

FOREWORD

Statutory requirement dictates that a medical graduate has to undergo one year of internship before he can be registered as a qualified medical practitioner. This extra year of “internship” after five years of formal medical education underscores the two vital elements in the “making” of a doctor - the accumulation of knowledge (the educational element) and the acquisition of skills (the vocational element).

Vocational training for the specialty of General Practice/Family Medicine, like that of other disciplines, was not formulated overnight but was developed through a gradual process of evolution. Formerly, a medical practitioner wishing to go into general practice simply headed straight into it by setting up his own clinic and starting practice. This was the time-honoured, slow and sometimes painful route of learning by “trial and error”. Provided the doctor is conscientious and can continually update himself by further accumulation of knowledge and acquisition of skills, he/she may eventually be a reasonably good and experienced general practitioner/family physician. Yet, there is the lingering doubt that, try as he/she may, an untrained general practitioner may still not be as good as one who is specifically trained in the specialty.

A formally constituted vocational training programme has to be designed to infuse into the trainee the concepts, the philosophy and the principles as well as the mechanics of General Practice/Family Medicine. The programme must be structured to anticipate problems and technical difficulties encountered in the general practice setting, and to each and overcome the technical difficulties.

Though it is by no means complete and infallible (and will certainly benefit from future revisions and corrections in the light of actual experience), this booklet is nevertheless an important milestone in the medical history of Hong Kong. This is the first time that a pioneering locally-established postgraduate medical institution has produced a vocational training programme for its prospective trainees.

We of the Hong Kong College of General Practitioners, by publishing this booklet, are proud to proclaim to all and sundry our views on the professional standards necessary to practise the specialty of General Practice/Family Medicine in Hong Kong. We do not claim originality in the structure and format of this programme, but it is nonetheless our standard of professional proficiency in the specialty.

The Hong Kong College of General Practitioners is deeply indebted to its Board of Vocational Training and Standards, particularly the chairman, Dr. Natalis Yuen, for conceiving this highly flexible and easily adaptable vocational training programme for General Practice/Family Medicine. To the many overseas and local colleagues who advised us in the preparation of this document, I wish to express our sincere thanks. The hard work put in by the College Secretariat is deeply appreciated.

Dr. Peter C. Y. Lee
Foundation President
The Hong Kong College of General Practitioners
1985

PREFACE TO THE FIFTH EDITION

With the Hospital Authority taking a more active role in Family Medicine Training from late 1990s, there has been a rapid increase in the number of trainees involved in family medicine training. The trainees increased from tens to over 400 within only 5 years' time. On the other hand, our College has been honoured by the concomitant, though not proportional, increase in participation of various hospitals and community based training centers, clinical supervisors and mentors.

With all these changes, our College needs to uphold the standards of training with clearer objectives set. However, flexibility is needed to allow for a more learner-focused program and also maximize the training opportunities for our trainees.

After much discussion and consultation for about a year, our Board had revised the training program and the maximum accreditation period for various specialty rotations to allow more flexibility. We have also refined the training objectives of various stages of training, which will help our trainees and supervisors to devise a more focused learning plan. The training logbook is also revised to enhance trainees' regular review of their training progress and inform our Board closely on their problems. We have also strengthened the feedback mechanism on the training quality to facilitate closer monitoring.

We are thankful for the hard work and contribution of the Working groups on Basic training and Higher training, the trainee representatives group headed by Dr. Benny Chung, comments from clinical supervisors of hospital based or community based training centers, and Board members. Special thanks also to Lucia Tsui, the College Secretariat, who has offered her efficient support.

Dr. Yiu Yuk Kwan
Chairman,
Board of Vocational Training & Standards,
August 2003

PREFACE TO THE FOURTH EDITION

After the establishment of the Hong Kong Academy of Medicine in 1993, medical postgraduate training and education has been shaped, organised and developed in a structured direction. The recognition and establishment of a number of specialty colleges, the beginning of Family Medicine training positions in public hospitals are examples of some new and important developments that have implications towards our training program. It has become timely to review our training Handbook in order to formalise the various changes.

During the course of this review, we are indeed grateful for the comments and input from trainees, hospital-based supervisors, hospital co-ordinators, mentors, community-based supervisors and Board members. The original draft was prepared by Drs Chan Kin Ling and Cindy L.K. Lam. The college secretariat, particularly, our senior executive Kris Lam has provided efficient and effective support. Their contributions are thankfully acknowledged.

Dr. TSANG Chiu Yee, Luke
Board of Vocational Training and Standards,
Hong Kong College of Family Physicians.
August, 1998.

PREFACE TO THE THIRD EDITION

The Hong Kong Academy of Medicine was established in December 1993. The Hong Kong College of General Practitioners is one of the Foundation Colleges and Family Medicine is recognized as a specialty. The Academy has standardized the duration of training for all specialties. A doctor must have had at least six years of formal vocational training in Family Medicine, besides other requirements, in order to be eligible for election to Fellowship of the Hong Kong Academy of Medicine (Family Medicine).

Therefore, it is necessary to extend our Vocational Training Programme in Family Medicine from four to six years. This has come very timely and is in line with the international trend. It has been recognized that one to two years of transitional training from fully supervised to fully independent practice in Family Medicine is highly desirable. Therefore, the last two of the six years of training will be in the form of supervised independent practice.

After much discussion and consultation for more than a year, the Board of Vocational Training and Standards has developed the new six-year programme. The detail programme is described in this Handbook. Needless to say, the revision was not a matter of spreading what can be learned in four years to six years. The first four years of training will be similar to the previous four-year programme which will be renamed as Basic Training in Family Medicine. The two additional years of training will be called Higher Training in Family Medicine. The main objective of the Higher Training is to assure that the trainee will be able to practise as a specialist in Family Medicine on his/her own, and will continue to strive for the highest possible standard of patient care throughout his/her professional life. The two additional years of Higher Training will enable the trainee to develop more specialized skills in Family Medicine like clinical audit, critical appraisal and family counselling. The Higher Training will also put a lot of emphasis in preparing the future family physicians for academic activities like teaching, training and research.

I would like to take this opportunity to thank all the members of the Board of Vocational Training and Standards for working very hard in the year 1994 to bring to birth our new six-year Vocational Training Programme in Family Medicine and this third edition of the Handbook. Special thanks go to members of the subcommittee on Vocational Training: Drs. Barry Bien, Lam Tsan, Albert Lee, Ian Marshall, Keith Tse and Luke Tsang.

Dr. Cindy L. K. Lam
Chairman
Board of Vocational Training and Standards
October 20, 1994

PREFACE TO 2ND EDITION

The formation of the Working Party on Postgraduate Medical Education and Training in October 1986 brought to focus the need for and the importance of postgraduate education and training in Family Medicine. The Working Party's Report in October 1988 recognised Family Medicine as an important specialty. Trainee posts should be created and those who are trained should be distinctly recognised. The Working Party recommended two components of training: namely the hospital rotations over a period of about two year, and training in general/family practice as a senior resident or assistant to a specialist in Family Medicine. The latter training may be located at a University Family Practice Clinic or new Family Medicine Clinics modified and upgraded at regional, district and community levels. It is heartening to note that these recommendations were along the same lines as the Hong Kong College of General Practitioners' Vocational Training Handbook had prescribed in its first edition in 1985.

Since the formalisation of the Vocational Training Programme in 1985, the first batch of five trainees have completed their prescribed training at the Evangel Hospital and Our Lady of Maryknoll Hospital, and have also taken part in the Conjoint HKCGP/RACGP Fellowship Examination in November 1989. The Family Medicine/General Practice Teaching Clinics of the two Universities have also been accredited as centres for advanced general practice/family medicine training. More young enthusiastic doctors have registered as vocational trainees in these locations, even though the number of posts is limited.

The time has come to update the Handbook for Vocational Training based on the feedback and experience of trainers and trainees over the past five years. The major revision is in the requirement for two years of advanced training in an accredited family/general practice training situation instead of one year.

The aims and objectives have remained essentially the same. The contents and details of checklists for training have been modified in certain aspects.

It is anticipated that with the formation of the Academy of Medicine and the review of Primary Care by the government Working Party on Primary Health Care, vocational training in General Practice/Family Medicine will be brought to greater prominence especially by the support of the public sector and the participation of government medical officers. Trainee posts need to be created and exiting facilities need to be upgraded and modified for training. As the academic qualify of the College and the Universities mature and more trainers are identified, the momentum of training will escalate in the new decade.

Finally, I wish to acknowledge the assistance given in the revision of this handbook by Drs. Chan Sui Po, Stephen Foo, Freddie Lau, Clarke Munro, and Dr. Luke Tsang. I am also grateful for the clerical support given by the

College Secretariat.

Dr. Nang-Fong Chan,
Chairman,
Board of Vocational Training & Standards,
January 1990.

PREFACE TO 1ST EDITION

There is increasing consensus that health planners around the world acknowledge that health care systems, built on community-based care, staffed by trained primary-care physicians and complemented by community and hospital services, are the most satisfactory and cost-effective. It is in recognition of this trend that the College was inaugurated and one of its priorities was to establish a vocational training programme and to set standards.

Formulation of a vocational training programme catering for the needs of our community is by no means an easy task and particularly so in the context of limited resources.

Initially there was a proposed pilot scheme for a rotatory residency programme in a hospital setting. But it was soon realised that, even with the generous and enthusiastic support of the hospital authority and its staff, the programme might prove to put too much strain on the hospital services without subsidy or man-power assistance from the government. A more flexible alternative programme had to be formulated.

Realizing the breadth and depth of our discipline and the multiplicity of skills required for its application, a multidisciplinary hospital experience relevant to General Practice/Family Medicine is necessary. The content of each component in different disciplines need to be devised to suit our needs.

We are grateful for the expertise and advice given by our sister college in Australia, Canada and United Kingdom. Colleagues of various specialties, both local and abroad, gave us valuable advice in the compilation of this handbook and are too numerous to be acknowledged individually. However, special thank must be due to Prof. Stuart Donnan of the Chinese University of Hong Kong, Dr. Peter Preston of the University of Hong Kong, Prof. J. H. Barber of the University of Glasgow, Prof. N. E. Carson of Monash University and Dr. W. E. Fabb, Director, Family Medicine Programme of Australia.

This handbook is compiled for the benefit of doctors working in hospitals who may wish to take up General Practice/Family Medicine as a specialty. The educational philosophy of this booklet is to encourage the trainee, whilst working as a resident, to take the initiative to be responsible for his own education and to pursue a course of independence to further this ideal, the College pledges to give every support, advice and guidance.

Dr. Natalis C. L. Yuen
Chairman
Board of Vocational Training and Standards
February 1985