



# Opportunities offered to the family doctor in DHC

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# Code of Professional Conduct

## The Medical Council of Hong Kong

- ▶ The International Code of Medical Ethics is adopted by the World Medical Association. It is endorsed by the Medical Council of Hong Kong, except where the contrary intention appears from the context of this Code of Professional Conduct. The Council will have regard to the International Code in the exercise of its disciplinary power.



“

The art of medicine involves the application of medical science and technology to individual patients, families and communities, no two of which are identical. By far the major part of the differences among individuals, families and communities is non-physiological, and it is in recognizing and dealing with these differences that the arts, humanities and social sciences, along with ethics, play a major role.

”

*From Medical Ethics Manual 3<sup>rd</sup> edition 2015, World Medical Council*



# Good Medical Practice

## GMC

- Knowledge, skills and performance
- Safety and quality
- Communication, partnership and teamwork
- Maintaining trust



# Blueprint for Primary Healthcare Development 2019

- Develop a more comprehensive and sustainable PHC system in Hong Kong
  - Greater policy co-ordination and service consolidation
  - Greater emphasis on continuity and integration of care
  - Promotion of health management and holistic primary care

“

Expand, synchronise and consolidate the PHC services introduced and operated by different departments/ organisations

”



1. Greater policy co-ordination & service consolidation

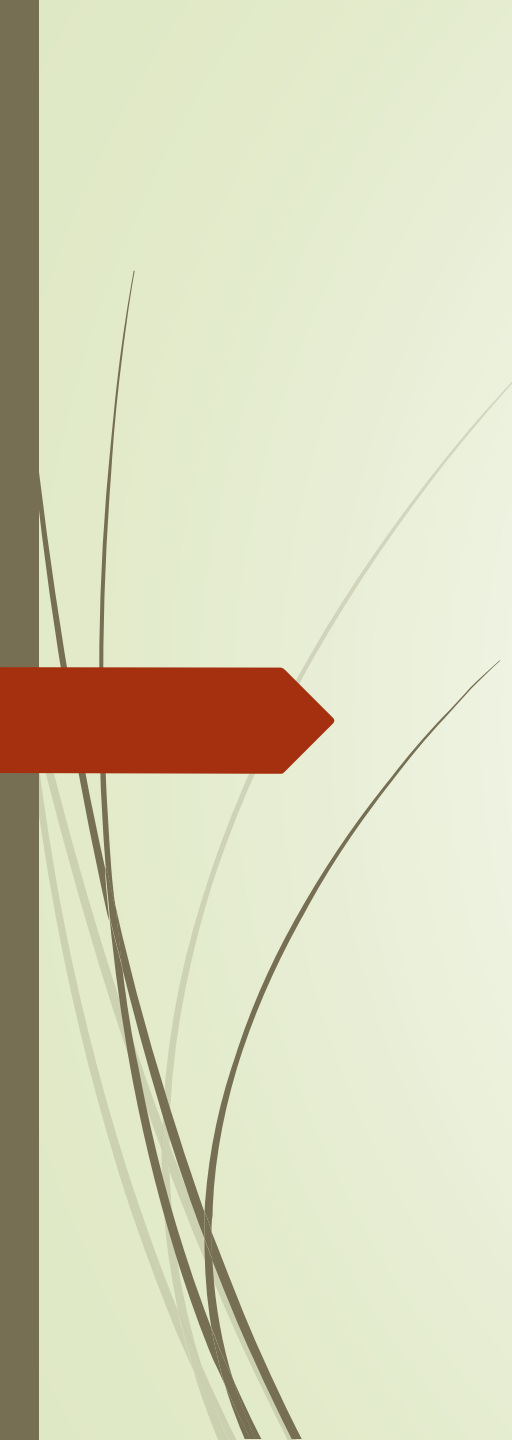


“

Encourage continuity of relationship  
between patients and their primary care  
doctors;  
Interface, collaboration and integration of  
different levels of health care

”

## 2. Continuity & Integration of Care



“ Promote individual and community involvement in preventive care and wellness promotion;  
Facilitators to coordinate among the key players and integrate their services ”

3. Promote health management & holistic primary care





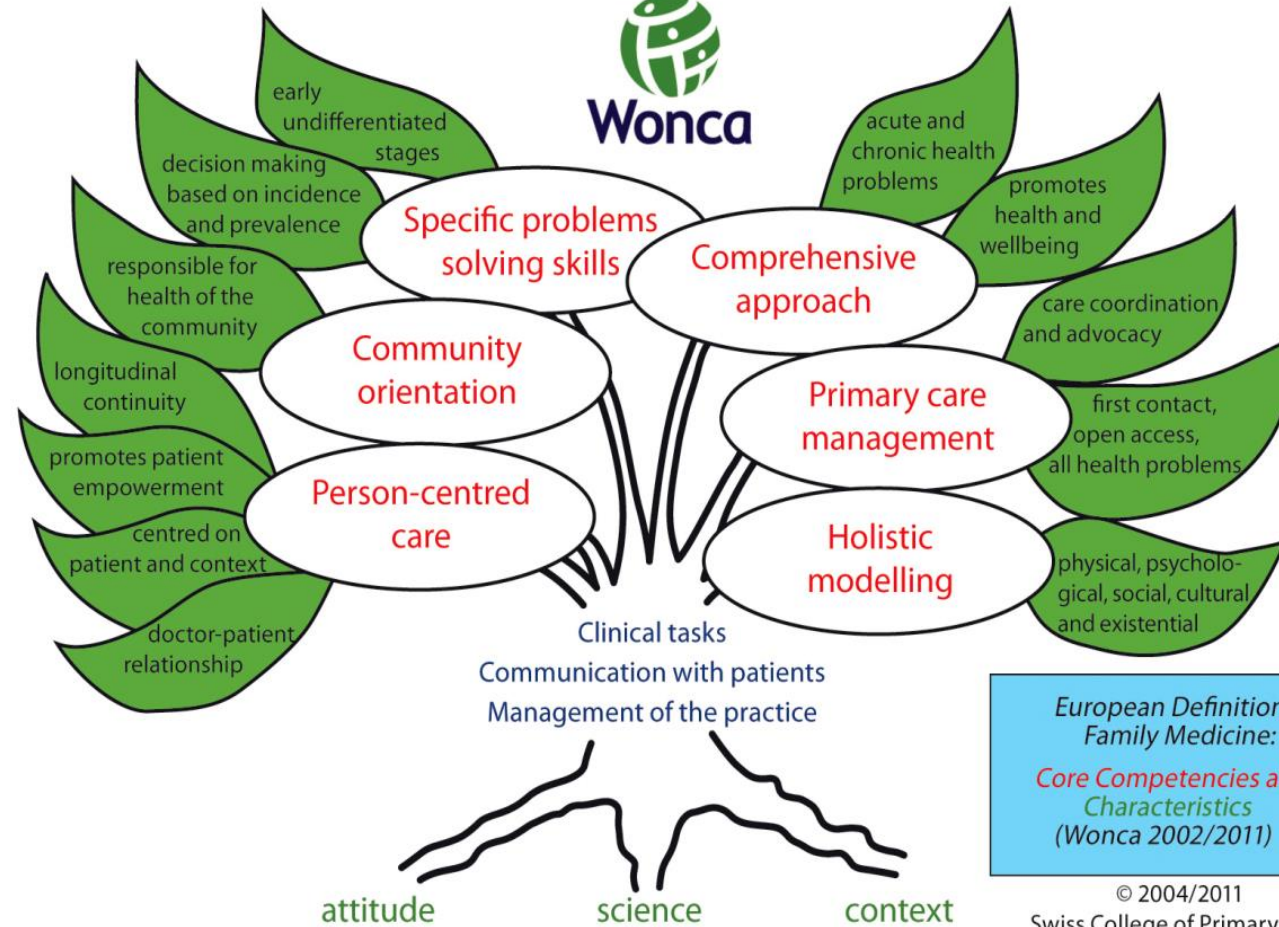
# WHO Primary Care



- ▶ Primary care is a model of care that supports first-contact, accessible, continuous, comprehensive and coordinated person-focused care. It aims to optimize population health and reduce disparities across the population by ensuring that subgroups have equal access to services. There are five core functions of primary care:
  - **First contact accessibility** creates a strategic entry point for and improves access to health services.
  - **Continuity** promotes the development of long-term personal relationships between a person and a health professional or a team of providers.
  - **Comprehensiveness** ensures that a diverse range of promotive, protective, preventive, curative, rehabilitative, and palliative services are provided.
  - **Coordination** organizes services and care across levels of the health system and over time.
  - **People-centred** care ensures that people have the education and support needed to make decisions and participate in their own care.

# Basic principles of family medicine

- **Context of Care** : Primary and evidence-based
- **Continuity of Care** : Continuous Healing Relationships
- **Comprehensive Care** : Whole Person / Holistic Care
- **Anticipatory and Preventive Care** : For different stages of life
- **Coordination of Care**: Integration of complex care
- **Centred on the Patient** : Biopsychosocial Approach
- **Care of the Family**



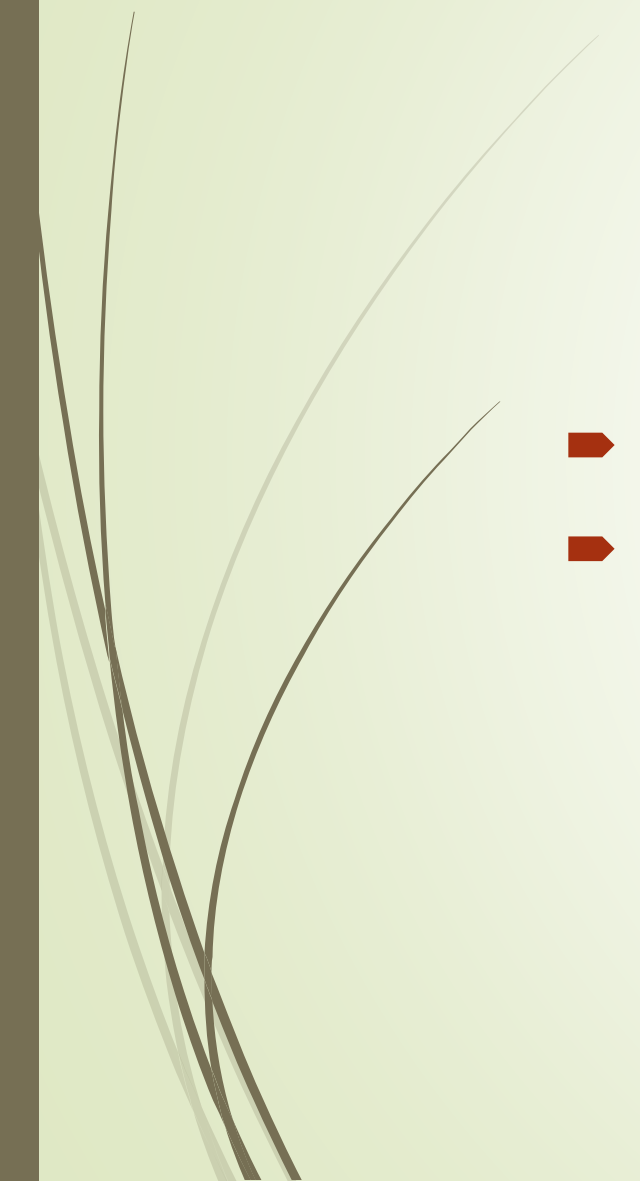
*European Definition of Family Medicine:  
Core Competencies and Characteristics  
(Wonca 2002/2011)*

© 2004/2011  
Swiss College of Primary Care  
Medicine / U. Grueninger  
[www.kollegium.ch](http://www.kollegium.ch)

THE WONCA TREE – AS PRODUCED BY THE SWISS COLLEGE OF PRIMARY CARE  
(Revised 2011)



# The Dual Role of Family Doctors

- Not only providers of treatment
  - But providers of BOTH prevention and treatment
- 



Solo GP/Family doctor



“

...an integrated interprofessional approach by a co-operating team is essential to address the complexity of multi-problem situations, with the patients in the driver's seat, in order to contribute to the achievement of their goals.. ”

*Family Medicine and Primary Care – At the Crossroads of Societal Change,*  
Jan De Maeseneer, Lannoo Publishers, 2017, p.206

(A book with the Foreword co-written by 4 WONCA Presidents)



# Management Scenario: Diabetes Mellitus

# Diabetes Mellitus

- currently affecting around one in 10 people in Hong Kong or about 700 000 people
- From the second Population Health Survey conducted by the DH, the prevalence of diabetes increased with age from 0.5% for persons aged 25-34 to 25.4% for those aged 65-84
- Around half of those suffering from diabetes were being undiagnosed

## Hong Kong Reference Framework for Diabetes Care for Adults in Primary Care Settings

Revised Edition 2021

Developed by: 基層醫療概念模式及預防工作常規專責小組 Task Force on Conceptual Model and Preventive Protocols, 基層醫療工作小組 Working Group on Primary Care, 食物及衛生局 Food and Health Bureau

With the professional advice of: 衛生署 Department of Health, 醫院管理局 HOSPITAL AUTHORITY

Supported by: 香港社會醫學院 Hong Kong College of Community Medicine, 香港醫學專科學院 Hong Kong Academy of Medicine, 香港家庭醫學院 The Hong Kong College of Family Physicians, 香港中文大學醫學院 Faculty of Medicine, The Chinese University of Hong Kong, 香港大學李嘉誠醫學院 Li Ka Shing Faculty of Medicine, The University of Hong Kong, HONG KONG DOCTORS UNION 香港西醫工會 Hong Kong Doctors Union, 香港醫務委員會執照醫生協會 The Association of Licentiate of Medical Council of Hong Kong, 香港醫學會 The Hong Kong Medical Association, 香港糖尿病聯會 Diabetes Hongkong, 香港心臟專科學院 Hong Kong College of Cardiology, Hong Kong Society of Endocrinology, Metabolism and Reproduction, 香港內分泌學會 Hong Kong Society of Endocrinology, Metabolism and Reproduction



First published: 2010





# Significance

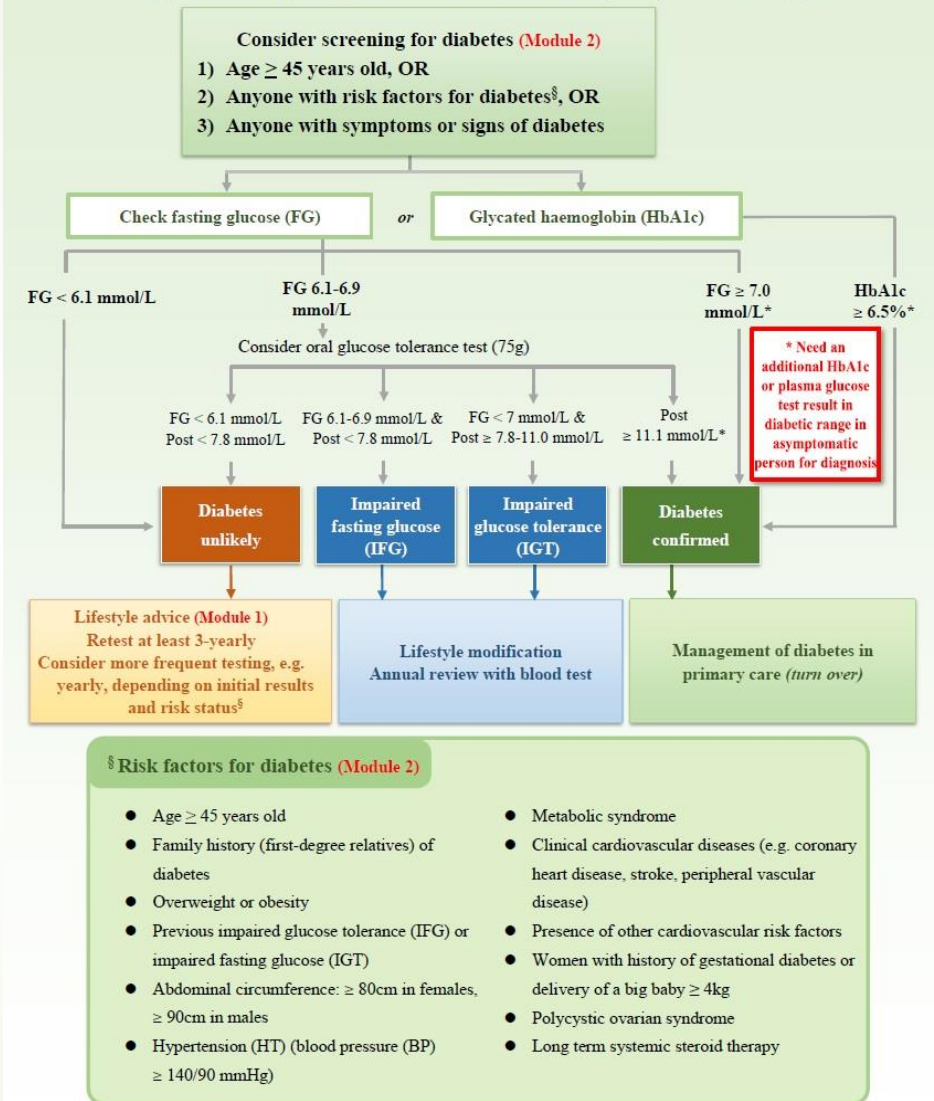


- ▶ Diabetes is the leading cause of kidney failure, blindness, leg amputations, cardiovascular diseases and stroke.
- ▶ Together with its chronic nature, diabetes continues to pose a significant burden to our healthcare system.
- ▶ The optimal control of blood glucose level, blood pressure and dyslipidaemia in diabetic patients by **a multidisciplinary team** has been proven to reduce complication frequencies in randomised controlled trials and is cost-effective.

# DHC Scope of Service

Programme	Service Content
Primary prevention	<ul style="list-style-type: none"> <li>Health promotion, advisory and counselling services</li> <li>Educational programmes to drive lifestyle changes</li> <li>Identification and management of health risk factors including                             <ul style="list-style-type: none"> <li>Overweight / obesity</li> <li>Lifestyle risk factors (such as smoking, alcohol consumption, physical inactivity)</li> <li>Fall risk</li> </ul> </li> </ul>
Secondary prevention	<ul style="list-style-type: none"> <li>Screening for DM / HT by DHC network doctor</li> </ul>
Tertiary Prevention	<ul style="list-style-type: none"> <li>DM/HT Management Programme</li> <li>OA knee/ LBP Programme</li> <li>Community Rehabilitation Programme</li> </ul>

## Screening and Diagnosis of Diabetes Mellitus (DM) in Primary Care



# DM

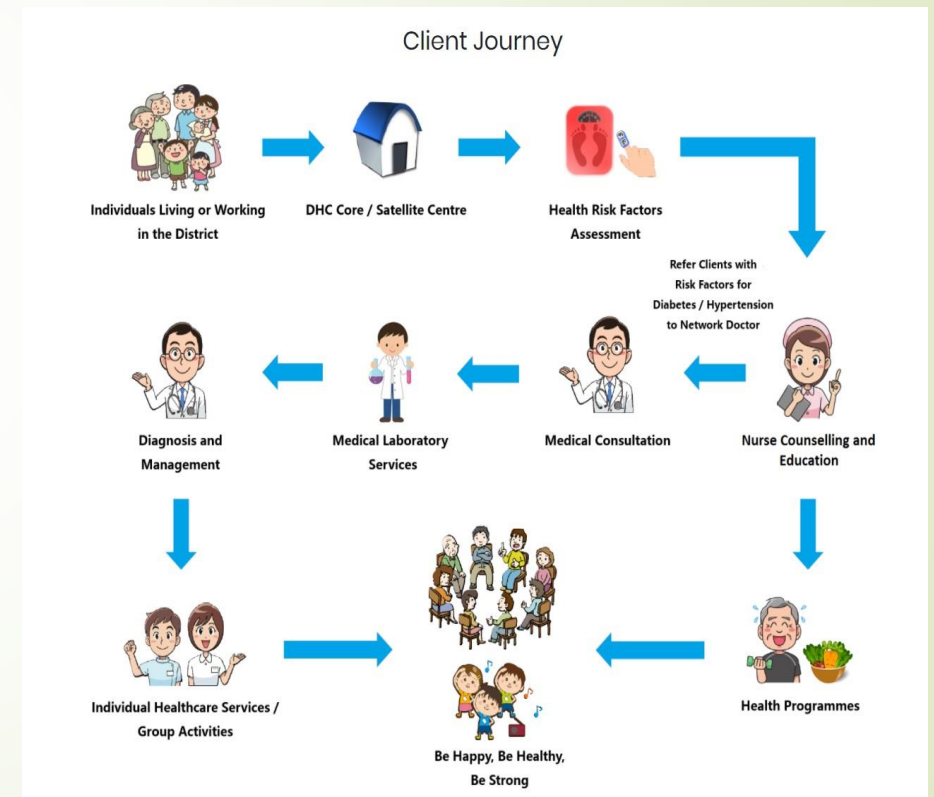
## Annual assessment and complication screening (Core Document 8.3)

- Glycaemic control
  - HbA1c
  - Compliance/ diabetes knowledge
- Co-existing cardiovascular risk factors
  - Obesity (BMI/ waist circumference)
  - Smoking/ alcohol
  - HT (BP)
  - Dyslipidaemia (lipid profile)
- Complications
  - Diabetic kidney disease (serum creatinine/ random spot urine albumin: creatinine ratio) (Module 9)
  - Retinopathy (Module 10)
  - Foot (foot pulse/ foot ulcer/ neuropathy) (Module 11)
- Medication review, dietary assessment

*Extracted from the Hong Kong Reference Framework for Diabetes Care for Adults in Primary Care Settings.  
Available at [www.fhb.gov.hk/pho](http://www.fhb.gov.hk/pho).*

# Family doctor as the leader of integrated team care

- DHC Network service providers as parts of the team
- Occupational therapist
- Optometrist
- Physiotherapist
- Dietitian
- Podiatrist
- Speech therapist



# WHO Operational Framework for Primary Health Care 2020

We family doctors have a role in all 3 components.

## Primary health care components





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Maintaining the GP clinical function in Hong Kong is now a huge challenge. Changing skill mix will help as nurses, pharmacists, physiotherapists and occupational therapist take on new roles. Such developments need to be evaluated broadly on their impact on the GP. The ultimate yardstick is patient experience.

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Paraphrased from p.245

*The Exceptional Potential of General Practice – Making a Difference in Primary Care*, Edited by Graham Watt, CRC Press 2019

Thank you

