The Development of General Practitioners in China

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Content

• The milestone of development in General Practice training in the mainland of China
  3-stages (Introduction, Initiation, Framework building)

• The Training of General Practitioners: Shanghai case
  Standardised Medical Education, on-job training, Continuing education, train the trainers…

• Problems Nowadays
  Corresponding Strategies and Recommendations
In 21st Century, there is a rapid development in Biology, Bio-technology and Information Technology

Changing mode of medical services, aging population and changing disease patterns

Limited Healthcare resources and high demand for primary care by the general public
As at the end of 2010, the total no. of national health institutions reaches 937,000

- Hospitals 20,918
- Primary Care institutions 902,000
  - Community Health Centre 33,000
  - Provincial Health Centres 38,000
  - Clinics 173,000
  - Village Health Clinics 648,000
2006-2010 Community Health Centres

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<th>Year</th>
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<tbody>
<tr>
<td>2006</td>
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<td>2009</td>
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<td>2010</td>
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No. of Health Professionals in various healthcare institutions

- Hospitals: 3.2 (2009), 3.44 (2010)
- Community Health: 0.25 (2009), 0.33 (2010)
- Provincial Health: 0.95 (2009), 0.97 (2010)
- Public Health Institutions: 0.47 (2009), 0.49 (2010)
Findings shows that there are 78,000 Registered General Practitioners (GPs).

Quantity and quality of GPs cannot satisfy the need of Primary Care
1. There are 248 Community Health Centres.

2. 9,848 Community doctors (21.6% of all doctors)
   2,043 General Practitioners

3. Community nurses 5,273 (12.5% of 422,000 Registered nurses)

4. Community Doctors qualifications:
   Graduates or above: 20%
   College: 30%~50%
   Secondary Technical School: 30%~50%
“In 2020, 300,000 GPs will be trained up through various trainings.”

- Increase training for primary care health professionals
- Encourage health professionals to engage in primary care Services
- Systematic designs to retain primary care health professionals
General Medicine Education in China

In 2010, improved GP medical education system in China

- In 80s: Introducing GP theory and knowledge from other countries.
- In 1999: A national program - Medical Education for GP commenced.
- In 2000: Medical education for GP will focus on training for medical graduates.
Milestone of development of Shanghai GP training

Establish the discipline of GP at Zhongshan Hospital, Fudan University

Fudan University, Shanghai medical school Department of GP- building a platform for GP development.

To realise the social multi-layers training for GP

1994 2002 2006
Milestone of development of GP in Shanghai

- In 2010, Shanghai implemented the 3-year standardised training for GPs that aimed for doctors with University medical degree only.

- Contract signed between training hospitals and trainees.

- GPs may work in their training hospitals after training is completed.
Current GP Training

(Training targets)

- Common health problems
- Chronic disease management
- Distinguishing between acute/severe vs other illness
- Timely and appropriate referral to specialists
- Good Communicating skills
- Resources management
- Self directed studies/lifelong learning)
GP training System

- Undergraduate education
- Standardised training for GPs
- On-job training
- Postgraduate training
- Continuing training
- Teachers training
1. Undergraduate education

- GP training for undergraduate medical students
- Over 30 Medical schools provide Introduction to GP as electives

**e.g.:** Fudan University, Shanghai Jiao Tong University, Capital Medical University, Zhejiang University, Chongqing Medical University, Peking University, Nanjing Medical University, Nanchang University, Anhei Medical University, Xuzhou Medical College, China Medical University, Shandong University...
2. GP training

Commencement of standardized GP training in 2000

1 Clinical base
- Fudan University – Zhong shan Hospital
- CMB

3 Clinical bases
- (Zhongshan, Renji, Xinhua hospitals)
- (1st batch of hospitals with recognition for standardised training base)
- 15 Community bases

2006

15 Clinical bases
33 Community bases......

2010
Training Model

Theory 2M
Various teaching methods
- Role-playing
- SP
- PBL

Clinical rotation 27M
Quality Control
- Sessions by training specialists
- Assessment
- Regular CME meeting

Community practice 7M
- Joint training by community (practical) and GP teachers
- Training plan
- Practical
As at 9/2010, there were 703 Medical graduates including Master students.

As at 9/2011, 336 graduates received standardised GP training certification.
3. On-Job Training

- Timely and sufficient supply of GP
- Over 80% of registered doctors are willing and have the ability to become GPs.

By providing rotation training to community doctors, the demand for health services can be met.
Training Manual and assessment Books

- GP 1st stated in SH in 1997 at No.2 Medical University Adult Education Unit
- Training Manuals 《上海市全科医生岗位培训教材》（2001，第一版；2004，第二版）
### 22项卫生服务技能培训项目

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<td>1</td>
<td>病历书写*</td>
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<td>2</td>
<td>体格检查*</td>
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<td>3</td>
<td>心电图操作技能及常见心电图读片*</td>
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<tr>
<td>4</td>
<td>常见疾病X线读片</td>
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<td>吸痰术</td>
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<td>吸氧术</td>
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<td>8</td>
<td>测量T、P、R、BP*</td>
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<td>9</td>
<td>肌内、皮下注射法</td>
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<td>10</td>
<td>切开、间断缝合、8字形缝合*</td>
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<td>拆线、单手打结和持钳打结*</td>
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<td>12</td>
<td>脓肿的预防和护理</td>
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<td>胸外心脏按摩*</td>
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<td>14</td>
<td>换药*</td>
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<td>15</td>
<td>口对口人工呼吸*</td>
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<tr>
<td>16</td>
<td>穿、脱隔离衣</td>
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<td>17</td>
<td>人工肛门（肠造瘘口）护理</td>
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<td>小儿体格检查操作</td>
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<td>21</td>
<td>上睑结膜检查</td>
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<td>22</td>
<td>额镜对光检查</td>
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注：*为必考项目，1-2项为学员出院考试项目。
Trainee: Community Health service registered doctors and assistant doctors

Training Method: Face to face; distance learning
Theory, Clinical and Community Practice

Training Content:
- Theory: 240 hrs
- Practicing: 260 hrs
- Community Practice: not 60 hrs

Total: 500 hrs
Target: Doctors who have GP qualification, the national standard is to get 25 credits on various subjects.

Various Forms with Wide coverage

- National continuing education
- Team leader training
- Academic meeting and exchanges
- Community Salon
- Distance Education
- GP training in Shanghai
National GP continuing education

--The follow-up on common diseases

--The application of Cognitive medicine

--The development of research by GP in Community

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Community GP Team leaders’ training
--Treatment and management on COPD
--Nutrition management in community
--Basic skills in Mental and physical health consultation
--The manual on chronic diseases
--Chronic diseases management models
......
- Academic meeting and exchange
  -- WONCA, National and international Academic meetings
  -- Specialist academic meeting
Community case discussion Salon

From Jan, 2008, monthly meeting on common or chronic diseases for GPs is conducted to raise their medical skills.
5. Train the trainers

- Training Targets
  Clinical, community teaching qualification

- Content
  - Basic Theory and method of GP
  - Work of GP
  - Skills of GP
  - Key points for GP training
  - Medical Sociology
  - Psychology and psychiatry
  - Teaching methods, skills and comments
Why teachers training?-1

- Different qualifications, clinical and teaching experience
- Different views on medical education
- Lack of full-time teachers
## Why teachers training? - 2

### Difference in Clinical and Community trainings

<table>
<thead>
<tr>
<th>Clinical Training</th>
<th>Community Training</th>
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<tr>
<td><strong>Individual</strong></td>
<td>From individual to population</td>
</tr>
<tr>
<td><strong>Skills</strong></td>
<td>Co-ordinations of different skills</td>
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<tr>
<td>various teaching methods</td>
<td>Case discussions, PBL</td>
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<td>(Lectures, Role-play, SP teaching…)</td>
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<td><strong>Regular feedback</strong></td>
<td>Direct feedback</td>
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- Exchanges between trainers

--Inviting Community teachers to teach in theory lecture of the standardised training for GPs

--International and national level

Teachings by GPs from Taiwan, HK, UK, US and Australia
Send Teachers to HK for visiting the OSCE exams
Visiting scholarship programmes to other countries
6. Postgraduate education

- Higher education institutes should create an environment which favors the development of GP
- In 2003, Fudan University introduced the Master of GP
- 3 years, focus on Community Medicine
- Develop community research team to conduct research
Problems Nowadays

- Over-emphasize theory, lack of practice
- Lack of objective assessment on quality of GP training
- Lack of experienced community trainers
Strategies and Recommendations

- Increasing the NO. of GP development & medical students GP training hours
- Unifying the training model & examinations methods
- Set-up systems to assess quality of GP training objectively
Strategies and Recommendations

- Assessing GP training result and set assessing indicators
  - No. of times for Specialist consultation?
  - Improvement on self assessment?
  - Reduction in no. of health disputes?

- Trial on GP teaching system, Strengthening the training for GP teachers
Prospect of GP training

- Monitoring on population health and foster a more personal relationship with patients
- Implementing GP consultation gradually
- Health Insurance Reform
Thank you for your attention!