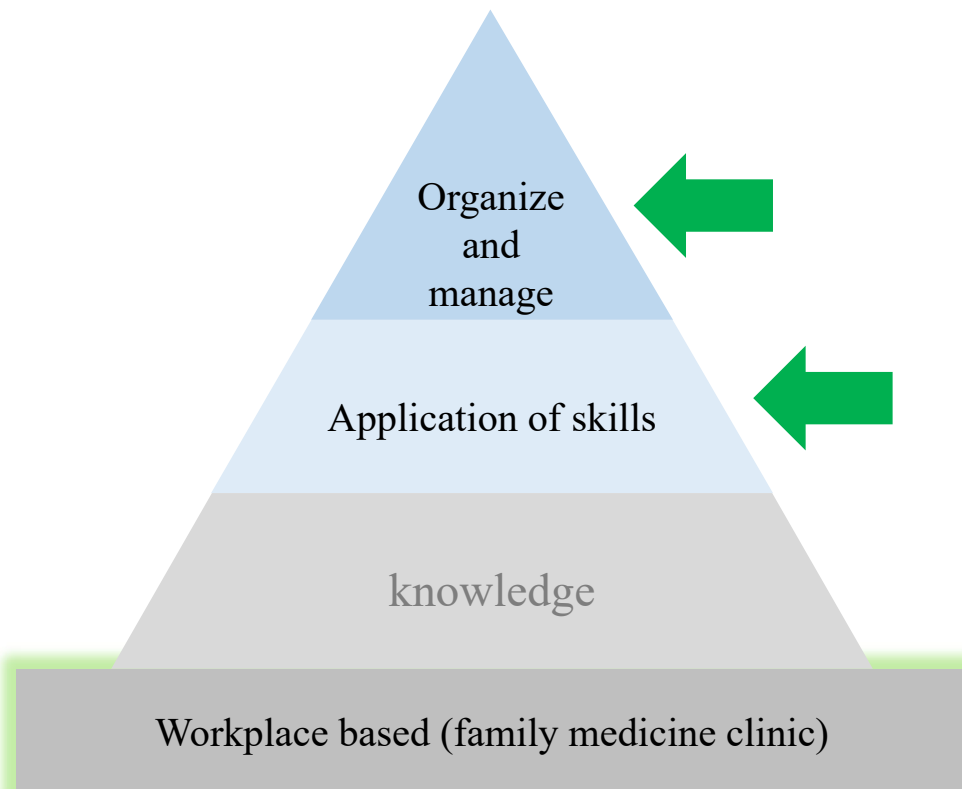# HKCFP Exit Examination

Practice Assessment

Practice Management Package

(PMP)

General Information
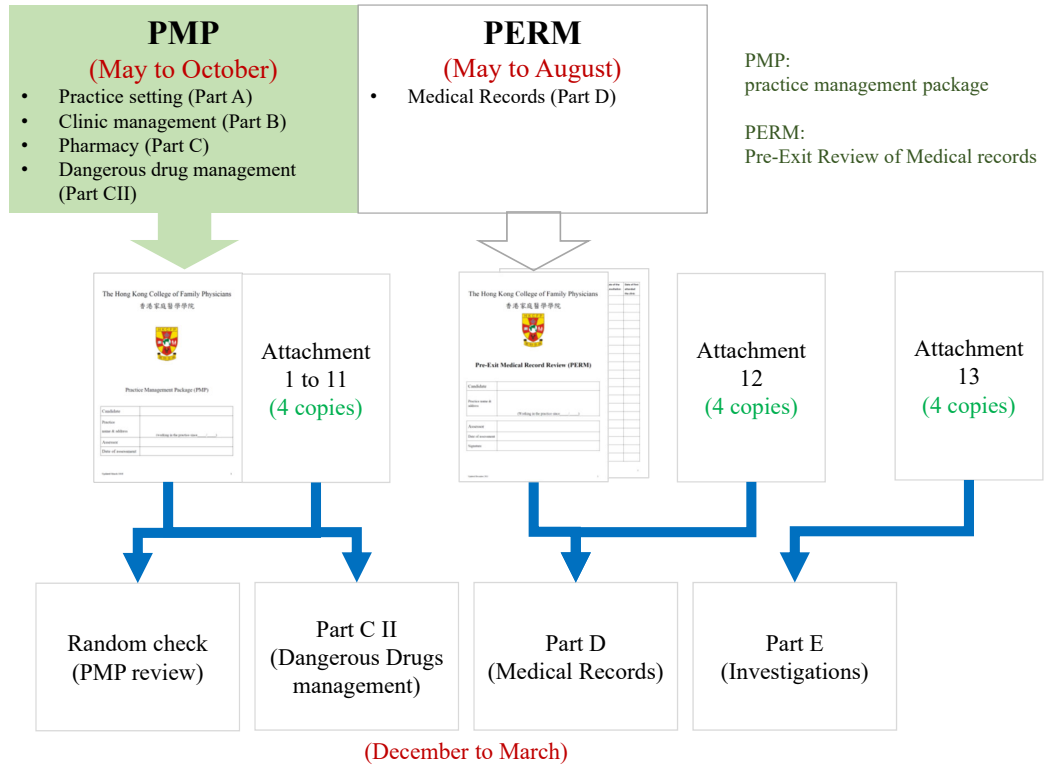
26 April 2024

Aim of Practice Assessment

Organize and manage

Application of skills

knowledge

Workplace based (family medicine clinic)

Practice Assessment

PMP	PERM
(May to October)	**(May to August)**
• Practice setting (Part A)	• Medical Records (Part D)
• Clinic management (Part B)	
• Pharmacy (Part C)	
• Dangerous drug management (Part CII)	

PMP:
practice management package

PERM:
Pre-Exit Review of Medical records

The Hong Kong College of Family Physicians
香港家庭醫學學院

Practice Management Package (PMP)

Candidate	
Practice name & address	(Working in the practice since …….)
Assessor	
Date of assessment	

Attachment 1 to 11 (4 copies)

The Hong Kong College of Family Physicians
香港家庭醫學學院

Pre-Exit Medical Record Review (PERM)

Candidate	
Practice name & address	(Working in the practice since …….)
Assessor	
Date of assessment	
Signature	

Attachment 12 (4 copies)

Attachment 13 (4 copies)

Random check (PMP review)	Part C II (Dangerous Drugs management)	Part D (Medical Records)	Part E (Investigations)

(December to March)

Today

PMP
(May to October)
• Practice setting (Part A)
• Clinic management (Part B)
• Pharmacy (Part C)
• Dangerous drug management (Part CII)

PMP:
practice management package

The Hong Kong College of Family Physicians
香港家庭醫學學院

Practice Management Package (PMP)

Candidate	
Practice name & address	(Working in the practice since …….)
Assessor	
Date of assessment	

Attachment 1 to 11 (4 copies)

Random check (PMP review)	Part C II (Dangerous Drugs management)

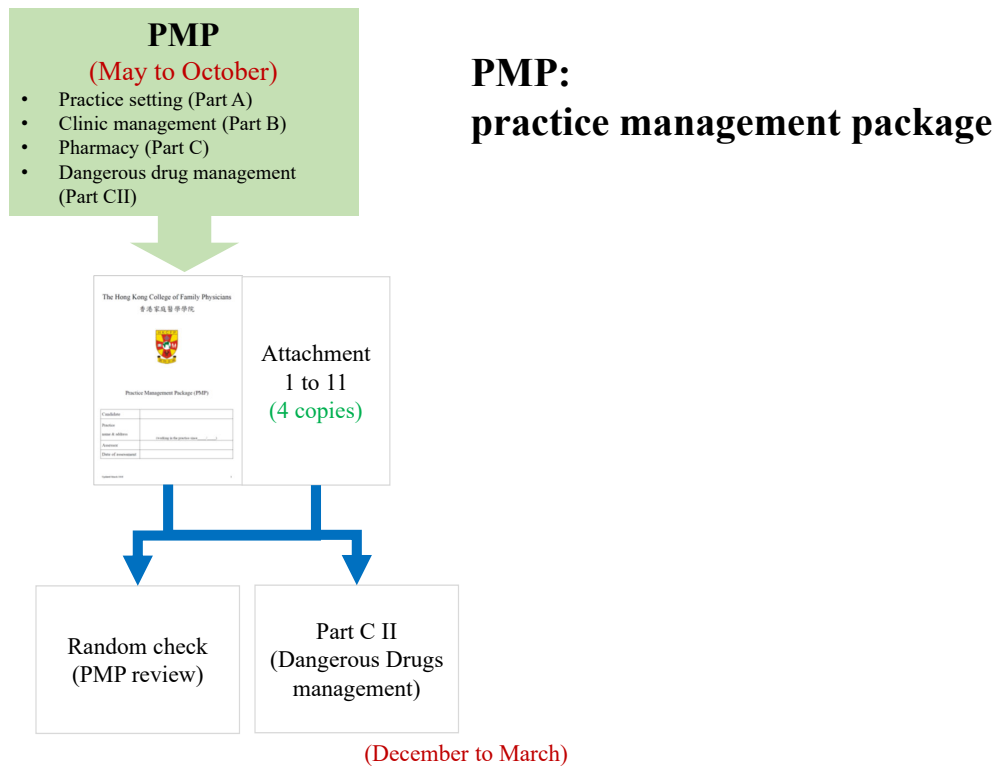**(December to March)**

Today
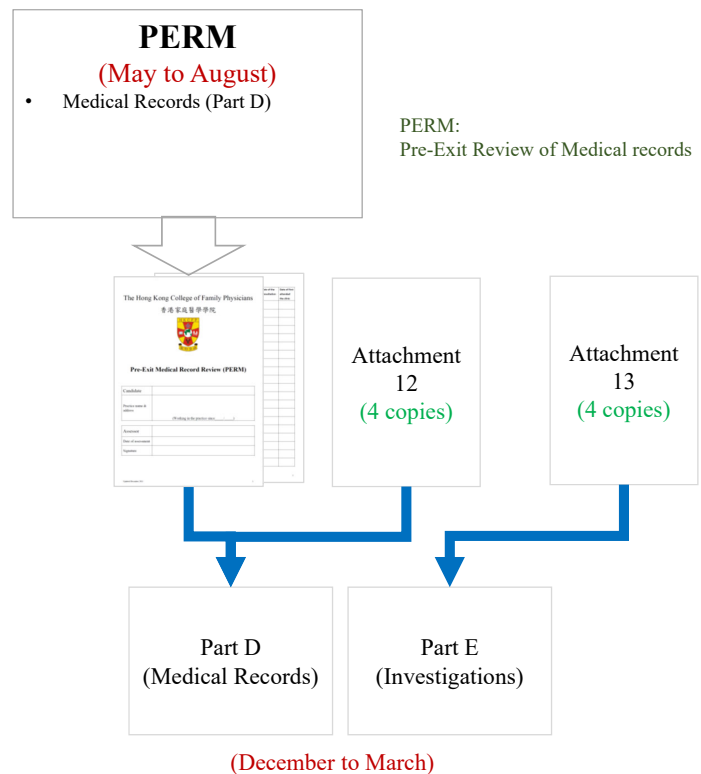
The presentation materials are available at the College *internet website:*

Hong Kong College of Family Physicians (hkcfp.org.hk)
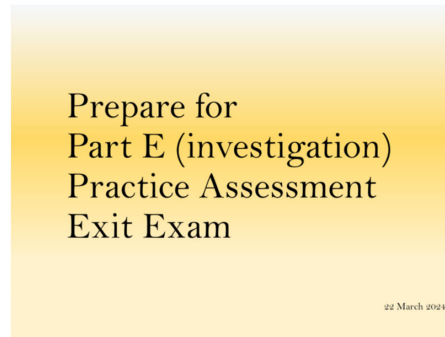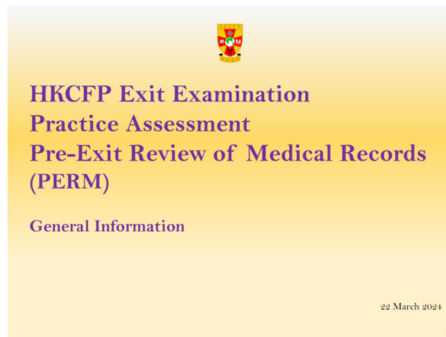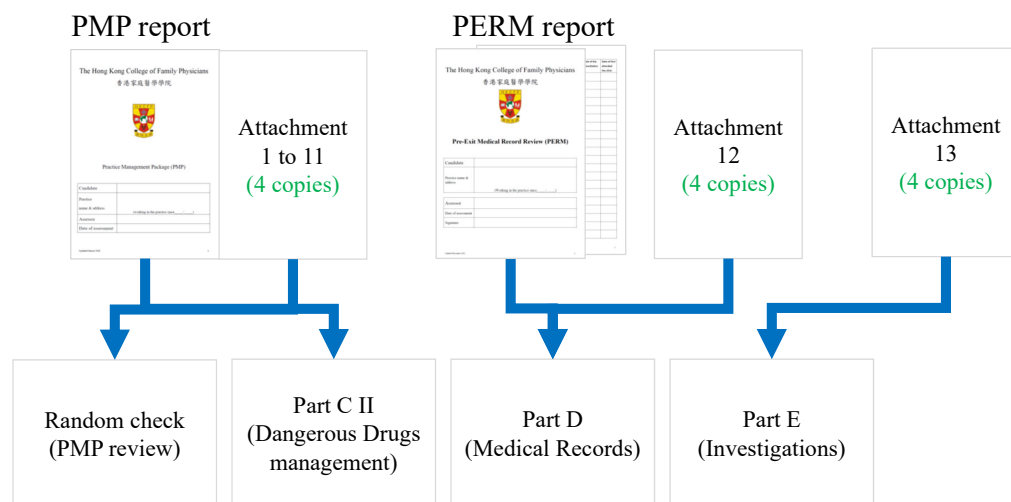
(Education & Examinations > Exit Examination)

Workshop held on 22 Mar 2024

PERM
(May to August)
- Medical Records (Part D)

PERM:
Pre-Exit Review of Medical records

The Hong Kong College of Family Physicians
香港家庭醫學院

Pre-Exit Medical Record Review (PERM)

Attachment 12
(4 copies)

Attachment 13
(4 copies)

Part D
(Medical Records)

Part E
(Investigations)

(December to March)

Workshop held on 22 March 2024

HKCFP Exit Examination
Practice Assessment
Pre-Exit Review of Medical Records
(PERM)

General Information

22 March 2024

Prepare for
Part E (investigation)
Practice Assessment
Exit Exam

22 March 2024

The presentation materials are available at the College *internet website:*

Hong Kong College of Family Physicians (hkcfp.org.hk)

(Education & Examinations > Exit Examination)

7

Pre-Exit Workshop

August

Exit Examination (PA) Regulations

PMP report

Attachment
1 to 11
(4 copies)

PERM report

Attachment
12
(4 copies)

Attachment
13
(4 copies)

| Random check (PMP review) | Part C II (Dangerous Drugs management) | Part D (Medical Records) | Part E (Investigations) |

(December to March)

8

Slide 9

What to prepare	What will be assessed
Tips on Good practice	Consensus on marking

Prepare Practice Management Package (PMP) Report

The Hong Kong College of Family Physicians
香港家庭醫學學院

HKCFP
Higher Training Assessment Tool

Practice Management Package (PMP)

Candidate	*You*
Practice name & address	(working in the practice since _____/_____)
Assessor	
Date of assessment	

Updated :

- **Worked in the clinic for at least three months**
- **Expect to be the same clinic you sit for PA, Exit Exam**

Higher FM training clinical supervisor

Any day between May 1, 2024 and Oct 31, 2024

Use the latest version

Marking principle

Part A (Practice setting)

Accessibility and availability	
1. Ease of accessibility from main street	✓
2. Transportation	✓
3. Stair / lift	✓
4. Public car park	✓
5. Elderly / handicapped facilities	✗
6. Practice hours displayed	✓
7. Name card of doctor(s) **(Attachment 1)**	✓
8. Follow up card	✓
9. Home visits	NA

Visibility	
10. Sign Board comply with law requirement **(Appendix A)**	

Marking Principle

- Knowledge of the candidate
- Actual Practice in the clinic

Clinical Supervisor

Appendix

Part A (Practice setting)

Accessibility and availability	
1. Ease of accessibility from main street	✓
2. Transportation	✓
3. Stair / lift	✓
4. Public car park	✓
5. Elderly / handicapped facilities	✗
6. Practice hours displayed	✓
7. Name card of doctor(s) **(Attachment 1)**	✓
8. Follow up card	✓
9. Home visits	NA

Visibility	
10. Sign Board comply with law requirement **(Appendix A)**	

Appendix:
- Available at HKCFP website
- Information helps candidates to prepare PMP report

Please pay attention to updates in:
- Evidence based practice
- Local legislation

Attachments

General Clinic Design		
11. Clinic design map **(Attachment 2)**		
12. Set up / measures to prevent communicable diseases		

Reception		
13. Presence of staff		
14. Attitude of staff		
15. Telephone calls handling		
16. Registration and insurance documents displayed		
17. Fee schedule displayed		
18. Name(s) of doctor(s) on duty displayed		
19. Prolong waiting protocol **(Attachment 3)**		
20. Emergency handling protocol **(Attachment 4)**		

??

Attachments

HONG KONG COLLEGE OF FAMILY PHYSICIANS
EXIT EXAMINATION OF
VOCATIONAL TRAINING IN FAMILY MEDICINE

LIST OF ATTACHMENTS

- The attachments should be arranged numerically in <u>a DOUBLE-SIZED A4 format</u>.
- Please Keep It Short and Simple (KISS) including flow charts and diagrams except attachments 8, 12 and 13.

Part A   Practice Organization:

Attachment 1:   Name card - back and front (if applicable) plus information on : Type of practice (group/solo/public/private), average no. of patients seen per week, average consultation time and average waiting time

Attachment 2:   General clinic design illustrated with diagram

Attachment 3:   Prolong waiting protocol

Attachment 4:   Emergency case handling protocol

Attachment 5:   List of education leaflets commonly used by the candidate

Attachment 6:   Other diagnostic equipments and treatment facilities

Attachment 7:   Emergency equipment and drugs

Part B   Practice Management:

Attachment 8:   Disinfection and sterilization protocol

Attachment 9:   Routine and urgent appointment protocol

Attachment 10:   Data access protocol

Attachment 11:   Needle stick injury protocol

Part D   Records:

Attachment 12:   A list of 300 records
(refer to Introduction of Practice Assessment for requirements)

Part E   Investigations:

Attachment 13:   A list of 10 investigations
(refer to Examination Guidelines for requirements)

Attachments 1 to 11
- Your clinic's information, operation protocols; etc
- *Have to be PRACTICAL*
- to be shown to your PMP assessor and Exit Examiners

Prepare them now!

Attachments 12 and 13:
- For **Session II**
- To be compiled in a specified period (~ mid September to end of October)

Refer to Candidate's Workshop in the coming August for details

Items marked with *

Consultation Room	
29. Seats for accompanying person	
30. Lighting	
31. Changing area / screen	
32. Communication with clinic staff	
33. Education leaflets **(Attachment 5)**	
Different categories of leaflets	
34. Visual and auditory privacy *	✓
35. Hand washing facilities *	
36. Examination bed *	✗

Mandatory for passing the respective Part (A / B / C) of the PMP

The whole Part (A / B / C) of the PMP will be marked 'fail'

Practice Management Package (PMP)
Part A (Practice setting)

Part A (Practice setting) — Sample

Accessibility and availability	
1. Ease of accessibility from main street	
2. Transportation	
3. Stair / lift	
4. Public car park	
5. Elderly / handicapped facilities	
6. Practice hours displayed	
7. Name card of doctor(s) **(Attachment 1)**	
8. Follow up card	
9. Home visits	

Visibility	
10. Sign Board comply with law requirement **(Appendix A)**	

General Clinic Design	
11. Clinic design map **(Attachment 2)**	
12. Set up / measures to prevent communicable diseases	

Reception	
13. Presence of staff	
14. Attitude of staff	
15. Telephone calls handling	
16. Registration and insurance documents displayed	
17. Fee schedule displayed	
18. Name(s) of doctor(s) on duty displayed	
19. Prolong waiting protocol **(Attachment 3)**	
20. Emergency handling protocol **(Attachment 4)**	

Updated March 2018   3

Sample

Waiting Room	
21. Cleanliness + tidiness	
22. Reading materials	
23. Notice board	
24. Telephone	
25. Seating arrangement	
26. Ventilation	
27. Toilet facilities	
28. Health education materials	

Consultation Room	
29. Seats for accompanying person	
30. Lighting	
31. Changing area / screen	
32. Communication with clinic staff	
33. Education leaflets **(Attachment 5)**	
Different categories of leaflets	
34. Visual and auditory privacy *	
35. Hand washing facilities *	
36. Examination bed *	

Updated March 2018   4

Practice Management Package (PMP)
Part A (Practice setting)

Sample

Diagnostic equipment	
37.Diagnostic instruments other than listed below **(Attachment 6)**	
Correct technique of equipment uses	
38.Pediatric developmental screening tools	
Correct use	
39.Glucometer	
Correct technique of use	
Validation of glucometer	
40.Blood pressure measuring devices	
Correct technique of use of sphygmomanometer	
Availability and appropriate use of different sizes of cuffs	
41.Thermometer	
42.ECG	
Correct technique of use	
Maintenance of ECG machine	
43.Urine dipsticks	
Correct use of different urine dipstick tests	
44.Vaginal speculum *	
Different sizes available	
45.Adult weight scale & height measurement *	
46.Baby weight scale & height measurement	
47.Proctoscope *	
48.Peak flow meter *	
Peak flow rate normogram and its use	
49.Snellen chart *	
Correct measurement of visual acuity	

Sample

Treatment Area / Minor Procedure & Operation	
50.Suturing sets	
51.Cautery	
Maintenance	
Occupational safety	
52.Dressings sets *	
53.Minor procedure / operation	
Equipment	
Patient's consent kept	
Procedure explanation leaflets	
54.Others **(Attachment 6)**	

Practice Management Package (PMP)
Part A (Practice setting)

Sample

Emergency Care	
55.Resuscitation chart displayed	
Updated regularly	
56.Emergency drugs * (Attachment 7)	
Variability	
Emergency medication dosage chart	
57.Emergency drugs expiry checking *	
Log Book	
Identification of liable person	
58.Emergency equipment* (Attachment 7)	
Variability	
Equipment List	
Log Book of Expiry checking	
Identification of liable person	
59.Emergency protocols *	
Applicability	
Job description of clinic staff during emergency	
60.Regular drill / training on emergency handling	

Sample

Routine Environmental Cleaning **(Appendix B)**	
61.Routine cleaning schedule	
62.Dilution chart of cleansing agent	
Blood and Body Substance Spills **(Appendix C)**	
63.Spills Protocol *	

Disinfection **(Appendix D)**	
64.Protocol for staff * (Attachment 8)	
65.Disinfection process *	
66.Equipment and agents *	
67.Audit on disinfection process	

Sterilization **(Appendix E)**	
68.Presence / type of sterilizer	
69.Satisfactorily sterilized equipment *	
(if sterilized equipment used in the clinic)	
Routines of expiry checking	
Correct storage of sterilized equipment	
70.Sterilization process *	
(check knowledge on this if no sterilizer in practice)	
Regular monitoring of sterilization process	
(physical, chemical, and biological tests)	
Maintenance of sterilizer	
Valid license	

Grading and comment by assessor

Clinical Supervisor

Part A (Practice Setting)

Grade (please tick one)			Description
Pass	A		*Mastery of most components and capability*
	C		*Satisfactory standard in most components*
Fail	E		*Demonstrates several major omissions and/or defects (or deficiency in area with *)*
	N		*Unsafe practice*

Comments:

_____

_____

_____

Part B (Clinic Management): marking principle same as Part A

Sample

Part B (Clinic Management)

Appointment and Registration
1. Routine appointment protocol **(Attachment 9)**
2. Urgent appointment protocol **(Attachment 9)**
3. Registration: manual / computerized
4. Computerized record retrieval system
5. Age / sex register
6. Disease register
7. Recall system
   Appointment cases
   Others (e.g. Pap smear screening)

Accounting
8. Daily account kept
9. Proper receipts & copy kept

Administration & Risk Management
10. Adverse incident report system & follow-up
11. Complaint handling system
12. Data access protocol **(Attachment 10)**

Medical Record Keeping
13. Security (manual / computerized)
14. Record filing system
15. Record retrieval efficiency
16. Confidentiality of record

Updated March 2018

Sample

Investigations / Results
17. **Log book of investigations ordered and results recorded**
18. Investigation results screening
19. Identification and / or signature of liable staff
20. Action recorded
21. **Call-back system ***

Sick Leave
22. **Security of sick leave certificate ***
23. **Record / Copy of sick leave certificate issued ***

Supporting services
24. Radiology / laboratory service
25. Physiotherapy service
26. Occupational therapy service
27. Specialist referral
28. Community nurse service
29. Social worker services
30. List of non-government organizations and self-help groups
31. Others (please attach)

Safety
32. **Disposal of medical waste * (Appendix F)**
33. **Needle stick injury protocol * (Attachment 11)**
34. **Handling and disposal of sharps * (Appendix H)**
35. **Safe blood taking procedure**
36. Occupational health & safety awareness

Updated March 2018

Sample

Staffing
37. Written job description
38. In house training
   Training record
39. Staff appraisal
40. Staff meetings
   Record of meeting minutes

Medical Education Resources
41. Medical education meeting at the practice
   Meeting record
42. Medical references / books

Part B (Clinic Management)

Grade (please tick one)			Description
Pass	A		*Mastery of most components and capability*
	C		*Satisfactory standard in most components*
Fail	E		*Demonstrates several major omissions and/or defects (or deficiency in area with *)*
	N		*Unsafe practice*

Comments:

_____

_____

_____

Updated March 2018   12

Part C (Pharmacy and Drug Labeling)
marking principle same as Part A

Part C (Pharmacy and Drug Labeling)

Dispensary / Pharmacy Management	
1. Organization of dispenary / pharmacy	
2. Protocol to ensure accurate dispensing (Appendix I)	
Stock	
3. Clear labels	
4. Stock control	
5. Proper storage *	
6. Expiry date records *	

Drug labels	
7. Always label drugs *	
8. Chinese or English version *	
9. Clarity / legibility *	
10. Name of patient *	
11. Name of drugs generic/brand *	
12. Date *	
13. Instructions *	
14. Precautions *	
15. One drug per bag *	
16. Doctor name / code (traceable) *	

Updated March 2018   13

Refrigerator for vaccine storage (Appendix J)	
17. Presence / type of refrigerator	
18. Max/min. thermometer *	
19. Temperature stabilization *	
20. Temperature checked and recorded daily *	
21. No contamination, e.g., food *	
22. Types of vaccine available	
23. Vaccines appropriately stored *	
24. Expiry date checked *	
25. Protocol of cold chain breach	

Disposal of expired medications	
26. Proper drug disposal * (Appendix K)	

Part C (Pharmacy and Drug Labeling)

Grade (please tick one)			Description
Pass	A		Mastery of most components and capability
	C		Satisfactory standard in most components
Fail	E		Demonstrates several major omissions and/or defects (or deficiency in area with *)
	N		Unsafe practice

Comments:

_____

_____

_____

Updated March 2018   14

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Part C II (Dangerous Drugs Management): Checklist

Part C II (Dangerous Drugs management)

Checklist

Please tick the boxes as appropriate

Authorized person

(Knowledge)
Who could be the DD authorized person(s) in a medical clinic?

(Practice)
DD authorized person(s) in this clinic:

☐ Contingency plan in case the usual DD autho...

DD receptacle

(Knowledge)
What is the basic legal requirement to store DD?

(Practice)
☐ Locked, can only be opened by the authorized...

DD storage, check for expiry

(Practice)
☐ DD stored in the receptacle
☐ Stock checked for expiry

Expired DD

(Knowledge)
What is the procedure to dispose expired DD in your clinic?

(Practice: if no expired DD kept in the clinic, mark N/A)
Expired DD kept in the clinic? If yes, check:
☐ stored in the receptacle
☐ recorded
☐ disposal

Continue on the next page→

Updated April 2019   15

Your knowledge/ practice on five areas:
1. Authorized persons
2. DD receptacle
3. DD storage, check for expiry
4. Expired DD
5. DD register

DD Register

(Knowledge)
What is the required standard format of the DD registry?

(Practice)
☐ Format of the clinic's DD Register complies with the Dangerous Drugs Ordinance.
☐ All transactions of DD were recorded

(Knowledge)
If two or more types of DD are prescribed in the clinic, how these should be recorded in the...

...r, or a different page of the same Register for

...n and (where applicable) the strength or
...itten at the head of each page of the Register.
...drug was recorded, in indelible ink, or otherwise

...e DD register?

...ord. Corrections were made by means of a
...lated.

☐ If a registered doctor, dentist or veterinary surgeon practices in more than one clinic from which dangerous drugs are supplied, a separate set of registers must be kept and used in each clinic

(Knowledge)
How long the used DD register should be kept?

(Practice)
☐ All used registers were kept in the clinic for 2 years from the date on which the last entry was made.

End of the checklist; please proceed to mark the PMP rating form (Part CII) →

Updated April 2019   16

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Part C II (Dangerous Drugs Management)

Quick reference for assessors / candidates

DD Authorized persons could be:

- Registered doctors, dentists, and veterinary surgeons
- Registered pharmacists or approved persons employed at prescribed hospitals specified in the Second Schedule to the Dangerous Drugs Ordinance
- Persons in charge of certain laboratories

Required format of the DD register:

FIRST SCHEDULE

FORM OF REGISTER

Date of receipt/ supply	Name and address of person* or firm from whom received/to whom supplied	Patient's identity card number#	Amount		Invoice No.	Balance
			received	supplied		

* Cross reference of the person to whom supplied may be made in which case only the reference number of the person's treatment record needs to be given.

\# For a patient who is not resident in Hong Kong, the reference number of any proof of identity, other than an identity card, specified in section 17B(1) of the Immigration Ordinance (Cap. 115) shall be inserted.

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Part C II (Dangerous Drugs Management)

Part C II (Dangerous Drugs management)

According to your assessment with the checklist, please:
"✓" the item is present or appropriate; "X" if not present or inappropriate, "NA" if not applicable in the item(s)

Dangerous Drugs* (Appendix L)

		Knowledge	Practice
1.	Authorized person*		
2.	DD receptacle*		
3.	DD: storage, check for expiry*	N/A	
4.	Expired DD: storage, record, disposal* (if no expired DD in the clinic → ask knowledge; site mark N/A)		
5.	DD register*		

Part C II (Dangerous Drugs Management)

Grade (please tick one)			Description
Pass	A		_Mastery of most components and capability_
	C		_Satisfactory standard in most components_
Fail	E		_Demonstrates several major omissions and/or defects (or deficiency in area with *)_
	N		_Unsafe practice_

Comments:

_____ Sample

_____

_____

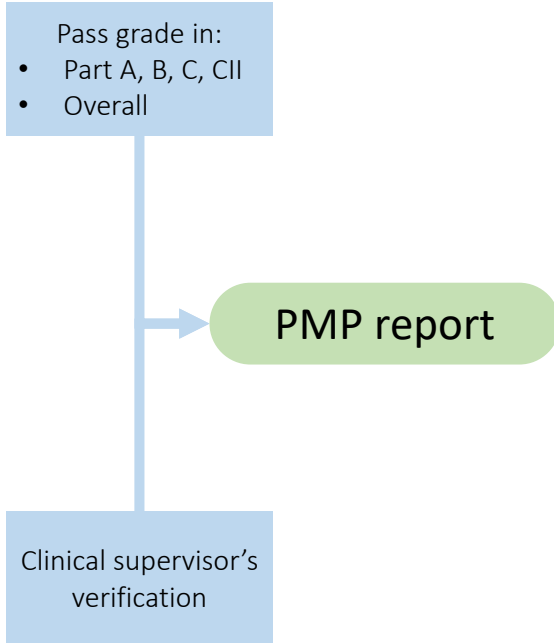Updated April 2019   17

24

Completing Practice Management Package (PMP) Report

Overall result of the assessment

Grade (please tick one)			Description
Pass	A		Mastery of most components and capability
	C		Satisfactory standard in most components
Fail	E		Demonstrates several major omissions and/or defects (or deficiency in area with *)
	N		Unsafe practice

Comments:

_____

_____

_____

_____

_____

_____

_____

_____

Name of Assessor:	
Signature:	
Date:	

Pass grade in:
- Part A, B, C, CII
- Overall

PMP report

Clinical supervisor's verification

Submitting PMP report

- To be submitted with the Exit Examination Application
  (the deadline usually on the 1st working day of November)
- Prerequisite to proceed PA Segment of Exit Examination
- Random check (PMP review) in PA, Exit Examination, will be based on your PMP report

DO!

- Take some time to familiarize
  - Instrument, set-up, facilities, clinic operation / workflows listed in PMP
  - **able to tell** your assessors on
    - ❖ How the items work
    - ❖ Service record keeping as appropriate
- if you discover some PMP items not well in place:
  - Try to amend, improve them:

    discuss with your clinical supervisor / clinic in-charge
  - At the Exam: if you can discuss sensibly with the examiner about the

    'not-well-in-place' PMP items → can 'pass'

    (Except the essential ones marked * on the PMP)

DON'T

- Rely solely on the (copies of) materials used by previous

  candidate(s) in your clinic
- At the Exam:
  - Show hesitancy in answering questions
  - Need your clinic staff to give lots of supplementary

    information to the PA Examiners
  - Search around as if looking for a lost item in the clinic
  - Flip back and forth the clinic menu as if never read it before

Enquires:
Specialty Board, HKCFP (Alky / John)

Thank you