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By email

Hon Vincent FANG Kang, SBS, JP
Chairman
Bills Committee on Medical Registration (Amendment) Bill 2016
Legislative Council
Legislative Council Complex
2 Tim Mei Avenue
Tamar, Hong Kong

Dear Mr. the Hon. Fang,

HKDU Submission on Medical Registration (Amendment) Bill 2016

Hong Kong Doctors Union (HKDU) is the only registered trade union in Hong Kong for public and private doctors. Our mission is to upkeep the medical standard of doctors by providing Continuous Medical Education opportunities to not only 2,000 odd doctor members but also to all doctors at large.

We welcome changes in Medical Registration Ordinance to meet new challenges in the social and health environment in Hong Kong.

However, we have the following concerns:-

1. Why just increase 4 laymen members in the Medical Council of Hong Kong (MCHK) by the Amendment Bill?

Why not increase 4 doctor members as well to keep balance and at the same time increase the manpower of MCHK? This was endorsed by 91% of our members through our recent survey.

To safeguard Professional autonomy we need the number of elected members from our profession to be at least equal to appointed ones by the Government.

2. As one of the three Continuous Medical Education administrators, accreditors as well as providers appointed by the MCHK, HKDU has been fulfilling its job for all doctors since 2000 and has been given credit for our work by the MCHK. While the other two accredited organisations namely Hong Kong Medical Association (HKMA) and Hong Kong Academy of Medicine (HKAM) have representatives in the MCHK. Why is that there is no representative of HKDU in the MCHK. Please note that membership of HKDU, just like HKMA, is open to all registered medical practitioners in Hong Kong and there are about 1,000 HKDU members who are not members of HKMA. **We ask for 4 or more representatives of HKDU in the MCHK.** We believe we can contribute a lot in the MCHK and ensure rules promulgated by the MCHK will be clearly understood by all doctors.



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3. We want to ask why should a doctor deregistered for a month for minor mistake, like forgetting to pay annual practising certificate fee, has to wait at least a year or even more than 2 years while waiting for restoration hearing to be arranged by the MCHK. The **administrative delay by the Department of Health**, which acts as secretary for the MCHK, should not have happened and should not be allowed. This delay should be condemned and has to be rectified instantly.
4. To facilitate renewal of annual practising certificate, MCHK can introduce a system of automatic payment without yearly declaration of no conviction. The Hong Kong Dental Council does not require dentists to make annual declaration of no conviction when renewing their licences. Like Medical Doctors, Dentists also have to report any offence punishable with imprisonment within 28 days of conviction. Such requirement should apply to both professions alike.
5. We can further introduce a **system of points deduction** whereby accused doctors lose certain points if they prefer to admit a misconduct of a minor nature. This will speed up hearings of other more serious misconducts.
6. We propose a **nominal charge** of HK\$100 for each complainant who laid against the doctor and this charge should be refundable to the complainant if that complaint goes to inquires irrespective of the results of hearings. This is an effective way of cutting frivolous complaints and will speed up handling of complaints which are of public concern. This is practised widely in Mainland China.
7. In the composition of assessors, for now, there are 10 doctors nominated by the five public institutions, namely, University of Hong Kong, Chinese University of Hong Kong, Hospital Authority, Department of Health, Hong Kong Academy of Medicine and 4 laymen appointed by the Government. With the amendment bill, there would be additional 20 assessors, 10 doctors again nominated by the five public institutions and 10 laymen appointed by the Government.

We wish to know why all assessor doctors should be nominated by public institutions and not organisations like HKDU where majority of our members are in private primary health care practice. Do public doctors have thorough understanding of the difficulties and challenges private doctors are facing? This is a pivotal problem. Another alternative we propose is to have the assessor doctors chosen from among all registered doctors by random selection through drawing lots.

8. In the amendment bill, the number of appointed doctor members would remain at 10, while the number of appointed lay members would be increased to 8. At the same time, the number of appointed doctor assessors would be increased from 10 to 20, and the number of appointed lay assessors would be increased from 4 to 14 making the total number of appointed doctor and lay council members together with **appointed** assessors to **52**. While the **elected** (direct and indirect through Hong Kong Medical Association) doctor members would remain at the number of **14**.

To be Cont'd.../3



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At the same time, there is a new proposal of requiring ONE doctor assessor to be seated in the Disciplinary inquiry quorum. AND SUCH ASSESSOR HAS THE SAME RIGHT AND DUTY as other members of the Disciplinary inquiry quorum. WE OBJECT SUCH NEW PROPOSAL AND ARRANGMENT WHICH INCUR TIGHTER CONTROL OF Disciplinary inquiry through appointment and requirement laid down in the amendment bill.

Yours sincerely,

Dr. Ho Ock Ling Thomas
Hon. Secretary
Hong Kong Doctors Union

cc: All Legislative Council Members
Press & Media

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