



academy focus

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Spring 2014

President's Message

IN THIS ISSUE...

President's Message	1
The 2014 Policy Address (letters on pp. 5-9)	3
The 2014-15 Budget (letter on pp. 9-10)	3
Consultation on the Draft Recommendation of the Working Group on Defining High-Risk Medical Procedures/ Practices Performed in Ambulatory Setting (letter on pp. 10-11)	3
HA Review (letter on pp. 11-13)	4
Lecture on Medical Education	4
Reciprocal Use of Facilities with RSM	4
"Yum cha"	14
Academy Lounge	14
Events attended by the President	14
Academy's Educationalist	19
EGM Notice	20



Dear Fellows and colleagues,

After a busy period preparing for our 20th Anniversary in December last year, we managed to have a short break. Yet another busy year has begun.

In late March, the Academy formed a delegation of specialists and visited the National Health and Family Planning Commission of PRC in Beijing. The Academy has been invited by the Commission since last year to help assess applications for funding of not-for-profit research relating to medical development for healthcare services in the mainland. This is a national project started several years ago, covering different fields of service which would benefit the public at large. The medical profession is one of the areas included in the project. A pilot run was done last year with the Academy leading experts from the two universities. This year, a delegation of around 30 specialists, led by myself, the two Vice-Presidents and Honorary Secretary of the Academy, paid two visits to Beijing. The 2-day visits were packed with busy meetings to assess funding applications relating to different medical specialties. All delegates were formally appointed as Honorary Advisor by the Commission for 3 years during the visit. It is expected that more Fellows would be invited to participate in future and the Academy would involve the different colleges in the nomination process.

Hong Kong is no stranger to the challenges that Mother Nature likes to throw at humanity. Every year we are battered by typhoons during the summer, and during the winter new viruses try their luck here. It is hard to believe that a decade has elapsed since the SARS virus arrived here, shutting down the city, and putting us on a medical 'war footing' that eventually saw the virus contained. Right now we are on the alert for avian influenza viruses — and so far are managing to hold them back.

Earthquakes, floods, new epidemic diseases, fires, industrial accidents, you name it, we've got it in China. Not only have we got it, we have dealt with it. In 2008, the world applauded the Beijing Olympics, but for many of us it was the response to the Yunnan earthquake a few months earlier that really swelled our national pride. The commitment to saving lives and restoring some sort of normality to those who had lost so much brought us all together.

A delegation from Harvard School of Public Health visited the Academy in early April. The delegation was on a mission to discuss and explore the possibility of establishing an academic collaboration with the Academy, initially named as "the Hong Kong Harvard Humanitarian Initiative for Disaster Response".

Through a collective effort, we will take the initiative to establish Hong Kong as an international leader in disaster preparedness and response training. This will be achieved by conducting disaster-related courses and training which is certificate-based locally and regionally, as well as by establishing necessary simulation networks with different levels whilst conveying the stakeholders on detailed need analysis and complex table-top exercises through this Hong Kong-Harvard Collaboration. Over a 5-year period, we are expecting to train 6000 medical and public health professionals engaged in disaster preparedness and response in Hong Kong, China, and the Asia Pacific region. We hope to host the future Institute here at the Academy.

Groundwork started in end of last year through liaising with Prof Michael VanRooyen, the Executive Director of the Harvard Humanitarian Initiative. Being a world renowned expert in humanitarian issues, Prof VanRooyen has been giving advices widely sought by many heads of states in times of disasters. I am privileged to have the opportunity to work with such a prominent figure.

In the following few months, we will be tied up preparing a well-structured proposal incorporating input from our collaborating partners, which includes the Collaborating Centre for Oxford University and the Chinese University of Hong Kong for Disaster and Medical Humanitarian Response, Centre for Global Health, the FXB Centre for Health and Human Rights at the Harvard School of Public Health, and the University of Hong Kong.

A lot of work is required from the beginning. A working group, comprising the major participants, has been formed and many constructive discussions have already been held on the best way to proceed. I am grateful to everyone for their dedication and hard work. We are seeking funding from the Hong Kong Jockey Club for this project.

The Academy hosted a dinner at the Academy building in honour of Dean Julio Frenk of the Harvard School of Public Health to welcome his delegation of 40 plus members. It was well attended by 100 guests, many are the world's renowned specialists in medicine, healthcare professionals, and policymakers. Dean Julio Frenk delivered an inspiring and insightful speech and answered some challenging questions.

I believe many of you have met Dean Julio Frenk and know a lot about him. Dr Frenk served as the Minister of Health of Mexico from 2000 to 2006, where he pursued an ambitious agenda to reform the nation's health system, with an emphasis on redressing social inequality. He is perhaps best known for his work in introducing a programme of universal insurance coverage, known as Seguro Popular, which has expanded access to comprehensive health services for 52 million previously uninsured Mexicans. In September 2008, Dr Frenk received the Clinton Global Citizen Award for changing "the way practitioners and policy makers across the world think about health."



Dr Li presents a plaque and a souvenir to Dean Julio Frenk, Harvard School of Public Health



Dr Li with Dr David Fleming, President-Elect of American College of Physicians

I look forward to reporting progress of the collaboration project with Harvard in the next issue of Focus.

In April, I was in Orlando, Florida USA attending the annual meeting of the American College of Physicians, and participated in an international presidents' forum on CME/CPD and recertification.

I reported that HKAM has been discussing for years the issue of "credentialing" — a process to verify the qualifications, experience, and professional standing of medical/dental practitioners for the purpose of forming a view about their competence, performance and professional suitability to provide safe, high-quality healthcare services within specific organisational environments. The Academy is empowered by statute to look after training and standard of all medical/dental specialists in Hong Kong. At present, we feel that CME/CPD would provide continuous quality assurance. But somehow we may need to consider blending ourselves into the international trend of recertification/revalidation.

Recertification and revalidation is more than an examination. It involves a way of assessing the performance of the individual that is achievable. It needs to be a credible form of assessment to patients; and can be applied to the majority of physicians working in each specialty. Yet there are many challenges, e.g. how to

identify measurable indicators that can be reasonably collected during clinical work; how to collect data that is interpretable and verifiable, and how to make it in a form proportionate and acceptable to all specialty and facilitate comparative audit.

All these would need further deliberation and the Academy Education Committee would continue its discussion in near future.

Lastly, may I wish you all a great, restful Spring and Summer.

*Dr Donald Li
President*

The 2014 Policy Address

The Academy's President is invited by the Government to attend a Policy Address Consultation Meeting towards the end of every year to report on the Academy's work, and express its views on health-related issues. Dr Donald Li represented the Academy at a consultation session on 12 November 2013 after seeking views from Council Members on the points that should be raised. The document is shown on pages 5 to 7 in this issue. The same document can also be found on <http://www.hkam.org.hk/hkam_subm/Policy_address_2014_consult.pdf>.

Following the delivery of the 2014 Policy Address by the Chief Executive in the Legislative Council on 15 January 2014, the Academy Council deliberated on several health-related issues mentioned in the Policy Address. An official response, with comments raised from its members and the various Colleges incorporated, was submitted to the Government on 28 January 2014. The document is shown on pages 7 to 9 in this issue. The same document can also be found on <http://www.hkam.org.hk/hkam_subm/Policy_address_2014.pdf>.

The 2014-15 Budget

The Financial Secretary, Mr John Tsang, presented the 2014-15 Budget to the Legislative Council on 26 February 2014. The Academy Council noted the proposals on the following medical-related areas (highlights recapped below) and decided to submit a response. The response letter is shown on pages 9 to 10. The letter can also be found on <http://www.hkam.org.hk/hkam_subm/Govt_budget_2014.pdf>.

Ageing Population

- Allocate \$176 million annually for extending the Public Transport Fare Concession Scheme for the Elderly and Eligible Persons with Disabilities to cover green minibus trips
- Allocate \$172 million for 1 500 additional places for the Enhanced Home and Community Care Services
- Reserve \$164 million to upgrade 51 social centres for the elderly to neighbourhood elderly centres
- Reserve about \$200 million to raise the subsidy levels for places under the Enhanced Bought Place Scheme and places under the Nursing Home Place Purchase Scheme
- Allocate \$120 million for 950 additional subsidised residential care places for the elderly
- Reserve \$800 million for residential care services vouchers

Health Care

- Invest \$55 billion to build Tin Shui Wai Hospital and Hong Kong Children's Hospital, redevelop Kwong Wah Hospital, Queen Mary Hospital and Kwai Chung Hospital, and expand United Christian Hospital and Hong Kong Red Cross Blood Transfusion Service Headquarters
- Conduct strategic studies on the construction of an acute general hospital in the Kai Tak Development Area
- Plan for the redevelopment of Queen Elizabeth Hospital and the Phase 2 redevelopment of Prince of Wales Hospital
- Conduct study on the voluntary health protection scheme and consider tax concession for subscribers of regulated insurance products
- Reserve \$422 million to study and implement a pilot programme to subsidise colorectal cancer screening for specific age groups
- Increase duty on cigarettes to protect the health of the people
- Allocate \$600 million per year for regularising the Elderly Health Care Voucher Scheme and increasing the annual voucher value to \$2,000

Consultation on the Draft Recommendation of the Working Group on Defining High-Risk Medical Procedures/Practices Performed in Ambulatory Setting

The Working Group on Defining High-Risk Medical Procedures/Practices Performed in Ambulatory Setting set up by the Department of Health and chaired by Prof Raymond Liang, presented some recommendations to the Academy's Council few months ago. Views were then sought from the Academy and its 15 Colleges. It is hoped that the Academy would play a regulating or credentialing role, such as accrediting courses organised for practitioners to make sure they are qualified to perform certain high-risk procedures in ambulatory setting. The Academy's submission to the Working Group is shown on pages 10 to 11 in this issue. The document can also be found on <http://www.hkam.org.hk/hkam_subm/High-Risk_med_procedures.pdf>.

HA Review

The Steering Committee on Review of Hospital Authority, chaired by the Secretary for Food and Health, was set up by the Government to “comprehensively examine HA’s management and cluster arrangement, resources management, human resources management, service levels and overall cost effectiveness”, with the aim of improving the operation of HA “so that it can continue to provide quality services and meet the challenges brought about by social development and ageing population more effectively”.

The Academy, as a major stakeholder in the healthcare field, was invited by the Steering Committee to offer its input. During its January meeting, the Academy Council discussed this issue at length and came up with an official document, which was presented by the President, Dr Donald Li, when he attended a meeting of the Steering Committee on 13 January 2014 with the two Vice-Presidents, Prof TF Fok and Prof CS Lau. The document is shown on pages 11 to 13 in this issue. The document can also be found on <http://www.hkam.org.hk/hkam_subm/HA_review2014.pdf>.

Lecture on Medical Education

Prof Helen Cameron, Director of the Centre for Medical Education and Professor of Medical Education of the University of Edinburgh, delivered two talks at the Academy on 25 March 2014. Topics covered are ‘Educating Physicians in the 21st Century’, and ‘Assessing Physicians Competencies in the 21st Century’. During the talk, Prof Cameron presented what is known about new medical graduates’ readiness for practice in the UK, and what Edinburgh medical school has been doing in this area to improve its graduates’ preparedness for day one on the wards as a Foundation doctor. She also drew on the literature to give an overview of the key principles to use when designing an assessment programme for medical students or trainees, and elaborated the major implications for practice. Over 70 participants attended the lecture, and there were enthusiastic discussion afterwards. Prof Cameron has given other talks to other parties while she was in Hong Kong, and has kindly offered to share the materials of all her presentations with interested members. The presentation materials can be downloaded at the Academy website. Please note that the link will be deactivated by the end of June 2014.



Collaboration on Reciprocal Use of Facilities between the Academy and Royal Society of Medicine (RSM)

The Academy and RSM signed a Memorandum of Understanding (MOU) since 2007 for reciprocal use of facilities by Fellows and members of the two organisations. Under this MOU, RSM will allow HKAM Fellows to use the accommodation facilities (Chandos House <http://www.chandoshouse.co.uk/> only), restaurants, bars and lounges of the RSM when they travel to London. The services will be provided to HKAM Fellows on pay-on-use basis by the user. Fellows who wish to use the facilities of RSM can contact the Academy’s External Affairs Officer by email to <elsa@hkam.org.hk>. The Academy will provide a letter of introduction for authentication of Fellowship status at reservation for facilities. RSM also extends its membership to HKAM Fellows, providing a special joining offer and other benefits, which are detailed on the Academy website. Fellows who are interested in being members of RSM, please check out more details on www.rsmmembership.org and use code (HKAM11) or send your enquiry mentioning you are a Fellow of the HKAM to <membership@rsm.ac.uk>.

Corrigendum

“New College Council Members” (Autumn & Winter issue, 2013). On page 23, under “Hong Kong College of Physicians” Council Members, it should have read “Prof Daniel TM Chan” rather than “Dr Daniel TM Chan” as printed. We regret the error.



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14 November 2013

The Hon. Mrs. Carrie Lam

Chief Secretary

Hong Kong Special Administrative Region

The People's Republic of China

Dear

Carrie

2014 Policy Address Consultation Session 14 November 2013

Thank you for inviting us to express our views regarding the medical profession for the purpose of the 2014 Policy Address.

On behalf of the Hong Kong Academy of Medicine (HKAM), I would like to make a written submission for your reference. HKAM is a statutory body in Hong Kong for the accreditation and training of medical and dental specialists, and is tasked with postgraduate specialist training in the last 20 years. We have always received staunch support from the Government. The Academy consists of 15 specialty colleges. We have collected their views for this consultation exercise, which are summarized below.

I. Primary Care & Preventive Medicine

1.1 There is universal evidence that countries with more trained family doctors in their primary care system are more likely to have better health outcomes as well as lower costs and greater satisfaction. The enhancement of primary care through the practice of family medicine is evident in the Healthcare reform in Hong Kong these recent years. The majority of primary care in Hong Kong is provided by private practitioners. It is important for Hospital Authority to engage private practitioners into the system in order to facilitate and provide support for private primary care doctors. The role of family doctors in the healthcare system in Hong Kong should be regularly reviewed. Funding for education and training of family doctors is the best assurance for quality primary care. Family Doctors must also be involved in the future Health Protection Scheme to direct patients to the appropriate secondary and tertiary care.

1.2 We also suggest the government to consider providing subsidized dental care to special needs group in Hong Kong, such as the institutionalized elderly and the mental/physical handicapped groups. The Dental Project for the elderly in need under the Community Care Fund should be formalized.

Auditor

Crowe Horwath (HK) CPA Ltd

Chief Executive Officer

Mr. Elmer Wan



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1.3 Alcohol is the third leading global risk for burden of disease, and has been classified by the IARC (International Agency for Research on Cancer) of World Health Organization (WHO) as a Group One human carcinogen. Its damaging effect is serious and long-term, affecting not only the individual's health, but also the family and society. WHO has concluded that the 3 most effective measures are (a) to regulate the pricing and taxation of alcohol; (b) limit the availability; and (c) to regulate the advertising, marketing and sponsorship activities. We hope the government would include these measures in its Policy Address.

1.4 On a similar front, the health impact and associated disease burden related to air pollution must be addressed. In fact, outdoor air pollution has recently been classified by IARC as a Group One human carcinogen. To safeguard the health of our population, we hope the government would also target resources to improve our air quality.

2. Training, Services, and Manpower Dental Surgery

2.1 There is a need for an increase in government support for training more dentists and dental specialists to cater for the anticipated increase in the demand for quality dental care among the ageing population in Hong Kong (at present, there are very few dental specialist trainees posts in the public service, e.g. less than 5 in the whole Hospital Authority setting).

Emergency Medicine

2.2 Emergency medical system, in particular pre-hospital care, in developed countries rely significant input from emergency medicine specialists of the region. Currently there are 2 part time medical directors, funded by ambulance command of FSD. With a fleet of over 2000 emergency medical technicians in the ambulance command and more than 200 ambulances, one full time equivalent medical director is considered too insufficient to make significant progress in terms of training and education, audit and supervision. The Medical Priority Dispatch System (MPDS) proposed by the Security Bureau a few years ago should also be supported. MPDS, which triages emergency calls, would prolong the response time of the non-urgent calls but would exchange for a quicker response for the emergency calls.

2.3 Working environment for EM is hostile with overwhelming workload and expectation. The specialty is under great challenge since 2-3 years ago with less and less new medical graduates joining the specialty and residents leaving the specialty before completion of training. Supervision and training are much compromised because of the workload and work pressure. It may need to divert some of the semi/non-urgent cases patients to other disciplines like GP or GOPC doctors. Additional

resources should go to EM as well as disciplines supporting A&E for the low acuity patients.

Family Medicine

2.4 Care needs to be taken to ensure that patient throughput and service delivery demands do not overpower the otherwise good training environment for trainees. The Hong Kong College of Family Physicians will be making a separate submission.

Paediatrics

2.5 We need the commitment from government to putting resources to support the training of future paediatricians and child health related specialties, nursing and allied health workers in the coming few years before the opening of the Children's Hospital in 2018. The training resource is not just training fund for courses and overseas training. We also need to have additional training posts designated for the Children's Hospital and this should be started without delay.

2.6 Hospital Authority is the main training ground for paediatric specialists. There should be closer collaboration between Hospital Authority and the College of Paediatricians in planning such training arrangement which is integrated with service provision.

Psychiatry

2.7 The demand for mental health care has significantly increased in the past decade as a result of increasing understanding and awareness of mental illness and a quest for quality care. Government expenditure on mental health care in Hong Kong remains low compared to other developed economies like Singapore, UK, Australia, Japan and the US.

2.8 The service provision available by specialist psychiatrists in Hong Kong significantly lags behind of most developed countries, which resulted in long waiting time for first appointment and short consultation time for subsequent assessments in the public system.

2.9 The small number of psychiatric community nurses in Hong Kong is insufficient to cope with the need of mental health care for our population.

2.10 Early detection and intervention in the conditions of patients can help the patients to restore functioning.

Other specialties

2.11 With the ageing population, resources should be put into training medical and allied health professionals for the elderly and patients with chronic physical disabilities. Training of specialty nurses in this area will reduce

the stress and demands for medics.

2.12 With rapid advances in clinical medicine with many emerging new technologies in multiple specialties including internal medicine, radiology, surgery and others, advanced skill training is needed and the government should ensure sufficient resources is put into the training and development of specialists in these fields.

2.13 Genetics and Genomics studies are an emerging subject involving Paediatricians, Pathologists, Physicians, Obstetricians and other specialists. Government policy support in its development is essential in the development of this multi-disciplinary specialty.

Child Health Policy

3. The Steering Committee on Population Policy has recently pointed out the major demographic challenges of an aging population for Hong Kong. It is vital for Hong Kong to have a healthy and productive young generation, who should be not only free of diseases but also nurtured to enable them to achieve their full potential. We suggest the Government set up a "Children Commission" to develop a unified child health policy, and to ensure that policy settings by various government bureaux are coordinated and the welfare of children is considered. For instance, immigration policy of allowing Mainland parents to deliver children in Hong Kong must be associated with injection of resources to cope with expected increase in demand for paediatric health services and education services.

Other Suggestions

Collaboration with Mainland China

4.1 The Academy has been in collaboration with the former Ministry of Health to set up a centralized training and accreditation system for specialists on mainland. Pilot projects under the College of Orthopedic Surgeons have shown initial success. We hope the Government would give us support and assistance when necessary. The Consultative Committee on Economic and Trade Co-operation between Hong Kong and the Mainland under the Constitutional and Mainland Affairs Bureau should also consider medical co-operation.

Enhancement of Services

4.2 We suggest the Government consider the following services should resources be available:

- Expanded universal newborn screening;
- Enhancement of genetic services;
- Promotion of public access defibrillators;
- Government subsidy for territory-wide colon cancer screening; and

subsequent colonoscopies

Review of Hospital Authority

4.3 Specialist trainings are mostly conducted in hospitals of the Hospital Authority (HA). Any changes within HA may have substantial impact to the Academy in the organization of its trainings. It is therefore important that Academy be consulted in any HA review.

HKAM looks forward to the opportunity in continuing its statutory role for the betterment of medical and dental training and maintenance of standard, with the ultimate benefit to the people of Hong Kong. We would advocate regulations to support credentialing to ensure only the trained and qualified specialist will be performing the appropriate procedures.

Yours sincerely,


Dr Donald Li
President

Copy to :
Dr Ko Wing-man, BBS, JP
Secretary for Food and Health



28 January 2014

The Honorable Mr CY Leung, GBM, GBS, JP
Chief Executive
Office of the Chief Executive
Hong Kong Special Administrative Region
People's Republic of China
Tamar, Hong Kong

Dear C.Y.,

The 2014 Policy Address

I refer to the Policy Address delivered on 15 January 2014, and would like to submit the following comments on behalf of the Hong Kong Academy of Medicine for your consideration:-

Elderly Services Programme Plan (para 63)

We applaud and support that an Elderly Services Programme Plan be prepared by the Elderly Commission. We view this as the proper direction.

Institutional Care (paras 66-67)

With the planned increase in supply of subsidized residential care places for the elderly, medical support including training of sufficient healthcare workers should be made to match. The visiting medical officer scheme must also be enhanced.

For the planned elderly home services in Shenzhen, the Pearl River Delta will need medical services that support management of non-communicable diseases and chronic diseases especially those common in the elderly population. The HKU-Shenzhen Hospital may provide a useful option for consideration. In Hong Kong, we understand the CUHK teaching hospital is also planning to provide elderly care services.

Healthcare Services (para 71)

The elderly should be encouraged to use the elderly health care vouchers for preventive and health screening, not just for ad hoc symptomatic treatments. The Academy will encourage our Fellows to participate in the voucher scheme and provide preventive healthcare services.

Human Resources in Care Services (para 85)

Besides the "first-hire-then-train" scheme for the younger generation, there should be more structured training for healthcare workers, and they should be a career path for upgrading in the future. Their status in society need also be recognized. Training of existing domestic helpers in medical knowledge to

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take care of those elderly with chronic illnesses or in rehabilitation may also help, as many families in Hong Kong employ domestic helpers to take care of the elderly.

Nurturing the Next Generation (paras 90-117)

We fully support this policy. Hong Kong needs a healthy and productive next generation to support our future aging population. Society's investment in child health has been proven to be the most cost effective measure to achieve this. Last year the Government has shown its commitment to improve child health service by planning to open a new Children's Hospital. We need Government's continued commitment by injecting additional resources to build up a clinical team to staff the Children's Hospital and not just by utilizing existing manpower.

Healthcare (para 173-179)

Quality of public health services

Every year, the "winter surge" phenomenon and periodic increase in emergency patients from infectious disease outbreaks had resulted in excessive occupancy in the acute public hospitals and admission block in the accident and emergency departments. The Government should review the public hospital system to ensure that there is adequate bed provision to cater for the medical needs of an ageing population. In addition, the Government should strengthen the community support for an increasing number of frail elderly patients with multiple chronic / disabling diseases to decrease their dependence on the public hospital system.

The Secretary for Food and Health indicated in his reply to a question raised in Legislative Council in December 2013 that a centre in neuroscience will be set up at the proposed Kai Tak general hospital. The relevant specialty colleges of the Academy should be consulted and will support specialty manpower development to enable successful implementation of the project.

Colorectal cancer screening

We support the pilot screen for colorectal cancer screening; but the manpower for follow-up, training of workforce, credentialing, patient behavioral changes and literacy would need to be considered and studied. Our specialty colleges have been invited to a working group under the Department of Health.

Healthcare manpower planning

As the statutory body in Hong Kong overseeing specialist training, the Academy and its specialty colleges will continue to actively engage in the deliberations of the Steering Committee on Strategic Review on Healthcare Manpower Planning and Professional Development through our representatives in the working groups.

Chinese medicine hospital

The Academy welcomes the proposal of developing a Chinese medicine hospital, and would be happy to provide advice and assistance if needed. A few of our specialist colleges have expressed concerns however. The scope of service has to be thoroughly defined. TCM is more for non-acute care, and definitely not for emergency cases especially those which require surgical procedures. The establishment of TCM as a hospital instead of a department attaching to a western medicine hospital should be governed by regulations/ordinance like other western medicine hospitals. The model for interface between Western and Traditional Chinese Medicine needs to be carefully examined in order to ensure that patient safety is not compromised. This concerns the criteria and mechanism of cross-referral, and in particular the clinical governance of Western doctors working within the Chinese medicine hospital. The principle of evidence-based practice and professional autonomy must be upheld. There must be an authoritative body governing its training and accreditation. We suggest consideration of the following from the start:-

- a) clear definition of "Chinese medicine" / "Chinese medical practice", and the clear mission of the planned "Chinese medicine hospital";
- b) the role and relationship with western medicine in the planned Chinese medicine hospital;
- c) the scope of services the planned Chinese medicine hospital will be providing;
- d) the authority to monitor the standard of training and medical practice, especially if the practice involves western diagnosis, e.g. imaging (CT and MRIS) and western medical procedures such as surgery;

General

Dr Margaret Chan, Director General of World Health Organization, has recently attended the Academy's 20th Anniversary Congress and delivered a keynote lecture. Below are some quotes from her lecture about her views on healthcare, which we think would give some insight on the direction of our healthcare system in Hong Kong:-

- a) No health system can function well without adequate numbers of properly trained, qualified, certified, and motivated staff. I see this first-hand all the time as I visit countries around the world.
- b) In another disturbing trend, fewer and fewer medical graduates are choosing family medicine as their specialty, further adding to the imbalance of skills.

- c) In the absence of family physicians and primary care services as gate-keepers, patients tend to flood emergency rooms, driving up costs even more.
- d) Older people frequently experience multiple co-morbidities requiring holistic treatment.
- e) When no family physician is in charge of overall care, treatment by several specialists increases the risk of duplicate tests and procedures, and dangerous drug interactions, to which the elderly are particularly susceptible.
- The world needs much better governance for health.
 - The world needs more family physicians.

With regard to the situation in Hong Kong, Dr Chan concluded with the following remarks:-

- f) It is an outgrowth of policies, strategies, and systems of financing that were deliberately designed to give publicly-financed health care the dual attractions of top quality and affordable prices.
- g) The quality comes from outstanding schools of medicine, nursing, dentistry and pharmacy.
- h) It further benefits from the Academy's collaboration with specialist colleges abroad, its training of specialists in public hospitals, and the regulatory backing of its accreditation scheme.
- i) In just 20 years, the government's investment in training human resources for health has been paid back in the health of its citizens, making Hong Kong one of the healthiest places on earth.

We hope the above views will be useful to the Government for planning its healthcare policies.

Yours sincerely


Dr Donald Li
President

C:\govt\submission on 2014 policy address 28.1.2014

cc : Dr Ko Wing Man (Secretary for Food and Health)



7 March 2014

The Honorable Mr John Tsang, GBM, JP
Financial Secretary
Financial Secretary's Office
Hong Kong Special Administrative Region
People's Republic of China
Tamar, Hong Kong

The 2014-15 Budget

Dear John,

I refer to the 2014-15 Budget announced on 16 February 2014, and would like to submit the following comments on behalf of the Hong Kong Academy of Medicine :-

Elderly Services (para 121-122)

The Academy welcomes the additional funding for elderly services; and support that an Elderly Services Programme Plan be prepared by the Elderly Commission. With the planned increase in subsidized residential care service, additional funding should be needed for related medical support including training of sufficient healthcare workers in order to match the increased service.

Healthcare Services (para 123-128)

We welcome the funding and commencement of construction of Hong Kong Children's Hospital. Please see enclosed comments from the Hong Kong College of Paediatricians, which is one of the Academy Colleges.

The Academy is glad to note that the recurrent allocation to HA has been increased, and that a grant of \$13 billion was approved for HA to improve and upgrade its facilities.

While supporting the proposed voluntary health protection scheme which will be backed by the government, we think Family Doctors must also be involved in this scheme to direct patients to the appropriate secondary and tertiary care. A gate keeping mechanism is essential.

We totally agree that disease prevention and control is an essential line of defense in public health. The elderly should also be encouraged to use the elderly health care vouchers for preventive and health screening, not just for ad hoc symptomatic treatments.

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We support the pilot screen for colorectal cancer screening. A life course approach to prevention through enhanced primary care is the way forward for better public health. But the manpower for follow-up, training of workforce, credentialing, patient behavioral changes and literacy would need to be considered and studied. All these would have cost implication and require further discussion and planning.

The Academy supports the move to have stronger measures of tobacco control to lower the health risks of the public. We have signed a charter to show our commitment. Gradual increase of the duty on cigarettes should be a reasonable and effective means. One of our constituent Colleges, the Hong Kong College of Community Medicine, would submit their views on this separately.

We hope the above views will be useful to the Government for planning its budget implementation.

Yours sincerely



Dr Donald Li
President

C:\gov\submission on 2014 budget rev A



25 February 2014

Prof Raymond Liang
Chairperson
Working Group on Defining High-Risk
Medical Procedures/Practices Performed
in Ambulatory Setting
Department of Health
Wu Chung House, 17th & 21st Floors
213 Queen's Road East
Wan Chai, Hong Kong

Dear



**Consultation on the Draft Recommendation of
the Working Group on Defining High-Risk medical Procedures/
Practices Performed in Ambulatory Setting**

Thank you for your letter of 28 November 2013 inviting the Academy to comment on the captioned consultation.

The Academy Council discussed the paper at its February meeting. The Academy and its Colleges are broadly in agreement with the recommendations as listed in the consultation paper. The Academy also supports the amendments suggested by individual Colleges. We would like to highlight certain issues:

a) Chemotherapy

Intravenous chemotherapy (cytotoxics) may involve, other than patient safety, public and occupational safety. It is agreed that this should be classified as high-risk;

b) High risk procedures performed in children / definition of 'children'

It was agreed in principle to use the 3 criteria (i.e. the invasiveness of the procedure, anaesthesia / deep sedation needed, patient's medical condition / ASA Class) to define high risk procedures. However, these criteria should be more stringently applied when assessing children, because there is a higher chance of need for deep sedation and of decompensation should complications occur. Also, in view of these possibilities, it is preferable that children should undergo high risk procedures in hospital settings. The College of Paediatricians would revise their suggestion of hospital-only procedures to children below 12 years old. However, it should be noted that the cutoff age is only

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arbitrary because body size and mentality of the patient also matter in their assessment;

c) *Colonoscopy / Polypectomy*

Whether these should be treated as "high-risk" depends on the environment where these procedures are conducted. It is agreed that they should be operated only in a controlled environment with appropriate facilities, and some form of governance/code of practice.

I also enclose for your reference the views submitted by the Academy Colleges, and hope these will be useful to the Working Group.

Yours sincerely,


Dr. Donald Li
President

Enclosure:

1. Submissions from Colleges
 - Hong Kong College of Anaesthesiologists
 - Hong Kong College of Community Medicine
 - College of Dental Surgeons of Hong Kong
 - Hong Kong College of Family Physicians
 - Hong Kong College of Orthopaedic Surgeons
 - The Hong Kong College of Otorhinolaryngologists
 - Hong Kong College of Paediatricians
 - Hong Kong College of Pathologists
 - Hong Kong College of Physicians
 - Hong Kong College of Psychiatrists
 - Hong Kong college of Radiologists
 - College of Surgeons of Hong Kong



13 January 2014

Dr. Ko Wing Man
Secretary for Food & Health
17-19/F, East Wing
Central Government Offices
2 Tim Mei Avenue, Tamar
Hong Kong

Dear ,

**Meeting with the Steering Committee
on Review of Hospital Authority**

Thank you for giving the Academy the chance to express its views on the Review of Hospital Authority (HA). The Academy Council has discussed this at its recent meeting and would like to raise some points, which are supported by all its Colleges, for consideration by the Steering Committee. The views of individual Academy Colleges are also attached for reference.

Governance & Operation

HA Board

The HA Board is by statute a management board but has been functioning more as an advisory body with HA being largely an executive-led organization. There are many reasons for this but one possible contributing factor is the relatively small number of physicians on the Board. The lay members may not have thorough understanding of the technicalities of healthcare services delivery and will not be in a good position to critique the executives' decision or to make relevant and constructive suggestions, let alone taking a more active role in HA's management. As a result, many important issues related to healthcare services are either not discussed or discussed only in a perfunctory manner in the HA board meetings. Physician training, for example, has not been given the right emphasis on the agenda of HA board meetings despite its importance.

In the training of medical specialists in Hong Kong, HA is the largest organisation responsible for the provision of training grounds, and is also the employer of all the trainees and almost all the trainers; whereas the Academy has the statutory responsibilities and authorities of formulating training programmes, accrediting training centres and trainers, and setting the training standard. Given this relationship, HKAM should be represented in the HA Board for both specialty training and future special service development. With

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http://www.hkam.org.hk

an official representative on the Board, the Academy will be in a better position to advise HA on matters related to training and help coordinate training with service delivery.

Medical Services Development Committee (MSDC)

Compared to HA Board, the MSDC needs even more expertise in service deliveries and service development, which are all related to training of medical specialists (and for that matter, other healthcare personnel and manpower need as well). Its composition consists of HA board members who volunteer to sit on the committee, ex-officio members from various government departments including FHB, DH and the Treasury, and the HA executives. Given the inseparable relationship between service development and training, the Academy should also be officially represented in MSDC. If in future the HA Board does include an official representative from the Academy, this representative should invariably sign up to be a member of MSDC.

A clear longer term plan on how HA will tackle the high cost of novel investigations and therapies under “medical services development” is needed. At present, everything is ad hoc. The same applies to maintenance of existing hospitals.

Setting up of a Training Committee under HA Board or a Training Subcommittee under MSDC

At present, each specialty COC has its own training subcommittee with limited communication or coordination across disciplines. This is unsatisfactory as each COC and its training subcommittee will care for its own specialty development and may not make reference to the overall service (and therefore training) need of the community. It is easily understandable that an overarching training committee with Academy involvement will be beneficial to coordinate and prioritize the training plans of the various COCs according to the service needs of Hong Kong. This Training Subcommittee may also see to it that resources are allocated to training according to service need, and formulate long-term strategic manpower and training plans.

Training

Training Budget

The HA budget covers service, training and civil servants healthcare. The training budget allocation should be more transparent. It needs central coordination, e.g. by an overarching training committee for prioritization and allocation to strategic developments. Alternate source of funding from Education and Manpower should be sought as necessary.

Selection of Trainees / Rotation of Training / Protected Time for Training
We have the following suggestions regarding selection of trainees, rotation of training and protected time for training:

- a) Academy Colleges should be in a better position to decide on training priorities and recruitment. It is hoped that HA could establish regular communication channels for the selection and performance of residents.
- b) Many College training programmes involve the need for rotation of training. HA should establish formal process to facilitate inter-hospital rotation to facilitate the training especially when the training capacity of one hospital becomes stressed.
- c) Besides secure job prospect, trainees should be given protected time for training. Trainers should also need protected time to deliver teaching.

The setting up of a central overarching committee is needed to help to coordinate the above

FM Training & Primary Care

Although about 70% of primary care is provided by private practitioners, we think that HA would still have some role in FM training, but may require a major review of the primary care services. Please refer to views of the College of Family Physicians.

Support for Subspecialty Training/Development and Research

The development of specialties and subspecialties is important to cope with the current and future challenges in medical services. For development and training of subspecialty, support like recognition, facilitating local/overseas training, and adequate manpower provision are essential. Support should also be given to research. Please refer to the views from colleges of Emergency Medicine and Radiologists.

Other Issues about Training

Training and service go hand in hand. Currently, the Academy and the 15 Colleges have played a relatively passive role as far as manpower needs and basic/specialist training consultation at the HA is concerned. We think that factors other than service needs, e.g. training capacity, successor planning and specialty development, should be taken into consideration. The execution of training should be more flexible and tailor made for individual specialty needs, and the process of intern allocation should be

reviewed. The Academy should have more input in the training of doctors within the HA system.

Services

Primary Care under Hospital Authority?

GOPD services are currently run by HA while other primary care services such as maternity, child and elderly health services are run by Department of Health (DH). Immunization records of infants and children are not readily available in the HA's Clinical Management System (CMS). One question to consider is whether primary care service should be administered under the HA which is predominantly dealing with secondary and tertiary care. No matter what, all patient records should be linked to the CMS. At the moment, there is no way for a specialist to find out what has been done for a patient at DH clinics.

PPI Initiatives

It seems the current PPI has not been successful especially in management of NCDs. Ophthalmology PPI appears to be somewhat successful. HA may need to review whether the proposed fees for PPI are realistic. Too low a fee may discourage participation from private practitioners.

Manpower

Recruitment and promotion

We suggest that there should be more transparency with staff recruitment, including the specialty of new or replacement staff, and that HA could provide support to facilitate overseas training for trainees and specialists. And as mentioned above, there should be longer term planning on manpower need to cope with medical specialty development. We have some observations relating to manpower:

- a) There should be more transparency with staff recruitment into a specialty, including new or replacement staff.
- b) Promotion is still generally rather restrictive. It is very difficult for an Associate Consultant (AC) to be promoted to Consultant. The process needs to be reviewed and more transparent.

Retirement of Staff

While getting retired specialists returning to offer service may help alleviate the manpower shortage problem, HA may need to consider whether the retirement age should be re-examined, which is in line with the direction of Government in its policy relating to ageing population.

Different way of recognition of the experienced specialists who are willing to offer part-time services should be considered.

Enclosed for your reference are views submitted by some Academy Colleges. We hope our views will be useful for the review exercise.

Yours sincerely,



Dr Donald Li
President

Enclosures

Submission from:

Hong Kong College of Anaesthesiologists
Hong Kong College of Community Medicine
Hong Kong College of Emergency Medicine
Hong Kong College of Family Physicians
College of Ophthalmologists of Hong Kong
Hong Kong College of Otorhinolaryngologists
Hong Kong College of Paediatricians
Hong Kong College of Pathologists
Hong Kong College of Physicians
Hong Kong College of Psychiatrists
Hong Kong College of Radiologists
College of Surgeons of Hong Kong

C:\HA\Submission on Review of HA Jan 2014

Beat yum cha queues and enjoy dim sum in a unique atmosphere

Tired of finding a parking space and waiting in line for a table to have dim sum lunch on weekends? You can try the 'Yum Cha' service at the Academy, available once a month on Sundays! Just book in advance to enjoy good dim sum cuisine served with traditional Chinese tea, and enjoy a relaxing time with your family, friends or colleagues at the Academy's venues. There are ample parking spaces available that are free of charge during this first year of promotion.



The first 'Yum Cha' meals were launched in January and February 2014. They were well supported by Fellows, including Prof Sir David Todd, Dr Kathleen So, current and ex-Council Members. Some College Presidents also booked tables for small gathering of colleagues in their specialties during the festive season.

Interested Fellows please mark the following dates and reserve your table:

11 May, 29 June, 20 July, 17 August, 21 September, 26 October

For reservations or enquiries, please call 2871 8787.

Academy Lounge reopens with new menu after renovation

The Academy Lounge located on 3/F of the Academy Building has now fully reopened after undergoing maintenance and renovation works. The new design is intended to create a more spacious environment for guests to enjoy their food and drinks. The menu has also been updated to include gourmet dishes as well as special features like hand-sliced Iberico Ham besides snacks and sandwiches.

Opening Hours (extended during the promotion period from March to May 2014)

Monday – Friday 12 noon to 11pm

Saturday, Sunday, and Public holidays 9am to 11pm

Fellows and guests may also enjoy light fare and cocktails in a casual, outdoor setting with a beautiful panoramic view of the southern part of the city at the newly refurbished Fellows' Garden. Party and BBQ packages for different occasions are also available for booking



To make better use of space, the gym, with its outdated workout machines, had been demolished. Two new banquet rooms that can serve seminars, workshops and private functions of various sizes are now added to 3/F.

For more information and booking, please contact the Conference Department at 2871 8787 or email to <confdept@hkam.org.hk>.

Events attended by the President

Population forum, 6 January 2014

The Hong Kong Coalition of Professional Services invited the Chief Secretary, Mrs Carrie Lam, to present an overview on the Population Policy on 6 January 2014. The presentation was followed by a panel discussion and open forum. Participants included members of 11 member bodies of the HKCPS. The President, Dr Donald Li, represented the Academy at the forum as one of the panellists.



WONCA World Executive Council Meeting in London, 16 January 2014

Dr Donald Li attended a WONCA World Executive Council Meeting in London on 16 January 2014. Before the meeting, he was asked to pay a tribute to Dr Peter CY Lee, and a moment of silence was observed.

Standard Chartered Hong Kong Marathon 2014 – Leaders Cup, 16 February 2014

Dr Donald Li participated at this year's Standard Chartered Hong Kong Marathon 2014 Leaders Cup on 16 February 2014 in his capacity as Academy's President. Other leaders in the medical field such as Dr WM Ko, Dr CH Leong, and Prof John Leong also participated.

The Leaders Cup is an exclusive, by-invitation-only 1.8 km event for prominent leaders from the Hong Kong community. One of the main purposes this year is to raise funds for "Seeing is Believing", a global programme to help eliminate avoidable blindness. Donations made or raised by the participants were matched by the organiser.



HKDA Spring Dinner, 21 February 2014

Dr Donald Li was invited as Academy President to attend the Spring Dinner of Hong Kong Dental Association on 21 February 2014.



Opening of Baptist Hospital Nuclear Medicine & PET Centre, 22 February 2014

The Academy President was invited to attend the Opening Ceremony of the Nuclear Medicine & PET Centre at the Hong Kong Baptist Hospital as Officiating Guest on 22 February 2014. Dr Chun-Key Law, President of the Hong Kong College of Radiologists was also among the officiating party. The new Centre will provide patients and their families with a more convenient, comfortable environment. It also takes the high-tech service into a new era with the installation of cutting-edge devices. With improved image qualities, the new devices provide patients with speedy and reliable diagnosis and significantly reduce the patients' doses of radiation.



Inauguration Ceremony of the Executive Committee, Medical Society, HKUSU, 7 March 2014

The Academy President recently met leaders of the youngest generation of the medical field when he attended the Inauguration Ceremony of the Executive Committee of HKUSU Medical Society on 7 March 2014. This year marks the 100th anniversary of the Executive Committee, whose missions are serving and representing medical students in the University of Hong Kong, providing an optimal learning environment for medical students, while exposing them to various social issues.



Attending Licentiate doctors dinner, 9 March 2014

The President attended the Spring Dinner of the Association of Licentiates of Medical Council of Hong Kong on 9 March 2014 on behalf of the Academy.



The 11th Scientific Conference of General Practice and Community Health & Chinese Medical Doctor Association's General Practitioner's Sub-association Annual Meeting, 20 March 2014

The President attended the '11th Scientific Conference of General Practice and Community Health & Chinese Medical Doctor Association's General Practitioners Sub-association Annual Meeting' which was held at Capital Medical University in Beijing on 20 March 2014. The conference was organised by Chinese Medical Doctor Association, Chinese Medical Doctor Association General Practitioners Sub-association, School of General Practice and Continuing Education of Capital Medical University, and Fu Xing Hospital of Capital Medical University. Dr Li gave a presentation on the topic of 'Specialist Training in Hong Kong' at the conference.



Visited the Zhongshan Hospital of Fudan University in Shanghai, 22-23 March 2014

Dr Donald Li was part of a team from WONCA which visited the Zhongshan Hospital of Fudan University in Shanghai on 22-23 March 2014 to accredit the GP training centre there, based on WONCA Education Committee's international standards.



HKAM was invited by the National Health and Family Planning Commission (NHFPC) of PRC to coordinate a team of experts from selected specialties specified by the NHFPC to participate in the government fund allocation exercise of non-profit research projects in China (the Public Sector Review Session organised by the Department of Sciences, Technology and Education of the National Health and Family Planning Commission). Twelve specialties including allergy, dental surgery, emergency medicine, general surgery, nephrology, plastic surgery, etc were selected. A similar pilot assessment was conducted last year.

There were two rounds of assessment. The President, Dr Donald Li, together with Vice-President (General Affairs), Prof TF Fok, led a team of 23 experts to meet Vice-Minister Liu Qian and conduct the assessment at the Beijing Convention Center on 21 March 2014. Vice-President (Education & Examinations), Prof CS Lau, led another team of 27 experts for the final second round of assessment on 28 March 2014.

The President, the two Vice-Presidents, and the Honorary Secretary, Dr CC Lau, were appointed as Honorary Advisers by NHFPC for a term of 3 years on behalf of the Academy. A dinner hosted by NHFPC was held afterwards.

During his trip to Shanghai, the President also gave a talk about the work of WONCA at an event organised by Shanghai Medical College of Fudan University, Department of Sciences, Technology and Education of the Shanghai Municipal Commission of Health and Family Planning. At the end of his speech, Dr Li took the opportunity to present the corporate video of the Hong Kong Academy of Medicine to the audience to highlight the work and achievements of the Academy, leaving the mainland colleagues with a lasting impression.



World Health Day 2014, 3 April 2014

The 'World Health Day' is celebrated on 7 April every year to mark the anniversary of the founding of the World Health Organization (WHO) in 1948. Each year a theme is selected for World Health Day that highlights a priority area of public health concern in the world. The theme for 2014 is vector-borne diseases.

To echo World Health Day 2014, the Department of Health is running a territory-wide publicity and public education campaign, launched in April 2014, with various government departments/bureaux and supporting organisations. The Hong Kong Academy of Medicine is one of the supporting organisations.

The President, Dr Donald Li, attended the press conference titled 'World Health Day (WHD) 2014 - vector-borne diseases' on 3 April 2014. Dr Constance Chan, Director of Health, called on the public to stay vigilant and take necessary preventive measures against vector-borne diseases as summer approaches soon, whether in Hong Kong or travelling overseas.



Visit by Delegation from Harvard School of Public Health, 4 April 2014

The Academy hosted a dinner in honour of Dean Julio Frenk and his delegation of around 40 representatives from Harvard School of Public Health (HSPH) on 4 April 2014. The delegation was here after visiting HSPH research sites and partners in Beijing, Shanghai, and Hong Kong. The goal of their trip was to learn more about the successful public health models in China and to better understand its challenges and opportunities, particularly in the context of the four most urgent threats to global well-being: old and new pandemics; harmful physical and social environments; poverty and humanitarian crises; and failing health systems.





HONG KONG ACADEMY OF MEDICINE

Hong Kong Academy of Medicine (“HKAM”) was established by the HKAM Ordinance (Cap 419) passed by the Hong Kong Legislative Council in 1992. HKAM is an independent institution with statutory power to organize, monitor, assess and accredit all medical and dental specialist training in Hong Kong. In addition it provides and accredits continuing medical education and continuous professional development, ensuring compliance for the purpose of specialist registration.

The Academy has set up a new Jockey Club Innovative Learning Centre for Medicine (“HKJCILCM”) in Dec 2013 using simulation and other innovative means of learning for the training of the Academy members and other healthcare professionals in Hong Kong.

Educationalist

Reports to:

Vice-President (Education & Examinations) AND Chairman of Management Committee of HKJCILCM

Major Responsibilities:

To assist the Academy (including HKJCILCM) and its Colleges in the following aspects:-

- Develop educational policy and strategy;
- Undertake in-depth evaluation and review of current training curricula and examination process;
- Provide educational and psychometric inputs in the development of training curricula, courses and examinations, and conducts regular review;
- Design, develop, coordinate and regularly review continuing medical education / continuous professional development activities;
- Design, develop and deliver non-clinical educational programs;
- Develop on-line and other e-learning educational initiatives;
- Conduct research within the domains of medical education and related topics

To undertake any other duties as may be reasonably expected and which are commensurate with the level of the post.

Requirements:

- have a Postgraduate qualification in Medical Education (or a relevant behavioral science), or equivalent;
- have at least 3 years experience as educator in healthcare sector.
- a basic Medical or Nursing degree is an advantage but not essential.

(Please mark “*Application for the post of Educationalist*” on the envelope)

We offer professional development opportunities, attractive remuneration and fringe benefits to the right candidate. Starting salary will commensurate with qualification and experience of the successful candidate. To apply for the post, please send a detailed resume, current / expected salary, and contact email / telephone number to the following address by 30 June 2014:

Chief Executive Officer
Hong Kong Academy of Medicine
99 Wong Chuk Hang Road
Aberdeen, Hong Kong

Information provided by applicants will only be used for recruitment related purposes and will be handled in confidence by authorized personnel. All personal data of unsuccessful candidates will be destroyed after six months from the date of application.

Deadline for Summer 2014 issue

The deadline for contributions for the Summer 2014 issue of *academyfocus* is 30 June 2014. Please send any submissions by e-mail <elmer@hkam.org.hk> or by fax to 2505 5577. All submissions are subject to editorial review and approval. Information supplied, whether or not included in the newsletter, may be posted on the Academy website.

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Prof Gabriel Leung

Prof NK Leung

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25 April 2014

NOTICE IS HEREBY GIVEN that an Extraordinary General Meeting of the Hong Kong Academy of Medicine will be held on **12 June 2014** (Thursday) at **7:30 p.m.**, at the **Council Chamber**, 10th Floor, Hong Kong Academy of Medicine Jockey Club Building, 99 Wong Chuk Hang Road, Aberdeen, Hong Kong.

AGENDA

1. To admit Fellows

By Order of the Council

Dr. Lau Chor-chiu

Honorary Secretary

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