

## What are the opportunities and challenges for family practice in the future?

Healthcare systems around the world have been going through significant transformation, particularly within the primary care practice. Primary care physicians have been at the forefront of many of these changes. This synopsis explores the forces that are changing the role of the family doctor and how an effective primary health care system will look in the future. A search from 2000 to present of peer reviewed and grey literature in western countries guided this review.

### Current Context

A **strong primary health care system** is essential to **better patient outcomes** and **health equity** and the family practice is central to its efficient delivery. The **key roles** for family physicians include:

- Chronic disease management
- Prevention of ill-health
- Teaching colleagues/self
- Holistic/personal care
- Continuity/coordinated care
- Generalist

Family practice has an **important role** in **health promotion and disease prevention**, particularly with **chronic disease, obesity and preventative care**. The family practice is the **ideal setting** for **disease screening** and acting as the **gatekeeper to specialty care**. In addition, family physicians are at the centre of the continuity of care. Greater continuity can result in better health outcomes, and improve the physician-patient relationship, communication and trust.

New **business models** have been introduced across many jurisdictions to **increase productivity and efficiency** while maintaining high levels of patient care and patient satisfaction. Some examples include:

- Using best practices and business principles to improve office operations
- Modernizing the office by replacing paper-based medical records with technology
- Improved scheduling to reduce wait times

However, more and more, **family physicians are abandoning** specific areas, such as **obstetrics, emergency medicine**, and providing services in hospitals, homes and long-term care facilities. Reasons for this reduction of services include:

- Work-life balance issues
- Fear of litigation and costs of malpractice insurance
- Insufficient training
- Insufficient numbers of cases to retain competency
- Lack of remuneration and infrastructure
- Increasing fragmentation of care

Moreover, many countries have had **difficulty recruiting and retaining physicians** to work as general practitioners. The increasing need to recruit and train new family physicians due to high turnover has led to decreased productivity and higher costs, and is affecting health outcomes. The **shortage is intensified in remote and rural communities**.

Several strategies have been implemented over the years to address these issues. In the United Kingdom, a new role called the **General Practitioner with Special Interests** has been created to attract more physicians to the general practice. Other physicians have also become “mini-specialists” by focusing their practice on narrower areas of care: sports medicine, maternity, elderly, palliative care or hospital care.

To increase **rural physician recruitment and retention**, medical schools have been **actively recruiting students from rural backgrounds** and have created rural residency programs.

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### Discussion questions:

1. Should we encourage sub-specialties within general practice?
2. What is the best way to improve productivity in the family practice?
3. Have recruitment and retention strategies worked in your community?

## Key Considerations

- *General Practice physicians need to remain at the centre of patient care.*
- *Family physicians need to be at the centre of the continuity of care as that relationship is highly valued by patients*
- *Coordination between the family physicians and specialists needs to be improved to enhance continuity of care*
- *Work-life balance, social and recreational experience, connection with community as well as other financial incentives, can help recruit physicians in rural areas*
- *Recruiting medical students from rural areas may improve rural physician shortage as many will return to practice in a rural setting after graduation*
- *Continuity of care decreases when a patient is admitted to a hospital and rural patients are particularly susceptible to the loss of continuity of care*