

FUTURE PERFECT

In this month's *BJGP* two of the most senior doctors in the UK look ahead at the next 5 years. In her editorial with Laura Shallcross, Professor Dame Sally Davies, the Chief Medical Officer, reflects on the potentially dire consequences of the continuing over-prescribing of antibiotics and the inexorable rise in antimicrobial resistance. The Department of Health has now developed a 5-year antimicrobial resistance strategy, and a new TARGET antibiotic toolkit is available for use by primary healthcare teams, containing material for patients. Later in this issue Professor Sir Bruce Keogh, the Medical Director of the NHS, and colleagues, highlight the Department of Health's Five Year Forward View, reflecting an emerging health policy sympathetic to the idea that general practice is central to the survival of an affordable and effective health service, and promises greater investment and stabilisation of current funding structures to achieve this. The article amounts to a clear statement of the need for further, careful change, accompanied by a call for substantially increased investment in the NHS in the years ahead.

The overall theme of the December issue is Quality, and many articles touch on facets of the measurement and achievement of high quality care. At the centre of any discussion about the quality of general practice must be the quality of outcomes for patients. Aneurin Bevan, the architect of the NHS, famously declared that he would prefer to be kept alive in the efficient, if cold, altruism of a large hospital, rather than die in a gush of warm sympathy in a small one. In the same vein, an important study from Manchester a few years ago, reported on a discrete choice experiment in which patients were queried on their willingness to pay for different aspects of the general practice consultation. A thorough physical examination was far and away the most important aspect, for which patients were prepared to pay three or four times as much as for other components of the consultation, such as seeing a doctor who knew them, or seeing someone with a friendly manner.¹ This is not, of course, to dismiss crucial ingredients of the consultation such as empathy, patient involvement, communication skills, and the like but, as in a good play or a poem, this subtle choreography that creates the 'tunefulness' of the consultation, should

be almost invisible, rather than paraded. In *Adam's Curse*, WB Yeats wrote that:

'A line will take us hours maybe; yet if it does not seem a moment's thought, our stitching and unstitching has been naught.'

In his editorial Simon Glew reflects on the audit cycle, that old stalwart of practice improvement, which is, he thinks, due for a makeover. Peter Gill, from Toronto, has used a consensus-building system to generate a valuable set of primary care quality indicators for children. Martin Marshall, Professor of Healthcare Improvement at University College London, takes us into new, only partly-charted waters in a fascinating study conducted in the East End of London, where quality improvement methods were used to try to improve the management of obstructive pulmonary disease. Later, the importance of using outcome data to measure quality of care is examined by both Richard Baker and John England, while Mairead Murphy and colleagues consider the potential and limitations of the use of patient-reported outcome measures

If structure process and outcome, and the legacy of Avedis Donabedian, are all too much, turn to our *Out of Hours* section and experience the mysteries of existentialism, the thrills of the 68th Edinburgh International Film Festival, and shiver at the prospect of the Krapsole (the Christmas present for someone who has everything?) described by Mark Ashworth and colleagues in the first of our Dangerous Ideas articles: more please, dear readers!

Finally, we are running a writing competition for medical students, with details appearing on the website. We will try to publish as many of the best entries as possible and the very best will have the opportunity to spend a short internship here at the *BJGP*.

Roger Jones,
Editor

REFERENCE

1. Cheraghi-Sohi S, Hole AR, Mead N, *et al*. What patients want from primary care consultations: a discrete choice experiment to identify patients' priorities. *Ann Fam Med* 2008; **6**(2): 107-115.

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