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Evaluation of an Australian-Irish general practice registrar exchange

■ Over the past 3 years Gippsland Education and Training for General Practice (getGP) has piloted the Irish Registrar Exchange Program, offering general practice registrars the opportunity to spend 3 months of their general practice training in rural Ireland, and similarly hosting visits from Irish registrars. The visits occurred toward the end of general practice training. From an Australian perspective, the objectives of the exchange included the opportunity for Australian graduates to experience a different health system and also to widen their training experience. This article reports on the formal evaluation of the process.

Participation in the program

During the pilot, four supervisors in the Donegal program and four supervisors in the Gippsland training program, have hosted four Gippsland registrars (see the article 'A mirror or a window? The Irish Registrar Exchange Program' by Elisabeth Wearne, *AFP* March 2008¹) and five Donegal registrars. The success of the getGP program is evidenced by the willingness of all participants to provide detailed, timely feedback.

Evaluation of the program

Irish registrars who completed work placements in Gippsland, and Australian registrars who completed work placements in Donegal, were surveyed on their exchange experiences, and interviewed one-to-one, either by telephone or online, to verify findings of the survey, and to clarify any issues arising.

At the end of the exchange term, their supervisors were also asked to record their expectations and experiences of the program using a structured report-back sheet; and interviewed one-to-one, either by telephone or online, to clarify any issues arising from their report-back.

Irish registrars were interviewed before they left Australia, and Australian registrars were interviewed within 2 weeks of their return to Australia after the placement. All supervisors were interviewed

within 4 weeks of the end of the placements.

In the written component of the survey respondents were asked why they decided to participate in the program and what their prior expectations had been. They were then asked to describe any highlights and disappointments of the placements. Other comments were accepted.

Issues uncovered in the written component of the survey were clarified and explored in the leaving interviews by means of a set of three questions: What getGP should continue to offer in the program? What getGP could discontinue in the program? What getGP could start doing to enhance the program? Finally, registrar respondents were asked what they had learned about rural general practice that will be useful in their future practice, and supervisor respondents were asked what they had learned from their exchange registrars.

The interviews were short in duration and highly structured so that the format of email interviews was matched with the format of the telephone interviews. getGP's Quality Assurance and Education Development Adviser interviewed all participants and analysed and reported all survey and interview responses from both registrars and supervisors.

Outcomes of the evaluation

In the end of attachment survey, exchange registrars provided tick box feedback in relation to practice environments, teaching and supervision, achievement of learning outcomes and general program support. The list of 26 items they rated was the same as that used to obtain end of semester feedback from registrars in all getGP terms and training posts (*Table 1*).

Highlights for registrars

Three of the Irish registrars chose to highlight particular workshops they had attended as part of their involvement in the Gippsland day release program. They mentioned the women's health workshop, the rural emergency skills training, and a workshop run by Professor John

Murtagh. For another, a highlight was working with Koori patients. Two registrars put the opportunity to carry out new procedures at the top of their lists of highlights. One also highlighted the use of information technology in general practice: 'I feel it is used to a greater capacity than in Ireland'.

Australian registrars were likewise impressed with the quality of training they received in Ireland; one registrar specifically mentioned the emphasis placed on evidence based medicine and ethics in the Donegal program as a highlight, and another noted in particular the emphasis on research issues as a topic.

Disappointments for registrars

The Irish registrars were hard pressed to come up with any disappointments. Typically they turned the question about disappointments on its head, adding more positive comments on their experience. One said: 'Not enough time! Wish I did even more minor ops while I was there!' Another said: 'I can't think of any disappointments. I certainly found the extent to which general practice functions autonomously a challenge. There is much more scope for GP care in Australia than there is in Ireland.'

Three of the 2006 Australian registrars indicated they ought to have had more in the way of an orientation to the Irish health system beforehand. Two also sought program support and documented clarification on such practice and program issues as terms and conditions, registration, and medical indemnity.

What did they learn about rural general practice?

In their interviews all Irish registrars independently reported learning much through: extensive practical experience in procedures, and increased responsibility for total case management (as opposed to referral management). Two registrars discussed the different budget drivers and constraints on prescribing in the different exchange countries and how that had impacted their prescribing practices.

Australian registrars, on the other hand, spoke of coming to realise that rural general practice is indeed 'isolating, both

professionally and socially'. They pointed to the need to seek team help and to embrace teamwork beyond the practice. One of these registrars gave, as an exemplar, the multi-practice cooperatives established in Donegal for after hours care and on call rostering.

Highlights for supervisors

For two Gippsland supervisors, highlights of the exchange were the demonstrated 'very competent' and 'high standard' of abilities of the Irish registrars. One was particularly impressed with the evidence based approach his registrar brought to the practice.

Three of the Donegal supervisors commented on the high level of IT literacy of the Australian registrars. One said: 'I was impressed with the greater use of information technology and the getGP website for identifying teaching and learning needs.'

Disappointments for supervisors

All three 2006 Gippsland supervisors focused on what their exchange registrars have referred to as visa 'glitches'. One said: 'The Department of Immigration and Medicare made integrating [the registrar] into the system exceptionally difficult. getGP are to be commended for their perseverance in working through a wide range of bureaucratic hurdles.'

Two of the Donegal supervisors reported no disappointments for themselves. One said he felt his registrar could have been disappointed with his attachment timing because 'the GP training scheme here was in recess for the summer months and it was only in September that he could participate in the weekly day release gatherings where he met other trainees on the Donegal program'.

What supervisors learned from their registrars

This question drew diverse and extensive responses from the Gippsland supervisors. One supervisor talked primarily about what he had learned that would inform his own clinical practice: 'Well I discovered that she did find evidence that most of the tendon and joint injections that I do have no clinical evidence whatsoever that

Table 1. Summary of registrar ratings of aspects of their exchange program experience

	Irish registrars	Australian registrars
Practice environment 11 items covering practice facilities, range of patients, workload, health and safety, terms and conditions, social acceptance in the practice and wider community	3.71	3.00
Teaching and supervision Eight items covering orientation to the practice, availability of supervisor, help with learning planning, teaching time, teaching quality, frequency and quality of feedback, dispute resolution	3.78	3.26
Achievement of learning Four items covering the value of knowledge and skills gained, level of confidence gained in future career competence	3.90	3.42
Program Three items covering value of pre-placement information provided, value of educational activities outside the practice	3.80	3.00

1 = strongly disagree; 2 = disagree; 3 = agree; 4 = strongly agree

support them... [she] showed me a website called Bandolier which is really good for forming evidence based decision making and also the *BMJ* has a really good [site].'

Another Gippsland supervisor talked about what he had discovered about the Irish training program that might inform the getGP program: 'During their training over in Ireland... they undertake quite a significant piece of research... they're fairly keen on evidence based approaches and critical appraisal skills, probably more so than our registrars or indeed our supervisors would be [so] it's another one of these things that... perhaps we should be doing a little bit more.'

Substantial responses to this question were received from two Donegal supervisors who said the principle learning issues for their practice had been to find out about the Australian health care system. One specifically mentioned the 'system of tighter control on prescribing versus the Irish health care system'.

Improvements suggested during the evaluation

In 2006, registrars focused on the need for more pre-placement information to be provided by the host programs and practices. They asked for an information booklet listing what each exchange host program would pay for, what the practices would pay for, and what the registrar would pay for. They wanted advice on negotiating terms and conditions. They wanted a rundown on how differences in the health service systems would impact the registrar, including how to obtain working visas and provider numbers.

The 2006 Gippsland supervisors asked getGP for more detailed pre-placement registrar and practice profiling, and for an earlier start to be made on their planning and practice matching activities for the 2007 program.

In contrast, in the 2007 feedback, there were no mentions of pre-placement information, planning and preparation, except to say 'pre-placement info was good'. For the 2007 participants then, it would seem these program issues had been addressed.

One improvement suggested by one registrar and one supervisor in 2006, that has not yet been implemented, was the introduction of supervisor exchanges.

An improvement flagged in both years by Donegal supervisors and registrars going to Donegal, but not yet resolved, is the timing of the registrar exchanges to take account of the different start times of the Irish and Australian training years. The summer months in Ireland (July, August and September) offer the best weather for exploring the country, however, the academic teaching program shuts down over the summer months there. Thus Australian visitors are now being encouraged to spend April, May and June in Ireland to get the most out of the academic part of the visit. The Irish registrars visit to Australia currently occurs for the last 2 months of their 4 year training scheme. From an Australian perspective 2 months is short, but academic commitments in Ireland currently preclude an extension.

Evaluation conclusions

- The positive evaluations support the continuation of the scheme.
- Gippsland supervisors are clearly impressed by the evidence based practice of the Irish registrars.
- Irish registrars were excited about the procedural skills they had learned, and the increased responsibility they had experienced for patient management.
- Australian registrars were most impressed by the quality of the education programs they attended in Ireland, in particular the emphasis placed on evidence based medicine and ethics, and the emphasis in the Donegal education program on research issues as a topic.
- An unexpected benefit of the program was that both Australian and Irish supervisors were very positive about the learning they gained from the exchanges.
- The duration of the exchange is currently 2–3 months. The evaluation did not look at ideal length of exchange and this is an area that is still to be assessed.

Conflict of interest: none declared.

Reference

1. Wearne E. A mirror or a window? The Irish Registrar Exchange Program. *Aust Fam Physician* 2008;37:158–9.