

# Competence-oriented Humanistic Quality Training Measures for Resident Training Physicians

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**Abstract:** The cultivation of humanistic quality of resident doctors plays an important role in the development of individual physicians and the effective operation of the medical industry. Competence-oriented humanistic literacy training for resident and training doctors needs to integrate humanistic literacy into professional training to solve the existing problems in humanistic quality of current resident and training doctors. This paper mainly analyzes the necessity and shortcomings of the competency oriented humanistic quality training of resident and training doctors, and puts forward some measures to improve the humanistic quality of resident and training doctors.

**Keywords:** Competency, Resident training physician, Humanistic quality, Importance, measures

After the guidance on establishing the national standardized training system for resident doctors was issued, medical institutions in various regions of our country began to strengthen the management of resident doctors, improve the training efficiency, and achieved certain victories in practice. However, from the actual development of resident training, the training of resident doctors in China is still in its infancy and can not meet the requirements of medical personnel training. The competence of resident physicians, including good professional ethics, excellent clinical practice and communication skills, was put forward in the 2018 China Medical Association resident standardized training Summit Forum. Not only can be competent for the post, but also need to have more sincere and honest quality, to help patients alleviate physical and mental pain, improve the relationship between doctors and patients, improve the level of medical treatment. Therefore, the cultivation of humanistic quality of resident doctors based on competence has gradually been put on the agenda, and has also become an important direction of resident training.

## 1. Research Significance of Humanistic Quality Cultivation for Competency-oriented Resident Physicians

First, the humanistic accomplishment of resident doctor is an important way to inherit medical spirit. Chinese medical spirit is extensive and profound and has a history of thousands of years. In Yang Quan's Theory of Physics, it is clear that "A man who is a doctor must not be trusted by a man of love; a man who is not wise and a man who is not trusted; a man who is not honest and pure is not credible[1]." It shows that medical practitioners must have benevolence, wisdom and integrity, and emphasizes the important role of humanistic literacy in the training of medical talents. Liu Fang also made a judgment on the training of medical personnel, in the "young new book self-sequence" pointed out that "medical practitioners, the heart of the living can not be, but selfish heart can not have ." Qiu Fazhu has given a corresponding evaluation of medical talents, " those who are not near the Buddha can not be a doctor, only those who are not near the fairy can not be a doctor "[2]Therefore, the study of humanistic quality education in the training of resident physicians is particularly necessary.

Second, the basic requirement of resident doctor is to have humanistic quality. The strategy of "healthy China" makes the cultivation of medical talents more need to pay attention to the cultivation of humanistic literacy. Medicine is more comprehensive, not only a science course, but also a humanities course, in medical treatment is not the work of flowing water machinery, but a holistic, comprehensive process[3]At the same time, the medical profession mainly studies human health and life, which needs to be based on the love and respect for life, which once again illustrates the important

role of humanistic literacy in the training of resident physicians.

Third, improve the current relationship between doctors and patients. Doctors and patients have more contact time, good communication skills are the basis for establishing a good doctor-patient relationship. Zhang Zhifeng found that the main cause of medical complaints and disputes are problems in doctor-patient communication through the investigation and study of medical dispute cases in the past 10 years. Most of the adverse disputes are caused by young doctors. Through good doctor-patient communication can effectively prevent and solve doctor-patient communication problems. With the development of the Internet, the tension between doctors and patients is exposed from time to time, the training of young doctors not only needs to strengthen the training of medical ability, but also needs to strengthen the improvement of humanistic quality.

## **2. Cultivating the Humanistic Quality of Doctors**

### ***2.1 Review of the cultivation of humanistic qualities of resident physicians abroad***

The German residence culture system began at the end of the 19th century, setting training standards and running through the whole process. In addition to professional clinical ability, these standards also include the cultivation of humanistic literacy[4]Jordan in 2010 in the Health professionals for a new century》 of medical talent training direction of the focus of analysis, which stressed the cultivation of humanistic literacy[5]To improve the quality of medical education as a whole, the United States American Board of Internal Medicine, ABIM( the American Medical Council) and the Accreditation Council for Graduate Medical Education, ACGME( Post-graduate Medical Education Accreditation Council) have made clear demands on the core competencies of resident physicians and have taken humanistic literacy training as an important factor. At the same time ACGME six core competencies are proposed for resident training, including interpersonal communication skills, patient care and professional mental literacy. British medical education standards have been developed by the British Medical Association, and six essential competencies have been identified in the Good Medical Practice》, including doctor-patient relationships, collaboration and ethical health[6]。

Canada pays more attention to the training of resident physicians. In 1993, the Institute of Physicians and Physicians conducted a public opinion survey on the criteria and expectations for the role of doctors as school graduates to understand the current needs of the society for the competence of physicians and to position these roles in the 2005 The CanMEDS 2005 Physician Competency Framework-Better standards. Better physicians 》, including medical experts, scholars, health advocates, collaborators, professionals, communicators, collaborators, etc. Combined with each role, the corresponding core literacy standards and competencies should be put forward. The core literacy of each role includes humanistic literacy elements.

### ***2.2 Review of the development of human literacy of resident physicians in China***

The resident doctor system in China began in the early 20th century and was first carried out by Beijing Union Hospital and implemented the 24-hour resident responsibility system. With the success of Union Hospital, The affiliated hospitals of Medical College of domestic enterprises began to follow the training model of Union Hospital. In 1993, in the trial method of standardized training for clinical resident doctors, the comprehensive residential training in China was redeployed. At the same time, in 2009, the opinions on deepening the reform of the medical and health system further improved the training system for resident doctors. In 2014, the management method of standardized training for resident doctors and the contents and standards of standardized training for resident doctors are clearly stipulated, which provides guidance for the training of resident doctors in China. At the same time, these policies, standards and management methods are based on the competence of resident doctors, emphasizing the cultivation of professional ethics, clinical ability and so on. Professional ethics, interpersonal communication, cooperation ability and so on belong to the content of humanistic literacy.

However, through some literature review, there are many drawbacks in the current competency-oriented training of resident physicians. Wang Kai through literature analysis of 1990 to 2016 resident physicians humanistic literacy related literature research found that the current field of low attention, narrow research scope, poor quality, and inadequate promotion. It is necessary to

construct the evaluation system on the core competence training of resident doctors, and set up the assessment index on medical knowledge, patient care ability, interpersonal communication and so on, but the index of humanistic accomplishment is insufficient.

### **3. A Review on the Present Situation of Humanistic Quality Cultivation for Competency-oriented Doctors**

#### ***3.1 Inadequate medical humanities quality education system***

Through the analysis of the humanistic care ability and humanistic quality of the current resident doctors, most of them are studied in the humanities and social sciences courses of medical colleges and universities. The development of this course is not ideal, insufficient attention, many students do not pay enough attention to this course. The humanities and social sciences curriculum occupies a low proportion in the whole teaching, and it is difficult to realize the combination of theory and practice, and the way of teaching is rigid, which leads to the serious appearance of medical humanities education, which is not conducive to the cultivation of medical humanities literacy of clinicians.

#### ***3.2 Higher requirements for clinicians' humanistic literacy at this stage***

From the current situation of medical environment construction, the doctor-patient relationship is relatively tense, and the cases of injury and killing doctors emerge in endlessly. Although our country formally includes medical trouble in the Criminal Law Amendment, the problem of tension in clinical treatment of TCM patients has not been effectively solved. In addition to the psychological, social and other factors, doctor-patient communication and doctor's humanistic consciousness are also important factors.

### **4. Competency-oriented Measures for Cultivating Humanistic Quality of Resident Physicians**

#### ***4.1 Human quality education throughout medical teaching***

Education needs to start from the foundation, and for medical students, the foundation is to enter the medical school, that is, from entering the school, we need to strengthen the cultivation of humanistic literacy, combined with the students' different psychological characteristics and learning stages, imperceptibly. At the same time, we adopt diversified humanistic education methods to enhance students' learning initiative and realize the important role of humanistic education in medical career. At the same time, we adopt diversified humanistic teaching methods to improve the enthusiasm and teaching effect of students' humanistic quality cultivation. For example, we can communicate the channels and ways of cultivating humanistic literacy for students through typical case discussion, humanities lectures, playing movies, debates and so on, so as to stimulate the humanistic feelings of medical students.

#### ***4.2 Humanistic care and communication skills of resident physicians***

Humanistic care and doctor-patient communication ability are the most basic contents in the cultivation of humanistic literacy. Good communication and humanistic care can make the cold hospital atmosphere and pale treatment action become warm and emotional. We can establish a recognition system in the training of resident doctors, and give corresponding recognition to doctors who perform well in doctor-patient communication and humanistic care. At the same time, regular free consultation and education activities to exercise the communication between doctors and patients. Through a large number of medical actions to cultivate the sense of mission and emergency ability of doctors.

#### ***4.3 Establishment of a training group for resident physicians***

In order to help resident doctors adapt to clinical work better, it is necessary to break the bottleneck of occupation and encourage students to actively participate in clinical medicine through the role of example. Carry out the guidance system of tutors' performance, and combine the assessment of students with the performance of mentors, and promote the improvement of students' comprehensive ability through the drive of pressure. At the same time, regular organization activities are carried out to enrich

the life of resident doctors, to truly understand their needs, and to enhance their humanistic care consciousness through humanistic care for resident doctors.

#### **4.4 Building Competency Model for Resident Physicians**

Doctors will rotate to many departments for clinical practice, contact with many patients, complex diseases. In order to better complete the work of living culture, we need to collect the opinions of the rotation college combined with the rotation situation of different departments, and summarize and analyze these opinions, explore the aspects that need to improve the humanistic skills of the college, do a good job of humanistic training, and ensure the effect of humanistic training. Combine humanistic training with practical work to ensure the practicability and feasibility of training. At the same time, we should strengthen the improvement of humanistic training evaluation, clarify the objectives of humanistic training, and refine these objectives, which can be divided into educational ability, clinical treatment ability, doctor-patient communication ability and other indicators, and carry out a comprehensive assessment of these indicators.

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