

ROSA: Registrar-initiated Oversight, Support and Advice ERG 025 Final Report 30.6.2019

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Aim and objectives

The aim of this research was to explore help-seeking by general practice registrars during general practice training. The following operational definition of help-seeking was used, with a particular focus on social help-seeking from the registrar's general practice supervisor(s):

the seeking of information, oversight, support, advice or reassurance to manage a patient consultation (or a subsequent consultation with that patient), usually in response to a registrar recognising his or her own uncertainty, limits or discomfort.

The following research questions were addressed:

When and how do registrars seek in-consultation and/or deferred information, advice, oversight and support from GP supervisors?

How do registrars decide whether, when and how to seek either immediate and/or delayed advice, support or oversight from GP supervisors?

How does registrar help-seeking develop as training progresses?

Methods

This was qualitative research in which data was obtained from multiple qualitative methods. Data collection was led by experienced ECT visitors who were given additional research training. Data collection included fieldwork (observations of registrar consulting sessions during ECT visits), individual semi-structured interviews (with both registrars and their supervisors), follow-up phone calls one week after the visit, and ECT visitor reflections. Regular meetings of the research team were held to review research processes and share early analytic ideas. All data was audio-recorded and transcribed. A codebook was developed, and three coders shared the first cycle descriptive coding of all transcripts. Nvivo was used to manage and code the data.

Results

Five ECT visitors conducted a total of 23 research visits. The data included 23 completed field observations, 23 registrar interviews, 23 ECT visitor reflections, 17 supervisor interviews and 10 follow-up phone calls. A total of 130 consultations were observed. These included 47 episodes of observed social help-seeking, including from the ECT visitor. An additional 33 specific cases of social help-seeking were discussed during the interviews. Nearly 50% of registrars were in Term 1, with the others distributed from Term 2 to Term 4. Average age of registrars was 34 years, 57% were female, 95% had Australian medical qualifications, and 29% worked 5 or fewer sessions per week.

Visitors observed that registrars were reluctant to disrupt supervisors' consultations, and tended to manage their help-seeking thoughtfully and purposefully. A number of barriers to securing timely help were identified, including difficulty accessing their supervisor and physical distance between registrar and supervisor consulting rooms. A number of episodes of help provision were identified which were not as effective as they might have been, suggesting a role for further training in appropriate and effective help-seeking.

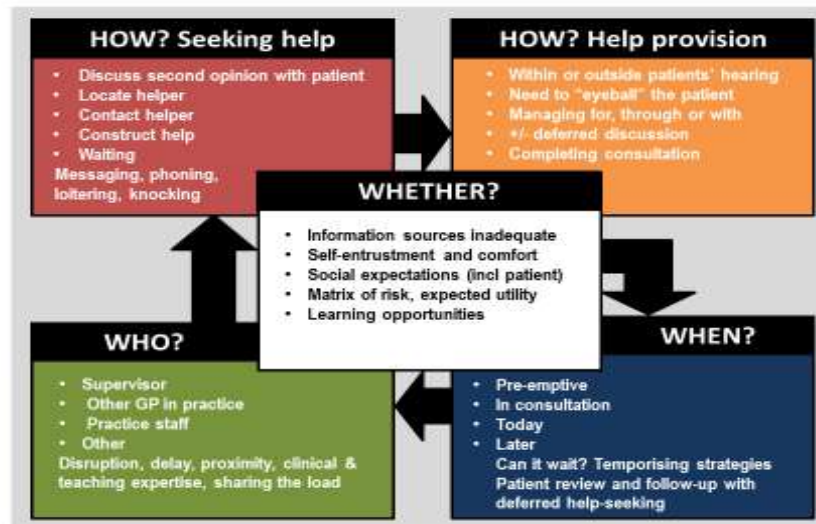
Visitors reflected that registrars seemed to greatly appreciate the opportunity to reflect on their management with the ECT visitor, as an experienced general practitioner with an interest in teaching who had observed the entire consultation, and were very interested in learning about alternative approaches and strategies for patient presentations. Visitors also reflected that such direct observation revealed limitations in registrar skills or knowledge, and learning opportunities, which would not otherwise have been evident to the registrar or their supervisor. Visitors observed that registrars tended to seek in-consultation help from their supervisors for reasons of patient safety or satisfaction, rather than for their own learning. Visitors reflected that this was something of

an irony in that registrars were often already competent in their independent assessment and management of patient safety concerns, and suggested missed opportunities for practice-based teaching and learning in general practice training.

The following representation of key influences on social help-seeking was developed:



ROSA: Decisions and influences



Help-seeking was very frequent during the first few weeks of Term 1. However as registrars became familiar with their local processes and resources, and confident with interim management and patient review, the frequency of in-consultation social help-seeking declined considerably. Registrars continued to study actively and systematically from a range of other information sources.

Discussion

Practice recruitment was challenging, in particular identifying and accessing gatekeepers who were able to give consent to the research. It was challenging for the ECT visitors to encourage registrars to seek help as they normally would have in the visitor's absence, for a number of reasons, and it seems likely that the visit has an impact on usual help-seeking (both in-consultation and deferred). Nonetheless, we believe that our data throws new light on the important area of clinical supervision and support in general practice training.

Findings highlight the value of the ECT visit in general practice training, and the potential for training of both registrars and supervisors to improve the effectiveness of both in-consultation and deferred help-seeking and help provision. Future research which develops a training intervention, based on these findings, and rolls out and evaluates a pilot of this training, is indicated.

This research also offers an additional lens to inform two major current discussions with policy implications. The first is the discussion about work-based learning and assessment, and the second is the discussion about modifying clinical supervision and oversight for Term 1 registrars, including the possible introduction of supernumerary registrars/supervisors. We would be delighted to contribute further to these discussions.