

Name of Visitor: Gintz Elodie
Email of Visitor: elogintz@gmail.com
Country of Visitor: France

Name of Host: Angus Gallacher
Email of Host: angus.gallacher1@nhs.net
Country of Host: UK
Name of Host's National Exchange Coordinator: Madeleine Ginns
Email of Host's National Exchange Coordinator: madeleine.jic@gmail.com

Dates the Exchange took place:
From 27 /09/10 to 07/10/10

Report of my Hippokrates Exchange Experience

I've always wanted to know how primary care, especially in the the UK, is organized, so I thought these two weeks would be a good opportunity to discover another health care system.

I was quite impressed by the surgery itself, it's a semi-rural practice with 7 Gps, practice nurses, district nurses, midwives, it even has his own training room, all supervised by a practice manager. In France, gps are mainly single-handed, and usually don't have the chance the work in this kind of environment.

The consultations are quite similar to french ones, expect maybe for the length (a bit more in France, depending on gps), and the fact that practice nurses take care of minor illnesses. Every morning, patients phoning the surgery for minor illnesses such as cold, uti ... get an appointment with one of the practice nurse. If the nurse struggles with a patient, she can always ask the gp on call for advice. Some of the nurses (prescribing nurses) can even prescribe medication. Gps can then spend more time with complicated cases. As they are a few doctors, while some of them are sitting in, one of them is «on call», dealing with the urgent home visits.

Practice nurses also deal with chronic illnesses, patients have a special consultation to review their chronic illness such as asthma, CKD, the main aims are to prevent exacerbation, slow down long-term evolution. The patient get reviewed as often as necessary.

Two gps practise minor operations such as toe nail removail, skin tag electrocoagulation..., most gps don't practise those in France. Since they are single handed it costs quite a lot to buy all the equipment needed and takes quite some time, so they usually refer the patient to a surgeon. The gp get extra paid for these minor operations.

I had the chance to be part of pregnancy follow-up by midwives. In France, it's usually either gps or obs that take care of the pregnancy follow up.

Gps also follow up their patient when they are hospitalised at Seafield hospital (local hospital), they visit them 3-4 times a week, and each week there is a mutidisciplinary meeting with one gp of the surgery, an occupational therapy, a physiotherapist, nurses.

I also attended a gp trainers meeting. The gp training lasts 3 years (after 5 years of medical school and the 2 foundation years): 6 months as an ST1 in a gp practice and then a year as a ST3. The

trainees seem to be more supervised than in France, each one has his own trainer and an e-port folio. They spend 10 sessions of 4 hours a week (7 of clinical work, 3 of tutorial) at the practice.

Overall, I really enjoyed my stay at Ardach and felt very well welcomed by everyone. This experience had a huge impact on my education, and I strongly advise every trainee to be part of this experience!