

# Working together — learning together

THERE is one principle of postgraduate medical education and of postbasic training in the allied professions which is generally agreed and accepted, namely that multidisciplinary training is 'a good thing' and should generally be encouraged. However, it is unfortunately true to say that opportunities for multidisciplinary training in any of the professions involved with the primary health care team simply do not occur in practice.

The reasons for this are complex and have been relatively little studied. Apart from a few pioneering reports of studies of multidisciplinary training (for example, Hasler and Klinger in 1976<sup>1</sup>) relatively little has been published on the subject. The Royal College of General Practitioners has already played an important role in training for teamwork, partly because it was a College conference *Family health care — the team*<sup>2</sup> which almost 20 years ago set this story alight and partly because the College was one of the four professional bodies that collaborated at the 1979 Nottingham symposium on interdisciplinary learning and subsequently produced *Occasional paper 14, Education for co-operation in health and social work*.<sup>3</sup>

Since then relatively little has appeared apart from an important document from the Wessex Regional Health Authority, *Teamwork in primary health care*,<sup>4</sup> which looked critically at some of the key issues and sought to derive a method of auditing performance in practice.

Now, in *Occasional paper 33*, Dr R.V.H. Jones describes some practical work undertaken by a multidisciplinary group over several years which was designed to foster the principle of training for teamwork. The group originated in the Department of General Practice, University of Exeter, and included representatives of district nursing, health visiting, general practice, the remedial professions and social work; thus it was more broadly based and more community oriented than any other group of its kind. The paper also describes methods of assessment that have been developed and refined over the years, some of which are given in a useful set of appendices.

At the end of the report a number of radical and provocative recommendations are made. For example, it is recommended that nobody should be appointed in future as a teacher in any of the professions in primary health care without having had previous experience of multidisciplinary training. It is further suggested that such training should be built in as part of the core training of all the professions concerned and should actually be made to work in practice.

Sooner or later such issues will have to be faced. It is not reasonable to continue to exalt teamwork and yet do very little about it. It is increasingly absurd to bring together in primary care teams colleagues who have trained entirely in isolation and who, during long and expensive postbasic courses of education, may never have encountered the professions with whom they will share much of their professional lives. Whether or not these recommendations are acceptable now, whether or not they will become so in future, it surely behoves all who care about teamwork in health care to debate them now — otherwise the theme of *Working together — learning together* will simply remain a fantasy for the future.

## References

1. Hasler JC, Klinger M. Common ground in general practitioner and health visitor training — an experimental course. *J R Coll Gen Pract* 1976; **26**: 266-276.
2. Kuenssberg EV. *Family health care — the team*. London: College of General Practitioners, 1967.
3. England H (ed). *Education for co-operation in health and social work. Occasional paper 14*. London: Royal College of General Practitioners, 1981.
4. Wessex Regional Health Authority Regional Education and Training Service. *Teamwork in primary health care*. Godalming: National Health Source Training Aids Centre, 1984.

*Working together — learning together, Occasional paper 33*, is available from the Central Sales Office, Royal College of General Practitioners, 14 Princes Gate, Hyde Park, London SW7 1PU, price £3.00 including postage. Payment should be made with order and cheques made payable to RCGP Enterprises Ltd. Access and Visa are welcome (Tel: 01-581 3232).

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