

# Updating Guidelines on Accreditation of Training – aligning with HKAM requirements

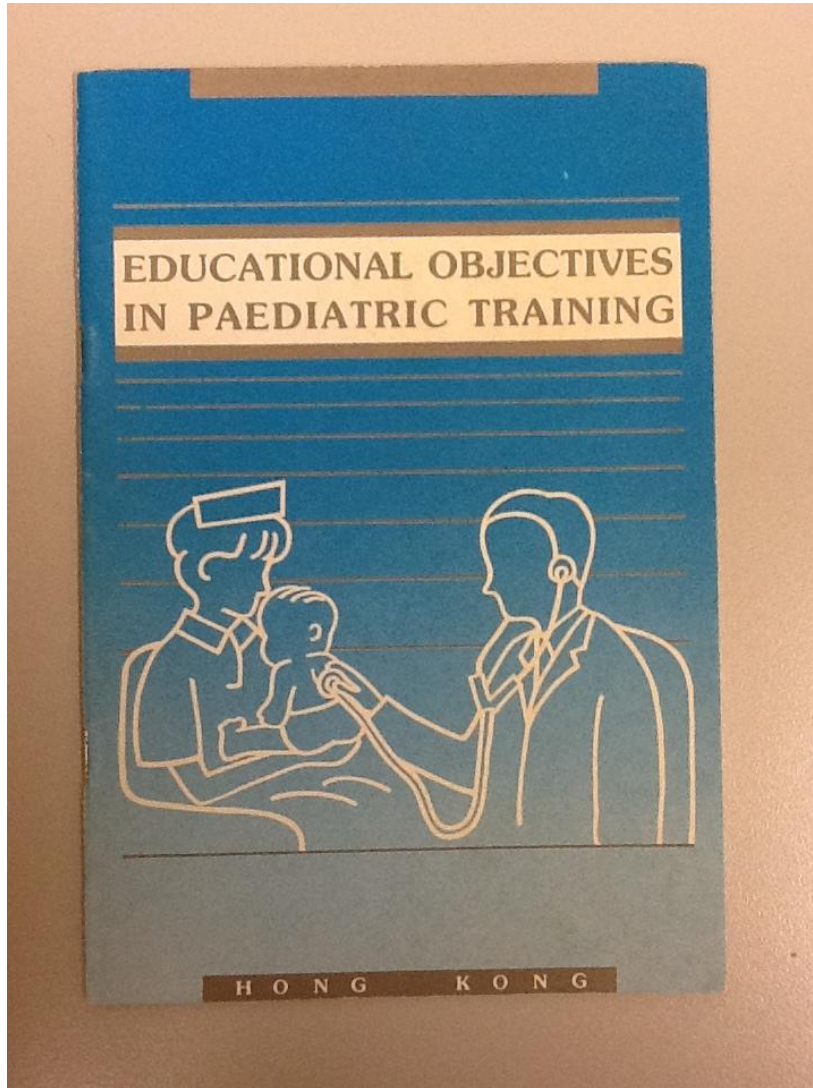
Hong Kong College of Paediatricians  
Accreditation Committee  
Revisit Briefing Session  
18-Jan-2012

# Background

As a constituent college of the Hong Kong Academy of Medicine, the Hong Kong College of Paediatricians is the statutory body in Hong Kong to ensure the standard and quality of paediatric practice by maintaining a reliable system of training, accreditation, and continuous professional development.

- Education Committee → Guidelines on Postgraduate Training
- Accreditation Committee → accreditation of training units and individual trainers & trainees
- Examination Committee → assessment of trainees (Intermediate Exam & Exit Assessment)
- Review Committee

# History of Guideline Development

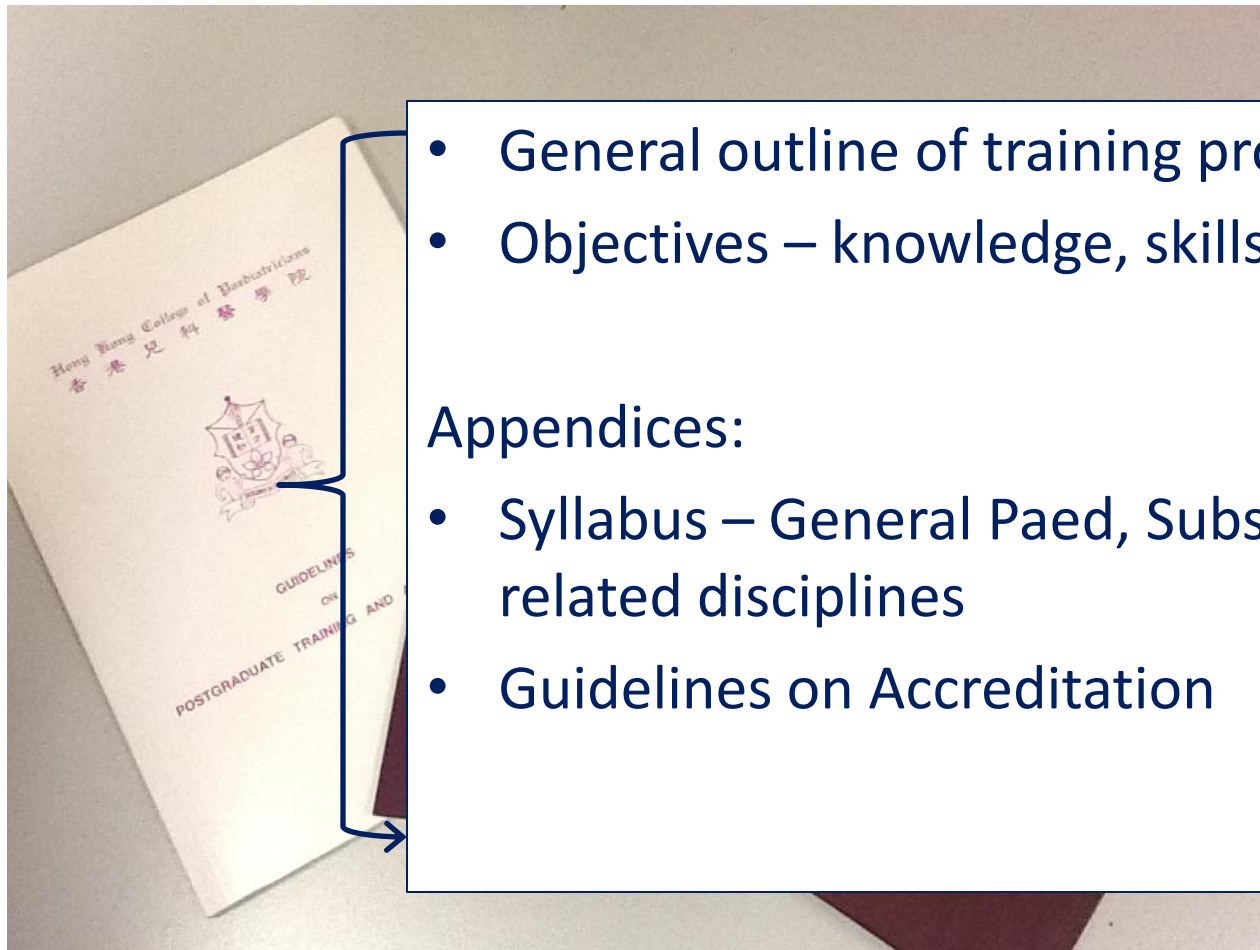


First training curriculum published in 1988, by Prof CY Yeung and Heads of Paediatric Units

# The first Guideline on Postgraduate Training and Accreditation (1995)



# The first Guideline on Postgraduate Training and Accreditation (1995)



- General outline of training programme
- Objectives – knowledge, skills, attitudes

## Appendices:

- Syllabus – General Paed, Subspecialties, related disciplines
- Guidelines on Accreditation



## Check List of Clinical Experience and Procedures Guidelines to Trainers and Trainees

1. The Check List of Clinical Experience and Procedures serves as a reference for trainers and trainees.
2. Disease entities are classified into three categories :
  - Category 1 :* Trainees are expected to have **personally managed** at least **ten** of each of these disease entities.
  - Category 2 :* Trainees are expected to have **personally managed** at least **five** of each of these disease entities.
  - Category 3 :* Trainees are expected to have **clinical exposure** to at least **50%** of the disease entities in this category under **each subspecialty**. Trainees may include patients presented in teaching rounds and seminars in other hospitals.
3. Trainees are expected to have attended, observed, assisted or successfully performed a certain number of activities and procedures under different subspecialties. The number required is shown within the parenthesis.
4. The supervisor should regularly assess the trainee's overall training and identify any deficiencies in either experience gained or experience available to be remedied early in the posting.

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### Clinical Experience :

#### Category

- 1 Innocent murmur
- 2 Ventricular septal defect
- 2 Atrial septal defect, pulmonary stenosis
- 2 Patent ductus arteriosus
- 2 Neonatal cyanotic heart conditions, Tetralogy of Fallot
- 2 Congestive heart failure
- 2 Arrhythmias (including paroxysmal supraventricular tachycardia)
- 3 Coarctation of aorta, aortic stenosis
- 3 Acquired heart diseases (e.g. rheumatic fever, viral myocarditis, cardiomyopathy)
- 3 Hypertension
- 3 Kawasaki disease

### Procedures :

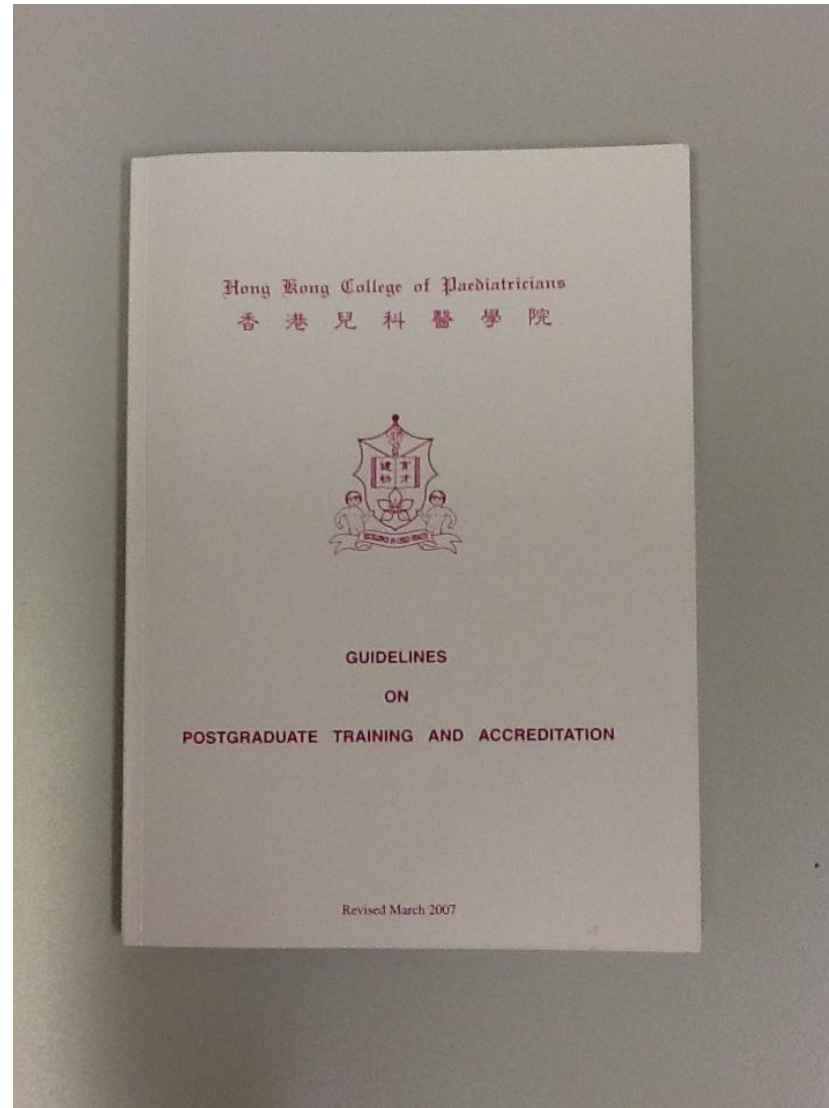
- ECG (including interpretation) (refer to General Procedures)
- Observe echocardiographic examination (optional)
- Observe cardiac catheterization and interpret haemodynamic data (optional)



# Main revisions since the 1995 Guideline

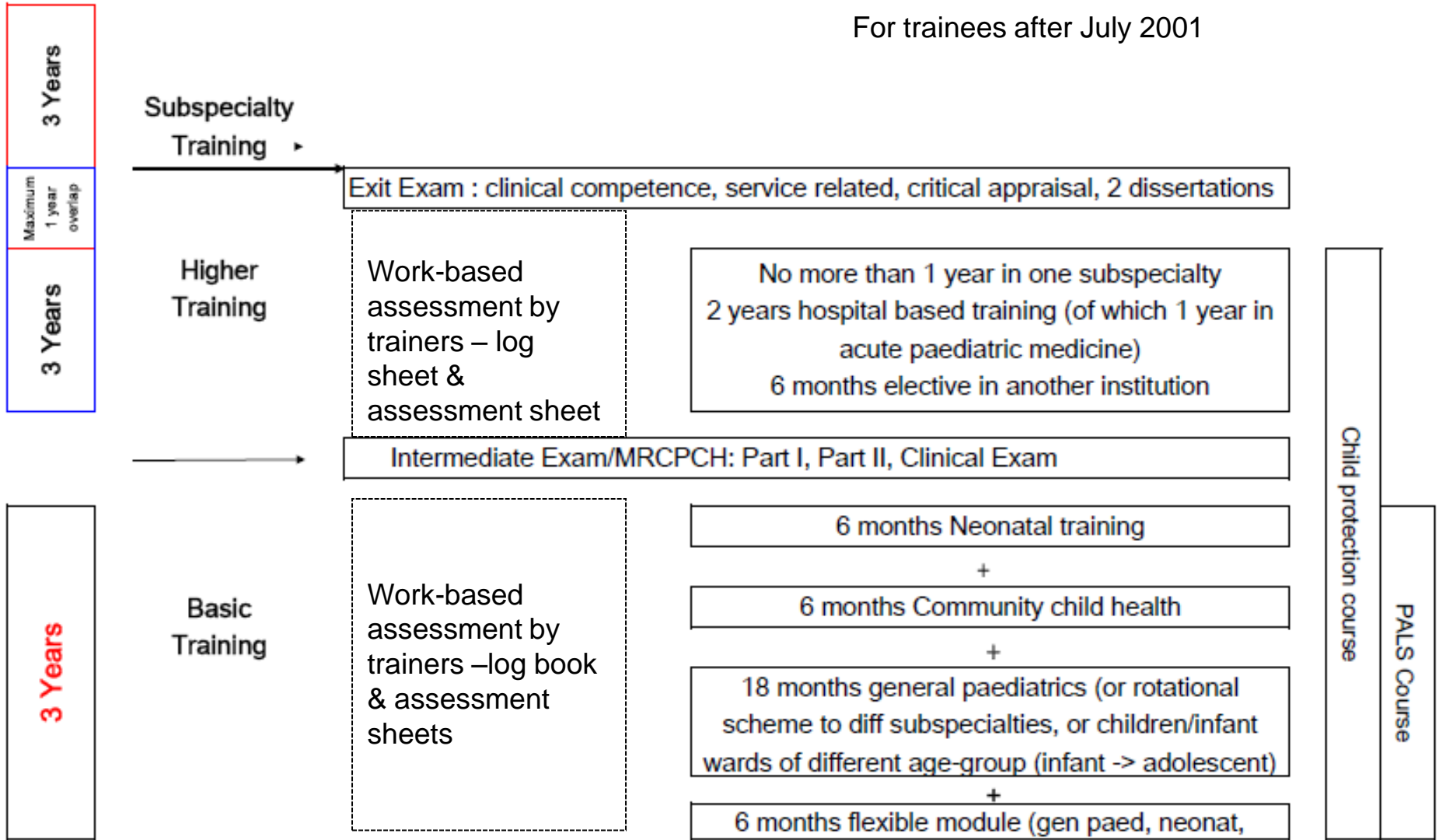
- For trainees starting in July 2003 – Mandatory module in Community Child Health
  - MCHC (6 months) since July 2003
  - MCHC (3 months) + CAC (3 months) since Jan 2009
- July 2005 – PALS course before Membership
- For trainees starting in July 2009 – Child Protection Course before Fellowship

# The revised Guideline on Postgraduate Training and Accreditation (2007)



# Paediatric Training and Assessment Pathway - Hong Kong

For trainees after July 2001



# Some points to note:

- Basic Training - Join as Associates within 6 months of starting paediatric training
- Higher Training - Apply for Membership within 6 months of qualifying (3 yr Basic Training + passing Intermediate Exam)

# Some points to note:

- Overseas training need prospective approval (apply 3 months before going; otherwise regarded as retrospective application at an administrative charge of \$2000)
- Paediatric experience before joining College accredited training programme – can apply for retrospective accreditation, charge of \$10000

# Some points to note:

- Interrupted training – need approval
  - Should normally be <1 year;
  - For justifiable reasons;
  - Need to extend training if >12 wk/period of interruption, or >24 wk cumulative
  - Should not affect the mandatory modules

# Accreditation of Training Units

Each Unit is accredited to have a number of training teams, headed by 1 or more trainers, supervising at most 3 trainees

2 functioning teams, or neonatology + 1 functioning team  
= 12 months (2 modules\*\* for trainee)

3 functioning teams, or neonatology + 2 functioning teams  
= 18 months (3 modules for trainee)

Neonatology + 3 functioning teams  
= 24 months (4 modules for trainee)

# Conditions for accrediting a training team (1)

- A training team in General Paediatrics: 10-30 patients/day
- A training team in Neonatology: 1400 deliveries/year
- A training team in PICU: HA-designated ICU beds with  $\geq 4$  patients/day
- Training teams in Subspecialties (for the purpose of rotational scheme to fulfill the 18 months of General Paediatric training): 10-30 patients/day



## Conditions for accrediting a training team (2)

### Additional criteria for accreditation:

- clinical facilities;
- teaching activities, case discussion, conferences, journal club;
- clinical audit;
- ambulatory or outpatient activities;
- on-call duties;

(for Higher Trainees) higher level of responsibilities - supervision of junior, administration, research.

# Accreditation of training supervisors & trainers

- Each Unit: One Training Supervisors + many Trainers
- Full time employment in a Training Unit
- Before 16 Mar 2004, all Trainers can supervise Basic and Higher Trainees
- After 16 Mar 2004, Trainers within 3 years of Fellowship can supervise Basic Trainees only; Fellows after 3 years of experience can supervise both Basic and Higher Trainees

# Accreditation of training supervisors & trainers

- Trainers in a General Paediatrics team (or a Subspecialty team in future) must spend >50% of their work in General Paediatrics (or in that Subspecialty)
  - A trainer cannot take trainees in both General Paediatrics and a Subspecialty at the same time

# Accreditation of Training Units

- Each team can supervise 3 trainees (2 Higher + 1 Basic or vice versa). Elective FM trainees or trainees in other training programmes are counted as Basic trainees.
- If a team has >3 trainees, the accredited training period of all trainees is reduced pro-rata.
- During Basic Training, each trainee cannot be supervised by the same trainer for > 1 year
- During Higher Training, each trainee cannot be in a subspecialty for >1 year

# Monitoring

- Trainee-Training team mapping and caseloads are reported to College every 6 months
- Training Units are re-accredited every 5 years
- All changes in the training programme and training centres have to be approved by Academy EC and Council

*Thank you*