

# The General Practice Research Club

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**SUMMARY.** *The General Practice Research Club was established in 1969, and now has 120 members. A meeting of the club is held twice a year, at which various papers, from research ideas through to completed, published studies are presented. A survey of 40 individuals who had presented papers at meetings during the period 1984–89 showed that almost half (18) had presented papers on clinical topics. As a result of the presentation, 29 individuals had modified their research, with 11 undertaking major alterations. The meeting was rated most highly by those offering ideas and plans for research. Most individuals responded positively to the meetings, commenting that they valued peer review, found the meetings encouraging, and useful for focusing ideas. Lack of criticism and feedback was commented upon. The club has an important role to play in encouraging research by service general practitioners.*

## Introduction

**T**HE General Practice Research Club was established in 1969, following a research methods course organized by the Royal College of General Practitioners. The club has been almost continuously active over the last 20 years, and has provided a unique setting for general practitioners to meet in an atmosphere which is friendly, supportive and constructively critical. This paper summarizes the club's activities from 1984 to 1989 and reports the results of a survey of all those who made presentations at the meetings, enquiring about the impact and value the club has had on the development of their research.

## Organization

The General Practice Research Club officers consist of a chairman, an honorary secretary and an honorary treasurer, whose administrative and organizational work is funded by an annual grant of around £300 from the Royal College of General Practitioners, a modest annual membership subscription of £10 and support from the pharmaceutical industry. The last includes assistance with the printing and circulation of mailings, the provision of travelling fellowships, and supporting visits by members to meetings of the European General Practice Research Workshop.

The club meets each Spring and Autumn, usually at a university, for a Saturday research symposium, with an informal dinner on the previous evening. Between 1984 and 1989 the club has convened in Southampton, Warwick, Bristol, Sheffield, Newcastle, Nottingham, York and Oxford. On two of these occasions the meeting has been linked to the Royal College of General Practitioner's research methods courses, the first of which took place

in 1986 as a joint venture between the General Practice Research Club and the RCGP.

Meetings attract approximately one third of the club's paid up membership of 120 individuals. Of the membership approximately two thirds do not belong to an academic department of general practice. A prior request for papers for presentation emphasizes that research ideas, pilot projects and work in progress are as acceptable as completed studies. A typical day's programme comprises a series of papers, each with about 30 minutes for presentation and discussion. Locally based experts are invited to give one or more lectures on a methodological topic or a research area, often in the social sciences. Occasionally a meeting incorporates a workshop session for small group discussions. Generally the meetings are approved for the postgraduate education allowance.

## Analysis of meetings 1984–89

Nine meetings were held during the period 1984–89, at which there were 57 presentations and two workshop sessions. Seventeen of the presentations were by invited speakers and 40 were original research papers. The former included eight general practitioners, speaking on a variety of topics including research methodology, methods of data collection, the European general practice research workshop, the European referral study, the health needs of the elderly and the symptom iceberg of illness. There were also presentations from two health economists, two sociologists, two statisticians, a psychiatrist, a community medicine specialist and a medical journal editor.

The original research presentations fell into five main categories:

**Clinical.** There were 18 presentations on various clinical topics, including otitis media, dyspepsia, polymyalgia rheumatica, urinary tract infection, the management of patients with myocardial infarction, medical hazards of the 'fun run' and the links between sugar in medicines and dental caries.

**Delivery of care.** One paper reviewed the organized care of diabetes and another analysed referral letters and their replies.

**Psychosocial topics.** Two papers dealt with the value of counselling in general practice, and the problems of benzodiazepine use.

**Prevention and health education.** This group of six research papers covered such topics as paediatric surveillance, patient-held records, the recognition and management of smoking and problem drinking and a discussion of the aims of the WHO's Alma-Ata declaration.

**Consultation and workload.** Twelve papers presented research on such topics as the use of time, decision making by general practitioners, prescribing costs, the physical arrangement of surgery furniture, continuity of care, and general practitioners' attitudes to their work and to their health.

A structured questionnaire was sent to each of the 40 speakers who had presented a research paper, asking for the title and when and where they had presented it to the General Practice Research Club. They were asked whether their presentation concerned research ideas or plans, preliminary results or a completed study, either published or unpublished. Respondents were also asked whether their proposals or reports had been influenced by comments at the meeting; about subsequent publication; and to rate the overall value to themselves of giving the presentation on a

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scale of 0 to 10. The questionnaire also sought open comments.

The results of this survey are summarized in Table 1. Seven of the 40 presentations represented ideas or plans for research; preliminary results were given in 19, 11 were completed but unpublished studies and three were already published. Modifications of varying degree were made by 29 of the respondents. The presentation resulted in significant or very important changes to 11 projects or reports, mostly in relation to preliminary results. Of the 37 studies unpublished at the time of presentation, 17 have since been published. The overall value of the General Practice Research Club meetings was rated most highly by those presenters offering ideas and plans for research, then by those reporting preliminary results and least by those describing completed work.

**Table 1.** Responses to survey of 40 presentations at General Practice Research Club meetings.

	Number of respondents presenting:			
	Research ideas/plans (n = 7)	Preliminary results (n = 19)	Completed study, unpublished (n = 11)	Completed study, already published (n = 3)
<i>Extent of subsequent modification:</i>				
Unchanged	1	4	3	—
Minor	4	8	6	—
Significant	1	7	2	—
Very important	1	0	0	—
<i>Paper now published</i>				
	2	8	7	3
<i>Value to presenter (max 10)</i>				
Mean ± SD	6.1±2.0	5.9±2.5	4.6±2.9	—

n = total number of respondents. SD = standard deviation.

The comments given by respondents about the value of the General Practice Research Club meeting were generally favourable. Negative comments included disappointment at the lack of feedback following the presentation. Two respondents commented that the audience was insufficiently critical. Positive comments included encouragement, motivation and enthusiasm, confirmation of relevance of the research work, having to think more carefully about the project before presentation and the educational value of the meeting itself. Those presenting preliminary results commented that speaking sharpened the focus of their work; that it 'made the project seem worthwhile again'; that they appreciated the effect of a deadline; that the audience was a helpful poll; and that they had been able to make contact with other researchers in an enjoyable setting. The presenters of unpublished studies stated that the meetings provided stimulation, focus, clarification and were a useful learning experience for the presentation of research information.

## Discussion

The General Practice Research Club continues to thrive, as shown by the recent innovation of a successful and well-attended joint symposium with the GP Writers' Association on speaking and writing about research. The experience of the last five years confirms that while general practitioners outside university departments can be enthusiastic about research, their terms and conditions of service present an obstacle to establishing protected time for original work. These constraints are likely to become more severe with the advent of the new contract, in which the

emphasis on processed care will render the pursuit of original research even more of an out-of-hours activity.

The survey of 40 presenters at General Practice Research Club meetings over recent years shows the welcome effect of peer review in modifications to research proposals and projects as a result of presentation, and, more subjectively, in the feelings of encouragement and support from fellow members. The majority of General Practice Research Club members do not belong to academic departments so may suffer from isolation and might have difficulty otherwise in identifying an interested and critical audience for their work.

Research in general practice has developed considerably over the last decade and the subject has an increasingly sound and substantial academic base. Although much of this progress has resulted from the development of university departments of general practice, the roles of the Royal College of General Practitioners and of service practices have been substantial. We should cherish this tradition of clinical research in 'ordinary' general practice. Vocational training and preparation for the MRCGP examination can introduce and encourage critical reading and original enquiry, but the new practitioner, faced with the responsibilities of partnership and family and contractual obligations, will find it increasingly difficult to initiate and sustain research interests. A recent presentation to the 1990 national trainees' conference revealed an encouraging degree of interest in research and in the role of the General Practice Research Club. The General Practice Research Club offers support and friendship for NHS general practice researchers, many of whom have enjoyed and profited from its meetings over a number of years. The group deserves our support for its role in promoting and encouraging practice-based research in British primary care.

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## Further information

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