

Health professional education in primary care: national survey of General Practices

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Rapid development and roll out

- A web-based/telephone survey of all general practices was developed and administered November 2015-April 2016*.
 - *NB – before most DHBs had placed more than just a few PGYs
- main outcome measures were current placements and future intentions for taking medical trainees; factors influencing decisions and possible incentives to take trainees.
- University of Auckland survey covered the upper North Island, by DHB areas (8)
- University of Otago survey covered the lower North Island and the South Island, by DHB areas (12)
- Approx. equal areas by population

Divergence

- Studies reported separately, but same questionnaire, same time period
 - Auckland study – included additional modelling
 - Otago study – included regional analysis, included rural hospitals
- Establishing accurate data about the existence of all general practices in NZ challenging
- Undertaken somewhat differently by each research team
- Definition of what constitutes a practice varied; satellite practices not counted separately

Aims

Auckland

- To estimate the capacity of general practice to accommodate undergraduate and postgraduate medical trainees, and model efficient ways to utilise identified capacity and increase capacity.

Otago

- To investigate capacity and intention of general practices to additionally teach junior doctors alongside current trainees in their service.

Practices and response rates

Total practice counts as at March 2017

- Auckland study area = 590 currently operating primary care practices
- Otago study area = 463 currently operating primary care practices
- NZ total estimate = 1053 practices

Practice responses

- Auckland study area - 432/590 practices – 73%
- Otago study area – 280/463 – 60%

Non-responding practices

Some data nevertheless available to study teams re medical trainees

- Auckland – 10% of non responding practices known to take UG medical trainees
- Otago – 40% of non responding practices known to take UG medical trainees

Responding general practices involved in any health professional (hp) training

Auckland study region

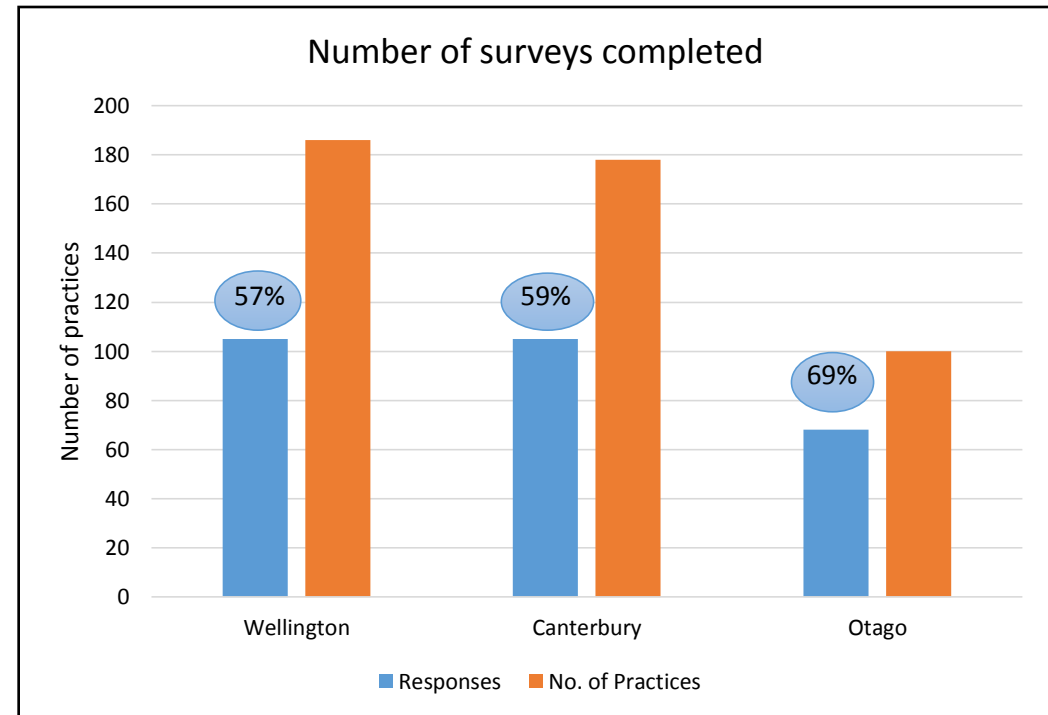
- Any type of medical trainee - 40%
- UG trainees – 17%
- PGY trainees (CBAs) – 2%
- GPEP registrars – 12%
- All 3 of the above – 1.9%
- Other students (mainly nurse trainees) – 35%

Otago study region

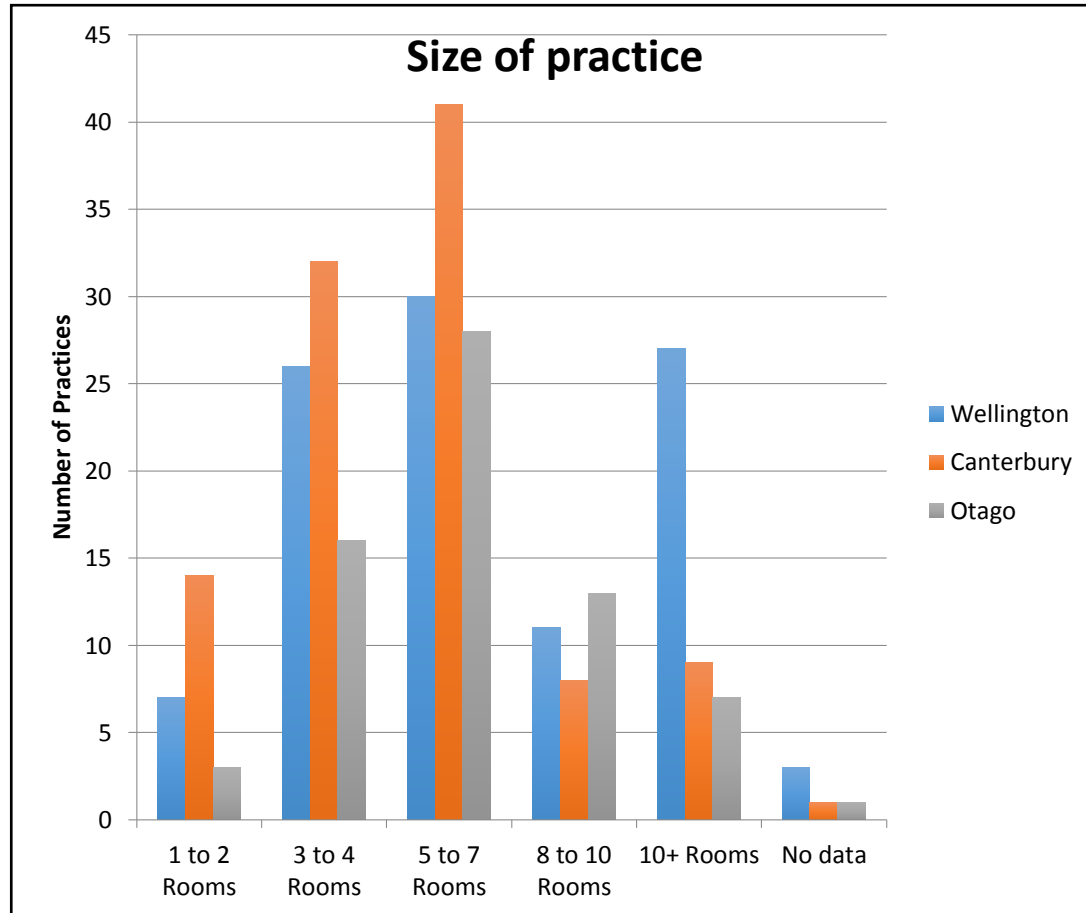
- Any type of hp trainee – 93%
- Any type of medical trainee - 86%
- UG trainees – 71%
- PGY trainees (CBAs) – 15%
- GPEP registrars – 46%
- Other students (mainly nurse trainees - 56%) + (other – 13%)

Otago study region - Primary Care training practice capacity survey

- Denominator 463
- 280 responses
 - 105 Wellington
 - 107 Canterbury
 - 68 Otago
- Overall response rate 60%

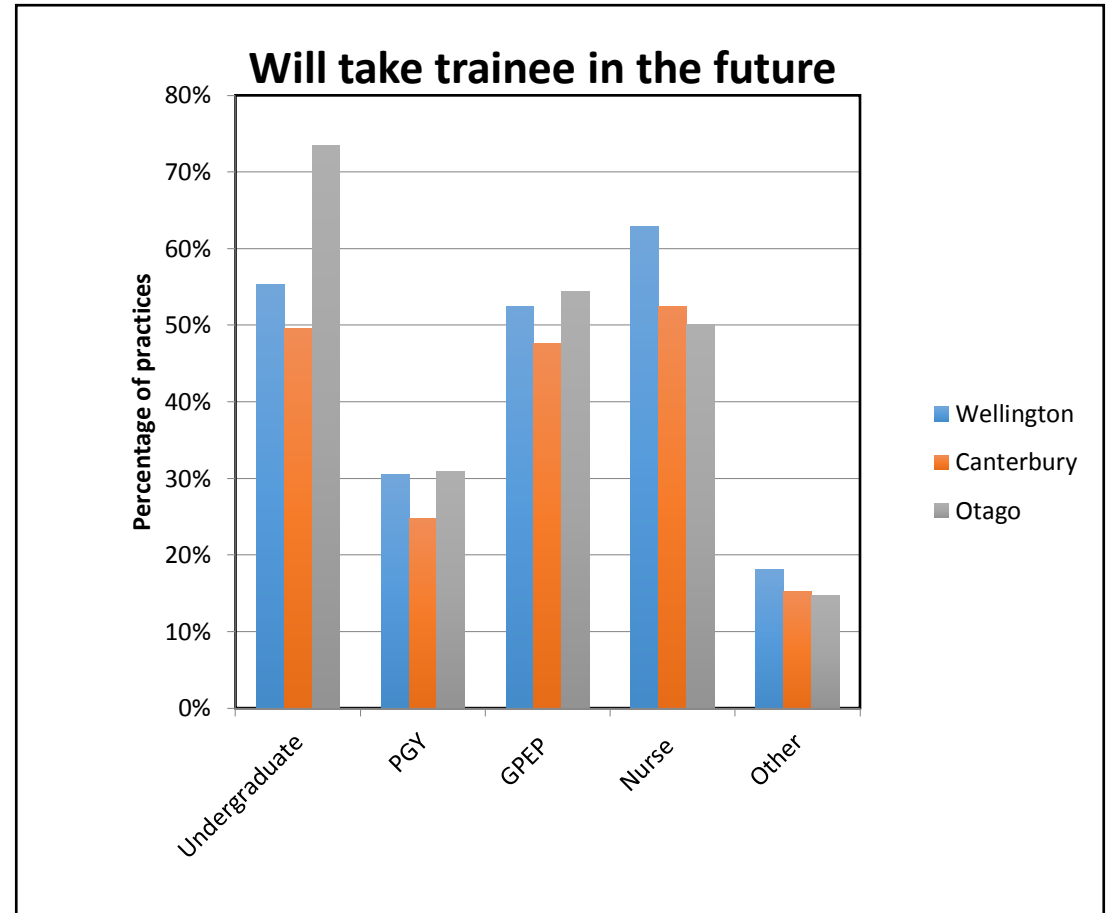
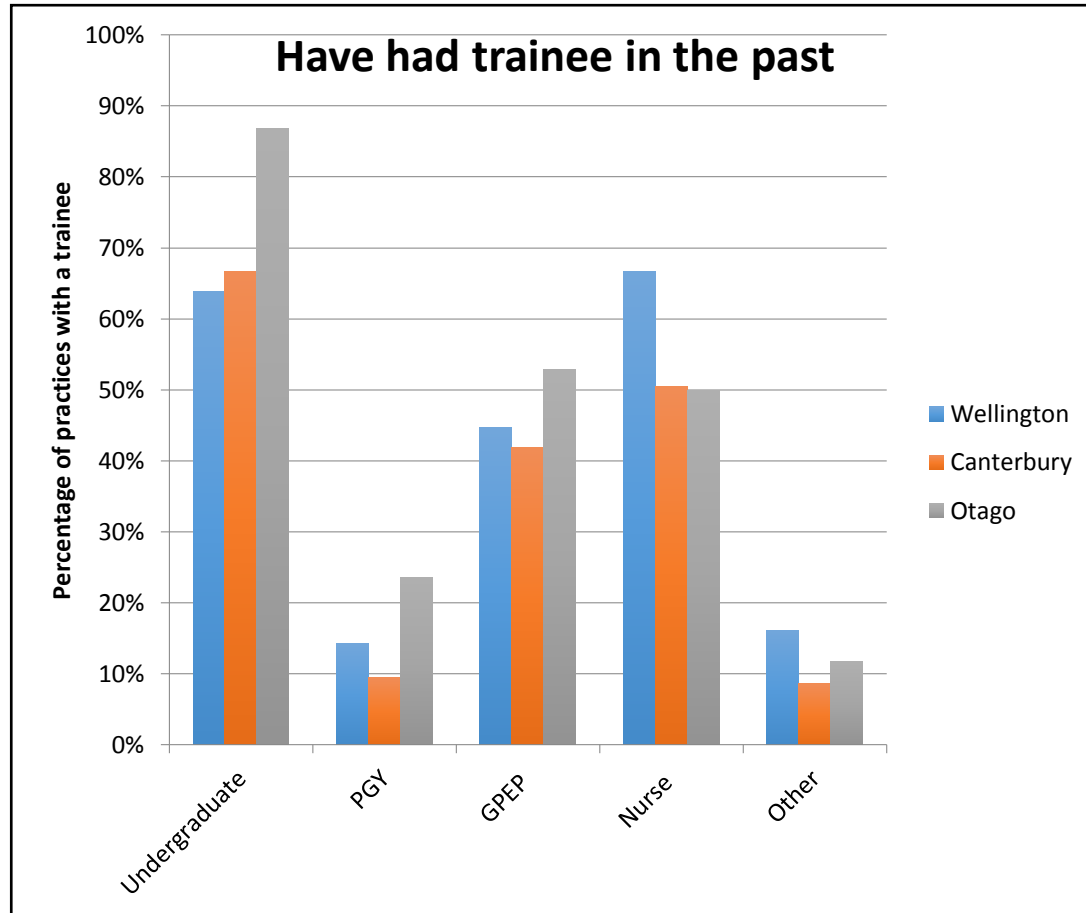


Demographics



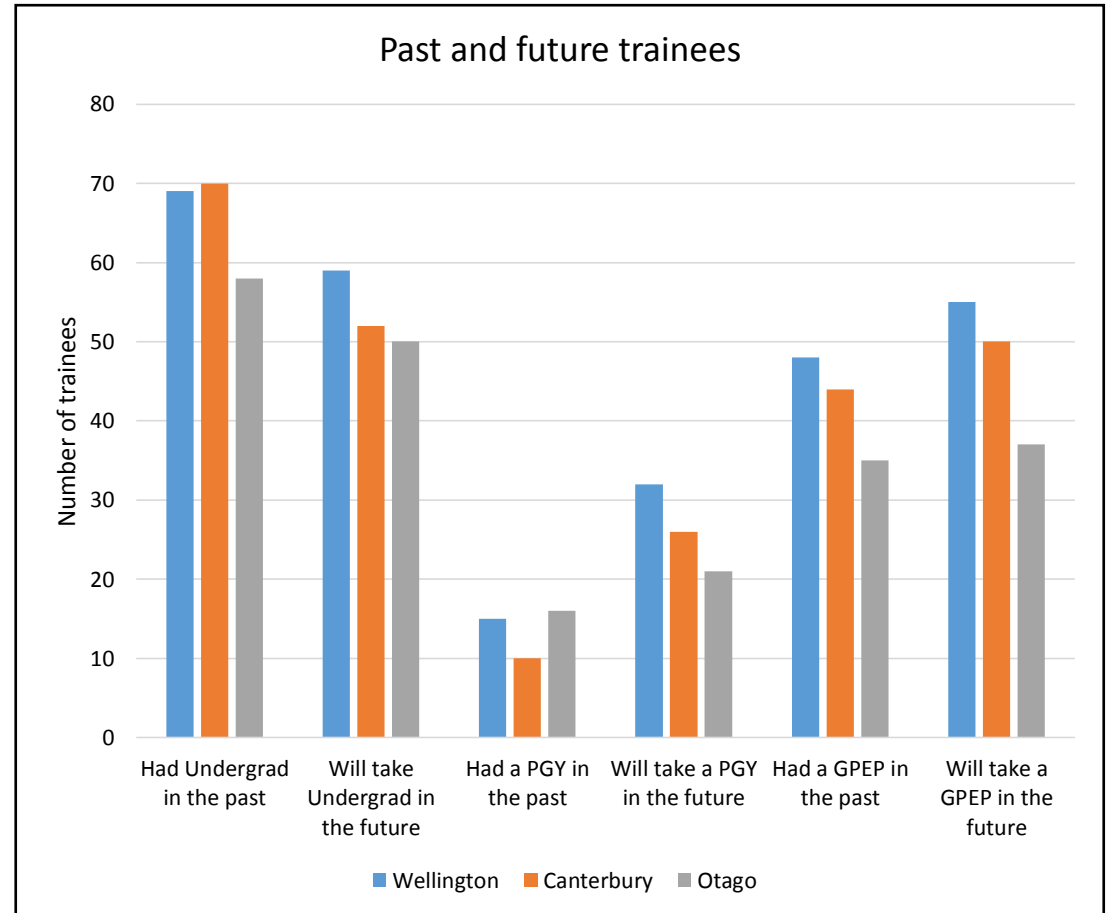
- Wellington region has largest number of big practices, 26% of the total Wellington responses.
- In Christchurch region 44% of practices are less than five rooms. 83% are 7 or less.
- Dunedin region has a more even distribution of practice sizes.

Past and future trainees of all types



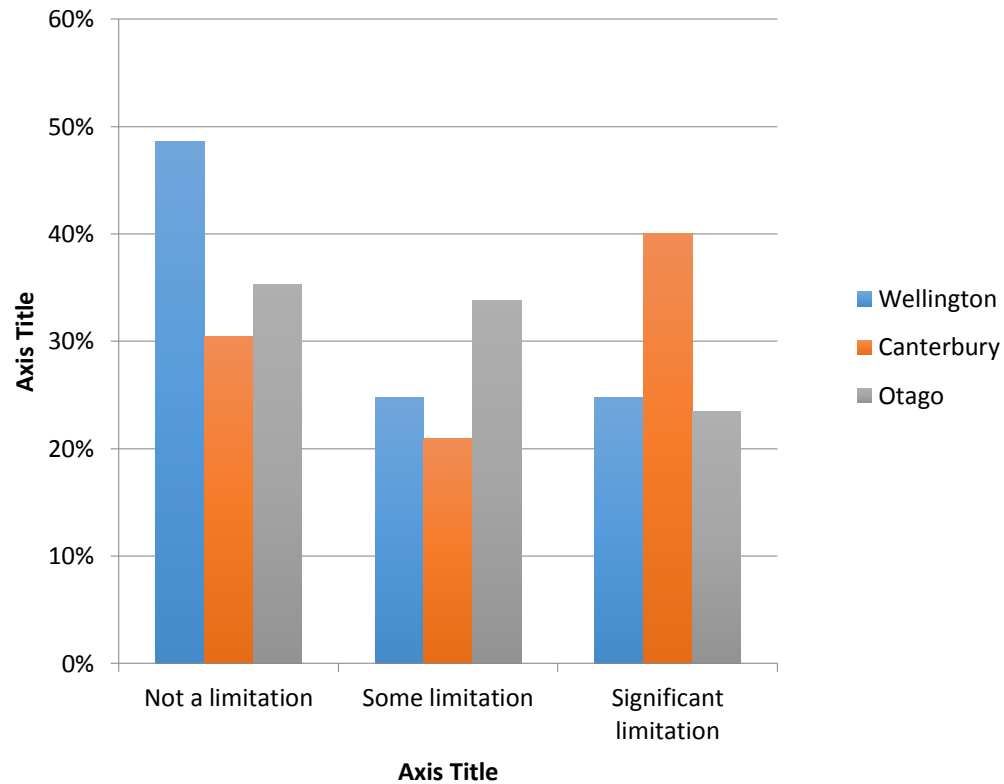
Past and future trainees

- Across all regions practices intend reducing numbers of undergraduates and increasing the number of PGYs and GPEPs.
- Nursing trainee numbers are constant.
- 86% of Otago practices take undergraduates currently
- Across all regions there is a 10% drop in the number who will take undergraduates
- 47 – 55% of practices intend to take GPEPs, a 5% increase.
- 25 – 31% intend to take PGYs, a 7 – 16% increase.

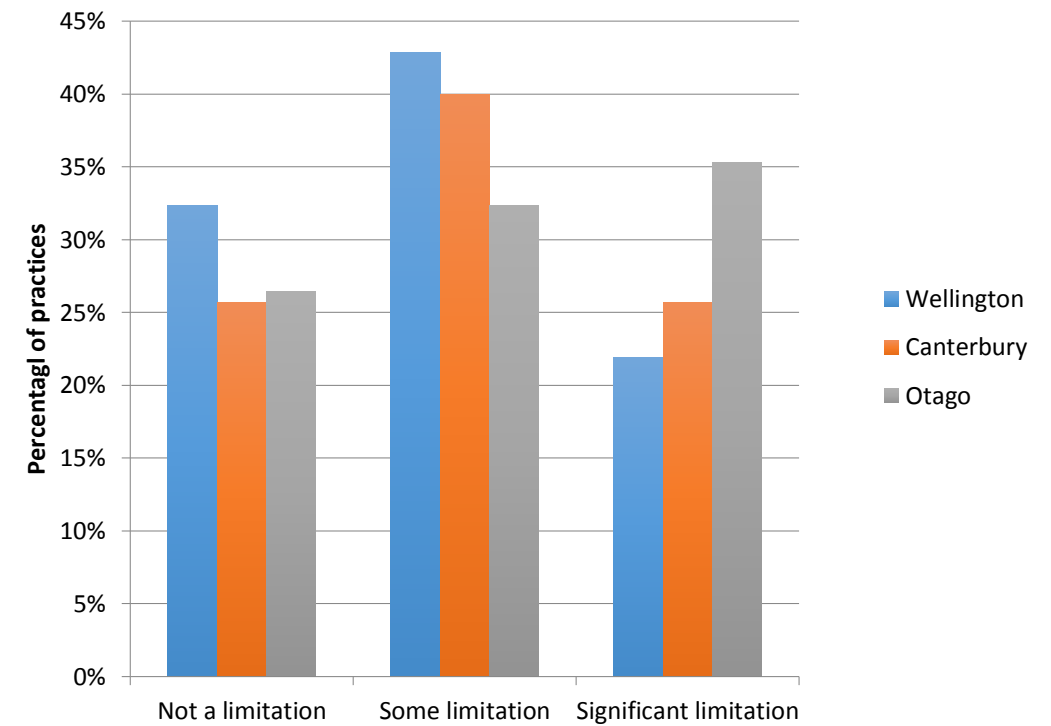


Limitations to taking trainees

Infrastructure

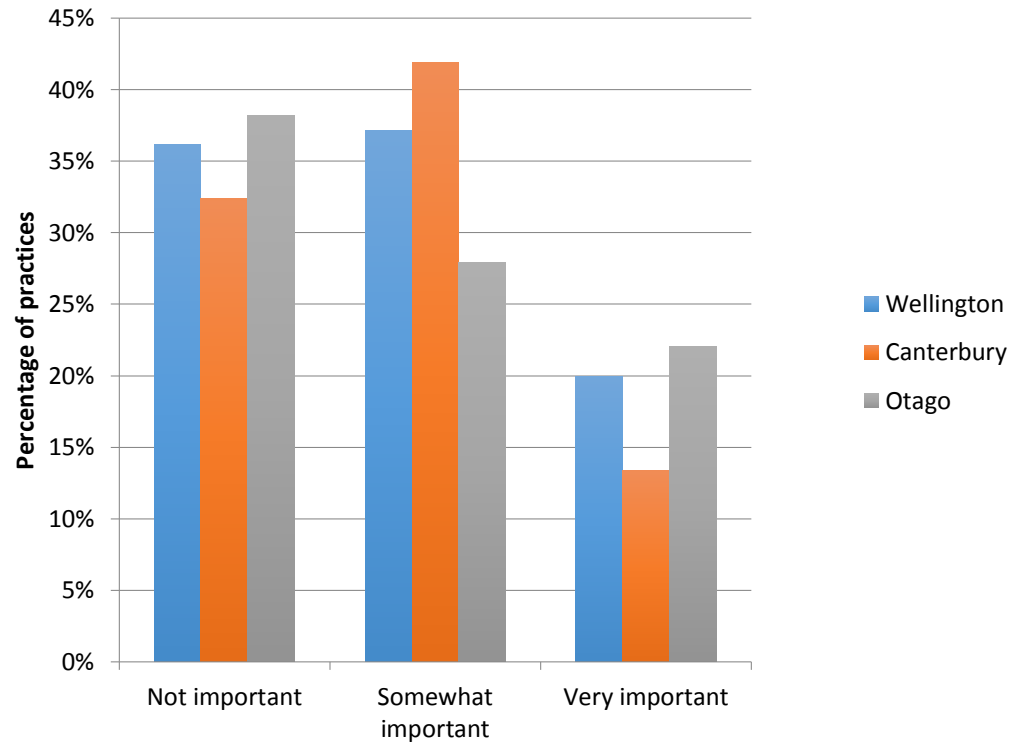


Supervising Staff

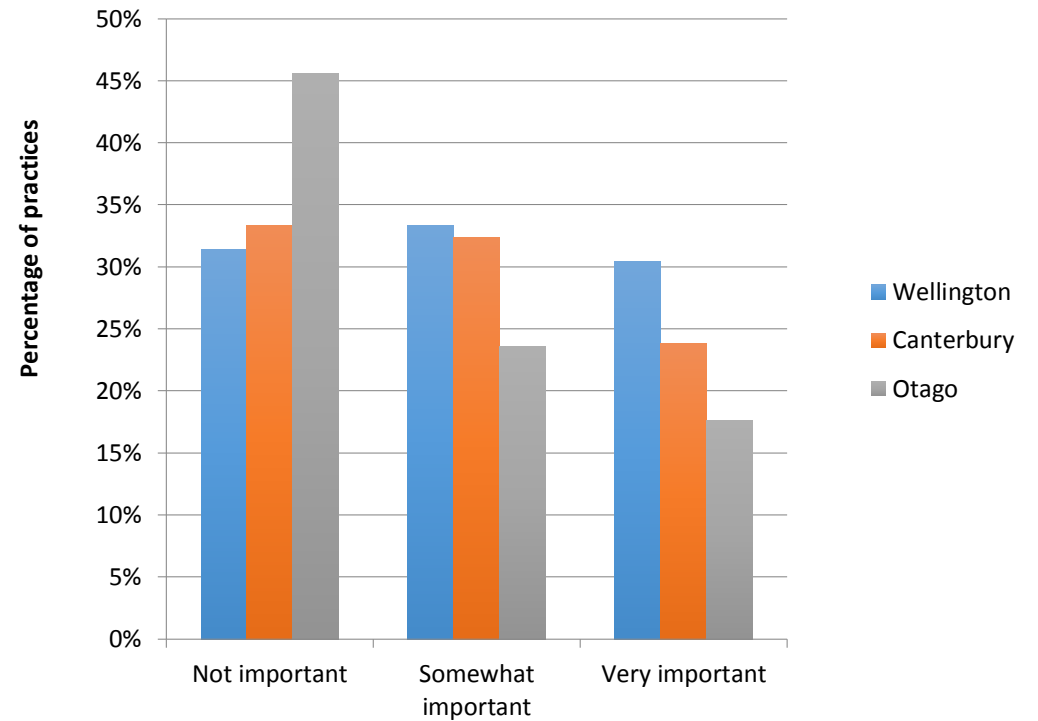


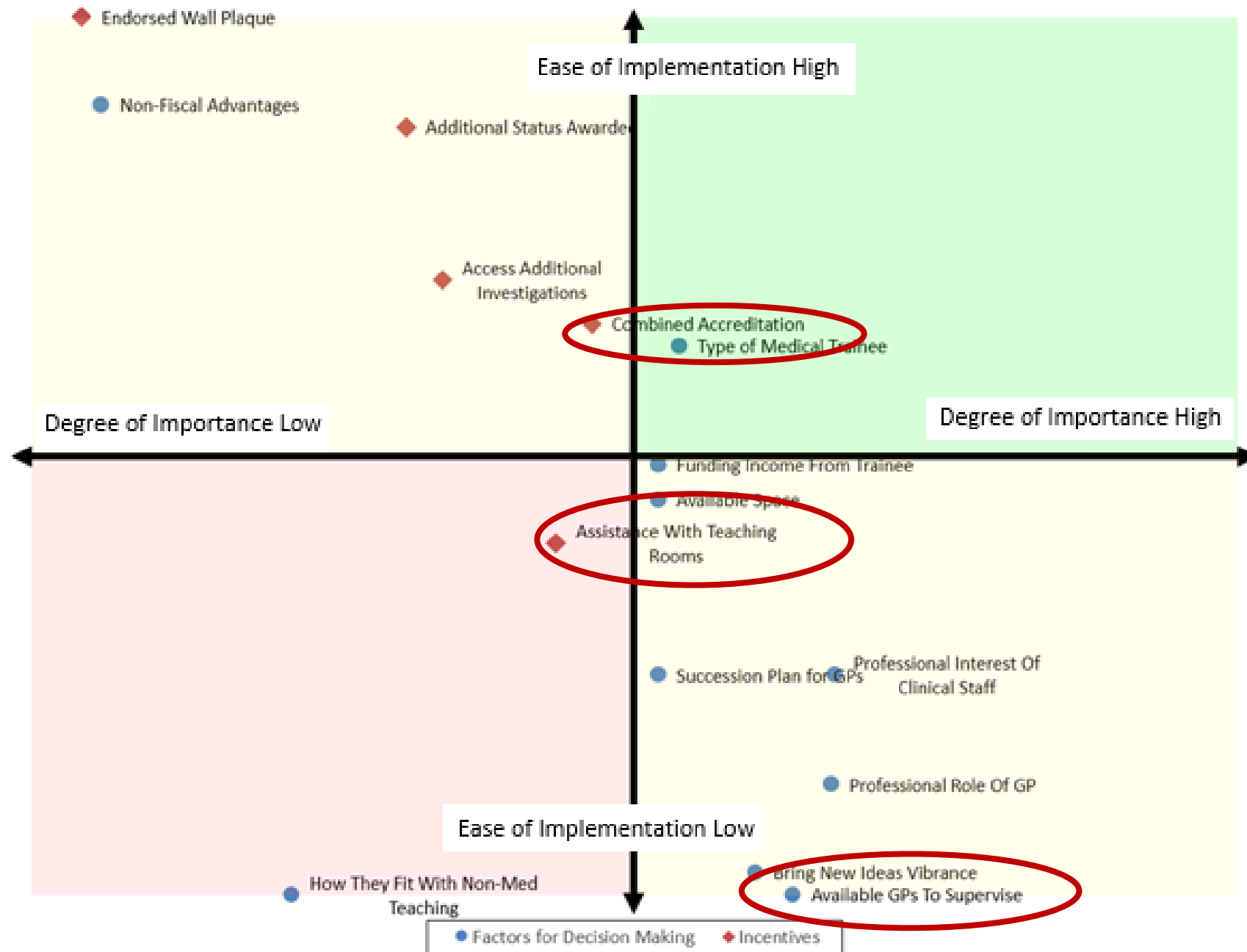
Incentives for taking trainees

Combined accreditation



Assistance with buildings/equipment





Key messages

- Overall, a big majority of NZ general practices already teaching
- In the UK - less than half of all British general practices are involved in undergraduate teaching, with investment in extra support and training being required to increase capacity further
- Training capacity in primary care is an all of health workforce training problem
- There are many types of trainees who need and benefit from clinical workplace training in primary care – and this is good for primary care
- Trainee nurses, UG medical students, other students (e.g. pharmacy students), GP registrars... as well as now PGYs, all need accommodating without displacing each other
- There are more students of all types than ever before



Sam '17

Variation

- There are significant and important regional differences
- Auckland study region results are likely influenced by the metropolitan area
- Otago study region also demonstrates significant variation
- Auckland – ‘headroom’ for capacity building
 - a) new teaching practices and b) existing teaching practices
- Otago – ‘headroom’ for capacity building
 - a) a few new teaching practices (W+C only), mainly b) existing teaching practices but only b) existing teaching practices in DN area

Modelling

- Has to be different depending on the regional circumstances
- Auckland study region modelling – medical trainees only
 - based on the assumption that each teaching practice can take six medical students, two PGY or one GPEP per year.
 - based on projected figures for UG medical students, PGYs, estimates of GPEP1 numbers
- Overall numbers of placements rise from 1094 in 2015 to 1507 by 2020 (38% increase).
- This equates to an additional 69 practices required to take trainees full-time in 2020.

Solutions

- increase numbers of clinical supervisors at practices – provision of additional training and support
- provide assistance for physical infrastructure improvements for smaller practices
- resource and maintain a collaborative, co-ordinated placement system, with local or regional or national solutions

As key pre-requisites for

- A standard, combined practice accreditation process
- Value and visibility of and for teaching practices
- Developing team teaching models, concurrent and/or shared trainee arrangements and inclusive learning environments

Publications

- Goodyear-Smith F, Al-Murrani A. Assessment and Modelling of General Practice and Community Setting Capacity for Medical Trainees in northern New Zealand. NZ Med J (in press)



- Murton S, Pullon S. Assessment of training capacity in New Zealand General Practices: a stocktake in the lower North Island and South Island. NZ Med J (in press)

