



Service Priorities and Programmes Electronic Presentations

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Continuous Training Program for Service Doctors in GOPC: Practitioner Development Program

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Introduction

With an aging population, the frontage of GOPC is rapidly changing. Doctors at General Outpatient Clinics nowadays are confronted with cases complicity unparalleled to the past. Over 60% of attendances are chronic conditions and more than 40% with multiple (≥ 3) co-morbidities. The tradition doctor-patient based care model has also evolved to include multi-disciplinary care. While FM trainees are quickly adapting, these changes are presenting a real challenge to the many doctors who are taking the back rows, many of them well seasoned practitioners in primary care without FM training, or one-fifth of medical manpower in our department. In an attempt to address the potential gap in patient management, a special training program was introduced to explore learning needs of non-FM trained doctors and to encourage catching up new knowledge and skills in their daily practice.

Objectives

1. To develop a training program tailor-made for non-FM trained doctors who had not undertaken FM training.
2. To explore and understand their learning needs.
3. To encourage continuous learning and regular update of medical knowledge.

Methodology

Non-FM trained doctors were invited to join a focus group meeting to collect their opinions on training and to identify their learning gaps. Based on their feedback and suggestions, members of department's training subcommittee developed a designated training program "Practitioner Development Program (PDP)" to target at their specific needs.

This Practitioner Development Program was started in 2013, each participating doctor was assigned an experienced FM specialist as his/her tutor. The program has the following components.

1. Consultation enhancement session

2. Case review session
3. FM structured seminar

Result

Feedbacks from non-FM trained doctors were regularly reflected through their tutors and from the yearly focus group. Since 2013, the following areas were discussed and covered through the PDP:

Consultation skills:

- Management of undifferentiated symptom encountered at primary care setting
- Proper discharge of responsibility and follow up appointment/arrangement
- Quality referral
- Health promotion and disease prevention

Documentation/medical handover:

- Abbreviation use in documentation/medical handover
- Investigation (quality & quantity)
- International classification of primary care (ICPC) Coding

Best practice:

- Antibiotics use for URTI
 - Polypharmacy avoidance and management
 - Treatment targets on DM, HT, lipid
 - Evidence based medicine
 - Update on latest practice, e.g. investigation result management,
 - Management strategies, e.g. minimizing hypoglycemia, hypotension
- In the last focus group meeting in April 2016, all non-FM doctors rated the PDP useful and could help them to update their knowledge and skills. In particular, they valued most the opportunity to learn from experienced FM specialist in a personal way.