## LC Paper No. CB(2)1221/15-16(09)

## On MCHK Reform: Increased Lay Representation is Compatible with Elected to Appointed Membership Equilibrium

I do not argue the ups and downs of adding 4 lay members to the Medical Council of Hong Kong. In a liberal society, we accept what is proposed by the people and accepted by the people.

With respect to the governing of medical doctors, we the doctors and we the people are all stakeholders. We the doctors are equipped with the knowledge necessary for adjudicating the propriety of an act of a peer, which is why the profession is allowed to govern herself. We the people are the final subject on whom the action or inaction of doctors befall, and therefore rightfully the overseers of the medical profession, which is why lay members take crucial roles in governing doctors.

We the doctors are taught to apply, for the benefit of the sick, all measures which are required in the name of humanity: a deeprooted ethical doctrine enshrined in the Hippocratic Oath and other historic declarations. We the doctors and we the people are comrades in the promotion of health and the fight against disease. We the doctors treasure the trust placed upon us.

Before the changeover of Sovereignty was laid a corner stone of professional autonomy. So said The Hon. Dr. C.H. Leong in his Newsletter April 1996,

"The medical profession has been looking forward to a total revamp of our registration ordinance for some 10 years. The main areas we would like to achieve have been:

...

(2) To alter the composition of the Medical Council to ensure that a maximum degree of professional autonomy be ensured. This could be done by having at least 50% of the members of the Council elected from amongst the profession, so that they represent and are accountable to the profession and not to the Government of the day.

..."

Twenty long years passed by, society has evolved and shall we not turn a new leaf? Yes, we shall change what ought to be changed and stand by what ought to be maintained.

Article 142 of the Basic Law stipulates that, "The Government of the Hong Kong Special Administrative Region shall, **on the basis of maintaining the previous systems concerning the professions**, formulate provisions on its own for assessing the qualifications for practice in the various professions." and that, "The Government of the Hong Kong Special Administrative Region shall continue to recognize the professions and the professional organizations recognized prior to the establishment of the Region, and these organizations may, on their own, assess and confer professional qualifications."

I submit that the maintenance of at least 50% of the members elected from among the profession is a corner stone of professional autonomy that should not be changed. I concur that increasing public scrutiny is an evolution to improve accountability of the medical profession. These are two wholly compatible concepts. What needs be done is a juggling of the ratio of elected doctors to appointed doctors in the MCHK.

The current composition of MCHK has a balanced mix of representatives among the profession. Among these is the Hong Kong Academy of Medicine, which represents the body of Medical Specialists. The Council of the Academy is fully elected by her fellows without appointment by the Government or Chief Executive. Oddly her representatives to the MCHK are "appointed" by the Chief Executive of HKSAR. It would certainly be more appropriate for an institution with a fully elected governance to have her representatives to MCHK properly elected, foregoing any ritual of appointment by the Chief Executive of the HKSAR. Such a simple measure shall restore the equilibrium so much wanted by the entire profession without jeopardy to the gist of the MCHK Amendment Bill, and the Government loses nothing.

I do not underestimate the intelligence of our Government, and I do not wish to dictate ways to fulfil parties' ernest expectations, apart from humbly suggesting one among the many possibilities.

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1 April 2016