



Yonder: a diverse selection of primary care relevant research stories from beyond the mainstream biomedical literature

REFERENCES

1. Lunn PD, Timmons S, Belton CA, *et al.* Motivating social distancing during the COVID-19 pandemic: an online experiment. *Soc Sci & Med* 2020; **265**: 113478.
2. Løkkegaard T, Tødsen T, Nayahangan LJ, *et al.* Point-of-care ultrasound for general practitioners: a systematic needs assessment. *Scand J Prim Health Care* 2020; **38**(1): 3–11.
3. Dowling S, Last J, Finnegan H, *et al.* What are the current 'top five' perceived educational needs of Irish general practitioners? *Ir J Med Sci* 2020; **189**(1): 381–388.
4. Cleland J, Porteous T, Ejebu OZ, Skåtun D. 'Should I stay or should I go now?': A qualitative study of why UK doctors retire. *Med Educ* 2020; **54**(9): 821–831.

Social distancing, point-of-care ultrasound, Irish GPs' educational needs, and retirement

Social distancing. A whole lot of research has taken place since the onset of the COVID-19 pandemic, and much of it has been depressingly poor in quality and low in relevance. An Irish online experiment, though, used an interesting approach of randomising people to be sent different public health posters about social distancing.¹ Compared to the control group, who viewed a poster encouraging distancing, those who viewed posters with narrative messages describing how an individual had infected a specific vulnerable person were more cautious about undertaking risky behaviours and less accepting of them. The authors conclude that the study generates supportive evidence for communications that emphasise the impact of noncompliance on identifiable people.

Point-of-care ultrasound. Although not yet widely used in the UK, the availability of compact, low-cost, high-quality ultrasound scanners in recent years has contributed to an increased use of point-of-care ultrasound (POCUS) by primary care doctors around the world. A recent Scandinavian study sought to achieve consensus among a group of ultrasound proficient GPs from Denmark, Norway, Sweden, and Finland to develop a basic ultrasound curriculum.² They obtained agreement on 30 scanning modalities and procedures primarily within the musculoskeletal (8), abdominal (5), obstetric (5), and soft tissue (3) diagnostic areas. The authors suggest the next stage is to develop evidence-based educational activities for GPs and trainees in these key modalities.

Irish GPs' educational needs. What are the current 'top five' perceived educational needs of Irish GPs? A team from Dublin recently completed a 'national needs assessment' via a self-administered anonymous three-page questionnaire in order to answer this question.³ Based on 1669 responses, the topics most commonly identified as a priority for further training were prescribing (updates/therapeutics),

elderly medicine, management of common chronic conditions, dermatology, and patient safety/medical error. The researchers propose that these selected topics may reflect the changing nature of general practice, which increasingly requires delivery of care to an ageing population with more multimorbidity.

Retirement. Much of the debate and discussion about the medical workforce has focused on production, with a clear policy focus on recruiting and training the next generation of professionals. However, doctors nearing the end of their careers have invaluable tacit knowledge that can be transferred to the next generation and retaining experienced staff should, therefore, be given just as much priority by workforce policymakers. Decisions about retirement were examined in a recent Scottish study that involved interviews with doctors aged 50 years or over.⁴

They found that 'stay' and 'go' factors were 'enmeshed' in the cultural, social, and economic structures of healthcare organisations and countries. The authors conclude that systems-level interventions that address ultimate causes, such as sufficient staffing, supportive systems, non-punitive taxation regimes, and good working conditions, are likely to be most effective in encouraging doctors to continue to contribute their knowledge and skills to the benefit of patients and learners.

Podcast of the month. For a truly eclectic and engaging review of world history, Dan Snow's *History Hit* is well worth a listen: <https://www.historyhit.com/podcasts>

Ahmed Rashid,

GP and Clinical Associate Professor, UCL Medical School, UCL, London.

Email: ahmed.rashid@ucl.ac.uk
@Dr_A_Rashid

DOI: <https://doi.org/10.3399/bjgp21X715517>