



Annual Report

2008

Irish College of General Practitioners

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icgp

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PRESIDENT'S Report

It was my good fortune to be elected ICGP President in a year which coincided with the triennial meeting of WONCA which took place in Singapore last July. At the meeting, Chairman Mark Walsh and I signed an agreement on behalf of the College with the Royal Australian College of General Practitioners guaranteeing reciprocity of recognition in our respective countries for those in possession of the MICGP and FRACGP. This was the first, last and only time I have been party to an international treaty!

It was a salutary experience to be exposed to the problems and challenges facing general practice worldwide, to marvel at the vast amount of research being carried out and to be made aware of alternative systems of health care. While we may complain about shortcomings at home, we are infrastructurally, educationally and organisationally far ahead of many other countries where meaningful general practice and primary care is in its infancy and where social welfare networks are almost non-existent.

Closer to home, I attended many functions as College representative in all four provinces, in Sligo, Galway, Belfast, Killarney and Wexford, and at several events in Dublin, meeting many old friends and making new connections along the way. Most enjoyable was the visit to Belfast as guest of the Ulster Medical Society, dining in the historic Great Hall of the Queen's University. Our GP colleagues in the North are also facing similar problems to ourselves, being besieged by a stifling bureaucracy. It was good to see normality returning to Northern Ireland.

Pictured at the official signing of agreement between the two Colleges of the mutual recognition of their respective qualifications MICGP and FRACGP were Dr Morton Rawlin, RACGP Director of Education, Dr Vasantha Preetham, RACGP President, Dr Charles Daly, ICGP President, and Dr Mark Walsh, ICGP Chairman



REPRESENTATION ON BEHALF OF ICGP 2007 – 2008

May 2007, INO AGM, Killarney

July 2007, WONCA, Singapore

October 2007, IHCA AGM, Dublin

October 2007, St Luke's Day Honorary Conferring, RCPI, Dublin

November 2007, RCGP NI Faculty, Dunadry

November 2007, IPHA AGM, November 17, Dublin

December 2007, IMO Doolin Lecture, RCSI, Dublin

December 2007, RCGP Republic of Ireland Faculty Winter Meeting, Dublin

December 2007, Acadamh na Lianna, Cruinniú an Gheimhridh, Baile Atha Cliath

February 2008, Co Sligo GP Society Annual Seminar, Sligo

February 2008, Ulster Medical Society, Belfast

March 2008, Bray Clinical Society, Bray

April 2008, IMO Annual Conference, Killarney

I wish to thank Eamonn Shanahan, Michael Flynn and Henry Jack for representing me on a number of occasions.

The amount of work being carried out by the College at Executive, Council and Committee level continues to be impressive, all the more so when most of this is voluntary and carried out in members' spare time. The AGM, Winter Meeting and Women's Health Conference are all comprehensively organised, popular and well-attended, and the new Summer School had an auspicious début last year. All this is complemented by the seemingly inexhaustible energy of Fionán, Dermot and all the College staff. In particular I would like to thank Orla Sherlock, who has been the nearest thing to a personal assistant I have ever had!

In conclusion, I wish to thank my long-suffering wife, Eileen, for her patience; and I wish incoming President Michael Tangney all the best for his term of office.

Dr Charles Daly, President



CHAIRMAN'S Report

This report represents a summary of the issues and activities that occupied the Executive for the past year. The Irish College of General Practitioners continues to grow and continues to provide an increasing variety of services to members, other general practitioners and the general public. Some observers might argue that general practice is in the doldrums at present, that morale is low and that development is practically impossible in the absence of a new contract. My perception is that this is a time of change and great potential opportunity for general practice.

GENERAL PRACTICE TRAINING

Over the past few years, mainly through the work of the National Steering (interim) Committee for GP Training (which brings together training programmes, trainers, the ICGP the Postgraduate Medical and Dental Board and the HSE) the number of doctors in higher professional training for general practice has increased. For 2008 a target intake into the training programmes of 150 doctors was agreed.

This was seen as fulfilling the minimum requirement, rather than the realistic numbers, needed to maintain manpower levels in general practice. However, in late December, the ICGP was informed by the HSE of their intention to withdraw their commitment to the funding of any increase in training capacity for 2008. The result was a restriction in the intake to training to 120 places for 2008. The knock-on effect of this was that a new specialist training programme proposed for north Dublin was not established and several other training programmes had to curtail their plans for expansion.

The organisation of general practice training is complex and ensuring rotations through certain sub-specialties during the hospital-based element of training can prove difficult. Having to row back from commitments to fill various SHO posts in several disciplines within the hospital setting does nothing to improve relationships with our consultant colleagues (who are usually delighted to have doctors in training for general practice on their teams) and adds considerably to the headaches of programme directors. One hopes that higher professional training in general practice will continue to attract top-quality candidates but if there is uncertainty in funding for training and manpower issues in the future it is possible that the calibre of candidate may deteriorate. In essence, the decision to withdraw funding for training hits at the core of the development of the specialty of general practice and negates a large proportion of the goodwill and trust that has been built up between the ICGP and the HSE.

THE NEW MEDICAL PRACTITIONER'S ACT

This year sees the formation of a new Medical Council and the implementation of the new Medical Practitioner's Act 2007. One of the implications of this Act will be that the Medical Council will issue guidelines to doctors on their responsibilities under the new Act of maintaining their professional competence and it is likely to become mandatory for medical practitioners to participate in a Peer Review Programme. To this end, during the year general practitioners were invited to participate in a Professional Peer Review Pilot Project which involved the confidential completion of a series of questionnaires by GPs themselves and a selection of patients, medical colleagues and non-medical work colleagues. At the outset it was hoped that 400 GPs would volunteer to participate but in the end approximately half of this number signed up. It may be that the decision to forge ahead with the Pilot Project prior to sufficient consultation with general practice and the paucity of clarification relating to some genuine concerns of GPs may have had an adverse impact on the numbers willing to volunteer. In recent weeks those who participated have been issued with individual feedback and hopefully this information will be useful and encouraging to GPs who took the trouble to become involved with the pilot. It is important that some composite results are published by the Medical Council at the earliest opportunity as I feel this data should make a contribution towards informing the future development of general practice. The practical application of the Pilot Project will need some refinement but with appropriate feedback from participants adjustments should follow. One prevalent and genuine concern of GPs is the cost implication in terms of time and finance in becoming involved in Competence Assurance/Performance Review. At this point I wish to extend my thanks, and indeed congratulations, to Dr Ailis Ni Riain for her work as a member and Vice President of the outgoing Medical Council. Ailis' report on the work of the Council is included elsewhere.

ICGP STRATEGIC PLAN 2008 – 2013

As outlined earlier this is a time of change for general practice and the College has to both inform and respond to this change. It is vital that we are clear about the activities and issues that need to be prioritised as resources are not limitless and we must devote our energies accordingly.

Last autumn, in line with previous practice, the College engaged in a strategic planning process for the next five years involving as wide a consultation as possible with the members. A Draft Strategic Plan was devised following a ‘think tank’ by the Executive and key staff representatives. This draft was circulated to the Faculties and to all members for their consideration and input and was discussed at Council in March with a view to adoption at the AGM in May 2008.

The Draft Strategic Plan will have to be refined into a more meaningful and focussed action plan which reflects the priorities indicated by the membership. This planning process should be seen as ‘dynamic’ or ‘live’ and it is important that we have the flexibility to respond to a changing situation in the future without being shackled to a rigid policy.

PREMISES

The success of the ICGP over the years is reflected in the huge increase in activities and services to members. One just has to peruse a document like the *Prospectus for the Academic Year 2007-2008* to appreciate the amount of work done by the College. This document reflects a tiny portion of the overall activity at central level in the College. As workloads increase the number of people required to do the work also increases and we have long since outgrown our accommodation at Lincoln Place. To this end, College has leased approximately the same floor area at nearby Hospitality House. Although not ideal, this has allowed for work to continue but there is a time limit to this lease and over the next year or so we will be forced to make some changes.



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“...this is a time of change for general practice and the College has to both inform and respond to this change. It is vital that we are clear about the activities and issues that need to be prioritised as resources are not limitless and we must devote our energies accordingly.”

Working from two locations is inefficient, costly, restricting and does nothing for inter-staff relationships. It is important that all working centrally are aware of one another's area of activity and responsibility as there are frequently common strands that need consultation. We are extremely lucky, if not unique, to have such stability in our staff. This must be nurtured. I know I speak for the body of the membership when I indicate how much we value all the personnel at central level, our interactions are invariably positive and we are met with an air of pleasantness, efficiency, professionalism and eagerness to help. If we are to continue to thrive, accommodation issues need urgent attention. The likelihood in the future is that our needs for space will increase as educational activities expand and as we assume new responsibilities e.g. the College's role in facilitating general practitioners in fulfilling their Competence Assurance requirements.

Over the past year or so the Chief Executive, the Finance Committee and the Executive have been looking at various alternatives and options as regards a premises. Our experience with the purchase of Lincoln Place has been positive. It is an asset, but does not meet our current or indeed future requirements. Deliberations at present reflect a balance between what's currently available on the market, location, suitability and cost. It is hoped that soon we will be able to come to the membership with a definite proposal, but a caveat to this is that there will be a cost implication for the ICGP.

EDUCATION

This year saw a new departure in the provision of education for general practitioners. In addition to the ongoing CME programme provided through the CME tutors and the courses and programmes outlined in the College Prospectus, the Summer School was launched. This was held over a four-day period in June at Mount Juliet and feedback has been extremely positive. Running several educational modules over four days in a concentrated manner is attractive to a cohort of general practitioners who, for whatever reason, find it difficult to attend existing educational activity. This year's Summer School, with some modifications to the programme, will be held at the Lyrath Estate Hotel in Kilkenny from 24th to the 27th June.

INTERACTION WITH OTHER ORGANISATIONS

Throughout the year representatives from College have met with many organisations representing other allied professionals, patient groups, state agencies and interested parties. These are too numerous to mention individually. However, mention has to be made of our interaction with the HSE which has proved to be less than satisfactory. As I outlined earlier, the decision to withdraw funding for the agreed and required expansion of training has undermined a large degree of goodwill and trust in striving forward in a partnership relationship.

We have had some very fruitful meetings with our colleagues in the IMO and have decided to pursue a common aim of promoting general practice in an environment where there is some degree of potential disillusionment and discontent. We hosted a joint meeting entitled “*Irish General Practice – the Capacity to Deliver*” at Croke Park in April, and hopefully as a result we will be in a stronger position to inform the development of Irish general practice.

From l-r: Dr Michael Boland; Mr Fionan O'Cuinneagain; Lord David Puttnam and Dr Mark Walsh ICGP Chairman at the first ICGP Summer School held in Mount Juliet, Kilkenny. Lord David Puttnam gave the keynote speech on "Citizen and Consumer - One Person, Two Roles".



OTHER ISSUES

- ^ There has been some deviation away from the traditional programme for the AGM. There will now be no formal AGM activity on the Friday, and the Keynote Address will be on Saturday evening prior to dinner. This allows for more flexibility and avoids duplication of topics between the AGM and the Summer School.
- ^ The implementation of the Primary Care Strategy would seem to be quite varied and haphazard around the country and, with the exception of some of the original pilot projects, satisfaction with progress among general practitioners would appear to be very limited. In arrangements at local level, members should be prudent with regard to such issues as ongoing responsibility, access to practice records and the burden of excessive meetings for general practitioners.
- ^ The College continues to support and foster the Network of Establishing GPs (NEGs). This project is very important to the College as the future lies in their hands. It is hoped that younger members will continue to play an increasingly prominent role in the College at all levels.
- ^ For too long we have relied on work from sister colleges and our colleagues in secondary care for objective data in the clinical and epidemiological areas. The relatively recent securing of significant funding for specific research projects will help to promote a culture of high-quality research in general practice in Ireland and will enhance the prestige and credibility of the ICGP in international academic circles. It will also contribute in a practical way by helping to inform best clinical practice in direct patient care.

^ The College can only remain healthy if its members (and their families) are healthy. Much work has been done in the Health in Practice Programme and I would encourage members to be mindful of health maintenance.

^ On an almost weekly basis the ICGP is asked to provide representation on behalf of general practice on various committees and working groups. Some of these requests represent issues of high importance to the College and every effort is made to facilitate with a representative to physically attend meetings etc. However, it is impossible to assign the same degree of priority to all requests and where possible a member is nominated to keep abreast with the workings of groups without giving the commitment of attending meetings. Members who have an interest or expertise in various areas are encouraged to come forward and represent the College.

ACKNOWLEDGEMENTS

Throughout this report I could (and possibly should) have thanked and acknowledged various individuals for their significant contributions to specific areas and to the successful working of the College. I would like to particularly thank the members of the Executive and the Postgraduate Programme Directors for their help and support throughout the year. I recognise that although some of their work is reflected in the annual reports from the various committees and programmes, much more is done efficiently in the background – I am deeply grateful. When one hears that the staff at the ICGP is handling in excess of 60,000 phone calls per year only then does one have a true appreciation of their professionalism (and that's just the phone calls).

All this activity just does not happen of its own accord and I need to single out one individual for special appreciation. To describe Fionan as a driving force would be less than accurate – he leads from the front and pulls us all with him.

I would also like to thank my partners and colleagues at North Gate Medical Centre for their patience in allowing me the free time to attend to College affairs. Lastly I must thank my wife Ruthie with Bronagh, Marcus and Cillian for their ongoing love and support.

Mark Walsh, Chairman



HONORARY TREASURER'S Report

I am again pleased to report a continuing trend in a positive direction with the accounts for the year ended 31st December 2007 showing an operating profit of €165,000. This was achieved by increased income of €600,000 and relative control of expenditure increase of €500,000.

The main source of income for the College is the annual subscription which showed an increase of €200,000. However, the amount of outstanding subscriptions still remains very high at €400,000. Another area which showed a significant increase in income related to College courses and conferences which showed an increase of €380,000 for the year.

You will see from other sections of the Annual report (see www.icgp.ie) the wide and ever increasing range of courses and services being provided to members with a particular emphasis on distance learning and web-based activity. In looking to the future there will be an ever increasing demand for new courses, services and information which must be resourced. The abbreviated accounts are attached. Full accounts may be had on request.

Dr Abdul Bulbulia, Honorary Treasurer

Registration number 100456
Charity number CHY 6751

The Irish College of General Practitioners Limited

(A company limited by guarantee, not having a share capital)

Directors' report and financial statements

for the year ended 31 December 2007

The Irish College of General Practitioners Limited

Company information

Directors	The names of the persons who are directors for the Council term 2007/2008 are as listed in Appendix I.
Secretary	Fionan O'Cuinneagain
Company number	100456
Charity number	CHY 6751
Registered office	4/5 Lincoln Place, Dublin 2.
Auditors	OCMC, Cian House, Cian Park, Drumcondra, Dublin 9.
Business address	4/5 Lincoln Place, Dublin 2.
Bankers	AIB Bank plc., 1 Lower Baggot Street, Dublin 2. Ulster Bank Ireland Limited, Ulster Bank Group Centre, George's Quay, Dublin 2. First Active plc., First Active House, Central Park, Leopardstown, Co. Dublin.
Solicitors	McDowell Purcell, The Capel Building, Mary's Abbey, Dublin 7.

The Irish College of General Practitioners Limited
Profit and loss account (Statement of financial activities)
for the year ended 31st December 2007

		Continuing operations	
	Note	2007	2006
Income		€	€
Subscriptions received		1,725,093	1,520,846
Course income and fees		1,125,607	739,545
MICGP Examination		255,510	284,995
Conferences		323,209	275,560
Grants: Post Graduate Medical & Dental Board		102,634	101,904
Sundry income		95,690	59,234
	2	3,627,743	2,982,084
Expenditure			
Establishment		58,658	81,748
Administration		2,248,517	2,075,235
Courses		879,238	502,295
Conferences		208,840	201,837
Financial	4	75,349	66,324
		3,470,602	2,927,439
Operating result for the year		157,141	54,645
Interest receivable and similar income	5	8,057	8,491
Results on ordinary activities before taxation		165,198	63,136
Tax on ordinary activities		-	-
Retained result for the year		165,198	63,136
Retained reserves brought forward		558,862	495,726
Retained reserves carried forward		724,060	558,862

There are no recognised gains or losses other than the profit or loss for the above two financial years.

The financial statements were approved by the board on 26th April 2008 and signed on its behalf by

Dr Abdul Bulbulia
Director

Dr Thomas Mark Walsh
Director

The Irish College of General Practitioners Limited
Balance sheet
as at 31 December 2007

	Notes	2007		2006	
		€	€	€	€
Fixed assets					
Tangible assets	9		2,091,218		2,433,281
Financial assets	10		500,195		500,195
			<u>2,591,413</u>		<u>2,933,476</u>
Current assets					
Debtors	11	1,377,529		999,276	
Cash at bank and in hand		1,240,331		309,087	
		<u>2,617,860</u>		<u>1,308,363</u>	
Creditors: amounts falling due within one year	12	(3,578,582)		(2,670,775)	
Net current liabilities			<u>(960,722)</u>		<u>(1,362,412)</u>
Total assets less current liabilities			<u>1,630,691</u>		<u>1,571,064</u>
Creditors: amounts falling due after more than one year	13		(906,631)		(1,012,202)
Net assets			<u><u>724,060</u></u>		<u><u>558,862</u></u>
Capital and reserves					
Revenue reserves			724,060		558,862
Members funds	14		<u><u>724,060</u></u>		<u><u>558,862</u></u>

The financial statements were approved by the board on 26th April 2008 and signed on its behalf by

Dr Abdul Bulbulia
Director

Dr Thomas Mark Walsh
Director



REPRESENTATION ON THE MEDICAL COUNCIL Report

The current Medical Council has been in place since May 2004 and I have been a member since October 2004, appointed by the Minister for Health and Children on the nomination of the ICGP. I have been Chairman of the Registration Committee since November 2006 and Vice President since September 2007.

The last year has seen the passing of the Medical Practitioners Act 2007 by the Oireachtas, the election of a new President and a number of high profile fitness to practice cases. The focus of Medical Council activities over the past year has been two-fold: to continue to fulfil its statutory regulatory duties while also preparing for the new structures and procedures that will be required to implement the 2007 Act. This report provides a brief summary of issues over the past year that has particular relevance for the ICGP. Dr John Hillery resigned as President in June 2007, in order to contest the Seanad elections. Dr Colm Quigley was subsequently elected as President, leaving a vacancy for Vice President. I was subsequently elected to this position.

MEDICAL PRACTITIONERS ACT 2007

The Medical Practitioners Act 2007 was passed by the Oireachtas in May 2007. There is provision for its enactment in stages, and the first section has been enacted to enable the election and appointment of new Council members. This process will be complete in May 2008 and it is anticipated that other sections of the Act will be enacted in June 2008 when the new Council will commence working.

EDUCATION AND TRAINING

Council has completed its current round of inspections and accreditation of the Medical Schools, including the accreditation of a new medical school at the University of Limerick and two new graduate entry programmes at UL and the RCSI. It has also continued its programme of hospital inspections to assess their suitability for training of interns and temporarily registered doctors.

Formal accreditation of the training bodies will be required under the 2007 Act and work is ongoing in developing the process and procedures for this accreditation.

FITNESS TO PRACTICE

A number of high profile Fitness to Practice cases were handled during the year. The one that has had the greatest impact on the procedures of the Council has been the judicial review of the Fitness to Practice findings in the case of the obstetricians involved in a 1999 report on the practice of Michael Neary. Judge Kelly overturned the Medical Council finding and his judgement has resulted in a number of procedural changes in how the Council considers reports of inquiries from its Fitness to Practice Committee.

REGISTRATION

Under the MPA, 2007 there will be three divisions of the register – the Training Division, the Specialist Division and the General Division. All doctors in training (including interns) will need to be in recognised training posts and entered on the Training Division. The Specialist Division of the register will include all doctors in their relevant speciality. Only those who are entered in this relevant section of the Specialist Register will be recognised as trainers. Those who do not qualify for inclusion in either of these divisions will be entered in the General Division. All registered doctors will need to provide ongoing evidence of professional competence, as appropriate to the division of the register in which their name is entered.

Registration as a specialist remains voluntary until the registration section of the MPA 2007 is enacted. The number of GPs on the Specialist Register has increased substantially over the past year and there are now more than 1200 GPs on the Register of Medical Specialists. Those who satisfy qualifying conditions can still secure automatic entry onto the RMS (the so-called “grandfather clause”).

COMPETENCE ASSURANCE

Developments continue in all areas of the competence assurance structures. The Performance in Practice publication provides details of plans for all levels of assessment and can be accessed on the Medical Council website. Two pilot projects have been completed with GPs, one on multi-source feedback and the other on practice assessments. Reports on both will be published shortly.

Dr Ailis Ni Riain



LIBRARY & INFORMATION SERVICE

Report

The ICGP Library and Information Service continues to play a central role in many aspects of College work.

USERS OF THE SERVICE 2007-2008

The users of the ICGP Library and Information Service are varied as evidenced from the list below. Their information needs are also as diverse covering personal interest, clinical knowledge, education and professional areas:

- ^ ICGP members (including CME tutors, trainees, trainers).
- ^ ICGP course participants (particularly E-learning).
- ^ ICGP project directors.
- ^ ICGP staff.
- ^ Other Irish general practitioners.
- ^ Health Service Executive staff.
- ^ Healthcare professionals.
- ^ Irish Health Sciences Libraries around the country.

- ^ Students from universities conducting general practice research.
- ^ General public.
- ^ National media.
- ^ Pharmaceutical companies.
- ^ Other professional organisations.
- ^ Other commercial organisations conducting general practice research.

SERVICES PROVIDED BY THE ICGP LIBRARY AND INFORMATION SERVICE

- ^ Telephone, fax and email requests for information are received and answered.
- ^ Literature searches on specific topics for private research, clinical queries and academic research are conducted.
- ^ Ordering of materials e.g. articles/reports/books etc.
- ^ IT training.
- ^ Assistance with referencing of research and online survey development and implementation.

PRESENTATIONS AND TRAINING

We had many requests to present at a range of College activities throughout the year. I delivered presentations and training to:

- ^ CME Small Group Network Tutors in May 2007 relating to their online bids and any relevant IT issues they wanted to discuss. Angela Byrne (ICGP Web Manager) also held a simultaneous session.
- ^ E-learning course participants on their workshop days in both October 2007 and January 2008. These participants included those undertaking Medical Education and Women's Health courses.
- ^ GP trainees in the Midlands GP Training Programme. Those undertaking research projects were given individual sessions relating to their proposed research and tips on online searching for relevant information.
- ^ GP trainers in the Midlands requested on-site training in their practice. Trish and I both carried out this IT training during 2007-2008 to eight trainers.
- ^ Individual ICGP members who booked appointments with Trish and I for IT training throughout the year.
- ^ GP trainees in the RCSI/Dublin North East General Practice Training Programme. This joint presentation/training session was delivered by RCSI Deputy Librarian, Paul Murphy, and myself.
- ^ ICGP management in practice – practice staff course participants were shown their online course evaluation feature and also some useful websites.

COURSES ATTENDED

In the interest of continuing professional development and as an opportunity to meet and discuss issues with our library colleagues, Trish and I attended several courses throughout the year, which are listed below.

Savvy Searching: December 2007

The objectives of the course were to:

- ^ Maximise the reference interview.
- ^ Develop a search strategy.
- ^ Select resources to search.
- ^ Explore the advanced search features and limitations of Google TM.
- ^ Investigate other search engines and web based resources.
- ^ Re-use searches to develop library services.

Evidence Based Library and Information Practice: January 2008

The objectives of the course were to:

- ^ Acquire working knowledge of techniques for tackling implementation issues in a topic of interest to participants and their employing organisations.
- ^ Gain insights from considering perspectives of those leading implementation.
- ^ Gain skills in the Evidence Based Practice process in a library setting.
- ^ Experience the benefits of small group project-based working in a problem solving context.
- ^ Identify further training needs associated with provision of evidence based library and information services.

Other Courses

Trish also represented the ICGP Library and Information Service at the events below:

- ^ How to Make the Most of PubMedTM, August 2007 - how to effectively search PubMedTM.
- ^ Research Publication and Dissemination Conference, January 2008 - a conference connecting researchers and librarians in discussion about scholarly research on topics such as open access, the creation of an institutional repository, etc.
- ^ Swets TM Customer Forum, March 2008 - a yearly update from our journal subscription agents.

FORUM

Angela Byrne (Web Manager) and I wrote a series of articles dealing with the ICGP website and the ICGP Library and Information Service which were published in Forum throughout 2007. During 2008, Dr. Claire Collins (Director of Research) and I are writing and publishing articles relating to useful resources for general practitioners and their staff in Forum.

ONLINE SURVEYS

2007-2008 has seen a busy time in relation to the use of online surveys by the College. These are delivered via the subscription service SurveyMonkey™ which allows us to create easy to use online surveys which collect responses quickly and produce easy to read reports. Various College activities have been facilitated online in this manner including course evaluations (for cervical screening courses and practice staff courses), training requirements, submissions to the Mental Health Commission and the ICGP NEGs Snapshot Survey etc.

FUTURE PLANS

- ^ To produce a publication to mark the 25th anniversary of the ICGP in 2009.
- ^ To continue to develop the library catalogue and to promote its usage by general practitioners and their staff.
- ^ To promote the usage of the research listing by general practitioners and other researchers throughout the country.
- ^ To further develop electronic resources and their usage within the College.
- ^ Trish and I intend to attend some continuing professional development courses. Including a 2-day Cochrane Systematic Review Course funded by the Health Research Board and a teaching skills course provided by the Health Sciences Libraries Group (HSLG).

Ms Gillian Doran (Librarian) and Ms Trish Patton (Assistant Librarian)

www.icgp.ie/library



COMMUNICATIONS & PUBLIC RELATIONS

Report

The communications and public relations role is undertaken by Dr Mel Bates (Chairman Communications Committee) and Angela Byrne (Web and Communications Officer). We wish to thank the wide range of members who facilitated interactions with the media over the past year

PROJECT ACTIVITIES/TASKS

- ^ Liaise between journalists and College spokespersons and personnel.
- ^ Organise and facilitate media coverage for the AGM and other College meetings and events.
- ^ Develop & maintain a communication process embracing College staff/projects, faculties and members.
- ^ Organise workshops in media skills for College spokespersons.
- ^ Collate monthly College news for Forum.
- ^ Facilitate meetings of Editorial Board of Forum.

MEDIA RELATIONS

Material Sent to the Media

Press releases and photographs issued to the media:

- ^ ICGP AGM, May 2007.
- ^ ICGP 3rd National Conference on Women's Health, June 2007.
- ^ ICGP 1st Summer School, June 2007.
- ^ Presentation to Dr Aidan Meade on his retirement from the Sick Doctor Scheme, July 2007.
- ^ ICGP / NAGPT Conference, October 2007.
- ^ MICGP Examiner Workshop, October 2007.
- ^ E-learning Workshop, October 2007.
- ^ MICGP Graduation, November 2007.
- ^ ICGP Winter Meeting, November 2007.
- ^ New Trainers Workshop, November 2007.
- ^ ICGP/FRACGP Mutual Recognition Agreement at WONCA, November 2007.
- ^ ICGP/PGM&DB (HSE/METR) Careers Day, December 2007.
- ^ ICGP Involved in Peer-Reviewed Publication, December 2007.
- ^ ICGP Announces Expanded Educational Programme in Substance Misuse for 2008, December 2008.
- ^ Scales Graduation, January 2008.
- ^ GP Trainers Workshop, February 2008.
- ^ ICGP/IMO Joint Conference, April 2008.

From January 2008, we began sending monthly news bulletins of College activities to the national and medical press.

Media Queries

The media desk continued to be very busy over the 2007-2008 period with an average of 20 queries per month. The busiest month was January 2008 with 30 enquiries. From January 2008, monthly media reports are prepared for College officers. A full report for 2007 – 2008 is available on request.

Numerous press releases were issued throughout the course of the year. The following were the main issues communicated by the College and covered by the media.

Failure to Fund Increase in General Practice Training Places in 2008

- ^ Daily Newspapers: Irish Times, Irish Independent, Irish Examiner.
- ^ Medical Press: Irish Medical Times, Irish Medical News, Medicine Weekly, Irishhealth.com.
- ^ Local Radio: Shannonside Radio, Midlands Radio.
- ^ Sunday Papers: Sunday Business Post, Sunday Tribune.

ICGP/ICS Study on Cancer

- ^ Daily Newspapers: Irish Times, Irish Independent, Irish Examiner.
- ^ Medical Press: Irish Medical Times, Irish Medical News, Medicine Weekly, Irishhealth.com.
- ^ National Radio: Radio na Gaeltachta.
- ^ Local Radio: LMFm, Tipp FM and LiveFM.

Submission to the Alcohol Advisory Committee

- ^ Television: TV3, RTE 9 o'clock News.
Medical Press: Irish Medical Times, Irish Medical News, Medicine Weekly, Irishhealth.com.
- ^ National Radio: Newstalk FM, BBC Radio Belfast.
- ^ Local Radio: LMFm, Tipp FM and LiveFM.

Manpower Survey 2008

- ^ Television: RTE 9 o'clock News.
- ^ Daily Newspapers: Irish Times.
- ^ Medical Press: Irish Medical Times, Irish Medical News, Medicine Weekly, Irishhealth.com.
- ^ National Radio: RTE News at 1, Newstalk.
- ^ Local Radio: Radio Kerry, Clare FM.
- ^ Local Press: Leinster Leader and Clare Champion.

Media Watch

In November 2007 we entered into a contract with Electric Search an online search engine. This search engine monitors Irish press for media reports relevant to the ICGP. It then automatically alerts us via email and brings us directly to relevant articles. This has allowed us to keep track of all media reports on the ICGP and general practice issues.

COMMUNICATION WITH MEMBERS

Emails to Members

The following topics have also been emailed to members since May 2007:

Email Subject	Audience	Date
Network of Establishing GPs - Galway Meeting	Establishing GPs	02/05/2007
Oral Nimesulide products suspended by IMB	All members	15/05/2007
RCGP Statement	All members	16/05/2007
Important Information from the Food Safety Authority of Ireland	All members	17/05/2007
1 st Annual Summer School	All members	30/05/2007
IMB Safety Notice: Recall of Clearview HCG Pregnancy Test Kit	All members	13/06/2007
Letter from NEG's Project Leaders	Establishing GPs	29/06/2007
Patient Expectations	All members	16/07/2007
Closing Date for Registration of E-Learning Courses 24th August 2007	All members	26/07/2007
Press Statement – HSE re E-Coli	All members	28/08/2007
Outbreak of Chikungunya Fever in Emilia Romagna, Italy	All members	05/09/2007
Draft National Quality Standards for Residential Care Settings for Older People	All members	14/09/2007
Winter Programme	All members	18/10/2007
Annual GP Meeting 2007 - Temple Street Children's University Hospital	GPs in Eastern Region	30/10/2007
Winter Meeting	Establishing GPs & Trainees	01/11/2007
Network of Establishing GPs - Meeting 22nd November	Establishing GPs	09/11/2007
Network of Establishing GPs - Galway Meeting	Establishing GPs	15/11/2007
General Practice Development - Statement by ICGP Council	All members	16/11/2007
The Training Charter from the HSE South East Training Programme for General Practice	Trainees	20/11/2007
Commercial Wireless Christmas Offer	All members	26/11/2007
Certificate in Mental Health and Certificate in Palliative Care courses commencing 18 th and 19 th January 2008	All members	26/11/2007
NEGS Regional Meeting – Wexford Meeting	Establishing GPs	28/11/2007
Extended Deadline for Certificate in Palliative Care and Mental Health	All members	02/01/2008
Missing Person Notice for GP Surgeries	All members	07/01/2008
Influenza Season 2007/2008	All members	11/01/2008
Baby Beets Fetal Doppler – IMB Alert	All members	01/02/2008
Consultative Group - Section 42(4) - Submission Document	All members	04/02/2008
The Mental Health Act - Your Views	All members	04/02/2008
Invite to the Symposium on the Health Needs of Transsexual People and People with Gender Identity Disorder	All members	08/02/2008
Infertility and miscarriage Conference in Galway	All members	20/02/2008
The Medical Benevolent Fund Reception	All members	26/02/2008
Review of Mental Health Act	Selected group	13/03/2008
No Panic Conference	All members	21/03/2008
Clinical Update Road-show	All members	27/03/2008
ICGP Response to the Draft Smeartakers Contract	All members	02/04/2008
Medical Council Election 2008	All members	04/04/2008
ICGP Network of Establishing GPs Questionnaire	Establishing GPs	07/04/2008
Medical Council Election - Dr Lynda Hamilton	All members	07/04/2008
Clostridium Difficile Associated Disease (CDAD) Becomes Notifiable Under Acute Infectious Disease (AIG) Category from 4/5/08	All members	08/04/2008

Action on Suicide Remembrance Procession 23 April	All members	09/04/2008
Urgent - 1 Day left to Answer ICGP NEG's Survey - Reminder Notice	Establishing GPs	10/04/2008
2008 Clinical Update Road show "Safe Prescribing for General Practitioners": 22nd April - Reminder	All members	16/04/2008
New IMB Safety Notice - ClinitestR hCG Cassette Pregnancy Test Kit	All members	17/04/2008
IMO ICGP Joint GP Conference - NEG's Needs Your Support	Establishing GPs	25/04/2008
Manpower Survey and WONCA Europe	All members	29/04/2008
ICGP Annual General Meeting	All members	01/05/2008

Annual Newsletter to Members

The second annual newsletter to members was distributed in December 2007 and outlined the main activities in the College throughout the year. The College received good feedback about the newsletter and members felt it was a good way to communicate College activities.

Membership Booklet

We have begun to put together a comprehensive membership booklet which will detail all College activities and services to members. This booklet will be used to inform new and existing members of College services.



COMMUNICATIONS ACTIVITIES

Forum

Angela Byrne continued to collate monthly Forum news from ICGP staff, members and Committees. A meeting of the Forum Editorial Board will be organised in 2008 and a new board appointed.

E-Bulletin

Every four months, information is gathered from College programme and project directors and collated into a quarterly e-newsletter outlining a summary of activity for the coming four months. The development of the e-newsletter was developed in response to requests for a bulletin board or newsletter to be set up to inform College directors and staff of upcoming activities in the College. The information is also used to collate Forum news each month and to help plan PR and marketing activity.

European Journal of General Practice

Every four months we collate a summary of news relating to Irish general practice for the European Journal of General Practice.

Online Marketing of ICGP Website

In 2007-2008 we undertook a range of online marketing initiatives to promote the College website and increase traffic to the website.

- ^ Placed website address on all material and created user-friendly URLs.
- ^ Created of reciprocal links with equivalent organisations and health-related agencies.
- ^ Search engine registration.
- ^ Registration with online directories.
- ^ Creation of meta-tags (keywords placed on each page to maximise hits from search engines).
- ^ Collaborated with public relations department and publicising of all new developments on the website.

FUTURE AIMS AND OBJECTIVES

- ^ Update College database - useful contacts by area of interest.
- ^ Update College website (MyICGP, Membership areas).
- ^ Creation of email newsletters to in-house and external groups.
- ^ Media training for College spokespersons.

Angela Byrne, Web & Communications Manager



COLLEGE WEBSITE Report

The College website project is responsible for the development and management of the ICGP website – 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 wider audience. The College website also enables members to make communication and interaction with the College more convenient and efficient as well as marketing and promoting College activities.

OTHER MEMBERS OF PROJECT

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

PROJECT ACTIVITIES/TASKS

- ^ Daily update of 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 online repository of documents so that all staff can locate 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.
- ^ Keep up to date with IT developments and advise College of same.

WEBSITE STATISTICS

Traffic to the ICGP website has been increasing since September 2007. The busiest month was January 2008. This is 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 count the number of times individual users access the website while visits records the number of visits that those users made.

	Sep 2007	Oct 2007	Nov 2007	Dec 2007	Jan 2008	Feb 2008	Mar 2008	Apr 2008
Page Views	102,010	142,438	165,679	106,464	239,845	176,427	151,583	158,637
Visits	18,335	22,575	26,209	17,887	33,610	28,738	24,180	28,284
Unique Visitors	8,461	10,455	11,675	8,273	13,617	12,644	11,188	11,888

Geographical Source of Visits (September 2007 – April 2008)

	Country/Territory	Visits	Pages/Visit	Avg Time on Site	% New Visits	Bounce Rate
1.	Ireland	146,873	7.04	00:04:50	34.28%	36.72%
2.	Philippines	23,896	1.54	00:02:51	2.42%	77.43%
3.	United Kingdom	9,009	6.45	00:04:07	70.01%	45.72%
4.	United States	4,646	2.61	00:01:08	91.05%	75.12%
5.	Malta	3,552	11.05	00:05:48	14.50%	8.02%
6.	Australia	1,771	8.74	00:06:56	58.61%	31.73%
7.	Poland	1,018	3.52	00:01:25	84.48%	44.89%
8.	Canada	784	4.20	00:03:04	75.64%	57.40%
9.	Germany	702	9.99	00:06:10	71.08%	43.87%
10.	India	462	2.42	00:02:18	89.39%	68.83%

Keywords Entered into Search Engines to Reach ICGP Website

	Keyword	Visits	Pages/Visit	Avg. Time on Site	% New Visits	Bounce Rate
1.	icgp	15,705	10.99	00:07:42	20.67%	9.28%
2.	www.icgp.ie	3,560	10.98	00:06:49	12.36%	8.17%
3.	icgp.ie	2,498	11.98	00:09:06	17.33%	7.45%
4.	irish college of general practitioners	1,234	9.98	00:06:34	44.33%	6.97%
5.	mary harney gp training places	761	1.46	00:00:28	0.00%	91.06%
6.	niamh killeen	643	1.27	00:00:14	0.16%	90.20%
7.	heartwatch	639	8.98	00:07:08	17.68%	30.67%
8.	dr. mary kearney, co. wicklow	638	1.29	00:01:48	0.00%	85.27%
9.	gp	534	10.89	00:05:02	62.55%	10.67%
10.	gp dublin	430	8.94	00:06:05	73.95%	9.30%

Most Popular Pages (September 2007 – April 2008)

	URL	Content Area
1.	www.icgp.ie	Homepage
2.	/index.cfm/loc/11.htm	Find a GP
3.	/index.cfm/loc/101.htm	My Portal page when member has logged in
4.	/index.cfm/loc/120.htm	Discussion boards
5.	/index.cfm/loc/120/action/viewcategories/category_id/88/forum_id/5.htm	Network of Establishing GPs discussion board
6.	/index.cfm/loc/120/action/keymaster.htm	Users trying to access discussion boards but aren't logged in
7.	/index.cfm?loc=101&function=distancelearning	Users accessing distance learning courses
8.	/index.cfm?loc=11&pt=13&action=county&step=&group=practitioner	Find a GP search by county and GP name
9.	/index.cfm?loc=11&pt=13&action=county&step=leftmenu	Find a GP search by county
10.	/index.cfm/loc/120/action/viewcategories/category_id/10070/forum_id/5.htm	GP Trainee discussion board
11.	/index.cfm/loc/1.htm	Users returning to homepage
12.	/index.cfm?loc=11&pt=13&action=county&step=showdublin&group=practitioner&practitioner_type=1&map=dublin	Find a GP search in Dublin
13.	/library/	Library section
14.	/index.cfm/loc/4.htm	GP Training section
15.	/index.cfm/loc/6.htm	Courses, Projects & Programmes section
16.	/index.cfm/loc/120/action/home/	Users returning to homepage
17.	/index.cfm/loc/120/action/viewcategories/category_id/10129/forum_id/2.htm	Diploma in Management in Practice discussion board
18.	/index.cfm?loc=11&pt=13&action=search&practitioner_type=1	Find a GP search by GP name
19.	/index.cfm/loc/24.htm	E-learning section
20.	/index.cfm/loc/18.htm	Exam & Membership section
21.	/index.cfm/loc/2-2.htm	Contact us section
22.	/index.cfm/loc/9.htm	Management in Practice section
23.	/index.cfm/loc/8-9.htm	Forum subsection of the Library
24.	/index.cfm/loc/2.htm	About Us
25.	/index.cfm?loc=101&function=distancelearning&action=home&view=reports&course=3266822&module=	Users accessing e-learning courses

CURRENT STATUS

There have been a number of developments during the year May 2007 to April 2008:

GP Training Programme Intake 2008

In January 2008, this year's GP training programme intake took place entirely online. 363 applicants applied for 121 available places using the system. This is the fourth consecutive year that the application process has taken place online.

MICGP Examination Intake 2008

For the third year running the MICGP examination application process was conducted online via www.icgp.ie. This has proved to be very efficient process and the feedback from examination candidates has been very positive. The closing date for the receipt of applications for the MICGP examination was Friday 18th January. The projected figure of candidates who will sit the MICGP examination 2007, based on the online applications is 326.

Quality Control of Website

In 2007 we bought the services of Site Improve a company that provides internet-based tools and services for the management and maintenance of websites and intranets. The ICGP website comprises 2,300 pages with over 5,000 links to outside websites which constitute a huge site to maintain. We have purchased the Site Check module for the ICGP website which checks the entire site for errors in spelling, links and accessibility. Site Check provides instructions of why and where issues occur, and clear recommendations on how to fix them and has greatly improved quality control on the website.

Online Publications

The following new publications launched during the year are available in electronic format via the library catalogue to members at www.icgp.ie/library:

- ^ Core Curriculum for General Practice Training.
- ^ Drug Related Deaths and Strategies for Prevention.
- ^ General Practice Software Management Systems: The Requirements for Certification 2007.
- ^ GPIT Policy Document on Acceptable Usage of the Internet.
- ^ Guide for Primary Care Staff on Alcohol Problems.
- ^ Guide to the Production of ICGP Impact Documents.
- ^ Impact Document on Cardiovascular Disease in Women.
- ^ Impact Document on Prostate Screening.
- ^ Joint HSE/DOHC/ICGP/Irish Endocrinology Diabetes Guidelines.
- ^ Key Contacts Resource on Care of Women after Abortion (jointly with CPA).

- ^ Scanning and Shredding Documents: A Discussion Paper.
- ^ ICGP Strategic Plan 2008 – 2013.
- ^ Working with Opiate Users in Community Based Primary Care.
- ^ No Data, No Business: Information Communication Technology (ICT) Security Guidelines.

FUTURE PLANS

Redesign ICGP Website and MYICGP area

We are currently working on redesigning the existing ICGP website to provide a new and fresh interface and improve navigation. We are also developing the MyICGP section of the ICGP website to enhance members' access to electronic services and content. Once a member of the College logs onto the website using their ID and PIN they will be automatically directed to this area which will contain personalised content.

Marketing & Promotions

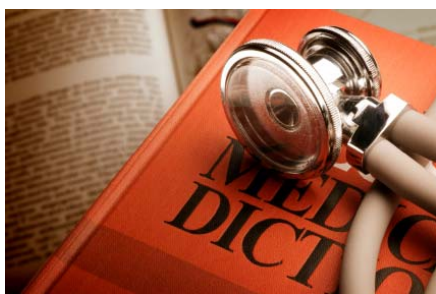
During 2008-2009, a considerable effort will be put into improving the profile of the College and its website among members, College sub-groups and outside bodies. See the Public Relations and Communications Report.

Annual Updates

- ^ E-Learning section– live by 31st July 2008. Requirements to be compiled.
- ^ GP Training Application – live by 2nd January 2009. Requirements to be compiled.
- ^ MICGP Exam Application – live by 1st November 2008. Requirements to be compiled.

Angela Byrne, Web & Communications Manager

www.icgp.ie



POSTGRADUATE TRAINING COMMITTEE

Report

The Postgraduate Training Committee, on behalf of Council, considers applications for membership, accredits specialist training programmes for general practice and promotes development in training and assessment in general practice. Subcommittees of the PGTC deal with programme assessment, the MICGP Examination, MICGP appeals, Register of Medical Specialist applications, applications under EU Directives (Certificates of Specific Training), Certification of Satisfactory Completion of Training and Curriculum Development.

MEMBERS OF THE COMMITTEE

- ^ Dr John Delap (Chairman)
- ^ Dr Marie Carmody-Morris
- ^ Dr Thomas Foley
- ^ Dr Michael Griffin
- ^ Dr Karena Hanley (Chair of the Certification Committee)
- ^ Dr Velma Harkins
- ^ Dr Dan Hinds (Chair NAPD)
- ^ Dr Ursula Keegan

- ^ Ms Maria Leahy
- ^ Dr Donal McCafferty
- ^ Dr Genevieve McGuire (Chair of the Assessors)
- ^ Dr Michael O'Doherty
- ^ Dr Margaret O'Riordan (National Director of GP Training)
- ^ Dr Molly Owens
- ^ Dr Kevin Quinn (Chair of the MICGP Examiners)

SUBCOMMITTEE TERMS OF REFERENCE

Certification Subcommittee

The Certification Subcommittee's role is to advise the Medical Council on submissions it receives with regard to eligibility for entry onto the Specialist Medical Register in General Practice, or to granting of a Certificate of Specialist Training/Acquired rights (CSTAR) and to advise the Postgraduate Training Committee (PGTC) of the ICGP on eligibility for membership of the ICGP.

Assessors Subcommittee

The Assessors Subcommittee's terms of reference are to analyse programme visit reports and make recommendations to the PGTC, review Criteria/Guideline Documents and liaise with other appropriate training bodies, administer programme accreditation visits; to review and recommend on the expansion/extension of programmes and review programme director/trainer/trainee contracts in the educational context of the aims and objectives of GP specialist training.

MICGP Examination Sub-Committee

- ^ Operational: to deliver the MICGP Examination year by year in accordance with the policy established by Council/PGTC.
- ^ To review the performance of the Examination annually in conjunction with the PGTC.
- ^ To review and recommend on new modes of assessment and changes to the Examination.
- ^ To advise on policy/strategic development of the Examination and assessment generally in conjunction with the PGTC.

The Examination Subcommittee has decided to undertake a review of the MICGP Examination and it is intended to appoint a project leader to facilitate this review.

MICGP Examination 2008

- ^ 256 candidates were registered for the Written Papers, and 253 candidates sat for the written papers.
- ^ 101 candidates are registered for the Oral Exam, 73 of whom are Oral candidates only.
- ^ The total number of MICGP 2008 applicants (all modules) is 329.

Curriculum Development Subcommittee

To review/recommend on training programme curricula/content – to include undergraduate and continuing professional development curriculum (by way of cross representation from Education Committee).

Certification of Satisfactory Completion of Training (CSCT) Sub-Committee/Coordinators

- ^ To nationally co-ordinate assessment policies of specialist training programmes in general practice.
- ^ To review/recommend criteria/process for granting the Certificate of Satisfactory Completion of Specialist Training in General Practice (CSCT). The following items are included:
 - a. Criteria relevant to trainees/registrars prior to July 2004 intake:**
 - Item 1: Completing of three years training at full registration level which must include a minimum of eighteen months hospital experience and twelve months GP experience, attached to a recognised training practice.
 - Item 2: Satisfactory attendance at release courses defined as:
 - (a) Attending 75% or more meetings over the training period.
 - (b) Participating actively in group activity.
 - (c) Completion of a research project – group or personal.
 - b. Criteria relevant to trainees/registrars from July 2004 onwards:**
 - Item 1: Hospital logs compiled by trainees.
 - Item 2: Hospital consultant teachers' reports.
 - Item 3: GP training logs compiled by registrars.
 - Item 4: GP trainer's reports.
 - Item 5: Programme director's reports.
 - Item 6: Video-recorded real-patient consultations' analyses by registrars.
 - Item 7: Cardio pulmonary resuscitation certificates to be acquired by trainees/registrars.
 - Item 8: Women's health logs satisfactorily completed by trainees/registrars.
 - Item 9: Research projects by registrars.
 - Item 10: Final certificates issued by steering committees.
- ^ To undertake tasks designated by the PGTC from time to time.
- ^ To liaise with the Curriculum Development Subcommittee.

ACTIVITIES/TASKS DURING YEAR

- ^ Training Programmes at TCD, Dublin and the North East have been fully reaccredited for a further five years. A criterion visit to the Mid Leinster satellite/teaching centre in Naas was successful.

- ^ 142 members were admitted to the College in the past year. 89 were successful candidates at the MICGP examination. 53 were admitted by other avenues.
- ^ In 2008 the Assessors group will visit the Cork and Dublin/Mid Leinster (Midlands) training programmes. A criterion visit is planned for the Ballinasloe programme.
- ^ A proposal for phase two training which offers GP training to those who have completed suitable hospital training was agreed by Council and submitted to the HSE for funding. Consideration is ongoing.

Pictured at the 2007 MICGP Graduation in the Royal Hospital Kilmainham are: Dr Kate Murphy and Dr Lynn Spooner with Dr Brian Osborne who received the Ellard Eppel Trophy.



STATEMENT OF ACHIEVEMENTS/OUTCOMES

- ^ A new specialist training programme has been established in Ballinasloe with the first intake of trainees commencing on the 1st July 2007.
- ^ Reciprocal arrangements were agreed with the Royal Australian College of GPs for the mutual recognition of the MICGP and the FRACGP.

FUTURE PLANS

Dr Aisling Lavelle has been recruited as Director Certificate of Satisfactory Completion of GP Training. The criteria for the accreditation of postgraduate training programmes are under review, and will be published during 2009, for implementation in 2010.

Our target, agreed with the DoHC and the HSE, is for 150 training places each year. In 2008 120 trainees will commence training. Plans to recruit additional trainees were suspended in December 2007 when the HSE withdrew its commitment to additional funding for 2008.

ADMINISTRATIVE RESOURCE

Deirdre Collins provides excellent administrative support from ICGP.

John Delap, Chair PGTC



SPECIALIST TRAINING IN GENERAL PRACTICE

Report

The National Director of Specialist Training in General Practice has a role in supporting and assisting the main stakeholders involved in Irish GP training namely the National Association of Programme Directors (NAPD), the National Association of GP Trainers (NATGP), the National Association of GP Trainees (NAGPT), the staff and steering committees of GP training programmes, the ICGP Assessors group and the MICGP examiners. National conferences are organised for existing and new GP trainers and for GP trainees. Liaison with external regional, national and international groups involved with training for general practice is also undertaken.

ACTIVITIES DURING PAST 12 MONTHS

The National Steering Committee for GP Training (which includes representatives of all the main stakeholders in GP training and the HSE) met on a regular basis in 2007 and put together plans for expansion of GP training places from 120 to 133 nationally. This included a new training programme for north Dublin inner city.

In December 2007, when the training positions were due to be advertised, the ICGP were informed by the HSE that funding for this expansion was not available. At a time when general practice is experiencing a manpower crisis, and a primary care led health service is being promoted as the way forward for the health sector, this decision is regrettable and extremely short-sighted. The work undertaken by the NSC and the development of GP training has been dealt a severe blow by this lack of support.

MAJOR ACHIEVEMENTS

- ^ Establishment of new South West GP Training Programme in Tralee. The new training programme in Tralee was launched in March 2008 and will have an intake of six trainees per annum. The programme directors are Dr John Casey and Dr Bertie Daly. This training programme launch was only achieved due to the Cork GP training programme reducing its intake. This situation arose as a fall-out from the aforementioned failure to fund an increase in training places.
- ^ Core curriculum for GP training in both paper and electronic format launched at the ICGP AGM in May 2007.
- ^ Appointment of Dr Aisling Lavelle as Director Certificate of Satisfactory Completion of GP training appointed April 2008.

ONGOING ACTIVITIES

A. Courses/Conferences

- ^ Participation in NAPD meeting April 2008 and attendance at NAPD executive meetings.
- ^ Organisation of and participation in:
 - NAGPT Workshop, October 2007.
 - New Trainers Workshop, November 2007.
 - NAGPT Workshop, February 2008.

B. Committees

- ^ Chair ICGP Quality in Practice Committee.
- ^ Member ICGP Curriculum Development Committee.
- ^ Member ICGP Postgraduate Training Committee.
- ^ Member ICGP Education Committee.
- ^ Member ICGP Finance Committee.
- ^ Member of Advisory Committee ICGP Quality Indicators Project.
- ^ Member NAPD Executive Committee.
- ^ Member National Steering Committee for GP Training.
- ^ Member National Medical and Education Committee (and Postgraduate Training Subcommittee).
- ^ Member Postgraduate Medical and Dental Board (and Finance Subcommittee).
- ^ Member of the National Implementation Group for the European Working Time Directive.

- ^ Member of Steering Committee for the National Audit of SHO and Registrar Posts (report due April 2008).
- ^ Member General Professional Training Committee of the Royal College of Physicians of Ireland.

Dr David Pendleton speaking at the ICGP National Trainers Workshop 2008



C. Research/Publications

- ^ O’Riordan M, Skelton J, and de la Croix A. *Heartlift Patients? An Interview Based Study of GP Trainers and the Impact of “Patients they Like”*. Submitted for peer review publication.
- ^ O’Riordan M, *GP Training in Ireland*. Outback. January 2008.
- ^ *The ICGP Quality Committee* - Forum AGM supplement 2008.
- ^ Member of Delphi panel for ESRI study on *National Longitudinal study on children in Ireland*.
- ^ Contributor to ICGP Strategic Plan 2008-2013, policy papers and responses to various initiatives e.g. HSE METR strategy and implementation plan.
- ^ Judge Crystal Clear Awards – national awards to promote health literacy.
- ^ Judge annual ICGP quality in practice prize.
- ^ Judge annual GP registrar research prize, ICGP AGM.
- ^ Judge south east GP training programme GP registrar research prize.

D. Presentations

- ^ Workshop “ICGP/ISQSH Quality Award Finalists” - AGM, May 2007.
- ^ Workshop “Dealing with Uncertainty” - ICGP Summer School, Kilkenny, June 2007.
- ^ Workshop “Opportunities in GP Education” - ICGP Summer School, Kilkenny, June 2007.
- ^ Sligo GP trainees, March 2008 – “Using the Core Curriculum”.
- ^ Workshop “Dealing with Uncertainty” - WONCA Paris, October 2007.
- ^ ICGP Winter Meeting, IMI Dublin, November 2007 - “How do we Assure”.
- ^ South East GP trainer’s workshop, Waterford, November 2007 - “Teaching with the Core Curriculum”.
- ^ National GP Trainers Workshop, Tullamore, February 2008 - “Teaching the Art of General Practice”.
- ^ North east GP trainers group, Cavan, March 2008 – “Teaching with the Core Curriculum”.

- ^ Ballinasloe GP trainees, March 2008 – “Using the Core Curriculum”.
- ^ Presentation at launch of South west GP training programme, Tralee, March 2008.

E. Liaison

Liaison with the HSE, Department of Health and Children, Postgraduate Medical Training bodies and the Medical Council.

Dr Ronan Clancy, Dr Michael O'Doherty, Dr Elyce McGovern and Dr Kerry O'Connell at the National Association of GP Trainees held in October 2007.



FUTURE PLANS

The expansion of GP training places remains a top priority for the ICGP in 2008. Linked to this is the need for a GP manpower strategy as a matter of urgency. The appointment of Dr Aisling Lavelle as Director of Certificate of Satisfactory Completion of Training is a welcome development and I look forward to working closely with her in the coming year.

ADMINISTRATIVE RESOURCES

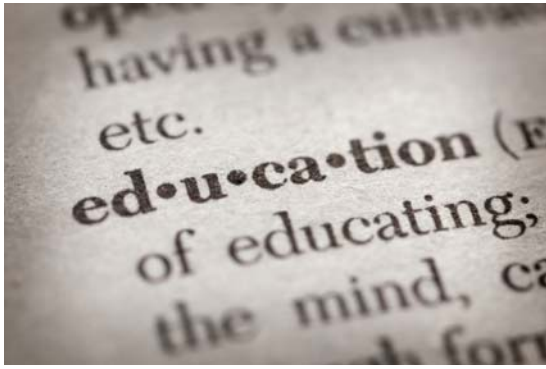
Ms Pauline Tierney and Ms Niamh Killeen provide indispensable administrative support. Their skills in conference organisation ensure that the GP trainer and trainee conferences are a great success every year. I would like to thank them sincerely for their ongoing support and professionalism.

FUNDING SOURCES

I would like to thank the METR unit from the HSE for their support for the development of the Core Curriculum.

Dr Margaret O Riordan, National Director of Specialist Training

www.icgp.ie/gptraining



CHAIR OF EDUCATION COMMITTEE

Report

This is my first year as Chair of Education and it is a time of change in the role and structure of the Education Committee. To function effectively and to serve a useful purpose for the ICGP, the Education Committee must fulfil a role that reflects the needs of the Council, Executive, and the wider GP membership. An important task in the months ahead, in line with the College Strategic Plan 2008-2013, is to prioritise tasks and developments and to restructure the Committee, Subcommittees and resources accordingly.

To date three Subcommittees have reported to the Education Committee. These are Quality in Practice, Competence Assurance and Continuing Medical Education. The QIP Subcommittee continues its valuable work under the expert guidance of Margaret O’Riordan. This remains unchanged.

As competence assurance becomes more central to the lives of College members, with the implementation of the new Medical Practitioners Act, it is more appropriate that this Subcommittee be separated from within the Education Committee remit. It is proposed that Competence Assurance should have a standing committee status of its own.

Following on from new competence assurance structures the educational and administrative needs of GPs will become more apparent over the next year or so. As the changing role of the College in meeting these needs also takes shape, the constituency and function of a Competence Assurance Committee will become more apparent. The new standing committee will then be structured as needed and subsequently proposed as part of new College bylaws.

The role of the CME Subcommittee will also be re-examined with a view to making more streamlined its overview function of educational provision. This will facilitate its role in quality assurance as regards the content of continuing medical education. It is planned to foster the CME Subcommittee's potential of bringing together in useful dialogue the many providers of quality general practice education in Ireland. A number of ways to achieve this are planned, and will be proposed and reported in due course.

The role of education in the College is central. Feedback from members on any aspect of the education agenda is welcomed and encouraged. Much of the ongoing discussion will be undertaken by way of the Education discussion board on www.icgp.ie. Members are welcome to join this discussion board by contacting the education administrator, Yvette Dalton at yvette.dalton@icgp.ie.

The range of postgraduate education programmes and projects are reported in detail elsewhere. Many thanks to the Committee members and all at ICGP headquarters for their support over the past year.

Dr Mary Favier, Chair Education

QUALITY IN PRACTICE SUBCOMMITTEE

MEMBERS OF COMMITTEE

Chairperson

Dr Margaret O Riordan.

Committee Members

Dr Mel Bates, Dr Michael Boland, Mr Dermot Folan, Ms Maria Leahy, De Elizabeth Maxwell, Dr Ailis Ni Riain, Dr Seamus O Baoighill, Dr Ray O Connor, Dr Ben Parmeter, Dr Sheila Rochford.

SUMMARY OF COMMITTEE

The ICGP Quality in Practice Committee (a Subcommittee of the Education Committee) produces impact documents and guidelines on clinical and non-clinical areas on topics of relevance to general practice. In many instances these documents are produced in conjunction with outside bodies. The Quality Committee also supervises the competition for the annual ICGP Quality Improvement Award (sponsored by the Irish Society for Quality and Safety in Healthcare).

Ms Shirley Ross (practice nurse at the Medical Centre, Church Street, Moate, Co Westmeath) receiving the Quality in Practice award at the recent College AGM from Ms Marie Kehoe from the Irish Society for Quality in Healthcare. Shirley won the award for her report on how her practice introduced near-patient testing machines for INR, HbA1c, lipids, glucose and urinalysis for micro albumin/creatinine ratio.



STATEMENT OF ACHIEVEMENTS/OUTCOMES 2007-2008

^ Annual ICGP Quality Improvement Award (sponsored by the Irish Society for Quality and Safety in Healthcare) to be presented at ICGP AGM May 2008.

^ *Impact Document on Prostate Screening in General Practice* to be launched at ICGP AGM May 2008.

- ^ *Domestic Violence – A Guide for General Practice* (in conjunction with ICGP Women’s Health programme, HSE and the Department of Justice and Law reform) to be launched at Women’s Health Conference, June 2008.
- ^ A practical guide to integrated diabetes care (in conjunction with Irish Endocrinology society, HSE and Department of Health and Children) is awaiting publication by the HSE.
- ^ The committee also has the remit of assessing guidelines (intended for use in general practice) produced by outside bodies requesting ICGP endorsement.

DETAILED COMMITTEE DESCRIPTION

Quality Improvement Award

Nine entries have been received for the 2008 Quality Improvement Award. Entries detail improvements or innovations implemented in a general practice setting in Ireland, whether of a clinical or practice management nature. All general practice staff including non-clinical were eligible to enter the competition. The Irish Society for Quality and Safety in Healthcare has sponsored the award since its inception. The same procedure will be followed as for last year – entries will be short-listed and the four finalists will be asked to present at a workshop at the ICGP AGM in May 2008. The judges are Dr Mel Bates, Dr Claire Collins, Dr Ben Parmeter, Dr Margaret O Riordan and Ms Marie Keogh (President ISQSH).

Impact Document on Prostate Screening in General Practice

Dr Darach O’Ciardha, Mr Rustom Manecksha and Dr Michael Boland have written a comprehensive guide to screening for prostate cancer in the general practice setting. The impact document is intended to encourage reflection on approaches to screening for prostate cancer. It has been developed to assess current practice and to inform future directions in this area.

Domestic Violence – A Guide for General Practice

Dr Naoimh Kenny and Dr Ailis Ni Riain have produced a very useful document on Domestic Violence. This is a very important area with very little in the way of publications for general practice. This document represents a joint HSE, Department of Justice and Law reform and ICGP publication.

A Practical Guide to Integrated Diabetes Care

A practical guide to integrated diabetes care has been written. Dr Velma Harkins has played the lead role on behalf of the ICGP in this production. The document represents the combined efforts of the ICGP, Irish Endocrinology society (Consultant Endocrinologists), HSE and Department of Health and Children. It will be published by the HSE and is anticipated that it will be widely available shortly.

Guidelines Produced by Outside Bodies for Consideration by Committee Prior to ICGP Endorsement

An application form and guidelines for use of the ICGP logo by outside agencies has been produced by the Quality Committee and endorsed by the Education Committee. An example of this is an application for use of the ICGP logo on a forthcoming publication by Dr Blanaid Gavin and the DETECT group on the management of patients with schizophrenia in primary care.

FUTURE PLANS

The committee are currently working on the following:

- ^ Impact document on Sexual Orientation (in conjunction with the Gay and Lesbian Equality Network).
- ^ Impact document on Haemochromatosis in General Practice (in conjunction with the Irish Haemochromatosis Association).
- ^ Impact document on Asthma (in conjunction with the Irish Asthma Society).

Concerns have been expressed re the implementation of impact documents developed by the committee and the committee will develop a detailed plan to maximise their use over the coming year.

ADMINISTRATIVE RESOURCE

Ms Yvette Dalton ICGP continues to provide a very high standard of administrative support to the committee with a strong focus on quality in everything she produces.

Dr Margaret O'Riordan, Chairperson

www.icgp.ie/qip



EQUIP

Report

EQUIP is a WONCA (World Organisation of Family Doctors) working group on quality in European general practice. The aim of EQUIP is to foster and maintain high standards of quality in general practice in all European countries, and therefore to contribute to the achievement of high levels of quality of care for patients. EQUIP provides a structure for collaboration and exchange of expertise and methodology and by initiating projects on development and evaluation with regard to Quality Improvement (QI).

MEMBERS OF GROUP

National Delegates from Ireland

Dr Michael Boland, MICGP.

Dr Andrée Rochfort MICGP.

Other Members of Group

Twenty-eight European countries are involved in EQUIP work.

EDUCATIONAL AIMS

QI for general practice is a continuous process of planned activities based on performance review and setting of explicit targets for good clinical practice with the aim of improving the quality of patient care. The members of EQuIP agree that QI should be:

- ^ The responsibility of the medical profession.
- ^ An integrated part of medical education.
- ^ Be patient centred.
- ^ Covering all aspects of patient care.
- ^ Enhancing the appropriate use of medical services.
- ^ Acknowledging the specific strategies of family medicine/general practice.

A new EQuIP Executive Board was elected at the EQuIP meeting in Paris October 2007 by secret ballot.

- 1 President: Joachim Szecsenyi, Germany.
- 2 President Elect: Tina Eriksson, Denmark.
- 3 Hon Secretary: Janko Kersnik, Slovenia.
- 4 Hon Treasurer: Andrée Rochfort, Ireland.
- 5 Member at large: Marianne Samuelson, France.
- 6 Member at large: Kees in't Veld, Netherlands.

The new Executive will be in office from May 2008.

EQuIP organises closed meetings (confined to national representatives only) twice a year for internal work among delegates, in relation to EQuIP aims:

- ^ Task forces (e.g. professional health, ethics).
- ^ Organisation of future open meetings.
- ^ Participation in research networks and projects related to quality improvements in general practice.

Every second year EQuIP hosts an open invitational conference, aimed at spreading ideas, new methods, improvements, and networking, among general practitioners, primary health care academics, stakeholders, and opinion leaders in the different countries.

- ^ Next EQuIP closed meeting is in Bergen, Norway: 22nd – 24th May.
- ^ Next EQuIP invitational conference is scheduled for Bucharest, Romania: November 2008 (date and theme to be confirmed).

Currently I am involved in Task Force on Professional Health as one factor associated with the quality of patient care. We have conducted a survey of EQuIP members and the report is being written up with a view to publication. As a member of the Executive Board I am involved with preparation for the May meeting in Norway where we will propose our strategies for the coming year, including areas of collaborative research and new task forces.

GROUP ACTIVITIES/TASKS

I attended the meetings in Prague, April, and Paris in October as national delegate. ‘At the Heart of Quality Care - Physician Health’ was the title of the EQuIP workshop, which I presented at WONCA Europe in Paris in October 2007 with two EQuIP colleagues, Beat Kuenzi, Switzerland and Luc Lefebvre, Belgium. Two other EQuIP workshops at WONCA were on ‘Uncertainty’ and the ‘European Practice Assessment’ tool.

Andrée Rochfort, MICGP



DIRECTOR POSTGRADUATE CENTRE Report

I am pleased to report another successful year of postgraduate activity at ICGP. Eleven years have passed since the establishment of the Postgraduate Centre at the College. In that time many projects have been proposed, developed, elaborated, marketed, implemented and evaluated. Most have been well supported and successful – some outstandingly so. All have been devised to facilitate ICGP members in providing best quality services to their patients.

None of these programmes could have been realised or have achieved success without their individual administrative support staff in the College. We are very fortunate in having staff members that remain good humoured and flexible in spite of tight deadlines and frequent changes of plan. I particularly wish to thank my personal assistant, Ms Orla Sherlock, for her work throughout the past year.

During that time we have seen a growing number of educational activities, using many different methods to increase the quality of GP services available to patients. Projects vary greatly in scale. For example ‘GP CME’ is a long established programme involving over 1,600 GPs throughout the country.

E-Learning Unit

In summary, the E-Learning Unit and College based courses includes more than 500 GPs in 21 distinct courses often involving participants in a substantial personal time commitment. Many courses include some limited ‘face-to-face’ time. The model has proved to be highly effective and convenient.

Heartwatch and Chronic Disease Management

Management of patients with chronic illness in general practice is now universally recognised as a major challenge for all of us in the coming decade. What is becoming increasingly clear is that the management of each chronic illness separately is impractical in general practice. Many patients have several diagnoses and need the integrated care approach possible only in general practice. This will be not just a clinical challenge but an educational and IT one as well.

The latest addition to the list of chronic conditions to be addressed is heart failure. Heartwatch remains the best developed template for chronic illness management in Ireland. Its clinical and cost effectiveness are proven beyond doubt. Its infrastructure remains intact and can deliver chronic care if allowed to do so. It again highlights the urgent need to agree a way forward for chronic disease management generally and for Heartwatch in particular. WHO has identified chronic disease management as the major global health challenge.

INDC

The Independent National Data Centre (INDC) - developed to enable national gathering of chronic disease and other clinical information from primary care/general practice – is in itself an invaluable resource for informed policy going forward and currently involves 470 GPs in 300 practices (approx. 20% of total) participating on a voluntary basis for the purposes of Heartwatch.

Academic Practice

‘Academic Practices’ was a project launched to provide an opportunity for a small number of graduates of the GP training programmes to spend an additional two years in developing their proficiency in research, teaching and practice. It has achieved its objectives in creating such a model in Galway and in also bringing together the GP training programme, the University Department of General Practice, and the academic practice itself in a very productive partnership. For individual senior registrars it has provided a unique opportunity to extend their teaching and research skills. It should be expanded.

Given the scale of postgraduate activity at the College, it is becoming increasingly difficult to summarise, even in the most general terms. There is now a wealth of educational opportunities from which College members can choose.

Alcohol

Our programme on ‘Helping Patients with Alcohol Problems’ continues to focus attention on this most urgent problem particularly involving young people. The programme, led by Rolande Anderson, has adopted a wide ranging strategy to educate and remind College members, those in GP training and the wider public about the need for action in this area. He has lectured and written extensively on the need for national action in the area. He has been tireless in contributing to courses, conferences, and in using the media to reinforce the message. He has proposed an initiative on alcohol and poverty. Ireland has contributed to the EU ‘PHEPA’ Project on Alcohol.

GPIT Training and Support

Ten GPIT Tutors led by Dr Brian Meade provide support and training to practices. Much of this is onsite in the practice. The tutors also fulfil the increasingly important role of liaison with HSE nationally and locally on ICT issues. The computerisation of practice has been in Ireland has forged ahead as a result. So much so that practices are now looking to a new range of IT communications with hospitals, Out of Hours Co-ops and diagnostic facilities which could revolutionise practice as we know it.

Electronic Disease Surveillance/The Health Protection Surveillance Centre/Virus Reference Laboratory

This is a network of 52 sentinel practices co-ordinated by Dr Michael Joyce and Ms Olga Levis. They coordinate the collection of weekly information on infectious disease – particularly influenza surveillance. It also covers the common viral illnesses, shingles and gastroenteritis. Data is cleaned, prepared, and forwarded to ICGP and HPSC. This year it will operate for the full 12 months and hopes to increase the number of participating practices to 60. Most importantly this agency is key to the early warning system for the next influenza pandemic.

Cognitive Behaviour Therapy

This is a form of psychological therapy particularly suitable for use in general practice. It teaches patients how to identify and change certain beliefs and interpretations which are preventing them going forward in their lives. GPs, if suitably trained, can help patients to address their particular difficulties thereby avoiding or improving depression, chronic anxiety and a range of other behavioural problems. The project has been running since June 2004, and involves intensive training modules run by a qualified behavioural therapist. The courses have been well attended and usually run over a number of weekends throughout the country. Feedback from participants has been very encouraging.

Women's Health

Women's health has been amongst the busiest and most successful areas of education in the College. The Family Planning Certificates, the Young Peoples Project, the 'Breast Check' information pack, the Course on Long Acting Reversible Contraception, backed up by an impressive list of publications, reports, lectures and presentations – all are testimony to the enthusiasm for excellence in this area. The upcoming annual Women's Conference is not to be missed.

The Drug Misuse Programme

This programme has been running since 1998 congratulations on ten years of quiet progress and success. Updated guidelines, expansion of training, and particularly Level 1 training in methadone management are further milestones of success. The extension of the programme to a number of regional centres around the country is a particularly important development as the heroin problem goes nationwide. The audit process which provides quality control for the programme deserves particular praise.

General Practice Indicators of Quality

This three year project will produce and test a set of quality indicators for practice. It addresses practice staff professional values, practice management and patient communication. Only areas of improvement under the control of practice staff are included. Based on relevant international indicators, a modified Delphi research method will be used to choose those relevant to Ireland. These will be tested in the Irish GP setting and modified if necessary. Patient input is also being sought. The project is funded by HIQA. Care has been taken to convene an Advisory Group for oversight including international expertise. An Indicator Group will assist in the choice of indicators and includes all GP based professionals and patient representatives. Following the development of the indicator set using the Delphi Technique, the practices will be recruited to test the indicators. The project will run until 2010.

I have avoided naming individuals in this overview of the past year – it would be invidious to do so. So many people contribute to our success – the College leadership and members, the project leaders, and particularly the College staff, without whom none of this activity would happen.

Recently published information suggests that the Irish GP service, in contrast to other parts of the health service, is functioning very effectively and achieving high levels of patient satisfaction. I would like to think that, if true, such patient confidence is a product of excellent GP training and continuing medical education resulting in GPs who have a strong ongoing commitment to best practice and excellence.

On a personal note I would like to thank the CME tutors who invited me to their workshop resourced by Dr. David Pendleton. In 1981 he had travelled to West Cork to facilitate the first CME groups established in Ireland. It was a pleasure to meet him again.

Michael Boland, Director Postgraduate Centre



E-LEARNING UNIT

Report

The Education Courses/E-Learning Unit is responsible for both developing and delivering relevant and up to date courses to ICGP members. In recent years we have also offered some courses to practice nurses and other health care professionals.

The aim of the Education/E-Learning Unit is to provide general practitioners and health care professionals with a practical update on identified course topics that are relevant and applicable to their everyday practice. It aims to provide these in a format that recognises the reality of the busy and stressful work of GPs and through the use of educational methodologies that match the learning styles of members.

For the academic year 2007 – 2008, we facilitated 12 different courses of study which involved 15 assessors in our three-prong assessment process. We also have 14 clinical course tutors who are responsible for keeping the course material up to date, as well as academic support for our Diploma Course in Therapeutics from the Department of General Practice in UCC.

MEMBERS OF DISTANCE LEARNING UNIT

- ^ Nick Fenlon: Director
- ^ Louise Nolan: E-Learning Unit Administrator.
- ^ Aine Walsh: E-Learning Unit Administrator.
- ^ Margaret Cunnane: Administrator of Diploma in Management in Practice Course.
- ^ Gillian Doran and Patricia Patton, ICGP Librarians, available to unit and course participants on request.
- ^ Angela Byrne, IT, available to unit and course participants on request.

PROGRAMME ACTIVITIES

In 2007/08 we delivered the following course:

- ^ Diploma in Therapeutics (1 year course and modular course).
- ^ Diploma in Women's Health (1 year course and modular course).
- ^ Certificate in Palliative Care.
- ^ Certificate in Diabetes Care in Ireland.
- ^ Certificate in Diabetes Care in Malta.
- ^ Postgraduate Certificate in Medical Education (in collaboration with Queen's University, Belfast).
- ^ Masters in Medical Education (in collaboration with Queen's University, Belfast).
- ^ Theory Course for Cervical Smear takers.
- ^ Occupational Medicine – leading to LFOM (in collaboration with the faculty of Occupational Medicine).
- ^ Certificate in Mental Health.
- ^ Certificate in Management in Practice.
- ^ Advanced Course in Cognitive Behaviour Therapy.
- ^ Clinical Update Road Shows.
- ^ Annual ICGP Summer School.

PROGRAMME DESCRIPTION

Course/Educational Event	Number Attending	Participants
Diploma in Therapeutics	18	GPs
Certificate in Palliative Care	15	GPs
Diploma in Women's Health	29	GPs & practice nurses
Diploma Practice in Management	28	practice managers
Certificate in Diabetes Care (Ireland)	13	GPs
Certificate in Diabetes Care (Malta)	30	GPs
Postgraduate Certificate in Medical Education	15	Multi disciplinary
Occupational Medicine Year 1	17	Multi disciplinary
Occupational Medicine Year 2	11	Multi disciplinary

Masters in Medical Education	21	Multi disciplinary
Mental Health	5	GPs
Course for Cervical Smear Takers	121	Practice Nurses & GPs
Advanced CBT	18	GPs
Clinical Update Road-show	30	GPs
ICGP Summer School	118	GPs
Total	489	

STATEMENT OF ACHIEVEMENTS/OUTCOMES

	1999/ 2001	2001/ 2002	2002/ 2003	2003/ 2004	2004/ 2005	2005/ 2006	2006/ 2007	2007/ 2008
Diploma in Therapeutics	49	45	25	16	16	18	30	18
Diploma in Prevention	N/A	N/A	20	15	1	N/A	N/A	N/A
Certificate in Palliative Care	N/A	N/A	31	12	25	13	13	15
Diploma in Women's Health	N/A	N/A	N/A	46	38	16	23	29
Certificate in Diabetes Care	N/A	N/A	N/A	N/A	17	14	16	43
Postgraduate Certificate in Medical Education	N/A	N/A	N/A	N/A	20	23	21	15
Occupational Medicine Year 1	N/A	N/A	N/A	N/A	N/A	27	17	17
Occupational Medicine Year 2	N/A	N/A	N/A	N/A	N/A	N/A	23	11
Course for Cervical Smear Takers	N/A	N/A	N/A	N/A	N/A	145	134	121
Management in Practice	N/A	N/A	N/A	N/A	N/A	N/A	25	28
Masters in Medical Education	N/A	N/A	N/A	N/A	N/A	N/A	26	21
Mental Health	N/A	N/A	N/A	N/A	N/A	N/A	11	5
Advanced CBT	N/A	N/A	N/A	N/A	N/A	N/A	6	18
Clinical Update Road-show	N/A	N/A	N/A	N/A	N/A	N/A	64	30
ICGP Summer School	N/A	N/A	N/A	N/A	N/A	N/A	N/A	118
Total	49	45	76	89	117	256	409	489

FUTURE PLANS

For the academic year 2007/2008 we will be facilitating the second ICGP Summer School which will be held from June 24th to June 27th 2007 in the Lyrath Estate Hotel, Kilkenny. Building on the success of last year, this venture will consist of a broad range of short presentations with something to suit everyone. The Summer School will include topics from therapeutics, practice management, minor surgery, IT, legal and ethical issues. There will also be an interesting parallel social calendar running throughout the week including sessions on creative writing and photography. A site visit to St Luke's Hospital, Kilkenny will also take place during the Summer School where hospital GP interface will be examined.

Other new ventures include:

- ^ We have begun the process of applying for HETAC accreditation for all ICGP courses. The first stage is the formulation of College quality processes and procedures.
- ^ We will be launching a new course in Geriatric Medicine for GPs in September 2008.

ADMINISTRATIVE RESOURCE

The Distance Learning Unit now has one full time administrator, Louise Nolan, and one part-time administrator – Aine Walsh. Louise has worked in the unit for the past seven years while Aine Walsh was appointed to the post in June 2007. Louise Nolan is also administrator for both the Clinical Update Road-shows and the ICGP Summer School. Both have been great assets to the unit.

Nicholas P Fenlon, Director

www.icgp.ie/dlu



CME SMALL GROUP NETWORK Report

The national CME tutor network continues to provide general practitioners with locally based CME in a small group format. The educational modules provided are relevant to the needs of an ever-changing general practice landscape. Small group CME takes place in the context of the availability of other CME formats: seminars, courses, CD ROMs, e-learning packages and educational courses via the internet. It is a credit to the local tutors that the monthly small group meetings remain the most popular educational activity for most GPs in Ireland.

The small group tutor network is supported by the Postgraduate Medical and Dental Board [PGMDB] and accredited by the Irish College of General Practitioners (ICGP). Each tutor is funded to organise CME in his/her local area. The tutor network is thankful that the Board decided in 2007 that an allowance would be paid to group leaders who assist the tutor.

In relation to the small group meetings, each meeting is allocated two credits per hour for CAS (Competence Assurance Schemes) purposes, as each meeting is of two hours duration, four credits per meeting can be accumulated.

If all seven meetings per year were attended, twenty-eight credits could be accumulated which goes a long way towards fulfilling the yearly CAS requirement.

However, the accumulation of CAS credits is still a voluntary activity and doctors attend the small group CME meetings primarily to enhance the knowledge, skills, attitudes and judgement, necessary to improve the healthcare of patients in their community. The content of meetings is relevant to the practice of medicine in a general practice context and the content demonstrates high clinical and ethical standards. The local GPs are usually involved in the planning of their curriculum, by participation in a learning needs assessment exercise. The tutor, or a designated group leader, will lead each meeting. The learning objectives are clearly stated, the learning environment promotes the achievement of the stated objectives and the participants usually evaluate each session at the end. An attendance is taken and an evaluation report on each meeting is sent by the tutor to the National Director. The tutor provides each attendee with a certificate of attendance, which can be used for study leave purposes, (GMS contract holders only) or CAS purposes (the Medical Council's Specialist Register).

The focus of the small group CME schemes is on improving the doctor's clinical performance, so that, doctors or practice behaviour changes for the betterment of patient care. Some activities will lie outside this focus and concentrate on the profession's role in improving the healthcare of the community, which may, as a by-product, improve patient care. Such professional development activities include education, on non-clinical subjects, and participation in assessment exercises, research and/or audit activities and other QA processes. The tutor includes a range of these activities in their programmes.

There are almost 1900 doctors on the mailing list for this activity. There are many reasons other doctors in general practice do not attend, these include age, apathy, illness, other interests, family, location and timing.

Number of Schemes

There are 37 schemes in the country providing accessible small group continuing medical education for GPs in active general practice.

Number of Tutors

In 2008 there are 34 tutors appointed by the ICGP and employed by the Postgraduate Medical and Dental Board.

Number of New Tutors

In 2006 five new tutors began - Dr Pat Harold in Tipperary North, Dr Molly Owens in Tipperary South, Dr Karen Palmer in Dublin, Dr Donncha O'Cuill in Cork and Dr Scott Walkin in Mayo. There was only one new

appointment in 2007. Dr Ming Rawat has taken a year's leave of absence and Dr Mary Davin Power has taken over the Corrigan scheme until September 2008.

Number of Tutors Retiring

Two tutors have indicated their intention to step down. Dr Harry Casey has been a tutor in east Cork for 16 years and Dr Mary Favier has been tutor to Cork City for 10 years. Both have contributed greatly, both locally and nationally, to the establishment of CME as a trusted and effective method of delivering CME to GPs.

Number of Tutors Reapplying

A number of tutors have indicated their intention to reapply for the CME post when their 5-year contract expires. These posts will be advertised and any eligible doctor can apply. If there is more than one applicant an interview will be held.

	Tutor Name	Faculty	Reappointment due
1	Illona Duffy	Cavan Monaghan	01.09.08
2	Stephanie Dowling	Waterford	01.08.08
3	Tom English	Cork City A	01.09.08
4	Declan Larkin	Galway A	01.09.08

Number of Schemes Without Tutors

Three schemes are without tutors at present, Kildare, Dublin South West and East Midlands. I am hopeful that candidates will emerge from Kildare and East Midlands and interviews will be held before June 2008. In Dublin South West small group CME meetings continue to be held, lead and resourced on a voluntary basis, but no candidate has agreed as yet to apply for the tutor position. There is a real danger now that the funding for the scheme in this area will be lost.

Number of Participants

The small group CME meeting continues to be the most popular CME activity for GPs. The number of participants in this activity is steady at 1889. There were 7162 attendances in 2006/07. The 2008 figures are not complete as yet. There is an increasing demand in many urban areas and some tutors have waiting lists of participants. More GPs are joining the Medical Council Specialist Register. This brings an obligation to participate in CME activities. When the Medical Practitioners Act is signed into law this year then it will be compulsory to attend CME and accumulate yearly CME credits. The impact of these competence assurance measures will be commented on in future reports.

	2002/2003	2003/2004	2004/2005	2005/2006	2006/2007
Attendance	6359	6245	7007	6701	7162
Target Population	1744	1830	2016	1888	1889
No Small Groups	116	117	119	120	131
No Meetings	811	752	885	838	890

Number of Groups

The tutors have formed and are responsible for 131 groups. There are usually 15 to 18 GPs on a group mailing list. The group members are all GPs working in active practice in a particular area. Membership of the College [ICGP] is not a prerequisite for being a group member.

Participants will include established GPs, doctors working sessions or part-time in general practice, and newly establishing GPs. Each group will meet at least seven times throughout the academic year. The average attendance at any particular small group meeting is seven doctors.

Some doctors never miss a meeting; others attend two or three per year. The duration of each meeting is two hours. The meeting time is usually out of office hours, usually on an agreed evening each month. As there is no protected time for this activity during office hours, it is a credit to the professionalism of GPs that they give up their personal time to keep themselves up to date in this way. The topics covered will be common, important and usually problematic in a GP setting. The small group meetings are facilitated by a group leader, which may be the tutor, are interactive and involve peer discussion.

Sometimes relevant audit activities from practices are analysed. Each tutor engages in a learning needs assessment with the participants usually at the beginning of each term. The curriculum is decided and the tutor designs the objectives and meeting plan. The leader makes an assessment at the end of each meeting whether the stated educational objectives were achieved or not. A report of each meeting is sent to the National Director CME.

Number of Meetings

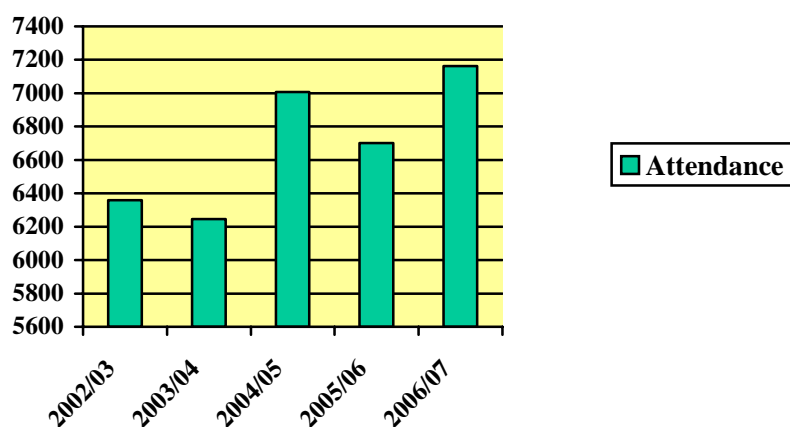
There were 890 small group meetings held in 2006/07. This represents a large volume of activity on behalf of the tutors and the participants. These meetings are not sponsored, by the pharmaceutical industry except on rare occasions. The meetings are resourced by the tutors. The tutors are funded by the PGMDB. These meetings are very influential in driving change at a practice level.

GROUP LEADERS

There were 43 group leaders in 2006/07. These doctors volunteer to assist the tutor by facilitating one or all meetings for the academic year. Some work with the tutor as a consultative group and help plan the meetings. All have responsibility to be briefed prior to the meeting and to debrief the tutor after each session. As mentioned, the tutor network is pleased that funding for the involvement of the group leaders is being recognised. A grant from the Board became available in the latter half of 2007 and is being administered by the ICGP. It is expected that the number of group leaders will increase in 2008.

Trends

Attendances in 2004/05 were the highest recorded. There was a drop in the numbers in 2005/06 due primarily to the fact that Tipperary was without a tutor. The agreement to appoint two tutors to Tipperary has resolved the situation and the numbers have recovered. In fact the attendances in 2006/2007 are now the highest recorded. They would be even better, of course in 2008, if the network had not lost tutors to Kildare, East Midlands and Dublin South West. There is also demand for another tutor to serve Dublin South West. If the network were complete then the number of attendances would reflect more accurately the enthusiasm of GPs for small group learning.



TUTOR NETWORK

The tutors continue to show their enthusiasm for the task. The tutors organise the venues, communicate the date, time and location of meetings. They post this information on the ICGP website. They carry out the learning needs assessment that defines the programme they provide. They run at least seven meetings per group per year. Most are responsible for four groups, therefore resource twenty-eight meetings per year. They devise a meeting plan to deliver the educational points they wish to get across to participants. They use evidence-based material where possible. They use the internet to assist them in this task.

The tutors themselves lead the majority of meetings. They train themselves or train others in group leading skills. They seek and use feedback from the participants. They brief and debrief group leaders. They send monthly attendance figures and an annual report to the National Director of CME schemes. They attend and contribute to three residential tutor workshops per year. They are the education officers to their ICGP Faculty Board. They liaise with others in the planning of local study days, seminars or courses. They provide certificates of attendance for competence assurance and study leave purposes. They do not have a role in remedial training. They participate in evaluation by attending at least one scheme assessment visit every three years.

TUTOR WORKSHOPS

There are three residential workshops per year. At these workshops, tutors present material to the participants. These topics can be fully worked up or a work in progress. Tutors learn about preparation and presentation and a topic may be put up on the web portal for use by other tutors in their local area. The topics also allow for analysis of leadership skills and every session has feedback on the quality and style of leadership and on group dynamics, particularly where the process has interfered with the task in hand. Most workshops will have a guest speaker and their contribution usually enhances the quality of the educational product that the tutor delivers. As National Director I usually have some time to discuss with the network items of national interest, the core curriculum, volunteers for scheme visits international meetings and issues that need resolution. The following are the agendas of workshops for 2007 to date.

Tutor Workshop 2007 - 2008

Date: 2nd & 3rd February 2007: Clontarf Castle Hotel, Dublin

Update on Management of Hypertension
A Gonadal Endocrine Problem List
Medical Records
Chronic Kidney Disease
“Problem Case” with Staff
Medico/Legal Pitfalls in General Practice
GP Management of Atrial Fibrillation
Primary Care Teams – Fact or Fiction
A Geriatric NCT
Guests:
Online Learning – what it can do for you
Review of Web

Dr Kevin Flanagan
Dr Cathy Cullen
Dr Illona Duffy
Dr Declan Larkin
Dr Brian Jordan
Dr John McKeown
Dr John Hunt
Dr Tom English
Dr Patricia McNicholl

Dr Kieran Walsh, BMJ Learning
Gillian Doran/Angela Byrne

Date: 11th & 12th May 2007: Radisson Hotel, Galway

Therapeutics Update
What Makes a Good Doctor?
The Practice Nurse
Guests:
Facilitating Adult Learners
The Role of University Dept in General Practice

Dr Gary Stack
Dr Mel Fullam
Dr Tom Foley

Mary Fleming NUIG
Prof Andrew Murphy NUIG

Date: 13th & 14th of September 2007: Hotel Majestic, Barcelona

Child Psychiatry
Chronic Kidney Disease: Guidelines
Management of Acute Diarrhea
Management of Hyperlipidaemia
Lab Medicine in General Practice
Journal Club
Guest
CME/CPD in Spain

Dr Jeremy Cotter
Dr Scott Walkin
Dr Sandra Tighe
Dr Frank Hayes
Dr Francis Nelson
Dr Conor Hanrahan

Dr Helios Pardell, SACCME

Date: 1st & 2nd February 2008: Clontarf Castle Hotel

Nursing Homes
Chaperones in General Practice

Dr Pat Daly
Dr Patricia McNicholl

Pre-Existing Medical Conditions
 Management in General Practice
 Gambling in General Practice
 Respiratory Illnesses in Infants & Young Children
 Exploring GP Attitudes to Particular Subgroups
 Journal Update
 Substance Abuse - Detection & Management
 in General Practice
 Guests
 Re-Interpreting the Rules?
 Peripheral Arterial Disease

Dr Karen Palmer
 Dr Brian Jordan
 Dr Tom English
 Dr Annette Jennings
 Dr Stephanie Dowling
 Dr Gary Stack
 Dr Donncha O’Cuill

Dr David Pendleton
 Dr Tony Heffernan

The upcoming tutor workshop in Galway in May 2008 will be discussing the new childhood immunisation schedule to be introduced in September 2008, also the GP response to a flu pandemic and GP involvement in the new national cervical screening programme.

SCHEME VISITS

A total of seven visits took place in 2007. An extern visitor was present at each of these visits. The Chairman of the ICGP Education committee arranges the presence of the extern. I would like to thank Dr Mel Bates and currently Dr Mary Favier for their work in this regard. There is a pre visit and actual visit protocol. This has been revised a number of times in the light of experience. There is a current pilot project in place for the assessment of a tutor who has already been visited successfully a number of times.

Tutor Scheme Visits in 2007

Scheme	Tutor Visited	Date of Visit	Extern Visitor
East Cork	Brian Jordan	23 rd March 2007	Tony Heffernan
Dun Laoghaire	Paul Lacey	26 th April 2007	Maria Wilson
Merrion	Cathy Cullen	22 nd May 2007	John Latham
North Dublin	Patricia McNicholl	6 th Sept 2007	Nuala O’Farrell
Limerick	Mel Fullam	27 th Sept 2007	Tom Molloy
West Dublin	Georgina Connellan	20 th Nov 2007	Donal McCafferty
Louth/Meath	John McKeown	29 th Nov 2007	Paddy Halligan
Cork A	Mary Favier	Written Report	N/A

Tutor Scheme Visits in 2008

Scheme	Tutor Visited	Date of Visit	Extern Visitor
Stokes/Mt Carmel	Dr Karen Palmer	22 nd April 2008	Dr Gertrude Ronan
Kerry A	Dr Gary Stack	23 rd April 2008	Dr Bertie Daly
Mayo A	Dr Pat Durcan	29 th April 2008	Dr Brian Barrett
Tipperary South	Dr Molly Owens	27 th May 2008	Dr Muiris O’Keeffe
Cork City A	Dr Tom English	Visit Due	
Tipperary North	Dr Pat Harrold	Visit Due	
Galway A	Dr Declan Larkin	Visit Due	

ENDORSEMENTS

The small group learning meetings are recognised as an innovative way of providing adult education on an ongoing basis for GPs. There has been an examination and analysis of CME provision in Ireland as an MBA thesis, by Dr J Richardson. This again has shown up small group learning in a favourable light. There has been an encouraging editorial in Forum magazine and a supportive article in the BMJ on the tutor network.

CONCLUSION

The importance of participation by GPs in life long learning is not to be underestimated. The Lourdes Hospital Inquiry report by Judge M Harding-Clark made a number of recommendations including participation in regular CME, and that all consultants should be subjected to “vigorous independent clinical competence appraisal” and evaluation every five years. We have a new Medical Practitioner’s Act (2007) awaiting enactment and the Health Information & Quality Authority (HIQA) has been established under statute in 2007. The new Consultant’s Contract (2008) will provide the protected time for consultants to participate in CME, including attendance at major international meetings. 2007 was an important year in relation to State backed systems to offer more protection to the public when dealing with a variety of healthcare professionals. The new Health & Social Care Professional Council means twelve allied professions will be regulated under Statute. This drive to ensure high standards can only benefit patient safety. General practice and general practitioners are aware of these developments and the impact of the provision of the Medical Practitioner’s Act, when enacted, will no doubt be the subject of my next report.

There is no protected time for GP participation in CME activities during office hours. Most small group CME meetings take place after office hours. This is not entirely satisfactory but it does ensure that service delivery in general practice is not compromised. GPs then give of their time to attend CME one evening per month throughout the academic year. It may be that GPs by organising themselves into out of hours co-ops have the time to attend CME despite the increase in their workload. GPs are busier than ever at work. The population of Ireland has increased by almost 16% in the last decade. The population is generally ageing and this has implications for all involved in the health services. Health statistics have improved; life expectancy in Ireland is now above the EU average for the first time. There has been a reduction of 50% in deaths from circulatory system disease over the past thirty years. The GP management of hypertension, hyperlipidaemia, heart failure, primary and secondary prevention of coronary artery disease, with others, has been significant in reducing the burden of morbidity from circulation systems disease. The 20% of practices recruited into the Heartwatch Programme have demonstrated that improvements were seen where physician behaviour influences outcomes.

The CME programme has been instrumental in ensuring that moving points in the medical management of many common and important illnesses are discussed and integrated into everyday practice.

The PGMDB is likely to be dissolved when the new Medical Practitioners Act is enacted. The functions of the Board are to transfer to the Health Service Executive (HSE). As national director I am anxious that this transformation process takes place in a smooth and seamless manner. A meeting is planned between the PGMDB, the HSE Medical Education Training & Research (METR) group and the ICGP for May 19th 2008 at which the practical steps required will be identified and a process agreed. It is hoped there will be continued support for GP CME schemes when the HSE take over responsibility.

International Meetings

I hope to attend the WONCA Regional meeting in Istanbul in September 2008 where there will be a joint presentation on the Irish CME experience. I have been invited to visit Portugal in September 2008 to participate in the launch of a pilot project on small group CME learning with Portuguese GPs, based again on the Irish experience. I hope to visit Bahrain in November 2008 again to explain how small group learning works for GPs.

ACKNOWLEDGEMENTS

I would like to record my thanks to some people for their kindness and support over the past year.

- ^ Mr John Gloster, CEO of the PGMDB, for his ongoing commitment to the concept of State funded GP CME and for his enthusiasm in ensuring that this type of adult education has gone from strength to strength.
- ^ Mr Fionan O'Cuinneagain, Chief Executive of the ICGP once again for his advice and availability when requested. On my own behalf and on behalf of the network we are grateful for all his support over the past year.
- ^ Dr Michael Boland, Director of the ICGP Postgraduate Centre, once again was available for ongoing help and assistance.
- ^ Dr Mel Bates, who stepped down as Chairman of the Education Committee in 2007.
- ^ Dr Claire McNicholas, Assistant National Director of GP CME, has continued in her valued supportive role over the past year. Some of our tasks have been divided out and she has been happy to take responsibility for them.
- ^ To Betty Kelly for her professionalism and patience in organising the workshop venues and the day-to-day running of the tutor network.
- ^ Finally, once again to the tutors, new and old, and their partners for without their hard work and dedication this project cannot succeed.

Dr H Finnegan, National Director of GP CME Schemes



WOMEN'S HEALTH Report

The agenda of the Women's Health Programme is to provide educational support for primary care in women's health care and to contribute to the College's policy development in this area. This has evolved since its inception in 1998 to cover a wide range of topic areas, a variety of educational formats and a series of publications with a multi-disciplinary approach. (More details available in previous annual reports)

MEMBERS OF PROGRAMME

Programme Director

Ailís Ní Riain

Other Members of Programme Group

Geraldine Holland (Assistant Programme Director)

Naoimh Kenny (Assistant Programme Director)

Yvette Dalton (Administrator)

Rosina Ghuffar & Catherine Vahey (Researchers)

Instructing Doctors in Family Planning (for Family Planning Certificate courses)

Dr Mark Walsh, Dr Naoimh Kenny, Dr Ailis Ni Riain, Dr Julian Maitland and Dr Geraldine Holland at the third Annual Women's Health Conference



PROGRAMME ACTIVITIES

1. Women's Health Courses

- ^ Family Planning Certificate Part 1 Course (Theoretical) (two courses).
- ^ Family Planning Certificate Part 3 Course (Practical) (two courses).

2. Women's Health Conference

- ^ Third Annual Conference, Tullamore.

3. Ongoing Projects

- ^ Providing Sexual Health Services to Young People in an Accessible and Effective Way – The Young People's Project.
- ^ Intimate Partner Violence Project.
- ^ Update of the BreastCheck Information Pack for General Practice.
- ^ Development of course on Long Acting Reversible Contraception (LARC).

4. Publications / Reports

- ^ Evaluation of the GP Direct Access DXA Scanning Service. Rosina Ghuffar, Catherine Vahey & Ailís Ní Riain.
- ^ Providing Sexual Health Services to Young People in an Accessible and Effective Way – The Young People's Project (Report on Phase 1). Ailís Ní Riain & Maeve Mulvehill.
- ^ Domestic Violence – A Guide for General Practice. Naoimh Kenny & Ailís ní Riain.

5. Lectures / Presentations

- ^ Workshops on Women's Health at ICGP Summer School (2007).
- ^ Sessions at workshops for ICGP Diploma in Women's Health (October 2007 & January 2008) Geraldine Holland & Naoimh Kenny.
- ^ Workshop on Women's Health for Merrion Faculty (April 15th 2008) - Naoimh Kenny, Geraldine Holland and Deirdre Lundy.
- ^ Supporting Primary Healthcare Professionals Providing Crisis Pregnancy Care in Ireland -Naoimh Kenny, Ailís Ní Riain and Rita Galimberti. Freestanding paper at 10th European Society of Contraception, Prague (April 30th – May 3rd).
- ^ Developing a training programme for primary healthcare professionals for long acting reversible contraceptives (LARC). Geraldine Holland, Naoimh Kenny & Ailís Ní Riain. Poster presentation at 10th European Society of Contraception, Prague (April 30th – May 3rd).
- ^ The Role of the GP in the Follow up for Breast Cancer. Ailís Ní Riain. 11th International Breast Cancer Meeting, Dublin (May 15th).

6. Work in Progress

- ^ Organisation of Fourth National Conference on Women's Health – June 7th 2008. Theme “*Celebrating the Older Woman*”.
- ^ Preparation of Women's Health Workshop for ICGP Summer School (2008).

7. Other Activities (see milestones/deliverables for details)

- ^ Members' electronic inquiries service.
- ^ Representation.

DETAILED PROGRAMME DESCRIPTION

Table: Women's Health Programme Courses/Conference May 2007 – April 2008

Activity	Date	Number of participants
Family Planning Certificate Course Part 1 (theory)	27-28 September 2007	30
	31 January – 1 February 2008	33
Family Planning Certificate Course Part 3 (practical)	8-9 November 2007	10
	3-4 April 2008	10
Women's Health Conference	26 May 2007	118

1. Women's Health Courses (Project Lead: Geraldine Holland)

a. Family Planning Certificate Part 1 Course (Theoretical) (two courses)

This one-and-a-half day course was run on two occasions (see Table for details). Course participants included those who had previously undertaken some training for the Family Planning Certificate but had not completed the requirements as well as those undertaking the Certificate course for the first time. Course evaluation by participants was positive.

b. Family Planning Certificate Part 3 Course (Practical) (two courses)

This intensive course was run on two occasions (see Table for details). This course has been further developed over this year, incorporating evaluation and feedback from the participants, the instructing doctors and the actors.

2. Women's Health Conference (Project Lead: Geraldine Holland)

This conference was held in Tullamore on May 26th 2007 with national and international speakers on a range of issues of interest in women's health. One hundred and eighteen healthcare professionals (GPs and practice nurses) attended. The seven GP practices participating in the Young People's Project presented at the conference and both the Impact Document on Cardiovascular Disease in Women and the Key Contacts Resource on Care of Women after Abortion were launched.

3. Ongoing Projects

a. Providing Sexual Health Services to Young People in an Accessible and Effective Way (Project Lead: Ailís Ní Riain)

Phase 1 of this project involving initiatives in seven general practices was completed in 2007 with presentations at the 3rd Annual Women's Health Conference. The report on Phase 1 has been completed and will be launched in June 2008. Recruitment of practices for Phase 2 of the project is nearing completion. Phase 2 will address the refinement of specific initiatives identified in Phase 1 and will include some of the practices from Phase 1 and a number of new practices. It is anticipated that this Phase will complete by December 2008. This project is undertaken in partnership with HSE Health Promotion.

b. Intimate Partner Violence Project (Project Co-ordinator: Naoimh Kenny)

This two year project (Feb 2007 – Feb 2009) entails the development of a suite of educational resource materials on intimate partner violence for GPs and practice nurses, and a dissemination strategy for their use. A Guide for General Practice on Domestic Violence has been completed and approved by the ICGP Quality in Practice Committee. It will be launched at the 4th Annual Women's Health Conference. Supporting educational resource material is being collated and will be available in autumn 2008. The Guide and the supporting material will be disseminated to relevant groups. This project is undertaken in collaboration with the Eastern Regional Planning Committee on Violence against Women. It is jointly funded by the HSE and the Department of Justice, Equality and Law Reform and the Steering Committee includes representatives of all stakeholders.

c. Update of the BreastCheck Information Pack for General Practice (Project Lead: Naoimh Kenny)

The information pack that provides information on breast screening is being updated to reflect screening programme developments and national extension. The third edition of the information pack will be completed during 2008. It is funded by BreastCheck.

d. Development of course on Long Acting Reversible Contraception (LARC) (Project Lead: Geraldine Holland)

In response to members' requests for a structured course on fitting intrauterine contraceptive devices (IUCDs) and contraceptive implants, a course is under development. This will include both theoretical and practical components. The syllabus, quality assurance framework and course materials will be completed by July 2008. Tutor recruitment is underway and their training will take place over the summer. The first intake of trainees is planned for September 2008. The course will be evaluated once this first group have completed training.

4. Publications/Reports

a. Evaluation of the GP Direct Access DXA Scanning Service (Rosina Ghuffar, Catherine Vahey & Ailís Ní Riain)

HSE East Coast Primary Care Unit introduced direct GP access to DEXA scanning for GPs in the East Coast Area. They commissioned the ICGP Women's Health Programme to evaluate the effectiveness of this initiative and the results will be reported at the 4th Annual Women's Health Conference in June 2008 and published thereafter.

b. Providing Sexual Health Services to Young People in an Accessible and Effective Way – The Young People's Project (Report on Phase 1) (Ailís ní Riain & Maeve Mulvehill)

This report will be launched in June 2008.

c. Domestic Violence – A Guide for General Practice (Naoimh Kenny & Ailís Ní Riain)

This report will be launched at the 4th Annual Women's Health Conference in June 2008.

PROGRAMME MILESTONES/DELIVERABLES/OUTPUTS

1. Courses, conferences, meetings and research (as above)

2. Members electronic inquiries service whqueries@icgp.ie (Project Lead: Naoimh Kenny)

This email support service provides a quick response to difficult clinical situations which may arise in clinical practice. The service responds to theoretical and practical clinical questions. The number of queries has decreased notably from the previous year, with an average of one query every 2 weeks. The queries relate mainly to common office gynaecology or clinical issues pertaining to women's health, but occasionally call for an opinion on other items, e.g. a new commercial (non-pharmaceutical) product aimed at women. As the service aims to provide evidence-based answers the responses given often includes a comment on this and if clinical evidence is

lacking or non-existent, it is not possible for the responder to advise the enquirer based on opinion. It is planned to formally review this service later in 2008.

STATEMENT OF ACHIEVEMENTS/OUTCOMES TO DATE

Note: Refers to 2007-2008 activities for Women's Health Programme only

1. Courses, meetings and research (as above).
2. Publications (as above).
3. Collaboration – within the ICGP with the E-learning Unit and other project directors and externally with agencies such as HSE Health Promotion and National Cancer Screening Services.
4. Representation (see table below).
5. Electronic availability – material/publications, course details and clinical inquiries service available on the ICGP website.

Representation

Women's Health Council	Ailís Ní Riain
Joint Committee for Family Planning	Rita Galimberti, Fionnuala Loughrey and Geraldine Holland
National Cancer Screening Services Board	Ailís Ní Riain
Consultative Forum for Crisis Pregnancy Agency	Naoimh Kenny
QA smearthakers subcommittee for cervical screening programme	Naoimh Kenny
Health Protection Surveillance Centre Steering Group for Research Project on Chlamydia	Nuala O'Connor
Eastern Regional Maternity Services Group	Geraldine Holland

ANNUAL REPORT FOR SCALES 2007/2008

There were 16 participants this year on the scales course. All prospective participants were interviewed in September 2007 in order to ensure that the course was suitable to their needs. They came from a wide range of medical expertise mainly general practice but also public health, surgery etc. This lent itself to, as usual, to very interesting discussions.

Having looked at the structure of the course over the last few years we decided to run it over 8 full days-the first starting at the end of September 2007, running approx every two weeks and the last at the end of January 2008. The reasoning behind this was that we felt there is always a lot of enthusiasm at the beginning of the year but if the course runs on to long people find the travelling very tiring. Participants are coming from all over the country. Each day was broken down to four sessions each lasting 90 minutes with two fifteen minute coffee breaks and an hour and an half hour for lunch. Most days we had a sit down lunch in the Davenport Hotel. Lunch served as a well earned break but also provided a great medium for continuing discussion.

One of our very good sessions is the clinical skills session. We invited one of last year's course participants to refresh our skills in suturing and this was most valuable. Unfortunately we have to borrow eye/ear, breast models etc and suturing arms from either UCD or RCSI. They are always very generous. However, I feel that the College may consider investing in these items as I am sure there is a need in other courses in the College for these items.

We had also looked at collating a lot of the handouts and putting them on discs for participants but in the final analysis we felt that old fashioned paper was better. The year ended on end of January 2008 with the graduation in the ICGP with dinner afterwards in Jacob's Ladder. We were very thankful to our guests who attended - Dr Mark Walsh and Dr Michael Boland.

Dr Maria F Wilson MICGP (SCALES Course Tutor) & Dr Ailis Ni Riain (SCALES Director)

FUTURE PLANS

- ^ To continue ongoing activities.
- ^ Ongoing collaboration with outside agencies to represent the contribution of GPs to women's health services and to secure financial resources to support further activities.
- ^ To review the delivery of the Women's Health Programme activities in the context of the 2008 – 2013 Strategic Plan.

ADMINISTRATIVE RESOURCE

Yvette Dalton.

Dr Ailis Ni Riain, Programme Director

www.icgp.ie/womenshealth



HELPING PATIENTS WITH ALCOHOL PROBLEMS

Report

The Helping Patients with Alcohol Problems Project is mainly an educational resource for general practitioners. It involves the education and dissemination of best practice in the field of alcohol interventions for patients who attend primary care practitioners.

PROJECT ACTIVITIES

The main highlight amongst the varied activities carried out by the alcohol project since April 2007 was the launch of the guidelines document by the Quality in Practice Subcommittee at the 2007 AGM, (see below). In addition:

- ^ Attended RCPI lecture on alcohol.
- ^ Prepared for HSE training programme on alcohol for Wexford GPs that was subsequently cancelled due to HSE embargo on such training in hotels.
- ^ Contributed to the E-learning mental health course at planning and delivery of modules.
- ^ Launch of Guidelines document at AGM, May 2007 – available on website at www.icgp.ie/alcohol.

- ^ Conducted training session for Navan GP trainees.
- ^ Meetings with Alcohol Action Ireland throughout the year.
- ^ Active member of Phase 2 of Phepa (Primary Healthcare European Project on Alcohol). Attended two international meetings and also hosted Irish team meetings. The project director has developed a fact sheet on Brief interventions for the project which is in its final draft.
- ^ Conducted two workshops at ICGP Summer School, one in collaboration with Dr Ide Delargy.
- ^ Started process of developing computer-aided flags for GPs in surgery.
- ^ Participated in a number of television programs and numerous local radio and national radio broadcasts as well as articles for medical and general press.
- ^ Delivered lectures as part of the methadone training protocol throughout the year.
- ^ Completed evaluation of the Alcohol Aware Practice Service Initiative which was published in Forum. Note: Dr Clare Collins, in conjunction with the project director, has submitted a research paper on that initiative for publication.
- ^ Addressed the Dingle medical conference on alcohol.
- ^ Workshop on alcohol and women for RCSI MSc Course in Women's Health.
- ^ Two one-day training courses on alcohol for GPs in December 2007 and March 2008, funded by Phepa.
- ^ Attended HSE Conference on Alcohol.
- ^ Workshop in conjunction with Dr Delargy on addiction for e-learning therapeutics module.
- ^ Meetings with HSE re: development of the project.
- ^ Ran half day workshop for SCALES course.
- ^ Conducted a seminar for working group in Belfast who are trying to develop interventions on alcohol at primary care level in the north.
- ^ Prepared a detailed proposal to the Department of Justice commission on alcohol on behalf of the ICGP.

STATEMENT OF ACHIEVEMENTS/OUTCOMES

The project continues to have relevance for primary care and generates great interest. The emerging culture of alcohol and drug misuse particularly amongst young people is of major concern. We are delighted that there are large numbers applying to do our one-day courses. It is particularly gratifying that we now have the printed guidelines available to be of benefit to GPs in their work.

The project continues to be in the forefront of media consultation on alcohol related issues. We regularly draw attention to the issue of alcohol and in particular raise concerns about the relative absence of government initiatives on health promotion in this area. We have demonstrated that alcohol problems can be tackled effectively within primary care. Minimum training and support for GPs in developing skills and intervention techniques are the keys to effectiveness in this area.

FUTURE PLANS

Much work has been done on developing training modules for doctors and other primary care staff on all aspects of alcohol problems. There remains however, a great deal to be done. Over the next phase of the project the following activities will provide the main focus:

- ^ There is still a possibility that the Alcohol Aware Practice Service Initiative will be further developed throughout the country. It is hoped that this model of intervention for primary care will be rolled out through the primary care teams in time thus reaching a far wider percentage of GPs who can provide a service that is more accessible to the general population. The integration of alcohol counsellors into general practice on a national basis remains a strong recommendation based on the results we achieved in this area in the past.
- ^ The EU Phepa Project – part 2 will conclude this year. There will be a detailed Irish report to be submitted as part of that remit.
- ^ Development of the unfinished and remaining modules for use in primary care. The next module will be on mental health - in particular alcohol, depression and suicide. This will coincide with the conference on the 8th November in Cork; “Alcohol and Drugs – the Low-down on Depression and Suicide”.
- ^ Continued participation at lectures, conferences, workshops etc. The project director is due to speak at the Women’s Health Conference in June 2008 on ‘alcohol and the older woman’.
- ^ Further implementation and development of the Guidelines Document.
- ^ Another push to encourage specific training for trainee GPs – incorporating the guidelines document and other materials.
- ^ A longer term aspiration would be that training for behavioural change via brief interventions and the management of alcohol problems would be incorporated in every medical undergraduate programme.
- ^ The provision of brief intervention training courses for GPs and practice nurses at HQ and as requested around the country. Two more one-day courses are planned for 2008.
- ^ Development of computer aided screening systems and flagging of alcohol problems.
- ^ A joint initiative with the Mater hospital (and Dr John Sheehan in particular) to re-write and publish the ‘Alcohol and the Body’ leaflet for patients but this time making it relevant to hospital care and primary care.
- ^ There is also a possible work of collaboration with Combat Poverty, on alcohol.

The project continues to be extremely busy and the half-week commitment means that priorities will continue to have to be established and discernment required in choosing specific activities/targets.

ADMINISTRATIVE RESOURCE

Yvette Dalton, Administrator.

COMMENTARY

This project remains a vital resource for primary care staff given the ongoing importance and proliferation of alcohol problems, and their consequences on the health and well-being of patients and families, in primary care. Despite annual targets and deliverables, hard work and sincere intentions, this project always develops a life of its own every year and takes off in unpredictable ways. One of the most important and enjoyable features of the past year has been the increasing collaboration between different project directors on allied topics and conferences. As in every year of the project to date, I would like to once again acknowledge grateful thanks and appreciation to Yvette for the excellent support and help that she provides. I also want to thank the HSE for funding the project last year.

Rolande J Anderson, Project Director, “Helping Patients with Alcohol Problems”

www.icgp.ie/alcohol



COGNITIVE BEHAVIOURAL THERAPY

Report

Cognitive Behavioural Therapy (CBT) provides a model of therapy whereby the person can learn to recognise their distorted interpretations and beliefs. At its core is the principal of helping the patient to see and change for themselves what it is (behaviourally and cognitively) that is blocking them off from going forward with and in their lives.

CBT is ideally suited to general practice and primary care practice as it provides a proven method of psychological therapy that can be easily learned and applied within the constraints encountered in today's health care service and is in accordance with recommendation 7.4 of '*A Vision for Change*'.

BACKGROUND TO THE PROJECT

June 2004

This project developed following the identification by some GPs from the north Dublin CME group of the need for effective training for GPs in effective CBT skills which could be utilised within the constraints experienced in a busy GP's surgery. This led to the development of the foundation course of the project. To date, 310 GPs have completed this part of the programme.

May 2006

Launch of 'The GP Model of CBT' at the ICGP AGM.

December 2006

Development of an advanced level 2 programme in utilising the 'GP Model of CBT', as part of the e-learning programme in the ICGP.

PROJECT ACTIVITIES

Level 1 Foundation Course in 'CBT in GP Clinical Practice, the GP Model'

This course ran twice in the last 12 months. The course was also held for GP trainees in Tullamore.

Level 2 Advanced Course in 'CBT in GP Clinical Practice, the GP Model'

This is a new addition to the programme and has been held in Dublin, Cork and Galway so far. To date 26 GPs have completed the course.

Ongoing Training

Seminars in CBT were held at the Summer School in 2007. The first annual CBT workshop held at the ICGP AGM in Galway 2007. A graduate discussion board has been established for ongoing supervision, support and project development. This has been very successful with lively debate and discussion. Regular workshops for level 2 graduates have been established. The first was held in Athlone in March 2008.

Stepped Care Approach

A Stepped Care Approach Utilising the GP Model of CBT in the treatment of depression has been developed from inception and literature review to pilot readiness since January 2007. A prospectus on the entire project is been prepared for consideration by the Education Committee.

STATEMENT OF ACHIEVEMENTS

Development of a unique comprehensive therapeutic modality for use by GPs in dealing with the most common mental health problems which account for 92% of presentations to GP surgeries. Currently 275 GPs have completed level 1 and 26 have completed level 2.

Development of a stepped care treatment approach based on best international practice using Cognitive Behavioural Therapy principles, developed by GPs for GPs.

FUTURE PLANS

^ Continuation of the programme as described.

^ Aspects of the programme to be considered for inclusion in the core GP training curriculum.

Enda Murphy, RGN, RPN, MNACBT, MICP, Project Director



DRUG MISUSE Report

The Drug Misuse Programme has been running since 1998. The aims of the programme are to improve knowledge, attitudes and skills around substance misuse management, improve understanding on addiction and provide training and continuing medical education for GPs willing to take part in the Methadone Treatment Programme.

MEMBERS OF PROGRAMME

Director: Dr Ide Delargy

Administrative support: Niamh Killeen.

Audit nurse: Lorraine O'Shaughnessy

PROGRAMME ACTIVITIES

- ^ Publication of Updated Best Practice Guidelines.
- ^ Expansion of substance misuse training to incorporate training in addictions in general and level 1 training in methadone management. This course is now a road-show which aims to visit all regions of the country.
- ^ The joint HSE/ICGP Audit Group was re-convened and an audit nurse, Ms Lorraine O'Shaughnessy re-appointed.

Level 1 Training – 2007/2008

Venue	Dates	Attendees
ICGP	26/9/07 & 17/10/07	24
Kilkenny (Road-show)	20/2/08, Full Day	31
Waterford GP Training Scheme	7/5/08, Afternoon	15

Other Training:

ICGP Summer School Module on Substance Misuse 1 Session.

ICGP Summer School Joint Alcohol/Substance Misuse Training.

Mental Health Training (Distance Learning Programme) 1-day seminar on substance misuse.

CME 2007/2008

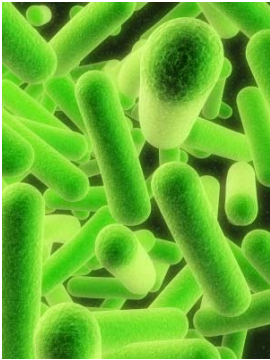
Dates	Attendees
30/8/07	17
3/10/07	25

FUTURE PLANS

Continuation of the training road-show in Galway (AGM) 16th May 2008, Tullamore 1st October 2008 and Monaghan 26th November 2008. Further collaboration with Mr Rolande Anderson on the Alcohol Programme to develop joint training and information modules. Development of an online CME education programme.

Dr Ide Delargy, Programme Director

www.icgp.ie/drugsmisuse



ELECTRONIC DISEASE SURVEILLANCE Report

The Disease Surveillance Sentinel Practice Network Project involves running a computerised surveillance network for certain infectious diseases in the community and involves fifty two sentinel practices spread throughout the country. There is a particular emphasis on the surveillance of influenza.

MEMBERS OF 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.

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 circulation.

PROJECT MILESTONES/DELIVERABLES/OUTPUTS

Whereas previously surveillance was carried out from week 40 to week 20 it has now been formally agreed that surveillance will take place throughout the entire year.

The increase in the population highlighted in the 2006 census illustrates that if we are to achieve 5% population coverage for influenza surveillance then we need to expand the number of participating practice again this year. It is hoped to increase the number of participating practices to 60. To this end, in spring 2007 a number of publicity efforts were made to attract new practices to the network. There was a considerable amount of interest shown in joining the network. However, intriguingly, the number of practices that progress from an expression of interest to actual participation is small. This may be for several different reasons but I do not fully understand why this should be so. Reassuringly, once a practice joins and has got to the point of making its first return they usually stay and become full active participants. The recruitment drive will continue during 2008.

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 and is required as part of the early warning system for an influenza pandemic. Return rates well in excess of 90% continue to be achieved consistently.

FUTURE PLANS

We hope to continue expansion of the number of participating practices during 2008 up to 60 practices which should give us the optimum recommended five percent coverage of the population.

Work has begun on better defining the population denominator of the sentinel practices. As is well known, Irish general practice suffers as a result of the absence of full patient registration. Currently sentinel practices report their total number of GMS patients and an estimate of their private population size. No age or sex breakdown is

currently available. This means that we currently do not have an accurate age/sex break of the population that is being monitored. This year we carried out a pilot study of ten of the sentinel practices to see if we could get a better measure and to make a comparison with the data already held. The results are currently being statistically analysed. Depending on the outcome we hope to measure the populations of all the sentinel sites.

Dr Michael Joyce, Project Director

www.icgp.ie/flu



GENERAL PRACTICE INDICATORS OF QUALITY (GPIQ)

Report

In this three year project, we will develop a set of quality indicators for Irish general practice and road test them in a number of general practices. The indicators will pertain to the professional values of practice staff and address two of the three important areas of our definition of general practice, namely practice management and communication with patients. The indicators will not address clinical tasks. We will only include indicators that identify areas where the practices themselves can bring about improvement. For example, waiting time from referral to outpatient appointment will not be included. While this is internationally accepted as a good indicator of quality of the healthcare system it is outside the control of general practice and thus cannot be improved by GPs.

The indicators will be developed by reviewing international indicators of quality in the general practice setting and selecting those that are relevant to our domain areas. A consensus research method (a modified Delphi technique) will be used to select the indicators that are valid for the Irish general practice setting. These will then be tested in volunteer general practices and modified after that evaluation. This project is linked to the ICGP Research Centre for organisational and professional purposes.

MEMBERS OF PROJECT

Project Director: Ailís ní Riain.

Researcher: Catherine Vahey.

BACKGROUND TO THE PROJECT

There is an increased focus on quality, professional accountability, and on the central role of general practice and primary care in the Irish health service. We identified a paucity of formal quality improvement tools for use in quality improvement in the Irish general practice setting and developed a research proposal to develop such a tool. Funding was secured from the Health Information Quality Authority (HIQA) to undertake this work in a three year project which commenced in July 2007.

We recognise that the indicator set we develop must be acceptable to and owned by GPs, and therefore there will be a majority of GPs on the working groups and Delphi panels. Practice nurses and managers will also be involved at all stages. Patients and patient advocacy groups also have important views as to what is quality care and their perspective will also be included. Because this indicator set may become a component in the accreditation of GPs and general practices, the perspectives of policy makers and regulators will also be taken into account.

EDUCATIONAL AIMS OF PROJECT

The primary aim of this project is to develop a set of meaningful quality indicators that can be used by general practitioners and other practice staff to assess and improve the quality of their service. A secondary aim is that the indicators be used by practices to provide evidence of high quality care to external assessors or regulators.

PROJECT ACTIVITIES/TASKS

- ^ Funding approved by HIQA (January 2007).
- ^ Project commenced (July 2007).
- ^ Researcher appointed (August 2007).
- ^ Literature reviewed undertaken.
- ^ Governance structures agreed.
- ^ Advisory group appointed and first meeting held (January 2008).
- ^ Indicator Working Group recruited and first workshop held (February 2008).
- ^ Domains and sub-domains identified (March 2008).

^ Preliminary indicators generated (April 2008).

^ Delphi panel recruitment (April 2008).

^ First round of Delphi process (ongoing).

DETAILED PROJECT DESCRIPTION

Catherine Vahey was appointed as researcher on this project in August 2007 and has completed a literature review of quality indicators in the general practice setting.

The Advisory Group whose function is to provide an oversight function was recruited at the latter end of 2007. This group includes two international experts, two ICGP representatives, one representative each from HIQA, the Medical Council and the HSE and a patient representative. They will meet twice a year for the duration of the project. The first meeting in January 2008 provided general guidance on the approach to and methodology for indicator development.

The Indicator Working Group was established to provide specific guidance on selection of quality indicators. Members are GPs, practice nurses, practice managers, health managers and patient representatives. The first workshop, facilitated by Dr Stephen Campbell was held in February 2008. This workshop identified the domain areas and sub-domains for the indicator set. The group will convene again in the autumn of 2008 to assist with the final selection of indicators when the Delphi process is complete.

Relevant indicators were collected from the international literature to address the domain areas. We took out duplicate indicators and those that could not apply to the Irish setting. The resulting indicators have been inserted into a questionnaire which will be circulated to the Delphi panellists in early May 2008. Respondents will be asked to rate both the importance and clarity of each indicator and will also be given the opportunity to identify omissions. The questionnaire will be circulated a second time with analysis and feedback from the first round and participants will be asked to rate the importance and measurability of each indicator. From this consensus technique, our indicator set will be generated.

PROJECT TIMETABLE

This three year project commenced in July 2007 and will finish in June 2010.

PROJECT MILESTONES/DELIVERABLES/OUTPUTS

^ A meaningful, valid set of quality indicators for Irish general practice that have been developed and tested by GPs and practice staff with input from patients and policy makers.

STATEMENT OF ACHIEVEMENTS/OUTCOMES

^ Project activities as detailed above.

FUTURE PLANS

Year 2 of the project will focus on developing the indicator set through the Delphi technique and recruiting the volunteer practices to test the indicators. In year 3, the recruited practices will test the indicator set and we will evaluate and refine this quality tool accordingly.

Dr Ailis Ni Riain, Project Director

COMPETENCE ASSURANCE SUBCOMMITTEE

During the past year, development work in this area was limited due to the introduction and proposed implementation of the Medical Practitioners Act 2007 which will include a compulsory competence assurance structure.

AIM OF SUBCOMMITTEE

To provide a structure for College members to participate in an ongoing competence assurance structure.

THE IRISH COLLEGE OF GENERAL PRACTITIONERS						
SUMMARY FOR COMPETENCE ASSURANCE 2003-2008						
	2003	2004	2005	2006	2007	2008
Number of GPs on Specialist Register commencing each year	191	304	97	44	39	577
Summary sheet returns by GPs. Accum. Fig due in brackets	83 (191)	187 (495)	191 (592)	175 (636)	100 (675)	Not due (1252)
Returns by 2003 Participants (1 st 5 year cycle completed)	83 (191)	63 (191)	64 (191)	52 (191)	15 (191)	—
Applications Processed for CME Accreditation						
	2003	2004	2005	2006	2007	2008
Total	275	362	324	311	229	115
- Pharmaceutical	114	165	121	156	96	55
- GPs	51	91	67	45	40	19
- Hospital	21	29	22	22	30	13
- Societies	44	28	33	30	27	14
- Universities	24	17	23	16	4	3
- Health Boards	6	12	34	26	10	6
- Other	15	20	24	16	22	5

Carol White, CAS Administrator

www.icgp.ie/CAS



MANAGEMENT IN PRACTICE Report

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 online publications and guidelines.
- ^ Direct advice and consultation with individual members and practices – telephone advisory service and online information service/resource via <http://www.icgp.ie/mip>¹ on a daily basis.
- ^ Practice consultancy: consulting with practices on a broad range of management issues including business planning and development, practice set up, practice continuity/succession planning, human resource management, premises, health and safety and quality initiatives.

¹ Full analysis of members requests are available in the full MiP report

- ^ Mediation service provided both to practice partners and in relation to employees.
- ^ Referral to external professional advisor network and resources.
- ^ Supporting the occupational health needs of GPs and practice personnel. (Refer to Health in Practice Programme Report).

Pictured at the autumn 2007 e-learning workshop are Dr John Cuddihy, Prof Colin Bradley, Mr Dermot Folan (Management in Practice Director), Mr Barry O'Brien (Management in Practice Course Tutor) and Mr Nick Fenlon (ICGP Director of Education).



MEMBERS OF THE PROGRAMME

Mr Dermot Folan, director.

Ms Margaret Cunnane, Administrator.

Mr Barry O'Brien, practice management course tutor.

Ms Romy Moloney, practice staff course tutor.

Ms Jean Hubbard, resource tutor.

External experts are invited to resource specific course modules.

PROGRAMME ACTIVITIES DURING YEAR

Management in Practice Diploma Course: September 2007 – May 2008

This course has been developed to meet the changing needs of practices. Participants include GPs, practice managers and other practice staff with managerial responsibilities. This new course format, which includes formal assessment, meets the training and the management skills needs of participants to a high level. 95% of participants of the previous course gave the course a rating of very good to excellent.

Delivery

The course is delivered over 9 months through a combination of website supported delivery, workshops and self-directed learning. The course utilises the specialist expertise available within the College and also external resources. External accreditation of this programme is being currently explored.

General Practice Registrar Management in Practice Certificate Course: October 2007 – May 2008

The first course for GP registrars commenced in autumn 2007 and was over subscribed. The course has been specifically developed to meet the 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.

This course has been designed in response to requests from a number of GP training programmes, current and former registrars and to address practice management competencies as specified within the Core Curriculum. First course commenced in September 2007. It is proposed to commence the next course in September, 2008.

International Family Practice Maturity Matrix: Practice Management Self- Assessment Tool

The International Family Practice Maturity Matrix assesses the ‘maturity’ of organisational development (and organisational effectiveness) of a practice. The director of the Management in Practice Programme and Dr Andree Rochfort (director of the Health in Practice Programme), were invited as part of EQuIP² to take part along with a number of European Colleges in the second phase of the Maturity Matrix Study.

The maturity matrix, an organisational assessment tool was developed for use in GP/primary care by the Department of Primary Care and Public Health Cardiff University Wales. A newly re-designed ‘International’ version has been developed by collaboration between Cardiff University, EQuIP and the Centre for Quality of Care Research, Netherlands. A practice self-assessment tool is the pilot phase of the development of a European wide version of the matrix. Training was undertaken by the College representatives and a list of potential participating practices identified. The study/investigation in the Irish context is ongoing.

Practice Management Pilot Study and Evaluation: Project Group

(ICGP, HSE, Department of Health and Children and UCC.)

The project group was set up to conduct/oversee an evaluation of a Practice Management Pilot project commenced and funded by the Department of Health and Children. 12 practices were successful in their applications and received grants from this project. The aim of the study was to examine the role, role development and contribution of the post of practice manager in each of the practice sites. The final evaluation, commenced in November 2007, assessed the outcomes of the pilot and produced a final report. The project group overseeing the project was made up of representatives from the HSE, the Department of Health and Children, the Department of General Practice at University College. The Director of the Management in Practice Programme represented the College. The final report was completed by Horwath Consulting Ireland and agreed in April 2008.

² European Association for Quality in General Practice/Family Medicine

MD Health eCoach Partnership

We have been involved in collaborative work on the production/adaptation of a web-based doctor health support system /tool. Co-collaborators on this initiative are Dalhousie University (Halifax, Nova Scotia), Canadian Medical Association (CMA), Alberta Medical Association, Physician and Family Support Program (British Columbia), and the Physician Health Program (BC PHP) - refer to HIP report.

Organisational Development and Services to Members – International Perspective

The director participated in the first European Colleges and Associations Conference on organisational development in April 2008. The director attended on behalf of the ICGP, one of the 14 bodies represented. This was the first European meeting focusing on the internal organisational development of colleges and associations of general practice. It initiated a European wide forum for the exchange of information, innovative ideas and sharing of skills. The areas addressed included best practice at organisational level, services to members, funding and innovative projects. The overall objective is to create networks and to improve the collaboration and cooperation among European colleges. The conference was hosted by the Portuguese Association of General Practitioners/ WONCA Europe.

Network of Establishing GPs

The Director is collaborating with the NEGS project directors on the production of a comprehensive guide /handbook for the establishing GP with the view to publication in the autumn.

Practice Staff Training Courses

Four practice staff courses were delivered between May 2007 and April 2008 in Tullamore and Dublin. 41 participants registered.

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

Human Resource Compliance Service

The take-up for the HRC service has been positive and continues to grow. This further enhances the existing service provided by the programme to GPs in the area of employment regulations. The service provided is onsite and the support and advice given enables GPs to become fully compliant with their legal obligations and to improve human resources management in the practice.

FUTURE PLANS

- ^ Development of an IT training course (designed to meet the needs of practice managers and other staff) is being considered to increase IT uptake and efficiencies for all computer users in the practice – both clinical and administrative.
- ^ A number of one-day modules/seminars are planned to update skills and knowledge of practice managers and other practice staff. It is hoped that these will be made available in the near future.
- ^ External accreditation of all courses is being actively investigated.
- ^ Practice Managers' Conference.

Publications

- ^ GP Registrar Handbook, first published in 2005, is currently being updated.
- ^ A Handbook for the Establishing GP is now at draft stage.

Dermot Folan, Programme Director

www.icgp.ie/mip



GPIT TRAINING Report

The GPIT Training Programme was re-established in September 2006. Ten GPIT tutors and the programme director provide support and training to practices covering a wide range of issues. In most cases, support is provided in the GP's surgery with follow up by phone and email. The tutors also sit on a variety groups and HSE committees relevant to the area of health informatics and contribute to a number of ICGP training courses.

MEMBERS OF PROGRAMME TEAM

Dr Brian Meade: Project Director. There are currently 10 tutors providing support to practices around the country:

Donal Buckley: HSE Dublin/Mid Leinster

Dr Fergus McKeagney: HSE Dublin/Mid Leinster

Dr John Cox: HSE Southern Area

Dr Frank Hill: HSE Southern Area

Dr Kieran Murphy: HSE Southern Area

Dr Jack MacCarthy: HSE Western Area

Dr Barry O'Donovan: HSE Western Area

Dr John Sweeney: HSE Western Area

Dr Martin White: HSE Dublin/North East

Dr Anne Lynott: HSE Dublin/North East

Niamh Killeen, ICGP, Administrator

PROGRAMME ACTIVITIES

^ 52 applications were received from practices over the past year and these have been responded to by individual tutors and the programme director.

^ Most of these were from practices that were already using GP practice software and wished to further develop their use of such applications. A significant number came from practices that had recently acquired broadband connectivity and wished to start receiving electronic lab messages or use the online GMS STC claims system. A breakdown of the requests for support was as follows:

Task	Number	Percent
Recall for chronic disease, cervical smears, immunisations	17	20%
Electronic laboratory messaging	10	12%
Referral letter generation and templates	9	11%
Consultation notes	7	8%
Becoming paperless / scanning	7	8%
Use of Internet and email	7	8%
Ante-natal visit recording and claims	7	8%
Other	20	25%
Total	84	100%

^ In addition to the two annual workshops for GPIT tutors on October 3rd and April 23rd, an additional workshop focusing on ICT security was held on December 5th. The average attendance at these workshops was over 80%.

^ With the appointment of Dr Brian O'Mahony as GPIT Project Manager in September 2007, under the National HSE/ICGP GPIT group, a number of important policy documents have been produced. The tutors have provided important feedback and critical analysis of these documents prior to publication. These documents include:

- o GPIT Policy Document on Acceptable Use of the Internet for GP Practices.
- o GPIT Discussion Paper on the Scanning and Shredding of Documents by Paperless Practices.
- o No Data No Business - a GPIT Advisory Document on IT Security for General Practice.
- o General Practice Software Management Systems - Requirement for Certification 2007.

^ All of these documents are available on the GPIT section of the ICGP website www.icgp.ie/gpit.

^ Tutors provided input to the following ICGP meetings and courses:

- o Dr Barry O'Donovan, Dr Brian O'Mahony and Dr Brian Meade delivered several modules on ICT issues to the 2007 ICGP Summer School.
- o Dr Brian Meade and Dr Barry O'Donovan ran a workshop on "Use of the Internet During Consultations" at the ICGP AGM in May 2007.
- o Dr Anne Lynott delivered training to the ICGP management in practice courses.
- o Dr Brian Meade and Dr Fergus McKeagney delivered training to ICGP practice staff training courses.

- Tutors delivered lectures and training to a number of other groups including ICGP faculty meetings, GP training programmes and GP software user groups throughout the year.

FUTURE PLANS

A key focus this year has been on the area of practice IT security. It had become apparent to many of the tutors that IT security is an area that some GPs appear to ignore. Without adequate backup procedures and internet security infrastructure, GPs risk losing all of their valuable data. With the recent publication of the No Data No Business publication by Dr Brian O'Mahony it is hoped to assist as many GPs as possible to implement the recommendations contained in the document as soon as possible.

Another goal for next year is to help GPs use the Internet as a source of relevant information more effectively. With widespread availability of broadband internet access and the greater number of useful medical websites, GPs have now the opportunity to use the web as a useful resource for accurate and up to date medical information. The programme will be hoping to introduce the web to GPs as an additional source of high quality information, and to improve the searching skills of GPs who are already using the Internet.

Dr Brian Meade, National GPIT Training Programme Director

www.gpit.ie



HEALTH IN PRACTICE Report

Health in Practice is a programme of proactive and reactive health information, education and customised confidential healthcare for GPs and their families. GPs include all members of ICGP, including trainees, registrars, GP locums, sessional and part-time GPs.

MEMBERS OF PROGRAMME

- ^ Dr Andrée Rochfort, MICGP: Programme Director.
- ^ Ms Margaret Cunnane: HiP Administrator.
- ^ Mr Dermot Folan: Assistant CEO ICGP.
- ^ Healthcare Networks: GPs, counsellors, psychologists, psychotherapists, occupational physicians and psychiatrists.

PROGRAMME ACTIVITIES DURING YEAR

- ^ Supporting Healthcare Networks with their requests and through the 5th Annual HiP Networks Seminar, in October 2007. The seminar for HiP Healthcare Networks peer support: theme: burnout. Guest speakers: Ursula Bates (Psychologist, Blackrock Hospice) and Dr Deirdre Kinlen, (GP, Sandyford).
- ^ EQuIP (European Society for Quality in General Practice) meeting, Prague, April 2008. EQuIP has a European Working Group on professional health as it recognises the doctor factor as one of the important factors governing the quality of care.
- ^ WONCA Europe Conference, Paris, October 2007. I presented a workshop entitled “At the heart of Quality Care – Physician Health” along with two EQuIP colleagues from Switzerland and Belgium.
- ^ Discussions with Canadian Medical Association and two Canadian physician health programmes regarding partnership on a web-based health promotion tool for doctors and their families. These negotiations are ongoing.
- ^ I organised a Doctors Health Symposium at the Annual Conference of National Association of GP Trainees, Galway in November 2007, chaired by Prof Paul Finucane, UL Medical School. The guest speakers were Dr Dearbhail O’Driscoll, Dr Anne-Marie McGinley and Dr Abbie Lane.
- ^ Lectured to 1st year medical students at UCD and UL (January, March 2008).
- ^ Invited to attend BMA Seminar, London January 2008, “The ‘Paranoid and Persecuted’ Doctor: - Taking a Reality Check”.
- ^ Attended conference of National Clinical Assessment Service (NCAS) a NHS organisation that deals with assessing doctors whose clinical performance and/or health or behaviour is of concern: “Overdue Business - Supporting the Health of Health Practitioners”.
- ^ Contribution to ICGP Management in Practice Certificate Course on Stress Management in General Practice and Health & Safety Management in General Practice.
- ^ Course tutor for ICGP/Faculty of Occupational Medicine RCPI joint e-learning course in occupational medicine. This is a preparatory course for the LFOM examination held by the RCPI.

PROGRAMME TIMETABLE

Jan 2008 – June 2008

A guidance document for doctors, their colleagues and family members on managing suspected alcohol and substance misuse in self, colleagues and family members. This work in progress is in conjunction with Dr Ide Delargy, Chairperson of the Sick Doctor Scheme. This booklet will highlight options for interventions, what to do and what to say in a clear stepwise manner, and where to seek further advice. The guidance will take international models into account and will support the Medical Council’s Ethical Guidelines.

We have requested a meeting with the Health Committee of the Medical Council in order to ensure that they are satisfied these management guidelines comply with ethical guidelines for the profession. We hope to seek endorsement of the Health Committee, which has a new Chairman in the past month. We then endeavour to circulate these guidelines to various representative bodies in order to provide guidance and assistance to those who are in a position to intervene earlier for doctors in difficulty. We could then be in a position to run workshops at forthcoming ICGP Winter Meetings, Summer Schools and AGMs for GPs and their families.

June 2008

The Health in Practice Programme is providing two workshops for the forthcoming Summer School in Kilkenny in June 2008 - Stress Management for GPs and Health & Safety Management for General Practice.

April 2008– November 2008

Scientific evaluation of the activities of the Health in Practice Programme is now due. It was deliberately not built in from the start of the programme for fear that service users would feel their contacts would be individually logged and reviewed by the College. This is planned for 2008 under the guidance of ICGP Director of Research, Dr Claire Collins. The evaluation will be carried out through the doctors and counsellors on the four networks so that users' identities will be preserved for confidentiality purposes. It is hoped to submit this report for publication in a peer reviewed journal, and this will form a small part of the necessary continuing marketing of the programme to members.

April 2007 –

My involvement on the EQuIP Committee and in their Working Group on Doctors Health in particular, has already helped to highlight Health in Practice as a model of healthcare and support for GPs/doctors. My continuing involvement with this group is relevant for ICGP Health in Practice Programme. I am currently working on completing a publication for this EQuIP Working Group based on a European survey seeking information on what health supports are available for doctors in the various European countries (see separate EQuIP section in 2008 College Annual Report).

April 2007 -

The International Family Practice Maturity Matrix is a practice-based self assessment tool to measure and stimulate organisational development. The newly re-designed 'International' version has been developed by collaboration between Cardiff University, EQuIP (a pan-European group of GPs and researchers aiming to improve the quality of patient care) and the Centre for Quality of Care Research, Netherlands.

Dermot Folan (director, Management in Practice) and I attended a training course to be practice-based facilitators in order to facilitate group-based consensus self assessment. Health in Practice is involved because of the ICGP experience of the associations between practice management, stress management, personal effectiveness and positive psychological health.

March 2008 -

Preliminary/feasibility stages of research proposal to assess older doctors' views on their own personal health and work ability issues.

FUTURE PLANS

International research recommends continuing education in the field of appropriate self care and doctor-to-doctor care for all medical professionals. Promotion of the ICGP Health in Practice is required for established GPs, their families, and GPs in training, so that they know how and where to access assistance - particularly in crisis situations, and without fear of loss of confidentiality. Future development of this service is dependent on evaluation of feedback from users and service providers, while keeping abreast of international developments.

Dr Andree Rochfort, Programme Director

www.icgp.ie/hip



NETWORK OF ESTABLISHING GPs Report

The College undertook a series of regional meetings in 2002/2003. Part of the feedback from these meetings highlighted the specific needs of the younger GP. The 2003 AGM held a symposium on the ‘Young GP Principal and GP Assistant’. This was well received and further lobbying by individuals led to a meeting of young GPs in Tullamore in September 2003. This meeting called for more support for new and establishing GPs by the College. A ‘new GP’ forum was held at the AGM in 2004.

In September 2004, the first project leader of the Network of Establishing GPs (NEGs), Dr Deirdre Burns was appointed and funded by the ICGP. During the tenure of Dr Burns, an initial needs assessment of establishing GPs was carried out and recommendations were made and submitted to Council. Parallel with these is the initial objective of fostering greater involvement by establishing GPs in College affairs and structures which is seen as a vital investment in the future of the College. Regional meetings began in several areas of the country on a twice-yearly basis. They were found to be an effective medium for organising establishing GPs locally, both in terms of information dissemination and networking. In January 2007, Dr John Ball and Dr Shane McKeogh were appointed as Project Directors to replace Dr Deirdre Burns.

MEMBERS OF PROJECT

Project Leaders

Dr John Ball and Dr Shane McKeogh.

Other Members of Project Group

Dr Aisling Ni Shuilleabhain	Dublin
Dr Darach O’Ciardha	Dublin
Dr Deirdre Burns	Cork
Dr Shane McCarthy	Cork
Dr Sinead Murphy	Galway
Dr Brian Osbourne	Galway
Dr Eithne Brennar	South East
Dr Catherine O’Donoghue	South East
Dr Sheena Stephens	Midlands
Dr Cliona Ryan	IMO GP Committee
Dr Amelia Barwise	IMO GP Committee

SUMMARY OF PROJECT

- ^ Clarify the needs of establishing GPs.
- ^ Make recommendations as to how these needs can be addressed by the College and aid in implementing these recommendations.
- ^ Identify barriers to younger GPs participating in the College.
- ^ Update and promote the NEG’s section on the ICGP website – www.icgp.ie/neg.
- ^ Prepare a Handbook which will serve as a guide to the establishing GP.

PROJECT ACTIVITIES/TASKS

Website

- ^ The changes to the NEG’s discussion board area of the ICGP website detailed in the 2007 Annual Report have resulted in an increase in usage of this forum. According to the ICGP Web Manager, the NEG’s discussion board is now one of the most used discussion boards within the College.
- ^ New topics of interest to establishing GPs are added regularly and discussion points are posted on an almost daily basis.

Handbook

- ^ Work on the Establishing GP Handbook is close to completion. Considerable time has been spent by the project directors and the Assistant CEO of the College on this worthwhile initiative. A draft document is completed and is currently at proof reading stage. It is planned to launch the Handbook later this year.

Regional Meetings

- ^ “Pathways to Partnership”: This was the title of the autumn 2007 meetings. Meetings took place in Dublin, Cork, Galway and the South East. The meetings were well received with over 150 GPs attending one of their local meetings. The meetings were resourced by GPs who had taken different routes to partnership and were prepared to share the benefit of their experiences.
- ^ “NEGs National Survey – the Results”: This is the title of the spring 2008 meetings. The results of the survey are being presented at local/regional meetings with discussion around the results facilitated.
- ^ A new regional coordinator has been appointed for the Midlands and the Midlands will partake in the next round of regional meetings.

National Conference

- ^ Planning for the inaugural ICGP NEGs Conference is well underway and is set for September 2008. It promises to be an interesting and well attended conference for establishing GPs from all over Ireland.

Survey

- ^ An online survey of the ICGP NEGs membership was undertaken during April 2008 over a 4-day period. 180 GPs responded to the questionnaire from a possible 629 for whom the College had e-mail addresses. This represents a 28% response rate. The results are currently being analysed. Initial results suggest overwhelming support for the usefulness of the ICGP NEGs group to its members

ICGP AGM, May 2007

- ^ John Ball, project director presented at the ICGP AGM 2007 on the topic “My ICGP – Meeting my Needs - Value for Money?”

ICGP/IMO Conference, April 2008

- ^ Shane McKeogh, project director presented at this conference on the topic “Irish General Practice – the Capacity to Deliver – Models of Practice & Contracts”.

Medical Newspaper Interviews

- ^ Both of the project directors have undertaken interviews with several medical newspapers in order to increase the profile of the establishing GP group.

DETAILED PROJECT DESCRIPTION

- ^ There are currently 703 GPs listed as part of the establishing GP group.
- ^ Shane McKeogh and John Ball share the role of project director.
- ^ 13 GPs make up the NEGs Committee.
- ^ There are currently 5 local areas of the country organising regional meetings.
- ^ 150 GPs attended the last round of NEGs regional meetings.
- ^ 180 GPs took part in the recent online survey of NEGs.

FUTURE PLANS

The project began in 2004 and is now in its fourth year. It continues to go from strength to strength. Numbers of interested GPs have increased by several hundred during 2007. The project plays a crucial role for the establishing GP in that it serves to collate, organise and distribute useful practical knowledge through several media on an ongoing basis. It serves as a signpost in the wilderness for many establishing GPs who find themselves at the most vulnerable time of their careers. By extension, it very effectively fosters engagement with the College from the next generation of GPs.

- ^ Launch and distribution of the Handbook for Establishing GPs.
- ^ Inaugural NEGs National Conference in September 2008.
- ^ Continue to gather, represent and provide an effective voice for establishing GPs views to the College and primary care at large.

ADMINISTRATIVE RESOURCE

Orla Sherlock, ICGP.

Drs John Ball and Shane McKeogh, Project Directors

www.icgp.ie/neg



DIRECTOR OF RESEARCH Report

The main aim of the programme is to develop research within the College and includes, as a primary function, the promotion of methodologically rigorous research in primary care. The ICGP Research Committee supports the programme through the provision of advice and direction. The terms of reference of the Research Committee and have recently been updated to take account of other relevant developments. Due to the success of the programme, a research centre has now been established in the ICGP, conducting a number of large-scale projects, which are externally funded.

MEMBERS OF TEAM

Dr Claire Collins: Programme Director

ICGP Research Committee Chair: Dr Owen Carey

Ms Carol White: Administrator

Ms Casey O'Brien: Research Assistant

Ms Catherine Vahey: Research Assistant

Ms Rebecca Murphy: Research Assistant

Ms Áine O'Brien: Research Assistant

Ms Anna de Siún: Research Assistant

PROGRAMME ACTIVITIES/TASKS DURING PAST 12 MONTHS

In addition to capacity building activities such as research workshops and mentoring, the projects currently being undertaken by the ICGP are:

- ^ Feasibility study regarding the establishment of a general practice morbidity and epidemiological database.
- ^ Development of Quality Indicators for Use in General Practice in Ireland under the direction of Dr Ailis Ni Riain.
- ^ Study of Infectious Intestinal Disease in the Community – Determining Disease Burden and Calibrating National Surveillance Systems in the Island of Ireland.
- ^ In-depth epidemiological analysis of the HeartWatch database and additional research on this population with UCD School of Public Health and Population Science.
- ^ Development of a Healthy Lifestyle Education for General Practice.
- ^ Audit of HSE East Coast Area GP Referral Guidelines for Suspected Cancer.
- ^ Patients' Depiction of Their General Practitioner/Family Physician Across Europe in collaboration with College National des Generlaistes Enseignants (CNGE) France.
- ^ Patients' Attitude to Preventive Services and Lifestyle in collaboration with EUROPREV, WONCA.

Additional projects which are currently being facilitated by the ICGP are:

- ^ Continuing Medical Education in Ireland.
- ^ A Needs Assessment of Neuroscience Services.
- ^ Rotavirus Infection: a Pan-European Study.
- ^ A Needs' Assessment of Services for People with Arthritis and Relation Conditions: a Survey of General Practitioners.
- ^ General Practitioners' Management of Patients with Epilepsy: The Extent & Utilisation of Information and Communication Technology.
- ^ Bowel Cancer Screening Pilot Project in the Tallaght area.
- ^ Feasibility Study of a Diabetes Register in General Practice.
- ^ Needs Assessment of GPs in Relation to the National Intercultural Healthcare Project to Provide Cultural Competence Training to all Staff.

In addition to the above activities, the director of research has also represented the ICGP on a number of committees and project advisory groups including funding panels for the Health Research Board and the Irish Heart Foundation. Assistance has been provided to other ICGP directors in the design and data analysis aspects of the research, audit and evaluation associated with their programmes.

DETAILED PROGRAMME DESCRIPTION

Research Projects

There are a number of projects being undertaken. The details of the projects' aims, methodology and outcomes can be viewed on www.icgp.ie/research or by contacting the Research Centre.

Research Practices

Invited 40 practices to receive research support and mentoring.

Research at ICGP Meetings

There are opportunities for GPs and GP registrars to present their completed research at the AGM and Winter Meeting. The Winter Meeting is open to all, while the AGM is open to GP registrars only. A poster presentation session of selected abstracts is held at both meetings; with a small number of these further selected to give a short oral presentation. Every year a prize is awarded at each meeting for the best research presentation. Application forms and submission deadlines are detailed on www.icgp.ie/research.

Dr Nicholas O'Keeffe, Dr Yvonne Kearney, Dr Clare Collins (ICGP Director of Research), Dr Niamh O'Brien and Dr Joan Lynch at the GP Registrar Poster Presentation at the ICGP 2007 AGM



Educational Bursaries to Present Research Findings

As part of the ICGP's ongoing work to support research in general practice in Ireland, the College offers educational bursaries for ICGP members whose research ideas or completed research has been accepted for presentation at the European General Practice Research Network meetings. In order to avail of this bursary confirmation of acceptance of presentation from the EGPRN must be supplied. This bursary may also apply to WONCA International Conferences on the same basis subject to availability of funds.

Online Research Listing

A web-based listing of research projects is available in the library section of the ICGP website, which provides a list of projects being undertaken in general practice and by general practitioners. This provides a resource for researchers to identify collaborators and to review projects completed and in progress.

PROGRAMME MILESTONES/DELIVERABLES/OUTPUTS

During 2007, 4.5 full-time equivalent research staff were employed using externally secured funding. This has permitted the College to engage in a number of large scale projects which will add to the evidence base of Irish general practice.

Recent Reports/Publications by Research Centre Staff

- ^ The Discrepancies Between the Information Pregnant Women Expect and Receive in Ireland and the Lost Opportunity for Health Promotion and Education. Collins C. International Journal of Health Promotion and Education. 2007; 45(2):61-6.
- ^ Barriers to Early Diagnosis of Cancer in Primary Care: A Needs Assessment of GPs. Daly H, Collins C. IMJ;100(1): 624-26.
- ^ Risk Groups and Uptake of Influenza and Pneumococcal Vaccine in Ireland. Mereckiene J, O'Donnell J, Collins C, Cotter S, Igoe D, O'Flanagan D. Euro Surveill;12(12) [Epub ahead of print]. Available online at <http://www.eurosurveillance.org/em/v12n12/1212-227.asp>.
- ^ Odds of ovarian hyperstimulation syndrome (OHSS) – time for reassessment. Mocanu E, Redmond ML, Hennelly B, Collins C, Harrison R. Hum Fertil (Camb). 2007; 10(3):175-81.
- ^ Maternal Folate Status and Neural Tube Defects in Ireland: the Need for a National Food Fortification Program. Walsh T, O'Broin S, Cooley S, Donnelly J, Collins C, McMillan H, Harrison RF, McMahon C, Geary M. Ir Med J. 2007; 100(5):469-72.
- ^ The Determinants of Lifestyle Counselling Among Practice Nurses in Ireland. Lambe, B., Connolly, C and McEvoy, R. International Journal of Health Promotion and Education. In Press.

In addition to research guidance articles, the following articles were written for FORUM:

- ^ “Do you Speak my Language? Research using Clinical Classifications and Terminologies”.
- ^ National Telephone Survey: Risk Groups for Influenza, Uptake of Influenza and Pneumococcal Vaccine, and the Burden of Influenza-like Illness in the Adult Population of Ireland during the 2005/2006 Influenza Season.
- ^ Early Detection of Cancer: A Needs' Assessment of General Practitioners
- ^ Evidence-Based Health Care: A Hands-On Workshop.

^ Summary of Primary Care R&D in Ireland - a report commissioned by the Health Research Board of Ireland and undertaken by Professor David Mant.

FUTURE PLANS

^ Implement the action plan which supports the ICGP Strategy 2008-2013.

^ Investigate research collaboration across EU Base.

^ Develop a web-based research data collection system.

^ Expand the ICGP research project listing.

^ Seek funding to conduct research into priority areas as identified by the ICGP Executive, the ICGP Research Committee and ICGP members.

^ Continue to communicate with the wider general practice, medical and academic community through dissemination and publication of research findings.

Dr Claire Collins, Director of Research

www.icgp.ie/research



CHAIR OF RESEARCH ETHICS COMMITTEE

Report

The Committee meets on average five times each year. The standard operating procedures and dates for meetings can be viewed on www.icgp.ie/research. Below is a breakdown of the research/trials that the committee reviewed between April 2007 and April 2008.

Type of Study	April 2007 – April 2008
Pharmaceutical Clinical	None
Pharmaceutical Non Clinical	1
Hospital	2
Nurse	2
University	6
GP/Trainee	25
Other	6
Total	41

MEMBERSHIP

The committee is made up of expert and lay members.

Expert Members

Dr Niall Maguire (Chair)

Dr Walter Cullen (Vice Chair)

Dr Thomas Maher

Prof Colin Bradley

Dr Cliona McGovern

Dr Cormac O' Dubhghaill

Dr Kieran Doran

Lay Members

Dr David Smith

Dr Teresa Maguire

Mrs Anne O' Cuinneagain

Ms Pauline Tierney (Admin)

Dr Jean Holohan

The Committee was pleased to have Pauline Tierney return as administrator following her leave, and is very grateful to Carol White for her support during Pauline's absence. The Committee was busy with trials for non-drugs studies from and/or involving general practice. The Committee welcomed several new expert members. Finally, the Committee made good progress with its effort to improve guidance to the GP training programmes about the ethical requirements for trainee research.

Dr Niall Maguire, Chairperson

www.icgp.ie/research