

# The Generalist as the new Specialist

The role of the General Practitioner  
as the expert Generalist

# Training as a Doctor (1)

- Medical School teaching can be very disease-orientated
- Post-graduate education and training is undertaken “on the job” and most of this will be in hospital initially (although it is changing)
- Then comes specialisation which is again undertaken “on the job” and a significant part of this will be in hospital even for GPs

# Training as a Doctor (2)

This results in a medical workforce where:

- Hospital doctors have lots of experience of hospital medicine and specialisation
- General Practitioners have significant experience of hospital medicine and specialisation

And

- An increasing experience of being a generalist

# The effects of medical training

GPs are skilled generalists:

- With a wide view of the citizen who may or may not have medical problems
- Who look at the whole picture when dealing with a citizen who may become a patient
- Who are used to dealing with patients with a wide range of conditions, wants and needs, not all of which require specialist intervention

# How can General Practice help?

By making a good generalist assessment of the patient and to:

- Reassure
- Investigate
- Treat
- Refer for specific specialist advice that may involve more investigation and possible treatment, some of which may be in hospital

# What does the generalist need?

- Reasonable access to a wide range of pathology investigations and imaging
- Better communications between services
- Referral to a specialist if condition warrants

And

- Time to do the work
- Recognition by hospital colleagues that seeing the GP is not inferior treatment/management

# Benefits to the patient

Patients can be seen by a doctor who:

- Sees them in a familiar environment
- Has their full records available
- May know them well
- Has the skills of a generalist
- Will look at their physical, psychological and social needs
- Will refer appropriately if required

# Benefits to the NHS in Wales

Patients are:

- Seen as citizens who have physical, psychological and/or social needs
- Not seen as a collection of different diseases or medical conditions that require a series of different specialist opinions/interventions

The patient can be dealt with in a holistic way and the GP can deal with their true needs

# Disadvantages to the NHS in Wales

- Currently, most of the resources for health care are tied up in hospitals and specialist care
- General Practice/Primary Care will need additional resources to deliver an enhanced service to patients
- At a time of tight financial constraint, some of the additional resources will need to come from Secondary Care

# What is the model for the future?

- More patient problems dealt with in a holistic way in Primary Care by GPs as the Generalist
- Integration of Health and Social Care Services to deliver holistic care required for patients with multiple Health and Social Care needs
- Fewer hospital admissions
- Early transfers of care back to the Community where the patient's ongoing needs can be met

# In conclusion

In the words of President Barack Obama  
(or was it Bob the Builder?)

**Can we do it?**

**Yes we can!**

- but only if the will is there