

CONCEPTS OF FAMILY MEDICINE

Q\ what is family medicine ?

*Family Medicine is a medical specialty of first contact with the patient, devoted to providing, **preventive, promotive, rehabilitative and curative** health care, from **physical, psychological and social** aspects*

*The scope is not limited by **system, organ, disease entity, age or sex.***

Q\ what are barriers to equitable health care?

Unequal access to disease prevention & care

Rising cost of health care

Inefficient health care system

Lack of emphasis on Generalists' (Family Medicine) training

Q\How to overcome these barriers ?

The WHO also states, that the best option to overcome these barriers is to utilize services of trained Family Physicians.

10 Cs of desirable qualities in a family physician:

1-Caring/Compassionate

2- Clinically Competent

3-Cost-effective Care

4-Continuity of Care

5-Comprehensive Care

6-Common Problems Management

7-Co-ordination of Care

8-Community-based Care & Research

9-Continuing Professional Development

*10-Communication & Counseling
Skills` with confidentiality*

1- Care :

*An essential quality in a
Family Physician*

Personal patient centered Care

**2- 2- : Clinically
Competent**

*Need for four years training
after graduation and
internship*

3- Cost-effective Care

*In time and money
Gate keeper- Use of
appropriate resources
Use of time as a diagnostic
tool*

4- Continuity of Care

Care from cradle to grave

5- Comprehensive Care

*Responsibility for every
problem a patient presents
with
Physical, Psychological &
Social*

**6- Common Problems
Management**

*Common problems in children
and women like diabetes and
asthmaetc .*

7- Co-ordination of
Care Continue learning

*Organizing multiple sources of
help.*

Need for breath of knowledge

8- Community-based
Care & Research

*Preventive, promotive,
rehabilitative and curative
care in patient's own
environment*

*Relevant research within the
patient's own surroundings*

9- Continuing Professional
Development

10- Communication &
Counseling Skills` with
confidentiality

*Essential for compliance of
advice and treatment/sharing
understanding*

*Confidentiality and safety
netting*

*Needed for patient
satisfaction*

*Involving patient in the
management*

Essentials of a Family Medicine Consultation:

1. Meet & greet
2. All the components of history

3. Summarization
4. ICE: Ideas, concerns & expectations and effects on patient's day to day life & work
5. Examination/Diagnosis ? Differential diagnosis?
6. Investigations & Management with patient's involvement, safety netting , appropriate F/U & Referral?

Be aware of the following :-

Principles of Family Medicine

- Continuity of care.
- Comprehensive care.
- Coordinated care.
- Community & family based care.
- Central Patient doctor relationship.
- Care as Evidence based.
- Care for ALL.

How does Family Physicians differ from other physicians?

- The first contact and gate of health care system.
- Provide continuity of care.
- Provides comprehensive care.
- Use holistic approach.
- Shared care.
- Patient centred approach.

The core competencies of the family physician

1. Primary Care Management:

Includes the ability:

- To manage primary contact with patients, dealing with unselected problems.
- To cover the full range of health conditions.
- To co-ordinate care with other professionals in primary care and with other specialists.
- To master effective and appropriate care provision and health service utilization.
- To make available to the patient the appropriate services within the health care system.
- To act as advocate for the patient - to continuously monitor, assess and improve quality and safety of care.

2. Person-centred Care:

- To adopt a person-centred approach in dealing with patients and problems in the context of patient's circumstances;
- To develop and apply the general practice consultation to bring about an effective doctor-patient relationship, with respect for the patient's autonomy;

- To communicate, set priorities and act in partnership;
- To promote the goals of patient empowerment;
- To provide longitudinal continuity of care as determined by the needs of the patient, referring to continuing and co-ordinated care management.

3. Specific Problem Solving Skills

- To relate specific decision making processes to the prevalence and incidence of illness in the community.
- To selectively gather and interpret information from history-taking, physical examination, and investigations and apply it to an appropriate management plan in collaboration with the patient.
- To manage conditions which may present early and in an undifferentiated way.
- To make effective and efficient use of diagnostic and therapeutic interventions.

4. Comprehensive Approach

- To manage simultaneously multiple complaints and pathologies.
- To promote health and well being

5. Community Orientation

- To reconcile the health needs of individual patients and the health needs of the community in which they live in balance with available resources.

6. Holistic Approach

- To use a bio-psycho-social model taking into account cultural and existential dimensions.

ESSENTIAL APPLICATION FEATURES

1. Contextual Aspects:

- Understanding the context of doctors themselves and the environment in which they work, including their working conditions, community, culture, financial and regulatory frameworks.

2. Attitudinal Aspects:

- Based on the doctor's professional capabilities, values, feelings and ethics.

3. Scientific Aspects:

- Adopting a critical and research based approach to practice and maintaining this through continuing learning and quality improvement.

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