Hippokrates Exchange Programme Report:

A fortnight in the Basque Country

Off to San Sebastian I go. The plan was to learn how the Spanish health system, particularly primary care works, experience a more rural setting and improve my Spanish. I have enjoyed the immersive experience and can honestly say I have learnt lots.

Background

The main health centre is in Villabona a short distance from San Sebastian. The Basque country is overall more affluent that other parts of Spain, with unemployment lower than the Spanish average due to the presence of many local industries.

The Health Centre in Villabona, has three rural outreach surgeries and I could attend these too.

Key Learning

The system I saw in the Basque country was for me a gleaming beacon of everything great about general practice.

The system placed great emphasis on continuity of care. The doctors and nurses and even GP trainees knew all their patients and in most cases their family too. This made for smoother consultations, with strong doctor-patient relationships.

How is primary care organised?

The doctors working in primary care include GPs, paediatricians and gynaecologists. GPs would see patients over the age of 14, with children younger than this seen by paediatricians. Women's health was seen by the gynaecologist. Each doctor worked in partnership with a nurse.
In Villabona all the specialties were based in the same building and lunch time meetings were chance to catch up, discuss clinical cases and important aspects of primary care management. All doctors are salaried in the Basque system and most doctors and patients were bilingual speaking Spanish & Basque.

Screening such as bowel screening programs were locally led, so the bowel screening program runs for a set window during the year and this means uptake is relatively high.

The core ethos of primary care was built around continuity of care. Each doctor and nurse worked 5 days a week. Each pairing had approximately 1400 patients. Patients were only able to book with their doctor and access to same day appointments seemed relatively straightforward.

In general GPs seemed happy about their work, they worked hard and had enough time to go the extra mile for their patients. I was so surprised that in general all GPs, even the newly qualified GPs worked 5 days a week.

**Why is this so different to the doom and gloom in general practice in the UK? I've suggested some possible reasons below.**

**Continuity of care** - They knew their patients well. Relationships formed over years made for smoother consultations. Even trainees got to know the patients on their list.

**Better workload management** - In general face to face contacts were limited to 25 per day. There is time for educational learning as well as clinical meetings and administration built into the day.

The lead GP at the practice ensured that staff had time to eat together daily, often before or after meeting times. This made for an integrated team where staff truly knew each other.

More manageable list size (on average 1400 patients per doctor)
Availability of community paediatricians and gynaecologists to share workload.

**Less doom and gloom in the press** - not a day goes by that the perils of the NHS are not in the news. Sadly, I think this does impact on patients' and doctors' morale.

**Better IT solutions** – Regionally led services mean that the region has an integrated IT system, i.e. primary and secondary care use the same system. Each had their own gateway of course, but this meant that anything coded in secondary care could be pulled over to the GP system with ease. This was organised with a doctor friendly interface, with few clicks needed for each task. Furthermore, medication changes made by hospital doctors were automatically reflected in the primary care system.

**How else does your experience of primary care differ to general practice experienced in the Basque Country?**

My experience has been largely based in inner city London General practice. We have greater cultural diversity in our patient population and therefore are more experienced at placing disease in a cultural context.

Our patient population is not static.

We have the benefit of a clinical pharmacist available in our surgery, however this was not the case in Villabona.

**Would I recommend this experience to other UK GPs?**

Yes – This was a refreshing experience and unique opportunity to experience primary care in another European country. Dr Pablo Daza was a fantastic host – warm, accommodating and an inspirational senior GP. It has left me more energized about general practice & I will cherish the memories in the years ahead.

Location: Centro de Salud de Villabona

Supervisor: Dr Pablo Daza

Dates: March 2018