

Irish College of General Practitioners



Annual Report 2016 (Jan – Dec)



The Irish College of General Practitioners

About the Irish College of General Practitioners

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

College Activities

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

Contact Us

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

This report was produced by Laura Smyth and Dermot Folan.

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Hands-on support throughout your career in general practice



Approx. **186**
graduates p/a

GP TRAINING – SPECIALIST REGISTER GP

- | | |
|----------------------------------|---|
| Recruitment | Supporting trainees in practice |
| Accredited GP training programme | Assessment: MICGP |
| General practice curriculum | Entry on to the Specialist Division of the Register |
| Online resources/support | |



222+ GPs

participate in committees, working groups and College activity

BY MEMBERS FOR MEMBERS

4,269
members



- Online subscription
- Differentiated fee categories

MEMBERSHIP

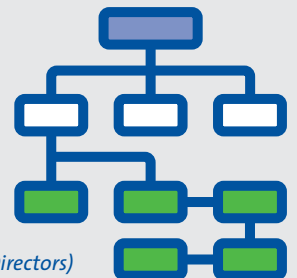
- 12 committees
- International representation: WONCA, EGPRN, EURACT, EQuIP, UEMO
- 50+ GPs represent general practice on external bodies

PRACTICE SUPPORT

- | | |
|---------------------|---------------------------|
| NEGs Programme | GP Information Technology |
| Doctors' Health | Classifieds |
| Quality & standards | GP public directory |
| Practice management | 30+ discussion boards |

COLLEGE STRUCTURE - GOVERNANCE

- FACULTY: 36** Faculties (223 meetings p/a. Faculty Liaison Officer – Supporting faculty network)
- COUNCIL: 69** Council Members (faculty representation)
- BOARD: 14** Board Directors (12 GPs + two external Board Directors)



CONTINUING PROFESSIONAL DEVELOPMENT & EDUCATION

>30 Elearning modules
>12 Courses
>4 Conferences

- Mental Health, Women's Health, Substance Misuse programmes
- CME Small Group Network
- Professional Competence Scheme:

- CPD recognition for external educational activity
- Practice Audit toolkit and samples
- Events calendar



RESEARCH

- Events/updates
- Grants & bursaries
- Publications
- Ethics approval
- Advice & resources
- IPCRN
- Heartwatch



PUBLICATIONS & INFORMATION

- Information and Library Services
- Publications including:
 - Online GP journals
 - Clinical and Non-Clinical Guidelines
 - Quick Reference Guides
- Forum journal
- College e-zine
- Newsletters
- Public health alerts



COMMUNICATIONS

- | | |
|-----------------------------|-------------------------|
| Representation and advocacy | News and press activity |
| Lobbying | Twitter & Facebook |
| Media engagement | Photo galleries |



For more information on benefits of ICGP membership, log on to www.icgp.ie

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Acting Chief Executive Officer's Report

AUTHOR | MR DERMOT FOLAN



2016 was another challenging year for the organisation and for College members.

Despite the economic recovery overall, general practice remains underfunded. Increased demand, together with underfunding, continues to make patient care challenging for GPs. The non-restoration of the FEMPI cuts and the slow progress on a new GMS contract continue to hamper the development of general practice. The situation concerning access to diagnostics and the continuing difficulties on hospital waiting lists mean poor outcomes for patients.

The College continues to make a significant contribution on many fronts and there was an impressive level of activity in 2016, including:

The production of 7 clinical quick reference guides, 26 reports, submissions, and policy documents were published during the year. The College hosted 6 major conferences and events (national and international), 44 educational courses – including online modules – and 4 ICT webinars.

There is a significant direct input by members to the College and in the order of 222 members participated in /contributed to College committees / working groups and / or held other roles within the organisation.

GP TRAINING TRANSFER

The formal process of negotiating with the HSE on the transfer of training responsibilities moved on a pace and this culminated mid-year in the signing of the heads of agreement. However, there followed a doldrum period where this particular boat was becalmed. Fortunately the trade winds started to blow again in the early autumn and the change management process began in earnest during the latter part of the year.

A lot of work and effort has been expended by the Board, the PGTC and relevant sub committees in devising a new structure for the delivery of GP training that will ensure that quality Irish GP training is maintained, and even enhanced.

CHANGES IN PERSONNEL

In 2016, there were a number of personnel changes.

Mr Kieran Ryan resigned in June and it is hoped that his continued career path bodes well for him.

Ms Jantze Cotter left the College in October and the College's loss was indeed the Medical Council's gain and we watch with interest her continuing role in the professional competence arena.

As readers will be aware, the post vacated by Dr Margaret O' Riordan was advertised and Dr Brendan O'Shea, who took up post in August, has hit the ground running. His enthusiasm and energy are to be envied.

In September 2016, Dr Karena Hanley took up her post as National Director of GP Training from the previous Director Dr Gerry Mansfield. Dr Mansfield left a very impressive legacy in GP training and we are fortunate to have a person of Karena's calibre to take on his mantle at this key stage of the change process on the transfer of responsibility from the HSE to the ICGP.

I was honoured to be approached by the Board to take on the Acting CEO role. I hope that my contribution has been to confirm stability for the organisation and ensure that in a year of considerable change at all levels, we continued to meet member's needs, successfully represent general practice in the public domain and also ensure that within the organisation that staff were not impacted negatively by all the changes that occurred during a very busy year.

Board matters are covered elsewhere in this report but I would like to pay tribute to the new Board, formed in June and in particular to Dr Sarah Maguire and Dr Velma Harkins who were elected as new Board members in June and were fully engaged with their new responsibilities without demur.

FINANCIAL PERFORMANCE

The financial performance of the organisation for the year is detailed in the Honorary Treasurer's Report. There has been on-going improvement in our financial control and reporting systems, building on what was originally initiated by OCMC and now further enhanced under the expert guidance of Mr John McCormack, our Financial Controller. It is an on-going process in order to keep up with best practice and the increasingly exacting and complex regulatory environment.

One is cautious but optimistic that we have addressed the reported negative financial performance of 2015 as demonstrated in the bottom line for the 2016 financial year.

CONCLUSION

From a management perspective we continue to be guided by the College Strategy 2016-2020 which provides the core mission and values of the College and its members, and outlines key areas in education, advocacy and research which the college will pursue in achieving our strategic goals. This is also the guiding reference point for the Board. Web: www.icgp.ie/StatementOfStrategy.

The management team of the ICGP and all the College staff have, as we have seen time and time again, risen to the challenge posed by both internal and external change, and ensure that we continue to remain focused on supporting College members.

Finally, I would like to highlight the work of the CEO Selection Committee, who were tasked with the job of recruiting and selecting our new CEO. This arduous process was undertaken during the latter half of the year and involved consultation with all stakeholders, and facilitated by PWC as external advisors. The appointment of Mr. Fintan Foy was formally made in December. We are fortunate to have someone of Fintan's stature to lead the College going forward into the future.

President's Report

AUTHOR | DR GERRY CUMMINS



I was installed as President of the ICGP at the AGM on Saturday 7 May 2016 in Galway. This was a great honour for me personally and also an honour for the faculties of the North East who had nominated me for the position of President of the ICGP. I was certainly looking forward to the challenges and the opportunities that the presidency would afford. It was a time of change in the ICGP at that time and there were a lot of concerns regarding the transfer of GP training to the ICGP. During the next few months, Dr Brendan O'Shea took up the position of Director of the Postgraduate Resource Centre and Dr Karena Hanley was appointed as National Director of GP Training. Also, during the early part of my presidency, our CEO, Mr Kieran Ryan, resigned

as he was taking up another position with the Royal College of Surgeons. This was a significant challenge for the ICGP and the Board as we had to recruit a new CEO. The Board asked Mr Dermot Folan to fill the role of CEO in the interim period and Dermot agreed to take up the post as acting CEO on 2 August 2016. Following a procurement process involving PWC, the College was in a position to recruit a new CEO in November 2016.

We had two significant meetings organised by the ICGP during the year. The Summer School was run in Tullow, Co. Carlow and this was a great success. We also had a successful Winter Meeting in Athlone, and we thank the NEG's Programme and Dr Laura Noonan, NEG's Programme Director, for organising this very good conference.

During the year I had been liaising with Dr Mary Davin-Power who is Faculty Liaising Officer. I have visited a number of the faculties around the country and I wish to thank them for their support and hospitality. Quite a number of faculties are becoming more active than they were in the past and this is a good development for the ICGP. I also attended a number of GP training programmes and was impressed by their enthusiasm and level of activity.

In 2016, the ICGP was involved in hosting a major European conference – the EURACT Conference which was held in Trinity College, Dublin on 9-10 September. This was a very successful event and we thank the TCD GP Training Scheme for their involvement in this conference. We also thank Dr Darach O'Ciardha of the TCD GP Training Scheme and Mr Nick Fenlon, Director of Education, ICGP, and the ICGP for their involvement.

The annual memorial service for the deceased members of the ICGP was held in Westland Row Church in Dublin. This was a moving and memorable occasion with good attendance. We also had the graduation ceremony on 5 November at the Royal Hospital in Kilmainham. Again, this was a great success and it was important to see the large numbers of new recipients of the MICGP and hopefully many of them will become GPs in Ireland.

Another major conference in 2016 which was very well organised and well attended was the Network of GP Trainees Conference was held in Galway in October 2016.

The whole future of our healthcare system has also been a priority for the ICGP during this year and previous years. We had a close working relationship with both the IMO and the NAGP and this will be an ongoing process. It is hoped that the new GMS contract will be negotiated this year. We also had a successful meeting with the Minister for Health, Mr Simon Harris, and we had very good representation at the Oireachtas Committee for Health where presentations were done by Dr Brendan O'Shea and Dr Karena Hanley. The issue of the transfer of GP training to the ICGP is an ongoing process and hopefully will be concluded before the end of this year.

We were delighted to confirm the appointment of Mr. Fintan Foy as our new CEO and he officially took up office on the 20th February 2017. We were very fortunate to recruit somebody of such great experience and we wish Fintan every success in his new job as CEO of ICGP.

I would like to thank the members of the Board and also the members of the ICGP Council for all their help and support and hard work during the past year. I would also like to give special thanks to Mr Dermot Folan as acting CEO for a significant part of my presidency, who did a great job. We wish him all the best as he returns to his former role of Chief Operating Officer. I would like to thank the College staff who have been very helpful to me during the year, particularly, Ms Caroline Murtagh, Ms Orla Sherlock and Ms Sylvia Browne. Also, thanks to Mr Nick Fenlon, Director of Education, ICGP.

Finally, I would like to thank the chair of the ICGP, Dr John Gillman, for all his support during the year and also a special thanks to Dr Brendan O'Shea and Dr Karena Hanley who have settled into their respective positions and are doing very good work on our behalf. I certainly enjoyed my year as President of the ICGP and I wish to extend my best wishes to the incoming President, Dr Richard Brennan, who will take over in May 2017 at the AGM in Wexford. Again, thanks to all College staff and all our members for their support during the year.

Chair's Report

AUTHOR | DR JOHN GILLMAN



Being a GP is a privilege that we as college members have earned the hard way, through many years of study, dedication and perseverance, and through the support of our families, our communities, our teachers and our peers. Of all the medical specialities, general practice is rooted in the community. It is the cornerstone of the health system, central to the fabric of local communities and it is a lifelong multigenerational relationship to the families that we care for, to the families we advocate for and whose life journey we have the privilege in sharing.

However, while 2016 was a year of national celebration, a centenary year of the principals of Ireland's revolutionary parents, sadly it was a year characterised by crisis in our emergency departments' ever worsening statistics of trolley counts. Each statistic concealing a very personal story, ever increasing waiting list times where an urgent appointment can be measured in terms of seven years or perhaps more yet, these are the public tip of the iceberg. We as family doctors see the reality of two tier secondary care, the effects of a lack of access to diagnostics and the failure created by many years of austerity cuts combined with historic underfunding of general practice. It is not surprising therefore why it is increasingly difficult to retain our new and our established graduates. We should not and cannot accept that we are graduating GPs for immediate emigration. It is no wonder that capacity in terms of manpower, infrastructure and premises has become overwhelmed.

2016 saw a general election and, following a prolonged gestation, a new style of politics and with it a minority government. Our new health minister, Mr Simon Harris, has a vision for a world class health system. We have positively engaged with Minister Harris. However to achieve this, health shall require ring-fenced new funding and there must be a seismic shift towards a general practice led health system. FEMPI must be unwound and general practice must be funded in line with OECD norms and must command 10% of funding in contrast to the paltry circa 3%. Chronic disease has the potential to financially cripple our economy not to mention the untold human misery it causes. General practice must lead chronic disease management and this must be properly resourced.

The current GP contract negotiations are central to health service reform but also the survival of the health system. The ICGP is positively engaged with and supports our trade union colleagues in this process. In 2016, the College, continuing to represent members in the areas of College expertise, presented the case for general practice to Oireachtas Health Committee and the Future of Healthcare Committee. Whether action will result as opposed to political soundbite is dependent on the desire to drive a reform agenda.

Throughout 2016, the College maintained its core services to its members as is more eloquently and accurately described within our annual report.

The College remains active at local, national and international level as demonstrated through CME, Faculty, national and international meetings.

The transfer of GP training is an ongoing process. Negotiations have been vigorous to say the least and while head of agreements have been agreed, the details of the SLA remain to be resolved. GP training and its ethos and standards must be preserved and built upon. I would like to acknowledge the hard work and legacy of our entire programme directing staff, our GP trainers and our trainees, who together throughout the length and breadth of the country have created training schemes which we can rightly hold with pride. As a College, we continue to listen and we look forward to a warm constructive collegial dialogue moving this exciting process forward.

In 2016, College staff worked hard to deliver quality services to our membership. The financial deficit of 2015 has been reversed and the College is on a sounder financial footing. However, we must remain prudent and seek novel income streams to enhance the services we deliver for our members. I wish to thank our management team, staff and Board members for all their efforts during the year.

[Beyond 2020 – Statement of Strategy 2016-2021](#) was launched last year. This year was about implementation and delivery on the following reports, for example, and this remains a dynamic process.

- ICGP vision for the future of Irish rural general practice.
- Irish general practice – working with deprivation.
- The future of Irish general practice – ICGP member's survey.
- Bridging the gap – how GP trainees and recent graduates identify themselves as the future Irish general practice workforce.

Our guiding principle is to identify areas of relevance to our members, determine the evidence base and then do something about it. The College is its membership and without the support, voice and hard work of our members we can achieve little.

So what changed in 2016? At Board level, we critically examined how we function and how we can improve.

We shall examine how we can enhance the role of Council and support the greater participation of all Council members and in particular faculty representatives. The input from faculties is hugely important and we encourage new talent to participate in College.

Active engagement with members through the diverse strands of the College – Faculty, NEG's, the Retiring Doctors Group, conferences, study days, scheme visits, the graduation ceremony, the remembrance service and also in parallel via social media. Every opportunity is taken to work and engage with colleagues across the spectrum of our membership.

2016 saw a number of personnel changes in the College. This is a natural process within any organisation and is an important aspect of revitalisation and rejuvenation.

I would like to thank Kieran Ryan, Margaret O' Riordan, Gerry Mansfield, Tony Cox, Karena Hanley and Jantze Cotter for their work on our behalf in their respective roles. Brendan O'Shea took on the PRC mantle of Margaret O'Riordan and Karena Hanley took up her post as National Director of GP training. I wish Karena and Brendan well on their new appointments and I particularly welcome our new Board members Sarah Maguire, Velma Harkins and Richard Brennan who have contributed greatly.

In particular I would like to thank Mary Sheehan who completed her term as Chair in May. She led the College with considered wisdom, incredible devotion and a prodigious work rate. It has been my honour to serve her as Chair of College.

May I thank our College members, the Council, the Board, the management and staff for their continued support.

Dermot Folan as Acting CEO and COO not alone provided continuity but has served as a driving force within the College. No inarticulate words of mine can accurately or adequately express my appreciation and respect.

I wish Fintan Foy every success as our new CEO. He was the well-deserved victor of a highly competitive recruitment process. The quantity and quality of candidates was exceptional and Fintan has hit the ground running.

On a personal note, may I thank my colleagues Jim Ryan and Brian O'Dea for their support for me particularly when something comes up at very short notice and for their excellent counsel.

May I thank my wife Mai my children John, Marion, Natalie, Philomena and Tom, and my extended family for their unconditional support.

Honorary Treasurer's Report

AUTHOR | DR JOSEPH MARTIN, HONORARY TREASURER



Your College has been making great progress in managing its financial affairs in the last year, which has been due to a lot of time and effort being put into ensuring tight controls over spending, maximising income and ensuring that the core areas of education, training, the MICGP Exam and research were prioritised. We have been very fortunate to have a very active Audit Committee under one of our Board's lay members, Ms Mary Donovan, who in conjunction with the senior management team (in particular Dermot Folan, our Chief Operations Officer who also took on the reigns of Acting Chief Executive Officer during the latter half of the year) and our Financial Controller, John McCormack, have put in place a more effective budgetary regime

which has been implemented on a departmental basis, ensuring that with month to month monitoring, fluctuations are highlighted in a timely manner, and appropriate actions taken.

For many years, we had OCMC acting as our auditors, and we have had an excellent relationship with this highly respected firm, but new corporate governance guidelines suggest that auditors should be changed every 3-5 years to ensure "fresh eyes" assess the accounts, so the Board chose Mazars after a detailed tendering and assessment process to be the new auditors, and we were given a clean bill of health after a very detailed assessment of the 2016 College accounts and its processes for dealing with its income and expenditure.

I am very pleased to report to you that the College made a surplus of over €800,000 in 2016, though approximately half of this amount was due to once off events, as in 2015, some of the payments for the Competence Assurance scheme were not paid until early 2016 (as its year runs from May to the end of April in the following year), and also more GP members had joined the scheme in 2016. Due to non-recurring items in both expenditure and revenues, there was a further reduction of around €200,000, so this distorted the figures for 2016. In addition, because of the ongoing uncertainty regarding the transfer of GP training to the ICGP from the HSE, there has been a conservative approach to investment in IT (though this will need to be re-assessed as soon as the transfer is agreed).

The College is a not for profit organisation that operates under rules laid down by the Charities Regulator, and we are compliant with all of these regulations. All similar organisations need to have some surpluses built up over the years to allow for unanticipated events but mainly to allow for investment in the future so we can continue to grow. It may be no harm to remember that the College made a loss of nearly €420,000 in 2015, so the 2 year surplus for 2015 and 2016 on an income of €14.3 million was under €383,000.

I got the good news earlier this year that when the College had decided to invest in its own building 20 years ago and took out a mortgage to pay for Lincoln Place, that this sum was finally fully paid off, so now we are free of debt on our HQ.

My 3 year tenure as Treasurer is coming to an end, and I feel the College is at a very good place to be able to make decisions for the future knowing there is a very capable team looking after its

finances, and that there is a reserve of €4 million in the Bank. I know that some of this will need to be drawn down to invest in the ever increasing demands for providing more education and services for our members. We anticipate a need for considerable investment in ICT and also physical infrastructure requirements going forward however any investment decisions will also ensure that a prudent level of reserve is maintained.

While the College has a sound financial set of accounts, we must not forget the most important part of the College is its ethos of collegiality and support for each other. I would hope that every member will continue to feel the ICGP is an important part of their lives, as it has been for me since its beginning. It has been a great privilege to have been elected to the Board of our College, and to have been entrusted to take care of the College finances, but also to see the huge energy that GPs put into not only caring for their individual patients, but the whole of our society and for the good of general practice.



Independent Auditors Report to the Members of The Irish College of General Practitioners Company Limited by Guarantee

We have audited the financial statements of The Irish College of General Practitioners Company Limited by Guarantee for the year ended 31 December 2016 which comprises the Statement of Income and Retained Earnings, the Statement of Financial Position, the Statement of Cashflows and the related notes. The relevant financial reporting framework that has been applied in their preparation is the Companies Act 2014 and FRS 102 the Financial Reporting Standard applicable in the UK and Republic of Ireland issued by the Financial Reporting Council and promulgated by the Institute of Chartered Accountants in Ireland (Generally Accepted Accounting Practice in Ireland).

This report is made solely to the company's members, as a body, in accordance with Section 391 of the Companies Act 2014. Our audit work has been undertaken so that we might state to the company's members those matters we are required to state to them in an auditor's report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the company and the company's members as a body, for our audit work, for this report, or for the opinions we have formed.

Respective responsibilities of directors and auditors

As explained more fully in the Directors' Responsibilities Statement the directors are responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view and otherwise comply with the Companies Act 2014. Our responsibility is to audit and express an opinion on the financial statements in accordance with Irish law and International Standards on Auditing (UK and Ireland). Those standards require us to comply with the Auditing Practices Board's Ethical Standards for Auditors.

Scope of the audit of the financial statements

An audit involves obtaining evidence about the amounts and disclosures in the financial statements sufficient to give reasonable assurance that the financial statements are free from material misstatement, whether caused by fraud or error. This includes an assessment of whether the accounting policies are appropriate to the company's circumstances and have been consistently applied and adequately disclosed; the reasonableness of significant accounting estimates made by the directors; and the overall presentation of the financial statements. In addition, we read all the financial and non-financial information in the directors' report to identify material inconsistencies with the audited financial statements and to identify any information that is apparently materially incorrect based on, or materially inconsistent with, the knowledge acquired by us in the course of performing the audit. If we become aware of any apparent material misstatements or inconsistencies we consider the implications for our report.

Opinion on financial statements

In our opinion the financial statements:

- give a true and fair view of the assets, liabilities and financial position of the company as at 31 December 2016 and of its surplus for the year then ended; and
- have been properly prepared in accordance with the relevant financial reporting framework and, in particular, with the requirements of the Companies Act 2014.



**Independent Auditors Report to the Members of
The Irish College of General Practitioners Company Limited by Guarantee**

Matters on which we are required to report by the Companies Act 2014

- We have obtained all the information and explanations which we consider necessary for the purposes of our audit.
- In our opinion the accounting records of the company were sufficient to permit the financial statements to be readily and properly audited.
- The financial statements are in agreement with the accounting records.
- In our opinion the information given in the directors' report is consistent with the financial statements.

Matters on which we are required to report by exception

We have nothing to report in respect of our obligation under the Companies Act 2014 to report to you if, in our opinion, the disclosures of directors' remuneration and transactions specified by Sections 305 to 312 of the Act are not made.

A handwritten signature in blue ink, appearing to read 'Mairéad Divilly'.

**Mairéad Divilly
For and on behalf of Mazars
Chartered Accountants & Statutory Audit Firm
Harcourt Centre
Block 3
Harcourt Road
Dublin 2**

8 April 2017

The Irish College of General Practitioners Company Limited by Guarantee

Statement of Income and Retained Earnings

For the year ended 31 December 2016

	Note	2016 €	2015 €
Income			
Subscriptions received		2,186,870	2,046,220
Professional competence		1,202,307	957,069
Other college generated income		1,231,426	1,208,856
Public and private sector funding		2,658,304	2,453,423
Sponsorship		<u>178,943</u>	<u>190,202</u>
	4	<u>7,457,850</u>	<u>6,855,770</u>
Expenditure			
Establishment		102,352	103,933
Administration		2,309,676	2,408,023
Personnel		2,968,489	3,094,796
Professional fees		86,536	176,527
Service provision costs		836,791	1,088,904
Committee, meeting and travel		244,013	271,774
Depreciation		<u>72,080</u>	<u>143,209</u>
		<u>6,619,937</u>	<u>7,287,166</u>
Operating surplus/(deficit)	6	837,913	(431,396)
Interest payable and similar charges	7	(41,268)	(33,723)
Interest receivable and similar income	8	<u>5,240</u>	<u>45,935</u>
Surplus/(deficit) before taxation		801,885	(419,184)
Taxation	9	<u>-</u>	<u>-</u>
Surplus/(deficit) after taxation		801,885	(419,184)
Balance at beginning of year		<u>3,197,603</u>	<u>3,616,787</u>
Balance at end of year		<u>3,999,488</u>	<u>3,197,603</u>

The Irish College of General Practitioners Company Limited by Guarantee

Statement of Financial Position

For the year ended 31 December 2016

	Note	2016 €	2015 €
Fixed assets			
Tangible assets	10	1,575,961	1,615,700
Financial assets	11	<u>3</u>	<u>3</u>
		<u>1,575,964</u>	<u>1,615,703</u>
Current Assets			
Debtors	12	3,094,978	3,407,254
Cash and cash equivalents	13	<u>4,524,658</u>	<u>3,018,636</u>
		7,619,636	6,425,890
Creditors			
Amounts falling due within one year	14	(5,160,680)	(4,824,589)
Net current assets		<u>2,458,956</u>	<u>1,601,301</u>
Total assets less current liabilities		4,034,920	3,217,004
Creditors			
Amounts falling due after more than one year	15	(35,432)	(19,401)
		<u>3,999,488</u>	<u>3,197,603</u>
Reserves			
Retained reserves	16	<u>3,999,488</u>	<u>3,197,603</u>
		<u>3,999,488</u>	<u>3,197,603</u>

On behalf of the Board

Dr John Gillman



Dr Joseph Martin



Date 8 April 2017

8 April 2017

Membership Services Committee Report

**AUTHOR | DR SARAH MAGUIRE,
CHAIR OF THE MEMBERSHIP SERVICES COMMITTEE**



COMMITTEE MEMBERS IN 2016

Dr Sarah Maguire	Dr Andrée Rochfort
Dr John Gillman	Mr Nick Fenlon
Dr William Behan	Dr Dave Hurley
Dr Mark O'Kelly	Dr Mary Davin-Power
Mr Dermot Folan	Dr Rukshan Goonewardena
Dr Rita Doyle	Dr Noreen Lineen-Curtis
Dr Sinead Murphy	Dr Conor O'Shea
Dr Daragh O'Neill	

INTRODUCTION

The Membership Services Committee seeks to identify, monitor and respond to the needs of the College membership. This involves catering to the fluctuating needs of members throughout their careers: from training through retirement; working single-handedly or in a group; part-time or full-time; in rural practice, urban practice, something in-between or overseas!

The membership services committee has oversight of the following College programmes.

- Management in Practice (MiP) Programme
- National General Practice Information Technology (GPIT) Programme
- Health in Practice Programme (HiPP)
- Network of Establishing GPs (NEGs)
- ICGP Faculty Liaison Officer Project

Refer to the individual reports for each of the above programmes.

ACTIVITIES IN 2016

National ICGP meetings

- Network of GP Trainees Conference
- Annual Conference and AGM
- National Trainers Conference
- Summer School
- Winter Meeting

FACULTY LIAISON OFFICER PROJECT

Dr Mary Davin-Power – Faculty Liaison Officer

Ms Michelle Dodd – Administrative Support

- Support of faculty officers for the organisation of faculty meetings and activities
- Support and role development for faculty officers

- Recommendations for improving communication and interaction between members and College
- Promotion of the role of Faculty to College membership
- Promotion of College resources to College membership

Refer to Faculty Liaison Officer's Report.

DOCTORS' HEALTH IN PRACTICE PROGRAMME (HiPP)

Dr Andrée Rochfort – Project Director

Ms Sally-Anne O'Neill – Administrative Support (2016)

Refer to the HiPP Director's Report.

NETWORK OF ESTABLISHING GPS (NEGS)

Dr Laura Noonan – Project Director

Ms Michelle Dodd – Administrative Support

- Support of establishing GPs and promotion of ICGP resources
- Convening of ICGP Winter Meeting
- Hosting of regional NEGs meetings and provision of NEGs workshops at ICGP national meetings
- Member of ICGP delegation presenting at the Oireachtas Committee on the Future of Healthcare, September 2016
- Liaison and integration between NEGs and ICGP Faculty

Refer to NEGs Director's Report.

GPIT PROGRAMME

Dr Brian O'Mahony – National GPIT Project Manager

Dr Conor O'Shea – National GPIT Co-ordinator

Ms Niamh Killeen – Administrative Support

GPIT advisers and facilitators contributed to the following projects in 2016:

- Educational support of GPs through webinars and presentations at ICGP national meetings, CME groups and GP Training Schemes
- Providing a GP perspective to major national information system projects
- Improving secure electronic communication between GPs and health services
- Addressing individual GP IT queries
- Working with the National Cancer Control Programme on electronic cancer referrals

Refer to the GPIT Report.

MANAGEMENT IN PRACTICE (MiP) PROGRAMME

Mr Dermot Folan – (Acting) Project Director

Administrative Support – Ms Michelle Dodd

- Training courses for GPs, practice managers, GP registrars and practice staff (refer to the Education Programme Director's report)
- Information provision through online publications and guidelines
- Addressing GPs' practice management queries
- Referral to external professional advisor network and resources
- ICGP Doctors' Health in Practice Programme (HiPP) (refer to HiPP Director's report)

- Refer to MiP Director's Report

DISCUSSION

It was my honour to take over as Chair of the Membership Services Committee in June of 2016. In taking on this role, I am very aware of the commitment and enthusiasm that my predecessor, Dr John Gillman, put into ensuring that Membership Services is a dynamic and energetic committee, responsive to members' needs. I hope to continue the spirit of inclusivity and the vision for improving future general practice that his time with the committee represented.

It is a pleasure to work with the members of this Committee who represent the broad range of Irish general practice. These perspectives allow for the generation of ideas and solutions which help tackle the many challenges of today's general practice. A changing general practice landscape means that the College needs to adapt to cater to its members' needs. The support structures and strong lines of communication that the Membership Services Committee is continually developing between the membership and its College will ensure that members' voices drive College activity.

I would like to acknowledge the ongoing administrative support of Ms Michelle Dodd in all matters relating to Membership Services and thank all the members of the Committee for their help and guidance.

Management in Practice Programme Report

**AUTHOR | DERMOT FOLAN, CHIEF OPERATING OFFICER,
(ACTING) DIRECTOR OF THE MANAGEMENT IN PRACTICE
PROGRAMME**

INTRODUCTION

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

- Training courses for general practitioners, practice managers, GP registrars and practice staff. These courses are provided under the Education Programme (refer to the Education Programme director's report).
- 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.
- ICGP Doctors' Health in Practice Programme (HIPP): The ICGP Doctors' Health in Practice Programme comes under the remit of the Management in Practice Programme. The Doctors' Health Programme report is provided separately by the director, Dr Andrée Rochfort.

ACTIVITIES

Training Courses

Management in Practice Certificate Course, Sep 2016 – May 2017.

This is the twentieth course to be delivered since the commencement of the MIP Diploma programme.

- Course Director: Mr Nick Fenlon
- Course Administrator: Ms Jana Pickard
- Course Principal: Mr Barry O'Brien, Management Consultant, Abbey Medical Management Consulting.

General Practice Registrar – Management in Practice Certificate Course, Sep 16 – May 17

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

- Course Director: Mr Nick Fenlon
- Course Administrator: Ms Jana Pickard
- Course Principal: Mr Barry O'Brien, Management Consultant, Abbey Medical Management Consulting.

Practice Staff Training Course

This training course is specifically designed for existing reception, secretary and administrative staff in general practice who wish to consolidate and update existing skills. The course enables participants to deal more effectively in their role of receptionist/secretary/administrator in the

rapidly changing environment in which general practice operates. One course was held in 2016 and was well-subscribed with 17 participants. Feedback from course participants continues to be very positive.

- Course Tutor: Ms Romy Maloney, Practice Manager
- Course Administrator: Ms Yvette Dalton

CONTRIBUTION TO OTHER PROGRAMMES, PROJECTS AND EVENTS

ICGP conferences – input and coordination:

Annual Conference & AGM, Galway, May 2016; and Winter Meeting, November 2016.

ADVISORY/INFORMATION SERVICE

Direct access advisory service

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

There has been an increase in the number of requests for information and support in relation to practice staff reductions, GMS claims, partnership cessation and the closure of practices. Medico-legal issues and data protection queries have also increased.

The following table illustrates the spectrum of queries from members.

Topics	%
Employment issues	22%
GMS	17%
Medico-legal	13%
Medical records/Data Protection	17%
Financial	9%
Practice/Premises issues	5%
Miscellaneous, e.g. consultancy services, co-location of GP practice pharmacy and related regulations, ill health of GP	17%

FURTHER INFORMATION

Available at www.icgp.ie/MIP.

National General Practice Information Technology (GPIT) Group Report

**AUTHORS | DR BRIAN O'MAHONY, PROJECT MANAGER
DR CONOR O'SHEA, NATIONAL GPIT CO-ORDINATOR**

PROJECT SUMMARY

The National General Practice Information Technology (GPIT) Group is made up of representatives from the Irish College of General Practitioners, the Health Service Executive and the Department of Health. The aim of the GPIT Group is to promote the eHealth agenda in Ireland, in particular, electronic communications and interoperability between GP and health service information systems.

A team of working GPs with an expertise in health informatics promotes the GPIT agenda with educational activities and project work. Here is information on the people involved and the activities they undertake.

- National GPIT project manager: Dr Brian O'Mahony (South)
- National GPIT co-ordinator: Dr Conor O'Shea (Dublin/North East)

REGIONAL CO-ORDINATORS

- Dr Frank Hill (South)
- Dr Kieran Murphy (West)
- Dr Keith Perdue (Dublin/Mid Leinster)
- Dr John MacCarthy (West)

GPIT ADVISORS

- Dr Donal Buckley (Dublin/Mid Leinster)
- Dr John Sweeney (West)
- Dr John Cox (South)
- Dr Brian Blake (Dublin/Mid Leinster)
- Dr Brian Meade (Dublin/Mid Leinster)

EDUCATIONAL ACTIVITY AND PROJECT WORK

The activities of the GPIT team include:

- Educating GPs with online webinars (four in 2016) and presentations at the ICGP AGM and ICGP Summer School, in CME groups and on GP training programmes.
- Working to give a GP perspective to major national information systems, such as the National Integrated Medical Imaging System (NIMIS), the National Medical Laboratory Information System (MedLIS) and the National Maternal and Newborn Clinical Management System.
- Providing a primary care input into the Individual Health Identifiers (IHI) project. Membership of the IHI Project Board.

- Working to improve electronic communication between GPs and the health services, particularly through structured messaging (electronic referrals, laboratory and x-ray results) and Healthlink.
- Writing monthly IT questions and answers for Forum, the journal of the Irish College of General Practitioners. The FAQs are available at www.gpit.ie/faq.
- Managing and supporting Healthmail, secure clinical email, providing secure electronic communications between clinicians, in support of patient care.
- Working with the National Cancer Control Programme on electronic cancer referrals.
- Working with Healthlink and the Primary Care Reimbursement Service to enable electronic returns of data for periodic assessments, asthma and diabetes cycles of care.
- Membership of the Project Board of the National Laboratory Information System project, MedLIS, which will implement a new national laboratory system in 2017.
- Answering individual queries from GPs on IT matters.
- Providing a general practice and primary care perspective on interoperability and health informatics standards in the health services.
- In December 2016, management of the Healthmail secure clinical email service was transferred to the 'Access to Information' section of the Office of the Chief Information Officer in the HSE.
- Liaison with the ICGP Membership Services Committee.

FUTURE PLANS

- To continue to work with major national information systems, the National Medical Laboratory Information System (MedLIS), Individual Health Identifiers, and the National Maternal and Newborn Clinical Management System.
- To work to improve electronic communication between GPs and the health services through structured messaging (Healthlink) and non-structured secure email (Healthmail).

ADMINISTRATION

Administrative support is provided by Niamh Killeen. Special thanks are due to Niamh Killeen for her support of Healthmail and her efficient authentication of Healthmail GP applicants.

FURTHER INFORMATION

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

Doctors' Health in Practice Programme

**AUTHOR | DR ANDRÉE ROCHFORT,
DIRECTOR, DOCTORS' HEALTH IN PRACTICE PROGRAMME**



SUMMARY OF THE PROGRAMME

The ICGP Doctors Health in Practice (HiP) Programme is a national service for improving the quality of healthcare for GPs and GP trainees through (1) confidential primary healthcare, (2) a telephone helpline for health and healthcare information, and (3) medical education on health promotion and healthcare for medical doctors. Sometimes the carers need to be cared for, and so the HiP Programme promotes the uptake of GP services, mental health care and

occupational health care for doctors' own personal healthcare such as for acute illness and chronic conditions, health screening and mental health support, and for all the same issues that the general population attend their GP for.

The ICGP HiP Programme complements existing GP, occupational health and specialist mental health services by providing optional pathways of care for GPs. The GP network can be accessed directly by contacting one of the GPs from the HiP directory on the ICGP website. Other HiP Programme services may also be accessed directly (psychology network, occupational health physicians) or through referral from a GP (hospital specialists). Contact details are available at www.icgp.ie/doctorshealth. GPs can contact the HiP Programme helpline or email address.

ACTIVITIES IN 2016

(1) Health in Practice Telephone helpline

This helpline is manned by a GP two days per week, and has a facility for leaving messages or texts when the GP is unavailable. Reasons for calls received in 2016 include work related health issues, work pressures, personal illness, sick leave and returning to work issues, financial pressures, career indecision, practice communication issues, and feeling overwhelmed by work. There were also calls from people who wanted to know how to help colleagues, e.g. "What do I do, what do I say and how do I say it?". Callers received listening support, information and collegial support to follow up on these topics through formal channels of healthcare support, such as attending a HiP Programme GP, contacting another GP in a different location, availing of other HiP Programme services, other ICGP services and courses, engaging with medical colleagues to reduce professional isolation, and re-connecting with family and friends. In some cases, communication continues until the situation improves. The helpline is not an emergency crisis service and does not provide clinical healthcare, instead it can be regarded as a confidential non-judgemental supportive and practical signposting service. There were over 80 new contacts to the helpline in 2016.

(2) Health in Practice Healthcare Services Networks

The core principle of the ICGP Doctors' Health in Practice Programme is that doctors can visit a GP when in need of health advice, screening, prevention and treatment for symptoms, acute or chronic conditions, or when they need two heads rather than one to assess and manage a symptom.

Central to the HiP Programme is the GPs for GPs Network. These GPs have years of experience in treating doctors, and through the HiP Programme, they have access to the peer support from the network for their own support. They are encouraged to address the special needs of doctors as patients within a confidential, caring and compassionate doctor-patient relationship which is based on trust and formal consultations, rather than ad hoc care within casual unprofessional and low quality interactions. Similarly, they encourage appropriate lifestyle adjustments and work-life balance for busy GPs who sometimes feel overstretched. Sometimes a GP needs to see their GP. There should be no mystique or novelty value in this fact.

It is important to clarify that the GPs for GPs Network cannot be regarded as a fast track route to hospital specialists. If referral is indicated then referral will occur in the usual way. As with all referrals a GP makes, the specialist will decide the waiting time, and sometimes the doctor's GP will need to advocate for the patient as part of a clinical relationship.

In the GPs for GPs Network, some GPs received no new GP patients in 2016 and others received many. The majority of HiP Programme "GPs for GPs" state that the range of issues they address as a doctor's GP mirrors the range of presenting symptoms and conditions (medical and surgical) they address in their general practice population. This is success! We need more GPs for GPs in all geographical areas. If you would like to know more about becoming a "GP for GPs", please see www.icgp.ie/doctorshealth.

(3) Health in Practice Medical Education

Presentations, lectures, workshops and working groups such as Developing Mentoring Support for GPs (with the ICGP Membership Services Committee) are listed in the report of the Director for Quality Improvement.

ACKNOWLEDGEMENTS

Sincere thanks are due to all the GPs, psychologists, occupational physicians and psychiatrists who care for doctors within independent therapeutic relationships in association with the ICGP Doctors Health in Practice programme.

Thanks to Sally-Anne O'Neill for administration support in 2016. Thanks to the Chairperson of Membership Services Committee, Dr John Gillman, and Dr Sarah Maguire, who took over from him in May 2016. Along with the Chief Operations Officer, Mr Dermot Folan, they supported the coordination and development of services for members.

Comments, suggestions and recommendations are welcome. For contact details and further information, please see www.icgp.ie/doctorshealth.

Network of Establishing GPs Programme

**AUTHOR | DR LAURA NOONAN,
NEGS PROGRAMME DIRECTOR**



SUMMARY OF THE NEGS PROGRAMME

The ICGP NEGs Programme was established in 2004 to address the needs of GPs establishing in practice. The aims were to support and represent this group of doctors and deal with issues arising for them. The NEGs Programme has proven to be a valuable resource for establishing GPs and highlights the College's commitment to supporting establishing members. The ICGP NEGs Programme is overseen by a programme director who is tasked with providing direction, structure and future strategy, facilitating the delivery of the Programme, and representing new and establishing GPs within the College.

I officially took over the role of NEGs Programme Director on 1 April 2016 after an initial handover period of four months from my predecessor Dr Peter Sloane.

ACTIVITIES

Attendance and Presentations at Meetings

- National Trainers Conference March 2016 introducing the NEGs Programme to trainers.
- ICGP AGM May 2016. 2 x workshops.
(i) Practice finances (ii) Finding your ideal job.
- ICGP Summer School June 2016. 2 x workshops.
(i) Setting up in practice (ii) Gaining access to the GMS.
- ICGP GP Trainee Conference October 2016.
(i) Introduce NEGs (ii) Workshop with trainees – “Taking the Next Steps”.
- NEGs Autumn Meetings 2016.
Stand alone and in conjunction with Faculty meetings. Cork, Mullingar, Limerick, Dublin.
- NEGs Steering Group Meeting, Athlone, November 2016. Agenda. Review of NEGs Programme and planning delivery of NEGs Programme over next 12 months.
- ICGP Winter Meeting November 2016.
Meeting convenor.
Programme creation in conjunction with the Director of Medical Education, Mr Nick Fenlon.
Chair for the Launches Session.
Speaker and chair for The Evolution of General Practice – How the ICGP Can Play its Part.
Creation of Winter Meeting Survey.
Analysis and report on Winter Meeting from survey.

Communication with medical media.
Sourcing and inviting speakers.

- Member of a four-person delegation who presented in September 2016 to the Oireachtas Committee on the Future of Healthcare, chaired by Minister Roisin Shorthall. Creation of materials and liaising with other delegate members in preparation for the presentation. See www.icgp.ie/oireachtas for more information.
- Invited audience member on Claire Byrne Live in September 2016. Commented on issues affecting establishing GPs. Part of a three-person delegation representing the Network of Establishing GPs and the ICGP.

Integration of NEGs with Faculty

- NEGS meetings/joint NEGS and Faculty meetings held in Cork, Longford, Limerick, in spring and autumn 2016. Further meetings are planned for spring and autumn 2017.
- Liaison with Dr Mary Davin-Power, Faculty Liaison Officer, in relation to NEGS/Faculty Integration .

Preparation of Report of Participant Experiences from Winter Meeting 2015 for Membership Services January 2016

- Assessed satisfaction with the 2015 Winter Meeting and instigated changes based on findings for the 2016 meeting.

NEGs Submissions

- Submission on behalf of the NEGs group for inclusion at a meeting with the Minister for Health in August 2016.
- Review and submission of ideas for ICGP Future Healthcare Submission in August 2016. Part of a four-person delegation who presented to the Oireachtas Committee on the Future of Healthcare chaired by Minister Shorthall.
- Liaison with the RCSI regarding GPs with a special interest in ENT.
- Member of the ICGP group liaising with Dr Camilla Carroll/the RCSI in relation to piloting ENT as a formally recognised special interest in general practice.
- Invitation to become member of a proposed Ultrasound in General Practice Special Interest Group in the ICGP.
- Member of preparatory team and contribution to Manpower and GP Oireachtas Submission in February 2017.

Interview with Forum Journal, April 2016

- Introducing new NEGS Director “New NEGs Director Laura Noonan believes there is a brighter future ahead for GPs”. See www.icgp.ie/ForumJournal.

Signposts to Success

- Involved in the updating of relevant chapters in *Signposts to Success* to ensure comprehensive, up to date material of high quality and relevance. Chapters under review include Tax/Under 6s/Over 70s/Chronic Disease Management. See

www.icgp.ie/SignpostsToSuccess.

Circulation of Materials

- Updated Welcome Pack, including college infographic distributed to all 4th year Trainees on commencement of 4th Year in July 2016. See www.icgp.ie/NEGs.
- NEGs letter included with pack to newly elected members.

Mentor Programme

- Currently re-exploring the concept of the Mentor Network in conjunction with Dr Sarah Maguire, Dr Mary Davin-Power, Dr Rita Doyle and Dr Andree Rochfort.

Review of the NEGs Areas of ICGP Website

The online NEGs discussion boards were reviewed in 2016 and improvement was planned.

Personal Contact/Advise

There continues to be a continuous stream of personal enquires to the Programme Director, both via direct contact from individuals and through the ICGP. I am dealing with emails, telephone calls, forum posts around varying issues NEGs are dealing with including but not limited to employment issues, succession, GMS entry, emigration and immigration.

Collaboration with the Doctors' Health in Practice Programme

I hosted joint HiPP sessions with Dr Andree Rochfort. I plan to create materials for later this year to assist GPs (trainees/NEGs/established GPs) with issues surrounding sick leave, locums, and financial burden.

Contact with the RACGP

Contact was made with establishing GPs in the Australian College of GPs. I am looking at issues faced by newly graduated GPs and assessing similarities and differences. There was discussion of findings of the ICGP career survey with the RACGP. Reviewing supports were offered by RACGP.

PLANS FOR 2017

I continue to work on aforementioned projects, in particular:

- Mentor Programme. Active project currently.
- Oireachtas Submission – contribute to and review materials for Manpower and GP, February 2017.
- Sessions/workshops at ICGP meetings: AGM, Summer School, Winter Meeting, etc.
- Plan and deliver spring/autumn NEGs meetings in 2017 (in conjunction with faculty meetings).
- Winter Meeting 2017.
- Review of terms of reference of NEGs Steering Group.
- Work on *Signposts to Success* re-edit. 2017 version.
- Present to GP trainees as requested by the ICGP or individual training schemes.
- Review and expand NEGs web pages.
- Review of parameters for eligibility for NEGs group.
- NEGs survey to analyse the career plans of trainees on exiting schemes and recently graduated GPs.
- Attendance and participation at the European EQUIP Patient Safety Conference in March in Dublin to represent Establishing GPs in Ireland.
- Continue to work with other project directors as opportunities arise throughout the year to enhance the delivery of the NEGs Programme. (Continue to liaise with Mary Davin-Power

in relation to NEG's and faculties).

I look forward to continuing to move the NEG's Programme forward while representing the needs of and advocating for our most vulnerable members – recently graduated GPs at the early stages of their careers.

Faculty Liaison Officer Report

AUTHOR | DR MARY DAVIN-POWER



PROJECT OVERVIEW

Project Commencement Date

October 2014

Reporting Structure

The Faculty Liaison Officer reports to Mr Dermot Folan, COO, and the Chair of the Membership Services Committee.

Administration

Administrative support is ably provided by Ms Michelle Dodd.

PROJECT OBJECTIVES

The project objectives at the commencement were as follows:

- To offer support to faculties around the country and their members, and to act as the first point of contact in the ICGP for communications between the ICGP and ICGP faculty officers
- To provide recommendations on how communications and interaction between members and the College centrally can be improved
- To support liaison with other GP/ICGP stakeholders at local and regional level (e.g. GP training schemes, CME tutor groups, hospital liaison committees, OOH coops), explore with faculties and report on areas of relevance to College activity (e.g. the OOHs issues, hospital /GP liaison, etc.)
- To disseminate information on faculties, set up communications structures, communicate effectively with faculty officers and make recommendations on the management of the circulation of formal communications
- To promote College resources to faculties and members at faculty level
- To utilise IT and web resources to increase engagement in faculty activity and to build up a relationship between members/faculties and the College centrally.
- To support, encourage and train faculty officers
- To develop a profile among members at regional level
- To research how other national membership organisations have addressed similar issues regarding the engagement of members on the ground with one another and also with the central organisation.

ACTIVITIES

Based on the project brief, many of these objectives have been realised:

- The Faculty Liaison Officer (FLO) position is now firmly established and most faculties are aware of the position. I am now the recognised resource person for queries regarding CPD, speakers, sponsorship, faculty membership lists, etc. Communicating information to the faculties about issues which come up in the College is a priority. As Faculty Liaison Officer, I encourage faculties to promote the voice of the GP in local and national healthcare provision and the planning of services.
- Relevant information from hospitals, services, etc. is communicated on a geographical basis – getting information to the relevant faculties and from there to their membership. The role of the faculty liaison officer in this regard is becoming recognised and this has proven invaluable for hospital/GP liaison group representation, and the promotion of some niche local GP services which would otherwise have struggled for recognition, e.g. the Royal Victoria Eye & Ear Liaison, New Children's Hospital outreach planning group, various 'virtual' clinics and e-learning opportunities, etc.
- Queries from members are dealt with on a regular basis regarding faculty allocation and related matters for the member. A significant concern is the unavailability of places in small group CME for members. This is especially an issue in the Dublin faculties.
- Attempting to facilitate and support members abroad, and those planning to return from abroad, directing them to the relevant areas on the website including the online resource *Signposts to Success* (NEGs). This has been an encouraging development and one where the ICGP has an important role to play in welcoming and supporting returning ICGP trained GPs.
- Communicating information to the faculties about issues of current importance in the College. Promoting recent reports and promoting ICGP recognised experts in a variety of fields as speakers for faculty meetings.
- The Faculty Liaison Officer has been involved in promoting Healthmail to the faculties.
- As new issues become relevant, information is provided for faculty officers, e.g. the details and importance of applying for CPD for events, the new Lobbying Act, 'Transfer of value,' LICC meetings, etc.
- An online discussion board for Faculty Officers on the College website is provided.
- Text message notifications for faculty officers are frequently used and have reduced dependency on postal reminders.
- A 'faculties' section was created on the website and provides updated contact details of faculty officers – www.icgp.ie/faculties.
- There is an on-going process of issuing notifications of topics and discussion documents to faculty officers for consideration at faculty meetings.
- A number of incentives have been initiated by way of recognition and collegiality for faculty officers, including complimentary registration for attendance by faculty officers at College events including the Annual Conference & AGM and the Winter Meeting. I have held a Faculty Officer's Lunch at the College's Winter Meeting and Annual Conference &

AGM. These were very well attended and positively received.

Support is provided by email, by phone and by my attendance at faculty meetings where time and geography allow.

- ICGP email address – All faculties can now avail of an ICGP email address for the faculty if they wish. This enables the same email address to be passed on to new officers and avoids the use of the officer's personal email address. Not all faculties chose to avail of this service.
- Forum journal. The 'Faculty Forum' page in Forum, the College's journal, highlights the work of the faculties around the country and is well established. See www.icgp.ie/ForumJournal.
- Faculties visited at least once to date by the Faculty Liaison Officer: Cavan/Monaghan, Clare, Cork North, Dublin Dun Laoghaire, Dublin Mt Carmel, Dublin Merrion, Dublin Corrigan, Dublin North, Dublin Southwest, Dublin West, Galway, Louth, Mayo, Meath, Kildare, Kilkenny, Tipperary North, East Midlands, Longford/Roscommon, Laois/Offaly, Waterford, Wexford and Wicklow.

GENERAL OBSERVATIONS

There is a very positive response to initiative by the College to assist in supporting and re-energising the faculties. Assistance with arranging faculty meetings, help regarding getting officers to volunteer and general 'moral support' have been provided, and feedback on this is very positive.

- Many previously inactive faculties are now active and have regular meetings after some intervention.
- In some areas, there has been some ambiguity regarding the role for CME and faculties, mainly in areas where the faculty has not been active.
- In some faculties, one individual / officer has fulfilled the roles of Chair, Secretary and Treasurer, reflecting a not uncommon challenge – that of a lack of volunteers for the officer roles.
- There are however, many active and successful and dynamic faculties as a result of the hard work and dedication of the officers. They are well represented at many levels including ICGP Council and hospital liaison. The 'Faculty Forum' page in Forum journal is intended to highlight their activities and hopefully inspire other faculties to follow suit, or at least to question what is happening in their own area.
- Active and successful faculties include Clare, Galway, Corrigan, North Dublin, Dublin SW, Dublin Mt Carmel, Dublin Merrion, Meath, Midlands West, Dun Laoghaire, Kerry, Mayo, Kilkenny, Kildare, Waterford, Wexford and Wicklow, amongst others.
- In some areas, there is confusion about geography and where members are allocated (East Midlands, West Midlands, Laois/Offaly, Longford Roscommon).
- Overall the perception of members on the ground is that the ICGP is a robust resource and deserving of great support and praise.

RECENT INITIATIVES

The Cavan/Monaghan, Dublin West, Longford/Roscommon, Louth, Laois and Offaly faculties have become more active of late.

FURTHER PLANS

- To encourage more faculty activity in areas that are less vibrant from a faculty perspective.
- To build on faculty officer engagement in special activities during ICGP events.
- To encourage more engagement on the Faculty Officers Discussion Board.
- To visit more faculties where distance and time allow.
- To build “the brand” by continuing to improve recognition for faculties and build a strong membership loyalty.
- To encourage greater engagement of younger members – NEG’s, GP registrars and 3rd and 4th year trainees.

ACKNOWLEDGEMENTS

Many thanks are due to all my colleagues in the ICGP, including:

- Dermot Folan, COO, for his excellent guidance and support since my appointment.
- John Gillman, past Chair, and Sarah Maguire, current Chair, Membership Services Committee, for their constant enthusiasm and promotion of all faculty activities.
- Brendan O’Shea for his efficient engagement whenever requested.
- Michelle Dodd for her efficient administrative assistance which is invaluable for everything to do with the faculties.
- Janet Stafford for her efficient coordination of faculty notifications.
- Niamh Killeen for all things IT.
- Orla Sherlock for all her cheerful engagement at the larger events and her assistance in organisation of faculty officer sessions at College events.
- Laura Smyth for her efficiency on the ‘Faculties’ section of the website.

Education Governance Committee Report

**AUTHOR | DR JOHN COX,
CHAIR OF THE EDUCATION GOVERNANCE COMMITTEE**



OTHER COMMITTEE MEMBERS

Dr Alan Barry
Prof Peter Cantillon,
Representative of AUDGPI
(resigned)
Dr Rita Doyle
Mr Nick Fenlon, Director of
Medical Education
Dr Henry Finnegan, Director of
CME
Dr Joe Gallagher
Dr Romaine King

Dr Noreen Lineen-Curtis (resigned)
Dr Sharon McDonald (withdrawn)
Dr Claire McNicholas, Assistant
Director, CME
Dr Brian Norton
Dr Kevin O'Doherty
Dr Brian Osborne
Dr Siorcha O'Riordan
Dr Mary Sheehan
Dr John Sweeney (resigned)
Administration: Ms Yvette Dalton

COMMITTEE SUMMARY

The Education Governance Committee reports on the following:

- Oversight, validation and review of existing education programmes.
- Analysing need and planning for educational programmes and activities.
- Overseeing of assessment where relevant, including the appointment of External Examiner.
- Provision of end-point certification for courses (including those that do not lead to named awards OR provision of end-point certification for courses not leading to named awards (re. HETAC).
- Decision-making in learner grievance/disciplinary proceedings/appeal process.
- Collaboration and partnership with external organisations and bodies including Academic Departments of General Practice.
- Recommendation of worthwhile education programmes to the Foundation Projects Committee.

ACTIVITIES IN 2016

Continuing Medical Education (CME)

CME small group learning (SGL) was provided by a total of 37 schemes run by 37 tutors. There are 172 groups in the network. Each tutor is responsible for a minimum of three groups and a maximum of five groups. A total of 97 group leaders assist local tutors in the delivery of the programme.

There has continued to be a significant increase in demand for CME since 2011 following the introduction of compulsory enrolment on a professional competence scheme. The total number of GPs attending was 13,483.

We wish Dr A. Roarty well in his retirement from his role as CME tutor for the Donegal B scheme from 1 October.

We welcome Dr John Lally who was appointed as CME tutor for the Galway A scheme and Dr Laura Noonan for the Roscommon/Longford/ East Midlands scheme. Both tutors took up their posts on 1 September 2016. Dr Rajesh Rajpal was appointed as CME tutor for the Donegal B scheme on 1 November 2016.

Dr Henry Finnegan, National Director of CME, attended the 25th EURACT Bled Course as a course director on 19-24 September 2016. The theme was “Teaching and Learning About the Future of GP/FM”. He gave a keynote address titled *The Challenge of Incorporating New Information and Diagnostic Technologies into Daily General Practice* and resourced two working groups on the same theme.

Now that the financial emergency has passed and the recruitment ban in the civil service has been lifted, it is time that the HSE resumed the employment of CME tutors. There is an urgent need to fund at least five extra tutor posts.

We would like to compliment Dr Finnegan on his leadership and hard work which has made CME activity in the College the success it is.

Educational Meetings

The Annual Conference & AGM of the ICGP took place on 6-8 May 2016 at the Radisson Hotel, Galway. The theme was ‘Generalism at the Heart of Patient Care’. There was an STI masterclass on the Friday afternoon which was well attended. The Foundation Lecture entitled “The Growing Evidence Around the Therapeutic Value of the GP Consultation” was delivered by Prof Frede Olesen from Aarhus University, Denmark. The topic for the College Debate, “The Role of Video Consultations in General Practice: An Opportunity or Threat,” provoked some lively discussion.

Attendance at the Summer School, held at Mount Wolseley, Carlow, in June 2016 was down on previous years. It has been decided to change the venue and format of this meeting for 2017.

The Winter Meeting was hosted on behalf of the ICGP by the Network of Establishing GPs (NEGs) at the Sheraton Hotel, Athlone, on 19 November 2016 and, as always, was very well attended. Feedback from those who attended was very positive indeed. The Committee would like to thank the meeting convener, Dr Laura Noonan, NEGs Director, for her enthusiasm and hard work.

Elearning

The delivery of elearning modules continued throughout 2016 with increasing numbers of GP participants. The number of registered users (ICGP full members only) was 2,403 for the year. The number of modules available, including Forum MCQs, was 64, with an average number of 754 unique users per month.

Mental Health

I would like to express my gratitude to Mr Pearse Finegan for his valuable contribution to the ICGP in the area of mental health and wish him well in his retirement.

I would also like to thank Dr Brian Osborne for his work on the following projects during the year: 'Out of Hours' project, 'Physical Health of Patients with Enduring Mental Illness', 'Counselling in Primary Care' and the 'Suicide Crisis Assessment Nurse.'

Dr Brendan O'Shea, Dr Claire Collins and Dr Brian Osborne met with Minister McEntee on 10 November 2016 at Leinster House, where an overview of general practice and mental health, primary care teams and mental health representation were discussed. Minister McEntee has agreed to open the EGPRN Conference in October 2017.

A presentation entitled "Counselling in Primary Care Service (CIPC) National Evaluation First Phase" was made at the NCS Conference on 15 September 2016 by Dr Charles Brand, CIPC Researcher.

Women's Health Programme

The Committee would like to thank Dr Miriam Daly for her activities on the Woman's Health Programme for the year, particularly in the area of IUD training for GP trainees.

Substance Misuse Programme

Dr Des Crowley and Dr Marie Claire Van Hout were appointed as course tutors for the Substance Misuse and Associated Health Problems Certificate course commencing in October 2016. The Committee would like to thank Dr Ide Delargy for her very comprehensive reports outlining activities on the Substance Misuse Programme during the year. The number of self-audits carried out was noted to be 140, while external audits numbered 3.

Quality Improvement

The Committee thanks Dr Andrée Rochfort, Director of Quality Improvement, for her comprehensive reports and lists of publications throughout the year.

EUROPREV

Dr John Cox was unfortunately unable to attend the annual EUROPREV meeting in June 2016, however he hopes to be in attendance at the meeting in April 2017.

FUTURE PLANS

The issue of the HSE's continuing reluctance to adequately resource CME with the resultant need by the ICGP to subsidise CME will be raised with Mr Fintan Foy, the incoming CEO, and the HSE in the coming year.

The proposal that the existing service level agreement between the ICGP and CPD Solutions be changed to a partnership agreement will hopefully be resolved in the coming year.

A meeting is planned to address the current relationship issues between and the ICGP and the Academic University Departments of General Practice in Ireland (AUDGPI) in March 2017.

WONCA Report

AUTHOR | PROF FERGUS O'KELLY, CHAIR, ICGP POST GRADUATE TRAINING COMMITTEE

SUMMARY

WONCA Europe represents family doctors and their member organisations across Europe. Web: www.globalfamilydoctor.com.

The ICGP is represented on the many network organisations of WONCA Europe, e.g. EQuIP, EURACT, EGPRN and Europrev.

WONCA EUROPE CONFERENCE 2016

I attended the 2016 WONCA Europe Conference which took place on 15-18 June in Copenhagen. The theme of the conference was "Family Doctors with Heads and Hearts".

In the WONCA Europe 2016 Copenhagen Legacy Document, a call was made for the following actions to be achieved:

- Universal health coverage and high quality family medicine to be implemented and further developed in all European countries. This implies allocation of resources in accordance with the principles stated in WHO policies.
- The integration of healthcare services across different healthcare professionals at the primary care level, as well as across the primary and secondary care.
- Stronger links between public health strategies and person-oriented medicine in clinical practice.
- A rational distribution of resources driven by the needs of the community.

For more information on the 2016 conference and the Copenhagen Legacy Document, please see www.woncaeurope2016.com.

Report from the ICGP Representative on the Medical Council

AUTHOR | DR RITA DOYLE

SUMMARY

I find it hard to believe that I have only one more year to serve as the ICGP representative on the Irish Medical Council. The Council clearly states its vision is one of providing “leadership to doctors in enhancing good professional practice in the Interests of patient safety”. This positive vision underlies a lot of what the Council does. 2016 saw two big achievements in this regard: The publication of the eight edition of the *Guide to Professional Conducts and Ethics*, and the first patient safety conference which was held in October.

A total of 21,795 doctors were registered in December 2016 which is an increase of 1,322 on the previous year (40% being on the specialist division – 59% male, and 41% female. A total of 411 new complaints were received in 2016 and 42 of these were referred on to Fitness to Practice Inquiries. Three complaints were referred on to another body and four practitioners were referred for a performance assessment of their practice. In my experience on the Preliminary Proceedings Committee, a lot of complaints could be addressed locally if there was a good local complaints process.

The Council surveyed doctors as well as patients. Over half of those surveyed said that their health had been negatively impacted by aspects of their role. A total of 51% said stress had influenced their overall well-being and 33% felt unsupported in their roles.

The Medical Council launched an on-line tool for patients and the public entitled “Working with your doctor” which aims to empower patients to gain more from their interaction with doctors.

I chair the Health Committee on the Council. This group supports doctors who are unwell to either maintain their registration or get back on the register after a period of ill health. It is completely confidential. Referral is by self or third party or the Council itself. If you have concerns about a colleague’s health and their ability to practice, please refer them to this group. Personal approaches or enquiry will be welcomed and treated in a confidential manner.

Report – European Union of General Practitioners/ Family Physicians

AUTHOR | DR LYNDA HAMILTON, ICGP REPRESENTATIVE

Head of Delegation: Dr Liam J Lynch

IMO representative: Dr Ray Walley

ICGP representative: Dr Lynda Hamilton

OVERVIEW

- Spring meeting in June in Oporto.
- Autumn meeting in October in Bucharest.
- Report of collaboration with European Nurses Federation to Horizon 2020.
- Report of DG Sante – Joint Actions on Antibiotic Resistance, Multimorbidity, Chronic Diseases.
- Result of UEMO questionnaire and Draft Statement on the Role of Pharmacists.

A good relationship was important in training and in practice. Generic drugs reduced pharmacy income and hence their quest for new roles. Diagnostic testing, without appreciating the specificity of results, or knowledge of red flag symptoms, and OTC prescribing was unsafe for patients. In Finland, the law says only doctors may diagnose, not pharmacists or nurses. Norway and the UK allow advanced nurse practitioners and midwives limited diagnostic and prescribing only.

Code of Conduct

When members of UEMO are asked to collaborate with other organisations they should consult the Board, who need a set of principles to guide them to enable a prompt response. Independence, quality, integrity, accountability, transparency, conflict of interest all need to be considered.

Education Programme Report

AUTHOR | NICHOLAS P FENLON, DIRECTOR OF MEDICAL EDUCATION



OTHER MEMBERS OF THE EDUCATION TEAM

- Jana Pickard, Education Administrator
- Yvette Dalton, Education Administrator
- Orla Sherlock, Events Coordinator

SUMMARY OF THE EDUCATION PROGRAMME

The aim of the Education Programme is to provide continuous professional competence education to College members. The objective of the programme is to provide our members with practical educational updates on identified topics that are relevant and applicable to their everyday practice. The programme strives to provide these in a format that recognises the reality of the busy and complex work of GPs and through the use of educational methodologies that match the learning styles of members. The programme is delivered through events, courses and elearning.

PROGRAMME ACTIVITIES IN 2016

Major courses

The following courses were delivered in 2016:

- Occupational Medicine Leading to LFOM (2 year course)
- Musculoskeletal Examination and Injury Management
- Certificate in Management in Practice
- Certificate in Management in Practice – Registrars Course
- Substance Misuse and Associated Health Problems Certificate Course

Short courses

The following short courses were delivered in 2016:

- Primary Care Surgery Course – three courses
- SCALES
- Cervical Smear Theory Course – three courses
- Practice Staff Course

eLearning modules

Thirty-five eLearning modules were made available to members in 2016 on the ICGP education platform – www.icgp-education.ie. Over 2,000 individual users were recorded engaging in these modules, which include the following:

- Clinical topics, e.g. anticoagulation, infection control, dementia
- Non-clinical areas, e.g. injuries board information, Think Ahead, alcohol misuse
- Women's health, e.g. LARC, osteoporosis, breast disease
- Men's health, e.g. BPH, STIs, rheumatoid arthritis
- Mental health, e.g. depression, dementia, suicide prevention
- Health promotion, e.g. promoting physical activity, chronic care self-management
- Paediatric care, e.g. childhood immunisation, childhood obesity, HPV vaccination
- Risk management, e.g. confidentiality, health literacy

Events

We delivered successful major events in 2016:

- Annual Conference & AGM: 6-8 May 2016, Galway
- Summer School: 23-25 June, Mount Wolseley, Tullow, Co. Carlow
- EURACT Conference: 8 – 10 September 2016, Trinity College, Dublin 2
- Winter meeting: 19 November at the Sheraton Hotel, Athlone, Co. Westmeath

All events were well attended and provided excellent and relevant education workshops to our members and some non-member attendees.

PROGRAMME MILESTONES

- The 10th ICGP Summer School took place in June 2016 with almost 300 GPs in attendance.
- Forum Online Distance Learning
College Members who complete the Forum Distance Learning MCQs were able to do so entirely electronically in 2016. This is a reserved service to ICGP members.

FUTURE PLANS FOR 2017

Risk management

We will be delivering a series of modules under the heading of Risk Management. We have started with modules on confidentiality and on consent and will be adding to this with a module on medical records

Dementia

We are building a comprehensive programme of modules on dementia care in general practice in collaboration with UCC and PREPARED project under the direction of Dr Tony Foley.

Summer School 2017

This conference will see a whole new delivery of the traditional Summer School – now called Summer Sessions. The 2017 Summer Sessions will facilitate a number of sessions on “Sharing good

ideas from practice”. We will also be facilitating a number of workshops relevant to practice staff members, including practice nurses, managers and administrators. ICGP Summer Sessions 2017 will be delivered in June in the Sheraton Hotel, Athlone.

Annual Conference and AGM

The 2017 Annual Conference and AGM will take place in a new venue – White’s Hotel, Wexford, on 12-14 May.

ADMINISTRATION

The Education Programme has two administrators, Jana Pickard and Yvette Dalton. Our events are coordinated by Orla Sherlock. All administrators have given hugely to the development and continued success of ICGP education delivery. I wish to acknowledge the ongoing support and guidance by our extern – Professor Anthea Lints, Edinburgh University.

Finally, I wish to thank the Education Governance Committee under the chairmanship of Dr John Cox for their guidance and support, and our team of dedicated course tutors and assessors.

CME Small Group Network Report

AUTHOR | DR HENRY FINNEGAN, NATIONAL DIRECTOR OF CME

CONTEXT

The HSE is the principal funder of the national CME Tutor network. The National Director, Assistant National Director and 26 CME tutors are directly funded, and additionally 11 tutors indirectly funded by the HSE.

The number of GPs on the CME mailing list to participate in SGL meetings is now 3,141. This is almost every GP in active practice in the country.

Despite the significant increase in activity, the funding of the CME Tutor Network continues to be challenging. This is in part due to the public service recruitment ban.

To address this issue a temporary mechanism was agreed between the HSE and the ICGP so that new tutors could be employed by the ICGP and the totality of funding a new tutor would be covered by way of a grant from the HSE. As the national financial crisis appears to have ended and the recruitment ban has been lifted, it is time to revert to the original employment regime.

ATTENDANCE FIGURES 2016

Total number attending up to December 2016 is 13,334. This is a steady state over the previous year. The figures dipped when The Roscommon/Longford/East Midland tutor retired in an unplanned manner and it was a number of months before a replacement tutor, Dr Laura Noonan, was appointed from 1 September 2016. Similarly, the Galway A scheme was without a tutor for a number of months until Dr John Lally was appointed from 1 September 2016.

TUTORS IN THE NATIONAL NETWORK

There are 37 tutors in the network. Tutors are responsible for creating small groups of GPs to partake in the learning process. There are 172 groups in the network. Each tutor is responsible for a minimum of three groups and a maximum of five groups. Tutors are expected to resource a minimum of seven meetings per group per year. When the demand increased some tutors responded to the local need by forming more groups. Some tutors are now organising and resourcing seven, eight and even nine groups per month in their respective areas. This is not a sustainable situation. There are now 97 group leaders assisting the local tutors in the delivery of the programme.

TUTOR RETIREMENTS

Dr Aidan Roarty, tutor on the Donegal A scheme, retired. He was not in position for very long. I wish him well in his new career. I have asked tutors that if any tutor is intending to retire to inform me early in 2017 for planning purposes.

Retention and recruitment continues to be challenging.

TUTOR REPLACEMENTS

The Donegal tutor post was advertised and Dr Rajesh Rajpal, Letterkenny, was appointed in November 2016.

TUTOR INDUCTION COURSE

This was held on 15 December 2016. All the technical and reporting arrangements were explained and agreed. The choosing of topics, design of a meeting plan, and briefing and debriefing arrangements were also explained and agreed.

NEED FOR NEW TUTORS

The case for the HSE to provide the resources to employ at least five extra tutor posts continues to be made to both the HSE and the Department of Health.

The network also requires additional funding for the annual cost of tutor workshops, group leaders, group leader training courses, new equipment, the replacement of equipment and meeting room hire on all schemes.

GROUP LEADERS

The tutor may facilitate and lead all of the groups or may delegate the leadership function to a group leader (GL). Each tutor is responsible for organising educational activity in the SGL format for, on average, 4 separate groups per month or 32 meetings per year.

With the increase in participant numbers, the tutors, particularly in urban areas, had to form more groups and then identify GPs who would be willing to lead these new groups for a year. There is a mechanism in place whereby any new groups/GLs in excess of those already sanctioned have to apply to the National Director and the CEO of the ICGP for permission to go ahead.

The HSE funding for group leaders is capped at €50,000 per annum. The ICGP spend on group leaders in excess of the HSE budget was €27,250 in 2016. On behalf of the CME Tutor Network I would like to record my thanks to the ICGP for the support given to date.

Further meetings on the matter of funding are scheduled for 2017.

Not all of the requests for 2016 were needed. I had a meeting with the new ICGP CEO, Mr. Fintan Foy, on 30 March 2017 on budgets to assist the network in 2017. I hope the College Board will be in a position to grant the requested items in 2017. The Budget lines for 2017 are similar to 2016, unless there is a positive response from the Department of Health/HSE.

GROUP LEADER COURSES

I have mentioned in previous reports that there is a need for regional courses to take place annually. All group leaders need regular training in how to lead small groups. A budget is required to run these training meetings.

INTERNATIONAL MEETINGS

The tutor network presented at the first international EURACT Conference in the Biosciences Unit, Trinity College, Dublin on 9 September 2016.

SCHEME EVALUATION VISITS 2016

For the first time, all the quarterly scheme visits took place on the same date – 7 December 2016. The Waterford, Cork City A, Cork City C schemes with respective tutors Dr Stephanie Dowling, Dr Ken Harte and Dr Donncha O’Cuil hosted the visit teams. I want to especially thank the extern visitors, Dr John Cox and Dr Tony Cox for making themselves available and for their insights and contributions to the visits. I also wish to thank the visiting tutors for their involvement in preparing the reports.

SCHEME RECOMMENDATIONS

The reports are considered by the ICGP Education Governance Committee. All schemes and tutors visited were deemed satisfactory, with all tutors working to and beyond their job specification and all should remain in post. It is unfair on tutors to expect them to look after more than five groups and it is unfair on participants if the numbers attending meetings are too large to allow an effective transfer of knowledge and effective learning to take place. The HSE is informed of the successful outcome of the evaluation visits.

SCHEME EVALUATION VISITS PLANNED FOR 2017

The visits will be to Merrion, West Cork, Galway B, Clare, Bray/Avoca, W.Stokes/Mt. Carmel schemes. The visit to West Cork took place on 6 April 2017. The visit to Galway B scheme will take place on 5 May 2017. The visit to Merrion will be on 19 June 2017. The remaining three visits will take place in Q4, 2017.

FUTURE PLANS

I look forward to working with the new ICGP CEO, Mr Fintan Foy. His experience in his former role as CEO of the College of Anaesthetists will be invaluable in his new role as the ICGP CEO. I plan to meet Minister of Health, Simon Harris, in the near future. The aim of the meeting will be to give practical effect to the commitment to “increase the availability of continuing medical education tutors for CPD”.

CONCLUSIONS

There is an urgent need to fund at least five extra tutor posts. A decision is needed to restore the establishment grant, agree fair depreciation rates and restore the replacement of equipment grants. The stock of laptops used by the tutors now needs to be renewed. It is critical that existing funding is maintained and that funding for new tutors is secured. Group Leader courses need to be supported. I hope Minister of Health, Simon Harris, will ensure the continued funding of the CME Tutor Network under all the above headings.

Women's Health Programme Report

AUTHOR | DR MIRIAM DALY, PROGRAMME DIRECTOR



PROGRAMME MEMBERS

- Dr Miriam Daly – Programme Director
- Dr Deirdre Lundy – Tutor and Course Coordinator
- Jana Pickard – Administrator

SUMMARY OF THE PROGRAMME

The Women's Health Programme aims to provide educational support in women's health for primary care professionals, contribute to the ICGP's policy development in women's health and present the GP perspective on women's health in consultations with external agencies. The LARC Programme aims to advise on the training and certification for insertions and removal of long acting reversible contraception (LARC) devices in general practice. The Reproductive and Sexual Health (RSH) Committee, which meets quarterly, advises the Women's Health Programme and awards the Certificate in Contraception and the Advanced Certificate in LARC.

PROGRAMME ACTIVITIES IN 2016

- 85 Certificates in Contraception were awarded in 2016.
- We ran two Reproductive and Sexual Health Theory Courses. This course serves as an update for GPs and also as Part I training for the Certificate in Contraception.
- We ran two Certificate in Contraception Practical courses as Part III training for the Certificate.
- We ran two Contraception Tutor courses to train new tutors who can provide Part III training for the Certificate in Contraception.
- In 2016, 63 Advanced Certificates in LARC were awarded. The Experienced Insertion route to this certificate was closed for a period in 2016 due to excess demand but this route was re-opened recently.
- We ran four LARC Tutor courses to train tutors who teach LARC insertions.
- We ran four LARC Updates which are intended as an update for GPs who are inserting or interested in inserting LARC devices.
- We continued to run the GP led clinic at the National Maternity Hospital, Holles Street, for inserting intrauterine devices (IUDs). In 2016, 12 GPs received training in IUD insertions at this clinic.

- We provided experienced GPs to run the new GP led IUD clinic in the Rotunda Hospital and this will become a teaching clinic this year.
- We began developing two new e-learning courses, the Contraception e-learning module and LARC e-learning module which will be launched mid-2017.
- We began developing a Menopause Education Programme and ran 4 workshops on menopause which proved very popular among members.
- We ran a Women's Health Study Day in conjunction with the ICGP Summer School in June 2016.
- We ran 3 masterclasses on sexually transmitted infections.
- We ran three cervical smear takers courses.
- A multi-modal service evaluation was undertaken for the first full year of operation of the GP led IUD clinic in the National Maternity Hospital. This included a clinical audit of all patients seen, postal patient satisfaction survey, online trainee survey and semi-structured interviews with staff and sponsors.
- We completed a qualitative study on Gonorrhoea Diagnosis and Management in Primary Care in Ireland.
- Members of the Women's Health team represented the ICGP on several external committees, including committees associated with the HSE Sexual Health and Crisis Pregnancy Programme, HIQA and CervicalCheck.
- Members of the Women's Health team responded to clinical queries from ICGP members on women's health clinical issues.
- Throughout the year we sourced authors and topics for a women's health series in Forum and provided speakers on women's health topics at College conferences.

In 2016, a total of 690 people attended Women's Health Programme courses.

Disease Surveillance Sentinel Practice Network Project Report

AUTHOR | DR MICHAEL JOYCE, PROJECT LEADER

I run this 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 61 sentinel practices spread throughout the country. There is a particular emphasis on the surveillance of influenza.

PROJECT BACKGROUND

This project was set up in 2001 to address the need to monitor certain infectious diseases in the community, especially influenza. The aim was to recruit practices that had a high level of recording of computerised information in their practices already. This meant that when a GP saw a case with one of the index conditions, he/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 stakeholders were very pleased. Initially, there were 20 practices involved, all using Health One software. The conditions covered were influenza, chicken pox and shingles. Health One was chosen in particular because of its suitability for this type of project. Now there are 61 practices involved including some practices which use software other than Health One. Measles, mumps, rubella and gastro-enteritis have been added to the conditions that are covered.

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

EDUCATIONAL AIMS OF THE PROJECT

- Illustrate the use and application of computerised practice.
- Demonstrate the power of data available and collected in general practice.

BENEFITS OF THE PROJECT TO MEMBERS

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

PROJECT ACTIVITIES

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

The results of the surveillance are available at <http://www.hpsc.ie/A-Z/Respiratory/Influenza/SeasonalInfluenza/Surveillance/InfluenzaSurveillanceReports/20162017Season/>.

EUROPEAN STUDY

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 each season since. A paper on this was published in the IMJ – Volume 105 no. 2, Feb 2012, pages 39 to 42. This project has continued in the 2016/2017 season.

PROJECT MILESTONES / DELIVERABLES / OUTPUTS

Previously, surveillance was carried out from week 40 to week 20 but now takes place throughout the entire year.

With 61 participating practices, we now have the recommended 5% population coverage. Some limited further recruitment is possible to cover areas that have poor coverage but no significant increase in the number of practices is planned. Practices once recruited to the network tend to remain in the network. This is good in that it provides consistency, and such a high retention rate of practices is, I believe, a tribute to how well the network runs.

ACHIEVEMENTS TO DATE

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

FUTURE PLANS

Continued surveillance is planned.

FUNDING SOURCE

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

Substance Misuse Programme Report

AUTHOR | DR ÍDE DELARGY, SUBSTANCE MISUSE PROGRAMME DIRECTOR



OTHER MEMBERS OF THE PROGRAMME

Assistant Programme Director: Dr Des Crowley

Clinical Audit Facilitator: Dr Marie Claire Van Hout

Administrator: Ms Aoife McBride

Chairperson Audit Review Group: Dr John O'Brien

SUMMARY OF PROGRAMME OBJECTIVES

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

TRAINING

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

Foundation Course in Substance Misuse

This course replaces what was formerly called Level 1 Training.

- The Level 1 curriculum and format was reviewed in 2015 with the result that the new Foundation Course in Substance Misuse has been available since early January 2016. This course is open to all GPs and all GP registrars are encouraged to complete the course as part of their training. Completion of this course will be required in order to apply for a HSE Level 1 contract.
- 119 participants undertook Foundation Course training

Certificate Course in Substance Misuse and Associated Health Problems

- The aim of this course is to provide course participants with the theoretical framework to assess, manage and refer appropriately patients who misuse substances. The course is delivered in an e-learning environment through a combination of online modules, interactive workshops and practice-based work, reflecting the major, current and debatable health issues in substance misuse.
- This course now constitutes the academic training component of Level 2 Training.
- May 2016: 17 people completed Course 4
- October 2016: 18 people commenced Course 5

CONTINUING PROFESSIONAL DEVELOPMENT (CPD)

Audit

Clinical Audit for GPs participating in the Methadone Treatment Protocol

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

- No. of self-audits carried out in 2016: 181
- No. of external audits carried out in 2016: 11

The Audit Review Group meet met several times in 2016.

DEVELOPMENTS IN 2016

Publications

General Practitioners Participating on the Methadone Treatment Programme

- A survey was issued to explore GP attitudes to the Methadone Treatment Protocol (MTP) and what additional services might support GPs in their work with opiate users. It explored levels of satisfaction with training received and assessed whether any obstacles or barriers exist to taking patients on the MTP.
- Delargy, I., O Shea, M., Van Hout, MC., & Collins, C. (2016). *A Survey of General Practitioners Participating on the Irish Methadone Treatment Programme: Profiles and Attitudes. Heroin Addiction and Related Clinical Problems*. Published online before print 23 March 2016.
- Van Hout, MC ., Collins, C., Delargy, I., & Crowley, D., (2016). *Irish General Practitioner (GP) Perspectives Toward Decriminalisation, Legalisation and Cannabis for Therapeutic Purposes (CTP)*. *International Journal of Addiction and Mental Health*. Early Online.

NEW DEVELOPMENTS FOR 2016-2017

- Managing Problem Alcohol & Drug Use in Primary Care – Substance Misuse Programme Conference, 27 May 2017. www.icgp.ie/SMPCConf2017.

- National Conference Focus Group on addressing barriers and enablers to roll out of OST nationally – February 2017.
- Plans to develop and implement a series of webinars for ongoing CPD of GPs participating on the MTP.
- Supporting primary care research projects in the area of addiction in primary care

REPRESENTATION ON NATIONAL BODIES AND AGENCIES

- **National Traffic Medicine Main Working Group and Subgroup on Substance Misuse (RCPI) – ongoing**
The Director of the Substance Misuse Programme represents the ICGP on this working group.
- **National Advisory Committee on Drugs**
The Director of the Substance Misuse Programme represents the ICGP on this working group. Dr Hugh Gallagher also represents the ICGP on the Treatment and Rehabilitation Subgroup
- **Methadone Implementation Committee**
The Director of the Substance Misuse Programme represents the ICGP on this working group which met on a quarterly basis.
- **Ana Liffey Steering Committee**
The Director of the Substance Misuse Programme represents the ICGP on this NGO.
- **Faculty of Pain Medicine**
The Director of the Substance Misuse Programme represents the ICGP on the Board of this Faculty

Mental Health Programme Report

AUTHOR | DR BRIAN OSBORNE, ASSISTANT DIRECTOR OF THE PRC, AND DIRECTOR OF THE MENTAL HEALTH PROGRAMME



The elements of the Mental Health Project that are currently in development will enhance the delivery of mental health in general practice and primary care. The Mental health in Primary Care Project is twofold. It provides clinical advice and support in the development of educational initiatives in primary care and contributes advice from a GP perspective into national policy and programme developments. Outlined below are key developments in the past year.

Ongoing education and development of mental health services and systems in the primary care arena has been the focus of the work we have undertaken in the past 6 months.

I worked closely with Mr Pearse Finegan on the Mental Health Programme until Pearse's retirement as director of the programme in June 2016. Pearse made a valuable contribution to the ICGP in the area of mental health. I wish to express my gratitude to him for his advice and support and wish him the best for his retirement.

RESEARCH

Out of Hours Project

This joint project by the ICGP and Caredoc examined the referral pathways of patients with mental health issues to general hospital or their GP to ascertain the frequency and uptake of advice. The results were published and announced at the Annual Conference & AGM in May.

We intend to follow up on this research with a further study with regard to the patients subsequently seen in A/E from the first study and also to try to ascertain the numbers of patients with mental health problems overall seen in A/E during the same period.

Physical Health of Patients with Enduring Mental Illness

Funding for the proposed research with regard to the care of the physical health for patients with severe and enduring mental illness was approved by the HSE and the initial process of interviewing GPs involved in the project commenced in October 2016.

The overall aim is to develop and assess a standard protocol to aid the health professional in the monitoring and treatment of the physical health of patients who have a severe mental health illness presenting in general practice/primary care.

The specific objectives of this project are:

- Establish baseline data on the health of patients with severe mental illness from general practice in Ireland
- Obtain the views of service providers and users on needs, barriers and intervention design
- Pilot and assess an intervention aimed at improving the physical health of people with severe mental health illness

HSE SERVICES SUPPORTED BY THE ICGP

Counselling in Primary Care

The introduction of counselling in primary care is a major benefit to many patients who need assistance with mental health issues in primary care. Numbers obtained from the HSE show that between July 2013 and July 2015 there were 30,011 referrals. 10,496 patients were seen and 63,576 counselling sessions were attended. The HSE carried out a feasibility evaluation process on this in the southeast which showed significant reductions in levels of distress for 96% of patients and significant improvements in health-related quality of life measures for those who had counselling.

Suicide Crisis Assessment Nurse

The development of the SCAN service is ongoing. We are updating our GPs about these through meetings at faculty level and at conferences. NOSP are currently evaluating this service and will furnish us with details of this evaluation when available. To date, numbers have been low. There may be an alteration of this service depending on the evaluation. There are still no results of this evaluation.

CONFERENCE

Winter Meeting 2016

Mental Health Sessions at the 2016 Winter Meeting – The plenary session at the Winter Meeting was on mental health. Suicide or Survive (SOS) gave an excellent presentation which was very well received. On foot of this, the director of the Galway GP training scheme arranged for SOS to present to their trainees. I would like to thank Mr Nick Fenlon and Dr Laura Noonan for their assistance in facilitating the plenary session.

MEETING WITH HELEN MCENTEE TD – MINISTER FOR MENTAL HEALTH AND OLDER PEOPLE

Dr Brendan O'Shea, Dr Claire Collins and I met with Minister McEntee on 10 November 2016 in Leinster House where we discussed an overview of general practice and mental health, primary care teams and mental health representation, CIPC, SCAN and our research as detailed above. Minister McEntee has agreed to open the EGPRN Conference in October 2017.

EDUCATION

Statistical data relevant to this report, e.g. the number of training sessions, trainees, support groups, one to one counselling, web hits, phone calls, etc.

The ICGP has many varied educational programmes which are delivered through our elearning modules, CME groups, faculty meetings, and ICGP events.

A total of 807 GPs completed ICGP elearning modules in mental health in 2016.

In addition, 500 DVDs on suicide were requested by practices around the country and distributed to them.

GPS TAKE CARE PROGRAMME

The 'GPs Take Care' programme was developed by Dr Claire Hayes with the support of Pearse Finegan as a means of introducing GPs to practical, evidence based methods of self-care. We delivered four full days of the 'GPs Take Care' programme with 15 participants on each programme. This was evaluated by a questionnaire at the end of the training. Positive feedback was received which indicated that the objectives of the day had been achieved in an interactive, effective and enjoyable way.

FUTURE PLANS

1. Development of an operational plan to detail the ICGP's role in supporting the implementation of *Connecting for Life is Ireland's National Strategy to Reduce Suicide (2015-2020)*.

In addition to the programme of work the ICGP currently undertakes to support the education and development of mental health services and systems in primary care, via funding provided by NOSP, the ICGP could support a number of actions that are identified in the recently released *Connecting for Life* strategy through the following:

- Expert representation on committees/working parties in the development of guidelines and initiatives (I am on the Connecting for Life Committee)
- Develop elearning modules
- Develop a masterclass and Mental Health Certificate
- Continue to work with the NOSP on the effective use and expansion of the SCAN service and possible alteration of that role
- Continue to develop and deliver GPs Take Care
- ICGP support for the expansion of the CIPC service
- Connecting for Life will form part of the developments within our educational programmes

2. Mental Health Sessions at the Annual Conference & AGM – Adolescent Mental Health

It is proposed that Dr Elizabeth Barrett will run an hour long work shop on Saturday morning at the Annual Conference & AGM on adolescent mental health with a focus on eating disorders.

3. I will be a member of the steering group for the physical health project on patients with severe and enduring mental illness. An abstract of this has been submitted to AUDGPI for March 2017.

Quality and Standards Committee Report

**AUTHOR | DR VELMA HARKINS,
CHAIR OF THE QUALITY & STANDARDS COMMITTEE**



QUALITY AND STANDARDS COMMITTEE MEMBERS IN 2016

Dr Velma Harkins (Chair)
Dr Sheila Rochford
Dr Brendan O'Shea
Dr Brian Osborne
Dr Harry Comber
Dr Ray Mulready
Dr Mark Walsh
Dr Brefni Reynolds

Dr John Cox
Dr Monica McWeeney
Dr Des Crowley
Dr Andrée Rochfort
Dr Nuala O'Connor
Dr Brendan Payne
Dr Paul McDonald
Ms Anne Cody

Administrative support: Ms Mairéad Delaney

SUMMARY

The Quality and Standards Committee reports to the Board of the ICGP from the following:

- Dr Brendan O'Shea, Director of the Postgraduate Resource Centre
- Professional Competence Committee
- Quality in Practice Committee
- Audit Review Committee (Substance Misuse Programme)

Their reports are detailed below.

There were several changes to the membership of the committee in 2016. Dr Margaret O'Riordan attended her final meeting as Medical Director in February. In addition, Ms Anne Cody left the committee as the patient representative. Dr Des Crowley joined the committee in October as the representative of the ARG Committee and I took over as Chair of the committee in October. I would like to sincerely thank all of the current and past members for giving up their time in order to make valuable contributions to the work of this committee.

The committee continues its endeavours to ensure that the highest levels of quality and standards are strived for and upheld in all areas of general practice.

Report of the Director of the Post Graduate Resource Centre

AUTHOR | DR BRENDAN O'SHEA



This is my first report as Director of the PRC, having commenced in post in August 2016, following in the footsteps of Dr Michael Boland and Dr Margaret O'Riordan. Their enormous and sustained contributions to the development of the College through the PRC are readily apparent in most aspects of College structure and function. The concept of the PRC was developed by Michael, Fionan O'Cuinneagain (former CEO) and their immediate contemporaries, with a view to establishing a comprehensive and evolving learning resource for established GPs. Margaret's sustained contribution, extending as it did through the particularly difficult years of the economic recession, was immediately apparent, and extended over a large range of activities, programmes, effective links and publications. The post has a requirement for the Director of the PRC to retain a substantial input in clinical general practice and I continue to work in practice two days per week, primarily in order to maintain connection with the realities and practicalities of front line general practice.

While maintaining the brief to deliver a comprehensive educational process for established GPs, the post now also includes substantial responsibility for the delivery of the ICGP Strategy, elaborated in [*Beyond 2020 – A Statement of Strategy 2016-2021*](#).

These responsibilities are achieved through a range of activities located within the PRC brief, delivered through the activities of ICGP Education, the Professional Competence Scheme, a range of specific programmes (Women's Health, Health in Practice, interaction with a range of programmes with the HSE and its agencies), specific College committees including Educational Governance, Quality and Standards, Quality in Practice, and sub committees including Quality in Practice, and Communications. The PRC works closely with the other departments in the College including Research, GP Training, and the GP Tutor Network, and is supported by administration staff, most notably Ms Yvonne Costello.

POSTGRADUATE GENERAL PRACTICE EDUCATION

The PRC supports and directs a recurring and growing volume of education and training activities delivered during the academic year, particularly through the activities of ICGP Education Team – Mr Nick Fenlon, Ms Orla Sherlock, Ms Yvette Dalton and Ms Jana Pickard. These activities include large collegial gatherings at the Annual Conference & AGM, Summer School and Winter Meeting. In addition, in 2016, the PRC hosted EURACT 2016, and conducted substantial preparatory work for the hosting of EQUIP 2017 and EGPRN 2017, thus very firmly placing Ireland at the centre of European GP education and research, and bringing a large volume of international GP expertise in direct contact with College. In 2016, the ICGP collaborated successfully with AUDGPI in running a National Conference on General Practice and Primary Care Research. This collaboration was supported in the ICGP by Dr Claire Collins and Dr Margaret O Riordan. This meeting included the

largest volume and range of Irish general practice research to date. It will become a fixture on our College calendar, and over time will develop further cohesion and synergy between general practice education and research.

Two other large educational domains include our e-learning platform, where member participation continues to rapidly increase, and the CME Tutor Network. In 2016, the College elearning platform was accessed by over 2,000 GPs on a monthly basis, and this figure is increasing. The College library continues to support the learning and research activities of a range of College members and trainees. Dr Annraoi Finnegan, Dr Claire McNicholas and the GP Tutor Network work to deliver highly valued educational support to a large and still growing number of GPs on a national basis. While the GP Tutor Network is in key respects administratively separate from the PRC, the aims and objectives are similar and complementary in a professional sense. In 2016, College committees substantially worked through proposals on further developing GP involvement in palliative care, ENT surgical skills, and heart failure, and separately had a input on a wide range of additional activities where requested and required to do so, within the broad reach of College activities.

DELIVERING THE ICGP STRATEGY

Given the period we now find ourselves in, where demand on practice is at a historical and growing level, resourcing remains substantially and critically deficient, with reference to cuts introduced following the recession, and the system wide consensus regarding the need for a comprehensively reviewed contract for general practice. A substantial part of my activities, and indeed the activities of the PRC, have, in several ways, been directed towards promoting ICGP strategy, which had been formally reviewed and updated by the Board and Council in 2015.

In particular, led by Dr John Gilman and College President Dr Gerry Cummins in August 2016, a College delegation met formally with Minister Simon Harris and Mr Fergal Goodman in the Department of Health. We subsequently delivered a formal submission to the Oireachtas Committee on the Future of Healthcare in September 2016, and continue to advocate for health system reform. The preparation required for these submissions is considerable. Included are contributions from colleagues on the College Board, in ICGP Communications, and from several ICGP programmes within the PRC, and informal consultation with individual College members on particular details.

Details of the submissions were published in Forum, and the presentations are available on the College website – www.icgp.ie/oireachtas. As we approach 2017 in the expectation that a new contract will be substantially discussed, the position of the ICGP on a range of issues important to all GPs and GP trainees is openly reflected in these detailed statements, documents and presentations.

Elsewhere, College strategy is projected in participation on the Forum of Postgraduate Training Bodies, interfacing with the Medical Council, further developing the quality and level of interaction between the College and the University Departments of General Practice, and increasingly with the Irish Practice Nurses Association. In our roles, both Dr Brian Osborne (assistant Director of the PRC) and I have the opportunity to project the concerns of College membership and the broader strategic objectives of the ICGP through participation on the HSE Integrated Health Committee, the HSE Clinical Directors Group, and on a range of committees and agencies including expert groups on hospital prescribing (HIQA), on health system reform and development ('Towards 2026' with

the RCPI), and with our own colleagues in academic general practice and primary care with AUDGPI.

CONCLUSION

In 2017, we will continue with a close focus on expanding necessary and accessible educational support and opportunity for College members, and on projecting College strategy. I would particularly like to acknowledge the valued input of Dr Brian Osborne, in his sustained contribution to the work of the PRC, and indeed the many other individuals and groups who contribute generously and effectively to the range of PRC activities.

Report of the Assistant Director of the Post Graduate Resource Centre

AUTHOR | DR BRIAN OSBORNE

SUMMARY

The role of Assistant Director of the Postgraduate Resource Centre (PRC) is wide ranging and incorporates the Mental Health Programme, submissions to the Government, committee work, ICGP representation, facilitating conference presentations, dealing with member and non-member queries and public relations, and working directly with the Director of the PRC, Dr Brendan O'Shea, when required.

PROGRAMME ACTIVITY IN 2016

Submissions

Formal submissions to the public consultation process over the past year included:

- ICGP submission to the Oireachtas Committee on the Future of Healthcare
- ICGP submission to the Oireachtas Committee on Health

I contributed to the development of these submissions along with numerous others in the college. I was one of the four members who presented to the Oireachtas Committee on the Future of Healthcare in September 2016.

Mental Health Programme (refer to the Mental Health Programme report)

The Out of Hours Project

This joint project by the ICGP and Caredoc examined the referral pathways of patients with mental health issues to general hospital or their GP to ascertain the frequency and uptake of advice. The results were published and announced at the Annual Conference & AGM in May.

The main findings of the study were:

- Over a one year period, there were 3,844 out of hours presentations where the patient presented with a physical complaint that had a mental health component or mental health issue, based on key word search.
- Among these consultations, depression was noted in 54.7% of consultations, anxiety for 36.8%, risk of or threatening suicide for 34.8%, and psychiatric condition in 31.7% of consultations.

- Overall, 9.3% were referred by the out of hours GP for follow-up to a hospital emergency department or were advised to attend their own GP.
- Those who attended the out of hours with suicide attempt/ideation, self-harm or erratic/irrational behaviour were more likely than other groups to be referred for follow-up.
- During Phase 2, over a six-month period, a total of 104 patients who were advised to attend their GP or ED following their consultation with the out of hours GP were tracked. Twenty-seven patients were referred back to their GP, of which the follow-up call to the GP revealed that 44.5% did not attend. Seventy-seven patients were referred to the hospital services, of whom, 37.7% did not attend.

Physical Health of Patients with Severe and Enduring Mental Illness

- Funding for the proposed research with regard to the care of the physical health for patients with severe and enduring mental illness was approved by the HSE and the pilot commenced in October 2016. The overall aim is to develop and assess a standard protocol to aid the health professional in the monitoring and treatment of the physical health of patients who have a severe mental health illness presenting in general practice/primary care. Abstracts were submitted and accepted by the World Integrated Care Conference which is taking place in Dublin in May 2017 and for the European General Practice Research Network (EGPRN) Conference which will be held in Dublin in October.
- Suicide or Survive (SOS) presented at the plenary session at the Winter Meeting. This was well received and there was a lot of positive feedback.

Committees

I am a member of the following committees:

- Education Governance Committee
- Professional Competence Scheme
- Quality and Standards
- Quality in Practice
- Project Development Group

ICGP External Representation

- Forum of Postgraduate Training Bodies Subcommittees:
 - Professional Competence Subcommittee
 - Quality and Risk Subcommittee
- Medical Council/PSI joint working group on Safe Prescribing and Dispensing
- Connecting for Life Steering Group
- National Quality and Safety Committee
- HIQA Medication Safety Advisory Group
- National Clinical Advisory Group for Pathology

Conferences

- Facilitated Paediatric Workshop at the AGM

- Facilitated Suicide or Survive (SOS) plenary session at the Winter Meeting
- Attended ICGP Summer School
- Attended EQUIP

Informing Members of Issues

There were numerous communications with regard to the Zika virus and members were emailed with updates, advice and appropriate links

Member and Non-Member Queries

There was a large volume of queries from members and non-members. These varied from providing clinical support and advising members on practice management, to advising members of the public on accessing GP services.

External Representatives

The ICGP is very grateful to GP representatives on committees external to the ICGP. A list of these groups can be found at www.icgp.ie/ICGP_Representatives.

Communications

I provided written information for a series of reports on young people and mental health for RTE One Drivetime reporter Della Kilroy. This was broadcast in January 2017.

I provided articles for Forum including for the news section and case vignettes.

FUTURE PLANS

The work streams as listed above will continue. I will also be joining the National Healthcare Quality Reporting System Governance Committee from March 2017.

The Forum of Postgraduate Training Bodies has nominated me as a Forum representative on the Medical Council Performance Assessment Working Group.

The physical health project on patients with severe and enduring mental illness will continue to roll out in 2017 and will be presented at two conferences as listed above. I will continue to be a member of the steering group for this project.

I will be presenting to the Connecting for Life Steering Group (Ireland's National Suicide Prevention Strategy) in May 2017.

Mental health sessions will be facilitated again at ICGP conferences in 2017.

ADMINISTRATIVE SUPPORT

I am grateful for the excellent support provided by Yvonne Costello and Aoife McBride.

Professional Competence Scheme Report

**AUTHOR | AOIFE MCBRIDE,
PROFESSIONAL COMPETENCE SCHEME ADMINISTRATOR**



The ICGP Professional Competence Programme is overseen by the Director and Assistant Director of the ICGP Postgraduate Resource Centre, Dr Brendan O'Shea and Dr Brian Osborne, respectively. It is administered by Ms Aoife McBride and Ms Michelle Dodd. A committee oversees and monitors the development of the Scheme and is chaired by Dr Ray Mulready.

The committee representation includes Dr Claire Collins, Dr Mary Favier, Mr Nick Fenlon, Dr Henry Finnegan, Dr John Gillman, Dr Mary Glancy, Dr Brian Osborne, Mr Fintan Foy, Dr Mary Sheehan, Dr Brendan O'Shea and Ms Aoife McBride.

Former committee members Dr Margaret O'Riordan, Mr Kieran Ryan and Ms Jantze Cotter contributed significantly to the scheme prior to stepping down in 2016.

SUMMARY OF THE PROGRAMME

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

PROGRAMME ACTIVITIES IN 2016

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

Supporting enrolees with their maintenance of professional competence

- PCS helpdesk support continues to be well utilised.
- The retired GP Group for GPs is no longer in active clinical practice. This group now has 35-40 people attending their monthly group meetings. They have produced resources that have been used to run workshops and have undertaken research in the area of GP retirement and the history of general practice in Ireland.
- Offering advice and support to GPs who are not currently meeting the IMC's PCS requirements.

- Additional support is proactively offered to doctors who had not recorded any CPD activity
- Tailored feedback is given to doctors who had shortfalls identified
- The automation of CPD activity has been actualised, with codes provided for all ICGP events. The online application process generates the code, which can then be entered via the mobile version of the ePortfolio at the time of attendance. This automates the CPD credits and certificates of attendance directly into the individual GP's ePortfolio.
- Innovatively using resources to deliver best practice education programmes to reflect ongoing professional development needs. This involves catering to different learning styles e.g. elearning, face to face courses, and providing a menu to enable self-selection based on development need.
- Ongoing CPD recognition in excess of 1,800 activities per year.

Keeping PCS information up to date

- Maintaining the dedicated PCS section on the website, including the guides, audits and FAQ pages. The PCS section is one of the top areas on the website accessed by external users.
- Guideline document to support first time users applying for CPD recognition.
- Guideline document for entering the CPD-R code onto the mobile version of the ePortfolio
- Submitting monthly FAQs to Forum journal and ensuring that all changes and key dates are included in the ICGP ezine.
- Where necessary, sending email correspondence to all enrolees to update them on important changes.

Undertaking the contractual arrangements in accordance with IMC agreement

- Preparing the annual PCS quantitative, qualitative and financial reports for the IMC.
- Carrying out the Annual Verification Process on a random sample (3%) of enrolees to ensure that their records are in keeping with the Medical Council guidelines.
- Engaging with the IMC on any PCS requirement issues that directly impact GPs.
- Providing the IMC with a list of the MCRN for all doctors enrolled on the ICGP PCS, as per our arrangements with the Medical Council.
- Ensuring that GPs report sick/maternity leave in excess of 3 months so this can be noted on their Statement of Participation in accordance with Medical Council requirements.
- Ensuring information is accurately updated on all Statements of Participation.

We continue to advocate on our enrolees' behalf through active participation on the Forum of Postgraduate Medical Training Bodies, the PCS subcommittee, and regular engagement with the IMC as the schemes evolve. We will continue to represent the views of GPs through these forums as the schemes evolve.

PROPOSED DEVELOPMENTS

The PCS team endeavours to keep up-to-date with new developments and to explore and invest in new technologies and supports that we believe will benefit enrolees. Some planned developments include:

IT

- A CPD-R code will be rolled out for all ICGP recognised CPD activity in 2017.
- Developing the ePortfolio to create additional options for the recording of planned CPD/PCS activity by GPs.
- Updating and developing the available online tools.

SUPPORT

Further development and expansion of our range of clinical/practice audits in conjunction with the ICGP Research team.

o Provision of timely and supportive email correspondence to all GPs who have met their CPD requirements to inform them of this and to provide encouragement for future years.

The successful implementation of the Scheme can be attributed to the PCS Department and a range of dedicated ICGP staff, the PCS Committee/Subcommittee members and feedback from the scheme's enrolees.

Quality in Practice Committee Report

**AUTHOR | DR NIAMH MORAN,
QUALITY IN PRACTICE PROJECT OFFICER**



SUMMARY

The ICGP Quality in Practice (QIP) Committee was established in 2004 and is a subcommittee of the Quality and Standards Committee. It coordinates the production of guidelines for use in general practice on a range of clinical and non-clinical 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 and other medical colleges, and reviews requests by other agencies for the ICGP to endorse guidelines for use in general practice. A review of outside documents is a growing work of the committee.

The Quality in Practice Committee supervises the competition for the annual ICGP Quality Improvement Awards.

It also assesses requests for the use of the ICGP logo in publications by external agencies.

COMMITTEE MEMBERSHIP

Dr Harry Comber (Chair)
Dr Niamh Moran (Project Officer)
Dr Paul Armstrong
Dr Patricia Carmody
Dr Regina Codd
Dr Harry Comber

Dr Mary Kearney
Dr Brian Osborne
Dr Maria O'Mahony
Dr Ben Parmeter
Dr Philip Sheeran Purcell
Dr Patrick Redmond

The Project Officer's post provides for two sessions per week to support the committee in view of the considerable and increasing workload.

Administrative support: Ms Janet Stafford

COMMITTEE ACTIVITY

There were five meetings in 2016. A considerable amount of preparatory reading is involved for each meeting. Members review and discuss documents on the agenda on a secure area of the ICGP website in advance of the meetings.

Key activities in the past 12 months

1. Quick Reference Guides (QRGs)

During the course of 2016, new QRGs were published and existing documents due for review were updated. In the interests of cost and in order to facilitate the rapid updating of content, a decision was made to make the guides available online only. They are available at www.icgp.ie/QRG.

1.1 New QRGs produced (all guides are available at www.icgp.ie/QRG):

- Acne
- Chronic Renal Failure
- Febrile Convulsions
- Women and Epilepsy

1.2 QRGs updated (all guides are available at www.icgp.ie/QRG):

- Epilepsy (Now three documents; Epilepsy, Febrile Convulsions and Women and Epilepsy)
- Depression in Primary Care
- Guidance for General Practitioners (GPs) on the Management of patients with Depression and referral to Specialist Mental Health Services
- CV Disease Prevention

1.3 New QRGs in development:

- The Abnormal FBC
- Abnormal LFTs
- Management of Chronic Pancreatitis in Primary Care
- Allergy in Children
- Opiate Substitution National Treatment Guidelines – An easy to use desk-top version of the key clinical points in the guidelines is being developed

1.4 QRG updates in progress:

- Prostate Cancer
- Child and Adolescent Mental Health Diagnosis and Management
- Lesbian, Gay & Bisexual Patients Quick Reference Guide – This will be updated to also include issues pertaining to transsexual patients.

1.5 Review of proposals for new QRGs

The project officer received enquiries regarding new QRGs and the committee reviewed proposals. Work is carried out in deciding which are appropriate for new QRGs, for example the topic of guidance on return to play after concussion in sport came up this year as an area for a potential guideline. The project officer had a meeting with Mr Nick Fenlon, Dr Brian Osborne and Dr Adrian McGoldrick. The outcome was the conclusion that there are good concussion guidelines in existence such as SCAT3, IRFU, and GAA guidelines, and that a learning module rather than a guideline is going to be developed in this area for GPs.

1.6 Audit tools for the new QRGs

- Authors are encouraged to provide audit tools for QRGs.

2. The HSE and other agency publications and documents reviewed in 2016:

- Hereditary Haemochromatosis Model of Care
- Healthlink Endoscopy Electronic Referral System Pilot
- NCCP NMSC GP Guideline 18/4/16 Draft – QIP response
- Ophthalmology Specialist Referral form
- National Medical Laboratory Information System and Guidance re tests
- PEDRN – Policy for the Pronouncement of Expected Death by Registered Nurses (final draft)
- Heartwatch targets
- NCCP NMSC GP Guideline Final Draft
- NCCP/HSE Ovarian Cancer Guidelines
- Model of Integrated Care for Patients with Type 2 Diabetes

3. Supervision of the QIP Awards

The annual ICGP Quality Improvement Award was sponsored by Medisec in 2016 and was presented at the ICGP AGM in May 2016. See www.icgp.ie/qualityaward.

ONGOING IMPROVEMENTS

Visibility

Members are notified by email when a new QRG is published sent the hyperlink to it, and there is a news item in forum and the quarterly College ezine with a summary of the new document/update.

Links with Education

The Quality in Practice Committee liaises with the Education Department to ensure coordination on the production of quick reference guide publications and elearning modules. Links can be added to elearning modules from QRGs, e.g. diabetic foot in diabetes guidelines, childhood obesity, etc.

The committee plan that the ICGP Quick Reference Guide page will be developed as a first stop for GPs to access up-to-date guidelines and we have reworked our page to make it more user friendly. See www.icgp.ie/QRG.

Webpage Redesign & External Links

In 2016, the QRG webpage was redesigned to be more user friendly. In addition, useful external links were added alongside the QRGs on the same webpage. These sites have been reviewed by QIP Committee members. See www.icgp.ie/QRG for more information.

FUTURE PLANS AND CHALLENGES

The QIP Committee is cognisant of the workload and practical implications for GPs in relation to documents endorsed by the College. An ongoing challenge is the increasing number of requests to review lengthy documents by third parties, some of which refer to work practices that are not implementable with current resources. The committee is mindful of this in its feedback on documents/guidelines from outside agencies and highlights that realistic resources will be needed to implement any new work practices in general practice. There have been instances where the committee has had to refer documents to the Board of the ICGP.

Joint Guideline with Australian College GP Update – Dr Niamh Moran met with the Director of Education of the Royal Australian College of General Practice at the ICGP AGM in May 2016 to explore a possible collaboration on a guideline as suggested by Mr Dermot Folan as an educational experience for both colleges in guideline development.

Work is also ongoing on:

- Providing audit tools on the QRGs
- Ensuring our work remains user friendly and relevant for members
- Raising awareness of the guides amongst GPs and GP trainees
- Maintaining high standards for patient care
- Keeping the workload manageable for committee members

Director of Quality Improvement Report

**AUTHOR | DR ANDRÉE ROCHFORT,
ICGP DIRECTOR OF QUALITY IMPROVEMENT**

POSITIONS HELD BY DR ANDRÉE ROCHFORT

- ICGP representative at EQuIP (Wonca Europe Network for Quality and Safety in General Practice / Family Medicine – www.equip.woncaeurope.org)
- EQuIP Executive Board member
- EQuIP Honorary Secretary
- Member of the Wonca Europe Executive Board (as the EQuIP representative to the Board until the term ended in November 2016).

SUMMARY OF THE PROGRAMME

The role of the Director of Quality Improvement is to promote quality improvement activities in general practice, to design and deliver educational initiatives on [National Standards for Safer Better Health Care](#), to coordinate guidance on occupational health and safety issues in general practice and to liaise with the Wonca Europe EQuIP Network for Quality and Safety in General Practice. The role also includes improving the quality of healthcare for Irish GPs through the ICGP Doctors' Health in Practice programme (refer to the Doctors Health in Practice report).

PROGRAMME ACTIVITIES AND OUTPUTS IN 2016

- Education / raising awareness
- ICGP Diploma in Practice Management – Stress Management module and workshop
- ICGP Diploma in Practice management – Health & Safety module and workshop
- Retired GP Discussion Group – “From graduation to retirement, adverse events can impact on doctors’ health - how can we help?”
- The ICGP was invited to participate in a HSE Working Group on Patient Empowerment in Chronic Conditions in 2016. Dr Andrée Rochfort represented the ICGP.
- Patient safety in general practice was the theme for 2016 annual EQUIP spring conference in April. EQuIP Patient Safety in Primary Care Conference 2016 – “Assessment by GPs of a GP’s capacity to deliver safe care during illness”. Workshop to explore GP skills and indications for referral.
See www.equip2016.cz.
- Swiss Medical Association Doctors Health Conference, Bern – “The path the ICGP took to a physician health programme in Ireland - Where we are today and what are the challenges for the future?”
- Summer School Workshop 1, (June). The personal and professional impact of an adverse event at your practice interactive small group workshop with the Retired GP Discussion Group.

- Summer School Workshop 2 (June). HIQA Preparation – “The GP employer’s role in practice staff induction and CPD”, with HSE nurse tutors. Explored workforce theme of the HIQA wheel.
- RCSI Charter Day (February). The role of the GP in doctors’ healthcare.
- UCD GP Trainees Self Care Awareness Day – “Professional v personal responsibilities”.
- Winter meeting (November) – “The impact of adverse events on the doctor” with the Retired GP Discussion Group.

PUBLICATIONS

- Forum Articles on quality improvement in GP practice
- Medical media

See www.icgp.ie/nationalstandards.

- Book Chapter. “Promoting Self-Management and Patient Empowerment in Primary Care”. Primary Care in Practice – Integration is Needed.” Dr. Oreste Capelli (Ed.), InTech, DOI: 10.5772/62763. Intech Open Books .Claire Collins and Andree Rochfort. Available from: <http://www.intechopen.com/books/primary-care-in-practice-integration-is-needed/promoting-self-management-and-patient-empowerment-in-primary-care>.

WORKING GROUP/STEERING COMMITTEE/PROJECT DEVELOPMENT ACTIVITIES

- Membership Services Committee
- Quality and Standards Committee
- Health & Safety Authority Steering Committee on the Health Sector
- HSE Steering Group to develop a Framework for Patient Self-Management in Chronic Conditions (Dr Carmel Mullaney, Public Health Dept., Kilkenny)
- HSE Steering Group for Strategy for Doctors’ Health, Health & Wellbeing Unit (Ms Rosario Mannion HSE)
- EQuIP, the Wonca Europe Network for Quality & Safety in General Practice
- EQuIP Executive Board member, holding the position of Honorary Secretary of EQuIP.
- EQuIP Working Group Leader for professional health – a new project commenced to research associations between burnout and patient safety
- Wonca Europe Executive Board member (the EQuIP representative to the Board) until November 2016.
- ICGP Convener and EQuIP Co-Chair Scientific Committee for 2017 Patient Safety Conference



Summary: 2016 outputs supported GPs in implementing the themes of the **HIQA Safer Better Care Wheel**: safe, effective and person centred care, with good leadership governance and management, safe workforce supports and management, with appropriate use of resources and information.

FUTURE PLANS

The 2017 patient safety conference is a major commitment for connecting Irish activities and European GP colleges activities in improving safety for patients and the GP workforce.

ADMINISTRATION

A special thanks to ICGP librarian Patricia Patton for her assistance in sourcing literature in 2016, and to Orla Sherlock for administrative assistance in planning the 2017 EQuIP Patient Safety Conference (www.icgp.ie/equip).

Communications and Public Relations Report

**AUTHOR | DR MARK MURPHY,
CHAIR OF THE COMMUNICATIONS COMMITTEE**



OTHER MEMBERS OF THE COMMITTEE

- Dermot Folan (Acting CEO; COO)
- Dr Brendan O'Shea (Director of the PRC)
- Laura Smyth (Website Editor)
- Marie Therese Culligan – PR Strategy Co. Ltd (External PR/Communications Consultant)

SUMMARY OF COMMUNICATIONS COMMITTEE ACTIVITY

The Communications Committee is concerned with the implementation and delivery of all ICGP communications activity. In close collaboration with the ICGP Board, ICGP communications activities in 2016 included:

- Media engagement
- Representation/lobbying
- Member communications
- Social media management
- Supporting ICGP member events and activities

Media Engagement

The ICGP receives a significant number of media queries per month – typically over 15-20. Requests include print and broadcast media. The objective is to be as responsive as possible, generally on a same day basis. The subject range includes public policy, clinical queries and ICGP specific questions from the specialist medical press, medical correspondents, and national and regional media. The ICGP is occasionally contacted by media outside the state. For example, the BBC contacted the College to comment on the structure of general practice in Ireland.

Communications Consultancy

Up to the end of December 2016, this role was performed by Marie-Therese Culligan. I would like to specifically thank her for her contribution to the College. Aileen O'Meara was appointed as the new external communications consultant in December. Aileen was formerly a health correspondent for RTE, radio producer, and journalist for the Sunday Tribune and the Sunday Business Post. We are delighted to have her expertise and knowledge on board.

Representation to the media, for an organisation as large as the ICGP – and for a profession as complex and multifaceted as general practice – would be impossible without a wider network of support. I would like to acknowledge the contribution of Dr Laura Noonan, Dr Brian Osborne and Dr Nuala O'Connor who respond to clinical issues relevant to their specific area.

Dr Mary Davin Power, together with Dr Sarah Maguire (Chair of the Membership Services Committee), have worked extremely hard to develop the ICGP Faculty network around the country.

Many GPs, through their ICGP Faculty, also engage in media activity, which is commended and this is an area we would like to develop further in the College.

Media reports referencing the ICGP are available at www.icgp.ie/InTheNews.

Representation/Lobbying

ICGP lobbying – the advocacy and representation of general practice – has been a significant feature of 2016. The spectrum of the issues is large:

- Under-funding / lack of resources
- Rising workload and increased patient expectations
- Manpower shortfalls in recruitment and retention
- Challenges faced by rural GPs and GPs working in urban deprivation
- Reduced locum cover
- Litigation and an unobserved increase in complaints, and burnout and impact on GP health

The ICGP lobbied and advocated on behalf of members to all stakeholders (the Government, ministers, TDs, government agencies, the public) and outlined robust, cost-effective solutions. These included:

A submission and address to the Oireachtas Committee on the Future of Healthcare on 28 September 2016. An outline of the solutions to the current healthcare challenges was provided to the Committee.

Dr Mark Murphy (Chair, Communications Committee), Dr Laura Noonan (Director, NEG Programme), Dr Brendan O'Shea (Director, PRC) and Dr Brian Osborne (Assistant Director, PRC) presented on behalf of the membership. The delegation strongly advocated for the immediate reversal of FEMPI, increasing funding to general practice, addressing recruitment and the retention of GPs, and the provision of a new GP contract, permitting chronic disease management.

The ICGP also relayed the challenges and solutions facing the profession to the Minister for Health, Simon Harris TD, on 24 August 2016. Dr Gerry Cummins (President), Dr John Gillman (Chair), Dr Brendan O'Shea (Director, PRC), Dr Mark Murphy (Chair, Communications Committee) and Dr Sarah Maguire (Chair, Membership Service Committee) comprised the ICGP delegation.

Member Communications and Supporting ICGP Member Events and Activities

Across ICGP membership, over 222 GPs participate in 18 ICGP committees, working groups and College activity. Members represent the ICGP on international bodies including WONCA, EGPRN, EURACT, EQUIP and UEMO. Over 50 GPs represent general practice on external bodies with state and representative agencies.

The ICGP aims to keep members informed of the range of activities relevant to them through publishing a detailed calendar of events on www.icgp.ie, the member newsletter, social media alerts on Twitter about ICGP activities and ICGP events, for example, the Winter Meeting and the Annual Conference & AGM (www.icgp.ie/education). If the College publishes a particularly significant research report or policy position, members are emailed directly by the Chairperson. Dr Mary Davin Power (Faculty Liaison Officer) and Dr Sarah Maguire (Membership Services Committee) have improved the functionality and dissemination of news to ICGP faculties and this will be a focus of 2017. I would like to thank Laura Smyth for her fastidious detail to the College website and for aiding in our communications to members.

Social Media Management

Twitter ([@ICGPnews](https://twitter.com/ICGPnews)) and Facebook continue to be an effective method for GPs to communicate with each other and for the ICGP to keep members aware of activity and forthcoming events. We encourage all members to interact with the [@ICGPnews](https://twitter.com/ICGPnews) twitter handle and to use this platform where possible. It not only represents a resource for GPs to see breaking news, but is also useful for engaging with health policy makers and journalists in the healthcare arena.

ICGP Statements Issued in 2016

- [General practice needs more resources to tackle ED Crisis](#)
- [ICGP announces the appointment of Mr Fintan Foy as CEO](#)
- [ICGP statement on HSE consultation and engagement process and online survey 'Building a Better GP and Primary Care Service - What Matters to You?'](#)
- [Friday 18th November is World and European Antibiotic Awareness Day \(EAAD\)](#)
- [ICGP response statement on the HSE's proposal to allow nurses to pronounce death in certain circumstances](#)
- [Budget 2017 has failed to deliver for patients and Irish general practice](#)
- [ICGP address to the Oireachtas Committee on the Future of Healthcare](#)
- [ICGP to appear before the Oireachtas Committee on the Future of Healthcare](#)
- [ICGP/HSE guide to referring patients abroad under the EU Cross Border Directive](#)
- [ICGP Pre-Budget Submission 2017](#)
- [College meeting with Minister for Health Simon Harris](#)
- [ICGP submission on behalf of members to the Oireachtas Committee on the Future of Healthcare](#)
- [HSE Community Health Organisation \(CHO\) Implementation Programme - GP Lead Role Development](#)
- [ICGP appoints National Director of GP Training](#)
- [ICGP appointments completed since May 2016](#)
- [Dr Brendan O'Shea appointed Director of the Post-Graduate Resource Centre](#)
- [ICGP completes series of seminars on integrated care guidelines for Type 2 diabetes](#)
- [Zika virus – information for members](#)
- [ICGP statement on World Family Doctor Day](#)
- [ICGP announces senior personnel changes](#)
- [ICGP welcomes emphasis on general practice and primary care in Programme for Partnership Government](#)
- [College announces resignation of Mr Kieran Ryan, CEO](#)
- [Study launch and award winners at this year's Annual Conference](#)
- [ICGP / Irish Cancer Society report "Access to Diagnostics Used to Detect Cancer" shows stark public – private divide](#)

- [Launch by Minister of 'A Practical Guide to Integrated Type 2 Diabetes Care'](#)
- [HSE press release: Use undertheweather.ie to manage common illnesses](#)

ICGP COMMUNICATIONS STRATEGY

The ICGP Communications Strategy comes from our members and feedback on all aspects of communications activity is very welcome. Currently, the ICGP Board is working towards implementing [Beyond 2020 - Statement of Strategy 2016-2021](#) which sets the agenda for communications activity for the ICGP.

We will continue to advocate for members and patients and for appropriate resources for the continuation of a robust general practice sector in Ireland.

The College will advocate and drive for enhanced quality of care and safety, but standards of care must be resourced and that will be a focus of our communications message. In the strategy, a core ICGP value includes *“advocacy for the centrality of general practice in the delivery of an effective and equitable healthcare system designed to meet the needs of patients including acute, chronic and continuing care”*, and a strategic goal is *“to promote the role of general practice in Irish society and develop our relationships with all stakeholders in the health services so that general practice is understood, respected and supported to deliver the highest quality of care to patients and our communities”*. In conjunction with the ICGP Board and a wide network, including the Executive, ICGP members and ICGP faculties, we will continue to implement this goal.

Report of the Library and Information Service

AUTHOR | GILLIAN DORAN, ICGP LIBRARIAN & TRISH PATTON, ASSISTANT LIBRARIAN/INFORMATION OFFICER

OVERVIEW

The ICGP Library & Information Service remains a key benefit of membership offering access to both evidence-based medicine resources and information specialists. The ICGP library is staffed by two professionally qualified librarians – Gillian Doran, Librarian, and Trish Patton, Assistant Librarian/Information Officer.

ACTIVITIES

We provide the following support for all users of the ICGP Library and Information Service. See the Milestones/Deliverables/Outputs section below for further details.

Other core services include:

- Creation of an online repository of documents related to general practice via our online library catalogue so that all users can locate documents quickly and easily.
- Liaison with various College groups (administrators, project directors, committees, etc.) and assist with each group's information needs.
- Project management of library developments.
- Keeping up-to-date with developments in our area and advising relevant College personnel of same.

MILESTONES/DELIVERABLES/OUTPUTS

- **Information queries**
Answered a range information queries from members on locating information such as clinical guidelines, articles, reports; how to reference; how to utilise the online journals; how to search the databases etc.
- **Literature searches**
Performed customised literature searches on topics ranging from Addison's Disease to Whiplash.
- **Access to online journals**
www.icgp.ie/journals provide access to 12 subscription journals plus a selection of freely accessible general practice related journals to ICGP members on a 24/7 basis. EBSCO's A-Z Portal was replaced by the Full Text Finder (FTF) in May of this year. Members were informed of this change via Forum, ICGP eZine and online via Library News and a new

user guide was produced to help members navigate this new discovery tool see www.icgp.ie/journals.

- **Examples of journals accessed by ICGP members online via the ICGP Library in 2016**
BMJ
Drugs and Therapeutics Bulletin
British Journal of General Practice
Education for Primary Care
Family Practice
- **Inter-library loan service**
Facilitated access to an inter-library loan service for journals/articles not available through the Library.
- **Training Presentations**
The library service contributed to several college meetings and events during the year, for example:
New Trainers Workshop
SCALES
North Eastern GP Training Programme
Individual one to one training sessions
- **Information Skills Module**
The library Information Skills eLearning module continued to be popular with 69 completions in 2016.
- **Discounts on Educational Resources**
The library continues to offer members discounts on educational resources including:
BMJ Learning
BMJ Best Practice
CKS/Prodigy
In 2016, a discount was also negotiated with Wolter Kluwers Health on UpToDate.
All these offers are reviewed on an annual basis and are subject to uptake by members.
- **Online Library Catalogue**
111 items were added to the online library catalogue in 2016.
- **Liaison with College Groups**
The library continued to support ICGP staff and various college groups throughout 2016 by:
Supporting the Quality in Practice Committee with referencing and literature searches for the Quick Reference Guides.
Providing information to CME tutors to resource their CME bids.
Assisting the ICGP Project Directors to keep up to date in their areas with specific email article notifications relevant to their projects.
- **History Project**
A draft version of the Retired GPs group publication on the history of the ICGP was reviewed and recommendations made.
- **Online Surveys and Evaluations**
Use of online survey software, SurveyMonkey. Co-ordinated all online surveys and evaluations on behalf of the College. Approximately 40 surveys were undertaken in 2016.
- **Publications**
'LENUS: a cornucopia of information' was co-authored by Trish Patton and Aoife Lawton

(HSE), published in the July/August 2016 issue of Forum.

A range of Help Sheets on various information topics were updated in December 2016.

- **Library Profile & Awareness**

Marketing and the promotion of the ICGP library continued in 2016 through various media available including Forum, the web, training sessions, presentations and information pages in ICGP conference booklets.

- **Networking & External Representation**

Trish is a member of the Lenus (Irish health Repository) User Group and hosted the LENUS User Group Meeting on Friday 27 May.

- **Feedback from Members**

Feedback from members received remains positive indicating high user satisfaction. We continue to take on board any suggestions where possible that we receive in order to provide a better service.

FUTURE PLANS

For 2017, we plan to focus on continuing to promote the library to key user groups and increase usage of the online journals.

Research Programme Report

AUTHOR | DR CLAIRE COLLINS, DIRECTOR OF RESEARCH



PROGRAMME MEMBERS

- Chair: Professor Andrew Murphy
- Director: Dr Claire Collins
- Research Officer: Ms Marié T. O'Shea
- Administrator: Ms Sally Anne O'Neill
- ICGP Research Committee

SUMMARY OF THE 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.

PROGRAMME BACKGROUND

The ICGP's commitment to research in primary care is evident in its Strategy 2015-2020. The ICGP research strategy "aims to create a knowledge based health service in which clinical, managerial and policy decisions are based on sound information about research findings and scientific developments".

PROGRAMME ACTIVITIES IN 2016

The following projects were completed in 2016:

- Flu vaccination effectiveness study 2016/2017, 6th European-wide study on influenza vaccine effectiveness with HPSC.
- A survey of GP experience with the work of the NCCP and their views in relation to services priorities with the National Cancer Control Programme.
- Gonorrhoea – a qualitative study on GP experience with Dr Miriam Daly.
- Domestic violence survey of GP experience with Dr Miriam Daly.
- Access to Cancer Diagnostics survey of GPs with the Irish Cancer Society.
- Minor Surgery Research Accreditation Project.
- Sexual Transmitted Infections survey of GPs services with Dr Miriam Daly.
- Secondary analysis of the National Drug Related Deaths Index (NDRDI) with Dr Ide Delargy.

Other activities undertaken:

- Travel bursaries – 9 provided in 2016 (total €4,500).
- Research and Education Grants to the value of €7,545.89 approved in 2016.

- Three Career Support Grants awarded to the value of €135,000 over three years; one funded by Pfizer.
- IPCRN management. In 2016, three new dementia tools were introduced in four vendors' PMSs (Socrates, HPM, HealthOne and CompleteGP). SPPIRE and DECIDE local tools were developed and released for pilot test. The development of the PCSA tool was completed. PHEMI tools were also completely designed. The requirement analysis and design of Asthma audit tools and update of its finder and register tools in addition to a Physical Health Monitoring (PHM) tab requirement analysis also took place in 2016.
- Introduction of "Award for Best Published Irish General Practice Research 2015"; the winners (one overall and 3 runners up) were announced at AGM.
- Upgrade of the Heartwatch programme to ensure it is up to date in terms of software and security requirements.
- Other ICGP programmes and directors were supported via advice and collaboration (Women's Health, Substance Misuse, Mental Health, Health in Practice, GP Training and Education, Quality in Practice Officer).
- Fast-track ethical review process of trainee projects.
- Participation in the full review activities of the Research Ethics Committee in addition to additional pre-submission advice to applicants.
- Oversight and administration of the Research and Education Foundation grant scheme.
- Joint AUDGPI/ICGP Scientific Meeting took place in conjunction with UCD.
- Successful in bid to host the EGRPN conference in October 2017.
- Submission of articles for publication.
- Presentation of research findings at conferences.
- Responding to queries related to research, ethics, grants and audit.
- Reviewed submissions for the QIP awards.
- English language editing of EGPRN abstracts for EJGP.
- Liaison with HRB and AUDGPI to support the development of clinical academic career pathways.

PUBLICATIONS

- Claire Collins and Andree Rochfort (2016). Promoting Self-Management and Patient Empowerment in Primary Care, Primary Care in Practice – Integration is Needed, Dr. Oreste Capelli (Ed.), InTech, DOI: 10.5772/62763. Available from: <http://www.intechopen.com/books/primary-care-in-practice-integration-is-needed/promoting-self-management-and-patient-empowerment-in-primary-care>.
- Delargy, I., O Shea, M., Van Hout, MC., & Collins, C. (2016). General Practitioners perspectives on and attitudes toward the Methadone Treatment Protocol in Ireland. Heroin Addiction and Related Clinical Problems. 18,4, pp43-50.

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.

- National representative to the European General Practice Research Network and member of its Research Strategy Committee, and the EJGP English language editor for the EGPRN abstracts.
- ICGP representative for HSE/HRB/RCPI steering group on Research Collaboration on Quality and Patient Safety (RCQPS).
- One of two ICGP representatives on the HSE Manpower Planning Committee.
- Representation on Department of Health National Clinical Effectiveness Sub-Committees.

PROGRAMME MILESTONES/DELIVERABLES/OUTPUTS

- Publications.
- Research grants obtained – five applied for; five obtained.
- Support of members in terms of professional competence audit requirements.
- Support of training schemes and trainees in terms of ethical guidance and review.
- Collaboration with external parties.
- Support of College programmes and provisions of internal data/research requirements.

FUTURE PLANS

- The action plan for 2017 focuses on internal and external collaboration, raising the profile and impact of research in the ICGP and promotion and support of GP registrar research.
- Continuation of the career support grant scheme in 2017 and 2018.
- Joint AUDGPI/ICGP Scientific Meeting to be held again in 2017.
- Hosting of the European General Practice Research Network meeting in October 2017.

FUNDING SOURCE(S)

ICGP, HSE, Pharma.

Research Ethics Committee

Report

CHAIR | DR KIERAN DORAN

COMMITTEE MEMBERS

Professor Colin Bradley, Dr Claire Collins, Dr Walter Cullen, Dr Kieran Doran, Dr Philippa Kildea Shine, Dr Teresa Maguire, Dr Cliona McGovern, Ms Gina Menzies, Mr Kieran Ryan and a patient representative (varies as required).

SUMMARY OF THE COMMITTEE'S ROLES AND ACTIVITIES

The Committee's main function is to consider research proposals involving GP or in general practice and to determine whether there are ethical issues to be addressed before the study can proceed.

It 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. It is approved under the Clinical Trials Act to approve therapeutic clinical trials.

ACTIVITIES IN 2016

The Committee held five regular meetings in 2016 during which 28 applications were considered. In addition, it held one dedicated Trainee Meeting during which we processed 26 trainee applications using the fast-track process introduced in 2012. There was also one clinical trial processed (within the terms of the Clinical Trials Act). Furthermore, new amendment and clarification forms were introduced to facilitate a review of same for both researchers and committee members. We also commenced a trial of soft, rather than hard copy, a review of applications and the introduction of teleconference meetings.

Consideration of the new EU legislation is ongoing with the Department of Health and HIQA.

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 will evaluate our trial of the soft copy review process and teleconference approach mid-2017.

ADMINISTRATIVE SUPPORT

Ms Sally Anne O'Neill

Post Graduate Training Committee Report

AUTHOR | PROF FERGUS O'KELLY, CHAIR OF THE PGTC

MEMBERS OF THE COMMITTEE

- Dr John Brennan
- Dr Richard Brennan
- Dr John Cox
- Dr Tony Cox
- Mr Dermot Folan
- Dr Michael Griffin
- Dr Karena Hanley
- Dr Velma Harkins
- Dr Martin Rouse
- Mr Kieran Ryan
- Dr Paddy Ryan
- Dr Eamonn Shanahan
- Dr Gerry Mansfield
- Dr Genny McGuire
- Dr Maria Moran
- Prof Fergus O'Kelly
- Dr Christelle Oliver-Dussault
- Dr Daragh O'Neill
- Dr Molly Owens
- Dr Brian Prendiville
- Dr Kevin Quinn
- Dr Roddy Quinn
- Dr Sheila Rochford

SUMMARY

The PGTC is the key governance committee for Postgraduate Training in General Practice. Sub-committees that report to the PGTC include:

- The National Co-ordinating Committee for Training (NCCT)
Chair: Dr Roddy Quinn
- The Accreditation Sub-Committee
Chair: Dr Genevieve McGuire
- The MICGP Examination Sub-Committee
Chair: Dr Molly Owens
- The MICGP Alternative Route Sub-Committee
Chair: Dr Richard Brennan/Project Director Dr Kevin Quinn
- The Certification Sub-Committee
Chair: Dr Eamonn Shanahan
- The Curriculum Development Sub-Committee
Chair: Dr John Cox
- The Recognition of Prior Learning Sub-Committee (established November 2016)
Chair: Sheila Rochford.

COMMITTEE ACTIVITIES IN 2016

In May 2016, the ICGP signed a Heads of Agreement with the HSE on the transfer of GP training to the ICGP. This has enabled the ICGP to proceed with plans to appoint a project manager for the Change Project. The Service Level Agreement has at this point not been signed.

At the AGM in May 2016, the ICGP launched the new curriculum for GP training and beyond. The PGTC would like to express their thanks to Dr Niamh O'Carroll, Curriculum Fellow, the Curriculum Development Committee, and Dr Gerry Mansfield for their work on this project.

In 2016, there was an increase in numbers recruited to GP training from 159 in 2015 to 172 in 2016.

In 2016, 202 GPs were elected to membership of the ICGP, 151 members were elected to membership by the MICGP Examination route, 38 were elected through the recognition of equivalent qualifications route, and 13 were elected to membership through the alternative routes.

In 2016, GP recruitment leads agreed to introduce mandatory training for all interviewers for the 2017 process. The recruitment leads must be thanked for their significant work and leadership on the continued standardising of the national recruitment process.

A second CCT Examination was held in September 2016. Significant development changes to the MICGP Examination structure were also introduced. The Examination Sub-Committee under the chair of Dr Molly Owens, and the Examination and Assessment Manager, Muriosa O'Reilly, continues to deliver best international practice in the MICGP Examination.

The Accreditation Sub-Committee undertook a number of accreditation visits in 2016 to the Western, North East and Mid Leinster Training Schemes. The accreditors are thanked for the visits undertaken during this period of change. The Chair Dr Genevieve McGuire is thanked for her ongoing commitment.

The National Co-ordinating Committee for Training, chaired by Dr Roddy Quinn – with steering committee representation from all schemes, including four trainer representatives and trainee representation – is working extremely well and has seen a significant number of policy documents being developed and ratified. These include policies on flexible training and GP registrars working in situations remotely from the practice. A number of policy documents are in development and will be presented to the PGTC in 2017 these include policies on out of hours, educational leave, inter scheme transfers, anti-bullying and trainees in difficulty.

In 2016, Dr Gerry Mansfield stepped down as National Director of Training. The PGTC would like to express their thanks to Gerry for his commitment to the development of GP training during this very challenging period of change. We wish him well in his future endeavours.

Dr Karena Hanley, former Chair of the PGTC, took office as National Director of Specialist Training in September 2016. The College is very fortunate to have someone of Karena's calibre as National Director. Karena has been involved in the development of key policy documents – including the trainee in difficulty and the trainee with a disability which is going through a process of consultation and will come before the PGTC in 2017.

A policy document entitled *Support for the Trainee Before the Medical Council* was ratified by the PGTC in 2016 and updated in January 2017 and is available on the ICGP website.

The Network of Trainees continues to grow from strength to strength. The network is well organised and very active at College and at Forum of Postgraduate Training level.

Our training practices and trainers are the backbone of our apprenticeship model of GP training. The ICGP is proud of the high standard of GP training which has been developed over the last three decades. With the continued support of our GP educators may we continue to produce excellence in graduates from our programme.

FUTURE PLANS

A key objective for 2017, subject to consultation with the relevant stakeholders and assessment of feasibility, is for the ICGP to assume responsibility from the HSE for the direct delivery of GP training in accordance with the ICGP National GP Training Programme.

A process for recognition of prior learning is in development by RPL Fellows Ms Muriosa O'Reilly and Dr Tom Dennehy, and will come before the PGTC in 2017 for approval with possible implementation for those commencing GP training in July 2017.

Proposed changes to membership through the equivalent qualifications route are being developed by the Chair of the Certification Committee, Dr Eamon Shanahan, for implementation in 2017. Dr Eamonn Shanahan is thanked for this ongoing work as Chair of this Sub-Committee.

Significant efforts to find a workable solution which will hopefully enable training schemes to resume the peer review of video recorded analysis at the training scheme site are in progress. The ICGP has begun a process of engagement with indemnifiers.

A final report on the Alternative Routes Project is due in 2017. Dr Kevin Quinn, Project Director, Dr Richard Brennan, Chair, and Ms Muriosa O'Reilly are thanked for their work on this project.

In line with our strategic objectives, the College will continue to develop, deliver and accredit the highest possible standard of specialist general practice training and assure a sustainable and adaptable workforce for Irish general practice. A re-orientating of the accreditation document to assess educational processes and outcomes on visits will be undertaken in 2017. A number of re-accreditation visits are scheduled for 2017. These include visits to Sligo, Donegal, TCD, Cork and the RCSI. Preparations for the Medical Council accreditation visit due in 2018 will also be a key objective.

The Department of Defence will recruit two doctors onto their Military Medicine Training Programme in July 2017. Graduates of this programme will hold dual qualification: as members of the ICGP and as members of the Faculty of Military Medicine. This follows the initial accreditation of the speciality of the Faculty of Military Medicine under the auspices of the ICGP in March 2017.

The College, through the National Director and CEO, continues to collaborate with other specialist bodies at forum level on projects of mutual interest and to develop international links, including links with the Royal New Zealand College of General Practice, the Danish College of General Practitioners and other GP Colleges.

A number of key policy documents which are in development are due to come before the PGTC in 2017.

ADMINISTRATIVE & MANAGEMENT SUPPORT

Ms Muriosa O'Reilly, Examinations & Assessment Manager, is thanked for providing support to the MICGP Examination & Certification Sub-Committees. Ms Sylvia Browne and Ms Pauline Tierney, GP Training Unit Administrators, are thanked for providing support to the Accreditation Sub-Committee and Recruitment Leads Group, and Ms Martina McDonnell, Manager of the GP Training Unit, for providing support to the PGTC and NCCT Committees.

Specialist Training in General Practice Report

AUTHOR | DR KARENA HANLEY, NATIONAL DIRECTOR OF SPECIALIST TRAINING IN GENERAL PRACTICE



SUMMARY

The ICGP GP Training Unit has had a very active year in maintaining the core work of supporting Irish GP Training and progressing future evolution of GP Training.

The GP Training Unit benefits from the continuing loyal service of administration staff, Ms Pauline Tierney and Ms Sylvia Browne. It is managed most ably by Ms Martina McDonnell.

Following the phenomenal work delivered by the National Director of GP Training, Dr Gerry Mansfield, I took over the post in September 2016.

ACTIVITIES IN 2016

Progressing the Transfer of GP Training

The ICGP document [Beyond 2020 – Statement of Strategy 2016-2021](#) contains goal 2.5 as follows:

“2.5. Subject to consultation with the relevant stakeholders and assessment of feasibility, the ICGP will assume responsibility from the HSE for the direct delivery of GP training in accordance with the ICGP National GP Training Programme.”

The GP Training Unit, supported by the Board and by PGTC, was heavily involved in progressing this goal in 2016. Significant accomplishments include the signing of the Heads of Agreement in May 2016, and the appointment of a Change Project Manager in December 2016.

Ms Patricia Malone, commenced her contract with the ICGP in January 2017.

Recruitment

The recruitment leads workshop has continued quality development in GP recruitment supported by the GP Training Unit. The ICGP was represented at the NDTP Careers fair on September 10th 2016. Dr John Brennan gave a very impressive presentation at this meeting. The ICGP information day for prospective applicants to General Practice Training was held on November 5th 2016. The rigour of the ICGP process was showcased at the Inaugural Education Conference of the Forum of Post Graduate Training Bodies on November 8th.

Conferences

The National Trainer's Conference was held in the Marker Hotel in Dublin on 10th and 11th March. Attendance continues to grow at this conference, with 210 present.

The National Trainee Conference was held in the Radisson Hotel, Galway on 20th and 21st of October. The Network of GP Trainees took responsibility for the academic programme of this meeting. This was a resounding success. Positive feedback from the 284 delegates who attended supports the continuation of this development.

Training Support

The Network of GP Trainees has become a valuable structure to support trainees and allow the view of the trainee to influence College policy. The network will continue to be encouraged by the ICGP.

The GP Training Unit continues to provide administrative support to the PGTC and all its subcommittees. These include the NCCT, Accreditation Sub-Committee, Certification Sub-Committee, and Exam Sub-Committee. A defined purpose subcommittee was added to the list in November 2016: the Recognition of Prior Learning Subcommittee.

The GP Training Unit continues to process applications from GP Training for Specialist Funding. The online process for this, developed in 2014, has proven its value.

The GP Training Unit continues its work on the documentation of trainee placements and leave management.

Liaison with Other Bodies

The GP Training Unit continues to interact with the National Doctor's Training and Planning Unit. As the fund holders for Medical Education in Ireland, a positive relationship with this unit is vital to future evolution in General Practice Training.

The Forum for Post Graduate Training Bodies requires universal contribution from the Training Bodies to maximise effectiveness. The ICGP have a respected voice on this Forum.

The GP Training Unit liaised extensively with the Medical Council, and in particular with the Department of Defence in developments in 2017.

International Links

The National Director of GP Training formally visited our New Zealand college counterpart, the RNZCGP in November 2016. Particular liaison was formed with the GP Training section within that college, and is expected to be ongoing.

FUTURE PLANS

Work on the refinement and improvement of the recruitment process will continue following an appraisal of the 2016/2017 intake.

A formal consultation structure to channel the opinions of all stakeholders into the change management project for transfer of GP training will be set up.

A handbook of GP Training, currently being prepared will be launched in 2017.

The post of curriculum fellow, which has been vacant for six months will be advertised and reinstated in 2017.

The GP Training unit will continue to serve, to the best of its ability, the current and future requirements of GP Training as directed by the Governance structures within the ICGP.