Irish College of General Practitioners
Doctors get Symptoms too!

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Presentation to EAPH
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ICGP Health in Practice: based on international best practice...

2. Doctors’ health initiatives internationally
3. Literature reviews...ongoing
4. Extensive consultation...ongoing
5. Audit /Feedback from members and families
Needs Assessment (n=500)

- 48% have informally consulted a doctor for their personal health care.
- 66% do not have regular health checks (e.g. BP/cholesterol/smear/breast etc.) 73% GPs have consulted a consultant directly.
- 67% of doctors feel it is acceptable to self-diagnose and self-treat.
Structure of ICGP HiP

- HiP Education & Information Service
- HiP Healthcare Networks
- HiP Management Committee
Four Healthcare Networks

1. GPs
2. Psychiatrists
3. Counsellors, Psychotherapists, Psychologists,
4. Occupational Physicians

- All experienced independent practitioners (not ICGP employees)
- Attend Induction Day; HiP Network Manual
- Participate in formal & informal peer support
- Accessed directly through website directory
- Telephone helpline
ICGP Health in Practice Programme (HiP)

HiP is a system of CONFIDENTIAL healthcare support for GPs and their families. It aims to promote and maintain:

- good physical health,
- psychological health,
- occupational health
- and wellbeing.

- NB Proactive & Reactive
Challenges associated with healthcare for doctors

Healthy Doctors
- Promote and maintain healthy lifestyle options

Doctors at Risk
- e.g. past history
- Reduce exposure to avoidable risks. Minimise harm from unavoidable risks

Doctors with symptoms or concerns
- Early diagnosis and intervention

Doctors with Physical or Mental Illness
- Provide treatment. Aim for recovery or minimum disability

Education
- (Student → Retired)

Interventions to Prevent ill-health

Skills & knowledge in Dr Patients and Dr Doctors

Structured Services and Follow-up Care

www.icgp.ie/hip
Audit & Feedback

- National Service provided by 150 health professionals
- Audit: Network Activity Questionnaires (NAQs): all types of acute and chronic medical conditions including mental health.
- 5-8% users are doctors who are not GPs.
Health in Practice Milestones

2000 - HiPP Information and Education Service,
2001 - National Needs Assessment Survey
   ‘Managing Health and Safety’ Publication 1st Ed
2002 - HiPP Healthcare Networks launched, 1st Annual Seminar
2005 - 1st National Conference on the Health of Doctors /M Council
2006 - AMA-CMA International Conference Physician Health, Ottawa, Canada.
2007 - Managing Occupational Health & Safety in General Practice, 2nd Ed online 2007; EQuIP Doctors Health Working Group; Wonca Europe, Paris
2009 - NCAS London. Wonca Europe, Basel, Switzerland; ISQUA, Dublin. EAPH, Oslo
Why do doctors need personal healthcare support?

- Deficiencies with accepted ‘traditional’ arrangements for doctors’ healthcare
- Complex issues to be considered within a consultation between two doctors
- Occupational hazards associated with working in medicine especially *psychosocial & *chemical
We are Individual Doctors (Humans) in Society

Society - economy, politics, cultural and social expectations
Job Hazards specific to medical doctors

- Unique relationship with patients
- Responsibility, decision-making
- Uncertainty
- Medical error, complaints, litigation
- Medical Information overload
- Distress & death of patients e.g. suicide
- Self-Care boundaries
- Self-prescribing
Risk factors

- Personality / our past / vulnerabilities
- Professional training... role models / teams / interpersonal skills
- How we manage our job in our lives...”occupational lifestyle”
During our careers (…40yrs?)

- We can expect to experience a symptom or sign from our own body of some illness
- Doctors experience morbidity & mortality
- We might need to consult a doctor sometime!
There are issues for doctor and patient when the patient is a doctor

- Assumptions & embarrassment
- Taking short-cuts: Q’s, Ix, Ex
- Who is responsible for what?
- How is advice given?
- Patient Fear: stigma, identity…
- Role reversal & control
- Knowledge gaps

A Rochfort. Forum ICGP 2003
Consultation Checklist ©ICGP

- Presenting complaint; are questions asked?
- Medical History
- Clinical Examination: no shortcuts
- Investigations: procedure & process
- Prescriptions: negotiation, information, interactions
- Referral: outpatient and inpatient, choice
- Clear Plan for follow-up, results, progress
“Quality issues in Complex Consultations: when the Patient is a Doctor”

Andrée Rochfort, ICGP, Ireland
Luc Lefebvre, SSMG, Belgium
19th September 2009
If it’s not good for patients why is it good for doctors?

- Doctors admitted to hospital on the morning of surgery
- “Why don’t you just titrate your own analgesia (codeine)”
- “You should know how to manage your own illness”
Who expects us to be Superman?
Doctors...patients...peers...media...
Global warning: These are global issues!
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