***** The Council 2007/2008 *****

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Message from the President

2008 has been an eventful year with events happening in Hong Kong, in the region and around the world, which could have an impact on child health. As Chinese, we are all proud of the successful hosting of the Beijing Olympics and the immense achievements of the Chinese athletes in the event but this moment of glory has been tainted by the milk product scandal that came to light in September this year. All of a sudden, there are long queues of children and their parents outside hospital clinics in Hong Kong seeking assurance that their children's health has not been affected by the consumption of Melamine contaminated milk products. Fortunately, the extent of the problem in Hong Kong has been much less as compared to the patient load faced by our Mainland paediatric colleagues. So far, only very few children exposed to tainted milk products in Hong Kong have been found to have renal stones but there may well be longer term health risks as a result of consumption of food contaminated with Melamine that we are unaware of.

In response to the crisis, I, as the Chief Editor of the Hong Kong Journal of Paediatrics commissioned an editorial on Melamine tainted milk products published in the October 2008 issue of the Journal. The editorial was written by Dr. S. N. Wong and Dr. M. C. Chiu together with inputs from various editorial board members. The editorial was released early to Fellows, Members and Associates of the College electronically so as to keep them up-to-date on the topic and the proposed management of children who have consumed Melamine tainted milk. There has been criticism that our College has not proposed any suggestions to prevent such tragedies from ever recurring again and concrete proposals to safeguard our children in Hong Kong from exposure to environmental toxicants. The problem with product safety has arisen from the lack of social responsibility, greed, lack of governmental and institutional regulation as well as governmental price interference in certain food products. There is unlikely that much can be done by our College to influence policies in China but our Professional and General Affairs Committee can continue to lobby the Centre of Food Safety to be more vigilant in their regulation of the quality and safety of food products imported into Hong Kong. Food safety is only one of the many issues that our College needs to address in our fight to improve the "toxic" environment that our children have been exposed to.

The CME/CPD cycle beginning January 2008 requires a Fellow of the Academy to acquire 15 active CME/CPD points. Despite several consultative meetings organized by the Academy and our College, there are still concerns among Fellows in practice. Fellows in practice are encouraged to join study groups and be involved in presentations. Fellows are also encouraged to participate as discussants in College organized Update Series and lecturers to Academy organized CME/CPD activities for non-specialists. Active CME/CPD

points can also be acquired by completing the CME/CPD questions found in each issue of the Hong Kong Journal of Paediatrics. The Education Committee will organize further update sessions on clinical audit, quality assurance programme and practice guidelines development in the coming year.

I have been appointed by Council to represent College in the Steering Committee of the Centre of Excellence in Paediatrics. As education, training and accreditation of training programmes and institutions are important objectives of our College, my role in the Steering Committee would be to ensure the development of world-class clinical service to support subspecialty training. As subspecialty development in Hong Kong is still rudimentary, it is imperative that we identify young Fellows with potential and to provide them with subspecialty training exposure both locally and overseas. Success of such an endeavour depends on funding, dedication of the young Fellows and provision of a nurturing environment for training in subspecialty clinical competence, knowledge, attitude and research. Information on the progress of the paediatric subspecialty accreditation is available in the Accreditation Committee report.

The Academy of Medicine has been working closely with the Chinese Ministry of Health to provide information and advice on the development and accreditation of specialty training programmes in China. I represented our College in the "kick-off" ceremony of the pilot scheme of specialty accreditation initiated by the Ministry of Health held on 18th April, 2008 in Beijing. There is further collaboration of our College with colleagues and institutions in China this year. The 7th Guangdong Hong Kong Paediatric Exchange Meeting was expanded to include participants from Shanghai and Chongqing to inaugurate the First Hong Kong, Guangdong, Shanghai and Chongqing Paediatric Exchange Meeting. There were 18 oral and 88 poster presentations. The Hong Kong College of Paediatricians Foundation continue to run the annual Neonatal Resuscitation Programme in Kunming, in collaboration with the Department of Maternal and Child Health of Kunming Ministry of Health in May this year. The devastation of the Sichuan earthquake in May shocked us all. Generous donations by Fellows, Members and Associates of the College to a sum of more than HK\$360,000 were made to an earthquake relief account of the College Foundation. Dr. Vincent Leung will be co-ordinating the collaboration with the Hong Kong Polytechnic University to provide psychological counselling and training to counsellors in Sichuan.

The Academy celebrated its 15th Anniversary with the hosting of a Scientific Programme. Our College had invited colleagues from different parts of China to participate in the meeting and join us in our celebrations. The milestones of our College have been published in the Academy's 15th Anniversary Commemorative Publication.

Finally, I would like to thank all the Council Members, Fellows, Members and Associates for their support and guidance over the past twelve months.

Council's Report

The 16th Annual General Meeting of the College was held on 1st December, 2007. Dr. Chan Chok-wan, Prof. Cheung Pik-to and Dr. Li Chi-kong were elected by postal ballot as Council Members for the years 2007-2010. Mr. Chan Chi Hung and Mr. Walter Ma were appointed as Honorary Legal Advisor and Honorary Auditor of the College respectively. It was resolved that membership subscriptions of all categories in 2008 would remain unchanged as in 2007.

During the past year, the following colleagues were co-opted as Council Members: Dr. Chow Chun-bong (as elected Council Member of the Hong Kong Academy of Medicine), Dr. Leung Tze-ching (as Chairman of Hong Kong College of Paediatricians Foundation) and Dr. Tam Ka-man, Carmen and Dr. Wu Chun-bun, Benny (as co-opted Fellows). The Chairpersons of standing committees remained unchanged as in 2007.

During the year 2007/2008, six Council Meetings were held in which all Standing Committees (Accreditation, Education, Examination, House, Membership, Professional & General Affairs and Review Committees) as well as the Hong Kong College of Paediatricians Foundation made their reports to the Council.

Training in Paediatrics and the Accreditation of Training

In accordance with College Guidelines, the Accreditation Committee had completed the 5-yearly re-accreditation visits to all eleven Paediatric Training Institutes in September 2007 and made recommendations to the Council to accredit the institutes for the next five years. Certain concerns were raised including the balance between General Paediatrics and subspecialty training, the non-availability of PICU and Neonatology in some units, the trend of reduced inpatients and need for accrediting Extended Hospital Activities. These will be further discussed in future.

The Accreditation Committee and Education Committee together with Family Health Services (FHS) and Child Assessment Service (CAS) had agreed on an improved curriculum of the mandatory MCH training. From January 2009, basic trainees would rotate to 3-month training in FHS and 3-month training in CAS.

The Accreditation Committee had also assessed and accredited a Hospital-based Paediatric Rehabilitation Programme in Caritas Medical Centre for no more than 3 months in Basic Training and/or no more than 3 months in Higher Training. The Duchess of Kent Child Assessment Centre was also accredited as a training centre for 3-months of Developmental Paediatrics for fulfilling the 6-months mandatory MCHC/CAS module.

As at September 2008, the College had accredited 221 trainers and enrolled 71 Basic and 59 Higher Trainees.

The progress of subspecialty development was re-kindled with the planning of Centre of Excellence in Paediatrics by the Government. The Task Force on Higher Training of Paediatric Subspecialties held the Third Open Forum on 16th July, 2008 to update Fellows of the progress. The Task Force had laid down the groundwork as shown in its Final Report, and at its 116th meeting, Council had decided to dissolve the Task Force and form a Working Group on Accreditation of Paediatric Subspecialties in Hong Kong, with enhanced membership representatives to further implement the establishment of subspecialties.

Education and Professional Activities

The following educational activities were organized by the College in the past year. All were well attended by the intended audience.

- 7th Guangdong-Hong Kong Paediatric Exchange Meeting & 1st Guangdong-Hong Kong-Shanghai-Chongqing Paediatric Exchange Meeting was held on 28th June, 2008 at HKAM Building. There were 18 oral presentations and 88 posters. It was well attended by 115 colleagues.
- 2. A lecture on "The Loss of Human Potential in Early Years" by Dr Patrice Engle, Professor, Department of Psychology and Child Development, California Polytechnic State University, San Luis Obispo, California, USA was held on 22nd May, 2008 at QEH, jointly organized by our College and UNICEF.
- 3. Paediatric Advanced Life Support (PALS) Course jointly organized by PGA Committee with the Heart Institute for Children, Hope Children's Hospital, Illinois, USA, and Hong Kong Paediatric Nurses Association from 30th October to 3rd November, 2008 at Tang Shiu Kin Hospital. Two provider courses, and one renewal course were held.
- 4. Two sessions of Paediatric Updates, in the form of "Grand Rounds and Case Discussions" were held on 18th May, 2008 and 21st September, 2008.
- 5. "Update Series on Child Health 2008" (jointly organized with the Hong Kong Paediatric Society): 4 sessions with 2 lectures each were held on 12th July, 23rd August, 13th September and 11th October, 2008.
- 6. Postgraduate Training Course for Trainees sitting the MRCPCH Clinical/ Intermediate Examination from June 2008 to February 2009. In response to suggestions from trainees, the format was amended so that no didactic lectures would be given but all sessions were run as bedside teaching, communication and history taking skills practice.
- 7. The second training workshop on Child Protection, run by Dr. Patricia Ip and MCCA colleagues on behalf of the College, will be held on 13th December, 2008.

The Hong Kong College of Paediatricians Prize in Clinical Paediatrics for the year 2008 was awarded to Mr. Wong On Yat of the Chinese University of Hong Kong and Mr. Leung Siu Ting of the University of Hong Kong.

Starting from the new CME cycle 2008-1010, passive CME points would be capped at 75 per cycle, and Fellows needed to get at least 15 active CME points. The College had announced the new requirement in newsletters and provided ample opportunities for active CME in the form of Cat D (self learning) activities by doing MCQs of the Hong Kong Journal of Paediatrics and doing CME activities in certain international paediatric websites. For the last Cycle 2005-2007, only 9 Fellows (2%) acquired less than 90 points and needed to do the Remedial Programme.

Examinations

A new Memorandum of Understanding between the RCPCH and HKCPaed for MRCPCH and DCH examination were signed on 1st November, 2007. The new format of Joint Intermediate / MRCPCH Examination had been running smoothly for the past 3 years. The Committee had observed no change in passing rates of local candidates after the increase of pass mark for Clinical Examination from 98 to 100 in February 2007.

As before, the College had organized 3 Part I Examinations, 3 Part II (Written) Examinations and 2 Clinical Examinations in year 2008. The passing rates were as listed in the Examination Committee report.

For the Exit Assessment in December 2007 and June 2008, the passing rates were 100% and 92% respectively (compared to 75% and 100% in last year). The Committee had discussed to standardize the questions and required standards of this Assessment.

The passing rates of the 3 DCH Written Examinations in 2008 were 33%, 33%, 43% (as compared to 67%, 100%, 40% for last year). The DCH clinical examination had changed to OSCE format from 2007.

Two training sessions on Communication Station and Development Station would be organized on 10th and 14th November, 2008 for trainers and trainees respectively.

Community participation in issues of Child Health Interests

On the recommendation of the PGA Committee, the College made written responses to the government on issues related to children's health and welfare:

- 1. The CE's 07/08 Policy Address.
- 2. Pilot Child Fatality Review.
- 3. Consultation Document "Your Health, Your Life: Healthcare Reform".

- 4. Consultation Paper on Interim Proposals on a Sex Offender Register.
- 5. Child Development Fund.
- 6. Comprehensive Child Development Service.
- 7. Family Council.
- 8. Batterer Intervention Programme.

These documents could be viewed on the College website under PGA Committee Announcement.

Collaboration with Ministry of Health (MOH) on Specialist Registration in Mainland China

Our College was one of the four pilot specialties selected by MOH to start the pilot programme of specialist training and registration in Mainland China. Our President represented our College to attend a "kick-off" ceremony of the pilot scheme in Beijing on 18th April, 2008. The Academy President, Vice-president (Education & Exams), Academy's advisors on the Working Group, representatives from the other pilot Colleges of Dental Surgeons, Ophthalmologists, and Orthopaedic Surgeons attended the ceremony.

Donations to victims in Sichuan Earthquake

The College in conjunction with Hong Kong College of Paediatricians Foundation had appealed to members for donations to form a China Earthquake Relief Fund. A total of \$365,500 from 29 donations was received. Projects were being planned to provide counseling service to children living in the temporary resettlement sites in the affected areas.

Membership

By the end of November 2008, our College had 488 Fellows, 26 Overseas Fellows, 57 Members, 2 Overseas Members and 71 Associates. There was a net increase of 15 Fellows and 7 trainees locally.

Acknowledgement

The Council wished to thank the chairpersons of all Standing Committees, the Task Force for Higher Training of Paediatric Subspecialties, and the Hong Kong College of Paediatricians Foundation for their dedicated leadership; our secretariat team, Ms. Christine Li, Connie Lui, Karen Yu (who resigned in August 2008) and our new secretary Vanessa Wong and Assistant Secretary Shirley Lo, for their efficient service; all the Chiefs-of-Service of training institutions for their support of postgraduate paediatric training programme; all the examiners for their support in the Intermediate Examination/MRCPCH, Exit Assessment and DCH Examinations; and all invited speakers of College-held educational programmes.

Hon. Treasurer's Report

Total Income for the Year 2007/2008 showed an increase of HK\$932,226 or a 31.6% increase as compared to last year (HK\$3,877,608 vs HK\$2,945,382 of last year). This was mainly due to a donation of HK\$1,000,000 to our H.M. Lui Memorial Fund Account in June, 2007. The Subscriptions and Admission Fees received up to 31/3/2008 were less than that of last year same period; hence, the drop in figure (HK\$781,920 vs HK\$1,172,730 of last year) as of 31/3/2008. However, all subscriptions were finally fully received by the end of August, 2008.

Total Expenditures for Year 2007/2008 showed a slight decrease of HK\$250,651 or approximately 10% decrease as compared to last year (HK\$2,305,663 vs HK\$2,556,314 of last year) mainly because there was no deficit on the H.M. Lui Memorial Fund Account as compared to HK\$258,243 of last year.

Operating Surplus for the Year 2007/2008 was HK\$1,571,945 as compared to HK\$389,068 of last year, which revealed an increase of HK\$1,182,877 or 4 times growth compared to last year.

Taking this opportunity, Hong Kong College of Paediatricians would like to drop a note of thanks to Providence Foundation Limited. for further donating HK\$1,000,000 to the H.M. Lui Memorial Fund of our College for operating use. Also, I would like to extend my sincere thanks to Walter Ma & Company for auditing our financial report again this year.

Dr. KO Wai-keung, Frederick Honorary Treasurer

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 Dr. LI Chi-kong (from 19 Feb 2008)

Prof. NG Pak-cheung Dr. TSAO Yen-chow Dr. WONG Sik-nin

Prof. LOW Chung-kai, Louis (ex-officio)

1. Meetings

Four meetings were held between October 2007 and September 2008 (93rd to 96th meetings dated 17/12/2007, 19/2/2008, 6/5/2008 and 12/8/2008).

2. Accreditation of Institutions

2.1 Accreditation of Institutions for Training in General Paediatrics (2007-2008)

The accreditation of the 11 training units under the Hospital Authority will be expired on 31 December 2008. Re-accreditation visits to all these units were completed in September 2007. The visiting teams had focused on the following important aspects during these visits:

- interim retrospective assessment of the training units
- PICU, Neonatology and Adolescent Medicine services
- Subspecialty training and exposure (within General Paediatrics)
- Extended Hospital Activities accreditable for College training in Paediatrics
- 6-month obligatory rotation to Family Health Service

The Committee made the following evaluations and recommendations to the Council:

- 1) The data and relevant information supplied by the institutions have all been carefully studied and vetted to be complete and accurate.
- 2) Members of the accreditation teams worked diligently and meticulously and followed through all recommended procedures for this accreditation exercise.
- 3) All the training centres were assessed to have fulfilled the accreditation criteria of the College for training in paediatrics.
- 4) There was definitely a decrease in General Paediatric patients.
- 5) Subspecialty training within General Paediatrics were well practiced and properly documented.
- 6) PICU subspecialty: Well set-up and fulfilled College's criteria for accreditation.
- 7) Additional neonatology teams in some training units: All fulfilled the College's requirements in terms of the number of neonates and setup.
- 8) There was obviously an increase in outreach service for paediatric patients in the community which reflected a genuine need for accreditation of extended hospital activities for training in paediatrics.
- 9) During the visit, the first paediatric rehabilitation training module in CMC was accredited on trial basis for 12 months. The accredited module would be for a duration of 3 months for basic programme and a cumulative duration of 6 months for combined basic and higher programme.
 - <u>Note:</u> The wordings of the accredited duration were subsequently revised and endorsed at the 114th Council meeting on 15 May 2008 as follows:
 - "The rehabilitation training programme in CMC is accredited as a module of Developmental Paediatrics for the purpose of General Paediatric Training. Trainees may opt to do no more than 3 months in Basic Training and/or no more than 3 months in Higher Training."
- 10) Subspecialty training within General Paediatrics should be under close supervision to ensure trainees have enough exposure to training in General Paediatrics during their basic training period.
- 11) Attempts to collect the data for "Extended Hospital Activities" revealed that the results were not quite satisfactory. Submissions from training centres were not consistent enough to draw a definite conclusion.

These recommendations were endorsed by the Council (at the 113th Council meeting on 17 March 2008).

Feedbacks from trainees during the visits had been referred to all COSs and training supervisors for further improvement.

2.2 Accreditation of a Hospital-based Paediatric Rehabilitation Programme in CMC

The Council (at the 114th Council meeting on 15 May 2008) had resolved to accredit the CMC Paediatric Rehabilitation Programme as a module of Developmental

Paediatrics for the purpose of General Paediatric Training. Trainees may opt to do no more than 3 months in Basic Training and/or no more than 3 months in Higher Training. This will be effective from 15 May 2008 (date of Council meeting). The programme will be subject to review after a 12-month period.

2.3 Accreditation as a Training Centre for Developmental Paediatrics - DKCAC

The Council (at the 114th Council meeting on 15 May 2008) approved DKCAC's application for accreditation as a training centre for Developmental Paediatrics for the purpose of fulfilling the obligatory 6-month MCHC/CAS module in Basic training. DKCAC would be accredited to provide 3 months of training in Developmental Paediatrics, on the condition of the following pre-requisites and subject to review in 12 months:

- As a community-based DP training unit, there should be a full range of developmental problems and disorders. DKCAC's current patient profile skews towards several preschool conditions, while other preschool conditions, as well as school age conditions particularly as pertaining to learning issues, appear to be under-represented. Adequacy of different case types for exposure to basic trainees has to be demonstrated.
- 2) Provision of specifically designed, systematic didactic training on DP at basic level should be available. Demonstration of such teaching contents, with timetables, is expected. Provision of reading lists will be inadequate for this exposure.
- 3) Stable trainers should be stationed at DKCAC. Part-time presence of different trainers should not be accepted in lieu of the designated trainer. Sessions for basic trainees to sit in with other higher paediatric trainees posted at DKCAC should not be counted as trainer input. Trainer: basic trainees ratio should be 1: 2.
- 4) Emphasis should be on training in community-based clinics so that basic trainees have knowledge and exposure on screening, initial intake and triage, simple assessment and rehabilitation concepts and resources. Learning to use assessment tools should not be the main objective of this training.
- 5) As this is a special module specifically set aside from other training in basic general paediatrics training, exposure to general paediatrics activities, such as Department of Paediatrics grand rounds and scientific meetings, or exposure to child neurology or tertiary rehabilitation management and research, should not be included as part of this rotation.
- 6) As this 3-month rotation training is part of the 6-month mandatory training, alignment with FHS for satisfactory coverage of the subject of community paediatrics is essential.
- 7) Alignment with DH and CAS programmes on these 3 months should be made, such that all trainees can receive similar contents and standards of training.

3. Accreditation of Training Curriculum

3.1 Revised Community Paediatrician Training Programme in MCHC and CAS

As agreed with both FHS and CAS of DH, a revised training curriculum for the 6-month rotation to MCHC and CAS will be postponed to start from January 2009 due to shortage of medical manpower in DH. From January 2009 onward, a basic trainee will undergo 3 months training in MCH of FHS followed by 3 months training in CAS. The maximum number of trainees that FHS and CAS could accommodate is 12 per 6-month rotation.

3.2 Subspecialty Training within General Paediatrics – Accreditation Guidelines 7.4(a)(iii)

Council at the 114th Council meeting on 15 May 2008 resolved to make changes to section 7.4a(iii) of the Accreditation Guidelines (concerning recognition of subspecialty team rotation for the purpose of General Paediatric Training).

The original section read as follows:

"7.4a(iii) In hospitals with established subspecialty teams, an accredited standardized rotation of trainees through different subspecialties for 18 months and for 6 months in neonatology will also be accepted as core programme of the basic training programme. Subspecialty rotations during the 2-year core programme should preferably be not more than 3 months but definitely not more than 6 months for each subspecialty rotation. Trainees should not rotate through these subspecialties again in the 1-year flexible programme (the exception being neonatology and a trainee is allowed to have a further 6-month training during the flexible programme)."

Pending approval from the Academy Education Committee, the following will be added to the subsection after the original paragraph:

"For trainees who commenced his/her basic training on or after 1.7.2008:

- 1) It is always the basic requirement of the College to ensure that trainees have enough exposure to training in General Paediatrics. During their Basic Training period, the minimum period of training in General Paediatrics should ideally be 12 months and definitely not less than 9 months.
- 2) In special situations in hospitals with established subspecialty teams, an accredited standardised rotation of trainees through different subspecialties will also be accepted as part of the core programme of the Basic Training Programme after satisfying the mandatory requirement of General Paediatrics (at least 9 months) and of Neonatology (6 months). Under such circumstances, the following requirements for subspecialty training within General Paediatrics should be strictly adhered to:

- a) Subspecialty rotations during the 2 years core programme in Basic Training should preferably be not more than 3 months but definitely not more than 6 months for each subspecialty rotation. Trainees should not rotate through these subspecialties again in the 6-months flexible programme (the exception being neonatology whereby a trainee is allowed to have a further 6 month training during the flexible programme).
- b) In hospitals with established subspecialties, where subspecialty rotations are part of the General Paediatric training in Basic Training Programme, a template of subspecialty rotations that covers a minimum of 4 subspecialties or all the subspecialties in the unit (if less than 4) during the 2-year core programme should be provided.
- c) The cumulative period of rotation to the same subspecialty throughout the 6 years Basic and Higher Training should be not more than 15 months (for ONE subspecialty of the Trainee's choice) and not more than 12 months (for all other subspecialties except Neonatology where the total period should not be more than 24 months over 6 years).
- d) The above requirements stated in section 7.4(a) (iii) should be interpreted en-bloc."

3.3 Extended Hospital Activities Accreditable for College Training in Paediatrics (EHAs)

The Committee was in the process of drafting the accreditation criteria of EHAs. Discussion was concentrated on 5 main categories of activities:

- (1) OPD service
- (2) day patient service
- (3) home based treatment
- (4) outreach service
- (5) community partner programme / Education programme.

The Committee agreed to adopt the following qualitative principles to evaluate submitted EHA programmes:

- (1) structural
- (2) formal
- (3) relevant to Paediatric training
- (4) sustainable
- (5) supplementary to hospital-based training programme

4. Accreditation of Trainers

4.1 Qualifications of Accredited Trainers

Council resolved at the 89th Council meeting on 16 March 2004 that:

1) a Trainer for Basic Training Programme should be a College Fellow; and

2) a Trainer for Higher Training Programme should have a minimum of 3 years post-Fellowship experience in an accredited training centre.

The new rule was implemented immediately after that Council meeting. All existing accredited Trainers would qualify to be trainers in both Basic and Higher Training Programmes. All new applicants on and after that Council meeting (16 March 2004) will be accredited first as Trainers in Basic Paediatric Training Programme if they have less than 3 years of post-Fellowship experience. Trainers status would be updated upon application when they fulfilled 3 years of post-Fellowship experience.

4.2 Re-accreditation of Trainers

Trainers for the Basic Training Programme and the Higher Training Programme are accredited for a period of two years. Applications for accreditation or re-accreditation must be submitted with updated curriculum vitae of each of the trainers.

5. Accreditation of Trainees

5.1 Sub-committee for Accreditation of Individual Training

The Sub-committee led by Dr Ho Che Shun, Jackson is responsible for assessing, accrediting and advising individual trainees in their training programmes, and to present the vetted programmes to the Committee for consideration and approval.

5.2 MCH Training under the Higher Training Programme in General Paediatrics

At present, MCH rotation is a mandatory training module in Basic Training. The Committee opined that MCH training should be considered as part of the basic training in General Paediatrics and not to be regarded as optional training in child health related specialties under the Higher Training Programme. The Committee is considering to delete "maternity child health clinics" under the "optional training of not more than 12 months in child health related specialties in Higher Training" in the Accreditation Guidelines.

5.3 Obligatory 6-month rotation to other local/overseas training institutions during Higher Training

The guidelines on Higher Training issued on 22 January 2002 stipulated that "trainees may opt to undergo training for not more than 12 months in child health related specialties (e.g. child psychiatry, maternity child health clinics, school health service, etc.) of which not more than 6 months should be spent in any single specialty and inclusive of 6 months obligatory rotation to local and overseas training centres should such a rotation is through the same child health related specialty." It was reiterated that the 6-month obligatory rotation could be hospital-based (with on-call

duties in the same unit) or non-hospital-based. The trainee's daytime duty should define the nature of his subspecialty training in the rotation.

5.4 Definition of the effective date of completion of Higher Training

Council (at the 114th Council meeting on 15 May 2008) endorsed that the last day of completion of the 3-year Higher Training Programme should be regarded as the effective completion date of Higher Training. A higher trainee with fulfillment of 3-year higher training and waiting for the Exit Assessment would be regarded as a service medical officer and not to be counted as a trainee irrespective of whether he/ she was in a training post or not.

6. Retrospective Accreditation of Fellowship Training (Overseas)

The Committee is responsible for re-accreditation and vetting of applications for Certification for Specialist Registration (CSR) and has completed the entire vetting process of one such application in year 2007-08. These applications are made by overseas doctors who seek registration in the Specialist Register of the Medical Council of Hong Kong (MCHK) without being admitted as Fellows of the Hong Kong Academy of Medicine and its constituent colleges. Council at the 111th Council meeting resolved that the College would conduct an Exit Interview for these applicants in place of the formal Exit Assessment. This will be conducted after the Accreditation Committee has vetted that their previous training and qualifications are comparable to our Basic and Higher training programmes and our Intermediate Examination. College would charge a handling fee of HK\$15,000 for applications of CSR (rationale: same as fee for retrospective accreditation of training plus Exit Assessment fee).

7. Updated "Guidelines on Accreditation of Training"

The updated Guidelines on Accreditation of Training had been incorporated into the latest version of "Guidelines on Postgraduate Training and Accreditation (revised March 2007)" of the Education Committee.

8. College Trainer and Trainee Statistics

As of September 2008, the College has in total accredited 221 trainers in Paediatrics and enrolled 71 Basic and 59 Higher trainees (an overall trainer: trainee ratio of 1.7 to 1).

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 have successfully revisited all the College training units (2 under the Department of Health and 11 under the Hospital Authority) and have them fully accredited by the Academy Education Committee for five years. We have also prepared a report to the College Council on views feedback from the trainees during these visits with recommendations for improvement of training conditions for our College trainees. The Report and Recommendations were subsequently circulated to all Chiefs-of-Service and Training Supervisors for their information and relevant adjustments if appropriate.

After many years of discussion, we have finally agreed to delete the term Ambulatory Paediatrics (which is just a job description) and use the new terminology "Extended Hospital Activities Accredit able for College Training in Paediatrics". The criteria have been finalized and we are now at the stage of qualifying and quantifying these as equivalents for patient-days to be considered for accreditation at the hospital training units.

We have also been actively involved in the work for the Task Force for Accreditation of Higher Training in Paediatric Subspecialties (2000 till 2008) and now continue to contribute our expertise and experience for the Working Group on Accreditation of Paediatric Subspecialties set up by the College Council in July 2008 for implementation of these Subspecialties in Hong Kong.

Work ahead is formidable and challenging 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 and College Honorary Secretary 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: Dr. CHAN Chok-wan

Hon. Secretary: Dr. YAM Ka-ling, Winnie (4 May 2000 – 28 January 2002)

Prof. LAU Yu-lung (29 January 2002 – 23 June 2004)

Dr. WONG Sik-nin (from 23 June 2004)

Members: Dr. CHAN Kwok-hing, Alex

Dr. CHIU Man-chun Dr. CHOW Chun-bong Prof. FOK Tai-fai Prof. LAU Yu-lung

Dr. LEUNG Ping, Maurice Dr. LEUNG Sze-lee, Shirley

Prof. SUNG, Rita Dr. TSAO Yen-chow

Dr. CHENG Man-yung (from 13 May 2008) Prof. LOW Chung-kai, Louis (ex-officio)

Preamble

The Hong Kong College of Paediatricians has a statutory responsibility to ensure the standard and quality of paediatric practice through a reliable system of training, accreditation, and continuous professional development. Since its establishment in 1991, the College has developed its Training Program in General Paediatrics which has been running effectively. The question of subspecialty training and accreditation which is necessary to develop tertiary and quaternary services, has been raised more than a decade ago at the Forum on Higher Training Programme held at Hong Kong Sanatorium on 25 April 1997. At that stage, the College has resolved to award only Fellowship in General Paediatrics (F.H.K.C.Paed) without any subspecialty designation after the 6-years training programme.

Another Forum was convened by the College on 22 September 1998 at the Grantham Hospital with invited representatives from 13 paediatric subspecialties. The consensus opinion at that time was that general paediatrics should form the foundation of any subspecialty development, that the College has no agenda on when, how and in what order subspecialties would be established in Hong Kong, and that any promotion of subspecialties should coincide with the service needs and service development directions of the Hospital Authority, Department of Health and the Private Sector. After the forum, the convenors of each subspecialty group were invited to submit their first report on the current situation and the need for their subspecialty development in Hong Kong.

The Work of the Task Force

The Task Force for Higher Training of Paediatric Subspecialties 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 (please see appendix 1 for membership). 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 15 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. Thirteen sets of completed Questionnaires were collected from the subspecialty groups (except General Paediatrics, PICU and Adolescent Medicine) by the end of June 2003. Results were carefully studied and summarized (Appendix 2).

In addition to the consultation of paediatric colleagues, the Task Force also took reference of the following important papers from the Hong Kong Academy of Medicine on Accreditation of New Specialty/Subspecialty.

- 1) HKAM Education Committee Papers on Accreditation of New Specialty/Subspecialty
 - a) Guidelines on Recognition of a Specialty/Subspecialty issued in 1997 (Appendix 3)
 - b) Guidelines for Admission of "First Fellows" in New Subspecialty issued in August 2003 (Appendix 4):
 - 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.

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.

In January 2004, the Task Force produced the Guideline on the Criteria for the Accreditation of a Paediatric Subspecialty Training Programme (Appendix 5) and the Application Form for Accreditation of a Paediatric Subspecialty (Appendix 6). These were endorsed by the College Council at the 88th Council meeting on 6 January 2004. A full set of Guideline, together with the Application Form, has been sent to all subspecialty groups, all Chiefs of Service, Training Supervisors, Consultants and Fellows of the College. It was also made available for downloading from the College website.

Two important issues were also discussed and endorsed by the College Council:

- Double Fellowship: Council decided to adopt the title "Double Fellowship" for subspecialists in future instead of the previous proposal of "Board Certified" for better flexibility to allow the future subspecialists to opt for listing at the Specialists Register of the Medical Council of Hong Kong and to be in good alignment with subspecialists within the Academy Sister Colleges.
- 2. College Criteria for Admission of First Fellow: The Task Force takes reference to the Guidelines for Admission of "First Fellows" in New Subspecialty issued by the Academy in August 2003. In addition, the Task Force has also suggested the admission criteria for First Fellows as follows:
 - "A First Fellow in a subspecialty must be a Fellow of the Hong Kong Academy of Medicine (Paediatrics) and has undergone recognized supervised training in that subspecialty for 3 years. For Fellows who have not undergone a formal supervised training in that subspecialty for 3 years, he/she should have a period of full-time supervised training (which should normally be not less than 6 months) in a recognized centre. In addition, the 3 years of the stipulated accredited subspecialty training programme should be made up with a period of good independent practice in that subspecialty of twice of the duration required for the 3 years accredited training programme. The assurance of the standard and quality of the good independent practice should be supported by documentation of the workload in that subspecialty as well as relevant educational activities, such as publications, grand rounds and audit activities, conducted during the claimed period. The Subspecialty Board has the full discretion and final decision on the accreditation of individual Fellows. The Board decision should be submitted to the Task Force who would seek final endorsement from the College Council." This was approved by College Council at the 91st Council Meeting on 6 July 2004.

It was further clarified with the Academy that

- 1. Retrospective accreditation of subspecialty training using the 6-year of good independent practice rule would only be applicable to the admission of First Fellows.
- 2. After the start of admission of trainees into a new subspecialty training programme (the cut-off date for admission of First Fellow), all subsequent applicants to become Fellow in that subspecialty must have undergone (a) an accredited 3-year full-time training programme in an accredited local institution; or (b) a 3-year full-time training programme in an overseas institution which has been assessed by our College to be comparable in standard to our local training programme.
- 3. No additional or remedial training would be possible for trainees in a subspecialty who could not fulfill the criteria to be admitted as First Fellow by the cut-off date. (Appendix 7: post-meeting note 9th TF Meeting on 23 Jun 04)

A 2nd meeting with all Subspecialty Groups, all Chiefs of Service, Training Supervisors, Paediatric Consultants of Training Units was held on 11 February 2004 at the Academy Building to update participants on the progress of work of the Task Force. The updated *Guidelines and Criteria for Accreditation of Higher Training in Paediatric Subspecialties* and the *Application Form for Application of Subspecialty Accreditation* were presented and explained followed by interactive discussions between members of the Task Force and the audience. Logistics of application procedures and provisional framework of implementation were also discussed.

Since the 2nd consultative meeting, the Task Force met further and finalized the logistics and process of vetting applications of paediatric subspecialties (Appendix 8).

From 2004 till 2008, the College has not received any applications from any subspecialty groups. The Task Force reiterated that subspecialty development was not mandatory and only subspecialties which were mature and ready would be accredited. Accreditation of subspecialty should be stringent and responsible. The following criteria should be considered for defining a subspecialty, namely 1. parallel cases in other places, 2. appropriateness and relevance of the training programme, 3. sustainability, 4. mechanism for monitoring, 5. external assessors' views.

On the other hand, subspecialty development at the level of professional organizations was also well established. As shown in the following list, there are currently ten paediatric subspecialty societies in Hong Kong, some of which have been established for more than 10 years:

Hong Kong Society for Adolescent Medicine Hong Kong Society of Child Neurology and Developmental Paediatrics Hong Kong Society of Paediatric Endocrinology and Metabolism Hong Kong Society of Paediatric Gastroenterology, Hepatology and Nutrition

Hong Kong Paediatric Haematology and Oncology Study Group

Hong Kong Society of Paediatric Immunology and Infectious Diseases

Hong Kong Society of Neonatal Medicine

Hong Kong Paediatric Nephrology Society

Hong Kong Society of Paediatric Respirology

Hong Kong Society of Inborn Errors of Metabolism

Many paediatric training units in public hospitals also have well established subspecialty teams and clinics. The College has also accredited the training status of such subspecialty teams for the purpose of General Paediatric Training Programme.

With the planning of Centre of Excellence in Paediatrics (CEP) by the Hong Kong Government, there is urgency for the Hong Kong College of Paediatricians to prepare for the tertiary subspecialty services in it. Thus a third Forum on subspecialty development was organized by the College at the HKAM Building on 16th July 2008. It was well attended by representatives of various subspecialty societies or groups, and the chiefs of service/training supervisors of various paediatric training units. In the forum, an updated accreditation guideline, the application/vetting procedures and implications of subspecialty development were presented. There were in depth and frank exchange of opinions among various participants.

At the last Task Force Meeting on 18th August 2008, the opinions/questions gathered at the third Forum were further discussed and summarize. It was also decided that the Task Force has already accomplished its task of laying down the groundwork of subspecialty accreditation, and it should be replaced by a Working Group on Accreditation of Paediatric Subspecialties with a broader terms of reference and membership (Appendix 9). This was approved by the College Council on 9th September 2008.

The Task Force would like to take this opportunity to show our appreciation to the guidance of our College Presidents Professor Leung Nai Kong, Professor Fok Tai Fai and Professor Louis Low, support from the College Council and members of the Task Force and active participation from the trainers (Chiefs of Service and Training Supervisions) as well as all College Fellows. All these sets momentum and direction for the work of the Task Force which ultimate enable us to achieve our mission. To all their contributions, we say thank you and we look forward to their continual support to the Working Party in the future.

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

Education Committee's Report

Chairman Dr. CHAN Kwok-hing, Alex

Hon. Secretary

Dr. LEE Wai-hong

Members

Dr. CHENG Chun-fai

Dr. CHEUNG Pik-to Dr. CHU Wai-po, Reann Dr. LEUNG Sze-lee, Shirley

Dr. LI, Albert Martin Prof. Tony Nelson Dr. TSOI Nai-shun Dr. YAU Fai-to

Dr. YOUNG Wan-yin, Betty

Immediate Past Chairman Prof. LOW Chung-kai, Louis

The past year has been a very busy year for the College with regard to Education and training activities.

Our College was one of the pioneer Colleges to participate in the Training Scholarship Exchange Program with China. This is a collaborative program organized by the Hong Kong Academy of Medicine and the Ministry of Health of China. The other pioneer Colleges are Hong Kong College of Orthopaedic Surgeons and College of Ophthalmologists of Hong Kong.

Open lectures in the past year were conducted in collaboration with the Hong Kong Society of Adolescent Medicine and UNICEF. These lectures were well attended by Fellows as well as professionals in other disciplines.

The theme of our Paediatric Updates was in the form of "Grand Rounds and Case Discussions" which was actively participated by Fellows from public institutions and private practice. In one of the sessions, a patient with his parents also participated in the forum. An update on "Growth references for Hong Kong Children" was also held during the year.

Postgraduate Paediatric Course, Paediatric Advanced Life Support (PALS) Course and Child Protection Course have been our regular educational and training activities. Much

effort had been made by our committee members and colleagues to organize these training activities, and we are collecting feedback from both our trainees and Fellows who had attended these courses.

The highlight of the year was the 7th Guangdong – Hong Kong Paediatric Exchange Meeting cum 1st Hong Kong – Guangdong – Shanghai – Chongqing Paediatric Exchange Meeting. This was held on 28th June 2008 in the Academy of Medicine Building. For the first time, paediatric fellows from the four cities participated in the event. There were 18 oral and 88 poster presentations respectively. The great work of the Organizing Committee Members who had made this conference a success is very much appreciated.

Our CME/CPD Guidelines have been revised and Fellows are kindly reminded that active CME are now mandatory. There are many ways to obtain active CME points. One can score four CME points by answering questions after reading the Hong Kong Journal of Paediatrics. Our Journal Editors would very much welcome Fellows to read, submit answers, obtain CME points, rather than have them shelving the College Journal or just putting it aside. Still on the issue of CME, would our Fellows be reminded to fulfill their duty of submitting their Annual Return Forms (ARF) at the end of each CME cycle on time.

Finally I wish to thank all of our Fellows, Members and Associates who have enthusiastically participated in the educational activities. Without your support, the work of our Education Committee would be meaningless.

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

CME subcommittee's Report

This is the eleventh year since College CME programme started in 1997. The revised CME/CPD guidelines were operating smoothly. This is the fourth year of launching the iCMECPD. Most Fellows are aware of its usefulness in helping them to submit the ARF. Review of the information from the iCMECPD showed that the Status Report is quite reliable. However, there are still difficulties in capturing CME points such as those under Cat C, Cat D or others submitted by individual Fellows. Therefore, the College still holds the opinion the iCMECPD is only useful for reviewing and auditing purpose, and it cannot replace Fellows' ARF.

There is improvement in ARF this year, only 12 Fellows submit the returns late and eventually all have submitted their ARF after reminder. 9 Fellows have acquired less than the College recommended CME/CPD points i.e. 90 CME points over the 3-year period. This only accounts for 2% of all Fellows.

A total of 81 activities providing 200 Cat A CME points were organized by the Hong Kong College of Paediatricians, the Hong Kong Paediatric Society and 11 subspecialty paediatric societies or study groups. In addition, we have accredited a total of 665 meetings (2,745 Cat A points) submitted by non-paediatric medical associations and individual Fellows for local and overseas conferences. The paediatric units of 14 public hospitals/institutes have continued to run regular CME meetings giving a total of 677 Cat B CME points this year. In addition, two private study groups and 12 private hospitals continued to have regular programmes, providing a total of 63 meetings with 83 Cat B CME points. This year, 36 Fellows and 67 Fellows had claimed Cat C (publications) and Cat D (self-study) CME points respectively and we have also accredited a total of 548 meetings (2,375 Cat E points) submitted by non-paediatric medical associations and individual Fellows for local and overseas conferences.

The next CME /CPD cycle with implementation Active CME points will be commenced on 1st January, 2008. Open forum and updates on the key changes through College newsletter were organized. To increase the availability of Active CME points, the Hong Kong Journal of Paediatrics MCQ is now available in the iCMECPD and a number of international paediatric websites has been accredited. The CME subcommittee will continue to prepare and facilitate Fellows to cope with the new CME/CPD requirement in the coming years.

In 2007-2008, the CME subcommittee membership is as follows:

Chairman Dr. TSOI Nai-shun (HK Paediatric Society)

Hon. Secretary Dr. LAM Shu-yan, David (Membership Committee)

Members Dr. CHAN Kwok-hing, Alex (Education Committee)

Dr. CHIU Cheung-shing, Daniel

Dr. HO Che-shun (Accreditation Committee)

Dr. LEE Wai-hong (ex-officio Education Committee)

Dr. LEE Ngar-yee, Natalie

Dr. LOW Chung-kai, Louis (ex-officio Education Committee)

Dr. TSE Wan-ting, Philomena

Dr. WONG Sik-nin (ex-officio Education Committee)

Dr. YAM Man-ching Dr. YUEN Hui-leung

Dr. TSOI Nai-shun

Chairman, CME Subcommittee

Summary of CME Activities Accredited (2007)

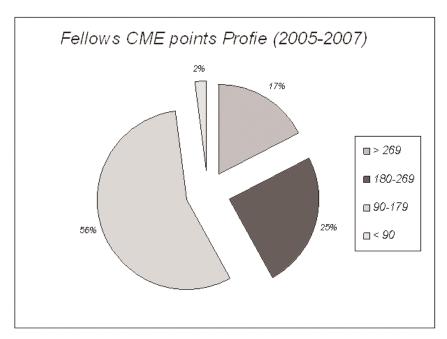
	Meeting organized	CME points approved
Local Cat A activities (total)	746	2,945
Automated subspecialty societies	81	200
Individual applications	14	152
Hong Kong College of Paediatricians	10	47
Non-paediatric Medical Associations	641	2,546
Cat B Activities	731	760
Private Practice Paediatricians	11	12
HA hospitals regular activities	668	677
Private Hospitals	52	71
Cat C	36	349
Cat D	67	492
Cat E	539	2,274
Individual applications	4	8
Non-paediatric Medical Associations	535	2,366
Overseas Activities		
Cat A from Overseas Study Group	38	280
Cat B from Overseas Study Group	10	13
Cat E from Overseas Study Group	4	29
Individual Cat A/E applications	117	1,403

Note: total of 99 local CME applications rejected

General Statistics of all Fellows

		Date of Commencement of CME cycle	No. of Fellows	Less than 2/3 CME pts in 3 yrs	Less than required CME pts or 10 cat A pts per year in the past 3 yrs
	Fellows (90 pts)	01-01-2005	429	1	7
	Fellows (75 pts)	01-07-2005	4	-	-
_	Fellows (60 pts)	01-01-2006	8	-	
Local	Fellows (45 pts)	01-07-2006	8	-	-
Γ	Fellows (30 pts)	01-01-2007	6	-	-
	Fellows (15 pts)	01-07-2007	3	-	-
	Overseas Fellows	01-01-2005	23	-	1

Note: total of 12 late returns with administration fees charged.



Note: data of local Fellows with CME cycle started on 1st January, 2005. (The draft of this report was submitted to, and endorsed by, CME Subcommittee by circulation on 8th October, 2008 by Dr. Tsoi Nai Shun,)

Examination Committee's Report

Chairman Prof. NG Pak-cheung Hon. Secretary Dr. CHAN Hin-biu, Bill

Members Prof. FOK Tai-fai

Prof. LAU Yu-lung Dr. LEE Wai-hong Dr. LI Chi-keung

Dr. TSE Wing-yee, Winnie Dr. YOUNG Wan-yin, Betty

1. Examination Committee Meetings

Four Examination Committee Meetings were held in 2008. The Coordinators for different examinations were appointed as follows: Dr. Bill Chan and Dr. Betty Young for DCH Part IA and DCH clinical examination, Prof. Y L Lau and Dr. Li Chi Keung for MRCPCH Part IB, Prof. P C Ng and Dr. W H Lee for MRCPCH Part II written and Clinical examination of the Joint MRCPCH / Intermediate Examination, and Prof. T F Fok and Dr. Li Chi Keung for Exit Assessment. Within the year, there were a total of 11 examinations / assessments held, including three Part IA & IB Examinations, three Part II written Examinations, two Part II Clinical Examinations, two Exit Assessments, and one DCH Clinical Examination.

2. Joint Intermediate / MRCPCH Examinations

Prof. P C Ng, Dr. Bill Chan, Prof. Y L Lau, Dr. W H Lee, Dr. C K Li and Dr. Betty Young represented the College to attend the respective RCPCH Examination Part I and Part II Board meetings in UK. They gained more understanding on question setting techniques and the examination arrangement through these meetings. Local question groups were also set up to contribute questions to different parts of the MRCPCH and DCH examinations.

The new MRCPCH clinical examination, which has taken the format of 10 OSCE stations in each circuit, has run smoothly and successfully in the past 4 years. The pass mark of the MRCPCH clinical examination was increased to 100 marks in 2007 but did not appear to have a major impact on the passing rate for candidates in Hong Kong.

Results of MRCPCH Examinations:

Part I Examination (15 January 2008)

	Pass /attendance	Pass rate
IA	25/41	61 %
IB	5/45	11 %
Part I Examination (13 May 2008)		
IA	3/7	43 %
IB	7/12	58 %
Part I Examination (2 September 2008)		
IA	17/23	74 %
IB	6/29	21 %
Part II Examination (12 December 2007)	4/7	57%
Part II Examination (23 April 2008)	8/10	80%
Part II Examination (20 August 2008)	6/12	50%
Part II Examination (10 December 2008)	Pending	Pending
Clinical Examination (30-31 October 2007)	7) 6/16	38%
Clinical Examination (26-27 Feb 2008)	7/15	47 %
Clinical Examination (11-12 Nov 2008)	pending	pending

Examiners for the February 2008 MRCPCH Clinical Examination at Prince of Wales Hospital and Princess Margaret Hospital included: Dr. Andrew Long (Senior Examiner), Dr Janet Anderson, Dr Vipin Datta, Prof. Rita Sung (Host Examiner), Dr. Li Chi Kong, Dr. Betty Young, Dr Ho Che Shun, Prof. Ng Pak Cheung/Dr. Li Chi Keung (Host Examiner), Dr. Chan Kwok Yin, Dr Huen Kwai Fun, Dr. Wong Sik Nin.

Examiners for the November 2008 MRCPCH Clinical Examination at Queen Mary Hospital and Queen Elizabeth Hospital included: Dr. Janet Anderson (Senior Examiner), Dr Barbara Bell, Dr Huw Thomas, Dr Win Tin, Dr Tsoi Nai Shun (Host Examiner), Dr. Ha Shau Yin, Dr Yau Fai To, Dr Huen Kwai Fun, Dr Ng Yin Ming (Host Examiner), Dr. Lee Wai Hong, Prof Tony Nelson, Dr So Lok Yee.

3. Exit Assessment

Two Assessments were conducted, one in December 2007 and one in June 2008. Both were held at the Hong Kong Academy of Medicine Jockey Club Building. The number of dissertations to be submitted by each candidate has been decreased to two together with amendments to the requirements of the authorship and contents. The '5-year time limit rule' for taking the Exit Assessment has been abolished, and the College Council agreed that as long as the trainee has fulfilled the 3-year of higher training curriculum and he/she is still practicing medicine either in public institutions or in the private sector, then, he/she will be eligible for taking the Exit Assessment.

The results of the two Assessments were as follows:

	Pass/attendance	Pass rate
Exit Assessment (18 December 2007)	4/4	100 %
Exit Assessment (19 June 2008)	12/13	92 %

Assessors for Exit Assessment in December 2007 included: Prof. Virginia Wong, Prof. Tony Nelson, Dr. Yuen Hui Leung, Prof. PC Ng, Dr. Ha Shau Yin, Dr. Li Chi Keung.

Assessors for Exit Assessment in June 2008 included: Prof. Lau Yu Lung, Dr. So Lok Yee, Dr. Chan Hin Bill, Dr. Betty Young, Dr. Cheung Pik To, Dr. Ha Shau Yin, Prof. Tony Nelson, Dr. Cheung Kam Lau, Dr. William Wong, Prof. Rita Sung, Dr. Li Chi Kong, Dr. Wong Sik Nin.

4. Diploma of Child Health

The written part of the Examination has been incorporated into the MRCPCH Part I Examination as Part IA, and is conducted three times a year. The DCH clinical examination has also changed to the OSCE format similar to that of the MRCPCH clinical examination. Each circuit consists of 8 stations, which include 2 Communication Skills stations, 1 Structured Oral station, 1 Focused History station, 2 Short Clinical stations, 1 Clinical Neurology station and 1 Child Development station. The United Christian Hospital had successfully served as the host centre for the DCH clinical examination in November 2008.

Results of DCH Examinations

	Pass/attendance	Pass rate
Clinical Examination (1 Nov 2007)	12/17	71%
Part IA (15 January 2008)	1/3	33 %
Part IA (13 May 2008)	1/3	33 %
Part IA (2 September 2008)	3/7	43 %
Clinical Examination (13 Nov 2008)	Pending	Pending

Examiners for the November 2008 DCH Clinical Examination at UCH included: Dr. Janet Anderson (Senior Examiner), Dr. Barbara Bell, Dr Huw Thomas, Dr Win Tin, Dr Chan Hin Biu(Host Examiner), Dr Betty Young, Dr Tsao Yen Chow.

Thanks to all the host centres, the MRCPCH and DCH examinations ran very smoothly in Hong Kong. The Examination Committee had organized 2 training sessions on the Communication station and Development station, one for trainers and one for trainees, on 10th and 14th November, 2008, respectively. Dr. Janet Anderson and Dr. Barbara Bell were the instructors. Hopefully, both local trainers and trainees had made full use of the opportunity and gained much insight from these sessions. Members of the Examination Committee had participated in vetting MCQ questions, which were used in overseas centres. As a result, the passing rate for the modified questions was significantly higher than the unvetted questions. The Examination Committee will expect more modifications in the examination format in order to ensure that the new style of assessments will be more objective and structural, and the candidates will be treated fairly and efficiently. The Royal College of Paediatrics and Child Health is planning to set up an Exit Examination in UK consisting of 10 stations. The format will be different from those of the MRCPCH Clinical Examination. So far, there is no plan to adopt the same format by the Hong Kong College of Paediatricians.

Above all, the Chairman and members would like to welcome Dr. Winnie Tse who has joined the Examination Committee earlier this year, and I would also like to thank Miss Karen Yu who has just left the College for her immense contributions and support to the Examination Committee throughout these years.

Prof. NG Pak-cheung Chairman, Examination Committee

House Committee's Report

Chairman Prof. LEUNG Nai-kong
Hon. Secretary Dr. HUEN Kwai-fun
Members Dr. KO Po-wan

Dr. KO Wai-keung, Frederick
Dr. LEUNG Cheuk-wah, Wilfred

Dr. LI, Albert Martin Dr. WONG Sik-nin Dr. WOO Lap-fai, Chris

Terms of Reference

1. To oversee the management of the College Chamber including the Secretariat and its facilities

- 2. To take charge of the issuance of the College Newsletters and other materials as directed by the Council
- 3. To procure benefits for the members of Hong Kong College of Paediatricians not covered by other committees
- 4. To promote the use of information technology in the College and to maintain the College website

College Chamber and Secretariat

The College Secretariat, served by a team of dedicated secretaries, is providing effective and efficient services to the Council and their committees; Hong Kong College of Paediatricians Foundation; H.M. Lui Memorial Fund and Hong Kong Journal of Paediatrics.

Information Technology

The Information Technology System and computer equipments are operating effectively. The College website contains good source of information on the College including the most up-to-date CME activities.

Newsletter

The College Newsletters are being published bi-monthly and provide updated information on the Council and its Committees. The Editorial Board of the College Newsletter includes Professor Leung Nai Kong, Dr. Li Albert Martin, Dr. Wong Sik Nin and Dr. Woo Lap Fai.

Benefits for Members

Members continue to enjoy special discounts on the purchase of books and petrol, and special arrangements with travel agents.

Prof. LEUNG Nai-kong Chairman, House Committee

Membership Committee's Report

Chairman Prof. LAU Yu-lung
Hon. Secretary Dr. LEE Kwok-piu
Members Dr. CHAN Kwok-chiu

Dr. HO Che-shun, Jackson Dr. KO Wai-Keung, Frederick

Dr. KWAN Kwok-fan Dr. KWONG Ngai-shan

Dr. LI Chi-kong Dr. SO Lok-yee

In the year 2007/2008, 6 Associates resigned with 29 Associates admitted to the College. 17 Members were enrolled from existing Associates. 1 Fellow resigned with 16 Members passed the Exit Examination and were elected as Fellows.

Presently, our Memberships are as follows:

Fellows:	488
Overseas Fellows:	26
Members:	57
Overseas Members:	2
Associates:	71

Total Membership: 644

Prof. LAU Yu-lung Chairman, Membership Committee

Professional and General Affairs Committee's Report

Chairman Dr. SO Lok-yee

Hon. Secretary Dr. LEUNG Cheuk-wa, Wilfred

Members Dr. CHENG Chun-fai

Dr. CHEUNG Pik-to

Dr. IP Lai-sheung, Patricia

Dr. KO Po-wan

Dr. LAM Cheung-cheung, Barbara Dr. LEUNG Tze-ching, Vincent

Dr. LI Chi-him

Prof. LOW Chung-kai, Louis Dr. YOUNG Wan-yin, Betty

Two meetings were held in 2008.

Clinical Practice Guidelines and other quality related issues

The direction of the College will change towards adopting, sharing and adaptation of existing clinical guidelines rather than developing guidelines from start. Other quality related activities include promotion of good clinical practice, provision of patient information and advice on clinical audit.

Paediatric Advanced Life Support (PALS) Courses

Two Provider and one Renewal Courses jointly organized by our College, Hong Kong Paediatric Nurses Association (HKPNA) and the Heart Institute for Children, Hope Children's Hospital, Illinois, USA were held during 30th October to 3rd November 2008. The courses were accredited for continuous nursing education in addition to CME points from various Academy Colleges. The venue was changed to A & E Training Centre in Tang Shiu Kin Hospital, which was very well-equipped and this enabled a reduction in the course fee. A total of 87 completed the Provider Courses and 26 completed the Renewal Course.

The faculty members were as follows:

Overseas: Dr. HUYOUNG, Alfred

Local: Dr. CHEUNG Kam-lau (coordinator)

Dr. CHIU Wa-keung Dr. LEUNG Ping, Maurice

Dr. HON Kam-lun, Ellis
Dr. MIU Ting Yat
Dr. HUI, Henry
Dr. SO Lok Yee
Dr. HUI Yim-wo
Dr. TSOI Nai Shun
Dr. KWAN Yat-wah
Dr. WONG May-ling
Dr. KWOK Ka-li
Dr. YAM Man-ching
Dr. KU Shu-wing
Dr. YUNG Tak-cheung

Experienced nurses from HKPNA also acted as assistant instructors.

Child Health and Public Issues

Written responses were sent to the government with a focus on child health and welfare on the following issues:

- 07/08 Policy Address
- Pilot Child Fatality Review
- "Your Health, Your Life: Healthcare Reform" consultation document
- Consultation on interim proposals on a Sex Offender Register

Our College, represented by Dr. Patricia Ip, had made submissions to the Welfare Panel of the Legislative Council on the following issues:

- Child Development Fund: expanding accessibility and relaxing restrictions
- Comprehensive Child Development Service: expanding scope of service and expediting coverage
- Establishment of Family Council: children's interests should be rightly represented
- Batterer Intervention Programme: expand coverage to child abuse Child Fatality Review mechanism: to strengthen the system

Social Function

Launch trip to Tung Lung Island on 18 November 2007 was attended by 42 participants. The social programme for this year will be held on 14 December 2008. It will be a launch trip to Lai Chi Wo, Ap Chai and Kat O.

Dr. SO Lok-yee Chairman, Professional & General Affairs Committee

Review Committee's Report

Chairman Dr. KO Yiu-shum, Paul Hon. Secretary Dr. CHANG Kan, Jane Members Dr. CHENG Man-yung

> Dr. CHIU Lee-lee, Lily Prof. YEUNG Chap-yung Prof. YUEN Man-pun, Patrick

As there were no complaints or issues to be discussed, the Review Committee did not meet for year 2007-2008.

Dr. KO Yiu-shum Chairman, Review Committe

Hong Kong College of Paediatricians Foundation

Chairman Dr. LEUNG Tze-ching, Vincent

Vice-Chairman Dr. KO Wai-keung, Frederick (ex-officio)

Hon. Secretary

Hon. Treasurer

Dr. CHANG Kan, Jane

Dr. LAU Ding-yue, Daniel

Executive Committee

Dr. CHAN Man-cheung, Caleb

Dr. CHENG Chun-fai Prof. LEUNG Nai-kong

Prof. LOW Chung-kai, Louis (ex-officio)

Dr. NG Kwan-wai, Alan Dr. TAM Yat-cheung, Alfred Dr. YU Chau-leung, Edwin

Hong Kong College of Paediatricians Foundation has a full year of activities in our efforts to promote child health and education in Hong Kong, China and Cambodia. We continued our annual Cambodia medical mission; held our 3rd annual Neonatal Resuscitation Program (NRP) in Kunming, Yunnam and a new NRP course in QingHai, medical seminar in Tibet as well as co-hosting a seminar with the Hong Kong Council of Social Services (HKCSS).

Medical Volunteer Service Seminar 28/4/07

Dr. Vincent Leung delivered a lecture on "Medical Volunteer Service in China" to the Hong Kong Women Doctors Association at the HA Headquarters on 28/4/07. He shared with the lady doctors our experience of volunteer work in China.

NRP course in QingHai and Seminar in Tibet 5/7/07-15/7/07

Under the leadership of our President, Prof. Louis Low Chung Kai, a party of 10 Fellows including Dr. Cheung Kam Lau, Dr. Yam Man Ching, Dr. Godfrey Chan Chi Fung, Dr. Monica Chan Lik Man, Dr. Reann Chu Wai Po, Dr. Wilfred Leung Cheuk Wah, Dr. Eligina Poon Yee Ling, Dr. Huen Kwai Fun and Dr. Vincent Leung held a two day NRP course for 45 doctors from all across QingHai at the Women and Children's Hospital of XiNing. Doctors as far as 2000km away came to attend our course. Resuscitators and aspirators were donated to each attending doctor. The HuaXia Foundation sponsored all the equipment for the course and the Director of Co-ordination Department of the Liaison Office, Mr Lou Zhi Ngai accompanied us on our mission.

This was followed by a trip via the QingHai-Tibet railway to Lhasa where we held a seminar to a packed audience of over 100 doctors. Prof Louis Low, Dr. Cheung Kam Lau and Dr. Yam Man Ching gave lectures on "Iodine deficiency and Neonatal Thyroid Function Tests", "Cadiopulmonary Resuscitation" and "Cardiac Arrythmias in Children" respectively.

Cambodia Medical Mission 13/10/07 -18/10/07

Dr. Yau Fai To continued to head our annual medical mission to Cambodia together with 4 paediatricians, 1 ophthalmologist, 1 dentist and 1 physician. The team visited one HIV orphanage as well as attended various clinics in Phnom Penh and Angor Wat, including the feeding centres in Siem Reap. We donated US \$1,000 towards the purchase of drugs and medication for the mission.

The HuaXia Foundation Charity Walk 28/10/07

Our Foundation and the Faculty of Health and Social Sciences of the PolyTech University cosponsored the Charity Walk at the Peak on Sunday, 28/10/07. This was attended by a few hundred nurses, students, doctors and their family and children. The Deputy Director General of the Ministry of Health and the Executive Director of the HK and Macau Affairs Bureau of Beijing attended the opening ceremony. \$920,000.00 was raised for the Hua Xia Foundation Scholarship Fund.

Seminar on HK Family and Children - Today's Risks and Challenges 17/1/08

Our Foundation co-sponsored a one-day multidisciplinary seminar at the Duke of Windsor Building on the above topic with the HK Council of Social Services and the Council of Non-Profit making Organization for Pre-Primary Education. Dr. Jane Chang Kan and Dr. Vincent Leung gave lectures on "The Key Elements Influencing Growth & Development" and 'Laying the Foundations for Healthy Growth of Children in the future" respectively.

Neonatal Resuscitation Program to Kunming and Shangri-La 25/5/08 -1/6/08

Our Foundation held its 3rd NRP course in Kunming from 26/5 -27/5/08. A total of 12 Fellows including Prof. Louis Low Chung Kai, Dr. Chan Man Cheung, Dr. Cheung Kam Lau, Prof. Ellis Hon Kam Lun, Dr. Ting Yuk, Dr. Chan Shu Yan, Dr. Wilfred Leung Cheuk Wah, Dr. Eligina Poon Yee Ling, Dr. Reann Chu Wai Po, Dr. Yau Man Mut, Dr. Ho Hing Tung and Dr. Vincent Leung took part in the course. This was held with the co-operation of the Department of Maternal and Child Health (MCHD) in Kunming. With the additional help of the Provincial Director of MCHD of Yunnam, we were able to extend our course to the doctors from 14 different hospitals from LiJiang and Shangri-La. A total of 46 doctors attended. We donated resuscitators, laryngoscopes, aspirators, ET tubes, airways etc. to the attending doctors and their respective hospitals.

Since our past NRP courses have a significant impact on neonatal care in Kunming, we were invited by the Provincial Director to extend our NRP course to cover the whole of Yunnam now that we have covered all the major hospitals in Kunming. The whole project will take about 5 years.

Our Foundation visited the Deqin Autonomous Region School of Health in Shangri-La and gave a seminar to a full audience of doctors and nursing students. Prof. Louis Low Chung Kai, Dr. Cheung Kam Lau and Dr. Ting Yuk gave lectures on "Disorders of Puberty"; "Advances in Neonatal and Cardiopulmonary Resuscitation" and "Neonatal Meningitis" respectively. We also toured the local People's Hospital and their Maternal & Child Health Hospital. Resuscitators and airways etc. were donated to each institution. The Hua Xia Foundation assisted us in arranging our activities in Shangri-La.

We have received a generous donation of \$100,000.00 from the Albert Chan Foundation to support our NRP course in Kunming.

Our Foundation is very much indebted to our Fellows and Members, their spouses, advisors, donors, sponsors and related parties for their generous support without which our programs would not have been possible.



The College Council and the Newly Admitted Fellows at the Admission Ceremony on 1st December, 2007.



Honorable Guests, Presidents of Hong Kong Academy of Medicine, Sister Colleges and College Council at the Fellowship Admission Ceremony on 1st December, 2007.



Organizing committee of the 7th Guangdong/Hong Kong Paediatric Exchange Meeting & 1st Guangdong/Hong Kong/Chongqing/Shanghai Paediatric Exchange Meeting



7th Guangdong/Hong Kong Paediatric Exchange Scientific Meeting held on 28/6/2008

NEW FELLOWS, MEMBERS AND ASSOCIATES

The following doctors were elected as Fellows of the Hong Kong College of Paediatricians in 2007/2008

DR CHENG LING LING	鄭玲玲醫生
DR KO LEE YUEN	高利源醫生
DR KOO SERGIO DON	古修齊醫生
DR LAM WAI FAN, FANNY	林蕙芬醫生
DR LAU WEI SZE, VERCIA	劉慧思醫生
DR LAU YU	劉瑜醫生
DR LEE PO YEE, LILIAN	李寶儀醫生
DR LEUNG WING KWAN	梁永堃醫生
DR MA YEE MAN	馬綺雯醫生
DR SOO MAN TING	蘇文庭醫生
DR TANG MIU SZE	鄧妙詩醫生
DR TANG SAU SHEK, OLIVER	鄧秀碩醫生
DR WONG SUET NA	王雪娜醫生
DR YAU HO CHUNG	游可聰醫生
DR YIP MUNG SZE, CYNTHIA	葉夢詩醫生
DR YUEN LAI KEI	袁麗琪醫生
	DR KO LEE YUEN DR KOO SERGIO DON DR LAM WAI FAN, FANNY DR LAU WEI SZE, VERCIA DR LAU YU DR LEE PO YEE, LILIAN DR LEUNG WING KWAN DR MA YEE MAN DR SOO MAN TING DR TANG MIU SZE DR TANG SAU SHEK, OLIVER DR WONG SUET NA DR YIP MUNG SZE, CYNTHIA

NEW FELLOWS, MEMBERS AND ASSOCIATES

The following doctors were elected as Members of the Hong Kong College of Paediatricians in 2007/2008

DR CHAN WAI YIN	陳偉賢醫生	DR PAU CHEE KIT	包志傑醫生
DR CHAN YICK CHUN	陳亦俊醫生	DR SUN WAI FUN	孫偉芬醫生
DR HO PO KI	何寶琪醫生	DR TUNG YUET LING	童月玲醫生
DR HUI WUN FUNG	許桓峰醫生	DR YAU MAN MUT	邱文謐醫生
DR LOUNG PO YEE	梁寶兒醫生		

NEW FELLOWS, MEMBERS AND ASSOCIATES

The following doctors were elected as Associates of the Hong Kong College of Paediatricians in 2007/2008

DR CHAN CHING CHING	陳晶晶醫生	DR LUI HOW MUI	呂巧梅醫生
DR CHIANG PUI KING	蔣珮琼醫生	DR SOO TSUNG LIANG, EUAN	蘇頌良醫生
DR HO KAR HUEN, KARIN	何嘉萱醫生	DR TANG FONG CHU	鄧鳳珠醫生
DR LAM KEE SEE, GRACE	林己思醫生	DR TSANG YUK PING	曾玉萍醫生
DR LAM YING YIN	林英彥醫生	DR TSO WAN YEE, WINNIE	曹蘊怡醫生
DR LAW YUEN KI	羅婉琪醫生	DR YOUNG HOI YAN	楊凱欣醫生