“Building a strong foundation for the future: Quality General Practice/Family Medicine education in medical schools”

Mette Brekke, Dept. of General Practice, Sept. 9th 2016
Why do bright young people wish to study medicine?

- love natural sciences
- work with people
“Building a strong foundation for the future: Quality General Practice/Family Medicine education in medical schools”

_Meaning:_

- «A sufficient supply of future GPs demands quality FM education in medical schools»
- A sufficient supply of future GPs demands quality FM education in medical schools

1. Is it true?

2. Is it important?

3. How do we do it?
Background

• List holding GP, Students in rotation

• Professor In charge of GP education at Univ. of Oslo

Curriculum reform
- A sufficient supply of future GPs demands quality FM education in medical schools

1. Is it true?
How did you meet?
What influences career choice?

• Prestige/status

• Lifestyle/family considerations
Prestige?
Working conditions?

• «…overworked, unhappy people in drab buildings who have no professional pride in their specialty»
- A sufficient supply of future GPs demands quality FM education in medical schools

1. Is it true? – Yes !
- A sufficient supply of future GPs demands quality FM education in medical schools

2. Is it important? – Yes!
Why important?

• The obligation of medical schools is to educate the doctors which society needs
What characterizes general practice?

- Bio-psycho-social context
- Undifferentiated symptoms
- Several problems
- Complex conditions
- Multi-morbidity
- Uncertainty
- Patient centered
- Continuity
• ....the most intellectually demanding challenge that you can set yourself as a doctor

• Rewarding!
A sufficient supply of future GPs demands quality FM education in medical schools

1. Is it true? - Yes!

2. Is it important? – Yes!
- A sufficient supply of future GPs demands quality FM education in medical schools

3. How do we do it?

(list of essentials, points i-x)
i) Early patient exposure
- in a GP setting
Studying medicine
«…means studying the human organism, from the smallest cell up to bigger organs. You will learn how the body functions optimally and what happens in case of disease. To become a doctor, you need to know the machinery of the body, down to the smallest cell.»
What characterizes general practice?

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How do we do it?

ii) GPs as role models
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How do we do it?

iii) Family medicine one of the main clinical topics – present throughout medical school
FIGURE 1. Monthly prevalence estimates of illness in the community and the roles of physicians, hospitals, and university medical centers in the provision of medical care (adults sixteen years of age and over).
- A sufficient supply of future GPs demands quality FM education in medical schools

How do we do it?

iv) Integrated teaching, showing the «ecology» of medical care
Integrated teaching
Prestige
Figure 1. Monthly prevalence estimates of illness in the community and the roles of physicians, hospitals, and university medical centers in the provision of medical care (adults sixteen years of age and over).
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How do we do it?

v) Clerkships in GP
Impact of FM clerkships in undergraduate medical education: a systematic review.
Turkeshi E et al, BMJ Open 2015

• **Students**
  – Satisfaction, unique learning possibilities
  – Improved attitudes towards GP
  – No impact on future career choice

• **GPs**
  – Increased job satisfaction
  – Increased workload

• **Patients**
  – No negative impact
Clerkships

• Costs money!
How do we do it?

vi) Curriculum and textbooks
How do we do it?

vii) Exams!
How do we do it?

viii) Strengthen GP academic workforce!
How do we do it?

• ix) «Semi-rural» medical schools
How do we do it?

New selection criteria?

• x) Involve GPs into selection
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• Let’s do it!