# HONG KONG COLLEGE OF OBSTETRICIANS AND GYNAECOLOGISTS

Aims and objectives of postgraduate training

<u>AIM 1</u> To equip all trainees with a broad range of understanding and competence in obstetrics and gynaecology

Objectives:

- 1. to define a core curriculum
- 2. to integrate the acquisition and assessment of knowledge
- 3. to specify practical skills to be acquired
- 4. to devise systems for acquiring and assessing these skills
- 5. to recommend appropriate attitudes for professional practice
- 6. to devise systems for developing and assessing these attitudes

<u>AIM 2</u> To ensure that professional competence can be acquired flexibly

Objectives:

- 1. to construct a robust system for recording the acquisition of competence
- 2. to define skills which must be evaluated repeatedly
- 3. to design systems for retraining when skills have been lost
- <u>AIM 3</u> To permit every trainee to have opportunities for the acquisition of skills which exceed those in the core curriculum

Objectives:

- 1. to identify special skills which can be acquired by modular training
- 2. to devise mechanisms for validation of other training options
- 3. to integrate all training programmes
- 4. to devise systems for the documentation of learning by experience
- 5. to devise systems for assessing and certifying the acquisition of these skills
- <u>AIM 4</u> To ensure that trainees become equipped for independent professional practice

Objectives:

- 1. to devise a system for the development and annotation of increasing professional responsibility
- 2. to instill the principles and practice of career-long professional development
- 3. to ensure that mechanisms for recording professional development are compatible with systems to be used after the completion of specialist training

- 1. <u>Structure of Training</u>
  - 1.1 The minimum duration of specialist training in obstetrics and gynaecology is six years, comprising four years of basic and two years of higher specialist training. This training can be composed of:
    - i) all 6 years in clinical obstetrics and gynaecology
    - ii) or include a 6 months or 12 months training in clinical medicine outside obstetrics and gynaecology
    - iii) or include a 12 months in research (The requirements shall be stipulated by the Education Committee of the College from time to time.)
  - 1.2 All years of training in obstetrics and gynaecology may be separate or combined, and may be in one or more training units. The duration of each training period in the first four years is 6 months. In the fifth year, the minimum duration of each training period is 3 months. Training periods shorter than stipulated will require prior approval from the College. In the first 4 years of training in obstetrics and gynaecology, the proportion of training in obstetrics and gynaecology should be approximately equal (2 years obstetrics and 2 years gynaecology). In any case, there must be a minimum of 18 months in obstetrics and 18 months in gynaecology. Combined training posts are considered to be 50 % obstetrics and 50 % gynaecology.
  - 1.3 Elective training may be in other medical disciplines relevant to obstetric and gynaecological practice or in medical research. It may be undertaken in any of the six years of training. Elective training may be in one 12-month period or 6-month period. All training should be supervised by Fellows of Hong Kong Academy of Medicine or equivalent, and the programme of training must be structured. A certificate of satisfactory completion of training must be submitted to the College within six months of completion of elective training and in any case before the Exit Assessment.
  - 1.4 All elective and research programmes should be prospectively approved by the Education Committee of the College. Under special circumstances, candidates who have difficulty satisfying this requirement may apply to the College for consideration.
  - 1.5 All clinical training in obstetrics and gynaecology must be in posts recognised by the College, and under the supervision of a trainer approved by the College.
- 2. <u>Criteria for Entry into Training Programme</u>
  - 2.1 Trainees must be doctors who are eligible to register with the Hong Kong Medical Council.
  - 2.2 Trainees must be registered with the College.

## 3. Trainers and Supervision of Training

- 3.1 Trainers are appointed by the College, and are responsible to the College for the proper supervision of trainees under their charge.
- 3.2 Trainers should be specialists and Fellows of Hong Kong Academy of Medicine or equivalent.
- 3.3 Trainers should be working in recognised training units.
- 3.4 Trainers must agree with the philosophy and must follow the protocol of training as defined by the College. Their appointment should be reviewed every year, or when circumstances change.
- 3.5 A trainer should normally not be responsible for more than three trainees.
- 3.6 The trainer has the following responsibilities to the trainee: to
  - 3.6.1 Ensure the trainee is adequately taught
  - 3.6.2 Ensure appropriate and adequate clinical experience is available to the trainee
  - 3.6.3 Ensure the trainee acquires adequate communication skills
  - 3.6.4 Ensure the trainee is an effective member of the clinical team
  - 3.6.5 Ensure the trainee has enough time to study and reflect on his experience
  - 3.6.6 Ensure the trainee recognises and follows professional ethics and codes of conduct
  - 3.6.7 Facilitate the trainee to attend postgraduate education sessions
  - 3.6.8 Act as an advocate for the trainee's welfare
- 3.7 The trainer has the following responsibilities to the College: to
  - 3.7.1 Report any change in the training unit which may affect training
  - 3.7.2 Inspect, ensure the accuracy of, and sign the trainee's log book at regular intervals
  - 3.7.3 Report on the training progress of trainees under his charge
  - 3.7.4 Supervise training and ensure it conforms with the College's philosophy and protocol
- 4. <u>Training Units</u>
  - 4.1 Training units are recognised by the College, and the recognition is reviewed every five years. A training unit may comprise more than one site.

- 4.2 A training unit must have the following:
  - 4.2.1 At least one College appointed trainer
  - 4.2.2 Sufficient training facilities and clinical experience for training purposes. These include inpatient beds, outpatient clinics, access to operating theatres, referral sources, and emergency admissions
  - 4.2.3 Quality assurance programme(s) and a standard of practice acceptable to the College for training purposes
  - 4.2.4 An organised postgraduate education programme suitable for training purposes
- 4.3 Units, which are unable to provide a full range of training experience, must agree to co-operate with the College in organising the full range of training for their trainees.
- 4.4 The number of training posts in a training unit is determined by its ability to fulfill training requirements for each trainee.
- 4.5 The hospital of a training unit must have access to:
  - 4.5.1 A wide range of other specialties, including internal medicine, surgery, anaesthesiology, intensive care and neonatal care
  - 4.5.2 A wide range of supportive services including blood bank, histopathology, cytology, frozen section and autopsy services, chemical pathology, microbiology and organ imaging
  - 4.5.3 Adequate library facilities, including a reading room, reference textbooks, major journals of the specialty, and facilities for reference searching
  - 4.5.4 Adequate classrooms or seminar rooms
- 5. <u>Contents of Training</u>
  - 5.1 The training curriculum is determined by the College from time to time.
  - 5.2 The trainee should have clinical duties, including:
    - 5.2.1 Inpatient and outpatient patient care, operations and consultation with other specialties
    - 5.2.2 Specialised procedures such as ultrasound scanning and colposcopy
    - 5.2.3 Supervision of more junior staff where applicable
    - 5.2.4 Preparation of clinical protocols

- 5.3 The trainee should have teaching duties, including:
  - 5.3.1 Participation in seminars and formal case presentations and discussions
  - 5.3.2 Giving lectures and tutorials to midwives and students
  - 5.3.3 Supervision and clinical teaching of more junior doctors
- 5.4 The trainee should participate in other educational activities, including:
  - 5.4.1 Conferences, workshops, or other postgraduate activities
  - 5.4.2 Clinical research
  - 5.4.3 Publication of articles in learned journals, manuals and text-books
  - 5.4.4 Oral or poster presentations of original work
- 5.5 The trainee should participate in quality assurance activities, including:
  - 5.5.1 Preparation, presentation, and publication of monthly and yearly departmental clinical statistics
  - 5.5.2 Reporting of and presentation of cases with unexpected outcomes
  - 5.5.3 Preparation and presentation at joint specialty meetings
  - 5.5.4 Participation in clinical audit
- 5.6 The trainee should have administrative duties and management responsibility, including organization of departmental activities or projects. They should also receive relevant management training.
- 5.7 Training in research is mandatory. This can be evidenced by publication of a paper or as a supervised elective training programme up to 12 months. The requirements shall be stipulated by the Education Committee of the College from time to time.

- 5.8 The trainee should maintain an up-to-date logbook and present it for review when required.
- 6. Leave Rules
  - 6.1 The trainee should check with the College on the most up-to-date leave rules.
  - 6.2 Trainees are reminded to apply study leave 2 weeks prior to the leave period prospectively. Any study leave application passing the deadline would not be granted. Study leave application should include endorsement from the Chief of Services (COS) and confirmation of acceptance.

## II. <u>BASIC TRAINING</u>

- 1. <u>Training Requirements</u>
  - 1.1 Basic training in obstetrics and gynaecology should be general in character. Exposure to subspecialties is considered beneficial but should not constitute a major part of training during this period.
  - 1.2 Trainees must be resident in hospital whilst on duty.
  - 1.3 Trainees should be on 24 hours call on a 1 in 3 to 1 in 6 rota.
  - 1.4 During training, trainees should on average attend one obstetric and one gynaecological clinic, and one operating session per week (calculated on a 3-hour equivalent per session). Trainees should also on average have a minimum of one day per week of labour ward duty (calculated on a 24-hour equivalent).
  - 1.5 Trainees should attend on average at least one teaching round with a trainer per week.
  - 1.6 Trainees should attend on average at least one postgraduate education session each week. These may be in the form of perinatal and other audit meetings, case presentations, clinical-pathology conferences, journal clubs, research presentations, lectures or seminars.
  - 1.7 Trainees should participate in other appropriate activities as listed in section I-5.

### 2. <u>Completion of Training</u>

- 2.1 Trainees are considered to have completed basic training and can proceed to higher specialist training after completing a minimum of 4 years of supervised training and passing the Structured Oral Examination.
- 2.2 Approval must be obtained from the College within 3 months of commencement of higher specialist training.

## III. <u>HIGHER SPECIALIST TRAINING</u>

- 1. <u>Training Requirements</u>
  - 1.1 Higher specialist training must contain at least 12 months of clinical general obstetrics and gynaecology.
  - 1.2 For the other 12 months, the following programmes may be considered;
    - 1.2.1 Clinical obstetrics and gynaecology, which may be in general or subspecialty areas
    - 1.2.2 Any other programme

Programmes other than clinical training in obstetrics and gynaecology must, under normal circumstances, be approved by the College prospectively.

- 1.3 Trainees in higher specialist training should play a more supervisory role and assume more administrative duties compared to during basic training.
- 2. <u>Training in Clinical Obstetrics and Gynaecology</u>
  - 2.1 Trainees should participate in activities as listed in section I-5.
  - 2.2 Trainees in higher specialist training should be trained in decision making towards management of more complex clinical conditions. The aim is to acquire competence in independent management of more difficult obstetric and gynaecological problems.
- 3. <u>Any Other Programme</u>
  - 3.1 Up to 12 months of higher specialist training may be spent in other programmes approved by the College. These include:
    - 3.1.1 Overseas training
    - 3.1.2 Elective training in other relevant disciplines
    - 3.1.3 Research
    - 3.1.4 Any combination of more than one type of work
  - 3.2 Assessment should be appropriate for the proposed programme and shall be determined by the College at the time of its approval.

# 4. <u>Completion of Training</u>

Trainees are considered to have completed higher specialist training after they have:

- 4.1 Completed a minimum of 2 years of supervised higher specialist training
- 4.2 Passed the remaining components of the Intermediate Assessment
- 4.3 Passed the Exit Assessment
- 4.4 Attained competence in areas defined in the Training Log Book

Trainees who have successfully completed higher specialist training are eligible to be nominated by the College for admission to Fellowship of Hong Kong Academy of Medicine.

5. <u>Flexible Training</u>

Flexible Training with part-time work and extension of training duration can be considered.

The work sessions and on call days should be at least 50% of the full time colleague. For those with duties more than 50% will be counted as 50% only.

Trainees need to apply at least six months before to the Education Committee and each case will be considered individually.

### IV. <u>AUDIT OF CLINICAL COMPETENCE AND EXPERIENCE</u>

#### 1. Training Log Book

- 1.1 This log book is a record of competence achieved, and its main purpose is to document the trainees' attainment of the required competence for a specialist in obstetrics and gynaecology.
- 1.2 Trainees are required to complete the skill targets in the various modules of the log book up to the level appropriate to their stage of training.
- 1.3 Trainers should certify specified areas of competence of the trainees as they are attained.
- 1.4 This log book is a record of experience, and its main purpose is to document the trainee's involvement in clinical and other activities required for training.
- 1.5 Trainees are required to record the various activities and experiences as stipulated and to make detailed reports on 5 obstetric and 5 gynaecological cases, focusing on the critical appraisal and review of the management.
- 1.6 The following serves as guidelines for the minimum amount of logged experience for 6 years of specialist training (logged as chief surgeon);

Procedure	Number
Caesarean section	100
Operative vaginal deliveries (including a minimum of 10 forceps delivery amongst the 50 operative deliveries)	50
Major abdominal surgical procedures	60
Laparoscopic procedures which must include at least 3 types and at least 10 cases in level 3 or above (as defined by the College)	30
Major vaginal surgical procedures	10
Evacuation of uterus (with at least 5 with cervical dilatation)	20
Hysteroscopy (at least 25 should be operative hysteroscopy and at least 5 with cervical dilatation)	50
Colposcopy (at least 10 examinations where there is high grade lesion)	50

#### V. <u>ASSESSMENT</u>

- 1. Part I Assessment
  - 1.1 The subjects of the Part I assessment shall be the basic sciences required for the practice of obstetrics and gynaecology.
  - 1.2 The form of the Part I assessment shall be determined by the College from time to time.
  - 1.3 The Part I assessment may be undertaken if the candidate:
    - 1.3.1 Has registered with the Hong Kong Medical Council at the time of assessment
    - 1.3.2 Has applied to be assessed and paid the appropriate assessment fees
  - 1.4 The Part I assessment may be taken at any time either before or during the period of training.
- 2. <u>Intermediate Assessment</u>
  - 2.1 The Intermediate Assessment assesses whether:
    - 2.1.1 The candidate has acquired supervised clinical training as required by the College.
    - 2.1.2 The candidate has acquired the basic clinical knowledge and skills in general obstetrics and gynaecology, and its related disciplines.
    - 2.1.3 The candidate has acquired the appropriate problem solving and decision making skills in general obstetrics and gynaecology.
  - 2.2 The form of the Intermediate Assessment shall be:
    - 2.2.1 One or more written examinations on obstetrics, gynaecology, and related subjects.
    - 2.2.2 One or more viva voce examinations. The format shall be stipulated by the College from time to time.
  - 2.3 The Intermediate Assessment may be taken if the candidate:
    - 2.3.1 Is a registered trainee, and has satisfactorily completed the required periods of training and
    - 2.3.2 Has passed the Part I Assessment at least 6 months before the Intermediate Assessment and

- 2.3.3 Has completed at least 2 years of basic obstetric and gynaecological training prior to sitting the Structured Oral Examination component of the Intermediate Assessment. In the case of the other component of the intermediate assessment, the candidate must have completed at least 4 years of clinical obstetric and gynaecological training.
- 2.3.4 The candidate has applied to the College to be assessed and have paid the assessment fees.
- 2.3.5 The maximum interval allowable between attainment of eligibility and the first attempt of Structured Oral Examination is three years. If a candidate has not attempted the Structured Oral Examination for the first time more than three years after attainment of eligibility, the candidate shall be required to undertake additional two years of Basic Specialist training in clinical Obstetrics and Gynaecology in order to be eligible again to sit the Structured Oral Examination.
- 3. Exit Assessment
  - 3.1 The aim of the Exit Assessment is to assess whether the candidate is suitable and capable of practicing as a specialist in obstetrics and gynaecology.
  - 3.2 The Assessment shall be a review of the whole training period including the logged experience and overall competence. It will include a viva voce assessment of the candidate. The duration of the assessment should be no less than 30 minutes.
  - 3.3 The Exit Assessment may be undertaken if the candidate has:
    - 3.3.1 Passed all components of the Intermediate Assessment and
    - 3.3.2 Completed satisfactorily at least 2 years of Higher Specialist training by the preceding 31st December for the January/February assessment, or by the preceding 30th June for the July/August assessment *and*
    - 3.3.3 Applied to the College to be assessed and have paid all relevant assessment fees.
    - 3.3.4 The maximum interval allowable between attainment of eligibility and the first attempt of Exit Assessment is three years. If a candidate has not attempted the Exit Assessment for the first time more than three years after attainment of eligibility, the candidate shall be required to undertake additional two years of Higher Specialist training in clinical Obstetrics and Gynaecology in order to be eligible again to sit the Exit Assessment.

## 4. Action Plan Assessment

4.1 The trainer shall complete and submit action plan assessment forms to the College periodically.

### 5. Workplace Based Assessment

- 5.1 Competency based training is evaluated by regular workplace based assessment tools.
- 5,2 Mini-Clinical Evaluation Exercise (mini-CEX) and Case-based discussion (CbD) assess the breath of the cases encountered during daily practice.
- 5.3 Non-Technical Skills for Surgeons (NOTSS) assesses non-technical characteristics during gynaecological surgery and labour ward duties.
- 5.4 Objective Structured Assessment of Technical Skills (OSATS) assesses the technical skills on certain procedures. Formative OSATS aims at providing constructive feedback throughout the learning process. Summative OSATS evaluates if pre-defined level of competence is reached.
- 5.5 Team Observation (TO) and Self Observation (SO) is a multi-source and self-feedback of the performance in the workplace.