

Key training issues for GP registrars, their trainers and established GPs in relation to supporting self care by patients

Summary

Context

The Department of Health's recent White Paper shaping the direction of primary care¹ emphasises the importance of supporting patients to self care, in relation to all aspects of their health and well-being for prevention, in acute illness and long term conditions.² COGPED has recognised the importance of including the knowledge, skills and attitudes that a trainee doctor working in general practice needs to learn and practise to be able to provide effective support for their patients who want to self care.

Purpose of paper

COGPED describes the workforce training implications in respect of GP registrars, their trainers, and established GPs in response to the expectations in the DH White Paper¹ for these doctors to support patients, carers and other people in the community to self care, as part of their everyday role in practice.

Content

The definition and scope of support for self care is described, and the benefits and risks outlined – in a multiprofessional context. A brief case is made for uprating the knowledge, skills and behaviour of GP registrars, their trainers and established GPs in supporting self care whilst optimising patient safety, as an integral component of all learning and training.

Resource Implications

Time and effort by deaneries and their educators for evolution and dissemination of good practice in learning/training about supporting self care and liaison with relevant organisations. Associated resources for patients to relay good practice in supporting self care.

Recommendations

Upload revised paper on COGPED website with recommendation that support for self care is incorporated in any learning programme for GPs in training, their trainers and established GPs as an integral part of the care of any acute or long term condition, as appropriate. This should be recognised by the General Medical Council and PMETB and Royal College of General Practitioners – being explicit in the new GP curriculum and incorporated into work based assessment with statements on competencies relating to support for self care.

Key training issues for GP registrars, their trainers and established GPs, in relation to supporting patients to self care

1. Introduction

Training GP registrars (GPRs), their trainers and established GPs in supporting self care is not just about their gaining new or updated knowledge and skills, but also about changing attitudes to the relevance and safety of empowering patients to increase the likelihood and extend the manner by which, they may be supported to self care.

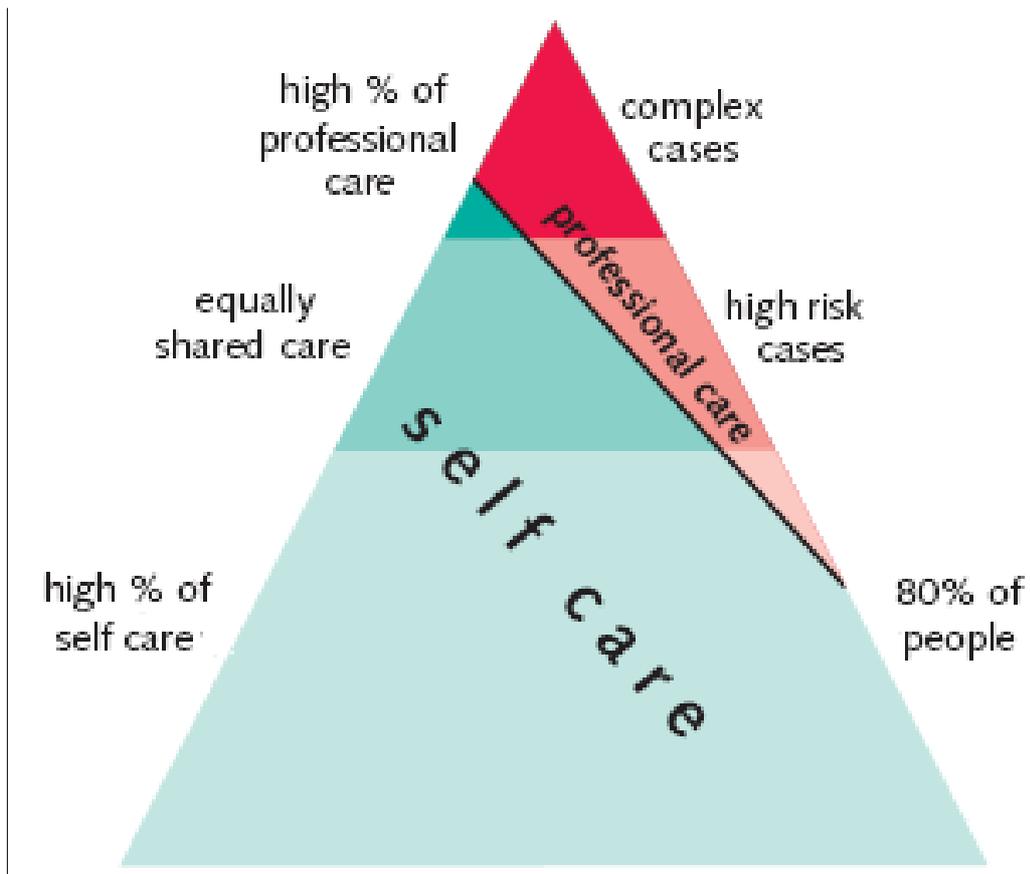
Discussion by COGPED members highlighted the need for: good communication skills (using visual, spoken, IT aids), knowledge and skills in relation to public health and knowledge of available resources in the local community. GPRs and others need to understand risk sharing with patients and desist from reinforcing inappropriate health seeking behaviours. Supporting individual patients in their self care is about re-orientating our way of working in general practice towards a more inclusive approach to discussion and decision making about care.

1.1 What is self care?

It is believed that patients who are supported to self care, will reduce demand on GPs and others in primary care as a whole.³ The evidence base that justifies self care is wide ranging but robust evidence of the cost effectiveness of supporting them to self care is awaited, in terms of better health outcomes for patients and more appropriate consultations with the primary care team.^{3,4} More appropriate consultation behaviour might mean increased consultation rates for some primary care professionals such as pharmacists (instead of the general practice employed team).

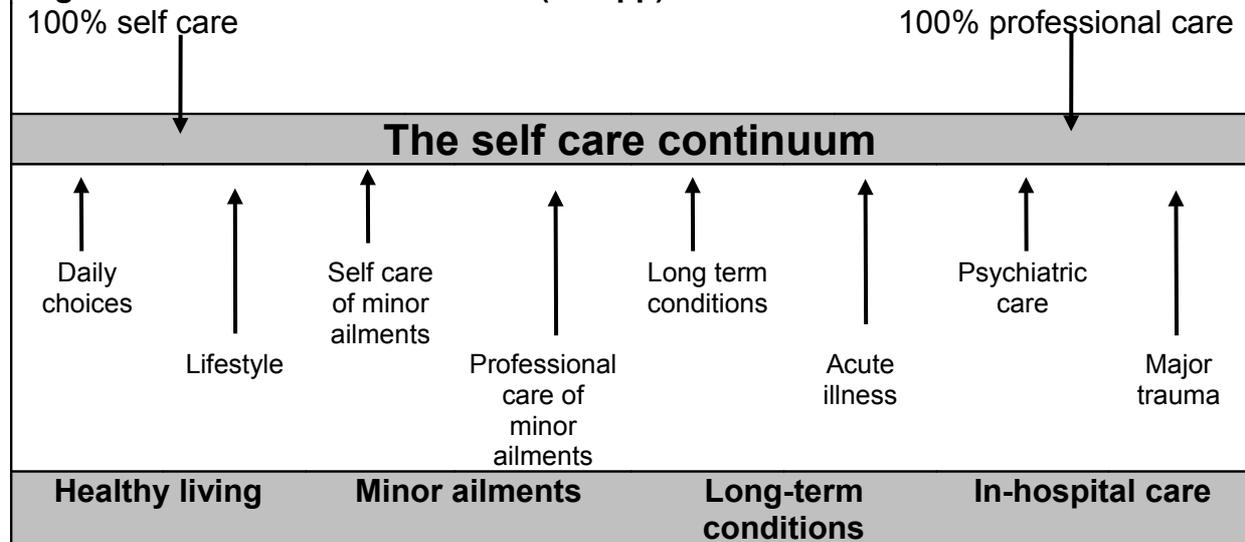
Self care is the basic level of health care in any society.⁵ In the UK self care comprises an estimated 80% of all care episodes. Figure 1 shows the relationship of self care to low risk, high risk and complex cases.

Figure 1 The Health Care Pyramid



Self care is a continuum, starting from the individual responsibility people take in making daily choices about their lifestyle, and risk taking. This may be in their work, travel and hobbies, and other aspects of their everyday lives. Next along the continuum, Figure 2 shows the self management of ailments without and with assistance from health professionals such as pharmacists, GPs or practice nurses.³

Figure 2 The self care continuum (© wipp)



Shared care follows – by health professionals together with their patients, as individuals cope with acute and long term health conditions. Ultimately on the right hand of the continuum there is pure medical care with little or no opportunity for self care in the immediate episode, e.g. severe/acute mental health episode or major trauma or illness - until the start of recovery when self care can emerge again.

1.2 Components of self care

The aims of promoting self care to your patients or the local population at large are to encourage individual people to:

- P** Prevent the condition developing or recurring
- A** Await resolution of the symptoms
- R** Use self care skills for **R**elief of symptoms
- T** Learn to **T**olerate symptoms that do not resolve or cannot be reasonably alleviated.^{4,5}

Figure 3 The PART model to illustrate pathways for self care

<p>P</p> <p>Prevent the condition developing</p>	<p>A</p> <p>Await resolution of the symptoms</p>
<p>R</p> <p>Use self care skills for Relief of symptoms</p>	<p>T</p> <p>Learn to Tolerate symptoms that do not resolve or cannot be reasonably alleviated</p>

The size of each PART quadrant in Figure 3 will depend on national, local and general practice approaches to the specific health condition e.g. asthma.

2. The learning environment in general practice that encourages our ability to support patients to self care

Supporting patients with acute and long term conditions and minor ailments to self care, GP registrars, established GPs and others in the primary care workforce need knowledge, skills, positive attitudes and change in clinical practice behaviour in relation to:

- 2.1 Understanding what constitutes self care and the various components and approaches that can be used for particular health conditions by GPs, their teams, or in general. Adapting clinical protocols and patient pathways within

primary care and across the interfaces with secondary care and community care, pharmacy, dentistry and public health – for acute and long term conditions. Matching support for self care to circumstances and characteristics of the patient (age, ethnicity, language, acute/chronic condition etc.)

- 2.2 Evolving a culture in primary care of supporting patients to self care safely: within commissioning (and practice based commissioning) and everyday care. Where multi-professional delivery of care is expected to maximise opportunities for self care, whilst maintaining cost effectiveness and maximising patient safety, optimising health and wellbeing outcomes.
- 2.3 Contributing to the education of patients in timely and appropriate self care and as an integral part of their medical management, as relevant.
- 2.4 Co-ordinating NHS approaches to self care, so that PCTs and other NHS bodies support and enable GPs and their teams' efforts to support patients to self care.
- 2.5 Emphasise the contribution of non-health professionals in the learning environment of training practices

We need to revise educational activities and delivery of GP training so that it incorporates encouragement of patients' self care (in - F2 placements in general practice, GP registrar training, updating and dissemination of RCGP curriculum, CPD for established GPs including GP trainers, assessments e.g. of GP registrars, quality assurance re practice visits).

3. Long term implications

Promoting support for self care is central to the White Paper on care outside hospitals.¹ Supporting self care should be a driver for better co-ordinated multiprofessional working and learning within GP teams, and across the interfaces of primary, secondary and community care settings.

It will be important to ensure that patient safety is paramount in any new training initiative or in the application of self care in the practice (e.g. with self care as an integral part of the new RCGP curriculum⁶).

The Expert Patients Programme is being mainstreamed⁷ and it will be important to teach GP registrars and other GPs about the importance of enhancing patients' self care skills and reversing the medicalisation of the patient perspective of their care and life events.

Supporting self care is integral to effective practice based commissioning; patients' self management plans are increasingly accepted as improving clinical outcomes and helping to manage demand. Improved patient information to help patients to help themselves also assists demand management.⁸

4. Conclusions

COGPED should promote support for self care as an integral part of GP training – for GP registrars, and as continuing professional development for GP trainers and established GPs, making the most of new resources for multidisciplinary training.³

5. Recommendations

See recommendations in Summary section.

References

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Acknowledgements

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