DEEP END SUMMARY 42
Continuity of Care

On Tuesday 25 June 2024, the Deep End GP group hosted an in-person roundtable discussion on relational continuity of GP care for vulnerable and deep end populations. The discussion reviewed the strong evidence base and the challenges to implementing this, before focusing on possible solutions.

Background and Context

- Continuity of care is fundamental to effective healthcare, emphasizing long-term patient-provider relationships. Despite strong evidence supporting its benefits – such as enhanced clinical outcomes, patient satisfaction, and reduced healthcare utilization – continuity of care is often underprioritized in Scotland's GP practices.

- Continuity of care is especially vital for managing chronic conditions, mental health issues, and complex healthcare needs, particularly among vulnerable groups such as trauma survivors, the elderly, and marginalized communities. High continuity of care is associated with better patient outcomes, reduced mortality rates, and improved trust between patients and GPs. It has been shown to improve job satisfaction, helping to address the challenge of recruitment and retention.

Specific Challenges

Several systemic and cultural barriers impede continuity of care:

- **Structural Challenges**: Rising workload, larger general practice teams, declining GP workforce, and the increased use of locums all undermine personal continuity.

- **Policy Limitations**: Current GP contracts emphasize access over continuity, deprioritizing long-term patient relationships.

- **Burnout and Emotional Labour**: GPs managing complex cases face high emotional demands, leading to burnout and avoidance of long-term patient care.

- **Cultural Shifts**: Societal emphasis on immediate access to care and digital healthcare disrupt traditional continuity of care.

Facilitators of Continuity of Care

Effective organizational structures, digital tools, and education can enhance continuity of care:

- **Micro-Teams and Personal Lists**: Assigning patients to small teams fosters stronger GP-patient relationships.
- **Digital Tools**: GP software systems and asynchronous consulting platforms can support continuity of care by facilitating continuous engagement.

- **Training and Support**: Emphasizing continuity of care in GP training and providing ongoing emotional support for GPs are essential for maintaining high-quality care.

Recommendations for Strengthening Continuity of Care

- **Policy Levers**: Introduce contractual incentives to prioritize continuity of care for vulnerable groups. Invest in data collection and develop targeted interventions for populations most in need, alongside more equitable resource and workforce allocation, according to population need.

- **Practice-Level Interventions**: Promote micro-teams and trauma-informed support for practitioners. Engage in quality improvement initiatives and monitor continuity of care using tools like the Usual Provider of Care (UPC) and St. Leonard's Index of Continuity of Care (SLICC).

- **Research and Evidence Building**: Evaluate the impact of interventions, including digital tools, and reframe definitions of access to include relational factors. Integrate patient co-design into primary care improvement planning.

- **Education and Training**: Incorporate continuity of care principles into GP training and support early career GPs in gaining experience with relational continuity.

Conclusion

Improving continuity of care is crucial for enhancing the quality of GP care, particularly for vulnerable populations. Addressing systemic barriers through targeted interventions, supportive policies, and education will ensure that continuity of care remains a priority in Scotland's healthcare landscape, ultimately improving patient outcomes and satisfaction.

"General practitioners at the Deep End" *work in 100 general practices, serving the most socio-economically deprived populations in Scotland. "Deep End patients" are distributed more widely, in most Scottish Deep End practices. The Scottish Deep End Project, since 2009, has been supported by the Scottish Government, the Royal College of General Practitioners, and General Practice and Primary Care at the University of Glasgow.*

GPs at the Deep End

Full report available at www.gla.ac.uk/deepend

Contact for further information deependGP@gmail.com