



**Spring** is sprung ..... The daffodils have come and gone in the UK and we are looking forward now to some warmer and drier weather before we leave for The 9<sup>th</sup> World WONCA Rural Health Crete in June. This Newsletter contains some useful information about Rural WONCA 2009 and we hope that if you have not already decided to come that you will reconsider and join us in Crete. You need a break! Hasn't 2009 been a momentous year already. The last thing that we wanted was the prospect of an Influenza Pandemic to add to Europe's woes. Have national contingency plans been Rural Proofed and how will rural services manage. Share your concerns on the listserver. Lets work together to manage the threat.

### Rural WONCA 2009

The 9<sup>th</sup> WONCA Rural Health World Conference is taking place from 12<sup>th</sup> – 14<sup>th</sup> June 2009 at Heraklion on the Greek island of Crete.

Full details can be found on the conference web site at:  
<http://www.ruralwonca2009.org/>

Professor Christos Lionis is president of the organising committee. The conference is being hosted by the Clinic of Social and Family Medicine, Medical Faculty, University of Crete, Greece, in conjunction with the practice-based research rural network of Crete and EURIPA.

The main theme of the conference is Health Inequalities, which covers three main core subject areas: technology suitable for rural settings, island medicine and health services for immigrants. EURIPA and its members are actively participating in the conference so do come and join us in Crete.

#### Plenaries:

- Jose Lopez Abuin, Spain is speaking on Health Inequalities in Europe: a continental perspective and challenge
- Elisabeth Swensen, Norway is addressing Technology in rural health in northern Europe: has it succeeded in bridging the gap
- John MacLeod, Scotland is addressing Island Health: Achieving equity for Island people
- Christos Lionis, Greece is talking about Implementing research in a southern European Island: from theory to practice
- John Wynn-Jones, UK is speaking on the final day The challenge for Europe: closing the gap

#### Workshops:

- Ioan Boscan, Romania chair - The migration and movement of people across borders
- Jane Randall-Smith, UK chair – Climate change and reducing your carbon footprint: what will be the impact on rural practice
- Claudio Carosino, Italy, chair – Improving rural research across Europe
- Claudio Colosio Italy and Dr J Wynn-Jones joint chairs – Care for Farmers role of rural general practice in managing occupational health in the farming community and interactions with occupational health physicians
- Jose Lopez Abuin & John Wynn-Jones joint chairs – A rural health strategy for Europe

## New WHO Programme for Rural Areas

On 2 February 2009, World Health Organisation (WHO) launched a new programme to increase access to health workers in remote and rural areas through improved retention. The programme is an integral part of the organisation's renewed efforts to strengthen health systems through a primary healthcare approach.

Despite the fact that half the world's population live in rural areas, only 38% of the world's nurses and only 24% of doctors work in rural communities. It is therefore urgent that we encourage health care workers to consider rewarding careers in rural practice.

WONCA and EURIPA have campaigned for action for many years and we are delighted to cooperate with WHO on this exciting venture

I visited the WHO headquarters in Geneva at the beginning of April to take part in one of the "Core Expert Group" meetings on the WHO programme "Increasing access to health workers in remote and rural areas through improved retention" The group consisted of rural public health experts and academics from across the world. I was however the only practicing physician amongst the group and I hope that I can add a different perspective because of that.

The group is committed to ensuring that the final report is evidence based wherever possible. The original literature review (which can be found on [http://www.who.int/hrh/migration/expert\\_meeting/en/index.html](http://www.who.int/hrh/migration/expert_meeting/en/index.html)) was conducted by Laura Stormont, who has done a wonderful job. Despite a considerable quantity of literature, much is not evidenced based.

As my commitment to the programme, I have committed myself to trying to search out grey literature and other papers from the rural health community on recruitment and retention. Do you know of any papers/reports/articles etc. that might be useful?

The group are also keen to collect a series of case reports for the programme. Many of you are ideally placed to identify individuals that could produce such studies. I will keep you informed on the progress of the programme.

It is really important that we engage with WHO as this programme is so important to us all in Rural Health/Rural Practice.

Please respond to me (johnwj@irh.ac.uk) or Laura (stormontl@who.int)

**John Wynn-Jones**

## EURIPA Research

### “Acute chest pain study”: a new European research project within EURIPA

On the 1st of April the observational prospective study on “Management of acute chest pain (ACP) in rural settings in Europe” started formally.

This study is the first result of a wider project within EURIPA aiming to improve shared research initiatives on crucial topics for rural practice. Last year EURIPA’S Research Committee promoted an electronic discussion in order to identify and choose the first subjects for research. As a result a special listserver (RESNET-EURIPA) has been organised to support this project. The theme of “chest pain” has been debated in depth on the listserver and it became a defined research protocol.

The aim of the study is to provide a picture of the management of chest pain across Europe where the distance from emergency services and lack of technology support could make the difference. In order to define a more detailed list of the goals for the project we have identified that we would like to study ACP in rural areas from the point of view of:

- 1) EPIDEMIOLOGY: how many cases in a defined time in a defined population
- 2) PHENOMENOLOGY: different ACP presentations and their influence on further steps of the process
- 3) MANAGEMENT OF THE PROBLEM: to what extent GPs are involved in the triage, assessment and first aid. Timing of interventions. How much the geographical features (distance, living in an island, transport facilities) can modify the processes.
- 4) INTERNATIONAL GUIDELINE’s ADHERENCE: how can we apply them in different settings
- 5) OUTCOMES: relationships between the presentation of ACP and its management AND final diagnosis and treatment.

At this moment 25 practices from 13 countries are taking part in the study but we expect to gather further support in the next two months (the study will last 1 year, starting from the date of the entry of the participant).

A special workshop is being organised during the next WONCA Rural Conference in Crete in order to examine the first data from the study and to identify future projects for the EURIPA Research Group.

**The EURIPA Research Committee**

#### **Editors Note:**

Special thanks to Claudio Carosino for his hard work and persistence in getting this up and running. This project is a unique opportunity to compare experiences across Europe and share good rural practice amongst us all. We hope that this will provide a template for further research in the future. If you haven’t been involved and are interested in sharing ideas and information with colleagues across Europe, please contact Claudio Carosino [ccarosino@tin.it](mailto:ccarosino@tin.it)

John

## EURIPA – country reports

**Wales** – The National Assembly for Wales is committed to developing a Rural Health Strategy for Wales and published its consultation paper on 1<sup>st</sup> May 2009. The Strategy has been informed by a short research project, public engagement and by taking evidence from key organisations and individuals in Wales.

The research report, by the Institute of Rural Health can be found at:

The Strategy can be found at:

<http://new.wales.gov.uk/consultations/healthsocialcare/ruralhealth/?lang=en>

## How prepared are you for a possible Swine Flu Pandemic in your rural practice?

National governments are beginning to roll out their emergency pandemic contingency plans, the media is awash with frightening tales of a “deadly” epidemic and our patients are confused and worried. We have been warned for some time that a pandemic is due and the raising of the WHO alert to 5 suggests that it is probable that this outbreak could result in a public health emergency world wide. How prepared are you in your practice. What are the rural implications? Can your rural infrastructure maintain a service?

Share your experiences, concerns and any resources that you may have available. Use the listserver. Try these sites and please send us any that you might have <http://www.rcgp.org.uk/> <http://www.hpa.org.uk/>

## EURIPA's activities in Italy

During the last few months EURIPA has been officially invited to take part in two important events in Italy:

On the 28<sup>th</sup> of January, Professor Claudio Colosio from the International Centre for Rural Health of the S.Paolo Hospital-University of Milan organized an INVITATIONAL CONFERENCE on “BASIC OCCUPATIONAL HEALTH SERVICES IN AGRICULTURE” in Milan. Two Italian members of EURIPA, Paolo Mezzadri and Claudio Carosino, took part in the conference together with occupational health experts from WHO, ILO, and from national institutes from Finland, Serbia, The Netherlands, China and (of course) Italy. A statement will be prepared in order to focus on the importance of bringing occupational health services as close as possible to the rural workers by the essential contribution of rural GPs. Professor Colosio is also preparing a joint workshop with EURIPA on this topic to be held during the next WONCA Rural Conference in Crete.

Italian colleges belonging to WONCA and the Italian national representatives of WONCA networks met in ROME on the 6<sup>th</sup> and 7<sup>th</sup> of March at the “1st Conference of WONCA Italy”. The main topic was a specific Italian problem concerning the collaboration between Family Paediatricians (who in Italy take care of children in primary care in a GP capacity) and General Practitioners. The participants agree on the importance of improving collaboration either during childhood (taking care of problems together concerning the whole family), or during the switch of the child between the paediatrician and the GP (normally when he/she is 14 years old). During the conference some interesting experiences were reported of “mixed practices” between paediatricians and GPs. The meeting has been an important step toward a public recognition of WONCA network in Italy and its capacity to affect change in medical culture in Italy.

**Claudio Carosino**

## **UK - Royal College of General Practitioners announces "New RCGP Rural Forum" April 09**

In February 2009 the UK Council of the Royal College of General Practitioners determined that the Rural Practice Standing Group (RPSG) should be promoted to a College Forum for rural GPs. The RPSG had been calling for a non-geographical (virtual) faculty for some time. The majority of Council representatives voted against the creation of a Rural Faculty, probably in fear of creating a threat to the viability of existing geographical faculties.

The new Rural Forum will be open to any College member who expresses an interest in rural practice and will be piloted over two years after which its achievements will be evaluated and its future determined by the College. This is a very exciting development and it is hoped that the Rural Practitioners' Forum (RPF) will attract a large membership of grass root rural practitioners throughout the UK.

The main purpose of the Forum is :

- To develop a forum that will represent rural and remote general practitioners within the RCGP with the potential to promote rural issues within and out with the College faculties and be the rural face of the College
- To encourage engagement with the College of those fellows/members working in rural practice.
- To advance the College's objectives in rural practice.
- To facilitate communication between and networking of rural doctors across the UK.
- To support the professional development of rural general practitioners, with particular reference to the required knowledge, skills and attitudes of a general practitioner to care for patients in a rural setting.
- To promote remote and rural issues at appropriate level, engaging with the profession, managers and informing political debate.

Allied to the Forum is new Rural Blog\* which has been set up a member of the Steering Group of the new RPF. This is an excellent internet site that serves to inform and promote constructive debate about topical rural health issues and provides direct links to a wealth of other rural health related web sites. This is already proving to be a very useful resource for rural doctors and all those with an interest in rural medicine.

As chair of the new Rural Practitioners' Forum Malcolm Ward (a rural GP in Derbyshire, England) will be chairing a session at the Crete Conference looking at how rural doctors can benefit from forming groups both at local, national and international level. It should be a great opportunity to network and learn from the experiences of others.

**Malcolm Ward**

**Note\*:**

The new blog can be found at: <http://ruralgp.wordpress.com>

The web address for the new Rural Practitioners Forum can be found at: [www.rcgp.org.uk](http://www.rcgp.org.uk)

## A French / Spanish Experience of Hippokrates\*

I am a French GP trainee, practising in Strasbourg and during April this year, I have had the opportunity to experience a training period in the village of Xerta (Spain), as a participant of the Hippokrates programme\*. I wanted to follow this training period in a rural area because in my opinion, it is the best way to learn about the particularities of a country's family medicine system.

There are about 1200 inhabitants in the village, mostly elderly people, and some immigrants (especially from Morocco or England). The practice is led by Dr Jaume Banqué Vidiella. Other members of the staff include a nurse, a secretary and a social worker. Moreover, a GP and a nurse are present every night in order to attend emergencies.

I was welcomed by everybody and encouraged to join in all the activities. As a result of an increase in the number of patients attending every day (30 to 40 patients), I learnt even more than I had expected to on my arrival. I witnessed a different way of practice (in France, most of GP's work without a nurse) and the health system is organised in a different way. The most interesting point, was that getting into a different culture made me realise the importance of people's culture regarding the practice of family medicine.

Therefore I recommend the experience to every GP trainee!

**Julia Schmitt**



### Note\*

Hippokrates is a European exchange programme for Medical Doctors specialising in General Practice, supported by WONCA Europe through EURACT (European Academy of teachers in general practice). More information can be found at:

<http://www.euract.org/page02c.html>

## Rural Practice and a WHO Safe Community in Norway

Os Municipality is located close to the Swedish border, 400 km north of Oslo (the capital of Norway). The 2050 inhabitants are scattered over 1039 square kilometres, which means it is a very sparse population. The average altitude is 860 metres above sea level. Os has VERY cold winters (minus 10- minus 40 degrees Celsius !). About 30 % of the population is employed in the agriculture.

The medical services for Os are run from the Health Centre, which is located in the middle of the municipality. The GP's (two well experienced GPs and a trainee) are employed by the municipality and their income does not depend on how many patients they see. We find this suitable in a small rural community and it makes it possible to take part in cross-sectorial work. It also provides us with enough time to give our patients. Each year about 5000 patients visit the surgery. The GP's work very closely with health secretaries and nurses in the practice.

The District Medical Officer is the leader of the local health service, which includes, district nurses, a psychiatric service and physiotherapists. The District Medical Officer takes care of his patients and leads the public health service as well. I think this combination is ideal in a small community and gives me a good overview over the medical situation in the municipality and the factors that concern public health.

It is 40 km to the nearest hospital which is a small local hospital with departments for surgery and internal medicine. There are no paediatric or gynaecological services so there is a strong selection process for the pregnant women in order to identify expected normal births and potential problems.

The Out of Hours service is a cooperation with two other municipalities and 8 GP's takes part to take care for 10,000 inhabitants. The Out of Hours service lasts on weekdays from 15.00 - 08.00 and for 24 hours at weekends. The GP's work alone on call, but the doctors are involved only after initial triage by the nurses at the Out of Hours service centre. The nurses give advice and make decisions that assist the doctors. We prefer to see patients in the surgery, but do also make home visits. The on call surgery is located in the middle of the call district. The ambulance services are well equipped and the personnel are well qualified.

Os Municipality has achieved membership in WHO's Network of Safe Communities and became a member in December 2000.

The background and motivation for our application was that 10% of all consultations by GP's in Os were related to accidents. Not many of them were serious accidents and many of them should have been possible to prevent but over the years there has been some fatal accidents. In 1992 the Health Centre in Os Municipality started an investigation of these accidents. The registrations were carried out only in the agricultural community and in cooperation with the neighbouring municipalities and the Industrial Health Service. In 1999 we developed a new recording system for accidents as part of our computerised notes system. Certain diagnostic codes trigger a recording. This allows us easily to get an overview over the accident position in the municipality. There were a great motivation and enthusiasm amongst GP's and nurses at the Health Centre to take part in the work related to accident prevention.

Cross-sectoral cooperation has guided the administration in Os municipality in the last years. It was imperative for us to cooperate in this project in order to adhere to the criteria of the 'Safe Community', which allowed for a systematic organisation of already existing initiatives.

The political system and the administration board of Os Municipality has supported the work of preventing accidents and have themselves set a focus on the environment and traffic.

Key aspects are:

- Close relationship between Os municipality and the public
- Long term programme for accident prevention
- Automatic procedures based on a continuous recording system.
- Preventing accidents without "over-protection"

We have run the accident program for nine years. The number of accidents has been reduced by 40%. The number of accidents in the agriculture sector have been reduced by 50 % and the number of hip-fractures have also been reduced by 50%.

**Helge Lund**  
GO Os  
Norway

### **Just to remind you!**

#### **Diary Dates:**

Rural WONCA 2009	Heraklion, Crete, June 12 <sup>th</sup> – 14 <sup>th</sup>
WONCA Europe 2009	Basel, Switzerland, 16 <sup>th</sup> – 19 <sup>th</sup> September
Rural Doctor's conference 2009	Gregynog, Wales, 30 <sup>th</sup> September to 3rd October
EURIPA invitational conference 2010	Majorca, Spain, 14 <sup>th</sup> – 15 <sup>th</sup> May 2010
WONCA Europe 2010	Malaga, Spain, 7 <sup>th</sup> – 9 <sup>th</sup> October 2010
WONCA 2010	Cancun, Mexico, 19 <sup>th</sup> – 23 <sup>rd</sup> May 2010

The Editor would be delighted if EURIPA members could let us know of any events that would be of interest to other EURIPA members. Please email [Janers@irh.ac.uk](mailto:Janers@irh.ac.uk) with details and they will be put on to the web site.

Contributions have been edited and any errors or inaccuracies are the responsibility of the editorial team.

If you would like to make a contribution to the next Newsletter, which is scheduled to be produced after Crete, or to send comments please email [info@irh.ac.uk](mailto:info@irh.ac.uk)