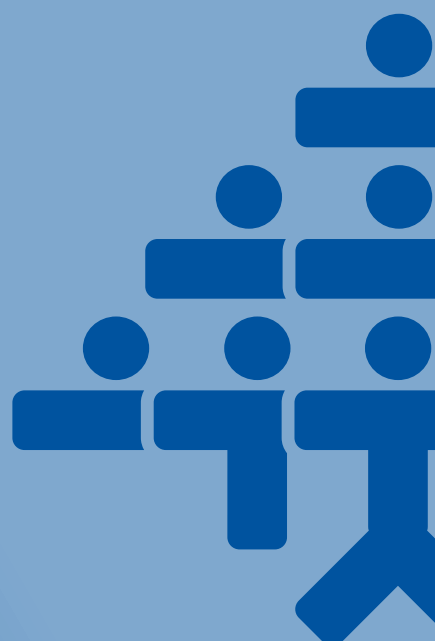


Annual Report 2014 (Jan–Dec)



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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.

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Chief Executive Officer’s Report

Author: Mr Kieran Ryan

As in previous years, 2014 was one of further instability and uncertainty. In January 2014, the College was, without prior warning or discussion, presented with a draft contract for the provision of free GP care to under-sixes. The contract had many flaws and the College swiftly sought the views of our members and made a comprehensive submission to Minister White and the Department of Health. This contract presented was completely unacceptable. There was no discussion or planning prior to its issue. This process angered all GPs and coupled with the FEMPI cuts to general practice, it highlighted a serious crisis for our members. The College organised a special conference in Clonmel to highlight the crisis for general practice. It was a true grass roots effort and showed the resolve of our members to stand up for their profession and patients. It was attended by Minister White (the then minister of state for primary care) who was shown first-hand the issues for GPs.

In July 2014, we saw the appointment of Minister Leo Varadkar following a cabinet reshuffle. Almost immediately, there was a different tone being taken with general practice. It seemed that things may change in terms of better discussion and inclusion of GPs as a key stakeholder. The IMO worked out a framework for talks which allowed them to represent GPs on matters of contract, and terms and conditions. This was welcomed by the ICGP. As I write this report, the IMO have made progress on a contract which they believe may be acceptable to GPs in the provision of free GP care to under-sixes and inclusion of “cycles of care” for diabetes and asthma which are a start for resourcing of chronic disease management. 2015 will be another interesting year.

2014 was an important year for the College’s developments in infrastructure. We invested heavily in our ICT and website structures. These developments will finalise in 2015 but they are essential if the ICGP is to deliver education, training, exam and membership services in the most convenient, cost effective and modern manner possible. We appointed some key staff members and appointed Dr Mary Davin Power as our faculty liaison officer to ensure the College remains relevant to the very fabric of the College structures.

2014 also saw the full operation of the ICGP’s new governance structures. In 2013, the ICGP established a best in class governance model while at the same time retaining the essential elements of membership engagement and representation. The ICGP Board of Directors work tirelessly on behalf of members and the College as a significant medical institution. One of the most important governance developments was the inclusion of two external board members who are not members of the College or doctors. We engaged an external body, Boardmatch, to assist us in these important appointments. We appointed Ms Susan Gilvarry and Ms Mary Donovan who have unmatched legal and business experience respectively. These Board members have richly enhanced the Board performance.

In 2014, the College began a process of developing the College’s new strategic plan towards 2020. We appointed Dr Brendan O’Shea to lead on this engagement, and the rollout of this important document and plan will be finalised in 2015.

2014 also saw the cynical process of the HSE in withdrawing medical cards from numerous vulnerable patients. GPs were at the fore in advocating for their patients and highlighting this retrograde and contradictory policy. The combined voice of the GP and

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patient required the Government to completely approach the allocation of discretionary medical cards in a more humane and evidence based way. Our Chair, Dr Mary Sheehan, was asked by the minister for health to chair the group looking at improving this important system.

Looking ahead, as already mentioned, the anticipated new GMS contract looks increasingly closer. The Government remains committed to universal GP care for the whole population so the path they will take will be of much interest to members and the College. 2014 showed that we are struggling to retain both newly qualified GPs and established GPs. This will bring a significant workforce crisis for general practice and the Government needs to take stock of the environment of uncertainty and lack of investment in general practice if it is to have a service in place to support the foundation of its health policy. GP training schemes are still significantly under resourced and the lack of progress by the HSE in implementing its decision to transfer the delivery of training responsibilities to the ICGP is particularly damaging to GP training.

I look forward to supporting our members in all manners possible during these turbulent times. I am fortunate to have an excellent Board and I particularly wish to thank Dr Mary Sheehan as chair and Dr Tony Cox who has been an outstanding president. All the Board members supported and guided myself and the full team in the ICGP in all aspects of our duties of service.

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President’s Report

Author: Dr Tony Cox, ICGP President

Summary

As we approach the end of my term of office as president, it is time to reflect upon the events of the past year. Once again it has been an extremely busy year for the College with many challenges along the way. Our members endured a financially difficult year and there was frequent reference made to the career plans of our young graduates and the emigration of some of our more senior members to countries such as Canada, Australia and Qatar. It became the responsibility of the Board to increase our efforts to advocate for better services and resources for our members and for our patients.

As College president, one of my most important roles was to meet with as many of our members as possible in their own local ICGP faculties. Our individual member is the most important unit in the College structure and the local faculty is their regular meeting point. It was one of my wishes to travel to the individual counties and report on College activities and services as well as address the challenges facing the College in 2014. It was a two way process and I was able to bring back members’ concerns to the ICGP Council and Board, e.g. the difficulty for young members in accessing CME activities in some regions as well as the challenges that individual members were enduring in their own practices. I managed to visit 20 of our 37 faculties during my year. I was welcomed in Meath, Kerry, west and north Cork, Wexford, Waterford, Mayo, Cavan/Monaghan, north and south Tipperary, Kildare, north Dublin, Carlow, Kilkenny, Roscommon, Longford as well as nearer to home in Galway, Limerick and my own home faculty, Clare. I was extremely well received wherever I travelled. Many of our faculties are thriving and act as a major support and resource to our members. Other faculties are in need of renewal and I hope that I have played some small part in this particular revival process. I was fully supported by Dr John Gillman, Chair of Membership Services, and by Dr Mary Davin Power, ICGP Faculty Liaison Officer, in my efforts. I am very grateful to both of them for their help.

We had a number of key meetings with senior HSE and DOH management teams throughout the year. We met Dr Leo Varadkar, Minister for Health, on three separate occasions as well as Ms Kathleen Lynch, Junior Health Minister and Minister for Primary Care. Indeed it was an auspicious day when both Ministers Varadkar and Lynch attended for a meeting in the ICGP offices this year. Both ministers are committed to improving our health service and are willing to engage with us in an effective and open manner. It is refreshing to see such openness among our senior health leaders and I am hopeful that much progress can be made on key issues such as resources for general practice and manpower planning, and the transfer of GP training.

The AGM in Galway was a highlight during my year. The discussion on the HSE service plan with Mr John Hennessy as keynote speaker and the subsequent panel discussion was lively and engaging. It was felt by many that the College was addressing the issues it needed to in a more forceful and constructive fashion than heretofore. Feedback from our members was universally positive. Such debate was important for our members. A similar discussion on the challenges facing GPs was conducted at a very well attended Clare Faculty ICGP Study Day.

Another highlight for me was the weekend in mid-October when we celebrated a number of important events. Firstly, we remembered our dearly departed colleagues and

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family at the ICGP memorial service on Friday night. The following day, we celebrated the graduation of our newest GP members at the MICGP graduation ceremony. A particularly enjoyable afternoon was spent at the Royal Hospital, Kilmainham, celebrating the graduation of these young doctors as well as the graduation of the first successful candidates to pass the MICGP-AR Examination. It was inspiring to be involved in such a happy day for these doctors. Finally, on the same weekend, Professor Mike Pringle spoke at our ICGP Council meeting. This was also a first for the College where the president of our sister college, the RCGP, addressed our Council members.

As president, I got the opportunity to represent the ICGP at many different meetings and events. I received the chance to meet Professor Michael Kidd, President of World WONCA, who addressed our Summer School Research Workshop. I met the European WONCA president, Prof Job FM Metsemakers and other European WONCA Council members at the Vasco da Gama Movement Forum in Dublin. The VdGM Forum meeting was a wonderful success. It was hosted by the ICGP NEGS Programme whose leader is also president of the VdGM, Dr Peter Sloane, from Galway. Peter and Dr Sinead MacEoin and the host organising team did the ICGP and Ireland so proud with their successful hosting of this forum. These young GPs and GP trainees from Ireland and across Europe are so wonderfully vibrant and energetic that one feels that the future of European general practice is in very safe hands. I also had the opportunity to meet Dr Leo Varadkar, Minister for Health, when he spoke at the ICGP Trainers Conference in Kilkenny. I spoke at The European Antibiotics Awareness Day in Dublin in November, and highlighted the very important role that GPs must play in preserving the valuable resources that we have for future generations.

I met with many different members and College groups who do so much key work on behalf of the ICGP. I met the MICGP Examination panel, CME tutors, GP trainees and GP trainers at their respective national conferences and workshops. It is important to thank all these individuals for the important work they do on behalf of ICGP members. I also attended some committee meetings at the ICGP where groups of GPs and trainees from all backgrounds work tirelessly on our behalf.

I had the opportunity to meet some of our GP colleagues who have emigrated temporarily to Qatar. They have left Ireland for economic reasons. We hope to establish an ICGP international faculty to support all our members abroad and to help them with their CPD/ CME activities and provide them with a strong support network and link with home.

As president, under the new governance structures, I chaired the ICGP Council for its three meetings. I also participated in Board meetings as a senior Board member. The Board has worked tirelessly on behalf of the College and its members throughout the year. Many long meetings debating the issues of the day took place during the year. We are privileged to have such a skillful and successful chairperson in Dr Mary Sheehan. My thanks also go to our extremely hardworking CEO, Mr Kieran Ryan, for his support and guidance to me throughout the year. The Board and ICGP Council are currently working on drafting the strategy document for the coming five year period.

The coming year will see many new and existing challenges facing the College and its members. The under-sixes and over 70s contracts are still being debated and are causing GPs many sleepless nights. My travels around the country have served to confirm what GPs have been stating publicly in the media. Many of our GP colleagues are struggling to keep their practice viable. The new contract needs to be realistic and practical for all our members. The responsibility for the delivery of GP training in Ireland will hopefully transfer to the ICGP under a new SLA with the DOH this year. This transfer has been on the cards for four years now but the minister is advocating a new SLA in 2015. This will

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be an exciting and wonderful challenge for us all but it is one that I know the ICGP can do really well. Chronic disease management for our patients is also something that the ICGP feels needs proper resourcing and attention. It is something that we all do day in and day out but is under resourced in Ireland. We will continue to advocate for this in the coming year. We must all work together for the better of our GP members and our patients and for the betterment of Irish general practice.

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Chair’s Report

Author: Dr Mary Sheehan

Overview

The year 2014 was as usual a busy year for the ICGP. Writing this report meant looking back at some of the thousands of emails received during the year to make sure that I didn’t inadvertently omit anything important.

The early part of the year was all about the “draft under sixes contract” which was presented to the profession on 30/01/14. The universal dismay and anger of general practitioners provoked by the contract united GPs in their opposition to it. The ICGP prepared a submission based on feedback from members in which we called for a complete restart of the process. The South Tipperary Faculty organised a national conference titled “Weathering the Storm” on 8 March. Two hundred doctors attended despite the inclement weather and the competing attraction of a home rugby international. The minister for primary care, Mr Alex White, was left in no doubt about the feelings of family doctors about the draft contract. Just over a year later, as I write this, we await the outcome of talks between the IMO and Department of Health about the under-sixes contract.

Apart from the submission on the under-sixes contract, the ICGP also made submissions on universal health insurance, the national strategy for suicide prevention, national standards for residential care settings for the older person, primary care ophthalmology services, the disability act and genetic testing, and on the licensing of tobacco products and e-cigarettes.

We also made a pre-budget submission calling on the government to invest in general practice for the future needs of all patients, to support general practice in rural and deprived areas, to move to universal healthcare in a properly planned way which would not overwhelm general practice, to ensure a career path for our graduates and to plan for the impact of a growing and ageing population. I would like to thank all the members who were involved in preparing these submissions but especially Dr Margaret O’Riordan, Medical Director, who co-ordinated us all.

The transfer of GP training to the ICGP is a recurring theme in annual reports. We still await a formal proposal from the HSE. In 2014, there were changes to the recruitment process for GP trainees, both for the 2014 intake and the 2015 intake. These were at the behest of the National Doctors Training and Planning who required us to develop a national recruiting process with standardised interview questions and marking. In 2014, there were three rounds of interviews before all places were filled. This seems so far to have been avoided this year. I would like to thank the training schemes and especially the recruitment leads from each scheme for their work in ensuring the quality of this process.

I had the pleasure of attending the annual MICGP Graduation Ceremony at the Royal Hospital in Kilmainham on 18 October 2014. We joined together to welcome to membership both GP trainees and the first graduating cohort of doctors from the MICGP-Alternative Route, and congratulate them as they embark on the next phase of their careers in general practice. The graduation of the MICGP-AR cohort was a particular point of great celebration, allowing those in long-term general practice in Ireland to complete a rigorous end point summative assessment to gain membership of the ICGP. It was a real honour to welcome all of these individuals to membership of the

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ICGP and I look forward to their contribution to the ongoing work of the college in years to come.

We have had a number of meetings with both Minister Varadkar and Minister Lynch. At each meeting we have raised the issues affecting general practice at the moment. We have stressed the difficulty of sustaining high quality comprehensive care for patients with the effect of the FEMPI cuts. We have presented them with the evidence that general practice can deliver improved outcomes in chronic disease management (based on Irish as well as international research). We have said that we can only do this if resourced. We have also discussed the manpower crisis that is evident to all of us working in general practice. The ageing profile of GPs, the emigration of both recent graduates and established doctors, and the difficulty filling GMS posts especially in rural areas and deprived urban areas were pointed out. There is ongoing discussion about increasing the number of GP trainees but retention of trained GPs is at least as important. To do this, it is necessary to improve conditions to make general practice in Ireland a viable career choice for our younger colleagues. The ICGP will continue to raise these issues at every opportunity with the government, Department of Health and HSE. We will continue to stress the international evidence that countries that invest in primary care and a strong general practice have better health outcomes.

The Education Department under the direction of Nick Fenlon now has 23 e-learning modules available to members on the ICGP website and a number of new modules in development. This is in addition to the distance learning courses, AGM educational programme, Summer School and Winter Meeting. Providing educational support for members is one of the core functions of the College and this is done in as many ways as possible to facilitate access to education and to enable members to fulfil their professional competence requirements.

The CME Network is now back to full strength but is also in some areas at capacity. There are local problems with access in some areas which we are trying to solve. Access to CME small group learning for all was a motion proposed and accepted at the AGM in 2014. Planning for this is ongoing. I would like to thank all of the CME tutors and the group leaders for their work in delivering CME. Small group CME meetings are one of the services most valued by members.

Last year, I wrote about the new governance of the ICGP. One of the changes that this brought was the election by the Council of the vice president. There was a lively contest for the position which saw Professor Fergus O’Kelly elected to the position of vice president.

Another change in College governance in order to satisfy the requirements of the Charities regulations was the recruitment of external board members. We have been joined on the Board by Susan Gilvarry and Mary Donovan who bring legal and financial expertise. I would like to welcome them and look forward to the changes that this will bring to the Board. I would like to thank the other Board members for their support to me as chair and their commitment to the ICGP.

Professor Michael Kidd, President of Wonca, attended the Summer school in Kilkenny last June. In his address, he spoke warmly of Dr Michael Boland whom he credited as being one of his role models and a mentor.

Irish GPs were well represented at the European Wonca meeting in Lisbon in July. There were 70 Irish delegates registered for the conference. There were 19 oral presentations and workshops and six poster presentations at the conference by Irish doctors.

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The coming year will bring changes and challenges for all of us working in general practice. Sometimes we can be despondent when we consider all the pressures and stresses which face us. But we also need to focus on our strengths. We are specialists in our field of generalism. We provide a world class service for our patients despite the pressures. We train excellent general practitioners. We are privileged to make a difference in the lives of our patients. We should be proud. And we should ensure that we continue to transmit that pride in what we do to every student, junior doctor, GP trainee, public representative and patient who we encounter.

Finally I would like to thank the College management, Kieran Ryan, Dermot Folan and Margaret O’Riordan for their advice, assistance and unstinting work on behalf of the College and its members.

I would like to thank Claire Collins, Nick Fenlon and Gerry Mansfield as directors of research, education and GP training respectively.

The administrative staff in Lincoln Place are always helpful and efficient. I would like to thank all of them and especially Caroline Murtagh for her administrative support to the Board.

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Honorary Treasurer’s Report

Author: Dr Joseph Martin

I was privileged to be elected as treasurer of the College for a second time last year, and would like to present the report of a very busy year for the ICGP. Our income rose by €531,000 to a total of €7,082,000, but our expenses rose to just under €7 million, giving a surplus of €116,362.

The reasons for the increased expenditure and decreased income are grouped under

- Increased spending on ICT (up by €98,000 to €841,000)
- €122,000 extra spent on GP training
- A loss of €172,000 over extra income in educational activity
- Increased honorariums for CME tutors and GP examiners
- Extra support to publish Forum, and increases in wages after a reduction in the payroll expenses for the past few years
- At the AGM last year, the College was urged to promote general practice more in the media, and this was done at a cost of €56,000
- The professional competence fee was reduced to all members at a cost of €85,000
- Bank deposit income reduced to €47,000 because of the low interest available on deposits

The role of the College is to provide services to its members, especially in education, training and practice support so though we made a reduced surplus compared to 2013, I am not concerned about this because we are a not-for-profit membership organisation, and we have built up a cushion of a reserve fund over the past two decades.

However, the new Board wants to ensure financial stability and good governance, and so had asked for a full financial review to be carried out by an independent company. Its task was to develop more robust financial planning guidelines for each department, and advise on cost management tools which would also allow for the new Audit Committee to assess how the College is performing on a regular month to month basis. The Board is assessing the way the College runs its accounting section, and will be making decisions on this in 2015.

I would like to thank my predecessor Dr Gerry Cummins for all the hard work that he put into the job as treasurer over the past 3 years, as he had ensured the College is on a firm financial footing. I would also like to thank all the members of the Finance Committee for their support and help, to Kieran Ryan, Dermot Folan, Caroline Murtagh and all the staff in the College for their unfailing courtesy and determination to do their very best at all times for us, the members.

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


Income and Expenditure Account for
the year ended 31 December 2014


	Note	2014 €	2013 €
Income			
Subscriptions received		1,865,985	1,833,442
Professional competence		1,073,224	1,163,418
Other college generated income		1,522,683	1,124,336
Public and private sector funding		2,144,640	2,007,059
Foundation levy		253,991	253,033
Sponsorship		221,678	170,034
	1	7,082,201	6,551,322
Expenditure			
Establishment		97,854	108,109
Administration		2,346,498	1,858,172
Personnel		2,922,266	2,680,596
Professional fees		1,182,938	1,051,537
Committee, meeting and travel		244,385	214,700
Depreciation		163,091	214,568
Loss of disposal of fixed assets		686	-
		6,957,718	6,127,682
Operating result for the year		124,483	423,640
Interest payable and similar income	3	(39,246)	(55,472)
Interest receivable and similar charges	4	31,123	60,550
Operating surplus		116,360	428,718
Taxation			-
Surplus on ordinary activities		116,360	428,718
		=====	=====

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

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

Approved by the Board of Directors on 18 April 2015 and signed on its behalf by:


Dr Mary Sheehan
Director


Dr Joseph Martin
Director

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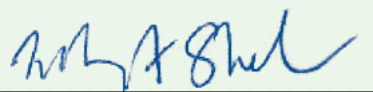
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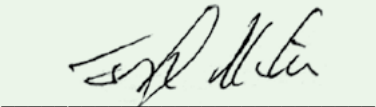
The Irish College of General Practitioners Limited
(A company limited by guarantee)

Balance Sheet
at 31 December 2014

	Note	2014 €	2014 €	2013 €
Fixed assets				
Tangible assets	8		1,724,676	1,839,649
Financial assets	9		300,003	300,003
			<u>2,024,679</u>	<u>2,139,652</u>
Current assets				
Debtors	11	1,494,829		1,527,613
Cash at bank		2,893,790		3,276,260
		<u>4,388,619</u>		<u>4,803,873</u>
Creditors: amounts falling due within one year	12	2,665,246		(3,237,221)
Net current liabilities			1,723,373	1,566,652
Total assets less current liabilities			<u>3,748,052</u>	<u>3,706,304</u>
Creditors: amounts falling due after more than one year	13		(115,255)	(189,867)
Net assets			<u>3,632,797</u>	<u>3,516,437</u>
			=====	=====
Reserves				
Accumulated surplus			3,632,797	3,516,437
Members funds	15		<u>3,632,797</u>	<u>3,516,437</u>
			=====	=====

Approved by the Board of Directors on 18 April 2015 and signed on its behalf by:


Dr Mary Sheehan
Director


Dr Joseph Martin
Director

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Membership Services Committee Report

Author: Dr John Gillman, Chair of Membership Services Committee

Membership Services Committee team

- Dr John Gillman (Chair)
- Dr Rita Doyle
- Dr Dave Hurley
- Dr Brian Kennedy
- Dr Darach Ó Ciardha
- Dr Peter Sloane
- Dr Noreen Lineen Curtis
- Dr Sean McBrinn
- Dr Sinead Murphy
- Dr Conor O’Shea
- Dr Andrée Rochfort
- Dr Gerry Cummins
- Dr Sean Higgins
- Dr Daragh O’Neill
- Mr Kieran Ryan
- Mr Nick Fenlon
- Mr Dermot Folan
- Dr Olivia Muldoon
- Dr Brendan Lee
- Dr Mary Davin-Power
- Ms Niamh Killeen
- Ms Michelle Dodd

Introduction

Within the remit of membership services, we seek to identify and meet the ever changing needs of our members, including trainees, those establishing their practice, members whose practices are established and are practising in these challenging times, members who are planning retirement, those who are retired from active practice but wish to remain active in the College, and our members who are now based overseas.

The remit of the Committee includes:

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

See the individual annual reports for each of the above programmes.

Activities in the last year

National ICGP meeting

Organised by the South Tipperary Faculty, titled “Weathering the storm” and supported by the College nationally.

Retiring GPs Project

- Appointment of Dr Brendan Lee and Dr Olivia Muldoon: Retiring Doctors Programme
- Educational meetings on retirement at various college meetings
- Preparation of guide to retirement (planned launch at AGM 2015)

Faculty Liaison Officer

- Appointment of Dr Mary Davin-Power as Faculty Liaison Officer
- Dedicated administrative support by Ms Michelle Dodd for the faculty liaison officer
- Support to local faculties in organising meetings
- Support to local faculties in the coordination of activities
- Implementation of recommendations of the College faculty membership survey

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NEGs

- ICGP Winter Meeting convened by the director of NEGs
- Launch of *Signposts to Success* (second edition) convened by a team led by the director of NEGs
- Second Vasco da Gama Forum awarded to Dublin. This took place in February 2015
- Liaison between College trainees and NEGs
- Regional NEGs meetings (See the NEGs Programme report for more information.)

GPIT Programme

The launch and roll out of the healthcare secure clinical email service Healthmail was an outstanding success. (Refer to Dr Conor O’Shea’s GPIT report for more information.)

Health in Practice Programme

This key programme, dedicated to the health of doctors, remains a core activity. Mindfulness sessions were well received by member doctors and were very popular. There is ongoing work on updating the Health in Practice section of the College website. (Refer to Dr Andrée Rochfort’s report for more information.)

College Strategy Membership Survey

Dr Brendan O’Shea and a team surveyed faculties and presented preliminary findings to multiple faculty meetings for membership feedback

Discussion

The year 2014 was a turbulent year for Irish citizens and for Irish GPs. A further round of cuts targeted at general practice had a significant effect on practice viability and service delivery, sadly compounding the effects of previous repeated substantial cuts to general practice resourcing. The retention of new graduates posed a significant challenge and the reality of established practices closing and retiring doctors not being replaced was an all too familiar story we all encountered particularly in rural Ireland and also urban areas of high social deprivation.

Irish general practitioners and the College were not found wanting in facing and publicising the effects of austerity on the Irish health system.

The South Tipperary Faculty organised a national College meeting, titled “Weathering the Storm” in Clonmel in March 2014 at which doctors discussed the issues, challenges and tribulations facing us all, explored solutions and showed unity and collegiality.

Minister White and a large contingent of national media were in attendance.

Many faculties facilitated meetings, exploring the impact of such changes locally, briefing their politicians and informing their patients. The Clare Faculty has planned for a major meeting in spring 2015. Doctors and faculties are actively using social media to good effect. Faculty Facebook updates, blogging and tweeting are having a definite effect in shaping the agenda.

In response to government plans for the under-sixes contract and universal health insurance, the Colleges submission on both documents was informed by the comments and submissions made to the College by its membership.

On the basis of the College’s membership survey and workshop, Dr Mary Davin-Power was appointed faculty liaison officer in October 2014 with administration support

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provided by Michelle Dodd. All faculty areas have been contacted, and the College is providing practical advice and assistance in reinvigorating previously quiet faculties. A faculty officer meeting is planned for May 2015 at the AGM in Galway. Enhanced contact between neighbouring faculties has been facilitated and it is hoped to roll this out nationally. College presidents Seamus Cryan and Tony Cox visited over 20 faculties in 2014 and we hope to see this continued into 2015. Our overseas members are and remain an active and valued part of the College. A visit to Qatar is planned for 2015 and we are looking to expand our contacts and offer practical support to our members in North America and Australasia.

We have a vibrant Network of Establishing GPs and coordination at regional level as well as the provision of linkages between trainees and establishing doctors are ongoing. Dr Peter Sloane and his team are to be complimented for publishing a new edition of *Signposts to Success*. Peter is also to be congratulated on becoming president of the Vasco da Gama Movement.

Thirty percent of doctors are due to retire in the next decade. In response to this need, the ICGP has appointed Dr Olivia Muldoon and Dr Brendan Lee as co-directors of the Retiring GPs Project. They have been researching the issues associated with retirement and it is envisaged that a guide on retirement will be completed by late spring of 2015.

The Health in Practice Programme continues to deliver a highly valued service to members and the GPIT group has delivered the Healthmail secure email project.

Progress on mentorship has been slow as has the delivery of a leadership programme. These projects remain a priority.

I would like to acknowledge the wonderful work of the Membership Services team whom it has been my privilege to work with.

Administrative support

May I thank Niamh Killeen for all her work and support to the Committee and welcome Gillian Doran who is taking over her mantle. I would like to acknowledge the considerable input of the senior management team but also all of the College staff who are proactive in helping us fulfil our remit in supporting our members. I thank all our committee members for their huge contribution and their families. My wife Mai and our children John, Marion, Natalie, Philomena and Tom have always given me great support (in all my roles!) for which I am eternally grateful.

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Management in Practice Programme Report

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

Introduction

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

- **Training** courses for general practitioners, practice managers, GP registrars and practice staff. These courses are provided under the Education Programme (please see 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 Programme (HIP):** The ICGP Doctors’ Health Programme comes under the remit of the Management in Practice Programme. The Doctors’ Health Programme report is given separately by the Director, Dr Andrée Rochfort

Activities

Training courses

Management in Practice Diploma Course: September 2014–May 2015

This is the nineteenth 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 – September 14–May 15

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 course is designed to give practice staff an opportunity to develop their functional roles – receptionist/secretary/administrator – and increase their contribution and support to the clinical providers in the practice.

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

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Contribution to other programmes and projects

Management in Practice section of the College yearbook and diary

External presentations/training facilitated/supported by the MIP Programme Director and Programme Personnel 2014

ICGP Conferences:

AGM – Galway – May 2014

- **Retirement from practice – Who me? Meeting the challenge of transition**
Presenters: Dr Olivia Muldoon and Dr Brendan Lee, Joint Project Directors, Retiring GP Project

ICGP Summer School – Kilkenny – June, 2014

- **The ICGP and what it can do for you!**
Presenter: Dr Sheila Rochford, Chair of Quality and Standards Committee
- **Retirement from practice – Who me?**
Presenters: Dr Olivia Muldoon and Dr Brendan Lee, Joint Project Directors, ICGP Retiring GP Project
- **Using emotional intelligence to negotiate conflict and management stress**
Presenter: Dr Eva Doherty, Director of Human Factors and Patient Safety, RCSI
- **Employment law: an overview**
Presenter: Ms Anne Lyne, Solicitor, Hayes Solicitors
- **Communication challenges for GPs – What you may or may not say or give to third parties**
Presenter: Kate McMahon, Principal, Kate McMahon & Associates, Solicitors

Winter Meeting 2014

- **Retirement from practice – fail to prepare, prepare to fail**
Presenters: Dr Olivia Muldoon and Dr Brendan Lee, Joint Project Directors, ICGP Retiring GP Project

Advisory/information service

Direct access advisory service

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

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

Table 1 (overleaf) illustrates the spectrum of queries from members.

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Table 1

TOPICS
Employment issues
Medical records/data protection/FOI
GMS
Medico-legal
Medical indemnity insurance
Practice formation/partnerships/associate agreements
Mediation/partnership or practice staff dispute
GPIT
Retirement/pension queries
Financial management/taxation queries
Practice and premises design (upgrading/regulations)
Health and safety
Marketing/advertising
Miscellaneous, e.g. referral for professional consultancy services, transfer of patient files, retirement from practice due to ill health, responsibilities of executors of GP estate and patient files

Web resources

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

Discussion board

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

Members of MIP Programme team

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

Acknowledgements

I would like to acknowledge the assistance and contribution of general practitioner members from around the country and their staff who have given freely of their time and expertise on many aspects of the programme. Graduates of the MIP Programme

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courses have also contributed greatly to the increase in knowledge of the management of general practice. The input from Diploma course assessors is particularly appreciated.

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

The work of MIP administrator Sally Anne O’Neill, and also that of Jana Pickard and Yvette Dalton of the ICGP Education Department, is greatly appreciated.

The Director of the Management in Practice Programme, in addition to holding the position of Chief Operating Officer of the College, also has specific responsibility for the following areas:

- MICGP Examination
- MICGP AR
- Certification Committee
- Network of Establishing General Practitioners
- Retiring GP Project
- Faculty Liaison Project
- Membership Services Committee

Please refer to separate reports under the relevant headings.

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National General Practice Information Technology (GPiT) Group Report

Author: Dr Brian O'Mahony, Project Manager



Other part of GPiT Programme: Education Section

Summary of project

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

Healthmail: secure clinical email

The main focus of work in 2014 was the implementation of secure clinical email. Healthmail allows GPs to communicate patient identifiable clinical information in a secure and confidential manner with clinicians in primary and secondary care. GPs apply online for a Healthmail account at <https://www.healthmail.ie>. With their permission, their application is authenticated by the ICGP to ensure they are a bona fide general practitioner. GPs receive their user name to their normal email address and a temporary password by SMS text to their mobile phone. They can log in to Healthmail at <https://access.healthmail.ie> from a desktop or laptop. Microsoft OWA App is available to access Healthmail from tablets or smartphones.

Healthmail went live nationally on 10 November 2014. As of 4 February 2015, over 730 GPs and 70 practices were registered users of Healthmail. In the month of January 2015, there were 1,836 messages received by Healthmail and 1,408 messages sent.

It is important that GPs and practices with Healthmail accounts check their inboxes frequently, ideally every day. Once a GP registers with Healthmail, their inbox is created and their new email address, e.g. joe.bloggs@healthmail.ie, is available to be viewed and searched. So even if a GP is not sending many emails initially, it is possible that other clinicians are sending patient identifiable clinical information to the GP's inbox. If you find it difficult to get into the routine of checking your Healthmail account regularly, then organise for your practice support staff to check the account daily. This can be done for multiple Healthmail and normal email accounts using the full version of Microsoft Outlook software. If you have any questions, please contact the Healthmail support desk at 1800 800 002 and choose option 2.

Positive endorsements for Healthmail are coming in. Here are comments from Dr David Hanlon of Leixlip, Co. Kildare:

"Healthmail is proving itself useful, thanks for getting it going. I find that consultants respond in a simple, direct and timely fashion, and it is an efficient resource. 'Kerbside consults' are happening and patient care is being improved significantly as a result. Communication with primary care services has also improved, when we can get addresses, and the comfort of secure communication of sensitive data is terrific."

We are beginning to see some real world examples of how to use Healthmail in practice. Here are some examples:

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- When a patient moves from one general practice to another, the GP extracts their electronic patient record and sends it as an attached file by Healthmail to their new GP
- GPs or practice support staff use Healthmail to contact medical secretaries in the hospitals to obtain a result, communicate information to a consultant or get details of a patient appointment
- GPs are using Healthmail rather than faxes to get information into hospital services and specialists
- Where a referral has been made and additional information is available on the patient, an email to the consultant results in advice on interim treatment and an early appointment
- Intra GP referrals for minor surgery, dermatology and contraceptive implants
- GP communication with community nurses and physiotherapists about patients being cared for jointly by GPs and PCTs

Healthmail allows GPs to exchange patient identifiable clinical information with clinicians in primary and secondary care. GPs are issued with @healthmail.ie addresses and can exchange information securely with @hse.ie and @voluntaryhospital.ie addresses. All HSE hospitals and primary care teams are securely connected to Healthmail and most of the large voluntary hospitals. A full list of connected agencies is available at <http://www.icgp.ie/healthmail>.

Healthmail is sponsored by the HSE Primary Care Directorate and funded by the HSE. Healthmail is governed by the General Practice Information Technology (GPIT) Group made up of representatives from the HSE, DOH and ICGP.

Thanks to Kieran Ryan and Conor O’Shea for their support of Healthmail.

Additional Projects During 2014

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

Future plans

- Implement Healthmail nationally, working with hospitals, primary care teams and GPs
- Continue to work with major national information systems, such as the National Integrated Medical Imaging System (NIMIS) and the National Medical Laboratory Information System (MedLIS)

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- Expand the range of electronic referrals available from GP practice software systems
- Work to improve electronic communication between GPs and the health services, particularly through structured messaging and Healthlink
- Provide a general practice and primary care perspective on interoperability and health informatics standards in the health services

Administrative resource staff in the ICGP

Ms Niamh Killeen, email niamh.killeen@icgp.ie. Special thanks are due to Niamh Killeen for her support of Healthmail and her efficient authentication of Healthmail applicants.

Further information

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

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National GPIT Training Programme Report

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

Annual report of education and work undertaken by the GPIT Programme team (January–December 2014)

Programme leader

- Dr Conor O’Shea

Other members of programme team

Regional co-ordinators

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

GPIT advisers

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

Summary of GPIT Education Programme

The GPIT Group is a collaboration between the Irish College of General Practitioners, the Health Service Executive and the Department of Health and Children. Dr Brian O’Mahony, as project manager, has issued a report on the major projects undertaken in 2014. Members of the programme team have contributed to these projects as well as to ongoing education in IT for GPs. In particular, they have been heavily involved with the launch and roll-out of Healthmail. In 2014, the GPIT group again presented a series of online webinars which were broadcast live and recorded for further viewing from the GPIT website. The total number of attendances for the five webinars was 400, with 221 individual GPs attending one or more webinars. Follow-up feedback questionnaires showed a good response to the webinar series. Contributions were also made at the 2014 ICGP Summer School and are detailed below. Members of the group have been available to provide support to individual GPs and to faculties.

Programme activities during the past 12 months

Webinar programme 2014

- | | |
|--|------------------|
| • Websites for GPs – your online library | Dr Conor O’Shea |
| • What’s new on the PCRS website | Dr Brian Meade |
| • Photography in general practice | Dr Kieran Murphy |
| • Getting the most out of the ICGP website | Dr Brian Blake |
| • Research and audit in primary care | Dr Conor O’Shea |
| • Dr Google | Dr John Cox |
| • Social media for GPs (guest Dr Peter Sloane) | Dr Conor O’Shea |

Summer School presentations 2014

- | | |
|---|-------------------|
| • Healthmail: secure clinical email | Dr Brian O’Mahony |
| • Electronic scoring systems and electronic referrals | Dr Frank Hill |
| • From the consultation room to the cloud | Dr Conor O’Shea |

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GPIT advisers and facilitators contributed to the following projects in 2014

- Healthmail – GP training and introduction to hospital groups
- National Electronic Referral Project
- Further support of electronic cancer referrals
- Advice on National Emergency Medicine Programme Discharge document and datasets
- Advice on data protection issues
- Advice on proposals for e-prescribing
- Advice on withdrawal of support for Windows XP
- Liaison with Beaumont Epilepsy Electronic Patient Record Programme
- Participation in National Medicines Group for Older People
- Contributions to National Maternity System & Child Health and Immunisation Groups
- Contributions to National ICT Strategic Reform Group
- Contribution to amendments of Medicinal Products (Prescription and Control of Supply) (Amendment) (No.2) Regulations
- Contribution to 2014 National eHealth summit
- Contribution to ICGP Education Strategy

Future plans

The GPIT advisers and facilitators will continue to contribute both to IT education and upskilling for College members as well as to the development of IT projects which have the potential to improve the lives of GPs in the future. In particular, the group will support the further development of electronic communication, including the use of Healthmail and electronic referrals.

The members of the group will continue to be available to provide support for individual GPs, CME groups and faculties.

Administrative resources

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

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Health in Practice Programme Report

Author: Dr Andrée Rochfort, Director of the ICGP Health in Practice Programme and Director of Quality Improvement

Summary

This role incorporates quality management in terms of:

- 1. Quality improvement in healthcare for doctors, as director of the ICGP Health in Practice Programme, a system of information, education and services for GP healthcare.
- 2. The ICGP working group on HIQA National Standards for Safer Better Healthcare; assisting in the interpretation of the national standards in the context of general practice, developing a set of quality improvement (QI) tools for use in general practice and related educational modules for assisting general practice in implementing the standards.
- 3. Representing the ICGP on the following external groups and committees:
 - National Patient Safety Advisory Group (DoH), <http://www.patientsafetyfirst.gov.ie/index.php/national-patient-safety-advisory-group.html>
 - Steering Group for the Health Sector (Health & Safety Authority), www.hsa.ie
 - EQuIP, the Wonca Europe Network for Quality and Safety in Practice for which I have been the honorary secretary since 2010, www.equip.ch
 - Wonca Europe Executive Board. WEEB consists of the president, vice president and secretary treasurer of WE, plus representatives of EQuIP, EURACT, EGPRN and Vasco da Gama, www.woncaeurope.org
 - European Association for Physician Health (Council member), www.eaph.eu

For (1) above ICGP Health in Practice (HiP) programme.

Other members of the programme

- Ms Sally-Anne O'Neill, HiP Administrator
- Membership Services Committee including Dr John Gillman, Chair of Committee and Mr Dermot Folan, Chief Operations Officer, ICGP
- Facilitated links to four healthcare networks (over 100 independent healthcare professionals including GPs, counsellors, psychologists, psychotherapists, occupational physicians and psychiatrists) as listed on www.icgp.ie/doctors_health

Publications

1. Forum articles

- Forum, January: Measuring Quality in Irish General Practice
- Forum, February: Developing a Culture of Quality and Safety
- Forum, March: Quality Improvement Science – How it Works
- Forum, May: Are You Ready for When the Inspector Calls?
- Forum, July: Medical Certification and Fitness for Work
- Forum, September: Contribution to cover story article on reasons to be cheerful at work as a GP
- Forum, October: The ICGP memorial service is held annually as an opportunity for both bereaved members and those not directly bereaved to demonstrate their collegiality with all the GPs in Ireland who have already departed, in a reflective hour of recitations and reflection and music. Open to all

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2. The Journal of the Canadian Medical Association CMAJ

The Journal of the Canadian Medical Association CMAJ invited me to contribute to a themed blog on their website on doctors’ health, which was posted on 26 August 2014. Please share the blog on your social media for dissemination.

<http://cmajblogs.com/doctors-health-overcoming-our-pathological-self-reliance/>

Other contributors in the category: <http://cmajblogs.com/category/doctors-health/>

3. Publication in the German Journal of General Practice, Zeitschrift für Allgemeinmedizin, June 2014

Doctors health – an introduction based on a narrative review

Sven Schulz¹, Marianne Grossmann¹, Katja Stengler¹, Franziska Einsle², Andréé Rochfort³, Jochen Gensichen¹

- 1. Institute for General Practice, University Hospital Jena, German
- 2. SRH University of Applied Sciences for Health, Gera, Germany
- 3. Irish College of General Practitioners, Dublin, Ireland

Introduction: Doctors’ health has been investigated internationally for several years and has also found increasing interest in Germany.

Conclusions: If doctors are ill, both the role of the physician as a patient and the role of the treating doctor are characterised as a doctor-doctor interaction with specific challenges in dealing with their respective situations. Keywords: doctor-patient relationship; self-treatment; physician health; doctor-patient. Peer reviewed article submitted: 06.02.2014. Accepted: 24.04.2014.

DOI 10.3238 / zfa.2014.0261-0265

<https://www.online-zfa.de/article/aerztegesundheit-eine-einfuehrung-anhand-eines-narrativen-reviews/uebersichten/y/m/1676>

4. Wonca World Book 2015

I wrote an article on patient empowerment in chronic conditions for the Wonca World Book 2015 to celebrate Wonca Europe’s 20th Anniversary in 2015.

Research

1. Patient Empowerment in Chronic Conditions

The Wonca Europe 20th Anniversary project. This project was awarded to EQuIP, the European Society for Quality and Safety in General Practice in 2012 as a three year project to report in 2015 at the Wonca Europe Conference. The aim was to conduct a project that would have a significant impact on European general practice. For further information, see www.equip.ch. The following new URL will soon be active: www.equip.woncaeurope.org. The ICGP had the lead for Work Package 1 (1of 3) to conduct a systematic review on the topic. Finland lead WP 2 to produce the online learning course using evidence based systems from Duodecim (www.duodecim.fi), the Finnish Medical Society. The filming of the English language version of this Wonca Europe course was filmed at our practice in Enniscorthy with our practice nurse and an actor patient. The final work package WP3 is led by the German EQuIP delegate based at the University of Jena, with the role of formal evaluation of the piloting of the online course on patient empowerment. The outcome will be that the ICGP will have contributed to the creation of a Wonca Europe online course which will be accessed for free on the Wonca Website from all the GP national colleges websites in Europe.

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2. Health Research Board Summer Student Research Project.

Developing a medical education website for doctors in Ireland on ‘doctors’ health and healthcare: information and services’. I conducted this project in conjunction with the UCD Dept. of General Practice and a graduate entry medical student, John Murtagh. This project, based on surveying the views of the Health in Practice networks, was presented at the annual summer student project evening in UCD in October and has been accepted for oral paper presentation at EAPH 2015. It will be submitted for publication in a peer reviewed journal. The findings will be incorporated in the development of the webpages of the Health in Practice Programme at www.icgp.ie/doctors_health.

This upgrade is a key development for the benefit of members and trainees, which will be a resource on personal development including stress management, work life balance, and healthcare provision for doctors and medical students. It may be useful as a source of research references for projects / audit / quality improvement projects in the future.

Education

The ICGP Management in Practice Diploma course: workshops and course modules on stress management and health and safety in the practice. March 2014.

ICGP Summer School, Kilkenny: patient self-management workshop with Dr Aisling Lavelle.

Assisted in the preparation of the GPs Take Care day, stress management day with Dr Claire Hayes, Clinical Director of Aware, at the 2014 Summer School in Kilkenny.

Speaker at the GP meeting on the GP contract: “GPs are Human Too!”, Talbot Hotel, Wexford. April 2014

RCSI Doctors Health conference: “Could a doctor ever need a doctor?” April 2014.

Wonca Europe, Lisbon, July 2013. I did the following presentations:

- 1. Symposium on Chronic Disease Management
- 2. Workshop on Patient Empowerment in Chronic Conditions
- 3. Paper Presentation on Systematic Review of Patient Empowerment in Chronic Conditions
- 4. Paper Presentation on Wonca Anniversary Project 2015 to the Wonca Europe Open Forum Meeting
- 5. Paper Presentation on the Impact of Economic Recession on Quality Improvement Activities in General Practice Across Europe (EQuIP Survey). The paper was presented by Slovenian EQuIP member. (Authors: Denmark, Croatia and Ireland EQuIP members.)

Presentation to the Irish Society for Community and Public Health Medicine. October 2014. “Dilemmas and Difficult Decisions on our Own Health”.

ICGP Winter Meeting: I attended the GPs Take Care One Day event by Dr Claire Hayes, Clinical Director of Aware. I fully recommend this one day course on deciding priority areas to address in improving occupational lifestyle, personal health and work life balance for GPs.

I declined invitations to present at an international doctors health conference in Greece and a psychiatrists meeting in Monaghan due to other work commitments.

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Planned activities

There are two main streams of work for developing and refining the Doctors Health in Practice Programme for 2015. Comments and suggestions are always welcome.

1. **Doctors’ health information update on the ICGP website**
This is an invitation to all GPs, trainees and medical students, practice staff and other health professionals to share links to internet resources, websites, articles and tips to promote good doctors health and healthcare. I invite anyone with interesting and helpful information to forward it to myself or HiPP administrator Sally-Anne O’Neill at sally-anne.o’neill@icgp.ie.

For further information see www.icgp.ie and enter “doctors health” into the search box.
2. **Seeking GPs for GPs.**
In 2015, we want to expand the HiPP GPs for GPs network, with more GPs giving a better geographical spread and choice in every county, and in every ICGP faculty area. Some GPs already have doctors as patients and a special interest in doctors’ healthcare. If any GP is interested I would ask them to contact me at the ICGP, or via the HiPP telephone helpline (087 751 9307).
3. **ICGP Working Group on Safer Better Health Care**
The College, through this working group, is providing resources to assist GPs in their preparation for the national standards which will be extended to GP practices. From 2015, there will be a range of assessment tools available on www.icgp.ie that GPs can use if they wish, to assist them in the event of a HIQA inspection under the new standards.

Acknowledgements

Thanks to all the HiP networks who are the backbone of the HiPP service, to Sally-Anne O’Neill, HiPP Administrator, and to Dermot Folan and Margaret O’Riordan who were both supportive and constructive throughout 2014 in relation to both doctors health and quality and safety initiatives for GPs. Thanks also to all the ICGP staff who have active roles in the different areas of my work and internal college committees, in particular Patricia, Gillian, Laura, Niamh, Maureen, Orla, Louise, Michelle, Sylvia and Jantze.

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Network of Establishing GPs Report

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

Summary of the NEGs Programme

The Irish College of General Practitioners Network of Establishing GPs (ICGP NEGs) Programme was set up 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 ICPG NEGs Programme has proven to be a valuable resource for establishing GPs and highlights the College’s commitment to supporting establishing members. Through the ICGP NEGs Programme, final year GP trainees and new and establishing GPs are encouraged to become active members of the ICGP and participate in all College activities and events.

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 in the College. The programme director works closely with other programme directors and the College management, and is supported by members of the NEGs Steering Committee.

Underpinning the ICGP NEGs Programme is a vision of creating a seamless continuum of involvement in the ICGP from commencement of GP training right through to retirement. To promote this smooth transition from trainee to establishing GP, it is hoped in 2015 to further increase the profile of the NEGs Programme among fourth year GP trainees.

In 2015, the supports currently available to those College members who avail of ICGP NEGs resources will be made more robust and expanded. Involvement at European level in the Vasco da Gama Movement was rapidly advanced in 2014, and it is the aim to build on this platform in 2015, thereby raising awareness within the ICGP NEGs Programme of European and global opportunities which exist but are currently untapped by Irish GPs.

Continued close cooperation with other programme directors will ensure the unique needs of establishing College members are taken into consideration during the development of College wide strategy and supports. Underpinning all the various activities will be a continued development of the systems in place on the ICGP NEGs Programme that will allow for the future straightforward delivery of the programme in keeping with the strategic vision outlined in this report.

Programme structure

Programme director: Dr Peter A Sloane

Administrative support and resources: Ms Orla Sherlock continues to provide the vast majority of administrative support and is central to the project, being the main contact person for establishing GPs and also central to the co-ordination of ICGP NEGs activities. She is ably assisted by other administrative staff at the ICGP as and when required. Administrative staff who provided support to the ICGP NEGs Programme in 2014 included:

- Ms Louise Nolan
- Ms Gillian Doran
- Ms Patricia Patten
- Ms Niamh Killeen

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NEGs Steering Committee 2014

The NEGs Steering Committee meets by teleconference a number of times during the year. In 2014, an annual meeting of the Steering Group was incorporated into the NEGs calendar. This took place at the ICGP NEGs convened Winter Meeting. Steering Group members also deliver the twice yearly regional meetings and they also provide a vital support structure to the programme director. In 2014, the Steering Group consisted of:

- Dr Laura Noonan (Mullingar)
 - Dr Shastri Persad (Galway)
 - Dr Katrina Geissel (Cork)[#]
 - Dr Louise Malone (Dublin)
 - Dr David O’Connell (Dublin)
 - Dr Cliona Murphy (Cork)[#]
 - Dr Ciarán Bohane (Limerick)
 - Dr Clare Kelly (Sligo)
- Dr Lisa Cahill (Kerry)[#]
 - Dr Jim Harty (Cork)
 - Dr Carol Sinnott (Cork)
 - Dr Sheila Loughman (Dublin)^{##}
 - Dr Sinéad MacEoin (Dublin)^{##}
 - Dr Irina Berkun (Dublin)^{##}
 - Dr Amy Morgan (Dublin)^{##}
 - Dr Marie O’Dwyer (Kerry)^{##}

[#] Left the Steering Group in 2014 ^{##}Joined the Steering Group in 2014

NEGs Trainee Liaison Group

In an effort to strengthen relationships between fourth year trainees and ICGP NEGs, in the autumn of 2013, a NEGs Trainee Liaison Group (TLG) was established. However, this failed to achieve any traction, and in 2014 this was allowed to dissolve. To replace this group, a more robust relationship was established in the form of a working group consisting of the ICGP NEGs director and the chairperson(s) of the National Association of GP Trainees (NAGPT).

Reporting structure

The ICGP NEGs Programme operates under the direction of the chief operations officer (COO) Mr Dermot Folan, and the chairperson of the Membership Services Committee, Dr John Gillman. The ICGP NEGs director reports to the COO.

Representative roles

The ICGP NEGs Programme represents establishing members on a number of ICGP committees and groups. In 2014, the ICGP NEGs programme director was also elected to the position of president of VdGM in which role he represents new and future European GPs in a number of fora. The current representative roles of the members of the NEGs Steering Group are listed below.

NAME	ICGP REPRESENTATIVE ROLE	EUROPE (VDGM) ROLE
Peter Sloane	ICGP Council	President
	Membership Services Committee	Executive Chairperson
	Project Directors Group	Council Member and Chairperson
	Mentorship Working Group	
	Liaison with NAGPT	
Laura Noonan	Education Strategy Group	ICGP NEGs Education Liaison
Louise Malone	Reproductive and Sexual Health Committee	
Sheila Loughman		Hippokrates Exchange Coordinator
Irina Berkun		Hippokrates Exchange Co-Coordinator
Sinéad MacEoin	ICGP Research Committee	ICGP NEGs Research Liaison

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Main programme activities in 2014

Publication of the second edition of *Signposts to Success*

In September 2014, the second edition of *Signposts to Success* was published. A comprehensive reworking and updating of the first edition was undertaken and the publication was also converted into electronic PDF format.

Regional meetings and NEGs webinars

NEGs regional meetings take place across the country in the spring and autumn, and continue to be successful and popular. They are delivered by and with the support of the NEGs Steering Committee in Dublin, Mullingar, Sligo, Galway, Limerick, Tralee and Cork. National sponsorship was in place in 2014 with unrestricted support from Meda Pharmaceuticals. Meetings were all scheduled in a two week window in both the spring and autumn, and complemented by an ICGP NEGs webinar one week later to facilitate those who could not attend one of the regional meetings. As in 2013, we continued to operate a booking system for both spring and autumn meetings.

The spring meetings covered a variety of topics including a clinical topic (depending on the venue), the Reilly/White draft proposed under-sixes contract, GMS contracts (applying for a GMS number, the GMS interview and points), tips on short and medium term locum work including incorporation, taxation information including taxation for locums and if requested a live Q&A with the ICGP NEGs programme director. Experts were also on hand to discuss taxation and finance. The autumn meetings covered setting up a pension, managing practice finances, income, expenditure and planning, sourcing finance to open or buy-into a partnership, and the valuation of goodwill or notional worth in a partnership or practice purchase negotiation. For both spring and autumn meetings we were delighted to have some very high calibre speakers. In total, approximately 300 GPs attended the spring and autumn meetings and webinars.

The 2014 ICGP Winter Meeting

The NEGs programme director convened the 2014 November ICGP Winter Meeting. This ICGP wide event, titled “The different faces of advocacy in general practice” was delivered to an almost capacity audience of 225 in Athlone, and feedback was very positive.

Other meetings

The NEGs programme director gave presentations and workshops at a number of other national meetings:

- The National Trainers Workshop
- The ICGP Annual Meeting
- The National Association of GP Trainees Meeting

NEGs discussion boards

The NEGs discussion boards are a highly regarded resource which the members view as an invaluable benefit of membership. In 2014, the NEGs programme director continued to moderate the discussion boards.

Telephone and email queries

A significant component of the role of the ICGP NEGs director is in providing advice and support to colleagues. Many queries are received by email and telephone both from establishing members, but also in 2014, from retiring members. These queries

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relate to many issues including GMS contracts, partnership negotiations, assistantship negotiations, interviews, finding a successor, involvement in ICGP NEG's and many others. All are answered and most result in long and detailed telephone discussions.

NEG's membership survey

An annual NEG's survey was deferred until the early part of 2015.

Presentations on behalf of ICGP NEG's as ICGP NEG's Director

- Posters – 2 posters at first VdGM Forum, Barcelona
- Chair of the main plenary at first VdGM Forum, Barcelona
- Presentation at National Trainers Conference
- ICGP NEG's spring regional meetings
- ICGP NEG's spring webinar
- NEG's ten year retrospective
- Negotiation workshop at the ICGP Annual Meeting
- The Great Debate at the ICGP Annual Meeting
- WONCA Lisbon preconference presidential election presentation
- WONCA Lisbon preconference bid presentation for the second VdGM Forum
- WONCA Lisbon – 5 workshops in collaboration with VdGM colleagues (all listed as ICGP)
- WONCA Lisbon – chair of a scientific session
- Poster presented at the American Academy of Family Physicians (San Diego) with VdGM
- NAGPT – 3 workshops
- ICGP NEG's autumn regional meetings
- ICGP NEG's autumn webinar
- Social media workshop at the ICGP Winter Meeting
- Presentation to the Medical Council on social media guidelines
- Presentation to the College of Anaesthetists on social media

Press interviews and articles

In 2014, the NEG's programme director gave interviews and had multiple articles and news pieces published in the following publications:

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

Vasco da Gama Movement / European Activities in 2014

In 2014, there was substantial involvement of ICGP NEG's in the Vasco da Gama Movement (see below for details). The following were the main events/outcomes:

- Election of ICGP NEG's director as president of VdGM
- Awarding of the second VdGM Forum to ICGP NEG's
- Continued development of the Hippocrates Exchange Programme

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2015 and beyond: Future plans, continuing and planned activities

To deliver for NEG members, the planned activities for 2015 are:

Specific once off projects

- Delivery of the second VdGM Forum, February 2015
- Drafting of a strategic plan for the period 2015–2016 for ICGP NEG
- Upgrading of *Signposts to Success* to eBook format
- Delivery of an ICGP mentor programme
- Expanding the geographical base of the NEG Steering Group to Waterford
- Compilation of an ICGP NEG director's handbook and Steering Group member job description

Ongoing projects/work

- Conducting the 2015 annual ICGP NEG survey
- Closed publication of results of the 2015 ICGP NEG survey
- Continued upgrading of the NEG webpages
- Promoting awareness of VdGM activities
- Promoting the Hippocrates Exchange Programme
- Continued moderation of the NEG discussion forum
- Continued representation of NEG within the ICGP and VdGM

Involvement in meetings

- Hosting the second VdGM Forum in February 2015
- Hosting the spring and autumn NEG regional meetings (including online Q&As)
- Presenting the spring and autumn NEG webinars
- Delivery of NEG oriented sessions at the 2015 National Conference
- Delivery of NEG sessions at the NAGPT Conference
- Convening the 2015 ICGP Winter Meeting

Summary of the Vasco da Gama Movement

The Vasco da Gama Movement is the WONCA Europe Network for new and future GPs / family doctors. It was established in 2004.

VdGM is a support network for European GP trainees and establishing GPs and largely operates via social media platforms including Facebook, LinkedIn, Twitter and YouTube. There are now two meetings a year: the preconference which precedes each WONCA Europe conference, and the annual VdGM Forum which was piloted in February 2014 in Barcelona.

The decision making body of VdGM is the VdGM Council to which each member organisation sends a national representative. From the Council, an executive is elected to run the day to day functions of VdGM. Activity and collaborations are organised through five theme groups: Research, Education and Training, Exchange, Beyond Europe and Image.

Representative roles

The ICGP NEG Programme represents establishing members within VdGM on a number of levels which are summarised below.

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NAME	EUROPE (VDGM) ROLE
Peter Sloane	President
	Executive Chairperson
	Council Member and Chairperson
Laura Noonan	ICGP NEG's Education Liaison
Sheila Loughman	Hippocrates Exchange Coordinator
Irina Berkun	Hippocrates Exchange Co-Coordinator
Sinéad MacEoin	ICGP NEG's Research Liaison

ICGP NEG's Involvement with VdGM 2014

VdGM preconference in Lisbon and election as president of VdGM

In July 2014, I was honoured to be elected president of VdGM. This took place during the VdGM Council meeting at the WONCA Lisbon preconference. Being VdGM president entails a wide variety of responsibilities and roles and includes the following interactions in which the profile of the ICGP is raised:

- Liaison with the WONCA Europe Board including direct communications with the president and vice president of WONCA Europe
- Liaison with the other WONCA Europe networks (EURACT, EGPRN, EQuIP, EURIPA, EUROPREV), WONCA Europe SIGS, WONCA World Executive (CEO and president) and WONCA World SIGs
- Regular Skype conferences with the leads of the other WONCA Young Doctor Movement (Spice Route, Rajakumar, Waynakay, Al Razi, AfriWon Renaissance, Polaris)
- Interaction with various other global GP leads

Looking forward, this will also entail substantial involvement in WONCA Istanbul (2015), WONCA Copenhagen (2016) and WONCA Prague (2017) and should provide a platform for the ICGP to raise its profile in European general practice.

Awarding of the second VdGM Forum to ICGP NEG's, July 2014

The VdGM Council unanimously voted to award the second VdGM Forum to ICGP NEG's. Scheduled to take place in Dublin in February 2015, Dr Sinéad MacEoin co-presented the ICGP NEG's bid.

VdGM Council representative

In my role as ICGP NEG's director, I continue to represent ICGP NEG's on the VdGM Council.

First VdGM Forum in Barcelona, February 2014

In my role as ICGP NEG's director and VdGM Council rep for Ireland, I was invited to chair the main plenary session at the first VdGM Forum in Barcelona in February 2014. This was titled, "One vision: how to unite European family doctors". In addition, in my role, I facilitated at a number of other workshops and sessions.

WONCA Lisbon, July 2014

In my role as ICGP NEG's director, I presented five workshops in conjunction with VdGM colleagues. These were in the areas of ICGP NEG's, social media, and wearable technology. I was also invited to chair a scientific session.

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The Junior Research Award, WONCA Lisbon, July 2014

This prestigious European award was won by a Portuguese researcher, but of note was that a group of Irish GP trainees was placed in the top three for this award. “Chronic disease management – the patient’s perspective” by Drs Karen Browne, Danielle Divilly, Maire McGarry and Catherine Sweeney under the supervision of Dr Maureen Kelly admirably represented ICGP NEGs and the ICGP on the European stage.

Hippokrates Exchange Programme

Dr Sheila Loughman has continued to do sterling work in running the VdGM Hippokrates Exchange Programme in Ireland. In 2014, a total of five exchanges were hosted in Ireland. In late 2014, Sheila was joined by Dr Irina Berkun who is helping to run and promote the Hippokrates Exchange Programme. The 2014 annual Hippokrates Host of the Year was awarded to Dr Noreen Lineen-Curtis in Achill.

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Faculty Liaison Officer Report

Author: Dr Mary Davin Power, Faculty Liaison Officer (appointed in October 2014)

Project objectives

The project objectives are as follows:

- Support to faculties – faculty officers and faculty members
- Acting as first point of contact in the ICGP for communications between the ICGP and ICGP faculty officers
- Carry out a needs assessment of faculty requirements
- Provide recommendations on how communications and interaction between members and the College centrally can be improved
- Make recommendations on improvements to the formal reporting mechanisms between members/faculties, the Council and the Board
- Encourage greater links between local faculty and central organisation
- Support liaison with other GP/ICGP stakeholders at local and regional level (e.g. GP training schemes, CME tutor groups, hospital liaison committees, OOHCoops on areas of relevance to College activity)
- Collate of data on faculty activity
- Disseminate faculty information and set up communications structures and communicate effectively with faculty officers including reviewing and making recommendations on the management of the circulation of formal communications
- Promote College resources to faculties and members at faculty level
- Utilise IT and web resources to increase engagement in faculty activity and also to build up the relationship between members/faculties and the College centrally
- Develop and deliver training for faculty officers
- Develop a profile among members at regional level
- Research how other national membership organisations have addressed similar issues in relation to the engagement of members on the ground with one another and also with the central organisation

Activities to date:

- Between October and December, the FLO commenced communicating and making contact with the faculty officers in all the faculties, whether active or not
- A number of areas of lower faculty activity were identified. Plans were put in place to support the revival of these faculties
- It was noteworthy that many faculties are working well and have on-going monthly meetings thanks to the commitment of a few enthusiastic officers
- There are widespread difficulties with the recruitment of officers and there are plans to develop strategies for encouraging members to engage more fully
- Making contact with officers and establishing a database of current and valid contact details
- I have attended faculty meetings in Kildare, Clare, and several Dublin faculties, and have many invitations from other faculties. I have firm plans to visit Galway, Wexford, William Stokes, and Mayo, although I would ideally visit all of them if time permitted this
- The webpage is up and running with up-to-date details of faculty officers, contacts and activities thanks to the help and commitment of Michele Dodd

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Plans

I am establishing a faculty officers forum at the ICGP Annual Conference & AGM 2015.

Aims achieved so far:

- Contact: I have made contact with an officer in every faculty around the country. I now have a feel for what is happening around the country and am in receipt of feedback from members via the officers regarding their needs. I have visited several of the faculties and attended their meetings. I have been received with great warmth and enthusiasm.
- Database: I have a working database of faculty officers contact details in order to easily relay College news and information for faculty meetings. This has proved more difficult than anticipated! I have identified up-to-date information regarding the Officers and Council representatives from each faculty. This will be an ongoing project as officers change.
- Less active faculties: I have identified struggling faculties and discussed barriers and opportunities with potential officers, and laid some groundwork for further strengthening the College presence. I have assisted in establishing some faculty meetings and will continue to encourage these faculties to hold relevant meetings in the future. Some Faculties who have requested support are Wexford, Waterford, Laois, Offaly, Carlow, Longford, Roscommon and Dublin West.
- Webpage: A Faculty webpage on the ICGP website is now live. This has been a particular goal in order to make access to faculty contacts easy for a new member. There is a link on this page to faculty events.
- ICGP email address: A number of officers contacted me requesting an ICGP faculty email address. More will request this in the future as many pharmaceutical companies are asking for faculty sponsorship requests to be sent using an ICGP email address. With the help of Niamh Killeen this is now in progress. I am aware of the fact that the College sponsorship policy must be adhered to, and this will be highlighted as officers sign up for their email account.
- Discussion Board: Following various requests from officers, particularly those new to the post, a Faculty Officers discussion board has been created, with me as convenor. Officers can interact and post any queries or solutions for the benefit of all. Many thanks to Laura Smyth for her help with this.

Issues identified

Even in areas where the faculties are not currently active, there appears to be a very positive response to the 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 has been greatly appreciated.

Many officers commented that they did not feel supported or valued up to now by the College for the work they put into arranging meetings, etc.

Conversely, others felt they did not need any support, were happy to continue on as always but still welcomed the contact from the College and the offer of help, as well as an acknowledgement of the time they put in to the role.

Some faculties already use the College facilities for sending notifications, etc. and most of the faculties had liaised with the College regarding CPD accreditation for their meetings. Some who had failed in this regard have been identified and supported.

Some older members commented on the difficulty they had achieving internal points and it was clarified how this can in fact be easily resolved, and I gave some assistance accordingly.

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There are a few faculties where one person is chair, secretary and treasurer, and I agreed to help look at the barriers to new volunteers. I made suggestions regarding rotating officers, approaching potential officers in advance of the AGM, etc. and all suggestions were welcomed. In particular, the phone call and the offer of support gave these officers the feeling of support and that they did not need to struggle alone.

*This was the case in North Dublin. I liaised with the officer in question, and invited the College president down to the faculty AGM. I also gave assistance in recruiting new officers with good success. I felt my input was appreciated.

Some areas of low faculty activity did in fact have regular clinical society meetings. When I discussed structuring faculty meetings, there was no objection to tie these in with clinical society meetings but members were worried about the attendance of non-members and (mainly retired) hospital consultants. I do not feel that this should be a barrier as with time it will resolve itself, apart from the fact that a non-member, while welcome to attend a faculty clinical meeting as a guest, cannot hold an Officers position or attend at AGM. This did not appear to be a problem.

Plans for 2015

- Visit the faculties where distance and time allow
- Assist less active faculties in setting up and running meetings, and guide them through getting some regular faculty meetings and an AGM on a phased basis
- Supporting members who live abroad
- Faculty webpage
- Faculty recognition – building the brand I aim to continue to improve recognition for the faculties and build a strong membership loyalty
- Faculty officers workshop to be established at the ICGP conferences
- Network of Establishing GPs and GP registrars – the engagement of younger GPs who may be more mobile and less affiliated to their faculty is planned
- Greater use of ICT for communications with and by faculties

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Retiring GP Project Report

Project Directors: Dr Olivia Muldoon and Dr Brendan Lee (appointed in February 2014)

Overview

In anticipation of a large cohort of members retiring in the next 5 to 10 years, the ICGP has begun to look at the needs of this section of the membership. This is in line with the overall objective of the College in supporting members throughout their professional career.

The aim of the project is to design and deliver supports deemed necessary for members planning for and commencing retirement from practice. The initial focus of the project directors has been on exploring and researching the needs of retiring/retired GPs by:

- Interviewing a large number of GPs including those already retired and those at the point of planning retirement. This was in an effort to identify the ideas, concerns and expectations of this group of practitioners
- Looking at best practice among other professional groups in this area
- The directors have researched best practice and approaches to retirement planning in the following professions/professional organisations
 - The Irish Hospital Consultants Association provides its members with one to one advice on leaving private practice
 - The Canadian Medical Association has an excellent online resource for its members (retired and about to retire)
 - The Royal College of General Practitioners in the UK is currently developing a resource for its members – personal communication date: 19 March 2014
 - The Canadian College of Family Physicians is also starting a programme for its members who are retiring – personal communication date: 28 May 2014
 - The Royal Australian College of General Practitioners has publications dealing with “Closing a Medical Practice” and “Physician Health”
 - In addition, the membership organisations for Irish lawyers, accountants, architects and Irish Small and Medium Enterprises (ISME) were approached for information regarding the supports they provide for their members
- Delivery of workshops: the project directors have presented three workshops on the themes of retirement from practice and planning for retirement at the following ICGP conferences

ICGP Annual Conference /AGM – May 2014
Retirement from practice – who me? Meeting the challenge of transition

ICGP Summer School – June 2014
Retirement from practice – who me?

ICGP Winter Meeting – November 2014
Retirement from Practice: fail to prepare – prepare to fail

Information resources

The project directors have been actively researching and engaged in preparatory work on the production of a guide to retirement planning for general practitioners. It is anticipated that the guide will be launched at the ICGP Annual Conference & AGM in May 2015 and made available to members after its launch.

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Other activities

The project directors have provided advice and information to members on request over the year on retirement issues.

Other projects

Consideration is being given to preparing a one day workshop on retirement planning. This might be offered on a regular basis to the cohort of general practitioners and their spouses for whom this issue becomes of interest.

Retired GP Group

The work of the project is supported by Mr Dermot Folan, Director of Management in Practice and ICGP COO.

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Education Governance Committee Report

Author: Dr John Cox, Chair of Education Governance Committee

Other members of the committee

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

Administration

- Ms Yvette Dalton

Retired members

- Dr Brian Norton

The Education Governance Committee reports on the following:

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

Projects undertaken during the past 12 months

- Continuing Medical Education (CME) tutors Dr Kevin Quinn (Donegal) and Dr Tom Foley (Carlow - Kilkenny) retired during the year and were thanked for their many years of educational service. Dr Aidan Roarty was appointed to Donegal and Dr Cormac Behan to Carlow - Kilkenny. The total number of CME tutors nationwide is 37. In addition, there are 98 group leaders assisting tutors in the delivery of CME to a total of 171 small groups
- A workshop to train and support group leaders for CME groups was held at the Kingsley Hotel, Cork on 29 November 2014. A further workshop is planned for 2015
- Dr Henry Finnegan, National Director, CME, met with Professor E. McGovern, National Director for Medical Training, HSE - MET unit at Dr Steevens’ Hospital, Dublin, on 4 December 2014. This meeting reviewed all aspects of the CME Network, and in particular highlighted capacity problems. Unfortunately, the outcome of this meeting was that there would be no increase in funding for the CME Network from the HSE

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- The Annual General Meeting of the ICGP was a success – the new development of having educational events of the Friday night worked well. There were two workshops entitled “Doctor in the Dock” and “Palliative Care in Practice”
- The Summer School in June 2014 was also a success. It was the highest year for participants with over 300 registered. The format worked well and feedback was positive
- Dr Peter Sloane (Director of the ICGP Network of Establishing General Practitioners) took over the lead on developing the programme for the 2014 Winter Meeting. It too was extremely successful. The theme was “The different faces of advocacy in general practice” and it took place in November at the Sheraton Hotel, Athlone
- Delivery of e-learning modules on a number of educational topics continued throughout 2014 with increasing numbers of GP participants
- Mr Pearse Finnegan stepped down as director of the Mental Health Programme during the year. We are very grateful to him for his contribution to the programme over the past 10 years. The role of director of the Mental Health Programme has been incorporated into the new role of assistant medical director. We welcome Dr Brian Osbourne, who was appointed to this post during the year
- The formation of an education and training strategy working group which will report to both Education Governance and the PGTC has commenced. The first meeting of this new group took place on 24 September 2014
- We thank Dr Andrée Rochfort, Director of Quality Improvement, for her comprehensive reports and lists of publications throughout the year
- The Substance Misuse Programme presented a very successful workshop on the management of benzodiazepine dependency at the ICGP Winter Meeting
- Also, a session by the Substance Misuse Programme on issues relating to audit, substance misuse programmes in prison and infectious diseases was well received at the ICGP Summer School in Kilkenny
- Reports from Dr Miriam Daly, Programme Director of the Women’s Health Programme were gratefully received
- Dr Zelig Gaffney was appointed as LARC Programme coordinator on 1 September 2014
- A successful Women’s Health Study Day was run in conjunction with the ICGP Summer School

Future plans

- It was agreed between the ICGP and Primary Care Surgical Association (PCSA) representatives that the ICGP would consider establishing a multidisciplinary working group under the Education Governance Committee to work towards the ultimate aim of credentialing members of the ICGP in skin surgery.
- A series of master classes will be delivered in 2015. The first will be on cardiovascular issues and on ECG interpretation in particular. This workshop will be interactive and scenario-based and run by two GPs with a special interest in the area – Dr Joe Gallagher and Dr John Cox.
- The current relationship issues between ICGP and academic institutions will be addressed in the future.
- Proposals for the future ICGP education strategy will continue to be reviewed and plans made to move same forward.
- While the Education Governance Committee will continue to support the expansion and delivery of online elearning modules, it will be placing greater emphasis on the measurement of the outcome of these programmes in terms of improvement of practice.

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Wonca Report

Author: Dr Mary Sheehan, ICGP Chair

Summary

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

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

There are many network organisations which are under the umbrella of Wonca Europe.

EGPRN for researchers. The Irish representative is Dr Claire Collins, ICGP Director of Research.

Euract for teachers of family medicine, The Irish representative is Dr Darach O’Ciardha.

Equip for those interested in quality. The Irish representative is Dr Andrée Rochfort.

Euripa for rural and isolated practitioners. The Irish representative is Dr Noreen Lineen Curtis.

Europrev for those interested in prevention and health promotion. The Irish representative is Dr John Cox.

Vasco de Gama for the younger doctors (NEGS and trainees). The Irish representative is Dr Peter Sloane.

It is planned that the ICGP will host some of the network organisation conferences over the next few years. This started with the Vasco de Gama Forum meeting in February 2015 where the NEGs group hosted 300 young doctors from all over Europe.

Irish GPs were well represented at the European Wonca meeting in Lisbon in July. There were 70 Irish delegates registered for the conference. There were 19 oral presentations and workshops and six poster presentations by Irish doctors at the conference. One of the three Young Researcher prizes at the meeting was awarded to Dr Danielle Diville from the Galway training scheme.

Dr Michael Kidd, president of Wonca, spoke warmly in his keynote address in Lisbon of his visit to Ireland the previous week. He had been in the Dail for the reading into law of the General Practitioners’ Act and attended the research workshop at the Summer School in Kilkenny.

This year’s conference is in Istanbul on 22–25 October. The 2016 conference will take place on 16–18 June in Copenhagen. In 2017, the conference will return to Prague. Further details of these can be accessed on the Wonca website: www.woncaeurope.org.

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

When one attends a Wonca Europe conference the most striking thing is the similarities rather than the differences between European colleagues. The core of all our work is

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comprehensive continuing care for people in their communities regardless of which country we work in or the payment system of each country. The exchange of ideas and thought provoking keynote lectures and workshops invigorates the participants.

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

The next Wonca world conference is in Rio de Janeiro in 2016 and then in Seoul in 2018.

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EURACT Report

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

Summary

EURACT is a network organisation within WONCA Europe with a special interest in the teaching of General Practice/Family Medicine at both undergraduate and postgraduate level. It has made significant contributions including the Definition of General Practice and the Educational Agenda, which examines the core competencies of GP/FM. Through the website Euract.eu it provides very useful educational resources that can be used in teaching. It is also quite straightforward to contribute resources such as presentations that you have developed yourself for uploading and sharing. A Facebook site has also recently been launched facebook.com/EURACT which allows a more social interaction.

My role as EURACT Council representative is to attend and participate in Council meetings, held twice yearly. Presence on Council allows a two way flow of information regarding the latest developments in teaching in General Practice.

Activities during the past 12 months

- April 2014 – attended Council meeting in Skopje, Macedonia
- October 2014 – attended Council meeting in Porto, Portugal
- I was asked to chair the Website Task Group for EURACT, which will oversee the upgrading of the current website

Future plans

An educational conference, in parallel with a Council meeting, will be held in Dublin in September 2016 and will host up to 100 international delegates.

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ICGP Nominee to the Medical Council Report

Author: Dr Rita Doyle

Summary

Now that I have spent almost two years in this position, I am getting a good grasp of the business of the Council. Contrary to popular belief, it is not about punishing the practitioner, but rather the protection of the public. The most public issue that has occurred in the last year is what is now known as the “Corbally” judgement. This has redefined the definition of poor professional performance in a way that there is now very little difference between professional misconduct and poor professional performance, as decreed by the Supreme Court.

I have three roles in the Medical Council. I am a full member of the Council which holds meetings approximately every six weeks .These meetings last a day and a half. I am a member of the Preliminary Proceedings Committee and we have a full day meeting approximately every four weeks. The Preliminary Proceedings Committee is the committee at which all new complaints are dealt with, thoroughly investigated and they are then either dismissed – and the vast majority are – or referred on to a Fitness to Practice hearing or sometimes performance assessment. Both of these roles necessitate a huge amount of pre-reading, particularly the PPC role, so that at times I feel I am eating and sleeping with the Council. Some of the reading can be very disturbing and it can come between me and my sleep.

I chair the Health Committee which is the committee within the Council that looks after doctors who are unwell – either physically or psychologically – and supports them to help them get back to full health and to their jobs as doctors. It is very rewarding to see these colleagues return to their work but sadly as fast as they are discharged there are new referrals but that is the nature of the job. This committee is resourced by a group of professionals who work hard to help the sick doctor.

A memorandum of understanding was signed during the year between the Medical Council and the newly named Professional Health Matters Programme (formerly the Sick Doctors) which is headed by Dr Ide Delargy.

In 2014, the Council carried out a very interesting research project in the form of a questionnaire to trainees, entitled “Your Training Counts” which was recently published This has been published on the Council’s website and is very interesting reading. Bullying or harassment during their training is reported by a significant percentage of trainees. I think it is good that this has been highlighted and I would hope that awareness alone can help to bring this to a zero tolerance policy in all training schemes.

The work of the regulator is never popular. The Council is constrained by a very proscriptive Medical Practitioners Act and some of criticism should actually be directed to the legislators rather than the Council which only enacts the law.

The work is extremely interesting, even if at times a little harrowing. I continue to represent the perspective of the everyday general practitioner.

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UEMO Report – European Union of General Practitioners /Family Physicians

Author: Dr Lynda Hamilton

Head of Delegation: Dr Liam J Lynch, IMO

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

Summary

UEMO has been involved with DG Sanco EU projects “TellMe” and “SMART”.

“TellMe” assessed how information, vaccines and appropriate personal protection supplies were communicated to family doctors dealing with health risks. “SMART” assessed ICT capabilities, and found a wide range across Europe.

UEMO has been examining information needed, and from what sources, to produce an ID professional card to facilitate cross border professional recognition and prescribing. It is also looking at a unique patient identifier using a smart card with information for health workers to assist patient movement. The EU is proposing, to much debate, that the patient control their own electronic patient record.

E and M health has attracted large multinational companies to be involved at EU level in the development of personal monitoring by mobile devices. Data protection and over screening issues arise.

The incoming Italian presidency is already under pressure to collaborate with medical device companies to do pseudo-academic projects which are commercial in nature, unlike the EU projects undertaken by the outgoing Hungarian presidency.

Both presidencies supported recognition of the post-graduate university degree as a specialist qualification.

It was agreed at the autumn meeting that CME/CPD for GPs would be undertaken by UEMO forming an EACCME type body specific for family medicine.

Belgium, Austria, Germany and Scandinavian countries increasingly use a technical physician assistant to assist GPs under pressure due to a widespread physician shortage. They maintain records, are trained to do BP, phlebotomy and other procedures. They are not nurses. Standards and liability issues arise.

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Education Programme Report

Author: Nicholas P Fenlon, Director of Education

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

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

Summary of Education Programme

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

Programme activities during past 12 months

Academic year courses

The following courses were delivered in 2014:

- Occupational Medicine Leading to LFOM (2 year course)
- Musculoskeletal Examination and Injury Management
- Certificate in Women’s health
- Certificate in Geriatric Medicine
- Certificate in Management in Practice
- Certificate in Management in Practice for GP Registrars
- Substance Misuse and Associated Health Problems Certificate Course

Short courses

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

- Immediate Medical and Emergency Care
- SCALES (started in September)
- Women’s Health
- Practice Staff

eLearning modules

Twenty elearning modules were made available to members during 2014. Over 2,000 individual users were recorded engaging in these modules, with an average of 68 users per week.

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Modules include:

Clinical content modules

- Management of Hypertension
- Management of COPD
- Management of Asthma
- Rheumatology
- Oncology
- Women’s Health

Health promotion

- Promoting Smoking Cessation
- Promoting Physical Activity
- Alcohol Awareness
- Addressing Childhood Obesity

Communication skills

- Suicide Prevention
- Management of Depression
- Dementia

Non-clinical modules

- Health Literacy
- Injury Claims
- Information Skills

Events

We delivered successful major events in 2014:

- Weathering the Storm – Conference in Clonmel
- Annual Conference & AGM – Galway
- Summer School – Kilkenny
- Winter Meeting – Athlone

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

Programme milestones, deliverables and outputs

Unit milestones

- Ongoing support and guidance by our extern – Professor Anthea Lints, Edinburgh University.
- The seventh ICGP Summer School took place in June 2013 with over 300 GPs in attendance.
- A number of new ICGP elearning modules were launched including our first module for all GPs working on the island of Ireland – Managing Childhood Weight Issues is available to all RGPRNI members.

Forum Distance Learning online

- Those who complete the Forum Distance Learning MCQs were able to do so electronically in 2014. Almost 700 members now use this electronic service every month.

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Future plans

Risk management: We will be delivering a series of modules under the heading of Risk Management starting with modules on confidentiality and consent.

Diabetes care: We will be developing a series of elearning modules on diabetes care and will compliment with masterclasses in diabetes. This will replace the current diabetes course format.

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

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

- Cardiovascular
- Respiratory
- Mental health
- Pain management
- Risk Management
- STIs

Electronic access: The plan for automatic registration and the updating of professional competence records is well underway and will be launched in 2015.

Summer School 2015: We will be facilitating the eighth ICGP Summer School in June 2015 at Mount Wolseley Hotel, Tullow.

Administrative resource being provided to project/programme

The Education Programme has three full time administrators, Louise Nolan, Jana Pickard and Yvette Dalton. Our events are co-ordinated by Orla Sherlock. All administrators have given hugely to the development and continued success of ICGP education delivery.

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CME Small Group Network Report

Author: Dr Henry Finnegan, National Director of CME

Overview

The Continuing Medical Education (CME) Tutor Network continues to provide locally based small group learning (SGL) meetings. This network has been built up over many years. The local SGL meetings remain the most popular educational activity attended by GPs in Ireland. The educational modules provided by the tutor network are relevant to the common, important and problematic areas of medicine and management in general practice. The meetings allow discussion to take place among peers in active practice in a trusted learning environment. The confidentiality of the discussions among the peer group is assumed. It is the ethos of this format of learning that each participant contributes and shares what they actually do before concluding that some change may be required in their practice.

The funding of the tutor network comes from the HSE. I report to the National Doctors Training and Planning (NDTP) unit (established in September 2014), formally known as the Medical Education and Training (MET) unit in the HSE, and to the ICGP through the Education Governance Committee.

Questionnaire survey

A questionnaire survey, to assess if participation in GP CME SGL influences medical practice, came up with some positive results. The survey was undertaken in November–December 2012. The survey is due for publication in the Irish Medical Journal (IMJ) in April 2015.

Tutor network

The national GP CME tutor network and the local SGL meetings play a significant role in facilitating GPs in active practice in attaining external and internal continuing professional development (CPD) credits to meet their obligations under the ICGP Professional Competence Scheme (PCS) as recognised by the Irish Medical Council (IMC). The CME SGL meetings are not ordinarily sponsored by the pharmaceutical industry.

There are 37 tutors in the network. The national map is complete. There is a tutor in every faculty area in the country. Due to the recruitment ban in the civil service, it was not possible to replace any retiring tutors for a number of years. Under the new mechanism agreed between MET HSE and the ICGP, a number of replacement tutors have been appointed. Dr A. Roarty took up the position of CME tutor to the Donegal East scheme on 1 October 2014, and after a second round of advertising and interviewing, Dr C. Behan was appointed as tutor to the Carlow – Kilkenny Scheme. He took up the post on 1 January 2015. Dr Kevin Quinn, Donegal East, and Dr Tom Foley, Carlow – Kilkenny, are to be thanked for their many years of educational service as tutors to the GPs in their areas and for their contribution to the development of the tutor network.

CME small group learning meetings

The number of CME SGL meetings held in 2014 was 1,303. In 2014 there were 172 small groups in the tutor network. Each small group meets once per month, with a break over the summer months. The tutor informs the local GPs of the date and venue in advance of each meeting. These meetings are not ‘open’. GPs must be on the tutor’s mailing

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list of eligible participants to attend. The meetings are led by the local CME tutor or a group leader (GL) who has been briefed by the tutor on the aims and objectives of the educational topic to be covered that evening. We recommend the maximum number attending to be 12 to 13 doctors for effective learning to take place. Each group meets a minimum of seven times per year; some groups meet nine times per year. The number on the group mailing list is usually 16 to 22 doctors. The tutor is responsible for the organisation and delivery of the education package to each group. We recommend that five be the maximum number of groups per tutor. Tutors are trained in the skills required to lead SGL meetings. Some tutors attend and lead all the SGL meetings. Others use group leaders (GL). Tutors are expected to regularly lead at least one group in their scheme.

If a tutor uses GLs, s/he will attend one or more meetings of that group per year. If a GL is used, then there is a defined system of briefing and debriefing in place between the tutor and GL. Any new GLs on a scheme must have prior approval from the national director of CME and the ICGP CEO as there is a cost centre involved. The ICGP is thanked for covering the excess required over the HSE fixed allocation for GLs. Any new GL must agree to the organisational and reporting arrangements to the national director of CME.

With the advent of the compulsory CPD, GPs are attending CME SGL meetings in ever increasing numbers. The total number of attendees in 2014 was 13,801. This is similar to the total number of attendees the previous year. There was a further increase of 168 GPs accommodated, by agreement of the tutors concerned, on the tutor mailing lists in 2014. The average attendance per GP remains at 4.5 meetings per year. With the creation of more local groups in some areas, the average attendance nationally has dropped back to 10.5 persons per group. Demand is still exceeding supply when it comes to the work of some CME tutors. Some of the city areas are continually experiencing capacity problems. In Dublin North and Dublin West, the average attendance figure for individual CME meetings is 18 GPs. The average attendance per group in some of the Galway city meetings is 16 GPs. In Cork city, the average attendance per group is 20 GPs. It is difficult for tutors or group leaders to deliver good quality meetings in the SGL format with large groups rather than small groups. This is continually putting pressure on the tutor network to come up with solutions to the capacity problems. At the end of December 2014, there were 69 GPs on waiting lists to attend CME SGL meetings. It is particularly frustrating for newly qualified doctors from GP specialist training schemes if they cannot access a local CME SGL meeting.

New tutors

There is a need for additional tutors to be added to the tutor network to meet the capacity problems. As national director of CME, I met with Professor E. McGovern, National Director of the National Doctors Training and Planning (NDTP) Unit, HSE, in Dr Steevens’ Hospital, Dublin on 4 December 2014. The meeting reviewed all aspects of the CME tutor network. The capacity problem was highlighted. The cutbacks since 2009, the recruitment ban in the civil service, and the budgetary ceilings on some line items were discussed. It was made clear there will be no increase over the existing funding for the CME network. The NDTP now has a remit in relation to consultant appointments and medical workforce planning.

Group Leaders

As of December 2014, there were 96 group leaders assisting tutors in the delivery of CME SGL meetings. In some faculty areas, the SGL educational programme could not be delivered without the help and involvement of these group leaders. Up to 2013, these group leaders had no task definition or contractual reporting arrangement with the

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national director. I have introduced an application system for the appointment of group leaders. On approval, they are now informed of certain responsibilities and are asked to sign if they agree to comply.

There is a need for group leader courses. An application to the ICGP for the resources necessary to run a number of such courses on a regional basis was made in 2014. The aim was that participants would have an opportunity to learn about leadership, group dynamics, as well as their recording and reporting responsibilities. We hoped to create an understanding of their part in a national project and to develop collegiality similar to that in the tutor network. The tutors meet three times per year.

A group leaders course was held for group leaders in the eastern region on 10 March 2014 at the ICGP. The course for the southern region was held on 29 November 2014 at the Kingsley Hotel, Cork City. Both were well attended and the feedback was essentially positive. Some comments were “the opportunity to lead was appreciated”, “collegiality improved”, and “practical tips were useful”.

I wish to acknowledge the support of the College in resourcing these meetings. The GLs are now an integral part of the delivery of the CME SGL Programme. These courses give the GLs a sense of collegiality and also expose them to the skills required to lead a group. The reporting arrangements and the briefing/debriefing functions are emphasised. Some areas have decided to create an advisory group between the tutor and GLs which will meet each term to plan the content of meetings. Having a cohort of trained GLs attached to the network should help identify potential new CME tutors. Further courses in other regions will be organised in 2015.

Evaluation visits

There were three CME scheme visits in May 2014. The South Tipperary, Dun Laoghaire and Cork City B schemes were visited. The visiting teams, including externs, were happy with what they saw and recommended that the schemes continue and the tutors were praised for their dedication and commitment to the CME SGL project.

Doctors Conor McGee, Peter Sloane, and Tony Lee are thanked for their participation as externs to the South Tipperary, Dun Laoghaire and Cork City B scheme visits. These evaluation visits were on budget.

Two visits to schemes took place in the last quarter of 2014. The Wexford CME Scheme was visited on 24 November 2014. The visiting team consisted of Doctors Molly Owens, Laoise Byrne, with John Cox as an extern. The visiting team made a series of recommendations, under various headings. The incumbent tutor, Dr Mark Walsh, was commended for running an efficient, well co-ordinated scheme with the appropriate use of group leaders.

The assessment visit to the North Tipperary Scheme took place on 9 December 2014. The visiting panel consisted of Doctors Eamon O’Shea and Mary Kearney. The tutor, Dr Pat Harrold, leads all the local groups himself. The recommendations are recorded in the Executive Summary.

It was recommended that both tutors remain in the post. The visits were on budget.

The visit reports are sent to the HSE NDTP Unit and the ICGP Education Governance Committee.

The usual modus operandi is that three visits are done in Q1 and 2 and the next visits are done in Q4. It is planned that this pattern should continue in 2015.

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Tutor workshops

Three tutor workshops were held in 2014. The winter workshop was on 31 January 2014 and 1 February 2014 in Kilmainham, Dublin. The spring workshop was on 9 May 2014 in Galway and the autumn workshop was on 12–13 September 2014 in Athlone. Dr Conor O’Shea, GPIT director, addressed the last meeting in Athlone.

The tutor network wants to provide a quality educational product to all GPs who need it, including new entrants to general practice. At the present time, this cannot be done in all areas of the country unless new funding is provided.

Conclusion

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

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Women’s Health Programme Report

Author: Dr Miriam Daly, Programme Director

Programme members

- Programme Director: Dr Miriam Daly
- Project Director, LARC Courses: to be appointed
- Tutor and Course Coordinator: Dr Deirdre Lundy
- Administrator: Jana Pickard

Programme activities

Run courses for and award the Certificate in Contraception

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

Programme milestones/deliverables/outputs

LARC Programme

Funding

We received unrestricted educational grants from Bayer and MSD in October 2015 to support this programme.

LARC Coordinator

Dr Zelig Gaffney was appointed as LARC Programme coordinator on 1 September 2014 on a fixed term contract.

Advanced Certificate in LARC: Experienced Inserters

Applicants apply online, submit a log of procedures and organise a practice visit by a tutor to observe insertions. The closing date for applications was 31 May 2014. We have completed the practice visits for this phase and hope to open applications to this again in the next month.

Advanced Certificate in LARC: GP Trainees

GP trainees who receive training in LARC from an ICGP LARC tutor in their training practice, during their registrar year can apply on line for the Advanced Certificate in LARC from the ICGP. The application involves submitting a log of training completed by the trainee and signed by the LARC tutor.

GP led training Clinic

We have set up a GP led clinic for intrauterine device insertion in the National Maternity Hospital, Holles Street, in cooperation with Dr Rhona Mahony, Master. The clinic operates once per week and is staffed by two experienced GPs, one practice nurse and a nurse from the National Maternity Hospital. GP referrals to the gynaecology OPD are triaged to attend this clinic. The average waiting time to be seen is three months.

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The case load includes lost threads, failed or difficult insertions in general practice and menorrhagia. We have rapid access to ultrasound scanning and pipelle biopsy, if indicated. The aim of the clinic is to provide training to GPs in LARC insertions. We started accepting trainees to attend the clinic in December 2014. The clinic has been funded to date by the LARC programme which received an unrestricted educational grant given from Bayer Healthcare. Dr Rhona Mahony, Master of The National Maternity Hospital, has agreed to provide funding to the clinic from June 2015.

LARC Tutors

To be a LARC tutor, and provide LARC training in a GP training practice, doctors must hold the Advanced Certificate in LARC, must be working in a GP training practice and must attend a LARC tutor course. We are running LARC tutor courses around the country. We plan to run four courses in 2015.

LARC Updates

We have organised a series of workshops in LARC. These are case based and interactive and provide peer learning and support in the more challenging facets of LARC provision. These workshops are open to all general practitioner LARC providers. Funding from the LARC programme allows us to provide these workshops free of charge to members. We plan to run four updates in 2015.

Certificate in Contraception

The Reproductive and Sexual Health Committee awards the Certificate in Contraception. We run the Reproductive and Sexual Health Theory Course twice per year. We run the Certificate in Contraception Practical Course twice per year.

Contraception Tutors

Contraception tutors can sign off their GP trainee to apply for the Certificate in Contraception. We are running four contraception tutor courses around the country in 2015. This course aims to teach doctors who wish to become a contraception tutor for the purposes of certifying candidates for the Certificate in Contraception. The courses are open to GP trainers and are free of charge as a result of funding received from the Crisis pregnancy programme.

Women’s Health Conference:

A Women’s health study day was run in conjunction with the ICGP Summer School in June 2014.

STI e-Learning Course:

The development of the STI e-learning course was funded by Crisis Pregnancy Programme in 2013. The course was launched in December 2013 and has been available free of charge to nurses and doctors. We are applying for more funding to review and update this course.

Research

- Gonorrhoea testing and treatment in general practice. Funding received from the HSE Crisis Pregnancy Programme.
- National survey on testing for STIs in general practice. This survey was carried out in 2013 and we plan to write this up and submit for publication.
- Research on domestic violence recognition in general practice: knowledge and attitudes of GPs. Funding from COSC, the National Office for the Prevention of Domestic, Sexual and Gender-Based Violence.
- We carried out an audit on the GP led IUD training clinic in the National Maternity Hospital. Results were presented at the National Maternity Hospital Study Day.

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Representation

HSE Crisis Pregnancy Programme Advisory Group

Forum articles

Series of articles on women’s health in Forum, the College’s journal.

Clinical queries

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

WOMEN’S HEALTH COURSES: 1 APRIL 2014–31 MARCH 2015		
COURSE	DATE	NO. ATTENDING
Reproductive and Sexual Health Course	September 2014	51
	January 2015	41
Certificate in Contraception Practical Course	March 2014	16
	October 2014	20
LARC Tutor Workshop	February 2014	27
	June 2014	24
LARC Update & Tutor Workshop	November 2014	48
Contraception Tutor Course	January 2015	35
	June 2014	14
Certificate in Women’s Health e-Learning	September 2014	7
Womens Health study Day at Summer School What’s New in Contraception LARC: Lost Threads: Osteoporosis: Gynaecology and Early Pregnancy: Management of Polycystic Ovaries in GP: Urinary Incontinence:	June 2014	55
		50
		73
		64
		46
		50
Cervical Smear Course	March 2014	18
	May 2014	15
	November 2014	2

Future plans

- We are considering running a joint Reproductive and Sexual Health Conference in Dublin in 2016 in conjunction with the Faculty of Sexual and Reproductive Healthcare of the Royal College of Obstetrics and Gynaecology, UK
- Antenatal and postnatal care in General Practice e-learning Course
- The Royal College of Physicicans, Ireland and the Institute of Obstetrics and Gynaecology have offered support in the development of this e-learning course. We are currently seeking funding
- Run a Women’s Health Study Day at the ICGP Summer School, June 2015
- Develop guidance for GPs on female genital mutilation (FGM). Proposal for funding by the National Steering Committee on FGM
- Provide women’s health articles for Forum monthly
- Develop a webpage in the Women’s Health section of the website which we keep populated with recent articles and publications of interest
- We plan to appoint a new LARC programme coordinator in the next few months

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Disease Surveillance Sentinel Practice Network Project Report

Author: Dr Michael Joyce, Project Leader

Other members of the project

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

Summary of the project

The project involves running a computerised surveillance network for certain infectious diseases in the community and involves 61 sentinel practices spread throughout the country. There is a particular emphasis on the surveillance of influenza.

Background to the project

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

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

The process was successful from the outset with very good return rates being achieved immediately and all the stake holders were very pleased. Initiall there were 20 practices involved, all using Health One software and the conditions covered were influenza, chicken pox and shingles. Health One was chosen in particular because of its suitability for this type of project. Now there are 61 practices involved including some practices using software other than Health One. Measles, mumps, rubella and gastro-enteritis have been added to the conditions that are covered.

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

Educational aims of the project

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

Benefits to members of the project

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

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

Project activities

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

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

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

Although not technically a part of this ICGP project, a significant number of the network participants have volunteered to take part in a pan European study of influenza vaccine effectiveness in conjunction with the HPSC which was first carried out in the 2009/2010 season and has been continued during each season since. A paper on this was published in the IMJ, volume 105, no. 2, Feb 2012, pgs. 39 to 42. This project has continued in the 2014/2015 season.

Project milestones/deliverables/outputs

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

With 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 is I believe a tribute to how well the network runs that we have such a high retention rate of practices.

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 seasonal and pandemic influenza. Return rates well in excess of 90% continue to be achieved consistently.

Future plans

Continued surveillance is planned.

Funding source

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

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Substance Misuse Programme Report

Author: Dr Ide Delargy, Programme Director

Programme members

- Programme Director: Dr Ide Delargy
- Clinical Audit Facilitator: Ms Karen Dempsey (resigned February 2015)
- Administrator: Ms Niamh Killeen
- Audit Review Group Chairperson: Dr John O’Brien

Summary of programme objectives

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

Training

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

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

Level 1 accreditation

Our aim is to have in time all GPs trained to a minimum of Level 1 standard on completion of their postgraduate training. The ICGP has always advocated that a Level 1 contract should become part of the GMS contract for new GPs taking on a list.

Level 2 accreditation

This is seen as a more specialised area for interested GPs and requires an additional time commitment and training.

Level 1 training (to be replaced by the Foundation Course in Substance Misuse)

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

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

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

Activity levels:

GPs completing Level 1 Training Jan–Dec 2014	96
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Level 2 training

The certificate course now constitutes the academic training component of Level 2 training. The steps required to become Level 2 trained and accredited include:

- Complete online Level 1 training and complete a satisfactory Level 1 audit
- Complete the Certificate Course in Substance Misuse and Associated Health Problems
- Complete a log diary of patients under the supervision of a GP mentor
- Complete a satisfactory audit at Level 2

Certificate Course in Substance Misuse and Associated Health Problems

This course has been running since September 2013. The programme is a blend of online modules complemented by two day-long workshops at course commencement and end. Each candidate is required to implement a practice improvement project as well as outline personal learning objectives – these are assessed as part of the programme. The online modules are evaluated by a series of MCQs. Two courses have been completed. A third course is due to complete in early May 2015. This course is open to all GPs as well as trainees in other relevant specialties (emergency medicine, prison doctors and infectious diseases).

Activity levels:

	PARTICIPANTS
Course 1 – November 2013	22 completed
Course 2 – January 2014	18 completed
Course 3 – September 2014	15 completion date May 2015

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

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

The certificate course is delivered through a mixture of clinical assignments, workshops and online learning modules. It is open to all GPs and doctors in other relevant specialties (emergency medicine, prison doctors and infectious diseases).

Please see www.icgp.ie/substancemisuse for further details on the training and accreditation process.

Continuing Professional Development (CPD) in Substance Misuse

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

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ICGP AGM 2014

A one day masterclass titled *Alcohol & Drugs – What Can the GP Do?* was delivered in association with the ICGP AGM in May 2014. The masterclass included a morning workshop on the use and abuse of benzodiazepines and codeine, and withdrawal protocol, and an afternoon workshop on alcohol and hidden harms.

Activity levels:

	PARTICIPANTS
Masterclass – May 2014	60

Audit

Clinical audit for GPs participating in the Methadone Treatment Protocol

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

The development of the self-audit tool has been completed and is ready for implementation pending the publication of the new National Guidelines on Opiate Substitution Treatment. The self-audit tool has been piloted and reviewed by the ICGP director of research and audit and the National Office for Clinical Audit (NOCA). An electronic data collection tool, TRAX, will be used for compiling individual GP reports and for providing collective national audit reports.

Activity levels:

	2014
Audits carried out	21

Audit Review Group meeting dates

- 28 January 2014
 - 15 April 2014
 - 23 September 2014
 - 9 December 2014
- A full review and revision of all documents relating to the MTP audit process has been undertaken. Documentation has been updated as appropriate.
 - The role of the clinical audit facilitator (CAF) has been reviewed in line with the changes required to the self-audit process. (Due to the resignation of the current CAF a recruitment process is currently underway.)

Representation on national bodies and agencies

National Clinical Guidelines Development Group

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

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National Traffic Medicine Working Group on Substance Misuse (RCPI)

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

National Advisory Committee on Drugs

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

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

National Buprenorphine/Naloxone Working Group

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

Steering Committee for Benzodiazepine Detoxification Guidelines – Co-ordinated by the Anna Liffey Project

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

Developments for 2015

- Curriculum development for GP training: the overall direction of the SMP is in transition in order to develop a broader focus on the addiction problems which face every GP in regular general practice throughout the country. To reflect this change, a chapter on substance misuse is included in the new ICGP curriculum development for postgraduate GP training.
- Foundation Course in Substance Misuse: the SMP is revising its training for GPs to reflect the dependency problems with prescription drugs such as benzodiazepines, z drugs and opiate pain medications. The management of alcohol problems in general practice will be included in the expanded training programme and we will work in consultation with the Mental Health Programme and other relevant agencies to develop this training. This is in line with the National Drugs Strategy which recommends the alignment of the national plan of alcohol and drug problems.
- The SMP is currently recruiting a deputy director for the programme who can support the further developments in the programme. Our aim is to become more involved in research opportunities in the area of substance misuse.

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Mental Health in Primary Care Report

Author: Dr Brian Osborne, Assistant Director of the Mental Health Programme

Programme members

- Dr Brian Osborne, Assistant Medical Director
- Pearse Finegan, Consultant
- Mairead Delaney, Administrator

Introduction

This year, Dr Brian Osborne was appointed Assistant Medical Director and his role includes responsibility for mental health in primary care. Administration support is provided by Mairead Delaney and project development support is provided by Jantze Cotter.

In last year's report, it was highlighted that the developments in mental health in primary care were not a priority in the mental health services of the HSE and this remains the same.

We continue to strive to develop mental health in primary care and have had meetings with the minister for primary care and mental health who continues to support us.

At present there is no budget allocation to mental health in primary care.

The National Office for Suicide Prevention continues to support the development of services and research in general practice to support GPs in dealing with patients presenting with suicidal ideations.

Developments and courses

- In 2014, we developed an e-learning programme on alcohol reduction for use in general practice. The first part of the programme was launched in 2014.
- We also distributed the alcohol measure glass to all members and to other groups working with addiction. The feedback is very positive on its use.
- A submission was made in response to the Review of Public Health (Alcohol Bill).
- The third part of the review of "A Guide For Primary Care Staff – Alcohol Problem Identification and Management" was re-launched at the Winter Meeting.
- The access to counselling services (CIPC) for patients with medical cards is now in every HSE area. The Government has allocated funding for this service to expand.
- There are 18 new positions in the Suicide Crisis Assessment Service (SCAN). This service was developed to support GPs in dealing with patients who present with suicidal ideation. In some areas, the interface between general practice and this service has been suboptimal. We are part of the ongoing educational programme for SCAN to try and rectify this.
- GPs Take Care is a programme developed to support our members when they encounter stress in their working life. It is continually being developed with Dr Claire Hayes, the course host. GPs Take Care took place at the Summer School and the Winter Meeting, and has received very positive feedback.

Mental health e-learning at the ICGP

- Addressing Alcohol Misuse e-Learning Module
- Depression e-Learning Module
- Suicide Prevention e-Learning Module

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Projects with outside groups

- We are a member of the “Vision for Change” sub group.
- We have worked with Suicide or Survive (SOS) in the development of their workbook and e-learning programme, Wellness in the Community. (www.wellnessworkshops.ie).

Conferences/meetings attended

- WONCA Europe, Lisbon
- Mental Health Nurse Managers AGM, Galway
- National Dementia Conference, Dublin
- Mental Health in Primary Care, Stewarts Hospital
- CME meeting in Sligo on mental health service issues in Sligo

Research

Results from College members on the Alcohol Detox Questionnaire are available. Dr Claire Collins has signed off on them.

We have secured funding to investigate mental health issues presenting to out of hours GP services, and this study is now under way with CareDoc. Phase two of this study started in February 2015 and its aim is to determine how patients who present to GP out of hours services with mental health problems are followed up in A/E and with their own GP.

Future plans

In 2015, we will be addressing child and adolescent mental health services. The Summer School will have a session on this subject.

We have submitted a research proposal entitled “Promoting the physical health of people with severe mental illness” to the HSE for funding.

There is unanimous consensus from the international literature that general practice has a central role in the provision of medical treatment and preventative health care to people with a severe mental illness (Ministerial Advisory Committee on Mental Health Report, Victoria Government, Australia, 2008). A Vision for Change recommends that “all mental health service users, including those in long-stay wards, should be registered with a GP” (HSE, 2006).

The core principle that underpins our proposal is that all people with a severe and enduring mental illness, irrespective of whether they are patients of the specialist mental health service system, should have a general practitioner who can care for their physical health.

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Quality and Standards Committee Report

Author: Dr Sheila Rochford, Cork City Faculty and Chair of Quality and Standards Committee

Quality and Standards Committee Members

- Dr Sheila Rochford (Chair)
- Dr Margaret O’Riordan
- Ms Karen Dempsey (representing Dr John O’Brien)
- Ms Anne Cody
- Dr Ray Mulready
- Dr Sheila Stephens
- Dr John Cox
- Dr Mark Walsh
- Ms Carol White

The Quality and Standards Committee receives reports from the following:

- The Professional Competence Committee
- The Quality in Practice Committee
- The Substance Misuse Programme
- ICGP Medical Director

Full details of the annual reports from these sources are detailed in the following pages. The chair of the Quality and Standards Committee reports to the Board of the ICGP.

The ICGP aims to provide services to maximise professional effectiveness for the benefit of patients. Maintaining quality and standards is challenging in the current healthcare environment. Our focus remains on patient safety, clinical effectiveness and awareness of patient experience. In addition, compassion and social accountability are values that guide us when attempting to handle dilemmas that arise.

In the past year, Dr Paul Armstrong resigned as chair of the Quality in Practice Committee and Dr Maria O’Mahony resigned as project officer. I would like to take this opportunity to express gratitude for their work and the work of the many others who serve on these committees.

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Medical Director’s Report

Author: Dr Margaret O’Riordan

As we look to the future of general practice, the management of patients with chronic disease and multi morbidity is projected to grow in the coming years as the population and the proportion of older people increases. GPs have the unique ability to provide continuity and the co-ordination of care for patients with multiple chronic diseases. Irish GPs have clearly demonstrated their ability to provide high quality effective care for these patients given appropriate resources and supports to do so. Priority should be given by the government to developing and funding services for patients with chronic disease in the general practice/primary care setting.

The development of the Clinical Care Programmes within the HSE has shown potential to improve chronic disease management. However, there has been no material commitment shown to date by the Department of Health or HSE to provide the necessary resources and services to support the implementation of national clinical programmes to deal with the chronic disease management needs of patients in the general practice setting.

The ICGP continues to work with the HSE and others towards the change to a primary care focused health system. The restructuring of the system leading to the provision of integrated services/care across primary and hospital care is the agreed priority. However, to achieve this goal there must be a significant investment in primary and community care, including both personnel and infrastructure. Achieving this within the existing quantum of public funding for health will require a radical approach with a transfer of funding and resources from the acute hospital sector to primary care. Funding needs to follow the patient in both community and hospital settings. The reduced demand on secondary care must be accompanied by a reduced budget with a transfer of those resources to the community. The process requires some dynamic decisions on the reallocation of resources to progress the transfer of care and services.

Major developments in 2014

The role of medical director involves oversight and support across all ICGP activities including education, training and research. The medical director is also a member of the ICGP senior management team and attends all ICGP Board and Council meetings. Ongoing relationships are maintained with external stakeholders including ministers of Health, the Department of Health & Children, the Health Services Executive, the Health Information & Quality Authority, the Medical Council, the Forum of Postgraduate Training Bodies, the National Cancer Control Programme, patient representatives, the Irish Medical Organisation and the National Association of GPs.

Access to diagnostics

Following the publication of the ICGP report *Access to diagnostics – a key enabler for a primary care led health service* in May 2013 and the subsequent *Radiology clinical care programme report* in August 2013, looking at the same issue from a hospital perspective, the need for access to ultrasound and MRI was clearly identified as a priority issue for public patients and GPs. The National Cancer Control Programme also supported the recommendations of the ICGP report particularly in relation to access for pelvic ultrasound. The HSE has responded by establishing a primary care procurement process for outsourcing ultrasound to enable direct access to ultrasound for public patients

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referred by GPs in the HSE western and southern regions. This service is expected to commence in 2015 and to provide 13,000 investigations in the first phase of this project. It is hoped that following this pilot, phase services will be extended to other parts of the country in due course.

National Standards for Safer Better Healthcare

The National Standards for Safer Better Healthcare were launched in June 2012 by HIQA. They apply to all health care services (excluding mental health) provided or funded by the HSE, including general practice. An ICGP working group chaired by Dr John Delap is working on interpreting the standards for general practice and the development of a toolkit to support ICGP members to implement them. Members of the working group are drawn from ICGP members and key stakeholders – HSE, IMO and patient representatives. A small group of practice managers and practice nurses have also contributed to this development. A series of articles has commenced in Forum to highlight the standards and raise awareness among the membership, and a section devoted to the standards has been created on the ICGP website. A number of meetings have taken place with Marie Kehoe O’Sullivan, Director of Safety and Quality Improvement, HIQA, to gain feedback as the work of the group progresses. Ms Jantze Cotter, Manager of Quality and Projects, and Dr Andrée Rochfort, Director of Quality Improvement, are core to the successful output from this group. Administrative support for the group is provided by Ms Maureen Dempsey.

Professional Competence Scheme

The medical director is the head of the Professional Competence Scheme (PCS) which supports members of the PCS in meeting their statutory continuing professional development (CPD) activities. Ms Jantze Cotter, PCS Manager, Ms Mairead Delaney and Ms Carol White, Administrators, have been instrumental in the success of the scheme to date. The PCS Subcommittee and its chair, Dr Ray Mulready, have guided the continued development and expansion of services for members. The PCS was reaccredited by the Irish Medical Council in 2014.

Education and training strategy

The first meeting of a working group chaired by the medical director and aimed at developing a new ICGP Education and Training Strategy took place in September 2014. The group reports to both Education Governance and PGTC and is made up of representatives from all of the key groups involved in delivering ICGP training and education. A vibrant meeting took place and a new strategy is being worked on as a result of inputs at the meeting. The group aims to produce a draft document for circulation, input from all constituent groups in spring 2015 and complete its work shortly thereafter.

HIQA Expert Advisory Group for the HTA of clinical referral /treatment thresholds for planned surgical procedures

The medical director is representing the ICGP on the HIQA Expert Advisory Group on planned surgical procedures. The product of this group has implications for GP referral to secondary services as it provides national guidance on criteria on the referral of patients for surgical procedures. Four reports have been produced to date. Orthopaedic procedures and GIT procedures were addressed in 2014.

Links with RCGP Northern Ireland

North South Co-operation between the ICGP and RCGP NI is progressing. Standards for

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the accreditation of out of hours co-ops in the Republic of Ireland based on a model developed by the RCGP NI have been reviewed by the ICGP subgroup working on this area and agreed with the RCGP NI subgroup. Feedback from the OOH CO-OP group has been included. A number of co-ops have volunteered to take part as pilot sites. A visitors training day has taken place and it is planned to commence the voluntary accreditation process in the spring of 2015.

Ebola

There was a high volume of communication from the HPSC, the HSE and individual members in relation to the ebola threat in 2014. David Hanlon represented the ICGP on the national co-ordinating committee convened by the HPSC which initially met on a weekly basis. Nuala O'Connor also provided excellent support. The ICGP website was updated and emails were sent to members as new information emerged.

ICGP representatives on external bodies and submissions to public consultations

The ICGP is very grateful to the more than 50 GP representatives on committees external to the ICGP. A comprehensive list of the groups involved can be found on the ICGP website at www.icgp.ie/ICGP_Representatives.

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

- Updated draft of new HIQA Residential Nursing Home Standards
- HIQA HTA of Clinical Referral/Treatment Thresholds for Planned Surgical Procedures
- Submission to National Framework for Suicide Prevention
- Feedback to the Medical Council on the proposed review of the ethical guide
- Draft Medical Council Education, Training and Professional Development Strategy 2015–2020
- Review of the Operation of Part 4 of the Disability Act 2005 (Genetic Testing)

Ongoing activities

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

A. Internal ICGP committees

- Attends Council and Board meetings
- Member, Quality and Standards Committee
- Member, Education Governance Committee
- Member, Postgraduate Training Committee
- Member, Research Committee
- Member, Professional Competence Committee (and Audit Subcommittee)
- Member, Quality in Practice Committee
- Member, Audit Review Group Subcommittee
- Chair, Project Directors Group
- Member, Working Group on National Standards for Safer Better Healthcare

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B. External representative roles

- Member of the Professional Competence Subcommittee of the Forum of Postgraduate Training bodies
- Member of Medical Council Working Group on Multisource Feedback

C. Presentations/workshops

- *National standards for safer better healthcare – Implications for general practice*
East Midlands/Longford/Roscommon ICGP Faculty meeting, January 2014
- *General practice is the solution not the problem*
National Conference hosted by ICGP South Tipperary Faculty, March 2014
- *General practice is the solution not the problem*
ICGP Cork City Faculty, April 2014
- *Access to diagnostics in Irish primary care* (oral presentation)
WONCA Europe Conference Lisbon, July 2014
- *Learning from patients*
NUI Galway Teachers in General Practice Meeting Keynote Lecture, Galway, November 2014

D. Publications and Reports

- Kildea-Shine P. and O’Riordan M. *Anticoagulation in General Practice/Primary Care Part 1: Warfarin and Part 2 New/Novel Oral Anticoagulants*. ICGP, March 2014
- O’Riordan M. *Article on Preventing Overdiagnosis Conference Report*. Forum, December 2014

Administrative resource provided to the programme

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

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Professional Competence Scheme Report

Author: Ms Jantze Cotter, PCS Manager

Programme title

ICGP Professional Competence Scheme (PCS)

Programme manager

Ms Jantze Cotter

Other members of the programme

The ICGP Professional Competence Programme is overseen by the ICGP medical director, Dr Margaret O’Riordan and administered by Ms Mairead Delaney and Ms Carol White. 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 O’Mahony, Dr Margaret O’Riordan, Mr Kieran Ryan, Dr Mary Sheehan, Ms Mairead Delaney, Ms Carol White and Ms Jantze Cotter.

Summary of the programme

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

Programme achievements and future plans for 2015

There were several positive achievements for the ICGP PCS in 2014. These can be categorised in three main areas: support, advocacy and development.

Support

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

The supports to facilitate GPs to maintain competence include:

- PCS help desk – phone, email and in-person. Enrolees are offered the option of coming into the college for an eportfolio tutorial or to discuss any PCS queries they may have
- A retired group of GPs, who are no longer in active clinical practice but are on the IMC register, meet monthly for the purposes of meeting their PCS requirements, namely internal CPD credits and audit. They have developed a formal programme with guest speakers and over the previous year have focused on the history or general practice and patients’ end of life issues. This coming year they will be working on a history of general practice publication. It is has an active membership with at least 25–30 members attending each month. We are exploring the opportunity of setting up satellite groups in Galway and Cork via a workshop at this year’s National Conference

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- Resources available in the PCS section of the ICGP website include:
 - Sample audits which continue to be reviewed and increased
 - A Professional Competence Guide which is a comprehensive guide covering all aspects of the ICGP scheme
 - Simplified enrolment process
 - Regular updates on the scheme’s requirements which are also included in the ezine and a dedicated PCS FAQ page in the ICGP journal, FORUM
- On-going provision of CPD recognition for external activities
- Additional support proactively offered to doctors who had not recorded any activity
- Specific tailored feedback given to those where shortfalls were identified
- Highlighting best practices and areas for improvement identified in the annual verification process undertaken on 3% of those enrolled on the ICGP PCS
- Continuing to engage with the IMC on issues that directly impact on a GPs capacity to engage in CPD, e.g. extended leave (maternity, sick, career break) and GPs retired from clinical practice

Advocacy

We acknowledge and consider any feedback received in relation to the scheme. Where possible, we try to implement changes based on feedback received. If there is something enrolees request which is beyond our control, we are prepared to advocate for change if considered appropriate. We will continue to advocate on enrolees’ behalf through active participation on the Forum of Postgraduate Medical Training Bodies: 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.

Development

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

- Educational activity has been expanded. Sample audits have now been incorporated into all ICGP elearning modules.
- Forum Distance Learning modules can now be completed online and if completed successfully can be recorded for 2 external credits each.
- Increased uptake in using the online eportfolio to record CPD activity including adding attachments.
- At the request of ICGP members, the option to pay the PCS fee by direct debit was successfully implemented.

Future development plans

- The automation of CPD activity will commence in 2015. When a participant has completed an activity they will receive a code which will be entered into a mobile version of the ePortfolio, facilitating the automatic uploading of a certificate for anyone completing a CPD activity offered or approved by the ICGP.
- Expanding the range of clinical /practice audits.
- 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, providing a menu to enable self-selection based on development need.

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Administrative resource provided to the programme

Ms Carol White, Administrator, Recognition of External CPD Activity

Ms Mairead Delaney, Administrator, Professional Competence Scheme

The evolving of the ICGP scheme continues to be resources intensive. The successful implementation of the scheme thus far can be attributed to the PCS Department and a range of dedicated ICGP staff, particularly Dr Claire Collins and Mr Nick Fenlon, the PCS Committee/Subcommittee members and feedback from the scheme’s enrolees.

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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 quick reference guides 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.

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.

- Chairperson:

Dr Paul Armstrong January 2014 to June 2014
Dr Harry Comber June 2014 to present
- Committee membership:

Dr Paul Armstrong, Dr Patricia Carmody, Dr Harry Comber*,
Dr Mary Kearney, Dr Susan MacLaughlin**, Dr Niamh Moran*,
Dr Maria O’Mahony, Dr Margaret O’Riordan, Dr Ben Parmeter,
Dr Philip Sheeran Purcell, Dr Patrick Redmond.
*Member joined during 2014; **Resignation in 2014
- Project officer:

Dr Maria O’Mahony (January to March 2014)
Dr Niamh Moran (April 2014 to present)
- Administrative support:

Ms Janet Stafford

Key activities in the past 12 months

1. Quick Reference Guides (QRG)

During the course of 2014, new QRGs were published and existing documents due for review were updated. In the interests of cost and also in order to facilitate the rapid updating of content, the decision was made to make the guides available online only. They are available in the In the Practice and the Library sections of the website.
- 1.1 New QRGs produced

- Anticoagulation in General Practice/Primary Care (Part 1: Warfarin, Part 2: New/novel oral Anticoagulants)
 - Communicating Risk to Patients
 - Dementia – Diagnosis and Management in General Practice
- 1.2 QRGs updated

- Helping Patients with Alcohol Problems – A Guide for Primary Care Staff
 - HSE/ICGP Weight Management Treatment Algorithms (i) Guidelines Before, During and After Pregnancy (ii) Treatment Algorithm for Adults (iii) Treatment Algorithm for Children

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- Managing Cardiac Risk Assessment for People Under 35 Years Involved in Sports or Exercise
- *Crisis Pregnancy: A Management Guide for General Practice*
- Domestic Violence – A Guide for General Practice

1.3 New QRGs in development

- Coeliac Disease
- Opiate Substitution Treatment Guidelines – Adapting National Guidelines

1.4 QRG updates in progress

- Epilepsy
- Drugs and Doping in Sport – Guidelines for General Practitioners
- Management of Pre-Gestational and Gestational Diabetes Mellitus
- Prostate Cancer
- Referral of People with Depression to Specialist Mental Health Services

1.5 Review of proposals for new QRGs

- The project officer received enquiries regarding new QRGs and the committee reviewed proposals

1.6 Audit tools for the new QRGs

- We assist the yearly QiP award winner to complete a sample audit
- Methotrexate sample audit was produced in 2014. Authors are encouraged to provide audit tools for QRGs

2. Supervision of the QiP Awards

- The annual ICGP Quality Improvement Award was sponsored by Medisec in 2014 and was presented at the ICGP AGM in May 2014
- In 2014, a booklet of abstracts from the QiP Award Winning Projects for the past seven years was published

Ongoing improvements

Much work was carried out in 2014 to improve awareness and accessibility of QRGs to members. There is now a direct link on the My ICGP section of the website to the quick reference guides. We began work on increasing the searchability of QRG documents following evidence that most are accessed via search engines. Members are emailed when a new QRG is published with the hyperlink to it and there is a news item in Forum and the quarterly ezine with a summary of the new document/update.

It was arranged that the authors of new QRGs ‘Communicating Risk’ and ‘Dementia’ run workshops at the Summer School and Winter Meeting. This was well received and is something we will continue to encourage.

The QiP committee welcome feedback on the documents produced, and in 2014, introduced a dedicated email address for feedback on publications. All QRGs now contain “Correspondence to: QRCfeedback@icgp.ie”.

Future plans and challenges

The QiP Committee is cognisant of the workload and practical implications for members of documents endorsed by the College. An ongoing challenge is the increasing number of requests to review documents by third parties, some of which refer to work practices

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that are not implementable with current resources. Feedback from the Kildare Faculty in this respect was welcomed and our document disclaimer was updated in 2014 to reflect that the quality of care may be dependent on the appropriate allocation of resources to practices involved in its delivery. Resource allocation by the state is variable depending on geographical location and individual practice circumstances. There are constraints in following the guidelines where the resources are not available to action certain aspects of the guidelines. The committee does however strive to outline best practice in QRGs.

- Work is ongoing on providing audit tools on the QRGs
- Ensuring our work remains user friendly and relevant for members
- Ensuring practical GP input into documents produced by third parties whilst highlighting that realistic resources will be needed to implement any new work practices in general practices
- Maintaining high standards for patient care

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College Website Report

Authors: Dermot Folan, COO; Laura Smyth, Web Editor; and Neil Carrick, Acting Manager for Web Services Projects

Introduction

The College website (www.icgp.ie) is developed and managed in line with the strategic direction of the College. The aim is to create a comprehensive content resource enabling the dissemination of information to members and the wider audience. The College website enables members to make communication and interaction with the College more convenient and efficient, and markets and promotes College activities.

Service providers

- Ionic, the College’s web maintenance and development company
- SMR Consulting which provides consulting and project management of web projects requiring integration with the College’s membership database

Project activities

- Daily update of the website to keep information up to date and relevant
- Technical support for ICGP members and users of the website
- Project management of web developments and liaison with Ionic Ltd and SMR Consulting
- Liaison with various College groups (managers, administrators, project directors, committees, etc.), management of each group’s section and communication regarding website developments and tools
- Creation of an online repository of documents
- Online marketing and promotion of College events and conferences
- Presentation of College material in an online user friendly manner
- Keeping up to date with IT developments and best practice, and advising the College of same

Current status

Website development in 2014

Work started on planning and developing a way to enable credits from events and results from e-learning and other educational courses to be recorded directly in the eportfolio.

The key tools in development are:

- A CPD recognition system that provides for the online recording of details of ICGP-led and ICGP-approved events
- An API (Application Programme Interface) that allows members to enter their ICGP log-in details and access the ICGP’s numerous e-learning courses
- A mobile version of the PCS Portfolio

A new Education home page was launched which provides clearer and smoother access to learning opportunities and events offered by the ICGP and which consolidates the changes made to the course administration tools last year.

Regular development work was required to support annual tasks such as the GP training registration process and the Professional Competence end-of-year statements.

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Communications and Public Relations Report

Author: Dr Darach Ó Ciardha, Chair of Communications Committee

Communications Committee

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

Summary

The chair of communications role is concerned with the formation and delivery of the ICGP communications strategy.

In the year under review, the communications agenda was once again dominated by the proposed introduction of free GP care for under sixes and over 70s, the proposal to introduce universal health insurance, and the revised contract for the provision of general medical services.

We have sought through our media relations and social media activities, as well as through direct engagement with members, to highlight the impact of these policies on members, patients and on the standard of healthcare in general practice.

During the past year, additional communications activities have included actions to support the ICGP’s own research reports and analysis, ICGP events, and support through public relations and communications, activities in which we support other professional medical agencies and the HSE, for example, the “under-the-weather” antimicrobial resistance campaign.

The chair of communications has responsibility for overall communications direction and the delivery of media and social media content. This includes the production of statements and press releases as well as active use of our Twitter account, @icgpnews. We engage PR Strategy Limited, a public relations agency, to assist with communications activity and together with the chair of communications we liaise closely with the Board and other College officers as appropriate.

Part of the communications role involves briefing journalists and anticipating areas that the College may wish to release statements on as well as being available for responding to media queries often to tight deadlines.

Activities during the past 12 months

The 12 months under review was particularly busy in light of the ongoing changes proposed for our profession. As the statements below indicate, we have lobbied hard to ensure the position of general practitioners is understood.

One of the more successful initiatives we engaged in was the production of the infographic attached below, which was sent to all members and replicated in media outlets to highlight the scope of activity and extent of under-resourcing in general practice. We also sought to highlight the effect of GP emigration through our own

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research report which resulted in the media focus on rural general practice, in particular, the situation in Feakle, Co Clare, where there has been no GP for some months now.

We continue to highlight inequalities in the health service which impact on our ability to serve our patients and impact on health outcomes for our patients, as detailed in the ICGP’s *Access to Diagnostics* report, produced by Dr Margaret O’Riordan.

Where appropriate, we proactively respond to misinformation in the public domain such as the Irish Times article “Report casts doubt on GP exodus”. However, it would not serve the College to be actively engaging in the media on every issue.

Our remit is the protection of standards and the provision of training in general practice. We are not a union, a patient representative group or a lobbying agent.

We work closely with state agencies and other medical bodies and groups throughout the year. Through this work, we ensure members’ interests are represented and actively participate in initiatives which highlight best practice. The Under-the-Weather campaign which is a collaborative effort between all of the professional medical organisations and the HSE and DOH is a particularly good example of this activity in practice.

During the past 12 months, the ICGP issued statements on the following subjects:

- *ICGP Winter Meeting report*
- *Publication of the Report of the Expert Panel on the Medical Need for Medical Card Eligibility*
- *European Antibiotic Awareness Day 2014*
- *ICGP statement: Access to diagnostics underpins health inequalities in Ireland*
- *ICGP announces new auditing tools for GPs*
- *ICGP clarification: no approval of national model of care for asthma*
- *ICGP pre-budget submission 2015*
- *Infographic on Irish general practice*
- *ICGP response to Irish Times article “Report casts doubt on GP exodus”*
- *ICGP research raises immediate workforce planning concerns for general practice*
- *ICGP welcomes statement from minister on UHI but raises concerns about manpower crisis in general practice*
- *President of global general practitioner association to address ICGP Summer School*
- *ICGP slams UHI reforms in response to public consultation on White Paper*
- *ICGP sets out the standards for the appropriate reform of primary care*
- *DoH consultation on the White Paper on Universal Health Insurance*
- *ICGP calls on the cabinet to reconsider free GP services for children under six until details of the Universal Healthcare policy are known*
- *ICGP responds to publication of White Paper on Universal Health Insurance*
- *ICGP continues to address the issue of alcohol misuse*
- *Notice to members – ICGP submission of response to draft contract for free GP care for under-sixes*
- *ICGP announces new standard drinks measure to help GPs tackle alcohol addiction*
- *Response on Public consultation on the draft contract for free GP care to under-sixes*

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Social media

Twitter is being used by more of our members to keep in touch with reports, events, and notices of relevance to them. Many members are active Twitter users and Twitter has been successfully employed for campaigns in the health area, e.g. #cardwatch which relates to the removal of discretionary medical cards in 2014.

As the graph shows, members like to use @icgpnews. In the past year and a half, there has been substantial growth in its usage. Over the period under review, the number of Twitter followers increased from 755 to 2,521.

One of the beneficial aspects of the newer communications tools are the metrics they contain which indicate where they are most effective and the regularity with which they are being accessed amongst other measures. @icgpnews has a positive engagement rate of 3.4% per day and in March 2015, link clicks averaged at 7 per day.

For those of you who do embrace new media, you need to be careful how you use it. There are a number of guidelines out there, some from Ireland and some from the UK. We recommend that all members read these before tweeting. We also regularly provide training for members in the use of social media. Dr Conor O’Shea presented a very informative session entitled ‘Social Media for GPs’ in a GPIT webinar in February 26, 2014. We hope to develop our own guide for members in 2015. In the meantime, some guides to get you started are listed below:

- Irish Nurses and Midwives Organisation, Guidance to Nurses and Midwives on Social Media and Social Networking, visit www.imno.ie and search
- Royal College of GPs, Social Media Highway Code, see www.rcgp.org.uk/social-media
- Irish Medical Organisation, Position Paper on Social Media, www.imo.ie/news-media/publications/91270-Social-Media-Position-Paper.pdf



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Communication with members

In 2014, we issued the following statements and notifications to members/relevant groups within the membership:

TOPIC	DATE
ICGP – GPIT webinars 2014	10/01/2014
Medical Council email	10/01/2014
Updated immunisation guidelines for Ireland 2013	14/01/2014
Inmed poster	20/01/2014
LARC Tutor Course in conjunction with the Trainers Conference	20/01/2014
ICGP to meet Minister of State Alex White TD to discuss primary care for under-sixes	30/01/2014
ICGP – GPIT webinars 2014	05/02/2014
ICGP National Conference	07/02/2014
Influenza-like illness rate slowly increasing – Use of antiviral medicines	10/02/2014
ICGP submission of response to draft contract for free GP care for under-sixes	21/02/2014
Maternal Death Enquiry (MDE) Ireland	25/02/2014
ICGP chair of communications request to Council members: ICGP national conference ‘Weathering the Storm – Maintaining Quality of Patient Care’	03/03/2014
Faculty notice	03/03/2014
NEGs 2014 spring meeting series and NEGs 2014 Spring webinar	06/03/2014
Nomination form for Council	06/03/2014
ICGP requests minister to sets aside draft GP contract in its current form	12/03/2014
Key points when prescribing new/novel oral anticoagulant drugs	12/03/2014
GPs Take Care	18/03/2014
RTÉ investigates ambulance emergency response service	21/03/2014
Anticoagulation in general practice – new ICGP quick reference guide	25/03/2014
AGM Business Session, Sunday, 11 May 2014, Radisson Hotel, Galway	25/04/2014
Election of vice president	25/04/2014
ICGP Annual Conference – last day for online registration	01/05/2014
Ballot to identify which ICGP VP candidate will get the NEGs vote	06/05/2014
DoH consultation on the White Paper on Universal Health Insurance	07/05/2014
60th and 61st editions of the Irish Medicines Board Drug Safety Newsletter	28/05/2014
Immediate Medical & Emergency Care Course	29/05/2014
Summer School 2014 – register now	16/06/2014
WONCA, Lisbon, 2–5 July 2014 – informal ICGP NEGs get together	17/06/2014
Irish Medicines Board (IMB) Drug Safety Newsletter Edition 62	20/06/2014

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Summer School events	23/06/2014
WONCA Lisbon, 2–5 July 2014 – Informal ICGP NEGs Irish get together, Thursday 3 July	30/06/2014
Nicotine Replacement Therapy (NRT) medicine approved for sale in retail outlets	04/07/2014
National trainee experience survey – your training counts	07/07/2014
Diagnosis and Management in General Practice – new ICGP quick reference guide	30/07/2014
GP Academic Clinical Fellowship Programme	07/08/2014
Galway GP representative sought for steering group of Console Family Suicide Bereavement Liaison Project	09/08/2014
Ebola and emerging viral threats	15/08/2014
Update on PPE for management of patients with ebola	23/10/2014
Reminder of October Faculty Meeting – Thursday, 30 October, 7pm, Westwood House Hotel	28/10/2014
Reminder – registration for NEGs Meetings is open, Sligo and Tralee on Tuesday, 28 October	28/10/2014
ICGP Winter Meeting – Saturday, 22 November, Sheraton Hotel, Athlone	29/10/2014
Late notice in relation to October Faculty Meeting – Thursday, 30 October, 7pm, Westwood House Hotel	30/10/2014
ICGP meeting – 8 November	03/11/2014
Healthmail secure clinical email	10/11/2014
ICGP Winter Meeting reminder	12/11/2014
Abstracts (oral and poster) and workshop proposals being sought for the second VdGM Forum	12/11/2014
ICGP Winter Meeting – Saturday, 22 November, 2014	17/11/2014
Launch of undertheweather.ie to combat the overuse of antibiotics	17/11/2014
European Antibiotic Awareness day	20/11/2014
Reminder of November Faculty Meeting – Thursday, 28 October, 7pm, Westwood House Hotel, and the Annual Faculty Christmas Table Quiz on Thursday, 11 December	21/11/2014
Updated information on ebola	16/12/2014
Safety notice regarding Autopen Classic, Autopen 24, Densupen, Autopen 3ml for Teriparatide	22/12/2014

Other communication activities

Forum

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

Ezine

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

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EZINE	OPENING RATE
March 2014	43%
May 2014	44%
September 2014	43%
December 2014	40%

Future plans

The plan is to work towards an expanded capacity in the communications role to enable more effective proactive campaign development.

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Library and Information Service Report

Author: Ms Gillian Doran, Librarian, and Patricia Patton, Assistant Librarian and Information Officer

Librarians

Ms Trish Patton was acting librarian during this period as Ms Gillian Doran was on maternity leave. The ICGP Library continues to be a key service and play a vital role in the College offering many facilities including teaching, learning and research support to College staff and members, as well as assisting general practitioners with their CPD and engaging with other external organisations to share and develop best information practice.

Library services

The ICGP library performs the services listed below for the benefit of ICGP members, staff and project directors. These services provide:

- Answers to information queries
- Access to general practice-related professional journals
- Articles held by other libraries via our inter-library loan service
- A customised literature search service
- Individualised training sessions based on user needs

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 retrieve publications efficiently
- Liaison with various College groups (administrators, project directors, committees, etc.) and management of each group’s information needs
- Project management of library developments and liaison with our key suppliers
- Keeping up-to-date with developments in the library sector and advising relevant College personnel of same

Online journals

Our top 5 journals by usage for January–December 2014 were:

1. BMJ
2. British Journal of General Practice
3. Drugs and Therapeutics Bulletin
4. American Family Physician
5. Australian Family Physician

The chart below shows the keywords used for searching for online journals in the library section of the ICGP website, www.icgp.ie/library.

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Report Range:

1 January 2014 to 31 December 2014

TOP 10 KEYWORDS SEARCHED		NUMBER OF SEARCHES
1	“bmj”	359
2	“BJGP”	85
3	“british medical journal”	60
4	“British journal of general practice”	42
5	“drugs and therapeutics bulletin”	34
6	“british journal”	30
7	“drugs”	23
8	“British”	18
9	“nejm”	14
10	“education for primary care”	13

Key developments

Information Skills module

The second version of the online Information Skills module was completed and launched on www.icgp-education.ie.

This Information Skills module is an essential tool to assist GPs in searching through the online information overload on the web to find quality clinical information. It also provides valuable CPD points for general practitioners.

Did you know?

A series of short ads have been done for Forum highlighting various aspects of the library service. These include:

- Did you know? (Forum October 2014)
You can access the BMJ, British Journal of General Practice and Drugs and Therapeutics Bulletin free through the ICGP Library. These and many more journals are available online via the ICGP A–Z Journal Portal at www.icgp.ie/journals.
- Did you know? (Forum December 2014)
You can learn all about evidence based medicine and pick up tips on how to search online and keep up-to-date via the eLearning Information Skills Module developed by the ICGP library available at www.icgp-education.ie/informationkills

Presentations

Patricia Patton presented at various events/meetings during the year, including:

- eLearning workshops in January and September to provide information and training to those participating on various ICGP elearning courses
- CME tutor workshop in February regarding new developments and social media
- Project Development Group in September regarding e-journals

Articles published

Patricia Patton submitted “Getting the most out of the ICGP online journals” in December 2014 for publication in January.

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Gillian Doran was one of the authors of a submitted paper to the Irish Medical Journal entitled “Access to Diagnostics in Primary Care and the Impact on a Primary Care Led Health Service”. This was co-written by Dr Margaret O’Riordan, Ms Gillian Doran and Dr Claire Collins and is due for publication in 2015.

Systematic review (patient empowerment in chronic conditions – WONCA Europe PECC-WE)

The ICGP library’s key role in this systematic review came to a conclusion in 2014. Further work is to be done by other parties for presentation by the 20th Anniversary of WONCA Europe in 2015.

External organisations

Patricia Patton continued to build on working relationships and continue links with similar external organisations by attending various meetings throughout the year, including:

- HSLG SHELLI event in March
- Health Sciences Libraries Group Conference in May
- LENUS user group meeting in May

Online surveys

We continued to assist project directors and researchers with various aspects of online survey development in terms of design and also in providing the relevant reports for analysis via the online survey tool SurveyMonkey.

Referencing

Referencing and bibliographic records management for various publications via the online resource Refworks was provided to ICGP project directors.

Future plans

In addition to maintaining our existing services we also seek to continually improve the Library and Information Service with regard to the user experience and quality of educational resources made available, and promote our extensive library services to new users.

- We are investigating the possibility of acquiring discounts for some online educational resources for our members to subscribe to on an individual basis, details of which will be made available in 2015.
- We will continue to promote the “Did you Know” series in Forum in 2015.
- We will continue to promote the ICGP Library and Information Service via various media available including Forum, the web, training sessions, presentations and information pages in ICGP conference booklets, etc.

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Research Programme Report

Author: Dr Claire Collins, Director of Research

Other members of programme

ICGP Research Committee Chair: Professor Andrew Murphy

Research Officer: Ms Marié T. O'Shea

Administrator: Ms Sally Anne O'Neill

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.

Background to the programme

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

Programme activities during the past 12 months

The following projects were completed in 2014:

- Trainee Career Intentions Survey 2014 with Gerard Mansfield (Director of GP Training)
- Graduate Career Survey 2014 with Gerard Mansfield (Director of GP Training) and Kieran Ryan (CEO)
- Heart Failure QoL Study with Dr Joe Gallagher (Clinical Lead)
- Audit finders commissioned from IPCRN on asthma, COPD and heart failure
- Alcohol survey results launched during alcohol awareness week with Pearse Finegan (Director of Mental Health)
- ICGP Strategy Survey (Membership and Trainees) on behalf of the ICGP Board
- Post intervention survey on Closed (Illness) Certification with DSW Welfare
- Part 2 post-guidelines survey of GPs' insights on medical fitness to drive with RCPI Traffic Medicine
- Summer Student Grant Application to HRB; successful for developing website on 'Doctors' Health and Healthcare: Information and Services' with Andrée Rochfort (Director Health in Practice Programme)
- A National Survey of Chronic Disease Management by Practice Nurses in Ireland with Department of Public Health & Primary Care, TCD
- Collaboration with the EPHORT consortium on the study on sound evidence for a better understanding of health literacy in the European Union (HEALIT4EU)
- Collaboration with EGPRN colleagues on how dementia is managed in primary care across Europe
- PECC work package 2 – filming in Ireland for WONCA template e-learning module for demonstration at WONCA Europe conference completed

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- Assistance to project on establishing the core learning activity for GP trainees and designing and individualised learning log with Gerard Mansfield (Director of GP Training)
- Exploring the experiences and attitudes of Irish general practitioners in relation to the treatment of alcohol misuse in primary care with Pearse Finegan (Director of Mental Health)
- Evaluation of suicide prevention course with Pearse Finegan (Director of Mental Health)
- Flu vaccination effectiveness study 2013/14, 5th European-wide study on influenza vaccine effectiveness with HPSC
- ICGP elearning audits – creation of template audits on childhood overweight/obesity and dementia
- Collation of data collection for a study on the attitudes of general practitioners to medication reconciliation for the Department of General Practice, RCSI
- Contribution to and collation of data collection for a study project on palliative care and mental illness for the Department of Nursing, UCD
- Collation of data collection for a study on the strategies to prevent the development and progression of diabetes type 2 in people with established mental illness for the Department of Nursing, UCD
- Recruitment of international partners for study on the lessons GPs learn from their patients: a narrative and concordance-based study of GP trainers for Margaret O’Riordan (Medical Director)
- Co-applicant/collaborator on HRB grants applications: HRB ICE Awards with NUIG, RCQPS Grant with Beaumont Hospital, HRB Network Grant with NUIG and RCSI and HRB Grant with UL

Other activities undertaken

- Travel bursaries – five provided in 2014 (total €2,500)
- Research and education grants to the value of €28,926 approved in 2014
- IPCRN management had come under remit of Claire Collins
- Oversight of the Heartwatch programme
- 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
- The fourth ICGP research and audit conference, sponsored by MEDISEC, was held in June 2014 at the Lyrath Hotel, Kilkenny
- The creation of new audit examples for the Professional Competence Scheme and chairing of the Professional Competence Scheme audit sub-committee
- Participation at the trainee and trainer conferences
- Submission of articles for publication
- Presentation of research findings at conferences
- Responding to (n=210) queries related to research, ethics, grants and audit
- Review of articles for BMC Family Practice and BMC Health Service Research journals – three papers reviewed for international journals

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- Reviewed submissions for the QIP awards
- Review of ICGP Research Ethics Committee SOP and survey of REC members
- English language editing of EGPRN abstracts for EJGP
- Liaison with HRB and AUDGPI to support the development of clinical academic career pathways
- Liaison with HRB regarding the co-funding of health professional research grants

Publications

- Ni Riain A, Collins C. The Challenges of Diagnosing Community Acquired Pneumonia in General Practice. NIHS Research Bulletin, 7(1) January 2014: 23
- Collins C, Fenlon N, Rochfort, A, Mansfield G, O’Riordan M .Chronic Condition Self Management (CCSM) Learning Package for GP Trainees. NIHS Research Bulletin, 7(1) January 2014: 47
- Collins C, Beirne S, Doran G, Patton P, Gensichen J, Kunnamo I, Smith S, Eriksson T, Rochfort A. Systematic Review – The Effectiveness of Educational Interventions for Primary Care Health Professionals Designed to Improve Self-Management in Patients with Chronic Conditions. NIHS Research Bulletin, 7(1) January 2014: 48
- James G. O’Brien, Ailis Ni Riain, Claire Collins, V. Long & Desmond O’Neill (2014) Elder Abuse and Neglect: A Survey of Irish General Practitioners, Journal of Elder Abuse & Neglect, 26:3, 291–299, DOI: 10.1080/08946566.2013.827955
- Conor Kennedy, Catherine Vahey and Claire Collins (2014),”Trust me, I’m a Doctor: Views of Some Irish Patients towards their GP“, JMED Research, Vol. 2014 (Sept 2014), DOI: 10.5171/2014.75956
- Collins C, Finn Caitriona, Meade B, O’Cuinneagain F. Strengthening the foundation of general practice evidence in Ireland by addressing the data quality issues in a structured secondary prevention programme for cardiovascular disease. JMED Research; Volume 2014 (May 2014), DOI: 10.5171/2014.315020
- Kennedy C, O’Brien C, Collins C. Experience of Diagnostic Coding In Irish General Practice: The Practice Perspective. JMED Research Volume 2014 (July 2014), DOI: 10.5171/2014.583528

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 is the EJGP English language editor for the EGPRN abstracts
- ICGP representative for the HSE/HRB/RCPI steering group on Research Collaboration on Quality and Patient Safety
- One of two ICGP representatives on the HSE Manpower Planning Committee

Programme milestones and outputs

- Publications
- ICGP Research and Audit Conference
- Support of members in terms of professional competence audit requirements
- Research grants obtained
- Support of training schemes and trainees in terms of ethical guidance and review

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- Collaboration with external parties
- Support of College programmes and provisions of internal data/research requirements

Future plans

- The action plan for 2015 focuses on internal and external collaboration and raising the profile and impact of research in the ICGP
- The ICGP Research and Audit Conference, entitled Access to Healthcare, will be held on Saturday 27 June, 2015 at Mount Wolseley Hotel, Co. Carlow. This year, we plan to have three keynotes from the Deep End Projects in Ireland and Scotland
- Twenty-two projects are in planning or underway for 2015
- Trainee and NEGs research needs analysis
- External commissioned review of College research by Prof Mike Pringle focusing on future strategies

Funding sources

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

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Research Ethics Committee Report

Author: Dr Claire Collins on behalf of the 2014 Chairs – Professor Colin Bradley (to September 2014) and Mr Kieran Doran (from September 2014)

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, Mrs Anne O’Cuinneagain (to March 2014), Mr Kieran Ryan (from September 2014) 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 and to determine whether there are ethical issues to be addressed before the study can proceed. The committee was initially established to provide ethical advice and approval for studies in general practice as a benefit to College members. The committee also has a remit to offer general advice on ethical aspects of research and to develop College policy in this area. We are approved under the Clinical Trials Act to approve therapeutic clinical trials.

Activities in 2013

We had five meetings in 2014 during which 39 applications were considered. In addition, we processed 16 trainee applications using the process introduced in 2012 in which applications were reviewed by two members prior to a decision to either approve the project, approve subject to amendments (the most common outcome) or refer to the full committee. We had one clinical trial to process (within the terms of the Clinical Trials Act). Furthermore, a complete review was undertaken of the operating procedures, committee membership and training and application fee structure under the direction of the ICGP Research Committee on behalf of the ICGP Board.

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. A review of implications of the new European Clinical Trials legislation will commence in 2015.

Administrative resource

Ms Sally Anne O’Neill

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Post Graduate Training Committee Report

Author: Dr Karena Hanley, PGTC Chair

Membership of the PGTC

- Dr Karena Hanley, Chair
- Dr Richard Brennan, (Chair Alternative Routes Committee)
- Dr Tony Cox (Chairman, MICGP Examination Sub-Committee)
- Dr Rita Doyle (Chair, National Committee for Co-ordination of Training)
- Mr Dermot Folan (Chief Operating Officer, ICGP)
- Dr Rukshan Goonewardena (NATGP Representative – Sept 2014)
- Dr Michael Griffin (Accreditation Sub-Committee)
- Dr Velma Harkins (NATIGP Representative)
- Dr David Hurley (ICGP Council Member)
- Dr Naomi Johnson (NATGP Representative – Sept 2014)
- Dr Zac Johnson (NATGP Representative)
- Dr Gerard Mansfield (National Director Specialist Training),
- Dr Declan Matthews (Chair, Accreditation Sub-Committee)
- Dr Donal McCafferty (ICGP Council Member)
- Dr Genny McGuire (Chair, NAPD)
- Dr Eva McLarnon (NATGP Representative)
- Dr Hugh O’Faolain (NATGP Representative)
- Prof Fergus O’Kelly (ICGP Council Member)
- Dr Margaret O’Riordan (Medical Director, ICGP)
- Dr Brendan O’Shea (ICGP Council Member/EURACT)
- Dr Molly Owens (Chair, MICGP Examination Sub-Committee)
- Dr Kevin Quinn (Project Director, MICGP Alternative Route)
- Dr Roddy Quinn (Chair, National Committee for Co-ordination of Training – Sept 2014)
- Mr Kieran Ryan (Chief Executive Officer, ICGP)
- Dr Eamonn Shanahan (Chair, Certification Sub-Committee)

Summary of programme

The ICGP Post Graduate Training Committee oversees the quality and standards and advises on the delivery of higher professional training in general practice in Ireland. This committee also considers the training of doctors who wish to be considered to be GPs but who have not followed the standard Irish/European route of training.

The PGTC achieves this through the work and commitment of its subcommittees for which the College is very grateful. These subcommittees include the Examination, Accreditors, National Committee for Accreditation, Curriculum, Certification and MICGP Alternative Route subcommittees. The work of the PGTC is ably supported by the College GP Training Unit whose staff is comprised of the national director of training, Dr Gerry Mansfield, Ms Martina McDonnell, Ms Pauline Tierney and Ms Sylvia Browne.

The PGTC is operating in a period of intense change, in which multiple requests and demands from outside agencies require a considered response. It remains a challenge to

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focus on quality of training and support of the trainee in the continuing face of resource issues, but this is a core duty of the College.

Programme activities in the last 12 months

Achievements/outcomes:

- Graduation of 146 GP trainees in 2014.
- The National Committee for the Co-ordination of Training has been firmly established as a useful forum in which the practical issues are discussed of how GP training is delivered on the ground. Some details remain to be clarified, including representation on the committee, the dissemination of work in progress and the coordination of work between this committee and the PGTC, but on the whole the Committee is working well as an arena in which to discuss things such as the interpretation of the criteria document, development of the curriculum, and ongoing contributions to College policies in training. Dr Rita Doyle was the very effective chair of this committee in its pivotal establishment period and her capability in this role is recognised. Dr Roddy Quinn was elected as chair in September 2014.
- Dr Niamh O Carroll has been tasked by the College as the curriculum fellow to build on the ICGP curriculum as is currently located on the website. Her brief has been difficult and time consuming, but she has worked steadily on the objective of delivering a revised curriculum which is as user friendly and relevant to trainees as possible. A curriculum subcommittee of the PGTC was re-established following a recommendation to the Board in November 2014. This is to complete the consultation process and seek practical input in the workability of the new overhauled ICGP curriculum for GP training. It is hoped to unveil the outline of this curriculum at the college AGM.
- Dr Darach O’Ciardha has advanced work on the standardisation of the assessment processes of GP trainees as they progress through training.
- Recruitment to GP training underwent major revision in 2014. Huge gratitude is expressed to the recruitment leads in the GP training schemes who were involved in this work, and the productivity of the College GP Training Unit in this area has been astonishing. The achievements in recruitment have been a much more standardised approach in which assessment of the candidates is uniformly based on competencies identified in previous research as being core to the requirements of being a GP. The interview boards were designed, at the behest of the HSE, to have representation from several schemes and recruitment as a process has been decoupled from the schemes. Again this was as a response to a HSE request. It remains to be seen how the changes will affect retention both on the schemes and also in the later filling of GP posts in locations around the country.
- Reaccreditation evaluation of the North East, Mid Leinster, TCD, Western, Cork, and Ballinasloe schemes was conducted in 2014. While there was clarification of some issues on some schemes, all have finally been reaccredited. This committee has also put a lot of work into a revision of the Criteria Document for Post Graduate Training Programmes, and has worked up this revision to a level ready for presentation to the PGTC. Dr Declan Matthews has ably led the prolific work undertaken by the interested and hardworking Accreditor’s Committee.
- Attrition of resources in training schemes was addressed in 2014. Negotiation with the PMETB (now renamed the NDTP) led to a compromise with regard to critical loss of programme directing staff for running day release. This led to the advertisement by the end of the year of a temporary scheme specific solution of lecturers/tutors for day release being appointed as a short term solution.
- A number of the items highlighted by the Medical Council as requiring attention have been addressed. These include the development of a clinical component of the

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MICGP Examination, and also a revision of the requirement that all training must be completed within six years of commencement. In the latter case, once a particular doctor's training can be expected through unusual circumstances to last longer than six years, an educational review will be prepared by the scheme for consideration at PGTC on a case by case basis.

- The last AKT of the MICGP was conducted in 2014. Also, the first of the new test of knowledge, a 200 item single best answer test was run. To avoid confusion, this has been renamed the Clinical Knowledge Test (CKT). From now on, instead of three written modules: SBA, AKT and MEQ, there will be two modules only – the MEQ and the CKT. The oral examination is being replaced in 2015 by the Clinical Competencies Test (CCT). Dr Molly Owens and all those on the Examinations Sub Committee are to be thanked for the huge amount of work they have contributed, and for the rigour of the quality assurance process of our membership exam.
- The first cohort of doctors who were eligible and successful in the portfolio assessment for the MICGP-AR completed the MICGP-AR oral examination in June 2014. As a result of this process, 47 doctors were elected to membership of the College. The second cohort of doctors, who applied in early 2014, and have passed the assessment will sit the MICGP oral exam in June 2015. This process has been overseen and conducted by the MICGP-AR Subcommittee under the diligent guidance of Dr Kevin Quinn.
- A College policy on trainee involvement with sports medicine was completed in 2014. This sets out the experience and courses which a trainee is expected to have acquired in order to be able to practice as a team doctor while still a doctor on the trainee register. Titled "ICGP Standard for GP Trainees to Participate in the Role of Team Doctor", this document can be found on the ICGP website.
- Work took place throughout 2014 to establish a service level agreement between the College and the Medical Council for the College to conduct assessments on the equivalence of training undertaken by GPs whose GP training was conducted in a country outside the EU. This assessment is competency based. Dr Eamon Shanahan, along with the Certification Subcommittee, has overseen this important work.
- Ongoing engagement continues with the Forum of Post Graduate Training Bodies. An area being developed by this forum is a format to allow for the recognition of prior training when a trainee switches from one training discipline to another.

The future

For over four years, the HSE has been promising to divest itself of direct provision of GP training. The plan is to enter into a service level agreement, with the ICGP being the likely preferred provider. The gap between this decision of divestment and now has not been helpful to the development of GP training. Natural wastage within schemes and among trainers has not been replaced.

The College welcomes a renewed commitment which is emanating from the HSE and NDTP to make progress on the transfer of training. Clear focus must be maintained on the central elements of GP training which we hold dear to avoid their loss.

Acknowledgements

The GP Training Unit at the ICGP – Dr Gerry Mansfield, Ms Martina McDonnell, Ms Pauline Tierney and Ms Sylvia Browne – has strengthened into a formidably hardworking and efficient team. The College is fortunate to have staff of this capacity dealing with the complexities and sheer workload which has been the throughput in 2014.

Our CEO, Mr Kieran Ryan, has been keeping a supportive eye on all the activity, supplying context, understanding and welcome objectivity.

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Each of the chairpersons of the subcommittees and also the subcommittees themselves have contributed time and energy beyond the recompense in their pride in the work of College.

Our Board, which has been chaired calmly, wisely and extremely diligently, through thick and thin, by Dr Mary Sheehan, has taken a huge and helpful interest in the work and challenges of the PGTC. The guidance of the Board has been invaluable.

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Specialist Training in General Practice Report

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

Other members of the ICGP GP Training Unit

- Ms Martina McDonnell, GP Training Unit Manager
- Ms Pauline Tierney, GP Training Unit Administrator
- Ms Sylvia Browne, GP Training Unit Administrator

Summary of the unit

The purpose of the unit is to support trainees, trainers and GP specialist training schemes on educational and training issues, and to liaise with the Department of Health, HSE/NDTP and other bodies such as the Forum for Postgraduate Training Bodies and Medical Council on issues pertaining to general practice training.

Activities during the past 12 months

- Publication of *Planning for the Future of the Irish General Practitioner Workforce* which was informed by a national study of GP trainees and recent graduates
- Representation on the HSE National Task Group on Work Force Planning
- Recruitment 2014: an information day for recruitment to GP training 2014 was held on Saturday 7 January 2014 in the Alexander Hotel, Dublin, with an attendance of 70 delegates
- A total of 275 online applications were received for the 2014 intake which closed in January 2014
- Recruitment leads were appointed on each of the 14 training schemes to facilitate the co-ordination of the recruitment process across all schemes
- The introduction of an online marking system using a nationally agreed marking schedule. A total of 270 eligible applications were marked online by panel of 28 markers from the scheme.
- The development of a competency based recruitment process in consultation with Prof. Fiona Patterson and international recruitment consultants Works Psychology Group
- The central co-ordination of the recruitment process for the 2014 intake of 157 trainees into GP training
- Recruitment 2015: two sessions were held at the Forum/HSE Careers Seminar in Dublin Castle on 20 September 2014. Over 200 registered for the presentations on GP training. Presentations were made by Dr Rukshan Goonewardena (current trainee) and Dr Mark Murphy (former trainee) and the national director.
- An information day for recruitment to GP training with a meet and greet with the training schemes was held on 8 November 2014 at the Marker Hotel, Dublin. Over 120 people attended this session
- Work continued on the planning and refinement of the recruitment process for 2015 with a number of recruitment leads workshops and teleconferences held in 2014
- A total of 285 online applications were received for the 2015 intake. The application closed in November 2014
- Conferences: National Trainee Conference, held on 23–24 October 2014, Kilkenny. Over 350 delegates were in attendance
- National Trainer Conference, 27–28 February, 2014, Athlone. A record of 182 delegates attended the Conference

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- Dr Ciara Curran was appointed to the GP Academic Fellowship Programme in October 2014. The recruitment of this post was supported by the ICGP GP Training unit
- Administrative support is also provided to the Postgraduate Training Committee (PGTC), National Committee for Co-ordination of Training (NCCT), Accreditation Sub-Committee and Curriculum Development Sub-Committee
- An online application system for the specialist training fund for third and fourth year registrars opened in December 2014
- Ongoing liaison with the HSE on a number of issues pertaining to training including recruitment, trainer numbers and resources
- Representation on the Forum for Postgraduate Training Bodies
- Ongoing liaison with the Medical Council

Future plans

- Work on the development and refinement of the recruitment process will continue following an appraisal of the 2015 process.
- The College will be liaising with the National Doctors Training and Planning (former HSE MET Office) on the national optimisation and co-ordination of GP trainers in GP training.
- A follow up survey on work force planning will be issued shortly to all current trainees and those who have graduated in the last 5 years.
- Work is continuing on the new curriculum which is due in 2015. The project director, Dr Niamh O’Carroll, is making significant progress now in partnership with colleagues on the newly formed Curriculum Subcommittee. This committee reports to the PGTC and is chaired by Dr John Cox.
- A greater role for trainers in national governance of GP training is an important issue.
- GP trainee are formalising their network and the ICGP is supporting this.

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

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