

Is it safe to leave my patient at home?

Inter-professional, community-based learning

Heidi Penrose,¹ Mark Ainsworth-Smith,² Carmel Wills,³ Samantha Scallan⁴

^[1] Mid-Wessex GP Education; ^[2] South Central Ambulance Service; ^[3] GP Facilitator; ^[4] Southampton GP Education Unit

Background

Joint-training of clinicians working in intersecting care areas can be a powerful way to help develop cross-professional insights and knowledge.

This poster describes a novel educational evening, which saw GP trainees and South Central Ambulance Service (SCAS) staff coming together to learn and reflect on practice-related topics. The aim of the educational evening was to enable participants to engage in shared learning activities using facilitated scenarios, based upon common cases.

What we did

We secured funding for a pilot from Health Education Wessex (HEW). Two SCAS practitioners and two GPs wrote five clinical scenarios of commonly seen cases by both practitioners in the community setting.

Our aims for the session were to:

- increase awareness of community services /pathways;
- build professional relationships;
- promote understanding about differences in clinical practice; and
- reflect on risk management when leaving the patient at home.

Forty-seven (25 SCAS staff / 22 GPs trainees) attended the evening, and worked in mixed SCAS /GP groups, which were facilitated by educators from both professions.

The format of the event:

- a meal for participants on arrival;
- a plenary introduction and overview;
- participants were then allocated into five mixed groups;
- there were five facilitators - 3 GP and 2 SCAS; and
- facilitators stayed with the same case, and the groups rotated round rooms.



Evaluation

All participants completed pre-session information sheets about their expectations and post-session evaluations of their experience.

Participants valued the evening and reported that it broadened knowledge and insight about the clinical work of the other group. This included the nature of work and, more interestingly, it highlighted differences in care management practice.

Participants reported that the case-based scenarios were relevant, and a good way to focus discussion and learning. It highlighted in particular different approaches to risk management and uncertainty.

Positive feedback	Less positive feedback
A welcome opportunity to work together	A bit of a tense start
Recognition that "We are all on the same team"	Case sessions were too short
Understanding differences in care management practices	The need for a refreshment break in the middle
Case-based learning as valuable	Too many cases
Learning enhanced by the event being multi-disciplinary	

Suggestions for development

- Involve other health care professionals
- Longer time to discuss cases
- Split SCAS and GPs for one case to present to each other
- Arrange follow up collaborative working in practice and on the road

Impact

The session has helped shape planning future GP/SCAS collaborative learning events, and there is interest from the South West Ambulance Service for something similar. A further event has been planned for qualified GPs to include time with 999 call takers and a session on role of the ambulance service.

BUT MOST IMPORTANTLY we identified some learning needs for both ambulance and GP staff which would improve the patient care pathway.

Conclusion

The event helped participants to better understand each other's roles and to learn together in an interactive and engaging way. The educational evening demonstrated that shared learning can be powerful and generate insights for trainees and SCAS clinicians. Participants also made suggestions as to how the event might be developed for the future.

Case example:



Poster:

