



7<sup>th</sup> July 2021

Dear Committee Members,

### **Our Hong Kong Foundation's Views on the Medical Registration (Amendment) Bill 2021**

Our Hong Kong Foundation (OHKF) acknowledges the Government's continuous efforts in tackling Hong Kong's longstanding doctor shortage crisis, particularly in the public sector, using a multifaceted approach. Still, as presented in OHKF's 2019 advocacy report titled "**Health System Capacity Constraints – The Severe Shortage of Doctors in Hong Kong Public Hospitals**", we believe that it is imperative to further augment the role of non-locally trained doctors in the local health system to address our ever-widening doctor shortage gap. It is our view that while the Medical Registration (Amendment) Bill 2021 (the Bill) is a timely and important legislative effort that will be conducive to incentivising non-locally trained doctors to practise in Hong Kong, the Bill addresses just one facet of the systemic approach necessary to facilitate rather than impede the admission of foreign-trained talent.

OHKF's recently released research report titled "**Fit to Practise: Reviving the Role of Non-locally Trained Doctors to Strengthen Hong Kong's Workforce for a Better Tomorrow**"<sup>1</sup> indicates that non-locally trained doctors face various challenges and disincentives when practising or looking to practise in Hong Kong. In advocating for a global recruitment of doctors to at least fill projected doctor shortfalls as calculated in the FHB Healthcare Manpower Projection (2020) and to-be-announced projected shortfalls by specialties, study findings reveal key hurdles that exist in our system relating to the recruitment, training, and accreditation of non-locally trained doctors yet to be addressed by the Bill. These hurdles must be acknowledged and overcome for their successful integration into the local health system. Informed by exclusive interviews with non-locally trained doctors practising in Hong Kong and a review of related policies in different jurisdictions, our recommendations supplement clauses set out in the Bill to fully leverage the potential of non-locally trained doctors to bolster our doctor workforce.

Our views on the Bill are summarised into the following themes:

#### **1. Transparency around the accreditation and recognition of specialist training and qualifications**

Clause 5 amending Section 8(1)(b) stipulates that one of the conditions to achieve Full Registration under the Special Registration pathway is to have a *specialist* qualification *recognised* by the Hong Kong Academy of Medicine (HKAM).

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<sup>1</sup> Executive summary: <http://tiny.cc/866yzt> (English) | <http://tiny.cc/766yzt> (Chinese)  
Full text: <http://tiny.cc/466yzt> (English) | <http://tiny.cc/666yzt> (Chinese)



Participants of our study expressed that the lack of certainty in which overseas specialist training and qualifications are recognised makes Hong Kong a less attractive jurisdiction to practise medicine. This coincides with a statement presented in the Legislative Council Brief on the Bill (File reference: [FH CR 1/F/3261/92](#)) that states “HKAM has no reciprocal recognition scheme with its counterparts outside Hong Kong at the specialist level”.

Particularly relevant to non-locally trained doctors who have completed specialist training outside Hong Kong, study participants highlighted that one of the main pathways available to be recognised as a specialist in Hong Kong--*the Certification for Specialist Registration (CSR)* -- is fraught with uncertainties. These uncertainties range from a lack of clarity concerning the requirements needed to obtain specialist accreditation, to concerns of unequal career progression and opportunities compared with locally trained peers even with successful recognition.

Those who opt to be recognised by attaining an *Academy Fellowship* expressed concerns with misalignments in the recognition of specialist qualifications attained outside Hong Kong. For instance, one of our interviewees pointed out that those who “are already specialists in their country...they still need to sit [the Academy Colleges] Exit Examination...and go through the process of physician training before they attain a specialist status [in Hong Kong], rendering the Academy Fellowship route filled with redundancies that could be off-putting to non-locally trained specialists.

Notably, some Limited Registration (LR) doctors who have been practising as specialists outside Hong Kong are hired as *Service Residents* by the Hospital Authority (HA). In relation to recognition of the competence of non-locally trained specialists, while these LR specialists are eligible to apply for an Associate Consultant position in at least ten specialties in the HA, they are not officially eligible for Consultant positions. This limitation based on registration type and not necessarily on competence has rendered some specialists to report experiencing demotions from their previous work titles. Resulting from misalignments between hired positions and past experience, this demotion was a reported demotivator to practise in our system. Among study participants with specialist qualifications, 17% received a promotion when they entered Hong Kong’s system, 33% reported no change in rank but 50% experienced a demotion in rank.

While the introduction of the Bill means that an additional pathway will be made available for non-locally trained doctors to enter our system, our study findings reveal that there is more to be done to improve the attractiveness for entry. To allow non-locally trained doctors interested in entering Hong Kong’s system to have a fairer assessment of entry requirements, we suggest that **accreditation and recognition criteria for all non-local specialist qualifications be clearly disclosed and centrally disseminated by the HKAM.**

To ensure that specialists with non-local qualifications are duly and fairly recognised for their competence and past experience, we further suggest the Government consider **setting up an**



**independent specialist accreditation body with international expert members, or empower the Education and Accreditation Committee (EAC) under the Medical Council of Hong Kong (MCHK)** that will solely be responsible for the recognition and accreditation of specialist training and determination of qualifications for inclusion in Hong Kong’s Specialist Register. Reference could be made to the functioning of the Specialists Accreditation Board in Singapore.

In parallel, we recommend that doctors with **recognised non-local specialist qualifications under CSR be eligible for the Fellowship of the HKAM** to ensure equivalent entitlement in their careers when compared with locally trained peers.

**The HA should also remove all barriers that potentially impede the career progression of non-locally trained doctors** who should be considered for progression that is merit-based alongside locally trained peers.

Finally, the Government should consider setting up an **appeal mechanism for doctors who do not meet the stipulated criteria** of the Special Registration pathway to also benefit from the proposal. For instance, the mechanism could work to retain well-qualified non-locally trained doctors currently serving in our system under Limited Registration for a set number of years but do not meet stipulated criteria to benefit from the Bill.

## 2. Support specialist training

The amended Section 8(1)(b) stipulates doctors must be i) “awarded a Fellowship of the Hong Kong Academy of Medicine,” or ii) “was certified ... to have completed the training, and obtained the qualification, comparable to that required of a Fellow”. According to the Legislative Council Brief on the Bill (File reference: [FH CR 1/F/3261/92](#)), non-locally trained doctors who have attained a qualification comparable to the pre-intermediate/intermediate examinations of constituent Colleges of HKAM and look to continue their specialist training in Hong Kong are eligible for the Special Registration pathway. The Bill, however, does not offer a clear mandate for HKAM to provide specialist training opportunities for non-locally trained doctors.

Current arrangements for the provision of specialist training for LR doctors practicing in our system calls for evaluation of specialist training opportunities for non-locally trained doctors in our system. According to OHKF’s study findings, a number of HKAM Colleges do not currently provide specialist training to non-locally trained doctors under LR<sup>2</sup>. Furthermore, non-locally trained doctors serving as Service Residents in the HA employed based on pre-/intermediate specialist qualifications attained

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<sup>2</sup> The Hong Kong College of Orthopaedic Surgeons, The College of Surgeons of Hong Kong, Hong Kong College of Radiologists



outside Hong Kong are not automatically provided continuing specialist training. This was reported to be an impeding factor for non-locally trained doctors to practise in Hong Kong.

We recommend the Government **empower the HKAM to mandate training quotas for relevant HKAM Colleges to provide specialist training for non-locally trained doctors**, giving priority to Hong Kong permanent residents. The Government should simultaneously **strengthen funding for specialist training and consider the provision of integrated contracts by the HA and HKAM**.

### 3. Create a structured career path for non-locally trained medical graduates

While the Special Registration pathway paves way for those who have yet to receive specialist training to become Fully Registered, it excludes non-locally trained medical graduates who are not registered in their jurisdiction of training (Clause 8 amending Section 14C 3(c)). This implies that internship experience is necessary to benefit from the proposed pathway. Notably, medical graduates without prior internship experience do not receive help from the government to bridge this career gap through local internship opportunities. The Bill does not address this issue.

Our doctor participants expressed that there is a stronger appeal for doctors early on in their careers to return to Hong Kong, and it is often difficult to secure an internship position overseas as non-local graduates. Therefore, we recommend that the Government **mandate medical institutions to create internship placements to non-locally trained medical graduates who are Hong Kong permanent residents to attract doctors earlier on in their careers**. We recommend **MCHK to grant Provisional Registration for a period of at least 12 months to eligible medical graduates to complete an internship experience**, taking reference to practices in the UK and Singapore (please refer to the OHKF “Fit to Practise” Report appendix 9 and 10).

In parallel, the Government should consider **modifying the current prerequisite for taking the MCHK Licensing Examination that requires candidates to have completed a fulltime internship**. Non-locally trained medical graduates with an acceptable primary medical qualification should be eligible to sit the Licensing Examination. Since it would be important for non-locally trained medical graduates to gain exposure to the local health system, candidates should still be required to complete a period of assessment in Hong Kong after passing the Licensing Examination.



#### 4. Improve the Licensing Examination

Non-locally trained doctors who do not fulfil all three listed criteria are ineligible to benefit from the Special Registration pathway and can only become fully registered by passing the Licensing Examination. Therefore, **ensuring that the Licensing Examination is a fair assessment of doctors' capabilities** is of critical importance. Our interviewees expressed concern regarding a significant mismatch between the clinical aptitude of doctors and the content covered within the examination, especially for experienced and specialised doctors. Furthermore, interviewees indicated a lack of examination support and inadequate transparency regarding the depth of knowledge assessed.

Therefore, we suggest that the Government improve the Licensing Examination mechanism by measures including: **provide comprehensive revision materials and an exhaustive syllabus, abolish negative marking scheme across all parts of the exam, and make alternative assessment methods available for experienced doctors, such as workplace-based assessments (WBA)**. Importantly, we suggest that **the MCHK mandate regular calibration of the examination with locally trained medical graduates**.

The Bill is a good step towards enhancing Hong Kong's attractiveness to global medical talent. However, more substantive support for the recruitment, training, and accreditation of non-locally trained doctors is necessary regardless of eligibility for the scheme. Relevant stakeholders must work together to drive progressive reforms in addressing Hong Kong's doctor shortage issue and make Hong Kong's health ecosystem welcoming towards non-locally trained doctors at various stages of their training and careers. We suggest the Bills Committee to refer to other detailed recommendations presented in our research report. In advocating for a systemic approach to creating a receptive environment for non-locally trained doctors, it is our view that boosting the doctor supply in the immediate term will benefit the health and wellbeing of Hong Kong people through the timely provision of quality healthcare services.

Sincerely,

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