



GROUP 4 REPORT



CONTENTS


- Introduction of the group
- Module 1 (with roleplay)
- Module 2 (two parts)
- Conclusion

INTRODUCTION

- Justin Allen
- Gordana Živčec Kalan
- Igor Praznik
- Igor Švab
- Olivera Ćirković
- Olivera Masten Cuznar
- Danica Rotar Pavlič
- Zalika Ketiš Klemenc
- Irena Vatovec Progar
- Snežana Janković
- Mira Kiš-Velković



MODULE 1: Patient Empowerment Tutorial



This module is for 90 minutes and is aimed at a specialty trainee. There will be a follow up module in 3-6/12 to monitor educational progress.

The trainee will have been given some preparatory work to do, including a copy of this module plan and asked to prepare (or video record) some suitable cases.

Content

Module	Title	Type	Time – 1.5h
4.1	Introduction	<i>Explanation of the learning plan</i>	5'
4.2	Exploration of prior knowledge	<i>Discuss trainee learning needs, expectations in this area</i>	10'
4.3	Discussion of practical examples	<i>Consultation review Role play Discussion</i>	60
4.4	Conclusion	<i>Future learning needs Practical plans Evaluation</i>	15'

Learning outcomes:

- By the end of this session the learner will:
 - know the importance of providing appropriate information to his/her patients.
 - know what is meant by patient empowerment and its use in working as a GP.
 - be able to conduct a consultation which explores both doctor's and patient's agendas and negotiates a joint plan.
 - be aware that patients should be recognised as partners and to respect their autonomy.
 - be aware of the impact of patient empowerment on him/herself as a doctor.

Methods:

- Preparatory work
- Introduction.
- One-to-one tutorial
- Case presentation or video
- Role play
- Amendment of personal learning plan

Description:

- The trainee should be briefed well in advance and be provided with a definition of patient empowerment, references to research, and that he/she must produce case material.
- The trainer will introduce the session and rehearse the learning outcomes with the trainee, then explore with the trainee his/her current knowledge, skills and attitudes concerning patient empowerment. They will then review the case(s) brought by the trainee through role play[1] or video and explore how these relate to the learning outcomes.
- At the end of the session both learner and teacher will review the session, clarify whether learning outcomes have been met and outline any continuing learning needs, which should be added to the trainee personal learning plan. Finally there will be reflection and evaluation of the teaching session
- [1] Vignette of a sample role play is appended.

Assessment (of trainee)

- Discussion with trainee
- Follow up questionnaire for
 - trainee
 - ? staff
 - ? patients,
- Sitting in on future consultations
- Follow up session

Evaluation (of teaching)

- Success of session in achieving learning outcomes
- Feedback from trainee
- External review by a colleague or group of colleagues with feedback
- Follow up session

Resources

- Protected time
- Teaching materials (references)
- Video recording if possible
- Questionnaires

References

- The European Definition of General Practice / Family Medicine, 2005 Edition – downloadable from <http://www.woncaeurope.org/Definition%:>
.
- The EURACT Education Agenda - downloadable from <http://www.euract.org/html/pdf/agenda.pdf>
- Bled 2007 course materials - on website



ROLEPLAY

The case

Female patient, 30 years old, chemistry professor, single, lives with her parents and sister.

10 years ago she was diagnosed of Colitis ulcerosa.

Regardless medical therapy her condition deteriorated.

A bowel resection was performed in 2006.

Since then she has ileostomy.

She is coming to visit her GP regularly and was examined by the trainee.

The roleplay is the consultation between the trainee and the trainer after the visit.



MODULE 2: Practical Patient Empowerment Project

Chronic Obstructive Pulmonary Disease MODULE

-
- **A problem has been identified in the health care system in Serbia which it is hoped will be improved by a patient empowerment project aimed at individual patients and a community education programme.**
 - **COPD is a major issue in the community which is exacerbated by poor use of inhaler therapy. The problem is two-fold. On the one hand there is a view that being prescribed an inhaler means that a patient is severely ill, and that being prescribed an inhaler confirms this. The second issue is that there is a stigma associated with being seen to use an inhaler.**
 - **The first issue is to be addressed with individual and group patient education, and the second through a community education programme.**



Part 1: Patient education

- For the programme to be successful it is necessary that all members of the PHC team have received appropriate education and training in the management of asthma and COPD

Outcomes:

- At the end of the intervention the patient will:
- Know the nature of asthma and COPD, its management and how it will affect them.
- Understand the importance of inhaler therapy in asthma and COPD.
- Understand the importance of monitoring their illness
- Be able to use their inhalers
- Be aware of the need for regular inhaler therapy and to comply with this and to seek urgent medical advice when appropriate.
- Work in partnership with their Primary Health Care Centre professionals

Methods:

- On a one-to-one basis introduce these ideas on an opportunistic basis.
- Plan and deliver patient education classes in small groups ensuring patients are invited.
- Promote membership of a Patient Support Group in pulmonary disease.
- Develop and distribute information leaflets on asthma/COPD and its treatment.
- Develop a video for display in the waiting room, personal use at home and in group education sessions

Evaluation

1. Review inhaler technique one week after initial consultation in which inhalers were prescribed.

Evaluation of programme

- Audit of patient activity:
 - Number of patients using inhalers
 - Numbers of asthma/COPD consultations
 - Number of patients with acute attacks
 - Number of hospitalizations for asthma/COPD
 - Number of prescriptions for inhalers
 - Chart audit
 - Patient satisfaction surveys

Part 2: Community education

- This will be a short term public education project using local media and a high profile “champion”, for example Vlade Divac.



Outcomes:

- At the end of the programme there will be:
 - better public understanding of COPD/asthma
 - to remove obstacles to inhaler use which result from fear of inhalers and the stigma
 - associated with use in public.
 - increased support from the National Health Insurance Company by the demonstration of improved health and decreased hospitalization

Methods:

- The programme will run for one month:
 - Identify and recruit a suitable project “champion”.
 - Create a project team consisting of representatives of the Centre for Disease Prevention (in the PHC), local media and the programme “champion”.
 - Devise and launch a campaign slogan, eg “Keeping You Healthy”.
 - Produce and publish articles in local newspapers, women’s magazines.
 - Interviews on local TV/radio.
 - Hold a press conference in the PHC to launch the programme

A large teal circle is partially visible on the left side of the slide, overlapping the edge.

Evaluation

1. This will be an impact evaluation best carried out by a media research organization, or university department.

CONCLUSION

