

Prof. Martyn R. Partridge: delivering an appropriate medical workforce

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Expert introduction

Martyn R. Partridge, Professor of Respiratory Medicine and Patient Centred Care, The National Heart and Lung Institute, Imperial College London. Previously based on the Charing Cross Campus, in 2010 he moved to Singapore for 3 years to set up the Lee Kong Chian School of Medicine for Imperial and Nanyang Technological University.

His research interests are in evaluating the delivery of healthcare. This includes evaluation of service enhancements such as the organization of specialist consultation services, the use of lay educators, telephone consultations, electronic asthma and chronic obstructive pulmonary disease (COPD) action plans, and methods of enhancing communication between both patients and doctors, and specialists and general practitioners. He has a particular interest in the subject of health literacy and in simplifying information materials and questionnaires.

Professor Partridge chaired the sub-committee of the Undergraduate Education Committee at Imperial College where he was also a deputy Director of Education. He is past President of the British Thoracic Society (BTS), previous Chief Medical Adviser to Asthma UK, and a previous member of the GINA (Global Initiative for Asthma) Executive.

Editor's note

On Oct 29, the 2017 International Green Healthcare Forum was successfully ended after a dense agenda blending a superb scientific and educational program. The event took place in Shenzhen, China. It provided participants with scientific sessions composed of carefully selected lectures on healthcare reform and medical workforce training delivered by renowned experts.

During the conference, Prof. Partridge, deeply impressed all the attendees with his brilliant presentation on the topic “*Delivering an appropriate medical workforce*”. Taking



Figure 1 Photo with Prof. Partridge (second from the left).

this opportunity, the Editorial Office of *Journal of Hospital Management and Health Policy* conducted an interview with Prof. Partridge and invited him to share his experience in the field of medical education (*Figure 1*).

Interview topics

Q1. Today you gave a very impressive presentation on the topic “*Delivering an appropriate medical workforce*”, would you like to summarize your main points to us?

I think the main point is that we pay a lot of attention to getting the system right for healthcare, but actually we also need to pay a lot of attention to what happens within each consultation and to think about how the burden of healthcare has changed. We need to alter training and systems of healthcare to accommodate to that change. When we think about 150 years ago, people died of trauma, injuries, infections, or associated with childbirth; while today, people die of heart disease, lung disease, diabetes, etc. But when we look at those diseases which people live with for many years, rather than the diseases they die from, there are slight differences. Those diseases include dementia, or hearing



Figure 2 Professor Martyn R. Partridge: delivering an appropriate medical workforce (1).

Available online: <http://www.asvide.com/articles/1868>

problems, or major depressive illness or some long-term diseases like asthma, diabetes and COPD. The key point is that these diseases which people live with for 20 or 30 years need a totally different approach from that which you might use for acute infectious illness. We all know how the burden of healthcare has changed. But I don't think we have changed the training of potential healthcare professionals to accommodate that. And that training involves really treating patients in a different way, trying to support them as they self-manage their own condition, trying to help patients get involved in the decision-making about what treatment they are going to take every day. It is really to switch the emphasis around to what is important "to" the patient, not what important "for" the patient, which means switching things around to reach the patients goals. That is the sort of changing of our approach which I think we have not undertaken sufficiently in healthcare at the present time.

Q2. We know that you used to work in Singapore, could you share your experience in medical education here?

Imperial college was asked by the Singapore government to partner Nanyang Technological University in a new Medical School, the Lee Kong Chian School of Medicine and I went to Singapore for 3 years to establish the school. We were asked to deliver the Imperial curriculum contextualized for Singapore. But I thought that just delivering the Imperial curriculum in Singapore was a missed opportunity. Delivering a new form of medical education in an established medical school is quite difficult because you have to decide when to make the change, and do we teach two different curriculums for 2 or 3 years. But

given a blank sheet of paper to start an absolutely a new medical school, enabled me to stand back and to think about what we can do differently here, which might be better. After 6 months thinking and numerous discussion with colleagues in Singapore, London and elsewhere, we decided to deliver the Imperial curriculum in a totally different way. We paid a lot of attention to early patient interaction from the very beginning of the course, training students to put a patient's individual needs at the centre of all care. Potential healthcare professionals are required to have a thorough understanding of the scientific basis for medicine, as well as broader management and communication skills, but. students were also to benefit from innovative and interactive approaches to education, including extensive use of simulation, team-based learning and e-learning, a much more participatory interactive course than a traditional more lecture based programme.

Q3. What drives you to be a doctor?

It is quite difficult to disentangle why people want to be doctors. And I do think that when selecting future doctors, we need to be quite sure there is a reason about why they want to do it. We need to put much work into a transparent process of selecting the right people and making sure wherever possible people are much more realistic about what being a doctor is like. It's not a job that is any harder than many others but it is important to pick people with the right attributes, the right skills, the right empathy, the willingness and ability to work as a team player, to listen and to be able to take constructive criticism, to be very flexible about what they come across in their career, and to be inquisitive.

Let's enjoy the video (*Figure 2*)!

Interview with Martyn R. Partridge: delivering an appropriate medical workforce. Available online: <https://youtu.be/dW2PqYOD2G8>.

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Footnote

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