

Medical Registration (Amendment) Bill 2017
Follow-up Issues Raised at the Bills Committee Meeting on
3 November 2017

Government's Response

This paper sets out the Government's response to the follow-up issues raised at the Bills Committee meeting on 3 November 2017 (see **Annex**).

Revised Proposal on the Composition of the Medical Council of Hong Kong (MCHK) by the Government

2. The Government's revised proposal recommends that –
 - (a) the two seats nominated by the Hong Kong Academy of Medicine (HKAM) and appointed by the Chief Executive (CE) should remain; and
 - (b) the number of seats nominated by the Department of Health (DH) and the Hospital Authority (HA) should each be reduced by one, with these two seats converted to two members to be nominated and elected by Fellows of HKAM in accordance with the regulations or procedures of HKAM. DH and HA should be represented by the Director of Health (DoH) or his/her representative and the Chief Executive of HA or his/her representative respectively.

Consultation Details and Timetable on Formulation of Regulations or Procedures by HKAM

3. Regarding the questions raised by Members over the consultation details and timetable on formulation of regulations or procedures by HKAM, the Government has sought advice from HKAM and their reply

has been set out in paragraphs 4 to 5 below.

4. With regard to the Medical Registration (Amendment) Bill 2016 and the Medical Registration (Amendment) Bill 2017, the HKAM Council has conducted many rounds of discussions while engaging its Fellows, including providing updates via emails, conducting a survey with Fellows in early 2017 and soliciting Fellows' views between July and mid-September 2017 on HKAM's representation in MCHK.

5. In light of the latest revised proposal by the Government, the tentative timetable for formulating the regulations or procedures for nominating and electing the two Fellows to fill the two additional seats is summarised below. Depending on the relevant discussions and development, it may take a longer time to confirm some arrangements, and the timetable may be subject to further adjustment.

Date	Item
30 November 2017	Consultation Forum with Fellows - to collect Fellows' views on the arrangement and mechanisms of nomination and election of the two additional seats from HKAM
Mid-December 2017	HKAM Council to discuss and come up with a proposal on the arrangement and associated regulations/procedures
Mid-December 2017 to mid-January 2018	Discussion/refinement of proposal
By end January 2018	HKAM Council to confirm the arrangement and associated regulations/procedures of nomination and election of the two additional seats from HKAM in MCHK

Representatives of DH and HA in MCHK

6. At the Bills Committee meeting held on 3 November 2017, some Members considered that the representatives of DH and HA in MCHK (i.e. DoH or his/her representative and the Chief Executive of HA or his/her representative) must be doctors.

7. The Government's revised proposal to reduce the number of representatives of DH and HA in MCHK by half from four to two is mainly to respond to some of the requests by the medical profession. In other words, the gist of the Government's revised proposal is to reduce the number of representatives of DH and HA in MCHK, and to make DoH and the Chief Executive of HA the ex-officio members of MCHK. DoH and the Chief Executive of HA, on their official capacity, will become members of MCHK. If DoH and the Chief Executive of HA cannot attend the meetings of MCHK, they can appoint representatives to attend the meetings on their behalf.

8. The wording of the proposed Committee Stage Amendment submitted by the Government (LC Paper No. CB(2)152/17-18(01)) reflected the policy intent as stated in paragraph 7 above. It is not the Government's intention to further increase the lay participation in MCHK by revising the representation of DH and HA.

9. We understand that some Members considered that the representatives of DH and HA in MCHK must be doctors. Such suggestion is beyond the original intent of the Government's revised proposal. In fact, the appointment of DoH and the Chief Executive of HA is made in accordance with the established mechanism, which is not relevant to the revised proposal by the Government. The chance of a non-doctor to take up these two posts is also very low. The post of DoH has been taken up by doctors over the years. As a statutory body, HA will recruit the Chief Executive through open recruitment exercise and it will be the decision of HA on whether its Chief Executive should be a doctor.

10. In light of Members' concerns, we will certainly reflect Members' views to DH and HA and remind them that their representatives in MCHK should be doctors as far as practicable.

Food and Health Bureau
November 2017

Bills Committee on Medical Registration (Amendment) Bill 2017

**List of follow-up actions required of the Administration
arising from the discussion at the meeting on 3 November 2017**

The Administration was requested to:

- (a) in respect of the Administration's proposal to, among others, add two seats of registered medical practitioners who were Fellows of the Hong Kong Academy of Medicine ("the Academy of Medicine") being nominated and elected by Fellows of the Academy of Medicine in accordance with the Academy of Medicine's regulations or procedures in the composition of the Medical Council of Hong Kong ("the Medical Council"),
 - (i) provide the details, including but not limiting to the scope, period and activities, of the consultation to be conducted by the Academy of Medicine on the proposal; and
 - (ii) advise the Academy of Medicine's target timetable for hammering out the regulations or procedures for nominating and electing two Fellows to hold the offices; and
- (b) advise whether the Administration would revise its draft Committee stage amendments to section (3)(2)(c) and (db) of the Medical Registration Ordinance (Cap. 161) to the effect that the two ex officio members, being the Director of Health or his or her representative and the Chief Executive of the Hospital Authority or his or her representative, had to be registered medical practitioners so as to achieve the legislative intent as set out in paragraph 9 of LC Paper No. CB(2)109/17-18(03) that registered medical practitioner members would remain to account for three-fourths of the membership of the Medical Council.