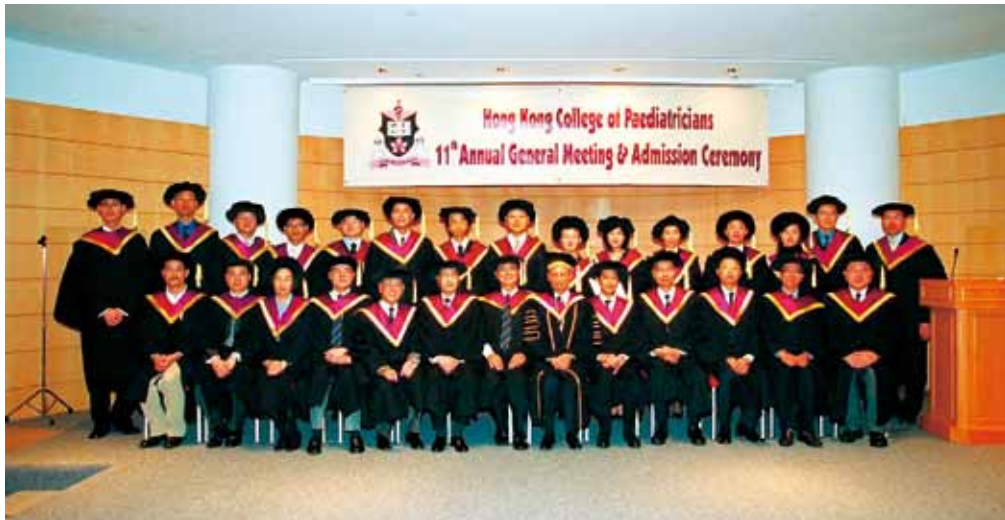


Hong Kong College of Paediatricians

香 港 兒 科 醫 學 院



ANNUAL REPORT 2002/2003



The College Council and the Newly Admitted Fellows
at the Admission Ceremony on 23rd November, 2002.



Honorable Guests, President of HKAM and Sister Colleges and
College Council at the Fellowship Admission Ceremony on 23rd November, 2002.

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Prof. LEUNG Nai-kong 梁乃江教授

Vice President

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Hon. Secretary

Prof. LOW Chung-kai, Louis 盧忠啓教授

Hon. Treasurer

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<i>Dr. CHAN Kwok-hing, Alex</i>	陳國興醫生
<i>Dr. CHIU Man-chun</i>	趙孟準醫生
<i>Dr. IP Lai-sheung, Patricia</i>	葉麗嫦醫生
<i>Dr. KO Po Wan</i>	高步雲醫生
<i>Prof. LAU Yu-lung</i>	劉宇隆教授
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<i>Dr. LEUNG Ping, Maurice</i>	梁平醫生
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<i>Prof. YEUNG Chap-yung (Immediate Past President)</i>	楊執庸教授
<i>Dr. LI, Albert Martin (co-opted for 1 year)</i>	李民瞻醫生
<i>Dr. CHU Wai-po (co-opted for 1 year)</i>	朱蔚波醫生

Hon. Legal Advisor

Mr. Peter MARK 麥維慶律師

Hon. Auditor

Mr. Walter MA 馬景華會計師

Message from the President

Another year has quickly passed. This year the whole community of Hong Kong has been distressed by having to experience the outbreak of Severe Acute Respiratory Syndrome (SARS) - a traumatic experience to many of us and a devastating experience to some families. The healthcare professions were hardest hit by the new coronavirus. Because of the high infectivity of the virus, all of us had to take special precautions to prevent ourselves from being infected. Some of our colleagues, in particular those working in the public institutions, were drafted to serve patients suffering from SARS. Many routine clinical services, teaching, educational and social activities were suspended. I am grateful to the Information Technology and the Professional and General Affairs Committees for disseminating timely infection control measures and guidelines for the management of SARS to all our members, and setting up a new web site, which served as a forum for discussions and sharing of experience by all the "SARS fighters" and for posting important information on SARS. The Council considered that the exposure to SARS was a unique experience for all our trainees and agreed that a period of experience related to SARS for not more than six months should be counted as elective training in paediatrics. The Council has also made a submission to the SARS Expert Committee appointed by the Government of HKSAR regarding our College's view on the difficulties facing children and their special needs should there ever be another outbreak of SARS, so that children could receive optimal medical and psychological care. I wish to thank those Fellows and their families who have pledged to provide medical and psychological care to the children who have lost one or both parents because of SARS. I am grateful to Mrs. Helen Yeung and her team of lady volunteers who have been providing continuous emotional, psychological and social support to such children and their families.

As soon as the outbreak of SARS was over, the College resumed all training and educational activities such as the update series of lectures and the postgraduate course for basic trainees in September 2003. Other educational activities included the annual PALS course held jointly with the Heart Institute for Children and Hope Children's Hospital, Illinois, U.S.A., the Update Series on Child Health held in collaboration with the Hong Kong Paediatric Society, and the joint Annual Scientific Meeting with Hong Kong College of Physicians. Our College is going to host a symposium on "Adolescent Health" at the 10th Anniversary Scientific Conference of the Hong Kong Academy of Medicine later this year. We shall also be one of the organisers of the First Asia-Pacific Regional Adolescent Health Conference "Towards Healthy Adolescence: Intersectoral Collaboration" to be held in Hong Kong in January 2004. As the Chairman of the Steering Committee of this international congress, I look forward to the your participation and, taking this opportunity

to share experience with our colleagues from the region. The subject of adolescent health is of major interest to many of us and hopefully these meetings will provide the right opportunities for our members to upgrade themselves.

I wish to thank the members of the Accreditation Committee under the chairmanship of Dr. C.W. Chan for the many accomplishments they have achieved during the year. All members, in particular trainees and training supervisors, are advised to study the report of the Accreditation Committee carefully. Accreditation visits to all the training institutions in the Hospital Authority and the six clusters of maternal and child health centres of the Department of Health had been completed. The Task Force for Higher Training in Paediatric Subspecialties is working hard to study the status of paediatric subspecialties in Hong Kong. While the Council is waiting for the recommendations from the Task Force, the College has received a generous donation of HK\$900,000 from the Providence Foundation to support the College in the review of the training and the development of paediatric subspecialties. I am therefore grateful to the Providence Foundation for such a timely donation. Two years ago, the Providence Foundation already made a generous donation of three million Hong Kong dollars (HK\$3,000,000) to establish the H.M. Lui Memorial Fund. With the support of the Fund, Dr. Wang Jianshe from Shanghai, the first recipient of the H.M. Lui Fellowship award, was able to undertake training in paediatric hepatology successfully in the United Kingdom for 6 months.

Because of SARS, the College had to cancel the Diploma in Child Health Examination but continued with the Joint Intermediate Examination/MRCPCH Part II Clinical Examination in October 2003. In line with the new initiatives of the Royal College of Paediatrics and Child Health, there will be a new format for the Intermediate Examination and the Diploma in Child Health Examination starting from year 2004. Information about the examinations is available from the college secretariat and the college web-site. Training supervisors and trainees should take note of such changes. The college secretariat is now responsible for the administration of all examinations. I wish to express my sincere thanks to the Hong Kong College of Physicians, the Royal Colleges of Physicians of the United Kingdom and the Hospital Authority for their support and collaboration rendered to the College in running the examinations in the past years. Our College will continue to work closely with the Royal College of Paediatrics and Child Health on matters related to education, training and examination.

The membership of the College has reached 591. We are now the third largest college within the Hong Kong Academy of Medicine. 419 Fellows are practising in Hong Kong and they are playing a major role in providing a high standard of health care to the children of Hong Kong. The College has therefore the commitment to ensure that the highest standard of education and training would be available to our members. The College also

pledges to facilitate and support our members in their professional development. It is gratifying to note that practically, all our Fellows have satisfied the continuing educational requirement of the Hong Kong Academy of Medicine and hence are being maintained on the specialist register of the Medical Council of Hong Kong. I am pleased to welcome the 22 new Associates who joined the College as trainees this year. To encourage more young doctors to join our discipline, the College has established one prize each at the University of Hong Kong and the Chinese University of Hong Kong to be awarded to the top medical student in the final examination in Paediatrics.

It has been a privilege to serve you and the College as the President in the past six years. I firmly believe that it is because of your active participation and support that the mission of the College could be accomplished. I wish to thank you for your valuable contributions and guidance. I also wish to express my sincere thanks to the members of the Council, Committees and Subcommittees for their advice, dedication and counsel in guiding me to serve you and the College. I am particularly indebted to Professor T.F. Fok, the Vice-President, Professor Louis Low, the Honorary Secretary and Dr. Ko Wai Keung, the Honorary Treasurer for their contributions and co-operation, and the secretariat for their efficient support. The experience at the College in the past six years is most memorable and pleasurable. I hope that our colleagues will continue to offer their advice and guidance to my successor and his Council.

Prof. LEUNG Nai-kong
President

Council's Report

At the 11th Annual General Meeting of the College held on 23rd November, 2002, Dr. M. C. Chiu, Dr. Patricia Ip, Prof. Y. L. Lau, Dr. W. H. Lee and Dr. Alfred Tam were elected as Council Members for the years 2002-2005. Mr. Peter Mark and Mr. Walter Ma were appointed as Honorary Legal Advisor and Honorary Auditor of the College respectively.

During the year 2002/2003, five Council Meetings were held during which the eight standing committees (Accreditation, Education, Examination, House, Information Technology, Membership, Professional & General Affairs and Review Committees) as well as the Hong Kong College of Paediatricians Foundation made their reports to Council. Two young Fellows, Dr. Chu Wai-Po and Dr. Albert Martin Li were co-opted as Council Members in March, 2003 for a period of one year.

The Outbreak of Severe Acute Respiratory Syndrome

The outbreak of severe acute respiratory syndrome (SARS) in Hong Kong this spring had far-reaching effects on the population of Hong Kong, our medical and allied health colleagues caring for children in hospitals and in the community and College activities. The proposed academic exchange meeting trip to Chengdu and Chongqing in the summer had to be cancelled as was the Council Meeting in May. The Update Series of lectures and the Postgraduate Training Programme for trainees had to be postponed. During the outbreak, the Information Technology and the Professional and General Affairs Committees did a fantastic job of disseminating the interim infection control measures and guidelines for the management of SARS to all Fellows. More than 100 emails were sent to paediatricians in private practice to constantly keep them informed of the up-to-date development of the SARS outbreak and management protocols. A new website <http://www.paedsarshk.org/> was also set up through the enormous efforts of Dr. Ko Po Wan, posting important information on SARS and useful links. This website also provided the forum for discussions and sharing of experience by all the "SARS fighters" and served to disseminate up-to-date information on SARS to all Fellows, Members and Associates of the College registered on this website.

Our College also organized a seminar entitled "Paediatric SARS - Experience Sharing" on 20th April, 2003. This meeting was well attended by Fellows, Members and Associates of the College. The College Council as well as a lot of Fellows of the College supported the "One Doctor Serving One School" project organized by the Hong Kong Medical Association.

Prof. Leung Nai Kong, our President, was invited to participate as a member of the Advisory Council of the “We Care Education Fund” which had the objective of providing counseling and education support to the families affected by SARS. 75 children from 45 families had lost one or both parents because of SARS. 28 College Fellows and their families and friends had offered to provide psychological, social and medical support to these unfortunate children and their families. The Professional and General Affairs Committee had also made a submission of the College’s view on improved provision of care to children in case of future outbreak of SARS to the SARS Expert Committee of the HKSAR Government.

Training in Paediatricians and the Accreditation of Training

All trainees entering into the Basic Paediatric Training Programme on or after 1st July, 2003 will have to undertake a compulsory 6-month rotation to an accredited Maternal and Child Health Clinic (MCHC) cluster. The accreditation process is already underway and six MCHC-clusters will be fully accredited by the end of this year. The College Council recently endorsed the Guidelines on the Interruption of Training recommended by the Accreditation Committee, and trainees entering into Basic or Higher Training Programmes on or after 1st January, 2004 should abide by these regulations:

1. Any one period of interruption should not be more than 12 weeks;
2. A maximum of 24 weeks of cumulative leave (leave other than the entitled statutory leave, annual leave and casual leave) would be allowed during the trainee's 6-year of training period, where not more than 12 weeks would be allowed during either the Basic or Higher Training period;
3. Only one period of continuous or cumulative 12-week leave would be allowed (other than the entitled statutory leave, annual leave and casual leave) during each of the 3-year Basic Training Programme or Higher Training Programme. Trainees taking leave more than that would be required to extend his/her training period to make up for the interruption in excess of 12 weeks during either Basic or Higher Training;
4. All trainees should fulfill the compulsory Basic Training modules, i.e. the 6-month Neonatology and the 6-month MCHC rotation training despite he/she being allowed to take a maximum of 12 weeks continuous leave;
5. A declaration of any interruption of training should be made by the trainee on his/her application for Membership and Exit Assessment;
6. All trainees entering into Basic or Higher Training from 1st January 2004 should abide by these guidelines.

Accreditation revisits to thirteen training units were carried out in the summer and completed by the end of September. The reports of the visiting teams and their recommendations were discussed by the Accreditation Committee and presented to

Council. The accreditation status of the training units will be submitted to the Academy Education Committee. The accreditation of trainers for the years 2004-2005 has been initiated and completed.

At the end of last year, the Task Force on Higher Training in Subspecialties had received returns from twelve subspecialties plus a submission from the Paediatric Intensive Care Group, indicating their interests and intention to submit a training programme of their subspecialties for accreditation. The Core Group of the Task Force on Higher Training in Subspecialties comprising Dr. C. W. Chan, Dr. M. Leung, Prof. T. F. Fok, Prof. Y. L. Lau, Dr. C. B. Chow and Prof. C. K. Low, had drafted a preliminary "Guidelines on the Accreditation of a Paediatric Subspecialty". The Core Group has been dissolved and the members of the Task Force will take up the task and further scrutinize the proposed guidelines before submission to Council for approval. Widespread consultation will be carried out before the guidelines are adopted. The College Guidelines on Accreditation of Training has recently been revised and updated to include recently passed Council resolutions. Fellows, Members and Associates should be aware of these changes and the revised Guidelines can be viewed on the College website once the document is ready.

Education and Professional Activities

Our College is one of the organizations involved in planning of the First Asia-Pacific Regional Adolescent Health Conference "Towards Healthy Adolescence: Intersectoral Collaboration" to be held in January, 2004. A symposium on "Adolescent Health" organized by our College will form part of the programme of the 10th Anniversary Scientific Conference of the Hong Kong Academy of Medicine. Prof. He Xiao Hu, President of the Chinese Pediatric Society, will be invited to attend Academy's 10th Anniversary Scientific Conference as a guest of the College. As in previous years, our College participated in the Joint Hong Kong College of Physicians and Hong Kong College of Paediatricians Scientific Meeting, which was held on 11th -12th October, 2003. The meeting was well attended by College Fellows. The College continued to collaborate with Hong Kong Paediatric Society in organizing the annual Update Series on Child Health, which attracted over 600 doctors and nurses at each of the four afternoon sessions.

The 2003 Paediatric Advance Life Support (PALS) Course was held from 13th-17th September, 2003 and there were 120 participants for the two Provider Courses and 15 participants for the Instructor Course. The postponed Update Series of lectures and the Postgraduate Course for basic trainees due to the outbreak of SARS, were started again in September, 2003.

Dr. Wang Jianshe of Shanghai was awarded the H. M. Lui Fellowship for Year 2002-2003 to study in King's College Hospital in London in 2003. Nominations are now invited for the H. M. Lui Visiting Professorship in Gastroenterology and Hepatology for the year 2004.

The University of Hong Kong and the Chinese University of Hong Kong have accepted our College's annual donation of a Prize in Clinical Paediatrics to be awarded to the best student in the final examination in Paediatrics.

The Guidelines for Gastroenteritis was published in the July Issue of the Hong Kong Journal of Paediatrics. A copy of the guidelines will be sent to the Hong Kong College of Family Physicians for information.

7 out of 284 Fellows failed to fulfill the Academy's CME requirement for the 2000-2002 cycle and the non-fulfillment was remediable for 6 Fellows.

Examinations

The College Secretariat took over the administrations of the Intermediate Examination/MRCPCH Examination from the Hospital Authority from 1st April, 2003. The Memorandum of Understanding between our College, the Hong Kong College of Physicians, the Royal College of Paediatrics and Child Health and the three Royal Colleges of Physicians of the United Kingdom came to an end after the third diet of the Joint Intermediate Examination/MRCPCH Part II Clinical Examination in October 2003, marking the end of an eighteen years collaboration. A new Memorandum of Understanding (MOU) between our College and the Royal College of Paediatrics and Child Health is still being negotiated. A MOU for the Joint Examination of the Diploma of Child Health is still in the drafting stage.

In the December 2003 Exit Assessment and thereafter, candidates are only required to submit 3 dissertations (a research study, a review or case series or a case report with research studies able to replace any of the other two categories of dissertation). It is with great sadness that the College has to report that a candidate sitting for the December 2002 Exit Assessment had to be deferred for 6 months because of plagiarism and was required to submit another dissertation in another topic for assessment at the next Exit Assessment. The Examination Committee and the College Council take a serious view of plagiarism.

From 2004 onwards, our College would hold three Part I and three Part II Written Examinations each year. The MRCPCH Part I Examination will be changed to a two-paper Part I Examination (Part IA and Part IB) from January, 2004. Each paper will last 2 1/2 hours and will be made up of multiple choice, true-false questions, extended matching questions and best of five questions. The MRCPCH Part IA is on basic child health and successful candidates are entitled to attempt the Diploma of Child Health Clinical Examination. The MRCPCH Part IB is on extended paediatrics and a candidate must pass both MRCPCH Part IA and IB before he/she could attempt the MRCPCH Part II Written Examination. Candidates are allowed to enter the examination upon completion of their primary degree (including their internship). The new format MRCPCH Part II

Clinical Examination consisting of a ten-station structured assessment on counseling and teaching, history taking, child development, paediatric emergencies and clinical skills, will be implemented from the third diet of the examination in 2004. The College Examination Committee will run a pilot examination in February 2004. Dr. Geoff Lealman gave a briefing on the new format of the clinical examination to chiefs of service; training supervisors and College Examiners after the October Part II Clinical Examination in Hong Kong. Extensive consultation and information dissemination will be carried out to keep College Fellows, Members and Associates informed of the latest developments in the new format of the Joint Intermediate Examination/MRCPCH Part II Clinical Examination. Information on the new format of the Joint Intermediate Examination/MRCPCH Part IA and Part IB Written Examination and the Joint Intermediate Examination/MRCPCH Part II Clinical Examination can be found on the College website (www.paediatrician.org.hk) and on the website of the Royal College of Paediatrics and Child Health (www.rcpch.ac.uk).

As a result of the SARS outbreak in Hong Kong, it was envisaged that there could be difficulties in getting enough patients to participate in the DCH and MRCPCH Part II Clinical Examinations. It was decided therefore, to suspend the Joint DCH Clinical Examination in October 2003 in Hong Kong but the Joint Intermediate Examination/MRCPCH Part II Clinical Examination was held as scheduled in October 2003.

Membership

By the end of November, 2003, there are 423 Fellows, 21 Overseas Fellows, 60 Members, 4 Overseas Members and 83 Associates.

Prof. LOW Chung-kai, Louis
Honorary Secretary

Hon. Treasurer's Report

Total Income for Year 2002/2003 was reduced by 68% (HK\$1,543,061 as compared to HK\$4,928,508 of last year). The significant decreases were mainly due to the following:

1. reduction in income from subscription and admission fees
2. reduction in surplus from H. M. Lui Memorial Fund Account since no donation was received within last year
3. reduction in bank interest income

On the other hand, Expenditures for Year 2002/2003 remained almost the same as last year (HK\$1,333,899 as compared to HK\$1,325,925 of last year).

Operating surplus for Year 2002/2003 was HK\$209,162 as compared to HK\$3,602,583 of last year including a provision of HK\$35,000 for diminution in value of the listed shares (provision for last year was HK\$177,743).

The balance sheet as at 31st March, 2003 remained financially strong and liquid. Our bank deposits and current balances amounted to HK\$6,967,072, which represents 93% of the total net assets of HK\$7,470,335.

Finally, I would like to again extend my sincere thanks to Walter Ma & Company who arranged for auditing our financial report this year.

Dr. KO Wai-keung, Frederick
Honorary Treasurer

Standing Committees

Accreditation Committee's Report

Chairman	Dr. CHAN Chok-wan
Hon. Secretary	Dr. LEUNG Ping, Maurice
Members	Dr. CHAN Kwok-hing, Alex
	Dr. CHIU Man-chun
	Prof. FOK Tai-fai
	Dr. HO Che-shun, Jackson
	Prof. LAU Yu-lung
	Dr. LEUNG Chik-wa, Paul
	Prof. Louis LOW
	Dr. TSAO Yen-chow
	Prof. LEUNG Nai-kong (<i>ex-officio</i>)

Accreditation of postgraduate training for paediatricians in Hong Kong is under the care of the College Accreditation Committee whose terms of reference as stipulated in the Memorandum and Articles of the College stated that “*its functions shall be that of assessing the suitability of the various units for training purpose and to advise the Council on the training in paediatrics and the development of paediatric subspecialties*”. It thus follows that accreditation includes assessment of training institutions, trainers and trainees of paediatrics (general paediatrics) and paediatric subspecialties as designated by the College Council.

The Committee held six meetings (67th to 72nd meetings dated 27/8/02, 15/10/02, 11/02/03, 10/06/03, 5/08/03 and 27/10/03) this year and all meetings were well attended by Committee Members. During the year, four new resolutions were made by the College Council at the recommendation of the Accreditation Committee: namely, *Application for Temporary Medical Registration*, *Guidelines for Applications for Retrospective Accreditation*, *Interruption of Training (during the Basic or Higher Training Programme due to maternity leave, sick leave or other reasons)*, and *Prospective Application with Inadequate Documentation*. The Committee deliberated a wide variety of events, conducted a diversified range of activities and made relevant recommendations to the College Council throughout the year. Below is a summary of important events achieved by the Committee.

1. Accreditation of Institutions

1.1 Accreditation Revisits to CAS and CGS

Each accredited institution is to be re-visited and reviewed by the Accreditation Committee at least once every five years according to the accreditation regulations of the Hong Kong Academy of Medicine. This year, we made accreditation revisits to the Clinical Genetic Services (CGS) on 10th July 2002 and the Child Assessment Services (CAS) on 7th August, 2002. Consequently, the Committee recommended each Service as training centre for a 6-month basic training and a one-year higher training module for General Paediatrics with emphasis on trainee's clinical exposure and better linkage with hospital paediatrics. Both were approved by the Council.

1.2 Accreditation of Institutions for Training in Paediatrics

During the past twelve months, the Committee has made accreditation field visits to 13 training institutions in Paediatrics (General Paediatrics) under the Hospital Authority (reduction of one training institution consequent to the amalgamation of Departments of Paediatrics and Adolescent Medicine of the Northern District Hospital and the Alice Ho Miu Ling Nethersole Hospital) according to the Academy requirement. Each of the institutions was assessed by a team of at least three members, designated by the College Council, using a comprehensive set of objective criteria for accreditation. Besides overall assessment of the accreditation data of all institutions, the assessment teams also focused on three important aspects: *dissociation of day and night duties, mixed ward situation for children with different ages, and exposure of trainees to subspecialty training*, and brought back useful information for future consideration of accrediting institutions for basic training.

Successful institutions were recommended to the College Council and then to the Academy Council for official accreditation.

1.3 Accreditation Visits to Maternal and Child Health Centres under the Family Health Service of the Department of Health

In order to facilitate our basic training in primary care child health, the Department of Health kindly provided four training clusters, namely, Wong Siu Ching and Lek Yuen, Fanling and Ma On Shan, Maurine Grantham and Tsing Yi, as well as Yan Oi and Tin Shui Wai, in August 2003 for consideration of the College. An accreditation team visited the Yan Oi MCHC Cluster of the Family Health Service on 4th September 2002 and assessed the scope of service, number of clusters and their respective training

centres, trainer's credentials, training curriculum, types of training activities, service setup, supportive and library facilities, and reviewed the last 5-year service statistics. The team recommended a 6-month module for basic training in each of the cluster and this was approved by the Council with full appreciation of the generous contribution of Department of Health.

Subsequently, Family Health Services recommended two more training clusters, Sai Wan Ho and Chai Wan, and West Kowloon and Yaumatei, for accreditation which were approved by the College Council, each with a 6-month module for basic training. These together with the previous four clusters constituted a total of six accredited clusters under the Family Health Service allowing a total of 12 training posts per year.

1.4 Accreditation of existing Child-Health Related Specialties

The Committee also accredits child-health related training centres not belonging to our College for elective training at both the basic and the higher training modules. For those training centres belonging to Colleges of the Academy, such as Child Psychiatry, ENT, Accident and Emergency Medicine, Ophthalmology and others, the College Council resolved that the Accreditation Committee needs not visit them because they have been formally accredited by their respective Colleges. Trainees, however, would be requested to submit their training programme for provisional approval by the Committee and final endorsement by the College Council. The Accreditation Committee stresses the importance of inclusion of child-oriented training during these elective periods.

1.5 Accreditation of Training Programme in HA Clusters

1.5.1 In view of the Hospital Authority's clustering programme (which would be implemented in the near future), the Committee agreed that, in future, accreditation would be on training programme which may involve one or more hospitals, and not necessarily on individual hospital basis. As we have already made visits to individual institutions, we shall soon start to accredit training programme under the cluster rotation basis.

1.5.2 The Committee also took into consideration the recommendation by the Education Committee that:

- a) The fulfillment of the 6-month obligatory rotation (for General Paediatrics training) to other units within the same cluster be applicable to the future clustering system. Other training requirements would remain status quo.
- b) For subspecialty rotation within the same jurisdiction, this would not be regarded as a 6-month obligatory rotation.

- 1.5.3 There would be transitional arrangement for accreditation subject to review of the cluster programme in the coming 2 or 3 years.
- 1.5.4 In order to ensure a stable and effective training programme to be implemented among the clustering hospitals, the Committee would further recommend to HA that a uniform rotational programme should be carried out among the hospitals within the same cluster (trainee-centered accreditation).

2. Accreditation of Trainers

2.1 Trainer / Trainee ratio

Due to the change in the number of trainers and trainees in hospitals over the years, the Council was concerned about the appropriateness of the current regulation “that a trainer could accept not more than 2 basic and 1 higher trainees or 1 basic and 2 higher trainees”. The Committee was designated to evaluate the validity of the ratio and qualification requirement for trainers.

A Questionnaire was sent out to all Chiefs of Service of accredited institutions to solicit their views on the subject. Apart from two training units who indicated that the rule of at least 3 years of post-fellowship experience to be Trainer for Higher Trainees might affect them, all the other institutions have no objection to the implementation of the new requirement from 1st January 2004. The Accreditation Committee would deliberate the issue and make recommendation to the College Council at the upcoming Council Meeting.

2.2 Guidance Note for Application of Temporary Registration (TMR)

An application was referred by the Academy Education Committee for consideration of recommending to the Medical Council of Hong Kong an overseas expert to train two local specialists on a new treatment modality. As this is a prototype for our College, the Committee took reference of the HKAM's Guidance Notes and relevant documents from the institutions (the Universities and Hospital Authority) and drafted a “College Guidance Notes on Application for Support of Temporary Registration of Overseas Doctors for purpose of Clinical Teaching in a Private Hospital” which was approved at the 81st Council Meeting dated 16th September, 2002. The application was subsequently approved and recommended to the Academy Education Committee based on the new Guidance Note.

2.3 Trainers for Child-Health Related Specialties

The Committee would endorse trainers who are accredited trainers of their respective Academy Colleges as trainers for the child-related specialties. For

those not belonging to Colleges, the Committee would objectively accredit on individual cases.

3. Accreditation of Training Curriculum

3.1 Training in mixed neonatal and infant wards

The Council resolved that a ward admitting essentially neonates with occasional infants should be classified as a neonatal ward and training would be recognized as training in neonatology. For wards which were age-oriented, Chiefs of Service were advised to rotate their trainees through all wards to ensure coverage of all age groups to comply with the general paediatric training requirement.

3.2 Paediatric ICU (PICU) as a subspecialty in higher training

The Council resolved that ICU should be regarded as a subspecialty in higher training and its importance in the training curriculum is recognized.

3.3 Discrepancy between Day and Night duties during training

The Council resolved that the principal day-time assigned ward duties of a trainee would be assessed as the recognized training in that subspecialty irrespective of day-time general paediatric outpatient and night-time on-call duties.

3.4 Rotation of Higher Training in another Institution

The Council resolved that all trainees could have their 6-month rotation training being attached to more than one institution.

3.5 One Set of Accreditation Criteria for Local and Overseas Trainees

The College Council stresses on the importance of equality and fairness on accreditation criteria for both local and overseas trainees. Both have to be supported by log sheet data, declaration and supervisor's support.

3.6 Retrospective Accreditation for Local and Overseas Trainees

The Committee suggested that an administrative vetting fee of HK\$10,000 would be charged for each individual application for retrospective accreditation of paediatric training, irrespective of whether the doctors were trained locally or in overseas centres. For trainees who had completed his/her basic and higher training and applied for retrospective accreditation, this would be regarded as one application. By adopting this administrative fee for retrospective accreditation of training, the previous regulation that a trainee must join the College as an Associate or a Member before his/her training could be accredited would no longer apply. The Council approved the

Committee's proposal. The Council further agreed that consideration would be given to those trainees who did not join the College as Associate / Member after the 6-month grace period leading to a delay in the recognition of their Basic and Higher Training. The Hon. Secretary had already announced the Council's decision immediately after the 76th Council Meeting dated 29/10/01.

3.7 Prospective Application with Inadequate Documentation

The Committee recommended and the College Council approved (at the 86th Council Meeting dated 15.09.2003) that prospective application of individual training without complete documents provided by the applicant should be treated as an application for retrospective accreditation and the applicant would be required to pay an administrative charge of HK\$2,000. The new rule with effect from 1st January 2004 would be publicized via the College Guidelines for Training, Instructions to Trainees at the beginning of their training, an announcement through all COSs and Training Supervisors, and the College Website. Trainees would also be reminded of this rule at the time when they submit their applications for accreditation.

4 Accreditation of Trainee

4.1. The Subcommittee for Accreditation of Individual Training consisting of Dr. Ho Che Shun (Chairman), Dr. Leung Ping, Dr. Leung Chik Wa and Professor Lau Yu Lung, is responsible for assessing, accrediting and advising individual trainees in their training programmes and have such vetted training programmes presented to the Committee, and then the Council, for approval.

4.2 Guideline for Special Consideration of Interruption of Training for Trainees (approved by the Council in 2000) stated clearly the following criteria for special considerations:

- 4.2.1 the interruption should be less than 12 months
 - 4.2.2 the trainee should show his intention for further training
 - 4.2.3 there must be justifiable reason for the interruption, either because of medical or other compassionate reasons
 - 4.2.4 must follow the regulations laid down by the Academy (including the Grandfather Clause: by-law 16)
 - 4.2.5 final discretion is at the College Council
- To these criteria, the Council at its 76th Meeting dated 29/10/2001 has added one more criterion:*
- 4.2.6 Interruption between Basic and Higher Training: Training would be regarded as interrupted if a trainee had interruption of more than 12

months in between the basic and higher training. However, where cases arose, the Council had full discretion to make a decision based on individual case merits, such as intention of training, medical and other reasons accepted by the Council.

4.3 Interruption of Training (during the Basic and Higher Training Programme due to Maternity Leave, Sick Leave or Other Reasons)

At the request of the Academy consequent to the trainees' training programme affected by the SARS endemic and in supplement to Article 4.2 above to ensure quality and consistent training programme within the designated period of training for Basic and Higher Trainings, the following Guidelines were recommended by the Accreditation Committee on interruption of training be it continuous and discontinuous:

- i) Any one period of interruption should not be more than 12 weeks;
- ii) A maximum of 24 weeks of cumulative leave (leave other than the entitled statutory leave, annual leave and casual leave) would be allowed during the trainee's 6-year of training period, where not more than 12 weeks would be allowed during either the Basic or Higher Training period;
- iii) Only one period of continuous or cumulative 12-week leave would be allowed (other than the entitled statutory leave, annual leave and casual leave) during each of the 3-year Basic Training Programme or Higher Training Programme. Trainees taking leave more than that would be required to extend his/her training period to make up for the interruption in excess of 12 weeks during either Basic or Higher Training;
- iv) All trainees should fulfill the compulsory Basic Training modules, i.e. the 6-month Neonatology and the 6-month MCHC rotation training despite he/she being allowed to take a maximum of 12 weeks continuous leave;
- v) A declaration of any interruption of training should be made by the trainee on his/her application for Membership and Exit Assessment;
- vi) All trainees entering into Basic or Higher Training from 1st January 2004 should abide by these guidelines.

College Council endorsed the recommendations at the 85th Council Meeting dated 10th July 2003 and agreed that all trainees starting Basic or Higher Training from 1st January 2004 should abide by these guidelines.

4.4 Guidelines for Application for Retrospective Accreditation

Under the instruction of the College Council and at the recommendation of the College Membership Committee at the 82nd Council Meeting dated 15/11/02 Art. 9.5, the Accreditation Committee proposed the following Procedures for Council considerations:

- 4.4.1 Applicant writes to College Secretary - note the retrospective nature of application
- 4.4.2 Secretary redirects application to Accreditation Committee (AC)
- 4.4.3 Secretary of Accreditation Committee (AC) - sends standard form to applicant
- 4.4.4 Applicant returns application form with training details plus ALL the following items:
 - a) Reasons for not applying prospective accreditation training
 - b) Administrative Vetting Fees of HK\$10,000
 - c) Declares no interruption during training period/or gives reasons for interruption
 - d) Statement undertaking all information supplied are correct
- 4.4.5 Vetting by Subcommittee for Accreditation of Individual Training
- 4.4.6 Recommendation of approval/disapproval by Accreditation Committee
- 4.4.7 Approval by College Council
- 4.4.8 Refer to Membership Committee for further process

The Council approved the Procedures at the 84th Council Meeting (Art. 5.1) dated 17/03/03 and ordered that this should be incorporated into the College's Operation Manual.

5. Guidelines on Higher Training

- 5.1 Further to the letter sent on 31st May 2001 by Professor Louis C.K. Low to all the Chiefs of Service regarding the Guidelines on Higher Training in Paediatrics, there has been concern on the interpretation of the sentence "The following training requirements will be strictly enforced on 1st July 2001 irrespective of the stage of training of the trainee". After much deliberation at the Council meeting held on 29th October 2001, Council resolved that:

With effect from the 1st July 2001 and thereafter, **ALL** trainees entering into Higher Training in Paediatrics should adhere to the Guidelines on Higher Training (vide infra). During the interim period between 1st July 2001 and 30th June 2004, the College would deal with minor infractions of these rules by trainees sympathetically provided there is a good reason. ***ALL trainees sitting the Exit Assessment in June 2004 or thereafter***, irrespective of the date of commencement of training, should fulfill **ALL** of the following training requirements:

- 5.1.1 The duration of supervised Higher Training should be no less than 3 years in College accredited centres.

- 5.1.2 There should be at least 2 years of hospital-based paediatrics, of which not less than 12 months should be devoted to general paediatrics with acute emergency hospital admission of children not restricted to any age group or paediatric subspecialty.
 - 5.1.3 The trainee may opt to undergo training for not more than 12 months in one paediatric subspecialty (as defined in the Guideline for Paediatric Training) inclusive of the 6 months obligatory rotation to local and overseas training centres should such a rotation be through the same paediatric subspecialty opted for.
 - 5.1.4 The trainee may also opt to undergo training for not more than 12 months in child health related specialties (e.g. child psychiatry, maternal and child health clinics, school health service, etc.) of which not more than 6 months should be spent in any single specialty and inclusive of the 6 months obligatory rotation to local and overseas training centres should such a rotation be through the same child health related specialty.
 - 5.1.5 All trainees must undergo a 6-month obligatory rotation through other training unit(s) (local/overseas). Prospective applications must be submitted, at least 3 months before the commencement of overseas training, to the Accreditation Committee together with the basic and essential information required to accompany any such application. The Accreditation Committee should also be notified before a trainee starts the rotation to other local training unit(s).
- 5.2 The current announcement of Council's resolution by Honorary Secretary would supersede all previous announcements. Trainees sitting the Exit Assessment on or after June 2004 would have to satisfy the requirement delineated above.
- 5.3 The College Honorary Secretary would also make announcements via letters to all Chiefs of Service, College Newsletter and Website for information of all parties concerned immediately. Reminders were also sent out via the College Newsletters and Websites regularly to reinforce Council's resolution.

6. Higher Training in Paediatric Subspecialties

6.1. Task Force for Higher Training in Paediatric Subspecialties

The Task Force was appointed by the College Council on 4th May 2000, with membership from the College Accreditation, Education, Membership, Examination and Review Committees, as well as representatives from the Department of Health, the Hospital Authority, University Departments of

Paediatrics, and College Fellows. This diversified composition ensures that needs and concerns of this project are comprehensively and adequately represented. The Task Force was designated duty to study the current status of paediatric subspecialties and to make recommendations to the College Council on development of higher training in paediatric subspecialties in Hong Kong.

The Accreditation Committee actively supported the work of the Task Force in sending out Questionnaires to subspecialty groups, analyzing the data returns, setting up accreditation criteria for subspecialty training and governance, designing application forms and assisting field visits for final accreditations. To date the progress for the Task Force has been very encouraging and it will not be long before Higher Training for Paediatrics Subspecialty can be implemented in Hong Kong.

6.2 The Academy Guidelines on Admission of First Fellows in New Subspecialty The Hong Kong Academy of Medicine at its 128th Council Meeting on 21st August 2003 endorsed the Guidelines for admission of First Fellows in New Subspecialty as recommended by the Academy Education Committee. “First Fellows” would be used for the first batch of Fellows admitted in a new subspecialty. He/she should satisfy the following four criteria:

- a) be a Fellow of the HKAM;
- b) has satisfied the College that the training and/or clinical competence is comparable in quality and standard to that required for a Fellow in the new subspecialty;
- c) has satisfied the College that he/she had a minimum period of good practice in the field of the new subspecialty. The period should be twice the duration required for a formal subspecialty training programme. The standard of such practice or supervision must be assessed as satisfactory by the College for the purpose of accreditation;
- d) has passed an assessment by the College. The assessment shall be based on criteria comparable to that required for Fellowship in the new subspecialty obtained via the approved formal training programme. The arrangement should preferably be conducted by a panel consisting of at least one external independent member.

Cut-off date for admission of “New Fellows”:

- a) College should cease to admit First Fellows when their formal training programme has started; and
- b) The training programme should start within 24 months after the Academy Council has approved the new subspecialty

The Accreditation Committee and the College Council take note of these guidelines which would become basic guidelines for the Task Force in consideration of the College Higher Training of Paediatric Subspecialties.

7. Manpower Survey for College Trainers and Trainees

During the year 2002, the Accreditation Committee with the mandate from the College Council effected a Manpower Survey which revealed that, as on 31st May 2003, the College has in total accredited 195 trainers in paediatrics and enrolled 56 basic and 61 higher trainees (an overall trainer: trainee ratio of 1.7 to 1.0). The results were submitted to the Education Committee of the Hong Kong Academy of Medicine for planning and projection of future manpower requirement for medical specialties to be used as reference for all key stakeholders within Hong Kong.

8. The Academy Position Paper on “Introduction and Utilization of New and Experimental Treatment Modalities”

The Accreditation Committee noted that the Hong Kong Academy of Medicine had issued a Position Paper in August 2002 on the above issue. It is further noted that the Academy will play an advocacy and advisory role while the Department of Health of the SAR Government would be responsible for regulation.

CONCLUSION

The past twelve months have been a memorable period of significant activities and progress for the Accreditation Committee, as evidenced by the work achieved throughout the period. We are especially encouraged to witness the accomplishment of accreditation activities at institution, trainer, trainee and training programme levels, as well as adoption of the Committee's policy recommendations by the College Council. We have re-visited 13 accredited institutions in paediatrics (under the Hospital Authority) and 2 clinical services (under the Department of Health) and renewed their accreditation status in training. We have successfully supported the Task Force for Higher Training in Paediatric Subspecialties. We are pleased to observe commencement of clustering between different paediatric departments and child health services within the HKSAR. This collaboration between various institutions well serves to maximize manpower and resources and also supports the missions of paediatric training and accreditation. The future offers even more challenges for the Committee, especially in the areas of subspecialty higher training and quality assurance of training programmes. Strengthening of our training in general paediatrics, primary care and preventive paediatrics will continue to be viewed with importance. Work ahead is formidable, but we are fortunate to have a competent and cooperative team of committee members, many of whom are also key figures at other standing committees of the College. This specially intended overlap enables the Accreditation Committee to work in good harmony and to interact efficiently with diversified functions of the College. The

other assets of this Committee are the honour to have our College President, Professor NK Leung, and College Honorary Secretary, Professor Louis Low, sitting in our Committee. Their invaluable contribution is vital and essential for all the work we have achieved during the period of this report. We strongly believe that the successful fulfillment of our duties is dependent on the transparency, reliability and accountability of the Accreditation Committee, on effective communications with and support from all College Fellows and trainees, and good relationships with other sister colleges within the Academy. We are privileged to be able to serve at this important groundbreaking stage, and will strive to achieve our objectives with your valuable support!

Dr. CHAN Chok-wan
Chairman, Accreditation Committee

Task Force for Higher Training of Paediatric Subspecialties's Report

Chairman	Prof. CHAN Chok-wan
Hon. Secretary	Dr. YAM Ka-Ling, Winnie (<i>up to 28th January 2002</i>) Prof. LAU Yu-Lung (<i>as from 28th January 2002</i>)
Members	Dr. CHAN Kwok-Hing, Alex Dr. CHIU Man-Chun Dr. CHOW Chun-Bong Prof. FOK Tai-Fai Dr. Maurice LEUNG Ping Dr. Shirley LEUNG Prof. Louis LOW Prof. Rita SUNG Dr. TSAO Yen-Chow Prof. LEUNG Nai-Kong (<i>ex-officio</i>)

Preamble

The Task Force was appointed by the College Council on 4th May 2000, with membership from the College Accreditation, Education, Membership, Examination and Review Committees, as well as representatives from the Department of Health, the Hospital Authority, University Departments of Paediatrics, and College Fellows. This diversified composition ensures that needs and concerns of this project are comprehensively and adequately represented. The Task Force was designated the duty to study the current status of paediatric subspecialties and to make recommendations to the College Council on development of higher training in paediatric subspecialties in Hong Kong.

The Task Force convened a Meeting with the Subspecialty Groups, Chiefs of Service, Training Supervisors and Paediatric Consultants of Training Units on 22nd February 2002 at the Academy Building to update participants on progress of the work of the Task Force, provide information and collect opinions as well as feedback on the proposed Questionnaires from all subspecialty groups. This was followed by excellent exchange of views and opinions regarding the subject matter and all subspecialty groups were requested to submit their completed Questionnaires before end of June 2002 to facilitate consideration of accreditation of higher training in the paediatric subspecialties within the College.

Owing to the brief interruption of SARS endemic, 13 sets of completed Questionnaires were collected from the subspecialty groups by the end of June 2003. Results were carefully studied and analyzed and summarized into two important sets of documents: Criteria and Guidelines for Subspecialty Accreditation and Governance of Subspecialty Boards, which together with the papers from the Hong Kong Academy of Medicine on Accreditation of New Specialty/Subspecialty will form foundation for consideration of accreditation of paediatric subspecialty under the College.

- 1) HKAM Education Committee Papers on Accreditation of New Specialty/Subspecialty
 - a) Guidelines on Recognition of a Specialty/Subspecialty issued in 1997
 - b) Guidelines for Admission of “First Fellows” in New Subspecialty issued in August 2003:
 - i) the name “First Fellow” would be used for the first batch of Fellows admitted in a new subspecialty
 - ii) the admission criteria for “New Fellows”
 - iii) the cut-off date and date of the first examination after recognition and adoption of the new subspecialty

These two documents would be used as reference for our College subspecialty board governance and criteria for accreditation.

- 2) Reference to Subspecialty Documents from other Academy Colleges

These documents and practical experience in the management of subspecialty boards within the sister Colleges would be valuable source of information and reference for the Task Force in accreditation considerations.

- 3) Criteria and Guidelines for Subspecialty Accreditation

The following are summaries of relevant background information, source of data, logistic for implementation recommended by the Task Force for consideration of the College Council:

- a) Final Criteria and Guidelines, deriving from returns of the Questionnaires, views from the Task Force, the College Council and further comments from subspecialty groups, would be used to formulate the Application Form for Accreditation of Paediatric Subspecialties.
- b) It was agreed in principle that a general objective qualitative guideline (in terms of service need, infrastructure and clinical service, career turnover, maturation of subspecialty and others) should be set for all subspecialties, while the detailed specific rules should be left to the individual subspecialty board to decide.
- c) There is no pre-set priority list for implementation of the subspecialty training. Final decision depends on fulfillment of accreditation requirements for that subspecialty.

- d) The application should be a group consensus submission and should have the reference from two or three overseas experts on that subspecialty training programme.
 - e) There should be an appeal system for application for recognition of a subspecialty and the Task Force would recommend to the College Council to empower the College Review Committee with such jurisdiction.
- 4) Governance of Subspecialty Board
- a) Regarding the minimum number of qualified subspecialists required for a proposed subspecialty, College has full jurisdiction to decide on this. The Task Force is of the view that requirements should not be too stringent which might affect subspecialty development in the future. It was thus resolved that a qualitative criteria with a sustainable training programme comparable to that of the overseas would be acceptable.
 - b) Accreditation programmes for paediatric subspecialties from most developed countries were consulted and reviewed by the Task Force during the data collection period and the “Canadian Accreditation Programme for Paediatric Subspecialties” seems to fit our purpose best by virtue of its comprehensive contents and practical guides in terms of the logistic requirements, guideline, objective and criteria for subspecialty board formation.
 - c) Local modes of subspecialty board from sister Colleges were also studied and the system adopted by the College of Physicians would be the most appropriate model for our reference. The subspecialty boards would be under the supervision of the College Education Committee in the future.
 - d) The governance board should consist of 5 subspecialists and 1 lay member (non-specialist). The latter would be nominated by the Education Committee and approved by the College Council. The board coordinator should be elected by the subspecialty group and approved by the Council.
 - e) The Task Force is in the process of drafting a skeleton document on the procedure for the formation of a provisional board, and governance of the first batch of subspecialty boards. This would form part of the future by-law for Higher Training in Paediatrics Subspecialties.
 - f) There should be a standard procedure for subspecialty field visits upon application by the subspecialty unit (services).
 - g) The board(s) would also be responsible for organizing CME activities for their own subspecialists.
- 5) Proposed Time Framework
- a) November 2003 – The final criteria and guidelines for subspecialty application and the subspecialty board documents to be submitted to the College Council for approval;

- b) January 2004 - Final Guideline and Application ready for use;
- c) February 2004 - To meet the subspecialty groups;
- d) May 2004 - To receive application from subspecialty groups, to analyze and to make field visits;
- e) August 2004 - Recommendation to the College Council;
- f) October 2004 – To invite the recognized subspecialty group to form their subspecialty board;
- g) January 2005 – Formation of the first subspecialty board

CONCLUSION

The Task Force for Higher Training in Paediatric Subspecialties was formed in May 2000. Through the dedicated work of its members, we are pleased to witness substantial achievements to date. Based on the *Academy Guidelines for Subspecialty Training, our own Criteria and Guidelines for Subspecialty Accreditation and Governance for Subspecialty Boards*, we are now at the final stage of designing an Application Form to be used by the subspecialty groups. The only set-back here is the current contract system for Hospital Authority employees which might hamper input of future trainees and hinder perpetuation of subspecialty development. However, as an Academy College, we do have obligation to promote such development which is vital for the betterment of child service in our community. Also, subspecialty groups (and future approved boards) have inherent duty to organize CME and CPD activities for their own subspecialists. Resources and manpower resources are other important constituents for ultimate success of subspecialty implementation. Given support from the College Council, contributions from the subspecialty groups, and dedication of the Task Force, it will not be long before Higher Training for Paediatrics Subspecialty can be realized in Hong Kong so that local paediatric subspecialists can have quality clinical and research activities ready to share and cross-pollinate with their counterparts elsewhere in the world.

Dr. CHAN Chok-wan
Chairman, Task Force for
Higher Training
in Paediatric Subspecialties

Standing Committees

Education Committee's Report

Chairman	Prof. FOK Tai-fai
Hon. Secretary	Dr. LEE Wai-hong
Members	Dr. AU YEUNG Cheuk-lun, Henry
	Dr. LAM Cheung-cheung, Barbara
	Dr. LEUNG Chuk-kwan, Lettie
	Dr. LEUNG Sze-lee, Shirley
	Prof. SUNG Yn-tz, Rita
	Dr. WONG Sik-nin
	Dr. YAU Fai-to, Adrian
	Dr. YOUNG Wan-yin, Betty

1. Meetings

Five meetings were held this year. The May meeting was cancelled because of SARS outbreak.

2. Programs in 2003

The events of the year were dominated by the onslaught of SARS and its aftermath. While Council & Committee meetings were cancelled, educational programs of the College were also affected. The Annual Postgraduate Paediatric Course, scheduled to take place from March onwards, had to be put off entirely. The two Paediatric Update seminars intended for April and June respectively were cancelled. The plans for a College trip to Chengdu and Chongqing in summer for academic exchange meeting with paediatric colleagues in the Mainland had to be shelved.

While SARS still ravaged, the College collaborated with the Department of Paediatrics of Princess Margaret Hospital to organize a special seminar on Paediatric SARS on 20 April to share the PMH experience. Over a hundred Fellows, Members and Associates braved the spectre of the epidemic to learn from the firsthand experience of the PMH team in fighting this new disease. The spectacle of an entire audience in surgical masks or N95's was never before seen in the history of the College.

3. Postgraduate Paediatric Course

With the lifting of the ban on clinical attachment in HA hospitals in August, the Postgraduate Paediatric Course was reconvened.

A total of 39 Basic Trainees were admitted to the Postgraduate Course. This followed the resolution at the 68th Meeting (6.3. 2003) that trainees may attend the Postgraduate Course as early as the second module of Basic Training.

Since the Course had been laid up for several months, a special run of six bedside teaching sessions was provided at a reduced fee for Basic Trainees who were going to sit the October clinical examination. Trainees not taking the October examination were admitted to the second series of teaching sessions running from November in line with the February 2004 Clinical Examination, which would be the last conventional clinical before the introduction of the New Clinical Examination.

In the light of lessons learned from the SARS outbreak, a set of tightened infection control measures for bedside teaching was adopted by consensus amongst all participating teaching units for the protection of all concerned. This included: smaller teaching groups, mandatory hand washing, personal protective wear (surgical mask & gown), selection of in-patients with known non-infectious clinical conditions, registry of course members, tutors and patients examined for contact tracing.

4. Other College Programs

After an uneasy summer break, life goes on. The Professional & General Affairs Committee organized the 2003 Paediatric Advanced Life Support Course in September. The two Provider Courses and one Instructor Course were attended by over 80 paediatricians, trainees and nurses and were once again a resounding success.

Our College maintained the tradition of participating in the Joint Scientific Meeting of the Hong Kong College of Physicians. With the conference theme of “Back to the Basics” , Prof T F Leung, Prof P T Cheung and Dr L Y So from our College delivered Plenary lectures respectively on the subjects of Respiratory Allergies, Apoptosis in Neurological Disorders, and Vascular Basis of Kawasaki Disease.

The remaining programs of the year would include the deferred Paediatric Update seminar on Paediatric Neurosurgery for Paediatricians (Part 2) on 16 November, and the symposium “Transitional Care: Adolescence to Childhood” on 28 November hosted by our College in the Tenth Anniversary Congress of the Hong Kong Academy of Medicine.

5. Training Curriculum

Two major issues relating to training curriculum came under the attention of the Committee in the year:

5.1 Mandatory MCHC Training

The mandatory requirement for six months Basic Training in MCHC had come into effect for the Basic Trainees entering training in July 2003. The curriculum proposed by Family Health Service had been approved by Council. The first batch of trainees will rotate to their MCHC posts in January 2004.

5.2 Interruption of Training

Under the employment contract policy recently implemented by Hospital Authority, interruption of training could result from non-renewal of contract because of failure at examination when contract expired. To address the issues arising therefrom, the College had determined that:

- a) the examination could be re-attempted without holding a training post if accredited training program was already completed
- b) the shortfall in training could be met by part-time training according to prescribed criteria

The following principles for Part-time Training had been adopted by the College:

- i) Minimum number of sessions per week same as permitted for Remedial Training
- ii) Maximum duration of Part-Time Training should not exceed 12 months full-time equivalent in total
- iii) Prospective approval of program by Education Committee is required
- iv) Supervision by accredited trainer in an approved unit is required
- v) Log book of training must be kept for submission to College on completion of program

Council had also approved a Guideline laid down by Accreditation Committee on Interruption of Training as a result of Leave of Absence.

6. CME for Non-specialists & Specialist Trainees

When College meetings become open to non-specialists, a fee of \$50 for one-hour lectures and \$100 for meetings exceeding one hour would be charged as approved

by Council. College Fellows, Members and Associates would be exempted. Fees would be collected and receipt issued by Secretariat staff at the reception desk.

Academy had informed Colleges to take over the administration of CME for their Specialist Trainees who had registered with Academy as CME Administrator. While the College would encourage all Specialist Trainees to register with the Academy as Administrator for non-specialist CME, the choice is voluntary.

When Mandatory CME comes into effect, the multitude of providers, accreditors and administrators involved in the CME process would pose a great challenge in maintaining complete and accurate records of attendance, as trainees registered with different administrators would be attending a variety of meetings organized by various providers approved by various accreditors.

Furthermore, Medical Council had announced a separate system of accreditation for CME programs run for Non-specialists. The basic criteria were essentially different, so one same activity could be accredited by different Accreditors and would earn different credits for Fellows versus Trainees.

7. MLMS

The Academy was launching an online Membership Learning and Management System (MLMS) this year to administer CME operations at the Academy. The system could handle the following functions: (i) real-time individual CME record (ii) CME calendar (iii) electronic CME activities, (iv) categorization of CME points for meetings.

At the instruction of Council, the Education Committee & CME Subcommittee had studied the impact of MLMS on existing College CME system and the feasibility of conforming with MLMS. It was clear that radical changes would be involved before interfacing with MLMS could take place, especially in relation to the categorization of CME points, the logistics and workflow.

In view of the impending implementation of Mandatory CME, Council had endorsed the revision of the current CME system in line with the MLMS. The CME Subcommittee is now in the process of revising the CME Guidelines to prepare for conversion to the MLMS in 2004.

8. Work of Continuing Medical Education Subcommittee

8.1 The membership of the Subcommittee for the year was:

Chairman: Dr WONG Sik-nin
 Vice Chairman: Prof SUNG Yn-tz, Rita [Institutions]
 Secretary: Dr LEE Chi-wai, Anselm
 Members: Dr CHAN Kwok-hing, Alex (Rep/Membership Committee)
 Dr Daniel CHIU [Study Groups]
 Prof FOK Tai-fai (ex-officio)
 Dr LAU Wai-hung
 Dr LEE Wai-hong (ex-officio)[Overseas Fellows]
 Prof Maurice LEUNG (Rep/Accreditation Committee)[Individuals]
 Dr Natalie LI
 Prof NG Pak-cheung (Rep/HKPS)
 Dr YUEN Hui-leung [Societies]

8.2 CME Performance of Fellows in 2002

Overall the performance of our Fellows was very good, as tabulated below according to respective CME cycles.

CME Cycle	Cycle time	Total Fellows	Fulfilled Requirement	
Jan 2000 - Dec 2002	3 yr	284	278	97.9%
Jul 2000 - Jun 2003	3 yr	22	22	100%
Jan 2001 - Dec 2003	2 yr	24	24	100%
Jul 2001 - Jun 2004	2 yr	19	19	100%

All the six Fellows who were unable to fulfill Academy requirement were in the range of remediable non-compliance, and three had already completed their remedial CME program.

8.3 An audit on 5% of the Annual Return Forms submitted by Fellows and late submissions was conducted. All submissions audited except one were found to be complete and substantiated.

8.4 The number of meetings submitted to the Subcommittee for accreditation from various conference organizers as well as individual Fellows continues to rise as the medical community gears up for the advent of Mandatory CME.

The division of labour amongst the various working groups worked smoothly in keeping with the performance pledges of the Subcommittee.

- 8.5 In anticipation of the Academy plan to synchronise CME cycles with Annual Practicing Certificate renewal from 1 January 2005, the Subcommittee had provided the number of CME points to be obtained by the end of December 2004 in respect of each CME cycle for Fellows' reference.
- 8.6 For Fellows who needed certification of their CME activity under our College to count towards the CME requirement of other overseas institutions/colleges, the Subcommittee had provided transcripts of the concerned Fellows' entries in the College CME Report on individual request.
- 8.7 Upon Fellows' application, the postgraduate activities of three additional overseas paediatric training centres had been given standing approval as accredited Category B CME Program in 2003. Up to the present, six overseas training units had been approved.

Country	Hospital	Unit	Status
UK	Great Ormond Street Hospital for Children, London	Cardiac Intensive Care/ Cardiothoracic Surgery	2 pts/wk (2001)
UK	Great Ormond Street Hospital for Children, London	Dept of Neurology	2 pts/wk (2003)
UK	Royal Hospital for Sick Children, Yorkhill, Glasgow	Dept of Neurology	2 pts/wk (2003)
Australia	Royal Northshore Hospital, Sydney	Paediatric Department/ Community Paediatric Service	2 pts/wk (2002)
Australia	Children Hospital at Westmead, Sydney	Cardiology Department	2 pts/wk (2002)
Australia	Monash Medical Centre, Melbourne	Neonatal Intensive Care Unit	2 pts/wk (2003)

This will facilitate our Fellows who are residing or training overseas to maintain their CME program with the Academy.

- 8.8 The Subcommittee had also received and approved a number of postgraduate meetings in other non-training centers overseas for Category B accreditation on individual basis.

9. Acknowledgements

The Committee wishes to record a note of sincere appreciation and thanks for our guest speakers & visiting faculty for their most valuable contribution to our scientific meetings and courses:

Overseas: 1. Dr John COURT
 2. Dr Alfred HU YOUNG
 3. Dr Arno ZARITSKY

Local: 1. Dr CHIU Hok-ming
 2. Dr FAN Yiu-wah
 3. Dr Dawson FONG
 4. Mrs Sumee NG
 5. Dr YAM Kwong-yui

The Committee also wishes to acknowledge the most valuable contributions of innumerable College Fellows who had assisted in the Joint Scientific Meetings, PALS Courses, Postgraduate Paediatric Course, and Paediatric Update seminars, as well as the generous and unfailing support from all the Paediatric Departments of Hospital Authority and Service Units of Department of Health.

Looking ahead, the coming year would be a challenging one, and we hope to continue working closely together in concerted efforts with our Fellows, Members and Associates as we prepare for the transition to MLMS and the implementation of Mandatory CME.

Prof. FOK Tai-fai
Chairman, Education Committee

College Lectures & Seminars 2003

Date	Topic	Speaker	Venue	CME point	Attendance		
					Fellow	Member Associate	Other Total
20 Apr	<u>Paediatric SARS - Experience Sharing</u> [Special College Seminar in collaboration with Dept of Paediatrics, PMH] - The PMH Experience - Clinical Management - Neonatal Related Problems - Infection Control Measures	- Dr CHIU Man Chun (PMH) - Dr LEUNG Chi Wai (PMH) - Dr SHEK Chi Chiu (PMH) - Dr KWAN Yat Wah (PMH)	HAHO	3	145	15	10 170
13-17 Sept	<u>5th Paediatric Advanced Life Support Course</u> <u>Instructor & Provider Courses</u> [organised by Professional & General Affairs Committee]	- Dr Alfred HU YOUNG (Heart Institute for Children, Hope Children's Hospital, Chicago, Illinois) - Dr Arno ZARITSKY (Pediatric Critical Care, University of Florida Medical Centre, Florida) - Dr CHEUNG Kam Lau (PWH) - Prof Maurice LEUNG - Dr TSOI Nai Shun (QMH) - Dr HUI Yim Wo (PMH) - Dr MIU Ting Yat (QEH)	HKAM	12	18	17	100 135
11-12 Oct	<u>Joint Scientific Meeting with HK College of Physicians:</u> <u>Back to Basics</u> [Organising Committee: Prof T F LEUNG, Prof P C NG] - Upper & Lower Respiratory Allergy: a Common Immunological Basis - ABC of Apoptosis in Neurological Disorders - Kawasaki Disease: Vascular Basis of Acute and Long Term Disease	- Prof LEUNG Ting Fan (PWH) - Prof CHEUNG Pik To (QMH) - Dr SO Lok Yee (PYNEH)	HKAM	6	40	10	/ 50

College Lectures & Seminars 2003

Date	Topic	Speaker	Venue	CME point	Attendance		
					Fellow	Member Associate	Other Total
16 Nov	<u>2003 Paediatric Update: Paediatric Neurosurgery for Paediatricians (Part 2)</u> - Paediatric Brain Tumour - Spinal Congenital Conditions - A Neurosurgical Perspective - Paediatric Stroke - Rhizotomy for Spasticity	(Moderator Dr Dawson FONG) - Dr FAN Yiu Wah (QMH) - Dr Dawson FONG (TMH) - Dr CHIU Hok Ming (QEH) - Dr YAM Kwong Yui (TMH)	QEH	3	47	1	13 61
28-30 Nov	<u>Tenth Anniversary Congress of HK Academy of Medicine</u> <u>"New Challenges in Health Care"</u> Symposium "Transitional Care: Adolescence to Adulthood" - Continuity of Care in the Transition from Adolescence to Adulthood - Graduation Plan for Children with Cancer and Blood Diseases - Lessons from Working with Adolescent Renal Patients - What Transition Care means to an Adolescent	Chair: Prof LEUNG Nai Kong - Dr John COURT - Dr HA Shau Yin (QMH) - Mrs Sumee NG (PMH) - Dr Sylvia LEUNG (QEH)	HKAM	15			

Standing Committees

Examination Committee's Report

Chairman	Dr. CHIU Man-chun
Hon. Secretary	Prof. LOW Chung-kai, Louis
Members	Prof. FOK Tai-fai
	Dr. IP Lai-sheung, Patricia
	Prof. LAU Yu-lung
	Dr. LEE Wai-hong
	Dr. LI Chi-keung
	Prof. NG Pak-cheung
	Dr. YOUNG Wan-yin, Betty

1. Examination Committee Meetings

Four Examination Committee Meetings were held in 2003 (till October). The Coordinators for different examinations were: Prof. T.F. Fok & Dr. LI Chi Keung for Exit Assessment, Dr. M.C. Chiu & Prof. Louis Low for Joint MRCPCH / Intermediate Examination and Dr. Patricia Ip & Dr. Betty Young for DCH. For this year, there were a total of 8 examinations / assessments held, including two Part I Examinations, two Part II Written Examinations, two Part II Clinical Examinations, and two Exit Assessments. The Joint DCH Examination was not held this year due to the concern of the difficulties that might be encountered in organizing the Examination should SARS return.

2. Joint Intermediate / MRCP Examinations

Two Part I Examinations were held in January and September, two Part II Written Examinations held in November and August, and two Part II Clinical Examinations held in February and October. Results of the Examinations were as follows:-

Results

Part I Examination (Jan 03)

No. of candidates:	27	
No. of pass:	17	(pass rate: 62.9%)

Part I Examination (Sep 03)

No. of candidates:	10	
No. of pass:	1	(pass rate: 10%)

The Part I Examination held in May was conducted by our College as an agent for 2 candidates who could not fly to UK for the examination during the SARS epidemic.

Part II Written Examination (Nov 02)

No. of candidates: 13
No. of Pass: 10 (Pass rate: 77%)

Part II Written Examination: (August 03)

No. of candidates:- 20
No of Pass: 12 (Pass rate: 60%)

Part II: Clinical Examination (Feb 03)

Local Examiners:-

at Prince of Wales Hospital:-

Prof. Rita. Sung (host examiner), Prof. T.F. Fok, Dr. P. Ip

at Princess Margaret Hospital

Dr. M.C. Chiu (host examiner), Dr. Li Chi-Keung, Dr. Alex Chan

Overseas Examiners:-

Dr. Janet M. Anderson (Senior Examiner), Dr. Harry Baumer,

Dr. R. Cameron Shepherd

No. of candidates:- 16
No. of Pass: 6 (rate: 37.5%)

Part II Clinical Examination: (Oct 03)

Local Examiners:

at Queen Mary Hospital:-

Prof. Y.L. Lau (host examiner), Prof. Louis Low, Dr.C.S. Ho

at Princess Margaret Hospital:

Dr. M.C. Chiu (host examiner), Prof. P.C. Ng, Dr. K.T. So

Overseas Examiners:

Dr. Geoffrey Lealman (Senior Examiner), Dr. Steven Ryan, Dr. Ian Swann

No. of candidates:- 12
No. of Pass : 5 (pass rate: 41.6%)

Prof. Louis Low and Dr. M.C. Chiu represented our College in the MRCPCH Part I & Part II Boards in UK respectively.

The RCPCH is in the process of reorganizing the MRCPCH Examination. From January 2004, the Part I Examination will be divided into Part IA and Part IB. Candidates passing Part IA will be entitled to sit for DCH Clinical Examination; and those passing Part IA and Part IB to sit for Part II Written Examination. Passing the

latter allows the candidate 3 attempts of the Part II New Clinical Examination. The Part II New Clinical Examination will adopt a more structured format of having 12 stations, and will start to be implemented in October 2004.

3. Exit Assessment

Two Exit Assessment were held in December 2002 and June 2003.

Exit Assessment (Dec 02)

3 panels of assessors:-

Prof. T.F. Fok, Dr. Li Chi-Kong, Dr. K.T. So

Prof. Louis Low, Dr. K.F. Huen, Dr. B. Young

Dr. C.B. Chow, Dr. C.S. Ho, Dr. F.T. Yau

No. of candidates:- 7

No. of pass :- 4 (pass rate: 57%)

Exit Assessment (Jun 03)

4 Panels of assessors: -

Dr. C.B. Chow, Dr. Y.M. Ng, Dr. Li Chi-Keung

Prof. Y.L. Lau, Prof. V. Wong, Dr. K.F. Huen

Dr. M.C. Chiu, Dr. Li Chi-Kong, Dr. K.T. So

Dr. Patricia Ip, Dr. Alex Chan, Dr. Anthony Nelson

No. of candidates:- 11

No of Pass: 11 (pass rate: 100%)

In the Exit Assessment held in Dec 02, one candidate's dissertation was found to have problem of plagiarism. The candidate was warned and asked to re-write the dissertation. He re-submitted the dissertation in the next exit assessment and passed with a delay of 6 months.

4. Joint DCH Examination (International)

Because of SARS, there was concern in organizing DCH examination which was cancelled. Dr. Patricia Ip and Dr. Betty Young were representatives of our College in the UK DCH Board.

In the past year, there was increasing work in organizing different examinations for the College. With RCPCH changing the format of the examinations, much liaison was required to work out the joint examinations with input from our College. It is foreseeable in the coming year, much preparation and training will be required for both examiners and candidates to adapt to the new format of the New Clinical Examinations.

Dr. CHIU Man-chun
Chairman, Examination Committee

Standing Committees

House Committee's Report

Chairman	Prof. LOW Chung-kai, Louis
Members	Dr. CHAN Chok-wan
	Dr IP Lai-sheung, Patricia
	Prof. LEUNG Nai-kong
	Prof. LEUNG Ping, Maurice
	Dr TSAO Yen-chow

The College Secretariat is now served by two full-time secretaries, Mrs. Christine Leung, Ms. Connie Lui and also Miss Elaine Leung as a full-time assistant secretary. The conference room in the College chamber will be available for college-related activities and enquiries and booking should be directed to the College Secretariat. Correspondence to the Editor-in-Chief of the Hong Kong Journal of Paediatrics, Professor Yeung Chap Yung should be addressed to Room 808, The Hong Kong Academy of Medicine Jockey Club Building, 99 Wong Chuk Hang Road. The projected annual expenditure of the Secretariat will be about HK\$0.75 million. All enquiries can be directed to the College Secretariat between 9:00 am and 5:00 pm on weekdays and between 9:00 am and 1:00 pm on Saturdays by telephone to 2871 8871 and by facsimile to 2785 1850 or by email to hkcpaed@netvigator.com. The domain name of the College is <http://www.paediatrician.org.hk>. An additional incentive for Fellows to visit the College Chamber is the opening of the Academy's library, gymnasium and Club House on the 3rd Floor of the Hong Kong Academy of Medicine Jockey Club Building in March this year.

Prof. LOW Chung-kai, Louis
Chairman, House Committee

Standing Committees

Information Technology Committee's Report

Chairman	Dr. CHIU Cheung-shing, Daniel
Hon. Secretary	Dr. KO Po-wan
Members	Dr. CHAN Hin-biu, Bill
	Prof. LEUNG Nai-kong
	Dr. TSOI Nai-shun
	Dr. WONG Yat-cheung, Charles
	Dr. YOUNG Wan-yin, Betty

Terms of reference

1. To study, explore, and recommend to the College Council how modern knowledge of information technologies could aid the College and our Fellows
2. To promote the use of information technologies and Internet among fellow members of the College.
3. To facilitate communications among fellow members of the College via electronic telecommunications
4. To coordinate various Committees and Subcommittees of the College as regards to the use of Information technologies
5. To establish, maintain and periodically update the College Web site

Use of IT during SARS period

The impact of SARS on Hong Kong and medical community is unprecedented. The need for rapid dissemination of new information about this disease was tremendous during the period. IT Committee facilitated the followings:

- Use of emails to keep members of the College informed of on the interim management guidelines on Paediatric SARS
- In collaboration with Professional and General Affairs Committee and Private Paediatricians Study Group, over 100 emails were sent out to private paediatricians, keeping them informed of the newest development and up-to-date management protocols.
- Setting up an online bulletin board (<http://www.paedsarshk.org>) as a discussion platform. There are 171 registered members who come from Hong Kong, Singapore,

Canada, USA, UK, Malaysia, Thailand, Japan, Australia, Israel, Costa Rica and China

- Decentralization of College' contact to a web based email system so that electronic communications can continue in the event of closure of workplace.
- Setting up a special section in College website on Paediatric SARS (<http://www.medicine.org.hk/hkcpaed/member/paediatricsars.htm>) where published experiences of College Fellow and Members are collected.

College Web Site (<http://www.paediatrician.org.hk>)

We witnessed a gradual increase of page hits in the College web site. The content in all sections in the web sites are being renewed as needed to provide updated information to members of our College.

Dr. KO Po Wan
Hon. Secretary, Information
Technology Committee

Standing Committees

Membership Committee's Report

Chairman	Dr. CHAN Kwok-hing, Alex
Hon. Secretary	Dr. SO Lok-yee
Members	Dr. CHAN Kwok-chiu
	Dr. KO Wai-keung, Frederick
	Dr. LEE Chi-wai, Anselm
	Dr. LEE Kwok-piu
	Dr. LI Chi-kong
	Prof. LOW Chung-kai, Louis
	Prof. NG Pak-cheung

In the year 2002/03, 34 Associates were admitted to the College. 13 Members were enrolled, all from existing Associates. 15 Members passed the Exit Examination and were elected as Fellows. 2 Fellows and 2 Members were transferred to overseas status. There were 4 Associates who withdrew their membership.

Presently, our Membership are as follows:

Fellows:	423
Members:	60
Associates:	83
Overseas Fellows:	21
Overseas Members:	4
Total membership:	591

Dr. CHAN Kwok-hing, Alex
Chairman, Membership Committee

Standing Committees

Professional and General Affairs Committee's Report

Chairman:	Dr YOUNG Wan-yin, Betty
Hon. Secretary:	Dr WOO Lap-fai, Chris
Members:	Dr CHENG Chun-fai
	Dr CHOW Chun-bong
	Dr FUNG Hing-piu, Robert
	Dr IP Lai-sheung, Patricia
	Dr KO Po-wan
	Dr LAM Cheung-cheung, Barbara
	Prof LEUNG Nai-kong
	Dr LI Chi-him

Scope of Work

1. To address professional issues relating to paediatrics
2. To foster fraternity among paediatricians
3. To establish effective communication channels to members of the College
4. To promote the public image of the College

Clinical Practice Guidelines

Following the success of the Guideline on Febrile Convulsion last year, the clinical guideline on Gastroenteritis had been completed and was distributed to members of the College. The development of the clinical guideline on Acute Bronchiolitis was in progress.

We aim at producing one set of guideline each year. This can give the College and participating medical practitioners ample time to review our practice after implementation of the guidelines.

Paediatric Advanced Life Support (PALS) Course

The PALS course was again jointly organized with the Heart Institute for children, Hope Children's Hospital, Illinois, USA. The Instructor Course was held on 15th September and

the Provider Course I and II on 13th-14th and 16th-17th September respectively at the Hong Kong Academy of Medicine Building. There were 120 doctors, nurses and allied health professionals attending the Provider Course and 15 attended the instructor course. We invited Dr Alfred HuYoung and Dr David Jaimovich to be our overseas faculty members.

Other local faculty members included: Dr Cheung Kam-lau
Dr Hui Yim-wo
Dr Maurice Leung
Dr Miu Ting-yat
Dr Nelson Tsoi
Dr Robert Yuen

Newsletter

The Committee continued to publish the College Newsletter at a 2-monthly interval. With the increasing use of computers among our members, the College Newsletter is now distributed by e-mail.

The Editors were: Dr Patricia Ip
Dr Ko Po-wan
Dr Chris Woo
Dr Betty Young

Dr. YOUNG Wan-yin, Betty
Chairman, Professional &
General Affairs Committee

Standing Committees

Review Committee's Report

Chairman	Dr. TSAO Yen-chow
Hon. Secretary	Dr. IP Lai-sheung, Patricia
Members	Dr. CHAN Chok-wan
	Dr. CHENG Man-yung
	Dr. CHIU Lee-lee, Lily
	Dr. KO Yiu-shum, Paul

The Review Committee did not meet during the year as there was no appeal or complaint received.

Dr. TSAO Yen-chow
Chairman, Review Committee



WALTER MA & COMPANY

Certified Public Accountants

Walter K.W. Ma 馬景華, A.C.A.A.

Telephone: 2523 2789

General Office

313, Central Building, Pedder Street, Hong Kong.

Telephone: 2525 0197 (4 lines)

Facsimile: (852) 2845 0210

REPORT OF THE AUDITORS TO THE SHAREHOLDERS OF HONG KONG COLLEGE OF PAEDIATRICIANS (Incorporated in Hong Kong with limited liability)

We have audited the financial statements on pages 4 to 8 which have been prepared in accordance with accounting principles generally accepted in Hong Kong.

Respective responsibilities of directors and auditors

The Companies Ordinance requires the directors to prepare financial statements which give a true and fair view. In preparing financial statements which give a true and fair view it is fundamental that appropriate accounting policies are selected and applied consistently.

It is our responsibility to form an independent opinion, based on our audit, on those statements and to report our opinion to you.

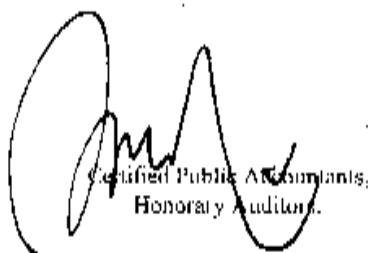
Basis of opinion

We conducted our audit in accordance with Statements of Auditing Standards issued by Hong Kong Society of Accountants. An audit includes examination, on a test basis, of evidence relevant to the amounts and disclosures in the financial statements. It also includes an assessment of the significant estimates and judgments made by the directors in the preparation of the financial statements, and of whether the accounting policies are appropriate to the company's circumstances, consistently applied and adequately disclosed.

We planned and performed our audit so as to obtain all the information and explanations which we considered necessary in order to provide us with sufficient evidence to give reasonable assurance as to whether the financial statements are free from material misstatement. In forming our opinion we also evaluated the overall adequacy of the presentation of information in the financial statements. We believe that our audit provides a reasonable basis for our opinion.

Opinion

In our opinion, the financial statements give a true and fair view, in all material respects, of the state of the College's affairs as at 31st March, 2003 and of its surplus for the year then ended and have been properly prepared in accordance with the Companies Ordinance.



Certified Public Accountants,
Honorary Auditor.

HONG KONG, 15TH SEPTEMBER, 2003.

HONG KONG COLLEGE OF PAEDIATRICIANS**INCOME AND EXPENDITURE ACCOUNT**
FOR THE YEAR ENDED 31ST MARCH, 2003

	<u>Note</u>	<u>2003</u> HK\$	<u>2002</u> HK\$
INCOME			
Subscriptions and Admission Fees Received		689,400.00	825,900
Donations Received		10,000.00	255,005
Administration Fee for Retrospective Accreditation		40,000.00	-
Bank Interest Received		38,249.95	94,210
Sales of College's Button / Tie		1,100.00	-
Surplus on The H. M. Lui Memorial Fund Account	6	9,161.00	3,023,123
Other Sources :-			
Annual General Meeting		15,150.00	22,650
DCH Examination		216,000.00	179,000
Exit Assessment Examination		76,000.00	96,000
PALS Course		410,900.00	392,400
Postgraduate Paediatric Courses		33,000.00	36,120
Certificate and Logbook Charges		4,100.00	4,100
Total Income		<u>1,543,060.95</u>	<u>4,928,508</u>
EXPENDITURE			
Bank Service Charges		900.00	560
College's Office Furniture and Equipment		35,172.45	18,921
Exchange Loss		1,874.64	-
Insurance		13,177.00	6,736
Mandatory Provident Fund Scheme		25,800.00	18,149
Postages, Printing and Stationery		23,458.95	28,227
Rates and Government Rent		4,525.00	7,371
Repairs and Maintenance		109,995.00	80,780
Salaries and Allowances		526,000.00	367,984
Scientific and Education Conference Expenses		20,379.00	40,091
Souvenirs		2,320.00	-
Subscription Fees		103,397.62	-
Sundry Expenses		10,359.60	11,496
Telephone, Internet and Faxline Charges		12,980.00	16,908
Other Expenses :-			
Annual General Meeting		56,183.10	385,908
DCH Examination		76,580.64	72,129
Exit Assessment Examination		13,800.80	4,300
PALS Course		285,488.82	251,425
Postgraduate Paediatric Courses and Update Series Expenditure		9,036.00	14,040
Certificate and Logbook Charges		2,470.00	900
Total Expenditure		<u>1,333,898.62</u>	<u>1,325,925</u>
SURPLUS FOR THE YEAR CARRIED FORWARD		209,162.33	3,602,583

HONG KONG COLLEGE OF PAEDIATRICIANS

INCOME AND EXPENDITURE ACCOUNT
FOR THE YEAR ENDED 31ST MARCH, 2003

	<u>Note</u>	<u>2003</u> HK\$	<u>2002</u> HK\$
SURPLUS FOR THE YEAR BROUGHT FORWARD		<u>209,162.33</u>	<u>3,602,583</u>
SURPLUS FOR THE YEAR			
BEFORE EXTRAORDINARY ITEMS		209,162.33	3,602,583
EXTRAORDINARY ITEMS :			
PROVISION FOR DIMINUTION IN			
VALUE OF LISTED INVESTMENTS		<u>(35,000.00)</u>	<u>(177,743)</u>
SURPLUS FOR THE YEAR			
AFTER EXTRAORDINARY ITEMS		174,162.33	3,424,840
ACCUMULATED FUNDS BROUGHT FORWARD		<u>7,296,173.03</u>	<u>3,871,333</u>
ACCUMULATED FUNDS CARRIED FORWARD		<u><u>7,470,335.36</u></u>	<u><u>7,296,173</u></u>

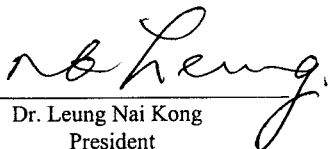
Separate statement of recognised gains and losses has not been prepared as the only component of such statements is the net profit for the year.

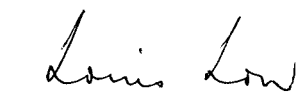
The notes on pages 51 to 52 form an integral part of these financial statements.

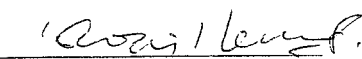
HONG KONG COLLEGE OF PAEDIATRICIANS**BALANCE SHEET AS AT 31ST MARCH, 2003**

	<u>Note</u>	<u>2003</u> HK\$	<u>2002</u> HK\$
EMPLOYMENT OF FUNDS			
<u>CURRENT ASSETS</u>			
Listed Investments	4	512,500.00	547,500
Accounts Receivable		-	31,119
Bank Fixed Deposits		5,463,883.68	3,359,396
Cash at Bank		1,503,188.93	3,355,244
Cash in Hand		8,390.85	8,350
		<u>7,487,963.46</u>	<u>7,301,609</u>
<u>CURRENT LIABILITIES</u>			
Bank Overdrafts		11,640.00	-
Accrued Charges		5,988.10	5,436
		<u>17,628.10</u>	<u>5,436</u>
NET CURRENT ASSETS		<u>7,470,335.36</u>	<u>7,296,173</u>
NET ASSETS		<u>7,470,335.36</u>	<u>7,296,173</u>
FUNDS EMPLOYED			
ACCUMULATED FUNDS	5	<u>7,470,335.36</u>	<u>7,296,173</u>
		<u>7,470,335.36</u>	<u>7,296,173</u>

Approved by the Council on 15th September, 2003.


Dr. Leung Nai Kong
President


Prof. Low Chung Kai, Louis
Honorary Secretary


Dr. Ko Wai Keung, Frederick
Honorary Treasurer

The notes on pages 51 to 52 form an integral part of these financial statements.

HONG KONG COLLEGE OF PAEDIATRICIANS

NOTES TO THE FINANCIAL STATEMENTS **FOR THE YEAR ENDED 31ST MARCH, 2003**

1. COMPANY LIMITED BY GUARANTEE AND NOT HAVING A SHARE CAPITAL

The Company, Hong Kong College of Paediatricians was incorporated under the Hong Kong Companies Ordinance (Chapter 32) as a company limited by guarantee and not having a share capital on 8th May, 1991.

2. SIGNIFICANT ACCOUNTING POLICIES

a) Listed Investments

Listed investments are stated at the lower of cost and market value.

b) Subscription Received

Income is based on the actual receipts on members subscriptions.

c) Donation Received

Donation income is recognised in the financial statements on a cash received basis.

d) Foreign Currency

Foreign currency balances at the year end are translated into Hong Kong dollars at approximately the market rates of exchange ruling at the balance sheet date. Foreign currency transactions during the year are translated into Hong Kong dollars at the rates of exchange ruling at the transaction dates. Differences on foreign currency translation are dealt with in the income and expenditure account.

e) Retirement Benefits Scheme

The Company operates a defined contribution Mandatory Provident Fund Scheme (the "MPF Scheme") under the Mandatory Provident Fund Scheme Ordinance, for all of its employees. The MPF Scheme has operated since 1st December, 2000. Contributions are made based on a percentage of the employees' basic salaries and are charged to the profit and loss account as they become payable in accordance with the rules of the MPF Scheme. The assets of the MPF Scheme are held separately from those of the Company in an independently administered fund. The Company's employer contributions vest fully with the employees when contributed into the MPF Scheme.

3. TAXATION

The College is exempt from taxation under the provisions of Section 88 of the Inland Revenue Ordinance.

4. LISTED INVESTMENTS

Listed Investments are listed in Hong Kong and are stated at the lower of cost or market value. The market value of these investments as at 21st July, 2003 was HK\$512,500.00.

HONG KONG COLLEGE OF PAEDIATRICIANS

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31ST MARCH, 2003

5. ACCUMULATED FUNDS

	<u>2003</u> HK\$	<u>2002</u> HK\$
Accumulated Funds		
Hong Kong College of Paediatricians	4,650,794.06	4,450,793
HKCPaed - The H. M. Lui Memorial Fund	<u>2,819,541.30</u>	<u>2,845,380</u>
	<u>7,470,335.36</u>	<u>7,296,173</u>

6. SURPLUS ON THE H. M. LUI MEMORIAL FUND ACCOUNT

	<u>2003</u> HK\$	<u>2002</u> HK\$
<u>INCOME</u>		
Donations Received	-	3,000,000
Bank Interest Received	6,037.76	18,353
Dividend from Listed Investments	<u>17,209.00</u>	<u>5,070</u>
Total Income	<u>23,246.76</u>	<u>3,023,423</u>
<u>EXPENDITURE</u>		
Bank Service Charges	300.00	300
Exchange Loss	1,345.76	-
H. M. Lui Fellowship Award for 2002	<u>12,440.00</u>	<u>-</u>
Total Expenditure	<u>14,085.76</u>	<u>300</u>
SURPLUS FOR THE YEAR BEFORE EXTRAORDINARY ITEMS	9,161.00	3,023,123
EXTRAORDINARY ITEMS : PROVISION FOR DIMINUTION IN VALUE OF LISTED INVESTMENTS	<u>(35,000.00)</u>	<u>(177,743)</u>
SURPLUS FOR THE YEAR AFTER EXTRAORDINARY ITEMS	(25,839.00)	2,845,380
ACCUMULATED FUNDS BROUGHT FORWARD	<u>2,845,380.30</u>	<u>-</u>
ACCUMULATED FUNDS CARRIED FORWARD	<u>2,819,541.30</u>	<u>2,845,380</u>

7. LIMITATION BY GUARANTEE

Under the provisions of the College's memorandum of Association, every member shall, in the event of the College being wound up, contribute such amount as may be required to meet the liabilities of the College but not exceeding HK\$100.00 each.

8. COMPARATIVE FIGURES

Certain comparative figures have been reclassified, where applicable, to conform with the current year's presentation.

NEW FELLOWS, MEMBERS AND ASSOCIATES

The following doctors were elected as
Fellows of the Hong Kong College of Paediatricians
in 2002/2003

<i>DR CHAN CHUN WING</i>	陳振榮醫生
<i>DR CHAN LIK MAN</i>	陳力文醫生
<i>DR CHENG YAN WAH</i>	鄭恩華醫生
<i>DR CHOW PAK CHEONG</i>	周百昌醫生
<i>DR CHOW POK YU, MICHAEL</i>	周博裕醫生
<i>DR HON KAM LUN, ELLIS</i>	韓錦倫醫生
<i>DR HUI NING TAT, HAMILTON</i>	許寧達醫生
<i>DR PATRICK IP</i>	葉柏強醫生
<i>DR KWONG KAR SHUN, WILSON</i>	鄺家信醫生
<i>DR MAK PUI YEE, PAULINE</i>	麥佩儀醫生
<i>DR TONG PAK CHIU</i>	湯伯朝醫生
<i>DR HELENE WAN</i>	溫希蓮醫生
<i>DR WONG KWOK WAN</i>	黃國雲醫生
<i>DR WONG SIU CHUN, MABEL</i>	黃小珍醫生
<i>DR WU CHUN BUN, BENNY</i>	胡振斌醫生

**The following doctors were admitted as
Members of the Hong Kong College of Paediatricians
in 2002/2003**

<i>DR AU YEUNG WAI YAN</i>	歐陽慧恩醫生	<i>DR KU WAI HUNG</i>	古慧雄醫生
<i>DR CHAN SHU YAN</i>	陳樹仁醫生	<i>DR LAM WAI FAN</i>	林蕙芬醫生
<i>DR CHANG KIT</i>	張傑醫生	<i>DR MO KIT WAH</i>	毛傑華醫生
<i>DR CHENG WAI TSOI</i>	鄭偉才醫生	<i>DR TAM KA MAN, CARMEN</i>	譚家敏醫生
<i>DR CHOW CHUNG MO</i>	周中武醫生	<i>DR TING YUK, JOSEPH</i>	丁旭醫生
<i>DR CHUNG HON YIN, BRIAN</i>	鍾侃言醫生	<i>DR WONG WAI CHUN</i>	黃偉進醫生
<i>DR HO CHI HANG, ASSUNTA</i>	何志恆醫生		

**The following doctors were admitted as
Associates of the Hong Kong College of Paediatricians
in 2002/2003**

<i>DR CHAN, RICHARD OSCAR</i>	陳淦淦醫生	<i>DR LEE PO YEE, LILLIAN</i>	李寶儀醫生
<i>DR CHAN BOSCO</i>	陳欣永醫生	<i>DR LEE PUI WAH, PAMELA</i>	李珮華醫生
<i>DR CHAN CHI MAN</i>	陳智文醫生	<i>DR LEE WING CHEONG</i>	李永昌醫生
<i>DR CHEN HAY SON, ROBIN</i>	陳義舜醫生	<i>DR LEUNG WING KWN</i>	梁永堃醫生
<i>DR CHENG LING LING</i>	鄭玲玲醫生	<i>DR LIE KIN FUNG</i>	李堅峯醫生
<i>DR CHIK KAR KI</i>	戚嘉琪醫生	<i>DR LO PUI WAN, HENNY</i>	盧佩雲醫生
<i>DR CHONG SHUK CHING</i>	莊淑貞醫生	<i>DR LUK HO MING</i>	陸浩明醫生
<i>DR CHOW CHIN PANG</i>	周展鵬醫生	<i>DR SOO MAN TING</i>	蘇文庭醫生
<i>DR CHUA SHUI CHING, ROWENA</i>	蔡瑞晶醫生	<i>DR TAN HO YIN, TIMOTHY</i>	陳浩然醫生
<i>DR CHUNG WAY LUEH</i>	鍾緯略醫生	<i>DR TING YAN WING, DANIEL</i>	丁恩榮醫生
<i>DR FU CHUN HO, ERIC</i>	傅俊豪醫生	<i>DR TSUNG LI YAN, LILLIAN</i>	曾莉茵醫生
<i>DR KO LEE YUEN</i>	高利源醫生	<i>DR WONG CHIN PANG</i>	黃展鵬醫生
<i>DR KOH, CARLINE</i>	許上晃醫生	<i>DR WONG MAN YEE, SHIRLEY</i>	黃敏儀醫生
<i>DR KOO SERGIO DON</i>	古修齊醫生	<i>DR YANG YEE KWAN</i>	楊懿君醫生
<i>DR KU TAK LOI</i>	古德來醫生	<i>DR YAU MAN MUT</i>	邱文謐醫生
<i>DR LAM HOI YAN</i>	林凱欣醫生	<i>DR YIP MUNG SZE, CYNTHIA</i>	葉夢詩醫生
<i>DR LEE PAK HO</i>	李柏豪醫生		



Prof. NK Leung, the President, presenting the first HM Lui Fellowship award for Year 2002-2003 to Dr Wang Jianshe.



Medical Mission to Cambodia organized by Hong Kong College of Paediatricians Foundation.