

**Forum on the Impact of  
Hong Kong Children's Hospital on  
the future paediatric training and service  
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Views from a chief of service from a  
regional hospital

Dr L Y So

- **Welcome** rotation of trainees to HKCH
  - to gain more experience in managing complex cases,
  - better balance between general paediatrics and subspecialties for most trainees in view of existing imbalance depending on hospital posting.
- Preferably **Higher Trainees** to be better equipped to gain maximum benefit in the rotation.
- Rotation to HKCH may count towards the College requirement of 6 month rotation out of parent hospital.
- Allow **flexibility** for the rotation to other regional hospital and / or HKCH
  - Some subspecialties not yet available in HKCH
  - Avoid delay in meeting training requirements due to technical problems beyond Trainees' control

# Technical considerations of rotation to HKCH

- Each paediatric department in regional hospitals to have 1-2 posts (on top of existing service needs) assigned to rotation to HKCH. Trainees can then take turns to rotate to work and get training in HKCH. Trainees will get a fairer chance to rotate to subspecialties.
- Subspecialties in HKCH have to accept rotation of trainees for as short as 3 months' durations
- Existing trainee exchange among regional hospitals can continue on a centre to centre basis, or centrally arranged if desired or considered feasible.