

立法會
Legislative Council

LC Paper No. CB(2)1968/18-19

(These minutes have been
seen by the Administration)

Ref : CB2/PL/HS

Panel on Health Services

**Minutes of special meeting
held on Tuesday, 19 March 2019, at 5:00 pm
in Conference Room 2 of the Legislative Council Complex**

- Members present** : Dr Hon Pierre CHAN (Chairman)
Prof Hon Joseph LEE Kok-long, SBS, JP (Deputy Chairman)
Hon Tommy CHEUNG Yu-yan, GBS, JP
Hon WONG Ting-kwong, GBS, JP
Hon CHAN Kin-por, GBS, JP
Hon YIU Si-wing, BBS
Hon CHAN Chi-chuen
Hon CHAN Han-pan, BBS, JP
Hon Alice MAK Mei-kuen, BBS, JP
Dr Hon KWOK Ka-ki
Dr Hon Fernando CHEUNG Chiu-hung
Dr Hon Elizabeth QUAT, BBS, JP
Hon POON Siu-ping, BBS, MH
Dr Hon CHIANG Lai-wan, SBS, JP
Hon CHU Hoi-dick
Hon CHAN Hoi-yan
- Members absent** : Hon Mrs Regina IP LAU Suk-ye, GBS, JP
Hon Charles Peter MOK, JP
Dr Hon Helena WONG Pik-wan
Hon SHIU Ka-fai
Hon SHIU Ka-chun
Hon KWONG Chun-yu
- Public Officers attending** : Prof Sophia CHAN Siu-chee, JP
Secretary for Food and Health

Ms Elizabeth TSE Man-yee, JP
Permanent Secretary for Food and Health (Health)

Miss Linda LEUNG Ka-ying
Principal Assistant Secretary for Food and Health (Health) 2
Food and Health Bureau

Dr LEUNG Pak-yin, JP
Chief Executive
Hospital Authority

Dr F C PANG
Head of Human Resources
Hospital Authority

Dr Tony KO
Director (Cluster Services)
Hospital Authority

Mr Lawrence POON
Chief Manager (Nursing)
Hospital Authority

Attendance : *Session One*
by invitation

Association of Hong Kong Nursing

Mr CHENG Yat-loong
Secretary

Hong Kong Allied Health Professionals & Nurses Association

Mr Michael Felix LAU Hoi-man
Officer

Mr TAM Hoi-pong

Ms Scarlett PONG Oi-lan, Sha Tin District Council Member

Hong Kong Medical & Health Chinese Staff General
Association

Mr LEE Mei-shing
Chairman

Democratic Party

Mr Leo CHU
Member of Healthcare Services Working Group

Mr LEUNG Kwok-hung

League of Social Democrats

Mr NG Man-yuen
Chairman

Mr CHOW Nok-hang

Mr WONG Ho-ming

Hospitality Authority Supporting Grades Staff Association

Ms NG Wai-ling
Chairwoman

Liberal Party Youth Committee

Mr CHAN Kin-yip
Vice Chairman

趙寶琴女士

Hong Kong Patients' Voices

Mr LAM Chi-yau
Chairman

Civic Party

Mr LEE Ka-ho
District Developer

Mr Andrew NG

Hong Kong Non-emergency Ambulance Transfer Service Association

Mr CHEUNG Kin-kwok
Secretary

石硤尾邨居民協會

Mr KWOK Wai-shing
Chief Executive

Mr Andrew LEE

Hong Kong Alliance of Patients' Organizations Ltd.

Mr YUEN Siu-lam
Chairman

Business and Professionals Alliance for Hong Kong

Dr PONG Chiu-fai
Convenor of Hygiene and Health Committee

Health In Action

Mr Anthony LAI Chun-kin
Research and Advocacy Coordinator

Labour Party

Mr Kwok Wing-kin
Chairman

Little Baby Concern Group

Dr May TSE Mei-yee
Representative

小BB關注組

Miss Joanna LI
Accountant

Hospital Authority Workers General Union

Dr LAM Kuen
Chairperson

Hong Kong Confederation of Trade Unions

Mr NG Koon-kwan
Organizing Secretary

The Hong Kong Stroke Association

Mr LAU Kim-hung
President

Session Two

Miss LI Wing-yin

The Hong Kong Medical Association

Dr SHEA Tat-ming
Council Member

Dr CHAN Siu-kim

Island West Dynamic Movement

Mr Sam YIP Kam-lung
Convenor

Dr Ernie LO Chi-fung

Mrs Mary Catherine CHENG

Mr CHAN Ka-long

The Lion Rock Institute

Mr NG Kin-wah
Event Officer

The Hong Kong Association of The Pharmaceutical Industry

Ms Sabrina CHAN So-kuen
Senior Executive Director

Dr LEUNG Kin-ping

Mr KO Yiu-cheung

Eastern Renal Support Association

Ms LOK Wai-yau
Chairperson

Neo Democrats

Mr FUNG Kwan-on
社區主任

Cancer Patient Alliance

Mr CHAN Wai-kit
Chairman

Ms WONG Foo-oi

WeCareBill Foundation

Ms YIM Hang-wah
Volunteer

Hong Kong Physiotherapy Association Limited

Ms Anna Bella SUEN
Honorary Secretary

香港民粹主義前線

徐日強先生
籌委

Mr Roy PUN Long-chung

Patients' Alliance on Healthcare Reform

Mr Kelvin LEE Kwok-kwong
Representative

Society for Community Organization

Mr PANG Hung-cheong
Community Organizer

Our Hong Kong Foundation

Dr Pamela TIN
Researcher

Dr LEE Hoi-kan

Hong Kong Hospitals Employees Association

Mr TANG Tak-ho
Chairman

Clerk in attendance : Ms Maisie LAM
Chief Council Secretary (2) 5

Staff in attendance : Miss Kay CHU
Senior Council Secretary (2) 5

Ms Priscilla LAU
Council Secretary (2) 5

Miss Maggie CHIU
Legislative Assistant (2) 5

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I. Corporate governance and manpower situation of the Hospital Authority

[LC Paper Nos. CB(2)965/18-19(01) to (02), CB(2)1003/18-19(01) and CB(2)1032/18-19(01)]

At the invitation of the Chairman, Secretary for Food and Health ("SFH") briefed members on the corporate governance and manpower situation of the Hospital Authority ("HA"), details of which were set out in the Administration's paper (LC Paper No. CB(2)965/18-19(01)).

2. Members noted the background brief entitled "Operation and manpower of the Hospital Authority" prepared by the Legislative Council Secretariat (LC Paper No. CB(2)965/18-19(02)).

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Presentation of views by deputations

3. The Chairman reminded the organizations and individuals attending the meeting that they were not covered by the protection and immunity provided under the Legislative Council (Powers and Privileges) Ordinance (Cap. 382) when addressing the Panel. At the invitation of the Chairman, a total of 52 organizations and individuals presented their views on the corporate governance and manpower situation of HA. A summary of their views is in the **Appendix**. Members also noted the five written submissions from organizations and individuals not attending the meeting.

Discussion

The Administration's response to the views expressed by deputations

4. Responding to the views expressed by the deputations, SFH and Chief Executive, HA ("CE, HA") made the following points:

- (a) on financial resources front, the Administration had introduced a new arrangement in 2018-2019 by undertaking to increase the recurrent funding for HA progressively on a triennium basis having regard to population growth and demographic changes. Separately, \$200 billion and \$270 billion had been earmarked for the implementation of the first and the second 10-year Hospital Development Plan respectively to enhance the healthcare infrastructure so as to meet the projected service demand up to 2036;
- (b) in view of the healthcare manpower constraint of HA, the Administration had substantially increased the number of University Grants Committee ("UGC")-funded degree places in healthcare disciplines. Efforts would continuously be made to explore with the medical profession on measures to incentivize more eligible non-locally trained doctors to serve in the public sector, such as reducing the period of assessment for those medical practitioners with specialist status who passed the Licensing Examination. Separately, the new round of manpower projection exercise to update the demand and supply of healthcare manpower had already kick-started;
- (c) HA would continue to implement various measures to attract and retain its medical manpower, such as rehiring retired doctors, recruiting part-time doctors and non-locally trained doctors under limited registration, providing more training

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opportunities and enhancing promotion prospects. Separately, HA would conduct manpower requirement projections having regard to a set of service workload projections across the spectrum of HA services and would continue to receive views of the frontline staff through the established mechanism;

- (d) there was a need to strike a proper balance when introducing public-private partnership in the delivery of healthcare services for the purpose of alleviating pressure on the public healthcare system due to manpower shortages and surge in demand, as a booming private market might result in brain drain from the public to private sector;
- (e) staff complaint and appeal procedures were in place in HA to ensure that all complaints would be handled in a fair and impartial manner. There was established communication mechanism for staff to voice out their views and concerns on staff issues; and
- (f) membership of the HA Board was appointed by the Chief Executive under the Hospital Authority Ordinance (Cap. 113). The current composition comprised 24 non-public officers (including the Chairman), three public officers and one principal officer (i.e. CE, HA). The HA Board gave leadership and strategic direction, managed and controlled HA corporate governance and public hospitals, supervised the executive management, and reported on HA's performance. Senior executives (except CE, HA) were remunerated in accordance with the HA pay scale. No annual bonuses were offered to senior executives.

Corporate governance and management

5. Prof Joseph LEE remarked that despite the efforts made by the Administration and HA to improve the public healthcare services and retain healthcare personnel, there were still concerns about the long waiting time of public healthcare services, healthcare manpower constraint, poor governance of HA leading to workplace bullying, heavy workload faced by frontline staff and frontline professional staff being burdened with an excessive amount of paperwork. Pointing out that HA was provided an additional recurrent funding in the 2019-2020 Budget to implement various enhancement measures, he was of the view that it was incumbent upon the Administration to monitor the performance of HA and ensure the proper use of the additional funding by HA to improve the working environment

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Admin/
HA

of public hospitals as well as the public hospital services. He requested the Administration/HA to provide in writing by June 2019 the action plan of HA for using the following additional funding earmarked in the 2019-2020 Budget: (a) the \$721 million for boosting the staff morale and retaining talents of HA; (b) the \$400 million for expanding the scope of HA's Drug Formulary; and (c) the \$5 billion for expediting the upgrading and acquisition of medical equipment of HA.

6. Concurring that there was a need for HA to improve its governance, Dr CHIANG Lai-wan suggested that HA should consider engaging an external consultant to conduct a comprehensive review on how to enhance its staff management. Separately, the Administration should allocate more resources for HA to meet the service demand.

Service planning

7. The Chairman pointed out that there was a drop in the total number of beds in public hospitals over the past some 10 years in the face of a growing population, from 29 000-odd in 2003 to 28 000-odd in 2018. The high inpatient bed occupancy rate of the United Christian Hospital, Kwong Wah Hospital and Princess Margaret Hospital was due to the decrease in the number of their hospital beds. Citing United Christian Hospital as an example, the Chairman drew members' attention to the fact that the population of the catchment area of the Kowloon East Cluster had increased by about 60 000 in recent years with the establishment of a number of public housing estates. In response to the Chairman's enquiry about the senior executive in HA who was responsible for the planning and development of public hospital services, SFH advised that \$200 billion had been earmarked for the implementation of the first 10-year Hospital Development Plan to provide, among others, around 5 000 additional beds, so as to cater for the growing healthcare service demand. On the other hand, HA had formulated a strategic plan for guiding HA's development and planning to address various key challenges over a span of five years ahead. Each year, an annual plan was drawn up to set out the action plan for achieving the objectives of the strategic plan in a financial year.

Staff retention

8. While welcoming the pay enhancement proposal for Patient Care Assistants, Operation Assistants and Executive Assistants, Ms Alice MAK was of the view that the proposed unified pay rise of 8% should also be applied to other supporting staff, such as Healthcare Assistant and Workman who were employed before 2000. Mr POON Siu-ping was concerned that the difference in the remuneration of HA supporting staff

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employed before and after 2000 had led to the situation of different pay for the same work.

9. CE, HA advised that a consultancy firm was appointed earlier by HA to study the manpower issues of Patient Care Assistants, Operation Assistants and Executive Assistants. Upon the completion of the Phase 1 study which focused on pay enhancement, the second phase of the consultancy study, which was targeted to be completed around end-September 2019, would provide more in-depth study of the supporting grades structure, recruitment and retention strategies as well as training strategies for career development in order to attract and retain staff in the long run. Mr POON Siu-ping urged HA to expedite the second phase of the consultancy study.

10. Dr CHIANG Lai-wan considered that the Administration should further increase the number of UGC-funded nursing training places to address the nursing manpower shortage in HA. Ms Alice MAK cast doubt on the effectiveness of recruiting agency nurses and supporting staff in alleviating work pressure of frontline staff. In her view, HA should instead further enhance the remuneration of frontline healthcare staff so as to attract and retain talents. CE, HA advised that agency nurses were engaged to assist full-time and part-time nurses in patient care. Separately, Locum Office was established in November 2018 to centrally manage employment of potential talents from the healthcare industry on a part-time basis for short-term, flexible engagement on need and ad hoc basis for relieving the pressure of manpower shortage and to supplement HA full-time workforce.

11. Ms CHAN Hoi-yan remarked that while there was an increase in the funding to HA in recent years, HA had failed to solve the medical and nursing manpower shortage problems. She was particularly concerned about the high attrition rate of full-time doctors in the specialties of Ophthalmology, Radiology, Obstetrics and Gynaecology. At her invitation, Mr Michael Felix LAU of the Hong Kong Allied Health Professionals & Nurses Association said that the poor governance and inefficient resource management in HA were the root causes of the long-standing shortfall of nurses in public hospitals. In his view, HA should put in place effective measures to attract and retain nursing staff rather than recruiting agency nurses to meet the manpower needs. In the long run, HA should implement five-day work pattern and formulate an appropriate nurse-to-patient ratio.

12. Ms Alice MAK and Dr CHIANG Lai-wan expressed grave concern about the existing workplace bullying took place in public hospitals, leading to low staff morale among the healthcare personnel. Ms Alice

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MAK called on HA to review its Staff Development Review Mechanism for assessing staff performance.

Supply of non-locally trained medical practitioners

13. To address medical manpower shortage in HA, Ms Alice MAK called on the Administration to consider exempting internship assessment for non-locally trained medical practitioners with specialist status who passed the Licensing Examination. SFH advised that the Administration would maintain close communication with the Medical Council of Hong Kong and different stakeholders of the medical profession in this regard.

14. Dr CHIANG Lai-wan pointed out that non-locally trained medical practitioners were once an important source of doctor supply in Hong Kong, when medical qualifications of recognized Commonwealth countries were recognized by the Medical Council of Hong Kong for registration before September 1996. She suggested the exemption from the internship assessment for those non-locally trained medical practitioners who had been in employment with HA for certain years. Non-locally trained medical practitioners who graduated from medical schools of renowned overseas universities should be qualified for full registration as medical practitioners in order to encourage more Hong Kong students studying medicine overseas to return to and practise in Hong Kong.

II. Any other business

15. There being no other business, the meeting ended at 9:02 pm.

Council Business Division 2
Legislative Council Secretariat
10 October 2019

Panel on Health Services

**Special meeting on Tuesday, 19 March 2019, at 5:00 pm
in Conference Room 2 of the Legislative Council Complex**

**Summary of views and concerns expressed by organizations/individuals on
Corporate governance and manpower situation of the Hospital Authority**

No.	Name of deputation/individual	Submission / Major views and concerns
<i>Session One</i>		
1.	Association of Hong Kong Nursing	<ul style="list-style-type: none"> • LC Paper No. CB(2)965/18-19(03) (Revised)
2.	Hong Kong Allied Health Professionals & Nurses Association	<ul style="list-style-type: none"> • Expressed grave concern that the senior executives outnumbered the frontline staff in the Hospital Authority ("HA") and the pay scale of senior executives was on the high side. The high turnover rate of frontline healthcare staff was due to the poor working environment. • Called for increasing the representation of frontline healthcare staff on the HA Board and improving the pay scale of frontline healthcare staff.
3.	Ms Scarlett PONG Oi-lan, Sha Tin District Council Member	<ul style="list-style-type: none"> • Considered that pharmacies of public hospitals should focus to serve inpatients. Consideration should be given to the implementation of separation of prescribing from dispensing of drugs at public outpatient clinics and ambulatory care centres.
4.	Hong Kong Medical & Health Chinese Staff General Association	<ul style="list-style-type: none"> • LC Paper No. CB(2)965/18-19(04)
5.	Democratic Party	<ul style="list-style-type: none"> • LC Paper No. CB(2)1167/18-19(01)
6.	Mr LEUNG Kwok-hung	<ul style="list-style-type: none"> • The pay scale of HA's senior executives was on the high side. There was a need to narrow the pay difference between the management staff and frontline healthcare staff in HA. • The Administration should increase the public healthcare expenditure as the proportion of healthcare expenditure to Gross Domestic Products remained low.
7.	Mr CHOW Nok-hang	<ul style="list-style-type: none"> • To address the shortage of medical and nursing manpower, the Administration should consider (a) improving the remuneration package for doctors and nurses serving in the public hospitals; (b) increasing the number of healthcare training places; and (c) relaxing restrictions on the registration and practice of non-locally trained doctors in Hong Kong. • District health centre should provide evening outpatient services to strengthen the provision of primary healthcare services. HA should also enhance healthcare service for residents in nursing homes in order to obviate their admission to Accident and Emergency Department at public hospitals for receiving medical treatment.

No.	Name of deputation/individual	Submission / Major views and concerns
8.	Hospitality Authority Supporting Grades Staff Association	<ul style="list-style-type: none"> • Expressed concern about the manpower shortage and heavy workload of supporting staff in HA. While welcoming the pay enhancement for Patient Care Assistants, Operation Assistants and Executive Assistants, the deputation also called on HA to offer pay rise for other supporting staff, such as Healthcare Assistant, Workman II and Clerical Officers. • HA should review the structure and manpower ratio of its supporting grades staff, as well as enhance the remuneration package and career prospect of the supporting staff.
9.	Liberal Party Youth Committee	<ul style="list-style-type: none"> • The Administration should encourage more non-locally trained medical practitioners to practise in Hong Kong. The deputation considered that non-locally trained medical practitioners who graduated from renowned overseas medical schools should be allowed to be registered as a medical practitioner with limited registration, and those medical practitioners with limited registration could be qualified to be registered as medical practitioners with full registration if they had served in public hospitals or the medical schools of the two universities for five years.
10.	趙寶琴女士	<ul style="list-style-type: none"> • Expressed grave concern about the workplace bullying in public hospitals and the lack of mechanism in HA to redress staff grievances relating to their employment.
11.	Hong Kong Patients' Voices	<ul style="list-style-type: none"> • Membership of HA Board should comprise at least 20% to 25% of members representing patient groups, as well as members representing frontline doctors and nurses. • Expressed concern about the workplace bullying in HA. • The development of private hospitals would draw more healthcare personnel to the private market, leading to brain drain from the public sector.
12.	Civic Party	<ul style="list-style-type: none"> • LC Paper No. CB(2)1028/18-19(01)
13.	Mr Andrew NG	<ul style="list-style-type: none"> • To address medical manpower shortage, the Administration should relax the requirements on licensing examination and assessment in order to attract more non-locally trained doctors to practise in Hong Kong.
14.	Hong Kong Non-emergency Ambulance Transfer Service Association	<ul style="list-style-type: none"> • LC Paper No. CB(2)965/18-19(05)
15.	石硤尾邨居民協會	<ul style="list-style-type: none"> • The future general outpatient clinic under the Shek Kip Mei Health Centre to be redeveloped and the temporary clinic to be set up during the redevelopment should provide outpatient services at evenings, Sundays and public holidays to address the demand for primary healthcare services in the district.
16.	Mr Andrew LEE	<ul style="list-style-type: none"> • Expressed concern that the provision of public general outpatient service and Accident and Emergency ("A&E") service

No.	Name of deputation/individual	Submission / Major views and concerns
		<p>was far from adequate to meet the service needs in the Yau Tsim Mong District.</p> <ul style="list-style-type: none"> • HA should introduce measure to increase its healthcare manpower and improve the remuneration package of the healthcare personnel.
17.	Hong Kong Alliance of Patients' Organizations Ltd.	<ul style="list-style-type: none"> • To address medical manpower shortage, the Administration should relax the requirements on licensing examination and internship assessment in order to attract more non-locally trained doctors to practise in Hong Kong. • HA should strengthen the provision of primary healthcare services in order to meet the increasing service demand. • Means test for the Samaritan Fund and the Community Care Fund Medical Assistance Programmes should be further relaxed.
18.	Business and Professionals Alliance for Hong Kong	<ul style="list-style-type: none"> • HA should improve the remuneration package and career prospect of the healthcare professionals in order to address the wastage. • HA should reduce the waiting time for specialist out-patient services through the implementation of public-private partnership ("PPP") programmes. • Consideration should be given to relaxing the requirements on licensing examination and internship assessment in order to attract more non-locally trained doctors to practise in Hong Kong.
19.	Health In Action	<ul style="list-style-type: none"> • LC Paper No. CB(2)1039/18-19(01)
20.	Labour Party	<ul style="list-style-type: none"> • The implementation of PPP programmes and the development of private hospitals would aggravate the brain drain of healthcare professionals from the public to the private sector.
21.	Little Baby Concern Group	<ul style="list-style-type: none"> • LC Paper No. CB(2)1028/18-19(02)
22.	小 BB 關注組	<ul style="list-style-type: none"> • The Administration should formulate a long-term planning and development in respect of new public hospitals, training of healthcare professionals and acquisition of advanced medical equipment. • HA should provide support services to those women who had miscarried and their families.
23.	Hospital Authority Workers General Union	<ul style="list-style-type: none"> • LC Paper No. CB(2)1003/18-19(02)
24.	Hong Kong Confederation of Trade Unions	<ul style="list-style-type: none"> • Expressed grave concern about the workplace bullying which undermined the staff morale of healthcare professionals in HA. The deputation considered that representatives of trade unions should be allowed to play an active role in supporting the staff concerned.

No.	Name of deputation/individual	Submission / Major views and concerns
25.	The Hong Kong Stroke Association	<ul style="list-style-type: none"> LC Paper No. CB(2)965/18-19(06)
26.	Mr TAM Hoi-pong	<ul style="list-style-type: none"> The Administration should reduce the existing 150 daily quota of the One-way Permits scheme, so as not to further increase pressure on the public healthcare sector. HA should put in place measures to recover bad debts arising from cases of non-eligible persons' defaulting payment. Private hospitals should mainly serve the local people in Hong Kong. The Chinese University of Hong Kong Medical Centre should only provide private hospital services to Hong Kong residents.
27.	League of Social Democrats	<ul style="list-style-type: none"> Expressed concern about the imbalance between public and private healthcare sectors in the secondary and tertiary care and the development of private hospitals that would aggravate the brain drain from the public to private sectors. To emphasize preventive care and personal health, the Administration should set up healthcare centres or clinics to provide comprehensive primary healthcare services. Consideration should be given to relaxing the registration requirements for non-locally trained medical practitioners to practise in Hong Kong, say exemption from sitting licensing examination for those graduates from the recognized and renowned overseas medical schools.
28.	Mr WONG Ho-ming	<ul style="list-style-type: none"> The Administration should formulate a comprehensive healthcare planning in respect of (a) healthcare service development and infrastructure; (b) healthcare manpower planning especially drawing up a target nurse-to-patient ratio of 1:6; and (c) enhancement of primary healthcare services.
<i>Session Two</i>		
29.	Miss LI Wing-yin	<ul style="list-style-type: none"> LC Paper No. CB(2)1167/18-19(02)
30.	The Hong Kong Medical Association	<ul style="list-style-type: none"> Despite the increase in funding to HA and medical manpower in public hospitals, HA failed to allocate adequate resources and medical manpower to address the service needs in specialist outpatient clinics and the pressurized areas, such as A&E departments, medical wards and paediatrics wards. Senior executive positions of HA could be filled by administrative personnel specializing in healthcare and hospital management rather than doctors, so that the later could devote their efforts to provide healthcare services at the frontline.
31.	Dr CHAN Siu-kim	<ul style="list-style-type: none"> Serious wastage of frontline doctors at HA was due to heavy workload, low morale and lack of clinical support.
32.	Island West Dynamic Movement	<ul style="list-style-type: none"> LC Paper No. CB(2)1039/18-19(02)

No.	Name of deputation/individual	Submission / Major views and concerns
33.	Dr Ernie LO Chi-fung	<ul style="list-style-type: none"> To address serious wastage medical manpower, HA should improve the working environment, ease the pressure faced by frontline doctors and allow doctors to have sufficient time on each consultation.
34.	Mrs Mary Catherine CHENG	<ul style="list-style-type: none"> LC Paper No. CB(2)965/18-19(07)
35.	Mr CHAN Ka-long	<ul style="list-style-type: none"> LC Paper No. CB(2)1039/18-19(03)
36.	The Lion Rock Institute	<ul style="list-style-type: none"> Non-locally trained medical practitioners should be allowed to practise in Hong Kong so as to address the medical manpower constraint.
37.	The Hong Kong Association of The Pharmaceutical Industry	<ul style="list-style-type: none"> LC Paper No. CB(2)965/18-19(08)
38.	Dr LEUNG Kin-ping	<ul style="list-style-type: none"> LC Paper No. CB(2)1009/18-19(03)
39.	Mr KO Yiu-cheung	<ul style="list-style-type: none"> LC Paper No. CB(2)1128/18-19(02)
40.	Eastern Renal Support Association	<ul style="list-style-type: none"> LC Paper No. CB(2)1009/18-19(01)
41.	Neo Democrats	<ul style="list-style-type: none"> LC Paper No. CB(2)965/18-19(09)
42.	Cancer Patient Alliance	<ul style="list-style-type: none"> LC Paper No. CB(2)965/18-19(10)
43.	Ms WONG Foo-oi	<ul style="list-style-type: none"> Expressed concern about the high attrition rate of specialists in Ophthalmology. HA should streamline the process in recruiting non-locally trained medical practitioners under limited registration and enhance the remuneration package of the supporting staff. Outpatients at public outpatient clinics should have the right to ask for their prescription and obtain the drugs from pharmacists in community pharmacies.
44.	WeCareBill Foundation	<ul style="list-style-type: none"> LC Paper No. CB(2)1003/18-19(03) (Revised)
45.	Hong Kong Physiotherapy Association Limited	<ul style="list-style-type: none"> LC Paper No. CB(2)965/18-19(11)
46.	香港民粹主義前線	<ul style="list-style-type: none"> LC Paper No. CB(2)1009/18-19(02)
47.	Mr Roy PUN Long-chung	<ul style="list-style-type: none"> LC Paper No. CB(2)965/18-19(12)
48.	Patients' Alliance on Healthcare Reform	<ul style="list-style-type: none"> The Administration should formulate a long-term healthcare planning and policy to address the long waiting time for public healthcare services and high wastage of doctors in public hospitals. In the meantime, consideration should be given to implementing PPP programmes to meet the growing demand for public healthcare services, especially the radiology services.

No.	Name of deputation/individual	Submission / Major views and concerns
		<ul style="list-style-type: none">• The Administration should enhance the primary healthcare services and public health education for disease prevention.
49.	Society for Community Organization	<ul style="list-style-type: none">• To address shortage of medical manpower at public hospitals, non-locally trained medical practitioners who passed the Licensing Examination should be exempted from internship assessment if they had served at public hospitals for three years.• HA should improve its governance and operation as well as the quality of public healthcare services.
50.	Our Hong Kong Foundation	<ul style="list-style-type: none">• LC Paper No. CB(2)965/18-19(13)
51.	Dr LEE Hoi-kan	<ul style="list-style-type: none">• LC Paper No. CB(2)1009/18-19(04)
52.	Hong Kong Hospitals Employees Association	<ul style="list-style-type: none">• LC Paper No. CB(2)1039/18-19(04)

Council Business Division 2
Legislative Council Secretariat
10 October 2019