LCQ4: Medical and nursing manpower in the public healthcare system

Following is a question by Dr the Hon Helena Wong and a reply by the Secretary for Food and Health, Professor Sophia Chan, in the Legislative Council today (February 20):

Question:

In recent years, the shortage of medical and nursing manpower in the public healthcare system has been acute. According to the projection in the Report of Strategic Review on Healthcare Manpower Planning and Professional Development of 2017, there will be shortfalls of over 1 000 doctors and 1 600 nurses in Hong Kong by 2030. In this connection, will the Government inform this Council:

(1) whether it will consider permitting doctors who have graduated from recognised medical schools in Commonwealth countries to come to Hong Kong, without going through examinations and internship, to practise in public hospitals, so as to increase the manpower of doctors in the public healthcare system; if so, of the details; if not, the reasons for that;

(2) whether it knows if the Hospital Authority (HA) will transfer the senior management work currently undertaken by staff members from the medical and nursing grades to administrators who do not belong to such grades, so that staff members with medical and nursing professional knowledge can have more time to perform clinical duties; if HA will, of the details; if not, the reasons for that; and

(3) whether it will implement new measures to reduce the wastage of doctors and nurses in the public healthcare system, and explore the stipulation of a minimum number of years for which locally trained doctors and nurses are required to serve in the public healthcare system upon graduation; if so, of the details; if not, the reasons for that?

Reply:

President,

My reply to the various parts of the question raised by Dr the Hon Helena Wong is as follows:

(1) The Government has been striving to strengthen medical workforce. The University Grants Committee (UGC)-funded medical training places have been substantially increased over the past decade. The number of places was 470 in the 2016/17 academic year, representing an increase of 90 per cent when compared with 250 in the 2005/06 academic year. In the 2019/20 to 2021/22 UGC triennium, the Government will further increase the number of UGC-funded

medical training places by 60 each year. We expect that increasing the number of medical training places will alleviate the manpower shortage of doctors in the medium to long term.

Meanwhile, upon commencement of the Medical Registration (Amendment) Ordinance 2018, the validity period and renewal period of limited registration have been extended from not exceeding one year to not exceeding three years. It is expected that more eligible non-locally trained doctors, particularly those who are Hong Kong people, will be attracted to serve in the public sector in Hong Kong through limited registration, thus alleviating the manpower shortage problem.

For non-locally trained doctors who have passed the licensing examination and worked in the Hospital Authority (HA) for three years under limited registration, the Medical Council of Hong Kong is exploring if their internship requirement could be exempted. This is to provide more incentive for eligible non-locally trained doctors to serve in the public healthcare system in Hong Kong.

The Government will take into account the effectiveness of extending the period of limited registration and responses from the healthcare sector before deciding on the way forward. In the meantime, HA will continue to roll out measures, including recruitment of part-time doctors and implementation of Special Honorarium Scheme (SHS), to increase manpower at public hospitals.

(2) The head office of HA has announced that in response to the winter surge, the head office and all clusters will minimise the number of meetings or postpone non-urgent meetings as far as practicable, so as to allow healthcare staff to focus more on clinical work. HA will also review the frequency and efficiency of meetings on a regular basis. Additional ward clerks and ward assistants are also recruited with a view to easing the workload of healthcare staff.

(3) The Government and HA are very concerned about the healthcare manpower situation in public hospitals. HA will recruit all qualified locally trained medical graduates and provide them with relevant specialist training. There will be a total of over 2 000 medical graduates becoming registered doctors in the coming five years. The Government has no plans to stipulate the required length of service of local medical graduates in the public healthcare system upon graduation. Nevertheless, HA has been proactively implementing various human resources measures to retain professionals and alleviate the shortage of manpower.

To enhance manpower support in the short term, HA actively recruits part-time and temporary healthcare staff, as well as agency nurses and supporting staff. In addition to the establishment of the Locum Office, HA launched the Locum Recruitment Website in November 2018 to expedite the process for recruiting part-time staff. As at February 10, 2019, over 90 locum healthcare staff were hired. HA has also further enhanced the flexibility of SHS to meet service demand. Among the staff who left HA each year, some of them were retiring staff. To alleviate the manpower shortage and assist in knowledge transfer, HA implemented the Special Retired and Rehire Scheme to hire the retiring healthcare professionals and supporting staff to continue to perform clinical duties on a full-time basis.

To retain doctors, HA set up the centrally co-ordinated additional Associate Consultant Promotion Mechanism in 2011-12 to create more promotion opportunities. Meanwhile, HA provides its doctors with more training courses and overseas training opportunities.

To retain frontline nursing staff, HA reinstated the annual increment mechanism in April 2018 to boost staff morale. Besides, HA has enhanced training and promotion of nursing staff. HA created the post of Nurse Consultant in 2008-09 to enhance the development prospects of the nursing profession. A total of 1 476 nurses were promoted in the past three years. In addition, HA also provides subsidies each year for over 100 experienced nurses to undergo further studies and training overseas. To enhance preceptorship support for newly recruited nurses, HA recruits experienced nurses under the Preceptorship Programme to serve as preceptors and provide guidance for newly recruited nurses in the actual clinical setting, and to alleviate the work pressure of other experienced nursing staff in coaching new nurses.

HA will continue to introduce medium to long term measures, including actively considering providing more flexible options in work arrangements to retain staff, such as allowing frontline professionals who are temporarily unable to work full-time due to special needs, or for health or family reasons to work on a part-time basis under special work arrangements.