

Life & Times

Compassion first

Compassion (n) OED: *'Suffering together with another, participation in suffering; fellow-feeling, sympathy.'*

I'm reflecting upon supporting colleagues as the charity for which I volunteer, Caring for Carers (<https://caringforcarers.org>), goes live on the web. Volunteer doctors have connected colleagues to one another in confidential welcoming virtual breakout rooms in the Doctors' Mess since the beginning of the pandemic. A Nurses' Nexus will start soon.

I'm remembering compassionate conversations with colleagues at work and online, and how those discussions lifted and supported myself and others. What mattered was the quality of the attention. I have been in face-to-face meetings that lacked warmth and humour, and in online meetings with colleagues or peers that supported and uplifted. With colleagues, a kind word made all the difference.

WHAT IS SPECIAL ABOUT A DOCTOR?

With patients, listening — really listening — makes for an improved consultation and often a better diagnosis. David Zigmond refers to this as *'the art and science of pastoral healthcare'*.¹ Clare Etherington and Liliana Risi talk about 'digital warmth' in telephone consultations, with patients responding to a compassionate approach via the telephone.² They argue that *'the content of the conversation between patients and providers, and the re-establishment of relational continuity of care'* is more important than the mode of delivery.

This fits in with Helman's work. He saw GPs as *'Part of a long tradition ... that has always tried to treat the person as well as their disease ... In the context of their own home, family and their community.'*³

However, I'm also reflecting on Yuval Noah Harari, who thinks that physicians will be superseded by diagnostic artificial intelligence (AI).⁴ He states:

'GPs who focus on diagnosing known diseases and administering familiar



*treatments will probably be replaced by AI doctors.'*⁴

Add to this the (now controversial) NHS Digital First Primary Care strategy that states: *'The NHS Long Term Plan, published in January 2019, commits to every patient having the right to be offered digital-first primary care by 2023/24'*,⁵ which has been accelerated by the pandemic. However, the Prime Minister now says that patients may choose to see their GP face-to-face, after a sustained campaign by newspapers against the digital-first 'total triage' approach.⁶

DIGITAL CONTACT CAN BE WARM

Where does this leave us as GPs? For myself, I want to rebrand NHS primary care as 'Compassion First' rather than 'Digital First'. Digital contact can be part of the offering, as long as there is digital warmth and an emphasis on maintaining relationships and listening. Questions and learning about what can and can't be diagnosed and managed well from remote consultation alone are important and ongoing, and patients should be involved in this conversation.

I'm worrying about rigidly deployed digital demand management, rather than digital consultations via telephone/video or email as such. Nobody wants to be greeted or processed in an uncaring and clinical manner. People (both doctors and patients) want to be recognised, respected, and listened to.

I'm wondering if an AI algorithm can be programmed or learn to be kind?

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