Quo Vadis, EGPRN?

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Where are we going?

- Executive Board
 - Discussion on membership
 - Discussion on finances
 - Discussion on vision for future



- Number of meetings a year?
- Individual researchers or institutes?
- NRs, or Colleges and Wonca?



Data collection

- Queried EGPRN National Representatives:
 - Questionnaire 2012
 - Focus group discussion Ljubljana 2012
 - Presentation of results and discussion Antwerp 2012

Outcomes of questionnaire

- We are doing very well in our core role of providing a safe atmosphere for developing research in family medicine, with rich discussions involving senior researchers to develop research capacity
- We are effective in networking, but respondents feel a need for strengthening collaboration and involvement in more research projects
- Respondents do not feel a need for major change in our orientation, but rather feel a need to protect what we have and build on our strengths

Focus groups in Ljubljana May 2012

- National Council broke into three groups
- All discussed the same themes
- Discussions recorded (tape, interviewer and observer notes)
- Thematic analysis
- Presented to National Council as summary of themes in Antwerp

Structure

- Full-time office with involvement in management of research projects
- New roles for NRs (visibility, interaction with members, annual report)
- Activities between meetings (researcher networking, Skype Executive meetings, mini-meetings for projects, annual extra meeting for NRs)
- Communications & marketing (Communications plan)
- Fee payment (allow Bank transfers)
- Web-archive
- Outreach to non-attenders

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- Meetings
 - One, or two, a year? Maybe two, with different focus?
 - Abstract selection process (different standards?)
 - Safe environment to be kept at all costs
 - Increase scientific quality, attract experts
 - Contain meeting costs
 - Methodology workshop (Ljubljana experiment worked)
 - Creative ideas (art in medicine, case presentations, research ideas)
 - Less but better key-note speakers

• International research collaboration – very important and moved down to own slide

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- Developing research capacity
 - Meetings which focus on developing research capacity
 - Mentoring (database of experts, or even reviewers for EU projects)
 - Pre-meeting workshops delivering formal curriculum of research methods
 - Diverse level, frequent research courses (one country?)
 - Detailed feedback for rejected abstracts
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- One or two meetings a year (costs of attending 2!)
 - Possibly one high level conference, showcasing best and state-of-the-art presentations. High quality work with strict selection of best quality
 - Possibly one workshop, only for developing research ideas and extended discussion of work-in-progress.
 Give preference to researchers from countries with less developed research capacity.
 - Possibly one clinical (for practising FDs) and one academic focus meeting

- International research collaboration
 - Planned before meeting. People invited in advance. Abstracts accepted outside normal processes.
 - Formal collaboration as a signatory partner in a research project. Involvement of all EGPRN members
 - Expert groups within EGPRN. Already exist incorporate with formal structures.

Late feedback

- Not major change, but incremental changes
- Keep EGPRN atmosphere
- Possibly more methodology work, involving experts
- EU projects mentioned again and again
- Tensions:
 - High expectations but need to contain costs
 - Who shall do the work? NRs saying that NRs need to do more
 - How can EGPRN support NRs in countries where FM has low priority and little local support?

Discussion in Kushadasi

 Now, we need to develop a vision to implement these suggestions over the next few years!

International research collaboration

- How should EGPRN participate in and lead international research projects in primary care?
 - Aim for formal collaboration as a signatory partner in major research projects. Involvement of all EGPRN members.
 - Changes to EGPRN structures? New committee or existing? Expert groups within EGPRN already exist – incorporate with formal structures.
 - Work between not during meetings. People invited in advance. Abstracts accepted outside normal processes.
 - Which meetings or networks to approach to improve our visibility?

Organisation of EGPRN meetings

- One or two meetings a year?
 - Possibly one clinical (for practising FDs) and one academic focus meeting.
 - Possibly one high level conference, showcasing best and state-of-the-art presentations. High quality work with strict selection of best quality. Good keynotes.
 - Possibly one workshop, only for developing research ideas and extended discussion of work-in-progress.
 Give preference to researchers from countries with less developed research capacity.
 - Theme selection to lead not follow research agenda

Conclusions

- Reports of two focus groups
 - International research projects
 - Re-organisation of EGPRN meetings