Continuing to revamp the MCFD

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Firstly I would like to congratulate Dr Philip Sciortino, vice-President of the College, who is now president-elect. This means that after my term as President come to an end at the end of 2018, he will take over as the new President of the College. The term of one year for president-elect is meant for the person to take over and understand what is going on in the college. Of course it is a safeguard against someone coming in new from outside council and therefore needing a lot of time to come to terms with current issues (as had happened to me and hence the reason why I introduced it during one of our AGMs). Philip of course has no need for an update but there are issues which we will be discussing. Congratulations Philip.

I feel it is important that any president has a vision and I believe in management by objectives so as not to allow the many other items which arise deviate one from the goals on which one may have been elected. May I be allowed some nostalgia and some space for the benefit of members as well to overview many of the things we have done together during my two terms. When I was elected the first time in 2003 my vision was to establish a robust system for vocational training and to bring it to the level of international standards and indeed have external review. As has been amply written before the best path, given our culture of specialisation at the time in the UK, was the Membership of the Royal College of General Practitioners. We now have over fifty members who have MRCGP(INT), which they can get following the exam after vocational training and upon becoming members of the college. So I will list some of the things we have achieved together.

1. It is important to realise that the MRCGP(INT) was a long and arduous process. I say this because sometimes I hear people who downplay its importance and value. The idea had to be passed through an AGM – which I had done in 2004. Then there was a process

- of compiling the first MOU the memorandum of understanding which I had eventually signed with Dr Roger Neighbour, who to my pleasure, having studied his books, was President of the RCGP at the time. We had to set up a system of training the trainers and then compile a curriculum. When I finished my term I am pleased that many took on the process and the curriculum was compiled and the vocational training set in place. This took years and in fact the new memorandum of understanding between the College, the RCGP and the Department of Health was signed by my predecessor Dr Jurgen Abela.
- 2. The above took on setting up training for both trainees and trainers. We had to move away from frivolous exams and have a system rigorous enough to merit recognition. For this I had asked the late Dr John Howard to appoint Dr Adrian Freeman as our International Development Advisor. He eventually also became a mentor - and it is important for any president to have a mentor in his or her goals. Adrian did a very good job and continued even in my 'dormant' years. This time round Dr Freeman became in charge of the office of the MRCGP(INT) in UK and we appointed Dr Jeremy Stupple. Of course my recommendation did carry weight as president but it did not guarantee who the selection board of the RCGP chose. I am glad that we enjoy the respect that our wishes are taken seriously into consideration. Jeremy had already been one of three External Development Advisors who come every three years to see what is being done and give recommendations. In the process I decided that it would be futile for me to travel to the UK alone and asked John Howard if he would sponsor a delegation whilst I sought sponsors for flights. This worked out very well and it was the only way to build enthusiasm around the concept I believe. I would not have been able to bring the aura from London where they were discussing

- MRCGP(INT) for many countries on my own without reeling in many people. We had delegations ranging from five to seven for several years.
- 3. The Fellowship of the Malta College of Family Doctors had been left on the back burner for too long. I felt that for our 25th anniversary as a College I needed to push for this. Therefore we introduced the FMCFD for those who are paid-up members and have contributed 5 years of their time to activities of the College. The number was something to make us proud as many had given a lot of their time to building our College. I hope that those who are becoming members and obtaining also their MRCGP(INT) will be aware of these foundations as without them the College will cease to exist.
- 4. A year before that I had also suggested the introduction of the Honorary Fellowship. This is not a normal Fellowship and is the highest award the RCGP has for example. I suggested we follow suit and the first to receive it was Dr Denis Soler who was founding President of the College. He is the only one who has received it so far. It is important to note that Honorary Fellowship is an honour given to someone who has done considerable work for the College and need not in fact be a Family Doctor and neither a member of the medical profession at that.
- 5. The MMCFD was thus created and now to become a member one has to have vocational training and be on the specialist register. The specialist register is indeed another honour in our cap. Not only because all EU states can now call family doctors who have had three years of apprenticeship (only) to be called specialists, but because in our case one has to go through a true specialisation. It has in fact been suggested that the length of our training be increased and that trainees have to submit a research project. These are fine suggestions but they stalled somewhat because now we have a rigorous process for the curriculum to be amended by the Education Subcommittee. Whilst it may have frustrated some, it is also a sign of our seriousness in doing things and also because we have externals advisors and assessors. This is the only way that guarantees members a prestigious college to make them proud of.
- 6. APEL is a process of obtaining MRCGP(INT) by experiential learning. Whilst many had shied away from this process because it could have caused casualties I felt I owed it to those who have worked so hard in the College to open it. I supported all who

- applied and the RCGP accepted most the criteria they chose were contributing to setting up vocational training and being involved in the process for younger doctors. This does not undermine the work done by those who may have not been given this honour. After all it is not an MCFD honour and the RCGP probably felt they could recognise only those who have worked in something they were directly involved and responsible for and that it was not in their place to make assessment on work done locally. For that there are our own awards namely our Fellowship.
- 7. Fellowship of the RCGP. Of course those who get MRCGP(INT) may in the future see whether they can become Fellows of the RCGP. I am in the process of compiling another memorandum of understanding. It will go along the lines that MRCGP(INT) (and I stress, not MRCGP(UK)) will be for those who have membership by exam or by APEL who have continued to contribute for another five years after they obtain their membership. If they already contributed five years before that, one will have to see that they have continued to support in some way and remained in good standing with the MCFD. Of course it will be the MCFD which will present them, MRCGP(INT) being an international honour dependent on the country where it is awarded. We are interested in doctors who continue to educate themselves and have an interest in the advancement of family practice beyond their personal practice.
- 8. JMCFD. The new journal of the college was set up during the tenure of Dr Abela who had asked me to be editor of the journal. I had accepted on the conditions that I be allowed a certain amount of freedom and that the name of the journal be changed in order not to take on any responsibility for any previous work. Of course the board is chosen by council. I had to remain Editor, as no one would take on this position, even though I have to say that what I am responsible for are the logistics and I am indebted considerably to my team, Dr Glorianne Pullicino, Dr Anton Bugeja and Dr Mario R Sammut, who do most of the work, especially the latter. The journal has been successful and we managed three issues every year with increasing scientific contributions. It has been put on the University of Malta's website - they approached us themselves and we did not seek this honour. But an honour it is indeed. Obtaining adverts is not easy but providence has been in our favour and it seems we are guaranteed a good future.

- 9. EU projects. We attempted to apply for an EU project in my first term. Of course winning such applications is not easy but we learned considerably from this experience. I proposed that the College be a foundation from which any member of the College can apply for research funds, be they local or EU, and we provide the support (expenses for which of course have to come from the funds one applies for). The College provides a guarantee but all its expenses are paid through the projects themselves. Whilst we take on legal responsibility, the principal investigator and ownership of the project remains the person/s who applied for the funds. We are thus following the same procedure the University of Malta does. Our responsibility is taken care of in the auditing process which our auditor does to see that due diligence and good governance are in place. Those interested may contact me or the Hon. Secretary and arrange a meeting.
- 10. I am reluctant not to mention projects which we did in the past. These are the Irish Diplomas, the Masters degree of the University of Ulster and our own Diploma in Family Practice. There has been talk of re-vamping these but due to the controversy at the time we are being cautious that things do not compete with each other and that there should be more coherence in the interest of the MCFD. The diploma was the first post-graduate training programme for Maltese GPs which was drawn up in Malta. We had around 35 graduates who boast the letters DFP. It was at the time even considered by our IDA to be an ideal venue for the MRCGP(INT), following a more rigorous assessment evaluation. I am sure that those who hold Diplomas from the ICGP (including myself) and a Masters from Ulster are also proud and are indebted to those (Dr Mario Grixti and Dr Jean Karl Soler respectively) who worked to introduce these.

Ideas continue to abound but it is impossible to implement things without the will and dedication of someone to take over. I augur that the future will offer possibilities for our members to have courses and degrees and further continuing professional development. With revalidation by the medical council around the corner I hope during my last year to revolve this around CME which follows our curriculum - a concept which council has already accepted in theory. Dr Philip Sciortino has done a lot for our CPD programme and the quality had improved. Attendance to CPD meetings is high and those who go benefit considerably. Dr Sciortino has been influential in bringing hardware which allows for quizzes and indeed on-site questionnaire which may benefit research, generating graphs and statistics immediately. November 2017 saw the graduation of new Fellows and new Members. The College is moving forward and I am sure that in the future it will be under the good guidance of Philip.