

香港家庭醫學學院

The Hong Kong College of Family Physicians

香港家庭医生高级培训 Higher Training of Family Physicians in Hong Kong

刘浩濂医生 Dr Lau Ho Lim

香港家庭医学学院 副院长专业进修及服务委员会 主席

Vice President, HKCFP

Chairman, Board of Professional Development and Services, HKCFP

1. 香港医学专科学院

Hong Kong Academy of Medicine (HKAM)

- 香港唯一负责训练、监察及评核専科医生的 法定机构。
- The HKAM is the only independent institution with the statutory power to organise, monitor, assess and accredit all medical specialist training and to oversee the provision of continuing medical education in Hong Kong.
- 接纳符合要求的医生作为院士(作为专科医生的台阶)。
- Admit doctors who meet stipulated requirements to be Fellows.



香港家庭医学学院

Hong Kong College of Family Physicians (HKCFP)

- ▶ 香港家庭医学学院是香港医学专科学院的创立分科学院
- HKCFP is one of the Founding Colleges of HKAM
- > 家庭医学是香港认可专科医学之一
- Family Medicine is one of the recognised Medical Specialties in Hong Kong
- 香港医学专科学院院士 (家庭医学) 授予专科医生的资格并获香港医务委员会审批认可
- FHKAM(Family Medicine) is a Specialist Qualification approved by the Hong Kong Medical Council







香港家庭医学学院 (HKCFP)

- ▶ 成立于1977年,原名为香港全科医学学院
- Established in 1977 as Hong Kong College of General Practitioners
- ▶ 1984年制定家庭医学在职培训计划
- ▶ 1984 Formulated vocational training in Family Medicine
- ▶ 1986年举办第一届澳洲联合全科院士考试
- ▶ 1986 First Conjoint Fellowship Examination with RACGP
- ▶ 1997年改名为香港家庭医学学院
- ▶ 1997 Name changed to Hong Kong College of Family Physicians





香港家庭医学学院在培训方面的使命 Mission of HKCFP in training

- 促进家庭医学的发展。
- Promote development in Family Medicine.
- > 为有意从事家庭医学专业发展的医生,制定职业培训的标准。
- Set standards in training for those doctors aspiring to be family physicians.
- 举办得到香港医务委员会认可的家庭医学专业的相关考试。
- Develop and run approved professional examinations in Family Medicine.
- 提供多种持续进修课程。
- Provide a variety of CME courses.



为什么要培训家庭医生? Why should we train family physicians?

即在从国家,地区,地方和个人层面的各种研究可以获得很好的证据,表明良好的基层医疗带来更好的健康结果(平均而言),更低的成本(稳健与持续)和更高的卫生公平性。

There is now good evidence, from a variety of studies at national, state, regional, local, and individual levels that good primary care is associated with better health outcomes (on average), lower costs (robustly and consistently), and greater equity in health.

- Prof Barbara Starfield (1932-2011)



2. 香港全科/家庭医生的专业培训 Training of Family Physicians in Hong Kong

自1995年开始,实施共6年的家庭医生专业培训制度:

- 至少4年的基础培训,以保证培训者有广泛的医学知识并具备扎实的临床技能。 其中包括:
 - 2年医院为本的基础培训 (内科, 外科, 妇产科, 儿科, 骨科, 精神科, 急症科, 眼科, 耳鼻喉科, 皮肤科)
 - > 2年社区为本的基础培训
- > 2年的高级培训
 - 完成初级培训后,获得受认可的家庭医学高级资格(如:香港家庭医学院院士),可参加高级培训。
 - 培训过程需要香港家庭医学学院认可的导师签名,学员需提交完整的培训报告。

两年以医院为主的基础培训 2-year hospital-based training

- ▶ 认可的医院- 核心专科培训
 - ▶ 内科,外科,儿科,妇产科(每科3-6个月)
- 其他必须参加的专科培训(认可的医院或专科门诊)
 - 耳鼻喉科,骨科,皮肤科,精神科,眼科,急症科
- ▶ 自选科目
 - ▶ 肿瘤科,病理科,放射线科,微生物科,ICU,麻醉科,感染科等。
- > 培训要求:
 - 至少为期一年的核心专科培训
 - ▶ 每个核心专科培训期至少三个月
 - ▶ 剩余的培训时间可用于参加必修科以及自选科目的培训
 - ▶ 认可的临床导师签名,评分,反馈



两年以社区为本的基础培训

2-year community-based training

受训医生将被指派到医管局辖下家庭医学门诊部或其他认可的家庭医学培训中心工作,由家庭医学专科医生负责直接监督指导:







- > 与导师共同诊治
- > 临床病例录像分析
- 全科医学临床及理论 讲座



3. 香港家庭医学学院 暨 澳大利亚皇家全科医学学院 之 联合院士考试

相当于 - 中期培训结业考核



考核的重点是:

- > 沟通技能和医患关系
- 专业应用知识和技能
- 市民健康与全科医学之联系
- 专业操守与医学伦理
- 医疗机构及医学法学事项



联合院士考试的结构

Format of the Conjoint Fellowship Examinations

- ▶ 4年基础培训中,完成2年基础培训后,可以参加笔试。
 - > 笔试分为两个部分
 - ▶ 多项选择题 (MCQ/AKT)
 - ▶诊症关键题 (KFP)



▶ 完成4年基础培训后,可以参加临床技能部份 (OSCE).





4. 高级培训

Higher Training

- 受训医生在完成初级培训,且获得受认可的家庭医学高级资格,如以上提到的联合院士,可参加两年的高级培训。
- ▶完成高级培训后,可参加专科医生资格考试, 或可称为高级培训结业考核(Exit Examination)。

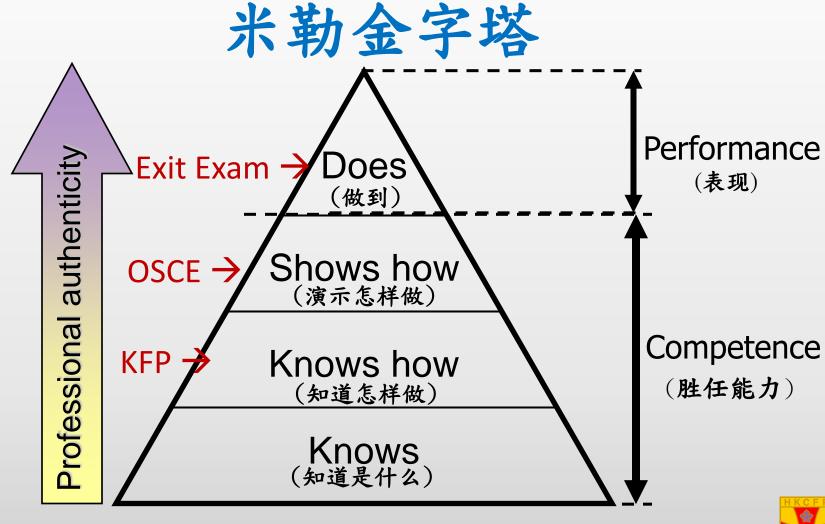


5. 专科医生资格考试 /结业考核 Exit Examination

- **•**包括三部分
 - 1) 临床技能考试 (Consultation skills assessment, 简称CSA)
 - 2) 诊所管理(Practice assessment,简称PA)
 - 诊所的组织及管理
 - ▶ 常规药物及危险药物的管理
 - 临床病历分析 (300个)
 - ▶ 临床检验部分 (10个)
 - 3) 临床审计报告(Audit)或科研论文报告 (Research)



Miller's pyramid



Miller GE. The assessment of clinical skills/competence/performance. Academic Medicine (Supplement) 1990; 65: S63-S7.

6.成为香港医学专科学院院士 FHKAM

成功完成专科医生资格考试并不等于自动可以获得香港医学专科学院院士。申请者需要达到符合要求的持续进修学分,连同过往6年的培训数据一齐递交于香港医学专科学院进行审批。

Besides passing the Exit Examination, a doctor needs to accrue the required CME points and the evidence of the 6 years training to HKAM for approval.

从进入医学院的那一天起,至少需要12年的持续不断的学习,训练,考试才能被认可成一位家庭专科医生。

From the day of entering medical school, it takes a person at least 12 years to be a specialist in Family Medicine.

高级培训



目的 Aim

- 使学员能够成为一位独立执业的家庭医学专科医生。
- To enable a trainee to practise as a **specialist** in Family Medicine **independently**.



高级培训的的重点

Focuses of Higher Training

- ▶ 1.巩固和应用基础培训中学到的知识和技能 Consolidation and application of knowledge and skills learned in Basic Training
- ▶ 2.在督导下独立执业 Supervised independent practice
- ▶ 3.自主学习
 Self-directed learning
- ▶ 4.日常工作的可持续性
 Sustainability in daily practice



培训内容

Content of Training

- ▶ 个别病人的医疗 Individual patient care
- ▶ 关心病人的家人并与他们合作 Working with families
- ▶ 预防保健 Preventive care
- ▶ 对有特殊需要的病人的医疗 Care of patients with special needs
- ▶ 专业发展 Professional development
- ▶ 医学伦理Medical ethics
- ▶ 质量保证/审计/科研 Quality assurance/ Practice audit/ Research
- ▶ 卫生保健服务管理 Health care service management



培训过程和方法 Process and Means of Training



在督导下独立执业

Supervised Independent Practice

- ▶ 临床 Clinical:
 - ▶ ≥ 40 hours per week ≥每个星期40小时
- ▶ 高质量的个人病人护理 High-quality individual patient care
- 关心病人的家人并与他们合作 Working with families
- ▶ 困难病例 Difficult consultations
- ▶ 对有特殊需要的患者的医疗 Care of patients with special needs
- ▶ 预防保健 Preventive care



临床培训活动记录

Record of clinical training activities

- ▶座席/录像带诊症记录 Record of Sit-in / Videotaped Consultation
- ▶ 临床督导反馈记录 (每6个月) Record of Clinical Supervisor Feedback (6 monthly)
- ▶ 两星期的病人简介 2-Weekly Patient Profile



录影的指引

Guidelines for recording consultations

- 记录请包括病人以往病史的摘要。内容包括上次咨询的日期和原因,以及是否为持续性咨询。
- > 总结病人的病情,并回答以下问题:
 - > 对该名病人,您有什么假设性的诊断?
 - > 为什么会有这些假设?
 - 您认为需要进行何种身体检查,为什么? 进行身体检查后,请回答以下问题:
 - ▶ 进行身体检查后,您的发现和想法是什么?
- > 病人离开后,请回答以下问题:
 - > 为什么选择这样的管理计划?



Structured Educational programme

- ▶ 8个模块 (8 modules):
 - ▶ 1. 家人在家庭医学中的原则和概念 The principles and concepts of working with families
 - ▶ 2. 庭会面和辅导 Family interview and counseling
 - ▶ 3. 艰难的案例和伦理困境
 Difficult consultations and ethical dilemmas
 - ▶ 4. 临床审核和家庭医学研究 Clinical audit and research in family medicine



Structured Educational programme

- ▶ 5. 批判性评价 Critical Appraisal
- ▶ 6. 预防医疗和有特殊需要的患者
 Preventive care and patients with special needs
- ▶ 7. 卫生经济学与先进的诊所管理 Health economics and advanced practice management
- ▶ 8. 教学和培训
 Teaching and training



Structured Educational programme

- ▶ 小组讨论 Small group discussion (≥ 50%)
- ▶ 其他研讨会 Other seminars
- ▶ 每个模块都需要预先批准提案 Each module requires pre-approval of the proposal



Structured Educational programme

- Requirement (Total 160 hours)
 - ▶ ≥ 80 hr per year
- Frequencies
 - ▶ ≥ 12 hr per 2-month 月
 - Max. 2 sessions per day
 - ▶ ≥ 40 sessions per year
- Duration per module
 - ▶ ≥ 15 hours per module
 - At least 50% (i.e. 7.5 hours) is small group discussion

最少50%(即7.5小时)是小组讨论

要求(共160小时)

≥ 80小时/年

频率

≥ 12小时/2个

每天最多2次会议

≥ 40 会议/年

每个模块的长短

≥ 15小时/模块



自我导向教育和批评性评估练习

Self-Directed Education & Critical Appraisal Exercise

- ▶ 共计160小时 (Total 160 hours)
 - ▶ 批评性评估 Critical Appraisal
 - ▶ 其他培训活动:对培训学员特别感兴趣的 Other training activities of special interest to trainee
 - ▶ ≥ 40小时/6个月 ≥ 40 hours per 6 months
 - ▶ 最少50%是批评性评估 At least 50% in critical appraisal exercise



SELF-DIRECTED EDUCATION & CRITICAL APPRAISAL EXERCISES Mandatory for Higher Training (40 hours/6 months)

Date and number of hours:
Details of Educational Activity:
Critical Appraisal 1. What is the relevance of the topic to your practice?
What new information have you learned?
3. Is the new information applicable to your work?
4. What are you going to do with the new information?
5. Overall comments:
N.B. Please make copies of this form as needed.

自我导向教育 和批评性评估 练习报告样本



专业发展与伦理

Professional development and ethics

-)确定自己的能力和缺陷
- Identify self competencies and deficiencies
- 开展自我学习计划
- Carry out self-learning plans
- 批判性评价技能和应用
- Critical appraisal skills and application
- > 专业操守
- Professional ethics



质量保证和审计

Quality assurance and audit

- ▶ 最少进行一个审计 Conduct at least one audit
- M 确定患者护理的重要领域
 Identify area of importance for patient care
- ▶ 培训的第一年开始进行审计 Start an audit in first year of training
- ▶ 完成审计周期 Complete the audit cycle
- ▶撰写审计 Write up the audit
- > 为进一步的改善作出计划 Plan for further improvement



诊所管理

Practice management

- 组织及管理一间独立诊所的知识、技能应用及能力。包括:
 - > 诊所结构
 -) 诊所管理
 - > 药房和药物标签
 - > 病历分析
 - > X光, 化验究查
- 从诊所挂号开始,诊所内部布置,所有诊断仪器的使用, 消毒,职业健康,医疗废物的处置,危险药品的管理, 紧急病例的处理,药物冰箱的监管等等,都是需要学习 的范围。



教育和培训

Education and training

- ▶ 医学本科生 Undergraduate
- 基础培训的学员 Hospital-based trainees and Community-based trainees
- 接受全科医生培训的医生 Doctors undergoing GP training
- ▶ 充当培训研讨会协调员 As training seminar coordinators
- ▶ 参与社区公共健康教育 Participation in public education in community



科研

Research

- > 学习开展科研项目的能力,包括:
 - > 如何执行文献检索和定义科研课题,
 - > 如何选择最合适的方法来回答研究的命题,
 - > 如何进行适当的分析和探讨,
 - 如何将得出的数据转化为结论并解释结果等等。



卫生保健服务管理 Health care service management

- ▶ 在当地社区计划卫生保健服务 Health care service planning in the community/practice population
- ▶ 积极参与 Active participation and involvement



参加年度医学会议

Attendance at Annual Primary Care Conference

- 高级培训学员在培训期内,需要参加至少一次由香港家庭医学院举办的年度医学会议 香港基层医疗会议。
- Each Higher Trainee is required to attend the annual Primary Care Conference organised by HKCFP at least once during their training period.



学员的角色 Trainee's Role

- ▶ 自我学习计划/目标(每6个月与临床督导审查一次) Self-directed learning plan/goals (review with Clinical Supervisor every 6 months)
- ▶ 定期的结构化培训活动 Regular structured training activities
- ▶ 自我导向教育和批评性评估练习 Self-directed training and Critical Appraisal Exercise
- > 对培训内容/清单的进度进行审查 Review progress in relation to content/checklist of training
- ▶ 填妥相关的培训日志 Fill relevant parts of logbook
- ▶ 确保就诊症技巧与督导进行沟通 Ensure contact with supervisors in relation to consultation skills
- ▶ 临床审核与实践管理 Clinical audit and practice management

督导 Supervision



临床督导

Clinical Supervisor

- 不需在相同的诊所工作
- Not required to work in the same practice
- > 与学员定期会面,每半年不能少于一次
- Meet trainee regularly, not less than once every 6 months
- > 对培训进度进行资讯和检查
- Advice and monitor on training progress
- > 提供临床审核的意见
- Advice on clinical audit



临床督导的角色 Role of Clinical Supervisor

- ▶形成性评估和总结性评估
 (Formative and Summative Assessments)
 - ▶ 每6个月的诊所评估 Practice assessment every 6 months
 - ▶ 每6个月的诊症技能评估(采用 LAP) Consultation skills assessment (LAP score sheet) every 6 months
 - ▶ 每6个月评论学员的学习计划和组合 Review of trainee's learning plan and portfolio every 6 months
 - ▶ 年度评估/反馈 Assessment / Feedback annually
 - ▶ 每年检查培训日志 Checking of logbook annually



培训评估反馈

Assessment/Feedback by Clinical Supervisors

(HIGHER TRAINING) (revised on 13 March 2015)							
so	This form is designed to help vocational trainees identify their areas of clinical strengths and weakness to that specific further training areas can be explored. Frank and constructive feedback from you essential for this aim. If you have insufficient information to answer a question, please indicate this.						
P	Please make a copy of the completed form for your rec	ords.					
	*Please submit the report <u>at least once a year</u> (or at whichever is shorter)	the end of training in	each training center				
Tra	Trainee Doctor Supervision	sor	(Block letter please)				
Pra	Practicing address Period fi	romto					
PL	PLEASE RATE THE TRAINEE'S PERFORMANCE (0=very poor	, 5=excellent) in the follow	ing areas:-				
l.	Ability of full independent practice in family medicine Comments :		5				
2.	Provision of cost-effective health services to the commun Comments :	للاه	LL5				
3.	Ability of handling difficult problems encountered in famil	y medicine practice					
	Comments :		1 5				
4.	Knowledge and skills in working with families	01.1.1	1 1 1 15				
	Comments :						
5.	Knowledge and skills in handling the care of population with special needs e.g. the elderly, women and						
	the chronically ill in the community	01.1.1	L L L 15				
	Comments :						

	Comments :	0 5
7.	Knowledge and skills of critical appraisal of new information Comments:	05
8.	Knowledge, skills and interest in academic family medicine includ Comments :	ing education, training and researc
9.	Skills of conducting clinical audit / research	0 1 1 5
Ple	Comments: ENERAL COMMENTS: asse comment on the doctor's progress during the term - the	extent to which the doctor's train
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rainee for completion of 1year / 2year of Higher Training during the specified period.			
Comments (Obligatory if not re			
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Signed and official chop	$-\!\!\!-\!\!\!\!-$		
Date :			
Date :			
	H.K.C.F.P. at Room 803-4. B/F, HKAM Jockey Club Building, 99 Wong v	Chuk Hang	
		Chuk Hang	
Once complete please return it to F Road, Aberdeen, Hong Kong.		Chuk Hang	
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诊症技能评估方法

Consultation skills assessment

- Leicester Assessment Package (LAP)
 - ▶ 由Professor Robin C Fraser引进
 - ▶ 应用LAP工具,从七方面,有系统,有根据,客观,全面地去评估.

评估范围	得分比率
问诊/病史采集技巧	20%
体检	10%
病人的疾病管理	20%
鉴别诊断,解决问题	20%
行为/和病人的关系	10%
预防保健	10%
病历记录	10%



我们的愿景

Our Vision

- 培育年轻医生成为有能力及独立执业的家庭 医生。
- To nurture young doctors to fulfil their role as competent, independent family physicians.
- ▶培育年轻医生成为WONCA五星级医生和家 庭医学未来的领袖。
- To cultivate young doctors to be WONCA Five-star doctors and future leaders in Family Medicine.



- 一个将病人视为家庭和社区不可分割的一部分的护理提供者,并提供高标准的临床护理(排除或诊断严重疾病和残疾,管理慢性疾病和残疾,并提供个性化的预防保健,同时建立一个互信的医患关系
- a CARE PROVIDER who considers the patient as an integral part of a family and the community and provides a high standard of clinical care (excluding or diagnosing serious illness and injury, managing chronic disease and disability and provides personalised preventive care whilst building a trusting patient- doctor relationship

- 一位决策者,他选择应用哪些符合道德和成本效益的技术,同时加强他或她提供的护理
- ▶ a DECISION MAKER, who chooses which technologies to apply ethically and cost-effectively while enhancing the care that he or she provides



- 一个能够通过强调解释来促进健康生活方式的 沟通者,从而赋予个人和群体增强和保护他们 健康的能力
- a COMMUNICATOR, who is able to promote healthy lifestyles by emphatic explanation, thereby empowering individuals and groups to enhance and protect their health



- 一个社区领导者,能够赢得与他或她工作的人们的信任,可以协调个人和社区的健康要求,并且代表社区采取行动
- ▶ a COMMUNITY LEADER, who has won the trust of the people among whom he or she works, who can reconcile individual and community health requirements and initiate action on behalf of the community



- 一个团队成员,可以在医疗保健系统内外与个人和组织和谐地工作,以满足他或她的患者和社区的需求。
- a TEAM MEMBER, who can work harmoniously with individuals and organisations, within and outside the health care system, to meet his or her patients and community's needs



谢谢 Thank you



