

Report of EURACT Council Meeting Cracow 17th - 21st March 1999

General Review

The meeting started with the presentation of national members' reports, and questions on these. New representatives were expected from Germany, Ukraine and Russia, but in fact only Professor Gernot Lorenz, the new German representative, was able to come. There are a further two countries with three members for the first time - Bosnia and Malta, who thus become eligible for a Council member. There was a debate on the method of EURACT Council future working. Four new council members will mean that plenary discussions will be more difficult, and Council meetings more expensive. A more efficient way of working must be found, and this the Executive Board is to consider - a number of options were suggested.

A list of new members and organisations was tabled. A bylaws amendment to accommodate relationships with other networks was agreed and will go to the next general meeting in Mallorca.

Replacement Council members are needed from Switzerland, and Portugal as a result of retirements

New co-option - MAYrten Kvist (Finland) has been co-opted as a result of his continuing work for WHO in Bosnia. This has been so successful that Bosnia now has members in its own right.

New Officers and Executive Board

The treasurer is now Athanasios Simeonidis from Greece, and Adam Windak from Poland took up the post of Secretary. Jan Heyrman continues as President and the other board members are Justin Allen and Igor Svab.

Ten targets debate

Very little progress has been made on this and there was some disagreement as to the policy agreed at the last meeting. It was reported that EURACT is to continue to work on four of the ten: -

1. All students to have exposure to general practice during basic medical education.
2. All medical schools should have academic departments of general practice
3. Specific training should be occurring at least to the level specified in line with ACMT recommendations
4. All doctors after graduation should have some training experience in general practice.

No clear picture emerged during these discussions as to how these are to be addressed further by EURACT.

Multiple key informant surveys

A paper from Jan Heyrman was considered which described a 6-stage process for questionnaires or surveys in order to improve the quality of data and to standardise the survey methods carried out to inform the Council. The key to the process is that two experts are asked independently in surveys or questionnaires in qualitative research. Discrepancies are then explored in an individual interview with each informant, and the data revised. The final result is a more accurate data set, but it is still dependent on the quality of informants, and in the way questions are structured. There was also discussion as to how many informants are required for reliability. The process is to be used in EURACT and the paper published.

Family medicine and changes to the European Directive -

This complex issue was debated at some length on the basis of a paper produced from the UK. The key issues considered were whether:-

- there should be two levels of general practitioners in Europe, a basic Title 4 level and a higher "Specialist" level in Title 3
- GP training in the EU should be governed by Title 4 (the GP part) or Title 3 (the Specialist part) of the Doctors Directive.
- regardless of the above there should be a common content and standard of training

Debate centred mainly on the first and third issues. In some countries it is accepted that there are two tiers of general practitioners - the first level being at title 4 level after 2 years and then a higher specialist qualification after 5 years. However the more general view was that there should be one level of general practitioner, that there should be a common content of training. and that work that is needed is to decide what the required competencies are. It was also pointed out that the EURACT council has already backed the UEMO Consensus Conference statement on strengthening Title 4.

There was no immediate overall consensus, and many council members felt that they needed to consult with their home organisations before any decision could be made. It was agreed that a small working party would draft a short document exploring the issues and the arguments for and against any position.

The working party managed to develop a consensus view later in the meeting. This is to be circulated to Council members and if approved can then be developed into a policy statement to be forwarded to the European Society.

Landscape discussion

This project is trying to develop a database of the main teaching organisations in European general practice teaching, and thus produce a blueprint or "landscape". Difficulties so far are as a result of the confused nature of supervising structures in Europe. Further work using the key informant process is to be carried out.

Mallorca Conference

EURACT is responsible for part of this conference and is keen that the education value of the sessions be improved. Session chairpersons identified who will determine the process of each session, using the following:-

- traditional style - for oral presentation session
- discussion style - 5 minute presentations from speakers, then discuss as a group
- interest group - chairman decides content and negotiates theme and uses presenters as resources to interactive workshop
- task force style - chairman negotiates key issues and tries to set out a future work plan for EURACT.

Chairpersons to set out the aims for their session in advance, and will be expected to produce a report.

(I have grave reservations about whether this can be applied when speakers have already had abstracts accepted)

Task Forces

BME Task Force - are trying to develop BME database for universities throughout Europe. Current work being presented at the Cambridge RCGP Spring meeting - possible future plans would be to publish on the web page or as a booklet.

VT Task Force - working in 5 subgroups, with external members. One imminent product, in the form of a policy statement regarding the selection of hospital posts is expected at this meeting. Other groups are looking at the selection of GP trainers, departmental/release course teaching, and the content and assessment of hospital posts. Margus Lember (Estonia) is the new task force chairman.

Academicisation (there is no such English word!) Task Force - a survey on academic status to be repeated and possibly published.

Assessment Harmonisation Task Force - chaired by Jan Heyrman, is an external group, and is building a database of questions and a glossary of assessment terms.

CME Task Force - is planning a session in Mallorca and combined with EQUIP. Considering future aim of group - ? product to be a booklet, conference or course.

Core content of GP training - a new group, considering working with WHO, and producing a textbook on family medicine for Europe. The general feeling was that there should be statement of the common content of general practice training - for ?

political use. A start will be made by comparing the contents of standard textbooks in Europe, and considering the differences.

Publicity Task Force - a new group suggested as a result of the complaints of a UK member that the web-site was a disgrace. Aim is to get the web-site updated and running, and to continue to keep an overview of all publicity for EURACT, including reports for the European Journal.

Future meetings

The Greek new teachers course has failed this year for a number of reasons, but it is still proposed to run an annual new trainers course.

General meeting is to be on the Friday of the Mallorca meeting in May.

Leuven: 23rd-27th August 1999 - Using Evidence Based Medicine - Finding answers to clinical problems

Slovenia, 7-11 September -Teaching Management of Chronic Diseases

Zagreb 20-24 October 1999 - EURACT Council

Riom, November (final date to be announced) - Course organisers course

WONCA/European Society Conference 2nd-6th July 2000 in Vienna.

European Society meeting - Tampere Finland 5th June 2001