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A new approach to primary care education to support emergency medicine

he belief is held that a large proportion of the 23 million of people attending emergency departments could also be seen as urgent primary care. (1) With large numbers of patients being age groups that access emergency medicine for convenience or are unsure of their health need. However, we also know that acuity is becoming more complex and admission rates are increasing (1). We know differentiating these patients can also be challenging. We are also aware that remote and rural areas are having noted health inequalities due to the availability of acute care provision. This results in increased burden for travel for patients and ambulance trusts. Increased attendances in emergency departments and health inequalities in the speed of delivery in these settings. In the last two decades primary care training and care delivery has moved away from acute care and to one of chronic disease optimization and within hours care only. This was to meet the governments objectives of quality outcomes in these areas, This lack of investment in

training in acute care has led to a situation where primary care is now being asked to deliver more acute medicine both rurally and in emergency settings, whilst willing to deliver it may not necessarily have the confidence or base knowledge to deal with what is being asked. UCLAN have developed a new training program that allows primary care physicians to work confidentially and effectively in acute areas of care. Whether this is front of house in emergency departments or in areas of remote healthcare where clinical support maybe hours away or logistically a challenge. Training in latest techniques and technology innovation allows the physician to feel more able to handle acute care. This not a program designed to make the primary care physician into an emergency physician. This is about making the primary care physician of today as effective as 25 years ago when the vast majority of all acute care was delivered by primary care.

Biography

Stuart Maitland Knibb is an Ex British military medical officer with extensive experience in primary care & emergency medicine both in hospital and pre-hospital. Specializing in urgent unplanned and remote area health care, he has set up and delivered emergency units delivering care in remote and independent from main hospitals in the UK. He has worked on the Helicopter Emergency Medical Service (HEMS) and pre hospital settings for many years and continues to fly in a consultant position. He is also a responder for the British Association of Immediate Care Scheme (BASICS), Senior Examiner for the Royal College of Surgeons of Edinburgh for the Dip IMC, FIMC and DUMC. He holds a role as medical officer for UK International Search and Rescue (UKISAR) the UK government team operating under INSARAG, is the quick response team for disaster zones that need specialists in search and rescue. Now as the Director of remote and rural medicine at the University of Central Lancashire (UCLAN), he and his team aim to create a national centre of excellence in remote and rural medicine training, delivering education throughout the world where hospital medicine is delivered out of hospital for the benefit of patients and the system that supports them.

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