Recovery and learning: new ideas in primary health care delivery

Professor Chris Salisbury
14 October 2021

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SAIL DATABANK: PUTTING THE WIND IN THE SAILS OF HEALTH RESEARCH DURING A GLOBAL PANDEMIC

7 May 2020
Does your practice plan to provide the following as an alternative to face-to-face consultations?

<table>
<thead>
<tr>
<th>Service</th>
<th>No plans to use this</th>
<th>Tried to in the past, less so now</th>
<th>Plan to sometime in the future</th>
<th>Definitely within next 3 months</th>
<th>Already do this frequently</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Email or electronic messaging n (%)</td>
<td>169 (53)</td>
<td>66 (21)</td>
<td>51 (16)</td>
<td>14 (4)</td>
<td>18 (6)</td>
<td>318</td>
</tr>
<tr>
<td>Internet video n (%)</td>
<td>273 (86)</td>
<td>31 (10)</td>
<td>13 (4)</td>
<td>1 (0)</td>
<td>0</td>
<td>318</td>
</tr>
<tr>
<td>Bookable telephone consultations n (%)</td>
<td>30 (10)</td>
<td>16 (5)</td>
<td>30 (9)</td>
<td>31 (10)</td>
<td>211 (66)</td>
<td>318</td>
</tr>
</tbody>
</table>

Brant H et al BJGP 2016

DOI: https://doi.org/10.3399/bjgp16X685597
GP’s concerns about remote consulting

- Increase in demand
- Privacy and confidentiality
- Clinical risk
- Inequalities of access
There was a rapid shift to remote GP and nurse consultations due to the pandemic

Percentage of all consultations done remotely by GPs and nurses

- GPs
- Nurses

April 2019: 25%
April 2020: 100%

Source: Murphy M, Scott L, Salisbury C et al. BJGP 2021
DOI: https://doi.org/10.3399/BJGP.2020.0948
Time to turn the heat up on GPs who won’t see us face to face

The BMA refuses to acknowledge public fury at not being able to see a doctor. Here's my prescription for what we all do next...

ALLISON PEARSON

1 September 2021 • 2:19pm
THE CONSULTATION 1

The exceptional potential in each primary care consultation

N. C. H. STOTT, B.SC, MRCP
Senior Lecturer, General Practice Unit, Welsh National School of Medicine

R. H. DAVIS, DM, FRCGP
Reader, General Practice Unit, Welsh National School of Medicine
A
Management of presenting problems

B
Modification of help-seeking behaviour

C
Management of continuing problems

D
Opportunistic health promotion
88% GPs say face-to-face consultations are important for building trusting patient relationships

RCGP’s survey also found that 88% of GPs think face-to-face consultations are important for building and maintaining trusting patient relationships. The therapeutic relationship between a clinician and patient, which we call ‘relationship-based care’, is at the core of general practice, and there is evidence that it has a range of benefits, including often being associated with better patient outcomes – for some patients or situations more than others.

It is also an element that many GPs have reported they find rewarding.

63% GPs say delivering all/mostly remote consultations reduces job satisfaction

The long-term impact of greater utilisation of remote care on the general practice workforce is currently unknown. While remote consultations can support flexible working and better support those with caring responsibilities, there is a risk that general practice may become a less attractive career option for early career doctors if it is seen as a predominantly ‘call-centre’ speciality. GPs have reported that remote consultations can often be exhausting, leading to ‘Zoom fatigue’, with 63% of GPs saying that delivering all or mostly remote consultations reduces their job satisfaction and 61% said remote consultations are making the role more transactional.

In light of Government commitments to expand the GP and
Impact on:

- Quality of life and health outcomes
- Quality of care
- Patient safety
- Patient experience
- Costs
- Equity
- Workload in different sectors
- Health care professionals
Primary care

- Single point of contact
- Accessible
- Generalist
- Comprehensive services in one place
- Holistic, person-centred
- Relationships built through continuity
- Embedded in local communities
“So we face a choice. We provide a range of fragmented services in order to ensure the fastest possible access and the greatest possible consumer choice (but only to people who are able to travel to centralised services and have the wherewithal to exercise choice).

I believe the end result will be fewer GPs, paradoxically longer waits for care, much higher costs for the health service and an inevitable drift towards patients seeking primary care from emergency departments.

Most importantly, there will be better care for those with the fewest health needs and worse care for those who most need it.”
“My general practice is closed”

“GPs under huge pressure”

“The queue outside Diana, Princess of Wales Hospital's A&E was described by one visitor as ‘frightening’ (15 Sept 2021)”
“promote, support, develop and invest in comprehensive primary care. We don’t accept a gradual decline by hanging on to outdated ideas, but we embrace innovation. But innovations that are designed to support the foundational primary care principles of accessibility, generalism, personal care, and co-ordination of care for a defined population.”

Chris Salisbury, RCGP James Mackenzie Lecture 2018

https://youtu.be/Y1dydRE-WUA