of each QI using a 9-point Likert scale. Distribution of the Likert scores was generated and given to the experts at a face-to-face meeting which was held to solve misinterpretations and assess consensus.
Results: A total of 50 of the proposed 64 QIs attained consensus.
Conclusions: This study resulted in a final set of 50 QIs tailored setting in Danish General Practice. These QIs may be used to strengthen the Danish GPs focus on their management of patients with RTI and to identify where it is needed to make quality improvements.