

GPCLE Framework

BEST PRACTICE CLINICAL LEARNING ENVIRONMENTS IN GENERAL PRACTICE

WHY?

The General Practice Clinical Learning Environment (GPCLE) Framework describes the specific general practice learning context. It is a resource to guide existing teaching practices and support new supervisors with the practical implementation of practical high-quality clinical learning in general practice. This framework covers all types of learners.

WHO?

Many factors influence learning in the general practice environment. There is also wide variation in practice learning contexts, including practice location (urban, regional, rural, remote), services provided, distance to other facilities and resources, practice size, and the business model (many GP supervisors are small business owners.)

Regardless of this variation, this framework has six key elements to guide high-quality learning fit to any setting.

HOW?

This document sets out the six key elements of a high-quality learning environment in a GP setting, and underlying objectives. These are based on published evidence, and feedback from experienced GP supervisors, GP registrars and practice managers over a 12 month period.





General Practice Clinical Learning Environment Framework

Six key elements and associated objectives of a high-quality learning environment in a GP setting







Element 1: The practice values learning

The value the general practice places on learning and education will be reflected in its internal policies and procedures and in the ways the general practice approaches educational activities.

OBJECTIVES	DESCRIPTION
1.1 Education is valued	 The practice values education, lifelong learning and evidence-based practice Educational activities are viewed as beneficial to practice staff as well as learners Learning is prioritised within the business and included in internal policies and procedures.
1.2 Educators are valued	 Supervision and teaching roles are included in the position descriptions of all staff involved in teaching Time is allocated for teaching and learning coordination The skills and qualifications of educators are respected and rewarded Supervisor competencies are defined and supervisor learning and skill development is facilitated.
1.3 Learners are valued	 The arrival of learners is anticipated and planned Learners are treated as part of the team, respected for what they bring (new ideas, critical appraisal, future workforce) and given opportunities to learn Learners are presented to patients in an appropriate way and patients are encouraged to be accessible for learners.
1.4 Teaching is planned	 The practice considers the impact of learners on all aspects of practice operations and takes this into account during planning. This includes planning for: supervision and support roles teaching activities business operations and resources social activities and learner inclusion.







Element 2: Best practice clinical care

Quality improvement and best practice clinical care is the goal of every general practice. For a general practice involved in clinical education, best practice has an educational significance. Not only does the general practice need to deliver the best possible patient care, it needs to model the process of identifying, implementing and testing the best available evidence.

OBJECTIVES	DESCRIPTION
2.1 There is a commitment to quality care and quality improvement	 Quality care is included in the practice mission or values statement and is monitored through the accreditation processes Quality care is supported by policies that encourage and enable high quality care All staff are trained and engaged in quality assurance processes and initiatives.
2.2 Practice staff are highly skilled and competent	 The practice recruits highly skilled staff and develops skills and knowledge for all clinical team members Practice staff display appropriate interpersonal and professional attributes and role model good clinical practice.
2.3 The practice uses evidence in clinical decision-making	 Individuals take responsibility to adopt best evidence into clinical practice The practice has processes for identifying and adopting best evidence into patient care.







Element 3: A positive learning environment

A positive teaching and learning environment is essential for high-quality learning in general practice.

OBJECTIVES	DESCRIPTION
3.1 The environment is welcoming	 Learners receive an appropriate orientation and induction to the practice and are included in relevant team-based activities Members of the practice team have a positive and welcoming attitude towards learners.
3.2 The environment is safe	 The teaching practice is a non-judgemental, tolerant environment where learners feel safe to participate and ask questions An open disclosure framework is used so mistakes or concerns can be identified and discussed There are realistic expectations of learners and supervisors Social, mental health, cultural, professional and physical safety is addressed.
3.3 There is clarity about learning objectives, needs and interests	 Learning plans are developed, written down and agreed by the learner and supervisor at the commencement of placement There are appropriate learning opportunities, for the learner's stage of learning and learning objectives The training practice has access to a sustainable patient load for the learner to address their minimum clinical hours and learning needs Learning opportunities draw on peer-to-peer, interprofessional and supervisor-led learning, engaging with a relevant range of patients Learning encompasses professionalism, teamwork, communication, business, clinical and administrative duties to help learners become practice-ready.





OBJECTIVES	DESCRIPTION
3.4 GP supervisors and other teaching staff support effective learning	 GP supervisors and other teaching staff are suitably trained, prepared for the task and resourced for teaching Learners have access to experienced GP supervisors as required Team supervision arrangements enable supervisors to have breaks during the term Problems are identified and discussed At risk learners are identified and assisted.
3.5 Learners gain knowledge and skills specific to general practice	 The practice supports the learner to: develop and demonstrate professionalism relevant to the business adapt their learning style to the general practice environment prepare, reflect and respond with professional accountability understand the differences between general practice and other clinical settings connect learning experiences from other environments to develop learning continuity.







Element 4: An effective general practice – training provider relationship

Clinical education and training is a collaborative arrangement between the practice and training providers. This draws on the complementary skills, experience, resources and expertise for learning. General practice and training provider relationships are unique and depend on mutual respect, collaborative work and strong communication.

OBJECTIVES	DESCRIPTION
4.1 Partnerships are respectful	 The practice engages with training providers using respectful relationships All parties acknowledge each other's institutional drivers and limitations.
4.2 The practice and training providers work together to optimise learning opportunities	 Practices are able to access the resources needed to support effective learning, which may include: resources to support supervisors support for both the learner and the practice when a learner is struggling administrative support for onboarding new learners professional development for supervisors Practices assist training providers by providing assessments in a timely manner and facilitating visits by external educators and assessors.
4.3 There is open communication between the practice and the training provider	 There is an identified point of contact for GPs within training-related organisations There is regular dialogue between the practice and the training provider, including face-to-face meetings as often as practicable Real-time positive and constructive feedback is provided Natural justice principles are followed in relation to complaints Risks are identified and managed Practices are able to get assistance if they need help.
4.4 Written agreements are in place	• There is a written agreement between the practice and the training provider that sets out expectations and responsibilities of each organisation in the delivery of training.





Element 5: Effective communication processes

Effective communication is a key component of high-quality learning and involves modelling good communication between practice staff and learners.

OBJECTIVES	DESCRIPTION
5.1 Supervisors and trainees have regular and sensitive dialogue about learning	 All participants in teaching and learning activities endeavour to: communicate with each other about information, ideas and resources relating to educator and learner needs engage in regular formal and informal conversations and meetings use active listening skills use a variety of communication channels (face-to-face, email, telephone, online) display sensitivity to cultural, gender and sexual diversity Reflect on and integrate feedback into practice Provide feedback that is: specific, timely, constructive, supportive, balanced and two-way.
5.2 Practice staff use high standards of communication	 The practice staff and learners are educated about what is meant by good communication and how to achieve it The practice has a written protocol about communication which sets out organisational structures and processes and describes actions, behaviours, expectations and responsibilities of practice staff and learners The practice regularly reviews its communication practices in light of changes in environment and circumstances.





Element 6: Appropriate resources and facilities

Resources are suitable for learning in general practice.

OBJECTIVES	DESCRIPTION
6.1 The practice provides infrastructure and resources to enable learning	 The practice provides relevant resources and facilities to meet the needs of the supervisor and the learner. This includes: infrastructure and equipment (including consulting rooms, appropriate medical equipment, and areas for study, research and reflection) IT and communication resources (including computer and internet access) teaching and learning tools (including templates for placement planning, assessment and access to online libraries and resources) amenities (including kitchen, common room, locker and staff toilets).

The GPCLE has been adapted for general practice training environments from the Best Practice Clinical Learning Environment (BPCLE) Framework as part of a research project funded by the Australian Government via the Australian General Practice Training (AGPT) Program.

Monash University, The University of Queensland Rural Clinical School and MEERQAT Pty Ltd collaborated on the development and testing of this framework with GP Supervisors and GPSA. The BPCLE Framework development was originally funded by the Victorian Department of Health. We would like to thank all of the GP Supervisors who continue to contribute to the GPCLE Framework's ongoing refinement.

To cite: Hickson H, O'Sullivan B, Kippen R, Cohen D, Cohen P, Wallace G. GPCLE Framework: Best practice clinical learning environments in general practice. Bendigo: GPSA; 2020 p. 1-5. Available at: <u>https://gpsupervisorsaustralia.org.au</u> or <u>https://doi.org/10.26180/13338980</u>