Government to introduce Supplementary Medical Professions (Amendment) Bill 2025 into LegCo

The Government announced today (March 19) that the Supplementary Medical Professions (Amendment) Bill 2025 (the Bill) will be gazetted this Friday (March 21), with the First Reading at the Legislative Council scheduled for March 26.

 In recent years, supplementary medical professions have been playing increasingly important roles in the healthcare system, particularly in primary healthcare development. To recognise their professional status and promote cross-disciplinary collaboration, the Bill proposes to rename "supplementary medical professions" as "allied health professions"; remove obsolete restrictions while providing a legal framework to facilitate crossdisciplinary collaborations, include allowing patients to accept physiotherapy and occupational therapy services without a doctor's referral under specified circumstances, and enable allied health professionals to accept referrals from Chinese medicine practitioners (CMPs). In addition, to further enhance the manpower resources of allied health professions, the Bill introduces a new pathway to admit qualified non-locally trained allied health professionals to practise in designated institutions in order to address the manpower shortage of specific allied health professions within the public healthcare system. The Bill also introduces continuing professional development (CPD) as a mandatory requirement for all allied health professionals, with a view to ensuring the overall professional standard of allied health professions. To promote the development of allied health professions, the Bill proposes to enhance the composition and structure of the Supplementary Medical Professions Council (to be renamed as the Allied Health Professions Council) (the Council) and its five constituent Boards to ensure better performance of their regulatory roles, and further enhancing representativeness and credibility.

Renaming "supplementary medical professions" as "allied health professions"

Since the enactment of the Supplementary Medical Professions Ordinance (Cap. 359) (the Ordinance) in 1980, the term "supplementary medical professions" has been used for over 40 years. In view of the increasingly important and specialised roles played by these five professions under the Ordinance in Hong Kong's healthcare system, the Bill will rename "supplementary medical professions" as "allied health professions" to reflect their important function and enhanced professional status within the healthcare system, particularly primary healthcare.

Accepting physiotherapy and occupational therapy services without a doctor's referral

At present, physiotherapists (PTs) and occupational therapists (OTs) may only provide services to patients upon a doctor's referral, except in emergency or other specified situations. To address the new challenges to the healthcare system posed by an ageing population and the increasing prevalence of chronic diseases, the Government is committed to developing primary healthcare, encouraging members of the public to seek early medical intervention in the community for common illnesses. Allowing patients to access physiotherapy and occupational therapy direct under specified conditions for early treatment is one of the key elements.

The healthcare sector generally agrees that, on the premise of ensuring patient safety and enhancing risk management, allowing patients to seek assistance directly from PTs and OTs can expand access to primary healthcare by members of the public, thereby achieving the goals of streamlining processes and reducing costs, and further promoting the development of primary healthcare. The Bill sets out three circumstances under which patients may seek physiotherapy and occupational therapy services directly without a doctor's referral:

(1) Clinical protocol or cross-disciplinary collaboration arrangement

Citizens may seek services directly from PTs or OTs for health conditions covered by recognised clinical protocols. PTs and OTs must adhere to the recognised clinical protocols at all times, including timely referral of patients to doctors for diagnosis and treatment if specific "red-flag" symptoms are detected. Regarding cross-disciplinary collaboration arrangements, PTs and OTs registered under the future Primary Care Register will be allowed to provide direct services to patients under the arrangements of the Primary Healthcare Commission (PHC Commission). They must record the patient's condition and, if necessary, notify the patient's registered family doctor via the Electronic Health Record Sharing System (eHealth) to ensure that patients can receive timely follow-up treatment when needed.

(2) Diagnosis by a registered doctor or CMP within the past 12 months

Patients may seek direct physiotherapy or occupational therapy services for health conditions diagnosed by a registered doctor or CMP within the past 12 months without obtaining a new referral letter each time. Patients must provide proof of the diagnosis. Apart from a referral letter, the proof can also be in the form of outpatient records, follow-up consultation records, or discharge summaries.

(3) Emergency or other situations approved by the Council

PTs and OTs may provide direct services to patients without a doctor's referral in emergency or other situations (applicable to PTs and OTs) and community services (applicable to OTs) approved by the Council. The details of these designated situations will be set out in the two professional codes of practice issued by the Council.

Allowing allied health professionals to accept referrals from CMPs

Chinese medicine is an integral part of Hong Kong's healthcare system, and the Government has long been committed to strengthening its role in primary healthcare, supporting the development of Chinese medicine and integrated Chinese-Western medicine services in secondary and tertiary healthcare, and encouraging the cross-disciplinary collaboration between healthcare professions. There are practical needs for CMPs to refer patients in accordance with clinical needs for other treatments and modern diagnostic technologies, which can improve clinical diagnostic accuracy and monitor treatment effectiveness, thereby further enhancing the quality of healthcare services.

To further Chinese medicine as a constituent part of Hong Kong's healthcare system, the Bill provides a legal framework for allied health professionals to accept referrals from CMPs under suitable conditions. The Chinese medicine profession and relevant allied health professions must reach a consensus on professional standards regarding knowledge, skills, professional competencies and conduct, in order to formulate implementation details and update the relevant codes of practice. In view of the practical clinical and operational needs of The Chinese Medicine Hospital of Hong Kong (CMHHK), the Bill also allows relevant allied health professionals to accept referrals from CMPs within the hospital, supporting the hospital's phased commencement of services from the end of this year.

Admitting non-locally trained allied health professionals

In view of the persistent manpower shortages in certain allied health professions within the public healthcare system, the Bill introduces a new limited registration pathway to admit qualified non-locally trained allied health professionals to practise in designated institutions within their specialised fields on the premise of not compromising professional standards. Applications will be subject to approval by the Council. These designated institutions include the Department of Health, the Hospital Authority, the PHC Commission, the CMHHK, and institutions offering allied health profession training programmes. The Council may impose conditions on an applicant's practice to confine them to a specific scope of practice. Allied health professionals under limited registration will not be eligible for migration to full registration.

Meanwhile, the Government also proposes a new temporary registration pathway to enable non-locally trained allied health professionals to come to Hong Kong for academic exchanges and clinical demonstrations. A temporary registration will be valid for no more than 14 days and is not renewable.

Other amendments

The Bill introduces CPD as a mandatory requirement for allied health professionals to maintain and enhance the overall professional standards of the allied health professions. It also amends the composition and structure of the Council and its five constituent Boards to better regulate the professions and promote cross-disciplinary collaboration. The Bill includes

other technical amendments, such as extending the validity of the existing practising certificates to three years and adjusting various fees under the Ordinance.