

THIRD ANNUAL REPORT  
OF THE DEPARTMENT  
OF GENERAL PRACTICE  
1999 / 2000

NATIONAL UNIVERSITY  
OF IRELAND, GALWAY

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## **OVERVIEW**

This Annual Report records the activities of the department in the third academic year, from September 1999 to August 2000, since its establishment in March, 1997.

I am very grateful to the Midland, Mid-Western, North-Western and Western Health Boards for their continuing support. The huge workload and enthusiasm of all departmental staff throughout the year, successfully co-ordinated by Ms. Una St. John departmental secretary, was most noteworthy. The network of General Practitioners throughout the western seaboard region again provided significant and high quality education for our undergraduate programme. I also wish to acknowledge the support of my colleagues in the Faculty of Medicine & Health Sciences and the Administrative Officers of the University.

The thrust of this years' undergraduate educational programme, led by Dr. Maureen Kelly, was of consolidation. A third successful GP Tutor Conference was held in the Ardilaun Hotel in Galway. The interest in, and support of, undergraduate general practice education by the General Practitioner tutors was again most striking. A significant educational development was the appointment of Dr. Eleanor McCarrick as the Co-ordinator of the Diploma in Health Sciences (Primary Care). This course has received substantial support from the North-Western Health Board and further information is enclosed in the report. The first cohort of participants began the one year course in September 2000. The appointment, supported by the Irish College of General Practitioners, of Dr. Cormac O'Dubhghaill as Senior Registrar in General Practice with clinical commitment to the Medical Centre in Spiddal and academic commitments to the department and Western Health Board GP Training Scheme, is most welcome.

In research further development has occurred in the two areas of specific departmental interest, namely the provision of healthcare in rural areas and the primary care/accident and emergency interface. Ms. Molly Byrne has taken up post as the Health Research Board Health Services Research Fellow for the next three years. The central focus of her work will be leading a study of the provision of secondary cardiac preventive measures in the community. She has also established a series of lunch-time seminars, with video-conferencing to the North Western Health Board in Ballyshannon, intended to encourage discussion of health services research in the region. With the department of Health Promotion as lead, the department was also jointly awarded a Health Research Board Five Year Unit, worth £300, 000, in the area of 'Health Status and Health Gain'. This Unit will involve, *inter alia*, the establishment of a cohort study of newborn babies and their families and subsequent follow-up through general practice.

Our webpage has also come on line at [www.nuigalway.ie/dgp](http://www.nuigalway.ie/dgp); check it out! The Annual Scientific Meeting of the Association of University Departments of General Practice in Ireland (AUDGPI) will be hosted by this department in Galway on Friday, March 2<sup>nd</sup> 2001. Further details are available on the website and will soon be advertised.

Last year I mentioned the urgency of appropriately supporting the development of academic general practice in Ireland. I am pleased to say that a major review of all the academic departments of general practice on the island of Ireland, funded by the Department of Health and Children, will take place in the forthcoming year. More locally, it is hoped that significant discussion between the University and the Founding Partners of this department regarding senior permanent departmental staffing, will be finalised in the forthcoming year.

Thank you for your comments on previous reports; these have been both heartening and helpful. I would encourage you to again to forward such comments on this third annual report.

*Andrew W Murphy*

*30<sup>th</sup> September, 2000*

## **SECTION ONE : PERSONNEL**

### **CURRENT DEPARTMENTAL STAFF (as of 01.09.2000)**

	Year of appointment	WTE <sup>1</sup>
<b>Prof ANDREW W MURPHY*</b> Head of Department	1997	1.0
<b>Ms MOLLY BYRNE^</b> <del>1.0</del> Researcher	<del>2000+1999</del>	
<b>Ms NUALA CUDDY ^</b> Researcher	1998	0.1
<b>Dr MAUREEN E KELLY*</b> Tutor in General Practice	1997	0.5
<b>Dr ELEANOR McCARRICK*<sup>1</sup></b> Co-Ordinator of Diploma in Primary Care	2000	0.5
<b>Ms MAIRE MHIC IOMHAIR*</b> Chief Technician	2000	0.1
<b>Dr CORMAC O'DUBHGHAILL<sup>+</sup></b> Senior Registrar in General Practice	2000	0.2
<b>Ms JOAN O'NEILL^</b> Researcher	1998	1.0
<b><u>Ms ETHNA SHRYANE<sup>2</sup></u></b> <u>Researcher</u>	<u>2000</u>	<u>0.5</u>
<b>Ms UNA St. JOHN*</b> Secretary	1999	0.8

<sup>1</sup> WTE = Whole Time Equivalent

\* Funded by the University and Midlands, Mid Western, North Western<sup>1</sup> and Western Health Boards<sup>2</sup>

^ Research Grant Funded

<sup>+</sup>Funded by the Irish College of General Practitioners

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## GP TUTORS

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### *Galway City*

Dr DES BLUETT	Castlelawn Medical Centre, Headford Rd
Dr GERARD P BRENNAN	44 Lower Newcastle
Dr MICHAEL COUGHLAN	5 Father Griffin Road
Dr SEAMUS CRYAN	6 Snipe Lawn Newcastle
Dr OSCAR DE SOUZA	105 Tirellan Heights
Dr GRACE DOYLE	2 Renmore Park
Dr EAMONN FALLER	1, The Crescent
Dr WILLIAM HERTERICH	14 Prospect Hill/10 Shangort Rd.
Dr JAMES F KENT	The Medical Centre Whitehall
Dr DECLAN LARKIN	Ballymoneen Rd., Knocknacarra
Dr DANIEL MURPHY	Glenard Crescent, Salthill
Dr BRIAN O CALLAGHAN	60 Upper Newcastle
Dr PADHRAIC O'CHONGHAILE	34 Lower Salthill
Dr COLM O'FLAHERTY	Sea Road
Dr BRIAN O FLYNN	Suncroft Lower Salthill
Dr JOHN O'SULLIVAN	The Medical Centre Whitehall
Dr KIERAN WHYTE	42 Father Griffin Road

### *Galway County*

Dr MARION BRODERICK	Kilronan, Aran Islands
Dr HENRY F BUGLER	Marina Point, Ballinasloe
Dr JOHN CASEY	Clifden
Dr MICHAEL CASEY	Carna
Dr ALAN & VAL COSTELLO	Health Centre Headford
Dr SEAMUS CUNNINGHAM	Dublin Road Tuam
Dr JOSEPH CURRAN	Clonbur
Dr BRENDAN DAY	Health Centre Turloughmore
Dr JARLATH DEIGNAN	Bishop Street Tuam
Dr DENIS EGAN	Medical Centre, Spiddal
Dr HENRY FINNEGAN	Marina Point, Ballinasloe
Dr MATTHIAS GANNON	Milltown Road Tuam
Dr ANN GILLAN	Keeraunmore Carraroe
Dr ANN GIBBONS	Trusky West, Barna
Dr CONOR HANRAHAN	Roundstone
Dr EDWARD HARTY	Lettermore
Dr RICHARD JOYCE	The Grange Gort
Dr DONAL KELLY	Abbeyknockmoy
Dr COLLETTE MCDONAGH-WHITE	Main Street Oranmore
Dr MICHAEL MCGLOIN	Caheroyn Crescent, Athenry
Dr HUBERT MURRAY	Williamstown
Dr EUGENE O BEIRN	Dunlo Street Ballinasloe
Dr SEAMUS O'BEIRNE	Spiddal

Dr IAN O CONNOR  
Dr RAYMOND PIGGOTT  
Dr. EAMONN TWOMEY  
Dr MARY WALDRON

Caheroyn Crescent Athenry  
The Surgery Gort  
Health Centre, Turloughmore  
Dublin Road Tuam

*Clare*

Dr ANTHONY COX  
Dr MARY DAVIN POWER  
Dr MARTIN FITZGERALD  
DR. MICHAEL FLYNN  
Dr PETER FLYNN  
Dr COLM HACKETT  
Dr MANUS MCGUIRE  
Dr BILLY O'CONNELL  
Dr JOHN O'DEA  
Dr JOHN O'DONNELL  
Dr GERRY WHEELER

3 Bank Place Ennis  
Wood Quay Ennis  
Tulla House Tulla  
8, Tullyvarraga Hill, Shannon  
9 Killian Park Shannon  
Newmarket-on-Fergus  
Drewsboro Road Scarriff  
Miltown Malbay  
Clareville Ballyvaughan  
19 Steele's Terrace Lifford Ennis  
Main Street Ennistymon

*Donegal*

Dr CIARAN KELLY  
Dr PHILIP MURPHY

Health Centre, Lifford  
Bayview Ave., Bundoran

*Laois*

Dr ADRIAN HONAN

Medi-centre, Portarlinton

*Leitrim*

Dr SEAN BOURKE  
Dr. ROSALEEN HARKIN

Railway Road Ballinamore  
Drumkeering

*Mayo*

Dr PAT DURCAN

Dillon Terrace, Ballina

*Roscommon*

Dr MICHAEL MORKEN

Health Centre, Elphin

*Westmeath*

Dr BRENDAN MAHON  
Dr MARK MCCORMICK  
Dr PATRICK OMEARA

Health Centre, Delvin  
Garden Vale, Athlone  
Garden Vale, Athlone

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## **Sessional Teachers**

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Dr. DAVID BUCKLEY	Tralee	Dermatology
Mr. TIM COLLINS	Medical Librarian	Evidence Based
Medicine		
Dr CLARE CONNOLLY	Dept Health Promotion	Communication Skills / Clinical Skills
Dr DENIS EGAN	Spiddal	Consultation Analysis Practice management
Mr. NICHOLAS FENLON	Aids Help West	Attitudes
Mr. BEN KANAGARATNAM	Experimental Medicine learning	Computer assisted
Ms SIOBHAN KEANE	Resus Officer UCHG	Basic Life Support
Dr ELEANOR MCCARRICK	NUI, Galway	Hypertension
Nurse DEIRDRE ODOHERTY	Asthma Nurse, Allen & Hanbury	Asthma management
Dr JOHN O SULLIVAN	Galway	Communication Skills
Dr. DYMPNA WALDRON	Galway Hospice	Palliative Care
Dr EAMONN TWOMNEY	Turloughmore	Clinical Skills
Nurse LIZ WATSON	Asthma Nurse Merlin Pk.	Asthma management

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## **Simulated Patients**

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Siobhan Singleton, Jim Aherne, Carmel Mortimer, Anna Glynn, Caoimhe Ni Chomhrai, Naoimh Wilkins,

Brid Mannifold (Actor Trainer and Video Production)  
Jimmy Mc Grath (Audio-Visual Technician)

## ***SECTION TWO: CLINICAL ACTIVITIES***

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### **TURLOUGHMORE HEALTH CENTRE**

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The University Linked Practice is Turloughmore Health Centre. This Centre serves a large, mainly rural, population twelve miles from Galway city. Drs Brendan Day, Mary Conroy, Eamon Twomey and Onora Lynch are joined by Andrew Murphy from the Department. This clinical relationship between an academic department of general practice and a rural practice is unique in the British Isles.

Dr. Brendan Day was a member of the first ever group to graduate from the Galway GP Vocational Training Scheme (VTS). The practice has been a training practice in the Galway VTS since 1980. Other practice staff include Orla Moran (Practice Manager), Maureen Graham and Kitty Culkin (Receptionists). The support and flexibility shown by the practice staff to the development of the Department is most appreciated.

A new larger practice premises is planned and it is hoped that building will begin in the forthcoming year. Educational facilities will be incorporated in the new premises.

## ***SECTION THREE: EDUCATIONAL ACTIVITIES***

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### **UNDERGRADUATE EDUCATION**

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Again this year it is essential to start the undergraduate education report by firstly acknowledging, and thanking the GP tutor network, for their tremendous and enthusiastic support of our teaching package. The two-week attachment with the GP tutor forms the backbone of the module, providing one-to-one attention and tuition that is second to none.

The third academic year was one of consolidation of the undergraduate teaching program. The focus was on improving both the delivery and the content of the teaching sessions. To this end, preparation for the academic year 99/2000 commenced early in the summer of 1999 with meetings of the teachers involved in the small group sessions. There were no changes to the overall time-tabling of the general practice module. The class of approximately 80 students is split into four groups of twenty, each attending the Department for a three-week period. Placement with a general practitioner occurs in the first two weeks, Tuesday to Friday inclusive. The remainder of the attachment is spent in small group activity in the Clinical Science Institute. There was a strong feeling among the teachers that all would benefit from some specific training in small group teaching skills. Professor Hubert McDermott (Dept of English, NUI, Galway) ran two excellent half-day workshops, covering both the theory and practicalities of facilitating small groups at the beginning of the academic year.

Based on feedback from both students and teachers some changes were made to the content of the module. Among the more notable were:

- Dr. Eleanor Mc Carrick devised a new hands-on hypertension management workshop. There was a dual emphasis on learning the clinical skill and devising management plans for patients with hypertension in primary care. Eleanor brought her computer expertise to the session and used computer aided learning packages to provide simulated clinical dilemmas.
- Dr. Denis Egan revisited and upgraded the case study presentation session. Rather than make oral presentations students were encouraged to explore and discuss models of the consultation by analysing cases that they had seen in General Practice. It is planned to build on this foundation in the forthcoming academic year. The use of a patient logbook while on the GP attachment is to be formalised.
- In the area of communication skills a workshop for the tutors was held in early October. The aim of this was to help standardise the method of giving feedback to the students on their performances. Drs Clare Connolly, John O' Sullivan and Maureen Kelly met and reviewed archived videotaped consultations between simulated patients and students, using a modified Leicester Assessment Pack. As a follow-up, these tutors were videotaped while giving feedback to students during

the year. It is planned to utilise this footage to further standardise feedback next year.

The theme of ensuring high quality teaching continued into the annual GP Tutor Conference, held in March 2000. Two GP tutors from our own network, Dr. John O' Sullivan and Dr. Gerry Wheeler facilitated workshops on "How to teach and be busy at the same time" and "The difficult learning situation". Lively discussion ensued with the GP tutors swapping tips and sharing experiences. We had the pleasure of the company of Dr. John Spencer (Senior Lecturer in Primary Health Care and Medical Education, University of Newcastle-upon-Tyne) again this year. With the help of five willing medical students, under the tutelage of John, we all got an opportunity to practice our teaching skills. The immediate student feedback and comments from our peers made for a very informative and interesting seminar.

### **Assessment Procedure**

Students are assessed by a number of methods that are closely related to the course objectives.

#### **Continuous Assessment**

- A practice component, which is either a Case Study report or Evidence Based Medicine clinical question represents 25% of the total marks.
- Twice yearly an Objective Structured Clinical Examination (OSCE) is held. This is conducted jointly with the Department of Paediatrics. 40% of marks are allocated to this.

#### **End of year**

- A Multiple Choice Question (MCQ) paper accounts for 35% of marks.
- Orals occur for borderline Pass/Fail and Honours/Pass students.

The rationale behind using this approach is that the various methods test different aspects of student learning. For example the MCQ is largely a test of knowledge and is used to examine recall of factual knowledge such as the structure of primary care in Ireland. The OSCE, on the other hand, is a practical exam testing higher level functions such as problem solving, communication/clinical skills and management.

The overall student marks for the 1999/2000 academic year were:

<b>Grade</b>	<b>Percentage awarded (n=71)</b>
First class honour	11%
Second class honour	37%
Pass	49%
Fail	3%

A repeat exam to be held in autumn will consist of an MCQ, OSCE and oral.

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## COURSE EVALUATION

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Educational evaluation is the systematic appraisal of the quality of teaching and learning. One author states that information gleaned from course evaluation can be used to “*justify expenditure, check whether course objectives are reasonable and attainable and provide a basis for decisions on curriculum improvement*” (Sharp 1990). The consensus from the literature is that student feedback is generally a valid and reliable evaluation tool, particularly if used in conjunction with other methods.

### Student Feedback

Students are given a number of opportunities to provide feedback on all aspects of the general practice teaching program. Specifically they are asked to fill in questionnaires on the general practice attachment and the teaching received in the department. Some of the information from these questionnaires has been summarised below.

- ◆ Relating specifically to the two weeks spent in general practice, students were asked these questions:

N= 66

Question	Very poor	Poor	Average	Good	Excellent	No answer
How would you rate your opportunities to improve your clinical skills?	2%	8%	18%	47%	23%	2%
How would you rate your opportunities to improve your communication skills?	0	8%	20%	47%	23%	2%
How would you rate your opportunities to improve your clinical knowledge?	0	3%	23%	51%	23%	0

- ◆ Last year students indicated that among the things they liked best about the GP attachment were being introduced to the other members of the practice staff and spending time with the other members of the primary care team. This year we asked them to indicate what other members of the primary care team they had an opportunity to spend time with. The table below shows the responses.

Primary Care Team Member	% of students (N = 66)
Public Health Nurse	21%
Practice Nurse	45%
Social worker	3%
Receptionist	11%
Pharmacist	9%
None	21%

- ◆ Students spend seven full days attending small group sessions in the Department. They were asked to give each session a mark out of 10, with 10 being excellent. The highest scoring sessions were:

<b>Session</b>	<b>Mean Score</b>
Basic Life Support	8.9
Venepuncture	8.8
Communication skills	8.6
Visit to the Hospice	8.4
Asthma Management	8.1
Consultation Analysis	8.1

- ◆ The free comment section was overwhelmingly positive. On the whole students found the course, and in particular the GP attachment, enjoyable, informative and with a high standard of teaching. It was refreshing to have one student complain about missing out on the attachment due to having to take Easter holidays!

Reference:

Sharp, A. (1990) Staff / student participation in course evaluation: a procedure for improving course design. *ELT Journal*, 44/2;132-137.

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## INTERNATIONAL ELECTIVE PROGRAMMES

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The international student exchange programmes are proving very popular with our students. We have now established firm links with the **University of Western Australia** in Perth and the **University of Washington**, Georgetown, USA.

### **University of Western Australia**

This year we played host to two students from Australia: Leanne Hartnett, who spent her elective in General Practice with Dr. Donal Kelly in Abbeyknockmoy, and Aggie Bakowski who attended Dr. Eamonn Twomey in Turloughmore.

#### *Visit to Ireland*

*'When the time came at the end of fourth year to decide where I wanted to do my elective, Ireland was very high on my list of places to go. I also wished to spend time in a Paediatrics department. The paediatric teaching rounds are excellent – I learnt a great deal, in a very friendly and non-intimidating atmosphere. After the new year I spent time working at the GP practice in Turloughmore. I met many of the local people and got a real feel for GP practice in Galway. Although at times the accent made me feel like the patients were speaking another language altogether, I found the GP attachment the most rewarding part of my elective.*

*NUI, Galway student Helen Cavanagh was the most wonderful host. I don't think one evening went by without choices of what we could do and where we could go. Her hospitality and generosity is something I will always remember, and hopefully someday reciprocate. Ireland's beautiful scenery and friendly people will be remembered by me with only a huge smile on my face, and the thought that, "it was grand, like!". I will be back !'*

*Aggie Bakowski, January 2000*

Ciara Earley and Amanda Ni Choitir traveled to Perth and the Outback this summer.

#### *Visit to Australia*

*'What most people look for in an elective is to learn a bit, do a lot and have a great time. This summer in Australia we certainly achieved these objectives and a few more. Then we flew off on our rural attachments, Ciara to Port Hedland and Amanda to Meekatharra.*

*Port Hedland is a small town on the North West coast with a population of 2000. It is a major port for the export of iron ore and salt and the BHP iron ore plant is one of the main attractions of the town! Before I went most Aussies told me that it was quite a rough town and not a place that you would choose to visit. However after spending 3 weeks there, I loved it. The weather was great, uninterrupted sunshine for the entire time and the people I met were fantastic. I was attached to the Royal Flying Doctors base (RFDS) and when I wasn't with them I was based at the hospital. It was amazing to see how much can be done a few 1000 feet in the air 100's of miles from the nearest hospital. One of the best aspects of my attachment in Port Hedland was the great variety; the hospital is quite small but has most departments. The staff were lovely and very helpful. On a lighter note the social life was very good; one "Irish Coffee" night was particularly successful!*

*I wasn't at all sure what to expect before I went there as most Australians laughed heartily when I told them I was going to Meekatharra for 3 weeks. In fact "Meeka" turned out to be a totally unique experience. It is a small town in central W.A., population of around 1000 people – mostly Aboriginal- which serves the local goldmines. Despite it's size it is the 2<sup>nd</sup> largest and busiest RFDS base in W.A. so between RFDS flights and clinics, I got to do a lot*

*of flying while I was there. We were both lucky to get this opportunity with the RFDS as most Australian students find it difficult to get this attachment.*

*There were three flying doctors in Meek, who split their time between flying and working in the hospital. Because of it's size I was included as part of the hospital medical team and so I got loads of practical experience such as – taking bloods, Putting in IV lines, ABGS, catheterisation and plaster casts. Most patients were Aboriginal and it was very interesting learning how to relate to people of a totally different culture. My 3 weeks in just flew by and they were certainly the highlight of my training so far.*

*Some practical points to consider are cost and accommodation. Australia is not particularly expensive but you would need about £2,000 to cover everything including flights and a bit of a holiday. This was an incredible summer elective and we would thoroughly recommend it!!'*

***Ciara Earley and Amanda Ni Choitir, August, 2000***

### **University of Washington**

We had two visitors also from America, Daniel O Donohue and Richard Snider who were attached to Dr. Eamon Faller, Galway and Dr. Dan Murphy, Galway respectively. Three Galway students enjoyed their summer in America; Zekri Hashim, Dorian De Fretias and Samer Saour.

#### *Visit to Washington DC*

*'It was an opportunity of a lifetime. Being given the chance to learn under superb teachers and in expansive surroundings was something that I looked forward to as I flew in from Ireland. I was not to be disappointed. The elective in cardiology proved to be both a daunting and exciting task for me. I attended daily ward rounds and the weekly "Grand Rounds" which proved to be very insightful. Most of my time though, was spent as a member of a team in caring for patients. From getting the initial history and physical examination of a cardiology patient in ER and clinics, to writing the initial cardiac consult note on an inpatient and presenting them later on the ward round.*

*All in all, my elective experience has been tempered with much humour and a general sense of togetherness that I have rarely experienced before. I can readily say that this four weeks have been the most rewarding for me clinically as well as intellectually. It has indeed been one of the highlights of my life so far.'*

Zekri Hashim, August 2000

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## **POSTGRADUATE EDUCATION**

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### **Diploma in Health Sciences (Primary Care)**

The Diploma in Primary Care is a new one year, part time, post graduate diploma offered to the wide range of specialists who provide primary care. These include general practitioners, public health and practice nurses, social workers, community dietitians and pharmacists, physiotherapists, psychologists, area medical officers, health promotion officers. It will commence with its first intake of 12 students in September 2000. These students are from the North Western Health Board, which is providing significant financial support to the Diploma.

At present there is little opportunity for primary care specialists to learn and interact together in a structured educational environment. This diploma aims to provide just this opportunity.

Other aims are

1. To allow the development of a critical approach to practice by examining own work, learning about work of others and by developing a critical approach to published work.
2. To increase understanding of human behavior in relation to health and illness in order to gain greater insight into the behavior and needs of patients and other health care professionals.
3. To provide training in research methods and an appreciation of the existing body of research findings to equip students to undertake their own research and critical inquiry.
4. To develop relationships and management skills for teamwork within the changing health care environment.

The course began with a summer school held in Galway. This ran over 5 days and afforded an opportunity for both academic pursuits and social interaction! Ongoing teaching will take place in Sligo two days each month with a two day spring school in Galway and completion of the course in May.

Objectives of the course, including teaching methods and assessment are outlined in the grid below.

<b>Objective</b>	<b>Module</b>	<b>Teaching</b>	<b>Assessment</b>
To understand the development and role of Primary care in the health services. To know the structure and function of primary care teams. To understand various models of primary health care delivery.	Primary Care	Lecture Workshop Cross-border visit	Group Project
To acquire knowledge and understanding of the vocabulary used in medical research and basic statistics. To be able to manage and apply statistical tests to data sets. To be able to access and critically appraise research publications. To be able to identify a meaningful research question and design and execute a suitable research plan. To execute and present a group research project.	Research methods Epidemiology Statistics	Lecture Laboratory	Group Project  Critical Appraisal of Paper
To have knowledge of management structures in health care delivery. To have acquired skills for effective management. To have acquired skills and relationships for effective multidisciplinary teamwork.  To have gained an understanding of health care as an economic commodity.	Management Communication skills Health Economics	Lecture Group discussion Workshop Role play	Group project Reflective essay
To have an understanding of how social and psychological factors influence -understanding and perception of health -access to health care services -consumers relationships with health care providers.	Sociology Psychology	Lecture Group discussion	Reflective essay
To understand the principles of medical ethics. To be able to identify ethical and moral issues in practice. To be able to apply ethical principles to improve practice.	Ethics	Lecture Group discussion	Reflective essay
To have an appreciation of the principles and concepts of health promotion. To have an understanding of current planning and intervention models used in health promotion	Health Promotion	Workshop Distance learning	Development of a proposal for a programme

## **SECTION FOUR : RESEARCH ACTIVITIES**

### **RESEARCH PROJECTS**

• = New Project

➤ = Continuing

Status as of 1<sup>st</sup> September 2000

#### **RURAL**

• **Female rural general practitioners: A qualitative study**

Grant Holder N Cuddy (Department of General Practice, NUI, G)

AW Murphy

AM Keane (Department of Psychology, NUI, G)

Funding Agency HRB Co-Funded Grant 1999

Total Value £ 9,150

Start date 01.09.00

Objectives

To explore and describe the work experiences of female rural general practitioners

Status Commencement

➤ **Out of hours care provision: A qualitative study**

Grant Holder N Cuddy (Department of General Practice, NUI, G)

AW Murphy

AM Keane (Department of Psychology, NUI, G)

Funding Agency ICGP Special Grant 1998

HRB Co-Funded Grant 1999

Total Value £ 3,000

£ 9,150

Start date 01.10.98

Objectives

To explore and describe how rural general practitioners perceive and experience out of hours care provision.

Status Accepted for publication by *British Journal of General Practice*

➤ **Description of Irish rural practice and practitioners**

Collaborators S Nic Gabhainn (Department of Health Promotion, NUI, G)

AW Murphy

F O'Cuinneagain on behalf of the ICGP

C Kelleher (Department of Health Promotion, NUI, G)

Funding Agency None

Start date 01.06.99

Objective

To describe, using census data from the 1997 ICGP study, rural general practitioners and their practices and to perform comparison with non-rural colleagues.

Status Submitted for publication

➤ **Warfarin and near patient testing**

Collaborators AW Murphy  
Ann Cosgrove on behalf of the WHB GP Unit  
D McKeown (Department of Health Promotion, NUI, G)

Funding Agency None

Start date 01.03.99

Objectives

To determine the standardised numbers of patients in rural general practices requiring anticoagulation and range of diagnoses for which patients are on warfarin treatment, the numbers of patients maintained in desired therapeutic range and validity of Coagucheck test.

Status Draft stage

➤ **Out of hours patient contacts**

Collaborators AW Murphy  
A Cosgrove on behalf of the WHB GP Unit  
C Taheny on behalf of the NWHB GP Unit  
J Cullinane on behalf of the MWHB GP Unit  
D McKeown (Department of Health Promotion, NUI, G)

Funding Agency None

Start date 01.03.99

Objectives

To determine effects of practice location and practitioner age and sex on out of hours contacts for practices in North Western, Western and Mid-Western Health Board areas.

Status Submitted for publication

➤ **Donegal Area Rapid Treatment Study**

Grant Holders AW Murphy  
J Dowling (Donegal PreHospital Emergency Care Project)  
P Wright (Donegal PreHospital Emergency Care Project)  
G Bury (Department of General Practice, UCD)  
J O'Neill (Donegal PreHospital Emergency Care Project)

Funding Agencies a) North Western Health Board and Department of Health  
b) GMS Research & Education Fund 1997

Total value a) £ 107,443

b) £ 19,500

Start Date 01.08.98

Objectives

1. To determine the feasibility and costs of the administration of domiciliary thrombolysis by Irish general practitioners.
2. To determine the feasibility, benefits and costs of ECG telemetry in the management of patients with chest pain in general practice.
3. To describe the prehospital cardiac care currently provided in Donegal.

Status Intervention phase commenced

## **PRIMARY CARE / HOSPITAL INTERFACE**

- **Baseline survey of provision of secondary cardiac preventive measures in general practice and associated illness perceptions.**

Grant holder M Byrne  
A W Murphy

Collaborators J Walsh (Department of Psychology, NUI, Galway)  
C Kelleher (Department of Health Promotion, NUI, Galway)  
C Duffy (GP Unit, Western Health Board)  
P Wright (Department of Public Health, NWHB)

Funding Agency a) Health Research Board  
b) GP Unit, Western Health Board  
c) Dept of Public Health, NWHB

Total value a) £99,000  
b) £15, 000  
c) £15, 000

Period 01.01. 2000 – 31.12.2002

### **Objectives**

1. To conduct a baseline survey of the provision of secondary cardiac preventive measures in general practice.
2. To examine the relationship between the uptake of secondary preventive measures and patient illness perceptions.

- **Acute Myocardial Infarction and Ischaemic Heart Disease Prevention and Psychological factors**

Grant Holders J Hogan (Department of Psychology, NUI, G)  
AW Murphy  
K Daly (Department of Cardiology, UCHG)  
M Lynch (Department of Psychology, NUI, G)

Funding Agency Western Health Board

Total Value £ 15,200

Start date 01.01.99

### **Objectives**

For patients who present to a hospital for treatment of AMI, to identify the key psychological and social factors that predict delay times. For patients attending hospital OPD with established ischaemic heart disease, to determine the uptake of proven secondary preventive measures.

Status Draft stage

- **General Practice and Accident & Emergency interface**

Grant applicants: AW Murphy  
H McGee (Health Services Research Unit, RCSI)  
PK Plunkett (Dept of A&E Medicine, St. James's Hospital)  
G McMahon (Dept of A&E Medicine, St. James's Hospital)  
G Bury (Department of General Practice, UCD)  
M Byrne (Department of General Practice, NUI,G)

Funding Agency a) Health Research Board  
b) GMS Research & Education Fund 1998

Total value a) £ 9,000

Period b) £ 7,000  
01.05.99 to 31.04.00  
Objectives  
To determine, in comparison to a control group:  
a) general practice attendance rates of 'frequent accident and emergency attenders'  
b) the level of social support available to 'frequent accident and emergency attenders'  
c) psychiatric morbidity among 'frequent accident and emergency attenders'  
Status Draft stage

## **EDUCATION**

### ➤ **Evaluation of a Communication Skills Teaching Module**

Collaborators M Kelly  
AW Murphy  
Funding Agency None  
Total value Nil  
Period 01.08.99  
Objective  
To determine the effectiveness of a short course on communication skills for undergraduate medical students.  
Status Data analysis

### ➤ **Career pathways of GP Trainees**

Grant Holders A Nugent, B Parsons (GP Trainees, Dublin GPVTS)  
AW Murphy  
S Smith (Department of General Practice, UCD)  
F Bradley (Department of General Practice, TCD)  
Funding Agency a) Manne Berber Award  
b) ICGP Research and Education Fund 1999  
Total Value a) £ 2,000  
b) £ 1,750  
Start date 01.10.98  
Objectives  
For graduates of all Irish vocational training schemes between 1990 and 1996 inclusive, to determine their current position, future career plans and perceived barriers to ideal career choices.  
Status Draft stage

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## SUMMARY OF NEW RESEARCH GRANTS 1999/ 2000

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Study	Funding Agency	Amount (£)
Secondary Prevention of Heart Disease in General Practice	Health Research Board	99,000
	GP Unit, Western Health Board	15,000
	Dept of Public Health, NWHB	15,000
<b>Total</b>		<b>129,000</b>
<i>With the Department of Health Promotion as lead:</i>		
Health status and health gain	Health Research Board Five Year Unit	<b>300,000</b> (additional)

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## HEALTH SERVICES RESEARCH WORKING GROUP

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A series of lunch-time seminars in health services research has been arranged by the Department of General Practice for the coming academic year. The aim of these seminars is to provide a forum for the development and dissemination of health services research in the West of Ireland. Seminars will be held on the second Tuesday of each month. Each seminar will involve a presentation on a piece of current health services research. The purpose of the presentation will be to generate discussion about HSR issues, which will hopefully prove useful to all seminar participants. We are planning to use video conferencing to facilitate the participation of colleagues in the North Western Health Board. The provisional timetable of seminars is shown below.

<u>Date</u>	<u>Presenter</u>	<u>Topic</u>
<u>Oct. 10<sup>th</sup> 2000</u>	<u>Prof Andrew Murphy, Dept. of General Practice, NUIG</u>	<u>Effects of a GP consultation charge on rates and patterns of patient consultation on the island of Ireland.</u>
<u>Nov. 14<sup>th</sup> 2000</u>	<u>Dr Sean Denyer, NWHB</u>	<u>Getting research into practice.</u>
<u>Feb. 13<sup>th</sup> 2001</u>	<u>Mr David Moore, Dept. of Geography, NUIG</u>	<u>Geographic Information Systems: A tool to support decision making in health care service provision.</u>
<u>Mar. 13<sup>th</sup> 2001</u>	<u>Ms Nuala Cuddy, Dept. of General Practice, NUIG</u>	<u>A qualitative study of rural female GPs.</u>
<u>April 10<sup>th</sup> 2001</u>	<u>Dr Margaret Barry, Dept. of Health Promotion, NUIG</u>	<u>To be confirmed.</u>
<u>May 8<sup>th</sup> 2001</u>	<u>To be confirmed</u>	

## ***SECTION FIVE: PUBLICATIONS***

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### **JOURNAL ARTICLES**

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**Byrne, M.** & Curtis, R. Designing health communication: Testing the explanations for the impact of communication medium on effectiveness. *British Journal of Health Psychology* 2000; 5: 189-199.

**Murphy AW**, Bury G, Dowling J, **Lynch C**. The teaching of immediate cardiac and trauma care to general practitioners. *Medical Education* 1999; 33: 774-6.

**Murphy AW**, **Leonard C**, Plunkett PK, Brazier H, Conroy R, Lynam F, Bury G. The characteristics of attenders and their attendances at an urban A&E department over a one year period. *Journal of Accident and Emergency Medicine* 1999; 16:425-8.

**Murphy AW**, Plunkett PK, Bury G, **Leonard C**, Walsh J, Lynam F, Johnson Z. Effect of patients seeing a general practitioner in accident and emergency on their subsequent reattendance: a cohort study. *British Medical Journal* 2000; 320: 903-4.

**Murphy AW**. Research and development in Irish Primary Care (Editorial). *Irish Medical Journal* 2000; 93: 69-71.

### **ACCEPTED FOR PUBLICATION**

**Cuddy N**, Keane AM, **Murphy AW**. Rural general practitioners' experience of out of hours care provision: A qualitative study. *British Journal of General Practice* Due for Publication November 2000

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### **OTHER PUBLICATIONS**

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**Murphy AW**. 'Hypertension module' in the distance learning Diploma of Therapeutics of the Irish College of General Practitioners.

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### **NON PEER REVIEWED JOURNAL ARTICLES**

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**M Kelly**. How to win attention and motivate students. *Forum* 1999; 16: 12 : 39-40.

**M Kelly**. Student centered learning for patient centered care. *Forum* 2000; 17:1: 35-6.

**M Kelly**. It takes all types to make a medical class. *Forum* 2000; 17; 2: 23-4.

**Murphy AW**. Towards a more equitable Irish primary care system. *Forum* 2000; 16: 20-1

**Murphy AW**, Moore D. Meningococcal disease: Diagnosis and management in general practice. *Forum* 2000; 17: 39-40

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## **SUBMITTED FOR PUBLICATION**

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Nic Gabhainn S, **Murphy AW**, Kelleher CC. A national general practice census: Characteristics of rural general practices. *British Journal of General Practice* Submitted 14<sup>th</sup> April 2000

**Murphy AW, O'Hanlon CM**, Mc Keown D, Cosgrove A, Cullinane J, Taheny C. Do rural general practitioners have more out of hours patient consultations? *British Journal of General Practice* Submitted 5th June 2000

**Cuddy NJ**, Keane AM, **Murphy AW**. Spouses of rural general practitioners' experience of the provision of out of hours care: A qualitative study. *Family Practice* Submitted 30<sup>th</sup> September 2000.

## SECTION SIX – CONFERENCE PRESENTATIONS

IT = Invited talk  
 OP = Oral presentation  
 KA = Keynote address  
 P = Poster  
 W = Workshop

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### INTERNATIONAL PRESENTATIONS

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<i>Title</i>	<i>Conference/ Venue</i>	<i>Date/ Format</i>
<b>M Byrne</b>		
Frequent attenders to A&E : Health service use, medical profile and psychosocial characteristics	AUDGP, Bournemouth, UK	July 2000 P
Designing health communication: Testing the explanations for the impact of communication medium on effectiveness	European Health Psychology Society, Leiden, Holland	August, 2000 OP
<b>M Kelly</b>		
Reported symptoms and reasons for dropping out of a trial of HRT in Irish general practice	MRC GP Research Framework Warwick, UK	Sept, 1999 P
<i>and</i>	AUDGP, Bournemouth, UK	July 2000 P
<b>AW Murphy</b>		
Effect of seeing a GP in A&E: A two year cohort study	AUDGP, Bournemouth, UK	July, 2000 P
<i>In collaboration with the Department of General Practice, NUI, Galway</i>		
<b>J Walsh (Dept of Psychology)</b>		
Effect of coping styles on patient delay in presenting to hospital with an AMI	International Congress of Psychology, Stockholm	July, 2000 OP
An examination of the self- regulatory model of illness behaviour to patient delay in AMI	European Health Psychology, Leiden	August, 2000 OP

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## NATIONAL PRESENTATIONS

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### **M Byrne**

Frequent attenders to A&E :  
Health service use, medical  
profile and psychosocial  
characteristics

AUDGP, Scientific  
Meeting, UCD, Dublin

March 2000/OP

*and* Faculty of Public Health  
Medicine, Summer Scientific  
Meeting, RCPI, Dublin

May 2000/OP

### **M Kelly**

Reported symptoms and reasons  
for dropping out of a trial  
of HRT in Irish general practice

ICGP Research  
Workshop,  
Wesport

Oct 1999 / OP

Lifelong Learning

WHB, Vocational Training  
Scheme in GP,  
Galway

Feb 2000/ IT

### **M Kelly & N Fenlon**

Teaching and assessing attitudes  
in undergraduate medical education

AUDGPI, Scientific  
Meeting, UCD, Dublin

March 2000/ W

### **AW Murphy**

Rural general practitioners' and  
their spouses experience of the  
provision of out of hours care

HSRG, UCC

October, 1999 P

Effect of seeing a GP in A&E: A  
two year cohort study

HSRG, UCC

October, 1999 OP

Pre-hospital Recognition and  
Management

Meningitis Research  
Foundation All-Ireland  
Conference

October, 1999 KA

Rural general practitioners' and  
their spouses experience of the  
provision of out of hours care

ICGP Annual Scientific  
Meeting

Nov, 1999 OP

Health promotion in general  
practice

SEHB Health Promotion  
Conference, Wexford

Nov, 1999 KA

Annual Educational Review

Department of General  
Practice, UCC

January 2000 IT

Meeting on methodology issues of a study of the provision of secondary cardiac prevention in Irish general practice	Department of General Practice, NUI, Galway Methods Meeting	February, 2000 IT
WHB Draft Strategy for Primary Care	Galway Faculty, ICGP	February, 2000 IT
AUDGPI : Future Directions	AUDGPI Annual Scientific Meeting	March 2000 IT
Effect of seeing a GP in A&E: A two year cohort study	AUDGPI Annual Scientific Meeting	March, 2000 P
Primary Care 2020	West of Ireland Medical Paediatric Society	April 2000 IT
Prehospital thrombolysis by general practitioners: who says and why do they say it?	DARTS, Letterkenny	April 2000 IT
Equity and access in Irish Primary Care	SHB Conference 'Inequalities in Health'	May 2000 KA

*In collaboration with the Department of General Practice, NUI, Galway*

**S Nic Gabhainn and CC Kelleher (Dept of Health Promotion)**

The characteristics of general Practice in Ireland	AUDGPI Annual Scientific Meeting	March 2000 OP
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**J Walsh (Dept of Psychology)**

Physical, psychological and social factors predicting presentation delay in patients with AMI	AUDGPI Annual Scientific Meeting	March 2000 OP
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**J Walsh and M Lynch (Dept of Psychology)**

Audit of uptake of secondary preventive measures in a sample of outpatients attending a cardiac clinic	AUDGPI Annual Scientific Meeting	March 2000 P
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## ***SECTION SEVEN– OTHER PROFESSIONAL ACTIVITIES***

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### **EXTERNAL APPOINTMENTS**

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**M Byrne**

Referee:

*Irish Journal of Psychological Medicine*

**M Kelly**

Referee:

*Medical Education*

**AW Murphy**

Member, Scientific Advisory Group, Meningitis Research Foundation, London

Extern Examiner, Firm 1 (Community based education) Years 1-4, University of Birmingham

Member, Public Health and General Practice Committee of Health Research Board

Secretary, Association of University Departments of General Practice in Ireland

Member, Primary Care Strategy Group, Western Health Board

Member, Donegal Area Rapid Treatment Study Steering Group

Member, Organising Committee of the Annual Scientific Meeting of the Association of University Departments of General Practice in Ireland

Member, Council of the Irish College of General Practitioners (representing the Association of University Departments of General Practice in Ireland)

Member, Steering Committee of the Western Health Board GP Training Scheme

Member, Project Assurance Team, Co-operation and Working Together (CAWT)

Referee:

*British Medical Journal*

*British Journal of General Practice*

*Medical Education*

*Education for Health*

*Irish Medical Journal*

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## PROFESSIONAL DEVELOPMENT

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### M Byrne

<u>Courses attended</u>	<u>Computer software training</u>	<u>March -</u>
	<u>(including SPSS, Procite and</u>	<u>May 2000</u>
	<u>Epi-info), NUI, Galway</u>	

<u>Courses given</u>	<u>Contributed to a one-day</u>	<u>June 2000</u>
	<u>workshop on 'How</u>	
	<u>to write a research proposal'</u>	
	<u>Irish Hospice Foundation, Dublin</u>	

<u>Workshops organized</u>	<u>One-day methodology development</u>	<u>Feb 2000</u>
	<u>workshop for secondary prevention</u>	
	<u>of heart disease study. Delegates were</u>	
	<u>specialists in the field working in</u>	
	<u>Ireland and Britain</u>	

### M Kelly

<u>Courses Attended</u>	<u>Two half-day workshops on</u>	<u>Sept 1999</u>
	<u>Small group teaching skills.</u>	
	<u>NUI, Galway</u>	

	<u>2 day residential workshop on</u>	<u>Dec 1999</u>
	<u>Interpersonal Communication Skills,</u>	
	<u>Queen's University, Belfast</u>	

### AW Murphy

<u>Courses Attended</u>	<u>Two half-day workshops on</u>	<u>Sept 1999</u>
	<u>Small group teaching skills</u>	
	<u>NUI, Galway</u>	

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<u><a href="#">Ms. Eithne Shryane</a></u>	<u><a href="#">(00 353 93) 55472</a></u>	<u><a href="mailto:shryane@esatclear.ie">shryane@esatclear.ie</a></u>

## Dulse

*Palmaria palmata* is a common red seaweed found between the tides on rocky shores and named for its resemblance to the palm of the human hand (Latin, *palma*). In Ireland, Scotland and England, it is known as Dillisk or Dulse. In Irish, two names are used: *Creathnach* (feminine) and *Duilleasc* (masculine). These names actually express different forms of what appears to be a single biological entity. *Creathnach* is a smaller, narrower form that generally grows on small mussels on wave-swept shores, and is sometimes known as "Shell-dulse" in English; this form is more popular in many places. *Duilleasc* is used for a larger, broader form that grows directly on rocks or on kelp.

The use of dulse is known in Ireland since at least the 12<sup>th</sup> century when it was mentioned in a poem describing the duties of monks:

<i>Seal ag buain duilisc do</i>	<i>A while gathering dillisk from</i>
<i>charraig, seal ag aclaidh</i>	<i>the rock, a while fishing,</i>
<i>seal ag tabhairt bhidh do</i>	<i>a while giving food to the</i>
<i>bhochaibh, seal i</i>	<i>poor,</i>
<i>gcaracair.</i>	<i>a while in my cell.</i>

Regulations governing the collection of dulse were introduced in Iceland in the 13<sup>th</sup> century, and the Icelandic sagas (11<sup>th</sup> century onwards) describe one of the heroes being given dulse in milk to lull him into sleep prior to being killed. Dulse is good to eat, but only after being dried. In a fresh state it is leathery and unpalatable. After sun-drying and proper storage, it is a very pleasant plant to chew. It has very little fat and only a small amount of proteins and cellulose, but is very rich in trace elements and vitamins, particularly vitamin A. Dulse contains large amount of several unusual carbohydrates including an unusual short-chained one, floridoside, and this can form up to 30% of the dry weight. This may account for its palatability.

Scotland, Norway, Iceland and eastern Canada all produce small amounts of dulse for human consumption. In Ireland about 20 dry tonnes are sold each year, mainly in the west and north-east. It is particularly popular in the working class areas in north Belfast where its use is likely to have come, along with the name 'dulse' from Scotland. At present natural dulse is in short supply and the Martin Ryan Institute and the Irish Seaweed Industry Organisation in collaboration with Queen's University, Belfast, are looking at ways of growing dulse artificially in the sea. Exploratory studies on ropes look good for cultivation.

All sorts of claims are made for dulse. According to a pamphlet published in Dublin in 1726 (Threlkeld's *Synopsis stirpium hibernicarum ...*):

"But in *Dublin* men chew it like Tobacco when dry, carrying it in their Pockets for that end, which destroys worms, and gives a Relish to Beer, as Anchoves and Olives to Wine; it is commanded against Women's longing."

The matter of it being a vermifuge may be due to the kainic acid content. Dulse used to be sold in the Galway Egg and Butter Market and was reputed to be an excellent remedy for a hangover. Nowadays, dulse is frequently used in chowders and fish dishes, as a condiment, and even in desserts and bread. As part of an European Union-funded project, a Spanish chef has formulated 90 entirely new recipes that will be published shortly.

