

Letter

Burnout in general practice: Could doing audits help?

The paper by Toukhsati et al titled 'Burnout and retention of general practice supervisors: Prevalence, risk factors and self-care', published in the *AJGP* December 2024 Supplement, found that general practice supervisors across Australia reported high levels of burnout and exhaustion.¹ We have similar problems in the UK, with a nationwide shortage of general practitioners (GPs) exacerbating difficulties with recruitment and retention.² However, conducting audits at our London general practice with four bright, keen medical students recently provided a glimmer of hope, encouraging both GPs and students to think general practice is worthwhile. As in Australia, involving students in quality

improvement projects is a key element of UK medical education,³ although some students think audits are boring.⁴

In 2024, four medical students undertook a second round of audits at our inner-city general practice. Three of the audits, focusing on gestational diabetes mellitus (GDM), chronic kidney disease (CKD) and urinary tract infections (UTIs) were conducted by previous students in 2022–23, and one focused on attention deficit hyperactivity disorder (ADHD) in 2021. Under the guidance of our deputy practice manager, anonymised practice data were compiled and patient management was evaluated against UK National Institute for Health and Care Excellence (NICE) guidelines (Table 1).

All audits showed some improvement. The coding of CKD in patients with two consecutive measurements of estimated glomerular filtration rate (eGFR) <60 mL/min/1.73 m² showed the most change; only four patients had not been coded compared with 64 in the first audit. There was a small increase in both annual haemoglobin A1c (HbA1c) monitoring of women with a GDM history and in recording of all four parameters for patients on stimulants for ADHD. Subsequent discussion with the primary care team suggested these could be improved. There was little difference in the rate of three-day prescriptions for women with an uncomplicated UTI; the GPs said they sometimes prescribed longer courses of antibiotics for persistent symptoms, recurrent infection or patient preference.

Table 1. Medical student audit cycles conducted between 2021 and 2024 at an ethnically diverse inner-London practice with 10,000 patients

Topic Author initials NICE guideline	Audit question	First audit findings (2021–23)	Second audit findings (2024)
GDM SK www.nice.org.uk/guidance/ng3	How many women with a history of GDM have had an HbA1C check within the last 12 months?	44% (16/36) of women had their HbA1C checked	56% (31/55) of women had the HbA1C checked
CKD RH www.nice.org.uk/guidance/ng203	How many patients have two consecutively recorded eGFR <60 mL/min/1.73 m ² and no coding of CKD?	64 patients with two eGFR <60 mL/min/1.73 m ² measurements taken ≥3 months apart had no coding of CKD	Four patients with two eGFR <60 mL/min/1.73 m ² measurements taken had no coding of CKD
ADHD medication monitoring BH www.nice.org.uk/guidance/ng87	How many children and young people on stimulants for the treatment of ADHD have a recorded height, weight, blood pressure and pulse within the past 6 months?	13% (1/8) of children aged <18 years taking stimulants had all four parameters recorded within the recommended time frame	25% (4/16) of patients aged <20 years taking stimulants had all four parameters recorded within the recommended time frame
Antibiotic treatment for women with a UTI NF www.nice.org.uk/guidance/ng109	What proportion of women with an uncomplicated UTI were prescribed a 3-day course of nitrofurantoin?	74% (39/53) of women were given a 3-day course of antibiotics	77% (17/22) of women were given a 3-day course of antibiotics

ADHD, attention deficit hyperactivity disorder; CKD, chronic kidney disease; eGFR, estimated glomerular filtration rate; GDM, gestational diabetes mellitus; HbA1C, haemoglobin A1C; NICE, National Institute for Health and Care Excellence; UTI, urinary tract infection.

Feedback of the generally positive findings improved the morale and motivation of the GPs. In addition, the practice was paid for hosting the students. Similarly, the students felt they were able to make a difference to clinical practice and to patients. All four medical students are now considering becoming GPs. We agree with Toukhsati et al¹ that workplace initiatives, perhaps including protected time to teach and conduct audits, might help to address burnout.

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