Windsor VTS - Trainers’ Away Day – Cumberland Lodge April 2017

Ideas for holism competence – look at word picture

Remember Rod Clark does a session on the VTS for this ( and may present it to an educational session for the trainer’s group )

We probably model holism unconsciously in a lot of our patient interactions, so worth being aware of this and becoming more conscious of when we do it – so we can point out to trainees.

Specific opportunities –

Shared surgeries, or videos – eg just basic finding out something extra about a patient,

History for STI risk, or suicide risk relates to being non judgmental

Many home visits, particularly with the elderly lend themselves to this naturally, as patients’ social set –up usually needs to be considered in a management plan

OOH –eg emergency visits and decision whether or not to admit – and relative contacts in OOH eg a “something must be done for Granny” type call on a Sunday

Or updating OOH special notes from the surgery about an EOL or OOH status

Recognizing limits of intervention- can be considered if a patient refuses admission, or in any situation where the patient’s wishes re management are different from your own

MDT meetings

Social prescribing

Carer’s assessment or signposting

Social services referral

Making a contract with a very anxious patient ( = changing help-seeking behavior /avoiding dependence )

Health promotion eg anything to do with screening

Decision aids

There may be overlaps with consultation skills/ ethics / community orientation /medical management or complexity