

Interchange General Practice/Airport General Practice

Practice Teaching Plan.

1. Scope of clinical practice including:

a. A descriptive profile of patients attending the practice

THE SERVICES PROVIDED BY INTERCHANGE GENERAL PRACTICE

The Interchange General Practice (IGP) was set up by Dr Peter Rowland in the 1980s. Initially it was located at Civic Interchange bus stop (hence the name) then moved to Ainslie Avenue. It has occupied its present site at 28 University Avenue since 2002.

Patient demographic

Dr Rowland set up the practice to serve the northside population but also to offer accessible, non-judgemental primary care to the gay and lesbian population of the ACT (and also to other marginalised groups- drug users, prostitutes, trans-gender patients etc) at a time when that was not readily available. The Interchange General Practice now serves many other disadvantaged or marginal groups: patients with drug dependencies, refugees and other patients from culturally and linguistically diverse backgrounds, people living with HIV/AIDS, the homeless and transgender patients.

Patients with drug dependencies

People with drug dependencies are among our most challenging patients. Often their lives are in chaos, they do not keep appointments and their appearance and behaviour can be outside the mainstream. For those reasons they often find it difficult to get primary care

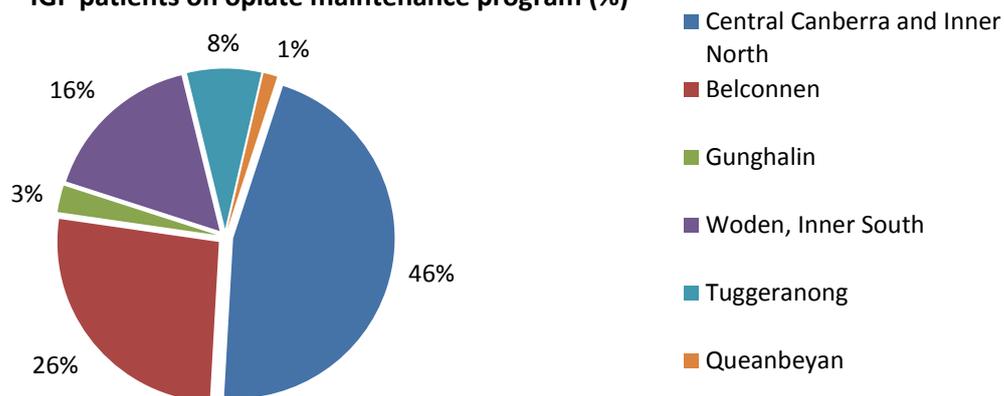
Of the 400+ Canberrans on methadone or buprenorphine who receive their opiate maintenance management at a general practice, by far the largest group attend the IGP. IGP also manages about half the patients in the ACT with a benzodiazepine dependency who are on Benzodiazepine Voluntary Undertakings.

Chronically ill patients

Interchange General Practice treats a relatively low number of patients per session- between 8 to 10- which is just over half the average for Australia as a whole. Because IGP doctors do not set pre-ordained limits on the time given to patients, they have increasingly attracted patients with complex and chronic conditions: an audit of IGP's patient files shows that 60 per cent of patient visits are people with chronic disease.

The consequence is that IGP attracts patients from all over the ACT as the following pie charts demonstrate:

IGP patients on opiate maintenance program (%)



Source: IGP MedTech data base for period Feb 2010- Mar 2011

Gender %	IGP – 2011	IGP – 2008	IGP – 2005	Canberra Total
Female	54	60	63	51
Male	46	40	37	49

The gender mix of Interchange General Practice patients has been skewed towards women but this has been declining as the following table (from a July 2011 survey) shows.

The age profile of Interchange General Practice patients is heavily skewed towards people over 35 with much smaller representation of children and young adults.

Age %	IGP – 2011	IGP – 2008	IGP – 2005	Canberra Total
0 – 18	2	0	1	26
19 – 35	14	28	30	24
36 – 55	45	45	49	29

56 – 75	34	22	18	16
75+	5	4	2	4

Patients once they come to Interchange General Practice are loath to leave: 94% of patients have been attending for more than two years. This also accounts in part for the age profile of our patients.

Years Attended %	IGP – 2011	IGP – 2008	IGP – 2005
Less than 2	6	4	25
2 – 5 years	18	25	28
6 – 10 years	33	39	31
Over 10 year	43	31	17

b. The special interests and skills of individual supervisors and others involved in teaching.

SPECIAL INTERESTS OF CLINICAL STAFF

Doctor	Qualifications	Special interests
Dr Tuck Meng SOO	MA (Cantab) MBBS(Hons) (Lon) FRACGP – Principal	HIV medicine, drug dependency, management of Hepatitis B and Hepatitis C, transgender health.
Dr Joo-Inn CHEW	BA MBBS (Melb)	Refugee health, women’s health.
Dr Liz FRASER	MBBS MEd FRACGP	Mental health, environmental and nutritional medicine.
Dr Janelle HAMILTON	MBBS DCH MHE	Medical education, travel medicine, women’s health, mental health

A/Prof. David HARLEY	BSc MBBS MMedSc(Clin.Epid) PhD FAFPHM	Public health medicine, indigenous health
Dr Denise KRAUS	MBBS Dip Ven FRACGP	Forensic medicine, sexual health.
Dr Christine PHILLIPS	BMedSc MBBS MA MPH Dip Ed FRACGP	Refugee health, mental health.
Dr Cathy SCHMIDLI	MBBS	Women's health.
Dr Peter TAIT	MBBS DipRACOG FRACGP	Environmental issues, Aboriginal health, drug and alcohol, mental health, primary health care and public health, GP training.
Dr Rosie YUILLE	BSc MBBS(Hons)	Women's health, aboriginal health.

c. Services provided outside of the practice (hospital, nursing home, outreach)

Home visits

Home visits are available for patients of the practice who are too sick or disabled to come to the surgery premises.

Nursing homes,

Nursing home visits are available by arrangement.

Hospital work or appointments

None of the doctors at the Interchange General Practice hold a hospital appointment.

Outreach work

Many doctors consult at other places. Among them Winnunga Nimmityjah AHS, Forensic and Medical Sexual Assault Care, Companion House, Alcohol and Drug Clinic at The Canberra Hospital, Alexander Maconochie Centre.

d. Other teaching opportunities accessible from the practice (local physio, community nurses, palliative care team visits, other clinics)

Registrars can arrange with doctors working in other areas of special interest to visit those facilities eg Alexander Maconochie Centre.

2. How routine teaching is organised:

a. Who teaches and when, including expectations of the Registrar (a timetable would be useful)

Interchange General Practice has been engaged in teaching registrars for at least 20 years and nearly 20 registrars have done part of their training at the Practice. In addition, the Interchange General Practice has been involved in teaching medical students for more than 20 years too, firstly medical students through the University of Sydney and since its establishment, the ANU Medical School. The Interchange General Practice was one of two pioneer practices in Canberra in the highly successful PGPPP program. In the last two years, we have also received nursing students from the University of Canberra. This practice is therefore ideally set up for vertically-integrated teaching and our registrars are very involved in the teaching of medical students.

Currently, formal teaching is delivered at the Interchange General Practice by Dr Tuck Meng Soo, the practice principal. Generally, teaching is delivered in 3 hourly blocks either weekly or fortnightly depending on whether the registrar is a full-time or part-time registrar. If there is more than one registrar at the practice, joint teaching sessions are usually held. However, in that situation, Dr Soo would normally do some one-on-one sessions to address issues specific to each registrar eg observation of consultation sessions. Teaching sessions are held at set sessions of the week that are mutually convenient for Dr Soo and the registrars. In the event of Dr Soo being away for set teaching sessions, one of the other supervisors will step in to hold a teaching session. Of course, all supervisors are available for "corridor consultations."

Teaching would include the use of GP-Start modules where appropriate. Other elements of teaching include case discussions, clinical note audits, direct observations and review of video consultations. Dr Soo has been a proponent of the use of video consultations in this LTG and all registrars are encouraged to record video consultations for review during their time at the Interchange General Practice.

Although no formal teaching is required for GPT3 and GPT4 registrars, Dr Soo has been offering teaching sessions to these registrars too if they have wanted them.

Besides Dr Soo, the doctors who are involved in the training of registrars are Dr Janelle Hamilton, Dr Rosie Yuille, Dr Cathy Schmidli, Dr Denise Kraus, Assoc Prof Christine Phillips, Dr Liz Fraser and Dr Peter Tait. Other practice doctors will, when opportunities present, discuss cases with practice registrars.

As part of our vertical integration programme), registrars are involved in teaching Year 3 ANU medical students in their general practice term. Supervision and assistance is provided by GP supervisors.

Our patient demographic with a large percentage of patients with chronic illness and with a large number of patients with drug dependencies who are challenging to manage means that the Interchange General Practice provides a stimulating environment for the training of registrars.

b. Modes of teaching available, modes of teaching preferred

As above.

c. The role of direct observation/videotaping in the practice

As above.

3. How supervision is organised and scheduled particularly where multiple supervisors are used.

As above.

4. How assessment is organised and undertaken

Generally, formative assessments are done according to schedule by Dr Tuck Meng Soo. All formative assessments are formally discussed with registrars. GP supervisors will also discuss amongst themselves the performances of the trainees in the practice and valuable feedback is given to GP supervisors by their regular patients who have also consulted registrars in the practice. Such feedback is then passed on to the registrar.

Generally, Dr Tuck Meng Soo will also have informal discussions with the registrar particularly in cases where problems have been identified to try to formulate strategies for addressing these problems. These strategies could include more frequent observation of the registrar's performance either directly or via video consultations, role plays and more intensive case discussions.

5. Resources available in the practice such as library, internet access, and online resources such as therapeutic guidelines, EBM sites etc

The practice has a small library in our staff room. Many of the doctors also have personal collections of books, folders, charts and pamphlets that they have found individually useful.

All the computers in the practice have internet access. There are three spare computers in the administrative area that doctors can use when they are not consulting. This means that doctors can have access to computers to do their paperwork and research when their rooms are being used by other doctors for consultations. These computers can also be accessed remotely so that doctors can log on to do their paperwork when they are at home or at another location.

We had been relying on the ACT Health website for doctors for access to online guidelines but as the access to that has now been curtailed, we will subscribe again to Therapeutic Guidelines, Australian Medicines Handbook and Murtagh for all desktops.

Our nurses are intimately involved in training and support of all registrars.

6. Other CPD and education opportunities in the area (Divisions etc)

The Interchange General Practice has staff and doctors' meetings every three months. This provides registrars with an opportunity to participate in issues to do with practice management. Registrars have an opportunity to provide input during these meetings.

The Interchange General practice is an active participant in Pracnet and registrars have an opportunity to be involved in trials within the practice. This practice is also part of an international surveillance network for H1N1 and registrars have been actively involved in the recruitment of patients for this trial.

The Interchange General Practice is the placement site for the HIV nurse employed by the Medicare Local because of our HIV caseload. Our HIV nurse is now also involved in the treatment of Hepatitis C patients.

All registrars are encouraged to attend local educational activities run by the ACT Medical Local.

7. Participation in wider Clinical and Community Leadership roles such as:

- a. Board membership of primary health care focussed organisations**
- b. Regional clinical governance roles (Area Health Services/Local Hospital Networks)**

Dr Tuck Meng Soo is the Medicare Local representative on the Opiate Treatments Advisory Committee and in this role, is also involved in the Implementing Expanded Access to Naloxone in the ACT program. He is also on the advisory panel to the Chief Health Officer on HIV positive patients with behavioural and management issues.

Assoc Prof Chris Phillips is involved in research and teaching within the Academic Unit of General practice and is the Medical Director of Companion House.

Dr Janelle Hamilton is a Clinical Skills and PBL tutor at the ANU Medical School. She also supervises the PGPPP intern and coordinates the teaching of the medical students at IGP.

Dr Joo-Inn Chew also works sessions at Companion House.

Dr Rosie Yuille also works at the Winnunga Nimmityjah Aboriginal Medical Service.

Dr Liz Fraser also works at the Alexander Maconochie Centre.

Dr Denise Kraus is the GP Advisor to the Medicare Local HIV program.

Dr Peter Tait also works at Winnunga Nimmityjah Aboriginal Medical Service and the Althea Wellness Centre at Directions ACT. He is involved in environmental research (ANU, UNSW) and advocacy (PHAA, DEA). He teaches at the ANU Medical School.

Assoc Prof David Harley convenes the population health theme in the ANUMS MBBS curriculum. He conducts research at the National Centre for Epidemiology and Population Health in areas including international health, infectious diseases epidemiology and the health effects of climate change. He also contributes significantly to the work of the Australasian Faculty of Public Health Medicine and the Royal Australasian College of Physicians in areas including registrar training in public health medicine and via service on faculty and college working parties.