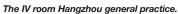
The NHS and its role in developing family medicine in China

With the help of the RCGP and Queen Mary, University of London, I have visited the UK three times to study the NHS. I have learned several things that may be of great value for the health service in China.

First, the UK government has assumed the responsibility of providing health care to all and adequate funds are allocated to primary care, where the vast majority health care takes place. In China, 80% of available funding is invested in hospitals, while primary care has failed to develop healthily. For many patients this means accessing health care can be difficult and costly. Following the UK model, the Chinese government is allocating more funds to primary care and extensively developing family medicine. This seems like a good strategy.

Second, the UK health service stresses the importance of training and management for GPs. Investment in GP vocational training ensures that there are sufficient well-trained GPs, who are well remunerated for their work. At the same time, performance targets have been set







GP consultation in Hangzhou clinic.

that are aimed at improving the overall health of the population, with strong direction from primary care trusts to ensure that this happens. In China, there are only around 600 GPs who have received 3-4 years' vocational training. Assuming one GP is needed for every 3000 people, the population of China would need approximately 450 000 GPs. However, the experience in Zhejiang Province, is that it costs about 100 000 RMB (£7000) to train one GP. For a 6-year trial period in China, the cost of this training project was borne by the training hospitals. In Chinese terms this training is expensive and the uptake is low. In the future, China should invest more in training GPs to meet the identified health needs.

Finally, the UK health service attaches great importance to applying research findings to primary care. For example, the Quality and Outcomes Framework, although not universally popular, is largely grounded in research evidence. I was

particularly impressed by the support given to GPs in east London, providing them with the tools needed to implement guidelines and deliver on the government's objectives. We are already trying to use similar approaches in some community clinics in Hangzhou.

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