## 立法會 Legislative Council

LC Paper No. CB(2)80/20-21 (These minutes have been seen by the Administration)

Ref : CB2/PS/5/16

#### **Panel on Health Services**

# Subcommittee on Issues Relating to the Development of Chinese Medicine

#### Minutes of the second meeting held on Monday, 20 January 2020, at 8:45 am in Conference Room 2 of the Legislative Council Complex

Members present	:	Hon CHAN Han-pan, BBS, JP (Chairman) Hon CHAN Hoi-yan (Deputy Chairman) Prof Hon Joseph LEE Kok-long, SBS, JP Hon Alice MAK Mei-kuen, BBS, JP Dr Hon KWOK Ka-ki Hon SHIU Ka-fai, JP Hon SHIU Ka-chun Dr Hon Pierre CHAN
Members absent	:	Hon Mrs Regina IP LAU Suk yee, GBS, JP Dr Hon Helena WONG Pik-wan Hon Elizabeth QUAT, BBS, JP
Public Officers attending	:	Item IDr CHUI Tak-yi, JP Under Secretary for Food and HealthDr CHEUNG Wai-lun, JP Project Director (Chinese Medicine Hospital Project Office) Food and Health BureauMiss Grace KWOK Wing-see Principal Assistant Secretary for Food and Health (Health)7 /Head (Chinese Medicine Unit)

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Action

I. Latest progress of the Government's Initiatives on the development of Chinese medicine [LC Paper No. CB(2)521/19-20(01)]

The Subcommittee deliberated (index of proceedings attached at Annex).

#### Action

Secretariat 2. <u>The Chairman</u> informed members that he and the Deputy Chairman had met with the Secretary for Food and Health on 9 January 2020 to discuss the work plan of the Subcommittee. The work plan of the Subcommittee which reflected members' suggestions made at the meeting of the Subcommittee on 20 December 2019 and the above discussion would be issued for members' reference after the meeting.

#### Motion

3. <u>The Chairman</u> ruled that the motion proposed by Prof Joseph LEE and Mr SHIU Ka-chun, the wording of which had been tabled at the meeting, was directly related to the agenda item under discussion. No members raised objection to proceed to deal with the motion at the meeting.

4. <u>Prof Joseph LEE</u> moved the following motion:

"本會促請政府正視及認同中醫在本港的專業地位,盡快設立 各級中醫師的薪酬架構及薪級表。"

#### (Translation)

"This Subcommittee urges the Government to squarely address and recognize the professional status of Chinese medicine practitioners in Hong Kong and expeditiously formulate salary structures and pay scales for various ranks of Chinese medicine practitioners."

5. <u>The Chairman</u> then put the motion to vote. The result was: four members voted in favour of the motion, and no member voted against the motion or abstained from voting. <u>The Chairman</u> declared that the motion was carried.

Follow-up actions required of the Administration

- Admin 6. <u>The Subcommittee</u> requested the Administration to:
  - (a) in respect of those ranks under the establishment of the Department of Health, the Chinese Medicine Clinics cum Training and Research Centres and the Hospital Authority which required possessing the qualification of registered Chinese medicine practitioner or registered medical practitioner, advise the qualification and experience requirements and the pay scales of the posts concerned; and

#### (b) advise in detail its initial proposal on the legislative amendments to the definition of proprietary Chinese medicines under the Chinese Medicine Ordinance (Cap. 549) which sought to enhance the regulation against certain orally consumed products containing both Chinese medicines and non-Chinese medicines as active ingredients in the market.

#### **II.** Any other business

7. <u>The Chairman</u> advised that the next meeting of the Subcommittee would be scheduled for 24 February 2020 from 9:00 am to 12:00 pm to receive views from deputations on the development of Chinese medicine.

(*Post-meeting note*: In view of the latest situation of the coronavirus disease 2019, members were informed of the arrangement vide LC Paper No. CB(2)602/19-20 on 19 February 2020 that the Chairman had decided to reschedule the above meeting to a later date. Subsequently, the Chairman decided that the plan for the Subcommittee to receive views from deputations on the development of Chinese medicine would not be pursued with due to the epidemic.)

8. There being no other business, the meeting ended at 10:27 am.

Council Business Division 2 Legislative Council Secretariat 23 October 2020

### Proceedings of the second meeting of the Subcommittee on Issues Relating to the Development of Chinese Medicine on Monday, 20 January 2020, at 8:45 am in Conference Room 2 of the Legislative Council Complex

Time	Speaker	Subject(s)/Discussion	Action
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000748 - 001010	Chairman Mr SHIU Ka-chun	Opening remarks The Chairman remarked that he and the Deputy Chairman had a meeting with the Secretary for Food and Health on 9 January 2020 to discuss the Subcommittee's work plan. The work plan, which covered a half-day visit on (a) services of the Chinese Medicine Centres for Training and Research ("CMCTRs"); (b) services provided under the Integrated Chinese-Western Medicine ("ICWM") Pilot Programme; and (c) the Government Chinese Medicines Testing Institute and a meeting to receive views from deputations on the development of Chinese medicine, both of which were scheduled for February 2020, would be issued to members for reference after this meeting. Mr SHIU Ka-chun asked whether the suggestions raised in his letter dated 19 December 2019 [LC Paper No. CB(2)450/19- 20(01)] had been taken into account in formulating the work plan. The Chairman replied in the affirmative.	
001011 - 001400	Chairman Admin	Briefing by the Administration on the latest progress of its initiative on the development of Chinese medicine as well as other related issues [LC Paper No. CB(2)521/19-20(01)].	
001401 - 001900	Chairman Mr SHIU Ka-chun Admin	Mr SHIU Ka-chun asked whether the Administration would consider (a) making government-subsidized Chinese medicine services available as an option for persons in custody, residents of residential care homes for the elderly and residential care homes for persons with disabilities, and users of Integrated Community Centres for Mental Wellness; and (b) providing subsidy for Comprehensive Social Security Assistance ("CSSA") recipients and elders for using the services provided by clinical centres established by the School of Chinese Medicine of the local universities. The Administration elaborated on the policy initiatives made with the incorporation of Chinese medicine into the healthcare system, which included the offering of a combination of Government-subsidized outpatient and inpatient services in the future Chinese Medicine Hospital ("CMH") and Government- subsidized outpatient services in the 18 Chinese Medicine Clinics cum Training and Research Centres ("CM Clinics") to be transformed from the existing CMCTRs in March 2020; and advised that the \$120 subsidized outpatient fee per visit of the CM Clinics would be waived for recipients of CSSA and Higher Old Age Living Allowance who had reached 75 years old.	

Time	Speaker	Subject(s)/Discussion	Action
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<u>marker</u> 001901 - 002544	Chairman Mr SHIU Ka-fai Admin	In reply to Mr SHIU Ka-fai's enquiry regarding the manpower demand and supply situation of Chinese medicine practitioners ("CMPs"), the Administration advised that as of December 2019, there were around 7 500 registered CMPs and 2 500 listed CMPs in Hong Kong. Each year, there were 79 undergraduates enrolled in the full-time Chinese medicine undergraduate programmes offered by three local universities, namely the Hong Kong Baptist University, The Chinese University of Hong Kong and The University of Hong Kong, and accredited by the Chinese Medicine Practitioners Board ("CMP Board") under the Chinese Medicine Council of Hong Kong ("CMCHK"). Those who had successfully completed the above courses were eligible to sit for the Licensing Examination organized by the CMP Board in order to apply for registration as registered CMPs for practising Chinese medicine in Hong Kong. Separately, the annual number of candidates who passed the Licensing Examination was about 200 on average. The Administration would continue to keep in view the demand and supply situation of healthcare manpower in Hong Kong, including that of CMP. The next report of the Strategic Review on Healthcare Manpower Planning and Professional Development was expected to be completed before end-2020. Mr SHIU Ka-fai was concerned about the difference in the entry pay levels of CMPs and registered medical practitioners. In response, the Administration advised that remuneration of CMPs working at the 18 CMCTRs, who were employees of the non-governmental organizations ("NGOs") operating the CMCTRs, was determined by the operators concerned. Following the latest review of the remuneration packages of staff employed in CMCTRs in 2018, the monthly salaries of senior CMPs who had practised for 10 years or above, CMPs who had practised for four to nine years, and CMP trainees (i.e. CMPs who had practised for less than three years) were not less than around \$46,000, \$35,000 and \$22,000 respectively. The Chairman requested the Administration to provide the relevant	Admin
002545 - 003935	Chairman Ms CHAN Hoi-yan Admin	Referring to the Strategic Review on Healthcare Manpower Planning and Professional Development released in 2017 which revealed that there was a surplus of 716 and 354 CMPs in 2016 and 2020 respectively, Ms CHAN Hoi-yan called on the Administration to formulate a policy for allocation of additional resources to enable the Hospital Authority ("HA") to utilize the manpower of locally-trained CMPs in the market to alleviate the heavy workload of public hospitals, in particular during winter surge. The Chairman asked whether the Department of Health ("DH") and HA would include CMPs into their establishments for the provision of Chinese medicine services to ensure that the remuneration of CMPs could reasonably reflect their professional status so as to retain talents.	

The Administration advised that being a registered CMP was one of the qualification requirements for some of the posts of

Time marker	Speaker	Subject(s)/Discussion	Action required
		the Chinese Medicine Unit and the Chinese Medicine Hospital Project Office of the Food and Health Bureau ("FHB") as well as the Chinese Medicine Regulatory Office of DH. The reason why CMCTRs (or the future CM Clinics) were operated by NGOs was to leverage on the rich experience of these NGOs in the provision of Chinese medicine services in Hong Kong and provide greater flexibility. At present, registered CMPs participating in the network of multi-disciplinary service providers of District Health Centres ("DHCs") might take part in providing services under the musculoskeletal disorder and stroke rehabilitation programmes. Registered CMPs could also enrolled in the Elderly Health Care Voucher Scheme as service providers. HA supplemented that to cope with the winter surge, patients visiting the Accident and Emergency Departments of public hospitals who were with minor illness were encouraged to seek alternative medical services from private healthcare service providers in the community, including registered CMPs listed in the Primary Care Directory.	
003936 - 004658	Chairman Prof Joseph LEE Admin	Expressing concern over the absence of policy on incorporating Chinese medicine services into the public healthcare system and the difference between the entry salaries of Resident Trainee in HA and CMP Trainees in CMCTRs, Prof Joseph LEE called on the Administration to formulate pay scales for various ranks of CMPs. In response, the Administration advised that the provision of Government-subsidized outpatient services at CM Clinics starting from March 2020 and Government-subsidized outpatient and inpatient services in the future CMH were some first steps to further enhance the role and development of Chinese medicine in Hong Kong.	
004659 - 005244	Chairman Dr KWOK Ka-ki Admin	Pointing out that the service model of the future CMH was unprecedented to fit the local situation, Dr KWOK Ka-ki was concerned about the handling of emergency cases at CMH as well as the service monitoring mechanism of and financial arrangements for CMH. The Administration advised that the future CMH would provide pure Chinese medicine services and services with Chinese medicine playing the predominant role with support from Western medicine in accordance with clinical needs. The medical consultations would be provided by CMPs and doctors in a collaborative mode. Separately, CMH would not provide accident and emergency, obstetric and intensive care services and perform surgeries requiring general anaesthesia, CMH would be subject to the regulation of the Private Healthcare Facilities Ordinance (Cap. 633).	
005245 - 005827	Chairman Mr SHIU Ka-chun Admin	In reply to Mr SHIU Ka-chun's queries, the Administration affirmed that the rank of the Consultant CMP post in the Chinese Medicine Unit of FHB was the highest amongst all posts which required the professional qualification of registered CMP in FHB and DH. However, it was not appropriate to compare the salary levels of the above post and the Consultant post in public hospitals given the difference in their functions.	

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	Speaker	Subject(s)/Discussion	Action required
		The Administration stressed that increased recurrent resources would be allocated to develop Chinese medicine services, including, among others, the transformation of CMCTRs into Government-subsidized CM Clinics at district level and the provision of recurrent funding for the government-subsidized services provided by CMH as well as approved training and research programmes.	
-	Chairman Mr SHIU Ka-fai Admin	Mr SHIU Ka-fai's queries and the Administration's elaboration on the coverage of the new government-subsidized outpatient services with an annual quota of 620 000 at a service fee of \$120 per visit, details of which were set out in paragraph 5 of the Administration's paper. Mr SHIU Ka-fai's view that the minimum salary level of \$22,000 for CMP Trainees working in CMCTRs could hardly reflect the professional status of CMPs.	
-	Chairman Admin	The Chairman's concern about the lack of concrete measures of the Administration to assist the Chinese medicine drug sector to enter the Mainland market after the signing of the Memorandum on Guangdong-Hong Kong-Macao Greater Bay Area Chinese Medicine Co-operation. The Administration's elaboration on the agreements signed to facilitate cooperation between Hong Kong and the Mainland in the area of Chinese medicine as set out in paragraph 23 of the Administration's paper; and its advice that it had been actively liaising with relevant Mainland authorities on measures to facilitate the entry of local memoriatory Chinese medicines ("mCme")	

		The Administration's elaboration on the agreements signed to facilitate cooperation between Hong Kong and the Mainland in the area of Chinese medicine as set out in paragraph 23 of the Administration's paper; and its advice that it had been actively liaising with relevant Mainland authorities on measures to facilitate the entry of local proprietary Chinese medicines ("pCms") in the Mainland market. It should be noted that under the Chinese Medicine Development Fund, funding schemes were in place to provide matching funds for members of the Chinese medicine drug manufacturers or traders to enhance the manufacturing qualities as well as support them in registering their pCms in accordance with statutory requirements.	
011025 - 011650	Chairman Prof Joseph LEE Admin	<ul> <li>Prof Joseph LEE's request for the Administration to, in respect of those ranks under the establishment of DH, the 18 CMCTRs and HA which required possessing qualification of registered CMP or registered medical practitioner, advise the qualification and experience requirements and the pay scales of the posts concerned.</li> <li>On Prof Joseph LEE's call for the Administration to formulate a registration system for Chinese medicine pharmacists, the</li> </ul>	Admin
011651 - 012304	Chairman Ms CHAN Hoi-yan Admin	Administration advised that it would examine the issue. Ms CHAN Hoi-yan's view that the Administration should put in place measures to support its policy on promotion of the development of Chinese medicine in Hong Kong. For instance, increasing the annual amount of Elderly Health Care Voucher, which had been maintained at the level of \$2,000 since 2014, and facilitating the provision of mobile Chinese medicine outpatient services in the community by NGOs.	

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Time	Speaker	Subject(s)/Discussion	Action
<b>marker</b> 012305 - 012714	Chairman Mr SHIU Ka-chun Admin	In response to Mr SHIU Ka-chun's enquiry, the Administration advised that the existing post holder of the Chief Pharmacist (Chinese Medicine) post of DH possessed both Chinese medicine and Western medicine qualifications. Referring to the existing arrangement that clinical attachments and clinical clerkship of undergraduate students of local full-	<u>required</u>
		time Chinese medicine programmes offered by the three local universities with Schools of Chinese Medicine had to take place on the Mainland, Mr SHIU Ka-chun asked whether CMH could take up the role in this regard upon its establishment. In response, the Administration advised that as a hospital with major role in training and education, CMH would support the three Schools of Chinese Medicine to provide clinical placement for their undergraduate and postgraduate students.	
012715 - 013705	Chairman Mr SHIU Ka-fai Admin	In response to Mr SHIU Ka-fai's call for the Administration to make use of the Qualifications Framework to enhance the training and development of Chinese medicine pharmacists and personnel involved in decoction of Chinese herbal medicines, the Administration advised that there were funding schemes under the Chinese Medicine Development Fund to provide subsidies for the organization of training programmes and courses to nurture talents for the industry.	
		On Mr SHIU Ka-fai's concern about the progress of the legislative exercise to amend the definition of pCms under the Chinese Medicine Ordinance (Cap. 549), the Administration briefed the meeting of the details of the proposed amendments and elaborated on the efforts and consultations made so far as set out in paragraphs 14 and 15 of the Administration's paper. The Chairman requested the Administration to advise its initial proposal in this regard in writing.	Admin
	Chairman Admin	The Chairman urged the Administration to lower the eligibility criteria of the fee waiver mechanism of CM Clinics such that those recipients of the Higher Old Age Living Allowance aged between 65 and 74 years would also be waived from payment of the service fee. In response, the Administration advised that the proposed eligibility criteria were same as that under the medical fee waiver mechanism of HA.	
		On the Chairman's view that local Chinese medicine undergraduate students should continue to receive certain clinical training on the Mainland after the establishment of CMH to expand their exposure to different clinical cases, the Administration advised that it was expected that this would be the case.	
014221 - 014346	Chairman Prof Joseph LEE	Handling of the motion proposed by Prof Joseph LEE and Mr SHIU Ka-chun	
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014347 - 014547	Chairman	Date of next meeting	

Council Business Division 2 Legislative Council Secretariat 23 October 2020