Lay Summary

Do patients get better and safer care at hospitals where GPs work within or alongside Emergency Departments? What is stopping us being able to answer this question?

Studies have shown that significant number of people who go to hospital emergency departments (EDs) could be treated by a GP. In 2017 NHS England spent a lot of money to enable primary services to be provided in and alongside emergency departments as a way of reducing pressure on emergency departments. The intention was to reduce crowding and improve patient care and safety. Patients entering the ED with non-urgent complaints were directed to be seen by the GPs, leaving the ED doctors free to care for the sickest patients.

In practice, EDs adopted a variety of ways to work with GPs, but there is a lack of evidence to show whether or not this improved patient care and quality. The variety of arrangements and different ways of working in different places and the many different ways that these are described has made it difficult to find out what works well. So we have developed a consistent way of describing different arrangements so they can be discussed and compared more clearly.

Evidence on whether locating GPS in or alongside Emergency Departments provides better care is limited, outdated or missing. Our study will use the consistent terms we have come up with in our search to find out what arrangements work best for whom and where.

What we can say is that those who plan and deliver services need to be clear about how things are managed and run in their own hospitals and to make sure that these arrangements best suit the local population, demand for services and availability of staff.