

DEEP END SUMMARY 32

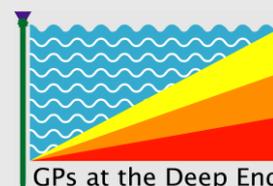
8 years of the Deep End Project

- The essential features of general practice are an unconditional approach to patients' problems, continuity and coordination of care, flexibility and population coverage
- General practice is essential for the future of the NHS but is in crisis due to underfunding, excessive workload and reduced GP numbers.
- Weakened general practice is less able to keep patients' problems in the community and puts hospital services under pressure.
- Generalist care provides an affordable and sustainable solution to fragmented care, especially for patients with multimorbidity, for whom the proliferation of specialist services has increased the treatment burden.
- Apart from a few examples, the exceptional potential of general practice has still to be imagined and realised. This can only be done by general practitioners working together and with others.
- Improving all kinds of relationships takes time and cannot be hurried
- More time is needed for consultations and case management, especially for selected patients with complex problems
- Re-assessment of individual patient needs (e.g. addressing uncoordinated care) should be the driving force for better integrated care, via multidisciplinary team meetings and improved links between services
- Continuity of care is a pre-condition and a quality marker for building patients' knowledge and confidence in living with their conditions and making good use of available services.
- Specialist services, including those in primary care, need to work more closely with general practice, via trusted referral links that are quick, local and familiar, including attached/embedded workers when justified
- Practices are best placed to assess local needs and can adapt quickly but GPs need protected time to lead service developments
- Practices must rise to the necessity of changing skill mix (e.g. the number, range and level of staff) to strengthen the generalist clinical function
- Better support is needed to allow sharing of experience, activities, information and plans between general practices.
- Better metrics are needed to monitor the effect of general practices, either singly or in groups, on patients' uses of emergency care.
- Better metrics are needed to monitor patient experience, especially patients requiring integrated care for complex combinations of conditions.
- GPs are needed for a role combining generalist clinical skills, leadership, capacity building, collegiality and advocacy.
- Further joint work is needed to develop shared understanding and expression of concepts of GP autonomy, mastery, purpose, leadership, collegiality and accountability
- Imagining and developing the future of general practice must involve the next generation of GPs.

"General Practitioners at the Deep End" work in 100 general practices, serving the most socio-economically deprived populations in Scotland. The activities of the group are supported by the Scottish Government Health Department, the Royal College of General Practitioners, and General Practice and Primary Care at the University of Glasgow.

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

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GPs at the Deep End