

Lay Summary

How to describe the different ways GPs work within or alongside Emergency Departments so that we can compare them more easily?

GPs based in or alongside Emergency Departments (EDs) work in many different ways. The way they have been described varies so much that it is very difficult to compare different models with any degree of accuracy. We therefore needed to look at a wide range of different information to make sure our comparisons of these different ways of working was accurate. Information for this study came from articles and reports of previous studies, a national survey of emergency departments in England and Wales, staff interviews, standard hospital records and discussions from two events involving professional staff and the public.

We divided the different ways of working into two main groups: GPs working inside or outside the emergency department.

Inside:

GPs inside the EDs work in two different ways:

1. Mixed in with emergency department doctors. We call this integrated.
2. Separately but alongside emergency department doctors. We call this parallel.

The GPs may see a mixture of patients, or may see patients having complaints seen commonly in General Practice.

Outside:

Outside GP services, offered separately on the same hospital site as the ED, or at another location.

Services still showed a range of differences working within these models. Some used GPs working in a similar way to the way they would work in General Practice. Other models used GPs working in a similar way to Emergency doctors.

Clearly and consistently describing the services makes it possible to really see how the different ways of working compare. This information will then support better decision-making and help ensure services are developed to meet local needs and circumstances