A 360-degree view of General practitioner (GP) delivered medical care to Australian residential aged care facility (RACF) residents

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**Background**

Although there has been considerable research into aspects of GP delivered care of resident aged care facility (RACF) residents which reveal disease- specific challenges, the dynamics of the GP visit to the RACF resident have been relatively neglected by researchers. How well is the whole person (rather than disease) being cared for? Is there room for improvement?

**Aims**

To investigate the doctor’s visit to RACF residents via the perspectives of four integral stakeholders: GPs, RACF staff, residents and family members.

**Method**

A multi-site study was conducted at four RACFs in regional and rural Australia. During 2017, interviews were conducted with thirty-five participants (8 GPs, 9 RACF staff, 12 residents and 6 family members). The interviews were audiotaped, transcribed and analysed using thematic analysis.

**Results**

Residents praised the care delivered by RACF staff. However, some noted understaffing as a concern. Satisfaction with GPs hinged on issues relating to professionalism and accessibility.

For family members, communication with RACF staff and GP accessibility were important.

RACF staff found unscheduled GP visits and GP accessibility, especially after hours, an issue. RACF staff prized close collaboration and communication with family members and GPs.

GPs found regular scheduled visits, a close working relationship with trusted RACF staff and communication with family helpful, but experienced information technology and medication management system difficulties.

**Conclusion**

GP inaccessibility emerged as the major issue for participants in our study. Regular scheduled GP visits, close collaboration, good communication, information sharing and advanced care planning may assist all stakeholders.