

## Out of Hours

# The first RCGP Global Health Conference:

the global impact of family medicine

### INTRODUCTION

The UK Royal College of General Practitioners (RCGP) actively encourages the establishment of primary care throughout the world. It supports international development partners to learn from each other and work together to achieve universal health coverage and access to family medicine for all. Demonstrating its leadership and capacity, the first RCGP Global Health Conference (GHC): 'Family Medicine: global impact' was held at 30 Euston Square on 6–8 March 2015. Over 300 delegates from 20 countries, including GPs/family medicine doctors, nurses, allied health professionals, educationalists, managers, academics, and medical leaders, gathered to consider global primary care development and the complexity of access to affordable, continuous health care for all.

The World Health Organization (WHO), the United Nations, and individual governments and administrations have long advocated the global use of primary care to raise the levels of health in deprived populations by acting on the social, economic, and political causes of ill health. Despite initiatives including the eight Millennium Development Goals,<sup>1</sup> the Crisp report,<sup>2</sup> Global Health Partnerships,<sup>3</sup> *Primary Health Care: Now More Than Ever*,<sup>4</sup> and *The Tallinn Charter*,<sup>5</sup> this ambition remains as important and relevant today as when crafted at Alma-Ata in 1978.<sup>6</sup> Each general practice/family medicine consultation is unique. The RCGP's motto '*Cum scientia caritas*' [science with compassion] provides a laudatory overarching philosophy but, especially in the global context, compassion extends beyond the delivery of pure medical science.<sup>7</sup>

### FROM POLICY TO PRACTICAL IMPLEMENTATION

Day 1 of the conference covered policy, international development partners, and the practicalities of implementing primary care more widely. Many nations face similar family medicine challenges including financial constraints, a lack of appropriately trained clinicians, 'second class' status compared with hospital-based specialties, and variable standards of family medicine training. Delegates felt these similarities could drive the provision of multinational guidelines with



**Dr Maureen Baker (Chair RCGP Council) with Dr Iona Heath (RCGP past-President), Professor Salman Rawaf (Director WHO Collaborating Centre for Public Health Education and Training), the Right Honourable the Earl Howe (Parliamentary Under Secretary of State, Department of Health), and Professor Sir Andy Haines (London School of Hygiene and Tropical Medicine) at the RCGP Global Health Conference on 6 March 2015 at RCGP, 30 Euston Square, London.**

experienced family medicine colleagues acting as 'champions on the ground' to aid implementation.

### FAMILY MEDICINE TRAINING AND MRCGP[INT]

Day 2: the RCGP Junior International Committee demonstrated how smaller interventions contribute to the global implementation of family medicine. International delegates shared expertise within workshops led by Egypt, Pakistan, South Africa, and the UK. These focused on the utility of workplace-based assessment and simulated patients, and the accreditation of family medicine training and MRCGP[INT].

### INTERNATIONAL NETWORKS

Day 3: International Development Day workshops led by Malta, Sri Lanka, and

the UK encouraged mutually supportive networking to address areas of shared interest. Topics included: engendering a culture of lifelong learning; international development advisers, external development assessors, and external examiners; applied knowledge test and multiple choice questions, clinical skills assessment and objective structured clinical examinations; modified essay questions; and standard setting and quality assurance within family medicine assessment.

### TO SUMMARISE

Delivery of compassionate primary care to raise the levels of health in deprived populations remains a global challenge that we have a shared responsibility to address. Improvisation and innovation are required if low-cost, high-impact solutions

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are to be delivered at local, regional, national, and international level. The creation of multinational support networks and the sharing of experiences and best practice are essential if we are to achieve access to affordable, continuous health care for everyone. The first RCGP GHC successfully enabled personal growth, enhanced collective understanding, enabled linkage with partners including the WHO, the Department for International Development, and the National Institute for Health and Care Excellence, and proposed multinational strategic developmental collaborations on which to build as we continue to learn from each other.

**Rich Withnall,**

Defence Professor of General Practice & Primary Care and RCGP Medical Director for International Accreditation and Training, Royal Centre for Defence Medicine, Birmingham, UK.

**Rukhsana Ansari,**

Senior Consultant and Head of Department of Family Medicine, the Indus Hospital, and OSCE Lead and Exam Convenor of MRCGP[INT] South Asia.

**Sandy Mather,**

RCGP Head of International, Royal College of General Practitioners, London, UK.

**ADDRESS FOR CORRESPONDENCE**

**Rich Withnall**

Medical Directorate (Research and Academia), ICT Centre, Birmingham Research Park, Vincent Drive, Birmingham, B15 2SQ, UK.

**E-mail: rich.withnall@rcgp.org.uk**

**Val Wass,**

Emeritus Professor of Medical Education, Keele University, and Clinical Co-Chair of RCGP International Programme Board, London, UK.

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