

Formulating the European Research Agenda for General Practice/Family Medicine

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*EGPRN is a network organisation within
WONCA Region Europe - ESGP/FM*

This workshop

- Introduction: aims and objectives
- Outline of the research agenda
- Current state: themes and methods for European GP Research
- Questions
- Workshop – and discussion

A research agenda - Aims

- Target groups: GPs, researchers and policy makers, providing advocacy of GP in Europe
- Position paper and reference manual
- Based on facts and evidence
- Focus on relevant topics
- Provide a research strategy and policy recommendations

A research agenda as reference manual

- Defining the evidence base of the European definition
Are the core competencies are covered by research/ references?
- Pointing out research needs and evidence gaps
- Indicating what is of imminent importance
for developing countries *Manual how to get started*
- Provide a basis for positive action to influence
health and research policy
(incl. applying/lobbying for research funds)

OUTLINE (1)

- Introduction: background, purpose, aims
- Basics:
 - Overview of priorities and barriers
(Lionis et al. Fam Pract 2004)
 - A multiple key informant survey: the NRs report
(Topsever et al. submitted to Fam Pract, 2008)
 - SWOT analyses (EGPRN council meetings)
 - EGPRN abstract analysis

OUTLINE (2)

- **Methods** chapter
- Chapters on the 6 **WONCA** competencies
- **Summary** – what is the agenda for the future ?
- **Manual** to start/implement PC research in a country
- **Discussion** (methodology, content, **WONCA** definition)
- **Key messages**

Core competency	Clinical research	Health services res.	Education, teaching
Primary care management	1 Health problems in PC Interface between PC-SC	2 first contact unlimited access interprofessional collaboration electronic patient records Efficiency issues	3 Interprofessional collaboration Management skills
Patient-centered care	4 Individual / Family Longitudinal continuity /longterm management	5 Patient experiences Adherence / concordance	6 Patient-centredness in education Communication skills
Specific problem solving competence	7 - diagnostic strategies - therapeutic strategies - Shared decision making	8 PC morbidity Co-/ multimorbidity Quality management Gender / socioeconomic class Tools / guidelines DMP programmes	9 Decision making Clinical skills training Lifelong learning
Comprehensive approach	10 Health promotion Care – cure – palliation Case management	11 Prevention / early intervention	12 Integration in education
Community orientation	13 Community oriented approach	14 Organisation of community orientations	15 Community oriented education
Holistic approach	16 Biomedical Psychological , social	17	18 Cultural / existential education in education

Methods

- Individual approach : define important issues, description of the domain /concepts and corresponding keywords
- Searches in Medline, first selection at view of titles
- Second selection: on quality and relevance
- Linking the found literature to the concepts, domain description and methodologies
- Indicate landmark articles
- Summarize evidence, gaps and appropriate methodologies

Example: Patient centred care

- Important, central value – one of the core elements of GP/FM
- The concept is described and several elements distinguished
(Mead and Bower, Bensing...)
- Research domain includes:
 - description of different elements of patient centredness
 - which patients /doctors prefer patient centred care
 - tools or measurement instruments
 - effectiveness of patient centred care

Search on patient centred care

- Search “primary health care” or “family practice” AND “patient centred care”
- Results for the last 10 years: 1836 hits
- After first selection: 79 relevant articles
- What is already known ?

Patient centred care : research gaps

- No theoretical clarity on the complex concept
→ need for a better definition
- Valid and reliable measures have to be developed
→ need for instrumental research
- Need for intervention studies and observational studies, longitudinal research
- Sustainability of education effects needs to be studied

Specific problem solving: Summary

- Vast field comprising morbidity, quality issues, most disease or diagnostic related research
- Only exemplary searches: retrieval of relevant papers difficult (not MeSH linked to GP)
- Intervention studies/RCTs: degree of patient selection or level of care often not clear, questions often very specialised (-> applicable for GP?)
- Gaps:
 - longitudinal studies,
 - diagnostic studies in primary care,
 - Multimorbidity issues
 - Really GP based and –relevant clinical research (RCTs)

Primary care management: Summary

- Large field, still very scattered, lacking a meta-view
- Interface PC-secondary care, referrals
 - PC-SC cooperation on primary care level is „promising“
 - Cooperation with pharmacists reduces unwanted drug effects
- Efficiency: Nurses are effective, but cost as much as GPs
- Practice organisation influences service uptake
- Access organised very differently in different countries, studies refer to local situations
- Electronic patient records: large, comprehensive registers or pragmatic approaches to „everyday“ records

Community orientation: Summary

- Lots of narrative reports, lack of quality research
- Studies on diseases, screening, preventive services
 - Often either too specific or too general
 - Hardly any with relevant, GP related outcomes

Comprehensive/holistic care: Summary

- Very little evidence on these characteristics
 - Lack of a clear definition
 - No valid instruments to measure
 - Lack of studies in specific primary care context, concerning effectiveness, prevention, specific services like home visits
 - Lack of longitudinal studies (continuity of care)
- Disease related studies (mental / cardiovascular health)
 - Limited evidence on effectiveness of change-your-lifestyle interventions

How to start building GP research in a country

- Planning *Why do you want to do it?*
- Requirements *What do you need to make it work?*
- Infrastructure and research education *Essentials and options*
- Identify local research needs
 - First get to know the local situation /epidemiology
 - Understand, identify needs for improvement, intervention
 - Prioritize, choose your subject *Start simple, but don't stay simple*

Questions for this workshop

- How do you perceive the **validity** and **relevance** of the current draft research agenda ?
- Which suggestions do you have for the **next steps** in developing this agenda (format and content)
- How do you prospect the **implications** of this agenda for the local researchers and policy makers in your country ?