

## **Continuity of care during the COVID-19 pandemic: Qualitative results from a mixed-methods study**

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### **Background:**

Decreases in health service use were observed globally during the COVID-19 pandemic. In the quantitative part of this mixed-methods study, we documented similar trends in

Switzerland, with a retrospective cohort study showing a 15-20% decrease in general practitioner (GP) consultations/chronic disease monitoring in spring 2020. These changes need to be understood, particularly for individuals at risk of COVID-19 complications, as many have conditions requiring regular monitoring.

**Methods:**

With a mixed-methods design, we examine continuity of care for at-risk groups (people:  $\geq 65$ -years-old, with cancer, diabetes, respiratory disease, etc.) between Mar-2020 and Apr-2021. Following quantitative analyses, we qualitatively studied changes in GP/patient practices thru semi-structured interviews with 23 GPs and 36 at-risk patients. We here focus on thematically analyzed qualitative results.

**Results:**

Qualitative data helped explain observed reductions in consultations/monitoring: 1) some patients were discouraged to seek care by official recommendations and/or GPs during the first semi-shutdown; 2) some patients perceived GP offices as closed/overburdened; 3) some patients feared contracting coronavirus; 4) some patients sought alternatives to traditional primary care consultations (e.g., tele-consultations, consulting pharmacists/other professionals, self-reliance). Many patients did not feel that there was discontinuity of their cares. GPs commonly described feeling like an underutilized resource during the pandemic and explained how they could have been mobilized for population needs.

**Conclusions:**

During the first wave, there was a mismatch between 1) GPs' reported availability/preparedness to adequately care for at-risk patients, and 2) some GPs discouraging at-risk patients to come for consultations, at-risk patients' perceptions that their care was not "urgent" in a pandemic setting, and patient perceptions that GPs were otherwise unavailable/overburdened.

**Key messages:**

- Qualitative data offer explanations for health service use reductions during the COVID-19 pandemic.
- Results provide potential paths forward and highlight GP views of being an underutilized resource.