



Family Practitioners

Mike Morris 10th July 2019

I was thinking recently about when I was growing up in the 1960s and my visits to what was then known as my "family practitioner". This was a doubly significant term as not only did they look after my family, but the practice consisted of a mother and daughter. My medical record was held on individual cards, stored together in an envelope-like folder and was dutifully handed to my doctor by the practice secretary as I went into the consulting room. I knew my doctor well, because I always saw the same person when I visited the surgery or when she made one of her home visits.

She would look up my notes on the last treatment I had received and she would add extra notations as I sat in front of her, but the key point is that she knew me and my family, she even knew my school and so was very familiar with everything in my life. Therefore, if I went to see her with some condition or other, she would immediately try to link it with some other recent illness or event happening in my life. Effectively, my medical record was in her head.

There are obvious drawbacks to this scenario of course: when my family practitioner went away on holiday and I was presented to a locum, he or she relied on my paper record and my responses to questions to find out what was happening. I had the impression that the record was fairly comprehensive though as they seemed to be able to refer back to related conditions. Also, at the time most of my interactions with the NHS were in the immediate area as I didn't travel in the way I do today. However, when I left the garden of England to go to university in the Welsh capital, I changed surgeries. My paper medical record was consigned to the Post Office and was never seen again (although more than once, my electronic record has strangely also got lost in the post when I have moved around the country).

These days we are always traveling around the country, if not around the World, in a way that was largely incomprehensible in the 1960s. We therefore need a medical records system that doesn't rely on FedEx when we change surgeries. But I do think that we have lost the holistic patient record that resided in my Family Practitioner's head. Current symptoms and treatments are available, and a GP can look at an X-Ray from his desk in a way that was scarcely dreamed of at the time of the Bay of Pigs. However, my GP (who could actually be one of 9 GPs, plus locums in one of two surgeries) doesn't know my family or me in the way that used to be the case. He or she will look at my System-One record, but this doesn't include any of my interactions with other parts of the NHS, unless the remote clinician was nice enough to write a letter (one that I saw from my local hospital concluded with the comment "I have not actually seen this patient but I understand that this was the result").

So how can my (almost virtual) GP have a clear view of my situation? I think we need some glue to link together all the medical systems in the country, then link them to social care systems and maybe to schools' learning management systems to get the whole picture? Too much information? Well Artificial Intelligence systems have the capability to contextually arrange information so that it can be easily digested, the GP can always dig down to get the underlying data.

Maybe I am just looking at the past through Rose Tinted Glasses, and medical science has made tremendous advances in the last 60 years, but perhaps its information technology hasn't caught up yet and is not making use of its full potential. Facebook has shown us a new way of working with IT, surely an organisation the size of the NHS can show Facebook how it should really be done?