
WHY NOT?

Why not tear up the European aims?

P. H. L. TATE, MRCCGP

General Practitioner, Abingdon; Course Organizer, Oxfordshire

D. A. PENDLETON, BA (Hons)

Social Psychologist, Oxford

THE whole fabric of vocational training should be based on clear, agreed educational aims, from which teaching methods and types of assessment should follow. Alas, no such agreement exists.

The Leeuwenhorst European Working Party (1977) produced a list of 21 statements divided into knowledge, skills, and attitudes. These form a job description of general practice and have been adopted by the Joint Committee on Postgraduate Training for General Practice and the Royal College of General Practitioners as the aims for vocational training. This list is distributed routinely to all trainers in the Oxford Region, presumably in the belief that it forms a base on which to plan. There is no evidence that it is a reliable base and, although an authoritative document, it is daunting and contains many overlapping concepts.

Assessment is a contentious and much discussed topic frequently raised in our local trainee/trainer group. Debates tend to be circular, repetitive, and often heated, foundering finally on the rock of unclear aims. Methods of assessment can be of only limited value and subject to large variation if there is such disagreement about objectives. Priorities vary enormously, but each member is convinced that the simple aim of training is to produce a 'good doctor' and that the qualities of this mythical beast are obvious to all.

In an attempt to clarify the problem we decided to circulate the list of European aims to all trainers and trainees in the region, asking them to rank the 21 aims in order of importance. Equal ranking was not allowed. Our hypothesis was that this would demonstrate large areas of non-agreement, which we hoped would force the group to agree on some aims and concentrate on a few specific objectives.

In view of the nature of this project and the obvious irritation it produced, the number of completed replies was quite high, 80 out of 220 circulated (36 per cent): 56 per cent of trainers replied and 25 per cent of trainees. A further 22 (10 per cent) replies were received offering comments but not ranking the aims. Most centred

round the perceived futility of the exercise, such as: "It is impossible to choose, they are all equal;" or "Can't pick from such a good menu."

In the main, the results demonstrated the expected non-agreement, with some notable exceptions. The aim relating to the knowledge of clinical medicine was ranked in the top three by over 95 per cent of responders. This was the most consistent response and was predictable. Over 50 per cent placed in the first six the aims relating to prevention, understanding of interpersonal relationships and health, making relevant decisions on every problem, and forming diagnoses in physical, social, and psychological terms.

There were clear and disturbing trends at the other end of the scale. Over 80 per cent put research and the recognition of making a professional contribution to the community in the bottom six. Ethics, medicosocial legislation, and practice management were placed in this category by over 65 per cent, and over 50 per cent ranked teamwork and, perhaps surprisingly, the use of epidemiology and probability in this way.

The findings may not be unexpected but they are important. The time available for vocational training is finite. Course organizers, trainers, and trainees have to set priorities when planning their teaching and learning, and these are usually based on individual beliefs which do not necessarily correspond with those of other members of the scheme. If, however, some aims are regularly seen as being less important they will be squeezed out under the pressure of time.

The argument that all aims are equally important is fallacious and unhelpful. So why not tear up the European document and start again, trying to define clearly, concisely, and comprehensively our educational aims for the next ten years? This is an urgent task and must be undertaken by our College. Our credibility depends on it.

References

- Leeuwenhorst Working Party (1977). Statement by a Working Party appointed by the Second European Conference on the Teaching of General Practice, 1974. *Journal of the Royal College of General Practitioners*, 27, 117.