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世界全科医学瞭望

—英国国民健康服务体系及改革

英国是全科医学的发源地, 全科医学是其最大的医学专业, 完善的全科医生培养和准入制度, 使得其能够以9%的医疗服务支出优质、高效、和谐地完成全国90%的基层医疗卫生服务需求。始创于1948年的国民健康服务体系(NHS)是英国社会福利制度中较为重要的部分, 且运营较为成功, 其医疗卫生服务保障制度的服务宗旨和价值观与我国的新医改核心要求一致。

NHS由基本医疗系统、医院医疗系统构成, 其中全科医学诊所是基本医疗系统中最重要的重要组成部分, 为NHS的实施奠定了基础。但近年来, NHS出现了全科医生职业倦怠、人才流失等问题, 对此, NHS进行了全面改革, 提出了“拓宽全科医生来源”和“减缓全科医生工作压力”规划。“拓宽全科医生来源”规划的主要措施包括: (1) 重视并发展招聘工作; (2) 给予招聘困难地区一次性补助; (3) 支持贫困地区全科医生继续教育; (4) 吸引离职全科医生重返岗位; (5) 开展跨专科社区卫生服务模式, 并培养全科医生领导力。“减缓全科医生工作压力”规划的主要措施包括: (1) 加大政府投入, 开展“缩短全科医生工作时间”项目, 资助全科临床项目; (2) 优化双向转诊, 医院门诊仅能接收全科医生转诊患者并需在诊治完成24 h内向全科医生提供相关诊疗信息; (3) 降低医疗质量委员会的抽查频率; (4) 统一电子医疗系统, 推动信息互通, 减少医生书写工作量; (5) 开发简明医疗支付程序。

目前, 我国全科医学处于快速发展阶段, 但仍面临着全科医生人才短缺、人员留用难等问题, 全科医生的职业倦怠日益受到重视。2018年我国发布《国务院办公厅关于改革完善全科医生培养与使用激励机制的意见》, 就全科医生薪酬待遇、编制管理和招聘程序、职称晋升、贫困地区队伍建设、荣誉感和社会地位等做出规定, 与英国NHS改革具有一定相似之处。但未对明确细化双向转诊、建设电子医疗系统和支付程序等提出要求, 尚需进一步探索。



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