

立法會
Legislative Council

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Bills Committee on Nurses Registration (Amendment) Bill 2023

Background brief

Purpose

This paper provides the background information on the Nurses Registration (Amendment) Bill 2023 (“the Bill”) and summarizes the major views and concerns of the Panel on Health Services (“the Panel”) on the Bill and related issues.

Background

2. Over the years, Hong Kong has been facing an increasingly serious shortage of nurses. With 9.1 nurses per 1 000 population, the nurse-to-population ratio of Hong Kong lags behind that of developed countries. According to the Report of the Strategic Review on Healthcare Manpower Planning and Professional Development published in 2017, it was expected that there would be a continuous shortage of general nurses in the short to medium term. Moreover, the nursing workforce has been facing an ageing issue. The attrition rates of nurses in the public healthcare sector are also escalating. On the other hand, upon the enactment of the Residential Care Homes Legislation (Miscellaneous Amendments) Ordinance 2023, which enhances the minimum staffing requirements of nurses at residential care homes (“RCHs”), it is estimated that existing RCHs would need to hire around 200 additional nurses starting from 2028, and another 280 starting from a date to be appointed by the Secretary for Labour and Welfare. Notwithstanding that the Administration has increased the number of training places to enhance local nursing manpower and that non-locally trained nurses may also register/enrol through the pathway mentioned in paragraph 3 below, the number of nurses is still insufficient to meet the demand.

3. Under the current sections 8 and 14 of the Nurses Registration Ordinance (Cap. 164), in order to be qualified as a registered nurse or an enrolled nurse in Hong Kong, a person has to satisfy the Nursing Council of Hong Kong (“Council”), among others, that:

- (a) for a locally trained nurse: the person has completed the prescribed training and passed the examinations as required by the Council; or
- (b) for a non-locally trained nurse: the person possesses a valid certificate to practise nursing issued by such certifying body as may be recognized by the Council as constituting sufficient evidence of the person’s competency to practise nursing, and has passed the licensing examination administered by the Council.

4. The Administration considers that there is a need to introduce new pathways for admitting qualified non-locally trained nurses without requiring them to take any examination. The Bill is therefore introduced into the Legislative Council (“LegCo”) to provide for the new pathways and related matters.

The Bill

5. The Bill was published in the Gazette on 8 December 2023 and introduced into LegCo on 13 December 2023. It seeks to:

- (a) amend the Nurses Registration Ordinance (Cap. 164) and its subsidiary legislation to:
 - (i) provide for new types of registration known as special registration, limited registration and temporary registration, as well as new types of enrolment known as special enrolment, limited enrolment and temporary enrolment;
 - (ii) authorize the Council to provide information to the Secretary for Health (“SH”); and
 - (iii) empower SH to give directions to the Council; and
- (b) provide for transitional and related matters.

6. The Bill, if passed, would come into operation on the day on which it is published in the Gazette as an Ordinance.¹

7. In short, the Administration plans to create two new pathways, namely (a) limited registration/enrolment (“LR/E”) and (b) special registration/enrolment (“SR/E”) as well as introduce temporary registration/enrolment. Moreover, the Administration proposes to make the fulfilment of the continuing nursing education (“CNE”) requirement a prerequisite for nurses upon renewal of their practising certificates² and seeking full registration/enrolment.³

8. According to the Administration, while the two new pathways of LR/E and SR/E are both intended to alleviate the shortage of nurses, there are differences between the purposes of the pathways. LR/E is intended to attract non-locally trained nurses capable of serving in specified settings in the public healthcare sector (i.e. the Department of Health (“DH”) and the Hospital Authority (“HA”)) and social welfare sector (e.g. RCHs for the elderly and persons with disability) to help tide over manpower shortage and to meet sudden surges in demand. SR/E is intended to attract nurses capable of serving in various clinical settings in clinics and hospitals in the public healthcare sector, and with the potential to join the local nursing profession on a permanent basis.

Major views and concerns raised by the Panel on Health Services

9. The Administration briefed members on the proposed legislative framework for amending Cap. 164 at the Panel meeting on 10 March 2023. Members in general supported the relevant legislative proposals. However, members expressed views and concerns on the following issues.

Ways to ensure the quality of non-locally trained nurses

10. Expressing concern over the ways to ensure the quality of non-locally trained nurses practising in Hong Kong, a number of Members

¹ Except that (i) clauses 16, 17, 27 and 28, (ii) clause 31 (in so far as it relates to the proposed new section 22(1)(d) of Cap. 164), and (iii) clause 37 (in so far as it relates to sections 12, 13 and 14 of the proposed new Schedule 3 to Cap. 164) would come into operation on a day to be appointed by SH by notice published in the Gazette. Those excepted clauses mainly relate to practising certificates and the continuing nursing education requirement and related matters.

² All nurses under full registration/enrolment, LR/E and SR/E.

³ Nurses under SR/E having completed at least five years of employment with specified institution(s).

enquired whether there were standardized and objective criteria for assessing the performance of non-locally trained nurses.

11. The Administration advised that there were many levels of control over the quality of non-locally trained nurses practising in Hong Kong, including pre-employment assessment and on-the-job assessment. The Council would also assume responsibility for monitoring the quality of nurses. Furthermore, nurses under SR/E would be employed by two major healthcare institutions, namely DH and HA. If they had been certified by their employer as having performed satisfactorily for a certain duration, this could effectively demonstrate that they could assist the local community.

Requirements for applicants

12. Some Members enquired about the requirements to be met by nurses applying to practise in Hong Kong and the length of service in a specified institution required for a nurse under SR/E to be eligible for full registration/enrolment in Hong Kong, and what were the specified institutions other than HA and DH. The Administration advised that the details of the relevant legislative proposal would be subject to the decision made by the Council upon consultation with the sector.

13. The Health Bureau subsequently issued the Legislative Council Brief (File Ref.: HHB CR 1/D/3261/92 Pt. 12) on 6 December 2023 setting out in paragraphs 8 to 10 detailed proposed admission criteria and conditions on the practice of nursing under the two new pathways of LR/E and SR/E in by . In gist, to be admitted under the two new pathways of LR/E and SR/E, non-locally trained nurses are required to obtain the relevant qualification outside Hong Kong that is broadly comparable in terms of curriculum of the programmes to any training course recognised by the Council for full registration/enrolment. They are also required to have one year (LR/E) or three years (SR/E) of fulltime post-qualification clinical experience. In addition, LR/E nurses cannot migrate to full registration/enrolment. SR/E nurses who have worked in one or more specified institutions for a total of at least five years and who are assessed by the institution(s) to have performed satisfactorily and competently based on the criteria specified by the Council will be eligible for full registration/enrolment.

14. Pointing out that as the Administration's proposal was that only nurses under SR/E would be eligible for full registration/enrolment in Hong Kong without the need to take the Licensing Examination upon fulfilment of the requirements, some other Members expressed concern that there might be nobody choosing the pathway of LR/E. Therefore, some Members suggested that the Administration should consider allowing LR/E nurses to

enjoy the treatment of registration/enrolment without examination.

15. The Administration explained that there were differences in the types of jobs to be performed by non-locally trained nurses admitted through the pathways of LR/E and SR/E. Therefore, the Administration proposed two different options to provide applicants with choices on the one hand and employing institutions with flexibility in selecting different talents on the other.

16. Some Members enquired how the Administration would allocate applicants to serve in public hospitals or RCHs. The Administration explained that RCHs could recruit their own applicants and the employment requirements could be different from those of HA.

Effectiveness of admitting non-locally trained nurses by creating the new pathways

17. Some Members expressed concern that even with the creation of the new pathways to admit qualified non-locally trained nurses, it might not be able to attract them to apply for practice in Hong Kong. This was due to factors beyond the relatively appealing remuneration offered to local nurses, such as working hours and the work and living environment. Some Members suggested that additional accommodation should be provided in the RCHs for the elderly and hospitals under construction to provide residence for non-locally trained nurses in an effort to attract their applications.

18. The Administration advised that manpower shortage and increase in attrition rate had resulted in an unfavourable working environment for healthcare professionals. In order to break this vicious cycle, it was imperative to reduce the attrition rate and introduce more talents. As for whether RCHs would provide accommodation for applicants, this matter required consideration by the Labour and Welfare Bureau.

19. Noting that the number of newly registered non-locally trained nurses had remained at a low level in recent years, some other Members enquired whether it was due to the difficulty of the Licensing Examination or the limited number of applicants. The Administration pointed out that candidates taking the Licensing Examination were required to pass both the written and practical parts. In recent years, the number of candidates taking the Licensing Examination had decreased due to the impact of the epidemic, and the passing rate of the examination had also been low. The Administration believed that the low passing rate of the Licensing Examination would affect the willingness of candidates to take it.

20. Some Members suggested that the Administration could consider sending officers to the United Kingdom (“UK”) and other countries to recruit non-locally trained nurses, as well as establishing nursing schools in the Greater Bay Area to train nurses serving healthcare institutions in the Mainland and in Hong Kong.

21. The Administration explained that HA planned to recruit medical students from UK to return to Hong Kong and practise in public hospitals. It was because there were more young Hong Kong medical students in UK, and many medical qualifications awarded by UK universities were also recognized in Hong Kong.

22. The Administration further pointed out that the number of training places for nurses in Hong Kong had been increased, and taking into account the number of subsidized and self-financed degree places, as well as the training places in nursing schools in private hospitals, a total of over 2 800 training places for nurses were provided in Hong Kong each year. The Administration acknowledged that training took time and required sufficient patient cases. It echoed that training of talents would be beneficial to the nursing workforce in the medium to long term.

Measures to retain local nurses and giving local nurses priority in employment

23. Some Members enquired about the measures put in place by the Administration to retain local nurses. The Administration advised that HA had already enhanced the promotion opportunities for nurses, and provided them with specialist training as well as flexible working hours.

24. Pointing out that there were currently over 60 000 nurses in Hong Kong and with the training of 2 800 nurses each year, some Members enquired whether there were sufficient nurses to meet the manpower requirement, and whether the Administration would consider giving priority to locally trained nurses in employment.

25. The Administration advised that most of the training for nurses was undergraduate programmes, which usually lasted for four years. Together with the accumulation of clinical experience, the training period was quite long. Moreover, the Administration could not estimate the number of graduates who would eventually become practising nurses.

Members' motion, Council questions and other relevant papers

26. At the Council meeting on 26 October 2022, Members passed a motion on “Shortening the waiting time for specialist outpatient services at public hospitals”, in which it urges the Administration to, in view of the shortage of healthcare personnel, admit more qualified nurses to practise in Hong Kong.

27. At the Council meetings on 8 February, 22 March and 6 December 2023, Members also asked questions on introducing a registered nurse practitioners system, healthcare staff retention measures of HA, and the Guangdong-Hong Kong-Macao Greater Bay Area Healthcare Talents Visiting Programmes which helps alleviate the manpower shortage in HA.

28. In addition, the Research Office of the Legislative Council Secretariat issued Statistical Highlights to provide figures on healthcare workforce in June 2023.

29. The above motion, questions, the Administration's replies and all relevant papers are hyperlinked in the **Appendix**.

Latest position

30. At the House Committee meeting on 5 January 2024, Members agreed to form a bills committee to scrutinize the Bill.

Council Business Division 4
Legislative Council Secretariat
19 January 2024

Bills Committee on Nurses Registration (Amendment) Bill 2023

List of relevant papers

Committee	Date of meeting	Paper
Panel on Health Services	10.3.2023	Agenda (Item IV): Proposed amendments to the Nurses Registration Ordinance (Cap. 164) Minutes
Introduction of the Nurses Registration (Amendment) Bill 2023 into the Legislative Council	13.12.2023	The Bill Legislative Council Brief Legal Service Division Report
-	6.6.2023*	Statistical Highlights published by the Research Office of the Legislative Council Secretariat on Healthcare workforce

*Date of issue

Council Meeting	Paper
26.10.2022	Members' motion : Shortening the waiting time for specialist outpatient services at public hospitals Progress Report
8.2.2023	Question 2 : Introducing a registered nurse practitioners system
2.3.2023	Question 11 : Staff retention measures of the Hospital Authority
6.12.2023	Question 20 : Guangdong-Hong Kong-Macao Greater Bay Area Healthcare Talents Visiting Programmes