

**Legislative Council Panel on Healthcare Services**

**Voluntary Accredited Registers Scheme for Healthcare Personnel  
who are currently not subject to Statutory Regulation**

**PURPOSE**

This paper aims to brief Members on the proposed framework of the voluntary accredited registers scheme for healthcare personnel who are currently not subject to statutory regulation.

**BACKGROUND**

2. Healthcare professionals who are not subject to statutory regulation in Hong Kong are “regulated” on their own, mostly through voluntary, society-based registration. Under society-based registration, a professional body administers a registration system and promulgates a list of its members to which that member of the public looking for such services can make reference. Such professional bodies usually publish codes of practice to strengthen self-regulation and encourage their members to pursue continuing professional development, obtain qualifications as well as enhance their professional competency. Some professional bodies also develop quality assurance and disciplinary mechanisms to better uphold the professional standards of their members.

3. In 2013, The Ombudsman released a report on the Government’s control of healthcare professions not subject to statutory regulation. In brief, The Ombudsman opined that while not all healthcare professions needed statutory regulation, the Government should enhance communication with relevant professional organisations and societies, conduct regular risk assessments, and provide guidance for the organisations in respect of monitoring and service standards. The Government has accepted and, is following up on, the recommendations of The Ombudsman.

4. While recognising the importance and effectiveness of voluntary society-based registration, the Government considered that

a scheme could be set up to promote good service standards for the professions and provide more information to members of the public who intend to use their services. The Government took the opportunity to look for alternative forms of regulation which is appropriate to the level of risk posed by the practice of the healthcare professionals not subject to statutory regulation, with greater flexibility and responsiveness to cater for the ever-changing healthcare landscape. After a survey of both local circumstances and international experience, the Government decided to explore the feasibility of introducing a voluntary accredited registers scheme. Voluntary accreditation could provide a means whereby healthcare practitioners that meet certain standards can be identified, and enable the public and patients to make informed choices about the provision of healthcare services.

## **VOLUNTARY ACCREDITED REGISTERS SCHEME**

5. In July 2014, DH commissioned the Jockey Club School of Public Health and Primary Care, The Chinese University of Hong Kong (“CUHK”) to conduct a feasibility study on launching a voluntary accredited registers scheme (“the Scheme”) for non-statutorily regulated healthcare professions in Hong Kong and propose a set of framework and standards for the Scheme. With reference to international experience, CUHK will first launch a pilot scheme to test out the feasibility, and then review and improve the Scheme taking into account the experience of the pilot scheme. The proposed framework of the Scheme is set out in paragraphs 6 to 11 below.

### **Proposed Framework of the Scheme**

#### (a) Aim of the Scheme

6. The Scheme aims to enhance the current society-based registration arrangement under the principle of professional autonomy, with a view to ensuring the professional competency of healthcare personnel and providing more information to the public so as to facilitate them to make informed decision.

(b) Professions covered under the Scheme

7. To enable an early launch of the pilot scheme, the pilot scheme will, initially, cover the existing 15 non-statutorily regulated healthcare professions within the health services functional constituency of the Legislative Council, namely audiologists, audiology technicians, chiropodists/podiatrists, clinical psychologists, dental surgery assistants, dental technicians/technologists, dental therapists, dietitians, dispensers, educational psychologists, mould laboratory technicians, orthoptists, prosthetists/orthotists, scientific officers (medical) and speech therapists. These professions may, having regard to their own aspirations and circumstances, opt to join the pilot scheme. There is no obligation for participation and the wish of the professions is of utmost importance. On the other hand, if healthcare professionals other than the above-mentioned have a genuine interest in joining the pilot scheme as one of the pioneers, we would consider their request on a case-by-case basis, with priority accorded to the above-mentioned 15 healthcare professions.

(c) Principle of “One Profession, One Professional Body, One Register”

8. The Scheme will operate under the principle of “one profession, one professional body, one register”. For each profession, the accreditation agent will accredit one professional body that has met the prescribed standards under the Scheme. The accredited professional body shall be responsible for administering the register of its profession. The principle is in line with the aim of the Scheme to avoid confusion to the public and facilitate the public to make informed decision.

(d) Operation of the Scheme

9. The Scheme requires the professional bodies to undertake a self-assessment and external peer review process, through which professional bodies as holders of voluntary registers demonstrate their abilities to meet acceptable standards of quality, and commitment to take action when necessary to protect the public.

10. DH will appoint an independent accreditation agent<sup>1</sup> to establish standards for the professional bodies which should ensure that their members i.e. the healthcare professionals possess the necessary professional competency for delivering healthcare services. The accreditation agent will assess whether a professional body has met the prescribed standards. Accreditation is voluntary and by application. Upon accreditation, public may look up the registers of healthcare professionals through the accredited healthcare professional bodies. Accredited healthcare professional bodies would be permitted to use a registered trademark on their websites and on the Certificate of Registration issued to their members so that the public can recognise them easily. Members of the accredited professional organisations can use the title “Department of Health Accredited Register of [Profession]” on the name cards. The Scheme could in turn provide recognition to healthcare professionals as the accredited healthcare professional bodies would be permitted to use a registered trademark, and public could gain access to the registers of healthcare professionals through the accredited healthcare professional bodies. Our initial thinking is that such accreditation should be valid for three years and renewable provided that the professional bodies demonstrate that they continue to meet the standards.

(e) Standards under the Scheme

11. The standards set by the accreditation agent will include governance, operational effectiveness, risk management and quality improvement, standards for registrants, educational and training requirements, and management of the register. These standards aim to safeguard the public by ensuring the governance of the professional bodies and professional competency of their members.

## **FINANCIAL IMPLICATIONS**

12. The Government will provide financial resources for the implementation of the scheme, including operational and assessment costs of the accreditation agent and other related expenses. Professional

---

<sup>1</sup> The accreditation agent of the pilot scheme will be the Jockey Club School of Public Health and Primary Care of CUHK.

bodies do not have to pay a fee to apply for or renew accreditation. Professional bodies shall operate on a self-financing basis and be responsible for their daily operating costs. Noting that some professions have expressed difficulties in shouldering the developmental costs for attaining the standards under the Scheme, the Government will consider providing some resources in order to help kick start the pilot scheme, with due consideration on proper use of public funds and principle of value-for-money.

## **PUBLIC CONSULTATION**

13. Food and Health Bureau, DH and CUHK have been maintaining close liaison with the healthcare professions about the Scheme. In particular, CUHK organised a half-day symposium for healthcare professionals in September 2014 to share experience of the Accredited Voluntary Registers Model in the United Kingdom and held three consultation forums in October 2015 to introduce the proposed framework of the Scheme and the pilot scheme.

## **WAY FORWARD**

14. CUHK is preparing the launch of the pilot scheme and gathering views from the professions. In the consultation process, it is noted that there is a need to facilitate the target healthcare professions to meet the basic criteria for accreditation, CUHK will organise training sessions in May and June 2016 to provide a better understanding of the prescribed criteria and compliance requirements. Workshops will also be conducted to explain the accreditation process and standards for accreditation in details so as to facilitate the health professions to apply for the Scheme. Ready and interested health professions may then apply for accreditation under the pilot scheme. It is expected that the pilot scheme will be launched before end 2016.

**Food and Health Bureau**  
**Department of Health**  
**May 2016**