

EURACT

MESSENGER



Euract Meeting Dublin, 7–8 September 2016



Leonardo 2 in Tartu, Estonia, 6-8 Oct 2016

The EURACT Leonardo Level 2 Teachers' Course in Tartu is history now – hopefully leaving good memories to both the participants and the lecturers as well.

We had participants from ten countries- the biggest representation from Greece (8 participants)- equal number with the local participants from Estonia! The additional countries participating in Tartu were Latvia, Malta, Finland, Romania, UK, Ukraine, Georgia and Norway.

Teachers of the course were our good and well-known friends: Egle and Roger Price and Igor Švab. Unfortunately, Justin Allen was not able to come and therefore the course faculty decided that I as an organizer of the course will take the task over and give the participants the choice to select also the “curriculum to program” module as it was always.

I am very thankful for Justin for the help and advice he gave me through e-mail and Skype conversations and for the materials he was willing to share allowing me to prepare well for the module.

I am happy to inform that the feedback for the course was good. No specific or serious problems

Course organisers (second to fifth from left): Roger Price, Ruth Kalda, Egle Price and Igor Švab together with some participants from Ukraine and Russia



were raised. The overall course feedback was almost all 5 in everything.

Positive comments were for both content and all teachers. The participants liked the small groups, the clarity of delivery, the variety of teaching styles and the variety of teaching methods. Specifically, they liked being active, such as role play, small groups, the use of video etc. There were several comments about taking the modules and the learning back to their home countries.

I as the organizer and teacher of the module, am very happy with the enthusiasm and activity of the participants, their clever questions and also with their interest to come to Tartu, which is actually located quite far from the central Europe and has no ideal flight connections. Thank you very much and I hope to welcome you back!

Ruth Kalda
local organiser of the Leonardo 2 Course in Tartu

Task Force on Educational Resources

SHORT SUMMARY OF THE OBJECTIVES: WHAT SHOULD THE TASK FORCE DEVELOP?

1. learning modules on topics specific to FM
 - non-clinical material
 - modules based on the Minimal Core Curriculum of EURACT
2. educational material on how to create E-Learning materials that should be interactive and allow group activity (forum, virtual classroom, lectures with audience response systems) in order to keep the benefits of sharing, such as in traditional small group teaching
3. a bank of links to existing online resources, including
 - relevant content materials
 - links to other medical education sites

WHAT HAS BEEN DONE?

1. Presentation by Nino on Topic 1. Continuity, comprehensiveness, coordination of care. Nino has developed (with the help of Francesco) a module based on blended learning including:
 - Individual E-learning - Case discussion with interactive Q&A system
 - Small group activities – including a movie as stimulus material for discussion

- A short traditional lecture – summarizing the principles.
2. Presentation by Natalia on Topic 2. Holistic approach. Bio-psycho-social model. Natalia has also developed a module of blended learning on this topic. In addition she presented a summary of the difficulties she encountered while developing it.
3. Presentation by Francesco about interactive learning between GP trainees in different interconnected teaching practices, with defined learning tasks such as E-searches, case discussion etc. Trainees communicate through Whatsapp and other applications. The process is supervised by tutors and includes an evaluation system.
4. Nynke had sent other examples of blended learning.

RESULTS FROM THE TASK FORCE DISCUSSION

1. E-learning ONLY is not appropriate to FM teaching/training. Blended learning including small group work is imperative in order to develop communication skills through discussion and clinical implementation, with supervision by a clinical tutor.
2. Developing blended learning modules is

time-consuming, requires team work, expertise in technology and financial/institutional support.

FUTURE OBJECTIVES AND TASKS

1. Further efforts to develop the above 2 modules to near final products, in order to learn more from the process (pros & cons, difficulties...), by Nino and Natalia with other members' help.
2. Learn more about blended learning, hybrid courses, flipped classrooms, interactive E-learning and technologies ... from existing implementations.
3. Connection with BME and CPD/CME committee concerning existing modules.
4. Develop a digest or checklist on how to develop blended learning.
5. Develop a bank of relevant content material and resources - some identified (re-Journal Club held in Dublin), and links to other medical education sites – some identified.
6. Help from all Council members' experience and knowledge is welcome.
7. Connection with Website Task group in the future.

Martine Granek-Catarivas

chair of the Task Force, representative of Israel

Website Task Group

DISCUSSION OF THE FOLLOWING PROJECTS:

1. Addition of online application form for prospective members to new EURACT website to allow people to register their interest in becoming EURACT members, pending provisional agreement by National Lead as being eligible to be formally ratified at EURACT Council meetings
2. Photos, we discussed addition of a photo column on the Council Members.
3. We discussed changing the

name of the Task group to the Website and Branding Task Group to encompass further image tasks such as a themed powerpoint and a standardized brand identity

ACTION POINTS:

- to pursue website changes with website administrator
- to initiate branding review
- to contact designer re updating logo

Darach O' Ciardha
chair of the Website Task Group, representative of Ireland

EURACT Appraisal Task Group

The group started by reviewing the workshop for the conference.

A discussion was then held about the project – currently there has been one successful submission and one currently at the assessment stage.

Translation materials are now available through application to Viola.

Reasons for the lack of uptake were discussed. The following issues were identified:

- Internal motivation
- Time required
- Other appraisal systems in universities

The conclusion was that leadership

needed to come from council members who need to commit to making a submission. In this way we will understand the portfolio and be able to promote it better.

Ways of supporting applicants were discussed – it may be helpful to have a mentor to check out what is required. Jo will explore the feasibility of this with Viola

Finally: Roar committed to submit an application by the Tel Aviv Council Meeting in March 2017.

Jo Buchanan
chair of the Appraisal Task Group, representative of the UK

Messages from the Committees

CPD/CME Committee

At the beginning, a short report was given about the WONCA Europe Conference in Copenhagen last June where we had two workshops: "Multimorbidity in family practice – educational needs" and "Teaching methods and learning needs of GPs in cultural competence". Both workshops had quite large audiences and interest.

For the Dublin educational conference, we proposed the workshop on "Empowering doctors and patients to use modern technology whilst still remaining patient centred". During the committee meeting we went through the content of the

workshop as well as agreed on the concrete tasks.

There was a discussion about the proposal for joint work with the Academy of Allergy and Clinical Immunology. We agreed that the area is not well covered and should be promoted by education. We will ask the Academy to specify their needs and we are ready to cooperate with them in providing education.

We agreed to submit to the Prague WONCA Conference in 2017 an abstract on behalf of the CPD/CME Committee not through the direct way but via the normal abstract submitting system. The topic will be similar to that in Dublin, because the interest is high.

New topics for workshops during future conferences and meetings were discussed:

- Patient safety. Subject: drug interaction. Suggestion for workshop for Krakow, e.g. "How to estimate a drug interaction risk in the GP office".
- Significant event analysis, to discuss at the next meeting.
- "To identify the barriers hindering students to becoming FD/GP" (proposed by Peter Vajer). It can be a common research project of CPD/CME Committee member countries. Peter will provide us with the questionnaires, which had been used in Hungary. We will do it with the collaboration of the Vasco de Gama Movement - liaison person Chloe.

Jachym Bednar
chair of the CPD/CME Committee, representative of the Czech Republic

‘Teaching without testing is like cooking without tasting’.

EURACT held its first educational conference in Dublin on 8-10 September 2016. The conference provided an opportunity for 220 family medicine educators from 30 different European countries to meet together and share teaching techniques and research projects.

Amanda Howe from the UK set the scene in the first keynote talk with a review of the future of family medicine and how best to prepare doctors for that. Mette Brekke from Norway provided us with a summary of what was needed to provide for sufficient exposure to high quality training in family medicine at the undergraduate level. Paul Grundy, the Chief Medical Officer of IBM gave an excellent address providing impressive recent evidence of the effectiveness of a health system based on primary care. Igor Svab from Slovenia gave the final keynote speech in the Janko Kersnik memorial lecture where he reviewed the development of Family Medicine in Eastern Europe and emphasized the importance of persistence, international cooperation and involvement in academia.

The feedback from the conference has been positive with 90% of the delegates who responded to the survey rating themselves as satisfied with the event. Many delegates commented that they particularly valued the opportunity to meet colleagues from across Europe and exchange ideas. The keynote talks were said to be thought provoking and the quality of the presentations was appreciated. The participants noted that the staff were very helpful, welcoming and well organised.

Several comments were made about the posters – suggesting more space would be helpful, that the timings of the poster presentations should be clearer and scheduled at times separate from



Euract council members after Dublin conference

refreshment breaks. One suggestion was made to replace the posters with one-slide 5-minute presentations. It was suggested by several delegates that work needed to be done on supporting contributors to improve the quality of their presentations, both the content e.g. less didactic and more interactive for workshops, and mode of delivery e.g. speaking more slowly.

The delegates were asked for ideas for inclusion in the next programme. The extensive response to this question demonstrated the enthusiasm amongst participants for another conference. The most commonly mentioned ideas included: assessment, both formative, summative and workplace based assessment; how to implement medical education research; how to strengthen professionalism and boost learner’s intrinsic motivations; and how to deliver undergraduate medical education. We will consider incorporating these into

our planning for the next conference which will be held in Leuven in Autumn 2018.

The overall feedback was summarized well by one delegate: ‘I would like to say a big thank you for a stimulating learning event which was also huge fun, inclusive and friendly.’

Jan Degryse, the chair of our scientific committee closed the conference with a challenge to continue to critically review our teaching; he said: ‘Teaching without testing is like cooking without tasting’.

The EURACT Executive board and council would like to thank the ICGP for hosting this event and in particular the important part that Orla Sherlock, Darach O’ Ciardha and Jan Degryse played in ensuring its success.

Jo Buchanan,

President of EURACT, representative of the UK

Member Services Committee

TOPICS DISCUSSED DURING MEETING:

1. Chair absence
 - Bruce Brinkley will act as permanent co-chair
2. Level 3 course 2017
 - Deadline for application is end of March 2017, sponsored participants must be identified as soon as possible. If under eight sponsored participants, the course will be cancelled, but all efforts will be made to run this course.
 - Dimitrios will send next week an urgent reminder and application leaflet to all Council members.
 - Contract to be signed between EURACT and the two organizers: Renzo will approach Mario.
3. Level 1 May 2017
 - organization is ready.
 - enrolment of participants will be easier compared to Leonardo 3.
 - for the 12 sponsored participations: deadline end October 2016.

4. Guide for EURACT Courses organization and advertising
 - Givi’s draft is a good start, Dimitrios will deliver an updated version to be discussed in Tel Aviv. Advertising should be an included topic: use the list of WONCA Europe’s academies?
5. Future of Level 1 courses
 - in most countries, it is locally organized. What countries are missing?
6. OiCs (Organisations in Collaboration):
 - Six or seven OICs are registered and more are awaited towards the end of the year. New members must all be approved by Council. If a member wants affiliation to an Oic, he must have formal approval of the Oic.
 - Membership application procedure and applications to be published on the EURACT website
 - Membership certificate - is it useful?

Bruce Brinkley

*co-chair of the Committee
representative of Switzerland*

BME Committee

Part of the Committee’s Members used some minutes to talk about the ongoing research on family medicine “Activities to enforce General Practice / Family Medicine around Europe” so as to find the way forward, to finalise drafts and to get it published.

The Committee discussed on how to finalize preparations and how to manage the workshop “Minimal core curriculum for Family Medicine/ General Practice in undergraduate medical education: your personal experience” to be held in Dublin at Trinity College during the EURACT International Conference on Education.

The workshop was really a big success: as regards attendance, development and interest, and regarding material obtained through papers and from the iPad system Helena used so well.

Also, it was decided that the Committee will work in the meantime before the Council in Tel Aviv on the material to develop a Delphi study using email addresses received from the audience and to drive forward a paper.

Francesco Carelli

chair of the BME Committee, representative of Italy

Specialist Training Committee

1. EURACT WEBSITE – ST-PART

Every meeting we start by revising what is on the website and if changes are needed. It should include short introduction about the aim/vision of the committee, links to papers/documents/tools and plans for the future.

2. ST-TOPICS

Small group discussion about topics to work out in the future. We agreed on 2 topics

1. Teaching leadership in FM
 - a. Cooperation with EQuIP & Vasco da Gama
 - b. Definition of EQuIP will be used as a starting point to define what we mean by leadership in FM
 - Zalika will provide us the definition
 - Chloé (VdG): ASPIRE

- Via Dropbox we all can redefine
 - Deadline: 10th of October
- c. If we have a clear definition, set up a survey (e.g. via Survey Monkey), to call to all the EURACT members to participate in the survey (note: this was approved in the next meeting)
 - d. Workshop WONCA Prague
 - e. Zalika, Iveta and Roar will participate and can lead the workshop
2. Assessment in ST (Roar)
 - a. There is a report (2015) on the EURACT website: EURACT statement on ST assessment. We want to make it up to date. Tools:
 - EURACT statement (website and in Dropbox)
 - 2 chapters of book (Norcini & Boursicout) (Dropbox)

- Literature (Everyone)
 - Deadline end of December
 - Note: Nynke realised that the EURACT Performance Agenda contains all the needed information on assessment. See Dropbox - New plan
- b. No workshop planned in the near future

3. SELECTION PROCEDURES

- Survey and analysis of data is still going on (Nynke)
- Nynke will keep us up to date if work needs to be done by the ST committee

Nele Michels

chair of the Committee, representative of Belgium

WONCA Europe Conference, Prague, 2017

Dear GP/FM colleagues,

We are delighted to invite you to the 22nd WONCA Europe Conference that will be held in Prague, Czech Republic from June 28 to July 1, 2017.

ON-LINE ABSTRACT SUBMISSION

We would like to announce, that the WONCA Europe Conference 2017, Prague, is already open for abstract submission. Abstract submission deadline is on December 31, 2016

NOTE FROM THE SCIENTIFIC PROGRAMME COMMITTEE CHAIR

The overall theme of the conference is „Growing together in diversity“.

The Scientific Committee has chosen 6 main themes, which are actually relevant for all European GPs/FDs. These themes define the course of our Conference. They should facilitate the orientation for colleagues potentially submitting abstracts and they will be also addressed by invited keynote speakers.

But ...do not feel limited if your topic does not perfectly fit to any of these themes, because in our hierarchy there are also 41 sub - themes dealing with 1. global issues, describing 2. our discipline and profession and 3. GP/FM clinical management from a wider perspective.

Everybody will find his/her topic for sure.

WHAT ARE THE 6 MAIN THEMES OF OUR CONFERENCE?

1. Integrated primary care – does it function?

Primary care has a central role in integrating care within a health system. We need a comprehensive, integrated approach to service delivery. We need to fight fragmentation. Integration is about the organization of vari-

ous tasks which need to be performed in order to provide a population with good quality health services.

2. GP and chronic disease management

Worldwide, the prevalence of chronic disease and risk factors for their development are increasing and placing greater demands on health care systems. It is estimated that chronic diseases currently account for 70%. The burden of chronic diseases is tremendous, and traditional methods of healthcare delivery are unsuitable for addressing patients' needs. Chronic disease management has emerged as a new challenge for chronic disease care in the primary care setting as GPs are the pillar of any modern functional and effective health system.

3. IT and GP

Technology continues to develop rapidly and is increasingly being applied to medicine, applications are now available for mobile devices, which can monitor patients' health in real time. New developments occur rapidly and it is likely that these will modify the classic paradigms of a doctor patient contact. Doctors need to learn how to incorporate these new technologies into their work whilst at the same time remaining focused on the patients and their needs.

4. Early cancer diagnosis/risk assessment

Most symptoms of cancer have more common benign causes in general practice. Further, cancers in general practice often present initially with more subtle non-specific symptoms. GPs must balance the risk of later diagnosis against over-investigation of patients who are unlikely to have cancer, with resultant costs to the patient and to the health care system, and potential harms from invasive tests including over-diagnosis of incidental

low-risk cancers.

5. Communication traps in GP

Patient-physician communication is an integral and essential part of general practice. When done well, such communication produces a diagnostic and therapeutic effect for the patient, when not.....tell us Your experience and how did You deal with problems that emerged from real professional life.

6. How to make general practice the first choice discipline for graduates

Recruitment to general practice is a significant current challenge. In the changing climate of general practice reform, we need to know what students' current attitudes towards general practice are. We think that it is vital to persuade students early on that general practice can be a stimulating and rewarding career with numerous opportunities for specialist interests and front-line medical care.

In June 2016 we addressed all networks and SIGs and we would appreciate that they share with colleagues their „actual know how“ and field of their interest. We are curious what are the burning issues they tackle. We would like to invite these all networks and SIGs to arrange sessions (symposiums and workshops) within each of their specific areas.

The GP/FM colleagues from Czech Republic are very proud to invite you all to Prague in June 2017. We are looking forward to share experience and meet new friends – researchers, teachers, organizers and general practitioners across the Europe and we will grow in diversity together.

Jachym Bednar

Chair of the Scientific Programme Committee