



Increased continuity of care can lead to reduced mortality rates

Pereira Gray DJ, Sidaway-Lee K, White E, Throne A, Evans PH. <u>Continuity of care with doctors - A matter of life and death? A systematic review of continuity of care and mortality</u>. BMJ Open. 2018;8:e021161.

What is the context of this review?

- Continuity of care is the repeated contact between a patient and a doctor, which allows for improved understanding of each other's views and priorities.
- Continuity of care is associated with greater patient satisfaction, improved health promotion, increased adherence to medication and reduced hospital use.
- The relationship between continuity of care and mortality rates is unclear.

Box 1: Coverage of OHT building blocks

This review addresses OHT building block #1:

- 1) defined patient population (domain 5 sustained care-relationship targets)
- 2) in-scope services
- 3) patient partnership and community engagement
- 4) patient care and experience
- 5) digital health
- 6) leadership, accountability and governance
- 7) funding and incentive structure
- 8) performance measurement, quality improvement, and continuous learning

What question is being addressed?

• Are higher levels of continuity of doctor care, in any setting, with any patient group, associated with changed mortality?

How was the review done?

- A detailed search of several electronic databases was conducted for studies published in English.
- Studies that compared degrees of continuity of doctor care to mortality rates were included.
- A total of 726 studies were identified in searches and 22 were included in the review after assessments for eligibility.
- The authors reported no sources of funding for this review.

How up to date is this review?

• The authors searched for studies published between 1996 and 2017.

What are the main results of the review?

- The majority of studies (18 out of 22) showed that greater continuity of care was significantly associated with lower mortality rate.
- The authors acknowledge that the effects of continuity of care on mortality rates are small.
- The protective effects of continuity of care occurred with both generalist and specialist doctors.

How confident are we in the results?

- This is a recent and moderate-quality systematic review with an AMSTAR rating of 7/10.
- All included studies were rated as high quality.
- The authors acknowledged that there is currently no consensus on the best way to measure continuity of care.

RISE prepares both its own resources (like this plain-language summary) that can support rapid learning and improvement, as well as provides a structured 'way in' to resources prepared by other partners and by the ministry (access all resources here). The plain-language summaries produced by RISE are funded through a grant from the Ontario SPOR SUPPORT Unit (OSSU) to the McMaster Health Forum. RISE is also supported by a grant from the Ontario Ministry of Health to the McMaster Health Forum. The opinions, results, and conclusions are those of RISE and are independent of those from its sponsors. No endorsement by the sponsors is intended or should be inferred.