

New continuity of care tracking method for GPs

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New research has outlined a simple way to measure continuity of care for GPs, to benefit patients.

Led by St Leonard's General Practice in Exeter and the University of Exeter, the new research comes after a body of evidence has shown that repeatedly seeing the same GP over time has a range of benefits. Most recently, the Exeter team showed that it lowers mortality. Previous studies have found that it results in significantly higher satisfaction, better adherence to [medical advice](#), significantly fewer attendances at emergency departments and hospital admissions.

Despite these findings, continuity of care is dropping in the UK. In research published in BJGP, the authors say they are aiming to help turn this around.

Sir Denis Pereira Gray, from the St Leonard's General Practice in Exeter, said:

"This is a good news story about the human side of medicine.

"The research is conclusive – it is now urgent to help [general practitioners](#) to measure the amount of continuity with doctors that their patients receive. A management maxim is: "If you don't measure it, you can't improve it." We have found a way to measure continuity easily, for the benefit of patients."

Dr. Kate Sidaway-Lee, the first author, from the St Leonard' General Practice Exeter, said: "This method that has long been tested in practice and compares well with other methods. It is simple to apply generally. We hope it will be helpful to colleagues in many other general practices."

Professor Philip Evans from the Practice and the University of Exeter Medical School, said: "At a time when general practices are hard pressed, we hope the benefits of improving continuity of care will help both [patients](#) and GPs."

The authors comment that current methods of measuring continuity are difficult to apply in everyday general practice, and have developed a method for measuring continuity on a monthly basis in practices with personal patient list systems – the St Leonards Index of continuity of Care, or wherever there is a named GP. The continuity index, expressed as a percentage, can easily be calculated from routine practice data. They found that in their own practice, where all the GPs are part time, a reasonable level of continuity (52 percent) can be achieved. They advocate the wide adoption of this measure so that GPs can track continuity of care and make adjustments to practice systems to maximise it.

The full paper is titled "A [method](#) for measuring continuity of care in day-to-day general practice: a quantitative analysis of appointment data."

More information: Kate Sidaway-Lee et al. A method for measuring continuity of care in day-to-day general practice: a quantitative analysis of appointment data, *British Journal of General Practice* (2019). [DOI: 10.3399/bjgp19X701813](#)

Provided by University of Exeter

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