Commercial out-of-hours GP services linked with poorer patient experience

More research needed to better understand the reasons for this finding

Commercial providers of out of hours GP care in England are associated with poorer experience of care compared with NHS or not for profit providers, finds a study in The BMJ this week.

The researchers say further work is needed to better understand the reasons for this finding.

Out of hours GP care in England (operated between 6.30 pm and 8 am on weekdays and throughout weekends and public holidays) is currently delivered by a combination of NHS, not for profit, and commercial providers.

After concerns over variation in the quality of out of hours care, the Care Quality Commission has regulated the quality and safety of out of hours GP services since 2012. Recent inspections found many examples of good practice but also highlighted areas for improvement.

So a team led by Professor John Campbell at the University of Exeter Medical School, set out to investigate patients’ experiences of using out of hours services across England.
He said: “This is a large scale and robust study, and yields interesting results that warrant further investigation and understanding. It is important to exercise caution in interpreting the results.

Although commercial providers scored lower overall, the best commercial providers scored higher than many of the NHS and not-for-profit providers. There are variations and examples of good practice among all providers, but the overall trend is that patients report less positive experiences with commercial providers, and we now need to understand why that is the case.”

The team analysed data from over 900,000 patients who completed the General Practice Patient Survey 2012-13, 80,000 of whom had had contact with GP out of hours services in the preceding six months.

This included individual characteristics (such as age, ethnicity and the ability to take time off work to see a doctor) and their experience of care (timeliness, confidence and trust in the out of hours doctor or nurse, and overall experience of care).

They also examined whether the type of provider organisation (NHS, not for profit, or commercial) was associated with patient experience. Each response was analysed on a scale of 0 to 100.

Commercial providers of out of hours care were associated with poorer reports of patient experience across all three outcome measures compared with not for profit providers. Overall, NHS providers scored slightly higher than not for profit providers.

Some ethnic minorities, particularly Asian patients, reported a poorer experience than white patients, especially when asked about timeliness of care.
Inability to attend the practice because of work commitments was also significantly associated with lower scores across all three metrics of care. In contrast, individuals who reported being able to take time off from work for health related reasons reported somewhat better experiences of care.

The reasons why commercial providers were associated with poorer experience of out of hours GP care warrant further exploration, say the authors.

Future research is also required to investigate reasons for generally lower scores from patients from ethnic minority backgrounds - and to investigate why users who are unable to take time from work to attend their practice during regular hours reported poorer scores across all three questions, they conclude.

The reasons why commercial providers are associated with poorer experience of care are unclear, say researchers at the University of Leicester in an accompanying editorial. “It is possible that commercial providers are located in areas with more complex population needs, but it is also possible that patient experience is genuinely poorer.”

They point to proposals to introduce seven day access to general practice, but say the practicality of this idea “is open to question” as GPs are already struggling to cope with current demand. They also suggest bringing practices together into federations “to enable the scheduling of of access beyond usual opening hours.”

“Although we need more research to better understand the experience of some patients and how we should respond, further reports are not needed; it is time for action that makes a real difference,” they conclude.

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Research: Characteristics of service users and provider organisations associated with experience of out of hours general practitioner care in England: population based cross sectional postal questionnaire survey
http://www.bmj.com/cgi/doi/10.1136/bmj.h2040

Editorial: Satisfaction with out of hours primary care
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