



AFP in Practice questions are designed to get you started in a small group learning (SGL) activity in your practice or with colleagues. Requirements to earn 40 Category 1 CPD points for a SGL activity are: minimum of four and a maximum of 10 people, minimum of 8 hours of discussion in a year, and at least two GPs. Groups may include anyone else who has an interest (ie. practice nurses, community health workers, allied health professionals). A kit with all the instructions and forms you need is available at www.racgp.org.au/afpinpractice. You can also earn Category 2 points based on these questions at AFP practice challenge. Visit www.racgp.org.au/practicechallenge

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Learning objectives

After completion of this activity participants will be able to:

- apply a strategy in consultations to minimise chronic disease morbidity for the individual patient
- interpret data from spirometry or an audit to improve clinical practice
- prepare a resource about chronic disease for carers or the community
- identify reasons for frustration in practice and propose ways to modify the underlying reasons
- analyse results of a critical incident analysis to improve clinical practice systems.

Category 1 – SGL questions

Domain 1 – Communication skills and the patient-doctor relationship

ICPC codes: A23, A98, P76, –45

Chronic disease trajectories often have a period where there can be proactive intervention. Examples may be opportunistic health promotion to minimise risk factors for developing chronic diseases or depression relapse prevention plans.

* Suggested learning activity: in pairs, role play negotiating a depression relapse plan or raising opportunistically with a patient a risk factor they may, or do have, in a consultation. Then swap and use a different scenario. Then as a larger group discuss what worked and what did not, and why.

Domain 2 – Applied professional knowledge and skills

ICPC codes: A98, –45, –46, A28, R95, R96, –39

Chronic disease management involves both knowledge about what should be done and then the ability to interpret investigation results.

* Suggested learning activities: Select 10–20 adult patients with either asthma or chronic obstructive pulmonary disease (COPD). Find out how many have had spirometry – by the practice, by formal lung function testing or by a respiratory physician. Then as a group look at the spirometry results and interpret the findings; compare to a formal report. For a refresher in spirometry interpretation go to www.nationalasthma.org.au/html/management/spiro_res/index.asp.

Select a chronic disease and search for 5–10 patients with that condition, then audit how their management compares to best practice. This could be done in pairs. Discuss findings as a larger group. If required, as a group, develop a way to improve any identified deficiencies.

Domain 3 – Population health and the context of general practice

ICPC codes: Z14, Z22

While patient centered care is a fundamental part of chronic disease management, there are people other than the patient to consider. Carers and the community also need information about chronic diseases.

* Suggested learning activities: develop a carer resources pack that could be used in the practice. Start in pairs with a different condition and consider the 'target audience', for example the needs of a parent of a child with asthma are different to the needs of a partner of a newly diagnosed diabetic. Each pair can put together the pack or list of contents. As a larger group present the packs and suggest improvements. There should then be multiple carer packs available for a range of common situations.

Write an article for the practice newsletter providing brief information about a chronic disease. As a large group outline the article, then each write a paragraph, and put together into the article.

Domain 4 – Professional and ethical role

ICPC code: A99–46

Chronic disease management involves collaboration between the patient, their doctor and other health care providers. In theory this sounds easy – in practice it can be challenging.

* Suggested learning activity: each consider the patient with a chronic disease that frustrates you the most. Then individually write down what about the patient that frustrates you. Also write down what emotions you feel when you see the patient (or even see that they have an appointment). As a group briefly share the frustrations and emotions you feel. Each work out what is in your control to change, what is in the patient's control, and what neither of you can control. As a group come up with ideas on how to change what you control.

Domain 5 – Organisational and legal dimensions

ICPC code: A99–62

Practice systems are essential to good chronic disease management; be that follow up of asthmatics, systems to diagnose cancer early, or systems to enhance diabetic care; and that is before considering identifying and trying to modify risk factors for developing chronic disease such as obesity.

* Suggested learning activity: decide on one of these areas to consider. Then refresh your minds about the current system (perhaps in the practice policy manual) and analyse using a critical incident approach. This involves looking at a case where something might have gone wrong, then looking at why it went wrong, if and how that could have been avoided, and if a system change is required. For example, you selected asthma as you all remember the patient last week who presented with acute asthma who required hospital admission. Review that file and compare to best practice. Were there planned reviews? If not, why? Did the patient not make suggested appointments? Were appointments not suggested? Had the patient run out of medication? Would reminder systems for asthma review help? Is there nothing that can be improved? Based on the case and discussion about the issues – should there be a change in practice policy?