limited. Language skills in English were good but formal and use of colloquial English in facilitating or in role play was problematic. However, there was a strong enthusiasm to learn and a willingness to try new approaches.

In one group the suggestion of learning sets based on localities was rejected as not appropriate to their context and in the other group an introductory presentation of UK general practice was also rejected as dull. We allowed the group as far as possible to set their ways of working.

In both groups the emergent way forward was interactive teaching based on small groups, teaching skills as far as possible, looking at organisational skills, consultation skills, and focusing their experience and knowledge base. Using the group's energy we could overcome major problems such as how to do role play consultations in front of a lecture theatre of 50 people where the audience had no experience of the ground rules of this type of work. I had no problems getting volunteer role players despite the group tendency to degenerate into 30 people shouting at once at the role player what they 'should' do.

The emergent teaching solution that evolved from the chaos was largely new to the learners and broke many of the facilitators educational 'rules', but resulted in an effective learning event for the participants. By the end of the 4 days the group had largely abandoned their ingrained tradition of learning from books, and had embraced interactive skills learning, quickly picking up key new concepts like safety netting and housekeeping and being able to demonstrate use of them in role play.

As medical educators with a wide experience and repertoire of facilitative strategies, we were able to work at the edge of chaos, with levels of uncertainty that were new to us, drawing on the energy of the groups. We worked intuitively, accepting uncertainty, allowing a solution appropriate to the context and the learners to emerge in an evolutionary process based on multiple small transformational step changes that allowed the learners to self-organise their learning experience. Complex adaptive systems theory helps us to understand this process.

We found the course exhausting, but by using intuition, innovation, open space and

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taking huge risks we were able to bring about change in the learners and their view of how to learn. As an educator I am now much more confident in the far less uncertain teaching situations I face as a UK educationalist and am looking forward to having more times of initiative facilitated learning with my VTS group.

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Provenance

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A flu clinic cynic

It's unusually quiet here tonight, presumably as it's late, dark and pouring with rain. Some surgeries serve coffee or even hold a raffle. Not normally needed here, the draws are of a different nature: the prestige of being first in the queue (2 hours early is not unheard of, we've never run out of jabs but you can't be too sure) and the yearly chance to catch up on village gossip. 'That doctor's leaving, he's the one who set up the new super-surgery' (Really? So why's he still here 6 months later?). 'That nurse has put on a bit of weight' (Well she is now 8 months pregnant!).

The first patient, one of the Reluctants, pulls up his sleeve, 'they' told him to have it so he's having it, but it'll be your fault if anything goes wrong! Next is the Worrier, the young fit-looking lady, who when you check is feeling well today lists more problems than could ever fit on her EMIS summary page. She once fed her uncle's girlfriend's pet hamster when it was on its last legs and so has yearly vaccines as a 'carer'. The Old Timers are last, coming in droves, sleeves ready rolled-up. They've survived two World Wars, this is simply something else to endure (perhaps even enjoy!).

The doctors try to conceal that they don't know their patients names (wondering if they ever did, and whose memory is failing). An older gentleman asks the senior partner, 'Never seen you before young doc, are you new?!' At least tonight you can do something for your 'heartsink' patient even if the consequences (sore arm, flu-like symptoms and more) are just around the corner.

The truth is I'm a converted cynic, really it's great fun, I'm off to join in!

Sarah Thomas,

On maternity leave from her role as a salaried GP at Yeovil Health Centre, Yeovil.

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