



# Performance and remediation in general practice training

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Processes for assessing, monitoring and, if necessary, remediating registrar performance must be carefully developed. They must be capable of addressing underlying key aetiological issues, while being transparent to all parties. The move from national to regional general practice training has emphasised the requirement for accountability, and new training providers must ensure that their own systems are capable of meeting this challenge.

Developing a strategy of performance review is an essential step in program planning and development and often, unfortunately, is left until last. While policies to address performance are often seen as punitive, they do, in fact, offer the opportunity to recognise excellent performance. Such policies allow poor performance, the more confronting end of the spectrum, to be managed in an objective and timely manner.

Comprehensive performance review must look both upward and downward with processes for evaluating:

- registrar performance
- supervisor and practice performance, and
- the performance of the training program and its staff.

These processes then connect to arrangements for improvement and remediation.

Figure 1 shows the review structure currently in place within Sturt Fleurieu General Practice Education and Training. This article describes processes of registrar performance review, and strategies for recognising, assessing and remediating registrar performance.

## Management

The formal process of registrar perfor-

mance review should occur at regular intervals throughout the training year and be conducted by senior academic and administrative staff. Thorough documentation is required including minuted records of proceedings and actions. The review parameters and minimum performance standards must be defined as well the consequences arising from noncompliance. It is this policy and process that should determine adequate registrar participation in training and therefore define the minimum requirements to satisfy re-enrolment in the Australian General Practice Training Program each year.

## Recognition

Figure 2 shows the current Sturt Fleurieu process for managing registrar performance issues. Ideally, the formal review process will detect most problems, however, concerns regarding performance are often raised in an informal way in telephone conversations, meetings and professional contacts. In this instance program staff should initiate a limited internal review, examining previous formative and summative supervisor assessments and approach supervisors directly to deter-

mine the need to formalise issues through the performance review committee.

## Problem assessment

The aim of the assessment process is to accurately determine the underlying aetiology and to categorise problems in four main ways. These relate to:

- internal practice or supervisor conflicts
- health issues
- professional or ethical behaviour concerns, and
- deficiencies in clinical skills or knowledge.

## Case coordinator

As an initial step, a case coordinator needs to be appointed from within the organisation to manage the review process. Ideally this person should be independent of the host practice and supervisor, experienced in performance assessment and able to appraise all relevant written material, formative and summative supervisor assessments, clinical teacher visit reports and records of participation in training activities.

## Interviews

Interviews must be conducted with the

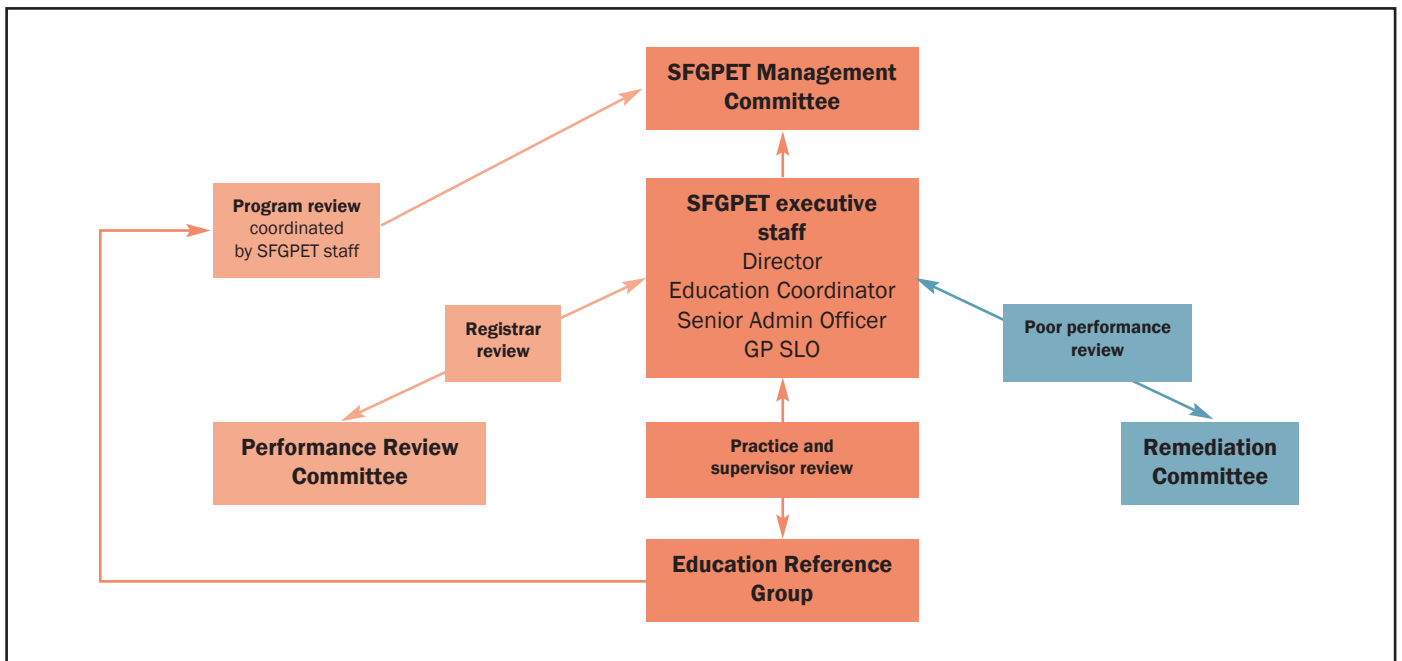


Figure 1. SFGPET performance review structure

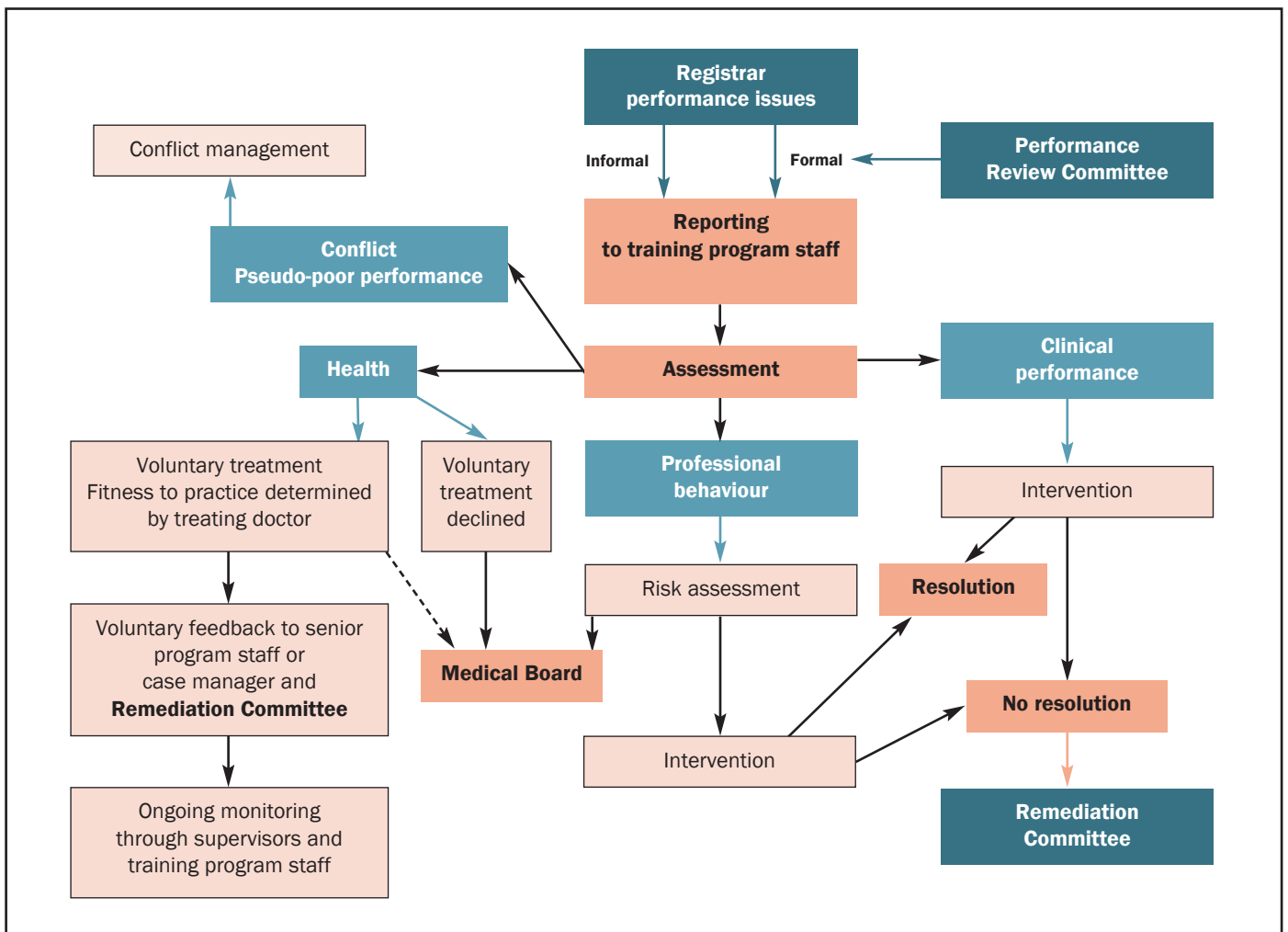


Figure 2. Flow chart for management of registrar performance

registrar, supervisor and practice staff in order to give all parties the opportunity to define the problem. This process must include reviews of rosters, working hours and the employment contract.

If deficiencies are found to exist in clinical knowledge and skills, an audit of diagnostic and management plans, with appropriate regard to patient confidentiality, may be required. Similarly, concerns regarding professional or ethical behaviour may require closer review of patient complaints, critical incidents or reports to the practice or local hospital regarding breaches of patient confidentiality. Registrar health problems may declare themselves by observations of emotional disturbance, altered or irrational behaviour, aggression, withdrawal, or chaotic organisation. Underlying psychological problems or drug abuse are clearly problems that all medical practitioners may have to face.

### Pseudo-poor performance

Closer examination in this manner can also reveal a range of internal conflicts which may have contributed significantly to the performance of the registrar. Pseudo-poor performance occurs when conflict is the main issue. In this instance, objective registrar performance review remains the priority of the case coordinator because patient safety issues demand that performance be dealt with expediently before embarking on a process of conflict resolution.

### Intervention strategies

As described above, if performance is acceptable but internal conflict is the issue, appropriate conflict management must occur.

When performance is the primary problem, a generic intervention for both clinical knowledge and professional behaviour issues revolves around counselling, the development of comprehensive learning plans and contracts, increased formative assessment, increased clinical teacher visits and addi-

tional educational activities. The GP supervisor must play a central role in practice based remediation, however, responsibility for monitoring and reporting back to the appropriate performance review committee lies with the case coordinator in association with the supervisor.

When professional performance or behaviour has been identified as a problem, the appointment of an external mentor may be required to explore more fully issues relating to professional conduct.

Health problems must be managed in association with an independent treating practitioner. Once identified, the registrar must be encouraged to seek voluntary treatment, with fitness to practice being determined by the treating doctor. These recommendations must be made in writing, and the registrar encouraged to participate in a confidential but documented voluntary feedback to senior program staff confirming that treatment has been initiated.

Issues relating to professional behaviour and doctor health may require the case coordinator to undertake an urgent risk assessment. In instances where professional misconduct is suspected or a doctor does not seek voluntary treatment for a serious illness that may affect their ability to practice, an opinion from, or reporting to, the relevant medical board may be required.

### Conclusion

Performance review often raises difficult issues but it is a vital activity that cannot be avoided. Given the complexity of performance issues, additional financial and human resources will need to be allocated to the remediation process and it may be that these resources are supplementary to the routine training budget. For new organisations, a transparent review process with defined performance measures is a key component to successful program implementation.

Conflict of interest: none declared.

### Resources

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