



# Recommendations for assessing qualifications of General Practice/Family Medicine university and academic post applicants

From the Nordic Colleges of General Practice/Family Medicine, unified as The Nordic Federation of General Practice

## Background

The [World Health Organization](#) defines Primary Health Care as a cornerstone of sustainable health care systems.

Primary Health Care is a defined sector of the healthcare system, typically comprising several clinical disciplines.

General Practice/Family Medicine is a key medical provider within the Primary Health Care system.

General Practice/Family Medicine is generally considered **an essential part of the undergraduate medical school curricula**.

General Practice/ Family Medicine is a distinct **clinical specialty**. Postgraduate training and certification programmes to obtain Specialist competence may be adapted to suit national contexts and needs.

General Practice/Family Medicine is a distinct **academic specialty**. Through **teaching and supervision, research** and **professional development**, it aims to promote quality medical care in the context of Primary Health Care services.

As an academic discipline, General Practice/Family Medicine is based on empirical knowledge, methodologies and theories drawn from the natural and life sciences, social sciences, as well as the humanities.

The granting and utilising of **clinical and academic titles** is important to upholding the standards of the discipline. The authorised utilisation of such a title as "Professor/Lecturer of General Practice/Family Medicine" affirms that the holder of the position is a physician with clinical background in General Practice/Family Medicine, often as a Clinical Specialist.

The flourishing academic environments that are associated with General Practice/Family Medicine include academics from a variety of disciplines, such as statisticians, anthropologists, epidemiologists, etc. To avoid confusion, we recommend these be assigned such discipline-specific titles as, "Professor of Medical Anthropology in General Practice", "Professor of Epidemiology in General Practice", etc.

## Recruiting applicants to academic posts within General Practice/Family Medicine

Announcements of open academic university posts within General Practice/Family Medicine (hereafter, GP/FM) should generally specify the relevant scientific, educational/pedagogical, and communication standards as defined by the universities and/or national bodies for each position – Professor /Associate Professor/ Assistant Professor / Lecturer, etc.

We recommend that academic GP/FM post **announcements** be prepared whenever possible in close cooperation with existing GP/FM academic units. Alternatively, a local academic milieu may establish an



advisory collaboration, for example with a GP/FM national college, scientific society, or some other well-respected, external GP/FM academic unit.

Ideally, the majority of **evaluation committee members** assessing the eligibility of candidates for a professorship within a specific discipline, e.g. GP/FM, should themselves have at least the level of general academic qualifications and specific discipline expertise as required for the position to be filled. In addition, at least one member should come from an external faculty, whether national or international.

When announcing openings for positions requiring lower academic degrees, e.g. GP/FM Associate Professor, Assistant Professor, or Clinical Lecturer, the evaluation committee should include at least one person with a solid academic GP/FM background, holding a similar or higher academic degree as the applicant being sought.

## **Key qualifications**

### ***Clinical qualifications***

GP/FM is a distinct clinical discipline. Consequently, eligible candidates for a GP/FM academic post should have GP/FM clinical practice experience; ideally, they should fulfil the core competences for a Specialist degree in GP/FM as delineated in the [European definitions of General Practice statement](#). Where necessary, however, the competence requirements ought to be tailored to suit the level of GP/FM development that the specific community /country has attained.

### ***Teaching and educational experience***

Preferably, the clinical experience required of applicants for GP/FM clinical teaching posts should reflect current standards within the discipline, or otherwise assure that their teaching curriculum includes educating students about those standards.

When evaluating applicants' **teaching experience and pedagogical merits**, specific experience in teaching/supervising GP/FM at the undergraduate and/or postgraduate levels ought to be ranked higher than pedagogical merits gained within other areas. If the conducting of postgraduate training is to be a part of the academic position, high priority should be given to the qualifications specified in WONCA Europe's [Training Requirements for GP/FM Specialist training](#).

Competence in supervising Med. PhD students who conduct General Practice/Family Medicine research is also important.

### ***Research within General Practice/Family Medicine***

A GP/FM Professor should ideally have built a varied portfolio of research and supervision with direct GP/FM relevance, both thematically and methodologically.

A successful GP/FM Professor participates in ambitious research projects with national and international relevance and publishes in acclaimed international journals. Smaller scale research project results published in national medical journals may also be of value. When these emerge from within a local context and, consequently, are directly relevant to developing regional/national Primary Health Care, they indicate a genuine commitment to the discipline.



This way of thinking may also be useful when evaluating funding received from large versus local sources/bodies.

Requirements may also be tailored to suit the needs and resources of the academic milieu in question. When recruiting new, talented GP/FM academics within certain contexts, the criteria for what constitutes relevant research competence could be interpreted more broadly for Associate Professorships than for Professorships.

A high rank should be assigned to research regarding the discipline of GP/FM, both studies carried out **in** General Practice and/or research **on** General Practice, that is, health service research in a broad sense.

Practice-based research, i.e. research based on questions arising from within the GP/FM clinical setting, should have a high priority. Experience with other types and methods of research are also of value. This is particularly so if the researchers are employed by or connected with GP/FM ('in-research'); such research adds to the critical mass within GP/FM units helping to fuel the growth of high-quality research.

Although studies **on** GP/FM conducted by researchers without any affiliation to GP/FM setting might be innovative and relevant, they are unlikely to become self-sustaining and may therefore have limited contextual validity.

Interdisciplinary research based on the premises of GP/FM could be considered 'in-research' if at least one of the researchers/authors has a GP/FM affiliation.

Academics in GP/FM publish their research in a variety of medical journals. It is preferable, however, that an academic GP has had work published in a number of the well-established **journals specific to GP/FM, and Primary Health Care**. In that case, the reputation and scope of the journal should carry more weight than the journal's impact factor (IF). In Primary Care research, 'IF' is not necessarily an optimal measure of either quality or relevance.

### **Overall professional profile**

Professional identity and impact should be regarded as essential for high-ranked GP/FM academics. The following elements may serve as indicators of such qualities, and should be considered by evaluation committees:

Indications of GP/FM leadership and professional development may include:

- Holding defining roles within local, national and/or international GP/FM colleges or other professional networks or interest groups focused on GP/FM.
- Having arranged meetings, symposia, congresses, etc., with relevance for GP/FM and Primary Health Care.
- Engaging actively in high-quality development projects as well as representing GP/FM in interdisciplinary professional development programs.
- Participating actively in national and/or international congresses in GP/FM preferably documented as list of abstracts and lectures.
- Having published her/his own research in GP/FM journals, or similar journals familiar to the GP/FM community.



Copenhagen, March 24<sup>th</sup>, 2023.

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