Its summer time!! Not that we can always believe it from the weather in the UK but if you are on holiday, about to go or have just been away I hope you have a wonderful time.

This edition of the Grapevine is a catch up with what has been happening to EURIPA after an eventful time in Dubrovnik in April. We are now looking forward to the WONCA Europe conference in Istanbul in October!

Thank you to all the contributors of this edition of Grapevine. Contributions follow from conversations at Dubrovnik and interesting workshops - there was a huge variety to choose from!

There is more information about EURIPA’s activities and also what is happening on rural health around Europe.

Jane Randall-Smith
Executive Secretary EURIPA

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Dubrovnik April 2015 - a fantastic international conference!!

The story of 13th World Rural Healthcare Conference began in 2011, when Croatia's first rural conference was held in Kutina and whose guest lecturer was John Wynn Jones, president of EURIPA at the time.

It was recognized that there are problems in this part of the world, but that there was also a team ready to start solving them. The following year KoHOM was assigned with organizing and delivering what was a very successful III EURIPA Rural Health Forum, with Ian Couper as a guest. The same year a small delegation (Tanja Pekez Pavliško representing KoHOM and Anja Aleksić, representing Conventus Credo) went to Thunder Bay, Canada to attend the 11th World Conference on Rural Medicine where it struggled to receive the organizational duty of 13th World Conference on Rural Medicine. However, on 8th October, 2012, on Croatian Independence day KoHOM is awarded the honour of organizing the conference.

Following the initial euphoria, we came to realize the magnitude of the task ahead of us. However, due to team work the organizational, scientific and international committees and Conventus Credo as professional congress organizer the job is done with great pleasure and success.

One of the most important moments was founding Wonca Working Party on Rural Practice Google group. A large number of colleagues from across the world joined the group. Very soon the conference’s doors opened in terms of sending suggestions for improvement of the scientific area of the conference. Everyday several mails were received with excellent ideas, all of which resulted in an 80-hour programme (rural conference and KoHOM congress).

No WONCA rural conference had ever featured such a large number of workshops (over 42), so the organizers had “sweet” problems when drafting a programme.

The conference’s title, Breaking down barriers – bringing people together, justified the goals and wishes of Wonca Working Party on Rural Practice for developing rural general practice in this part of the world.

The conference’s opening ceremony was especially emotional. The introduction was written by dr. Tanja Pekez-Pavliško, as organizational committee president, and dr. Ines Balint, as president of KoHOM and president of the scientific committee. Opening speeches were given by, among others, the mayor of Dubrovnik and former Healthcare Minister Andro Vlahušić, president of Croatian Chamber of Medicine Hrvoje Minigo, presidents of Dubrovačko-Neretvanska County, Ministry of Healthcare and HZZO. For Wonca Europe, Ana Stavdal gave an opening speech. All the attendees were also greeted by president of the WWPRP, John Wynn-Jones.
All change at EURIPA

Following the Dubrovnik conference, when Jose Lopez Abuin resigned as President of EURIPA for personal reasons, the EURIPA Executive Committee had lengthy discussions and has made the following appointments.

**Tanja Pekez Pavlisko**, from Croatia, has agreed to take on the role of Interim President until EURIPA’s 2015 AGM which is being held in Istanbul at the WONCA Europe conference.

**Jean Pierre Jacquet**, from France, is the new chair of the International Advisory Board

**Ferdinando Petrazzuoli**, from Italy, is the new research lead

EURIPA would like to thank Jose for his hard work on behalf of EURIPA to help get EURIPA where it is today. There is a renewed energy in the Executive and the IAB and we would like to meet as many of our members as possible in Istanbul.

Sadly we also lost another member of our Executive Committee as Janko Kersnik from Slovenia passed away suddenly in May. Janko was our link to the WONCA Europe Executive Committee and also with EURACT. We will miss his energy and wisdom.

This year has seen unexpected changes and we are seeking new members for the International Advisory Board, from countries not currently represented and new members to the Executive Committee. The current list is available on the web site at [www.euripa.org](http://www.euripa.org)
Introducing EURIPA’s new team

Tanja Pekez Pavliško – Interim President

Tanja Pekez Pavliško was born in 1961 in Travnik, Bosnia & Herzegovina. She graduated from medical school in 1985 at the University of Banja Luka. In 1989 she began her specialization which unfortunately she did not finish due to the ensuing war.

Following this she then worked for many years in pre-hospital emergency medicine up to 2007, when she began working as a general practitioner after finishing her residency. In the meantime she finished her postgraduate studies in clinical pharmacology, emergency medicine and general practice. She finished her PhD studies but at this time has not yet finished her PhD thesis.

Throughout her medical career she actively participates in local and international conferences in emergency medicine and general practice. She led International Trauma Life Support Courses in Croatia for four years.

Tanja has published two books for laymen in emergency care, as well as a self-help book for parents for most common diseases in children. She has also published chapters in several medical books.

Since 2012, Tanja has been a member of Executive Committee of EURIPA, and from 2012 co-chair of WONCA Working Party of Rural Practice. She organized KoHOM congresses with over 700 participants. Since June she is the President Interim of EURIPA.

Her special interests include palliative care, agricultural occupational health and emergency medicine.

Jean Pierre Jacquet – Chair International Advisory Board

It is a great honour to be elected as president of the IAB, it is also a great concern with all the tasks that face our association, in a changing world.

First of all I would like to thank Professor Christos Lionis for the great job he has done during the previous years. It was a period of sad news with the European crisis and Christos was directly impacted but despite of this he was (and he his) always optimistic and a huge resource for EURIPA members and young researchers.

I would like to introduce myself: a GP for 37 years in a village in the French Alps, married for more than 40 years with Chantal, meeting in our second year at the faculty of medicine, (she is an occupational doctor) and we have three sons and six grandchildren!
I am also an academic, as associate teacher in charge of research in the Department of General Practice of the Faculty of Medicine of the University of Grenoble. I am involved also at French national level for international relationships, conferences, expertise in national agencies.

What does EURIPA mean for me:

- It must be the association in which more or less a third part of all European GPs can and must recognise themselves

What does the IAB mean for me:

- The IAB must be able to help EURIPA to realise its goals
- The IAB must have a least one representative in each European country
- To enhance and reinforce IAB, we want to enhance each IAB member with a charter
- Each IAB member must be proud and honoured to be a member
- This charter will define rights and duties of members of the IAB and EURIPA.

The proposed charter will be discussed with the IAB over the summer and presented at the AGM in Istanbul.

**Dr Ferdinando Petrazzulli MSc - Euripa Research Committee**

I am an Italian family doctor who lives and works in a rural village in Southern Italy. My village called Ruviano, in the Province of Caserta, has less than 2000 inhabitants, and is 50 km (about 1 hour drive from Naples). Actually my practice is a solo practice and my surgery is in a wing of my own house. This is quite unusual and considered barely legal nowadays, but is tolerated as I started my practice long ago. Living and working in the same building has its advantages and disadvantages. You save time and money but you are on call all the time. My practice consists of nearly 1500 patients. Over 35% of my patients are over the age of 65. (Children under 6 are cared by the local health-care district paediatrician.) Many patients are farmers.
Ruviano Province of Caserta, Regione Campania Italy

Ferdinando’s house with his practice on the right side
I have been working as a family doctor since 1989. To be honest this was not my initial choice but the result of the lack of perspectives in another field: cardiology (I have got a specialization diploma in cardiology and another in Cardiac Surgery and I used to work at the University Department of Cardiology and Cardiac surgery of the University “Federico II” in Naples). Unfortunately in 1989 my father, who was also a family doctor in my home village, died so I decided to take over. It was not an easy decision for me at that time.

The surgery

I started attending the Wonca Europe Conferences in 2001 in Tampere, Finland and since then I have never missed one. In 2002 I started attending the European General Practice Research Network (EGPRN) Conferences in Avignon, France and in 2008 I became Italian National Representative of EGPRN; in 2010 I was elected as member of the EGPRN Executive Board. Now I am still in the EGPRN Executive Board and I am the chair of the Educational Committee.

I was responsible for the organization of the 68th Conference of the EGPRN in Bertinoro, Italy in May 2009. The theme of the conference was “Data analysis of Electronic Patient Record Databases in General Practice”.

From 2004 and 2008 I was involved in a Master of Science in Primary Care & General Practice at the University of Ulster (United Kingdom) which increased my skills in research a lot. At that time my favourite topics of research were diabetes, cardiovascular diseases and the phenomenon of the frequent attenders. Since 2001, I have presented many posters and papers, and organized workshops at the EGPRN and WONCA conferences. Some of these researches have been published in the Rural and Remote Health Journal.

I am also a member of European Academy of Teachers in General Practice and Family Medicine (EURACT) and I have been involved in the translation of the EURACT Educational Agenda, as well as the EGPRN Research Agenda.

In 2010 I joined the Wonca International Classification Committee (WICC) and in 2012 with other Italian colleagues, I translated and published the ICPC-2R (International Classification of Primary Care) manual in Italian. In 2012 we organized our annual WICC meeting in Ravello, Amalfi Coast (Salerno) Italy.
Donata Kurpass is a member of EURIPA’s International Advisory Board, representing Poland, and she writes about a conference she organised earlier this year in Opole, Poland.

The 2nd International Conference of the Higher School’s Pulse “From ideas to publications” was held in the Public Conference of the Higher School in Opole from 7-8 May 2015. The conference was directed to students, scientists, publishers, librarians and to everybody who are interested in various aspects of scientific publishing, and also for editorial staff of scientific journals.

Reports from EURIPA members


Over the years I have organized many research courses. Among these, the International Course on Research in Primary Health Care in Telese Terme (BN) Italy 23 –24 July 2005 and in Palermo (Sicily) 2012. At the next Wonca Conference in Istanbul I am running a 2 days Pre-conference Research Course in conjunction the Vasco da Gama Movement.

In the last 3 years my favorite topic has shifted to dementia and cognitive decline and I am currently involved in a PhD at the Lund University in Sweden. The topic of my research is: Dementia evaluation and management in the Primary Care Setting across Europe. At the Wonca Europe Conference in Istanbul next October 2015, I am chairing a symposium on this topic.

I joined EURIPA in 2006 and I have been involved in many initiatives, sometimes joint EGPRN-EURIPA activities, over the past five years. Recently I have been nominated as chair of EURIPA Research Committee, a position that was chaired by the late and never forgotten Claudio Carosino. I hope not to disappoint those who have trusted me.
The first day was the lecture day. The numerous invited guests from Europe, the USA and Canada were sharing their rich experiences of text working with other participants. They were:

- Prof. Christos Lionis (School of Medicine, University of Crete, Greece), who gave the lecture: “Publishing with Impact Factor - a blessing or a curse. Experiences of the Editor”
- Prof. Dan Oren (Yale University, USA), with the lecture: “Scholarly Publishing for Success”
- Dr Andrzej Szpakow (Yanka Kupala State University of Grodno, Belarus), who gave lecture: “Epidemiologic research - the bad with the good”
- Dr Henryk Hollender (Łazarski Higher School, Warsaw, Poland), who in his own lecture answered the question: “From ideas to implementations. From ideas to citations. From ideas to textbooks. And the research publication - where is it?”
- Prof. Olga Fedorciv (Ternopil State Medical University, Ukraine) “The use of objective statistical processing for presenting the data in scientific publications”

The lecture of the absent guest Dr Jose Manuela Lopez-Abuin (EURIPA, Padron, Spain) “Building bridges between minds and nations” - was presented by Prof. Donata Kurpas.

The panel of discussion as a form of debate by the round table finished the first day of the conference. The discussion among invited guests and the answers for many interesting listeners’ questions was very good occasion to get essentially knowledge, skills and text working new perception.

The second day of the conferences was a training as well as a discussing day. The workshops were held in four panels:

1. Editorial Panel for Scientific Journals’ Editors Scientific Debate – How to publish journals with Impact Factor
2. Panel for students, PhD students and all interested in how to write scientific papers. Workshops.
3. Panel for PhD students and habilitation candidates preparing their academic achievements to be assessed. Workshops.
4. Library Panel: Professional Debate – Managing information in the field and not only.
In the free time between the lectures and the workshops invited guests had opportunity to visit Opole and the main places to visit. The guides were students from the Public Higher Medical Professional School.

Banquets and dinners were a very good chance to meet closer and to share experience. The guests could try Polish, traditional, food and to listen typical music too.

Other features such as: training panels, scientific debates, panels of discussion, and specialized workshops for written research work, stood out from another national as well as international conferences of this type. The guests had an amazing and high essential knowledge about working on the written texts.

For more information about the conference we invite You to visit our website: http://2mkpu.wsm.opole.pl.

Those who are interested in the 3rd International Conference of the Higher School’s Pulse to Opole are sincerely invited. The detailed information are coming soon.

Kinga Jarosz, Marta Gawlik, Donata Kurpas
Another member of the International Advisory Board is Joyce Kenkre, from Wales who is Professor of Primary Care at the University of South Wales.

**Community nursing research strategy in Wales**

There is increasing discussion worldwide on how are we going to provide services to meet the health needs of communities in the future. In the UK there is also discussion on moving more care into the community from secondary care where 90% of care is already being provided.

In 2002, the Welsh Government decide to develop an infrastructure to enable Wales to become ‘a country that develops its policies on the basis of evidence and that has mechanisms in place to improve health and social care of the people of Wales is essential’ (WAG 2002).

In 2005, the Wales Office for Research and Development in Health and Social Care (WORD) funded the development a research infrastructure, Clinical Research Collaboration Cymru (CRC Cymru). WORD invested in the development of nine thematic networks (mental health, learning disabilities, neurodegenerative diseases and dementia, epilepsy, children and young people, older people and ageing, emergency and unplanned care and public health improvement) as a cancer network was already in place, five infrastructure support services (health economics, health informatics, research governance, equality and diversity and Welsh language awareness), two research support units and a co-ordinating centre. The co-ordinating centre comprises a management unit, a network of research professionals, training and development and a patient and carer network. The training and development directorate within the new research infrastructure has a remit to train all healthcare professionals including nurses and midwives involved in research through the research process to meet study and regulatory requirements. In 2008, the Wales School of Primary Care Research (WSPCR) was added to the research infrastructure. More recently there has been recommissioning of the research infrastructure streamlining and focusing on Centres of Excellence. The now ‘PRIME Centre Wales’ is one of the newly commissioned centres of excellence for Primary and Emergency Care research in Wales.

One of the leading disciplines within the WSPCR and PRIME Centre Wales has been nursing. In 2009, the Welsh Government published the community nursing strategy within this was recommendation 22 which stated that the ‘Welsh Government will invest in the funding of research that will develop the evidence base for community nursing interventions, evaluation methods, and the appropriate numbers and skill mix for workforce planning’. This gave the basis for the development of the Community Nursing Research Strategy for Wales.

A meeting was organised to develop a community nursing research strategy and representatives were invited from clinical practice, higher educational institutions, professional representative bodies, representatives from health boards, and members of offices within the Welsh Government including workforce planning. The aims of the meeting was to prioritise research ideas to provide the evidence for future health and healthcare for people in Wales, establish existing and potential support infrastructure and develop an All-Wales framework for community nursing research. Consequently, it was important to have participation and representation from the broad spectrum of nursing professionals working in and for the development of community nursing in Wales.
Nominal Group technique was used to gain consensus of direction across the diverse nursing groups working in the community. In the first instance presentations were given on current activity from government perspective, research infrastructure and future clinical academic career pathways. Each representative brought three ideas for research from their organisation as well as support and training opportunities. To begin the debate participants were paired up to defend or refute their three ideas each had brought with them from their organisation and were to agree on three to be taken forward. The pairs were put into groups of four agreeing on three topics to be taken forward. The fours went into eights final priorities were agreed by the whole group.

The priorities needed to be addressed were:

- Barriers to translational research in community nursing
- Evaluating the impact and value of community nurses, including patient participation and experiences, and the preparation of nurses for community practice
- Role definitions versus flexibility to maximise health outcomes
- The system: making it work, using new technologies, evaluating service user experiences and views: especially for the fifth quintile
- Looking outwards not inwards: service user – centeredness

The agreed strategy was launched in March 2013. We now have a CNRS Board that meets three times a year to drive forward the strategy. There is a co-ordinator Dr Carolyn Wallace that has protected time for the implementation of the strategy. It is important to ensure that any strategy is implemented.

Consequently, there is a virtual network is an online forum for nurse who are interested in research. Each member receives up-to-date information on training and funding opportunities available.

Web: http://www.primecentre.wales/community-nursing.php  
Twitter: https://twitter.com/PRIMECentre

There has been a data base created and includes studies led by members of the network, studies supported by the CNRS and studies considered by the Board to be of significance to the community.

Leadership is important from the Board who represent their organisations, through mentorship, support to undertake research within organisations and from support within PRIME Centre Wales. Support is also given to take research ideas forward, help with grant writing, study management and writing for publication.

We have conducted masterclasses for the chief nurse and nurse executives in Wales and for nurses at all levels within the health board to enable them to become more ‘streetwise’ on the research infrastructure, funding and opportunites that are available. It is also important to demonstrate the current profile activity in the public and policy domain. Therefore in October 2014 we held our first community nursing research conference to which we invited both the Chief nurse and the Minister for Health and Social Care. The conference was a great success. Following the conference we were asked to send to the Minister information on research activities so that he could visit them while visiting organisations in Wales.
I work in a group practice in the rural West of Ireland. There are three fulltime GPs and one part time, and as a training practice we also have a GP registrar. There are two centres of practice, about twelve miles apart, one at either end of the island. Achill itself is not a true island, there is a bridge connecting it to the mainland. There are two offshore islands whose populations we also care for – Clare Island with about 160 residents and Inishbiggle with all of 16 living there. We visit Clare Island once per week, travelling the forty minute boat journey in all sorts of weather. Inishbiggle is a fortnightly trip by currach. The crossing is a mere five minutes but in a treacherous current.

As I write I am enjoying a rare day in Achill. I sit on the beach, on an evening off, in glorious sunshine. Those who are familiar with the West coast of Ireland, know that it is far more likely to be drowned in downpours than bathed in beautiful sunshine, but what’s rare is wonderful and there is nowhere more wonderful than Achill in the sun!

My children are darting in and out of the cold surf, their shrieks mingling with the cries of the gulls overhead and the salty breeze is the perfect way to blow away the stresses of work in a busy practice.

Other than those on the offshore islands, we look after approximately 3,500 people in Achill with daily clinics in both Health Centres and evening clinics in one of them (Pollagh) on Mondays and Thursdays. There is no regular out of hours service here, so we rotate the evenings and weekends between us.

Achill GPs see all the usual medical problems and conditions that are part of any general practice in Ireland. We have a fairly high elderly population, many of whom live alone, and home care is an important part of the care of the elderly here. There is a fantastic Day Centre which enables many of these people to continue to live at home, and there is a 32-bed Community Nursing Unit for those who can no longer do so. As we are over thirty miles from a hospital, we provide as many services as we can ourselves, including phlebotomy, ECGs, 24-hour blood pressure monitoring, Holter monitoring, minor surgery and palliative care.
Achill is a very scenic spot and a haven for the outdoor enthusiast with surfing, kayaking, cycling, hill walking, kite-surfing, sailing and fishing on the doorstep, to mention a few. Basically every kind of outdoor activity that you could wish for is available, and despite the often inclement weather, the tourists flock here in the summer in droves. With the high numbers part-taking in adventure sports, trauma features fairly regularly, and all GPs here are dab hands at splinting and suturing as well as working closely with the emergency and rescue services including the Lifeboat, the Coastguard and the Fire Service.

It would be remiss to discuss general practice in Ireland without mention of the crisis we are currently facing. As in many other countries, the economic climate has had an effect and we are still feeling the fallout of the downturn. We have a manpower crisis in general practice, and rural posts in particular are becoming harder and harder to fill with many now lying empty, leaving large pockets of patients without a local service. Many, many young GPs (and some not so young) are leaving the country for more security and a better sense of being valued for what we do elsewhere. Our government has just introduced free GP care for all those aged under 6, amidst much upset and uncertainty, and with minimal input from those providing the service. I understand there are plans to extend this and am at a loss to understand how we are expected to achieve ever more with less resources. Time will tell.

On a lighter note, I still thoroughly enjoy what I do. It is a privilege to be so closely connected to people from the cradle to the grave and I think this is no truer than in rural general practice. Where else could you stand in the local supermarket trying to remember if you have enough milk in the fridge and have a patient sidle up beside you and whisper “Doc, how was my cholesterol in that test last week?”.

All in all, as is true of any General Practice, there is huge variety and no two days are ever the same. I truly enjoy what I do and will be back in full swing in the morning, fully refreshed after this glorious evening on the beach.
Having lived and worked as a GP in Shropshire (a large, rural county by English standards) for the past 20 years, I was delighted when John Wynn-Jones invited me to the Wonca Rural Conference in Dubrovnik. I have been lucky enough over the past 10 years to combine clinical practice with managerial and leadership roles locally and nationally. My interest in leadership emerged from a frustration with how our health and care system doesn’t always work well for patients or those of us working in it. This has made me passionate about finding ways of working on, as well as in the system.

John asked me to facilitate a workshop in Dubrovnik with Dr Maija Kozlovskla (Latvia) and Dr Claire Marie Thomas (UK). Preparing for the workshop was fascinating, being aware that the first time the 3 of us would meet would be on the day of the workshop. We learnt from each other and from input from GP leaders across the world who contributed to shaping the event.

Our workshop on The Practical Aspects of Leadership in Primary Care was well attended despite the early hour and following our brief presentations all participants got enthusiastically down to work exploring the purpose and scope of leadership in rural primary care.

My current national leadership role is as Deputy Medical Director at our UK Faculty of Medical Leadership and Management (leading on primary care and diversity). We are a young organisation established as a faculty of our 21 medical royal colleges across the UK with the purpose of strengthening medical leadership for the benefit of the population we serve. You might be interested in our recently published professional standards and evidence base for medical leadership. For more inspiration and medical leadership resources take a look at our website www.fmlm.ac.uk and of course international members are welcome!

Following the workshop I chatted to a number of Euripa members including a vibrant group from Vasco da Gama (VdG). Leadership seems increasingly important for rural primary care across the world and came up with the idea of Euripa catalysing a Wonca Rural Leadership Movement. Collective, distributed leadership would be the aim of the game and certainly not what is depicted in this picture on the right!

Here is some of the collective thinking from Dubrovnik - it would be great to hear what you think...
A Wonca Rural Leadership Movement: engaging, inspiring, equipping and supporting rural family doctors across the world to flourish and grow as leaders for the benefit of the community they serve.

Why?

- The majority of the world’s population lives rurally but they don’t receive their fair share of medical resource
- Rural family doctors are central to the provision of rural health care
- Globally there are problems recruiting and retaining family doctors in rural communities
- Rural family doctors around the world feel isolated, under supported and undervalued in their challenging jobs
- The collective leadership potential of Wonca Rural could make a difference in tackling these challenges

How?

- Summarise a proposal based on these reflections from Dubrovnik and the output of the leadership workshops
- Share via Wonca Rural google group
- Shape using virtual tools eg email, social media, webinars
- Publish on Wonca Rural website
- Creative Rural Family Doctor Leadership Incubator (virtual and meetings) led by a collaborative of Euripa, VdG, Medical Student Networks and The Faculty of Medical Leadership and Management (FMLM) and open to all Wonca Rural members.
- Publications in the rural journal
- Deliver leadership workshops at Wonca Rural events
- Enable the movement to group through organisational alliances, individual enthusiasm and the use of social media/google groups
- Role modelling behaviours consistent with the principles/values we agree
- Celebrating success eg Rural Heroes

What?

- Agree principles for effective rural primary care leadership (based on discussions in Dubrovnik) with scope including that all doctors are leaders whether in individual consultations, system leadership roles or anywhere between
- Evolve menu of resources to engage, inspire, support and equip family doctors in rural practice to survive and thrive using leadership as an enabler
- Enabling recruitment and retention
- Creating pipeline of rural primary care doctors for succession planning and to enable rural family doctors to realise rewarding careers
Update on EURIPA activities

EURIPA’s Executive Committee continues to meet regularly and the International Advisory Board has also met recently. After all the changes that took place following the conference in Dubrovnik have contributed to a renewed energy in the Executive Committee meetings. The AGM that is scheduled to take place in Istanbul in October will confirm the membership of the Executive Committee and IAB, explore the way forward for EURIPA and have more in depth discussion on a forward work programme – an important meeting!!

The up to date membership of both groups is available on the web site at www.euripa.org

Hot Topics were paused over the summer but we will be re-starting in the Autumn – please let me know (Jane@montgomery-powys.co.uk) if you have a burning issue that you would like to see a discussion on across Europe.

Future work programme

Following all the recent changes in EURIPA there is a lot of enthusiasm and many new ideas for EURIPA to get involved in. The challenge is managing a work programme to ensure that we do what we do well.

Our meeting in Istanbul will be crucial to discussing our next projects and all decisions taken will be communicated via the mailing list and the web site. SO if you would like to be more involved – watch this space! Or, come and join us in Istanbul.

Our Journal

If you are involved in research or training initiatives in rural health we would welcome a contribution to the International Electronic Journal of Rural and Remote Health Research Education Practice and Policy.

The Journal contains a European section and we would like to encourage EURIPA members to contribute to the Journal. Original research is always welcomed but there is also the opportunity to send in letters, project reports or personal perspectives.

There is support available to help you get published – new authors are actively encouraged!

Please contact Professor Christos Lionis, our editor, if you would like to make a contribution (lionis@galinos.med.uoc.gr) . We would like to thank Christos for all his effort and support in making our Journal a success.

Future conferences

Following the series of EURIPA Rural Health Forums there was no Forum this year, as so much energy went into EURIPA’s contribution to the international rural health conference. The next one will take place in 2016 and we are already working with Jean Pierre Jacquet to start planning for the Forum. The title will be “Being a young rural practitioner” and it will take place from 23rd – 25th September 2016 in Marseille in the south of France. More information will be available in September by the WONCA Europe conference.
Publications

Below are some recent publications from across Europe in the international Electronic Journal of Rural and Remote Health Research, Education, Practice and Policy (http://www.rrh.org.au/euro/defaultnew.asp) that may be of interest to you as a rural practitioners:

What role can the rural pipeline play in the recruitment and retention of rural allied health professionals?

Attracting health professionals to work in rural locations in Australia and elsewhere is a well documented challenge. By addressing the diversity within and between professions and reflecting the different stages at which allied health professionals enter rural practice, recruitment and retention strategies can be established to better meet their needs.


"The Senja Doctor": developing joint GP services among rural communities in Northern Norway

To overcome serious challenges concerning recruiting and retaining GPs, three small and remote municipalities developed an inter-municipal service. The increased continuity of patient care and creation of a robust professional environment for young doctors are discussed.


Forthcoming Events

Below are a selection of events for 2015 that may be of interest to EURIPA members. Please send in your events for future editions of Grapevine so that we can make this section more comprehensive. Please send to the editor at jane@montgomery-powys.co.uk

EFPC 2015 General Assembly
30th August – 1st September 2015, Amsterdam
More information is at:

International Congress on Rural Health, as a social economic and cultural engine
Lodi (Italy), September 8-11th
Abstract submission is now open up to 30th June 2015. For more information go to:
http://www.overgroup.eu/ruralhealth2015/

Rural Primary Care Conference
Organised by rural GPs for GPs, their nurses and their managers
30th September – 2nd October 2015, Gregynog, Newtown, Mid wales UK.
For more information:
Forthcoming Events cont’d

WONCA Europe 2015
Future of Family Medicine...... being young, staying young
October 22nd – 25th 2015 in Istanbul, Turkey
For more information go to: http://www.woncaeu2015.org/

Rural Medicine Australia 2015
October 22nd – 24th 2015, Adelaide
For more information go to: https://acrm.eventsair.com/QuickEventWebsitePortal/rma15/home

And if you are planning further ahead:

WONCA Europe Congress, Copenhagen, 2016
Theme: “Family Doctors with heads and hearts”
Date: 15-18 June, 2016
Web: http://woncaeurop2016.com/

EURIPA 6th Rural Health Forum: Being a young rural practitioner
23rd – 25th September 2016, Marseille, France
More information will be available shortly – watch this space, and the EURIPA web site

21st WONCA World conference
Family Medicine Now, more than ever!
2nd – 5th November 2016, Rio de Janeiro, Brazil
More information at: www.wonca2016.com

WONCA World Rural Health conference
April 30 - May 2017, Cairns, Australia
More information coming soon

Future Contributions to Grapevine

The next issue of the Grapevine will be Autumn 2015 after the Istanbul WONCA Europe conference and notification of the deadline for contributions will be 1st November 2015. Reminders will be circulated on the mailing list and announced at the web site.

If you are interested in contributing to the next edition of Grapevine please get in touch with the Editor at Jane@montgomery-powys.co.uk. Please think about what you do in your practice and if you would like to contribute to the new clinical case section, or send us a piece about your practice, tell us about research you are doing or have published, an event that is being held in your country ........... please do get in touch.

Grapevine is YOUR Newsletter and we always welcome new contributors.

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