# The Southwest Gastroenterology training programme

### Dr Charlie Andrews





# About this session:

- The aims of the training programme
- The structure
- The assessment process

### Develop

Develop innovative ways of 'bridging the gap' and delivering care across primary and secondary care

Provide and 12-month clinical and educational training programme to develop the required knowledge and skills to enable the GP to work within an extended gastroenterology role

### Link

Link the GP with a gastroenterologist based at their local hospital to support, mentor and supervise the GP in outpatient clinic

Train

### Recruit

Recruit GPs across the SW region to undergo a training programme to upskill the GP to become a GPwER in gastroenterology

# Aims of the programme

# The vision



**Create a standardised framework** for the development of GPwER in gastroenterology. We are working with the BSG to develop a formalised pathway/framework to support the development of GPwER in gastroenterology based on the SW training programme

**Develop a sustainable educational programme** to support the clinical aspects of the programme, to allow further GPs to develop an extended role in gastroenterology in the future

**Build a network of GPwER in gastroenterology** across the region to share best practice, and provide leadership and support within both primary and secondary care

**Create innovative community-based roles for the GPwER**, looking to improve patient pathways for appropriate patient groups. For example, community diagnostic hubs, community advice and guidance, and GPwER-led community clinics

# The training programme



## 2 aspects to the training



# CLINICAL EDUCATIONAL

# The clinical training

- •1 session per week
- Clinical supervision
- •6x CBD
- Record of all patients seen/consulted



Patient ID	Age	Gender	Presentation	Plan	Follow-up?
112345	71	Male	Iron deficient anaemia	CT colonoscopy OGD	2 months

# The education programme aims



- Provide an overview of a range of GI topics
- A 'problem-based approach' to diagnosing/managing common GI conditions
- Provide the knowledge to:
  - Better understand the differential diagnosis of common presentations in gastroenterology
  - Feel more confident in formulating management plans for patients

# The educational programme

### 12-month programme

- 3 modules
  - Upper GI (April June 2023)
  - Lower GI (August November 2023)
  - Hepatobiliary (January February 2024)

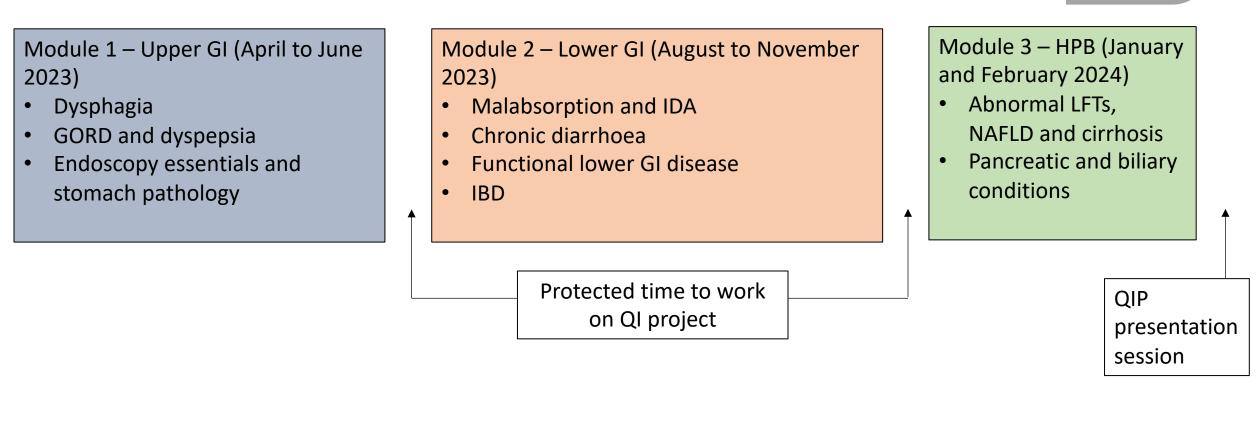
### • A mixture of:

- Interactive case studies
- Short written assignments
- 'Live' teaching sessions
- Self-directed learning

### • Protected time to complete a QI project over the 12-month programme







### The Upper GI block – April to June 2023

### April 2023 - Dysphagia

### May 2023 – GORD/Dyspepsia

June 2023 – Endoscopy and stomach pathology

### Each month:

- Pre-and post module MCQ
- 2 interactive case studies (the 'virtual clinic')
- 1 written assignment
- 1 Live teaching session
- A module feedback questionnaire





### Live teaching 1.30-4.30pm

### 19<sup>th</sup> April

Approach to the patient with dysphagia C Andrews and R Krysztopik (RUH)

### 10<sup>th</sup> May

The patient with GORD/dyspepsia *S Nelson and M Burkitt (MFT)* 

### 14<sup>th</sup> June

Endoscopy essentials and stomach pathology Dr David Graham (UCLH)

### Course components – case studies



- Short cases
- Typical presentations in secondary care clinics
- Released on first Wednesday of every month
- MCQs to support your learning
- Able to repeat as many times as you like

## Course components – written assignment



- Short written assignments
- Opportunity to research a topic in greater detail
- Opportunity to practice evidence-based medical writing
- Maximum of 500 words
- To be completed by the end of the month it is released
- Grading 1-4 (1= Below average, 4= excellent)
- Use Harvard-style referencing, e.g.

Pithadia, A.B. and Jain, S., 2011. Treatment of inflammatory bowel disease (IBD). *Pharmacological Reports*, *63*(3), pp.629-642.

# QI project

- Service development e.g. Potential of a 'FIT negative' GPwER led clinic.
- **Referral optimisation** review of 'appropriate' primary care tests completed before referral.
- **Primary care education** development of educational resources for primary care clinicians
- **Patient satisfaction** with being consulted by GPwER
- Building links between primary and secondary care -?





penAthens

NICE National Institute for Health and Care Excellence

Improving health and social care through evidence-based guidance



BRITISH SOCIETY OF GASTROENTEROLOGY

# Completing the programme



Pre- and post-module MCQs



Completion of all educational activities



QIP completion



Clinical supervisors end of year report

# Welcome, and I hope you enjoy the course!

