

The Education and Accreditation Committee and Registration of Medical Practitioners



5.1 The Education and Accreditation Committee is established under the Council to perform the following functions:-

- (a) to determine, upon the recommendation of the Hong Kong Academy of Medicine (HKAM), the specialties under which names of registered medical practitioners may be included in the Specialist Register;
- (b) to recommend to the Council, on the recommendation of the HKAM, the qualification, experience and any other attributes that qualify a registered medical practitioner to have his name included in the Specialist Register under a particular specialty determined by the Committee under paragraph (a);
- (c) to recommend to the Council the procedures, documentations and fees payable for including the name of a registered medical practitioner in the Specialist Register;
- (d) to recommend and review the standard and structure of undergraduate medical education and medical training required for a person to become a registered medical practitioner; and
- (e) to recommend to the Council whether the name of a registered medical practitioner should be included in or removed from the Specialist Register.

5.2 The membership of the Committee (as at 31 December 2001) was as follows:-

Professor TANG Wai-king, Grace, JP (Chairman)

Professor CHAN Kai-ming, Cavor, OBE

Dr CHOI Kin, Gabriel

Dr CHU Kin-wah (who replaced Professor CHANG Mang-zing, Allan with effect from 3 January 2001)

Professor CHUNG Sheung-chee, Sydney

Professor COCKRAM, Clive Stewart

Dr HUNG Chi-tim

Dr KO Tak-him, Patrick

Professor LIANG Hin-suen, Raymond

Professor Felice LIEH-MAK, CBE, JP

Dr SHIH Tai-cho, Louis

Dr SO Pik-han, Kathleen (who replaced Dr CHANG Tai-sing, Dickson with effect from 5 October 2001)

Dr YUEN Ka-wai (who replaced Dr LAM Tai-kwan with effect from 23 August 2001)

Professor YUEN Kwok-yung



- 5.3 In addition to its statutory functions, the EAC was directed by the Council to consider implementing a voluntary CME programme for the medical profession. After lengthy and thorough discussions, the EAC had worked out a detailed proposal on “CME Programme for practising doctors who are not taking CME programme for specialists”. The proposed voluntary CME programme received endorsement from the Council and was introduced on 1 October 2001. The Council, on the recommendation of the EAC, had accredited a number of medical associations, unions and organizations as its CME Programme Providers, Accreditors and Administrators. Practising doctors, other than those taking CME programme for specialists, were informed of the details and the implementation of the programme and invited to enrol in the CME programme on a voluntary basis. The purpose of the programme is to encourage practising doctors to keep themselves up-to-date on current developments in medical practice so as to maintain a high professional standard. Practising doctors who have accumulated at least 30 CME points per year will be awarded a certificate to certify that they have achieved a satisfactory level of CME activity during a particular period. Such a certificate can be displayed inside doctors’ offices. In addition, practising doctors who have accumulated at least 90 CME points for the 3-year CME cycle will be allowed to use the title “CME certified” on their visiting cards. The Council will conduct review on the programme as and when required within the 3-year CME cycle.
- 5.4 Registered medical practitioners, whose names are included in the Specialist Register, are required to fulfil CME relevant to the specialties under which their names are included in the Specialist Register as determined by the HKAM under section 20L of the Medical Registration Ordinance. Cases of non-compliance with CME by specialists were reported by the HKAM to the EAC for consideration of removal of names from the Specialist Register in accordance with section 20N of the Medical Registration Ordinance. The EAC was concerned about the long period of time required to remove the names of specialists from the Specialist Register for failing to comply with the CME requirement whilst the specialists concerned could still be known as “specialist” in the interim. To shorten the time required to deal with cases of non-compliance with CME by specialists, the EAC, with the endorsement from the Medical Council, would take the notification from the HKAM as the prima facie evidence of a specialist’s failure to comply with CME and would proceed to recommend to the Council the removal of the specialist’s name from the Specialist Register as it is not obligatory under section 20N(1) of the Medical Registration Ordinance to give the specialist concerned an opportunity for explanation. Nevertheless, the specialist concerned would still have the right to request the EAC to review its decision under section 20N(3) of the Medical Registration Ordinance.

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- 5.5 The Education and Accreditation Committee is also given the responsibility to scrutinize qualifications, upon application, to see whether they are acceptable to the Medical Council for use on signboards, letterheads and visiting cards, etc. In 2001, the Committee considered 27 qualifications. Of these 27 qualifications, 12 were regarded by the Committee as having met the prevailing vetting criteria and were included in the list of quotable qualifications with the endorsement of the Medical Council.
- 5.6 As at 31 December 2001, there were over 10,400 medical practitioners with full registration with the Medical Council of Hong Kong. This figure included those resident in Hong Kong and those on the overseas list. **Table 9** shows that there has been an increase in the number of registered medical practitioners from 9,289 in 1997 to 10,412 in 2001 (12%). In addition to the medical practitioners with full registration, there were 223 medical practitioners with limited registration among whom 112 were permitted to work in the exempted clinics.
- 5.7 Keeping the entries on the register up-to-date has been a major task. Hundreds of transactions are carried out weekly, including changes of address or personal particulars, removal from and restoration to the register, transfer to and from the local and overseas lists respectively, issue of Certificates of Good Standing and Certificates Verifying Registration, etc. In addition, as a public service, the Council Secretariat dealt with over 44,000 general enquiries from members of the profession and the public in 2001.
- 5.8 **Table 10** lists in detail the registration figures in respect of various parts of the General Register, including “provisional” and “limited” registrations as well as cases of restoration to the Register from 1996 up to 2001. As the figures show, there was a drop in the number of applications for registration in Part I of the General Register since 1997 due to the amendment of the Medical Registration Ordinance in respect of the qualification for registration. Non-local medical graduates, except those recognised under the transitional arrangement, are required to sit for the Licensing Examination.
- 5.9 A medical practitioner whose name had been removed from the General Register, whether as a consequence of disciplinary proceedings or otherwise, is entitled to apply to the Medical Council to have his name restored to the Register. The Council may hold an inquiry to decide whether to grant the application or refuse it. **Table 10** shows that in 2001, there were 23 such applications and all were approved.



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- 5.10 In addition, every year the Council Secretariat has to conduct a large-scale exercise of renewal of practising and retention certificates for all registered medical practitioners. With the increase in the number of registered medical practitioners over the years, the issue of annual practising and retention certificates has also risen in actual numbers from 8,800 in 1997 to 10,000 in 2001, an increase of 14%.
- 5.11 The “Specialist Register” was established in 1998 to provide for registration of medical practitioners qualified in various specialties. **Table 11** shows there were 2,850 doctors registered under 48 specialties as at 31 December 2001 and the number of registered medical practitioners under each specialty.

