



Analyzing the training needs of primary care doctors -A questionnaire survey in Kowloon Central Cluster

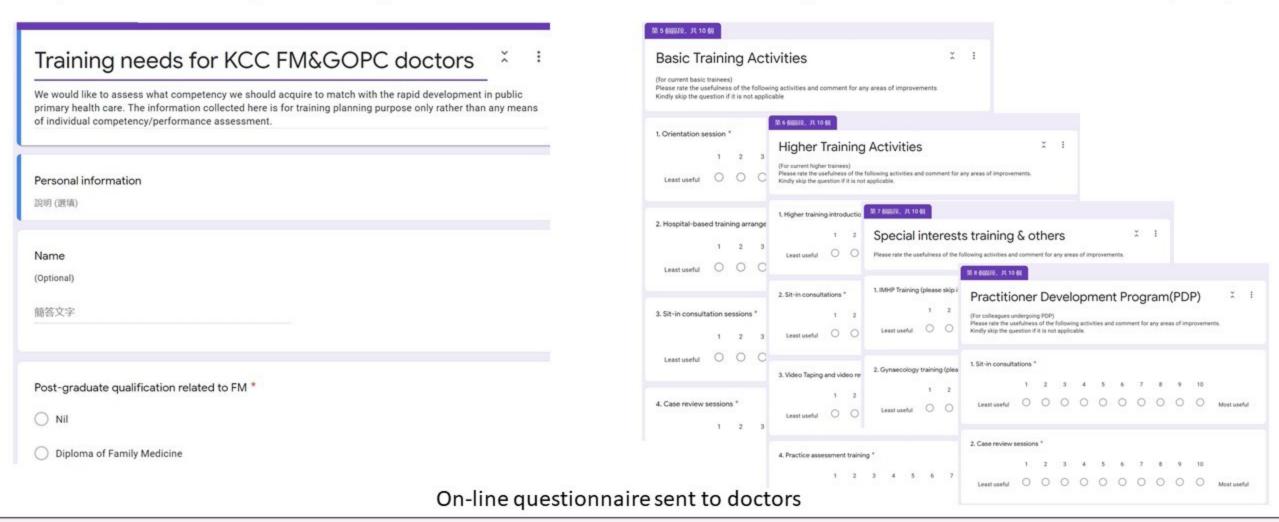
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INTRODUCTION

To provide comprehensive and yet competent primary care is one of the greatest challenges to HA. Primary care doctors working at GOPCs are handling patients from cradle to grave, from head to toes, with multiple complaints ranging widely from different specialties. Therefore, it is imminent to design a tailor-made training program for primary care doctors to meet the increasing service needs, especially for a department with more than 100 doctors working at different clinics. This study tried to identify the training needs of KCC FM&GOPC doctors and to identify gaps in our current program so as to improve.

METHODOLOGY

An on-line questionnaire created by the training subcommittee was sent to all full-time doctors of KCC FM&GOPC from 16/11/2019 to 15/12/2019. Traditional written form was also available upon request. The questionnaire consisted of 2 parts, i.e. clinical competency and feedback on training activities. For clinical competency, colleagues were asked to rate their perceived competency over 24 clinical problems on the Likert scale (1-10). In the feedback section, doctors with different training status (basic trainee, higher trainee, service doctor and FM specialist) were asked to give a rating of their satisfactions on the training activities on the Likert scale (1-10).



RESULTS

A total of 106 doctors were invited to join the analysis, among which 58 (54.7%) doctors completed the survey. Their training status were shown in Figure 1. Among the 24 items in clinical competency, 'Hypertension Management' scored an average of 7.93 and was perceived as the most competent area to our doctors, followed by 'Thyroid disorder' (7.69) and 'Change in bowel habit' (7.66). (Figure 2) Regarding the least competent areas, 'Contraception' only scored an average of 6.05 and was the least competent area to respondents. The other less competent areas included 'Handling difficult patient' (6.21) and 'Anxiety disorder' (6.28). (Figure 3) At the feedback section, doctors with different training status were satisfied with our existing training programs in general with an average score of 7.32. Among them, basic trainees scored the highest satisfaction score of 8.67, followed by 8.32 from higher trainees. FM specialists rated an average score of 7.5 while the service doctors rated 6.70. (Figure 4)

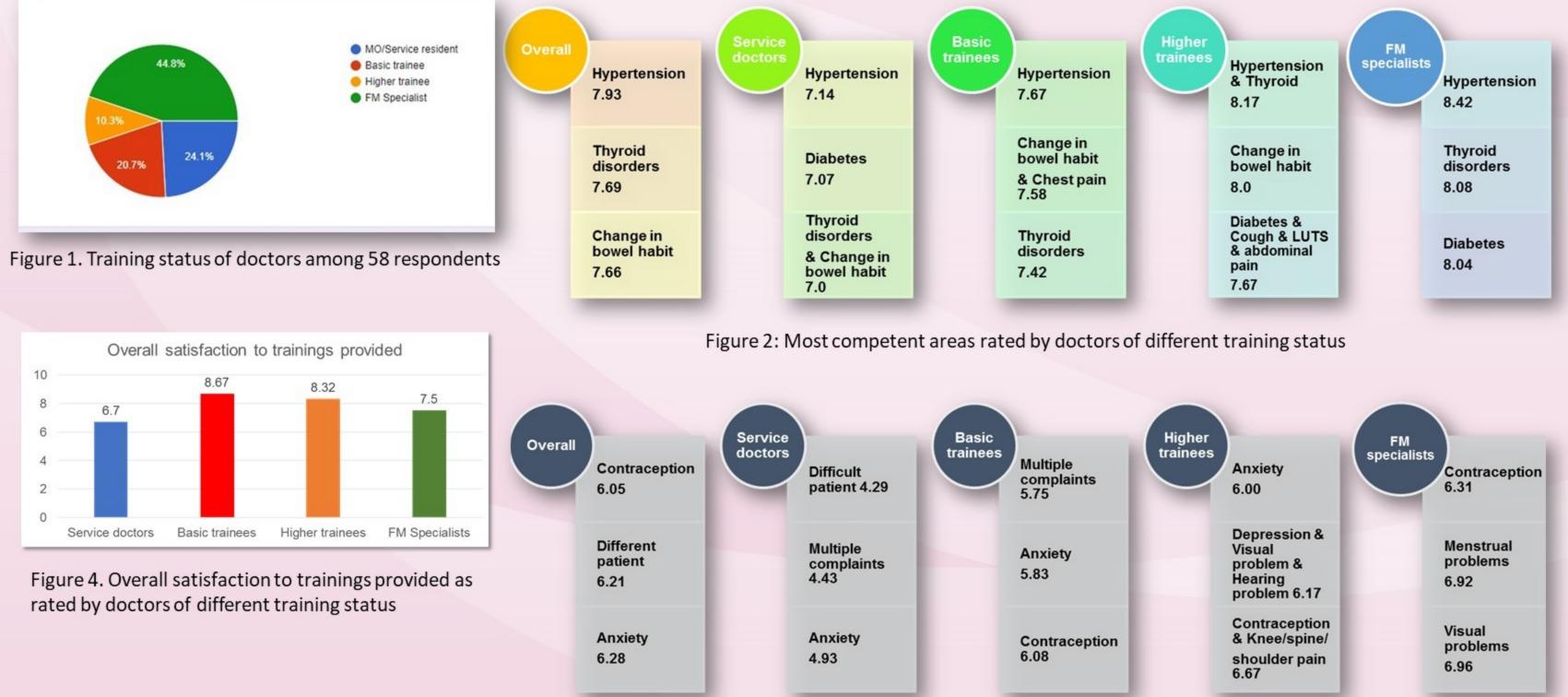


Figure 3: Least competent areas rated by doctors of different training status

CONCLUSION

This survey successfully identified areas perceived as the most competent to doctors in KCC FM&GOPC and revealed their least confident areas. Doctors with different training status were satisfied with our existing training programs in general. Further enhancement, particularly focusing on the training activities of least competence, would be introduced accordingly to address the identified training needs.