

# New Knowledge, New Tools: A Look Inside the 'Black Box' of Family Practice

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Four years ago a theme issue of *The Journal of Family Practice* focused on research reports from nine practice-based research networks in family practice. I had the opportunity in that issue to editorialize on the importance of practice-based research in expanding the knowledge base of family practice and reuniting research and practice. Since that time, practice-based research networks have grown and flourished. This issue of the *Journal* presents 10 research reports from the Direct Observation of Primary Care study, a large and complex study of the content and processes of family practice. The work was conducted by a multidisciplinary team led by Kurt Stange and his colleagues working with the Research Association of Practicing Physicians, a practice-based research network in Ohio.

Many health services researchers and most policymakers fail to understand the complexity of primary care practice and continue to treat it like an unknowable "black box." The traditional health services research approach has examined primary care largely through secondary analysis of billing data and have studied how outputs (ie, mix of services, practice patterns of physicians, and patient outcomes and satisfaction) vary with inputs (ie, practice guidelines, reimbursement policy, physician training and certification, and referral restrictions). The work of Dr Stange and his colleagues is our first systematic look inside the black box of primary care practice and provides a unique opportunity to understand real-world family practice.<sup>1</sup>

This work provides important information to help us better understand family practice, guide policy development, and inform improved methods for future study. For example, the study offers important suggestions for understanding and enhancing clinical preventive services delivery. One article describes the ability of family physicians to target preventive services delivery toward the patients most in need,<sup>2</sup> and another suggests using illness visits as opportunities for prevention.<sup>3</sup> Other reports show how clinical preventive services delivery is affected by patient volume,<sup>4</sup> practice and physician characteristics,<sup>5</sup> and the patient's emotional distress.<sup>6</sup> The study also reveals two different styles of family focus by family physicians,<sup>7</sup> and sets the stage for further work to enhance this basic tenet of our discipline. A separate analysis describes the phenomenon of family physicians providing care to the secondary patient.<sup>8</sup> Taken together, these articles demonstrate the value of the family physician in the current health care system.<sup>9</sup>

This issue of the *Journal* also provides information for

policymakers interested in maximizing the effectiveness of primary care. Reports in this issue show the trade-offs inherent in high-volume patient care,<sup>4</sup> and the effect of patient emotional distress on the outpatient encounter.<sup>6</sup>

The work of Dr Stange and his colleagues uses multiple methods for studying family practice, by integrating quantitative and qualitative methods. It promotes simultaneous description, testing of specific hypotheses, understanding of meaning, and development of new theories based on direct observation of family practice. The work challenges us to consider complexity theory<sup>10</sup> and other innovative ways of thinking about our work.

The insights we can derive from this study will certainly lead to new ways of understanding and improving family practice operations, the physician-patient encounter, and the larger health care system. This study demonstrates the power of practice-based research and the importance of reuniting practice with research. The reunion of the researcher and the practicing family physician will produce a broader understanding of what physicians actually do, will lead to further assessment of the effect of the family practice approach on important patient outcomes, and eventually produce interventions that enhance the ability of family physicians to improve the health of all their patients.

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