

**Tripartite Platform on
Amendments to the Medical Registration Ordinance
Follow-up Actions Arising from the Second Meeting**

Supplementary Information

This note aims to provide supplementary information on the follow-up actions arising from the second meeting for Members' reference -

- (a) Statistics on processing time required for complaint handling by the Medical Council of Hong Kong (MCHK) (Annex A);
- (b) Information on the operating costs of overseas medical regulatory bodies and statutory regulatory bodies of other professions in Hong Kong (Annex B);
- (c) Information on the jurisdictions of qualifications held by candidates passing the Licensing Examination of MCHK (Annex C); and
- (d) The criteria of MCHK in approving applications for limited registration and information on employment of non-locally trained doctors under limited registration by the Hospital Authority, the University of Hong Kong and the Chinese University of Hong Kong (Annex D).

**Food and Health Bureau (Health Branch)
Tripartite Platform Secretariat
January 2017**

Statistics on processing time required for complaint handling by MCHK

MCHK receives about 500 new complaint cases every year. As at end 2016, the total backlog of cases were about 940, with 560, 280 and 100 cases at Pre-Preliminary Investigation Committee (Pre-PIC), Preliminary Investigation Committee (PIC) and inquiry stages respectively.

2. Every new case needs to go through a Pre-PIC process i.e. the PIC chairman and deputy chairman will, in consultation with the lay member of PIC, decide whether the complaint is groundless or frivolous, and should not proceed further or that it should be referred to PIC for full consideration. According to the latest policy of MCHK, it would be the PIC's responsibility to formulate and consider the draft charge¹ for cases referred to PIC for consideration. In general, if PIC considers that there is a need to formulate and consider the draft charge for a case, PIC needs to meet for at least three times i.e. (a) consider the case and formulate draft charge, (b) consider legal advice of the Department of Justice (DoJ) on the draft charge, and (c) consider the case when all relevant evidence is ready. Given the existing capacity of PIC, expected waiting time for a new case to be considered by one PIC is **about 12 months**². The number of backlog cases before and after the implementation of such new measure is as follows –

No. of backlog cases	Pre-PIC	PIC	Disciplinary Inquiry	Total
Before implementation of new measure (figures of May 2016)	about 700 cases	about 150 cases	about 80 cases	about 960 cases
After implementation of new measure (figures of Dec 2016)	about 560 cases	about 280 cases	about 100 cases	about 940 cases

¹ With reference to the judgment of the High Court case HCAL 46/2015, MCHK decides that PIC, instead of PIC chairman, should formulate and consider the draft charge.

² MC Secretariat and DoJ will work concurrently during the waiting time.

3. From 2012 to 2014, the average time required for handling complaint cases at Pre-PIC, PIC and inquiry stages were as follows –

	Pre-PIC	PIC	Disciplinary Inquiry	Total
Average time required for handling complaints in 2012-2014³	about 17 months	about 13 months	about 28 months	about 58 months

4. In 2012-2014, processing time required for the complaint handling procedures and relevant factors are summarized below –

	Statutory procedures regarding PIC and Inquiry	Procedures involving MC Secretariat and DoJ	Procedures involving complainant and doctor concerned	Procedures involving outside expert and clinics/hospitals	Total
Average time required for handling complaints in 2012-2014	about 27 months	about 15 months	about 6 months	about 10 months	about 58 months
Factors affecting processing time required	Bottlenecks arising from the provisions of the Medical Registration Ordinance - (a) Capacity constraint of PIC – there can only be one PIC (b) Inquiry meeting – one at a time (c) Quorum requirement - mandatory presence of lay member for quorum purpose (d) Limited roles for assessors (e) There can only be one Legal Adviser (f) DoJ has no flexibility to make use of outside lawyers	Depending on the manpower resources of MC Secretariat and DoJ	Depending on the turnaround time of complainant and doctor concerned	Depending on the turnaround time of outside expert, clinics/hospitals as well as the nature and complexity of the case	Not applicable

³ Serious cases will be handled with priority.

Latest situation and projection

5. The Government has provided additional funding for MCHK to employ six additional staff at various ranks to strengthen the manpower support of its Secretariat. The Government has also provided additional funding to MCHK to provide honorarium to experts at the preliminary investigation stage, with a view to expediting its complaint handling process through administrative measures under the current legislative limitation as far as practicable.

6. Under the existing legislation, MCHK can only set up one PIC to process complaint cases. Given the current capacity of one PIC (at least meeting thrice for each case), expected waiting time for a new case at PIC stage is **about 12 months** under the latest PIC arrangement. Besides, as it is not possible to convene inquiry hearings more frequently and given the increasing backlog of cases at inquiry stage, the waiting time for a new case to be heard upon referral by PIC is **about 36 months**.

7. According to the latest projection by MCHK Secretariat, taking into account the processing time shortened by the administrative measures mentioned in paragraph 5 above, the projected average time required for handling complaint cases at Pre-PIC, PIC and inquiry stages will be about 15 months, 21 months and 36 months respectively and the total average time for handling complaint cases from receipt by MCHK to completion of inquiries will be increased to about 72 months.

	Pre-PIC	PIC	Disciplinary Inquiry	Total
Average time required for handling complaints in 2012-2014	about 17 months	about 13 months	about 28 months ⁵	about 58 months
Latest projection	about 15 months	about 21 months ⁴	about 36 months ⁵	about 72 months

⁴ Including 12-month waiting time, during which MC Secretariat and DoJ will work concurrently on the case.

⁵ Waiting time, during which MC Secretariat and DoJ will work concurrently on the case.

8. According to the latest projection of MCHK Secretariat, the processing time required for various complaint handling procedures is as follows –

	Statutory Procedures regarding PIC and Inquiry	Procedures involving MC Secretariat and DoJ	Procedures involving complainant and doctor concerned	Procedures involving outside expert and clinics/hospitals	Total
Latest projection	about 47 months	about 11 months	about 6 months	about 8 months	about 72 months
Latest situation	(a) Latest PIC arrangement: at least meeting thrice for each case (b) Increasing backlog aggravating waiting time	Increased manpower resources for MCHK Secretariat (shortened by about 4 months)	Not applicable	Provision of honorarium in Pre-PIC stage (shortened by about 2 months)	Not applicable

Information on the operating costs of overseas medical regulatory bodies and statutory regulatory bodies of other professions in Hong Kong

A. Overseas medical regulatory bodies

	Hong Kong	United Kingdom	Australia	Singapore
Regulatory body	Medical Council of Hong Kong	General Medical Council	Medical Board of Australia	Singapore Medical Council
No. of members	28	12	12	25
No. of lay members	4 (14%)	6 (50%)	4 (33%)	0 (0%)
Operating cost	Mainly borne by the Government ⁶	All borne by doctors ⁷	All borne by doctors ⁸	Partially borne by the Government ⁹

⁶ In 2015/16, the recurrent expenditure of MCHK Secretariat was around \$23 million, while DoJ paid for the legal costs of Pre-PIC and inquiry as well as the salary of DoJ legal counsels, amounting to around \$8.5 million per year over the past five years on average. The above figures do not include the rental costs.

⁷ According to the 2015 annual report of the General Medical Council (GMC), the total expenditure of GMC was around £120 million (approximately HK \$1 billion).

⁸ Under the 2016-2020 agreement between the Medical Board of Australia (MBA) and the Australian Medical Practitioners Authority, MBA's annual budget is around AUD \$70 million (approximately HK\$400 million).

⁹ According to the 2015 annual report of the Singapore Medical Council (SMC), its total expenditure was about \$9.6 million Singapore dollars (approximately HK\$50 million). The Singapore Government during that year contributed \$3.9 million Singapore dollars (approximately HK\$20 million) to SMC.

B. Statutory regulatory bodies of other professions in Hong Kong

	Accountants	Architects	Engineers	Social Workers	Barristers	Solicitors
Statutory regulatory body	Council of the Hong Kong Institute of Certified Public Accountants	Architects Registration Board	Engineers Registration Board	Social Workers Registration Board	Bar Council of the Hong Kong Bar Association	Council of The Law Society of Hong Kong
No. of members	23	11	36	15	25	20
No. of lay members	4 (17%)	0-1 ¹⁰ (0-9%)	0-1 ¹¹ (0-3%)	3-6 ¹² (20-40%)	0 (0%)	0 (0%)
Operating cost	All borne by the profession	All borne by the profession	All borne by the profession	All borne by the profession	Mainly borne by the profession	Mainly borne by the profession

¹⁰ The Architects Registration Board includes one member appointed by the Chief Executive (CE). The relevant Ordinance does not specify the appointed person shall be a practitioner or a lay person.

¹¹ The Engineers Registration Board includes one member appointed by CE. The relevant Ordinance does not specify the appointed person shall be a practitioner or a lay person.

¹² The Social Workers Registration Ordinance stipulates that the Social Workers Registration Board shall consist of 15 members, (a) eight among them are elected by registered social workers, (b) six among them are appointed by CE out of which at least three are non-social workers nor public officer, and (c) the other one is the Director of Social Welfare or his/her representative. The ratio of lay participation depends on the number of social workers appointed by CE.

Information on the jurisdictions of qualifications held by candidates who sat and passed the Licensing Examination of the Medical Council of Hong Kong

(Information is provided by the Medical Council of Hong Kong)

2013

Year	Exam in Professional Knowledge (Part I)			Proficiency Test in Medical English (Part II)			Clinical Examination (Part III)		
	Number who sat for exam	Number who passed	%	Number who sat for exam	Number who passed	%	Number who sat for exam	Number who passed	%
2013	7 (Australia)	5 (Australia)	71	2 (Australia)	2 (Australia)	100	6 (Australia)	2 (Australia)	33
	1 (Belgium)	1 (Belgium)	100	1 (India)	1 (India)	100	1 (Belgium)		
	1 (Germany)	1 (Germany)	100	83 (Mainland)	72 (Mainland)	87	1 (Germany)	1 (Germany)	100
	2 (India)			1 (Nepal)	1 (Nepal)	100	7 (Ireland)	4 (Ireland)	57
	8 (Ireland)	6 (Ireland)	75	3 (Philippines)	3 (Philippines)	100	59 (Mainland)	11 (Mainland)	19
	165 (Mainland)	30 (Mainland)	18	1 (Russia)	1 (Russia)	100	1 (Myanmar)		
	2 (Myanmar)	1 (Myanmar)	50	4 (Taiwan)	3 (Taiwan)	75	1 (Netherlands-Antilles)		
	2 (Nepal)			19 (UK)	19 (UK)	100	1 (Pakistan)		
	2 (Pakistan)	1 (Pakistan)	50	1 (USA)	1 (USA)	100	2 (Philippines)		
	4 (Philippines)	1 (Philippines)	25				1 (Russia)		
	3 (Russia)	1 (Russia)	33				1 (South Africa)	1 (South Africa)	100
	1 (South Africa)						6 (Taiwan)		
	9 (Taiwan)	4 (Taiwan)	44				1 (The United Arab Emirates)		
	1 (The United Arab Emirates)	1 (The United Arab Emirates)	100				52 (UK)	27 (UK)	52
	70 (UK)	48 (UK)	69				3 (USA)		
	2 (USA)	2 (USA)	100						
Total	280	102	36	115	103	90	143	46	32

() jurisdictions of acquiring medical qualifications

2014 (First Sitting)

Year	Exam in Professional Knowledge (Part I)			Proficiency Test in Medical English (Part II)			Clinical Examination (Part III)		
	Number who sat for exam	Number who passed	%	Number who sat for exam	Number who passed	%	Number who sat for exam	Number who passed	%
2014 (First Sitting)	2 (Australia)	1 (Australia)	50	1 (Belgium)	1 (Belgium)	100	4 (Australia)	4 (Australia)	100
	1 (Belgium)			1 (Indonesia)	1 (Indonesia)	100	1 (Belgium)	1 (Belgium)	100
	1 (India)			14 (Mainland)	8 (Mainland)	57	3 (Ireland)	3 (Ireland)	100
	1 (Indonesia)			2 (Pakistan)	2 (Pakistan)	100	44 (Mainland)	20 (Mainland)	45
	1 (Ireland)			1 (Philippines)	1 (Philippines)	100	1 (Nepal)		
	63 (Mainland)	14 (Mainland)	22	1 (Portugal)	1 (Portugal)	100	1 (Netherlands-Antilles)	1 (Netherlands-Antilles)	100
	1 (Nepal)	1 (Nepal)	100	1 (Russia)	1 (Russia)	100	5 (Taiwan)	2 (Taiwan)	40
	1 (New Zealand)			1 (Singapore)	1 (Singapore)	100	1 (The United Arab Emirates)		
	2 (Pakistan)			2 (Taiwan)	2 (Taiwan)	100	23 (UK)	14 (UK)	61
	1 (Philippines)			1 (Ukraine)	1 (Ukraine)	100	2 (USA)	1 (USA)	50
	1 (Portugal)	1 (Portugal)	100	3 (UK)	3 (UK)	100			
	1 (Russia)								
	1 (Singapore)								
	1 (South Africa)								
	3 (Taiwan)	2 (Taiwan)	67						
	1 (Ukraine)								
	24 (UK)	6 (UK)	25						
1 (USA)									
Total	107	25	23	28	22	79	85	46	54

() jurisdictions of acquiring medical qualifications

2014 (Second Sitting)

Year	Exam in Professional Knowledge (Part I)			Proficiency Test in Medical English (Part II)			Clinical Examination (Part III)		
	Number who sat for exam	Number who passed	%	Number who sat for exam	Number who passed	%	Number who sat for exam	Number who passed	%
2014 (Second Sitting)	4 (Australia)	1 (Australia)	25	2 (Australia)	2 (Australia)	100	2 (Ireland)	2 (Ireland)	100
	1 (Belgium)			1 (Ireland)	1 (Ireland)	100	39 (Mainland)	18 (Mainland)	46
	2 (India)			54 (Mainland)	35 (Mainland)	65	1 (Myanmar)		
	7 (Ireland)	2 (Ireland)	29	1 (Russia)	1 (Russia)	100	1 (Nepal)		
	128 (Mainland)	18 (Mainland)	14	2 (Singapore)	2 (Singapore)	100	2 (Taiwan)		
	1 (Nepal)			1 (Sweden)	1 (Sweden)	100	1 (The United Arab Emirates)		
	1 (Pakistan)			2 (Taiwan)	2 (Taiwan)	100	21 (UK)	7 (UK)	33
	3 (Russia)			13 (UK)	13 (UK)	100	3 (USA)	1 (USA)	33
	3 (Singapore)	2 (Singapore)	67	1 (USA)	1 (USA)	100			
	1 (South Africa)								
	1 (Sweden)								
	3 (Taiwan)	1 (Taiwan)	33						
	42 (UK)	11 (UK)	26						
	3 (USA)								
	Total	200	35	18	77	58	75	70	28

() jurisdictions of acquiring medical qualifications

2015 (First Sitting)

Year	Exam in Professional Knowledge (Part I)			Proficiency Test in Medical English (Part II)			Clinical Examination (Part III)		
	Number who sat for exam	Number who passed	%	Number who sat for exam	Number who passed	%	Number who sat for exam	Number who passed	%
2015 (First Sitting)	2 (Australia)			2 (Australia)	2 (Australia)	100	2 (Ireland)	2 (Ireland)	100
	1 (Colombia)			1 (Colombia)	1 (Colombia)	100	29 (Mainland)	8 (Mainland)	28
	4 (India)			2 (India)	1 (India)	50	1 (Nepal)		
	5 (Ireland)	2 (Ireland)	40	1 (Japan)	1 (Japan)	100	1 (Russia)		
	1 (Japan)			21 (Mainland)	11 (Mainland)	52	1 (Singapore)	1 (Singapore)	100
	62 (Mainland)	4 (Mainland)	6	1 (Netherlands)	1 (Netherlands)	100	6 (Taiwan)	1 (Taiwan)	17
	1 (Netherlands)			1 (New Zealand)	1 (New Zealand)	100	1 (The United Arab Emirates)		
	2 (New Zealand)			1 (Pakistan)	1 (Pakistan)	100	18 (UK)	11 (UK)	61
	1 (Pakistan)			1 (Philippines)	1 (Philippines)	100	3 (USA)	1 (USA)	33
	1 (Philippines)			1 (Russia)	1 (Russia)	100			
	1 (Poland)			1 (Switzerland)	1 (Switzerland)	100			
	3 (Russia)	2 (Russia)	67	2 (Taiwan)	1 (Taiwan)	50			
	1 (Switzerland)			5 (UK)	5 (UK)	100			
	4 (Taiwan)			2 (USA)	2 (USA)	100			
	29 (UK)	7 (UK)	24						
	3 (USA)	3 (USA)	100						
	Total	121	18	15	42	30	71	62	24

() jurisdictions of acquiring medical qualifications

2015 (Second Sitting)

Year	Exam in Professional Knowledge (Part I)			Proficiency Test in Medical English (Part II)			Clinical Examination (Part III)		
	Number who sat for exam	Number who passed	%	Number who sat for exam	Number who passed	%	Number who sat for exam	Number who passed	%
2015 (Second Sitting)	2 (Australia)	1 (Australia)	50	43 (Mainland)	37 (Mainland)	86	1 (Australia)		
	7 (Ireland)	2 (Ireland)	29	1 (Mynamar)	1 (Mynamar)	100	2 (Ireland)	1 (Ireland)	50
	113 (Mainland)	22 (Mainland)	19	1 (Pakistan)	1 (Pakistan)	100	37 (Mainland)	6 (Mainland)	16
	1 (Myanmar)			1 (Philippines)	1 (Philippines)	100	1 (Mynamar)		
	1 (Netherlands)			1 (Russia)	1 (Russia)	100	1 (Nepal)		
	3 (Pakistan)			3 (Taiwan)	3 (Taiwan)	100	1 (Pakistan)		
	2 (Philippines)			6 (UK)	6 (UK)	100	2 (Russia)		
	1 (Poland)						1 (Taiwan)	1 (Taiwan)	100
	1 (Russia)						18 (UK)	7 (UK)	39
	1 (Singapore)						2 (USA)	1 (USA)	50
	1 (South Africa)								
	6 (Taiwan)								
	36 (UK)	15 (UK)	42						
	1 (USA)	1 (USA)	100						
Total	176	41	23	56	50	89	66	16	24

() jurisdictions of acquiring medical qualifications

2016 (First Sitting)

Year	Part I - Examination in Professional Knowledge			Part II - Proficiency Test in Medical English			Part III - Clinical Examination			
	No. Sat	No. Passed	%	No. Sat	No. Passed	%	No. Sat	No. Passed	%	
2016 (First Sitting)	1 (Australia)	1 (Australia)	100	1 (Bulgaria)	1 (Bulgaria)	100	1 (Australia)			
	1 (Bulgaria)			1 (Germany)	1 (Germany)	100	2 (Ireland)	2 (Ireland)	100	
	1 (Germany)			3 (India)	3 (India)	100	36 (Mainland)	1 (Mainland)	3	
	5 (India)			2 (Ireland)	2 (Ireland)	100	1 (Nepal)	1 (Nepal)	100	
	4 (Ireland)	1 (Ireland)	25	1 (Italy)	1 (Italy)	100	2 (Russia)	1 (Russia)	50	
	1 Italy			38 (Mainland)	35 (Mainland)	92	1 (Taiwan)			
	91 (Mainland)	9 (Mainland)	10	1 (Nepal)	1 (Nepal)	100	22 (UK)	8 (UK)	36	
	2 (Nepal)			1 (Pakistan)	1 (Pakistan)	100	3 (USA)	1 (USA)	33	
	1 (Netherlands)			1 (Poland)	1 (Poland)	100				
	3 (Pakistan)			1 (South Africa)	1 (South Africa)	100				
	1 (Philippines)			1 (South Korea)	1 (South Korea)	100				
	1 (Poland)			7 (UK)	7 (UK)	100				
	2 (Russia)			2 (USA)	2 (USA)	100				
	1 (South Africa)									
	1 (South Korea)									
	3 (Taiwan)									
	42 (UK)	10 (UK)	24							
	2 (USA)	1 (USA)	50							
	Total	163	22	13	60	57	95	68	14	21

() jurisdictions of acquiring medical qualifications

Criteria of the Medical Council of Hong Kong in approving applications for limited registration and information on employment of non-locally trained doctors under limited registration by The University of Hong Kong and The Chinese University of Hong Kong

Promulgations of limited registration

So far, the Medical Council of Hong Kong (MCHK) has published 12 promulgations of limited registration in the Government Gazette. At present, there is no registration under Promulgations No. 1, 5, 6, 7, 8 and 11 as the types of employment as described in those promulgations no longer exist. Currently, application for limited registration can be made under the following six promulgations

Promulgation No.	Employment
No. 2	For the following types of full-time employment:- (a) Employment as a medical practitioner by the Government for the purpose of research work or for such clinical practice of medicine or special health care services, as specified by the Director of Health; (b) Employment as a medical practitioner by the Hospital Authority (HA) for the purpose of research work or for such clinical practice of medicine or hospital work, as specified by the Authority; (c) Employment as a medical practitioner by The University of Hong Kong (HKU) or The Chinese University of Hong Kong (CUHK) for the purpose of teaching, research or performing hospital work, in the Faculty of Medicine
No. 3	Being such persons (whose names were entered prior to the end of 1964 into a list maintained by the Registrar of Clinics, Department of Health (DH)) appointed for the provision of primary healthcare, and to be responsible for the medical management of those clinics exempted from the provisions of section 7 of the Medical Clinics Ordinance, Cap 343
No. 4	Being such persons (whose names were entered prior to the end of 1964 into a list maintained by the Registrar of Clinics, DH and who are or who have been registered under Promulgation No. 3 of MCHK on Limited Registration) appointed for the provision of primary healthcare, and to be responsible for the

	medical management of those clinics registered under the Medical Clinics Ordinance, Cap 343
No. 9	Employment for the purpose of supervising the medical matters which may arise in connexion with the construction work in compressed air for the Tuen Mun – Chek Lap Kok Link – Northern Connection Sub-sea Tunnel Section project under Highways Department’s contract number HY/2012/08
No. 10	Employment by a firm of solicitors registered by the Law Society of Hong Kong to carry out a medical examination of a person in Hong Kong for the sole purpose of preparing a medical expert report on that person for use in a pending court proceedings in Hong Kong
No. 12	Employment for the purpose of the annual rugby event “Sevens World Series”

Limited registration

2. According to section 14A of the Medical Registration Ordinance, a person may be registered as a medical practitioner with limited registration if MCHK satisfies that -

- (a) he / she has been selected for an employment or for a type of employment determined and promulgated by MCHK;
- (b) he / she has obtained an acceptable overseas qualification;
- (c) he / she has had adequate and relevant full-time post-qualification clinical experience;
- (d) he / she is registered with a medical authority outside Hong Kong; and
- (e) he / she is of good character.

3. If a person does not satisfy MCHK that he / she fulfills the requirement at (b), (c) or (d) above but satisfies MCHK that he fulfills other requirements above, MCHK may grant limited registration under section 14A(2A) of the Ordinance subject to additional restrictions and conditions regarding his practice as specified by MCHK. This clause mainly applies to Promulgations No. 3 and 4. As for Promulgation No.2, there are only three doctors employed by a medical school being granted limited registration without meeting the requirement under section 14A(c) or (d).

4. The maximum duration of limited registration is 12 months. Upon expiry of the registration, the person can apply for renewal for another period up to 12 months.

Figures on limited registration

Promulgation	as at Dec 2012	as at Dec 2013	as at Dec 2014	as at Dec 2015	as at Dec 2016
No. 2	118	115	97	104	95
HKU	(45)	(45)	(33)	(30)	(29)
CUHK	(62)	(58)	(51)	(62)	(52)
HA ¹³	(11)	(12)	(13)	(12)	(14)
DH	(-)	(-)	(-)	(-)	(-)
No. 3	41	36	34	31	27
No. 4	16	15	15	13	12
No. 9	-	-	-	2	2
No. 10-	-	-	-	-	-
No. 12	-	-	-	-	-
Total	175	166	146	150	136

5. The majority of doctors with limited registration are registered under Promulgation No. 2, i.e. they are employed by the medical schools of HKU and CUHK, HA and DH. At present, there are about 100 doctors registered under such promulgation, with the majority being employed by the two medical schools, 14 by HA and none by DH (details at **Appendix**).

¹³ Since January 2012 up to end 2016, MCHK has approved a total of 29 applications for limited registration of non-locally trained doctors who are employed by HA to address manpower shortage. All of them are employed as Service Residents. The annual figures are as follows -

Year	Registrants with first registration	Registrants as at year-end
2012	13	9
2013	3	10
2014	4	11
2015	3	10
2016	6	12
Total	29	-

**Hospital Authority, University of Hong Kong and
Chinese University of Hong Kong
Limited Registration – Recruitment Procedures and Relevant Figures**

A. Hospital Authority

Initiation

- The Hospital Authority (HA) conducts annual recruitment exercise for resident doctors to recruit medical graduates from local universities and other qualified doctors. HA will also recruit doctors during the year to cater for service and operational needs.
- HA conducts regular manpower assessment in consultation with specialties with severe staff shortage, frontline doctors, doctors unions and Doctors Staff Group Consultative Committee.
- With requests from relevant departments and agreement with Specialty Coordinating Committee, HA will initiate recruitment process for doctors under limited registration.

Recruitment and selection

- Selection Panel members include relevant Constituent Colleges of the Hong Kong Academy of Medicine and respective HA's Specialty Coordinating Committee.
- HA will ensure that the applicant's eligibility meets the requirements, and then submit limited registration application to MCHK and provide relevant information to facilitate MCHK's approval.

Monitoring

- The Task Force on Limited Registration Scheme, comprising Deans of the two faculties of medicine, President of Hong Kong Academy of Medicine, Chief Executive of HA and representative, is responsible for monitoring the arrangements.
- Regular reportings are made to HA Board meetings and Directors' meetings.

Figures on doctors under limited registration (from January 2012 to end 2016, MCHK has approved 29 applications for limited registration of non-locally trained doctors who were employed by HA to address manpower shortage)

- Doctors employed by HA under limited registration could only be engaged in research work, medical clinical work or hospital work as specified.

	United Kingdom	Australia / New Zealand	United States	Canada	Total (no. of doctors)
Family Medicine	3	1		3 ^{Note 2}	7
Anaesthesiology	3	7			10
Internal Medicine	3				3
A&E	5				5
Paediatrics			1		1
Radiology	1 ^{Note 1}				1
Intensive Care	1 ^{Note 1}				1
Psychiatry	1				1
Total (no. of doctors)	17	8	1	3	29

Note 1: The applicant obtained basic medical degree from Malaysia and specialty qualification from the UK. The applicant was a registered doctor in Malaysia.

Note 2: One applicant obtained basic medical degree from the Netherlands and specialty qualifications from Canada, USA and Australia. The applicant was a registered doctor in Canada, USA, Australia and the UK. Another applicant obtained basic medical degree from the Mainland China and specialty qualification from Canada. The applicant was a registered doctor in Canada.

B. The University of Hong Kong

Initiation of recruitment

- Recruitments of clinical professoriate staff, clinical associates and lecturers (incl. principal and senior lecturers) as with all staff are determined by the academic needs of the University from time to time.

System / procedures of recruitment, selection and appointment to different posts

- As with all positions, vacancies are normally openly advertised to ensure that the recruitment is open and competitive and targeting at the best candidates available. After a fair and rigorous selection process, the recommendation for appointment is then considered at both the Faculty and University levels.

Monitoring of the standard of service provided by limited registration doctors and review of their suitability for continued appointment

- All staff is required to undergo an annual Performance Review and Development exercise of the University covering all aspects of teaching, research, clinical work, and service/administration/knowledge exchange, with relativity in weighting adjusted depending on an individual's job portfolio. All re-appointment cases are then considered and approved by both the Faculty and the University.

Figures on doctors with limited registration

- Doctors employed by HKU under limited registration could only be engaged in teaching, research or clinical work of the Medical Faculty. As at end 2016, there are 29 doctors working in HKU under limited registration.

C. The Chinese University of Hong Kong

Initiation of recruitment

- The Department Chairman concerned will initiate action on placement of a recruitment advertisement based on the Department's manpower plan, clinical research strategic directions, and/or teaching and service needs. The recruitment advertisement is expected to reflect the duties and requirements of the position and invite qualified candidates to apply for the position.

Recruitment and selection

- Appointments can only be made after the proper selection process has been carried out at the Departmental, Faculty and University levels.
- To ensure that the best candidates are selected, external assessment for the suitability of potential candidates is one of the required procedures if the appointment is made on a longer duration.
- For visiting appointments and short-term appointments of one year or less, advertising may be dispensed with. Nevertheless, the appointment will still need to go through the Department, Faculty and University.
- Under reciprocal arrangements with other institutions concerning collaborative training, academic exchange and skills transfer, CUHK also receives clinical trainees from other places. The clinical trainees are all with a medical qualification and possess relevant clinical experience as appropriate. They will participate in training programmes organized by the respective Department. Upon completion of training, they will return to their institutions.

Appointment review

- All academic members including clinical academics are subject to annual performance review. They have to submit an activities report in respect of teaching, research and scholarship, and service (including clinical services for clinical academics) as applicable.
- Annual performance assessment will be conducted by the relevant review committees based on the activities report and the assessment criteria at Department and Faculty levels as applicable.
- Same as the first appointment, further appointment will be subject to review by relevant committees at the Department, Faculty and University levels.

Figures on doctors with limited registration

- Doctors employed by CUHK under limited registration could only be engaged in teaching, research or clinical work of the Medical Faculty. As at end 2016, there are 52 doctors working in CUHK under limited registration.