

GENERAL PRACTICE SIZE AND OWNERSHIP MODELS: IMPACT ON PATIENT OUTCOMES

EMBARGOED UNTIL 12:01am Monday 10 May 2021

RECENT trends in general practice structure may have an impact on future patient care in Australia, according to the authors of a Perspective published today by the Medical Journal of Australia.

Dr Caroline de Moel-Mandel and Professor Vijaya Sundararajan, both from La Trobe University's Department of Public Health, wrote that "the organisational structure of general practice in Australia has changed considerably since the late 1990s".

"At present, 2% of Australian GPs work in solo private practices, while 20% of full-time GPs and 33% of part-time GPs are employed in large practices with six or more GPs," the authors wrote.

"Practice ownership levels have changed as well.

"In 2020, 25% of Australian GPs were practice owners, a decline from 35% in 2008. Factors such as management responsibilities, financial burdens and a lack of work-life balance seem to discourage practice ownership.

"Concurrently, commercial ownership models emerged, ranging from ownership by other health professionals to corporate groups of publicly listed companies, with shareholders having little or no involvement in patient care or practice management," they wrote.

"In 2000, there were six corporate groups; by 2020, two remained, which operate over 400 medical centres.

"Survey data from 2020 indicate that approximately 16% of GPs work in corporate-owned practices. Co-located services increased as well. In 2016, 81% of practices had pathology services on location versus 49% in 2010; for imaging, these figures are 30% versus 15% and for physiotherapy 50% versus 29% respectively."

De Moel-Mandel and Sundararajan wrote that there were four areas in which the size and model of GP practice ownership had impact:

- Impact on access to care "Access may be affected when multiple smaller practices conglomerate into larger, more centrally located practices, especially for people residing in regional and remote areas where there are already fewer GPs per person";
- Impact on continuity of care "In larger practices, the 'usual GP' was often replaced by 'usual practice', resulting in patients consulting GPs they had never met before";
- Impact on quality of care "Research suggests that the quality of corporatised GP services may be worse compared with care delivered by traditional providers"; and



Impact on health expenditure - "It has been argued that the observed increase might be associated with the practice of overservicing to meet income targets, or with GPs over-referring to commercially related and co-located services".

The authors concluded that more research was vital to understand the full effects of the changes in GP size and ownership models on patient care.

"While there is little Australian evidence that worse clinical care is delivered in privately or corporate-owned general practices, there is also no evidence that care is better.

"Hence, if general practice in Australia is to navigate the future changes in practice size, ownership and increasingly co-located service organisation, more Australian research and potentially regulation are needed to track and control what this means for patient care in terms not only of patient experience but also for health outcomes in general practice."

All MJA media releases are open access and can be found at: https://www.mja.com.au/journal/media

Please remember to credit The MJA.

The Medical Journal of Australia is a publication of the Australian Medical Association.

The statements or opinions that are expressed in the MJA reflect the views of the authors and do not represent the official policy of the AMA or the MJA unless that is so stated.

CONTACTS: Kathryn Powley

> Media Manager La Trobe University

Email: k.powley@latrobe.edu.au

Ph: 0456 764 371