Developing capacity-building of general practitioners in the Eastern Mediterranean Region

Introduction

Participants in a recently held regional consultation on development of the bridge programme for capacity-building in the Eastern Mediterranean Region (EMR) (1) agreed that Member States should advocate for establishing, strengthening and expanding sustained and effective refresher course(s) for general practitioners (GPs) working in public/private sectors to develop further their knowledge and skills to improve the quality of healthcare provided at primary health care level.

In this regard, through a joint collaboration with the Department of Family Medicine at the American University of Beirut Medical Center (AUBMC), WHO has developed a short online course to orient GPs on principles and elements of primary care services, including clinical management of common diseases. The objectives of the joint collaboration were discussed in two-day regional consultations with representatives from health ministries, higher education ministries and GP syndicates/associations from Egypt, Islamic Republic of Iran, Jordan, Kuwait, Lebanon, Morocco, Oman, Pakistan, Saudi Arabia, Sudan and Tunisia.

Objectives

1. To share regional situation of family practice programmes: challenges and priorities.
2. To present the contents and curriculum of the proposed online training course for GPs to the key focal points/institutions responsible for continuing medical education programmes in selected EMR countries.
3. To seek perceptions of key stakeholders who may intend to adapt/adopt the bridging programme in their respective countries.
4. To agree on practical steps for rolling out the bridging programme, building local capacities and its institutionalization in countries of the Region.
5. To build consensus on scaling up production of family medicine specialists and enhancing system capacity to attract family physicians in the Region.

Although physicians often work for many years serving the local community/patients who are happy with the healthcare provided, they may not have had access to investment in their professional education or clinical services. These physicians may therefore need significant knowledge updating, and also a much broader awareness of how to be proactive (for example, for prevention and management of noncommunicable diseases) rather than giving reactive care. Another issue to address is modern orientation to appropriate primary care: many GPs received their training in medical schools, which is taught in hospital settings, and recommend tests and drugs that may not be relevant or useful in first-contact care. Finally, many physicians have had a partial case mix (only adults, children or women, etc.) and in order to give good general medical care in a primary care team they may need to revise some areas of clinical practice.

However, up-skilling GPs will not work unless all parts of the health care system understand why these broad, integrative, person-centred skills are needed. A clear timeline, resource plan and support for ongoing practice and skill retention are required. This investment will only be cost-effective if other parts of the system – financing models, hospital sector, other primary health care staff and patients – use the services appropriately. Existing and upcoming family medicine specialists need a clear role and interface with their GP colleagues who are learning new skills – perhaps mutual mentorship, supervision and even referrals. Both groups will need to develop as team leaders, data analysts, service developers and evidence-based practitioners. They will need to understand the application of culturally-sensitive values that work best with their individual patients and communities, to analyse and address health needs, empower and support, and manage risks and resources.

Dr Ala Alwan, WHO Regional Director for the Eastern Mediterranean, highlighted in his opening address that the shortage of family physicians is felt worldwide. However, the situation in the WHO EMR is acute and requires urgent action.
Although Member States should do their best to strengthen family medicine departments in academic institutions, the huge shortage of family physicians will not be overcome solely by the establishment of more academic departments. Other factors, including issues related to service delivery, must also be addressed based on local capacities and needs.

The Regional Director brought attention to the fact that the current annual output of trained family physicians in the Region is around 681, against identified needs of almost 21 000 family physicians (2). According to a situation analysis carried out in late 2014, in collaboration with the World Organization of Family Doctors (WONCA) and Aga Khan University in Karachi, Pakistan, only 20% of all medical schools in the Region have functional family medicine departments (2).

In this regard, the short online course developed by WHO and AUBMC includes training module that blend theoretical knowledge and practical skills based on global best practices. It has an online component along with elements of face-to-face training in which GPs can readily participate. The training curriculum covers the main competencies that a GP/family physician has to master including: primary care management, person-centred care, specific problem-solving skills, comprehensive approach and community orientation.

The training course is to be delivered in a blended format which covers 48 topics, including the management of common medical problems in primary care and family medicine core concepts. It runs over 24 weeks and is divided into four main blocks, starting with an orientation session and ending with final examinations. Each block spans a 5-week period, whereby the first 4 weeks are delivered online and the fifth week includes a 6-hour face-to-face session or live review.

In conclusion, the consultation recommended a set of actions to enhance the bridge programme for capacity-building of general practitioners (Box 1), as well as actions for countries to enhance health system capacity to implement family
practice (Box 2).

References

1. Regional consultation on development of the bridge programme for capacity-building of general practitioners in the Eastern Mediterranean Region. World Health Organization Regional Office for the Eastern Mediterranean, 10–11 May 2016, Cairo, Egypt.


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