

Receptionist's Introduction to the Intensive Clinical Training Programme

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Receptionist's Introduction to the Intensive Clinical Training Programme

1. Registrars

1) Registrars

- Stage I Intensive Clinical Training Programme (ICTP)을 받는 의사
- 의대를 졸업하고 최소한 hospital system에서 2년 이상 일한 경험이 있는 사람

2) 3 part of stage 1, ICTP

- ① Practice based learning through supervised practice & one-with-one teaching in accredited practice attachments
- ② Seminars
- ③ Workshops

2. Attachments

1) Regional director/Local coordinator: arrange the attachments

Before attachments, GP registrars should visit and meet with the practice staff.

Two attachments, each 5 months duration.

8 half-day sessions each week in the practice.

2) **The registrars's load:** 5~13 patients each consulting session. Vary depending on the needs.

Receptionists: making appointments, obtaining patient consent for patient feedback surveys (DISQ), videoing consultations.

3. Attachment visits

1) **Regional director/Local coordinator:** one visit during attachment

2) **Purpose of visit:** to ensure that the needs of the registrar are met continuously throughout the attachment & The attachment meets the requirements of the programme.

4. Quality assurance for teaching practice

1) **All teaching practice:** through Quality Assurance Programme

Re-accredited every six years.

2) **Contents:** doctor's skills as a general practitioner and as a teacher

How the practice works

What patient say and registrars' level of satisfaction with the attachment

Receptionist: preparation for the visit

Ex) patient record selection, patient consent for videoing consultations, completing a patient questionnaire and for a record review.

How Can You Help the Registrars?

You can be a source of support and encouragement!

1. Appointments

1) **What booking s are appropriates for each registrars?:** depend on his or her level of experience

and the way the practice works.

At the beginning of the attachment, the registrar and the teacher should discuss.

2. "Protected" teaching time

The teacher and registrar will organise dedicated time for teaching

Protected from extra patients, phone calls..

3. Registrar feedback

Feedback from registrars patients and other staffs: helpful, but handle carefully.

Discuss with GP teacher and the GP registrar.

4. Information for the registrar

Roles of the staffs in the practice

Equipment used in the practice-where it is kept, how it is maintained etc

Local resources

Practice building

Practice procedures

5. You can help the registrar by

Keeping them informed about appointments made

Encouraging patients to see the registrar for the first time and for F/U of a condition

Giving background about patients eg. Their relationships to other patients, recent bereavements, etc

Explaining to patients that the registrar is a qualified, registered doctor undergoing extra specialist training

Practice Nurses' Introduction to the Stage I, Intensive Clinical Training Programme

5 key areas of responsibilities of practice nurses

- ① Health promotion
- ② Health education

- ③ Assessment
- ④ Nursing services
- ⑤ Clinical maintenance

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2) 3 part of stage 1, ICTP

- ① Maintenance of emergency equipment, practice based learning through supervised practice & one-with-one teaching in accredited practice attachments
- ② Seminars
- ③ Workshops

2. Attachments

1) **Regional director/Local coordinator**: arrange the attachments

Before attachments, GP registrars should visit and meet with the practice staff.

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How You Can Help the Registrars?

Recommend that the registrar spend a block of time with the practice nurse in order to understand the practice nurse's roles and responsibilities and also to get exposure to general practice experience outside the GP consultation.

1. Registrar feedback

Feedback from registrars patients and other staffs: helpful, but handle carefully.

Discuss with GP teacher and the GP registrar

2. Contributing to the registrar's learning

- ① Practice nurses' roles and responsibilities within the practice: eg) in some practice they may be involved in each consultation or on an as needed basis
- ② Health promotion: eg) immunization, cervical/breast screening, health checks, chronic disease maintenance
- ③ health education: eg) teaching of patient self monitoring procedures, sexual health, family planning/contraception, health and lifestyle education, self-care during illness.
- ④ Assessment: eg) telephone and situation triage, history taking, collection of data-blood pressure, weight, peak flows, tympanometry, blood glucose, pregnancy test, TPR, ECG, urinalysis, initial assessment of accident/emergencies, review of reports/results/past history
- ⑤ Nursing services: eg) initiating first aid and emergency treatment such as CPR, oxygen, nebulising, management of minor soft tissue injuries: wound care, administration of medications, ear syringing, vaccinations, cryotherapy, preparation and assistance with minor surgery, counseling and support for lifestyle change, domiciliary visits, case management including

liaison with other health professionals and community agencies, rehabilitation

- ⑥ Clinical maintenance: eg) ordering supplies and equipment, regular checking and checking expiry dates of medications and equipment, infection control, cold chain, satisfactory sharps/waste disposal, recording and updating educational materials

3. What you need to know from the registrar

- ① Background knowledge and experience
- ② Length of appointment time
- ③ Particular skills they are interested in gaining eg: smears, diabetes review, asthma management, patient education

4. You can help the registrar by

- ① Have the registrar stationed with the nurses for some time during the first couple of weeks to assist with their orientation to the practice
- ② Giving background about patients eg: their relationships to other patients, recent bereavements, etc
- ③ Advocacy for patients
- ④ Liaison with other health professionals
- ⑤ Putting the registrar in touch with the most appropriate community resources