

Michael Harris' Newsletter September 2007

Dear Trainer,

Well, I've been AD for Bristol for four weeks now, and I'm dead impressed with what I've seen:

- I've met all the GP Educators (the generic name for Course Organisers and GP Tutors) and they are superb;
- all the STs that I've met are bright, enthusiastic and tremendously eager to learn about General Practice;
- how Mandy and Rosie run such the office so effectively with so few hours is a source of amazement to me (this time last year they and the team were dealing with 38 trainees in total, and we now have 84, so don't be surprised if they are a little slower answering your queries etc);
- the GPRs have a high MRCGP pass and distinction rate, which not only says a lot about them, but also about the quality of your good selves;
- there's been a warm welcome from the Trainers that I've met or been in contact with - thank you.

ST1/2 visits to practices

You'll probably be aware that the GPVTS ST1/2s (=SHOs) are expected to get the equivalent of a half day per week for GP-related teaching. It'll be made up as follows - one session per month of each of the following:

- GPE-led group work;
- speciality 'in-house' work-place based teaching;
- a visit to their training practice;
- personally arranged teaching/study.

So, this means that the ST1/2 will contact you to arrange an average of one visit to the practice per month

Your formal duties as their Educational Supervisor will take up a couple of these sessions every six months, and you can decide how they spend their other practice sessions when you've worked out what they need to learn.

Some ideas - they could spend some time sitting in with the GPs or Practice Nurses, for example, or you could get them to see patients and then call you in to supervise their work. You could, of course, have a tutorial (perhaps simultaneously with your current GPR or F2; get them to prepare it!), or get them sitting in on a practice meeting.

Other possibilities include: videoing a consultation to discuss with VTS team; home visits, including palliative care visits; seeing how the practice team works, eg spending time with PM, receptionists, nursing team; looking at the chronic disease management clinics; observing IT, QOF, PBC, practice meetings...

All this will keep them enthused about their intended careers and they'll learn loads.

I appreciate that this is more than some of you were expecting, and sadly there is no additional funding from the cash-strapped GP School for this. However, it has to be "a good thing", if you organise it carefully (eg getting them to do some of the work), there will be a minimal impact on appointments, and they will hit the ground running when they start in your practices as GP Registrars.

Trainer approval/re-approval visits

I'm thinking about developing the system for approval and re-approval visits, and would welcome your comments:

- one possibility is to have some of the visits led by GP Educators, ie not always by me;
- another is to change the system for choosing which Trainer is on the visiting team: we might ask a less experienced Trainer to join us on a visit to an experienced Trainer and vice versa, so that those with less experience can learn from the "pros";
- I like the idea of asking the visiting Trainer to bring their own GPR along: the visiting GPR can get together with the visited one and find out what the practice is really like; I've tried this out, they ask sensible questions, and they love it - as well as getting experience of QA, they always come back impressed by how much effort you put into being a Trainer.

I've set up a draft web-page explaining the format, and any feedback on these ideas will be gratefully received: see <http://www.bristolgpsolutions.nhs.uk/michaelharris.htm>

Trainer Groups

I'd like to meet you all by coming to one of each of your Trainer Group meetings. Would someone from each group please e-mail me so that we can arrange that? Perhaps you could give me a brief introduction to your group in the e-mail (how you choose what to discuss, how the sessions run), together with a list of its members.

I'm a busy GP like yourselves, so it will be tricky to arrange meetings at a mutually convenient time, but let's make a start.

Best wishes,

Michael

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