

# A pause for thought: reflections on the 2011 SAPC Annual Conference

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On behalf of the Society for Academic Primary Care

The 41st Annual Scientific Meeting of the Society for Academic Primary Care (SAPC) was held in Bristol. A packed and varied programme,<sup>1</sup> together with excellent organisation, brought people together to share ‘breaking news’ in primary care teaching and research.

However, conferences are about more than dissemination of new work. They offer opportunities for activities not easily achieved by other forms of communication and scholarly activity. Conferences should be a ‘festival for ideas’: stimulating new conversations and new thoughts, as well as critiques of existing ideas.

We asked a selection of this year’s Conference goers to send us a few words on ‘something that made me stop and think’. Here we reflect on what they tell us about SAPC’s goal to ‘support, promote, and develop the discipline of academic primary care’.

## **Promoting excellent teaching, research, and critical reflection on primary care practice and policy**

Teaching had a more prominent focus at this year’s Conference. LY welcomed the opportunities offered by both a dedicated education parallel session and an education research workshop. However, others commented on the need to go further. FM posed this challenge:

[The conference] really made me think about my undergraduate experience at university. [I] received minimal exposure to primary care training and in particular,

academic primary care. [We] need a structured push to increase awareness (FM)

Many people highlighted pieces of cutting-edge research that would change clinical practice.

The translation of research into everyday clinical practice was a strong point of SAPC and why I will be attending again next time. (SS)

The thing that made me stop and think was realising the contribution of general practice research to patient care. (SN)

Panel sessions, with programmed time for extended discussion and debate about a sequence of thematically linked papers, were particularly successful in encouraging ‘critical reflection’. DK attended the session on Domestic Violence:

I was challenged and encouraged by the resultant debate ... I will eagerly await results [of further research], and ... [am now more] aware of my role in referring, supporting, and empowering victims of domestic violence.

## **Recognising the importance of a multidisciplinary membership of SAPC**

SAPC has long recognised the importance of multidisciplinary working to support excellence in academic primary care (APC). The 2011 Conference brought together academics from 16 different disciplines to explore the need for/potential value of a new multidisciplinary Special Interest Group.

Discussions revealed ongoing tensions between a personal commitment to the field of APC and a lack of career progression opportunities outside

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<sup>1</sup>Details of the programme are still available on [www.sapc.ac.uk](http://www.sapc.ac.uk)

of individual disciplines. Issues of identity were to the fore: feeling 'isolated' from a personal professional discipline but without sufficient sense of an alternative? Coming together in a group was felt to be a valuable start. Watch the SACP website for further information on this group.

### Valuing a distinctive primary care approach

These issues of identity continued outside the multidisciplinary group meeting.

The importance of bringing people together for building a shared identity was a common theme, with both the 'structure' and 'content' contributing to this:

the informal but modern vibe to the conference with twitter feeds throughout the lectures (TB)

the creative atmosphere ... tempered only by scepticism and a willingness to separate speculation from observation. I left feeling that academic primary care is a way of thinking as much as a body of knowledge (GI)

However, the uncertainties expressed in the multidisciplinary group were also reflected elsewhere. Might the 'specialisation' of APC, at least APC research (Rosenthal *et al.*, 2011), be contributing to a fracturing of identity?

The discussion on 'the personal patient – is it still possible or old fashioned' made me wonder, what, and if, British and German General Practice still have as core values in common. (HA)

David Pendleton's plenary on developing leaders and leadership perhaps has messages for us not only as individuals but collectively as a discipline.

There are not many key note speeches on the last day of a conference worth missing a train back home but David Pendleton certainly lived up to the billing. The primary

colours of leadership (setting direction, building and sustaining relationships) warrants further thought and consideration. (UC)

(Pendleton's slides can be found on the SACP website and his paper will be published in *Primary Health Care Research and Development* as a Masterclass Paper in 2012.)

### Conclusion

Reflection reveals a Conference that offered the hoped for 'festival for ideas'. Nevertheless, recurrent issues about identity are striking and warrant further thought, not least because of the implications for SACP's principle of 'valuing a distinctive primary care approach'.

What can we learn for next year's Conference? Reflections highlight the fact that opportunities to present are important in developing identity, but that there must also be sufficient time for debate and discussion: to critique existing ideas and spark new ones, while still maintaining a shared sense of a distinctive approach. The recent introduction of Panel sessions has been a good start here.

At her plenary, Fiona Godlee spoke of the evolution in medical journalism needed to adapt to a changing scientific, academic, and consumer world; while reflecting on recurrent concerns about the need to balance excellent science with excellent journalism. Perhaps this challenge extends also to the SACP conference? How can we best maintain the scientific credibility of debate while not letting the science stifle new ideas? Perhaps moving on from a festival for ideas, to a Festival of Dangerous Ideas?<sup>2</sup>

We'd love to hear your thoughts on all this. Share them on our discussion board.<sup>3</sup>

### Reference

Rosenthal, J., McKinley, B. and Pearson, D. 2011: Promoting education within SACP: introducing the HoTS group. *Primary Health Care Research and Development* 12, 276.

<sup>2</sup> [http://en.wikipedia.org/wiki/Festival\\_of\\_Dangerous\\_Ideas](http://en.wikipedia.org/wiki/Festival_of_Dangerous_Ideas) (thanks to GI and Marija Kovandzic for the reference)

<sup>3</sup> <http://www.sapc.ac.uk/index.php/forum>