

# ORGANISING A FAMILY PRACTICE SKILLS COURSE IN WOMEN'S HEALTH

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## ABSTRACT

One fulfilment of the requirements for the MCFP by certification was the Professional Development Project. For this project, the author sets her terms of reference as: the involvement in organising a family practice skills course (FPSC) in Women's Health in January 2006; a review of the history of FPSC in the local context; and the processes involved in the planning and running of this course. An appraisal of the seminars and workshops has also been included in this report.

**Keywords:** family practice skills course, continuing medical education, Women's Health, Pap smear

## INTRODUCTION

One fulfilment of the requirements for the MCFP by certification was the Professional Development Project. For this project, the author sets her terms of reference as: the involvement in organising a family practice skills course in Women's Health in January 2006; a review of the history of FPSC in the local context; and the processes involved in the planning and running of this course.

## OBJECTIVES OF THE COLLEGE DEVELOPMENT PROJECT

The Professional Development Project is one of the three modules required for the award of Collegiate membership. This project is carried out under the supervision of a mentor, and may be, though not limited to, one of the following:

- ┆ Organising and conducting a modular CME course or other teaching programmes.
- ┆ Publishing a paper in a medical journal such as the Singapore Family Physician or its equivalent.
- ┆ Undertaking other professional development projects approved by the College Council.

## REVIEW OF THE FAMILY PRACTICE SKILLS COURSES

The Family Practice Skills Course (FPSC) was set up in the year 2003 to meet the CME needs of family physicians as the result of the SMC's mandatory 25 CME points per year. CME became compulsory for all doctors in Singapore from 1 January 2003, and became a requirement for renewal of practising certificates (PCs) from 1 January 2005. The required CME points for renewal of PCs are 25 per calendar year, of which 13 must be core family medicine points<sup>1</sup>.

The FPSC was developed by the College of Family Physicians Singapore (CFPS) as a quality Continuing Medical Education (CME) programme to meet core family medicine training requirements, for skills certification, and for Graduate Diploma in Family Medicine trainees for their elective skills course.

The College leadership felt that in order for the FPSC to be useful to practitioners, the content of such courses should be to inform practitioners of recent advances and current best practice. There should also be workshops to hone practice focused skills of clinical reasoning, case diagnosis, case management and procedural skills. Also they must be accessible, and easy to pick up. The range of topics covered in the past 3 years is shown in Table 1.

## THE WOMEN'S HEALTH SKILLS COURSE

The Women's Health FPSC seminars were held on 14 and 15 January 2006. The objective of the course was to update practising doctors on the knowledge and skills in women's health.

### Components of the Women's Health Skills Course

The Women's Health FPSC had components similar to previous skills courses conducted since 2003.

The component of distance learning course consisted of six units which were

- ┆ Menopausal Health in Women
- ┆ HIV Infection and Other Sexually Transmitted Infections
- ┆ Breast Biopsies – When, Why and How
- ┆ Reducing the Risk of Gynaecological Cancers
- ┆ Cervical Cancer Prevention
- ┆ Pap Smears: Techniques, Interpretation of Results and Management of Abnormal Results

Verification of the distance learning course was by multiple choice questions.

On the 14th and 15th January 2006, there were two seminars covering the six units of the distance learning course, a workshop on two case studies on Women's Health and a hands-on practice on Pap smear technique using manikins for pelvic examination.

In addition, the FPSC included an optional clinical attachment at the Gynaecological Cancer Centre in KK Women's and Children's Hospital as one of its course components to hone the doctors' skills in the correct technique of performing Pap smears.

The final component of this course is reading five out of ten recommended current readings on topics related to Women's Health.

A certificate of course completion will be awarded to those who have completed all the course components.

**Table 1. Family Practice Skills Course Topics**

Dates of Seminars	The Singapore Family Physician issue	Topic
23 Jan 2003	Vol. 28 No. 4 / Oct – Dec 2002	Elderly & Home Health Care
23 Feb & 3 Mar 2003	Vol. 29 No. 1 / Jan – Mar 2003	Asthma
6 & 7 Sep 2003	Vol. 29 No. 2 / Apr – Jun 2003	Hypertension
12 & 13 Jul 2003	Vol. 29 No. 3 / Jul – Sep 2003	Musculoskeletal Disorders
11 & 12 Oct 2003	Vol. 29 No. 4 / Oct – Dec 2003	Hyperlipidaemia
29 & 30 Nov 2003	Vol. 29 No. 4 / Oct – Dec 2003	Men's Health
21 & 28 Feb 2004	Vol. 30 No. 1 / Jan – Mar 2004	Pain Management
10 & 11 Apr 2004	Vol. 30 No. 2 / Apr – Jun 2004	Atherothrombosis
4 & 5 Sep 2004	Vol. 30 No. 3 / Jul – Sep 2004	Consulting, Communication and Counselling
6 & 7 Nov 2004	Vol. 30 No. 4 / Oct – Dec 2004	Diabetes Mellitus
19 & 20 Mar 2005	Vol. 31 No. 1 / Jan – Mar 2005	Asthma
3 & 10 Apr 2005	Vol. 31 No. 2 (supp) / Apr – Jun 2005	Obesity
16 & 17 Jul 2005	Vol. 31 No. 2 / Apr – Jun 2005	Vaccinations and Prevention of Infectious Diseases
30 & 31 Jul 2005	Vol. 31 No. 3 / Jul – Sep 2005	Clinical Quality
22 & 23 Oct 2005	Vol. 31 No. 4 / Oct – Dec 2005	Developments in Diagnosis and Management
14 & 15 Jan 2006	Vol. 32 No. 1 / Jan – Mar 2006	Women's Health
18 & 25 Mar 2006	Vol. 32 No. 2 / Apr – Jun 2006	Dementia

## ORGANISING THE COURSE

The processes of organising the course, which are not known to many, are described here.

### The Development Committee

The development committee for the Women's Health FPSC comprised a Consultant Obstetrician & Gynaecologist, Senior Family Physicians and Family Physicians. The role of the development committee was to conceptualise, plan and develop the course. The course was supported by a grant from the Health Promotion Board.

KK Women's and Children's Hospital and Singapore General Hospital provided the specialist panel of doctors who supplied the articles for the distance learning course units, and served as seminar speakers for those same units. KKH also served as the training ground for the clinical attachment component.

National University of Singapore provided the manikins for the pelvic examinations held during the workshops.

### The Decision Making and Administrative Processes

#### *The Course Content*

Once the theme of a FPSC has been decided on, the date and time has to be fixed and a venue reserved. The development committee was responsible for defining the course objective and developing the topics for the seminars.

#### *The Expert Panel*

In the discussion with A/Prof Tay Eng Hseon, the Chairman of KKH's Medical Board, an expert panel of resource persons was appointed, taking into consideration the special interests of the

various specialists. The College Secretariat issued letters to the appointed personnel inviting them to be the resource persons for the FPSC.

#### *The Publicity*

The course was publicised in the College Mirror, the Singapore Family Physician Journal and the College's website. A registration form was attached with the publicity which included information such as the course dates and timing, course structure, and course fees. It can also be downloaded from the College's website.

#### *The Publication of the Singapore Family Physician*

The College secretariat liaised with the resource persons with regards to submission of articles for the journal. The articles were collated and sent to a designer for typesetting, then to the printers for printing. The Singapore Family Physician volume 32, number 1 for January to March 2006 consisted of 2 editorials, 6 distance learning course units on Women's Health, assessment by multiple choice questions, and 10 recommended readings on Women's Health. There were also 2 original papers by Dr Soh Soon Beng, and Dr Tham Tat Yean<sup>2</sup>.

#### *Administrative Processes*

Apart from coordinating with the resource persons and preparing for the publication of the Singapore Family Physician journal, the College secretariat was also responsible for preparing the budget and honorarium payments, booking the Auditorium for the seminars and workshops, arranging for technical support during the course, catering of food for the two afternoons, preparing the attendance list for registration and applying for CME points for the course.

### ***CME Application and Certification***

CME points were applied through the SMC website for accreditation of the course. Attendance of the seminars and workshops was kept for the purpose of CME point calculation. These points were entered into the SMC CME website. Certificates of course completion will be issued to participants who fulfil all components of the course.

## **THE OUTCOME**

### **An Appraisal of the Seminars**

The seminars, held on 14th and 15th January 2006, were well-attended.

Dr Khong Chit Chong gave an entertaining talk on menopausal health in women. The scope of his talk covered the management of vasomotor symptoms, contraception counselling and choice, prevention and management of osteoporosis, and obesity. Dr Khong also gave pointers in bone-building exercises and taught the participants how to perform the "stork stand".

Dr Fong Kah Leng dealt with sexually transmitted infections (STIs) in women. She took participants through some slides of the visible STIs and also discussed the invisible STIs, focusing particularly on HIV infection.

A/Prof Hong Ga Sze discussed the role of mammography screening for breast disease as well as the role of ultrasonography for the evaluation of breast lumps. He equipped participants with the knowledge of when to refer patients to a breast surgeon, and how to reassure patients who do not need referral.

A/Prof Tay Eng Hseon took participants through screening examinations and tests for cervical, ovarian and endometrial carcinomas. He discussed risk assessment for these cancers and the advice to give to women on how to reduce these risks.

Dr Jeffrey Low traced the decline of cervical cancer in Singapore. He discussed the role of Cervical Screen Singapore and the refinements of Pap smear sampling in the form of liquid-based cytology, and the role of HPV DNA testing. He also outlined risk-reduction measures that can be taken for cervical cancer prevention.

Dr Fong Kah Leng brought participants through the techniques of Pap smear sampling and slide preparation. She discussed the new Bethesda system for reporting of Pap smear results, and how to correlate it with the old CIN system, and the older Pap system. She also discussed the management of abnormal results.

### **An Appraisal of the Workshops**

The workshops were held as 2 repeat sessions. Dr Quek Swee Chong gave participants useful tips on what to say to women with regards to the role and limitations of Pap smears.

He discussed the questions of:

"How did I get an abnormal Pap smear result?"

"How did I get HPV infection?"

"Does this mean that my husband is sleeping around?"

He identified the concerns of most women when their Pap smear results come out abnormal, and detailed how to counsel the anxious woman.

Dr Quek discussed which abnormal Pap smear results warrant a referral for colposcopy. These include:

- ┆ Dyskaryosis with CIN I, II or III
- ┆ 2 consecutive ASC-US
- ┆ ASC-H
- ┆ 3 consecutive inflammatory Pap smears despite treatment (soon to be excluded)
- ┆ Any glandular abnormality
- ┆ Carcinoma
- ┆ Clinically suspicious cervix in spite of normal Pap smear results
- ┆ Endometrial cells in women >40 years old or in younger women with intermenstrual or post-coital bleeding
- ┆ Suspicious symptoms

He discussed the management of inflammatory smears and the new recommendations. Case studies with specimen Pap smear reports were discussed. He recommended that inflammatory smears which meet the criteria of being an adequate specimen, showing absence of dyskaryosis, and the summary report being negative should be labelled as normal. The Pap smear can consequently be repeated annually.

Dr Quek went through slides to identify the normal variations of cervixes, and cervixes with various pathologies. A video on the technique of performing Pap smears produced by Health Promotion Board was shown.

There was a practical hands-on session on how to perform Pap smears on manikins. Dr Quek gave practical tips on the insertion and manipulation of the speculum to visualise the cervix. He also discussed the pros and cons of using the various cervical cell sampling devices.

Ox tongues were used as mock cervixes for participants to practise Pap smear sampling and slide preparation. Dr Quek personally checked the slides prepared for adequacy.

Overall, the workshops were informative and useful, even to doctors who have been performing Pap smears for years.

## **THE CLINICAL ATTACHMENT**

This is a special part of Women's Health skills course. Clinical attachment is not included in other courses. Its purpose is to help doctors get hands-on training in proper Pap smear technique. Arrangements were made with the KKH Gynaecological Cancer Centre manager and specialists. A roster was drawn up for family physicians to be individually attached to a specialist for a clinic session. The 3 to 4-hour attachments are available from late January to early May 2006 on a first come first served basis.

## **CONCLUSIONS AND LESSONS LEARNT**

It was an incredible learning experience to be part of the team responsible for developing the Women's Health FPSC. I

learnt the minute details required for the successful running of a skills course.

The secret to a successful skills course is the College Secretariat; it has been instrumental in coordinating the whole course. The College has been meticulous in keeping track of the timeline and seeing to every aspect of the course. As the article submission deadline for the journal approached, the sense of urgency was palpable.

When the FPSC came to life in the seminars and workshops on the 14th and 15th January 2006, I felt an enormous sense of satisfaction. Apart from organising the FPSC, I was also a course participant. The course served its purpose in keeping me abreast of the medical advances with regards to the various aspects of women's health covered in the course.

## ACKNOWLEDGMENTS

I would like to acknowledge A/Prof Goh Lee Gan for his invaluable mentorship. Thanks are also to be accorded to Dr Lee Kheng Hock for his guidance during the development of the course, and to Dr Tan Yew Seng for his ideas and discussion on the running of a skills course. Special thanks to the College secretariat, especially to Ms Ng Minfen for providing information on the work processes involved in the running of the skills course, and coordinating the various aspects of the course.

## REFERENCES

1. A/Prof Goh Lee Gan. CME Implementation. SMA News, April 2002, Vol. 34 (4).
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