Unity through diversity

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Welcome to the new year and your new look *Australian Family Physician* – designed to give *AFP* a more contemporary style for more efficient reading.

This year you will find a quick guide at the beginning of each article to the intellectual domains of general practice that the article addresses. The Royal Australian College of General Practitioners first described the domains in 1997 as a way of capturing the breadth and depth of general practice in its then 'new' training curriculum. Australian Family Physician's editors will be using this framework to assign symbols to each article to draw your attention to the domains addressed within. They are:



Communication skills and the patient-doctor relationship



Applied professional knowledge and skills



Population health and the context of general practice



Professional and ethical role



Legal and organisational matters.

The domains are an excellent way of reflecting on each interaction we have with our patients. Every consultation contains varying proportions of each domain – in the same way that each *AFP* article does. We hope you'll find the domain symbols useful in judging the relative weights of each domain.

Another way of defining our role as professionals is the widely accepted 'CanMEDS 2000' framework developed by The Royal College of Physicians and Surgeons of Canada.¹ This framework has found favour with a number of Australian medical colleges. Although designed for guiding professional development in medical consultants, it res-

onates equally well with general practice, placing as it does the role of 'medical expert' at the centre of the other roles of:

- communicator
- collaborator
- health advocate
- manager
- · scholar, and
- professional.

While they appear to be not as patient centred as the RACGP's domains, these roles were derived by examining exactly what society requires of its doctors. Likewise, this summer issue of *AFP* looks at what society expects of its doctors. It contains articles written by nine different GPs who do nine very different jobs. The common thread is a strong sense of service to their communities and gratitude for the rewards received. Not monetary rewards, of course, because those are undeniably modest for the time and effort expended. These GPs describe a sense of satisfaction that their work is valued by their patients at least.

The diversity of these GPs is striking. Each practises in a different location with patients of differing backgrounds who have differing reasons for presenting. While some pundits seek to divide general practice on the basis of geography or clinical interests, these authors illustrate how general practice can be diverse in content but unified in approach. They have emphasised elements of their professional and personal roles to best suit their diverse patient populations, while retaining the holistic, patient centred approach that is the essence of general practice. Each has special skills, a range of qualifications, and a variety of experiences - but each remains, quintessentially, a GP. Their patients are not seen as a melange of organ systems and

disease processes; they are whole individuals living in a complex context.

Celebrating the diversity of our profession is also the theme of this year's RACGP convention, to be held in Melbourne 30th September to 3rd October. As always, the convention will be a chance for GPs from all over the country to come together and learn from each other. With such a broad theme, there will be plenty of opportunities to take part.

This year, *AFP* has also taken a diverse approach to choosing our themes. In recognition of the fact that patients walk through our door with symptoms rather than defined diseases, we are emphasising common presentations such as cough, back pain, abdominal pain and itch. There will be a theme on the tendency of comorbidities to amplify each other to complicate our diagnosis and management, and another on the challenges provided by patients with developmental disabilities. Plus, we will have an issue on teaching and learning in general practice inspired by a group of GP registrars.

Another development is the move of 'clinical challenge' to an on-line service. The answer card has been replaced by an electronic version at www.racgp.org.au/publications, where you will receive instant feedback and recording of your 4 QA&CPD points per issue.

So, AFP has a different face this year but it remains the same, reliable journal. We hope you can relax over summer and enjoy this issue on the 'Faces of general practice'.

Reference

 Skills for the New Millennium: Report of the Societal Needs Working Group. The Royal College of Physicians and Surgeons of Canada's Canadian Medical Education Directions for Specialists 2000 Project, Ottawa, September 1996.