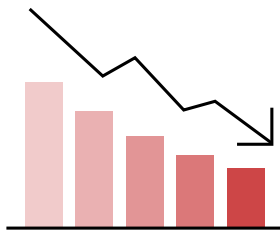


# Delivering quality in modern general practice – some new challenges

Findings from the Remote by Default 2 research study  
Sub-study led by Rebecca Payne

**It's hard to deliver quality general practice within the current context. Infrastructure is not fit for purpose, resources are limited and the complexity of illness is increasing. Remote and digital ways of working distance staff from patients and each other. Technologies intended to increase efficiency can sometimes do the opposite.**



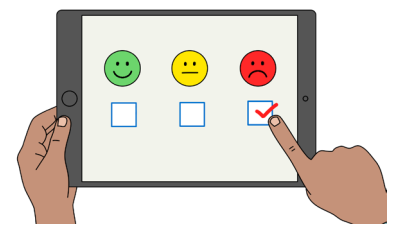
## Austerity has impacted the whole of our health and care system

Many general practices are overwhelmed by the combination of fewer resources, more patients and more complex illness patterns. Staff need to spend time compensating for gaps in other services.



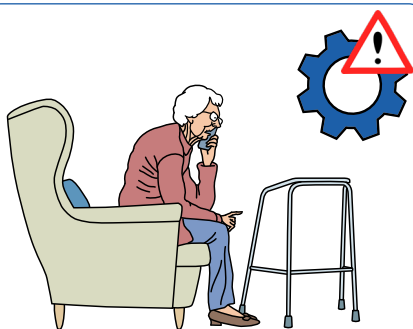
## Healthcare teams are stressed

New ways of working are making staff-patient interactions more complex and stressful, leading to sickness and resignations among staff. GPs, who increasingly see only the most complex patients, are becoming demoralised.



## Health infrastructure is not fit for purpose

Poor physical spaces, insufficient phone lines, unsuitable technology and remote call centres are all contributing to impersonal patient experiences and compromised standards of care.



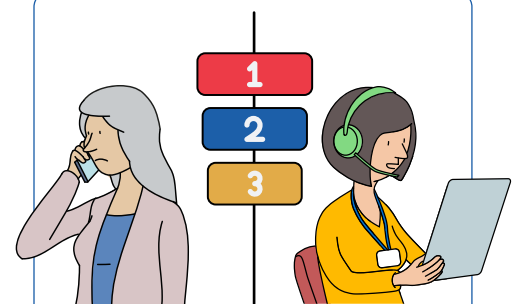
## New technologies are creating new inefficiencies

Poorly designed technologies may increase workload and compromise care quality. When patients are required to operate technology and enter data, some disadvantaged patients, e.g. elderly, struggle to gain access.



## Remote management can reduce care quality

Patients whose long-term condition is managed remotely may misinterpret the questions on online forms, leading to a false conclusion that the patient is stable. Not seeing people face-to-face can lead to new problems being missed.



## Digital triage can increase barriers to care

Remote triage methods disadvantage people who are not tech-savvy or lack digital resources. Efforts to improve equity, e.g. support staff, do not fully compensate for system-level barriers, e.g. poverty, lack of education.

# Learning summaries

Technology-induced stress, suffering and relational strain are under-recognised features of modern general practice

## For practice

- General practice is struggling to deliver quality care in the current context.
- There are trade-offs from new ways of working and new technologies – increasing quality in one area can compromise quality elsewhere.
- Remote access routes require work from the patient
- Quality failures may disproportionately affect disadvantaged and vulnerable groups. Think about your most vulnerable patients and how to prevent them from 'slipping through the net'.
- Check that your approach to long-term condition reviews does not over-use remote and digital modalities and that patients are seen in person when indicated.

## For policy

- General practice is finding it increasingly difficult to deliver quality care in the current context of financial austerity, widespread disadvantage and growing clinical complexity. Acknowledge, and develop policies to address, these wider contextual factors.
- Balance the desire to innovate using digital technologies with a recognition of the new inefficiencies and inequalities that they can introduce.
- Address physical and digital infrastructure, supporting practices to invest in the most appropriate technologies for their context.
- Fix misalignments in the procurement process so that practices are not forced to work with bulk-purchased technologies that are unfit for purpose.
- Address the workforce and skill mix crisis in general practice.



More information on this paper

Payne R, Dakin F, MacIver E et al. What are the challenges to quality in contemporary, hybrid general practice? *Brit J Gen Pract* 2024; doi [to add].