

Is continuity of care important?

Experience is that marvellous thing that enables you to recognise a mistake when you make it again. Franklin P. Jones

General Practice 'is responsible for the provision of longitudinal continuity of care as determined by the needs of the patient'.
From the European Definition of General Practice/Family Medicine

Primary care is a result of the historical processes that formed general practice and the current pressure and rewards to change care. The history of general practice is that it was a cheap service that valued the personal GP as the usual provider of primary care, but could not guarantee either a fast or quality assured service. The current NHS costs more and favours faster access to any competent clinician. There is no pressure or reward to encourage GPs to provide personal continuity of care.

For patients continuity of care exists when 80% of contacts by a patient with their GP are with the same GP. The health benefits for the patient of a system that ensures continuity of care are uncertain (ref 1). There is some evidence that continuity improves uptake of preventative care, adherences to treatments, satisfaction and perhaps health status. There is conflicting evidence in chronic diseases. Advice on diabetic control may be less strict, but there may be improvement in diabetic care. Male, younger patients and those with more mechanical type problems perceive continuity as less important. Patients who have conditions with a psychosocial aspect value continuity more. Other research in the US suggests that whilst patients indicated that continuity of care was important to them, they were unwilling to spend much additional personal time or money to maintain continuity with their current GP. Nevertheless, an important subset of older and more vulnerable patients reported being more willing to pay to maintain continuity. In an undefined way it seems that more experienced patients recognise continuity or a personal relationship as an important part of the process of care.

For GPs, the responsibility for the continuing care of specific patients may be important, because it makes it clear that the GP does not have the same continuing responsibility for all the other patients. It's hard for any GP to feel responsible for all the patients in a large practice with more than few thousand patients. It's easier to relate to a more manageable smaller list of patients who are known very well. When you recognise the name on a list as real person, with whom you already have a relationship and whose problems you know something about it, it easier to feel committed to improving that person's care.

My practice has 13,500 patients and 12 GPs. We have roughly 450 patients with diabetes and have been auditing our care of diabetes for 20 years. In the course of our audits we produce lists of the names of patients whose care seems suboptimal. Now we audit many more chronic conditions and do it more frequently. Patients often have many co-morbidities and the same patients names appear on more and more of these lists. These lists become

unmanageable if the names on them have little meaning to most of the GPs. The GPs struggle with the care of these patients unless either the name is recognised and the patient is known as a person, or the GP has a personal responsibility for the named patients and continuity of care. When the patient is known as a person it becomes easier to plan the most appropriate and best care possible for that person.

GPs may have ongoing long term contact with their patients and their families for a wide range of problems over many years, and the contact and care continues even when their medical treatment has 'failed' or has little to offer. Continuity of care helps make the doctor and patient develop the relationship that sustains them when life is difficult.

Ref 1

Towards a theory of continuity of care. Denis **Pereira Gray**, Philip Evans, Kieran Sweeney, Pamela Lings, David Seamark, Clare Seamark, Michael Dixon, and Nicholas Bradley. J R Soc Med 2003 96: 160-166.