

## General practice

### Future provision of out of hours primary medical care: a survey with two general practitioner research networks

**Val Lattimer**, *South and West Regional Health Authority research student*,<sup>a</sup> **Helen Smith**, *director, Wessex Primary Care Research Network*,<sup>b</sup> **Pali Hungin**, *director, Northern Primary Care Research Network*,<sup>c</sup> **Alan Glasper**, *professor of nursing*,<sup>d</sup> **Steve George**, *senior lecturer in public health medicine*<sup>a</sup>

<sup>a</sup> University of Southampton Wessex Institute of Public Health Medicine, Level B, South Academic Block, Southampton General Hospital, Southampton SO16 6YD, <sup>b</sup> Alder Moor Health Centre, Southampton SO16 5ST, <sup>c</sup> The Health Centre, Eaglescliffe, Stockton-on-Tees, Cleveland TS16 9EA, <sup>d</sup> University of Southampton School of Nursing and Midwifery, Level A, South Academic Block, Southampton General Hospital, Southampton SO16 6YD

Correspondence to: Dr George.

#### Abstract

**Objective:** To ascertain general practitioners' views about the future provision of out of hours primary medical care.

**Design:** Self completing postal questionnaire survey.

**Setting:** Wessex and north east England.

**Subjects:** 116 general practitioners in the Wessex Primary Care Research Network and 83 in the Northern Primary Care Research Network.

**Main outcome measures:** Intention to reduce or opt out of on call; plans for changing out of hours arrangements; the three most important changes needed to out of hours care; willingness to try, and perceived strengths and limitations of, three alternative out of hours care models--primary care emergency centres, telephone triage services, and cooperatives.

**Results:** The overall response rate was 74% (Wessex research network 77% (89/116), northern research network 71% (59/83)). Eighty three per cent of respondents (123/148) were willing to try at least one service model, primary care emergency centres being the most popular option. Key considerations were the potential for a model to reduce time on call and workload, to maintain continuity of care, and to fit the practice context. Sixty one per cent (91/148) hoped to reduce time on call and 25% (37/148) hoped to opt out completely.

**Conclusion:** General practitioners were keen to try alternative arrangements for out of hours care delivery, despite the lack of formal trials. The increased flexibility in funding brought about by the recent agreement between the General Medical Services Committee and the Department of Health is likely to lead to a proliferation of different schemes. Careful monitoring will be necessary, and formal trials of new service models are needed urgently.