Editor’s Briefing

HIGHLIGHTS
One of the challenges of reshaping primary care is the ever-present fear of unintended consequences — it brings to mind the analogy of rebuilding a jumbo jet full of people in mid-flight. Do we target specific groups? The editorial by Gina Agarwal et al highlights how we might do so for older adults in social housing. Or do we concentrate on the foundation-stone of practice, the consultation? Roger Jones’ editorial offers much to consider as we define our future relationships in primary care.

LEGISLATING FOR THE FUTURE: RESHAPING LAWS
Reshaping primary care has been an abrupt, if not brutal, process in 2020 and the debates on the future direction of primary care roll. Multimorbidity is the norm and we should be mindful of the challenges of treatment burden. Living with a single chronic disease is hard enough and living with three or more can be all-consuming. Complexity may lie with the patient but shouldn’t be designed into the system. When people struggle to access care or attend appointments we must guard against personal blame. There is a single principle we need to underpin any service redesign if we want to avoid unintentionally deepening inequalities: the more complex the patient, the simpler the healthcare pathways that are needed.

On the 27 February 2021 it will be the 50th anniversary of the publication of Tudor Hart’s totemic article on the inverse care law. Reshaping primary care has multiple competing priorities and Tudor Hart, who was largely railing against marketisation, was aware that the NHS has functioned quite well without the profit motive. He knew its limitations as well: ‘Medical services are not the main determinant of mortality or morbidity; these depend most upon standards of nutrition, housing, working environment, and education, and the presence or absence of war.’

We are reshaping our own systems. In 2021 the BJGP will be providing early access to accepted manuscripts so that research doesn’t linger in a virtual drawer awaiting an opportunity to be accepted. We have just accepted 2021 the BJGP will be providing early access to accepted manuscripts so that research doesn’t linger in a virtual drawer awaiting an opportunity to be accepted. We have just accepted the foundation-stone of practice, the consultation? Roger Jones’ editorial offers much to consider as we define our future relationships in primary care.

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REFERENCES

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