

28.4.2008

特別會議

討論文件

立法會教育事務委員會
副學位之學術及專業評審

(本文件由香港科技專上書院提供)

引言

1. 專上院校的專業課程必須同時通過“香港學術及職業資歷評審局”(以下簡稱“評審局”)的學術評審(或自我評審),及有關專業學會的專業評審,畢業生的資格才能獲得政府認可及在業內工作。
2. 本文件闡述科專的護理學副學士課程接受香港護士管理局(下稱“護管局”)專業評審的過程,然後提出一些建議與期盼。科專希望把遭遇公諸社會,加深各界了解,從而避免重蹈覆轍,讓香港的教育制度更臻完善。

背景

3. 香港科技專上書院為一所非牟利書院,一向以培訓社會專業人才為辦學宗旨,並為未能進入主流制度的學生提供機會,讓他們繼續學習。學校採取關懷、鼓勵的態度,協助學生重拾信心,盡量發揮潛能。
4. 鑑於社會對護士需求甚殷,當局又積極鼓勵開辦副學位課程,以提高本港年青人的教育水平。科專經審慎考慮,即使知道課程成本昂貴(包括實驗室、實習費及較高的老師薪金),需要學校作出大幅補貼,才能開辦;但為能培養出有愛心及專業的護士,學校決定於2005年10月開辦三年制護理學副學士課程。課程設計及收生條件完全遵照護管局的有關細則。科專於2004年10月23日書面通知護管局有關決定(附件1),獲護管局於2004年10月27日回覆,並通知評審期最少需時九個月(附件2),並附上列出評審程序的評審手冊。評審局於2005年5月開始為課程進行學術評審,當時的評審委員會,成員包括前任護管局主席及曾出任護管局委員人士。2005年9月15日評審局通知

科專上述課程已通過該局的學術評審(附件 3)，這代表課程為香港政府認可副學士，同學並可申請公帑的學費助學金及貸款。在實習方面，為確保課程質素，同學的實習安排在新界西聯網醫院，由曾教導本港大學護理課程的在職護士，為本校學生提供實習培訓。這些護士無論在教學與實習考試上，要求均與其他大學護士學生相同。

5. 科專在獲得評審局的認可後才決定收生，由於尚未通過護管局的專業評審，科專採取審慎態度，於 2005 年 10 月僅招收 20 學生。招生時，科專開誠布公，光明磊落，透過下列途徑向申請人清晰交代情況：

- (1) 招生單張清楚列明“香港護士管理局評審中”(請見附件 4)，
- (2) 在面試時，教師再向每位申請人闡明課程尚在評審中的現況。

6. 翌年由於尚未獲護管局書面評審，校方決定把招生人數凍結在 20 名。期間繼續敦促護管局盡快進行評審。護管局在 2006 年 11 月 7 日曾邀請本校向該局介紹課程(Presentation)，期間，護管局評審委員會主席指示本校每年要安排 140 個實習位置給學生(有關確認函件請見附件 5)。有鑑此積極性反應，科專於 2007 年 10 月招生時，提高名額，招收了 100 名學生。
7. 修讀上述課程的學生都是矢志投身護理行業，勇敢地面對不明朗因素的年青人，這些同學亦明白不單是科專，其他護理課程亦需要面對二至三年的評審期。事件發生後，這批畢業在即的護士學生以及第一、二年的學生，並無怨言，沒有一位退學，仍然認真地醫院實習，在學校上課，支持學校爭取專業認可。
8. 2008 年 2 月 12 日，護管局進行實地評審探訪(accreditation visit)，雙方會晤時，評審委員主席舊事重提，要求科專確認 140 個實習位的安排。在評審完結時，主席稱讚本校 committed, good，並點出將來辦學需留意之處。科專沒有得到絲毫負面的印象，同事們都感到鼓舞，對學生前途頗為樂觀。
9. 之後，科專曾聯絡護管局，希望了解是否需要呈交補充資料。倘若該局要求一些需要改進的地方才能通過專業評審，校方希望可以盡早準備。因為根據護管局評審手冊，評審過程包括提出改善建議，需要院校在指定時間內達標，才可通過專業評審。這個做法是常見的，因為

評審機構的一個重要目的是提供建議給受評院校，讓他們努力達標，提供有質素的課程。

10. 2008年3月31日下午7時，科專收到護管局發來的傳真函(附件6)，簡單地通知學校護理學課程未能通過專業評審，原因將日內書面通知。4月3日，科專收到護管局的函件，正式通知學校評審結果，並列出15項原因。當局並表示，18個月內不會接受本校申請覆審上述課程。

對學生的安排

11. 對是次護理副學士課程專業認可的結果，本校深表失望與遺憾。科專是一所矢志辦學為社會提供所需人才的院校，學生是首要考慮。雖然面臨逆境，仍竭力為學生謀求出路，特別是即將畢業的學生。現得悉食物及衛生局、醫管局已竭力協助給予本校140名護理學生已為學生作出適當的安排；在此感謝局長及醫管局對本校護理學副學士學生的協助。

科專在通過專業評審前審慎辦學

12. 由於專業評審必須評審教與學，包括學生在病房實習，因此必須在正式開課後才能進行實質的專業評審。護管局亦就此事於2004年10月27日致函科專的評審手冊中詳細列出。為審慎計，科專已採取下列措施：

- (1) 在通過評審局學術評審後才招生，
- (2) 第一年只招收20名學生

科專與護管局評審期間往來信件摘要

13. 根據過去三年護管局與科專就專業評審交流的信件來往摘要，

- (1) 本校一般在二星期左右便按護管局要求呈交相關資料文件，護管局通常在2-3個月後作出回覆。

(2)護管局從未給予科專任何對課程改進之建議，直至通知本校評審結果時才首次列出有待改善的地方，例如在過去三年中，從未在任何信件，護管局網頁中提及老師需要否 clinical update (在醫院中工作一至二星期，保持其對實務運作的認識)，且並非所有護士培訓教師均有經常性 clinical update，但護管局卻以此作拒絕課程評審通過理由。但院校其實可以在一、二月期間為老師進行此短期培訓，但護管局並未給予本校時間改進。護管局在其《評審手冊》中，有列明這些類似的改善建議會是評審程序之一，可惜未能在科專落實。

14. 護管局4月3日發給科專有關拒絕通過專業評審的信內表示還有本校的資料未能清楚。本校亦即時作出跟進及解釋 (附件 7)
15. 為協助委員會了解其他院校護理學課程接受護管局專業評審的情況，科專在得悉教育事務委員會於4月28日召開特別會議後，即去信該局，請求提供有關統計資料給委員會參考。有關資料請見(附件 8)。

護管局的中立性

16. 社會面對護士短缺，護管局為何不積極協助院校培養人才，反而採取如此令人費解的態度？本校現附上四封函件及通告，可代表部份業界意見。附上有關函件，謹供委員參考。
17. 在是次本校課程評審期間，護管局評審委員會一位成員黃金月教授 (香港理工大學護理系教授兼香港護理教育學會會長)，曾致函特首曾蔭權先生與醫管局行政總裁蘇利民先生，詳情如下：
 - (1) 2007年2月28日致特首函，強調註冊護士的學歷水平應為學士學位，並強烈表示不會妥協為副學位(“*not compromise with other sub-degree levels*”)，(附件 9)
 - (2) 2007年9月10日致特首函，要求在大學一年級開設更多大學護理學位。(附件 10)

(3) 科專於 2007 年 6 月 14 日與醫管局新界西醫院網簽署合作意向書。黃教授於 2007 年 6 月 24 日致函醫管局行政總裁，對本校與醫管局合辦護理課程表示不滿(附件 11)。

18. 護管局曾於 2006 年 7 月 31 日致函各醫管局醫院，提醒院方護士生實習名額要優先分配給已通過專業評審的課程。本港實習名額長期呈緊張，大學亦要向各醫院張羅實習位，優先安排的措施可能會令要二、三年才完成評審的課程可能因沒有實習安排而被迫停辦。護管局的做法可能會變相地排斥新辦學團體，有損其中立性的角色(附件 12)。
19. 上述函件反映有關人士/單位對科專護理課程的一些立場，科專希望護管局處事是公平的，但公平必須彰顯於公眾眼前，否則難免令人覺得憾。

對護士學位化的一點看法

20. 現行護士註冊條例(附件 13)列明“註冊護士為曾接受三年培訓者”的條文。業界擬提升水平至學士學位，科專並不反對，這是配合社會需要的發展。重要的是，在法例未修訂前，特別是在未有提醒院校前，有關當局應給予外界一個清晰的印象，學位化的意念，在評審過程中絕非考慮的因素。很遺憾，我們未能得到此印象。

實習名額之競爭

21. 本港尚未建立一個整體的護士實習安排系統，即使大學也要費勁地尋求學生實習名額。一旦醫院因護士工作繁忙，不能提供實習名額時，院校也會感到傷腦筋，因為實習為課程中不可或缺的部分。多一個新辦學團體加入，便會加劇競爭，估計這情況並非其他院校所樂見。

建議與期盼

22. 就今次事件，科專提出下列建議供有關當局考慮：

(1) 最近政府對副學位提出多項措施，本校甚表歡迎，希望政府加強宣傳副學位，讓本港人士廣泛認識其學歷。本校歷屆有多位同學在完成副學士及本校之認可學位後，成功進入或本港大學碩士課程，其中有十位願為本校向各議員提供參考資料，亦可作為政府肯定副學士質素的佐證（附件 14）。

(2) 雙重評審的制度是必須的，但亦有其內在問題。這些問題未必出現，但一旦發生，後果可以很嚴重。希望有關方面能深入研究，造福香港教育。

(3) 希望政府與業界對「註冊護士是否需要持學士學位人士才可擔任」這個問題能達成一致意見，盡早公布。在新法例未落實前應採取公平、公開、公正的措施處理一切有關課程。

(4) 政府可考慮，在不影響現已入職或入學人士的前提下，為副學位及學士學位的註冊護士制定不同薪級點，既可加強護士隊伍，紓緩人手不足帶來的壓力，避免護理人員疲於奔命，影響醫療質素；也可鼓勵副學位註冊護士繼續進修，以取得學位資格。

(5) 希望政府能協調分配實習安排，委託醫管局統一分配實習名額，包括考慮邀請私家醫院加入，為所有已通過評審（包括學術評審）課程，解決護士學生實習的問題。

同時，本校有兩點期盼：

(6) 護管局對本校護理課程提出的不足之處，本校盡速改善。上述課程亦已到進行學術評審覆審的階段，本校希望香港護士管理局能聯同香港學術及職業資格評審局共同為本課程今年在暑假前進行專業與學術評審，而不需要等候 18 個月。護管局的目的是保證院校質素，確保香港能培養足夠的達標護士，滿足社會需求。熱切期望護管局能認真考慮。

(7) 本校 140 名學生在各方的協助下，能達致服務社會的目的。在這方面，科專對有關方面，特別是醫管局，謹致衷心謝意。

總結

23. 最後有一點希望議員加以體諒，相信各位已見到本校護理副學士課程學生在目前沉重打擊下，至今也沒有一人退學，亦沒有一位學生對校方或傳媒發過一句怨言。本校校舍設備及康樂活動乏善可陳，入學學生成績亦不見突出，但近年每年學生人數急升，甚至不少畢業生獲本港大學的碩士課程取錄。主要原因是我們將資源用在學生身上，另本校關懷學生，多體諒及鼓勵學生，重建其信心，盡量幫助拓展其發展空間。副學士是本港一個新生的學歷，但這非僅一個學歷，當中牽涉到莘莘學子，我們的下一代。希望議員們今後能繼續支持副學士及提供寶貴意見，使有關的院校及學生能不斷改進。在每年的公開考試中，成績最好的一批學生，可直接入大而不需循副學位課程的渠道升學，所以要入讀副學位的同學信心會不強，如果社會上不斷作出負面評價，只會令學生更沮喪，反而削弱了正面的教育效果。

香港科技專上書院

21. 4. 2008

附件

1. 科專通知護管局將開辦護理學副學士課程
2. 護管局回函並附上詳細列出評審程序的評審手冊。手冊第 IX 項列出評審日期及 VII(3)及 XI(2)列出評審後會對院校作出課程改善建議
3. 評審局通知課程已通過學術評審
4. 本校課程單張清楚列明“香港護士管理局評審中”
5. 本校就主席要求確認每年為學生安排 140 個實習位。三年共 420 個實習位。
6. 護管局 2008 年 3 月 31 日致科專通知評審結果
7. 科專 2008 年 4 月 7 日致護管局回應評審結果
8. 本校去函護士管理局要求公開過去十年各申請課程的評審期及評審結果。
9. 黃金月教授 2007 年 2 月 28 日致特首函
10. 黃金月教授 2007 年 9 月 10 日致特首函
11. 黃金月教授 2007 年 6 月 24 日致醫管局函
12. 護管局 2006 年 7 月 31 日致醫管局各醫院通告
13. 註冊護士訓練課程之要求
14. 本校十位已進入本港大學碩士課程同學名單。



Hong Kong Institute of Technology (Non-Profit Making)

香港科技專上書院 (非牟利)

附件

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638 Cheung Sha Wan Road, Cheung Sha Wan, Kowloon, Hong Kong. 香港九龍長沙灣長沙灣道 638 號

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23 October 2004

Professor Thomas Wong Kwok-shing
Chairman
The Nursing Council of Hong Kong
1/F Shun Feng International Centre
182 Queen's Road East
Wanchai
Hong Kong

BY FAX & MAIL

Dear Professor Wong,

Hong Kong Institute of Technology (HKIT), a non profit making self financed tertiary institution offering accredited Associate Degree/ Degree programmes (please refer to EMB web site www.emb.gov.hk/postsec for details) in HK.

With the support of EMB, the vacant site of Nethersole Hospital at mid-level was rent to us at a nominal fee from Oct 2003.

In view of the shortage of nurses in Hong Kong, HKIT plans to offer an Associate Degree and/or an Australian Degree in Nursing in Hong Kong from 2005. Both degrees will be accredited by Hong Kong Council for Academic Accreditation.

An advisory group was formed with experienced members in nursing education from Hong Kong and overseas.

We would like to request the following information from The Nursing Council of Hong Kong:

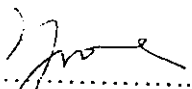
- Criteria for offering accredited Nursing Program in Hong Kong
- Other related information

We would like to propose a meeting in the next week if it is convenient to you.

Thank you for your attention.

Regards.

Yours sincerely,


.....
(for) Joy SHI Mei Chun
President



香港護士管理局
*NURSING COUNCIL
OF HONG KONG*

貴處檔號：

Your Ref.:

本局檔號： NC 37/G

Our Ref.:

電話： 2527 8238

Tel. No.:

香港灣仔皇后大道東182號
順豐國際中心1樓
1st Floor, Shun Feng International Centre,
182 Queen's Road East,
Wan Chai, Hong Kong.

電郵地址： ncmcdh@netvigator.com

E-mail:

網址： www.nchk.org.hk

Website:

圖文傳真： 2527 2277

Fax No.:

(2)
附件 2

27 October 2004

Ms Joy SHI Mei-chun
President
Hong Kong Institute of Technology
11 Kwong Lee Road
Cheung Sha Wan
Kowloon
Hong Kong

Dear Ms SHI,

Request for Accreditation Criteria for Nursing Programmes

Thank you for your letter dated 23 October 2004 on the above subject.

A copy of the "Handbook for Accreditation of Training Institutions" is attached for your reference. You may wish to note that the Nursing Council would need a minimum of nine months to process an application for accreditation.

If you have any questions, please feel free to contact me on 2527 8238 or Ms Miranda YIP on 2527 8263.

Yours sincerely,

(CHENG Chung-kwong)
Secretary, Nursing Council

The Nursing Council of Hong Kong

Handbook for Accreditation of Training Institutions

Revised in January 2003

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I. Preamble

As a statutory body, the Nursing Council of Hong Kong is accountable for reassuring the nursing profession and the public that pedagogical practices in nursing education are of distinguished quality, and training institutions are qualified to be a credible provider of professional nursing education.

To achieve this, accreditation system and procedures are developed to provide the Nursing Council with a mechanism to conduct external professional peer review of a training institution.

In addition, it also allows training institutions a formal occasion to demonstrate that standards, agreed levels of educational and pedagogical practice, and professional conduct are prudently maintained.

II Definition of Accreditation

Accreditation is defined as the evaluation and review of a training institution to assess its suitability for providing nursing education for the purpose of registration with the Nursing Council, and the evaluation of its general academic environment and its academic processes (adapted from the Hong Kong Council for Academic Accreditation Handbook, 1994).

III. Purposes of Accreditation

- (1) To examine the extent a training institution meets the requirements of the Nursing Council for the provision of nursing education.
- (2) To review the educational environment and processes of a training institution.
- (3) To evaluate the curriculum to assess its comparability with similar curricula in Hong Kong and international standards.
- (4) To evaluate the curriculum by making reference to the Nursing Council guidelines for nurse training.
- (5) To advise a training institution on the areas of strength, weakness and vulnerability.

IV Role of the Education Committee in Accreditation

- (1) To provide independent authoritative advice on academic and professional standards in an institution by carrying out accreditation, that is
 - a) Validating or revalidating any nursing programme for the purpose of registration conducted by the institution; and/or
 - b) Reviewing the general academic and professional standards of the institution.
- (2) To promote good practices of accreditation and quality assurance, and to assist in maintaining and monitoring academic and professional standards.

- (3) To advise the Council on matters pertaining to academic accreditation and academic and professional standards.
- (4) To carry out such other functions connected with academic accreditation and evaluation as may be permitted or assigned to the Education Committee by the Council.

V Process of Accreditation

- (1) For a new programme, the head of the training institution will initiate the process by communicating with the Council of its desire for accreditation. To ensure the quality of the programme, re-accreditation is normally conducted between 4 to 6 years depending on the outcome of the previous one.
- (2) The head of the training institution may submit the self-study report when he/she communicates with the Council. If not, he/she must ensure the report arrives at the Council not less than one month before the accreditation visit.
- (3) Official authorization to conduct the accreditation is secured from the Nursing Council. An accreditation panel will then be formed.
- (4) The head of the training institution is normally informed of the date and time when the accreditation visit will take place.
- (5) When a training institution has more than one campus, all locations are reviewed before the institution and its programme/s are accredited.
- (6) The training institution under review is normally informed at the end of the accreditation visit. A written report is given to the head of the institution within two months after the visit.
- (7) If the accreditation panel stipulates some conditions for the training institution to meet before it starts its programme, the institution must provide evidence of such to the Council. Normally this can be done through written correspondence.

VI Submission of a Self-Study Report from a Training Institution

The self-study report prepared by the training institution must be submitted at least one month before the accreditation visit. The report must contain the following information:

- (1) Justification for establishing a nursing programme and/or major curricular changes
- (2) A detailed curriculum for the nursing programme offered
- (3) Teaching and supporting personnel involved in the implementation of the curriculum
- (4) Teaching resources and facilities available for students
- (5) Resources and facilities for clinical practice
- (6) Research and professional work
- (7) Quality assurance mechanism
- (8) Staff development programmes

It is the responsibility of the institution to ensure the accuracy and currency of the report. To facilitate the work of the Council, the institution is required to submit **four** copies of the report to the Secretary of the Council.

VII Role of Accreditation Panel

All members of an accreditation panel are appointed by the Council. The panel consists of seven members, including three Council members, two non-council members of the Education Committee, one external member and the Secretary of the Council or his / her designate. The role of the panel is:

- (1) to clarify and verify the congruency between submitted information and the actual practice of the training institution;
- (2) to prepare a written report on its findings in relation to the accreditation criteria; and
- (3) to make recommendations for programme improvement.

VIII Length of an Accreditation Visit

The length of the visit depends on the complexity of the issues concerned and the number of campuses the training institution has and will normally last for not more than three days.

IX The Accreditation Visit

- (1) Dates

→ Dates selected for the accreditation visit must assure full operation of the training institution, including conduction of classes and clinical practicum.

- (2) Programme and institutional materials

The head of the training institution must prepare for the panel members' review of the followings:

- a) annual reports of the institution
- b) timetable and clinical schedule for the week of the visit
- c) samples of assessment or examination
- d) quality assurance tools including reports from external examiner/s or advisor/s
- e) institution and student handbooks
- f) any other interpretive materials the institution deems essential for the understanding of the programme offered

(3) Conduct of the visit

- a) A tentative agenda for the visit is prepared by the panel before the visit. The head of the training institution is notified of the schedule at least two weeks before the visit. The agenda may include the followings:
 - i. Meeting with the head of the institution
 - ii. Meeting with staff, students and graduates of the institution
 - iii. Meeting with senior management and potential employers of graduates
 - iv. Visit to different facilities of the institution
 - v. Visit to clinical venues where clinical practicum takes place
 - vi. Review of the curricula and other materials presented
- b) The training institution needs to arrange a temporary office in which materials for the panel members can be assembled and in which the panel members can read and work during the period of the visit.
- c) Upon arrival at the institution, the panel meets with the head before the review or evaluation begins.

X Accreditation Criteria (adapted from the Hong Kong Council for Academic Accreditation Handbook, 1994)

- (1) Institutional structure
 - Is the institution an academic community?
 - Are there opportunities for teachers and students to contribute to the formation of academic policy?
 - Can the priorities between various institutional activities be successfully determined and action initiated?
- (2) Government and management
 - What are the standing committees?
 - What is the committee structure?
 - What are the committees' terms of reference?
 - Is the academic body effective in guiding academic policies?
 - Are the committees and academic body properly accountable?
 - Is the management structure effective?
 - Does the institution have adequate processes for internal review?
- (3) Programme development and design
 - Are the teachers able to make a full contribution to the design and development of programmes?
 - Does programme development benefit from the research and consultancy work done by teachers or institution?

- (4) Development of new work
Is there adequate management and employment data?
Is academic planning responsive to the changes in community, institutional profile and educational philosophy and vice versa?
- (5) Teachers
What is the quality of the teachers and how is it monitored and maintained?
How do the teachers respond to subject and programme developments?
What are the expectations of the teachers for development?
Do the teachers provide a stimulus for student learning?
- (6) Scholarly activity
Does the institutional environment encourage scholarly activity, including research and innovation?
What is the teachers' track record on scholarly work, for example, research grants, publications, etc?
Does the environment encourage collaboration with clinical units in research and development work?
- (7) Students
Is the environment suitable for teaching?
Are the learning resources and teaching methods appropriate?
How are the students selected for entry to the institution and programme?
How are they guided in relation to their academic programme?
What are the standards of student counselling, accommodation, and recreational facilities?
- (8) Programme evaluation and standards
Is there regular monitoring of programme?
Are review and evaluation mechanisms employed? Are they adequate and are they properly applied?
Has the institution taken account of advice or comments made by external examiners or advisors?
Are appropriate standards set for programme and are these standards achieved?
How is student assessment carried out?
What criteria and methods of assessment are employed?
Do assessment reflects the learning objectives of the programme and subjects?
- (9) Resources and facilities
Are the present and planned resources realistic?
Do they match the future development of the institution?
Is resource appropriately managed?
Does the institution take sufficient account of new technology?

(10) Collaboration

Does the institution actively seek and exploit collaborative teaching and research with clinical units, and local and overseas institutions?

(11) Past reviews

Has the institution taken account of advice given or recommendations made following past reviews?

XI Accreditation Report

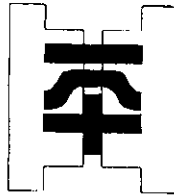
(1) The panel members analyze the information gathered and make a professional judgement in relation to the established criteria for accreditation. They will submit a report with conditions, if any and recommendations to the Nursing Council.

(2) The Nursing Council decides the accreditation status and formulates recommendations to the training institution for programme improvement. ←

XII Notification of the Accreditation Results

(1) The training institution will be notified the accreditation panel's recommendations after the Council's meeting.

(2) The head of the institution must submit an explanatory report to the Council if some recommended conditions could not be met. Failure to do so may lead to removal of the institution from the approved list of accredited providers for nurse training.



HONG KONG COUNCIL FOR
ACADEMIC ACCREDITATION
香港學術評審局

15 September 2005

Tel: 2801 7101

Dr Joy Shi Mei Chun
President
Hong Kong Institute of Technology
11 Kwong Lee Road
Cheung Sha Wan
KOWLOON
[Fax No.: 2782 0497]

BY FAX & BY POST

Dear Dr Shi

Re: Hong Kong Institute of Technology – Associate Degree in Nursing

Now that the Institute has fulfilled all the conditions, the HKCAA is pleased to approve the proposed programme for three student intakes with a yearly maximum of 120 students from 2005/2006 to 2007/2008 inclusive.

The HKCAA is also pleased to note that the Nethersole Hospital site is due for operation by February 2006. Your kind attention is drawn to the condition as stipulated in the validation report that, if there are more than 80 students, there should be up to two nursing laboratories available for practical work of students. Lastly, the Institute is reminded of the need to fulfil two requirements at later dates stipulated in the validation report.

If you have any queries, or if I can be of assistance otherwise, please do not hesitate to contact me.

Yours sincerely

K S Chan
Registrar

KS/ks



香港科技專上書院 (非牟利)

Hong Kong Institute of Technology (Non-Profit Making)

通過香港學術評審認可

全日制副學士課程

(認可名單可瀏覽教育局網站 <http://www.edb.gov.hk/postsec>)

護理學副學士

Associate Degree in Nursing



課程特色

- 本課程為本港醫療行業培育專業人材，提升醫療水平，並強調同學服務社會的心志。
- 認可：本課程已通過香港學術評審局 www.hkcaa.edu.hk 的評審，同學可向學生資助辦事處申請助學金及/或貸款等資助，詳情請瀏覽 www.sfaa.gov.hk。
- 本護理課程內容乃根據香港護士管理局註冊護士課程設計，包括護理學理論及臨床實習。

就業前景

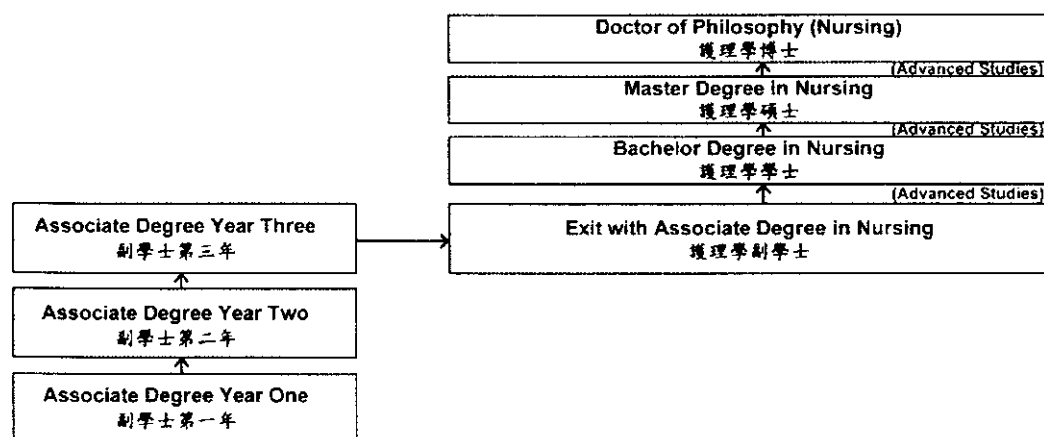
- 註冊護士
畢業生如符合香港護士管理局註冊護士的學歷及達到該局專業註冊要求，便可申請為註冊護士。

課程結構

- 修讀護理學副學士的學生，完成三年課程，合共 30 科(詳細資料請參閱課程內容)，可獲頒授護理學副學士學位。*
- 詳情請瀏覽本校網站：www.hkit.edu.hk

升學途徑

- 完成副學士課程後，畢業生可升讀護理學學士學位、護理專科碩士學位及博士學位。



* 香港護士管理局評審中

課程內容

- 本課程內容包括 2 個通識教育學科及 28 個護理專業學科
- 護理專業共有 23 個理論專科及 5 個臨床實習專科。理論專科其中包括健康與人類行為、生命科學、護理學、內外科護理、專科護理、醫療法律及倫理學、健康教育及推廣、管理學、心理學、健康評估、另類健康療法、健康醫護科研等。
- 臨床實習包括各種專科護理，例如內外科護理、小兒及老人科護理、精神科護理及社康護理等。

入學要求

甲. 在香港中學會考至少五科及格，其中包括：

1. 中國語文達 D 級或以上；及
2. 英國語文(課程乙)達 E 級或以上；及
3. 以下任何一科理科科目達 E 級或以上
(數學、人類生物學、物理、化學、生物)；及
4. 以下任何一個科目達 E 級或以上 (數學、人類生物學、物理、化學、生物、中國文學、中國歷史、英國文學、西史、地理、社會、經濟及公共事務、宗教、佛學、經濟、附加數學)；及
5. 其他任何一個科目達 E 級或以上。

乙. 在 1 至 4 項內任何一科達 C 級或以上。

丙. 本課程的申請者須進行面試。

同學如要成為註冊護士，必須要符合香港護士管理局規定的註冊護士資歷。

上課時間

全日制： 星期一至星期六 上午 9:30 - 12:30；下午 2:00 - 5:00
臨床實習： 1760 小時

上課地點

港島港舍： 香港西半山卑利士道 2 號
九龍校舍： 香港九龍長沙灣長沙灣道 638 號

學費

副學士第一年： 每年：HK\$39,600 元，分十期繳交，每期 HK\$3,960 元
副學士第二年： 每年：HK\$45,000 元，分兩期繳交，每期 HK\$22,500 元
副學士第三年： 每年：HK\$45,000 元，分兩期繳交，每期 HK\$22,500 元

報名方法

同學可親臨本校或從網上下載報名表格，填妥後連同有關文件交回
香港西半山卑利士道 2 號香港科技專上書院入學組；或
網上報名 www.hkit.edu.hk；或致電 2782-2433 查詢報名詳情。

課程充實，
在學校所學到的知識能充份實踐，
是很值得的。

在醫院實習期間，
我可以體會到護士工作，
學會如何照顧自己及他人。

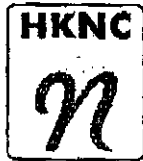


附件5

Letter to NCHK on 19 Jan 2007
an extract

HKIT has given all the cooperation to the Nursing Council for the accreditation with the following evidence:

1. Further to the confirmed clinical placement with NTWC (which is evidenced by previous written submission and students already started the clinical placements), Professor Leung Nai-kong, Chairman of Accreditation Committee requested HKIT to confirm 140 clinical placements in the presentation on 7 Nov 2006. Despite this quite unusual procedure in accreditation (as clinical placements should be along with the actual number of students recruited in the year and 140 only refers to the maximum number of students approved by the Hong Kong Council for Academic Accreditation), HKIT has managed to confirm the number with NTWC, which is evidenced by the attached letter in Document 1.



香港護士管理局
NURSING COUNCIL
OF HONG KONG

收信日期：
Your Ref.:
本月編號： NC 37/G
Our Ref.:
電話： 2527 8263
Tel. No.:

香港灣仔皇后大道東182號
順豐國際中心1樓
1st Floor, Shun Feng International Centre,
182 Queen's Road East,
Wan Chai, Hong Kong.

RECEIVED
- 1 APR 2008

電郵地址：
E-mail: nrcmedh@netvigator.com
網址：
Website: www.nuhk.org.hk
圖文傳真：
Fax No.: 2527 2277

By fax and by post
(Fax No.: 2782 0497)

31 March 2008

Dr. SHI Mei-chun, Joy
President
Hong Kong Institute of Technology
2 Breezy Path
Mid-levels West
Hong Kong

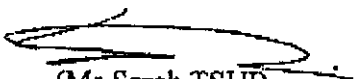
Dear Dr. SHI,

**Application for Accreditation – Associate Degree in
Nursing Programme of the Hong Kong Institute of Technology ("HKIT")**

I write for and on behalf of the Nursing Council of Hong Kong ("the Council").

In our telephone conversation this morning, I have informed you that HKIT's application for accreditation in respect of the captioned programme was rejected by the Council at its meeting, with reasons to be followed. Subsequent to the Council's delivery of the result to the HKIT this morning, the subject application is closed and the Council will consider no further documents subsequently submitted.

Yours sincerely,


(Ms Sarah TSUT)

Secretary, Nursing Council

TOTAL P.01



香港科技專上書院 (非牟利)
Hong Kong Institute of Technology (Non-Profit Making)

附件 7

書院港島校舍辦事處：

2 Breezy Path, Mid-levels West, Hong Kong. 香港西半山卑利士道 2 號

長沙灣教學中心：

638 Cheung Sha Wan Road, Cheung Sha Wan, Kowloon, Hong Kong. 香港九龍長沙灣長沙灣道 638 號

Tel: 2782 2433

Fax: 2782 0497

Website: www.hkit.edu.hk

7 April 2008

Ms. Adela Lai Shuet-fun
Chairperson of Nursing Council
The Nursing Council of Hong Kong
1/F Shun Feng International Centre
182 Queen's Road East, Wanchai
HONG KONG

Dear Ms. Lai,

Associate Degree in Nursing Programme of the Hong Kong Institute of Technology

----- Attached please find our response to the Council's letter dated 3 April 2008 – 'Associate Degree in Nursing ("the Programme") by Hong Kong Institute of Technology (HKIT)'

The general impressions of the reasons indicated by the Nursing Council are:

1. The reasons for rejections are different from the rejection criteria given to our institution on 22 February 2006 as well as published on the web site of the Nursing Council.
2. There are reasons for rejection based on standards which are unknown to us. For instance, in our letter to the Council dated 17 August 2007, our institution enquired about the Council's requirement for laboratory facilities. The Council replied on 11 October 2007: "the information requested by you as stated therein is not relevant and will not be provided." However, in the Council's reasons for rejection, the two laboratories available in the institution are considered as insufficient.
3. There are reasons for rejection which lack evidence. For instance, there was no meeting arranged between the Accreditation Panel and the part-time staff. On what basis can the Council conclude that the part-time staff do not have 'a full grasp of the curriculum goals'?
4. There are reasons for rejections based on the evidence already provided during the accreditation visit. For instance, all the minutes of meetings, student evaluation findings, examination results and audit reports, etc. are available at the venue of the accreditation visit but the Council concluded there was lack of such reports.

As we realized that the recent rejection may be due to miscommunication between the Council and our Institute, we are now providing further information to the Council and

hope that it would be further considered by the Council.

Judging from the reasons for rejection, we are fully confident that we have already met all the requirements of the Nursing Council leading to RN registration. With such information, we would like to withdraw our suggestion for EN training as an alternative (when it was made without knowing the reasons for rejection).

If our clarification does not lead to any satisfactory result to protect the interest of the students and our institution, we would support a public hearing to be made at the Legislative Council on our issue. The operation of the Nursing Council affects not only our institution but also the public interest of Hong Kong, in particular the general health standard of Hong Kong. We shall forward all correspondences/documents between HKIT and the Nursing Council to all Legislative Counsellors during the hearing.

I hope the Council will agree that our institution has tried our best to cope with all the requirements of the Council in the last 3 years, as it affects 140 students' future.

I should be grateful if the Council would consider reviewing the decision to reject our application for accreditation. Your kind consideration will be highly appreciated. To further enhance the confidence of the Council, we can provide yearly reports on our operation to further assure the Council that we have met the requirements of the Council.

Your reply within one week is highly appreciated.

Yours sincerely



Joy Shi
President



香港科技專上書院 (非牟利)
Hong Kong Institute of Technology (Non-Profit Making)

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Tel: 2782 2433

Fax: 2782 0497

Website: www.hkit.edu.hk

Response to the Nursing Council's letter dated 3 April 2008 from HKIT

Preamble

Before we respond to the letter, we would like to express our surprise to its preceding letter from the Nursing Council on 31 March 2008 indicating that our application for accreditation of the programme was rejected. What is more surprising is the absence of reasons for rejection in the letter, a rather unusual practice in accrediting bodies.

The rejection was surprising because the programme was accredited by the Hong Kong Council for Academic Accreditation in 2005 with accreditation criteria which are adopted by the Nursing Council: 'Accreditation is defined as the evaluation and review of a training institution to assess its suitability for providing nursing education for the purpose of registration with the Nursing Council, and the evaluation of its general academic environment and its academic processes (adapted from the **Hong Kong Council for Academic Accreditation Handbook**, 1994).' (*Handbook for Accreditation of Training Institutions* issued by the Nursing Council).

Having read the Nursing Council letter dated 3 April 2008 ("the Council's letter"), we appreciate most of the reasons as recommendations for improvement of the programme. However, we cannot see them as justifiable reasons for rejection. This is because we notice that many of the reasons are based on uncertainty and sometimes incompatible with the empirical facts. There may have been due to miscommunication between the Council and our Institute, as a result of which the application is now rejected. Moreover, all these reasons are not among the rejection criteria the Council unveiled to us in February 2006 (**Attachment 1**), which are effective after we submitted the application in September 2005.

The purpose of this letter is to respond to the 15 reasons for rejection one by one, in the hope that we can reduce the scope of further misunderstandings, so that the Council can consider reviewing its decision to reject our application for accreditation.

Teaching Team (The paragraphs inside the boxes are quoted from the Nursing Council's letter.)

1. The strength of the teaching team on full-time employment is inadequate to cope with the existing number of students of the Programme, i.e. 140 in total. In addition, there are only 2 lecturers with teaching experiences but without any record for clinical update, while others have clinical background but no teaching experiences. The ability of the core team of the teaching staff to deliver the contemporary knowledge in nursing is in doubt.

1. HKIT has a strong teaching and administrative nursing team and is able to deliver a quality programme. Our teaching staff appointed is strictly following the standard indicated by the Nursing Council under the Rejection Criteria, which are made known to us and announced on the web site of the Nursing Council (**Attachment 1**). The requirements are indicated as good character, registered nurse in Hong Kong, three years' post-registration (excluding all post-basic training) clinical experience in areas where basic or post-basic Student/Pupil Nurses are being trained, Master or higher degree in a subject related to nursing. All our teaching staff has met these requirements, e.g. a Master Degree in a subject related to nursing.
2. For 140 students, we had 4 full-time teaching staff, 4 regular part-time teaching staff and 22 doctors from the hospital which supported our programme in the teaching of specialized subjects. Even with exclusion of all the part-time doctors/nursing specialist teaching staff, the student-staff ratio is about 23:1 (usual practice is two part-time teaching staff are considered to be 1 full-time staff) which is much higher than the requirement of self-financed Associate Degrees (which is 35:1) as normally set by the Hong Kong Council for Accreditation of Academic and Vocational Qualifications (HKCAAVQ).
3. For your information, this is about the same student-staff ratio for self-financed Bachelor Degree programmes (which is normally indicated by HKCAAVQ). All full-time staff has teaching experience (which is different from the points raised in your letter). We would like to list their qualifications again for your confirmation. (**Attachment 2**) Three full-time staff had clinical update, which refers to 2-week attachment in wards with the aim of updating clinical knowledge as presented on 12 February 2008. Although it is not indicated by the Nursing Council in any format that clinical update is a requirement for all teaching staff for accreditation the programme, HKIT is willing to comply with this new requirement of the Nursing Council.
4. Our institution would like to bring to the attention of the Nursing Council that if the clinical update is a "must" for teaching staff of programmes accredited by the Nursing Council, please apply it to all accredited programmes. To the best of my knowledge, not all staff at the existing accredited programmes is required clinical update on a regular basis. HKIT should not be the only institution singled out to comply with this requirement.
5. HKIT also found it difficult to cope with the requirements of Nursing Council, as teaching staff qualification is clearly indicated in the web site of the Nursing Council which we have followed strictly. However, the Nursing Council suddenly

brought up other requirements, such as clinical update. Furthermore, they are even used as reasons for rejection. Although our teaching staff still fulfill these additional requirements of the Nursing Council, we found that the Council keeps moving the goal post without any format of prior notice to our Institute, and exhausting our Institute in its course of following the requirements of the Nursing Council.

2. Since most of the teaching staff have only been employed for a few months (1 has only reported duty for 1 day), it will be difficult for the team to integrate the philosophy into the teaching materials and to maintain continuity of the Programme. The lack of continuity and stability of the teaching team is of particular concern for students who are already in their third year, near to the completion.

6. Our Head of the programme, Mr. Newman Tang had been working with us since the beginning of the programme, and therefore, we do not see any concern on the maintenance of continuity. For the Council's consideration, this is a new programme started in 2005 with only 22 students. New staff is appointed each year according to the additional intake of students. Out of the 4 full-time staff, 3 of them have been working with us for more than one term, and one was recruited in February 2008 according to large intake number. Since the accreditation visit was conducted on 12 February 2008, it was not surprising that staff has only been with us for a short while. The one who reported duty for 1 day was the newly recruited staff to cope with the increase in student number so that the staff-student ratio is within the scope approved by the HKCAAVQ. The part-time staff have also been teaching the programme for more than one year. Lastly, the Nursing Council failed to give us any example that the operation of the programme is adversely affected by staff continuity.

7. With all the "strange" actions of Nursing Council on our institution (e.g. a circular memo issued to the hospital suggesting that priority of training should not be given to institution in the process of accreditation, pop-up window at the Nursing Council web site reminding students that HKIT programme has not been accredited), HKIT is really thankful for staff's commitment and willingness to stay on with the programme, rather than leaving due to all the "strange" actions of the Nursing Council.

3. With regard to the use of part-time staff in teaching the Programme, the panel is concerned whether the part-time staffs have a full grasp of the curriculum goals and are able to address the learning needs of the nursing students. For instance, there was no interface between the single doctors' or nurse specialists' teaching in the respective subjects that are taught by full-time teachers at HKIT.

8. Nursing programme is a practical programme. Using Part-time staff now serving in the hospitals can bring the most updated information to the students, as is the role of part-time staff of programmes in many other subject areas. To deliver a quality programme, HKIT invited some highly qualified part-time staff, including the Doctors and Nurse Specialists of Tuen Mun Hospital to participate in teaching. To make sure the part-time staff will deliver the programme in the best manner, full-time teaching staff will brief the part-time teaching staff and give them the syllabuses before teaching. Therefore, all of them are fully aware of the

curriculum and the needs of students before teaching. According to our records, the Accreditation Panel did not meet any of the part-time staff during the accreditation visit. Therefore, it was a surprise to learn that the Council has jumped to the conclusion that the part-time staff did not have a full grasp of the curriculum goals and were not able to address the learning needs of the nursing students.

9. As a matter of fact, it is not appropriate to say that there was no interface with the doctors or nurse specialists. According to our records, one full-time staff briefed speakers on the needs of students before conducting lectures and sat-in throughout all lectures. In addition, students have not reflected this sort of concerns raised by the Nursing Council. According to our student survey after each subject, we did not receive any negative comment from students indicating that they had any concern about teaching due to such "no interface" as mentioned.
10. However, to enhance the confidence of the Council, we shall invite all future part time staff to sign a log book when they receive the curriculum and put down the date/time of meeting with our full time staff for briefing session. This will make sure that all of them are fully aware of the curriculum and student needs.

4. There is no information on the teaching hours and the specialty areas of the part-time lecturers. There is no explicit mechanism to ascertain their suitability and proficiency in teaching. Also, there is no assessment of the knowledge taught by the part-time lecturers.

11. All academic and professional qualifications of the part-time teachers have been submitted to the Council before accreditation. HKIT did not receive any request, from Nursing Council during or after the accreditation visit, for the teaching hours and specialty areas of the part-time staff. If teaching hours and specialty areas of part-time lecturers are important information to the Council, HKIT would be very surprised why such request of information was not made in the last two months. As a matter of fact, if Panel had any further information required, HKIT would be happy to provide any of such information. That is also why, after the accreditation visit, HKIT asked the Council whether any further information should be submitted (**Attachment 3**).
12. Furthermore, as there are already two months after the accreditation visit, and the examination was already conducted, the student knowledge attainment in the subjects taught by part-time teaching staff can now be assessed by the results of the assignments and examinations. Therefore, it would be incorrect to say that there is no assessment of the knowledge taught by the part-time lecturers.
13. However, to cope with the Council's concern, the teaching hours and specialty areas of part-time lecturers are attached. If the Council would like to know the examination result of any particular subject in order to assess the knowledge taught by the part-time staff, HKIT would be happy to provide the examination result of that particular subject for the Council's reference.

5. It is uncertain if the teaching staffs are equipped with the latest development and practice in the clinical field and the areas that they are responsible for teaching. The sense of uncertainty comes from the observation that the teachers are assigned to teach in areas that are not part of their experience as indicated in the respective curriculum vitae.

14. All teaching staff is trained nurses as well. They would have studied all the subjects that are involved in the programme. In particular, they fulfilled the requirements of appointment of lecturers indicated by the Nursing Council. Lecturers are all assigned to subjects that they had experience before. Furthermore, HKIT has subscribed to a comprehensive on-line database of full-text journals in nursing (*EBSCO - CINAHL With Full Text*), if the staff would like to require any update information or latest development of the field, information can be easily accessed. According to our independent student survey after the teaching, there is no indication that teachers are not able to deliver the most updated information in teaching.

15. To enhance the confidence of the Council, please find a list of subjects assigned to each individual lecturers and their previous experience, so as to support that they have experience in the areas they had been assigned to teach (**Attachment 2**)

Practicum

6. After inspecting the assessment forms used in practicum, it is found that the checklist focuses on mainly tasks and procedures. This observation also concurs with students' description of clinical learning which is mainly routine-focused, including the 3rd year students.

16. Our assessment forms used for practicum are jointly developed with the Tuen Mun Hospital, which have years of experience conducting practicum training for other local universities. Therefore, it would be unlikely that they would develop assessment forms that are not up to the standard. However, if the Council has any suggestion on the modification of the form, we are happy to follow. The third year students interviewed by the Panel did not start their clinical practicum at the time of the accreditation visit. Therefore, the comment made in the Council's letter may arise from misunderstanding of the learning pathways of students.

7. The ward environment in Tuen Mun Hospital is busy and the students are taken as working hands from 2nd year onward. The full-time HACIs only mentor the 1st year and the beginning of the 2nd year students. Given the fact that clinical mentors in wards assume full patient load and are too busy to supervise and teach the students, the HKIT has not taken an active role to ensure their students are provided the clinical learning as required.

17. HKIT students are now conducting their practicum training at the Tuen Mun Hospital. Please note that Tuen Mun Hospital provides a quality and authentic environment for clinical training for both HKIT students as well as students from other nursing programmes. Therefore, our practicum training environment is no different from the training environment of university accredited nursing

programmes. 3rd year students will sit for total patient care assessment which demands knowledge, skills and caring and they are still taught and supervised by both clinical mentors and HACIs.

18. In addition to HACI (Hospital Authority Clinical Instructor), there are also clinical mentors supporting the training. As a matter of fact, Tuen Mun Hospital, which is renowned for providing placement for nursing programmes of universities, always sticks to a student-clinical mentor ratio 8:1 (the ratio that is now applied to HKIT's nursing programme) that ensures the quality of the training. We believe this is the same ratio other universities are now using.
19. All hospital wards in Hong Kong are busy, it is unlikely that the conduct of training at a busy ward is a genuine reason for rejection, in particular when Tuen Mun Hospital is the same venue providing clinical placement for programmes accredited by the Nursing Council.

8. HKIT has not adequately prepared the mentors to facilitate students in the clinical environment. HKIT does not offer training for its own mentors. Instead, they rely on other educational institutes to provide trainings for the mentors. This assumed expectation is haphazard. It is found from an interview with a staff nurse in Tuen Mun Hospital (who is one of the mentors for the HKIT students) that not all the mentors had received proper training before taking up the job.

20. It is not true to say that HKIT has not adequately prepared the mentors to facilitate students in the clinical environment. All clinical instructors and clinical mentors had been invited to attend a half-day training workshop provided by the HKIT teaching staff on curriculum and philosophy of the programme on 8 November 2006 and 26 November 2007. The information had been provided to the Nursing Council before and during the accreditation visit, and the areas of concerns raised in the Council's reply letters have never questioned the adequacy of mentor training offered by HKIT. The aims and objectives of each clinical placement had been explained. The goals and methods of clinical assessment had been explained, and examples of the recording sheets required to be completed for each student attending each clinical placement had been provided. HKIT generally appoints clinical mentors who are experienced/trained clinical mentors. With their years of experience coaching nursing students from other universities, lengthy training will only waste their time and is not appropriate or required. Nursing Council also failed to provide any evidence to support the concern. As a matter of fact, such information on mentor training has been submitted to the Council more than once, for instance, on 26 October 2006 and 19 January 2007, but mentor training has never been mentioned in the areas of concern raised/summarized by Council.

Quality Assurance System

9. Although a quality assurance system is in place, there is a lack of evidence on how it is operated to ensure continuous improvement of the Programme.

21. There are 90 box folders providing evidence on how the quality assurance system ensures continuous improvement of the programme. Therefore, it is not true to say: 'There is a lack of evidence on how it (the quality assurance system) is

operated to ensure continuous improvement of the programme'. If the Council informs us of what sort of evidence it is looking for, we would be happy to show them to the Council.

10. The structure, process and mechanism to ensure how the programme achieves its aims (as presented to the panel during the accreditation visit) are unknown. There are no formal QA reports, external reviews and audits of the teaching materials and performance of the lectures. There are no minutes, terms of reference of the QA Committee. Mr. Newman Tang, as member of the QA Committee, has not attended any meeting and he does not know anything about the QA Committee and he has not noted any related report in the past 2 years.
22. The programme is accredited by the Hong Kong Council for Accreditation of Academic and Vocational Qualifications, and the structure, process and mechanism to ensure how the programme achieves its aims is a "must" before the programme can be accredited.
23. As a matter of fact, all the abovementioned information is readily available at the accreditation visit venue. It is perfectly understandable for the Accreditation Panel as an outsider of another institute may have difficulty in locating the minutes of particular committees or reports. But we were always available to retrieve the requested documents during the visit. If the Panel had requested additional documents further to the 90 box folders before or after the accreditation visit, the said documents could have been easily shown to the Panel. Please advise what additional documents the Council would like to have read. HKIT will immediately send them to the Council again for its reference.
24. For instance, we have kept the minutes of the QA Committee since its meeting on 21 May 2002. For your information, the QA Committee has been established since 2001 and the terms of reference and minutes are readily available. The QA operation is mainly on general institutional level issues as QA is applied to the whole institution rather than individual programme. Therefore, it would not be surprising that not every programme will have one representative on the QA committee.
25. At the time of the Council's accreditation visit, Mr. Newman Tang was only recently elected as a QA Committee member to be approved by the HKIT's Council. In the other words, Mr. Tang was not a QAC member at that time. And that was why Mr. Tang did not attend QA Committee meetings yet, and hence did not know much about the QA Committee. But if required by the Nursing Council, we would include Mr. Newman Tang as a permanent member in the QA committee.
11. Although HKIT gives an account of the work done with a view to achieving the expected outcomes of the programme, there is no evident mechanism to ensure that the students would achieve such outcomes, and how those outcomes are evaluated.
26. According to the taxonomy of educational objectives, there are three domains of educational outcomes: cognitive, affective and psychomotor domains (Bloom, 1956; Krathwohl, 1964). Objectives in the cognitive domain are assessed by assignment and examination. Objectives in the affective domain, e.g. care for patients,

accountability for their practice, are assessed by the clinical mentors and teaching staff where appropriate. Objectives in the psychomotor domain are assessed by the clinical assessors. Learning outcomes of students are assessed accordingly.

Language of Teaching Material

12. While the medium of instruction of the Programme is said to be in Chinese, supplemented by English, it is noted from the documentation that a number of the course handouts are in English with only some terms or clauses being translated into Chinese.

27. The said programme delivered in Chinese supplemented with English was made clear to the Council on 9 March 2007. And we have received no objection from the Council. Our major learning materials are all in Chinese, supplemented by English. The course handouts in English are not major handouts but supplementary document for students' reference for enrichment purpose. The Council would agree that students should be updated with the most updated information in the field. Since a lot of such information is in English without Chinese version, it would not be surprising that some handouts are in English. We wish to seek the Council's approval that students can use English handouts for enrichment purpose. However, for the regular handouts, it would be in Chinese, supplemented by English.

13. It is found that there is inconsistent use of language in teaching, assignments and assessment. It would be difficult for students to fully appreciate the content of the teaching materials. This also reflects the lack of monitoring, quality assurance and clear policy in the teaching requirement.

28. All our teaching, assignments and assessment are consistently delivered in Chinese supplemented by English. This is evidenced by the assignments and assessment documents displayed on the table during the accreditation visit. If required by the Council, we can provide such documents to the Council on a regular basis to support the fact that consistent use of language has been applied.

14. The students can choose to write the assignments or question papers in English or Chinese. This practice deviates from the common practice of the Chinese training programmes for nurses.

29. Choosing to answer the assignments or question papers in English or Chinese is applied also in today's Hong Kong public examination system. But if the Council insists that our programme should stick to the conventional model for accreditation of the programme, we would follow suit.

Resources

15. Taking into account the number of students being admitted into the Programme, the library and skill-training laboratory are considered inadequate in terms of reference materials, books and journals, teaching facilities and equipment. A teaching class has been found in the library. Furthermore, the classrooms are very crowded and these are also reflected in the students' feedback.

30. HKIT has all the resources approved by the HKCAAVQ during academic accreditation.

Laboratory: As a matter of fact, we are puzzled by the criticism about 'skill-training laboratory', because we have asked the Council about the requirement of nursing laboratory on 17 August 2007 (**Attachment 4**), but the Council replied on 11 October 2007 (**Attachment 5**) that the question was irrelevant and no advice was given to us despite our further request (**Attachment 6**). For 140 students, we have two laboratories. If it is considered to be inadequate, please advise and we will follow.

Classroom: The classrooms are approved by the Education Bureau for educational use and all rooms are with fixed capacity which we have to follow. Unless another set of standard will be provided by the Council and approved by the Education Ordinance, we have difficulties in knowing how big an area that would not be considered as crowded. Please advise.

Library: Besides books in the traditional library, HKIT has actively developed its library system to cope with the increasingly technological world in the 21st century. In addition to the library in the Breezy Path campus, we have subscribed to 'an electronic library (*EBSCO - CINAHL With Full Text* – a comprehensive on-line database of full-text journals in nursing).

CINAHL with Full Text is a comprehensive source of full text for nursing and allied health journals, providing full text for more than 550 journals indexed in CINAHL. Of those, nearly 400 have cover-to-cover indexing in CINAHL with more than 600,000 full-text articles dating back to 1982. *CINAHL with Full Text* is a useful research tool for all areas of nursing and allied health literature.

This e-learning resource may not be available even in some nursing schools, where traditional library with books is still the main focus. The class in the library was using our computer system in the library to search information as part of the study. It is a quite common example of learning through the computer as advocated in the current education reform in Hong Kong.

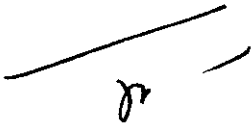
Equipment: Besides the labs, all classrooms are equipped with visualizers, computers, LCD projectors and internet access facilities. The whole campus is equipped with wireless LAN, and as such it is believed to go along the standard of all other classrooms in the local universities.

According to the Council's *Handbook for Accreditation of Training Institutions*, it is the Council's duty to list the conditions for improvement in the accreditation report. Even when such accreditation report is not available now, we are willing to make improvement (as suggested above to the Council) in order to cope with the requirements of the Council.

We would be pleased to supply further information if deemed necessary, and we sincerely hope that the Council will consider reviewing its decision to reject our application for accreditation. Please be assured that we have a heart for education and the aspiration to allay the public concern about the shortage of nurses in Hong Kong, as evidenced by our commitment and enthusiasm despite the obvious constraints facing a non-profit making, self-financing institution offering a nursing programme.

Thank you for your attention.

Yours sincerely,



.....
Joy Shi
President

The Nursing Council of Hong Kong
Rejection Criteria for Accreditation of Training Institutions
(with effect from 19 December 2005)

The application for accreditation will not be considered for further processing if the submission fails to provide evidence to substantiate any one of the following key areas:

1. There is a full curriculum which is designed in accordance with one of the following reference guides issued by the Nursing Council:
 - (a) *A Reference Guide to the Syllabus of Subjects and Requirements for the Preparation of Registered Nurse (General) in the Hong Kong Special Administrative Region;*
 - (b) *A Reference Guide to the Syllabus of Subjects and Requirements for the Preparation of Registered Nurse (Psychiatric) in the Hong Kong Special Administrative Region;*
 - (c) *Core-Competencies for Enrolled Nurses (General) & A Reference Guide to the Syllabus of Subjects and Requirements for the Preparation of Enrolled Nurse (General) in the Hong Kong Special Administrative Region; or*
 - (d) *Core-Competencies for Enrolled Nurses (Psychiatric) & A Reference Guide to the Syllabus of Subjects and Requirements for the Preparation of Enrolled Nurse (Psychiatric) in the Hong Kong Special Administrative Region*
2. The strength of core teaching team (including quantity and qualifications) is adequate to launch a quality programme. For non-tertiary institutions, reference should be made to tertiary institutions and the criteria for entry into the Nursing Council's former Indicative Register of Teachers of Nurses (a copy of the criteria is attached).

Evidence: CV of the teaching team

3. The student background meets the essential entry requirements as stipulated by the Nursing Council.

Evidence: Specification of required entry requirements

4. There is confirmed clinical placement with appropriate supervision

Evidence: Supporting documents from Categories A, B and C clinical training grounds in all areas, including general hospital units, community and specialty areas, indicating confirmed access for clinical placement

**Criteria for Entry into the
Nursing Council's Former Indicative Register of Teachers of Nurses**

I. Criteria for entry into the Register

No person shall be eligible to be recognized as a qualified Teacher of Nurses unless the Nursing Council is satisfied that he/she:-

- (a) is of good character;
- (b) is a registered nurse in Hong Kong;
- (c) possesses 3 years' post-registration (excluding all post-basic training) clinical experience in areas where basic or post-basic Student/Pupil Nurses are being trained; and
- (d) (i) possesses an academic qualification recognized by the Council to teach nursing and its course of studies should include:

Education psychology, curriculum development/course design, teaching methodology, supervised teaching practice, and measurement and evaluation in learning;

or

- (ii) possesses a Master or higher degree in a subject related to nursing.

II. Each application will be assessed on an individual basis with regard to the course contents.

Summary of Qualifications, Working & Teaching Experiences

| Name | Degree | Master | Subject Taught | Working Experience | Teaching Experience | Clinical Update |
|-------------|----------------------|--|--|---|--|---|
| A | Nsg. 1992 | Three Master degrees (Education 1997 Adm. 1996, Counselling 2001) | 1. Basic Life Sciences 2. Advanced Life Sciences 3. Health Assessment 4. Foundation of Prof. Nsg. 5. Foundation of Nsg. Skills II 6. Patho-physiology & Diseases Mgt. 7. Medical & Surg. Nsg. I & II 8. Aged Care | 1. Hospitals (QMH, QEH, PWH, PMH) 1980-2003 -- - Medical (RN) - Surgical (RN) - A&E (RN) - Intensive Care Unit (RN) - Human Resources Dept. (HRM) - Central Nursing Division (OSH) - Nursing School (NOE) 2. Educational Institutions (HKIT): since Oct 05 Senior Lecturer, Dept. Head | 1. School of General Nursing, Q.M.H. 10 yrs. 2. Open University of Hong Kong 3. SPACE, Hong Kong University 4. School of Continuing Studies, Chinese University of Hong Kong 5. Hong Kong St. John Ambulance 6. H.K.I.T. - Senior Lecturer and Dept. Head of Nsg. | 1. TMH : M&S, Surgical, Geriatric Day Hospital, DM Day Centre 2006 2. Continuing Education – Diploma in Applied Gerontology (from 2006 – 2008) |

| Name | Degree | Master | Subject Taught | Working Experience | Teaching Experience | Clinical Update |
|------|-----------|-----------|--|---|--|-------------------------------|
| B | Nsg. 1990 | Nsg. 1996 | 1. Basic Life Sciences 2. GI Nsg. – Liver and Pancreas 3. Ortho. Nsg. 4. Musculo-skeletal Nsg. 5. Neuro-logical Nsg. 6. Foundation of Prof. Nsg. 6. Med. & Surg. Nsg. III 7. Leadership & Mgt. 8. Prep. For Prof. Nsg. 9. Ethical & Legal Issues in Health Care | 1. RN , QMH 1968 – 77 2. NO, QMH 1977 - 1980 3. NE, QMH 1980 - 1987 4. Clinical Coordinator, Australia 1987 - 1988 5. QEH, Australia, NE, 1988 - 1990 6. QEH , S. Australia 1990 - 1994 Nurse Educator 7. QMH, HK, NE., 1994 – 2001 8. Associate Professor, Macau Polytechnic Institute 2002 – 2008 (Part-Time) 9. Lecturer, H.K.I.T. from 2006 - now | <u>Full-Time</u> 1. <u>Local</u> : Queen Mary Hospital – . School of General Nursing . 2. <u>Overseas</u> a. South Australia : Queen Elizabeth Hospital b. North West Nurse Education Centre , South Australia c. Lincoln Institute of Health Sciences, Melbourne, Australia d. HKIT. Lecturer | Planned in 2008 summer in TMH |

| Name | Degree | Master | Subject Taught | Working Experience | Teaching Experience | Clinical Update |
|------|--------------|--------------|---|---|--|--|
| C | Nsg. 1995 | Nsg. 2005 | 1. Foundation of Nsg. Skills I, II 2. Concept of Health & Health Promotion 3. Health Assessment 4. Gynae. Nsg. 5. GI nursing – liver and pancreas | 1. St. Teresa Hospital – Med., Surg., Mixed wards as RN 2. HKU – Clinical Mentor 3. Queensland Nsg. Agency, Australia, RN | 1. Lecturer, H.K.I.T. Since Oct 07 2. University of H.K. Nov-Dec 2002 3. St. Teresa Hospital 1998 - 2007 | Continuing Education 1. Cervical Smear Taker Course - in progress 2008 2. Certificate Course in Ward Management, 2006, College of Nursing 3. Certificate Course on Clinical Audit, 2007, College of Nursing 4. Patient Safety Workshop, 2006, National University Hospital (Singapore) |

| Name | Degree | Master | Subject Taught | Working Experience | Teaching Experience | Clinical Update |
|------|----------|-----------|--|--|--|--|
| D | Nsg.1999 | Nsg. 2007 | 1. Child & Adolescent Health 2. Endocrine Nursing | 1. RN, Queen Elizabeth Hospital, 1990 - 2008 2. Lecturer, H.K.I.T. since Feb 08 | 1. Clinical mentor and preceptor in QEH - pupil nurses, RN and std. nurse | Continuing Education -Preceptor ship -Mentorship of Child health nursing and paediatric intensive care nursing |

| Name | Degree | Master | Subject Taught | Working Experience | Teaching Experience | Clinical Update |
|------|--------|--------|--|---|--|-----------------|
| E | Yes | Yes | 1. Basic Life Sciences 2. Research in Health Care | Hospital – 3 – 7/1987 ,RN, USU, QMH 2-10/90 RN, Geri. Rehab., CMC 5/90 – 5/92 RN, Paed., PMH 9/94 – 6/96 RN, Paed., PWH, 10/95 – 3/2001 Research Nurse, NS, CUHK 4 – 9/06 RN, A&E, PWH 2 – 9/07 Research Nurse, CUHK 10/08 -now Clinical Coordinator HKIT | 1. RN 2. Research Nurse 3. Clinical Coordinator, HKIT | Research |

| Name | Degree | Master | Subject Taught Under supervision | Working Experience | Teaching Experience | Clinical Update |
|------|--------------|-------------|-------------------------------------|---|--|-----------------------------|
| G | Nsg. 2000 | In progress | Foundation of Nursing Skills I & II | 1. RN 1983-1993 Alice Ho Miu Ling Nethersole Hospital 2. RN, Tsan Yuk Hospital 1993 - 1996 3. 1997 - 1998 Part-Time Clinic Nurse, Toronto 4., 1997 – 1990 Part-Time Health Talk Speaker, Toronto 5. 1998 – 2000 Part-Time Program Assistant Toronto 6. 2003 – 2004 Part-Time RN, Dept. of Health, H.K. 7. Lecturer, H.K. Institute of Vocational Education | Teach : 1. RN 2. Midwife 3. Student Nurses, HKIT 10.2005 – 4.2007 | TMH 2006 Same as staff A |

G is now having no pay leave.

kschan

From: secy_nmpp@dh.gov.hk
Sent: Friday, February 22, 2008 11:36 AM
To: kschan
Subject: RE: Accred visit

Dear Dr Chan,

Please note that no additional information is required at this stage. I'm sorry for my belated reply.

Sarah
Secretary, Nursing Council



"kschan" <kschan@hkit.edu.hk>

20/02/2008 14:50

To: <secy_nmpp@dh.gov.hk>
cc:
Subject: RE: Accred visit

Dear Ms Tsui,

May I ask whether HKIT needs to supply any additional information to the Nursing Council at this moment.

Regards,
KS Chan
Vice-President
HKIT

-----Original Message-----

From: secy_nmpp@dh.gov.hk [mailto:secy_nmpp@dh.gov.hk]
Sent: Thursday, February 14, 2008 10:50 AM
To: kschan
Subject: Re: Accred visit



Dear Dr. Chan,

Thank you for your email. Since the Panel has already asked me to take the notes, input from your side is not required at the moment. Anyway, thank you very much for your arrangements on the day of visit.

Sarah
Secretary, Nursing Council

"kschan" <kschan@hkit.edu.hk>

13/02/2008 15:41

To: <secy_nmpp@dh.gov.hk>
cc:
Subject: Accred visit

4/6/2008

Dear Ms Tsui,

As requested, I have asked my colleague to jot down the recommendations made by the Panel during the concluding session. Would you still want the notes? Or, would the Panel compile the recommendations themselves?

May I take this opportunity to thank the Panel for their time and advice given to us.

Regards,

Dr. K.S. Chan
Vice President
Hong Kong Institute of Technology
2, Breezy Path, Mid-levels West, Hong Kong
<http://www.hkit.edu.hk>
Tel: (852) 27822433 ext 228; Fax: (852) 2782 0497



香港科技專上書院 (非牟利)

Hong Kong Institute of Technology (Non-Profit Making)

Attachment 4

書院港島校舍辦事處：

2 Breezy Path, Mid-levels West, Hong Kong. 香港西半山卑利士道 2 號

長沙灣教學中心：

638 Cheung Sha Wan Road, Cheung Sha Wan, Kowloon, Hong Kong. 香港九龍長沙灣長沙灣道 638 號

Tel: 2782 2433

Fax: 2782 0497

Website: www.hkit.edu.hk

BY FAX

17 August 2007

Professor Ho Pak-chung
Chairman of Accreditation Committee
The Nursing Council of Hong Kong
[Fax: 2527 2277]

Dear Professor Ho,

Associate Degree in Nursing Programme of the Hong Kong Institute of Technology

There is no doubt that nurse training should put equal emphasis on both theory and practice. During the academic accreditation of our programme, Associate Degree in Nursing, Nursing Laboratory is one of the main conditions for confirmation of accreditation status of the programme. A list of equipment in the Laboratory once indicated by the Nursing Council was also referred to during the accreditation.

Furthermore, the number of Nursing Laboratories should also be increased according to the number of students accepted into the programme.

To prepare our institution for the accreditation by the Nursing Council, I should be grateful if you would provide the following information at your earliest convenience:

1. whether there is any updated Equipment list for Nursing Laboratory indicated by Nursing Council, and
2. ratio of student to Nursing Laboratory (or places in the laboratory).

Thank you for your attention.

Yours sincerely,

.....
Joy Shi
President

c.c. Ms. Adela Lai Shuet-fun, Chairman of Nursing Council;
Members of accreditation committee



香港護士管理局
NURSING COUNCIL
OF HONG KONG

頁碼編號 :
Your Ref. :
本局編號 : NC 37/G
Our Ref. :
電話 : 2527 8238
Tel. No. :

香港灣仔皇后大道東182號
順豐國際中心1樓
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182 Queen's Road East,
Wan Chai, Hong Kong.

電郵地址 : ncncdh@netvigator.com
E-mail :
網址 : www.nchk.org.hk
Website :
圖文傳真 : 2527 2277
Fax No. :

By fax and by post
(Fax No.: 2782 0497)

11 October 2007

Dr. SHI Mei-chun, Joy
President
Hong Kong Institute of Technology
2 Breezy Path
Mid-levels West
Hong Kong

Dear Dr. SHI,

Laboratories

I write for and on behalf of the Nursing Council.

67 in part 3
I refer to your letter dated 17 August 2007. The information requested by you as stated therein is not relevant and will not be provided.

Yours sincerely,

(Ms/Miranda YIP)
Secretary, Nursing Council

Communications to be addressed to the Secretary
來函請寄秘書收



香港科技專上書院 (非牟利)
Hong Kong Institute of Technology (Non-Profit Making)

Attachment 6

書院港島校舍辦事處：

2 Breezy Path, Mid-levels West, Hong Kong. 香港西半山卑利士道 2 號

長沙灣教學中心：

638 Cheung Sha Wan Road, Cheung Sha Wan, Kowloon, Hong Kong. 香港九龍長沙灣長沙灣道 638 號

Tel: 2782 2433

Fax: 2782 0497

Website: www.hkit.edu.hk

BY FAX

17 October 2007

Ms. Miranda Yip
Secretary
The Nursing Council of Hong Kong
1/F Shun Feng International Centre
182 Queen's Road East
Wanchai, Hong Kong
[Fax: 2527 2277]

Dear Ms. Yip,

Laboratories

7c

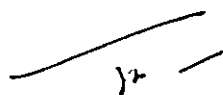
I should be grateful if Nursing Council could explain why it considers nursing laboratories to be irrelevant in the accreditation of nursing programmes, because nursing laboratories should be one of the important accreditation criteria according to the *Handbook for Accreditation of Training Institutions* issued by Nursing Council, as indicated on page 2 : VI. Submission of a Self-Study Report from a Training Institution – (5) Resources and facilities for clinical practice.

For your reference, all institutions which are not self-accredited come under the scrutiny of the HKCAA, which has set the following accreditation criteria for our nursing programme:

- One laboratory is sufficient if the number of students is less than 80.
- Two laboratories are required if the number of students is over 80.

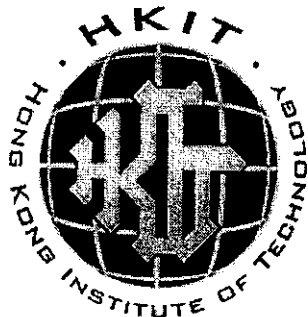
Thank you for your attention.

Yours sincerely,



.....
Joy Shi
President

c.c. Dr. Lam Ping-yan, Director of Health [Fax: 2893 9613];
All members of Nursing Council [Fax: 2527 2277]



香港科技專上書院 (非牟利)

Hong Kong Institute of Technology (Non-Profit Making)

附件 8

書院港島校舍辦事處：

2 Breezy Path, Mid-levels West, Hong Kong. 香港西半山卑利士道 2 號

長沙灣教學中心：

638 Cheung Sha Wan Road, Cheung Sha Wan, Kowloon, Hong Kong. 香港九龍長沙灣長沙灣道 638 號

Tel: 2782 2433

Fax: 2782 0497

Website: www.hkit.edu.hk

BY FAX

[Fax: 2527-2277]

16 April 2008

Ms. Sarah Tsui
Secretary, Nursing Council
1/F., Shun Feng International Centre
182, Queen's Road East
Wan Chai
HONG KONG

Dear Ms Tsui

Request for Information

The Secretariat of the Legislative Council invited the Hong Kong Institute of Technology (HKIT) today to attend a special meeting of the Panel on Education of the Council on Monday 28 April 2008 at 10:45 am to discuss issues relating to academic and professional accreditation of sub-degree courses, with reference to HKIT's application to the Nursing Council of Hong Kong for accreditation of its Associate Degree in Nursing Programme.

To assist the Panel's deliberations, it would be useful to provide the following factual background information. I am therefore writing to seek your kind assistance.

Information requested

I should be grateful if you would kindly let me have the following information:

No. of applications received in the last 10 years

1. The numbers of institutions that have applied for accreditation with the Nursing Council for their nursing programmes in the last 10 years. I would appreciate it very much if the following breakdown could be provided:

| Category of applying institution | Enrolled Nurse | Registered Nurse |
|----------------------------------|----------------|------------------|
| Universities | | |
| Other tertiary institutions | | |
| Nursing schools in hospitals | | |
| Other institutions | | |

Processing time

2. For each application (name of institution **NOT** required), please provide:

- (1) Date of submission of first application by the institution
- (2) Date of accreditation visit if already conducted, or
Date of scheduled accreditation visit to be conducted
- (3) Date of accreditation visit not yet confirmed
- (4) Date of notification of the outcome of the accreditation

Outcomes

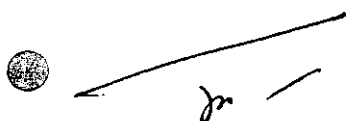
3. Please provide a summary of the outcome information in the last 10 years:

| Nature of outcome | No. of applications |
|--|---------------------|
| (1) Accreditation granted | |
| (2) Accreditation granted subject to fulfillment of conditions suggested by Nursing Council | |
| (3) Application rejected | |
| (4) Accreditation process in progress | |

As the Legislative Council has asked the HKIT to submit its documentation on or before 23 April 2008, it would be much appreciated if you could kindly let us have the above information by fax on **Monday 21 April 2008**. The inconvenience caused is regretted.

Thank you once again for your kind assistance.

Yours sincerely



Joy Shi
President

c.c. Ms. Adela Lai Shuet-fun, Chairperson, Nursing Council of Hong Kong;
Dr. York Y. N. Chow, SBS, JP, Secretary for Health, Welfare and Food;
Mr Shane Solomon, Chief Executive, Hospital Authority



HONG KONG SOCIETY FOR NURSING EDUCATION LIMITED

P.O. Box 98898, Tsim Sha Tsui Post Office, Kowloon, Hong Kong
<http://www.hksne.org.hk>

Dear Mr Tsang,

I'm WONG Kam Yuet, one of the members of the election panel representing the Health Services Sector. I'm an independent candidate, supported by the Hong Kong Society for Nursing Education (HKSNE). HKSNE is a professional nursing organization, that was started 22 years ago by a group of nurse educators. HKSNE has since then contributed to the larger good of Hong Kong community through expressing views to the Hong Kong government and active participation in consultative groups of the health service organizations such as the Hospital Authority.

We congratulate you on your successful nomination for the candidacy of the CE of Hong Kong. We would like to express our opinions on a number of issues and seek your support, so as to make Hong Kong a better place to live and maintain as a competitive international city.

1. Manpower planning and its use in health care

The Government needs to have a more thorough and long-term manpower plan for all grades of health care professionals.

Nurses are definitely inadequate. The Government only grants 600 degree places for the preparation of entry level nurses every year. The number needs to be updated with the increasing health care demands. Since the Government has all along supported degree level of nursing, the review of resources to prepare adequate nurses needs to maintain this level of professional nurses, and not compromise with other sub-degree levels. We advocate the support for articulation programmes to bring all professional nurses to degree level.

Measures that are introduced to tackle the nursing shortage problem now are short-sighted, without strategic long-term planning. For example, assistants are introduced and said to alleviate part of the nursing work, but these assistants are not properly trained. Patient safety is a great concern if the care is attended by non-professional personnel whose level of competence is not secured. We seriously urge for the setting up of a nurse-patient ratio and skill-mix model to ensure an adequate professional base in the manpower model. We need to be reassured that the assistants are not substitutes of professional nurses. Health care is a professional industry and cannot be watered down with non-professional personnel while the professional base is weak.

2. The need to establish an Academy in Nursing

Hong Kong is a world-class city. The manifestations of a world-class city is not only meeting the basic needs of the people, but providing quality and fine services. With the increasing life span of people in Hong Kong, there are more needs in health maintenance. Nurse specialists have proven to be effective providers for clients who need to modify lifestyles so as to achieve optimal health. An Academy in Nursing, in parallel with the already established Academy in Medicine, is essential to ensure that the nurse specialists are being credentialed. This is to protect the public to receive care that is safe and make the best use of the nurse specialists to promote people's health. The establishment of the Academy in Nursing needs the involvement of the Government in amending the Nurses Registration Ordinance and put due resources to make it happen.

3. Health care financing

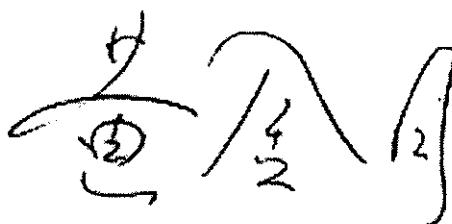
As a responsible citizen, we believe that each citizen should pay their shared part. There is an urgency for the Government to conceptualize a health care finance scheme to build in incentives, such as tax reduction to encourage tax payers to utilize more of the private hospital care system in appropriate circumstances. The introduction of a safety net for those who cannot afford to pay is of course essential since health care is an obligation of the government to people.

4. Increased investment on community health

The community needs to be empowered to take care of their own health. The Government needs to put in more health care resources in the community, not merely medically driven resources, so that the health of our community can be maintained and enhanced by a balanced multi-disciplinary team of health care professionals. This is for the greater good of the community.

The HKSNE and myself welcome opportunities for further discussion on the above issues and exchange of views on any issue that would make Hong Kong a more healthy, happy and harmonious place to live. I can be contacted at hsfwong@inet.polyu.edu.hk or 97470456.

We wish you success in the election!



Frances Kam Yuet WONG RN PhD

Chairperson, Hong Kong Society for Nursing Education

Professor, School of Nursing, The Hong Kong Polytechnic University

**HONG KONG SOCIETY FOR NURSING EDUCATION LIMITED**

P.O. Box 98898, Tsim Sha Tsui Post Office, Kowloon, Hong Kong
<http://www.hksne.org.hk>

Mr Donald Tsang
Chief Executive
Hong Kong Special Administrative Region
People's Republic of China

10 September 2007

Dear Mr Tsang,

On behalf of the Hong Kong Society for Nursing Education, I am writing to express our concern about the current development of nursing education in Hong Kong. The Society has a 22 year history in Hong Kong and has always assumed our professional duty in reflecting our views to the government to maintain quality nursing education and services in Hong Kong.

The Society believes that quality education is essential for developing competent professional nurses who are indispensable and irreplaceable in the delivery of quality services. We are very concerned about current developments that jeopardize the quality of nursing education in Hong Kong. Since the introduction of the first baccalaureate-level nursing programme in 1990, we are proud that the majority of nursing education programmes in Hong Kong were transferred from hospital-based settings to universities in 2002. This transition is in line with world-wide trends in the preparation of quality nurses. In support of this development, the Government of the HKSAR has progressively increased the number of nursing degree places from 200 to 600 based on their estimation of the community demand at the time the decision was made. It appears that this estimation is no longer sufficient to meet the escalating societal demand and need for nurses. Consequently, there has been an outcry about the inadequate supply of nurses which has resulted in the establishment of various nursing programmes at different levels of preparation. We are greatly disappointed with the Hospital Authority's reactive response in reopening hospital-based nursing schools which were suspended only five years ago. Instead of reopening schools for sub-degree preparation, we believe the Hospital Authority should be collaborating with the Government of the HKSAR to formulate a long-term strategy to secure an adequate supply of professional nurses which have been prepared at the

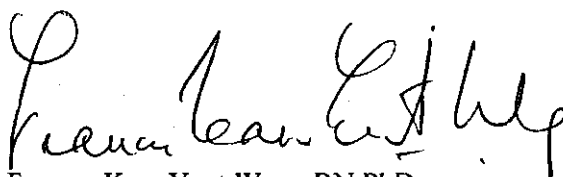
baccalaureate-degree level at our local universities in accordance with international standards.

We urge you, as a responsible and visionary government, to have the foresight and obligation to review the future demand and supply of nurses and to develop a comprehensive long-term plan for meeting societal needs for quality nursing services. In this connection, the Society has the following recommendations:

1. The Labour & Welfare Bureau, the Food & Health Bureau, the Department of Health and the Hospital Authority should jointly work to examine the actual and projected supply and demand of nurses, and to develop a long-term nursing manpower plan as well as feasible strategies to meet future demands. It is important that nursing manpower planning take into account the nurse to patient/client ratio required to maintain high-quality care in both the public and private sector and in the hospital setting as well as the community. These manpower statistics should be provided to the Education Bureau and the University Grants Committee to guide the provision of nursing degree places. To ensure an adequate supply of Registered Nurses in Hong Kong, a timetable must be set for increasing the number of first-year first-degree places for university nursing programmes as well as for phasing out the sub-degree programmes. ←
2. The Nursing Council of Hong Kong should amend the Nurses Registration Ordinance to stipulate the entry level for Registered Nurses at a baccalaureate degree level.
3. The Hospital Authority, the Department of Health and other public and private agencies should optimize the use of nurses according to their level of education and competencies. There should be strategic plans for the development of nurses from generic to advanced level. Recognition for responsibilities and expertise in terms of remuneration and rewards should be built in the employment system. It is important to retain competent and experienced nurses to provide quality care to the community as a whole.

Thank you very much for your kind attention and consideration. We look forward to hearing from you.

Yours sincerely,



Frances Kam Yuet Wong RN PhD
Chairperson

The Hong Kong Society for Nursing Education

The Hong Kong Society for Nursing Education

- c.c. Dr York CHOW, Secretary for Food and Health
Mr Michael SUEN Ming-yeung, Secretary for Education
Mr Matthew CHEUNG Kin-chung, Secretary for Labour and Welfare
Dr LAM Ping-yan, Director of Health, Department of Health
Ms Sannie CHAN, Acting Principal Nursing Officer, Department of Health
Mr Shane SOLOMON, Chief Executive, Hospital Authority, Hong Kong
Dr Susie LUM, Chief Manager (Nursing), Hospital Authority, Hong Kong
The Hon Joseph LEE, Legislative Councillor and Chairman, Association of Hong Kong Nursing Staff
The Hon. Mrs. Laura M. CHA, Chairman, University Grants Committee
Professor TSUI Lap-Chee, Vice-Chancellor, The University of Hong Kong
Professor Lawrence LAU, Vice-Chancellor, The Chinese University of Hong Kong
Professor POON Chung-kwong, President, The Hong Kong Polytechnic University
Dr Sophia CHAN, Head, Department of Nursing Studies, The University of Hong Kong
Professor Sheila TWINN, Acting director, Nethersole School of Nursing, The Chinese University of Hong Kong
Professor Samantha PANG, Head, School of Nursing, The Hong Kong Polytechnic University
Ms June LUI, President, College of Nursing, Hong Kong
Ms Cecilia SO, President, Hong Kong Chinese Civil Servants' Association



HONG KONG SOCIETY FOR NURSING EDUCATION LIMITED

P.O. Box 98898, Tsim Sha Tsui Post Office, Kowloon, Hong Kong
<http://www.hksne.org.hk>

Mr. Shane Solomon
 Chief Executive
 Hospital Authority
 147 Argyle Street
 Kowloon
 Fax: 28818058

24 June 2007

Dear Mr Solomon,

Re: HA partnering with HKIT in the Associate Degree in Nursing program

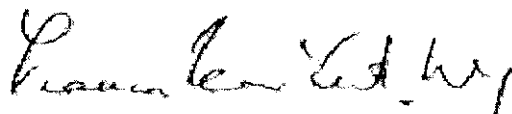
On behalf of the Hong Kong Society for Nursing Education, we would like to express our concerns for your current unreserved act in partnering with the Hong Kong Institute of Technology (HKIT) to produce registered nurses at the Associate Degree level. The Associate Degree in Nursing offered by HKIT is still in the process of being considered for accreditation by the Hong Kong Nursing Council (HKNC). It is very unfortunate that the Hospital Authority (HA) has sent out a message that may have led the public to believe that the HKIT was accredited by the HKNC which in fact is not true.

It is claimed that this partnership will help alleviate the problem of nurse shortage. We regret to say that this claim is short-sighted and reflects a poor management of the issue of shortage of nurses in the Hospital Authority. Hong Kong has always prided on being an international city with competitive powers. One of the manifestations of a world-class city is not only meeting the basic needs of the people, but providing quality and fine services. In the increasing demands of health care services in Hong Kong, we need a team of health care professionals who have good mastery of professional competence, make good decisions and provide quality services. Hong Kong started the first degree nursing program 17 years ago because we believe quality professional nurses need to be prepared at the degree level. The HA is now accepting and even encouraging a nursing workforce that is not prepared at the optimal professional level. This does not help the issue of manpower shortage, but rather aggravates the problem because the HA de-motivates the degree prepared nurses to stay in the system. These nurses prepared at the university level will find themselves not valued for they were used and awarded the same compared with counterparts prepared at a lower level of education.

It is with much regrets that the HA is taking measures that compromise quality services, which has a negative impact on the staff morale and impose possible risks on patient safety.

We hope to hear from you in addressing our concerns in due course!

Yours Sincerely,



Frances Kam Yuet WONG RN PhD
Chairperson
Hong Kong Society for Nursing Education

Cc

Dr York Chow, Secretary for Health, Welfare & Food Bureau

Mr Anthony Wu, Chairman, Hospital Authority

Dr Wai-lun Cheung, Director of Cluster Services, Hospital Authority

Ms Susie Lum, Chief Nurse Executive, Hospital Authority

Ms Adela Lai, Chairman, Nursing Council of Hong Kong

Professor Sheila Twinn, Acting Director of the Nethersole School of Nursing, CUHK

Professor Samantha Pang, Head, School of Nursing, PolyU

Dr Sophia Chan, Head, Department of Nursing Studies, HKU

Dr the Hon Joseph Lee, Member, Legislative Council and Programme Leader, Nursing, OUHK

Mr William Poon, Hon Secretary, Association of Hong Kong Nursing Staff

Ms June Lui, President, College of Nursing, Hong Kong

Ref 14 12
15

The Nursing Council of Hong Kong

CIRCULAR MEMORANDUM

To: All hospitals, nurse associations,
Social Welfare Department and
Department of Health

From: The Nursing Council of
Hong Kong

**Provision of Clinical Placements to Students
Enrolled in Non-accredited Nursing Courses**

It has recently come to the Nursing Council's attention that there are nursing courses which have not been accredited by the Nursing Council and run by organisations which have not been gazetted by the Council as a training school for nurses under regulation 9 of the Nurses (Registration and Disciplinary Procedure) Regulations Cap. 164A.

2. Hospitals or institutions are requested to take note of, while it is a matter entirely within their own discretion as to whether or not to offer or provide clinical placements to nursing students and if so to whom, the following when considering the offer of clinical placements to students from non-accredited courses run by organisations which are not gazetted training schools:

- (a) The students may not be registered or enrolled as nurses; and
- (b) Priority should be given to students from accredited courses run by gazetted training schools.

3. Hospital or institutions providing clinical placements to student nurses are requested to take note of the above accordingly. List of gazetted training schools and accredited nursing programs can be found on the website of the Nursing Council of Hong Kong.

31 July 2006

附件 13

Registration and Enrolment Requirements

A. Registered Nurse

- a. An applicant trained outside Hong Kong :
 - i. should have completed a course of theoretical and practical training for nurses at a hospital-based nursing school for a period of not less than 3 years; or
a pre-registration nursing programme of not less than 3 academic years at a university, college or polytechnic; or
any other programmes of nursing, specially designed for candidates having a different qualification or experience while joining the programme as approved by the Council from time to time, e.g. conversion programme for enrolled nurses;
 - ii. must possess a valid certificate to practise nursing issued by such certifying body as may be recognized by the Council from time to time as evidence of competency to practise nursing; and
 - iii. must pass the Licensing Examination for Registration, and if required, to undergo such further training as the Council may specify.
- b. An applicant trained in Hong Kong :
 - i. should have completed 3 years' nursing training, in which he should have undergone systematic instruction in each of the subjects prescribed for the licensing examination for registration, in a recognized training school; and
 - ii. pass the licensing examination for registration; or
 - iii. should have completed a 3 years' pre-registration nursing programme provided by a recognized training school and accredited by the council.

B. Enrolled Nurse

- a. An applicant trained outside Hong Kong :
 - i. should have completed at least 2 years' formal full-time training in nursing outside Hong Kong of a type acceptable to the Council;
 - ii. must possess a valid certificate to practise nursing issued by such certifying body as may be recognized by the Council from time to time as evidence of competency to practise nursing; and
 - iii. must pass the Licensing Examination for Enrolment and, if required, to undergo such further training as the Council may specify.
- b. An applicant trained in Hong Kong :
 - i. should have completed 2 years' nursing training, in which he should have undergone systematic instruction in each of the subjects prescribed for the Licensing Examination for Enrolment, in a recognized training school; and
 - ii. pass the Licensing Examination for Enrolment; or
 - iii. should have completed a 2 years' pre-enrolment nursing programme provided by a recognized training school and accredited by the Council.

[Top]

Nursing Council Licensing Examination

Examples of HKIT Graduates who further pursued their master study in local Universities

| HKIT Graduate | Programme studied with HKIT | Local master programme HKIT graduate have admitted |
|----------------------|---|--|
| A | 2007 Graduate from Bachelor of Business | Lingnan University Master of Science in International Banking and Finance |
| B | 2004 Graduate from Bachelor of Computer Science | Hong Kong University Master of Science in Computer Science |
| C | 2006 Graduate from Bachelor of Business | Chinese University Master in Comparative and Public History |
| D | 2005 Graduate from Bachelor of Computer Science | Hong Kong University Master of Science in Computer Science |
| E | 2007 Graduate from Bachelor of Computer Science | Hong Kong University Master of Science in Computer Science |
| F | 2005 Graduate from Bachelor of Computer Science | Hong Kong University Master of Science in Computer Science |
| G | 2005 Graduate from Bachelor of Computer Science | Hong Kong University Master of Science in Computer Science |
| H | 2006 Graduate from Bachelor of Business | Lingnan University Master of Science in International Banking and Finance |
| I | 2006 Graduate from Bachelor of Computer Science | Hong Kong University Master of Science in Computer Science |
| J | 2005 Graduate from Bachelor of Computer Science | Hong Kong University Master of Science in Computer Science |