THE HONG KONG COLLEGE OF PAEDIATRICIANS

(Incorporated in Hong Kong with Limited Liabilities)

Committee for Subspecialty Boards

Application for the Accreditation of the Subspecialty of <u>Clinical Genetics (醫學遺傳</u>科).

1. Declaration:

- 1.1 We, the undersigned, would like to apply for accreditation of the subspecialty of <u>Clinical Genetics</u>, this being a new and different from existing subspecialties.
- 1.2 We submit that the subspecialty is needed in Hong Kong.

Proposed manpower estimates:

(i) _______ (number) of Fellows could be qualified as First Fellow

(ii) _______ (number) of subspecialists existed.

(iii) _______ (number) of subspecialists projected as required locally in the next 10 years (7 Consultant and 7 Associate Consultant Grade Clinical Geneticists; Ref: Zimmern R et al, A Review of Genetic and Genomic Services in Hong Kong, 2011).

- 1.3 This subspecialty also exists in other countries such as (country A) <u>United Kingdom, (country B) Canada</u>.
- (i) <u>190</u> of specialists are required in <u>United Kingdom</u> (i.e. <u>1</u> in <u>333,333</u> (population) Ref: Royal College of Physician consensus 2011; and <u>>90</u> in Canada ie <u>1</u> in <u>400,000</u> (population) Ref: Canadian Medical Residency Guide 2013.

Version 2 Dated: 30-03-2016

2. Justification for establishment of subspecialty:

We have also submitted a descriptive narrative, stating that our subspecialty satisfies all the Criteria laid down by the Academy of Medicine for the recognition of a Subspecialty (Appendix I).

- (i) the subspecialty is needed in Hong Kong
- (ii) the subspecialty is new and different from existing subspecialties
- (iii) the knowledge, skills and practice required by that subspecialty are identifiably distinct and are deemed appropriate and compatible with the practice of paediatrics
- (iv) the subspecialty exists in other countries
- (v) the subspecialty is recognized at the institutional level; with the appointment of academic staff for that subspecialty at the Associate Professor level in a university in Hong Kong or the appointment of a Consultant for that subspecialty in one of the Hospital Authority Hospitals or the Department of Health
- (vi) the subspecialty has the administrative support of one or more constituent Colleges of the Academy.

Please also include justification for the subspecialty to be recognized and that the subspecialty has enough members, activities, a training programme ready for accreditation and unanimous agreement of the programme by all Fellows interested in the subspecialty.

3. Proposed training programme:

- 3.1 We propose the training programme would be <u>3</u> years with <u>a minimum of 30</u> months of full clinical activities.
- 3.2 One (number) proposed training programme within the territory of HK would be adequate at any one time.
- 3.3 We provide local statistics for our subspecialty:
 - a. Estimated patient load in Hong Kong:

i.	Inp	patients - new cases/month:
		<5
		6-10
		10-15
		16-20
		21-25
		26-30
	\checkmark	>30

ii. Outpatient attendance- new cases/month \Box <5

□ 6-10
□ 10-15
□ 16-20
□ 21-25
□ 26-30
✓ >30

- iii. Outpatient attendance- old cases/month $\begin{array}{c|c} & <20 \\ \hline & 21\text{-}40 \\ \hline & 41\text{-}60 \\ \end{array}$
 - □ 61-80
 - □ 81-100
 - ✓ > 100
- iv. Estimated number of cases in general population:

~1,100 acute hospital admissions per 1 million per year (Chung et al. 25th International Congress of Paediatrics, 2007)

i. Designated inpatient bed numbers (N/A if not applicable):

N/A (on Consultation basis)	(please specify number)		
	(please specify type: eg		
	neonataology, haematology-		
N/A (on Consultation basis)	oncology, renal, PICU, etc)		

ii. Designated outpatient attendance per month

100	(please specify number of new cases)
400	(please specify number of old cases)
	(please specify frequency of out
30	patient clinics)

iii. Details of facilities relevant to the subspecialty (eg diagnostic laboratories, electrophysiology laboratories, imaging facilities): (please specify number and type of facilities)

Type of facilities	Number		
Molecular/biochemical	5 (CGS, TYH, QMH, PWH,		
laboratories	PMH)		
Cytogenetic laboratories	2 (CGS, TYH)		
Diagnostic Radiology	Most HA hospitals		
Bioinformatics	2 (HKU and CUHK)		
	· · · · · · · · · · · · · · · · · · ·		

(Some of these facilities will co-localize as a hub in the HK Children's Hospital in 2018)

iv. Details of facilities might need to be given – subspecialty specific:

(e.g. Neonatology: ventilator bed, paediatric surgery etc) (please specify)

Number		
_ 8		
3		
5		
Most HA hospitals		
5		

(Most of these facilities will co-localize as a hub in the HK Children's Hospital in 2018)

		v. The development of this subspecialty requires extra ✓ Yes □ No	resources		
	1	If yes the extra resources include:			
	-	1. Manpower			
		✓ Yes □ No			
		2. Equipment			
		✓ Yes □ No			
		3. Space for use by subspecialty			
		i) Bed space			
		□ Yes ✓ No			
		ii) Laboratory space			
		✓ Yes □ No			
		iii) Rehabilitation space			
		□ Yes ✓ No			
		iv) Others:			
		✓ Yes □ No			
		If yes, please specify:			
		Manpower:			
		Training of genetic counsellors/nurses	and clinical		
		bioinformaticians			
		Lab space and equipment			
		Bioinformatics support system			
		(Ref: Zimmern R et al, A Review of Genetic and Gen	omic Services		
		in Hong Kong, 2011)			
d.	Ma	nnpower			
	i)	Number of subspecialists needed in Hong Kong	14		
	ii)	Number of peer-recognized subspecialists currently			
		practicing in Hong Kong:	5		
	iii)	Number of Paediatricians currently practicing this			
subspecialty 5					
	iv)	Number of trainees that need to be trained to meet	8-10 in		
		the current need	phases		
	v)	Number of qualified trainers currently available	5		
	vi)	Number of trainees that can be accommodated with			
		the existing provision of manpower and facilities	4-5		
	vii)	Number of trainees currently under training in this			
		subspecialty	0		

c.

Resources

3.4 Career structure

Based on the analysis of the above information, we deduce the following:

1.	Number of fully-trained subspecialists in (e.g. neonatology) required for whole of Hong	
	Kong	14
2.	Number of subspecialists trainees required to be trained after their FHKAM (Paediatrics) Fellowship Exit Examination in order to	
	maintain a steady state in the next 10 years (i.e. all fully-trained subspecialists can function	
	full-time in that subspecialty and the "a" can	
	be reached just right), taking into account of retirement and projection of needs in the next	
	10 years, etc.	8-10 in phases
3.	Number of fellows (FHKAM Paediatrics)	-
	required to be working with the subspecialists	
	to reach a desirable level of service and	
	training for the whole of Hong Kong.	2-4
4.	Number of trainees (pre-fellows) required to	2-4 equivalents
	be working in the subspecialty to reach a	(share with
	desirable level of service and training for the	general
	whole of Hong Kong.	paediatrics)
5.	Number of centres or clustered network	2-3 training
	required for this subspecialty in the whole of	centers (1 training
	Hong Kong.	programme)

3.5 We also submit additional information on the justification of establishment of our subspecialty, with reference to:

3.51 Curriculum:

a) Duration of subspecialty training

□ 2 years post-higher training in general paediatrics
✓ 3 years (incorporating 1 year of training in that particular subspecialty during the higher training in general paediatrics and 2 years of extra subspecialty training)

		on (6 months) cialty training		pecified qualification or training
** 16111111 (no suospoi	ciair, training		
			Yes	No
i)			√	
ii)			√	
iii)	M. M	ed. Sc.	\checkmark	
iv)	Other	S	\checkmark	
	Please	e specify	Postgraduate dip	oloma in
			medical genetics	s and/or
		_	genetic counsell	ing
c) Clinical	experience	. e		
i) Minim				
1) 141111111		24 months		
	√	30 months		
	П	36 months		
ii) Maxir		30 months		
II) WILL		24 months		
		30 months		
	□	36 months		
		50 months		
iii) Minir	num numl	per of new out	-patient consultatio	n in that subspecialty during the
		of subspecialty		
		50-100	\mathcal{E}	
		100-150		
		150-200		
	\checkmark	200-300		
		Others		
		P	Please specify	
iw Minis		of old out		in that automorphism during the
		of subspecialty	-	n in that subspecialty during the
WIIC		300-400	y danning	
	П	400-500		
	П	500-600		
	П	600-700		
	ш	000 100		
	✓	700-800		
	√	700-800 Others		
	√	Others	Please specify	
y) Minin		Others F	<u> </u>	k
v) Minin		Others F er of subspecia	Please specify alty clinics per week	k
v) Minim		Others F	<u> </u>	k

vi) Necessit	y of log sheet or log book
✓ Yes	\square No
vii) Availab	ility of checklist for minimum number of special procedures for that
subspe	cialty
☐ Yes	× √ No
* (please su	bmit a separate check list on all special procedures required for the
subspecia	alty – Appendix II)
d) Research ac	etivities required
✓ Yes	\square No
If yes,	
(i)	Clinical research programme
	✓ Yes □ No
(ii)	Basic research programme (eg. laboratory experience)
	✓ Yes □ No
	If yes, please specify minimum duration
	✓ 6 months
	□ 12 months
	Please also specify maximum duration allowed
	□ 6 months
	✓ 12 months
e) Teaching re	quired
✓ Yes	\square No
If yes, ple	ease specify minimum percentage of time
	□ 5%
	✓ 10%
	□ 15%
	Others
	Please specify
Please also	specify maximum percentage allowed
	\Box 10%
	□ 15%
	√ 20%
	□ Others
	Please specify
i)	Undergraduate
,	✓ Yes □ No
ii)	ii)Postgraduate
,	✓ Yes □ No

f) Administration within subspecialty (eg medical audit, involvement of service development, co-ordination & administration within subspecialty)

✓ Yes		No	
If yes,	please	speci	fy minimum percentage of time
			5%
	✓	/	10%
			15%
			Others
			Please specify
Please	also sp	ecify	maximum percentage allowed
			10%
			15%
	✓		20%
			Others
			Please specify
g) Subspeci	alty tra	ining	is done in
J, 1	√	_	two centres (CGS, QMH+TYH and in the future HKCH)
			more than two centres
h) Overseas	trainin	ng req	uired
✓ Yes		No	
If ves wh	nat is th	ne mir	nimum duration?
11 yes, wi		10 11111	3mths
	□	/	6mths
	П		12mths
			others:
			Please specify
If yes, ple	ease als	so des	cribe
(i) setti		o ucs	Tertiary care facilities with a recognized training programme
	_		
(ii) obj	ectives		To broaden clinical and laboratory experience in the diagnosis and
			management of genetic diseases
i) Pre-set ou	ırriculu	ım for	their elective period
☐ Yes	ırrıcuru √		(but preferred options will be advised by Training Director)
⊔ 1 C 3	•	140	(out preferred options will be advised by framing Director)

3.52 Assessment of training: a) Portfolio assessment ✓ Yes □ No If yes, please describe (i)Oral ✓ Yes □ No (ii)Written ✓ Yes □ No (iii) Course work □ Yes ✓ No

3.6 Institution/Functional Training Unit

(v)Published papers

(iv)Postgraduate Degree or Certificate

3.61 Please describe the statistics for EACH Programme:

				Comments
1. Case load per year	(new) 1000 (old) 4000		_	
2. Case profile	* Highly Complex	10	%	
	* Complex	30	%	
	* Intermediate	30	%	
	* Simple	30	%	
a) No. of specialists working in	3-4			
the programme				
b) <u>>50</u> % of time				
working in the subspecialty				
3. No. of sub-specialists (FTE)	3-4			Not single handed,
(FTE = at least 35-50% of				best 3-5
time working in the sub-				subspecialists for
specialty)				cover
4. Having a structure for centre	✓Yes □ No	□NA	1	
e.g. Director on service,				
training or research etc				
5. No. of trainees	8-10 in 10 years			
6. No. of supporting staff	Scientific officer	3-	4	
(Please specify)	Medical	10)	
	technologists			
	Research	1-	-2	
	fellows/assistants	s		
	Genetic	4-	.5	
	counsellors/Nurs	ses		
7. Structured training	√Yes □ No	□NA		
programme				

Yes

Yes

No

No

8. Clinical guidelines/protocols	√Yes	\square No	\square NA	
9. Clinical audit	√Yes	\square No	\square NA	
10. Research projects – No.	2-3			

* Please define clearly each category for your subspecialty, citing clinical examples and the case mix necessary for a viable programme.

*Highly complex – requires advanced knowledge and considerable experience for optimal management, often rare or uncommon conditions demanding sophisticated diagnostic techniques, complicated treatment regimen and multidisciplinary team approach e.g. multiple congenital anomalies in P/NICU, undiagnosed diseases, inherited cancer syndrome, genetic counselling in presymptomatic testing/ incidental findings in next-generation sequencing testing

*Complex – requires special diagnostic tests and careful therapeutic monitoring, or newly identified conditions with diagnosis and treatment under development e.g. emerging genomic disorders, mosaic disorders, genetically heterogeneous conditions including intellectual disability, autism spectrum disorders or complex neurological conditions

*Intermediate – serious/ life-threatening / organ-specific disorders, or conditions requiring extensive diagnostic evaluation e.g. connective tissue disorders, skeletal dysplasia, cardiomyopathies, inherited arrhythmias, rare but well known genetic syndromes and inborn errors of metabolism

*Simple – common conditions that are generally managed at secondary level if hospitalization is required and diagnosis and treatment are straight forward e.g. common genetic syndromes – Down syndrome, Williams syndrome, 22q11.2 deletion syndrome, Prader Willi syndrome, etc.

3.7 Supportive Service considered as mandatory to the programme:

							Comments	
1. Coordination w	ith oth	er rele	evant p					
subspecialties (ple	ease sp	ecify)						
	Yes	No	NA	emergency	elective	On	Other	
						site	location	
e.g.	✓				✓		\checkmark	
PICU/NICU								
Medical	✓				✓		\checkmark	
subspecialties								
Surgical	✓				✓		\checkmark	
subspecialties								
Orthopaedic	✓				✓		\checkmark	
subspecialties								
Oncology	✓				✓		√	
Transplant	✓				√		✓	

Others (please s	pecify	')						
2. Special invest	tianto:	*** C11**	nort					
a. Laboratory	ngator	y sup	роп					
a. Laboratory	Yes	No	NA	emergency	elective	On site	Other location	
Chemical	✓				✓		√	
pathology								
Histo-pathology	✓				✓		√	
Microbiology								
Immunology								
Cytogenetics	√			✓	✓	√		
Molecular	✓			✓	✓	✓		
genetics								
IEM lab	√			✓	✓		✓	
Others (please s	pecify	r)			•	1		
b. Radiology								
US	✓				✓		✓	
CT	✓				✓		✓	
MRI	✓				✓		✓	
Isotope Scan	√				✓		✓	
Others (please s	pecify	·)						
3. Special therap	eutic	suppo	ort					
Radiotherapy		✓						
Interventional		✓						
radiology								
Chemotherapy		✓						
Pharmacy	✓				✓		✓	
Total parental nutrition	✓	✓						
Nutritionist	√				✓		✓	
Clinical	✓				✓		√	
psychologist								
Medical Social	√				✓		✓	
workers	L	L						
Allied health	✓				✓		✓	
Others (please s	pecify	·)						
4. Special managements support	-			=	Parents s	suppor	t groups	

		•	vill be cross accredited to provide training sessions ctical trainings, clinical and laboratory rotation to our
fellows)	,	, F	
a) Number	of trainir	ng staff in	a centre recommended:
	\checkmark	1	
		2-3	
		3-4	
		>4	
		Pleas	se specify
b) In pos	session of	the neces	ssary skills in laboratory, special procedure or basic
science	es practico	e	
	✓ Ye	es 🗆	No
c) Active	in carryii	ng out clir	nical audit and setting up of management guidelines
	✓ Ye	es 🗆	No

Proposed requirement of Trainers (NB this only counts trainers from our College,

under the cross-discipline Genetic and Genomic training programme of the HKAM,

3.8

3.9 Proposed educational activities:

	Location	Frequency
Joint Institute meeting	Inter-institute	Every 3-4 months
Case conference	Local	Every 1-2 weeks
Postgraduate meeting	Local	Every 1-2 weeks
Journal Club	Local	Every 1-2 weeks
Lab meeting	Local	Every 1-2 weeks
g		
X-ray/imaging meeting	Local	Every 3-4 months
		-
Audit	Local /inter-institute	Every year
* other CME Activities	Conference	Every 1-2 years
* (please note that CM	E activities will be required for	or recognized subspecialties)
	rch available in our subspecialty	and existing in HK
(please describe i	n details):	
(i) Clinical	CGS	
` '	Clinical review of Fragile X syn	ndrome in Hong Kong
•	Review of Costello Syndrome in	
•	QMH/TYH (HKU)	in Hong Rong
	Quality of Life Studies for	r Patients with genetic
	syndromes	Tutionts with genetic
•	Clinical spectrum of <i>PIK3CA</i> -re	elated disorders
•	Exome sequencing for undiag	
	Kong	
•	CGS	
•	Genetic study of Retinitis pigme	entosa in Hong Kong
•	QMH/TYH (HKU)	
	Clinical application of whole ge	nome technologies
•	Copy number variation analys	
	Disorders	1
(iii) Epidemiological	CGS	
	Epidemiological study of Prade	r Willi syndrome in Hong
	Kong	
<u>-</u>	Epidemiological study of Ange	elman Syndrome in Hong

		Kong						
		QMH/TYH	(HKU)					
		Physical m						
		Kong						
3.11		of candidates ar on subspecialty)	e potential	programı	me director	(s) for	r HK	(> 50%
3.12	4 (Number) of	candidates are p	ootential tr	ainers of	the progran	nme		
3.13	We submit in details the curriculum of our subspecialty training prounder the headings of knowledge, skills and attitudes as Appendix describing the training programme, please take reference from the hand Guideline on Postgraduate Training & Accreditation published by the Col							
4. We	propose (a) Dr./	Prof		of				
		itution) in						
	(b) Dr.	/Prof		of _				
	(Inst	itution) in			(country)	to	be	external
	asse	ssor of our prog	ramme.					
	ill be discussed				ecialty		ar-	
Co-ordii	nators of the sub	specialty: (in al	phabetical	order)				
Dr. Chu	ng H.Y.B.	Dr. Lam T.S.S.	Am.	Dr. Lo F	C.M.I.	_		
Dr. Luk	H.M.				ıi K. M.	-		

		Kong							
		QMH/TY	H (HKU)						
		Physical	measurement	of Chi	inese (Child	ren i	in H	long
		Kong							
						,			ALL CONTRACTOR OF THE PARTY OF
3.11	1-2 (Number) of time spent of		-	orogramı	ne dire	ctor(s	s) for	HK	(> 50%
3.12	4 (Number) of	candidates are	e potential tra	iners of	the pro	gramı	me		
3.13	We submit in under the headescribing the Guideline on I	ndings of kno training prog	owledge, skil ramme, pleas	ls and a	attitude eferenc	es as se from	App n the	endi e har	x III (on ndbook of
4. We	propose (a) Dr./	Prof		of					
		itution) in							
		/Prof							
	(Inst	titution) in			(coun	try)	to	be	external
	asse	ssor of our pro	gramme.						
	vill be discussed				ecialty				
Co-ordi	inators of the sub	specialty: (in	alphabetical c	order)					
Dr. Chu	ung H.Y.B.	Dr. Lam T.S.	S.	Dr. Lo F	E.M.I.				
Dr. Lul	к Н.М.			Sp. Tsu	2 1/3 11 K. M	 [.			

Contact person (1)	Dr Chung Hon-Yin, Brian
(i) Telephone	2255 4482
(ii) Email	bhychung@hku.hk
Contact person (2)	Dr Lo Fai Man, Ivan
(i) Telephone	2304 2063
(ii) Email	con_cg@dh.gov.hk