



GP Masterclasses:

Translating learning into action

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Background

Typically continuing professional development for GPs and practice nurses is uniprofessional and didactic. This has been found to present difficulty in applying the learning on returning to practice. Chronic disease management is particularly challenging as, in recent years, GPs may retain overall responsibility for care, yet are removed from the day to day provision, which may be overseen by practice nurses. This way of working can hinder a team approach to the care of patients.

The aim of the GP Masterclass series of CPD sessions was to bring practice teams together to learn from each other, other practice teams and outside specialists in the field. The learning focused on the process of care as well as updating clinical knowledge, and was undertaken in a facilitated small group.

Course format

Masterclasses ran over 3 meetings (1 full day and 2 halves), each 6 weeks apart. Participants were drawn from 6 practices in the locality and comprised GP and practice nurse pairs. The topics covered to date have been CHD, COPD and diabetes.

Prior to a course, participant pairs were asked to describe their practice care pathway, gather a small amount of audit data, identify a difficult case and reflect on current practice.

At the sessions:

- Pairs of GPs and Practice Nurses shared their current practice with the group - no blame, no shame!
- Each practice team gave a case presentation to raise learning points for all;
- There were uniprofessional discussions on best practice;
- There were shared discussions with specialists, e.g. on Pulmonary Rehabilitation, Smoking cessation, Spirometry, Palliative care in COPD; and
- 'Action Plans' for change were agreed for each practice at the end of the session and revisited at the next.

The role of a GP facilitator was critical to the process of learning and concerned:

- Identifying and inviting experts in line with group needs;
- Ensuring everyone had an equal voice;
- Ensuring emphasis on learning from and with each other; and
- Keeping track of group learning needs and Action Plans.

What were the benefits?

Participants reported:

- Valuing expert input for cases and general clinical management (drugs, guidance, resources etc.);
- Valuing protected time for GPs and PNs to discuss and review care in own practice;
- Hearing of other practices, sharing ideas and discussion about clinical practice; and
- Striking a balance between learning/reflecting on practice and making changes to practice.

Challenges for the facilitator

- Stopping GPs dominating discussions!
- (Gently) challenging the participants, especially regarding stereotypes and negative views;
- Finding experts who could adapt discussion to meet learning needs of both GPs and PNs;
- Giving protected time to teams to discuss and optimise process and content of care in their practices;
- Encouraging collaborative learning and respecting other professionals' roles in chronic disease management;
- Practice pairs finding time before course and between sessions to reflect, discuss action plan /joint learning; and
- Getting the information prior to the first session.

Changes for the future

- Simplify pre-session information collection and feedback: enter information electronically;
- Re-ordering the days: ½:1:½; and
- Build-in reflection time to session 1 and plan subsequent sessions based on identified needs /discussion.

Conclusions

This was a well-received series of educational sessions which have demonstrated the need for topic-led shared, interprofessional, small group learning. It enabled quick and sustainable changes to be made to the way practices managed chronic diseases. Participants enjoyed the challenge of comparing their practice with others and putting changes into action during the course.