



European Academy of Teachers in General Practice/Family Medicine (EURACT)

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EURACT Statement on Undergraduate Teaching in Family Medicine in all European Universities

April 2014

This statement was drawn up by the Basic Medical Education (BME) Committee of EURACT, the network organization for education of WONCA Europe, the European Society of General Practice/Family Medicine. The following members of the EURACT BME Committee were involved in the preparation of the document: Francesco Carelli, Valentina Madjova, Janko Kersnik, Natalia Zarbailov, Givi Javashvili, Mira Kis, Djurdica Lazic and Howard Tandeter. The statement was approved at the EURACT Council Meeting in Skopje, FYR Macedonia, on 24-26 April 2014.

Taking into account:

- Council Directive 93/16/EEC (1) to facilitate the free movement of doctors (2,3);
- the European Credit Transfer System (4);
- the UEMO Policy Paper on Specific Training in General Practice / Family Medicine (GP/FM) (5,6);
- the Framework for Professional and Administrative Development of GP/FM in Europe (7);
- the Bologna Declaration (8);
- the bill of patient rights and other documents on education and training in higher education (9,10,11) published as a WHO-WONCA Framework in 1998, and confirmed in a series of documents from EU Commissions (12), Colleges, Academies;
- the Alma Ata Declaration on the role of primary care (13);
- and the EU orientation in strengthening primary care (14,15,16);

EURACT states that each University Medical School educating future medical doctors must offer all students an adequate level of knowledge, practice and exposure to family practice in order to provide them with the knowledge, skills, attitudes and scope of the primary care approach. To achieve these goals, this statement intends to provide guidance on how to introduce or tailor existing teaching and training in General Practice / Family Medicine (GP/FM) in all European Universities. It is not intended to be a detailed or exhaustive description of the content of teaching curricula as these should, of necessity, be context specific and will depend on the tasks that GP/FM doctors are expected to undertake in different countries. Nevertheless a core European content arising from the WONCA European Definition (16) is necessary, as well as other contents detailed in the EURACT Educational Agenda (17) that are applicable universally.

Introduction

As indicated in the WHO-WONCA Framework published in 1998, and confirmed in a series of documents from EU Commissions, Colleges, Academies (including EURACT), every Faculty of Medicine should create a Department of Family Medicine managed by qualified and selected general practitioners/family doctors. At the same time there must be training that takes place in the GP/FM setting, where the student encounters patients who are representative of GP/FM practice populations (18). Such teaching and training are recognized as a “must” in all modern societies because medical students cannot become future good doctors without being familiar with the family medicine context and also because family medicine is the keystone for economic welfare, quality and costs (19).

Teachers in GP/FM practice must be qualified general practitioners / family doctors, selected according to clear and open criteria as described in the EURACT Statement for Selection of Teachers and Practice in GP/FM (20).

Medical students also need to acquire specific competencies that are most easily obtained in a general practice setting (21). These competencies have been clearly outlined by WONCA (World Organization of Family Doctors) in the “Checklist for Family Medicine/General Practice Experiences” (22) and can be grouped in two categories:

- the management of patients and conditions that are frequently seen in GP/FM, which are essential for competence with regard to diagnosis, prognosis and appropriate treatment;
- the development of skills and attitudes specific and necessary as future GP/FM practitioners.

Based on the development of European society, it is an urgent and unavoidable necessity that principles are set down to ensure that teaching and training for future family doctors are assured with the required quality and relevance for the good of European citizens.

Key Principles

Considering EURACT’s Mapping of Undergraduate Teaching of Family Medicine in Europe (showing in detail where this is impeded or lacking) and considering the EURACT BME Committee’s work on and publication of a European Minimal Core Curriculum for teaching Family Medicine (23) (indicating the method to be followed to obtain essential and key homogeneity and thus help avoid resistance and confusion), these are the key principles:

1. Each University Medical School should have a fully integrated and operational Department of Family Medicine / General Practice, starting with undergraduate training as a part of the process of obtaining a level of clinical competence sufficient for independent practice.
2. A Family Medicine / General Practice Curriculum for undergraduate education should be developed in collaboration with Family Medicine / General Practice departments and Medical Professional Organizations in the country. International collaboration could be sought with departments with a proven success story in the development of the discipline.
3. The Family Medicine / General Practice Curriculum should be based on the European Definition of General Practice (16) and the EURACT Educational Agenda (17). National details on the organisation and delivery of primary health care and collaboration across the interface between primary and secondary care should be included appropriately.

4. Based on the UEMO policy statement on specific training (5,6), a minimum of 50% of training should be in general practice, starting with undergraduate training as part of the process of obtaining a level of clinical competence sufficient for independent practice.
5. All students should be able to learn about primary care management of patients through a student clerkship in general practice lasting several weeks during the later years of medical school.
6. There should be a minimal curriculum across more than just one (e.g. the last) semester. Lectures should be delivered by family physicians / general practitioners and limited to core themes proposed by EURACT and national associations of family physicians / general practitioners (23). The majority of the programme should be delivered in small group work and through one-to-one teaching in the practices of family physicians / general practitioners.
7. The chairs of the departments must be doctors with appropriate academic achievements similar to other departmental chairs in the particular University. A lack of academic achievements should be overcome by assigning a family physician / general practitioner to co-chair a department for a defined transition period.

Conclusion

Family Medicine teaching and training are fundamental resources for today's medical practice and for future generations, as urged by all the International Organizations and Institutions of Medicine. University Faculties, Deans and Departments responsible are urged to organise such teaching/training at the optimal levels outlined above, or to initiate teaching/training where unfortunately this is not yet provided.

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