

Irish College of General Practitioners



Annual Report 2013



The Irish College of General Practitioners

About the Irish College of General Practitioners

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

Contact Us

Irish College of General Practitioners
4-5 Lincoln Place, Dublin 2
Tel: 01 6763705, Fax: 01 6765850
Email: info@icgp.ie
Web: www.icgp.ie

College Activities

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

TABLE OF CONTENTS

Reports of the College Officers	1
Reports of the Membership Committee	12
Reports of the Education Governance Committee	33
Reports of the Quality & Standards Committee	63
Reports of the College Website & Communications Committee	78
Reports of the Library & Information Service	85
Reports of the Research Committee	90
Reports of the Post Graduate Training Committee	94



Chief Executive Officer's Report

Author: Mr Kieran Ryan

On numerous occasions over the past 12 months, we frequently asked the question, "What is the College?" However, the more appropriate question is probably, "Who is the College?" because the ICGP is a membership based organisation and it is the membership that creates the College as opposed to a building or proximal institution. I am always struck by the level of membership involvement in College activity. Literally hundreds of ICGP members are involved in teaching, training, supervising, representing, reviewing and learning throughout the year. This level of participation and gathering under the umbrella of the College defines the very essence of collegiality. GPs should be proud of such a vibrant profession dedicated to continuous learning and up-skilling in the interest of their patients. Bearing all this in mind, I am clear that my principal duty is to ensure that we utilise membership funds to develop services, structures, supports and representation to continue the vibrancy of collegiality that has become so impressive.

Teamwork

The level of activities and service can only be achieved with a dedicated and skilful team. Over the past year we have conducted a review of all members of the ICGP team to better understand their roles and responsibilities. In addition, we listened to their ideas and suggestions on how we can improve services. We also looked at the main functions of ICGP and how to best resource these areas with effective teams. We strengthened our teams in Education, Professional Competence and GP Training. We also involved a number of external experts in ICT and education who have become an important part of our wider team membership. The main focus on our team development was to build a confidence for adaptability and flexibility to deal with the many challenges ahead. I must acknowledge the commitment of ICGP staff to the membership and thank each of them for their dedication and rising to the many challenges of change.

Delivering value and optimising resources

We have been fortunate to have grown a level of resources which allows us to invest in essential infrastructure and staffing to continue the development of ICGP services to members. We are at the same time very conscious of the pressures on members in the current economic climate. In 2011 we reduced membership subscriptions by 7.5% and in 2012 we reduced by a further 5%. This was in recognition of the introduction of mandatory professional competence requirements. Careful cost controls, increased demand for services and effective use of unrestricted grant sponsorship has ensured we continue to deliver more services without adding costs to members. Over the past while we have noticed that there is a need to deliver education and services in a manner that fits with the busy work lifestyle of GPs. This means more focus on e-learning and the use of ICT modalities for delivering education and hosting meetings. Over the next two years we shall significantly invest in our e-learning platform to support this modality of service delivery. I want to acknowledge the innovation and creativity of our education services team lead by Mr Nick Fenlon, Director of Education.

The promised transfer of GP training responsibilities from HSE to ICGP this year and that of the transfer of the CME budget for GPs from the HSE will mean a requirement for additional staffing and development of systems to administer and manage these functions. As a result, we need to review our accommodation situation. Office space is at a critical occupancy level in Lincoln Place and we have only two meeting rooms. The

executive of ICGP agreed to convene a group to look at our space and accommodation requirements.

Irish Primary Care Research Network (IPCRN)

One of the most significant projects we embarked on in 2012 was our collaboration with the HRB National Primary Care Research Centre in RCSI and NUI Galway to form the Irish Primary Care Research Network. The ICGP have invested significant funding in this initiative to address the need to have robust information and research based data on the achievements of Irish General Practice. The IPCRN is ably led by Dr Sean Higgins and Mr Rob Dwyer who is a talented software developer. In addition, we also acknowledge the collaboration with the various GP Practice Software providers. The IPCRN is an independent, not-for-profit venture with a board representing the three collaborating institutions and external representatives and is chaired by Dr Brian O'Mahony. The IPCRN has already developed a range of tools to facilitate GPs in their own practice in utilising their practice database more effectively and support their professional competence requirements for clinical audit. The tools developed by the IPCRN will be guided by a range of Clinical Audit Guidelines developed under the expertise of Dr Claire Collins, Director of Research. The use of these local tools developed by the IPCRN will lead to a greater awareness and focus on improved data quality. This will support high quality and effective research in Irish general practice. I would encourage all members to explore the tools and projects of the IPCRN and enrol as a participating practice.

GP Training and CME Tutor Network

In 2012, the HSE indicated that they were to transfer their GP training responsibilities to the ICGP to be in accordance with the Medical Practitioners Act 2007. This did not actually happen but notwithstanding this ICGP was required to undergo a formal accreditation by the Medical Council as a body recognised under section 89 of this act. The preparations for this accreditation were co-ordinated by Dr Gerry Mansfield, National Director of GP Training and his team. The process involved collaboration with all elements of GP training, including trainees, trainers, programme directors, accreditors (formerly assessor group), examiners and members of certification committee. Our accreditation assessment took place in February 2013 and during 2013 we shall receive a report from the Medical Council which will be authorised by the Minister for Health.

The HSE have been reducing the funding provided for GP CME tutor network for a number of year and more than 30% of the funding has been cut. In addition the moratorium on staffing meant that vacancies for tutors in west Dublin and Laois Offaly were not replaced. The ICGP council agreed that if the HSE funding could be secured without further cuts, the ICGP would support the CME tutor network financially to provide for further tutors and groups to help members meet their CME requirements. The HSE have indicated their intent to transfer the CME Tutor budget and responsibilities to the ICGP in 2013. I shall work closely with Dr Annraoi Finnegan, Director of CME Tutor Network, on these developments.

Governance and accountability

In 2011, the ICGP Council requested that we examine the governance structures of the ICGP. There have been many changes in the governance environment in recent times and so ensuring that the ICGP meet the highest standards of Governance and accountability was the principle driver for the review. The ICGP engaged the expertise of Prospectus Strategy Consultants to facilitate the review. They outlined a methodology which would assess current structures, compare with best practices, compare with

international peer institutions such as RCGP and RACGP, diagnose the concerns of council members in relation to their role as directors and most importantly develop the most appropriate structure that still ensures that the ICGP is a membership based organisation and members can become involved in the governance of the College.

A range of individual interviews, a full council survey, five council workshops, presentations at two council meetings and constant work by the executive arrived at a proposed structure which the Council will recommend to the members for approval at our 2013 AGM. The proposal advises the establishment of a Board of Management of the ICGP to replace the Council as the current Board of Directors. The Council will become the main membership representative body which will be formed by representatives from the ICGP Faculties, members directly elected to the Council and representatives from some special groups. The Council will then elect a President, Vice President and eight members to service on the new Board of Management. We shall also propose the appointment of two external (non-GP) members of the Board who can bring particular skills or expertise to the Board of the ICGP. The CEO and the Management are not members of the Board but will be in attendance. The standing committees of the Council will become standing committees of the proposed new Board and a new Audit Committee will be established to focus on risk management in accordance with best practices.

The governance review reignited an interest in the structures of the ICGP and whether they are fit for purpose. It also provided an opportunity to review the ICGP strategic plan. It clearly highlighted the values of the ICGP and its primary aim of supporting members to deliver the highest standards of general practice for patients. There will be a range of communications issued to the members to assist them in considering the new governance proposals. I am delighted that the Council have made a recommendation on reform of our governance structures and I look forward to the challenge of implementing the recommendations of the membership.

Finally, I want to thank Dr John Delap, whose term as Chairman of the College, is ending this May. John was a great support to me and the management team and provided strong leadership of the College Executive through the past three years of great change for the ICGP. I also want to thank our president, Prof Bill Shannon, incoming president Dr Seamus Cryan, immediate past president, Dr Rita Doyle and all members of the executive for their commitment to your College and the leadership they brought to their respective portfolios. It is also important to acknowledge the contribution of Dr Richard Brennan who represented the ICGP on the Medical Council. Richard ensured that the reputation and standing of Irish General Practice was greatly enhanced as well as service to the medical profession in general. A new Medical Council will be established in 2013 and Dr Rita Doyle has been put forward as our new representative for the new Council. Lastly, but by no means least, I want to acknowledge the support and achievements of my management team, Dermot Folan (COO), Dr Margaret O'Riordan (Medical Director), Dr Claire Collins (Director of Research), Nick Fenlon (Director of Education), Dr Gerry Mansfield (National Director of GP Training) and all of the staff of the ICGP. Their dedication to service and high standards on behalf of Irish general practitioners continues to impress and I am very grateful.



President's Report

Author: Prof Bill Shannon

Events attended

- 13 March 2013** Guest speaker at UCD GP Trainers Workshop run by Dr Nick Breen
- 12 March 2013** Guest speaker at Kildare/West Wicklow KDoc Annual Meeting, Naas
- 7 March 2013** Accompanied the CEO to Living Health Medical Centre, Mitchelstown, run by Dr Tom O'Callaghan and colleagues to meet with eight MBA students from the University of Michigan. They were spending some time with Dr O'Callaghan, exploring the Irish Health Service, and the pivotal role of the family doctor and the ICGP
- 2 March 2013** ICGP Council Meeting, Dublin
- 2–35 March 2013** Annual Dinner of the Sligo GP Clinical Society
- 19 February 2013** Seminar on Mental Health in Primary Care – the Sandwell Approach. Guest speakers were Dr Ian Walton and Miss Lisa Hill (UK). This was a most informative and highly relevant seminar – organised by Mr Pearse Finegan – lessons from which might well be adapted to the Irish situation. The attendance included Mr Alex White and Ms Kathleen Lynch, Junior Minister with Responsibility for Mental Health
- 9 February 2013** Final Executive meeting to sign off on the Prospectus Report on the new ICGP governance plans
- 8 February 2013** Dinner with the Bray Clinical Society in Kilmacanogue
- 15 January 2013** Guest speaker at the Mid-West GP Trainers Workshop, Limerick
- 19 January 2013** ICGP Executive meeting
- 14 December 2012** Addressed the Meath Faculty on 'Recent Developments in Graduate Entry Medical Education in Ireland' in Navan
- 8 December 2012** ICGP Executive meeting – Prospectus Report
- 7 December 2012** RCGP Winter Meeting in Dublin. The guest speaker was Dr Iona Heath
- 1 December 2012** 'Doolin Lecture' (IMO) at the Royal College of Surgeons, Dublin
- 29 November 2012** Research Information evening in Killaloe, Co Clare
- 20 October 2012** ICGP Council meeting and graduation ceremony
- 20 October 2012** Annual Dinner of St Luke's Day Symposium at RCPI, Dublin
- 19 October 2012** ICGP Memorial Service, Unitarian Church, Dublin

- 12 October 2012** Annual Dinner, Faculty of Paediatrics, RCPI, Dublin
- 5 October 2012** Annual Dinner of South Kerry GP Trainers, Killarney
- 6 October 2012** Guest speaker/facilitator at the South Kerry GP Trainers Workshop, Killarney
- 6 October 2012** IHCA Annual Dinner, Galway
- 15 September 2012** ICGP Executive Meeting
- 10 September 2012** Attended a one-day symposium on suicide prevention at the Royal Hospital, Kilmainham
- 22–23 June 2012** ICGP Summer School and workshop on the future governance of the College, and the Executive meeting

Participated in several meetings of the Certification Sub-Committee of the ICGP chaired by Dr Ciara McMeel.

Summary

I am particularly pleased to report progress in the area of mental health services thanks to the efforts of Mr Pearse Finegan and colleagues, including Dr Brid Hollywood. As I write this report, an elearning module for GPs will be launched in April, accompanied by a DVD of scenarios which can be widely used for educational purposes. An elearning programme on the dangers of excess alcohol is in preparation together with another one on depression, which will be available towards the end of this year. Access to counselling and psychotherapy for general practice is now available in some areas, even though it has taken several years to achieve this. This project requires a sustained effort to be widely available to every GP in the country and I intend to continue to support this development in the coming year.

I have found the year so far very interesting at this important time in the development of the College. I now appreciate more than ever, how much the College depends on quite a small group of dedicated members who serve on the various committees in their support of the CEO and staff at the headquarters.

I look forward to the remaining few months I have as president and to delivering a clear message at the AGM in May to the many younger members of the College, who will need to become more actively involved in the challenging years ahead.



Chairman's Report

Author: Dr John Delap

The Government policy document 'Future Health' places general practice and primary care at the centre of health care delivery. This summer, the Government plans to introduce legislation to extend the medical card scheme to people with certain chronic diseases. GPs will face significant challenges in the effort to deliver effective health care with a diminishing budget. The College will work to support general practitioners as they adapt to the changes in the health system and work to improve the quality of care to patients. Our GP leads have engaged with the HSE Clinical Care Programme to develop care standards. The implementation of these care packages in general practice will require a significant investment if we are expected to deliver care services as described by the Minister for Health. I hope that the appointment of a GP to the role of national primary care lead in the Clinical Care Programmes indicates a willingness to implement real change in the delivery of care to people with chronic disease.

As you will hear from the treasurer, the College's financial affairs are secure with a welcome surplus in 2012. This arose because of a number of factors. We have not grown our cost base and are concentrating on increasing revenue in areas such as sponsorship to minimise the cost burden to members. In addition, the surplus for 2012 is inclusive of a carry over of the surplus in 2011. We no longer pay rent for office space. The increased demand for CPD as part of our maintenance of the Professional Competence Scheme has generated additional income. We reduced membership subscriptions in 2012 and the Council proposes a further reduction in membership fees in 2013. A number of online education modules are now provided free of charge to members. Members have been offered additional reductions in course fees. We have invested in the establishment of the Irish Primary Care Research Network (IPCRN) in collaboration with the Health Research Board Primary Care Research Centre and NUIG. This will enable members to participate in clinical audit and researchers to produce high quality, evidence based research output from Irish general practice. The IPCRN will be a major resource for general practice and health in Ireland in the future.

Last December, the College agreed to fund outstanding expenses for CME groups to allow meetings to continue till the year end. HSE funding was reinstated in full in January. We are working with the Medical Education Training and Research office of the HSE to put in place a service level agreement (SLA) that will ensure continued growth and development in continuing education for GPs.

The Executive members meet on a regular basis with the IMO GP sub committee. These meetings have helped to clarify the complimentary roles of each organisation and to exchange information about developments that affect general practice.

Twenty nine years after the foundation of the College, it is time to revise our governance arrangements. The Council requested a review of governance in 2011 and we have worked with Prospectus Strategy Consultants over the past year to devise a new governance format that meets currently acceptable governance requirements. The principal change will be that the College will be governed by a board of directors, elected by members of the Council. The Council will continue to be the representative forum of members.

Unfortunately, it is not possible to vote on the proposal at this year's AGM. There will be a delay so that we can meet Revenue and legal requirements. There will be an

EGM in the autumn to give approval to the proposal so that our College has a robust governance infrastructure to deal with the challenges ahead.

The Medical Council Professional Competence schemes are now firmly established. The website has many useful suggestions regarding audit. The College's eportfolio provides a straight forward mechanism for recording your activities. Jantze Cotter is our Professional Competence manager.

Before I was elected chairman three years ago, I was involved in discussions with the HSE about the transfer of responsibility for general practice postgraduate training to the ICGP. This continues to be a slow complicated process as arrangements are different in every scheme and one size certainly does not fit all. We are working with the HSE towards a resolution that will be acceptable to all parties.

This year, the ICGP governance of postgraduate training was inspected by a review committee with international representation established by the Medical Council. The team, who presented on behalf of the College, were commended by the reviewers. We await the committee's report.

It has been a pleasure and a privilege to serve as chairman of the Council for the past three years. I am very grateful for the support of all members of the College Executive, the senior management team of Kieran Ryan, Margaret O'Riordan and Dermot Folan, and to Caroline Murtagh who provides administrative support to the Council and Executive. Finally, a sincere thank you to my wife Ruth who has been a rock of support for 30 years. After today, she will have more husband than she bargained for.



Honorary Treasurer's Report

Author: Dr Gerry Cummins

It gives me great pleasure, as treasurer of the Irish College of General Practitioners, to present my report and the financial statements for the year ended 31 December 2012. The financial statements, in respect of the year, show that the College had an operating surplus of €921,269 for the year. Again, as in the previous year, this was a very satisfactory and pleasing result given the continuing challenging economic background with which the Irish economy continues to struggle.

The income of the College across the majority of sources was marginally ahead in 2012 when compared with the income of the previous year. Operating costs increased and this was reflective of increased activity rather than overall cost increases. The College, through the efficient management of its bank balances, increased its interest income from €6,141 to €41,966 in the year. This represented a near six fold increase and may not be maintained at this level going forward arising from the overall reduction in deposit rates available. Overall, the surplus for the year was in excess of 10% higher over the previous year. The favourable financial results achieved are reflective of the careful management of all of the College finances.

The accumulated reserves of the College now stand in excess of €3 million and whilst this may seem like a substantial reserve, it is reflective of nearly 30 years of College activity. This level of reserves leaves the College with a strong balance sheet and provides the College with a firm financial footing for future development and plans, and additionally safeguards against current economic challenges. Along with the Council, Executive and our CEO, we are identifying the next phase of development plans for ICGP infrastructure and resources so that the College remains relevant to members and continues to support the development of our specialty. There will be a need to invest significantly in our elearning and ICT infrastructure. The demand for an expansion of the CME tutor network to support the CPD requirements of members is an immediate priority and following our governance review, it is clear that support for our faculty structures will be required over the coming years. The HSE continue to indicate their intention to transfer GP training responsibilities to the ICGP. If such a transfer is to take place, there is no doubt that financial resources will be required to adequately manage and implement this transfer. It has also been discussed that our current premises in Lincoln Place are nearing full capacity in terms of accommodation for staff and holding meetings. The Executive have established a small group to explore the office needs for the College and should it be determined that we need to either expand our existing building or purchase another premises, then we will need to mobilise our financial resources to support this project.

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

I would like to thank Kieran Ryan (Chief Executive Officer), Dermot Folan, (Chief Operating Officer), Caroline Murtagh and Annette Elebert for their support and

assistance offered during the year along with their continued safeguarding of the College through their continued guidance, direction and control.

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

All relevant details from the financial statements are included and are available on the College website (www.icgp.ie). A copy of the full financial statements is available from the College on application.

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

**Income and Expenditure Account for
the year ended 31st December 2012**

	Note	2012 €	2011 €
Income			
Subscriptions received		2,241,365	2,052,832
Professional competence		1,147,236	625,124
Other College generated income		879,960	1,140,242
Public and private sector funding		2,169,896	2,079,844
Foundation levy		255,525	270,512
Sponsorship		170,980	360,800
	1	6,864,962	6,529,354
Expenditure			
Establishment		93,933	144,051
Administration		1,776,884	1,399,851
Personnel		2,428,252	2,415,999
Professional fees		1,128,398	1,132,369
Committee, meeting and travel		208,397	199,239
Depreciation		293,984	372,870
		5,929,848	5,664,379
Operating result for the year		935,114	864,975
Interest receivable and similar income	4	41,966	6,141
Interest payable and similar charges	3	(55,811)	(56,317)
Operating surplus		921,269	814,799
Taxation		-	-
Surplus on ordinary activities		921,269	814,799
		=====	=====

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

Approved by the Board of Directors on 29th March 2013 and signed on its behalf by:

Dr John Delap
Director

Dr Gerard Cummins
Director

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

Balance Sheet
at 31 December 2012

	Note	2012 €	2012 €	2011 €
Fixed assets				
Tangible assets	8		1,989,080	2,241,142
Financial assets	9		300,003	500,195
			<u>2,289,083</u>	<u>2,741,337</u>
Current assets				
Debtors	11	796,588		1,039,346
Cash at bank		2,713,982		1,519,192
		<u>3,351,570</u>		<u>2,558,538</u>
Creditors: amounts falling due within one year	12	(2,375,280)		(2,576,144)
Net current liabilities			<u>1,135,290</u>	<u>(17,606)</u>
Total assets less current liabilities			<u>3,424,373</u>	<u>2,723,731</u>
Creditors: amounts falling due after more than one year	13		(336,654)	(557,281)
Net assets			<u>3,087,719</u>	<u>2,166,450</u>
			=====	=====
Reserves				
Accumulated surplus			3,087,719	2,166,450
Members funds	15		<u>3,087,719</u>	<u>2,166,450</u>
			=====	=====

Approved by the Board of Directors on 29th March 2013 and signed on its behalf by:

Dr John Delap
Director

Dr Gerard Cummins
Director



Membership Services Committee Report

Author: Dr John Gillman, South Tipperary Faculty and Chair of Membership Services

Memberships Services Committee team

- Dr Abdul Bulbulia
(resigned September 2012)
- Dr Mary Favier
(resigned January 2013)
- Mr Nick Fenlon
- Mr Dermot Folan
- Dr Mary Glancy
(resigned in January 2013)
- Dr Sean Higgins
- Dr Dave Hurley
- Dr Brian Kennedy
- Ms Niamh Killeen
- Dr Noreen Lineen Curtis
- Dr Brian Meade
(resigned in January 2013)
- Dr Seán McBrinn
- Dr Sinéad Murphy
- Dr Conor O'Shea
- Dr Andrée Rochfort
- Mr Kieran Ryan
- Dr Peter Sloane

Introduction

The Membership Services Committee endeavours to identify and meet the needs of our members through the following services provided by College:

- The College's faculty network
- Management in Practice programme (MiP)
- Health in Practice programme (HiP)
- Network of Establishing GPs (NEGs)
- General Practice Information Technology programme (GPIT)
- Sunsetters Group

Activities in the last year

- NEGs winter meeting
- NEGs collaboration with Sunsetters
- NEGs regional meetings
- NEGs membership survey and database
- NEGs discussion board
- Sunsetters winter meetings
- Sunsetters discussion boards
- GPIT webinars
- GPIT roadshows
- MiP diploma course
- MiP GP registrar course in practice management
- MiP practice staff training course
- Launch of Cavan/Monaghan faculty
- Ezine article - contribution on membership
- Forum article on faculty revival
- Revision of the 1997 faculty guidelines
- Membership survey on faculties
- Use of faculty discussion boards
- Faculty twinning arrangements pilot scheme
- European conference on doctors' health
- Health in Practice network
- Mentorship working group

Discussion

This is my first annual report to the College on behalf of the Membership Services Committee. I was somewhat shocked and humbled to be elected by my peers to this position of responsibility and I am grateful for the considerable and universal support that I have received in helping me to serve the College and the membership. This has been a steep learning curve and I continue to learn and hopefully not make too many blunders along the way. I would like to acknowledge the work ethos, expertise and good humour of our committee. We all bring different toppings to the pizza but importantly, we recognise that the voice and needs of our members needs to be heard. Doctors face an increasingly challenging professional and personal environment, and our duty is to work with and for our membership. Our needs at different parts of our professional pathway are diverse and yet, we need to think of the members' needs as not solely being age/geographically dependent. Rather, we should consider what aspect of each programme is pertinent to addressing those needs as they arise.

Linkages between the College and faculties, between faculties, and between programme service providers and members, need to be forged stronger. Unity and collegiality has never been so important.

The membership survey on faculties is a cornerstone on how best we can revitalise our local structures and ensure the College is relevant to and addresses our membership's needs.

Priorities for the coming year

- Ensuring that the faculty structure addresses the needs of our membership locally
- Enhanced linkages between GP trainees, establishing members, established members and those who perceive themselves as Sunsetters or trailblazers
- Establishment of a College mentorship programme
- Innovative use of information technology
- The leadership programme. This has proved on its pilot to be a highly valued resource and is an investment by the College in its most highly prized asset, its members

Administrative resource being provided to project/programme

I am indebted to Niamh Killeen who has provided exceptional support to all our team. Caroline Murtagh and Orla Sherlock have all offered invaluable advice and chased the impossible in ensuring that the membership has coordinated well with the other teams within the College. I would like to thank our senior management Mr Kieran Ryan (CEO), Mr Dermot Folan (COO), Dr Margaret O'Riordan (Medical Director) for their invaluable support. I would like to thank my colleagues in the Executive and Council for their wisdom, my predecessor, Dr Daragh O'Neill, for his legacy and considerable shoe size to fill. I would like to thank our programme directors for their expertise, enthusiasm and good counsel, Mr Nick Fenlon, Dr Peter Sloane, Dr Mary Glancy, Dr Brian Meade, Dr Conor O'Shea, Dr Andrée Rochfort, Dr Rita Doyle and our committee members who have chosen to give of their time to serve.

Management in Practice Programme Report

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

Introduction

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

Training - courses for general practitioners, practice managers and practice staff.

- Information provision through online publications and guidelines
- Direct advice and consultation with individual members and practices – telephone advisory service and online information service/resource via www.icgp.ie
- Referral to external professional advisor network and resources. The various networks of professional experts are under review by the director
- Supporting the occupational health needs of GPs and practice personnel. (Refer to the Doctors' Health Programme (HiP) Report)

Other members of programme team

- Ms Margaret Cunnane, Administrator, Management in Practice Programme
- Dr Andrée Rochfort, Director, Health in Practice Programme
- Mr Barry O'Brien, Course Tutor, Diploma in Management in Practice and Management in Practice and GP Registrar Courses
- Ms Romy Moloney, Course Tutor, Practice Staff Training Programme
- Mr Colin McGlynn, CMG Consultants

Project activities

TRAINING COURSES

Management in Practice Diploma Course (September 2012 - May 2013)

This is the sixth course to be delivered since the commencement of the MIP Diploma programme. The course is aimed at meeting the practical management needs of GPs and practice managers. There are 10 participants (GPs, practice managers and other staff with managerial responsibilities) currently enrolled.

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

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

Course Director: Mr Dermot Folan

Course Administrator: Ms Margaret Cunnane

Course Principal: Mr Barry O'Brien, Management Consultant, Abbey Medical Management Consulting.

Delivery: The course is run over one academic year, consists of 15 units and is delivered through a combination of workshops, module reading and course assignments, including two reflective learning portfolios, four short essay questions (SEQs), a 'Quality Improvement in the Practice' project and participation on the online discussion boards.

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

Learning is supported through the College website www.icgp.ie, which includes a discussion board facility and email communication.

The course utilises the specialist expertise available at the College as well as external resources.

General Practice Registrar Management in Practice Certificate Course (September 2012 – May 2013)

This is the sixth consecutive year that this course has been successfully delivered. It is specifically designed to meet the practice management educational needs of GP registrars with the objective of equipping the GP registrar with the basic knowledge of the business management principles, skills and competencies needed for a successful commencement in professional practice. The course is reflective of the core curriculum for general practice training and the related learning outcomes for the practice management category of the curriculum. There are seven participants currently enrolled.

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

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

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

To date, 84 3rd and 4th year registrars have undertaken the course. It is proposed to run the next course in September 2013.

Course Director: Mr Dermot Folan

Course Administrator: Ms Margaret Cunnane

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

Leadership Course: September 2013

The first course in leadership for general practice was successfully run in October 2011. This was a pilot course aimed at promoting leadership in the profession and also addressing succession planning for the ICGP. The course delivery was a collaborative one with the DCU Business School. A total of 14 participants successfully completed the course.

It is proposed to run the next course in September 2013.

Course description: The course is for general practitioners who are seeking to develop their knowledge and skills in the field of leadership. Participants will be able to bring the knowledge and skills obtained back to their practice, embed lessons learned into the Irish College of General Practitioners (ICGP), and apply acumen to healthcare contexts where they currently, or will in the future, play a leadership role. This course has four central objectives, namely:

To provide general practitioners in Ireland with leadership training.

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

We are grateful to the family of Dr John Mason for providing the Dr John Mason Prize, which will be presented in recognition of high achievement to one course participant each year, and the Dr John Mason Bursary which supports the development and delivery of this course.

Practice Staff Training Course

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

The practice staff courses will be delivered in Dublin in April 2013.

Course tutor: Ms Romy Moloney, Practice Manager.

Contribution to other programmes and projects

- Management in Practice section of the College year book and diary
- External presentations/training undertaken directly by or facilitated by the programme director and programme personnel (2012/2013)

ICGP conferences

- **Spring Meeting**, IMI (April 2012)
Workshop:
The increasing risk of Revenue audit and implications for GPs and general practice

- **AGM, Galway** (May 2012)
Workshop:
Managing Practice Finance in Challenging Times
Maintaining Income and Controlling Cost
Salary Costs – Employer's Obligations
- **6th ICGP Summer School**, Kilkenny (June 2012)
Workshop:
Navigating the Maze – PCR S/State Scheme Systems
- **ICGP Winter Meeting**, Athlone (November 2012)
Workshop:
Preparing yourself for a new career – Can you drop the doctor role?
Is your Practice a saleable commodity?

GP training programmes and the CME tutor network have been supported by the programme in sourcing practice management educational resources throughout the year.

Human resource compliance for general practice service (HRC)

The service provided is on site/in practice support and advice, and enables GPs to become fully compliant with their legal obligations as employers and to improve human resources management in the practice.

GPIT webinars

The GPIT Group provided a series of webinars for GPs in January and February 2013. Some of these sessions are relevant to practice managers and a number of practice support staff and practice staff were registered for these webinars.

It is hoped that another series of webinars will be run in the near future.

Proposals for future provision

Half day and one day seminars/workshops

- A number of one day modules/seminars are planned to update the skills and knowledge of practice managers and other practice staff. It is hoped that these will be made available in the near future
- A series of half day seminars/workshops on managing the practice in the current adverse economic climate is being considered

Advisory/Information service

Direct access advisory service

College members continue to access the service daily by phone, fax and email on a wide variety of management issues.

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

Forum

The monthly Management in Practice – Questions and Answers column continues to reflect practical management issues occurring in everyday practice and this together with relevant commissioned articles provide a platform for dissemination of management information for members.

Web resources

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

Discussion board

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

Network of Establishing GPS (NEGS)

The Network of Establishing GPs (NEGS) comes under the remit of the Management in Practice Programme. The NEGS report is provided separately by the director, Dr Peter Sloane.

ICGP Doctors' Health Programme

The ICGP Doctors' Health Programme comes under the remit of the Management in Practice Programme. The Doctors' Health Programme report is provided separately by the director, Dr Andree Rochfort.

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

The continued contribution and expertise of Mr Barry O'Brien is much appreciated and I would also like to express the College's appreciation for the assistance of Ms Jean Hubbard, Practice Manager, Medical Centre Waterford.

Finally, I would like to acknowledge the dedication and professionalism of the Management in Practice Programme's administrator Ms Margaret Cunnane.

The director of the Management in Practice Programme holds the position of chief operating officer of the College, with specific responsibility for the following areas:

- MICGP Examination
- MICGP-AR
- Certification Committee
- Network of Establishing General Practitioners
- Membership Services Committee

(Please refer to the separate reports under the relevant headings.)



National General Practice Information Technology (GPiT) Group Report

Author: Dr Brian O'Mahony, Project Manager

Summary of project

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

Project tasks during the past 12 months

- Working with Healthlink and the National Cancer Control Programme on electronic cancer referrals from GP practice software systems
- Communicating the needs of GPs and primary care to developers of information systems throughout the health services
- Membership of the Project Board of the National Integrated Medical Imaging System (NIMIS) Project, which is bringing digital radiology to hospitals and electronic radiology reports to GPs
- Promoting interoperability and health informatics standards in the health services
- Contributing to the HIQA eHealth Standards Advisory Group (eSAG)
- Cooperating on a specification to enable electronic communication of cervical smear test results to GPs via Healthlink
- Writing monthly IT questions and answers for Forum, the journal of the Irish College of General Practitioners, available at <http://www.gpit.ie/faq>

Project deliverables

- Five GP practice software systems are now certified: Complete GP, Health One, Helix Practice Manager, medtech32 and Socrates
- The certified GP practice software systems have the capability to send electronic breast, prostate and lung cancer referrals to the cancer centres
- A range of publications and reports on topics such as information security, appropriate usage of the Internet and scanning are available on <http://www.gpit.ie>

Future plans

- Continue to work with major national information systems, such as the National Integrated Medical Imaging System (NIMIS) and the National Medical Laboratory Information System (MedLIS)
- Expand the range of electronic referrals available from GP practice software systems to include general referrals and specialist referrals
- Work to improve electronic communication between GPs and the health services, particularly through structured messaging and Healthlink
- Establish a secure email system for GPs to communicate patient identifiable clinical information to HSE staff in primary and secondary care
- Commence in 2013 a new cycle of accreditation for GP Practice Software Systems
- Introduce online seminars or webinars to promote GP knowledge of health information technology

Administrative resource person in ICGP

Ms Niamh Killeen, email niamh.killeen@icgp.ie

Further information

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



GPIT Training Programme Report

Author: Dr Brian Meade and Dr Conor O'Shea

Project title

GPIT Training Programme

Programme Leader

- Dr Brian Meade (April 2012 to 31 January 2013)
- Dr Conor O'Shea (1 February 2013 to current)

Regional Co-ordinators

- Dr Frank Hill (Southern region with responsibility for the National Diabetes Project)
- Dr Kieran Murphy (Western region)
- Dr Keith Perdue (Eastern region)
- Dr John MacCarthy (with responsibility for the National Electronic Referral Pilot Project)

GPIT Advisors

- Dr Donal Buckley (Dublin)
- Dr John Sweeney (North-West)
- Dr Fergus McKeagney (Midlands)
- Mr Paul Gaffney (North East)
- Dr John Cox (South East)
- Dr Sean Higgins (Western)
- Dr Brian Blake (Dublin)

Summary of GPIT Programme

The GPIT training programme was established in 1999 in order to provide an urgent need for IT training for GPs. This was at a time when the development of and usage of ICT by general practitioners was increasing rapidly. Studies carried out by the GPIT programme had established that one of the main barriers to the uptake of computerisation by GPs was a lack of familiarity with computers and a lack of time to transfer manual records on to a computer. The programme set about developing a countrywide graded training programme for GPs delivered by GPs who themselves were proficient and had successfully computerised their own practices. These courses continued from 14 training centres around the country and were delivered by a team of 17 GP tutors until 2005.

The courses were highly successful, but by 2005 it became obvious that GPs had moved on. Most of those interested had mastered the basic skills and had achieved a certain level of computer usage. Two national surveys of GPs in 2000 and again in 2003 revealed however that while the level of use of computers for administrative tasks such as generating repeat prescriptions and immunisation claims was high, the use for more clinical tasks which directly involved the GP was somewhat less impressive.

With the support of the HSE therefore, the programme was re-launched in 2006 and focused instead on providing support and training to practices who requested help. This was provided through a network of ten GPs who were all experienced in the area of IT and had first-hand experience of the problems associated with significant change management required to bring a practice from a paper based record system to an electronic one. The activities of the GPIT tutors therefore become more targeted towards GPs and practice staff in need of training or who were transitioning from paper to electronic records.

The programme also turned its attention to the GP training programmes and provided specific training for GP trainees, and also facilitated the development of user groups of GPs interested in the area of ICT to develop their skill further.

By 2010, a number of national electronic programmes involving general practice were being developed and our focus has been on the support and development of these. These included the National Cancer Referral Programme, National Electronic Referral Pilot Project and National Maternity ICT Project. Further information on these and other projects is provided below. In addition to this, the GPIT group felt that specific guidance for GPs was required on a number of critical issues and produced a number of advisory documents for GPs covering these issues. These are listed below and are all available from the GPIT website, www.gpit.ie.

TITLE	NATURE	YEAR
No Data, No Business	Advisory document for GPs on a range of ICT security issues.	2008
Policy on Acceptable Use of the Internet	This document covers a number of suggested measures to include in a practice policy document to regulate the use of the Internet in GP practices.	2008
Scanning and Shredding Documents: Impact Statement	Provided advice to GPs on a “hot” issue at the time. Is it OK to shred documents once they have been scanned into the computer?	2009
A Guide to Data Protection Legislation for Irish General Practice	This document was developed with the support and help of the Office of the Data Protection Commissioner. It provides practical advice to GPs on a range of contentious issues in relation to data privacy as well as the retention, disclosure and storage of medical records.	2011
Clinical Disease Coding and Classification: A guide for General Practitioners	A straightforward guide for GPs on what classification systems are available and how to use them. It also covers the importance of coding to research and audit.	2011
Information Leaflet on Practice Websites	An introductory guide for GPs interested in developing their own practice website	2012

Programme activities during the past 12 months

National Electronic Referral Project

The GPIT group is an important stakeholder in this national pilot project which is attempting to develop a system for the electronic transfer of GP referral letters to a central sorting area within hospitals where they are triaged and responded to quickly. The project has the potential to radically improve communication between GPs and hospitals, and enhance the quality and safety of the care we provide. The two areas chosen for the pilot project were a group of hospitals in the Cork and Kerry region and the AMNCH hospital in Tallaght. The latter was chosen as it was here that the issue of 30,000 unopened GP referral letters first came to light and significant delays in the reporting of radiology investigations were uncovered in March 2010. There followed an independent report by Dr Maurice Hayes later in 2010 and another by HIQA. Both of these reports suggested the development of an electronic GP referral system would improve the referral system generally and improve the safety of the system for patients.

Both Dr John MacCarthy and Dr Keith Perdue have been actively involved in an advisory group for this project since February 2011 while Dr Frank Hill has been part of the project group. Progress has been steady to date and the project went “live” earlier this year with a small group of GPs in the Cork and Kerry area. It is hoped a second pilot project of the electronic referral model will begin in Tallaght later this year.

Electronic Cancer Referrals

This important national project offers GPs the option of sending electronic referrals for certain types of cancers to designated cancer treatment centres. The advantage for GPs is that the referral is very easy to complete and can be done within the practice software. The system also sends an immediate acknowledgment message to the GP confirming receipt of the referral by the cancer centre and a visit date for the patient is arranged within two weeks for urgent patients. Currently, this system is available nationwide for all GPs and is active for patients suspected of prostate, lung or breast cancer.

Its remarkable success is due to close cooperation between the National Cancer Control Programme, Healthlink, HSE ICT and the GPIT Group programme. Although the facility to send electronic cancer referrals is active in all of the GPIT accredited software packages, uptake among GPs has been slow to date. The training programme has been encouraging the uptake of electronic cancer referral by highlighting the facility at GPIT road shows and seminars. It was also covered in a recent GPIT webinar (see below) which can now be downloaded on the GPIT website. By the end of 2012, over 900 electronic cancer referrals per month were being made by over 400 GPs. We are confident that this number will increase over the coming year.

National Diabetes Project

Diabetes will be the first of the HSE Chronic Disease Care Programmes to be rolled. The programme envisages a shared care model with the secure exchange of patient information between the GP and diabetes centre. The ICT infrastructure to support this model is currently at the planning stage and is being supported by GPIT co-ordinator Dr Frank Hill who has a special interest in diabetes and has been working with the project group over the past twelve months.

National referral template

In early 2010, the group decided that a national referral template for all GP referrals to secondary care would be of benefit to GPs, patients and consultants. Dr John MacCarthy, who had initiated the idea, then developed a referral template for approval by the GPIT group. This has since been adopted by the ICGP, HIQA and HSE Clinical Care Programme. The national template is also available for use in all of the GPIT accredited software packages and is the national standard in use for the national electronic referral project outlined above.

GPIT webinars, road shows and the ICGP Summer School

Further training and educational meetings for GPs on ICT topics were held around the country in 2012. These took place in Wexford (October 2012), Tallaght and Galway (November 2012). Our thanks to the local ICGP faculties who facilitated these meetings for us and to the GPs who braved the elements to attend. The road shows featured a series of short concise presentations on electronic cancer referrals, the national referral template, data protection, ICT security and other issues.

A number of our advisors ran workshops at the 2012 ICGP Summer School in Kilkenny, as follows:

TITLE	SUBJECT	PRESENTER
Digital Photography	Digital photography in clinical practice	Dr Kieran Murphy
Cloudy with a chance of organisation	Cloud computing, useful apps for GPs, Logmein, IT security	Dr John MacCarthy
Using ICT to survive the recession	Reducing IT running costs, maximising immunisation and cervical smear rates, PCRS web site functions	Dr Brian Meade
Social Media and the Web for GPs	An overview of social media, practice websites and search engine optimisation	Dr Conor O'Shea
Using ICT to Carry Out a Practice Audit	Identifying patients for audit, practice protocols, writing up and presenting findings	Dr John Cox
Tools for Making Audit Easier	Simple and easy to use search tools to generate reports on patients with chronic diseases	Dr Sean Higgins

Earlier this year, we saw the development of the GPIT webinar concept which uses modern internet conferencing software to allow up to 100 GPs to log in to a live on-line presentation on a variety of ICT topics. The webinar also allows GPs the opportunity to ask questions to the presenter through the meeting convenor. The initiative which was developed by Dr Brian O'Mahony has proved very popular to date and the webinars can be viewed by GPs from their own homes or surgeries.

The following webinars have taken place to date and are available for download from the GPIT website. Further webinars are planned for later this year.

TITLE	SUBJECT	PRESENTER
Disease coding for dummies	An introduction to clinical disease coding for GPs	Dr Brian Meade
Backing up your data	An overview of the available backing up solutions and pros and cons of each	Dr Brian Blake
Smart stuff for smart phones	A guide to the most useful medical apps available for GPs for use on their smartphones	Dr Kieran Murphy
Using clinical rating scale software	Heartscore and other software prediction tools available to GPs	Dr John Cox
Electronic cancer referrals	How to register with healthlink and use electronic cancer referrals	Dr John MacCarthy
Using your GP software system for clinical audit	How to use your GP software system to complete a practice audit and satisfy your professional competence requirement	Dr Conor O'Shea

GPIT and IPCRN

The Irish Primary Care Research Network is a collaborative venture between the ICGP, HRB Primary Care Research Network and WestRen (NUIG) whose aim is to establish a network of GP practices who will participate in research and audit on a national level. They have developed a very useful local reporting tool for GPs to use within their GP software. The tool can help identify patients with diabetes, atrial fibrillation and chronic renal failure. These tools are particularly useful for GPs who have not been coding illness.

Another remote extraction tool will extract anonymised data from the GP software on patients with certain conditions and have this analysed by the IPCRN who then send the GP a report on key performance indicators for patients with these diseases.

Dr Sean Higgins is the national co-ordinator for the IPCRN and is also a GPIT advisor. There are obvious benefits here for a close working relationship between the IPCRN and GPIT, and we look forward to more GPs signing up with the IPCRN over the coming year.

GPIT website

The GPIT website is a useful source of information for GPs on a wide variety of IT related issues. It contains all of the GPIT information leaflets and reports as well as Dr Brian O'Mahony's FAQs which have been published in Forum over the last few years. Another popular section is the "How To" feature which provides GPs with step by step instruction on how to use the practice software to carry out a practice audit, identify patients eligible for cervical smears and do a number of other tasks. Separate instructions are available for the different accredited GPIT software products.

User groups

Local IT user groups of GPs have been important in allowing GPs to learn from each other, exchange ideas and develop their use of ICT within their practices. User groups for the main accredited software packages have been set up and are active in both Cork and Dublin. We hope to develop more of these around the country over the coming years.

GPIT changes in personnel

The year 2012 saw three of our GPIT advisors step down for work and other reasons. Dr Anne Lynott and Dr Martin White resigned from their positions in Dublin and the North East respectively in October 2012, and Dr Barry O'Donovan from Galway stepped down earlier in the year. All have made significant contributions to the programme over the years and we thank them for this. We were very pleased to have Dr Sean Higgins from Galway and Dr Brian Blake from Dublin join us in June 2012 as GPIT advisors.

Dr Brian Meade stood down as national co-ordinator at the end of 2012 but remains on as a GPIT advisor. His position has been taken over by Dr Conor O'Shea who was previously GPIT co-ordinator for the north east area.

GPIT advisors and facilitators training day

A training day for GPIT advisors and facilitators was held on 19 September 2012 where advisors and facilitators involved in various projects updated the group on progress to date. As usual, the discussion led to a number of concerns and issues for those involved to bring back to their project groups which we hope in time will lead to better outcomes for the projects in question. The value of the group as a sounding board for ideas and concerns is undoubtedly one of the strengths of this programme.

Future plans

Many of our continuing projects are focused on the development and improvement of communication and information exchange between general practice and secondary care. Therefore, we will continue to promote the use of the National Referral Form and its development, and in particular, encourage the use of electronic referral pathways including to the National Cancer Control Programme. 2013 will see the pilot phase of the Integrated Care Diabetes System, which will provide valuable information about the use of ICT in the planned chronic disease programmes.

The introduction of GPIT webinars at the start of 2013 has shown exciting potential for online and video support, which we would aim to develop further in the year ahead. It is hoped this will provide a range of support and encouragement to general practitioners of all levels of ICT expertise and experience. However the GPIT group will also continue to be available to other ICGP activities such as faculty meetings, CME groups and the summer school.

Administrative resources

This is currently being provided by the ICGP and our sincere thanks to Niamh Killeen for her excellent work throughout the year.



Health in Practice Programme Report

Author: Dr Andrée Rochfort, Programme Director

Summary of programme

The ICGP Health in Practice Programme (HIPP) promotes and supports the goal of health and wellbeing for three groups of patients: the Doctors Health programme (for GPs and GP trainees), and doctors' families and GP staff through a system of integrated services. These services include an information helpline, personal and occupational health education, website information and publications together with healthcare delivered by a group of health professionals focusing on the needs of these specific patient groups. The healthcare services of the programme are accessed directly by contacting any of the practitioners listed in the Health in Practice directories available to members at www.icgp.ie/doctors_health, or by contacting the telephone helpline on 087-7519307 to speak to a GP colleague for discussion on a range of issues such as personal or family health needs, or assistance with colleagues in need of health related interventions.

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

Other members of the programme team

- Ms Margaret Cunnane – HiPP Administrator
- Membership Services Committee including Dr John Gillman, Chair of Committee, and Mr Dermot Folan, ICGP Chief Operations Officer
- Four Healthcare Networks (over 100 healthcare professionals – GPs, counsellors, psychologists, psychotherapists, occupational physicians and psychiatrists), as listed on www.icgp.ie/doctors_health

Programme activities during the past 12 months

Healthcare services

Health in Practice has established its role in the provision of formal confidential healthcare for GPs and their families. Networks are surveyed at intervals to ascertain the level of uptake of services (the numbers and general category of services provided) and category of GP patient (GP, other doctor, doctors' relatives, etc.). No details of gender or age range are requested. Also, as the programme supports doctors attending GPs in areas away from their own geographical area of practice if necessary for reasons of privacy, this adds a further level of anonymity.

Over the past year, there were a variety of contacts to the service with concerns about the health/behaviours of doctors. These included self-referral, concerned/caring medical colleagues, doctors' own GPs (particularly GPs not connected to Health in Practice services), doctors' personal hospital doctors (consultants), GPs concerned about patients who are hospital based doctors, other health professionals concerned about doctors (e.g. public health nurses/community care nurses), doctors' relatives (for advice on their spouses, siblings, children and parents). Some relatives are non medical and expressed great relief at having somewhere to call in confidence.

The director seeks feedback from the health professionals' networks on numbers of consultations for doctors and their families, and on the main clinical categories for contacts. Confidentiality is completely respected. At the time of submitting this report, the actual number of consultations by Health in Practice health professionals is not yet completely available for 2012. However, the consensus feedback from HIPP networks is that the uptake is steady (with over 1,500 consultations the previous year) and for all the same general reasons that the general population uses GP services, e.g. for diagnosis, screening, treatment and health advice for all the normal range of medical conditions.

Educational activities

January:	Invited to speak at National GP Trainee Conference Netherlands 2012, 'Doctors are Human Too!'
	UCD GP trainers meeting 'Managing Trainee Health Issues' at UCD
February:	Lectured on course for RCSI Institute of Leadership masters in leadership in healthcare to multidisciplinary audience. Title: 'Supervising Junior Healthcare Professionals – Managing Colleagues in Difficulty'
	Invited to chair Blackrock Clinic GP study session on HIQA Draft Standards for Safer Better Healthcare & Practice Audit
March:	Specialist Training Programme in GP SE Programme, Waterford – 'Doctors in Sickness and in Health'
April:	DCU School of Nursing, HSE course for multidisciplinary primary care teams – 'Caring for your health as a health professional'
May:	ICGP AGM Sunsetters GP group: 'GP Health in Retirement – Issues and Opportunities'. AGM – workshop x 2: 'Work Life Balance and Beating Burnout' in conjunction with Dr Deirdre Kinlen, MICGP
	TCD GP trainers' meeting – 'Managing Trainee Health Issues' at Tallaght Hospital
July:	Wonca Europe: 'Helping Colleagues in Distress' 90 minute workshop presented at the European GP conference in Vienna, Austria, July 2012 in conjunction with Dr Zlata Ozvacic Adzic, University of Zagreb, Croatia and Prof Jochen Gensichen, University of Jena, Germany, members of EQuIP Wonca Europe Network
	Wonca Europe, Vienna: 'The Balancing Act: Expectations, Responsibilities and Resources in General Practice' solo 90-minute workshop to a packed house, including many Irish GPs
September:	RCPI SpRs Ethics and Professionalism Study day: 'Professional Health & Illness.' Having done this presentation for the previous two years, I supplied slides to the presenter as I could not attend in person due to clinical commitments
October:	Irish Society for Emergency Medicine, Annual Scientific Meeting 2012, Carton House, Kildare: 'An NCT for Doctors Health in the Emergency Department'

November: ICGP Memorial Service for deceased GPs – Participated with reflective reading.

‘Stress management for the practice team’ (employers and employees) as part of the ICGP Practice Management Diploma – Module text and interactive workshop.

‘Health and safety in the practice’ – Issues for practice managers, employers and employees. Module text and two hour workshop provided as part of the diploma

Doctors’ Health Conference 2012, Athlone (in conjunction with the 2012 winter meeting)

- Keynote address – Prof Jim Lucey ‘Minding your mental health’
- I facilitated a workshop on ‘The highs and lows of treating patients who are doctors’
- I facilitated a plenary session on ‘How to improve quality of healthcare for doctors as a patient group’. I will present the proceedings of this session at EAPH 2013 (see below)

Medical Council Conference, Kilmainham – I presented a workshop on Doctors Health called ‘Nature and nurture – the importance of achieving good practitioner health’

UCD graduate entry and UCD undergraduates – Separate lectures given to both groups on ‘Health & Healthcare for Medical Students’

Other activities: Contributions to ICGP elearning education modules on suicide prevention and patient self-management in chronic disease, with a filming session in our practice in Co Wexford and video interviews.

Publications: ‘Doctors’ Health and Quality of Care’. Sole author of a chapter in a book called ‘Guidebook on Implementation of Quality Improvement in General Practice’ funded by the European Commission under the Leonardo da Vinci programme. ISBN 978-83-932788-2-4.

The project called Lifelong Learning in Quality Improvement for GPs (led by the Polish College of General practitioners) produced the guidebook in print for distribution to Colleges and universities. It is also available online: http://ingpinqi.eu/guidebook_EN/index.html.

Future plans

1 European Association for Physician Health, 4th Conference, Dublin 2013

The ICGP, along with Medical Council, will jointly host the next annual Conference of European Association for Physician Health (EAPH) on 11-12 April 2013. The theme is ‘Keeping Doctors Healthy – A European Perspective’. The association’s website, www.eaph.eu, has details of the programme and presenters. As chair of the organising committee of the EAPH for this conference, I am pleased to state that 67 abstracts were received from 17 countries for presentations at the conference.

One of the proposed outcomes of the EAPH conference is to produce a framework curriculum for use in undergraduate, postgraduate and CME doctors across Europe,

which can be adapted by individual countries. Attending another doctor as a patient for healthcare, or providing personal healthcare to a medical colleague can be a major challenge for any doctor when it has not been addressed during their training or professional development. The Health in Practice Programme will be involved as Ireland's representative in EAPH, as I am one of five executive officers of the EAPH, representing the ICGP. The other officers come from the other four founding organisations of the EAPH – Norway (Norwegian Medical Association), the UK (British Medical Association), Spain (Galatea Foundation, PAIMM Barcelona) and Austria (Paracelsus Medical University).

2 Website development for the ICGP Health in Practice programme

In order to continue to promote the services of the programme among Irish doctors, it will be necessary to redevelop and expand the role of the Health in Practice section of the ICGP website, including adding the references section into a repository that lists relevant reports and publications from peer reviewed journals, and links with other services for doctors in other countries. Website resources have proved to be helpful in encouraging Irish researchers (including GP trainees) to develop expertise and contribute to the growing body of research in doctors' health.

3 Curriculum development on the subject of doctors' health and healthcare

A proposal to develop a curriculum for doctors' health and healthcare for the core curriculum for Higher Specialist Training in General Practice has been approved. I will work with a newly appointed project leader for the core curriculum on this topic for general practice. In parallel, there is scope to develop a similar curriculum for the medical profession generally as part of education and training in quality improvement and safe care. The aim will be to promote awareness of doctors' health risks, prevention, early intervention and appropriate management to minimise poor health outcomes. This curriculum development will take place (a) at ICGP level for GP trainees during a review of the core curriculum and (b) as a follow up from the EAPH conference in April 2013. The five EAPH officers have agreed to carry out a research survey to follow on the 2013 conference and to survey conference delegates, stakeholders and experts from across Europe to create a framework curriculum template for doctors' health for all medical specialties.

4 Expansion of the network of GPs for doctors

Currently, we have over 50 doctors who have developed a high level of expertise in treating patients who are doctors. If other doctors wish to participate in the provision of Health in Practice health services for medical colleagues and their families, they should contact Ms Margaret Cunnane, ICGP HIPP Administrator, for application forms, details of induction training and ongoing peer support.

Administrative resource

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



Network of Establishing GPs Report

Authors: Dr Mary Glancy, (outgoing) Programme Director and Dr Peter A Sloane, (incoming) Programme Director

Summary of programme

The Network of Establishing GPs (NEGs) was set up by the ICGP in 2004 to address the needs of GPs establishing in practice. The aims were to support, represent and deal with issues arising for these doctors. It has proved to be a valuable resource for establishing GPs and highlights the College's commitment to supporting establishing members. Through NEGs, new and establishing GPs are encouraged to become active members of the ICGP and participate in all College activities and events.

NEGs is overseen by a programme director who is tasked with providing direction, structure and future strategy to NEGs, facilitating delivery of the NEGs Programme, and representing new and establishing GPs within the College. The programme director works closely with other programme directors at the College and the ICGP management, and is supported by members of the NEGs Steering Committee. A new programme co-director was appointed in November 2012 to provide for a smooth planned transition between the programme directors. Dr Sloane will take over full programme direction when Dr Glancy has completed her term in early 2013.

Programme directors

- 2011 – 2012, Dr Mary Glancy
- 2012 – 2013, Dr Peter A Sloane

NEGs Steering Committee 2011 – 2012

The NEGs Steering Committee delivers the twice yearly regional meetings and also provides a vital support structure to the programme director. Many members are involved in other ICGP activities including representation on ICGP committees.

- Dr Nicholas Fay (Dublin) *
- Dr Maria O'Mahony (Dublin) *
- Dr Jason McMahon (Limerick)
- Dr Barry Cosgrove (Northwest)
- Dr Ger Hayes (Cork)
- Dr Katrina Geissel (Cork) **
- Dr Sheena Finn (Cork) *
- Dr Laura Noonan (Midlands)
- Dr Peter Sloane (Galway)
- Dr Shastri Persad (Galway)
- Dr Grainne Ni Fhoghlu (Southwest) *

* Left steering group during 2012

** Joined steering group during 2012

Main programme activities during 2012

Regional meetings

The ICGP NEGs regional meetings continue to be successful and popular. During 2012, the spring and autumn meetings took place across the country and were delivered by and with the support of the NEGs Steering Committee. The spring meeting was titled 'Opening of the GMS', and the autumn meeting was titled 'GMS Pensions, Marketing Your Practice and Setting up a Practice Website'.

Convening the ICGP Winter Meeting

For the second year in a row, the NEGs programme director acted as convenor of the ICGP Winter Meeting. This ICGP event was delivered to a capacity audience in Athlone in November 2012 and feedback was universally positive.

NEGs discussion board

The NEGs discussion board is a highly regarded resource which the members view as an invaluable benefit of membership. During 2012, the NEGs programme director continued to moderate the discussion boards and also oversaw the development of an improved layout and the structure of the boards.

Membership survey and database

In July 2012, a NEGs membership survey was carried out and the NEGs database was consolidated.

Other activities

In 2012, on behalf of NEGS, the programme director also undertook the following:

- Represented NEGs at meetings of the:
 - ICGP Council
 - ICGP Membership Services Committee
 - ICGP Professional Competence Committee
- Participated in the ICGP review of governance structures
- Presented to 4th year GP trainees on the Dublin and Mid-Leinster training schemes in May 2012

Future plans

In 2013, in addition to continuing to be responsible for the twice yearly NEGs regional meetings, convening the ICGP Winter Meeting, moderating the NEGs discussion boards, updated the NEGs database, and representing NEGs on the ICGP Council and Membership Services Committee, there are plans for additional development work.

Strategic review and publication of NEGs survey results

During the first half of 2013, a strategic review of NEGs will be undertaken which will focus on the function and role of NEGs in the College. At the end of this review, a comprehensive 'NEGs Strategy' will be published. As part of this review, the results of the 2012 NEGs membership survey will be published.

Mentor network

The establishment of a mentor network has been a long standing aim of NEG's. In the early part of 2013, it is planned to bring proposals to the Membership Services Committee in relation to such a mentor network. By working closely with other groups at the College, e.g. the Sunsetters Group, it is hoped that the long held ambition of establishing a mentor network may finally come to fruition.

Geographical expansion and regional meeting development

During 2013, NEG's hopes to increase regional representation on its Steering Group, allowing the expansion of local meetings into new areas such as Dublin, Kerry, Waterford, Donegal, the North East, etc., thus making it easier for establishing members to get to meetings. Whilst meetings will continue to focus on topics of relevance and interest to establishing GPs, it is also hoped to develop the content of and engender increased debate at meetings, with this being fed back into the College.

Updating supports and 'Establishing in Practice' workshops at national meetings

Following changes to GMS entry, 'Signposts to Success' requires to be updated. In parallel with this, it is aimed to revise the NEG's section of the ICGP website and to update other NEG's Programme materials. It is also planned to run workshops at the AGM and Winter Meeting which are focused on 'Establishing in Practice'. This will hopefully encourage increased attendance at national meetings by establishing members.

Raising awareness and participation of trainees

There is a vision of creating a seamless continuum of involvement in the ICGP from the commencement of GP training right through to retirement. To smooth the transition from trainee to establishing GP, it is hoped to increase the profile of the NEG's Programme among fourth year GP trainees. This may involve the development of a network of NEG's Programme GP Trainee Liaison Officers, and this concept will be given consideration during 2013. It is also intended that the NEG's Programme would have a presence at the National Association of GP Trainees (NAGPT) annual meeting in the autumn of 2013.

Reporting structure and administrative resources/support

During 2012, the NEG's Programme continued to be well supported by the College.

The NEG's programme director works under the direction of the chief operations officer (COO), Mr Dermot Folan, and the chairperson of the Membership Services Committee, Dr John Gillman, and reports to the Membership Services Committee, the ICGP Executive and the ICGP Council.

Mr Dermot Folan, COO, has been hugely involved with the programme since its inception, and is the main point of contact at the ICGP for advice and support in all aspects of planning and the co-ordination of NEG's activities and projects.

Ms Orla Sherlock provides the administrative support and is central to the project, being the main contact person for establishing GPs and also central to the co-ordination of NEG's activities. She is assisted by other administrative staff at the ICGP when required.

Education Governance Committee Report

Author: Dr Brian Norton, Education Governance Committee Chair

Introduction

Since September 2011, the Education Governance Committee has operated under the chairmanship of Dr Brian Norton. The structure, governance and quality assurance aspects of the committee remain the main focus of the on-going committee's activities.

Other members of the committee

- Dr Henry Finnegan, Director of CME
- Dr John Delap, College Chairman
- Mr Nick Fenlon, Director of Education
- Dr Claire McNicholas, Assistant Director, CME
- Dr Margaret O'Riordan, Head of Quality & Standards to report on overall activity and on behalf of the project directors (Women's Health, Substance Misuse, Alcohol, Mental Health, the ICGP Health in Practice (HIP) programme and SCALES)
- Dr Rita Doyle
- Mr Kieran Ryan, Chief Executive Officer
- Prof Peter Cantillon, Representative of AUDGPI
- Dr Richard Brennan
- Dr Raymond Mulready
- Dr Mary Sheehan
- Dr Noreen Lineen-Curtis
- Dr Michael Coleman
- Dr Marie Carmody Morris

Summary of the project

- The functions of the Education Governance Committee are to report on the following:
- The oversight, validation and review of existing education programmes
- Analysing need and planning for new education programmes and activities
- Overseeing the assessment where relevant, including the appointment of an external examiner
- Providing end-point certification
- Decision making in learner grievance/disciplinary proceedings/appeal processes
- Collaboration and partnership with external organisations and bodies including academic departments of general practice
- To recommend the Foundation Projects Committee, for their recommendation, worthwhile education programmes

Projects undertaken during the past 12 months

- Prof Anthea Lint completed a detailed external report on the ICGP Educational Activities and Resources which was presented to the Educational Governance Committee

- Nick Fenlon, Director of Education, has completed an Education Strategy document which reflects on the findings and sets out the educational objectives of the College for the foreseeable future
- An education course specific to the learning needs of course tutors, CME tutors and group leaders titled 'Teaching the Teachers to Teach' will be completed soon
- A 'New ideas committee' was set up and is expected to play a role in the consideration of new courses for GPs
- The Education Governance Committee supported the CME tutors network at a critical time towards the end of 2012 as a funding shortfall threatened the completion of the CME activities for that year
- New terms of reference of the Educational Governance Committee were adopted at the ICGP Spring 2013 Council Meeting
- International Committee Medical Journal Editors guidelines for the disclosure of potential conflicts of interest were adopted for all ICGP Council and Executive Members, and tutors and lecturers who contribute to education activity
- Activities and progress of the following programmes are reviewed and supported by the Education Governance Committee:
 - CME – National Network of CME
 - ICGP – Health in Practice (HIP) Programme
 - Women's Health Programme
 - Mental Health in Primary Care
 - Substance Misuse Programme

Future plans

We will be supporting and promoting the upcoming European Association for Physician's Health conference which is being held in Dublin in April 2013, and will be delivered in partnership with the Medical Council.

The committee is also considering being a potential host to an Equip meeting in Dublin in the spring of 2014 on the topic of patient safety in general practice.

The committee has plans to have Dr Rochfort's Educational Package on Doctors' Health included in the core curriculum which is being reviewed at present.

There is increasing demand for education courses from members. The committee is committed to providing more online and elearning modules to satisfy demands for CPD points.

Administrative resource

Administrative support is provided by Margaret Cunnane on behalf of the ICGP.



Wonca Europe EQuIP Network

Author: Dr Andrée Rochfort, Irish Delegate



Introduction

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

EQuIP is the European Association for Quality and Patient Safety in General Practice, a network organisation within Wonca Europe.

Members of EQuIP represent their national Colleges of general practice, and are clinicians, academic GPs, or researchers in GP. The current Irish delegate is Dr Andrée Rochfort, who attended her first EQuIP meeting in 2007. She was elected honorary secretary of EQuIP in May 2010. EQuIP members meet twice a year in one of the member's host countries.

EQuIP strategy

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

Members of EQuIP base their work in QI and PS on:

- being a professional responsibility
- being a continuous process
- covering all aspects of patient care in routine daily practice
- being patient centred
- enhancing the appropriate use of medical services and resources
- integrating into medical education and acknowledging the specific strategies of general practice within the medical profession

Activities during the past 12 months

EQuIP working groups evolve and close according to current project activities. In the past 12 months, it has had activities and outputs in the following areas: Teaching Quality Improvement (QI), Professional Health (PH), Practice Accreditation, Data Collection in General Practice, Patient Empowerment in Chronic Conditions, Patient Safety.

As the ICGP representative, I am active in the following:

1. Professional Health Working Group
2. Teaching Quality Working Group
3. Implementing Quality Improvement
4. Patient Safety
5. Patient Empowerment in Chronic Conditions

The following is an outline of my outputs in EQuIP over the past 12 months:

1. EQuIP Professional Health Working Group

Aims

To promote quality improvement in doctors' health and healthcare

Activities

Wonca Europe Vienna 2012: Wonca Europe: 'Helping Colleagues in Distress' – a 90 minute workshop presented at the European GP conference in Vienna, Austria, July 2012. Dr Andrée Rochfort, ICGP in conjunction with Dr Zlata Ozvacic Adzic, University of Zagreb, Croatia and Prof Jochen Gensichen, University of Jena, Germany, all members of EQuIP Wonca Europe Network.

Wonca Europe, Vienna: 'The Balancing Act: Expectations, Responsibilities and Resources in General Practice' – a solo 90 minute workshop presented to a packed house, including many Irish GPs.

2. EQuIP Teaching Quality Improvement Working Group

Aims

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

Activities

I was one of three members of EQuIP who produced a review of the current teaching of QI in European General Practice 2012. See details under Publications below.

Future plans

Summer school on quality improvement research, Berlin 2013. See www.equip.ch

3. Implementing Quality Improvement in General Practice

EQuIP was one of the project partners in the European Commission funded project under its Leonardo da Vinci Programme. I was involved as one of the four members of EQuIP representing EQuIP in this project. We produced four publications and I co-edited a guidebook on implementing quality improvement and contributed two chapters to the book.

This book was launched in print in March 2013 and is available online, www.InGPInQI.eu. see under Products and Outputs, Work Package 4.

Publications see below.

Future plans

Dissemination of the project outputs and good QI methods and tools.
New QI projects on EQuIP website, www.equip.ch.

4. Patient Safety Collaboration with Linneaus

Linneaus Conference - 18 & 19 September 2012

Patient Safety in Primary Care: Developing the Policy and Research Agenda - Lessons from the Linneaus Collaboration.

The Linneaus Collaboration hosted the above conference in Frankfurt on 18 and 19 September 2012 with support from the European Union Framework 7 programme to develop a network of practitioners and researchers to improve patient safety in primary care. It includes collaborators from the UK, the Netherlands, Spain, Greece, Austria, Denmark, Germany and Poland. They are committed to developing a network of healthcare professionals and policy makers from across the European Union who want to improve patient safety in primary care. The purpose of this conference was to bring together policy makers and researchers from across the European Union to plan the future research and policy agenda for patient safety in primary care. Three members of EQuIP attended this conference as guests, two other EQuIP members are already active in the programme and further collaboration is planned for the future as EQuIP develops expertise in patient safety, which was approved as its new remit in addition to QI by Wonca Europe in 2010

Day 1: Developing health policy for patient safety in primary care

Day 2: Future directions in research for patient safety in primary care

Future plans

Develop collaborative work with Linneaus Euro Primary Care, website www.linneaus-pc.eu

5. Patient Empowerment in Chronic Conditions – Wonca Europe PECC-WE

EQuIP won the Wonca Europe competition for a research proposal for a project to be completed by the 20th Anniversary of Wonca Europe in 2015.

As EQuIP secretary, I submitted the project bid for this Wonca anniversary research fund, building on an ICGP project from 2011 on patient self management in chronic conditions. In February 2012, Wonca Europe Executive announced this project as the winner, stating *“...all countries will benefit from the results of the project. Good self management will improve the patient-doctor relationship and the outcome of the provided healthcare. Therefore it will have a lasting benefit for family medicine.”* (www.woncaeurope.org).

This research project combines (a) the remit of the Wonca Europe Network EQuIP of advancing the quality and safety of patient care in European General Practice / Family Medicine (GP/FM) and (b) prioritisation of patient self empowerment and the promotion of patients’ active involvement in their own healthcare - approved as a new 12th Characteristic of European General Practice by Wonca Europe in 2011.

PECC-WE is a project to find an effective and efficient way to educate and train European GPs and practice nurses to empower patients to improve their own self management of chronic conditions in the primary care setting.

Four partners collaborate in the research project:

1. EQuIP – The European Association for Quality and Patient Safety in General Practice/Family Medicine
2. Irish College of General Practitioners, Ireland
3. Institute of General Practice, University of Jena, Germany
4. Duodecim, Finnish Medical Society, Finland

All are linked through their EQuIP representatives, with EQuIP leading the project.

The Project International Advisory Board includes Associate Professor John Litt, RACGP, who participated in the summer project on the topic as part of a summer sabbatical with the ICGP in 2011, and Dr Ernesto Mola, University of Lecce, Italy, and Prof Susan Smith, RCSI.

The work packages include a systematic review, the design of an educational package template and the piloting of the educational module in general practices across Europe.

The ICGP is an official partner in this important European project, with responsibility for Work Package 1, Systematic Review, which is nearing completion.

Publications 2012/13

In all publications, the ICGP is credited as the institution I represent.

1. **Development of a Competency Framework for Quality Improvement in Family Medicine: A Qualitative Study**
Z Klemenc-Ketis, A Potter, A Rochfort, K Czabanowska
Journal of Continuing Education in the Health Professions. Vol 32 Issue 3 pp 174-180. 2012. (Wiley-Blackwell Publications.)
2. **Teaching Quality Improvement in Family Medicine**
Z Klemenc-Ketis, P Vanden Bussche, A Rochfort et al
Education for Primary Care. Volume 23, Issue 6. 2012 (Radcliffe Publications)
3. **Co-Editor of Guidebook on Implementation of Quality Improvement in General Practice funded by the European Commission under the Leonardo da Vinci programme. ISBN 978-83-932788-2-4**
This book was produced by a project called Lifelong Learning in Quality Improvement for GPs, and led by the Polish College of General Practitioners. One of the partners in the project was EQuIP and hence my involvement. The guidebook was published in print for distribution to national Colleges of GP in Europe and universities, and is also available online:
http://ingpinqi.eu/guidebook_EN/index.html.
Sole author of two chapters in the book Guidebook on Implementation of Quality Improvement in General Practice. ISBN 978-83-932788-2-4
Chapter titles:
4. **Doctors' Health and Quality Care** and
5. **Patient Participation in Implementing Quality Improvement in General Practice**

Next EQuIP meeting

Spring Conference 2013, Equity as a Dimension of Quality in Primary Care, 4 and 5 April.

Administrative resource being provided to project/programme

EQuIP currently receives its funding from Wonca Europe. Currently membership comes from the national Colleges of general practice in Europe. There are plans to open up membership to other national GP organisations, and other institutions active in quality improvement and patient safety in Europe, through a new system of individual and organisational membership which will attract a new membership fee system and open up additional funding for future projects. Through expanding its membership base beyond national College delegates to include others active in QI in European general practice, it will also enrich the expertise of EQuIP and strengthen its role in European quality improvement and patient safety.

Web: www.equip.ch

European Academy of Teachers in General Practice (EURACT) Report

Authors: Dr Brendan O'Shea and Dr Darach O'Ciardha

Summary - Dr Brendan O'Shea

EURACT is the European Academy for General Practice Teaching, and is established for the purpose of promoting and developing teaching in general practice at all levels, including medical undergraduate teaching (basic medical education or BME), postgraduate teaching (specialty training or ST) and continuing medical education (continuing professional development or CPD).

Historically, it initially stems from the Lieuvendorst Group in the 1970s. More recently, it has become more closely affiliated with WONCA, being one of three key sub groups which comprise EURACT (teaching), EQUIPE (quality in practice), and EGPRN (research).

EURACT activities in 2012–13, as always, revolve around biannual council meetings, where national representatives from 37 member states meet to work on committees and task groups over a two-day conference. Council meetings this year were in Jerusalem and Adana.

The EURACT website (www.euract.org) provides detail on the activities undertaken by the organisation. Of particular interest is the forthcoming EURACT International Course in Bled, Slovenia, running from September 24–28. The course this year is focused on keeping physicians well, ('Learning and Teaching about Doctors' Wellbeing') and is facilitated by a panel of international experts, including Dr Henry Finnegan. The course is of special interest to any GP who has a teaching commitment and responsibility for younger colleagues. Bled is a spectacularly beautiful location, and has been repeatedly selected to host EURACT courses. The local organisers have perfected the balance between successfully delivering stimulating and relevant academic programmes with a very enjoyable social programme, in spectacular surroundings.

Looking ahead, Dublin has been proposed to host one of the 2016 EURACT Council meetings, which comprises approximately 40 council members. It is thus a modest international conference, but does include a European network of committed and passionate primary care physicians, deeply concerned with general practice teaching at all levels. Given that 2016 is the centenary of the foundation of the state, we might look forward to it with guarded optimism, and extend a warm welcome to the EURACT Council.

On a personal note, I am standing down as EURACT council representative, following a three year term. It has been exceptionally enjoyable, and notable for the warmth and enthusiasm which is a feature of the EURACT Council. Dr Darach O'Ciardha has been elected from among the Irish EURACT membership, and on behalf of all Irish EURACT members, I would like to wish him the very best.

Dr Brendan O'Shea, FRCGP, MICGP

Outgoing EURACT Council Representative

Assistant Programme Director, TCD HSE GP Training Scheme

Lecturer, Dept of Public Health and Primary Care, Trinity College

Future plans - Dr Darach Ó Ciardha

I have recently been appointed as Ireland's EURACT representative and am very grateful for this opportunity to interact with European GP colleagues and to hopefully facilitate a flow of expertise to and from Ireland. GP training, as we know, is undergoing significant structural change at present and a European perspective could be an informative one in some regards. I have good connections with many European colleagues through the Vasco da Gama network that I co-chaired in previous years and hope to renew old acquaintances in this new role.

I note that Dublin has been proposed as a venue for the 2016 EURACT Council Meeting and I intend furthering this offer at the next meeting (4-7 April, Graz, Austria). I propose to form a committee of previous Irish EURACT representatives to help ensure this venture is as successful as possible. I also wish to engage with the ICGP as well, as I feel it fitting that we incorporate our national College in proceedings as well.

Finally I would like to thank and acknowledge Dr Brendan O'Shea for his hard work and excellent relationship-building over the past three years on the EURACT Council.

Dr Darach Ó Ciardha MB MICGP DME DCP
EURACT Council Representative
Assistant Programme Director, TCD HSE GP Training Scheme
Lecturer, Dept of Public Health and Primary Care, Trinity College



ICGP Nominee to Medical Council Report

Author: Dr Richard Brennan

Summary of project/programme

This will be my last report as ICGP nominee to the Medical Council.

The council is the regulatory body for doctors and has a statutory duty to protect the public by promoting the highest professional standards amongst doctors practising in Ireland.

Its responsibilities include:

- Maintaining the register of medical practitioners permitted to work in Ireland
- Setting the standards for medical education in Ireland
- Overseeing lifelong learning and skills development throughout doctors' professional careers through its professional competence requirements
- Promoting good medical practice
- Investigating complaints against doctors

This council was the first council to have a majority of non medical members.

Its diverse range of functions puts a high demand on council members, and others who contribute to its wide range of committees.

During this council's term, we have seen the introduction of a new ethical guide, and during the year, a further guidance document called 'Relationships Between Doctors and Industry' was published.

In the last year, we have also overseen the introduction of Professional Competence schemes and the development of a professional competence assessment process.

Accreditation of educational training bodies has been ongoing, and this year included the recent accreditation assessment of the ICGP.

During the last year, I have attended council meetings (9 meetings), and attended as a member of the Standards in Practice Committee (5 meetings), the Professional Competence Committee (3), and the Fitness to Practice Committee (6 inquiries) and been chairman of the Health Committee (7 meetings).

Other activities

- Presented at the Sick Doctor Scheme conference in February 2012, and also at the Medical Council conference in November 2012
- Attended the Medical Council Education and Training Symposium in August 2012
- The role of representative on the council is varied and busy. In addition, to attending a large number of meetings, there is considerable background preparation involved and documentation to be read

I am indebted to the support received from the College, and from the staff and executive in the Medical Council who also provide support for council members.

It has been both a demanding and rewarding experience, and a source of personal learning and reflection on medical professionalism.

It has been a cohesive council, and in my opinion, has benefited from the contributions of the non medical membership.

There are challenges ahead for the next medical council, including representation to government on many already identified deficiencies in the current Medical Practitioners Act.

I would like to wish my successor, Dr Rita Doyle, as ICGP nominee to the Medical Council every success in this important role.

UEMO Report

Author: Dr Lynda Hamilton, Irish Representative

Summary

UEMO represents GPs/FM in Europe.

Head of delegation is Dr Liam J Lynch, who represents the IMO.

The spring meeting took place in Madrid, and the autumn meeting in Berlin (16/11/2012). Dr Annroi Finnegan attended the Madrid Meeting.

Dr Lynda Hamilton represents the ICGP, and is chair of the Standing Committee on Equal Opportunities, and rapporteur of the Working Group on Competencies of GPs/FMs in the management of complexity. This group is chaired by Dr Daniel Widmer of Switzerland who leads a team of nurses to bring primary care to remote areas. Many countries are concerned by task shifting and its effect on GPs/FM.

- Governments see it as cost effective
- The scope of practice of nurses and other primary care workers
- Autonomy, responsibility, accountability within teams
- Leadership of teams, increased administration
- The most complex of cases left for the GP, increased stress

The SMART project is for the European Commission. It examines the eHealth capabilities of GPs/FM, with a view to assisting the safety and free movement of patients and doctors in Europe.

The chair of my working group, Dr Widmer of Switzerland, invited Marianne Samuelson from the European Forum for Primary Care to address the plenum of UEMO in Madrid, with the European Federation of Nurses Association also represented. They made a very detailed presentation on Primary Care team work and how nurses could work autonomously in their health systems.

The working group met in Berlin and then discussed task shifting in their own countries, expressing concerns that nurses could be asked to perform outside their scope. It was decided to ask for a pan European standard and code of practice for nurses. In addition, it was decided to promote the leadership of the GP in teamwork, and clarify responsibility when task shifting. The Hungarian presidency of UEMO was asked to make our timely response to the European Commission, as the Pharmacy and Nursing Organisations are very active there.

We replied to a questionnaire on the electronic capabilities for the SMART project, computerisation of records, and communication with other GPs, hospitals, laboratories, and health authorities. This project will examine the international transfer of information securely for patients and doctors, and is ongoing.



Education Unit Report

Author: Nicholas P Fenlon, Director of Education

Other members (including elearning, courses, Summer School)

- Louise Nolan, Education Administrator (full time)
- Jana Pickard, Education Administrator (full time)
- Margaret Cunnane, Administrator for the Diploma in Management in Practice
- Gillian Doran & Patricia Patton, ICGP librarians – Available to education and course participants on request
- Angela Byrne, IT, – Available to education and course participants on request
- Niamh Killeen – Administrator for the Minor Surgery Course 2012

The College currently provides a wide range of education opportunities to members including:

- Year-long courses e.g. Certificate in Women's health, Certificate in Diabetes Care
- Classroom based short courses, e.g. Minor Surgery, Family Planning
- eLearning modules, e.g. Smoking Cessation, Breast Disease
- Conferences, e.g. AGM, Summer School, Winter Meeting
- Study days, e.g. Palliative Care day, study day on the Care of the Elderly in Long Term Residential Care & Nursing Homes
- CME small group learning (locality based small group learning)
- GPIT webinars
- NEGS – Discussions and meetings
- ICGP library services and publications

Summary of the Education Unit Programme

Aims of the Education Programme

The aim of the education programme is to provide continuous medical education/ professional development to its members. The objective of the programme is to provide general practitioners and health care professionals with practical updates on identified topics that are relevant and applicable to their everyday practice.

In recent years, we have also offered some courses to practice nurses and other healthcare professionals. Some courses are delivered in a blended learning environment through a combination of elearning modules, interactive workshops, online discussion forums and participation in audit, thus reflecting all the major, current and debatable health issues in general practice.

In addition to the blended learning courses, the need for short direct face to face courses was identified. In response to this, we have developed and delivered the very successful ICGP Summer School, where members have the option to meet for a three day series of educational sessions as well as social interaction. So far, the College has hosted five highly successful summer schools and will be hosting its sixth on 20–22 June 2012.

Programme activities/tasks over the past 12 months

In 2012/13, we delivered the following year long blended-learning courses:

- Diploma in Women's Health
- Certificate in Diabetes Care
- Occupational Medicine – leading to LFOM (in collaboration with the Faculty of Occupational Medicine)
- Certificate in Management in Practice
- Musculoskeletal Examination and Injury Management (in collaboration with the Faculty of Sports and Exercise Medicine)

We also delivered the following short courses:

- Theory Course for Cervical Smear takers
- Minor Surgery

In addition, under the direction of other ICGP directors, the College delivered many other courses including:

- Family Planning Theory & Practical
- SCALES Course
- Substance Misuse

Summary of College Blended Learning Education Programme 2012 - 2013

COURSE/EDUCATIONAL EVENT	NUMBER ATTENDING
Diploma in Women's Health	11
Diploma Practice in Management	10
Certificate in Diabetes Care	15
Musculoskeletal Examination and Injury Management	21
Occupational Medicine Year 1 & 2	32
Course for cervical Smear Takers	21
Minor Surgery	31
SCALES	20
Management in Practice for GP Registrars	10

New developments over the past 12 months

During the past 12 months we have been engaged in the development and delivery of stand-alone elearning modules.

eLearning modules currently available

- Breast Disease
- Hypertension
- Information Skills
- Long Acting Reversible Contraception (LARC)
- Promoting Smoking Cessation

- Suicide Prevention
- Asthma
- Rare Disorders: NETS & GIST
- Pain Management
- Chronic Condition Self-Management
- Substance Misuse (Level 1)
- Chronic Obstructive Pulmonary Disease (COPD)

A new course in Leadership for General Practice was launched in October 2011 under the direction of Dermot Folan and will be delivered again in the autumn of 2013.

Education timetable

The elearning unit has been operating since 1999. It is continuously developing and has been expanding annually. Our elearning courses all start in October and end in May.

The ICGP Summer School is a three day event which takes place during the last week of June. Participants have the option to partake in as many or as few sessions as suit their needs.

The summer months are used to evaluate courses which have finished, collate course results and prepare the next year of courses by bringing all programmes up to date, launching new courses, etc.

Programme milestones, deliverables & outputs

Unit milestones

- Fifth ICGP Summer School took place in June 2012 with over 300 GPs in attendance
- A new education extern – Professor Anthea Lints, Edinburgh University was appointed to the ICGP Education Programme in 2011
- A number of new ICGP elearning modules were launched

Statement of achievements/outcomes 2012

Collaborative courses: During the academic year 2012-2013, we had the fourth collaborative course in Musculoskeletal Examination and Injury Management. There are 21 participants on this fourth course. This course was delivered by both workshop and elearning and we have received very positive feedback from participants.

We also delivered the fifth Occupational Medicine course in collaboration with the Faculty of Occupational Medicine leading to LFOM.

Minor Surgery: We ran a number of very successful courses in minor surgery, now called Primary Care Surgery Courses. These took place in Dublin and Sligo.

Follow up from HETAC review: Following the review of the application for recognition by HETAC for accreditation of the ICGP as a provider of academic courses, it became necessary to reconsider our focus and strategy as an educational provider. The review process brought with it certain benefits and gave us the opportunity to take stock of what we have achieved in a short period of time and for which we can feel justifiably proud.

eLearning uptake: Since we launched the elearning modules in 2011, we have almost 1,000 registered users with an average of 15 users per day. A new module is released monthly and advertised in Forum with log in details explained.

Study days: In March 2013, we held the first ICGP study day on Care of the Elderly in Long Term Residential Care with an attendance of over 110. Interesting presentations were delivered relating to policies such as anti-psychotic prescribing, medical reviews, HIQA regulations, legal issues, etc. Many issues relating to this role for GPs emerged and we will be facilitating follow up days and working with members to clarify guidelines on care of the elderly.

Future plans

Summer School

We will be facilitating the sixth ICGP Summer School on 20–22 June 2013 in the Lyrath Estate Hotel, Kilkenny.

The summer School 2013 will also facilitate three parallel conferences:

- Substance Misuse
- Women's Health
- Research

Other new ventures will include

- Delivering further Primary Care Surgery courses to 3–4 locations outside of Dublin in 2013
- These topics will be recognised for professional competence credits
- We will be working with the CME Small Group Network on delivering an education programme on Suicide Prevention in General Practice. This will consist of elearning modules and workshops at CME meetings

We propose that we continue to deliver this broad menu of educational opportunities. The education emphasis of the College has always been on an education package that is relevant to the six core competencies of general practice, particularly related to common clinical topics and practice management. We will continue with a strong focus on these areas but will expand to include broader professional issues such as:

- Ethics and decision making
- Health inequalities and deprivation
- Working within a multicultural society
- Professionalism
- Clinical leadership
- Being an effective, reflective practitioner
- Quality improvement education focusing on patient safety

Substance misuse: The current Level 2 training in substance misuse is being updated and will be delivered as a formal course of study by the end of 2013. The current Level 1 course will also be updated during the coming year.

Webinars: We will be working with Niamh Killeen and the GPIT tutors to incorporate a higher level of elearning interactivity into all levels of education.

Administrative resource being provided to the programme

The Education Programme has two full time administrators – Louise Nolan and Jana Pickard. Jana joined the College staff in November 2012 and we welcome her to the team. We thank Caitriona Finn for her past work in the Education Unit, especially on registration and assessment. Louise Nolan is also administrator for the ICGP Summer School. Niamh Killeen was administrator for the Minor Surgery course in 2012 and this post is being administered by Jana Pickard in 2013. We thank Niamh for her work with this post over the past number of years. Margaret Cunnane is administrator for the Practice in Management courses. All administrators have given hugely to the development and continued success of ICGP education delivery.

Funding source(s)

As there is a charge for all courses, the unit strives to be self-funding. The production costs for our elearning modules have been generously off set by unrestricted education grants from a number of external companies and we are ever grateful to them for this support.

We have also been able to avail of ‘start up’ sponsorship for new courses in the past.

The ICGP Foundation has also contributed funding in the past.

CME Small Group Network Report

Author: Dr Henry Finnegan, National Director of CME

Summary of programme

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

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

Questionnaire

A questionnaire survey to assess 'Does participation in GP CME SGL influence medical practice?' was undertaken in the November – December period in 2012. Over 1,360 replies were received and are now being analysed. The results will be of interest and will be presented in due course.

Tutors

There are 35 CME tutors in post. They are responsible for organising monthly meetings of small groups throughout the academic year. For some time, there has been no tutor in the Laois/Offaly or West Dublin schemes due to the recruitment ban in the civil service. Meetings have continued in these areas with volunteer group leaders and mentoring from neighbouring tutors. This is not satisfactory. Due to retirements, there used to be a turnover of three tutors per year. Again, because of the recruitment ban, this has not happened for some years. This also is not satisfactory. The network always benefitted from the renewed enthusiasm of new tutors. It is detrimental to the scheme that this is not happening.

Participants

The GP CME Scheme now has 2,400 GPs on the mailing lists. GPs are assigned to a particular group in their area. The meetings remain an 'out of hours' activity in most areas. The GP will be informed of the date and venue in advance of each meeting. The tutor will provide a minimum of seven SGL meetings for each participant throughout the academic year. Due to capacity problems and attempting to maintain the SGL ethos, the meetings are not 'open'. One must be on the tutor's mailing list of participants to attend. When in a group, each participant is expected to contribute to the discussions, to join in any activities and to protect the confidentiality of discussions on patient care. This commitment may need to be explicit at the beginning of each academic year.

Professional Competence Scheme

It is now compulsory for all registered medical practitioners (RMPs) on the Irish Medical Council (IMC) Register to enrol on a Professional Competence Scheme (PCS) organised by a recognised training body. For general practice, this body is the ICGP. All physicians are

now expected to partake in regular continuing professional development (CPD) activities, including CME. CPD credits are accumulated under various headings and RMPs record these credits to ensure their continued maintenance of professional competence.

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

Meetings

The advent of PCS has resulted in more GPs joining the mailing lists. A total of 345 more doctors were added in the past year. There has been a massive rise in attendance at CME SGL meetings. June 2012 is the end of the academic year and the time for completion of statistics for that academic year. A total of 13,571 GPs attended meetings at year end. This was up 3,500 on the previous year. This increase has led to capacity problems in many areas, particularly in the cities. The numbers attending some groups now are so large they cannot be considered 'small groups' and there is pressure on this learning model. The average attendance nationally is 13.5 persons. There are 146 small groups meeting every month and a total of 1,074 meetings were held in the past year.

In response to the capacity problems, some tutors have formed new groups to deal with the demand but some are now resourcing groups greater than the maximum of five they are expected to service. There is a need for more tutors if the quality of educational product is to be maintained. At this time of high demand, the network has received cuts in the region of 40% from the HSE over the past five years. From September to the end of December 2012, on foot of a further HSE memorandum, there was no funding for room hire or the travel costs of tutors attending meetings. The ICGP thankfully agreed to assist the continuation of the schemes by a once off 'bailout' with the reimbursement of vouched expenses for room hire and travel costs. These unilateral actions make it very difficult to maintain a national programme.

There is a suggestion from the HSE that the ICGP engage in a transfer of the HSE's responsibilities and take over the GP CME tutor network. The ICGP would want a guarantee of annual funding, at a minimum of current levels, before committing additional resources. The HSE are undertaking a due diligence exercise in relation to the network. From the tutors' perspective, they want to be officially informed of any plans for their future and that the national director would be involved on their behalf. They want the continuation of the scheme and new tutors to be employed in the immediate term in Laois/Offaly and West Dublin, and that sufficient funding be provided from whatever source to allow the development of the network, including new technologies. The tutor network wants to provide a quality educational product to all GPs who need it, in particular new entrants to general practice. At the present time, this cannot be done unless new funding is provided.

Conclusion

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



Women's Health Programme Report

Author: Dr Miriam Daly, Programme Director

Programme members

- Programme Director: Dr Miriam Daly
- Project Director, LARC Course: Dr Geraldine Holland
- Tutor, Family Planning Certificate Courses: Dr Deirdre Lundy

Summary of programme

The Women's Health programme aims to provide educational support for primary care in women's healthcare and to contribute to the College's policy development in this area. Since its inception in 1998, the programme has evolved to cover a wide range of topics, using a variety of educational formats and has produced a series of publications using a multi-disciplinary approach.

Programme activities/tasks

- Run courses for and award the Certificate in Contraception
- Provide training in long acting reversible contraceptives (LARC) and award the Advanced Certificate in LARC
- Develop new courses in women's health topics in response to members' needs
- Facilitate workshops in women's health at ICGP events throughout the year
- Provide opinion and a review of documents and guidelines produced by outside bodies
- Represent the ICGP on steering committees and policy groups relating to women's health
- Reply to clinical queries from members on women's health issues
- Represent the ICGP as appropriate

Programme milestones/deliverables/outputs

LARC training and certification

- **LARC Phase I:** This route of application for the Advanced Certificate in long acting reversible contraceptives was open to GPs with experience in inserting these devices. We received over 445 applications before the closing date on 31 December 2012 (unrestricted educational grant from Bayer and MSD)
- **LARC Phase II:** 100 GPs have attended the LARC tutor courses to become LARC tutors (unrestricted educational grant from the Crisis Pregnancy Programme, HSE)
- **LARC Phase III:** GP trainees who receive training in LARC from an ICGP LARC tutor, during their GP registrar year can apply online for the Advanced Certificate in LARC
- **LARC Phase IV:** We are devising a LARC training programme to provide training in LARC insertions for GPs and GP trainees who have no prior experience in these techniques. We are planning to commence a community clinic in conjunction with the master of the National Maternity Hospital for the insertion of intrauterine devices for menorrhagia. This clinic will facilitate doctors who wish to train in these devices (funded by an unrestricted educational grant from Bayer and MSD)

eLearning courses

- **Sexually Transmitted Infections eLearning Module:** We are developing an elearning module on Sexually Transmitted Infections and hope to have this ready to launch in June 2013. (Funded by an unrestricted educational grant from the Crisis Pregnancy Programme of the HSE)
- **Breast Disease eLearning Module:** The Breast eLearning module was launched in May 2012 and has been viewed by 372 GPs to date. (Funded by an unrestricted educational grant from Pfizer)
- **LARC eLearning course:** We developed a LARC elearning resource for those applying for the Advanced Certificate in Contraception. This was launched in April 2012 and to date over 492 doctors have completed the course
- **Certificate in Women's Health and Diploma in Women's Health:** The Women's Health Programme is now delivering this elearning course

Publications

- **Crisis Pregnancy: Management Guide for General Practice:** This ICGP QIP document published in March 2013. This document provides evidence-guided information and recommendations to support GPs when providing care for women who present with a crisis pregnancy. The guideline provides information for GPs on free counselling services as well as information on medical and surgical abortions, management of side effects of abortion and recommendations as to the choice and timing of starting contraception to prevent further crisis pregnancies. The guideline was supported by an unrestricted educational grant from the Crisis pregnancy Programme of the HSE
- **Domestic Violence:** We have begun to review and update the ICGP document, Domestic Violence: A guide for General Practitioners. (This review is being funded by COSC.)
- We have contributed articles to the Women's Health series in Forum on the following topics: Women and smoking, breast cancer elearning module, breast cancer treatment, emergency contraception, physiotherapy for urinary incontinence

Reproductive and Sexual health (RSH) Committee

- The RSH committee meets four times per year and advises on training in sexual and reproductive health. They award the Certificate in Contraception and the Advanced Certificate in Contraception

Representation

Dr Miriam Daly provides representation for the ICGP on the following committees:

- National Strategy for Sexual Health, HSE, steering group
- National Strategy Sexual for Health, HSE, Services Working Group
- National Cancer Control Programme (NCCP), Group developing Family Risk of Breast Cancer Guidelines
- National Cancer Control Programme (NCCP), National Breast cancer Referral Guidelines Review group
- National Cancer Control Programme (NCCP), Ovarian Cancer Guidelines development Group
- HSE Crisis Pregnancy Programme Advisory Group
- HSE Gonorrhoea Control Group
- Royal College of Physicians, Sexual Health Awareness Week (SHAW) organising Committee

Research

- We are presenting a poster at the First Global Conference on Contraception, Reproductive and Sexual Health, organised by the European Society of Contraception and Reproductive Health in Denmark in May 2013.
Title: Testing for Sexually Transmitted Infections in General practice in Ireland.
Authors: Dr Miriam Daly and Dr Claire Collins

Clinical queries

- We responded to many clinical queries from members about women's health issues

Courses

- Reproductive and Sexual Health Course: This course provides an update for GPs and practice nurses on contraception, sexually transmitted diseases, menopause and women's health. We run two per year. It fulfils the requirements for the theory part of the Certificate in Contraception
- Certificate in Contraception Practical Course: We run two courses per year
- Masterclass in Contraception: To train new tutors in Contraception
- Long Acting Reversible Contraceptives (LARC) Tutor Course: To train new LARC tutors

Women's Health Workshops

- Update in Contraception, Merrion Faculty ICGP, November 2012
- Update in Contraception, National Trainee Conference Kilkenny, October 2012
- Advances in Women's Health Study Day at ICGP Summer School, June 2012
- Breast Disease in General Practice, Launch of Breast Disease eLearning Module, May 2012
- Pre-Conception, Antenatal Care, and Beyond: What's New? ICGP AGM, May 2012
- RCPI Clinical Update, Update on LARC, Sexual Health Awareness Week, RCPI, May 2012
- Women's Health Workshops at the ICGP SCALES Course
- Contraception Update, Spring Study Sessions, IMI, April 2012

WOMEN'S HEALTH COURSES: 1 JANUARY 2012–31 DECEMBER 2012		
Course	Date	No. Attending
Reproductive and Sexual Health Course	Jan 2012	49
	Sep 2012	45
Certificate in Contraception Practical Course	Mar 2012	13
	Oct 2012	13
LARC Tutor Workshop	Feb 2012	51
LARC Tutor Workshop	May 2012	49
Masterclass in Contraception for Contraception Tutors	May 2012	48
Advances in Women's Health, ICGP Summer School	Jun 2012	90

Future plans

- Plan and deliver phases 3-4 of the LARC programme
- Complete a study to assess the effectiveness and user satisfaction of a GP and consultant led community clinic for IUS insertion for menorrhagia
- Plan and deliver a sexually transmitted infections elearning course
- Source funding and develop a quick reference guide on sexually transmitted infections
- Develop a guide for a postnatal check-up in conjunction with the clinical lead in obstetrics and gynaecology, and the clinical lead in paediatrics
- Plan and run a study day titled *The GP and female health: Caring for women in the community*, on June 20th 2013 in conjunction with the ICGP Sumer School in Kilkenny
- Run reproductive and sexual health updates for those who wish to re-certify for the Basic and Advanced Certificate in Contraception, and improve and deliver the Certificate and Diploma in Women's Health
- Discuss and plan projects with the Irish Cancer Society with the aim of addressing the high smoking rates in women
- Include podcasts of our lectures on our elearning courses
- Further improvements to our website page and increase GP usage of the page

Administrative support

- Yvette Dalton
- Kirstin Smith (covering maternity leave)

Disease Surveillance Sentinel Practice Network Project Report

Author: Dr Michael Joyce, Project Director

Other members of the project

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

Summary of the project

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

Background to the project

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

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

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

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

Educational aims of the project

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

Benefits to members of the project

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

different areas. The lessons learned have already contributed to the developments in Heartwatch and the Independent National Data Centre (INDC), and will continue to do so in the future.

Project activities

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

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

<http://www.hpsc.ie/hpsc/A-Z/Respiratory/Influenza/SeasonalInfluenza/Surveillance/InfluenzaSurveillanceReports/20122013Season/>

At the time of writing (21/3/13), it looks like the influenza activity has peaked for this year, giving us a quiet influenza year for the second year in a row. This season was dominated by type B influenza.

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

Project milestones/deliverables/outputs

- Whereas previously surveillance was carried out from week 40 to week 20, it now takes place throughout the entire year
- With 60 participating practices, we now have the desired 5% population coverage. Some limited further recruitment is currently planned to cover areas that have poor coverage

Achievements to date

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

This year, some improvements were made to the Health One programme for extracting the data which is now easier and more consistent which has made the data collection more streamlined.

Future plans

Continued surveillance is planned.

Funding source

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



Substance Misuse Report

Author: Dr Ide Delargy, Programme Director

Other members of the programme team

- Mary Fanning, Clinical Audit Facilitator
- Niamh Killeen, Administrator
- Dr John O'Brien, Chairperson of the Joint ICGP/HSE Audit Review Group for Substance Misuse (ARG) – nominated by the ICGP

Evaluation

The ARG decided in March 2012 to engage in a process of external peer review of its processes. Dr Saket Priyadarshi, Mr Paul Rimmer and Ms Mary Clare Madden from the Addiction Services, NHS Greater Glasgow & Clyde carried out an external review of the audit process. They attended a meeting of the ARG in May 2012 as part of the review. The final draft of the review was provided to the ICGP in December 2012.

The evaluation team noted that:

- Confidentiality is not an issue and that current processes protect the confidentiality of patients and GPs
- The ARG (Audit Review Group) is a multi-disciplinary, multi-agency committee, with clear administrative processes, terms of reference and a professional approach

The ARG and the Substance Misuse team support all of the recommendations outlined in the evaluation and is in the process of putting them into action.

The plan is as follows:

- To clarify, in conjunction with the HSE, the governance structure surrounding the audit process
- To work with the HSE in strengthening the role of the GP co-ordinator input into the audit process
- To review the audit criteria and standards in conjunction with the new national guidelines for OST
- To review all communication with GPs and ensure that all GPs are aware that they can attend ARG meetings where their audit is discussed
- To develop a post-graduate qualification for substance misuse similar to the RCGP certificate in the UK
- To explore, in conjunction with the HSE, the proposal that all practices provide annual data on all MTP patients through a centralised IT data collecting system. This can be programmed through the CTL
- To continue our pre-meeting process of screening successful audits, and explore ways of involving the GP co-ordinators in this process. This should ensure that only audits causing concern are discussed in detail at the ARG
- To provide more local/national learning events to support the MTP and the audit process. Although CME is already a contractual obligation, this will be further strengthened in the new governance structure

The Substance Misuse team drew up a response to the evaluation and this was endorsed by the ARG. The evaluation and the response will be available shortly on the ICGP website following consideration by the council.

Core competencies for Level 2 accreditation and training

The need for clarification on the core competencies for Level 2 accreditation and training was highlighted. The committee is working with the HSE to ensure that there is standardisation and agreement nationally on the criteria and core competencies for Level 2 accreditation.

Governance and the audit process

In line with the recommendations of the evaluation, the committee is working with the HSE on finalising the governance framework for the audit process. This is a work in progress.

Number of meetings of the Joint HSE/ICGP Audit Review Group for Substance Misuse held in 2012

The committee met six times during 2012 – 8 March, 22 May, 26 June, 18 September, 16 October and 27 November.

Number of audits discussed by the Joint HSE/ICGP Audit Review Group

45

Issues arising from audit

The majority of audits are satisfactory. When an audit is unsatisfactory it is generally due to one or more of the following:

- Information is not easily retrievable due to inadequate documentation
- Methadone doses and/or dispensing arrangements are not recorded
- No evidence of adequate assessment if the patient commenced treatment in the practice (including drug screens)
- Clinical indications for prescribing additional medications are not recorded
- Clinical indications for a change in the methadone dose are not recorded
- Results of the viral screen and vaccination are not available

Self-audit

The ARG decided to suspend the current external audit process, to develop the self-audit and to make it available to all doctors participating in the MTP. A sub-committee was set up to progress and finalise the self-audit. External audits will continue when the self-audit process is finalised in order to:

- Randomly validate self-audits
- Provide audit to GPs applying for Level 2 accreditation
- Meet requests for external audit from ARG, GP co-ordinators and HSE managers

Development of national clinical guidelines for the management of substance misuse in primary care

The ICGP Substance Misuse Programme is one of the key stakeholders on the National Clinical Guidelines Working Group. This group has been meeting regularly and there are three representatives nominated by the ICGP to participate in this process. The three representatives – Dr Harkin (who has recently resigned), Dr Crowley and Dr Delargy – have met on a number of occasions outside of the main committee to co-ordinate a GP response on some of the best practice issues being deliberated.

Development of national guidelines on pain management

Dr Delargy, Director of the Substance Misuse Programme, is working with the Irish College of Anaesthetists to develop national guidelines on pain management.

Continuing medical education

The ICGP Substance Misuse team is currently developing a certificate training course in substance misuse. This will replace the current Level 2 training programme. When this course becomes available, there will be an option for all GPs working in substance misuse to avail of this training. The HSE is responsible for awarding Level 2 contracts so obtaining the accreditation from the ICGP will not automatically provide entitlement to a contract.

All GPs will be notified when the new training programme becomes available.

The Substance Misuse team delivered a full day seminar on 'Children and Substance Misuse' in the Lyrath Hotel in Kilkenny as part of the ICGP Summer School meeting in June 2012. The Minister for Children and Youth Affairs, Ms Frances Fitzgerald, opened the seminar.

Other activities

The Substance Misuse team is represented on the ICGP Quality and Standards Committee and ICGP Audit Sub-Committee. The team has been proactive in developing sample audits for GPs with an interest in issues related to substance misuse, e.g. viral screen and follow-up, benzodiazepine prescribing, and to general management issues such as data quality and information management.

Change of ARG chairperson in 2012

With the term of office having been completed, Dr John Cox was replaced as chairperson of the ARG in 2012. The Substance Misuse team would like to acknowledge Dr Cox's commitment to the audit process, and to thank him for the time and work that he put into the ARG.

The Substance Misuse team welcomes Dr John O'Brien as the new chair.



Mental Health in Primary Care Report

Author: Mr Pearse Finegan, Project Director

Administration Support: Ms Michelle Dodd

Clinical Care Programme on Mental Health

The Clinical Care Programme for Mental health has taken up a lot of time and resources from Dr Brid Hollywood and the director of mental health. Documents covering the work of the national subgroups on eating disorders, early detection of psychosis and management of patients with suicidal ideation in the emergency department have been sent to the ICGP Quality in Practice Committee and the College of Psychiatry of Ireland for their endorsement.

Publications

- The ICGP Position Paper on Alcohol, written in conjunction with Dr Margaret O’Riordan, was published and launched at the ICGP Winter Meeting in November 2012
- Currently working on the update of the ICGP document ‘Helping Patients with Alcohol Problems – A Guide for Primary Care Staff (Quick Reference Guide)’

Developments and courses

- Launch of elearning programme on suicide prevention for general release at the end of March 2013
- Commencing development of elearning programmes on depression and alcohol
- Seeking a partner to develop a programme to support the GP and patient with alcohol detoxification. Have had some discussions with two interested groups and hope to be in a position to proceed in the next few weeks
- Working with the HSE on the delivery of the Team Based Approach to Mental Health in Primary care at DCU and the Centre for Nurse Education Sligo

Projects with outside groups

- A full review of the books recommended in ‘The Power of Words’ bibliotherapy was undertaken over the past three months by six ICGP members. The new list will be published in March in conjunction with the Irish Library Service
- Member of the Vision for Change sub group on the implementation of the recommendations

Conferences

- Presentation on suicide prevention module at the GP trainees conference
- Presentation to the Trinity GP Trainers Group on the Mental Health Programme, the ICGP and the Suicide elearning programme
- Represented the ICGP at a conference on the delivery of psychotherapy in the community in Dun Laoghaire
- Represented the ICGP at a conference on traveller mental health services in Dublin
- Represented the ICGP at the practice nurses AGM in 2012
- Presentation at the Trainers Conference in Kilkenny in 2013

Other

- Support to Dr Rita Doyle, Board Member, Mental Health Act Reform group
- Organised a presentation on a model of delivery of the mental health service by Sandwell NHS, PCT Birmingham, entitled 'Self Help Confidence & Wellbeing Service'. This was delivered by Dr Ian Walton, GP, Sandwell GP, Mental Health Lead, Sandwell and West Birmingham Clinical Commissioning Group, and Lisa Hill, Primary Care Mental Health and Wellbeing Lead, Sandwell and West Birmingham Clinical Commissioning Group. Representatives from the HSE, ICGP, and IMO, and the Minister for Primary Care and Mental Health attended

SCALES Course Report

Author: Dr Maria Wilson, Course Tutor

Summary

The SCALES course has been in operation for the past number of years. It is a course that is primarily aimed at doctors who have been out of general practice for a period of time and are thinking of re- entering it but wish to update their knowledge. It also attracts doctors who have never been in general practice and are considering a future in general practice. Interestingly, a third group have emerged. These are doctors who are involved in public health. This group do it to update their medical knowledge as they feel quite distant from some clinical scenarios. As a result, there is a wide range of expertise and opinions expressed in the group. During the summer of 2012, we interviewed prospective participants by phone having received their needs assessments. The sole purpose of this is so that participants know exactly what the course does and does not cover.

The course runs as follows:

- There is a limit of 20 participants; 15 took part in the year 2012
- A needs assessment is sent to each interested person and followed up by phone interview
- It is run over eight full days, all bar one of these are held in the ICGP. Lunch is provided and a lot of discussion spills over into this time
- The course tutor runs half of each of the full days and guest speakers, largely chosen from expertise within general practice, cover the second part of the day
- Most of the course material is given to participants either before or on the day the course begins. Participants are encouraged to read in advance as all of the sessions are interactive
- The curriculum has a core basis to it. However, we always leave free sessions to accommodate specific interests or needs of the group. We have several past participants who come back and run a session on the course. These have included Dr Shunil Roy (suturing techniques) and Dr Elizabeth Healy (child protection issues – a practical approach). Other guest lecturers include Dr Geraldine Holland, Dr Deirdre Lundy, Dr Susan Smith, Dr David Buckley, Dr Darragh O’ Doherty, Dr Zita O’ Reilly, Dr Conor Maguire, Dr Keith Perdue, Mr Rolande Anderson and Dr Fiona Magee

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

We also had sessions on travel health, diabetes mellitus, and women’s health which were all delivered in very practical terms relevant to general practice. The course started on 28 August 2012 and finished on 4 December 2012 with the graduation and a festive lunch. We had a very enthusiastic group of doctors who were very well motivated and came well prepared for the sessions. We had a very high attendance rate.

Course administrators

- Yvette Dalton and Kirstin Smith



Quality and Standards Committee Report

Author: Dr Sheila Rochford, Quality & Standards Committee Chair

Summary

The Quality and Standards Committee receives reports from the following:

- Medical Director of the ICGP
- Professional Competence Committee
- Quality in Practice Committee
- Clinical Care Programme Committee
- Substance Misuse Programme

Full details of these annual reports are available on the website.

The Quality in Practice Committee has been in existence for 18 months and in that time, there has been a change in definition of its role in response to the changing medical landscape. This change is reflected in its new terms of reference ratified by the Council in March 2013.

The Report of the Medical Director of the ICGP to the Q&S Committee summarises the many activities undertaken by the College at this time. Of particular note for members, is the proposed ICGP action plan addressing the National Standards for Safer Better Healthcare, launched in June 2012 by HIQA.

The Professional Competence Committee report highlights areas of evolving practice including proposals to use examples of good practice as templates on the website, and the establishment of focus groups/workshops to explore accreditation issues around retirement and part-time/OOH/locum work.

The Quality in Practice Committee report details the various ICGP documents being produced, commissioned and updated. An increasing part of the workload of this committee involves the review of material from the Clinical Care Programmes as well as other HSE guidelines.

The Substance Misuse Audit Review Group requested an external peer evaluation of their audit process and the resulting report, 'Evaluation of the Audit of the Methadone Treatment Protocol in Ireland', is now available on the website along with the Audit Review Group's response to it. The next step involves further clarification of the governance framework of the Audit Review Group.

The Clinical Care Sub-Committee has been constituted to report on work undertaken by ICGP Clinical Care leads on the Clinical Care Programmes, to provide feedback on documentation (other than clinical guidelines) emanating from these programmes and to provide feedback from ICGP members on Clinical Care Programme activities. The heavy weighting of these programmes, as currently constituted towards secondary and tertiary care, has been a cause of considerable concern and efforts are on going to address this deficiency.

Members of various committees provide much support for the activities of the College in order that all GPs and their patients may benefit. I would like to take this opportunity to acknowledge their work. These individual acts of generosity are but one manifestation of public service in which all GPs participate and that needs to be asserted, celebrated and valued unambiguously in order to be sustained.



Medical Director's Report

Author: Dr Margaret O'Riordan

Pressure on GPs has continued to mount over the past year as the recession bites. Patients present with complex problems aggravated by their deteriorating social circumstances, leading to an increased workload for GPs. Significant reduction in practice income has added financial strain and uncertainty. GPs have faced these challenges and continue to deliver a patient centred service with a focus on same day access based on medical need and the management of 90% -95% of patient presenting complaints without onward referral.

General practice is the best place to deliver chronic disease management in a setting where many patients have multi-morbidities coupled with complex familial and social backgrounds. Due to their unique knowledge, long term therapeutic relationships and patient orientated holistic approach, GPs are best placed to support and manage patients in these circumstances.

Therefore, it is time for the rhetoric of a primary care led health service to be translated into reality and for the government to actively support GPs to deliver the service they are trained and willing to undertake given appropriate support and resources.

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

Major developments in the past 12 months

The role of medical director involves oversight and support across all ICGP activities including education, training and research. The recent establishment of a Project Development Group within the College has been a very positive development. Ms Gillian Doran provides support for the group and its purpose is to bring all ICGP project directors, and librarian and relevant administrative staff together on a regular basis to support existing project activity and plan for future events. This group aims to set consistent approaches and standards to ICGP event and course management. Mr Nick Fenlon, Ms Orla Sherlock, Ms Louise Nolan and Ms Jana Pickard are to be congratulated on the continued high standard they deliver in conference organisation.

National Standards for Safer Better Healthcare

The National Standards for Safer Better Healthcare were launched in June 2012 by HIQA. They apply to all health care services (excluding mental health) provided or funded by the HSE, including general practice. HIQA, as part of their regulatory role, intend to commence a monitoring programme of compliance with the National Standards for Safer Better Healthcare in June 2013 across all the specified health care settings. It is anticipated that due to the relative complexity and the challenges in terms of governance, diversity in models of service delivery and widespread geographical distribution, the monitoring of general practices by HIQA may take some time to implement. The College will support its members in interpreting how these standards will apply in a practical sense to general practice and the best way to support their implementation, the main

focus of which will be on promoting quality improvement. A working group is currently being established to plan the best approach to achieve this aim. Members of the working group will be drawn from ICGP members and key stakeholders such as the DOHC, HSE, IMO and patient representatives. Practice managers and practice nurses will have a central role in the delivery of the standards and their input will be essential in the design of the implementation plan and supports. The Quality and Standards Committee is the key ICGP committee in terms of the governance of support for its members in this regard.

Professional Competence Scheme

As medical director of the Professional Competence Scheme (PCS), the focus of the past year has been on consolidating the learning from the first year of the scheme and continuing to support members of the PCS to meet their statutory continuing professional development (CPD) activities. Ms Jantze Cotter (PCS Manager), and Ms Mairead Delaney and Ms Carol White (administrators), continue to deliver a high quality of service to members. The PCS subcommittee and its chair, Dr Mary Sheehan, have played a key role in managing the continued development and expansion of services for members.

Application for reaccreditation as a specialist training body

The ICGP is the recognised specialist training body for GP training in Ireland and has delivered this role successfully for many years. The ICGP underwent its reaccreditation visit by the Medical Council on 5 February 2013 to assess its application for reaccreditation as a specialist training body. Compliance with the Medical Council standards for specialist training bodies was a central focus of this visit. The support of all GP training schemes was a key enabler in the preparations. The contribution of GP trainees to the visit was commended by the Medical Council. Final report and recommendations are awaited. Dr Gerry Mansfield, Ms Martina McDonnell, Ms Janet Stafford and Ms Pauline Tierney are to be commended on their key roles in this challenging process.

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

The medical director is representing the ICGP on the recently established HIQA Expert Advisory Group on planned surgical procedures. The product of this group will have implications for GP referral to secondary services as it will provide national guidance on criteria on the referral of patients for surgical procedures. Initially, the group is focusing on common procedures such as tonsillectomy, grommet insertion, cataract extraction and varicose vein ligation. The focus will then move to orthopaedics and other surgical specialties.

Links with RCGP Northern Ireland

North-South co-operation between the ICGP and RCGP NI is progressing. Standards for the accreditation of out of hours co-ops in the Republic of Ireland based on a model developed by the RCGP NI are currently being developed. A business plan has been agreed between the two Colleges and consultation is ongoing with the national OOH CO-OP group. It is planned to commence the voluntary accreditation process in the coming months.

ICGP representatives on external bodies and submissions to public consultations

The ICGP is very grateful to the more than 50 GP representatives on committees external to the ICGP. The list continues to grow with recent additions including the

nomination of Dr Conor O Shea to a national group on immunisations in general practice, Dr Rita Doyle to the board of the Mental Health Commission and Dr Maurice Collins to the Fit for Work coalition.

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

- The National Policy on Consent June 2012
- Proposed National Dementia Strategy August 2012
- Draft implementation tool for the National Standards for Safer Better Healthcare in acute hospital settings. January 2013
- HIQA HTA of Clinical Referral / Treatment Thresholds for Planned Surgical Procedures

Ongoing activities

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

A. Internal ICGP committees

- Member ICGP Council and Executive
- Member Quality and Standards Committee
- Member ICGP Education Governance Committee
- Member ICGP Postgraduate Training Committee
- Member ICGP Research Committee
- Member ICGP Professional Competence Committee (and Audit Subcommittee)
- Member ICGP Quality in Practice Committee

B. External representative roles

- Member of the AUDGPI Executive Committee
- Member of the Professional Competence Subcommittee of the Forum of Postgraduate Medical Training Bodies
- Member of the National Decontamination Advisory Group on surgical instruments
- Member National Cancer Control Programme Tumour Group

C. Presentations/Workshops

- **ICGP Cork City Faculty** (in conjunction with Mr Kieran Ryan)
“ICGP Update,” May 2012
- **National Out of Hours Co-op Group**
“Standards for Out of Hours Co-ops,” October 2012
- **New Trainees Workshop**
November 2012
- **Professional Competence Workshop**
Retired Doctors Group, January 2013

D. Publications and reports

- Finnegan P. and O' Riordan M. *Prevention of Alcohol related problems in Ireland – ICGP position paper*. ICGP November 2012
- O Riordan M. *College calls for revised national consent policy* Forum November 2012
- O Riordan M. *Resources needed for Dementia Strategy* Forum December 2012
- O Riordan M, Crowley P. *What do the new national standards mean for GPs?* Forum January 2013

A detailed report based on an extensive literature review and survey of ICGP members on access to diagnostics is currently under production. The report compiled by the Medical Director, Ms Gillian Doran and Dr Claire Collins will be launched at the ICGP AGM May 2013.

Administrative resource being provided to the programme

Ms Maureen Dempsey provides essential high quality administrative support which is much appreciated.

Report by the Joint HSE/ICGP Audit Review Group for Substance Misuse

Membership of ARG

The committee is comprised of HSE representatives and ICGP representatives as detailed below. The positions are reviewed on a two-year revolving cycle (next due for review in January 2015). The group currently comprises of:

- Dr John O'Brien, Chairperson – nominated by the ICGP
- Dr Ide Delargy, Project Director, ICGP Substance Misuse Programme – nominated by the ICGP
- Professor Joe Barry, Head of Dept of Public Health and Primary Care TCD Health Sciences – Nominated by the HSE
- Dr Des Crowley, GP Co-ordinator – nominated by the HSE GP co-ordinator group
- Dr Cliona Wilson, GP – nominated by the ICGP
- Dr Derval Howley, HSE Southeast Regional Coordinator for Social Inclusion and Substance Misuse – nominated by the HSE
- Ms Vivienne Fay, Area Operations Manager, Dublin mid-Leinster – nominated by the HSE
- Dr Mike Scully, Consultant Psychiatrist in Substance Misuse – nominated by HSE Consultant Psychiatrists Specialising in Substance Misuse
- Ms Mary Fanning, Clinical Audit Facilitator – appointed by the ICGP
- Administrative Support: Niamh Killeen – ICGP

Evaluation

The ARG decided in March 2012 to engage in a process of external peer review of its processes. Dr Saket Priyadarshi, Mr Paul Rimmer and Ms Mary Clare Madden from the Addiction Services, NHS Greater Glasgow & Clyde carried out an external review of the audit process. They attended a meeting of the ARG in May 2012 as part of the review. The final draft of the review was provided to the ICGP in December 2012.

The evaluation team noted that:

- Confidentiality is not an issue and that current processes protect the confidentiality of patients and GPs
- The ARG (Audit Review Group) is a multi-disciplinary, multi-agency committee, with clear administrative processes, terms of reference and a professional approach
- The ARG supports all of the recommendations outlined in the evaluation and is in the process of putting them into action

The plan is as follows:

- To clarify, in conjunction with the HSE, the governance structure surrounding the audit process
- To work with the HSE in strengthening the role of the GP co-ordinator input into the audit process
- To review the audit criteria and standards in conjunction with the new national guidelines for OST
- To review all communication with GPs and ensure that all GPs are aware that they can attend ARG meetings where their audit is discussed

- To develop a post-graduate qualification for substance misuse similar to the RCGP certificate in the UK
- To explore, in conjunction with the HSE, the proposal that all practices provide annual data on all MTP patients through a centralised IT data collecting system. This can be programmed through the CTL
- To continue our pre-meeting process of screening successful audits, and explore ways of involving the GP co-ordinators in this process. This should ensure that only audits causing concern are discussed in detail at the ARG
- To provide more local/national learning events to support the MTP and the audit process. Although CME is already a contractual obligation, this will be further strengthened in the new governance structure

The Substance Misuse team drew up a response to the evaluation and this was endorsed by the ARG. The evaluation and the response will be available shortly on the ICGP website following consideration by the council.

Number of meetings of the Joint HSE/ICGP Audit Review Group for Substance Misuse held in 2012 The committee met six times during 2012 – 8 March, 22 May, 26 June, 18 September, 16 October and 27 November.

Number of audits discussed by the Joint HSE/ICGP Audit Review Group

45

Issues arising from audit

The majority of audits are satisfactory. When an audit is unsatisfactory, it is generally due to one or more of the following:

Information is not easily retrievable due to inadequate documentation.

- Methadone doses and/or dispensing arrangements are not recorded
- No evidence of adequate assessment if the patient commenced treatment in the practice (including drug screens)
- Clinical indications for prescribing additional medications are not recorded
- Clinical indications for a change in the methadone dose are not recorded
- Results of the viral screen and vaccination are not available

Self-audit

The ARG decided to suspend the current external audit process, to develop the self-audit and to make it available to all doctors participating in the MTP. A sub-committee was set up to progress and finalise the self-audit. External audits will continue when the self-audit process is finalised in order to:

- Randomly validate self-audits
- Provide audit to GPs applying for Level 2 accreditation
- Meet requests for external audit from ARG, GP co-ordinators and HSE managers

Development of national clinical guidelines for the management of substance misuse in primary care

The ICGP Substance Misuse Programme is one of the key stakeholders on the National Clinical Guidelines Working Group. This group has been meeting regularly and there are

three representatives nominated by the ICGP to participate in this process. The three representatives – Dr Harkin (who has recently resigned), Dr Crowley and Dr Delargy – have met on a number of occasions outside of the main committee to co-ordinate a GP response on some of the best practice issues being deliberated.

Change of ARG chairperson in 2012

With the term of office having been completed, Dr John Cox was replaced as chairperson of the ARG in 2012. The Substance Misuse team would like to acknowledge Dr Cox's commitment to the audit process, and to thank him for the time and work that he put into the ARG.

The Substance Misuse team welcomes Dr John O'Brien as the new chair.

Professional Competence Scheme Report

Authors: Dr Mary Sheehan, ICGP PCS Committee Chair, and Ms Jantze Cotter, PCS Manager

Project/Programme title

ICGP Professional Competence Scheme (PCS)

Other members of project/programme group/team

Dr Mary Sheehan (Chair), Ms Jantze Cotter, Ms Mairead Delaney, Dr John Delap, Dr Mary Favier, Dr Henry Finnegan, Dr John Gillman, Dr Mary Glancy, Dr Brian O'Mahony, Dr Margaret O'Riordan, Mr Kieran Ryan, and Ms Carol White.

Summary of project/programme

The commencement of Part 11 of the Medical Practitioners Act 2007 on 1 May 2011 placed a statutory responsibility on registered medical practitioners to maintain their professional competence and enrol on a professional competence scheme.

The ICGP entered an arrangement with the Irish Medical Council to operate the Professional Competence Scheme. The ICGP's key responsibilities in operating the scheme are to provide a supportive, collegiate, professional development environment to facilitate GPs' enrolment, and engagement in and recording of continuing professional development (CPD) activities.

The ICGP is required to provide detailed reports to the IMC on the operation of the scheme and includes an annual operational plan, a qualitative and quantitative report against key performance indicators, and a financial report.

The ICGP is a member of the Forum of Postgraduate Medical Training Bodies and actively engages in the development of common policies relevant to the operation of all the schemes.

Project/programme activities/tasks during the past 12 months

The second year of the PCS is nearing completion at the time of preparing the report. While we acknowledge that the scheme is still in its infancy we can report that those enrolled on the ICGP scheme have demonstrated a continued commitment to their ongoing professional development.

The key reportable areas are:

- A significant number of enrolees on the ICGP PCS have recorded sufficient activity in their ePortfolio to meet the PCS requirements. This included completing a clinical audit
- The verification process completed by the ICGP reinforced that doctors are recoding activities in accordance with the PCS requirements set by the IMC
- The PCS helpdesk continues to be utilised by the GPs to obtain support with meeting their maintenance of professional competence requirements. We have responded to approximately 950 emails and 900 calls as at March 2013
- Additional clinical audit samples were developed and made available on the website
- Workshops were conducted for retired, out of hour, locum and sessional doctors in response to GP requests for support in understanding and meeting the

maintenance of professional competence requirements, namely clinical (practice) audit and internal CPD

- Online tutorials were developed to assist GPs with enrolment and using the ePortfolio (including attaching documentation)
- The systems to support GPs with enrolling and recording their CPD activity were modified based on user feedback
- The PCS section on the ICGP website was upgraded
- Regular updates on the schemes' requirements were posted on PCS section of the ICGP website and FAQs were published in the ICGP journal, FORUM
- On-going provision of CPD recognition for activities/events external to ICGP
- The production of the annual statement of participation for individual doctors which is a snapshot of the CPD activities the GP recorded in their ePortfolio record at a given point in time
- The ICGP membership fee has been reduced over the past two years to take into account the addition of this mandatory annual PCS fee for members
- Active engagement on the Forum of Postgraduate Medical Training Bodies: PCS subcommittee and PCS Managers Group to develop common policies and guidelines
- GP representation on the IMC PCS Committee to ensure that there is a GP opinion at the table
- Maintain regular contact with the IMC on the scheme evolution including the provision of reports on the key deliverables and key issues reported by the scheme enrolees

Future plans

- To continue to provide support to ICGP PCS enrolees and update resources as requested
- To improve the annual process to maintain enrolment on the Scheme
- To increase support to assist the small percentage not using the online ePortfolio to record their CPD activity
- To continue to actively engage with the IMC on the review and development of the schemes, which includes the development of elements of the performance assessment process
- To develop and expand programmes for GPs to avail of CPD activity to facilitate their maintenance of professional competence

Administrative resource being provided to the project/programme

- Ms Carol White – Administrator (recognition of external CPD activity)
- Ms Mairead Delaney – Administrator, Professional Competence Scheme

The development of the ICGP scheme continues to be resource intensive. The successful implementation of the scheme thus far can be attributed to a range of dedicated ICGP staff, the PCS Committee/Subcommittee members and feedback from the scheme enrolees.

Quality in Practice Subcommittee Report

Author: Dr Paul Armstrong, Chair

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

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

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

- **Chairperson:** Dr Paul Armstrong was appointed for a three year term in 2011
- **Committee membership:** Dr Patricia Carmody*, Dr Sheena Finn*, Dr Susan McLaughlin*, Dr Grainne Ni Foghlu, Dr Ray O'Connor**, Dr Maria O'Mahony, Dr Margaret O'Riordan, Dr Ben Parmeter, Dr Phillip Sheeran Purcell, Dr William Ralph**
 - *Members joined during 2012
 - ** Resignation by committee members during 2012
- **Committee activity:** There were four meetings in Lincoln Place in 2012 (February, April, September and November) and two teleconferences. A considerable amount of preparatory reading is involved for each meeting
- **Project officer:** Dr Maria O'Mahony continued as project officer during the year. The post provides for two sessions per week to support the chair of the committee in view of the considerable and increasing workload
- **ICGP administrative support:** Provided by Janet Stafford

Key activities during the past 12 months

Chronic Care Programmes

Consultation is ongoing with the Quality in Practice Committee in relation to the development of chronic care pathways for each of the national chronic care programmes. QIP feedback continues to be both strategic and clinical in nature. Throughout 2012, documents from the following chronic care programmes were reviewed and feedback was delivered by the QIP Committee:

- Antimicrobial resistance and infection control
- Asthma
- COPD
- Dermatology
- Diabetes
- Epilepsy
- Heart Failure
- Mental Health
- Obstetrics and Gynaecology
- Paediatrics

HSE publications and documents

- Immunisation guidelines
- Health Protection Surveillance Centre – Clostridium difficile guidelines
- Health Protection Surveillance Centre – Infectious intestinal disease guidelines
- Health Protection Surveillance Centre – Mgt. of Influenza in residential care facilities
- National Cancer Control Programme Family Risk Guidelines for Breast Cancer
- National Cancer Control Programme follow up care plan after treatment for breast cancer
- Irish food and nut allergy network guidelines
- Quality and safety prompts for multidisciplinary teams

Quick Reference Guides (QRG)

During the course of 2012 new quick reference guides were published and existing documents updated. These are available on the ICGP website under the 'In the Practice'. Several other QRGs are also in development as listed below.

Quick Reference Guides completed or updated

- Asthma Control in General Practice
- COPD Management
- Crisis Pregnancy
- Diabetes: Management of Pre-Gestational and Gestational Diabetes Mellitus
- Diabetes Type 2
- Domestic Violence
- Haemochromatosis
- HSE/ICGP Healthy Weight Management Guidelines Before, During & After Pregnancy
- HSE/ICGP Weight Management Treatment Algorithm for Adults
- HSE/ICGP Weight Management Treatment Algorithm for Children
- Lesbian, Gay and Bisexual Patients – Issues for general practice GLEN document

Quick Reference Guides planned or in development

- Antipyretic Use in Febrile Children
- Child & Adolescent Mental Health
- Coeliac Disease
- Communicating Risk
- Dementia
- Sick Certification

Quick Reference Guides being updated

- Repeat Prescribing
- Cardiovascular Disease
- Alcohol Problems
- Warfarin Prescribing
- Prostate Cancer

Ongoing improvements

- Work was completed on choosing and prioritising topics for QIP attention and resources, concise proposal forms for quick reference guides (QRGs) have been developed and a template for prospective topics and authors has been prepared and agreed. It is important that proposal forms are submitted in advance of work being carried out. Further details are available on the ICGP website
- Summaries of quick reference guides have been published in Forum magazine in order to increase visibility of new and existing quick reference guides. The guides are also available on the College website in the 'In the Practice' section
- Audit tools based on current quick reference guides (QRGs) have been developed
- Authors are encouraged to provide audit tools for QRGs when completing templates
- Quality Improvement Award: The annual ICGP Quality Improvement Award will be sponsored by Medisec and will be presented at the ICGP AGM in May 2012

Future plans and challenges

- Ensuring our work remains user friendly and relevant for members
- Highlighting realistic resources will be required to implement any new work practices in general practice
- Optimising technology for meetings and workload
- Keeping workload manageable for committee members
- Ensuring significant practical GP input into documents produced by third parties, e.g. Chronic Care Programmes
- Maintaining high standards for patient care

Clinical Care Programme Subcommittee Report

Author: Dr Eamonn Shanahan

Summary

At the intersection of lifestyle and an ageing population is chronic illness. Diabetes, asthma, COPD, cardiovascular and cerebrovascular disease are challenges to the individual, family and society in general. Care of the elderly, palliative care and mental health each provide substantial issues, as do rheumatology and dermatology. Care of sick children and women's health issues provide unique areas of concern. Overarching all of these is the issue of health care acquired infection. As a society, we have tried to deal with these issues by pushing them into secondary and tertiary care. This approach is not working.

Out of the financial straits we find ourselves in as a society, we have to find more efficient ways of coping with these issues. We will continue to require secondary and tertiary care; but it is only in general practice and primary care that many of the individuals affected are best helped. Furthermore, there is no other section of the health services that can truly integrate all of the individual's problems. We are truly the only generalist physicians left in the health services.

In the lifetime of this government, it was determined that a new approach be taken to the management of illness and disability. We are a small island, with a population of a middle sized UK city; but until recently, we had many disparate ways of dealing with people with troubles. It was decided that a number of clinical care programmes be established to determine best practice and more importantly, how to apply this best practice right across the country. Each of the programmes was to be representative of all stake holders and the ICGP was invited to participate. Given that much of chronic illness care can and should be delivered in general practice and primary care, in many of the programmes, there was joint consultant – GP lead for the programmes.

The ICGP has recruited 14 of our colleagues who have been working on the most important clinical care programmes. For the individuals, I have the utmost respect, as they have worked diligently, far in excess of what was expected of them, with the sole motive of developing programmes which have the potential to deliver high quality, standardised care right across the spectrum of health care providers, from primary to quaternary. In addition to our leads, the Quality in Practice Committee has been very involved, specifically where clinical guidelines are being developed.

It was decided in the course of the last year that a specific Clinical Care Programme subcommittee be established. The subcommittee reports to the Quality and Standards Committee and through them, to the Executive and Council. One purpose of the subcommittee is to provide support to our leads. While the leads have liaised through the national lead, Dr David Hanlon, and the medical director, Dr Margaret O'Riordan, the subcommittee provides a forum at which principals and ideas can be developed. The other purpose of the subcommittee is to communicate to the Executive and Council, and especially to the faculties and the membership.

The subcommittee came into being at the Winter Council Meeting and has met on a more or less monthly basis since that time. As with all other committees, there is a significant flow of emails and telephone calls as well between us all. I have met with all the leads and we have involved a number of them in our meetings

(when discussing their specific area) and I believe we have been of some assistance to them. Regarding our second function, we have been working to produce information for members. This involves not just a top level view of the overall Clinical Care Programme, but also a detailed look at the individual programmes.

The clinical care programmes are about delivering best evidenced based care to our patients. Clearly, implementing these programmes is going to challenge us all. The ICGP has at all times pointed out that while these programmes have the potential to substantially improve health outcomes, they can only happen if adequate resources are put in place to make them happen. However, I see this as a long distance run, not a sprint. No one can correct all the problems facing us immediately. Going forward, however, there is now a structured approach to developing solutions, which we all must be involved in.

College Website Report

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

Introduction

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

Other members of the project

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

Project activities

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

Website statistics – overview

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

MONTH	PAGE VIEWS	VISITS	UNIQUE VISITORS
MAY 2012	300,645 (+ 123,571 ePortfolio)	56,971	27,956
JUN 2012	235,614 (+40,101 ePortfolio)	46,966	25,065
JUL 2012	239,366 (+25,563 ePortfolio)	46,080	24,625
AUG 2012	217,850 (+ 21,095 ePortfolio)	44,420	25,358
SEP 2012	252,431 (+70,881 ePortfolio)	50,388	27,096
OCT 2012	220,815 (+ 68,191 ePortfolio)	41,670	23,804

NOV 2012	293,535 (+ 61,274 ePortfolio)	55,873	31,016
DEC 2012	223,331 (+ 39,086 ePortfolio)	45,481	26,129
JAN 2013	423,779 (+ 72,991 ePortfolio)	73,570	38,786
FEB 2013	306,364 (+ 67,131 ePortfolio)	61,150	34,016
MAR 2013	284,424 (+ 71,313 ePortfolio)	56,670	31,827
APR 2013	Not available	Not available	Not available

Current status

There have been a number of developments during the year May 2012 to April 2013.

Website re-launch

In October, the main ICGP website was re-launched on a more stable platform with a complete re-design and exciting new look.

Library project

The library website is currently being redesigned to make it easier to access, search and use. The new design will be more secure and interactive, and will make the catalogue the ICGP's key resource for health information for GPs. The new catalogue will house all ICGP publications, presentations, podcasts, and Forum articles (since 2000).

GP Training Programme intake 2013

In January 2013, this year's GP Training Programme intake took place entirely online. A total of 285 applicants applied for 157 available places using the system. This is the ninth consecutive year that the application process has taken place online. Two years ago, the system was upgraded so that applicants received information on interviews and placements online. Last year, an administrative fee was added to each application and the application form was amended.

MICGP Examination intake 2013

For the sixth year running, the MICGP Examination application process was conducted online via www.icgp.ie. This has proved to be a very efficient process and the feedback from examination candidates has been very positive. The number of candidates who applied to do the MICGP Examination 2013 is 460.

Future plans

In 2013, there will be major changes to the Education area of the website. Work will begin on creating an online learning platform which will provide a showcase ICGP educational portfolio and neatly integrate all its educational material in one easy-to-access location. The current course administration section will also be modified to improve its general usability and reliability for administrators, course tutors and participants.

Work will also be done to improve the website's basic security with the implementation of a more secure login and authentication procedure.

Enhancements are also being made to the ePortfolio for the year 2013/2014 to make registration and renewal easier, and to incorporate a revised annual statement of participation.



Communications & Public Relations Report

Author: Dr John Ball, Chair of Communications Committee

Communications Committee

- Dr John Ball
- Mr Kieran Ryan
- Dr Eamonn Shanahan
- Dr Darach O’Ciardha

Summary

The communications role has two distinct areas – primarily, communications to our members, and communication to the public. Media queries are usually directed through Kirstin Smith in the absence of Angela Byrne since last autumn. The queries are then directed to the most relevant person, e.g. the chair or CEO, etc.

We are asked to respond to certain topics via print, radio and TV media. These are tracked and are available on a monthly basis. There is usually a minimum of 2–3 per week and they often come in clusters.

Aside from that, the ICGP has also issued statements on certain issues that are considered important.

Communications with members falls under the role of this committee and overlaps to a large extent with the Membership Committee.

Activities during the past 12 months

- Attending Executive and Council meetings
- Chairing Communications Committee meetings approximately four times a year. These involve the members of the committee linking up by teleconference and discussing strategy, and also the content of communications. (Minutes are available of all meetings.)
- Representing the College on all national and regional media
- Liaising with the College officers and Executive on the College’s position on issues
- Liaising between journalists and College spokespersons and personnel
- Organising and facilitating media coverage for the AGM and other College meetings and events
- Developing and maintaining a communication process that embraces College staff/ projects, faculties and members
- Organising workshops in media skills for College spokespersons
- Collating monthly College news for Forum
- Facilitating meetings of the editorial board of Forum
- The use of an ezine facility has been employed since March 2012 and this has enhanced members’ communications. There has been no shortage of contributors and pieces for this. It has been introduced by project/committee chairs in rotation, and hopefully will help make the College more personal. Recently, we included a survey in the ezine to gain information on patient needs. This is at an early stage and needs some IT adjustments, if possible

- Responses to the media have been undertaken as described above. The queries mainly involved print media, with some TV and radio interviews also done. Over the past 12 months, a big effort has been made to liaise with the IMO over issues which may be relevant to both or one organisation more than the other. Throughout the responses, the message has remained core to the principles of standards of practice and patient protection
- In the past year, statements were made on proposed alcohol legislation and also government recommendations on the pertussis vaccine (in conjunction with the IMO)

Media relations

Material sent to the media

Press releases and photographs issued to the media:

- ICGP support Government plans for Alcohol Legislation, April 2012
- ICGP AGM, May 2012
- ICGP Summer School, June 2012
- Breast Disease E-learning Launch, June 2012
- Hypertension E-learning Module, June 2012
- ICGP/NAGPT Conference, October 2012
- E-learning Workshop, October 2012
- MICGP Graduation, October 2012
- Announcement of Summer School 2013, October 2012
- ICGP Winter Meeting, November 2012
- National GP Trainers Conference, February 2013
- Medical Council Elections, March 2013

Media queries

2012-2013 was a busy time for media queries. On average, there were about 20-30 media queries a month. Each month, media reports are prepared for College officers. A full report for 2012-2013 is available on request.

Once again, issues surrounding changes to general practice were a topic of interest to the media. A College spokesperson made several high profile appearances on radio and television, and in print.

Media watch

Media monitoring is provided by Zenark. The Irish Press is monitored for media reports relevant to the ICGP. Specialised searches can be performed for topical reports such as studies or reports that are launched by the ICGP programme directors.

Communication with members

Emails to members

The following are the topics emailed to members since May 2012:

TITLE	DATE	RECIPIENTS
AGM May '12 Business Session Agenda	3 May 2012	Members in ROI
Breast Disease in General Practice	10 May 2012	GPs in the Dublin area and programme directors in Dublin area
Vulvo-Vaginal Disease Study Day For General Practitioners	16 May 2012	Cork City Faculty members
Anapen Range of Treatments for Acute Allergic Reactions	23 May 2012	Members in ROI
ICGP Ezine	29 May 2012	Members
ICGP PIP Update	19 Jun 2012	Members in ROI
ICGP Network of Establishing GPs	5 Jul 2012	NEGs members
ICGP Course In Leadership For General Practice 2012 - 2013	11 Jul 2012	Members in ROI
ICGP Network of Establishing GPs	16 Jul 2012	NEGs members
Updated Recommendations from the National Immunisation Advisory Committee	8 Jul 2012	Members in ROI
ICGP Yearbook and Diary 2013	15 Aug 2012	Members in ROI
Cork City Faculty Autumn Meeting	27 Aug 2012	Cork City Faculty members
Cork City ICGP Faculty Autumn	4 Sep 2012	Cork City Faculty members
Reminder to Register for ICGP Courses	7 Sep 2012	Members in ROI
Cork City Faculty Meeting	14 Sep 2012	Cork City Faculty members
NEGs Regional Meetings	17 Sep 2012	NEGs
Dun Laoghaire Faculty Meetings	19 Sep 2012	Dun Laoghaire Faculty members
NEGs Regional Meeting in Dublin – Reminder	26 Sep 2012	NEGs
ICGP Ezine	26 Sep 2012	Members
West Cork Faculty Notice	28 Sep 2012	West Cork Faculty members
Galway Meeting Notice	2 Oct 2012	NEGs
ICGP Memorial Service	8 Oct 2012	Members
NEGs Galway Meeting	10 Oct 2012	NEGs
Meeting in Limerick & Cork	16 Oct 2012	NEGs
CEART PatientWise Self-Management Course	16 Oct 2012	Kilkenny Faculty members
Irish Medical Directory	19 Oct 2012	Members in ROI
NEGs Regional Meetings	19 Oct 2012	NEGs
Galway Faculty Meeting	23 Oct 2012	Galway Faculty members

Outbreak of Pertussis in Ireland	1 Nov 2012	Members in ROI
SunSetters Workshops at the ICGP Winter Meeting	5 Nov 2012	Members in ROI (50 years and over)
GPBuddy.ie – Online Directory	6 Nov 2012	Members in ROI
Winter Meeting 2012	13 Nov 2012	Members and trainees in ROI
Proposed Governance Structures	13 Nov 2013	Kerry Faculty members
Proposed Changes to College Governance Arrangements	14 Nov 2012	Members
Winter Meeting 2012	15 Nov 2012	Members and trainees in ROI
New NEGs Director	22 Nov 2012	Members in ROI
NEGs Meeting	22 Nov 2012	NEGs members
ICGP Winter Meeting 2012 Booked Out	23 Nov 2012	Members in ROI
Transfer of Psychology Services From Primary care	5 Dec 2012	Meath Faculty members
Skibbereen Ambulance Meeting Wednesday	12 Dec 2012	West Cork Faculty
Vaccinating Pregnant Women Against Pertussis	18 Dec 2012	Members in ROI
ICGP Ezine	20 Dec 2012	Members
HPSC Notice – Increased Rate of Influenza-Like Illness	21 Dec 2012	Members in ROI
ICGP GPIT Webinars	3 Jan 2013	Members in ROI
ICGP Palliative Care & Minor Surgery Courses	3 Jan 2013	Members in ROI
Expressions of Interest Sought by the Medical Council – Panel for Review Boards	4 Jan 2013	Members in ROI
Tredaptive (Nicotinic Acid/Laropiprant) and PRAC Recommendation for Suspension – IMB Letter	11 Jan 2013	Members in ROI
Pertussis Vaccination Of Pregnant Women	11 Jan 2013	Members in ROI
Online Registration for Palliative Care Study Day	14 Jan 2013	Members in ROI
Reproductive and Sexual Health Course	17 Jan 2013	Members in ROI
ICGP Cork City Faculty Meeting	28 Jan 2013	Cork City Faculty members
Free GPIT webinar	29 Jan 2013	Members in ROI
Care of the Elderly Course	30 Jan 2013	Members in ROI
ICGP Network of Establishing GPs Spring Meetings	21 Feb 2013	NEGs members
Medical Council Election 2013 – Ballot announcement	26 Feb 2012	Members
ICGP Ezine	13 Mar 2013	Members

Communication activities

Forum

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

Ezine

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

EZINE	OPENING RATE
May 2013	39%
Sep 2013	39%
Dec 2013	34%
Mar 2013	40%

Future plans

The committee has developed some strong and experienced GPs in a network to ensure we have a platform to respond in a rapid fashion when topics are raised. I think, in the future, this can be further developed with more people undertaking the media training days which give people more confidence. We need a very solid relationship with our IMO colleagues from a media perspective as, in the challenging times, we need to have a strong united voice and equal input must be given to this. I feel there may be a role for a professional 'PR' type person to engage with the College to make sure our good image with the public is upheld and developed.

Library and Information Service Report

Authors: Gillian Doran, Librarian, and Patricia Patton, Assistant Librarian

Information needs

Patricia Patton (Trish) handles the vast majority of the queries that are made via the ICGP library catalogue.

The breakdown for all queries to the ICGP library services is as follows:

Table 1 – Queries Received From

QUERIES RECEIVED FROM	NUMBER	PERCENT
GPs	611	59%
ICGP Staff	279	27%
External	142	14%
TOTAL	1032	100%

Table 2 – Queries Received Via

QUERIES RECEIVED VIA	NUMBER	PERCENT
E-mail	422	41%
Phone	213	20%
Online	114	11%
Other*	58	6%
Person	194	19%
Fax	19	2%
Post	12	1%
TOTAL	1032	100%

(* denotes queries received via members of staff or the general info@icgp.ie email)

Note: Online queries have nearly doubled since last year.

Table 3 – Types of Queries

TYPES OF QUERIES	NUMBER	PERCENT
Document Supply	383	37%
General Query Service	430	41%
Literature Searches	205	20%
Training	14	2%
TOTAL	1032	100%

Some examples of literature searches for this period included the following:

- Compassion fatigue
- How GPs kept up to date in the 50s and 60s
- Developmental screening of children
- Stage fright/Performance Anxiety
- The impact of redundancy on patient health
- Behavioural problems in children

This is in addition to requests for guidelines and ICGP publications as well as general queries on referencing, copyright issues and help with surveys/evaluations.

Training

Gillian Doran presented to elearning course participants in both September 2012 and January 2013, highlighting the Information Skills module and also the ICGP online journals.

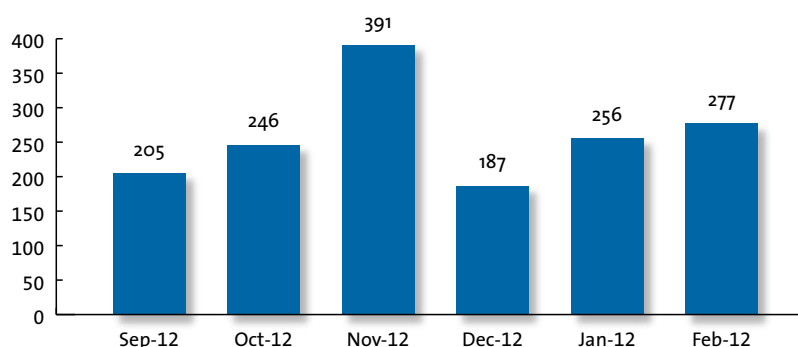
As part of the SCALES course, Gillian provided an information session for course participants.

Trish and Gillian provided two separate information sessions for all ICGP Staff members on 29 May and 3 October 2012. This was to inform staff of the new developments and included a demonstration of both the online Information Skills module and the ICGP A-Z journals portal. Trish also delivered a number of individual one-on-one sessions on request. Trish presented an introduction to the library services to new GP trainers on 7 November 2012, while Gillian presented to GP trainees in February 2013.

Online journals

The A-Z journals portal was launched by Gillian at the ICGP Winter Meeting in November. Both Trish and Gillian utilised a variety of media to raise awareness among members including the following – an article was published in Forum in September 2012, a short article appeared in the ICGP ezine in December 2012, and the A-Z Portal was also highlighted online in both the news sections and the library sections of the ICGP website. Gillian supplied a Powerpoint presentation to Mr Ryan and Dr Mansfield so that they could present at the ICGP Council and the NAGPT conference respectively. Gillian also demonstrated the online journals at a number of workshops throughout the year including the CME Tutors September Workshop, and elearning workshops. Gillian provided a demo to Dr Tony Cox for the Examiner Workshop. Since its launch, usage has remained steady as can be seen in the graph below.

ONLINE JOURNAL USAGE



Top 10 journals

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

Mr Kieran Ryan, ICGP CEO, requested that the process of journal selection and future recommendations, etc. be formalised. Therefore, Gillian devised a procedure for journal selection and future recommendations in conjunction with the ICGP Education Governance Committee which will inform the journal selection process from May 2013 onwards.

Online information skills module

A total of 104 users have completed the module while 175 users have registered. An online evaluation of the module is being conducted in April 2013. The results of this feedback will help us to update the module.

Systematic review

The ICGP library has been involved in an International project, WONCA PECC_WE (Patient Empowerment in Chronic Care – WONCA Europe) in collaboration with Dr Andree Rochfort, Dr Claire Collins and Dr Sinead Beirne with support from Prof Susan Smith of the RCSI. Work package 1 involves a systematic review and a repository of information. Trish and Gillian have provided the information support and carried out all the searches required for the systematic review as well as gathering material for the repository. Trish also held a RefWorks training session for the group.

ICGP publications

Gillian has been providing support for ICGP publications in terms of the literature searching, referencing, formatting and publishing of quick reference guides. Examples include Asthma and the ICGP Position Statement on Alcohol.

Forum articles

Trish and Gillian conduct literature/resource searches every month on the relevant Forum distance learning topics. These appear at the end of the relevant piece in each issue.

We also wrote a series of articles for Forum during 2012. All of our articles are available online by clicking on 'Help sheets' in the Library section of the website.

June 2012 feature: Sorting through a world of information:

Trish Patton and Gillian Doran outline the new ICGP online information skills module designed to help GPs in seeking information.

August 2012 Insight: The rapidly changing role of information:

Gillian Doran on the ever changing role of the ICGP library.

September 2012 Feature: New developments in College library service:

Gillian Doran highlights new developments in the ICGP library.

November 2012 Feature: Online journal access available for members:

Medical e-journals are now available free of charge from the ICGP library.

New look library homepage

Gillian and Trish designed the screens for the new look Library homepage of the ICGP website. It was designed to primarily enable easier searching for members to find ICGP publications and other material.

Trish is currently reviewing ICGP publications/presentations material on our website for the library catalogue and ensuring they are up-to-date and appropriately catalogued, etc.

GP training resources

Following on from discussions that Gillian had last year with Dr Gerry Mansfield, ICGP Director of Training, the ICGP library is now supplying articles of educational interest to GP training via the ICGP A-Z journals portal for their new Educational Resources section on the ICGP website. These articles are updated on the website every month.

Project development group

In discussions with Dr Margaret O’Riordan, ICGP Medical Director, Gillian suggested that the ICGP project directors meet to communicate on common issues/matters of interest. From this idea, the Project Development Group has been established and is chaired by Dr Margaret O’Riordan. The group meets every 4-6 weeks approximately to look at ICGP matters in relation to the various projects and related policies.

ICGP material

Gillian is working with Mr Dermot Folan, ICGP COO, on the issue of disclaimers and copyright for ICGP materials.

Surveys

Gillian has been involved in many surveys in relation to the ICGP throughout the year, including: elearning online course evaluations, the Summer School, study days, etc. A diagnostics survey is being undertaken by Dr Margaret O’Riordan, ICGP Medical Director. Gillian is providing support to this as well as the ICGP Faculty Survey for ICGP Membership Committee.

Retiring GPs (SunSetters)

Gillian is providing support in terms of the organisation of meetings, literature searches, training on the discussion board for GPs who are near/are retiring, etc. Sessions have taken place at the Winter Meeting in Athlone in November 2012 and more workshops are planned for the 2013 AGM in May.

College support

Trish provided support at the summer school held in Kilkenny in June 2012 and the MICGP exam in March 2013.

Networking & external representation

Trish and Gillian attended an EBSCO information day on 15 May. EBSCO are our suppliers for the A-Z journals portal. They also attended a Systematic Review course on 'Advanced Search Techniques' on 25 October 2012.

Trish attended a LENUS User Group meeting on 21 November 2012.

Gillian continues to sit on the Health Sciences Libraries Group Journal Statistics Committee and attends meetings several times a year in relation to journal holdings for the member libraries.

Forum editorial board

In addition to being a member of the Forum editorial board, Gillian is providing administrative support while Angela Byrne is on maternity leave.

Future plans

- **Further development of the Library section of the ICGP website and ICGP library catalogue** www.icgp.ie/library

In conjunction with Ionic, we have been working on updating the ICGP library catalogue with the aim of making it more user-friendly, i.e. easier to navigate and find information

- **Update Information Skills Module**

www.icgp-education.ie/informationkills

This module is now due for updating due to changes in external databases such as PubMed and TRIP, and also the new developments on the homepage of the Library section of the ICGP website and the library catalogue as mentioned above



Research Centre Report

Author: Dr Claire Collins, Director of Research

Other members of the team

ICGP Research Committee – Chair: Professor Tom Fahey

Summary of programme

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

Background to the programme

The ICGP's 'Strategic Plan 2008-2013' highlights the importance of research to its mandate. Of particular relevance to the national action plan for health research is the strategic action to "contribute to the evidence base that underpins quality general practice" specified in the 'Strategic Plan 2008-2013' (under the goal of 'A healthier community through high quality general practice' in the area of 'Quality general practice'). The associated action plan outlines the six related activities with the focus in the past year placed on the following:

- Take a leadership role in identifying and undertaking research related to general practice
- Develop relationships with the research sector
- Support the development of research skills, capacity and infrastructure in general practices

*Programme activities/tasks during the past 12 months**

- Educational needs assessment for a suicide awareness course
- Data collection for the international QUALICOPC project
- Preliminary research for the development and completion of an elearning module on chronic care self-management course for trainees
- Commencement of the creation of a repository of information around chronic care patient self-management and a systematic review as part of the WONCA Anniversary fund project
- Flu vaccination effectiveness study 2012/13 with HPSC
- Audit of community acquired pneumonia management
- Survey of GP motivation for external education
- Survey of CME participants on the impact of small group learning on patient care
- Development work related to the establishment of the Irish Primary Care Research Network
- Contribution to the evaluation of the GP Exercise Referral Programme
- Contribution to the project on palliative care and mental illness
- Coordination of data collection for an external agency on medical fitness to drive
- Coordination of data collection on ICGP surveys – Access to Diagnostics and STIs
- Oversight of the Heartwatch programme

- Ten workshops were held on audit/research
 - Five grant applications were prepared and submitted (one was withdrawn and four were successful)
 - Other ICGP programmes and directors were supported via advice and collaboration (GP leads on chronic care programmes, Women's Health, Substance Misuse, Mental Health, Health in Practice, GP Training and Education, Quality in Practice Officer)
 - Fast-track ethical review process of trainee projects
 - Participation in the full review activities of the Research Ethics Committee in addition to additional pre-submission advice to applicants
 - Oversight and administration of the Research and Education Foundation grant scheme
 - Coordination of GP applications for external grants
 - The third ICGP research and audit conference, sponsored by MEDISEC, was held in June 2012 at the Lyrath Hotel, Kilkenny. As part of this, three research and audit related workshops were held for delegates
 - Creation of new audit examples for the Professional Competence Scheme and chairing of the Professional Competence Scheme audit sub-committee
 - Participation at the trainee and trainer conferences
 - Submission of articles for publication
 - Presentation of research findings at conferences
 - Co-supervision of one MSc
 - Responding to queries (n=120) related to research, ethics, grants and audit
 - Review of articles for BMC Family Practice Journal
 - Review of submissions for the QIP awards

Publications

Carlos Brotons, Mateja Bulc, Mario R Sammut, Mary Sheehan, Carlos Manuel da Silva Martins, Cecilia Bjorkelund, Antonius J M Drenthen, Didier Duhot, Suleyman Gorpelioglu, Eva Jurgova, Sirkka Keinanen-Kiukkanniemi, Peter Kotanyi, Valia Markou, Irene Morala, Achim Mortsiefer, Leo Pas, Ingrid Pichler, Donatella Sghedoni, Revaz Tataradze, Eleftherios Thireos, Leonas Valius, Jasna Vuchak, Claire Collins, Esther Cornelis, Ramon Ciurana, Pilar Kloppe, Artur Mierzecki, Kakha Nadaraia and Maciek Godycki-Cwirko. Attitudes toward preventive services and lifestyle: the views of primary care patients in Europe. The EUROPREVIEW patient study. *Family Practice* 2012; 29:i168–i176 doi:10.1093/fampra/cm1102.

Collins C, Richardson J, Finnegan A. Incentives and Motivation of Irish GPs in Respect of External Continuing Medical Education. *NIHS Bulletin* June 2012; 6(3): pp42.

Collins, C. and Janssens, K. 2012. Creating a general (family) practice epidemiological database in Ireland: Data quality issue management. *ACM J. Data Inform. Quality* 4, 1, Article 2 (October 2012). DOI = 10.1145/2378016.2378018 <http://doi.acm.org/10.1145/2378016.2378018>.

McSharry P, Finegan P and Collins C. Primary Care Educational Needs Assessment on Suicide and Deliberate Self Harm. *NIHS Research Bulletin* December 2012.

Catherine B. Hayes, Claire Collins, Helen O'Carroll, Emma Wyse, Miriam Gunning, Michael Geary, Cecily C. Kelleher. Effectiveness of Motivational Interviewing in Influencing Smoking Cessation in Pregnant and Postpartum Disadvantaged Women

Accepted for publication *Nicotine and Tobacco* 2012 doi: 10.1093/ntr/nts225.

Marsden P, Gallagher J, Ledwidge M, Weakliam D, Collins C, O’Riordan M, White B, McDonald K. General Practitioners perception of heart failure services in Ireland highlights ready access to diagnostics and opinion as major deficiency. Accepted for publication by *Heart Failure*, 2012.

O’Brien J, Collins C, O’Neill D. Elder Abuse and Neglect: A survey of Irish general practitioners. Accepted for publication by the *Journal of Elder Abuse and Neglect*, 2012.

Representations

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

National group regarding the creation of a common ethics form for non-clinical trials and the IT sub-committee, who are investigating and advancing an electronic online process for such ethics applications.

- National representative to the European General Practice Research Network and member of its Research Strategy Committee, and is the EJGP English language editor for the EGPRN abstracts
- Represent the ICGP in discussions with HSE/DOH regarding the proposed ScriptSwitch system and pilot
- Advisory group of a project to evaluate a telemedicine project
- National Disability Authority Guideline Development Advisory Group

Programme milestones/deliverables/outputs

- Seven publications and three Forum articles
- ICGP Research and Audit Conference
- Support of members in terms of professional competence audit requirements
- Four research grants obtained
- International collaboration leading to involvement in EU projects
- Establishment of the IPCRN
- Four projects commenced and completed; four others underway
- Support of training schemes and trainees in terms of ethical guidance and review

Future plans

The action plan for 2013 focuses on developing the IPCRN and support of the development of research skills, capacity and infrastructure in general practice.

The 2013 conference will take place on Saturday 22 June at the Lyrath Hotel, Kilkenny. The programme has been finalised and is available on www.icgp.ie.

Completion of existing projects.

Funding source(s)

ICGP, HSE, Pfizer, EU Commission via NIVEL.

Research Ethics Committee Report

Author: Prof Colin P Bradley, Chair

Committee members

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

Summary of the committee’s roles and activities

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

Activities during the past 12 months

We had four meetings in 2012 during which 41 applications were considered. In addition, we processed 13 trainee applications using the process introduced last year in which applications were reviewed by two members prior to a decision to either approve the project, approve subject to amendments (the most common outcome) or refer to the full committee. We had no clinical trials to process (within the terms of the Clinical Trials Act).

Future plans

The committee plans to continue to offer our ethical review and approval process for members, trainees and others undertaking research in general practice in Ireland. We are currently investigating the scope for conducting ethical review using online technology (GoToMeeting).

Administrative Resource: Ms Janet Stafford



Post Graduate Training Committee Report

Author: Dr Matt Lynch, Chair

Introduction

The Irish College of General Practitioners (ICGP) is the body appointed by and accountable to the Irish Medical Council to oversee the training of GPs in Ireland.

The Post Graduate Training Committee (PGTC), on behalf of the Council, is the standing committee of the ICGP charged with carrying out this responsibility.

It accredits individual GP specialist training schemes, considers and recommends for membership to councils for its approval those individual doctors who are deemed eligible for election as members of the College (MICGP), and promotes development in training and assessment.

Sub-committees of the PGTC deal with the examination for membership, re-accreditation of specialist training schemes, certification and eligibility matters, and curriculum matters.

The committee has representation from all stakeholders and meets at least thrice yearly.

The decisions from these meetings are published as a newsletter, distributed widely to the training community.

Membership of the PGTC

- Dr Matt Lynch, Chair
- Dr Ciarán Bohane (NATGP Representative)
- Dr Marie Carmody Morris (ICGP Council Member)
- Dr Tony Cox (Chairman, MICGP Examination Sub-Committee)
- Dr Rita Doyle (Chair, Interim National Steering Committee)
- Mr Dermot Folan (Chief Operating Officer, ICGP)
- Dr Thomas Foley (ICGP Council Member)
- Dr Michael Griffin (Accreditation Sub-Committee)
- Dr Velma Harkins (NATIGP Representative)
- Dr David Hurley (ICGP Council Member)
- Dr Zac Johnston (NATGP Representative)
- Dr Ursula Keegan (Chair, Curriculum Development Committee)
- Dr Gerard Mansfield (National Director Specialist Training),
- Dr Declan Matthews (Chair, Accreditation Sub-Committee)
- Dr Donal McCafferty (ICGP Council Member)
- Dr Genny McGuire (Chair, NAPD)
- Dr Ciara McMeel (Chair, Certification Sub-Committee)
- Prof Fergus O'Kelly (ICGP Council Member)
- Dr Margaret O'Riordan (Medical Director, ICGP)
- Dr Brendan O'Shea (ICGP Council Member/EURACT)
- Dr Molly Owen (MICGP Examination Sub-Committee)
- Mr Kieran Ryan (Chief Executive Officer, ICGP)

Activities

- The Medical Council conducted the first process of re-accreditation of the ICGP as the body responsible for post graduate GP training in Ireland. This is a hugely important but relatively new process for the ICGP, which is now a statutory requirement. An enormous amount of work by Kieran Ryan, Gerry Mansfield, Margaret O' Riordan and Martina McDonnell, among others, went into the documentation and presentation to the Medical Council, which was by oral hearing. We await the final verdict, but I am confident that the excellent standard of the work presented and the quality of the responses to the questions from the Council will be favourable. I am very grateful to all concerned for their contributions
- As part of the above process, an Interim National Steering Committee was established and five meetings were held in 2012
- As part of the process of re-accreditation, much work was required from the stakeholders involved. I would like to pay tribute to the individual schemes for the timely and thoughtful way they responded to the requests from the PGTC and the Interim National Steering Committee for information and assistance
- The issues which were discussed, such as standardised applications to GP training, have been extremely worthwhile and progress is evident in all areas discussed
- Training scheme re-accreditation visits were undertaken at the TCD, Ballinasloe and North East GP training schemes
- Continued progress was made in relation to the alternative route to MICGP. This is for those GP colleagues, already well established in practice, who have not had an opportunity to become members. Applications are in process
- Readers may recall that in my previous report of 2012, I stated that much work had been done in preparation for the transfer of responsibility for training from the HSE to the ICGP. That work is ongoing, and the transfer has not been completed yet
- A 'fast-track' GP training process for those outside formal GP training schemes has been discussed. The College is eager to explore this avenue, which could potentially be most beneficial to doctors and patients. However, resource issues appear to be an obstacle at the present time

Achievements/outcomes

- A total of 132 new members were elected to membership: 112 by the MICGP examination, and 20 by equivalent qualifications; 12 of these held a UK qualification, three from Poland, one from Hungary, two from Australia, one from the Czech Republic and one from Belgium
- The MICGP continues to evolve in keeping with the evolution in medical assessment. Applied knowledge and single best answer modules have proven successful. The Examination Sub-Committee plans to introduce a clinical component
- Information days were held around the country regarding applications for GP training schemes. The turnout was variable, possibly reflecting the difficulty hospital colleagues have in getting time off

The future

The process of review required for the Medical Council re-accreditation has proved to be a catalyst for change in many of the processes which impact on all those involved in GP training. Issues, such as the need to retain the local characteristics of each scheme while recognising the value of a cohesive national approach, will remain extremely relevant in the coming years.

As in previous years, I have been enormously impressed and proud of the work by individual GPs and schemes to ensure the education of our trainee colleagues in Ireland remains excellent. I would like to thank each on behalf of the committee for the commitment they show on a daily basis.

The GP is central to the provision of health care to every citizen of this country. In the future, the role of the GP is likely to increase, as we are the only ones with a generalist, holistic approach to the patient, and their family, and are ideally placed to provide ongoing personal care for both acute and chronic conditions. One can therefore argue that training the next generation of GPs is one of the most important of all College activities. Thus, it is vital, in my view that the resources are provided by the Government to allow this to flourish.

Conclusion

I wish to thank all the members of the committee and sub-committees for their tireless and dedicated work, especially when there are so many other demands on their time.

No committee with such a wide range of responsibility could function without support from the ICGP staff. I have been particularly fortunate to have Martina McDonnell as the administrator of this committee – administrator is really too narrow a word to describe all the work done, and I, on behalf of the PGTC, am very grateful.

I would also like to thank Dermot Folan and Kieran Ryan, who have again supported the work of the committee with wisdom and energy. Thanks to Gerry Mansfield who has made a very significant contribution to the maintenance of high quality GP training.

My term as chair is now concluding. I would like to thank all involved for their co-operation and commitment. It has been an extraordinary privilege to be involved with the workings of the committee, and I am greatly reassured that between trainers, programme directing teams and current (and future) trainees, GP training in Ireland is in extremely safe, enthusiastic and reliable hands.



Specialist Training in General Practice Report

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

Appointments, activities & events

- **Assessment Development Officer**

The College has appointed Dr Darach O'Ciardha, Assessment Development Officer, to progress the task of optimising the assessment process across the 14 training schemes, incorporating the development of a standardised e-log book. The individual aspects within the schemes will be recognised and reflected in the assessment process as appropriate. Dr O'Ciardha is currently reviewing the speciality logbooks used on all schemes. This work is under the coordination of the national director

- **Curriculum Development Fellow**

The College has recently appointed Dr Niamh O'Carroll as curriculum development officer. Dr O'Carroll will work closely with the assessment development officer. This work is also under the coordination of the national director

- **GP recruitment 2013**

- Online application for GP recruitment 2013 closed on 11 January with 285 applications for 157 places across 14 programmes
- The College held three information sessions on the application process in Dublin on 5 January, Mitchelstown on 8 January, and Ballinasloe on 9 January
- The agreed national short listing criteria were applied on all 14 programmes
- The College has commenced a process of collating short listing results. This will need to be reviewed by the NAPD together with feedback for 2014. There may be a need for clarification on person specification regarding trainees currently on training programmes
- Issues arising this year related to the variance between the Medical Council and HSE (employment) criteria on issues of registration eligibility and IELTS requirement

- **ICGP trainee grievance procedures on educational issues**

The first ICGP GP Trainee Grievance Procedures were adopted by the Interim National Steering Committee and at PGTC on 4 December and are effective from 1 January 2013. This is a substantial step towards meeting the Medical Council Standards for Postgraduate Training Bodies. The central position of the trainee throughout the standards is appropriate and a positive stimulus for review and optimisation of exiting processes. In this instance, a new process was developed with collaboration from all involved in GP training

- **Medical Council accreditation visit – 5 February 2013**

This was a very vigorous process. Thanks to all the training schemes, trainees, trainers, committees and individuals who contributed to the submission and attended on the day. This reflected in a very comprehensive submission to the Council. A draft report for factual correction is expected from the Council in April. This will then go back to the Council for adoption and to be signed by the Minister for Health before a final report is issued. The College will then be invited to respond to the report

- **National GP Trainer Conference**

The National GP Trainer Conference was held on 28 February–1 March at the Lyrath Hotel with 137 in attendance. This continues to be a flagship educational event in the ICGP GP training calendar. The educational enthusiasm among delegates for this event is impressive and key ICGP project directors were present – Dr Claire Collins

(research), Mr Nick Fenlon (education), Mr Pearse Finnegan (mental health).

Dr Deirdre Lundy and Dr Geraldine Holland from the LARC directing team facilitated a popular and well received session. Our CEO, Mr Kieran Ryan, was in attendance for all of this conference, as he was at the national trainee conference in October

- **The National GP Trainee Conference:**

This was held in October 2012 with over 280 in attendance. This was a record breaking number and reflects the great energy and positivity among the next generation of our College members for their career present and future. Feedback was very positive. Dr Mark Pollock was the inspirational keynote speaker.

- **'New Trainers' workshop:**

A 'New Trainers' workshop was held at the ICGP on 7 November with 36 in attendance. Due to new trainer recruitment obstacles, fragmentation and resourcing uncertainty (even to meet the basic needs for the coming year), some new trainers are only being appointed presently for the training year commencing July '13. This requires a second 'New Trainers' workshop' to be organised and delivered in the coming weeks. This is coordinated by the national director

- **Interim National Steering Committee:**

This new dynamic collaborative educational governance structure arose to meet the Medical Council Standards for Postgraduate Training Bodies. The terms of reference are outlined in the ICGP submission to the Medical Council and on the GP Training section of the ICGP website. Five highly productive meetings were held in 2012. As this was developed as an interim structure, it will be reviewed in March 2013. Some of the notable features are:

- Establishment of the Trainee Representative Network with two reprint actives from each of the 14 schemes, with those being the representatives on the local steering committee. All 28 trainee representatives are circulated with information by the ICGP GP training unit. Feedback is similarly collated centrally. Three trainee representatives also attend each meeting
- Establishment of the Trainer Representative Network in the same format as the trainees above, bringing 28 GP trainers into the governance structure
- Establishment of the GP Steering Committee Network and Clarification of Role. Following a review of all ICGP representatives on the 14 local steering committees of GP training schemes, a survey of those representatives needs was carried out. This led to a formal description of their role and a clear information pathway with the GP Training unit to optimise their input to GP training locally and nationally

- **Forum of Postgraduate Training Bodies:**

Continued liaison with the Forum for Postgraduate Training by our CEO and the national director of training, with the latter also attending the Education Sub-Committee

- **Ongoing support and resource** for GP training schemes including administration, directors, GP trainers, trainees and applicants to training
- **Liaison with the Medical Council** on issues pertaining to GP training including trainee specialist registration
- **Recruitment** process for the GP Academic Fellowship 2012
- **Development of material** for the ICGP website
- **Out of hours** – The national director led a comprehensive discussion process on the essential learning to be gained by those in GP training through out of hours experiences. This was collated and an additional educational guideline was recognised by the Post Graduate Training Committee (PGTC)

Key tasks for 2013

The 'Next Steps' document outlines the vision for the short and medium term developments in GP training

- Finalisation and publication of Trainer and Programme Directing Team Grievance Procedures
- Appointment of extern to the Accreditation Committee
- Mapping Medical Council Standards for Postgraduate Training Bodies to Criteria Document. This is best commenced following the final report of the Medical Council's accreditation team



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

The Irish College of General Practitioners, 4/5 Lincoln Place, Dublin 2
Tel: 01-676 3705, Fax: 01-676 5850, Email: info@icgp.ie, Web: www.icgp.ie