**Title**

Personal and Practice Continuity of Care in Australian General Practice

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**Aims**

To investigate changes to continuity of care, both with an individual GP (personal continuity of care) and at a practice level (site continuity of care), and to understand the characteristics of patients with site or personal continuity.

**Method**

Using a large longitudinal data set (n>22000) with measures of GP and practice level attendances, the prevalence of both site and personal continuity of care are estimated, and regression analysis of the characteristics of people with either level of continuity are provided. Longitudinal data permits understanding of changing attendance patterns, beyond simple cross-sectional associations.

**Results**

Results indicate that site continuity is increasing over time, while personal continuity is becoming a less common attendance pattern. Compared with adults without any chronic diseases, patients with a single chronic disease are more likely to have site continuity of care, while the most frequent users of GP services, and those with multi-morbidity are significantly more likely to have personal continuity of care.

**Discussion**

GP attendance patterns are changing (at least regarding of continuity of care) and the characteristics of patients with personal continuity and site continuity of care show some significant differences. Failing to consider both practice and GP level attendance data may overlook these changes.

**Conclusion**

Continuity of care at a practice level is the most common pattern of GP attendance. Personal continuity with one GP is a less common pattern of attendance, except for the most frequent users of GP services