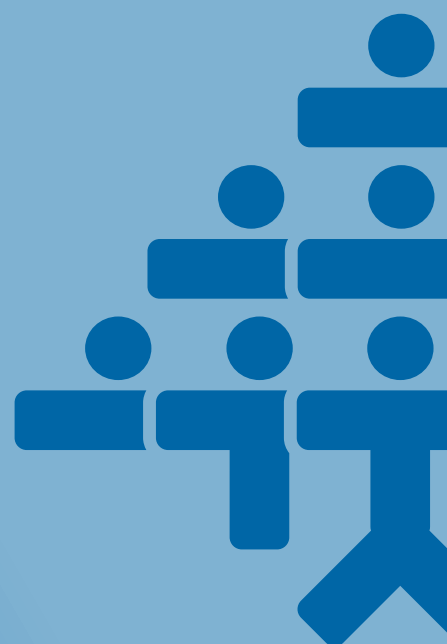


# Annual Report 2013 (Jan–Dec)



## **The Irish College of General Practitioners**

### ***About the Irish College of General Practitioners***

The Irish College General Practitioners (ICGP) is the professional body for education, training, research and standards in general practice.

### ***College Activities***

- Teaching, training and education at undergraduate and postgraduate levels
- Accreditation of specialist training programmes in general practice
- Operates a professional competence scheme under arrangement with the Medical Council
- Examining body for membership in general practice (MICGP)
- Continuing education and professional development
- Research
- Practice management support through training, advice and consultancy
- General practitioner health
- Public relations and media liaison on behalf of the profession
- General practice publications, guidelines and protocols
- Advice and support to members
- Advocacy on behalf of the profession with external agencies.

### ***Contact Us***

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## Chief Executive Officer's Report

**Author: Mr Kieran Ryan**

When I was thinking of this year's piece for the annual report, I had a number of questions in my head on how to structure a summary of an incredibly challenging and diverse year for the College. Did we represent general practice to the best of our ability in 2013? Did we continue to provide value for money to support members and the profession in meeting their education, training, research and practice needs? Did we drive greater collaboration with key stakeholders? Did we stick to our ethical and moral values as a college? Did we plan and think about the future of the College and the membership so that decisions made now will have long lasting sustainability effects?

One of the most important challenges of 2013 was the College's representation of general practice during the discussions around the Protection of Life During Pregnancy Bill. This matter could have been very divisive, and certainly the range of views and opinions reflected the very diverse views that one can see throughout Irish society on this matter. Our AGM in 2013 was a landmark event but one where I can say the profession accounted for itself with dignity and professionalism. There was enormous respect for all views and opinions. Following the AGM, the College was requested to present to the Oireachtas Committee on the bill, and the leadership and teamwork by all members of the Executive and the delivery of our position by Dr Margaret O'Riordan were a very proud moment.

In July 2013, the College Executive took the decision to withdraw our participation in the HSE Clinical Care Programmes. This decision followed months of concern for the governance of the programmes and the lack of any commitment by the HSE to deal with the workload and resource issues for implementing the programmes. General practice had suffered three FEMPI cuts coming to around a 38% cut in practice income from the GMS. The HSE then planned to rollout chronic disease programmes with no discussion or negotiation planned on the resourcing end of things. The College had serious concerns for maintaining the quality of care and its impact on patients and so had no choice but to withdraw. The College then came under the scrutiny of the Competition Authority. This was most unexpected as our involvement had nothing to do with direct service provisions. Following a few rounds of correspondence, the authority accepted that the ICGP actions did not fall under their remit of concerns. We ended 2013 with effectively no change to the structures of the Clinical Care Programmes and so the College remains disengaged from this process.

In November, the College amended its governance structures following nearly 18 months of review. The review was initiated by the College Council in 2011 so that the structures for the governance of the College would be fit for purpose and see the College continue its success for the next 30 years. The EGM in November installed the College's Executive Committee as the first Board of Directors of the College. The Council remains as the main conduit for membership representation and the Council is the primary source of membership representation to the College. The Council shall elect the president of the College and also the membership of the Board of Directors of the College. The new board shall include two external members who are not GPs. This is in line with good governance practices for not-for-profit organisations.

In 2014, the College will continue to pursue excellence in training and education. This will be underpinned by research and infrastructure to deliver this objective. In 2013, we invested in the development of our ICT and web based technologies. We continue

to develop our staff to provide the highest level of services. We reinstated four CME tutors and funded additional group leaders to provide our acclaimed CME small group learning scheme to GPs throughout the country. We further developed our Irish Primary Care Research Network (IPCRN). The College finances are such that we can invest in the provision of such quality services to members. The College, along with the other Irish Post Graduate Medical Training Bodies (PGTB), embarked on a medical revalidation project in Qatar. This project is very innovative and allows all the PGTBs to collaborate and gain experience in the area of medical revalidation. It is certainly something that is on the horizon for Irish doctors.

The year ahead will be one of the most challenging for Irish general practice. The Government announced in its 2013 budget the start of universal GP care for all citizens by first giving free GP care to all children under six years of age. This announcement was a complete shock to all GPs and the College. There had been no prior discussions or engagements with the profession. There was no discussion on what type of care is to be provided. There were certainly no announcements about an increased investment in funding and infrastructure in general practice or primary care. A great sense of unity among GPs in the face of this challenge emerged and will stand the profession in good stead during 2014. A united profession is a strong profession and GPs must believe in its ability to respond, adapt and prevail.

I wish to thank all members of the Board and in particular the Chair, Dr Mary Sheehan, and our President, Dr Seamus Cryan, for their ongoing support. I also want to continue my appreciation for the untiring efforts of the senior management team – Dermot Folan and Dr Margaret O’Riordan – along with all the staff of the ICGP. I wish Dr Tony Cox every success when he takes up the presidency in 2014.



## President's Report

**Author: Dr Seamus Cryan, ICGP President**

### Overview

My year in office was busy, interesting, challenging and has passed very quickly. There were the traditional set pieces, the AGM, the Summer School at Lyrath House and the very successful and over-subscribed Winter Meeting in Athlone – the College in full flow in its educational mode and doing what it does best.

There was the remembrance ceremony for deceased members and their families. This is much appreciated by those touched by loss and should always be treasured by our College.

The graduation ceremony at Kilmainham was another important milestone in the year, both for the new members and their loved ones. The venue and the bright new members sparkled.

Internal College business also kept me very busy. Following the introduction of the new governance structures, the first meetings of the new Board and newly structured Council took place. The responsibilities of both these bodies have changed but I am certain this will bring benefits for our College in terms of clarification of their respective roles. I hope these changes will stand the test of time as did the first structures set up by the founding fathers 30 years ago.

The College Board has worked very hard and diligently on behalf of the membership. The management and all of the staff at Lincoln Place have been totally dedicated to the College and its ideals. Service above self seems to be the underlying philosophy and it is very impressive.

I have also represented College members as an invitee at many external events. Both Eilis and I have been given great welcomes on our travels and have been particularly struck by the high regard with which our College is held by all our sister colleges and organisations. Faculty visits to Bray, Mayo and Sligo have been highlights and have helped convince me that lively faculty activity, including social activity, is essential for maintaining morale among us all, particularly at this time of great stress for our speciality.

The year has been marked by more political activity than I had expected. My first week brought me to the Health Committee in the Dáil where the Protection of Life during Pregnancy Bill was being discussed. Margaret O'Riordan presented the College paper on the subject and fielded all questions very ably.

Chair Mary Sheehan and I had been trying to meet with ministers since May 2013 to engage on the possible changes that the government might have in mind for general practice. As has been well recorded, we had no engagement until our meeting with Minister White on 31 January this year where we presented our future vision of general practice. Our input was strongly welcomed by the minister and his team. This compounded our surprise and disappointment at the content of the draft contract for the provision of free GP care to under-sixes which was handed to us at the end of the meeting.

This draft contract has rightly provoked a storm of protest from our membership. The strength and unity of response has been heartening. The Board and management team at Lincoln Place have worked tirelessly to represent our members views to the minister, the media and other medial colleagues. The South Tipperary Faculty organised

a very successful national meeting held in early March. This was planned many months earlier to highlight the impact of the FEMPI cuts on Irish general practice. However, the potential for damage by the draft contract to the existing high quality patient care delivered by GPs became the central focus of discussion. Minister White carried away a very clear message from the meeting.

The next six months will be vitally important to Irish general practice. We must remain strong and unified for the good of our patients, the health and well-being of our doctors and the survival of Irish general practice which has been the bedrock of healthcare in our society for so many years.



## Chair's Report

**Author: Dr Mary Sheehan**

This year the format for the annual reports has changed to a calendar year rather than from AGM to AGM, as previously. Hence, the report will reference some of the work of John Delap, my predecessor, and will not go into detail on some of the issues which face us now such as the draft contract for the provision of GP services to children under six years of age.

The year 2013 was a busy year for the College. In the early part of the year, we worked with Prospectus Strategy consultants to modernise the governance structures for the ICGP to ensure the highest standards of governance and accountability. This was approved by the Council at the March meeting and enacted by a vote at the EGM in November. The current executive is in transition to the new board structure, and will require training and induction to ensure that we understand and fulfil our duties to the College as its board of directors.

The Medical Council inspected the postgraduate training structures of the ICGP in February of 2013 and accredited it as the specialist training body for general practice for five years. They made special mention of the trainees who met them as part of the inspection process. The Medical Council questioned the limit of six years within which training should be completed, and seeks evidence on the value of the fourth year. They request that the ICGP reviews the terminology to reflect it as a single programme delivered in a number of geographically separate sites. The team concluded that approval of the ICGP should be granted by the Medical Council for five years with a progress report on the recommendations due after one year.

These changes would be facilitated if the transfer of postgraduate training from the HSE to the ICGP progresses. As I read the previous annual reports while preparing to write this, I see the impending transfer of training is a recurring theme.

At the AGM in May we had a frank and open exchange of views from all sides of the debate on “the protection of life in pregnancy” bill and dealt with three motions on the bill and on abortion. The Executive had fears that the discussions would be contentious and divisive but were heartened by the respect shown by all to all speakers regardless of their views. The session was skilfully chaired by Professor Bill Shannon who ensured that everyone who wished to speak was able to do so without interruption.

We were invited by the Health Committee of the Oireachtas to make a submission on the “Protection of life in pregnancy” bill and I would like to thank Dr Margaret O’Riordan, Medical Director, for making our submission.

At the Council meeting at the AGM, the Council voted to support the CME Tutor Network by recruiting the four replacement tutors required whether or not the HSE agreed to cover the funding.

The four new tutors are in place and the CME network is now at full strength. The demand for CME places has meant that the tutors have had to increase numbers in groups and to increase numbers of groups. I would like to express my thanks to the tutors and group leaders for their work. Again, the transfer of CME from the HSE to the College is a recurring theme in the annual reports.

In July, the latest round of FEMPI cuts was announced and the ICGP recognised that



despite the work done by the Clinical Care Programmes in designing protocols and care pathways, there was no evidence that any resources to enable the transfer of clinical work from secondary to primary care were available. Having discussed it with the clinical leads, the Executive took the difficult decision to withdraw from the clinical care programmes. The Medical Council ethical guidelines place a duty on doctors to advocate for resources for their patients and we felt that this duty of care did not allow us to stay silent and remain within the programme.

I would like to thank the GP leads who gave their time to put forward the case for general practice and primary care while in the programmes.

In addition to the above items, the College continues to look after its core business of “serving the patient and the general practitioner by encouraging and maintaining the highest standards of general medical practice. It is the representative organisation on education, training and standards for general practice.”

We are now approaching the end of the third year of professional competence. This is now part of the work of the year for most GPs and most have embraced audit and see it as a quality improvement vehicle for their practice.

The College has invested in e-learning with e-learning courses and modules available through the website for members, as well as the more traditional diploma courses.

Although my brief was to cover 2013, I cannot ignore the challenges that 2014 has thrown us.

We were provided with a draft contract for the under-sixes on 31 January 2014. This was without prior discussion or consultation. This draft has united GPs in their opposition to the terms of the contract. The programme for the government proposes “free” GP care for all by the end of their term, i.e. 2016. The contract agreed for the “under-sixes” is likely to be a template for a whole population coverage and must be fit for purpose.

We have called on the Minister to tear it up and start again.

The College is not a negotiating body and does not see that we have a role in contract negotiation. We do, however, recognise the need for a new contract. This contract will shape the future of health care for the next decades and we will continue to point out that countries which invest in primary care and a strong general practice have better health outcomes.

I wish to thank the College management, Kieran Ryan, CEO, Dermot Folan, COO, and Margaret O’Riordan for their advice, assistance and direction since last May.

I would like to thank the other members of the Executive for their work for the College and its members. Also thank you to Caroline Murtagh who provides administrative support to the Executive and Council.

The administration staff in Lincoln Place are unfailingly helpful and efficient, and I thank them too.



## Honorary Treasurer's Report

**Author: Dr Gerry Cummins**

It gives me great pleasure as treasurer of the Irish College of General Practitioners to present my report and the financial statements for the year ended 31 December 2013.

The financial statements in respect of the year show that the College had an operating surplus in excess of €428,000 for the year. As we are all too well aware, the economic climate in 2013 remained challenging and continued to weigh heavily on our profession. With this backdrop, it is comforting to see that the College can continue to operate and achieve a surplus.

Whilst the level of surplus has reduced from that achieved in prior years, it is worth remembering that the College is a not for profit organisation. The College had a sufficient level of reserves to allow it to increase the level of services offered and engage in additional activities whilst maintaining current income levels and not applying increases.

The income of the College reduced marginally year on year and costs increased year on year. The primary increase in costs arose from the employment of additional staff to meet the expanding range of services and activities offered by the College in addition to a planned investment in web and ICT costs as I indicated last year.

As I near the end of my tenure as treasurer, I am pleased to note the healthy financial position of the College and wish my successor well. My role as treasurer relied on the help and assistance of Kieran Ryan, Chief Executive Officer; Dermot Folan, Chief Operating Officer; and indeed the entire team of support staff at the College. I thank them most sincerely for their help and assistance during my entire period as treasurer.

I also wish to thank my fellow Finance Committee members and our auditors and accountants for their continued support and assistance.

As I have previously mentioned in prior year reports, I think it is appropriate that I express my gratitude to all members for their continued support of the College through their payment of the annual subscription and use of services. The College is deeply indebted to its members for their continued support. The annual report outlines the full range of programmes, supports and services that the members can avail of and all of it is possible from their continued support. It is envisaged and hoped that the College can continue to increase its range of services available to members whilst holding the annual subscription at current levels.

All relevant details from the financial statements are below and a copy of the full financial statements is available at the College on application.

**The Irish College of General Practitioners Limited**  
**(A company limited by guarantee)**

**Income and Expenditure Account for  
the year ended 31 December 2013**

	<b>Note</b>	<b>2013 €</b>	<b>2012 €</b>
<b>Income</b>			
Subscriptions received		1,833,442	1,893,375
Professional competence		1,163,418	1,147,236
Other college generated income		1,124,336	1,227,950
Public and private sector funding		2,007,059	2,169,896
Foundation levy		253,033	255,525
Sponsorship		170,034	170,980
	<b>1</b>	<b>6,551,322</b>	<b>6,864,962</b>
<b>Expenditure</b>			
Establishment		108,109	93,933
Administration		1,858,172	1,776,884
Personnel		2,680,596	2,428,252
Professional fees		1,051,537	1,128,398
Committee, meeting and travel		214,700	208,397
Depreciation		214,568	293,984
		<b>6,127,682</b>	<b>5,929,848</b>
<b>Operating result for the year</b>		<b>423,640</b>	<b>935,114</b>
Interest receivable and similar income	<b>4</b>	<b>60,550</b>	<b>41,966</b>
Interest payable and similar charges	<b>3</b>	<b>(55,472)</b>	<b>(55,811)</b>
<b>Operating surplus</b>		<b>428,718</b>	<b>921,269</b>
Taxation		-	-
<b>Surplus on ordinary activities</b>		<b>428,718</b>	<b>921,269</b>
		=====	=====

There have been no discontinued activities or acquisitions in the current or preceding year.

A separate statement of total recognised gains and losses is not required, as there are no gains or losses other than those reflected in the income and expenditure account.

Approved by the Board of Directors on 31 March 2014 and signed on its behalf by:

\_\_\_\_\_  
**Dr Mary Sheehan**  
**Director**

\_\_\_\_\_  
**Dr Gerard Cummins**  
**Director**

**The Irish College of General Practitioners Limited**  
**(A company limited by guarantee)**

**Balance Sheet**  
**at 31 December 2013**

	<b>Note</b>	<b>2013 €</b>	<b>2013 €</b>	<b>2012 €</b>
<b>Fixed assets</b>				
<b>Tangible assets</b>	<b>8</b>		<b>1,839,649</b>	1,989,080
<b>Financial assets</b>	<b>9</b>		<b>300,003</b>	300,003
			<b>2,139,652</b>	2,289,083
<b>Current assets</b>				
<b>Debtors</b>	<b>11</b>	<b>1,527,613</b>		796,588
<b>Cash at bank</b>		<b>3,276,260</b>		2,713,982
		<b>4,803,873</b>		3,351,570
<b>Creditors: amounts falling due within one year</b>	<b>12</b>	<b>(3,237,221)</b>		(2,375,280)
<b>Net current liabilities</b>			<b>1,566,652</b>	1,135,290
<b>Total assets less current liabilities</b>			<b>3,706,304</b>	3,424,373
<b>Creditors: amounts falling due after more than one year</b>	<b>13</b>		<b>(189,867)</b>	(336,654)
<b>Net assets</b>			<b>3,516,437</b>	3,087,719
<b>Reserves</b>				
<b>Accumulated surplus</b>			<b>3,516,437</b>	3,087,719
<b>Members funds</b>	<b>15</b>		<b>3,516,437</b>	3,087,719

Approved by the Board of Directors on 31 March 2014 and signed on its behalf by:

\_\_\_\_\_  
**Dr Mary Sheehan**  
**Director**

\_\_\_\_\_  
**Dr Gerard Cummins**  
**Director**



## Membership Services Committee Report

**Author: Dr John Gillman, Chair of Membership Services Committee**

### Committee

- Dr Sean Higgins – Galway Faculty
- Dr David Hurley – West Cork Faculty
- Dr Brian Kennedy – Tipperary Faculty
- Dr Noreen Lineen Curtis – Mayo Faculty
- Dr Sean Mc Brinn – Waterford Faculty
- Dr Sinead Murphy – Galway Faculty
- Dr Daragh O'Neill – Former Chairman
- Dr Conor O'Shea – National GPIT Co-ordinator
- Dr Andrée Rochfort – Director of Health in Practice Programme
- Dr Peter Sloane – NEGs Programme Director
- Dr Rita Doyle
- Mr Nick Fenlon – Director of Education
- Mr Dermot Folan – COO
- Mr Kieran Ryan – CEO
- Ms Niamh Killeen – Administrator

### Introduction

Within the remit of membership services, we seek to identify and meet the ever changing needs of our members, be it that of trainees, those establishing their practice, post graduates or members who are planning retirement or are now retired from active practice but wish to maintain their association with the College. The current remit of the committee covers the following areas:

- ICGP Faculty Network
- Management in Practice Programme (MIP) (page 13)
- Health in Practice Programme (HiP) (page 22)
- Network of Establishing GPs Programme (page 29)
- National General Practice Information Technology (GPIT) Programme (page 20)
- Retiring General Practitioners Project
- ICGP structures

### Activities in the last year

- The ICGP Winter Meeting (*Future Proofing Irish General Practice*). This Conference was convened by the director of NEGS and included workshops of interest to retiring and retired members.
- Ezine article contribution on membership services.

### Faculty support Initiatives

- Revitalisation of the Wexford Faculty.
- Survey of membership on faculty structures and members' needs. The finalisation of results anticipated and the report and recommendations will be presented to the Board in due course.
- Consideration of the setup of faculty discussion boards.
- Faculty twinning arrangements pilot scheme.
- Faculty Officer Workshop – June, Kilkenny.
- Forum article on initiative for the revival of the College faculty structures.
- Faculty guidelines and faculty officers handbook.

- A new edition of the handbook is being developed. This will include sections on organising faculty meetings for new or revived faculties including a 'how to do' guide for the faculty secretary.
- Development of a database of presenters and topics for faculty meetings countrywide.
- Relevant findings of the Membership Survey may also be included in the finalised handbook.
- Exploring the supports which the College centrally could provide both administratively and managerially for supporting faculties which may include the appointment of a faculty liaison officer.

### ***Health in Practice Programme***

The European Association for Physician Health annual conference was hosted by the ICGP. The conference took place in Dublin in April on the theme: *Keeping Doctors Healthy – A European Perspective*. See the Health in Practice Programme report (please insert the relevant page number) by Dr Andrée Rochfort for more information.

### ***Network of Establishing GPs***

See page (please insert the relevant page number) for a detailed report by Dr Peter Sloane, Director of the ICGP Network of Establishing GPs.

### ***GPIT Programme***

See page (please insert the relevant page number) for a detailed report by Dr Conor O'Shea, National GPIT Co-ordinator.

### ***Mentorship working group***

On-going work/exploration including liaising with Mentor Programmes in the UK. Please refer to NEGs report for more information.

### ***Access to CME small groups***

Dialogue with CME Small Group National Director regarding access to CME small groups for recently established GPs.

### ***Retiring GP Project***

Recruitment and selection of Retiring GP Project directors.

### ***Leadership Course***

Deferred until 2014.

### ***ICGP Group Scheme made available to College members***

There are currently 682 registered users with the Scheme.

A key measure for the 'provider' is the number of events generated during the period. This is the number of vouchers downloaded, the number of voucher codes downloaded, links opened to partner websites, forms downloaded, etc. For 2013, 3,451 'vouchers' were downloaded with the estimated average saving on each 'voucher' for each event being €20.00. The approximate total savings generated for 2013 for members/users was an impressive €70,000.00.

### ***Discussion***

The year 2013 has been a year of considerable change for the College and also a year of considerable challenges for its members. We welcomed Mary Sheehan as our new chair and Seamus Cryan as our new president. We are fortunate to be led by such outstanding members of our profession. We thank John Delap and Bill Shannon, our outgoing chair and president, for their immense service and wisdom.

Within membership services, I welcome Rita Doyle, Conor O'Shea and Darach O'Ciardha to our team.

The year 2013 saw considerable progress and the College modernised its governance structures. The faculties are and shall continue to be the cornerstone upon which our democratic membership organisation is founded. The College is its membership and the member's voice is heard. I congratulate the South Tipperary Faculty for proposing and organising a national spring meeting on how to weather the storm which general practice is facing.

The College is an open and transparent organisation; this is one of our core values. We seek to invigorate faculties. We surveyed the membership and also held a faculty officer workshop and acted upon their findings and measured opinions. From this, we are developing the position of a faculty liaison officer to assist faculties and also to resource administrative support for officers in their role.

The College is appointing a programme director for retiring GPs. A total of 30% of members face retirement within the next 10 years. In itself, that is challenging but in these unprecedented times of economic collapse it is more so.

We are working hard at implementing a progressive mentorship programme for our members and never has it been more relevant.

Times are very tough for all our citizens, our patients have suffered greatly and are suffering greatly and shall continue to suffer greatly as a consequence of the economic armageddon wrought upon Ireland. We must continue our fight on their behalf and never has our advocacy role been so important.

Sadly, amongst our profession, we are seeing our new graduates leave in ever increasing numbers post qualification and post completion of training. We are seeing well established doctors leaving, establishing doctors are trying to furrow barren land and many nearing retirement have no choice but to leave early. Our greatest resource is our people and those in authority must remember that not everything is on a balance sheet.

My sincere thanks to all our team for their wonderful work, commitment, integrity and diligence. My sincere thanks and apologies to their families for all of their time taken up in the service of our members. But it is our privilege to serve. Rome had its legions but the College has its faculties.

### ***Administrative resource provided to the committee***

I am indebted to Niamh Killeen who has provided exceptional support to all our team. Caroline Murtagh and Orla Sherlock have all offered invaluable advice and assistance.

I would like to thank our senior management, Mr Kieran Ryan, CEO, Mr Dermot Folan, COO, and Dr Margaret O'Riordan, Medical Director, for their invaluable support. I would like to thank my colleagues on the Board and the Council for their wisdom. I would like to thank our programme directors for their expertise and enthusiasm, and our committee members who have chosen to give of their time to serve.

I would like to thank my wife Mai and my children for putting up with Dad gone to meetings, doing emails and staying mum during all those early morning teleconferences, and also Fethard & district RFC under 14s (east Munster league champions) who give me time to clear my head, allow me to play coach and bring a smile to all our faces.

## Management in Practice Programme Report

**Author: Mr Dermot Folan, (Acting) Director of the Management in Practice Programme**

### Introduction

The Management in Practice Programme continues to support College members and their practices as follows:

- **Training** – courses for general practitioners, practice managers and practice staff.
- **Information provision** through on line publications and guidelines.
- **Direct advice and consultation** with individual members and practices – telephone advisory service and online information via [www.icgp.ie](http://www.icgp.ie).
- **Referral:** to external professional advisor network and resources.
- **ICGP Doctors' Health Programme (HIP):** The ICGP Doctors' Health Programme comes under the remit of the Management in Practice Programme. The Doctors' Health Programme report is given separately by the director, Dr Andrée Rochfort.

### Activities

#### Training courses

##### *Diploma in Management in Practice Course (September 2013–May 2014)*

This is the eighteenth course to be delivered since the commencement of the Diploma in Management in Practice Course. The course is aimed at meeting the practical management needs of GPs and practice managers. There are 21 participants (GPs, practice managers and other staff, with managerial responsibilities), currently enrolled.

The course format which includes formal assessment and practice based project work has a core focus on bringing about substantive change in the participants practice. Many graduates of the course successfully competed in the ICGP/Aviva Health Quality Improvement Awards. Key to the success of the course is the full involvement by practice and not solely that of the participant.

Evaluation of feedback from past course participants indicates a very high satisfaction level among participants.

**Course director:** Mr Nick Fenlon

**Course administrator:** Ms Jana Pickard

**Course principal:** Mr Barry O'Brien, Management Consultant, Abbey Medical Management Consulting

**Delivery:** The course is run over one academic year and consists of 12 units and is delivered through a combination of workshops, module reading and course assignments, including two reflective learning portfolios, four short essay questions (SEQs), a 'Quality Improvement in the Practice' project and participation on the online discussion boards.

Assignments are based on common practice scenarios and are marked by a panel of general practitioners/practice managers, and past participants of the course, who act as assessors.



Learning is supported through the College website [www.icgp.ie](http://www.icgp.ie), which provides a discussion board facility and email communication.

The course utilises the specialist expertise available at the College and also external resources.

### ***General Practice Registrar Management in Practice Certificate (September 13–May 14)***

This is the seventh consecutive year that this course has been successfully delivered.

It is specifically designed to meet the practice management ‘educational needs’ of GP registrars with the objective of equipping the GP registrar with the basic knowledge of ‘business management’ principles, skills and competencies needed for successful commencement in professional practice. The course is reflective of the core curriculum for general practice training and the related learning outcomes for the practice management category of the curriculum. There are 40 participants currently enrolled.

**Delivery:** The course is run over one academic year and consists of 13 units delivered through a combination of workshops, module reading and course assignments. These include two reflective learning portfolios, a career progression plan and assignments via the course online discussion board.

A key objective of the course is to enable participants to achieve a greater appreciation of the management and organisation of the GP training practices to which they, as GP registrars, are assigned. The active involvement and cooperation of the trainer is a requirement for enrolment by the GP registrar.

The course utilises the specialist expertise available at the College and also external resources.

To date 84 third and fourth year registrars have undertaken the course. It is proposed to run the next course in September 2013.

**Course director:** Mr Nick Fenlon

**Course administrator:** Ms Jana Pickard

**Course principal:** Mr Barry O’Brien, Management Consultant, Abbey Medical Management Consulting.

### ***Leadership Course (September 2013)***

The first course in leadership for general practice was successfully run in October 2011. This was a pilot course aimed at the promotion of leadership in the profession and also addressing succession planning for the ICGP. The course delivery was a collaborative one with the DCU Business School. A total of 14 participants successfully completed the course. Due to difficulties in confirming the availability of a course tutor, it was not possible to deliver this course in 2013/2014.

It is proposed to run the next course in September 2014.

### ***Course description***

The course is for general practitioners who are seeking to develop their knowledge and skills in the field of leadership. Participants will be able to bring the knowledge and skills obtained back to their practice, embed lessons learned into the Irish College of General

Practitioners, and apply acumen to healthcare contexts where they currently, or will in the future, play a leadership role. This course has four central objectives, namely:

1. To provide general practitioners in Ireland with leadership training.
2. To cultivate and mentor future leaders for general practice in Ireland and for the ICGP.
3. To support general practitioners as leaders in the wider community context.
4. To provide participants with an opportunity to advance their professional and personal development.

### ***Dr John Mason Bursary***

The Dr John Mason Prize is presented in recognition of high achievement to one course participant each year and the Dr John Mason bursary supports the development and delivery of this course.

### ***Practice Staff Training Course***

This course is designed to give practice staff an opportunity to develop their functional roles, e.g. receptionist, secretary and administrator, and increase their contribution and support to the clinical providers in the practice. Feedback from both GP employers and practice staff alike remains consistently positive. We are currently developing assessment methods and exploring the external accreditation of the course.

Our most recent course took place in Dublin and was run over two non-consecutive weekends. The first workshop on 27–28 September 2013 was held in conjunction with the ICGP elearning course workshops at the IMI. The second workshop took place at the ICGP on 18–19 October 2013.

The next course is proposed for September 2014 or earlier (subject to demand).

**Course tutor:** Ms Romy Maloney, Practice Manager

**Course administrator:** Ms Yvette Dalton

### ***Contribution to other programmes and projects***

***Management in Practice section of the College yearbook and diary.***

***External presentations/training facilitated by the Programme Director and Programme Personnel 2012/2013.***

### ***ICGP Conferences:***

#### ***AGM – Galway, May 2013***

- Progression Succession and Mentorship
- Words from the Wise – Senior GPs as Leaders in Practice Development

### ***Workshops:***

#### ***6th ICGP Summer School – Kilkenny, June 2013***

- Workshops:
  - How to prepare and audit a revenue audit
  - Improving your practice safety and performance
  - Employment law
  - Social welfare payments and PCRS updates

**ICGP Winter Meeting – Athlone, November 2013**

- Workshops:
  - The GMS Pension Scheme
  - The day is dawning – how to prepare psychologically for retirement
  - Moderated negotiation of a practice succession

**Advisory/information service****Direct access advisory service**

College members continue to access the service daily by phone, fax and email on a wide variety of management issues. The average number of practice management and related queries received from members per week is 6–8.

With the current economic climate, this service has seen an increase in the number of employment/GMS related issues and GP taxation issues and in particular requests for advice on cost reduction in the practice.

TOPICS CATEGORIES	RELATIVE FREQUENCY %
GMS	14.50
Medical Indemnity Insurance	9
Practice formation/partnerships/associate agreements	5.50
Mediation	4.50
Employment issues	22.50
Retirement/pension queries	2.50
Medico-legal	11
Medical records/Data protection/FOI	13.50
Health & Safety	2.50
Practice& Premises design	2
GPIT	4.50
Marketing/Advertising	2.50
Financial management/Taxation queries	2.50
Miscellaneous	3

**Web resources**

Updating of information on the Management in Practice section of the College website is ongoing.

**Discussion board**

An online discussion board facility is provided to past participants of the 'Management in Practice' courses, and gives ongoing practical support and facilitates continuing interaction with course participants.

### ***Other members of the MIP Programme team***

- Dr Andrée Rochfort, Director, Health in Practice Programme
- Ms Sally Anne O'Neill, Administrator, Management in Practice Programme
- Mr Barry O'Brien, Course Tutor, Diploma in Management in Practice and Management in Practice and GP Registrar Courses
- Ms Romy Moloney, Course Tutor, Practice Staff Training Course
- Ms Jana Pickard, Administrator, Management in Practice Diploma and Certificate Courses
- Ms Yvette Dalton, Administrator, Practice Staff Course

### ***Acknowledgements***

I would like to acknowledge the assistance and contribution of general practitioner members from around the country and their staff who have given freely of their time and expertise on many aspects of the programme. Graduates of the MIP Programme courses have also contributed greatly to the increase in knowledge of the management of general practice. In particular, the input from diploma course assessors is appreciated.

The continued contribution and expertise of Barry O'Brien is much appreciated, as is the ongoing and highly valued input from Romy Maloney on the Practice Staff course. I would also like to express the College's appreciation for the assistance of Ms Jean Hubbard, Practice Manager, Medical Centre Waterford.

I would like to acknowledge the dedication and professionalism of the Management in Practice Programme's administrator Ms Margaret Cunnane who retired in June 2013. We wish her well in her retirement.

I would like to indicate my appreciation of the work of the new MIP administrator Ms Sally Anne O'Neill, and also that of Jana Pickard and Yvette Dalton of the ICGP Education Department.

The Director of the Management in Practice Programme, in addition to holding the position of Chief Operating Officer of the College, also has specific responsibility for the following areas: MICGP Examination, MICGP AR, Certification Committee, Network of Establishing General Practitioners, and Membership Services Committee. (Please refer to the separate reports under the relevant headings.)



## National General Practice Information Technology (GPiT) Group Report

*Author: Dr Brian O'Mahony, Project Manager*

### *Other part of GPiT Programme: Education Section*

#### **Summary of project**

The GPiT Group is a collaboration between the Irish College of General Practitioners, the Health Service Executive and the Department of Health and Children. There are two parts to the group, an education section with a national co-ordinator, four regional GPiT co-ordinators and a panel of expert GPiT advisors, and a projects section with Dr Brian O'Mahony as project manager.

#### **Project tasks during past 12 months**

- Continuing to work with the National Cancer Control Programme on electronic cancer referrals.
- Working with the GPiT Group to guide the secure clinical email project through the public procurement process in 2013.
- Working with Healthlink and HSE ICT on integrated browser technology for specialist electronic referrals such as pigmented skin lesions.
- Messaging: working with Healthlink and the National Cancer Screening Service on getting CervicalCheck smear test results and BreastCheck mammography results out to GPs electronically.
- Communicating the needs of GPs and primary care to developers of information systems throughout the health services.
- Membership of the Project Board of the National Integrated Medical Imaging System (NIMIS) Project, which is bringing digital radiology to hospitals and electronic radiology reports to GPs.
- Membership of the Project Board of the National Laboratory Information System project, MedLIS, which will implement a new national laboratory system in 2015.
- Contributing to the HIQA eHealth Standards Advisory Group (eSAG).
- Writing monthly IT questions and answers for Forum, the journal of the Irish College of General Practitioners, available at <http://www.gpit.ie/faq>.

#### **Project deliverables**

- Statistics on electronic cancer referrals for the year 2013:
  - 11,704 electronic cancer referrals sent from GP software systems.
  - A total of 1,178 GPs sent electronic cancer referrals.
- After a public procurement process, the preferred provider for secure clinical email is O2 Telefonica.
- Reviews of status of electronic prescribing and electronic laboratory requesting in Ireland.
- Organising the 2013 series of GPiT webinars.

#### **Future plans**

- Roll out secure clinical email nationally in the third quarter of 2014. Secure email will support communication of patient identifiable clinical information across the health services.

- Continue to work with major national information systems, such as the National Integrated Medical Imaging System (NIMIS) and the National Medical Laboratory Information System (MedLIS).
- Expand the range of electronic referrals available from GP practice software systems.
- Work to improve electronic communication between GPs and the health services, particularly through structured messaging and Healthlink.
- Provide a general practice and primary care perspective on interoperability and health informatics standards in the health services.

***Administrative resource person in the ICGP***

Ms Niamh Killeen, email [niamh.killeen@icgp.ie](mailto:niamh.killeen@icgp.ie).

***Further information***

Available at <http://www.icgp.ie/gpit>.

## National GPIT Training Programme Report

**Author: Dr Conor O'Shea, National GPIT Co-ordinator**

Annual report of education and work undertaken by the GPIT Programme team

### Programme leader

- Dr Conor O'Shea (from February 2013)
- Dr Brian Meade (to February 2013)

### Other members of programme team

#### Regional co-ordinators

- Dr Frank Hill (Southern region with responsibility for National Diabetes Project)
- Dr Kieran Murphy (Western region)
- Dr Keith Perdue (Eastern region)
- Dr John MacCarthy (with responsibility for National Electronic Referral Pilot Project)
- GPIT advisers
- Dr Brian Meade (Dublin)
- Dr Donal Buckley (Dublin)
- Dr John Sweeney (North-West)
- Dr Fergus McKeagney (Midlands)
- Mr Paul Gaffney (North East)
- Dr John Cox (South East)
- Dr Seán Higgins (Western)
- Dr Brian Blake (Dublin)

### Summary of GPIT Education Programme

The GPIT group is a collaboration between the Irish College of General Practitioners, the Health Service Executive and the Department of Health and Children. Dr Brian O'Mahony, as project manager, has issued a report on the major projects undertaken in 2013. Members of the programme team have contributed to these projects as well as to ongoing education in IT for GPs.

In 2013, the main educational projects were a series of online webinars which were broadcast live and recorded for further viewing from the GPIT website. These were well received and will be repeated in 2014. Contributions were also made at the 2013 ICGP Summer School and are detailed below. Members of the group have been available to provide support to individual GPs and to faculties.

### Programme activities during the past 12 months

#### Webinar Programme 2013

- |  |                   |
|--|-------------------|
| • Disease coding for dummies                       | Dr Brian Meade    |
| • Backing up your data: no data no business        | Dr Brian Blake    |
| • Smart stuff for smart phones                     | Dr Kieran Murphy  |
| • Using clinical rating scale software             | Dr John Cox       |
| • Electronic cancer referrals                      | Dr Jack MacCarthy |
| • Using your GP software system for clinical audit | Dr Conor O'Shea   |

#### Summer School presentations 2013

- |  |                   |
|--|-------------------|
| • Everything you wanted to know about general practice IT but were too afraid to ask!                                  | Dr Brian O'Mahony |
| • Are your patients trapped in the web? An overview of the pros and cons of the internet as a patient educational tool | Dr Brian Meade    |
| • Can a practice increase income by coding?  | Dr Seán Higgins   |
| • The online library – making the internet useful and easy for GPs   | Dr Conor O'Shea   |

***GPIT advisers and facilitators contributed to the following projects in 2013***

- National Electronic Referral Project
- Development of standardised referral forms
- Further support of electronic cancer referrals
- National Diabetes Project (ICT infrastructure)
- Secure email project
- Collaboration with HIQA on National Demographic Data Set
- Response to proposed changes to Misuse of Drug Regulations
- Advice on proposals for eprescribing
- Advice on proposals for electronic laboratory test ordering
- Collaboration with Irish Primary Care Research Network
- Participation in National Medicines Group for Older People
- Contributions to National Maternity System & Child Health and Immunisation Groups
- Contributions to National ICT Strategy Group

***Future plans***

The GPIT advisers and facilitators will continue to contribute both to IT education and upskilling for College members as well as to the development of IT projects which have the potential to improve the lives of GPs in the future. The webinar programme and Summer School presentations will take place again in 2014, and we expect to play a significant role in the introduction of secure email for general practice. The members of the group will continue to be available to provide support for individual GPs, CME groups or faculties.

The ongoing projects are focussed on the development and improvement of communication and information exchange between general practice and secondary care. Individual GPIT group members will continue to make significant contributions to these projects.

***Administrative Resources***

This is currently being provided by the ICGP and my sincere thanks to Niamh Killeen for her knowledge, support and work throughout the year.





## Health in Practice Programme Report

**Author: Dr Andrée Rochfort, Director of the ICGP Health in Practice Programme**

### *Other members of the programme team*

- Ms Sally-Anne O'Neill, HiP administrator from June 2013; Ms Margaret Cunnane – HiP administrator until June 2013 (now retired from the ICGP).
- Membership Services Committee, including Dr John Gillman, Committee Chair, and Mr Dermot Folan, ICGP COO.
- Facilitated links to four healthcare networks (over 100 independent healthcare professionals) – GPs, counsellors, psychologists, psychotherapists, occupational physicians and psychiatrists, as listed on [www.icgp.ie/doctors\\_health](http://www.icgp.ie/doctors_health).

### *Summary of the programme*

The ICGP Health in Practice Programme promotes and supports the goal of health and wellbeing for GPs and GP trainees and their families.

In March 2000, the ICGP established the Health in Practice Programme for its members and trainees in specialist training. This is a system of health related services and supports to support the GP (and the future GP) in their management of their personal health – physical health, occupational health and psychological/mental health.

The programme has three main sections (1) health care services and supports (2) a helpline via telephone and email, and (3) medical education for promoting high quality self-management and healthcare for GPs.

The healthcare services of the programme are accessed directly by contacting any of the practitioners listed in the Health in Practice directories available to members at [www.icgp.ie/doctors\\_health](http://www.icgp.ie/doctors_health), or by contacting the telephone helpline on 087-7519307 to speak to a GP colleague for discussion on a range of issues such as personal or family health needs, or assistance with colleagues in need of health related interventions.

All HiP health care takes place within a private therapeutic arrangement with the health professional independent of the College. No personal details are communicated to the ICGP so that individuals' confidentiality and privacy are protected. Services are provided by health professionals who have special interest, training and experience in doctors' health. HiP doctors are registered with the Medical Council and therefore practice subject to the professional ethical guidance of the Medical Council.

### *Programme activities during 2013*

1. Healthcare services
2. Helpline
3. Medical education

#### *1. Healthcare services*

The Health in Practice networks of GPs for GPs, counsellors and psychologists for GPs, psychiatrists for GPs and occupational physicians for GPs are surveyed at intervals to ascertain the level of uptake of services in terms of numbers and the general category of services provided and the category of patient (GP, other doctor, doctors' relatives). No details of gender, age range or geographical area are ever requested. Also, as the

programme supports doctors attending GPs in areas away from one's own area of practice, if necessary for reasons of privacy, this adds a further level of anonymity.

For 2013, doctors availing of Health in Practice services did so for all the same range of reasons as patients who use GP services, including all the range of physical symptoms and illnesses, e.g. cardiovascular, dermatology, urology and gynecology. GPs also use the service for advice on sickness absence and sickness certification. GPs also use the programme to address mental health issues such as acute and chronic anxiety, depression – the same conditions that are prevalent in the wider general practice patient population. A minority of doctors had a past or current problem of substance misuse and where this occurs, the programme refers GPs to the Sick Doctor Scheme for assessment, treatment and appropriate monitoring. However, Health in Practice encourages doctors with a substance misuse problem to continue to have a regular GP such as from the programme, and to attend a different doctor / GP for monitoring – long term monitoring is best performed by a doctor who is not the patient's GP as it may alter a doctor/patient relationship.

## **2. Health in Practice helpline**

An overview of trends and uptake of the helpline during 2013 is given here. The majority of calls in the past year to the helpline were self-referrals of GPs and trainees for general health management queries, and for guidance on acute or chronic mental health difficulties. Many were supported by their partners or families to make the initial call. Callers adapt quickly to discussing their personal health issues by telephone often after they give lengthy apologies for bothering another doctor or taking up someone else's time during which they are reassured about the appropriateness of the call as a positive step forward to addressing their issues. Calls are triaged and callers are signposted to the relevant care pathways. Other calls included calls from hospital specialists who treat doctors seeking advice and information on the Health in Practice Programme, from medical colleagues, from GPs not connected to Health in Practice services but who provide healthcare to doctors, and a small number from doctors' family members seeking support. The helpline also ensures that calls concerning doctors with potential substance misuse are also diverted to the Sick Doctor Scheme for formal structured management. GPs increasingly like to text this helpline number as a means of continued support following discussions.

This year, saw an increase in direct first contact and follow up communication by email to the service. Contact details are at the end of this report.

## **3. Health in Practice medical education**

### **Education highlights of 2013**

- a. ICGP Health in Practice Programme hosted European Association for Physician Health, 4th European Conference, Dublin in April 2013.
- b. ICGP Health in Practice Programme presented a symposium and a workshop at Wonca World Conference Prague June 2013.
- c. ICGP Health in Practice Programme delivered the keynote opening address to Health Professionals Healthcare Conference in Brisbane, Australia in October 2013.

### **April 2013**

#### **European Association of Physician Health, Dublin, hosted by ICGP**

The ICGP hosted the European Conference of the European Association for Physician Health in Radisson Hotel, Dublin in 2013. The Health in Practice Programme is one of the founding members of the EAPH (European Association for Physician Health), which was

officially launched at a conference hosted by the Norwegian Medical Association in Oslo in 2009. Doctors' Health conferences have been held in the countries of its founding members – London exploratory meeting (2008), followed by three annual conferences in Oslo (2009), Barcelona (2010), and Salzburg (2011), where a decision was made by the officers to hold a biennial conference to alternate with the biennial British / Canadian and American Medical Association conferences. Dublin was the venue for 2013 and Barcelona will be the venue for 2015.

The ICGP played an important role in “The Gathering” of 2013 as the EAPH 2013 Conference at the Radisson Hotel in Stillorgan attracted 100 presenters and delegates from 21 countries including Australia, Austria, Belgium, Croatia, England, France, Germany, Iceland, Ireland, Netherlands, New Zealand, Northern Ireland, Norway, Russia, Scotland, Serbia, Slovenia, Spain, Switzerland, USA and Wales. For the first time at an EAPH conference, interest in presenting was so intense that the presentations and workshops were categorised into four areas: medical education, quality and safety, research and services. Some presentations are available to view on the ICGP website and I would like to encourage them for use as teaching tools for CME and higher specialist training purposes.

As a result of the feedback from the EAPH Open Forum session and evaluation survey following the conference in Dublin, the EAPH website is now set to be developed with significant investment by one of the founding medical associations, the Galatea Foundation in Barcelona, Spain, which runs an inpatient unit and outpatient services for doctors and nurses with mental health and addiction problems (see [www.paimm.org](http://www.paimm.org)). The EAPH website will be more interactive with a country by country list of members with their special interests and a discussion board section. The conference was covered in the medical press in Ireland and internationally, and new links to the ICGP website from other organisations' websites have occurred as a result.

Membership of the EAPH Forum is free and open to all doctors in Europe. [www.eaph.eu](http://www.eaph.eu).

I would like to thank Dr Seamus Cryan, ICGP President and Mr Kieran Ryan, ICGP CEO, and Ms Caroline Spillane, CEO of the Medical Council, for their strategic opening welcome addresses at the conference.

I also wish to acknowledge the contributions of three prominent Irish professors in delivering keynote presentations at EAPH Dublin in 2013:

- **Opening keynote presentation**
  - Prof James Lucey, Medical Director, St Patrick's Hospital, Dublin, and Clinical Professor of Psychiatry, Trinity College, Dublin. *“How important is your mental health?”*
- **Closing keynote presentation: 1. Consolidation of Conference Theme**
  - Prof Gerard Bury, University College Dublin. *“Physician health: we can or we must?”*
- **Closing keynote presentation: 2. A Foundation for Implementation**
  - Prof Paul Finucane, University College Limerick. *“Doctors' Health in Undergraduate Curricula”*.

The numerous oral paper presenters, workshop facilitators and poster presenters provided us with high quality information and an array of a choice of topics.

I wish to acknowledge the input of my EAPH officer colleagues on the EAPH Conference Organising Committee. We reviewed abstracts and created the programme without a single face to face meeting (all electronic communication and teleconferences) –

Dr Karin Ro, Norway; Dr Pilar Lusilla and Antoni Arteman from Spain; Dr Mike Peters, UK, and Prof Friedrich Wurst, Salzburg.

Finally, my gratitude to Orla Sherlock, ICGP Events Coordinator for managing the registration process, and to Orla and Louise Nolan at the ICGP for producing an impressive bound programme booklet, and to all who assisted in helping the ICGP to host their first international conference since Wonca in 1998.

### **June 2013**

#### **Wonca World Conference Prague, Czech Republic.**

1. **Are doctors different? Do they need special services?**

The Health in Practice Programme co-presented a symposium with EQuIP to include presentations on health services for doctors from Ireland, Canada, Australia, Croatia, Norway and Spain.

This symposium was facilitated by Dr Margaret Kay, Australia and Dr Andrée Rochfort, ICGP.

**Presentations:**

[http://equip.ch/flx/events/wonca\\_world\\_2013\\_in\\_prague\\_25\\_29\\_june\\_2013/workshop\\_are\\_doctors\\_different\\_do\\_doctors\\_need\\_special\\_healthcare\\_services/](http://equip.ch/flx/events/wonca_world_2013_in_prague_25_29_june_2013/workshop_are_doctors_different_do_doctors_need_special_healthcare_services/)

**Group Work:**

[http://equip.ch/flx/events/wonca\\_world\\_2013\\_in\\_prague\\_25\\_29\\_june\\_2013/are\\_doctors\\_different\\_workshop/](http://equip.ch/flx/events/wonca_world_2013_in_prague_25_29_june_2013/are_doctors_different_workshop/)

2. **“Sharing Survival Skills for General Practice”**, the ICGP Health in Practice Programme delivered a workshop to a packed house. EQuIP recorded the workshop to include in the shared activities of the EQuIP Professional Health Working Group. See: [http://equip.ch/dcmpage/events/wonca\\_world\\_2013\\_in\\_prague\\_25\\_29\\_june\\_2013/doctor\\_s\\_health/](http://equip.ch/dcmpage/events/wonca_world_2013_in_prague_25_29_june_2013/doctor_s_health/).

### **October 2013**

#### **Health Professionals Health Conference, Brisbane 2013**

Andree was invited to give the opening keynote address at the Health Professionals Health Conference, Brisbane in 2013, and also a workshop during the conference, see [www.hphc2013.com.au](http://www.hphc2013.com.au).

This conference is hosted every second year by a regional branch of the Australasian Doctors Health Advisory Service. This was hosted in 2013 by Queensland DHAS and the organisers wished to have the conference opened by a European (the previous 2011 conference in New Zealand was opened by an American). The opening welcome address was made by the Queensland minister for health. The conference was held over three days – Thursday, Friday and Saturday. Andree gave a separate presentation to the Department of General Practice at the University of Queensland on Wednesday straight from landing at the airport. There followed a fruitful discussion with plans to communicate with the ICGP into the future on topics such as doctors health and quality and safety in general practice. Thanks to the kind hosts who covered all costs.

### **Resources and information**

**Conference programme:**

[http://dhasq.org.au/wp-content/uploads/2013/08/HPHC-2013Program\\_for\\_booklet\\_ORIGINAL.pdf](http://dhasq.org.au/wp-content/uploads/2013/08/HPHC-2013Program_for_booklet_ORIGINAL.pdf)

**Conference presentations:**

[http://dhasq.org.au/?page\\_id=338](http://dhasq.org.au/?page_id=338)

**Dr Andrée Rochfort's opening keynote address:**

<http://dhasq.org.au/wp-content/uploads/2014/03/Plenary-Session-1-0845-041013-Andree-Rochfort-The-Science-and-Art-of-Healthcare.pdf>

**Dr Andrée Rochfort's workshop on self-treatment**

<http://dhasq.org.au/wp-content/uploads/2014/03/Concurrent-Session-9-1500-041013-Andree-Rochfort-Self-Treatment-Workshop.pdf>

**Other Health in Practice medical education activities in 2013**

- ICGP Winter Meeting workshop: Work-life balance – how do others do it?”.
- Presented “Surviving General Practice” at the Mental Health Study Day for GPs in Athlone.
- UCD Trainees Day at the ICGP: “Strategies for moving from trainee to GP”.
- “Caring for your health as a health professional” – presented to a multidisciplinary primary care teams course in DCU, supported by the HSE Mental Health in Primary Care.
- National GP Trainers Conference, Kilkenny: “Guiding the trainee in the transition from trainee to GP – health, stress and resilience”.
- ICGP Corrigan Faculty. Presentation on “doctors’ health and doctors’ illness”.
- Health in Practice provided the welcome introduction to the ICGP March ezine.
- ICGP AGM workshop (x 2). National Standards for Safer Better Healthcare – some delegates highlighted the relevance of these standards to the domain of “the workforce” including the health and wellbeing of GPs, both as a standard and in the implementation of these standards.
- Survival strategy for moving from trainee to GP. Trainee day at the ICGP.
- ICGP Winter Meeting Workshop (x 2). “Work life balance – how do others do it?”
- ICGP memorial service for deceased GPs, St. Andrews Church, Westland Row.
- “Stress management for the practice team” (employers and employees) as part of the ICGP practice management diploma course – module text and interactive workshop.
- “Health and safety in the practice” – issues for practice managers, employers and employees. Module text and two hour workshop provided as part of the diploma course.
- Safety and support for health professionals in general practice. Module produced for the ICGP Substance Misuse Online Course.
- UCD graduate entry and UCD undergraduates. Lecture given to both groups on “Health and healthcare for medical students – getting the balance right”.

**Publications**

“Doctors’ Health and Quality of Care”. Author of a chapter in a book titled “Guidebook on the Implementation of Quality Improvement in General Practice”, funded by the European Commission under the Leonardo da Vinci programme. ISBN 978-83-932788-2-4.

The project called Lifelong Learning in Quality Improvement for GPs, led by the Polish College of General practitioners, produced the guidebook in print for distribution to colleges and universities, and is also available online:

[http://ingpinqi.eu/guidebook\\_EN/index.html](http://ingpinqi.eu/guidebook_EN/index.html).

### **Future plans**

#### **1. Website development for ICGP the Health in Practice Programme**

Increasing numbers of GPs are seeking information on personal healthcare online, and it is necessary to respond by seeking funding to develop the webpages of the HiP Programme, as a support and as educational tool, for use by GP trainers and programme directors, and for CME and trainee projects, and to assist with promoting further projects, including collaborative ICGP research projects.

One of the graduate entry medical students who attended my UCD lecture has since become more involved with the Health in Practice Programme. In conjunction with UCD, we have applied for external funding to develop the website of the Health in Practice Programme. The outcome will be known in 2014.

Website resources can be helpful in encouraging Irish GP and GP trainee researchers to develop expertise and contribute to the growing body of research in doctors' health.

#### **2. Development of modules on the subject of doctors' health and healthcare**

The aim will be to promote awareness of doctors' health risks, and prevention, early intervention and appropriate self-management and clinical management to minimise poor health outcomes. This will be developed in-house for dissemination of the modules to membership as CPD. The HiP networks will be involved in deciding the content.

#### **3. Expansion of the Network of GPs for Doctors**

There are over 50 doctors who have developed a high level of expertise in treating patients who are doctors within the Health in Practice Programme. We wish to expand the programme to include more geographical areas and more choice for GPs.

Contact HiP administrator, Ms Sally-Anne O'Neill, at the ICGP for application forms, and details of induction training and peer support. Her email and number are below.

### **Acknowledgements**

Andrée would like to welcome Sally-Anne O'Neill as the new Health in Practice administrator, who replaces Margaret Cunnane who retired from the ICGP after 13 years as the HiP Programme administrator.

Andrée would also like to gratefully acknowledge the support of the Health in Practice network teams who are listed on the College website in the directories of Health in Practice. They provide healthcare and health advice to ICGP members and their families, and have been responsive and accommodating in acute crisis situations in seeing colleagues in difficulty. They have the gratitude of members and their families.

### **Administrative resources being provided to project/programme**

I wish to acknowledge the crucial involvement of the HSE for continuing to financially support this important programme for doctors' health and healthcare in Ireland, and GPs, as well as the programme activities and services provided for undergraduates and postgraduate doctors from several postgraduate training bodies who utilise the services of ICGP Health in Practice.

### **HiP contact details**

#### **• ICGP HiP Healthcare Services**

- **HiP GPs** – a GP service for GPs, coordinating your healthcare for you.
- **HiP occupational physicians** – for occupational health advice, work absence,

returning to work after sick leave, follow-up advice on sharps injuries, work-related illness, etc.

- **HiP psychiatrists** – psychiatric care on referral from your GP.
- **HiP psychological therapists** – helping you to develop solutions, life management skills and coping resources to resolve your work-related issues and your personal problems like acute or chronic stress/anxiety, depression, bereavement, grief and loss, family disruption, psychosexual issues, relationship issues and other problems.

- **ICGP HiP Information Service**

For confidential advice you have several options:

- Contact any of the professionals from the four Health in Practice networks listed above ([www.icgp.ie/doctors\\_health](http://www.icgp.ie/doctors_health)) for telephone advice or to book a consultation OR
- Contact the HiP helpline on 087-751 9307 to speak with Dr Andrée Rochfort OR
- Contact HiP administrator, Sally-Anne O'Neill, on 01-676 3705 or Email: [sallyanne.o'neill@icgp.ie](mailto:sallyanne.o'neill@icgp.ie).

- **ICGP HiP Education Service**

To arrange a lecture, workshop or other presentation on matters of occupational health for healthcare professionals or on the topic of doctors' health and healthcare for undergraduates, postgraduates or CME purposes, contact HiP administrator, Sally-Anne O'Neill, tel: 01-676 3705 or email: [sallyanne.o'neill@icgp.ie](mailto:sallyanne.o'neill@icgp.ie).





## Network of Establishing GPs Report

**Author: Dr Peter Sloane, Director of the Network of Establishing GPs**

### Summary of the NEGs Programme

The Irish College of General Practitioners Network of Establishing GPs (ICGP NEGs) was initiated in 2004 by the Membership Services Committee. The project was led by Mr Dermot Folan and Dr Daragh O'Neill. The aim was to address the needs of GPs establishing in practice, to support and represent this group of the College membership and deal with issues arising for them at the establishing stage of their career/practice.

The ICGP NEGs Programme has proven to be a valuable resource for establishing GPs and highlights the College's commitment to supporting establishing members. Through NEGs, final year GP trainees and new and establishing GPs are also encouraged to become active members of the ICGP and participate in all College activities and events. ICGP NEGs is overseen by a programme director who is tasked with providing direction, structure and future strategy to NEGs, facilitating the delivery of the NEGs Programme, and representing new and establishing GPs within the College. The NEGs Programme director works closely with other programme directors at the College and ICGP management and is supported by members of the NEGs Steering Committee and a trainee liaison group.

There is a vision within NEGs of creating a seamless continuum of involvement in the ICGP from the commencement of GP training right through to retirement. To smooth the transition from trainee to establishing GP, it is hoped in 2014 to further increase the profile of the NEGs Programme amongst fourth year GP trainees. During 2014, the supports currently available to NEGs will be made more robust and expanded. The involvement in the Vasco da Gama Movement (see below) will be increased and expanded, providing international opportunity for members. Continued close cooperation with other programme directors will ensure the unique needs of NEGs members are taken into consideration in the development of College wide supports. Underpinning all the various activities will be a continued development of the systems in place within NEGs that will allow for the future straightforward delivery of the programme in keeping with the strategic vision outlined in this report.

### Programme structure

**Programme Director:** Dr Peter A Sloane

#### NEGs Steering Committee 2013

The NEGs Steering Committee meets by teleconference a number of times during the year. Its members deliver the twice yearly regional meetings and it also provides a vital support structure to the programme director. For the first time in 2013, the steering group expanded geographically into Kerry.

- Dr Jason McMahon (Limerick)\*
- Dr Barry Cosgrove (Sligo)\*
- Dr Ger Hayes (Cork)\*
- Dr Laura Noonan (Mullingar)
- Dr Shastri Persad (Galway)
- Dr Katrina Geissel (Cork)
- Dr Louise Malone (Dublin)\*\*
- Dr David O'Connell (Dublin)\*\*
- Dr Cliona Murphy (Cork)\*\*
- Dr Ciarán Bohane (Limerick)\*\*
- Dr Clare Kelly (Sligo)\*\*
- Dr Lisa Cahill (Kerry)\*\*
- Dr Jim Harty (Cork)\*\*
- Dr Carol Sinnott (Cork)\*\*

\* Left the steering group during 2013    \*\* Joined the steering group during 2013



**NEGs Trainee Liaison Group, 2013**

To strengthen relationships between fourth year trainees and NEGs, in the autumn of 2013, the NEGs Trainee Liaison Group (TLG) was established. This group meets by teleconference and facilitates better communication between senior trainees and the NEGs Programme.

• Ballinasloe GP Training Programme	<i>Vacant</i>
• Cork GP Training Programme	Dr Sadhbh Ni Lionaird
• Donegal GP Training Programme	Dr Aideen Brides
• HSE Dublin Mid Leinster GP Training Programme	Dr Maeve Doheny
• Mid Leinster GP Training Programme	Dr Freda Jane Vora-O'Neill
• Mid-West GP Training Programme	<i>Vacant</i>
• North Dublin City GP Training Programme	Dr David O'Connell
• North Eastern GP Training Programme	Dr David Doran
• RCSI GP Training Programme	<i>Vacant</i>
• Sligo GP Training Programme	Dr Clare Kelly
• South East GP Training Programme	Dr Patrick Kelly
• South West GP Training Programme	Dr Lisa Cahill
• TCD GP Training Programme	Dr Kirsty Dunne
• Western GP Training Programme	Dr Conall Mac Conmara

**Main programme activities****Regional meetings and the launch of NEGs webinars**

NEGs regional meetings take place across the country in the spring and autumn, and continue to be successful and popular. They are delivered by and with the support of the NEGs Steering Committee in Dublin, Mullingar, Sligo, Galway, Limerick and Cork. For the first time, a formal booking structure was put in place for autumn 2013. A live online questions and answers session with the programme director was piloted at the autumn Mullingar meeting. To complement these meetings and facilitate members who cannot attend, in the autumn of 2013, the first NEGs webinar was launched with great success.

The spring meeting was titled “*Personal Financial Management*”. Meetings were attended by approximately 100 members. The autumn meeting was titled “*A Pot Pourri of Topics*”, and included a clinical topic, internal CME points, applying for a GMS number, alternative income streams, work life balance, the Vasco da Gama Movement and updates on NEGs. Approximately 200 members attended meetings, including 45 for the first ever NEGs webinar.

**The 2013 ICGP Winter Meeting – Future Proofing Irish General Practice**

The NEGs programme director acted as convenor of the November ICGP Winter Meeting. This ICGP wide event was delivered to a capacity audience of 250 in Athlone and feedback was universally positive.

### ***NEGs discussion fora***

The NEGs discussion board is a highly regarded resource which the members view as an invaluable benefit of membership. During 2013, the NEGs programme director continued to moderate the discussion boards.

### ***NEGs membership survey***

The annual NEGs survey was carried out electronically in late 2013.

### ***European activity***

The Vasco da Gama Movement (VdGM) is the Establishing GP branch of WONCA Europe. NEGs previously had interaction with VdGM but this had fallen by the wayside. At WONCA World in Prague in June 2013, formal relationships were re-established between VdGM and NEGs. The ICGP NEGs Programme is now represented on the VdGM Council and within other VdGM structures.

### ***Launch of the Hippocrates Exchange Programme***

VdGM has a supported exchange programme facilitating establishing GPs from all over Europe to spend a two week period of observership in another European country. Irish participation in this programme was formally launched at the 2013 ICGP Winter Meeting. The NEGs programme director acts as the national exchange coordinator for this programme.

### ***Representation of and presentations on behalf of ICGP NEGs***

During 2013, on behalf of NEGS, the programme director undertook the following:

#### ***Representation of ICGP NEGs on the following:***

- ICGP Council
- ICGP Membership Services Committee
- ICGP Project Development Group
- Vasco da Gama Movement Council
- Hippocrates Exchange Programme National Exchange Coordinator Group

#### ***Presentations given as NEGs programme director:***

- 13 March: "Personal Financial Management", NEGs Regional Meeting, Galway
- 26 March: "Personal Financial Management", NEGs Regional Meeting, Dublin
- 13 April: "A Vision for the Future of NEGs", ICGP Executive Meeting
- 24 April: "Module 14, Financial Protection and Planning for the Self Employed", ICGP Registrar Management in Practice Certificate
- 30 April: "Practical Aspects of Establishing in Practice", Visit to the ICGP of the Mid-Leinster GP Training Scheme
- 10 May: "Overview of and Discussion on NEGs", ICGP AGM
- 22 June: "Results of the ICGP Faculty Survey", ICGP Research and Audit Conference
- 14 September: "Results from the ICGP Faculty Survey and Discussion on NEGs CME", CME Tutors Conference, Athlone
- 10 October: "European General Practice and Vasco da Gama", NAGPT, Lyrath

- 11 October: “Getting a Job, Employment and Income”, NAGPT, Lyrath
- 11 October: “My Ideal Job”, NAGPT, Lyrath
- 22 October: “NEGs Webinar”, Online
- 23 October: “A Pot Pouri of Topics”, NEGs Regional Meeting, Galway
- 5 November: “Live Online Q&A”, NEGs Regional Meeting, Mullingar
- 23 November: “Social Media: The Power, Beauty and Potential”, ICGP Winter Meeting
- 23 November: “European General Practice”, ICGP Winter Meeting
- 23 November: “Moderated Negotiation of a Practice Succession”, ICGP Winter Meeting

### ***Press interviews and articles***

During 2013, the NEGs programme director gave interviews and had multiple articles and news pieces published in the following publications:

- ICGP Forum
- ICPG ezine
- The Irish Medical Times
- The Irish Medical News
- The Medical Protection Society Practice Matters Magazine

### ***2014 and beyond: future plans, and continuing and planned activities***

To deliver for NEGs members, these are the planned activities for 2014:

- Publication of the second edition of Signposts to Success in ePDF format
- Delivery of the ICGP Mentor Programme
- Closed publication of results of the 2013 NEGs survey
- Upgrading of the NEGs webpages
- Marking the tenth anniversary of NEGs
- Hosting the spring and autumn NEGs regional meetings (including online Q&As) with the development of national sponsorship
- Presenting the spring and autumn NEGs webinars
- Convening the ICGP Winter Meeting
- Developing NEGs targeted sessions at the 2014 National Conference
- Involvement in the NAGPT Conference
- Expanding the geographical base of the NEGs Steering Group
- Expanding involvement of the Steering Group into the VdGM theme groups
- Growing the Hippokrates Exchange Programme in Ireland
- Expanding the role of the Trainee Liaison Group
- Continued moderation of the NEGs discussion forum
- Continued representation of NEGs within the ICGP
- Conducting the 2014 NEGs annual survey
- Bidding to host the second Vasco da Gama Forum in Spring 2015

### ***Reporting structure and administrative resources/support***

The NEG programme director works under the direction of the chief operations officer (COO), Mr Dermot Folan; and the chairperson of the Membership Services Committee, Dr John Gillman. Reporting is to the Membership Services Committee, the ICGP Council and the ICGP Board of Directors.

Ms Orla Sherlock continues to provide administrative support to the NEG programme. She is the main administrative contact person for establishing GPs and is also central to the co-ordination of NEG activities. She is assisted by other administrative staff at the ICGP as and when required.

## Education Governance Committee Report

**Author: Dr Brian Norton, Chair of Education Governance Committee**

### *Other members of the committee*

- Mr Nick Fenlon, Director of Education
- Dr Henry Finnegan, Director of CME
- Dr Claire McNicholas, Assistant Director, CME
- Dr Margaret O’Riordan, Medical Director
- Dr Rita Doyle
- Mr Kieran Ryan, Chief Executive Officer
- Prof Peter Cantillon, Representative of AUDGPI
- Dr Mary Sheehan
- Dr Noreen Lineen-Curtis
- Dr John Sweeney
- Dr Marie Carmody Morris
- Dr Sharon McDonald

### *Administration*

- Yvette Dalton

### *Retired members*

- Dr John Delap
- Dr Richard Brennan
- Dr Raymond Mulready

### *The Education Governance Committee reports on the following:*

- Oversight, validation and review of existing education programmes.
- Analysing need and planning for new education programmes and activities.
- Overseeing the assessment where relevant, including the appointment of an external examiner.
- Provision of end-point certification for courses.
- Decision making in learner grievance/disciplinary proceedings/appeal process.
- Collaboration and partnership with external organisations and bodies including Academic Departments of General Practice.
- To recommend the Foundation Projects Committee, for their recommendation, and worthwhile education programmes.

### *Projects undertaken during the past 12 months*

- Appointments completed of 4 new CME tutors which brings the total of CME tutors nationwide to 37 tutors.
- Planning in progress to have national workshop to train and support group leaders for CME groups.
- Delivery of elearning modules on relevant educational topics continues with increasing numbers of GP participants.
- Educational newsletters from Nick Fenlon, Director of Education, to ICGP members were successfully launched and will be issued twice a year.
- The winter education meeting was again very successful with capacity attendances. A new larger venue will be sought to allow greater numbers to attend.
- ICGP policy on sponsorship was reviewed and updated.

- Activities and progress of the following programmes are received and supported by the Education Governance Committee:
  - C.M.E. – National Network of C.M.E.
  - ICGP – Health in Practice (HIP) Programme
  - Women’s Health Programme
  - Mental Health in Primary Care
  - Substance Misuse Programme

### ***Future plans***

- Proposal for future ICGP education strategy will be reviewed and plans made to move it forward.
- The Education Governance Committee will support the expansion and delivery of online elearning modules.
- The committee will look at getting sponsorship for education courses from non-pharma sources.
- Marketing of ICGP services to include education activities will be prioritised.



## Wonca Report

**Author: Dr Mary Sheehan, ICGP Chair**

### Summary

Wonca is the World Organisation of National Colleges and Academies of general practice, and Wonca Europe is the European regional branch of Wonca. It has more than 40 member organisations and represents more than 45,000 family physicians in Europe.

The aim of Wonca Europe is to improve the quality of life of people through fostering and maintaining high standards of care in general practice/family medicine, by providing a forum for exchange of knowledge and information, encouraging and supporting the development of academic organisations of general practitioners and representing the educational, research and service provision activities of general practitioners before other world organisations and forums concerned with health and medical care.

There are many network organisations which are under the umbrella of Wonca Europe – EGPRN for researchers, Euract for teachers of family medicine, Equip for those interested in quality, Euripa for Rural and isolated practitioners, Europrev for those interested in prevention and health promotion, and Vasco de Gama for the younger doctors (NEGS and trainees). It is planned that the ICGP will host some of the network organisation conferences over the next few years.

There is an annual Wonca Europe conference, most recently held in Prague in June of 2013. Ireland was well represented at the conference with over 90 Irish GPs registered. Not only were we registered but we also ran workshops and presented posters. In fact, Irish posters, both from the Mallow Primary Healthcare Centre, won “the poster of the day” on two of the three days of the conference. Andrée Rochfort, Pearse Finnegan and Enda Murphy ran successful workshops.

This year’s conference is in Lisbon on 2–5 July. Next year’s conference will take place in Istanbul on 22–25 October, and the 2016 conference on 16–18 June in Copenhagen. Further details of these can be accessed on the Wonca website – [www.woncaeurope.org](http://www.woncaeurope.org).

The Wonca Europe website will contain copies of abstracts from previous meetings and has links to the special interest and working groups on the website.

When one attends a Wonca Europe conference, the most striking thing is the similarities between European general practitioners regardless of where we work or how we are paid. The exchange of ideas and thought provoking keynote lectures and workshops invigorates the participants. (It is also a way of obtaining lots of CPD points in a few days.)

The website for Wonca world is [www.globalfamilydoctor.com](http://www.globalfamilydoctor.com). Here, one can access information about special interest groups and Wonca working parties. It is also a source of international guidelines. The ICGP is a member organisation of Wonca World. One can also become a direct member of Wonca World and details of this can be found at [www.globalfamilydoctor.com/AboutWonca/Membership1.aspx](http://www.globalfamilydoctor.com/AboutWonca/Membership1.aspx).

The next Wonca World conference will take place in Rio de Janeiro in 2016.



### Overview

This role was created in 2013 as a merger/amalgamation of several quality related roles that I had at the ICGP:

1. Director of the ICGP Health in Practice programme since March 2000 – a quality improvement initiative for personal and occupational healthcare services, and education for GPs.
2. ICGP representative since 2007 at the European Association for Quality in General Practice – EQUIP – which is a network organisation of Wonca Europe. Elected honorary secretary of EQUIP in 2010, and executive board member of Wonca Europe July 2013.
3. Participation in a new ICGP working group set up in 2013 to address the implementation of the National Standards for Safer Better Healthcare in Irish general practice.

The combined time commitment for the above roles is two days per week.

The annual report for 2013 is given in two separate documents: the ICGP Health in Practice Programme report (see separately), and this report of the ICGP Director of Quality Improvement.

### Activities

- **EQUIP PECC-WE Project: Patient Empowerment in Chronic Conditions – Wonca Europe**

Ongoing throughout 2013 was the Wonca Europe 2015 Anniversary Project in conjunction with four partners EQUIP, ICGP, Duodecim Finland (Evidence Based Medicine unit of Finnish Medical Society) and the Department of General Practice, University of Jena, Germany. EQUIP lead a project funded by Wonca Europe and the partners to celebrate 20 years of Wonca Europe in 2015. The aim of Patient Empowerment in Chronic Conditions is to report on what effective educational tools can be used in training GPs and other health professionals in general practice in order for them to help empower patients in self-management of their own chronic conditions. The ICGP has conducted a systematic review of the topic as one of the work packages of the project. This review is close to completion. The ICGP also works with all partners to have an input into all of the work packages in conjunction with Dr Claire Collins, ICGP Director of Research, who is project manager for the Wonca Europe Project.

[http://equip.ch/flx/projects/pecc\\_we\\_patient\\_empowerment\\_in\\_chronic\\_conditions\\_wonca\\_europe/](http://equip.ch/flx/projects/pecc_we_patient_empowerment_in_chronic_conditions_wonca_europe/)

- **April 2013 EQUITY as a Dimension of Quality Care in General Practice**

The EQUIP meeting and spring conference were hosted by the French GP members of EQUIP, who took the lead on their chosen theme of equity. Early results of the Qualicopic Study, in which the ICGP was a participant were presented by Sara Wilhems, Belgium. The challenges faced by GPs and patients in Greece as a result of the economic recession also featured. The French college STFG in conjunction with EQUIP have plans to formulate a policy statement on equity in general practice.

The programme, slides and webcasts are available from:

[http://equip.ch/flx/events/43rd\\_equip\\_assembly\\_meeting\\_in\\_paris\\_5\\_6\\_april\\_2013/](http://equip.ch/flx/events/43rd_equip_assembly_meeting_in_paris_5_6_april_2013/)



- **May 2013 ICGP AGM: National Standards on Safer Better Healthcare**

Two workshops delivered in the parallel sessions section of the programme to inform GP membership about national standards and to stimulate feedback on their implementation in practice.

[http://www.icgp.ie/go/courses/conferences/agm\\_2013](http://www.icgp.ie/go/courses/conferences/agm_2013)

- **June 2013 Wonca World Conference Prague, Czech Republic**

Three separate 90-minute workshops:

1. International Symposium on Doctors Health Services – see the EQuIP website and ICGP website
2. Survival Skills for General Practice – See the EQuIP website
3. Patient Empowerment in Chronic Conditions in General Practice – this interactive workshop is part of the Wonca Europe project on Patient Empowerment in Chronic Conditions which is due to report in October 2015 for the Wonca Europe 20<sup>th</sup> Anniversary Conference. There are four partners in this project – EQuIP, ICGP, Duodecim (Finnish Medical Society Evidence Based Medicine Unit) and Jena University Germany, Dept. of Family Medicine.

See Ernesto Mola, Concepts in Patient Empowerment: <http://equip.ch/>.

- **June EQuIP Summer School to Stimulate Research in Quality Improvement in General Practice**

This workshop was for 16–18 GPs who have project proposals to discuss with quality improvement leaders. The tutors were Prof Frede Olsen Denmark, Prof Hector Falcoff Paris, Prof Jochen Gensichen, Jena, Germany and Dr Andrée Rochfort, Hon Secretary of EQuIP [http://equip.ch/flx/summer\\_schools/](http://equip.ch/flx/summer_schools/).

- **August Working Group on National Standards, established in August 2013**

The first meeting took place at the ICGP. My role is to liaise with the group to disseminate information on quality improvement through Forum and the ICGP website. Once the group outputs are sufficient, I will link with the ICGP Director of Education for planning other educational routes to assist GPs with compliance with the national standards and to encourage feedback from membership, and through specific groups such as CME tutors.

- **September 2013 Meeting with HIQA**

Along with Dr Margaret O Riordan, ICGP Medical Director, I met with Marie Kehoe-O'Sullivan, Director of Quality Improvement, at the ICGP to discuss the implication of the National Standards for General Practice. Further meetings are planned for 2014.

- **September presentation at the National CME Tutors Workshop, Athlone**

Along with Dr Margaret O Riordan, ICGP Medical Director, I presented an introduction to the national standards and their context in general practice. Some CME tutors volunteered to explore some of the individual standards domains with GPs in their regional groups. There will be a follow up in 2014.

- **October 2013**

Health & Safety Authority, Dublin 1. Meeting of Healthcare Sector Steering Group in October 2013

Working Group on Safer Better Healthcare, ICGP in October 2013

- **November 2013**

EQuIP meeting in Bologna, Italy in November 2013. Theme: Management of chronic disease / conditions. EQuIP was joined by Dr Ernesto Mola of Lecce University, Italy who is a special advisor to the PECC-WE project. A project group met on Saturday with GPs from 7 different European countries to explore the concept of patient empowerment from the patient perspective as well as GP perspective as the basis for a future qualitative article in the European Journal of General Practice.

Programme and slides: [http://equip.ch/flx/events/44th\\_equip\\_meeting\\_in\\_bologna\\_14\\_16\\_november\\_2013/](http://equip.ch/flx/events/44th_equip_meeting_in_bologna_14_16_november_2013/)

### **Wonca Europe EQuIP Network**

See [www.equip.ch](http://www.equip.ch) and [http://www.icgp.ie/go/about/international\\_programmes](http://www.icgp.ie/go/about/international_programmes).

### **EQuIP strategy**

The aim of EQuIP is to contribute to the achievement of high levels of quality of care and safety in general practice in all European countries, by providing a structure for collaboration, and an exchange of expertise and methodology, and by initiating and participating in projects on quality improvement (QI).

### **EQuIP membership**

EQuIP work has always received its sole funding from Wonca Europe and membership consisted of a maximum of two representatives from the National Colleges of General Practice who are members of Wonca Europe.

In 2013, EQuIP adopted a new constitution to enable it to continue to have European representation of national colleges on an EQuIP Council, and also to open up institutional membership to other GP organisations, and other institutions active in quality improvement and patient safety in Europe, and a new system of individual membership like the other Wonca Europe Network Organisations, EGPRN and EURACT.

This will attract new membership fees and open up additional funding for future projects. Through expanding its membership base from two national colleges' delegates to include larger numbers of interested individuals and organisations active in QI in European general practice, it will also enrich the expertise of EQuIP and strengthen its role in European Quality in Practice. <http://equip.ch/flx/members/>.

### **EQuIP activities during 2013**

EQuIP working groups evolve and close according to current project activities; in the past twelve months it has had activities and outputs in the following areas: teaching quality improvement (QI); professional health (PH); practice accreditation; data collection in general practice, patient empowerment in chronic conditions, and patient safety.

I am active in the following working groups:

#### **1. EQuIP Professional Health Working Group**

**Aims:** To promote quality improvement in doctors' health and healthcare.

[http://equip.ch/flx/projects/professional\\_health/](http://equip.ch/flx/projects/professional_health/)

**Activities:** Workshops at Wonca Europe Conferences and Wonca World Conference. The world conference is a triennial event and was held in Europe in 2013 in Prague. In addition, we held a doctors' health symposium and a doctors' health workshop at Wonca World.

### **Symposium:**

Presentations:

[http://equip.ch/flx/events/wonca\\_world\\_2013\\_in\\_prague\\_25\\_29\\_june\\_2013/workshop\\_are\\_doctors\\_different\\_do\\_doctors\\_need\\_special\\_healthcare\\_services/](http://equip.ch/flx/events/wonca_world_2013_in_prague_25_29_june_2013/workshop_are_doctors_different_do_doctors_need_special_healthcare_services/)

Group work:

[http://equip.ch/flx/events/wonca\\_world\\_2013\\_in\\_prague\\_25\\_29\\_june\\_2013/are\\_doctors\\_different\\_workshop/](http://equip.ch/flx/events/wonca_world_2013_in_prague_25_29_june_2013/are_doctors_different_workshop/)

### **Workshop:**

[http://equip.ch/dcmpage/events/wonca\\_world\\_2013\\_in\\_prague\\_25\\_29\\_june\\_2013/doctor\\_s\\_health/](http://equip.ch/dcmpage/events/wonca_world_2013_in_prague_25_29_june_2013/doctor_s_health/)

## **2. EQuIP Teaching Quality Improvement Working Group**

### **Aims:**

1. To promote education on quality improvement in general practice
2. To deliver European summer schools on quality improvement

### **Activities:**

[http://equip.ch/flx/projects/teaching\\_quality/](http://equip.ch/flx/projects/teaching_quality/) and [www.InGPInQI.eu](http://www.InGPInQI.eu).

### **Publications in 2013**

EQuIP was a project partner in a European Commission funded project under the EU Leonardo da Vinci Programme. I was involved as one of the four members of EQuIP representing EQuIP in this project. We produced four publications and I co-edited the Guidebook on Implementing Quality Improvement and contributed two chapters to the book.

This book was launched in print in March 2013 and is available online: [www.InGPInQI.eu](http://www.InGPInQI.eu). Click on Products and Outputs, Work Package 4.

Editor of “*Guidebook on the Implementation of Quality Improvement in General Practice*”, funded by the European Commission under the Leonardo da Vinci programme. ISBN 978-83-932788-2-4.

This book was produced by a project called Lifelong Learning in Quality Improvement for GPs, and was led by the Polish College of General Practitioners. One of the partners in the project was EQuIP and hence my involvement. The guidebook was published in print for distribution to national colleges of GP in Europe and universities, and is also available online: [http://ingpinqi.eu/guidebook\\_EN/index.html](http://ingpinqi.eu/guidebook_EN/index.html).

Author of two chapters in a book: *Guidebook on the Implementation of Quality Improvement in General Practice*. See: [http://ingpinqi.eu/guidebook\\_EN/index.html](http://ingpinqi.eu/guidebook_EN/index.html). ISBN 978-83-932788-2-4.

### **Chapter titles:**

“*Doctors’ Health and Quality of Care*” and “*Patient Participation in Implementing Quality Improvement in General Practice*”.

### **Administrative resource provided to programme**

- Direct ICGP work is resourced by the College.
- Wonca Europe Executive Board work is funded by Wonca Europe.
- EQuIP work is part funded by the ICGP through membership of Wonca, and part funded by EQuIP summer schools which are self-financing.

### ***Acknowledgements***

I would like to gratefully acknowledge the guidance and support of Dr Margaret O’Riordan, ICGP Medical Director, who has been working in the field of quality and standards for GPs for many years and is herself a past member of EQuiP, and who is the visionary behind the new ICGP Working Group in Implementing the National Standards. The work of this group will become increasingly important in the months and years to come.



## EURACT Report

**Author:** *Darach Ó Ciardha, Irish representative on the EURACT Council*

### Introduction

EURACT is the European Academy of Teachers in General Practice and is one of the networks within WONCA Europe. Its remit is to advance the teaching of general practice throughout Europe. It has over 800 members, comprising trainers and teachers in general practice throughout 40 countries. Any country with more than three members is entitled to send a representative to the EURACT Council, which meets twice a year. Amongst other achievements, EURACT developed the current European definition of general practice upon which many GP curricula across Europe are based. Ireland has had significant involvement in EURACT over the years, and Dr Michael Boland, Prof Fergus O’Kelly, Dr Owen Clarke and Dr Brendan O’Shea are notable previous contributors. This meeting was my first as the current Irish representative on the Council.

### Graz

**4 April** – we convened in the evening and had a two-hour meeting which comprised personal presentation as there were 10 new members present. We then broke into small groups, where we discussed challenges in our home countries. This also served as an ice-breaker. A total of 33 countries were represented.

**5 April** – we started off with presentations from GP teachers (programme director or assistant programme director equivalents) who had attended a Level III Leonardo da Vinci Course. These courses are partially funded by the EU and are organised by EURACT members. They are designed to assist GP teachers to achieve greater proficiency in delivering quality education to trainees. The numbers that can avail of these courses are quite limited but they may have potential for Irish PDs/APDs in future years. Following this, we broke into committee work. The four standing committees are the Basic Medical Education Committee (which examines the teaching of general practice at undergraduate level), the Specialty Training committee (which examines the teaching of general practice at postgraduate level), the CPD committee and the Member Services Committee. I joined the Specialty Training committee. Our work mainly revolved around the updating of the EURACT Statement on Hospital Training in General Practice which we hope to publish shortly. This outlines the conditions that we would expect of hospital posts in which general practice training is taking place. We also decided that many countries were struggling with the assessment of training and would therefore set about producing an assessment tool-kit that countries and organisations could use to better inform their systems. We also had Part 1 of the Business Meeting of the Council. This included the offer from Ireland (as proposed by Dr Brendan O’Shea previously) to host the Autumn EURACT Council meeting of 2016 in Ireland – this was heartily welcomed. That evening we attended a dinner hosted by the regional GP organisation.

**6 April** – we commenced with task-group work. There are five task groups (these are temporary structures as opposed to the permanent committees):

1. New European Definition (activity is on hold pending further discussion with WONCA Europe)
2. European Specialist Exam (subsumed into the Specialty Training Committee),
3. Educational Research

4. Website
5. Policy Plan

I engaged with the website task-group and suggested changes including the adoption of a social media (Twitter and LinkedIn) presence. The day concluded with reports from the committees and the task-groups.

### ***Statement on hospital phase training in GP training***

<http://euract.eu/others/finish/20-others/260-euract-statement-on-hospital-posts-used-for-training-in-gp-fm-graz-2013>

### ***Albania: 3–6 October***

The EURACT Council met again in Tirana. We continued with the work as per the committees and the task-groups. The Leonardo project has received and is developing a more substantial footprint which EURACT is contributing to. A new website will need to be developed to support this activity.

### ***Conclusion***

I found this to be a useful role, in which I was both able to contribute and to benefit. I have access to significant resources, particularly now in terms of experts in assessment which is most apt, given my work as assessment development officer with the ICGP. I have also volunteered to chair the website committee.

## ICGP Nominee to the Medical Council Report (June to December 2013)

**Author: Dr Rita Doyle**

### Summary

This is my first report as ICGP representative to the Medical Council and my responsibilities began in late May 2013 with two days of “away day” training. The Council has 12 medical members and all of these were new to the role. My overriding new experience was the exposure to the intense but necessary “legalistic” approach to all matters – quite a steep learning curve. Everything the Council does is subject to the Medical Practitioners Act 2007. There are many things in this Act which some might like to change but that is a very slow process.

The Council has a responsibility to “protect the public” and this is its overarching mandate. It has two Statutory Committees – the Fitness to Practice and the Preliminary Proceeding Committee. I elected to join the PPC. This is where all complaints are filtered. The vast majority of complaints are about GPs – as there are more of us than any other discipline – and I felt it was really important to have a GP there. The amount of reading involved in both the PPC and the Council documentation is alarming and it can take anything from 12 to 24 hours reading in advance of a meeting. I am learning how to “speed read”. I also chair a small committee called the Health Committee which supports doctors who have health issues and addictions. This is populated mostly by GPs and psychiatrists with quite a number of skilled allied health professionals.

The Council also has a responsibility for monitoring the standards of education in both the under graduate, graduate and post-graduate programmes. I have already been struck by the emphasis on the students experience rather than that of the Institution involved. I am very keen that my role in the Health Committee should be expanded to a pro-active one – creating awareness amongst all doctors and students of self-care and I would hope to use the experience of the Health in Practice people in the ICGP in furthering this aim. I am also liaising with Dr Ide Delargy and the “Practitioner Health Matters” group and hopefully there will be a Memorandum of Understanding between them and the Council in the very near future – thus facilitating more appropriate referrals.

It has been a very busy time but very interesting.

## UEMO Report – European Union of General Practitioners / Family Physicians

**Head of Delegation:** Liam J Lynch, IMO

**Representatives:** Martin Daly, IMO  
Annraoi Finnegan, ICGP  
Lynda Hamilton, ICGP

### *Spring Meeting – Killarney 24 & 25 May 2013* *Lobbying for the recognition of family medicine as a speciality*

#### **Presentation**

“Proposal of the commission amending directive 2005/36/EC of the E.P. and of the Council on recognition of professional qualifications”, by Dr Andreas Zsigmond, Policy Officer on Free Movement of Professionals.

#### **Projects**

##### *Joint Action European Health Workforce Planning and Forecasting*

- Collaboration to ENS4Care – “Evidence-based guidelines for nursing and social care on e-health services”.

##### *Report Joint EC-OECD Workshop Benchmarking*

- Information and communication technologies in health systems.
- SMART project: access to basic IT is universal; however, high-speed internet is not widespread, and interconnections limited between service providers.

#### **Preventative Activities**

- TELL ME – improve communications between health professionals and with the public
- EUROPREV

#### **CME/CPD**

- Examination of each country’s activities
- Standardisation across Europe

##### *The value of team work to manage increasing complexity of care*

- Meeting European Partnership of Primary Care

### *Autumn Meeting – Istanbul 15 & 16 November 2013* *Freedom of movement of professionals*

- Difficulties arise when the new host country does not recognise the qualifications of the country of origin.

#### **Projects**

##### *Joint Action European Health Workforce Planning – April 2013 to end of 2015*

- A shortage of 1,000,000 anticipated by 2020.
- Challenges of ageing population, economic crisis, inequalities to be met by collaboration between states, innovation, recruitment, retention, exchange of best practice, networks, research and legislation on recognition of professional qualifications and cross-border medicine, ICT.



#### ***ENS4Care Proposal***

- Nursing and social care deployment of e-health services.
- Evidence-based, ICT enabled, with an enhanced role for nurses.
- Collaboration with the European Nurses Federation ongoing for R&D on TeleHealth and TeleCare Network.

#### ***CME/CPD***

- Mapping and standardisation of CME/CPD across Europe.
- Meeting in October 2014 with CPME, dentists, including nurses, and pharmacists organisations.

#### ***C.E.N.***

- Difficulties of standardisation of quality marks across Europe.

#### ***Is ICT a Trojan Horse?***

- Data protection versus ease of access to information, i.e. cross border.
- How to limit access appropriately.



## Education Programme Report

**Author: Nicholas P Fenlon, Director of Education**

### *Other members (e-learning, courses, Summer School)*

- Louise Nolan, Education Administrator
- Jana Pickard, Education Administrator
- Yvette Dalton, Education Administrator
- Orla Sherlock, Events Co-ordinator
- Gillian Doran & Patricia Patton, ICGP Librarians (available to education and course participants on request)
- Niamh Killeen, IT & Administrator for the Substance Misuse Programme.

### *Summary of the programme*

The aim of the Education Programme is to provide continuous medical education/ professional development to its members. The objective of the programme is to provide general practitioners and health care professionals with practical updates on identified topics that are relevant and applicable to their everyday practice. It strives to provide these in a format that recognises the reality of the busy, stressful and complex work of GPs and through the use of educational methodologies that match the learning styles of members.

### *Programme activities during the past 12 months*

#### **Year long courses 1**

The following courses started their year of study in September 2013 and will run until May 2014:

- Occupational Medicine Leading to LFOM
- Musculoskeletal Examination and Injury Management
- Certificate in Women's Health

#### **Year long courses 2**

The following course started on 31 January 2014 and will run until the end of April. The second semester will run from September to December 2014.

- Certificate in Geriatric Medicine for General Practitioners

#### **Short courses**

There are a number of short courses which were delivered during the past 12 months. These include:

- Primary Care Surgery (Minor Surgery) – October in Dublin; November in Tipperary
- SCALES – Started September
- Women's Health
- Practice Staff course

#### **Deferred courses**

The following courses have been deferred due to an insufficient number of registrations:

- Certificate in Palliative Care
- Certificate in Diabetes Care
- Leadership in General Practice (due to absence of tutor)

#### **eLearning modules**

A number of elearning modules have been released. Visit the Education section of the College website for details of all elearning modules.

### ***New Education Newsletter***

The College has printed and posted the first ICGP Education Newsletter to members. This has been received well and has increased the awareness of members to the education possibilities on offer.

## ***Programme milestones, deliverables and outputs***

### ***Unit milestones***

- Sixth ICGP Summer School took place in June 2013 with over 300 GPs in attendance.
- A number of new ICGP elearning modules were launched.
- A project has begun with iHEED to deliver the Women's Health Programme to an international audience.

### ***New courses***

Two new courses have been launched since the last meeting.

- Substance Misuse and Associated Health Problems Certificate Course
- Immediate Medical and Emergency Care Course – first course in January 2014
- eLearning uptake: We have now over 1,600 individual users registered for elearning modules.

## ***Future plans***

**Palliative care:** We will be delivering a two hour workshop on palliative care for GPs on the Friday night of the College's annual conference in Galway in May 2014.

**Diabetes care:** We will be developing a series of elearning modules on diabetes care and will compliment with master classes in diabetes. This will replace the current diabetes course format. The UCC/NUIG course in diabetes has affected our registration numbers for this course also.

**Dermatology.** We have begun the production of a series of elearning modules in dermatology for GPs which will lead to ICGP recognised certification in dermatology.

### ***Master classes***

We are in the process of developing and delivering a series of masterclasses – 3-4 per year. Examples include:

- Respiratory
- Mental health
- Pain management

### ***Forum Distance Learning***

Those who complete the Forum Distance Learning MCQs will be able to do so electronically starting in May 2014.

### ***Summer School***

We will be facilitating the seventh ICGP Summer School in June 2014 at the Lyrath Estate Hotel, Kilkenny.

## ***Administrative resource provided to the programme***

The Education Programme has three full time administrators, Louise Nolan, Jana Pickard and Yvette Dalton. All administrators have given hugely to the development and continued success of ICGP education delivery.

## CME Small Group Network Report

**Author: Dr Henry Finnegan, National Director of CME**

### Overview

This is the first report in the January to January format. All previous reports covered the academic year from June to June of the following calendar year.

The working environment of general practitioners in active practice continues to be difficult. The effect of cuts in fees and allowances by the Health Service executive (HSE), coupled with dwindling private practice due to the recession, is having adverse effects on most GP practices. Nevertheless, GPs continue to commit themselves to keeping medically up to date by attending the locally based small group learning (SGL) meetings. The Continuing Medical Education [CME] network of tutors continues to provide accessible educational modules to GPs in an SGL format. This educational model has been built up over many years and continues to be the most popular educational activity for GPs. The modules provided by the tutor network are relevant and reflect the everyday dilemmas faced by GPs in active practice. Allowing discussion to take place among peers in a trusted environment facilitates learning at each meeting.

This type of adult learning allows GPs to keep abreast of medical developments relevant to their specialty. Reflection on current practice among peers should result in improved care of our patients. The funding of the CME national tutor network is from the HSE. The National Director of CME reports to the Medical Education and Training (MET) unit in the HSE. The Irish College of General Practitioners (ICGP) has the governance role.

A questionnaire survey, to assess if participation in GP CME SGL influences medical practice, was undertaken in November–December 2012. There were 1,360 replies received and the results are being analysed. The results will be of interest and will be presented and published in due course.

At the beginning of the year, there were 35 CME tutors in post. The local CME tutors are responsible for organising monthly meetings of small groups throughout the academic year. For some time, there has been no tutor in the Laois/Offaly or West Dublin schemes due to the recruitment ban in the civil service. Meetings continued in these areas with volunteer group leaders and mentoring from neighbouring tutors. This was not satisfactory. Due to retirements, there used to be a turnover of three tutors per year. Again, because of the recruitment ban, this has not happened for some years. This also was not satisfactory. I am pleased that a new arrangement was put in place that allowed the ICGP to advertise, interview and appoint four new replacement CME tutors. The new tutors are in the two areas mentioned and Dublin South and West Midlands. The new tutors commenced their new posts on 1 November 2013 and had an induction day on 7 November 2013. The network always benefitted from the enthusiasm of new tutors. The CME national tutor network has now reverted to the full complement of tutors and no area of the country is without a CME tutor. The HSE and the ICGP are to be thanked for the progress in this area.

The national GP CME scheme had 2,847 GPs on the mailing lists in 2013. This was an increase of 447 on the previous year. GPs are assigned to a particular group in their area. In 2013, there were 162 groups nationally. The meetings remain an 'out of hours' activity in most areas.

The tutor will inform the GP of the date and venue in advance of each meeting. The tutor will provide a minimum of seven SGL meetings for each participant throughout the academic year. There were 1,171 meetings held in 2013. Due to capacity problems and attempting to maintain the SGL ethos the meetings are not 'open'; GPs must be on the tutor's mailing list of participants to attend. When in a local learning group each

participant is expected to contribute to the discussions, to join in any activities and to protect the confidentiality of discussions on patient care. This commitment may need to be explicit at the beginning of each academic year.

It is now compulsory for all registered medical practitioners (RMPs) on the Irish Medical Council (IMC) register to enrol on a Professional Competence Scheme (PCS) organised by a recognised training body. For general practice, this body is the ICGP. All physicians are now expected to partake in regular continuing professional development (CPD) activities, including CME. CPD credits are accumulated under various headings and RMPs record these credits to ensure their continued maintenance of professional competence.

The national GP CME tutor network and the local SGL meetings have a significant role in facilitating GPs in active practice in attaining CPD credits and meeting their obligation under PCS requirements. The CME SGL meetings are not ordinarily sponsored by the pharmaceutical industry.

The advent of PCS has resulted in more GPs joining the mailing lists. This has resulted in a significant rise in attendance at CME SGL meetings. There was a GP attendance of 13,980 in 2013. The massive increase of 3,500 attendances occurred the previous year. This increase has led to capacity problems in many areas, particularly in the cities.

The numbers now attending some groups are so large they cannot be considered 'small groups' and there is pressure on this learning model. The average attendance nationally is 13 people per group. The average attendance per GP is 4.5 meetings.

In response to the capacity problems, some tutors have formed new groups to deal with the demand but some are now resourcing groups greater than the maximum of five they are expected to service. There is a need for more tutors if the quality of educational product is to be maintained. At this time of high demand, the network has received budget cuts in the region of 35% from the HSE over the past five years.

The national network is increasingly dependent on the local group leaders to assist the CME tutor in running meetings. In 2013, there were 92 group leaders. This is almost a 90% increase over the past 3 years. The HSE budget for group leaders has been fixed. The ICGP are again to be thanked for providing the additional resources to allow the network deal with the capacity problem by engaging extra group leaders. There is a need for group leaders to be trained in leading groups, to adhere to reporting responsibilities, to ensure the briefing/debriefing process with the tutor works and to assist on the local tutor advisory group.

There is a need for group leader courses to be organised at a regional level. It is hoped there will be four such courses in 2014.

The CME tutor network needs sufficient funding to be provided, from whatever source, to allow the development of the network, including new technologies. The tutor network wants to provide a quality educational product to all GPs who need it, in particular new entrants to general practice. At the present time, this cannot be done unless new funding is provided.

### Conclusion

In conclusion, I would like to sincerely thank all the tutors and group leaders for their efforts in continuing to provide this popular CME product to the GPs in their area. I believe this model is of help to GPs in active practice. It helps GPs diagnose, investigate, prescribe and manage patients and improve patient care. I hope there will be more recognition of the value of the CME network and that more resources will be provided in the immediate future so that all areas and all GPs in practice can continue to have access to CME SGL meetings.



## Women's Health Programme Report

**Author: Dr Miriam Daly, Programme Director**

### **Programme members**

- Project Director, LARC Courses: Dr Geraldine Holland
- Tutor and Course Coordinator: Dr Deirdre Lundy

### **Summary of the programme**

The Women's Health Programme runs courses and training in women's health topics. The programme, in conjunction with the Reproductive and Sexual Health Committee, sets training criteria, provides training and awards the Certificate in Contraception and the Advanced Certificate in Long Acting Reversible Contraception (LARC). We also aim to develop new courses in women's health topics in response to members' needs. We facilitate workshops on women's health issues at ICGP events throughout the year. The Women's Health Programme provides an opinion and review of documents and guidelines relating to women's health that are produced by outside bodies and that are relevant to general practice. We have a role in representing the ICGP on external steering committees and policy groups. We reply to members' clinical queries and provide opinion and analysis of new advances or new evidence regarding women's health issues that are relevant to general practice.

### **Programme activities/tasks**

#### **• Advanced Certificate in LARC**

- We have awarded 416 Advanced Certificates in LARC to experienced inserters who applied before the 31 December 2012 deadline.
- We have awarded 18 Advanced Certificates in LARC to experienced inserters who applied in 2013.
- We have awarded 25 Advanced Certificates in LARC to GP trainees who received training in LARC from an ICGP LARC tutor in their training practice, during their registrar year.
- During 2013, we established a GP led community clinic for IUCD insertion. The clinic is run by GPs every Wednesday evening in the outpatient department of the National Maternity Hospital. Patients referred with menorrhagia are triaged to attend this GP led clinic where they will be assessed for their suitability for IUCD insertion, have an ultrasound if indicated and then have their IUCD inserted. The aim of the clinic is to provide patients with uncomplicated menorrhagia rapid assessment, investigation and treatment. This clinic will provide an opportunity for GP trainees to learn the IUCD insertion technique from experienced GP tutors. We will begin to accept applications from GP trainees to attend this clinic shortly.
- We ran three LARC tutor workshops in 2013 and to date, have trained 193 LARC tutors who can provide training in LARC insertions.

#### **• Courses and conferences**

- We developed a Sexually Transmitted Infections (STI) e-learning module and launched it in November 2013. Registration figures show a great response since this was launched in November. Registered users: 97; certificate completions: 55; lessons viewed: 1,184.
- In 2013, we began to collaborate with HEEDO with the aim to develop a women's health e-learning course that can be marketed internationally. The course will be hosted by HEEDO on a state of the art e-learning platform. ICGP members will

benefit from having access to this e-learning course and to individual modules, which will be tailored to suit local learning needs.

- Reproductive and Sexual Health Course: This course provides an update for GPs and practice nurses on contraception, sexually transmitted diseases, menopause and women's health. We run two per year. It fulfils the requirements for the theory part of the Certificate in Contraception.
- Certificate in Contraception Practical Course: This course fulfils the practical component for the Certificate in Contraception. Two per year.
- Long Acting Reversible Contraceptives (LARC) Tutor Course: To train new LARC tutors.
- Women's Health Conference: GPs and Female Health: Caring for Women in the Community in conjunction with the ICGP Summer School, June 2013.
- The Certificate in Women's Health and Diploma in Women's Health: The Women's Health Programme is now delivering this e-learning course and we are reviewing the course content and delivery.
- LARC e-learning. Registered users: 633; lessons viewed: 2,781.
- Breast e-learning. Registered users: 374; certificate completions: 225; lessons viewed: 2,017.

#### • Publications

- We began work on amending the document, Management of Crisis Pregnancy Guidelines, to incorporate information about the Protection of Life During Pregnancy Act 2013 and the Department of Health guidance document on the implementation of the law.
- We began reviewing and updating the QIP document, Domestic Violence: A Guide for General practice.

#### • Representation

- HSE steering group and working group for the development of a National Strategy for Sexual Health.
- Multidisciplinary committee established by the Department of Health to prepare inter-professional guidance to direct the implementation of the Protection of Life During Pregnancy Act 2013.
- National Cancer Control Programme (NCCP), group developing Family Risk of Breast Cancer Guidelines and group developing guidelines for ovarian cancer diagnosis.
- HSE Crisis Pregnancy Programme Advisory Group.
- HSE Gonorrhoea Control Group.
- Irish Cancer Society, We can Quit Advisory Group.

#### • Clinical queries

In 2013, we responded to many clinical queries from members about women's health clinical issues.

#### • Women's Health Workshops

- Workshop on Crisis Pregnancy: Issues for General Practice. ICGP AGM, May 2013
- Women's Health Workshops at ICGP SCALES Course.
- LARC tutor update, National Trainers Conference, May 2013
- National Trainee Conference, Womens' Health Update, October 2013.

#### • Research

Testing for Sexually Transmitted Infections in General Practice in Ireland.

We presented a poster at the First Global Conference on Contraception, Reproductive and Sexual Health in Denmark, May 2013.

### ***Future plans***

- Plan and deliver phases 3–4 of the LARC programme.
- Work with HEEDO to provide content for development of a state of the art e-learning course on women's health.
- Develop a lesson on HIV to add to the Sexually Transmitted Infections e-learning module.
- Launch Domestic Violence: Guidelines for GPs in May 2014.
- Set criteria and run updates for those who wish to re-certify for the Advanced Certificate in Contraception.
- Provide articles on women's health for Forum (ICGP journal).
- Continue to provide analysis and opinion on women's health clinical issues in response to members' queries and identified needs.
- Plan and develop new courses, guided by members' needs.

### ***Administrative support***

- Jana Pickard



## **Disease Surveillance Sentinel Practice Network Project Report**

***Author: Dr Michael Joyce, Project Director***

### ***Other members of the project***

I run the project on behalf of the ICGP in collaboration with the Health Protection Surveillance Centre (HPSC) and the National Virus Reference Laboratory. The Health One User Group (HIUG) provides valuable technical support. Valuable assistance is provided by my practice nurse, Ms Olga Levis.

### ***Summary of the project***

The project involves running a computerised surveillance network for certain infectious diseases in the community and involves 60 sentinel practices spread throughout the country. There is a particular emphasis on the surveillance of influenza.

### ***Background to the project***

There is a need to monitor certain infectious diseases in the community, especially influenza.

To address this need, this project was set up in 2001. The aim was to recruit practices that had a high level of recording of computerised information in their practices already. This meant that when a GP saw a case with one of the index conditions, he was recording it anyway and there was no need for any extra work on behalf of the GP to have the case recorded. Then at the end of the week, a computerised search, which can be delegated to a staff member, is run and the result is sent to the ICGP. The data is cleaned and forwarded to the HPSC.

The process was successful from the outset with very good return rates being achieved immediately and all the stake holders were very pleased. Initially, there were 20 practices involved, all using Health One software and the conditions covered were influenza, chicken pox and shingles. Health One was chosen in particular because of its suitability for this type of project. Now there are 60 practices involved including some practices using software other than Health One. Measles, mumps, rubella and gastro-enteritis have been added to the conditions that are covered.

Although I have been involved in the project since its inception by being one of the sentinel practices and also through HIUG, I took over the ICGP role formally from Dr Dermot Nolan in September 2004.

### ***Educational aims of the project***

- Illustrates the use and application of computerised practice.
- Demonstrates the power of data available and collected in general practice.

### ***Benefits to members of the project***

There is a wealth of data out there in general practice which will be sought after in increasing amount as time goes by. It is absolutely critical that general practice and the members of the ICGP remain in control of this data so that it is used for the general good and not used inappropriately. This project provides a method for control and the distribution of GP generated computerised data that can be built on in the future in different areas. The lessons learned have already contributed to the developments in

Heartwatch and the Independent National Data Centre (INDC) and will continue to do so in the future.

### ***Project activities***

- Collection of incidence data for influenza, measles, mumps, rubella, chickenpox, shingles and gastro-enteritis in the community.
- Cleaning and preparation of data.
- Forwarding of this data on behalf of the ICGP to the HPSC.
- Taking swabs from suspected cases of influenza to confirm cases and determine what type of influenza virus is in circulation.

The results of the surveillance are available on the HPSC website at:

<http://www.hpsc.ie/hpsc/A-Z/Respiratory/Influenza/SeasonalInfluenza/Surveillance/InfluenzaSurveillanceReports/20132014Season/>

Although not technically a part of this ICGP project, a significant number of the network participants have volunteered to take part in a pan European study of influenza vaccine effectiveness in conjunction with the HPSC which was first carried out in the 2009/2010 season and has been continued during each season since. A paper on this was published in the IMJ, volume 105, no. 2, February 2012, pgs. 39 to 42.

### ***Project milestones/deliverables/outputs***

Whereas previously surveillance was carried out from week 40 to week 20 it now takes place throughout the entire year.

With 60 participating practices, we now have the desired 5% population coverage. Some limited further recruitment is possible to cover areas that have poor coverage but no significant increase in the number of practices is planned.

### ***Achievements to date***

The project has achieved its goals of community surveillance of the specified conditions. The project needs to continue as it has become a cornerstone of surveillance, particularly in relation to seasonal and pandemic influenza. Return rates well in excess of 90% continue to be achieved consistently.

### ***Future plans***

Continued surveillance is planned.

### ***Funding source***

Funding is provided on an agreed annual budget basis by the HPSC.



## Substance Misuse Programme Report

### Programme members

**Programme Director:** Dr Ide Delargy

**Clinical Audit Facilitator:** Karen Dempsey

**Administrator:** Niamh Killeen

**Audit Review Group Chairperson:** Dr John O'Brien

### Summary of programme objectives

- To provide education and *training* to all GPs and GP registrars on issues related to substance misuse and associated health problems.
- To work in collaboration with other agencies, e.g. National Guidelines Development Group to provide best practice guidelines for the management of substance misuse in primary care.
- To provide training and continuing medical education to general practitioners involved in Methadone Treatment Protocol (MTP) in primary care.
- To develop and implement an *audit* process which both ensures best practice and provides support for general practitioners taking part in the MTP.

### Training

*Please note: Both Level 1 and Level 2 training courses are currently under review. (See below for details of newly established Certificate Course in Substance Misuse and Associated Health Problems.)*

Under the terms of the Methadone Treatment Protocol (MTP) Services published by the Department of Health in 1998, any GP wishing to take part in the provision of treatment services to drug users must undertake training as provided by the ICGP.

From the commencement of the MTP, two levels of training have been available for GPs:

**Level 1** – Our aim is to have in time all GPs trained to a minimum of Level 1 standard on completion of their postgraduate training.

**Level 2** – This is seen as a more specialised area for interested GPs and will require an additional time commitment and training.

### Level 1 training (to become the Foundation Course in Substance Misuse)

A Level 1 GP can treat stabilised opiate dependent persons in their own practice. This training is provided online at [www.icgp.ie/substancemisuse](http://www.icgp.ie/substancemisuse) and is open to all practicing GPs and GP registrars. Completion time is approximately 3 hours. Practice nurses are also encouraged to participate in this training in conjunction with the GP in the practice.

Level 1 training is ongoing with a cohort of GPs completing training annually. GP training programmes nationally have taken up this training as part of their curriculum. This will ensure that all GP registrars will have received Level 1 training on completion of their postgraduate training.

This programme will be reviewed in 2014 following the publication of the new Opiate Substitution Treatment Guidelines and will become the foundation course in substance misuse for all GPs.

Activity levels:

GPs completing Level 1 training January–December 2013	99
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### **Level 2 training**

#### **Certificate Course in Substance Misuse and Associated Health Problems**

The SMP has developed a new training programme entitled Substance Misuse and Associated Health Problems. This new certificate training course will replace previous training for Level 2 and all new applicants for a Level 2 contract will be required to complete the course. Completion of Level 1 training will be the minimum entry criteria. The training programme is delivered free of charge to doctors currently working in addiction centers, and for GPs who subsequently take up a Level 2 contract, a reimbursement of the course fee will be offered.

A GP wishing to complete Level 2 training will be required to:

- Complete online Level 1 training and complete a satisfactory Level 1 audit.
- Complete the Certificate in Substance Misuse and Associated Health Problems.
- Complete a log diary of patients under the supervision of a GP mentor.

The new certificate course will be delivered through a mixture of clinical assignments, workshops and online learning modules. It is open to all GPs and doctors in other relevant specialties (emergency medicine, prison doctors and infectious diseases). Due to popular demand, the first course, which started in November, was oversubscribed. A second course began in January 2014.

Activity levels:

*Applications for Level 2 accreditation 2013	
<b>Participants on the Substance Misuse Certificate Course</b>	<b>8</b>
Course 1	24
Course 2	22

*\*Due to the development of this new training programme, new applicants for Level 2 have been advised to participate on this course.*

### **Continuing Professional Development (CPD)**

To support Level 1 and Level 2 GPs working in substance misuse, the SMP has developed a range of educational support tools. These include updates on issues related to all aspects of the management of substance misusers.

#### **ICGP Summer School 2013**

A programme on issues relating to audit, substance misuse programmes in prison and infectious diseases was delivered at the ICGP annual Summer School meeting

in Kilkenny. A focused workshop on problem case management was also delivered to practising Level 2 GPs.

### ***ICGP Winter Meeting 2013***

A programme/workshop on the issue of management of dependency on prescription and over the counter medications was delivered for GPs attending the ICGP Winter Meeting in Athlone in November 2013.

### ***Additional educational supports***

- Online lectures and podcasts: our CPD programme is delivered via a series of online lectures, podcasts and web support material.
- Audits on substance misuse related topics: a range of sample audits have been developed to support best practice in the care of substance misusers. These include an audit of benzodiazepine prescribing, virology screening and immunisation, information/documentation management and child protection issues in substance misuse.

## ***Audit***

### ***Clinical audit for GPs participating in the Methadone Treatment Protocol***

Under the terms of their contract for the MTP, all GPs participating are required to undergo clinical audit. The audit process, the standards and the audit criteria have been developed and agreed by the Joint ICGP/HSE Audit Review Group (ARG). The clinical audit facilitator carries out the audits on behalf of the ARG.

Due to the geographical spread and the increasing participation of GPs, it is recognised that a practice visit to all GPs on the programme is not feasible. A process of self-audit is therefore being developed which will involve all GPs on the programme. A system of external audit (practice visit by the clinical audit facilitator) will be an on-going part of the audit process and will be conducted a) randomly on a 5 year cycle for GPs who have completed a satisfactory audit or b) at the direction of the ARG where a GP has not successfully completed an audit.

The self-audit tool has been in development over the past 6 months and is currently reaching completion. The self-audit tool has been piloted and reviewed by the ICGP director of research and audit, and the National Office for Clinical Audit (NOCA). An electronic data collection tool, TRAX, will be used for compiling individual GP reports and for providing collective national audit reports.

### ***Self-audit development***

- The self audit tool has been revised to reflect the changes made to the criteria and standards. This is currently in draft form and awaiting final approval by the ARG at our next meeting.
- The escalation policy for GPs who do not meet the required standard is currently being discussed at senior HSE level and with the IMO.
- The clinical audit facilitator is reviewing the individual audit histories of Level 1 and Level 2 GPs, and inviting those who are ready to enter the process of self-audit to do so.
- A full review and revision of all documents relating to the MTP audit process has been undertaken. Documentation has been updated as appropriate.
- The role of the clinical audit facilitator has been reviewed in line with the changes required to the self-audit process.

### **Activity levels**

Due to developments as outlined above, there is currently a transition phase between the former audit process and the implementation of the new self-audit process. The clinical audit facilitators are currently completing external accreditation audits on GPs with previous outstanding audit issues and who have not completed a satisfactory audit to date. Our aim is to have all GPs prepared to enter the self-audit process at the earliest possible time.

Follow up of the External Evaluation Report from Glasgow Review Group:

- In line with the recommendation of this report, the criteria and standards document has been reviewed using the relevant National and International Substance Misuse Guidelines for reference. The SMP section of the website has been updated to reflect these changes.

### **Audit review group meeting dates**

- 28 January 2013
- 26 March 2013
- 21 May 2013
- 27 August 2013
- 8 October 2013
- 19 November 2013
- 19 December 2013

### **Representation on national bodies and agencies**

#### **National Clinical Guidelines Development Group**

The ICGP Substance Misuse Programme is one of the key stakeholders on the National Clinical Guidelines Working Group. There are two ICGP representatives on this group. This is a work in progress and the ICGP representatives have continued to attend and contribute to the guidelines development process.

#### **National Traffic Medicine Working Group on Substance Misuse (RCPI)**

The director of the Substance Misuse Programme represents the ICGP on this working group.

#### **National Advisory Committee on Drugs**

The director of the Substance Misuse Programme represents the ICGP on this working group.

Dr Hugh Gallagher also represents the ICGP on the Treatment and Rehabilitation Subgroup.

#### **National Buprenorphine/Naloxone Working Group**

The Director of the Substance Misuse Programme represents the ICGP on this working group.

### **New developments for 2014–2015**

The overall direction of the SMP will transition from a specific focus on Level 1 and Level 2 methadone training to a wider focus on the addiction problems which face every GP

in regular general practice throughout the country. To reflect this change, a chapter on substance misuse is included in the new ICGP curriculum development for postgraduate GP training.

The SMP also plans to expand its training for GPs to reflect the dependency problems with prescription drugs such as benzodiazepines, z drugs and opiate pain medications. The management of alcohol problems in general practice will be included in the expanded training programme and we will work in consultation with the Mental Health Programme and other relevant agencies to develop this training. This is in line with the National Drugs Strategy which recommends the alignment of a national plan of alcohol and drug problems.



## Mental Health in Primary Care Report

**Author: Mr Pearse Finegan, Director of the Mental Health Programme**

### Introduction

The year 2013 was a challenging year for advancing the role of general practice in supporting and treating patients with mental health issues. However, the National Office for Suicide Prevention has continued with committed support for the development of services and research in general practice to enable GPs to improve services for patients presenting with suicidal ideation.

I would like to thank Dr Brid Hollywood for her commitment and support to the development of mental health services in general practice (in her role as GP lead for mental health in the clinical care programme) over the past two years.

I would also like to thank Dr Fiona McKenna who supported the roll-out of the Suicide Prevention in General Practice 2013 elearning programme.

### Developments and courses

- Dr Fiona McKenna (GP) attended small group CME meetings to support the roll-out of education for GPs in relation to suicide prevention and is presenting at the CME tutors workshop in February 2014.
- Over the past few months, a lot of time was spent developing a programme on alcohol reduction for use in general practice. The first part of the programme will be launched the first week of April 2014 with the publication of the results of a research project on current service provision.
- An e-learning programme on alcohol related issues will be launched in May 2014.
- The existing ICGP guide for primary care staff on alcohol identification and management is being updated at present.
- A standard drinks measure was developed and produced by the ICGP in partnership with the HSE and was distributed to all ICGP members. The measure is designed to act as a support in brief intervention.
- Work continues with the HSE on the delivery of the Team Based Approach to Mental Health in Primary care course at DCU and Cork. Eight programmes have been delivered to date.
- The access to counselling service for GMS patients was developed to support GPs in dealing with patients presenting with depression and anxiety. There are approximately 1,200 referrals per month and work on expanding the service is continuing. An initial problem with the format and content of the referral letters has been resolved.
- Six new positions in the "SCAN" service to support GPs in dealing with patients who present with suicidal ideation and who need support were agreed, but the roll-out of the service is an on going problem. This development is in response to the findings in the report on the SCAN service in Wexford which was launched at the ICGP Winter Meeting last year. Dr Fiona McKenna is also working on this area.

### Projects with outside groups

- Member of the "Vision for Change" sub group on the implementation of the recommendations.
- We have developed a platform for access to some of our elearning programmes for members of the Irish Practice Nurses Association.



- Bodywhys patient support group have published a guide for GPs and general practice in Forum.

### **Conference**

- Presented in Sicily at the 6th International Conference for International Society for Evidence Based Health Care (EBHC) – 2nd Conference of the International Society for EBHC Evidence, Governance, Performance. See: <http://www.ebhc.org/pagine/983/it/report?elemento=day3>.
- Dr Margaret O’Riordan and I presented “Mental Health In Primary Care” to the National Conference of the HSE Secondary Services Mental Health.
- Presented at the National Conference of Irish Association of Suicidology in Derry.

### **Publications**

- We have just completed the review of new publications to be added to the current list of recommended books related to mental health in public libraries, e.g. the “Power of Word Bibliotherapy” which was launched in January 2014.

### **Research**

Results from the survey of members on alcohol detoxification will be available in April 2014.

A new research project to investigate “mental health issues presenting to out of hours GP services” is in the planning stages.

### **Future plans**

The 2014 Summer School will host a masterclass on mental health.

General practice can be a stressful area to work in especially in the context of increased workload and reduced resources and supports. In recognition of this, we plan to develop a programme in 2014 to support GPs with self-care.

### **Administration support**

Ms Michelle Dodd

## SCALES Course Report

**Author: Dr Maria Wilson, Course Tutor**

### Summary

The SCALES course has been in operation for the past number of years. It is a course that is primarily aimed at doctors who have been out of general practice for a period of time and who are thinking of re-entering it but wish to update their knowledge. It also attracts doctors who have never been in general practice and who are considering a future in general practice. Interestingly, a third group have emerged. These are doctors who are involved in public health. This group do it to update their medical knowledge as they feel quite distant from some clinical scenarios. As a result, there is a wide range of expertise and opinions expressed in the group. We changed the format for registering this year. In previous years, we telephoned people who wished to enrol on the course in order that they could ascertain whether the course suited their needs.

### How the course runs

- There is a limit of 20 participants; 14 took part in the year 2013.
- A needs assessment is sent to each interested person, followed by an invitation to register online. They are also offered the opportunity to talk to me by phone should they have any queries about the course and its suitability for their needs.
- It is run over eight full days, all bar one of these are held at the ICGP. Lunch is provided and a lot of discussion spills over into this time.
- The course tutor runs half of each of the full days and guest speakers, largely chosen from expertise within general practice, cover the second part of the day.
- Most of the course material is given to participants either before or on the day the course begins. Participants are encouraged to read in advance as all the sessions are interactive.
- The curriculum has a core basis to it. However, we always leave free sessions to accommodate specific interests or needs of the group. We have several past participants who come back and run a session on the course. These have included Dr Shunil Roy (suturing techniques), and Dr Elizabeth Healy (child protection issues – a practical approach). Other guest lecturers include Dr Geraldine Holland, Dr Deirdre Lundy, Dr Susan Smith, Dr David Buckley, Dr Darragh O’Doherty, Dr Zita O’Reilly, Dr Conor Maguire, Dr Keith Perdue, Mr Rolande Anderson, and Dr Fiona Magee.

Once again, we carried out a practice visit to my own practice. This was in the afternoon and this session was split into three sessions in which the participants rotated through my secretary, the practice nurse and myself. These sessions covered a lot of practice management, computers in practice, spirometry, vaccinations, smear recalls, etc. It always turns out to be a very interactive and enjoyable session. We also had a session run by Gillian, our librarian here at the ICGP, which was excellent in providing us with quick guides to finding information in a quick and appropriate manner, and showing us how to use the ICGP website in a more efficient way.

We also had sessions on travel health, diabetes mellitus and women’s health, which were all delivered in very practical terms relevant to general practice. The course started on 3 September 2013 and finished on 10 December 2013 with the graduation and a festive lunch. We had a very enthusiastic group of doctors who were very well motivated and who came well prepared for the sessions. We had a very high attendance rate.

### Course administrator

Ms Yvette Dalton



## Quality and Standards Committee Report

**Author: Dr Sheila Rochford, Chair of Quality and Standards Committee**

### Quality and Standards Committee Members

- Dr Margaret O’Riordan
- Ms Mary Fanning
- Ms Anne Cody
- Dr Mary Sheehan
- Dr Ray Mulready
- Dr Eamonn Shanahan
- Dr John Cox
- Dr Philippa Kildea-Shine
- Dr Sheila Stephens
- Dr Paul Armstrong
- Ms Carol White

The Quality and Standards Committee receives reports from the following: the Medical Director of the ICGP, the Professional Competence Committee, the Quality in Practice Committee, the Substance Misuse Programme and the Clinical Care Programme Committee. Full details of the annual reports from these sources are detailed below.

The Clinical Care Subcommittee was constituted to report on work undertaken by ICGP clinical care leads on the clinical care programmes, to provide feedback on documentation (other than clinical guidelines) emanating from these programmes and to provide feedback from ICGP members on clinical care programme activities. The heavy weighting of these programmes towards secondary and tertiary care had previously been noted. The proposed transfer of care into the community without any additional resources represented a significant hazard to safety in respect of the care of the cohort of patients affected by proposed changes, and for this reason, and with deep regret, the ICGP was obliged to withdraw from the clinical care programmes in the summer of 2013.

The Report of the Medical Director of the ICGP to the Q&S Committee (page 65) summarises the many activities undertaken by the College at this time, including the establishment of a working group to examine matters arising from the launch by HIQA of *National Standards for Safer Better Healthcare*.

The Professional Competence Committee report (page 69) describes areas of evolving practice culminating in the revised PCS Guide.

The work of the Quality in Practice Committee (page 72) report involves the production of quick reference guides to aid GPs in daily practice. An increasing difficulty for this committee involves the tension between the description of best practice and resource constraints in the implementation of these recommendations.

The Substance Misuse Audit Review Group report (page 58) describes progress in finalising self-audit criteria and standards, in the area as well as progress on the development of new opiate guidelines.

The Quality and Standards Committee is the first committee in the ICGP to have a lay member to represent public interest. This initiative is a genuine attempt to incorporate the patient voice in committee decisions, and influence the content and strategy of work undertaken.

Members of these committees provide much support for the activities of the College in order that all GPs and their patients may benefit. I would like to take this opportunity to express gratitude for their efforts in working to maintain the ethos and culture of primary care in difficult circumstances.



## Medical Director's Report

**Author: Dr Margaret O'Riordan**

The year 2013 was a difficult year for general practice. Workload increased while the cumulative effects of the FEMPI cuts over the last number of years led to an average overall 38% reduction in practice income. Practice developments of all kinds were put on hold as GPs struggled to maintain a quality service for their patients against the odds. The government's stated strategy of supporting a primary care led health service did not translate into support for frontline GPs, practice nurses and reception staff – the core team that delivers 24 million consultations every year in Irish general practice. Unlike the NHS, where a one week waiting list is not unusual, the vast majority of patients are seen within a 24 hour window in Irish general practice. The success of programmes such as Heartwatch, structured care programmes for patients with diabetes and the childhood vaccination programmes, clearly demonstrates the ability of general practice to deliver in the areas of chronic disease management and prevention when empowered to do so through structured support and resources.

There is no doubt that GPs want to provide the quality of service that patients deserve and that they are trained and willing to do so but they cannot deliver without appropriate support. It is time for the government to demonstrate a real commitment to general practice.

In this context, the ongoing ICGP promotion of general practice and contribution to health policy through interaction with external agencies including Minister Reilly, Minister Lynch and Minister White, the Department of Health & Children, the Health Services Executive, the Health Information & Quality Authority, the Medical Council, the Forum of Postgraduate Training Bodies, the National Cancer Control Programme, Patient Representatives, the Irish Medical Organisation and the National Association of GPs is crucial in the current environment.

### **Major developments in 2013**

The role of medical director involves oversight and support across all ICGP activities including education, training and research.

### **National Standards for Safer Better Healthcare**

The National Standards for Safer Better Healthcare were launched in June 2012 by HIQA. They apply to all health care services (excluding mental health) provided or funded by the HSE, including general practice. The College will support its members in interpreting how these standards will apply in a practical sense to general practice and the best way to support their implementation. A working group chaired by Dr John Delap has been established to plan the best approach to achieve this aim. Members of the working group are drawn from ICGP members and key stakeholders such as the HSE and IMO, and patient representatives. A small group of practice managers and practice nurses have also been identified and their input will be essential to support the work of the group. A series of articles have commenced in Forum highlighting the standards and raising awareness among the membership. A meeting took place with Marie Kehoe-O'Sullivan, HIQA Director of Safety and Quality Improvement, to outline the aims of the ICGP working group. Frequent contact will be maintained with HIQA as the work of the group progresses and feedback and guidance are sought. Dr Andrée Rochfort and I attended the CME Tutors Workshop on 13 September in Athlone and agreed to work

with the tutors on developing supports for members in this area. Ms Jantze Cotter has taken up the post of manager of quality and projects. This new role provides support to the medical director on multiple projects including professional competence and the NSSBH working group. Dr Andrée Rochfort has expanded her role as director of HiPP to encompass leading on educational developments related to quality, including the NSSBH, in her new role as director of quality improvement. .

### ***Professional Competence Scheme***

As medical director of the Professional Competence Scheme (PCS), the focus of the past year has been on consolidating the learning from the commencement of the scheme and continuing to support members of the PCS to meet their statutory continuing professional development (CPD) activities. Ms Jantze Cotter, PCS Manager, Ms Mairead Delaney, Administrator, and Ms Carol White, Administrator, are instrumental in the success of the scheme to date. The PCS subcommittee and its chair Dr Mary Sheehan (and latterly Dr Ray Mulready) have guided the continued development and expansion of services for members.

### ***HIQA Expert Advisory Group for the HTA of Clinical Referral / Treatment Thresholds for Planned Surgical Procedures***

The medical director represents the ICGP on the HIQA Expert Advisory Group on planned surgical procedures. The product of this group has implications for GP referral to secondary services as it provides national guidance on criteria on referral of patients for surgical procedures. A report has been produced on the first group of procedures for review – tonsillectomy, grommet insertion, cataract extraction and varicose vein ligation. A report has also been produced on the second group of procedures including hand surgery and chronic pain management procedures. The next set of procedures to be addressed in 2014 will cover specified orthopaedic procedures.

### ***Links with RCGP Northern Ireland***

North south co-operation between the ICGP and RCGP NI is progressing. Standards for the accreditation of out of hours co-ops in the Republic of Ireland based on a model developed by the RCGP NI have been reviewed. A business plan and associated SLA have been agreed and signed between the two colleges and consultation is ongoing with the national OOH CO-OP group. A small group has been established to review the standards and it is planned to commence the voluntary accreditation process in the coming months.

### ***ICGP representatives on external bodies and submissions to public consultations***

The ICGP is very grateful to the more than 50 GP representatives on committees external to ICGP. A comprehensive list of the groups involved can be found on the ICGP website at [http://www.icgp.ie/go/about/introducing\\_the\\_icgp/icgp\\_representatives](http://www.icgp.ie/go/about/introducing_the_icgp/icgp_representatives).

The ICGP has made formal submissions to the public consultation process on a number of national issues over the past year, including:

- Draft implementation tool for the National Standards for Safer Better Healthcare in acute hospital settings
- HIQA HTA of Clinical Referral / Treatment Thresholds for Planned Surgical Procedures
- Oireachtas Committee on Death and Dying
- National Dementia Strategy
- Department of Health Guidance on Protection of Life in Pregnancy Bill

### **Ongoing activities**

The medical director has a key role in providing clinical support for ICGP members. This involves dealing with individual queries from members and issues of interest to larger numbers of members have also been addressed. The medical director has a representative role on the following committees:

#### **Internal ICGP committees**

- Council and Executive member
- Quality and Standards Committee member
- Education Governance Committee member
- Postgraduate Training Committee member
- Research Committee member
- Professional Competence Committee (and Audit Subcommittee) member member
- Quality in Practice Committee member
- Audit Review Group Subcommittee member
- Project Directors Group chair
- Working Group on National Standards for Safer Better Healthcare member

#### **External representative roles**

- Member of the Professional Competence subcommittee of the Forum of Postgraduate Training bodies
- Member National Cancer Control Programme Tumour Group
- Member of the Medical Council Working Group on review of ethics guide related to the Protection of Life in Pregnancy Bill

#### **Presentations/workshops**

- **Professional Competence Workshop**, January 2013  
Retired Doctors Group
- **ICGP AGM**, May 2013  
Keynote presentation: “Back to the future – where now for general practice”
- **Seanad Eireann**, May 2013  
Presentation to the Oireachtas Committee on the Protection of Life in Pregnancy Bill
- **New Trainers Workshop**, May 2013  
Presentation: “Principles of Adult Learning”
- **ICGP Summer School**, June 2013  
Faculty officers workshop in conjunction with Dr John Gillman
- **National Out of Hours Co-op Group**, October 2013  
“Standards for Out of Hours Co-ops”
- **National Trainees Conference**, October 2013  
Keynote presentation “Back to the future – where now for general practice”
- **National meeting of community mental health teams**, November 2013  
Presentation: “Maximising integration in community mental health teams” in conjunction with Pearse Finnegan and Patrick Gibbons

#### **Publications and reports**

- O Riordan, M., Crowley P. *What do the new national standards mean for GPs?* Forum January 2013.

- O’ Riordan, M., Collins, C. and Doran, G. 2013 *Access to Diagnostics – a key enabler for a primary care health service*. ICGP May 2013.
- O’ Riordan, M. *HIQA Expert Advisory Group for the HTA of Clinical Referral / Treatment Thresholds for Planned Surgical Procedures* Forum May 2013.
- O’ Riordan, M., and Collins, C. *Primary care teams in Ireland from the perspective of general practice* in O’ Connor, T. (Ed) 2013. *Integrated Care for Ireland in an International Context* ISBN 978 1 78119 080 7.

### ***Administrative resource provided to the programme***

Ms Maureen Dempsey provides comprehensive administrative support which is much appreciated.

## Professional Competence Scheme Report

**Author: Ms Jantze Cotter, PCS Manager**

### *Programme title*

ICGP Professional Competence Scheme (PCS)

### *Programme manager*

Ms Jantze Cotter

### *Other members of the programme*

The ICGP Professional Competence Programme is overseen by the ICGP medical director, Dr Margaret O’Riordan and managed by Ms Jantze Cotter. A committee oversees and monitors the development of the scheme and is chaired by Dr Ray Mulready, who was appointed part way through the year when Dr Mary Sheehan stepped down. We would like to thank Mary for her insightful direction during the scheme’s formative years.

The committee representation includes: Dr Claire Collins, Dr John Delap, Dr Mary Favier, Mr Nick Fenlon, Dr Henry Finnegan, Dr John Gillman, Dr Mary Glancy, Dr Brian O’Mahony, Dr Margaret O’Riordan, Mr Kieran Ryan, Dr Mary Sheehan, Ms Mairead Delaney, Ms Carol White and Ms Jantze Cotter.

### *Summary of the programme*

The ICGP operates a professional competence scheme under arrangement with the Irish Medical Council, in accordance to Section 91(4)(a), of the Medical Practitioners Act 2007. The ICGP’s key responsibilities in operating the scheme are to provide a supportive, collegiate, professional development environment to facilitate GPs’ enrolment, and engagement in and recording of continuing professional development (CPD) activities.

### *Programme achievements and future plans for 2014*

There were several positive achievements for the ICGP PCS in 2013. These can be categorised in three main areas: support, advocacy and development.

#### **Support**

Our aim is to provide accurate information and quality supports to all enrolees so that they can be well informed in relation to their requirements. We also strive to make the process of achieving, recording and monitoring requirements as streamlined and user-friendly as possible.

A 2013 survey which asked for feedback on the PCS tools and supports revealed that 87% of users who completed the survey rated it as either good or very good.

The supports to facilitate GPs to maintain competence include:

- PCS help desk – phone, email and in-person
- Clinical/practice audit:
  - Several additional clinical audit samples were developed and made available on the website
  - A podcast was developed to further explain the frequently asked questions about the audit process



- Other resources were developed and enhanced, including:
  - The PCS section of the ICGP website was modified.
  - Online tutorials were developed to assist enrolees with enrolment and using the ePortfolio, including attaching documentation.
  - One to one tutorials were provided to those who wanted to become familiar with using the online ePortfolio .
  - Guidelines were developed to assist overseas GPs with meeting the PCS requirements while working in Ireland.
  - Workshops were conducted for retired, out of hour, locum and sessional doctors in response to GPs' requests for support in understanding and meeting the maintenance of professional competence requirements, namely clinical (practice) audit and internal CPD.
  - The Retired GPs Discussion Group, for those no longer in clinical practice, was formed towards the end of 2013 in order to address the challenge faced by this group of doctors in achieving internal credits. This group now meets monthly.
  - Regular updates on the scheme's requirements were posted on the ICGP and PCS webpages, the ezine and a dedicated PCS FAQ page in Forum, the ICGP journal.
  - On-going provision of CPD recognition for activities/events external to ICGP.

Going forward, we are committed to:

- Reviewing and updating resources so that the most current and useful information can be made available for enrolees.
- Improving the annual process to maintain enrolment on the scheme so that it is quick and simple to complete.
- Increasing supports to encourage the small percentage not using the online ePortfolio to do so.
- Promoting examples of good practice identified via the verification process and at ICGP events, e.g. QIP awards, Research conference, etc.
- Developing supports to assist GPs who are encountering difficulties in meeting the requirements.

### **Advocacy**

We acknowledge and consider any feedback received in relation to the scheme. Where possible, we try to implement changes based on feedback if it is something within our control. If there is something enrolees request which is beyond our control, we are prepared to advocate for change if considered appropriate. For example, the PCS Department developed and forwarded a proposal to the IMC requesting that they reconsider the PCS requirements for retired GPs no longer engaged in any form of clinical practice. We will continue to advocate on enrolees' behalf through:

- Active participation on the Forum of Postgraduate Medical Training Bodies: PCS Subcommittee and PCS Managers Group, representing the views of GPs when developing common policies and guidelines.
- Organising quarterly PCS committee meetings with strong GP involvement in relation to decision making.
- Regular engagement with the IMC as the schemes evolve, including the development of elements of the performance assessment process and highlighting GP views when relevant.
- Reviewing guidelines and requirements to consider their impact on GPs and appealing these if deemed necessary.

### ***Development***

The PCS team endeavour to keep up-to-date with new developments and to explore and invest in new technologies and supports that we believe will benefit enrolees. Achievements are as follows:

- Educational activity was expanded to accommodate changes in learning environments and elearning activity was increased, courses were reviewed, study days and new courses were introduced.
- Increased uptake on using the online ePortfolio to record CPD activity including adding attachments.
- The process to renew enrolment was streamlined and the number of enrolees on the scheme increased from the 2011/12 year.
- Developing a comprehensive PCS guide covering all aspects of the ICGP scheme to distribute to all enrolees.
- Offering a direct debit payment option to all College members for renewal of their PCS fee.

### ***Future development plans***

Exploring and creating new supports to make the recording of CPD activity easier, e.g. recording CPD using a smartphone/iPhone and tablets.

- Adding a facility to the ePortfolio whereby enrolees can monitor how they are addressing the 8 Domains of Good Professional Practice.
- Expansion of the CME Small Group Programme.
- Increasing the number of sample audits available online. This includes the provision of a sample audit to be incorporated into all new elearning modules.
- Innovatively using resources to deliver best practice education programmes to reflect ongoing professional development needs. This involves catering to different learning styles, e.g. elearning, face to face courses, and providing a menu to enable self-selection based on development need.

### ***Administrative resource provided to the programme***

Ms Carol White – Administrator, Recognition of External CPD Activity  
Ms Mairead Delaney – Administrator, Professional Competence Scheme

The evolvement of the ICGP Professional Competence Scheme continues to be resources intensive. The successful implementation of the scheme thus far can be attributed to a range of dedicated ICGP staff, particularly Dr Claire Collins and Mr Nick Fenlon, the PCS Committee/subcommittee members and feedback from the scheme's enrolees.

## Quality in Practice Committee Report

**Author: Dr Paul Armstrong, Chair**

### Summary

The ICGP Quality in Practice (QiP) Committee was established in 2004 and is a subcommittee of the Quality and Standards Committee. It coordinates the production of quick reference documents and guidelines on clinical and non-clinical areas on topics of relevance to general practice in Ireland.

In many instances, these documents are produced in conjunction with outside bodies. In addition, the Committee reviews external documents from bodies such as HIQA, SARI, other medical colleges and the HSE Chronic Care Programmes.

The Quality in Practice Committee supervises the competition for the annual ICGP Quality Improvement Award. It also assesses requests for the use of the ICGP logo in publications by external agencies.

- Chairperson: Dr Paul Armstrong was appointed for a three year term in 2011.
- Committee membership : Dr Patricia Carmody, Dr Sheena Finn\*\*, Dr Mary Kearney\*, Dr Susan McLaughlin, Dr Grainne Ni Foghlu\*\*, Dr Maria O'Mahony, Dr Margaret O'Riordan, Dr Ben Parmeter, Dr Phillip Sheeran Purcell, Dr Patrick Redmond\*.  
\*Members joined during 2013  
\*\* Resignations during 2013
- Committee activity: there were five meetings in Lincoln Place in 2013 (January, April, June, September and November); some members who were unable to attend in person either posted comments on agenda items online or linked into the meeting by teleconference. A considerable amount of preparatory educational reading is involved for each meeting.
- Project Officer: Dr Maria O'Mahony continued as project officer during the year. The post provides for two sessions per week to support the chair of the committee in view of the considerable and increasing workload.
- ICGP administrative support is provided by Janet Stafford.

### Key activities during the past 12 months

#### 1. Chronic care programmes

Consultation took place for the first six months of 2013 with the Quality in Practice Committee in relation to the development of chronic care pathways for each of the national chronic care programmes. QIP feedback was both strategic and clinical in nature. Throughout 2013, GPs felt underresourced for the implementation of the programmes and the College generally felt excluded from the CCP process. As a result, it was not possible for QiP to endorse documents from the chronic care programmes. The ICGP withdrew from the clinical care programmes in July 2013.

Earlier in the year, documents from the following chronic care programmes had been reviewed and feedback was delivered by the QIP Committee:

- Acne
- Antimicrobial resistance and infection control
- Asthma

- COPD
  - Diabetes
  - Mental Health
  - Paediatrics

## **2. HSE and other agency publications and documents**

- Health Protection Surveillance Centre – Clostridium Difficile Guidelines
- Irish Food and Nut Allergy Network guidelines
- Child Protection guidelines
- National Lithium Information pack (SJOG)

## **3. Quick reference guides (QRG)**

During the course of 2013, new quick reference guides were published and existing documents updated. These are available in the In the Practice section of the ICGP website. Several other QRGs are also in development as listed below.

### **4.1 Quick reference guides completed or updated**

- Antipyretic Use in Febrile Children
- Child & Adolescent Mental Health
- Domestic Violence
- Haemochromatosis
- HSE/ICGP Healthy Weight Management Guidelines Before, During & After Pregnancy
- HSE/ICGP Weight Management Treatment Algorithm for Adults
- HSE/ICGP Weight Management Treatment Algorithm for Children
- Lesbian, Gay and Bisexual Patients – Issues for General Practice (GLEN document)
- Repeat Prescribing
- Cardiovascular Disease

### **4.2 Quick reference guides planned or in development**

- Coeliac Disease
- Communicating Risk
- Dementia

### **4.3 Quick reference guides being updated**

- Alcohol problems
- Epilepsy
- Warfarin prescribing
- Prostate cancer

## **Ongoing improvements**

Work was completed on choosing and prioritising topics for QiP attention and resources, concise proposal forms for quick reference guides (QRGs) have been developed, and a template for prospective topics and authors has been prepared and agreed. It is important that proposal forms are submitted in advance of work being carried out. Further details are available on the ICGP website.

- Summaries of quick reference guides have been published in Forum magazine in order to increase visibility of new and existing quick reference guides. The guides are also available in the In the Practice section of the ICGP website.
- Audit tools based on current quick reference guides (QRGs) have been developed. Authors are encouraged to provide audit tools for QRGs when completing templates.
- Quality Improvement Award: The annual ICGP Quality Improvement Award will be sponsored by Medisec and presented at the ICGP AGM in May 2014.

The Committee welcomed the motion from the Kildare faculty on the implementation of guidelines and its impact on members, and will engage directly with the faculty in 2014 on this relevant issue.

### ***Future plans and challenges***

- Ensuring our work remains user friendly and relevant for members.
- Being cognisant at all times of the workload and practical implications for members of documents endorsed by the College.
- Highlighting realistic resources will be needed to implement any new work practices in general practice.
- Optimising technology for meetings and workload.
- Keeping the workload manageable for committee members.
- Ensuring significant practical GP input into documents produced by third parties.
- Maintaining high standards for patient care.

## College Website Report

**Authors: Ms Laura Smyth, Web Editor, and Mr Neil Carrick, (acting) Manager for Web Services Projects**

### Introduction

The College website project is responsible for the development and management of the ICGP website ([www.icgp.ie](http://www.icgp.ie)) in line with the strategic direction of the College. The project aims to create a comprehensive content resource enabling the dissemination of information to members and the wider audience. The College website also enables members to make communication and interaction with the College more convenient and efficient, and markets and promotes College activities.

### Other members of the project

- Ionic, the College's web development company
- Sandra Rooney, SMR Consulting, who provides consulting and project management of web projects requiring integration with the College's membership database.

### Project activities

- Daily update of the website to keep information up to date and relevant
- Technical support for ICGP members and users of the website
- Project management of web developments and liaison with Ionic Ltd and SMR Consulting
- Formatting of publications for the website
- Liaison with various College groups (administrators, project directors, committees, etc.), management of each group's section and communication regarding website developments and tools
- Creation of an online repository of documents so that all staff can locate the most recent version of all documents quickly and easily
- Online marketing and promotion of College events and conferences
- Presentation of College material in an online, user friendly manner
- Keeping up to date with IT developments and advising the College of same

### Website statistics – overview

Over the past year, the busiest month was January. This was due to the GP training intake and MICGP Examination online applications. A page view refers to the number of individual pages visited during a month; Unique Visitors counts the number of times individual users access the website while Visits records the number of visits that those users made.

MONTH	PAGE VIEWS	VISITS	UNIQUE VISITORS
January 2013	423,779	73,570	38,786
February 2013	306,364	61,150	34,016
March 2013	284,424	56,670	31,827
April 2013	326,967	67,479	37,653

<b>May 2013</b>	334,382	71,487	39,512
<b>June 2013</b>	210,359	51,232	31,492
<b>July 2013</b>	238,333	55,750	33,449
<b>August 2013</b>	220,837	50,331	31,235
<b>September 2013</b>	260,729	55,273	33,684
<b>October 2013</b>	289,975	61,347	36,801
<b>November 2013</b>	296,675	61,027	35,936
<b>December 2013</b>	244,138	48,591	30,109

### **Current status**

In 2013, some major changes were made to sections of the ICGP website.

#### **Library**

A brand new library catalogue was built with a superior design and interface, more efficient and effective administrative tools and improvements to the searching and indexing of pages. The introduction of the new system has led to a greater number of items viewed and an increase in Google search traffic.

#### **Website search engine**

A new search engine with an improved search algorithm was introduced to the website in May 2013. The new search can access more pages on the website and deliver results for library items for the first time. Figures suggest a month-on-month increase in searches using the new engine and an improved click-through rate, indicating that more users are finding the results they desire.

#### **Education administration tools**

In September 2013, the administration section of the Education section was substantially overhauled. The new system is markedly more robust and has removed long-standing bugs. It provides a more efficient way to set up courses in Quercus. Course details and key information are more clearly displayed in the re-vamped course pages. Course information is easier to access and manage for administrators, tutors and course participants.

#### **Events calendar**

A new-look events calendar was launched. The new calendar highlights ICGP-sponsored events and clearly displays CPD points available for individual events.

### **Future plans**

- Work continues on the improving website security with a tightening up of access to restricted areas of the site and new authentication procedures in place for some external users. The final step will be the introduction of a more secure site log-in procedure requiring user emails and personal passwords.
- Further work on the promotion of ICGP events is planned with enhancements to the new events calendar.
- There are proposals to enable the automatic transfer of CPD points acquired through completion of e-learning courses and attendance at events to ePortfolio profiles.



## Communications and Public Relations Report

**Author: Dr Darach Ó Ciardha, Chair of Communications Committee**

### Communications Committee

- Dr Darach Ó Ciardha – Chair of Communications/ICGP Spokesperson
- Dr Eamonn Shanahan
- Dr Rukshan Goonewardena
- Mr Kieran Ryan, ICGP CEO
- Dr Iain Morrison
- Dr John Ball

### Summary

The ICGP communications agenda is a busy one. Our current focus is on expressing the position of the membership and responding to some of the key changes purported for general practitioners. These were first indicated in the Programme for Government, and, more recently, in measures such as “free GP care for under-sixes” announced in the 2014 Budget. Both “free GP Care” and universal healthcare have dominated the communication agenda, as you would anticipate, in the last six months.

The role of the Committee and that of the Committee chair is to represent members’ views via the media, our website, and on social media via @ICGPnews on Twitter. This is carried out under an agreed programme of activity approved by the College Board.

In September 2013, in response to growing demand from members, the Board appointed an external media agency, PR Strategy, to advise on communications matters and to bring a strategic approach to our communications activities. This relationship is working well and is on review on a six monthly basis.

In the last six months since appointing PR Strategy, we have been analysing media and communications activity closely. The ICGP receives 10 to 15 media queries a week at present, as health is, once again, top of the news and political agenda. This is as a result of the wide ranging changes to the health system in Ireland, proposed by the current government, and which have featured in media reports across all platforms on a daily basis in the last six months.

We aim to be selective in responding as the ICGP does not have the communications resources to be active on every issue and every medium in a 24 hour news cycle. We therefore have prioritised our approach and have given the focus to supporting members’ positions in key areas, to be responsive on general health matters, which support the health of our patients, and to ensure the external reputation of the College is visible and appropriate in our sector and in the health and, where relevant, news media.

Other aspects of our remit include working with other agencies on general health awareness issues. A good example of this is the work which was carried out by ICGP member Dr Nuala O’Connor with the HSE in relation to EAAD (European Antibiotics Awareness Day) on 18 November 2013. This event generated considerable coverage on this important topic. Similarly, ICGP Women’s Health Programme Director, Dr Miriam Daly, was closely involved with the Royal College of Physicians in Ireland’s (RCPI) S.H.A.W. week in November 2013. The Communications and Public Relations Committee is acutely aware of the time commitment from general practitioner members in supporting initiatives like these without which the College would struggle to maintain an adequate public profile.



All media queries are directed initially to PR Strategy and then directed to the most relevant person, e.g. the chair of communications, chairperson, CEO, medical director, COO or relevant programme director or faculty leader. There are also regular queries from mainly the medical media about the activities of the College, and requests for interviews with members of the Executive.

The Communications and Public Relations Committee activities also include supporting ICGP key events, such as the Winter Meeting in Athlone on 23 November 2013 and the Spring Conference “*Weathering the Storm*”, which took place in Clonmel on 8 March 2014.

On our behalf, PR Strategy manages all media activities around these events and communication of the College’s key messages from them. It of note that media representatives of all three national daily newspapers attended the conference in Clonmel and this generated significant coverage for the College and the profession of the key issues general practitioners are facing.

Communication with members falls under the remit of the committee and overlaps to some extent with that of the Membership Committee.

### ***Communications Committee activities during the past 12 months***

- Attendance at Board and Council meetings.
- Chairing Communications Committee meetings approximately four times a year. These involve the members of the committee linking up by teleconference and discussing strategy, and also the content of communications. (Minutes are available of all meetings.)
- Representing the College on all national and regional media.
- Liaising with the College officers, programme directors and the Board on the College’s position on issues.
- Liaising between journalists and the College’s other spokespersons and personnel.
- Organising and facilitating media coverage for the AGM and other College meetings and events.
- Developing and maintaining a communication process that embraces College staff/ projects, faculties and members.
- Provision of workshops in media skills for College spokespersons.
- The provision of monthly College news items for Forum.
- Facilitating meetings of the editorial board of Forum.
- Continuing to develop the use of the ezine publication, thereby enhancing direct communications with members. There has been no shortage of contributors and pieces for this. It has been introduced by project/committee chairs in rotation, and hopefully will help make the College more immediate to the member/reader. Recently, we included a survey in the ezine to collate information on patient needs. This is at an early stage but should be a fruitful exercise.

### ***Communications & public relations report***

Media queries range in subject from those around statutory and legislative changes, to queries on general healthcare matters (alcohol, obesity, smoking), queries in relation to prescription drugs such as drug safety (a recent example being NOACs), drug availability (Augmentin) and appropriate prescribing patterns (antibiotics). We also received regular queries in relation to the College’s operation, structure, events and training programmes from the dedicated medical media.

Media are frequently interested in topical stories such as recently on the social media alcohol phenomenon of neknomination. When a story breaks at short notice, as in the case of neknomination, we are often required to contact the relevant 'expert' within our staff at short notice for a comment. In this instance, Dr Ide Delargy responded and we were very grateful for her assistance.

Queries are received from all media outlets, print, radio, TV, online, social and occasionally via Twitter. We aim to respond to all media queries immediately where it is a broadcast outlet and in a timely manner if it is a weekly medical publication.

### **Media monitoring**

We utilise a media monitoring service (Zenark) and follow a range of topics from health related matters, such as alcohol, to legislative matters, such as universal healthcare, and can incorporate specialised searches for topics of interest to the programme directors.

The monitoring also includes published articles in which the ICGP is specifically mentioned, and, in the main, these are the articles which are retweeted using @icgpnews and placed on the website. We encourage all members to use Twitter which has overtaken all other forms of media distribution channels for breaking news stories. In the six months to March 2014, @ICGPnews generated over 59 tweets with retweets and mentions by many mainstream news media.

### **Communication with members**

In 2013, we issued the following statements and notifications to members:

EMAIL TITLE	SENT TO	DATE
Expressions of interest sought by the Medical Council – Panel for review boards	All members & associates in ROI	04/01/2013
ICGP Network of Establishing GPs spring meetings	NEGs	21/02/2013
Medical Council Election 2013 ballot announcement	Members	26/02/2013
ICGP Network of Establishing GPs – Sligo meeting tonight	NEGs	06/03/2013
Care of the Elderly in Long Term Residential Homes	Members & Associates	07/03/2013
Medical Council Election 2013 ballot announcement	ROI members	12/03/2013
Faculty meeting for Cavan/Monaghan	Cavan/Monaghan Faculty members	13/03/2013
Cork City ICGP Faculty meeting update	Cork City faculty members	19/03/2013
Faculty survey	All members & associates in ROI	20/03/2013
Message from the President of the Medical Council	ROI members	21/03/2013
ICGP AGM 2013 motions	Cork City faculty members	22/03/2013
IMO EGM	Council members	22/03/2013
Reminder of the upcoming NEGs meetings	NEGs	25/03/2013
Care of the elderly in long term residential care	All members & associates in ROI	03/04/2013
EAPH – 11 & 12 April 2013, Dublin	All members & associates in ROI	04/04/2013
ICGP AGM 2013	All members & associates in ROI	09/04/2013
Advanced Certificate in LARC	Trainees	09/04/2013
ICGP faculty survey – reminder	All members & associates in ROI	09/04/2013
Primary Care Surgical Association – Annual Scientific Meeting 19/20 April 2013	NEGs	10/04/2013
April 2013 meeting updated	North Dublin faculty members	12/04/2013
Correspondence to members re. Integrated Diabetes Programme	All members & associates in ROI	17/04/2013

Care of the elderly in long term residential homes – Saturday 27 April, Dublin	All members & associates in ROI	19/04/2013
AGM Sun 12 May 2013 business session agenda	All members & associates in ROI	19/04/2013
Correspondence to members re. Clinical Care Programmes	All members & associates in ROI	23/04/2013
Invasive group A strep alert	All members & associates in ROI	23/04/2013
Update Information Sunsetters sessions at ICGP AGM Fri 10 & Sat 11 May	Retired group	24/04/2013
Important communication relating to the new leadership positions for the Clinical Care Programmes (a joint appointment between the Forum of Irish Postgraduate Medical Training Bodies and the HSE)	All members & associates in ROI	29/04/2013
AGM business session – Sunday 12 May	All members & associates in ROI	02/05/2013
Reminder: Sunsetters sessions at ICGP AGM, Fri 10 & Sat 11 May	Retired group	08/05/2013
Notice from Mr Kieran Ryan, ICGP CEO	All members & associates in ROI	13/05/2013
World Hypertension Day 17 May	All members & associates in ROI	15/05/2013
UCD survey	All members & associates in ROI	17/05/2013
Summer School registration now open	Members, associates and trainees	17/05/2013
ICGP Submission to the Oireachtas Joint Committee on Health and Children on the General Scheme of the Protection of Life During Pregnancy Bill 2013	All members & associates in ROI	17/05/2013
Arthritis Ireland	All members & associates in ROI	20/05/2013
Alf Nicholson Meeting – Paediatric Algorithms	Dun Laoghaire faculty members	21/05/2013
eLearning Information Skills module	Course participants	24/05/2013
Summer School meeting	Members, associates and trainees and overseas	27/05/2013
National Cancer Control Programme	All members & associates in ROI	28/05/2013
eLearning Information Skills module – reminder	Course participants	05/06/2013
Expressions of interest for National Primary Care Lead, HSE	All members & associates in ROI	13/06/2013
Registration open for Women's Health Study day on Thursday 20 June at the Lyrath Estate, Kilkenny	All members & associates in ROI	13/06/2013
Summer School reminder	Members, associates and trainees	17/06/2013
NCCP	ROI members, associates and trainees	19/06/2013
Statement to ICGP members on the HSE Clinical Care Programme for Integrated Diabetes Care	ROI members, associates and trainees	28/06/2013
ICGP withdrawal from Clinical Care Programmes	Council members	17/07/2013
ICGP withdrawal From Clinical Care Programmes	All members & associates in ROI	17/07/2013
Primary care elective in Dublin	GP trainers	26/07/2013
ICGP decision to withdraw from participation in HSE Clinical Care Programmes	All members & associates in ROI	26/07/2013
Feedback sought on draft Misuse of Drugs (Amendment) Regulations 2013	All members & associates in ROI	13/08/2013
ICGP courses 2013–14 – register now	ROI members and 4th year trainees	15/08/2013
Notice to Council	Council members	16/08/2013
RCGP Conference opportunity for NEG's members – urgent: closing 1pm on Monday 26 August	NEG's	22/08/2013
Consultation re. amendments to the Misuse of Drugs Regulations	All members & associates in ROI	27/08/2013
Announcement of EGM to amend ICGP governance	ROI Members	20/09/2013
ICGP memorial service 2013	Members, associates, trainees and overseas	03/10/2013

Pre-Budget submission by ICGP	All members & associates in ROI	10/10/2013
Co-Amoxiclav shortage – guidance for GPs	All members & associates in ROI	18/10/2013
National Ambulance Service east migration – GP notice	Dublin, Wicklow and Kildare faculty members	21/10/2013
Retiring GPs advert and job description	Aged 50 plus members	23/10/2013
Distribution of IMB Approved Dear Healthcare Professional Communication	All members & associates in ROI	30/10/2013
Winter Meeting 2013	Members, associates and trainees	14/11/2013
ICGP Winter Meeting – Saturday 23 November, Sheraton Hotel, Athlone	All members & associates in ROI	18/11/2013
European Antibiotic Awareness Day	Members, associates and trainees	21/11/2013
Alcohol survey	All members & associates in ROI	03/12/2013
Notice of IMB advisory statement to all GPs	All members & associates in ROI	06/12/2013
Information for GPs from the Samaritans	All members & associates in ROI	09/12/2013
Meningitis alert re. increase in meningococcal disease in members of the Irish travelling community	All members & associates in ROI	13/12/2013
GPIT webinars 2014	All members & associates in ROI	18/12/2013
December ezine	Members, associates and trainees	20/12/2013

## Other communication activities

### Forum

Submissions from ICGP staff, members and committees continue to be collated on a monthly basis for the news section of Forum magazine, the College's journal.

### Ezine

The College issued the first edition of the ezine to members in 2012 and continues to publish it to members on a quarterly basis.

EZINE	OPENING RATE
March 2013	41%
May 2013	40%
September 2013	39%
December 2013	39%

## Future plans

Plans for 2014 include the evolving development of proactive communications strategies to increase and improve the profile of the ICGP and general practice generally amongst the public. We will be working closely with the ICGP Board to communicate the ICGP Vision for General practice. This activity will also involve greater use of social media and continued efforts to encourage more media engagement by members, particularly in relation to local radio and press.

## Library and Information Service Report

**Author: Patricia Patton, Acting Librarian**

### Introduction

The ICGP library continues to play a central role in the College offering teaching, learning and research support to our staff and members as well as assisting general practitioners with their continuing professional development. This annual report covers the period January to December 2013. The Library is staffed by two professional librarians, Trish Patton (Assistant Librarian/Information Officer) and Gillian Doran (Librarian). Gillian Doran is currently on maternity leave and in her absence Trish Patton is acting librarian.

The library continues to deliver a high-quality and value-added service to a growing user base. We also did much more than simply maintain services, as throughout the reporting period, the library continued to demonstrate the innovation and creativity for which it is known.

### Project activities

The ICGP library provides:

- Support for all ICGP members and users of the Library and Information Service by providing:
  - answers to information queries
  - access to general practice-related professional journals
  - articles held by other libraries via our inter-library loan service
  - a customised literature search service
  - individualised training sessions based on user needs
- Creation of an online repository of documents related to general practice via our online library catalogue so that all users can locate documents quickly and easily.
- Liaison with various College groups (administrators, project directors, committees, etc.) and management of each group's information needs.
- Project management of library developments and liaison with our key suppliers.
- Keeping up-to-date with developments in our area and advising the College of same.

### Current status

This year saw increased usage and a number of new services and developments at the ICGP Library and Information Service.

### Supporting members' needs

During the reporting period, the library continued to play a major role in supporting the learning and teaching needs of ICGP members.

### Answering queries

During 2013, our information service dealt with on average 100 queries per month with the majority of the queries received from GPs (65%), followed by ICGP Staff (20%) and 15% from external sources such as other libraries, government agencies, commercial organisations, members of the public, researchers, etc. The majority of queries are received by e-mail but online queries are becoming a popular way to contact us.

**Table 1 – types of queries**

TYPES OF QUERIES	PERCENT
Document Supply	60%
General Query Service	21%
Literature Searches	18%
Training	1%
TOTAL	100%

The most popular type of query continues to be document supply, the ordering/ supplying of materials, i.e. articles/reports/books at the request of our users. This includes supplying articles and documents from our own collection, requests for articles from the Clinical Review Service in MedMedia as well as requests for our inter-library loan service. The general query service involves answering requests for information including questions regarding general practice statistics, copyright issues and referencing queries, etc. Literature searches involve a more in-depth searching and supplying of articles/citations on specific topics. Some examples of literature searches carried out in 2013 include the health benefits of pet ownership, how to break bad news and information on GP stress and burnout. We also suggest additional resources based on the topics for the monthly Distance Learning modules in Forum. We continue to offer training in group presentations and individual one-to-one sessions by appointment tailored to the needs of the group/individual.

### ***Development of the ICGP library catalogue***

***[www.icgp.ie/library](http://www.icgp.ie/library)***

We have been working on upgrading the ICGP library catalogue in conjunction with our web company, Ionic, with the aim of making it easier to access, search and use. The new-look ICGP library catalogue was launched on Monday 24 June 2013 with a range of improvements to the search and catalogue, and new features added [see Table 2 for details].

**Table 2 – New features of the ICGP library catalogue**

- Keep up-to-date with our handy library news
- Use the 'Ask a Librarian' button throughout if you need assistance
- Better search results making it easier to find the information you need
- Auto-prompt feature when searching to guide users
- User-friendly filter and sort options allowing you to further restrict your search
- Updated screen displays making it easier to find documents
- More options available for browsing the catalogue
- Easier to request items and also the option to make general requests via the library catalogue
- Access to 'My Library' – allows you to see your saved searches, requests and bookmarks in one place

The new catalogue houses all ICGP publications, presentations, podcasts, and Forum articles (since 2000). There are currently 1,621 items in the catalogue with new material

being added on a daily basis. A total of 159 items were added to the catalogue in 2013. The online library had 19,868 unique page views in the six-month period of July – December 2013.

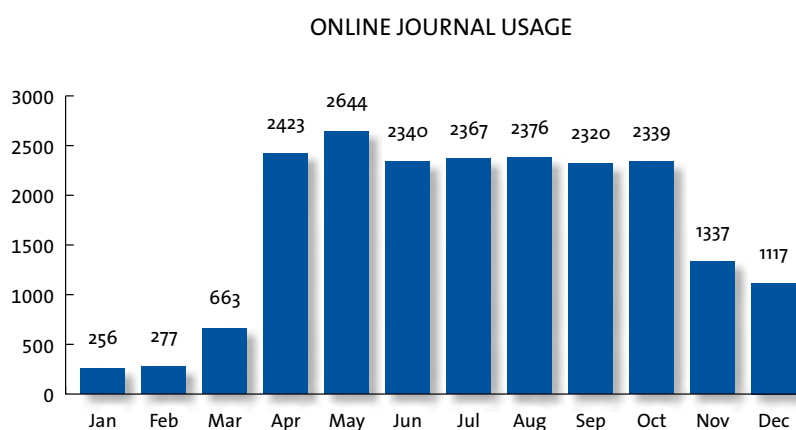
**Table 3 – Top 10 items from the ICGP library catalogue in 2013 (\*Data from July – December 2013)**

1. MICGP Examination Handbook 2014
2. Cardiovascular Disease Prevention in General Practice: Quick Reference Guide
3. Child and Adolescent Mental Health: Diagnosis & Management: Quick Reference Guide
4. A Career in General Practice
5. Asthma Control in General Practice: Quick Reference Guide
6. Hereditary Haemochromatosis: Quick Reference Guide
7. Signposts to Success: a handbook for the establishing general practitioner
8. Crisis Pregnancy: Quick Reference Guide
9. National Directory of Palliative Care Contacts
10. HSE/ICGP Weight Management Treatment Algorithm for Adults

#### **Access to online ICGP journals** **[www.icgp.ie/journals](http://www.icgp.ie/journals)**

Online access to the ICGP journal collection via the EBSCO A–Z Journal portal was launched at the end of 2012 providing ICGP members with the benefit of access to quality information 24/7 from their surgery or home. The total number of sessions for 2013 was 20,459 and Table 4 shows the usage breakdown per month. Usage has grown due to the marketing and promotion of the online journals through a number of methods including Forum, workshops and conferences. We also supply articles of interest to GP training (started March 2013) and highlight Irish research articles (started May 2013) on a monthly basis. These statistics will continue to be monitored to ensure that the online journals are providing value for money.

**Table 4 – Online journal usage (no. of sessions per month)**



The BMJ is the most frequently used journal followed by the British Journal of General Practice and the Drugs and Therapeutics Bulletin. In 2013, we implemented a process

whereby new journals can be submitted for consideration by the Education Governance Committee. We start looking at renewals during the summer for the year ahead and all suggestions are considered.

**Table 5 – Top 10 journals in 2013 (by usage)**

1. BMJ
2. British Journal of General Practice
3. Drugs and Therapeutics Bulletin
4. American Family Physician
5. Australian Family Physician
6. Practitioner
7. Medical Education
8. Irish Journal of Medical Science
9. Education for Primary Care
10. Family Practice

### **Access to online Information Skills Module**

**<http://www.icgp-education.ie/information skills/>**

This module, one of a number of online education modules provided free of charge to members, was first launched in 2012. It was developed to help members with their information literacy skills at their own convenience. We have updated the module and added a completely new lesson focusing on evidence-based medicine. The new version went live in March 2014. A total of 245 users have completed the module since its launch in 2012.

### **Feedback from ICGP members**

We value feedback, both positive and negative, from users of our service and try to use this feedback to implement changes where necessary.

Here are some testimonials received this year:

*“Since starting the course, I have accessed the ICGP website a lot more. I have learnt how to use the resources on the website and how to access the library. It is a fantastic resource for us to have.”* (Participant on the Diploma Course Management in Practice Reflective Portfolio.)

*“They are very helpful in the library and if there are other articles that you are looking for that are relevant to general practice, if you email the library, they can often source these articles for you.”* (GPIT webinar 2014, no. 4. Getting the Most Out of the ICGP Website, Dr Brian Blake.)

*“I just am emailing to thank you for the most wonderful review of CME. Your papers were really so relevant and have added a huge amount to this search. Many thanks for your work. All the tutors (myself included) thought your presentation to the tutors was outstanding too. Many thanks for all your work.”* (Stephanie Dowling, CME Tutor.)



### ***Support for ICGP Staff***

During 2013, the Library continued to play a key role in supporting the learning, teaching and research needs of ICGP staff and has contributed to all areas of the College.

### ***Management and corporate services***

The Library provides support to the management team through keeping them up-to-date on key articles/issues of interest as well as providing literature searches on request. During 2013, we assisted with providing information for key submissions to the government, e.g. General Practice Manpower Planning, as well as providing information for press releases, e.g. Universal Health Care and Disability Parking Permits and policy documents, e.g. Protection of Life in Pregnancy Act.

### ***Education***

The Library, as active partners in the education process, collaborates with members of the Education department. We continue to present information literacy sessions to students at Education Workshops on the request of Course Directors. Gillian presented at the eLearning Workshops in the IMI on 1 February and Trish presented to the Women's Health and LFOM courses at the IMI on 27 September 2013. Trish also held an information session for the SCALES course participants in December. We order and supply materials for inclusion in the course pack. We organise the annual licence from the Irish Copyright Licensing Agency. We also provide ongoing support to all course participants.

### ***CME tutors***

As well as hosting their bids and in some cases uploading their bids on the discussion board and in the library catalogue, we also provide training at their workshops on request. Gillian presented at their Workshop on 14 September.

### ***GP training***

We provide articles and literature searches to both GP trainers to assist with their teaching and GP trainees to assist with their training and research projects. We also provide training sessions on request. Gillian presented to GP trainees in February 2013. Trish presented to the both GP trainees on the TCD/HSE Specialist Training Scheme in April and to GP trainers at the New Trainers Workshop in May. We also worked with Gerry Mansfield (Director of GP Training) to supply articles of interest for the GP Training Educational Resources section of the website.

### ***Project directors***

The library undertakes literature searches, and supplies articles and assistance with referencing for presentations, guidelines, etc. at the request of project directors, including Women's Health, Mental Health, Substance Misuse, NEGS, Retired GPs, GPIT, etc. We also provide a current awareness service on topics of interest. Some examples of this from 2013 include:

- Trish provided resources on the topic of doctors' health for Andrée Rochfort (Director of Doctor's Health) in preparation for a conference in Brisbane.
- Trish provided articles on the topic of burnout for Ide Delargy (Director of Substance Misuse) in preparation for an IMO conference in April and the EAPH conference in May.

### **ICGP publications**

We also provide assistance in the production of quality ICGP publications in terms of the literature searching, referencing, formatting and publishing. We also advise in the area of copyright and grading the levels of evidence.

During 2013, the QIP Committee had a busy year with many quick reference guides being updated and some new publications. Gillian provided assistance on the following publications: Antipyretic Prescribing; Asthma Control in General Practice; Cardiovascular Disease; Child & Adolescent Mental Health; Crisis Pregnancy; Haemochromatosis; Lesbian, Gay & Bisexual Patients; and Repeat Prescribing.

Gillian also assisted in the compilation of the report on Access to Diagnostics which was launched at the ICGP AGM in May 2013.

### **Research**

The ICGP library also partners with our research department, providing assistance with literature searches, document supply and assistance with referencing for research articles.

### **Systematic review (*Patient Empowerment in Chronic Conditions – Wonca Europe PECC-WE*)**

We have played a key role in this international project in collaboration with Andrée Rochfort (Director of Doctors' Health), Claire Collins (Director of Research) and Sinead Beirne (GP/Researcher) with support from Prof. Susan Smith of the RCSI. We undertook a second literature search during 2013 to ensure the review is up-to-date. This project is due to be completed by the 20<sup>th</sup> Anniversary of Wonca Europe in 2015.

### **Surveys and evaluations**

The library has always provided assistance with the creation of online surveys and evaluation on SurveyMonkey. Both Gillian and Trish assisted with the many course and event evaluations throughout 2013 such as Summer School, GP trainers/trainee conferences, etc. Gillian provided support for the ICGP Faculty Survey on behalf of the ICGP Membership Committee and the Delphi Assessment Survey on behalf of the GP Training Department.

### **General College support**

Trish provided support at the MICGP in March 2013. Throughout 2013, Gillian provided administrative support for both the Project Development Group and the Retired GPs (Sunsetters). Gillian also provided administrative support for the Forum Editorial Board.

### **Networking and external representation**

This level of performance is founded on the high quality of library staff who engaged in numerous professional activities and continuous professional development during the year.

Gillian represents the ICGP on the HSLG (Health Sciences Libraries Group) Statistics Committee and attended a meeting in October 2013.

Trish represents the ICGP on LENUS (the Irish health repository) and hosted a LENUS User Group meeting in the ICGP in October 2013. Trish attended one-day of the HSLG conference on 11 April based around the theme of 'Visible Evidence'. Trish also attended the HSE Open Access Seminar 'Getting the information you need; the role of open access in health and wellbeing' on 22 October 2013.

### *Future plans*

As well as continuing to maintain our current services, we seek to continually improve the library with regard to the user experience, information literacy, and research.

- **User experience:** We will seek to improve the library experience for our members on a continual basis and respond to their changing needs.
- **Information literacy:** We will explore new methods towards developing the information literacy of our users to support the pursuit of clinical excellence.
- **Research:** We will support general practice research through maximising access to information resources and facilitating the dissemination of research output from the College.

We hope to develop lesson plans to help various College groups engage with the online Information Skills module that will be introduced in 2014.



## Research Programme Report

**Author: Dr Claire Collins, Director of Research**

### *Other members of programme*

- Professor Tom Fahey, ICGP Research Committee Chair
- Ms Sally Anne O'Neill, Administrator

### *Summary of programme*

The main aim of the ICGP Research Programme is to develop and support research and audits in general practice in a structured format. The ICGP Research Committee supports the programme through the provision of advice and direction. We aim to contribute to the knowledge base of general practice and to support evidence-based practice.

### *Background to the programme*

The ICGP's 'Strategic Plan 2008–2013' highlights the importance of research to its mandate. Of particular relevance to the national action plan for health research is the strategic action to "contribute to the evidence base that underpins quality general practice" specified in the 'Strategic Plan 2008–2013' (under the goal of 'a healthier community through high quality general practice' in the area of 'quality general practice').

### *Programme activities during the past 12 months*

The following projects have been completed this year:

- Flu vaccination effectiveness study 2012/13 with HPSC.
- Audit of Community Acquired Pneumonia in Irish General Practice.
- Survey of CME attenders to establish if CME small group learning impacts on patient care (in collaboration with Drs Henry Finnegan and Stephanie Dowling).
- Survey of ICGP professional competence scheme members to establish the motivation to undertake external CPD (in collaboration with Dr Doreen Myers).
- Collaboration on the evaluation of the Farranfore Telemedicine Project.
- ICGP faculty survey.
- Survey of GP access to diagnostic tests.
- Survey of STI services in Irish general practice.
- Development of online e-learning module and associated resources material for trainees on chronic care patient self-management.
- Survey on GP use of open access material.
- Part 1 pre-guidelines survey of GPs' insights on medical fitness to drive.
- Evaluation of online support for GP trainees regarding chronic care patient self-management.

Other activities undertaken:

- Travel bursaries – eight provided in 2013 (total €4,000).
- Research and education grants to the value of €64,983.18 approved in 2013.
- In support of audit:

- The following sample audits have been added to the website – Asthma, Diabetes, Heart Failure, STI, COPD and UTI.
- A document entitled “Examples of how to adapt and audit for different GP working circumstances” has also been added.
- An additional e-learning lesson on key areas of concern to GPs has been recorded and will be added to all e-learning modules also.
- Six grant applications submitted in 2013; 5 successful.
- Oversight of the Heartwatch programme.
- Seven workshops were held on audit/research.
- Other ICGP programmes and directors were supported via advice and collaboration (Women’s Health, Substance Misuse, Mental Health, Health in Practice, GP Training and Education, Quality in Practice Officer).
- Fast-track ethical review process of trainee projects.
- Participation in the full review activities of the Research Ethics Committee in addition to additional pre-submission advice to applicants.
- Oversight and administration of the Research and Education Foundation grant scheme.
- Coordination of GP applications for external HSE grants.
- The fourth ICGP Research and Audit Conference, sponsored by MEDISEC, was held in June 2013 at the Lyrath Hotel, Kilkenny. As part of this, three research and audit related workshops were held for delegates.
- Creation of new audit examples for the Professional Competence Scheme and chairing of the Professional Competence Scheme audit sub-committee.
- Participation at the trainee and trainer conferences.
- Submission of articles for publication.
- Presentation of research findings at conferences.
- Responding to (n=120) queries related to research, ethics, grants and audit.
- Review of articles for BMC Family Practice and BMC Health Service Research Journals.
- Reviewed submissions for the QIP awards.

### **Publications**

- McSharry P, Finegan P, Collins C. Educational Needs Assessment on Suicide and Deliberate Self Harm to Shape a Course in Primary Care. *European Journal of General Practice*, 2013; 19.
- O’Riordan M, Collins C. Primary Care Teams in Ireland from the Perspective of General Practice. Chapter in *Integrated Care in Ireland in an International Context: Challenges for Policy, Institutions and Service User Needs*, edited by Tom O’Connor. Cork: Oak Tree Press, July 2013. [Book Chapter]
- O’Brien J, Ni Riain A, Collins C, Long V, O’Neill D. Elder Abuse and Neglect: A survey of Irish general practitioners. *Journal of Elder Abuse and Neglect*, 25(5); August 2013 doi: 10.1080/08946566.2013.827955.
- McSharry P, Finegan P, Collins C. Primary Care Educational Needs Assessment on Suicide and Deliberate Self Harm. *NIHS Bulletin* 6(4) February 2013.
- Kennedy C, O’Brien C, Collins C. Experience of diagnostic coding in Irish general practice – the practice perspective. Accepted by *JMED*, November 2013.
- Collins C, Finn Caitriona, Meade B, O’Cuirneagain F. Strengthening the foundation of general practice evidence in Ireland by addressing the data quality issues in a structured secondary prevention programme for cardiovascular disease. Accepted by *JMED*, December 2013.

### ***Representations***

During the past year, Dr Claire Collins represented the ICGP on the following:

- National group regarding the creation of a common ethics form for non-clinical trials and the IT sub-committee, who are investigating and advancing an electronic online process for such ethics applications.
- National representative to the European General Practice Research Network and member of its Research Strategy Committee and is the EJGP English language editor for the EGPRN abstracts.
- ICGP rep for National Disability Authority on guideline development.
- ICGP rep on HSE/HRB Steering Group on research on quality and patient safety.
- ICGP rep for HSE/HRB/RCPI steering group on research collaboration on quality and patient safety.

### ***Programme milestones and outputs***

- Publications
- Four international presentations
- ICGP Research and Audit Conference
- Support of members in terms of professional competence audit requirements
- Research grants obtained
- Support of training schemes and trainees in terms of ethical guidance and review.
- International collaboration leading to involvement in EU projects
- Development of the IPCRN
- Twelve projects completed

### ***Future plans***

The action plan for 2014 focuses on collaboration with academic colleagues in relation to the development of networks, further development of the IPCRN and research and development work with other ICGP directors and programme leads.

The 2014 conference will take place on Saturday 28 June at the Lyrath Hotel, Kilkenny. Professor Michael Kidd, President of WONCA World has agreed to deliver the key note speech. The programme has been finalised and is available on [www.icgp.ie](http://www.icgp.ie).

Eighteen projects are in planning or underway.

New/updated sample audits are to be added. Currently planned are: writing a clinical care guideline, mentoring, cardiovascular disease, haemochromatosis, repeat prescribing.

A sample audit will be created for all new e-learning modules.

### ***Administrative assistance***

A sincere thank you to Sally Anne O'Neill who provides administrative assistance to the Research Programme.

### ***Funding source(s)***

ICGP, HSE, Pharma, WONCA, EU Commission via NIVEL

## Research Ethics Committee Report

**Authors:** *Prof Colin P Bradley, Chair, & Dr Claire Collins*

### **Committee members**

Dr Cliona McGovern, Dr Teresa Maguire, Mrs Anne O’Cuinneagain, Dr Walter Cullen, Dr Cormac O’Dubhghaill, Dr Kieran Doran, Dr Claire Collins, Dr Philippa Kildea Shine and Ms Gina Menzies

### **Summary of the committee’s roles and activities**

The committee’s main function is to consider research proposals and to determine whether there are ethical issues to be addressed before the study can proceed. The committee was initially established to provide ethical advice and approval for studies in general practice as a benefit to College members. The committee also has a remit to offer general advice on ethical aspects of research and to develop College policy in this area. We now have a major engagement with GP training programmes in providing research ethics training to trainees and screening trainee projects to review locally those with low ethical risk. We are approved under the Clinical Trials Act to approve therapeutic clinical trials but we have not received any applications of this nature in recent years.

### **Activities during 2013**

We had five meetings in 2013 during which 45 applications were considered. In addition, we processed 17 trainee applications using the process introduced last year in which applications were reviewed by two members prior to a decision to either approve the project, approve subject to amendments (the most common outcome) or refer to the full committee. We had no clinical trials to process (within the terms of the Clinical Trials Act).

### **Future plans**

The committee plans to continue to offer our ethical review and approval process for members, trainees and others undertaking research in general practice in Ireland.

### **Administrative resource**

Ms Sally Anne O’Neill



## Post Graduate Training Committee Report

**Author: Dr Karena Hanley, PGTC Chair**

### Introduction

A core activity of the Irish College of General Practitioners is the supervision of general practice training. It is a stated plan of the HSE that the College will also be responsible for the provision of training in the future but progress towards this aim remains slow. The College was formally accredited by the Medical Council as the responsible body for GP training in 2013 and this assessment will be repeated in 2018. Within the College, it is the Post Graduate Training Committee (PGTC) which coordinates all the activities of training. The PGTC is helped by its subcommittees and by the General Practice Training Unit – three dedicated administration staff headed by the national director of training, Dr Gerry Mansfield. The subcommittees comprise of the Examination Subcommittee, the accreditation team which inspect the standards on the training schemes and the Certification Subcommittee, which assesses the claims of doctors who state they have equivalence of GP training to satisfy EU criteria. Two more newly formed subcommittees have come under the wing of the PGTC: the Alternative Routes Subcommittee and the National Committee for the Coordination of Training, which will be described in this report.

### Membership of the PGTC

- Dr Karena Hanley (Chair)
- Dr Richard Brennan (Chair, Alternative Routes Committee)
- Dr Marie Carmody Morris (ICGP Council member)
- Dr Tony Cox (Chairman, MICGP Examination Subcommittee)
- Dr Rita Doyle (Chair, National Committee for Co-Ordination of Training)
- Mr Dermot Folan (Chief Operating Officer, ICGP)
- Dr Rukshan Goonewardena (NATGP representative)
- Dr Michael Griffin (Accreditation Subcommittee)
- Dr Velma Harkins (NATIGP representative)
- Dr David Hurley (ICGP Council member)
- Dr Zac Johnston (NATGP representative)
- Dr Gerard Mansfield (National Director Specialist Training)
- Dr Declan Matthews (Accreditation Subcommittee)
- Dr Donal McCafferty (ICGP Council member)
- Dr Genny McGuire (Chair, NAPD)
- Dr Eva McLarnon (NATGP representative)
- Dr Hugh Ó Faolaín (NATGP representative)
- Prof Fergus O’Kelly (ICGP Council member)
- Dr Margaret O’Riordan (Medical Director, ICGP)
- Dr Brendan O’Shea (ICGP Council member/EURACT)
- Dr Molly Owen (MICGP Examination Subcommittee)
- Dr Kevin Quinn (Director, Alternative Route)
- Mr Kieran Ryan (Chief Executive Officer, ICGP)
- Dr Eamonn Shanahan (Chair, Certification Subcommittee)



## Activities

The Medical Council report was positive about the standards achieved in Irish general practice training and about the supportive ethos and quality of training doctor which they found. Twelve priority recommendations and 10 other recommendations were made to the College. These recommendations do implicate pieces or work for the College and these have been delegated among the appropriate subcommittees of the PGTC. The College is tasked to engage annually with the Medical Council to report on progress on these recommendations with a planned revisit in 2018.

The PGTC is operating in a time of rapid change and increased responsiveness is being requested of the training schemes and the trainers. To this end, a new subcommittee was approved by the PGTC at the September meeting. The National Committee for the Co-ordination of Training (NCCT) is a necessary forum for the trainees, the trainers, the programme directors and the College to examine the implications of HSE directives, resource cuts and training development initiatives on the practical delivery of training. Chaired by Dr Rita Doyle, this is proving to be a useful meeting. Unity in the shared objective of maintaining quality and standards in training is vital in these times of threat to training and indeed threat to general practice.

The trojan work conducted in the individual training schemes is regularly highlighted by the Accreditors Subcommittee, of which Dr Declan Matthews is the very able chair. The PGTC continues to remind the METR of the strains within training as increased numbers of doctors are being trained on fewer resources than formerly.

The work of the Examination Committee illustrates dedication to the College by its members. Dr Tony Cox has again overseen an examination which is demonstrably fair and valid. Not content to sit on its laurels, the Examination Committee continues to develop the ICGP examination using evidenced based assessments. Change in the modules over the next couple of years will make the examination more efficient and will satisfy the Medical Council recommendations to place a similarly high emphasis on clinical skills as on other competencies.

The Certification Committee continues to assess applicants for either election to membership, or entry onto the specialist register, as appropriate. A total of 135 were elected to membership of the College in 2013. Mr Dermot Folan has been an expert support, and has been central to this process for a number of years.

The Alternative Routes Committee was very active as the window for the first applications in 2013 was from late April to late July. This is an assessment of doctors who were historically working in general practice and is not an alternative choice to formal GP training. Eight assessors were recruited and trained for the assessment of the 65 eligible applicants. The assessment process is three fold: a written exam, an oral exam and a comprehensive practice portfolio.

There has been little activity evident on progress of a transfer of the provision of training from the HSE to the ICGP. A project director has been appointed in the HSE. Mr Seamus Beirne, and the College await developments.

The College's GP Training Unit has had a very busy year, the biggest challenge being recruitment development. External factors placed pressure on the College to standardise elements of recruitment, yet it is the wish of the schemes and of the College to retain as much control as possible over the appointment of trainees within the regions. Dr Gerry Mansfield, National Director of Training, has worked hard throughout the year dealing with this and many other challenges.

The ICGP representative to the Forum of Postgraduate Bodies is the College CEO, Mr Kieran Ryan. This body is becoming increasingly important as the government uses this forum to direct policy on postgraduate medical training in Ireland. It is in the interest of Irish general practice to maximise the influence of the ICGP on this forum and the College is fortunate to have a person with the abilities of Mr Ryan to further this work.

### **Achievements/outcomes**

- Approval by the Medical Council of the Programme of Specialist Training overseen by the Irish College of General Practitioners under the terms of Section 89 (3) (a) (i) of the Medical Practitioners Act 2007.
- Graduation of 127 GP trainees to membership of the College in 2013.
- Completion and first testing of the Trainee Grievance Document.
- Ratification of the Trainer Grievance Document.
- Establishment of the National Committee for the Coordination of Training (NCCT).
- Establishment and first processing of the alternative routes to College membership.
- Development of the recruitment process with national standardisation of the first assessment of candidates to establish those eligible for interview, and subsequent interview by the scheme of first preference for all eligible candidates.
- Reaccreditation of the Dublin North Inner City Scheme and the Dublin Mid Leinster Scheme.
- Development of the ICGP policy on trainee participation in sports medicine.
- Women's Health log book revised to incorporate the obstetrics and gynaecology hospital log book.
- Clarification of the Certificate in Contraception.
- Ongoing engagement with the HSE and METR to support GP training.
- Ongoing engagement with the Forum of Post Graduate Training Bodies.

### **The Future**

The standard of doctor exiting Irish GP training is excellent. This is demonstrated in the quality of argument, much of it coming from graduates of the ICGP training schemes, which has regrettably become necessary to defend the structure of Irish general practice. Each component of the College must continue to champion the dedication to good practice which is a driving concern of our members, resist impediments, and fight for recognition of the value of general practice. The PGTC will continue to play its part over the coming year.

On the basis of a year of work as curriculum development officer, Dr Niamh O'Carroll is currently delivering the proposals for curriculum development to the appropriate groups: the trainees, the trainers and the programme directors. It is envisaged that a new ICGP curriculum would not just influence training, but will also inform material for continuing medical education and for assessment of the training of doctors under equivalence processes. In tandem with curriculum development, work is undergoing on the assessment of training by the ICGP assessment fellow, Dr Darach O'Ciardha.

Exam development will continue with the replacement of the AKT by a 200 item core knowledge test (CKT) next year.

### **Acknowledgements**

The PGTC is probably the busiest committee of the College, and is well supported by all the members of the constituent subcommittees. All of the members of these

subcommittees make a valuable contribution, the sum total of which has resulted in impressive continuous development in education and standard protection such that general practice training remains one of the few medical specialities whose training scheme is oversubscribed. The success of Irish GP training is evident.

Weaving all the strands together and also making valuable contributions is the principle administrator supporting the PGTC, Ms Martina McDonnell. She also supports the GP Training Unit and is helped in this role by Ms Pauline Tierney and Ms Janet Stafford. The administrative support has been excellent and thanks is due for that.

The chairpersons of each of the subcommittees are thanked for the sterling work which they have contributed throughout the year. Much of this work is voluntary and College members are the beneficiaries of this selflessness. In these times of change and challenge, the College staff members, Mr Kieran Ryan, Mr Dermot Folan and Dr Gerry Mansfield, are all working to a much higher capacity than would normally be expected in their roles. The College is grateful for this manifest commitment. The future brings pressures and uncertainties, but the College continues to attract highly skilled people to oversee general practice training.



## Specialist Training in General Practice Report

**Author: Dr Gerry Mansfield, National Director of Specialist Training in General Practice**

### *Programme members*

- Dr Gerry Mansfield, National Director
- Ms Pauline Tierney
- Ms Martina McDonnell
- Ms Janet Stafford

### *Activities during the past 12 months*

#### **GP recruitment – January 2013**

The online application for GP recruitment 2013 closed on 11 January with 285 applications for 157 places across 14 schemes. The College held three information sessions on the application process in Dublin on the 5 January, Mitchelstown on the 8 and Ballinasloe on the 9 January. A nationally agreed shortlisting criteria was introduced and applied across all 14 training schemes.

#### **GP Trainee Grievance Document on educational issues**

GP Trainee Grievance Document became operational on the 1 January 2013.

#### **National Trainer Conference – February 2013**

The National Trainer Conference was held in Kilkenny on the 28 February – 1 March 2013 with 137 in attendance.

#### **Medical Council re-accreditation of the ICGP as a specialist body**

The ICGP was formally re-accredited as the specialist body for general practice in 2013. A comprehensive report was received in April following the visitation process in February 2013. The Medical Council has moved to the next step of the accreditation process and plans to undertake visits to training sites. A report was submitted to the Medical Council in October detailing the hospital and GP training practices in each of the 14 training schemes.

#### **New Trainers Workshop – May 2013**

A new trainers' workshop was held on the 22 May at the ICGP with 21 participants.

#### **Forum: Medical Careers Seminar – September 2013**

The national director and GP trainee, Dr Hugh O'Faolain gave a presentation at the Medical Careers Seminar organised by the Forum for Postgraduate Training Bodies on the 28 September 2013, at the Aviva Stadium with approximately 170 attending the presentation.

#### **National Trainees Conference – October 2013**

The National Trainee Conference was held in Kilkenny in October 2013. There was a record number of registrations which had to be closed off at 340 trainees. Feedback on the conference was very positive.

### ***Sport Medicine Standard***

The Sports Medicine Standard has now been adopted by the PGTC and circulated to all trainees, trainers and programme directors.

### ***Trainer Grievance Document***

This document was ratified by the PGTC in September 2013 and has been widely circulated to all trainers.

### ***Submission to Medical Manpower Workforce Planning***

A submission on Medical Manpower Workforce Planning was submitted to METR in November following a request to inform them of training body views on a number of areas impacting their specialties both now and over the medium to long term.

### ***Recruitment development 2014***

The ICGP submission for Medical Council accreditation highlighted proposed changes to the recruitment process. However, pressure from METR to implement national policy on medical recruitment was the key driving factor in the pace of change to the recruitment process for 2014. To enable the College to meet national policy requirements, a central co-ordinated approach to GP recruitment was needed. This is not centralised recruitment but a central co-ordination of recruitment.

Since the PGTC meeting in September, there have been significant changes achieved in the GP recruitment process. This has been a positive and collaborative process. A series of meetings have been held on recruitment development commencing with a workshop on 24 October 2013, attended by Prof. Fiona Patterson, Work Psychology Group, international recruitment consultants. This was quickly followed by meetings on 5 November 2013, 5 December, 17 December, and 15 January 2014, and recruitment lead teleconferences on 28 January and 26 February. Liaison is ongoing with Work Psychology Group and with Recruitment Consultant Michelle Canny, HSE.

### ***The key changes to the process for 2014***

- The ICGP verified (275) applications received in terms of their eligibility for the Trainee Specialist Division of Medical Council Register, language proficiency, documents and declarations.
- Applicants deemed eligible for interview were offered an interview by the scheme which they gave first preference to.
- A panel of 28 markers from each of the 14 schemes was established and marked applications using a national agreed marking schedule (revised from 2013).
- Applicants were required to achieve a minimum mark in three of the eight sections of the application to proceed to interview.
- Calibration and marking of applications were completed online.
- A panel of 14 recruitment leads from each scheme were appointed.
- Each scheme marked applicants on four nationally agreed competencies. Marks awarded for the four national competencies followed into second round or a clearing phase. Schemes had an option of using scheme specific criteria. The interview accounted for 80% of applicants' total marks. Marks awarded for the scheme specific criteria were removed from the second round process.
- Applicants total marks = 20% application Form & 80% Interview (based on 4 nationally agreed competencies).

- Applicants competed locally in the first round and nationally in the second round.
- Only Schemes with unfilled places were involved in the second round process.
- This is the first year in which all specialty body recruitment processes have been centrally co-ordinated. This is to reduce the number of late withdrawals from training schemes.
- A total to 275 applications were received for 157 places. A total of 270 of these applications were deemed eligible to be assessed.

### ***Future plans***

A workshop is planned to review the 2014 recruitment process and to further refine the process for 2015.

Work is continuing on the Curriculum & Assessment Projects. Presentations will be made to the NCCT in April 2014.



The Irish College General Practitioners (ICGP) is the professional body for general practice in Ireland. The College was founded in 1984 and is based in Lincoln Place, Dublin 2. The College's primary aim is to serve the patient and the general practitioner by encouraging and maintaining the highest standards of general medical practice. It is the representative organisation on education, training and standards in general practice.

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