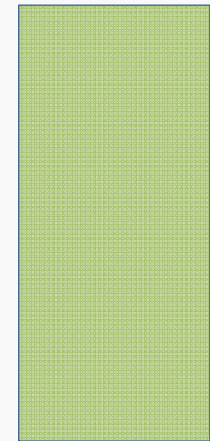


MAJOR ISSUES AND CONCERNS

ARISING FROM THE DELIBERATIONS OF
MEDICAL REGISTRATION (AMENDMENT) BILL 2016



Medical Registration (Amendment) Bill 2016

Deliberations of the Bill

- 10 Bills Committee meetings
- over 40 deputations + submissions
- 30 Government information and response papers
- over 30 hours of debate at LegCo
- Numerous comments, articles, TV series, news reports, editorials

MAJOR ISSUES AND CONCERNS

There should be a **modern** mechanism for complaint investigation and disciplinary inquiry **to be set up separately under MCHK**

- Conferring all functions, from registration, standard setting to inquiry, on MCHK members not desirable. Many suggested separation of functions for complaint handling and disciplinary inquiry
- Structural changes rather than incremental changes should be introduced
- Reference should be made to overseas experience and practices of other professions such as lawyers and accountants

MAJOR ISSUES AND CONCERNS

Efficiency of the complaint investigation and disciplinary inquiry mechanism should be enhanced through necessary legislative amendments and administrative measures

Urgency to clear the bottlenecks

Enabling more than one Preliminary Investigation Committee (PIC) to be set up

Making greater use of assessors in lieu of council members for PIC and inquiry

Allowing more than one Legal Advisor

Allowing DoJ to make use of outside lawyers to serve MCHK

Enabling inquiry to be held concurrently

Revisiting the formation and quorum of PIC and inquiry

Necessary manpower and financial resources should be provided to MCHK

MAJOR ISSUES AND CONCERNS

Lay participation in MCHK should be increased for **greater credibility** and **accountability**

- Present number (4) and percentage (14%) of lay council members insufficient
- No golden rule, but 25% is a welcome step forward, though some asked for more
- Patients' interests should be adequately represented in MCHK
- Both lay council members and lay assessors should be increased
- Transparent selection/election procedure

MAJOR ISSUES AND CONCERNS

There should be **adequate check and balance** in MCHK membership

- Additional lay council members should be returned by election as far as possible
- Elected members in MCHK should not be fewer than appointed members

MAJOR ISSUES AND CONCERNS

There should be **more doctors to handle complaints**

- Increase the pool of doctors so as to provide more flexibility for conducting PIC and inquiry meetings concurrently and more frequently
- Substantial increase in medical assessors welcomed
- Medical assessors should not all be nominated by DH, HA, HKAM, HKU and CUHK. There should be broader involvement of doctors from all quarters of the profession, including frontline doctors

MAJOR ISSUES AND CONCERNS SUMMARY

There are loud and clear calls for-

A modern mechanism for complaint investigation and disciplinary inquiry to be set up separately under MCHK

Improving efficiency of the complaint investigation and disciplinary inquiry mechanism

Increasing lay participation in MCHK

Adequate check and balance in MCHK membership

Having more doctors, in particular medical assessors, to handle complaints

THE END