

**For discussion on
10 March 2023**

Legislative Council Panel on Health Services

**Proposed Amendments to the
Nurses Registration Ordinance (Cap. 164)**

PURPOSE

This paper briefs Members on the proposed legislative framework for amending the Nurses Registration Ordinance (Cap. 164) (“NRO”) in order to provide new pathways for admission of qualified non-locally trained nurses and enhance professional development of nurses.

BACKGROUND

Acute Shortage of Nurses

2. Over the years, Hong Kong has been facing shortage of nurses. As at end 2022, there were 66 492 nurses (including registered nurses and enrolled nurses) in Hong Kong. According to the Report of the Strategic Review on Healthcare Manpower Planning and Professional Development (“the Strategic Review”) promulgated by the then Food and Health Bureau (“FHB”) in June 2017, it was expected that there would be continuous shortage of general nurses in the short to medium term in the light of the projection of healthcare needs having regard to demographic changes, while the manpower supply of psychiatric nurses would be close to manpower equilibrium in the short term and become sufficient in the medium term. In step with the triennial planning cycle of the University Grants Committee (“UGC”), the then FHB conducted in 2020 another round of manpower projections for healthcare professionals (“Healthcare Manpower Projection 2020”). The projection results show that the manpower gap for general nurses is expected to widen in the short to

medium term; and the supply of psychiatric nurses is expected to be adequate.

3. Moreover, the nursing workforce has been facing an ageing issue. According to the Strategic Review in 2017, over 30% of nurses had already reached the age of 50 and beyond, and thus may be close to retirement age at the current juncture.

4. Meanwhile, the attrition rates of nurses in the public healthcare sector are escalating. In 2021-2022, the attrition rates of registered nurses and enrolled nurses in the Department of Health (“DH”) reached 11.2% and 14.8% respectively; while those in the Hospital Authority (“HA”) reached 9.1% and 12.8% respectively. Despite that the Healthcare Manpower Projection 2020 projected an adequate supply of psychiatric nurses in the medium term, it is noted that the attrition rate of full-time psychiatric nurses in HA increased drastically from 3.5% in 2019-2020 to 7.8% in 2021-2022.

5. Other than the public healthcare sector, the social welfare sector also faces challenges in recruiting and retaining nursing professionals. As at end 2022, there were around 4 400 nurses employed at residential care homes for the elderly and residential care homes for persons with disabilities (“RCHs”) issued with licences under the Residential Care Homes (Elderly Persons) Ordinance (Cap. 459) or the Residential Care Homes (Persons with Disabilities) Ordinance (Cap. 613). In order to improve the quality of RCHs, in May 2022, the Labour and Welfare Bureau introduced into the Legislative Council (“LegCo”) the Residential Care Homes Legislation (Miscellaneous Amendments) Bill 2022 (“the RCH Bill”) to amend Cap. 459, Cap. 613 and relevant subsidiary legislation. One of the legislative proposals is to enhance the minimum staffing requirements at RCHs, including nurses. The Social Welfare Department (“SWD”) estimates that in order to meet the new statutory requirements on nurses, the existing RCHs would need to hire additional around 200 nurses starting from 2028 (on the assumption that the RCH Bill will be passed by the LegCo in 2023) and another around 280 nurses starting from a date to be appointed by the Secretary for Labour and Welfare.

Need for New Pathways for Admission of Qualified Non-locally Trained Nurses

6. At present, under sections 8 and 14 of NRO as well as requirements prescribed by the Nursing Council of Hong Kong (“NCHK”), in order to be qualified as a/an registered/enrolled nurse in Hong Kong, one must have fulfilled the following qualification requirement(s) –

- (a) locally trained: he/she has completed a pre-registration/-enrolment nursing programme, which is provided by a gazetted training school and accredited by NCHK; or
- (b) non-locally trained: he/she has completed a pre-registration/-enrolment nursing programme, possesses a valid certificate to practise nursing issued by a certifying body recognised by NCHK and has passed the Licensing Examination administered by NCHK.

7. Locally trained healthcare professionals should continue to be the bedrock of our healthcare workforce. Over the years, the Government has made continuous efforts to enhance local nursing manpower¹. However, given the lead time required for training local nurses and the practical constraints in further enhancing the training capacity significantly, the Government cannot solely rely on increasing the number of local training places to address the manpower problem. Even if we do so, it may not be a targeted approach to cope with the current service demand in the public sector. We thus need to tap on non-local sources and channel them to the public healthcare sector, and possibly the social welfare sector as well.

¹ Measures taken by the Government to enhance local training capacity for nurses include –

- (a) increasing the number of UGC-funded first-year-first-degree nursing training places from 590 in the 2009-2010 academic year to 690 in the 2022-2023 academic year;
- (b) increasing the number of Government-subsidised self-financing nursing training places from 420 in the 2015-2016 academic year to 1 380 in the 2022-2023 academic year;
- (c) providing more than 1 700 additional fully-subsidised Enrolled Nurse (General) training places under SWD’s “Enrolled Nurse Training Programme for the Welfare Sector” for five years starting from the 2023-24 academic year; and
- (d) earmarking around \$20 billion from the 2019-2020 academic year onwards and setting aside another \$10 billion in the 2022-23 Budget to support the UGC-funded universities which offer healthcare training programmes to upgrade and improve their healthcare-relevant teaching facilities (including nursing facilities).

8. As for non-locally trained nurses, the number of non-locally trained nurses registered/enrolled through the pathway mentioned in paragraph 6(b) above is also insufficient to meet the demand for nursing manpower. For instance, although the frequency of Licensing Examination for general registration administered by NCHK has been increased from once to twice a year since 2016, from 2018 to 2022, the number of newly registered non-locally trained nurses remained on the low side, ranging from two to 25 each year.

9. There is a genuine need to provide new pathways for admission of qualified non-locally trained nurses. Therefore, the 2022 Policy Address indicates that, to help ensure sufficient healthcare manpower for the public healthcare system, the Government will look into different options, including requiring qualified healthcare professionals to serve in public healthcare institutions for a specified period of time, and admitting qualified non-locally trained nurses. Against the above backdrop, the Government plans to amend the NRO to provide new pathways for admission of qualified non-locally trained nurses to practise in specified institutions in Hong Kong.

Need for Enhancing Professional Development of Nurses and Other Technical Amendments

10. Apart from manpower shortage, there is a need to enhance professional development for the nursing profession. Currently, there is no mandatory requirement for practicing nurses to undergo continuing nursing education. In view of the ever changing and complex clinical setting in the public healthcare and social welfare sectors, and in line with the 2021 Policy Address², we need to consider introducing suitable enhancements to the existing training and manpower development regime to uphold the quality of healthcare services delivered by the nursing profession.

² It was stated in the 2021 Policy Address that to ensure the professional competency of healthcare personnel, the Government will legislate to make continuing professional education and /or continuing professional development a mandatory requirement for supplementary medical professionals under the relevant ordinance, as well as nurses and dentists.

11. Some other technical amendments will also need to be made to the NRO to bring the legislation up to date and to keep up with the latest trends in the nursing practice.

PROPOSAL

12. The Government proposes to amend the NRO to enhance manpower supply of nurses, in particular in the public healthcare and social welfare sectors. The proposed legislative amendments also aim to enhance professional development of nurses and bring the NRO up to date.

13. Major components of the legislative proposal are as follows –

- (a) to provide **a new pathway of limited registration/enrolment (nursing)** for admission of qualified non-locally trained nurses, irrespective of whether they are Hong Kong permanent residents (“HKPRs”), to serve in premises primarily covering nurse training schools accredited by NCHK, licensed RCHs, scheduled nursing homes, social welfare service units specified by the Director of Social Welfare, and other types of employment as may be determined and promulgated by NCHK;
- (b) to provide **another new pathway of special registration/enrolment (nursing)** for admission of qualified non-locally trained nurses, irrespective of whether they are HKPRs, to serve in DH, HA as well as any other institutions that may be specified by the Secretary for Health by way of subsidiary legislation subject to negative vetting. It is proposed that non-locally trained nurses who have been engaged in full-time employment in one or more than one specified institutions with special registration/enrolment for a certain duration, subject to their employing institutions’ confirmation that they have served satisfactorily and competently as nurses during the service period, will be eligible for full registration/enrolment in Hong Kong without the need to take the Licensing Examination;
- (c) to introduce **temporary registration/enrolment (nursing)** to

allow nurses from other jurisdictions to perform academic exchanges and clinical demonstrations in Hong Kong for a short period of time so long as the nature of work is confined to clinical teaching or research to the satisfaction of NCHK;

- (d) to make **continuing nursing education (CNE)** a mandatory requirement for registered nurses' and enrolled nurses' renewal of their practising certificates so as to enhance competency of the nurses and ensure quality of healthcare services delivered. We will discuss with NCHK and the stakeholders on administration and key components of the mandatory CNE requirement;
- (e) to make the **completion of Health Manpower Survey** administered by DH³ a mandatory requirement for registered nurses and enrolled nurses;
- (f) **to repeal section 26(b) of the NRO** under which full-time nurses employed by the Government are exempted from registration or enrolment and will be deemed to be registered or enrolled nurses as nurses employed by the Government should also meet the registration/enrolment requirements with a view to upholding professional standards; and
- (g) **to repeal sections 8(1)(a) and s14(1)(a) of the NRO** as well as relevant regulations in the subsidiary legislation so as to remove the minimum age requirement for registration and enrollment of nurses as well as the minimum age requirement for commencement of training to become registered/enrolled nurse, in line with the aim of increasing the supply of nurses in Hong Kong.

14. The Government will also take the opportunity to gauge the views of the nursing sector and stakeholders on the idea of introducing a period

³ DH administers the Health Manpower Survey at regular intervals with a view to grasping the latest manpower situation in various healthcare professions. The data so collated will form part of the inputs to the triennial Healthcare Manpower Projections commissioned by the Health Bureau.

of internship or service in public healthcare and social welfare institutions⁴ for qualified locally trained nursing graduates and non-locally trained nurses who have passed the Licensing Examination administered by NCHK. The purposes are to provide more exposure for them in the public healthcare and welfare setting, and to help ease the nursing manpower shortage in the public sector, recognising public institutions being the core part of our healthcare system. We will duly consider stakeholders' views on these suggestions as well as the potential impact on non-governmental organisations and the private healthcare sector.

WAY FORWARD

15. We will consult the relevant sectors of the community (including the nursing profession, the medical and healthcare sectors, patient groups, the social welfare sector and the training institutions) on the proposal outlined in this paper and thereafter submit the Nurses Registration (Amendment) Bill to the Legislative Council in mid-2023.

Health Bureau
March 2023

⁴ The public healthcare and social welfare institutions will include DH, HA, licensed RCHs, scheduled nursing homes, social welfare service units specified by the Director of Social Welfare or any other institutions that may be specified by the Secretary for Health.