

## LCQ5: Complaints handled by Medical Council of Hong Kong

Following is a question by the Hon Chan Hoi-yan and a reply by the Secretary for Health, Professor Lo Chung-mau, in the Legislative Council today (February 19):

Question:

This Council passed in 2018 the amendments to the Medical Registration Ordinance, with the aim of improving the complaint investigation and disciplinary inquiry mechanism of the Medical Council of Hong Kong (MCHK) to address the problem of a backlog of cases. In this connection, will the Government inform this Council if it knows:

- (1) the average time taken by MCHK to handle a complaint case at present, and the average processing times at the consideration stage by Preliminary Investigation Committee and the inquiry stage respectively;
- (2) the total number of complaint cases received by MCHK in each of the past five years and, among them, the respective numbers of cases in which inquiries were held and the complaints were determined to be substantiated, with a breakdown by the type of medical practitioners involved (i.e. private medical practitioners, medical practitioners employed by the Hospital Authority, as well as medical practitioners of the Department of Health); and
- (3) among the complaint cases handled by MCHK in each of the past five years, the respective numbers of cases in which the handling time was less than two years, two to four years, five to seven years, and eight years or more; among these cases, the shortest, longest and median time taken from the lodging of the complaint by the complainant to the completion of all procedures, and the main reasons for cases taking a longer time to handle (i.e. more than two years)?

Reply:

President,

Healthcare professions in Hong Kong observe the principle of professional autonomy. Their statutory regulatory bodies were established by legislations. They are responsible for the registration of professionals, and maintaining and uplifting relevant professional standard and conduct. These regulatory bodies must be accountable to the public in discharging their duties, ensuring that Hong Kong can maintain healthcare professional standards and safeguarding the broader interests of the community.

The Medical Council of Hong Kong (MCHK) is a statutory body established under the Medical Registration Ordinance (MRO) with the objectives of

developing and facilitating medical professional competencies and standards, safeguarding ethical conduct and protecting patients. The MCHK is empowered by the MRO to regulate the medical profession, including handling the registration of medical practitioners, organising Licensing Examinations, formulating codes and guidelines for the profession, and conducting disciplinary inquiries against complaints made by members of the public in respect of professional misconduct of medical practitioners.

Handling complaint cases is an important function of the MCHK. The mechanism of complaint investigation and disciplinary inquiries must be fair, impartial, transparent and efficient, in order to ensure healthcare professional standards and patients' safety, and facilitate mutual trust between patients and healthcare professionals. The Government's role is to ensure that the operation models of regulatory bodies keep up with time and the system work smoothly to meet the changing needs of society. To that end, the Government keeps the MRO under regular review to enable the MCHK to better carry out its various statutory functions, including the function of handling complaints, and propose amendments to the MRO to enhance the efficiency of the complaint-handling mechanism where necessary.

With regard to the complaint-handling mechanism which was unable to operate effectively due to statutory limitations in the MRO, leading to a backlog of complaint cases, the Government proposed to amend the MRO in 2017 to enhance the efficiency and flexibility of the mechanism. Newly introduced measures include setting up inquiry panels under the MCHK to conduct inquiries, increasing participation of lay persons in inquiry proceedings, and increasing the number of assessors. The legislative amendment was passed by the Legislative Council in 2018, enhancing the efficiency of the MCHK in handling complaints. After the legislative amendment, the number of inquiry cases heard per year increased from an average of 25 before 2018 to an average of 48 in the past five years, marking an increase of 90 per cent. The average time for processing a disciplinary inquiry case also dropped from around six years to an average of 3.5 years.

At present, the establishment of the MCHK Secretariat comprises 30 civil service posts, and contract staff are also engaged. The Government will review the services provided by the Secretariat for the MCHK from time to time, and increase its operational efficiency through various measures, such as increasing the use of information technology and organisational structure to better support the MCHK in discharging its statutory duties. The Government will also consider suitably increasing manpower and other resources for the Secretariat where necessary.

In response to the Hon Chan Hoi-yan's question, after consulting the MCHK Secretariat, the consolidated reply is as follows:

In the past five years, the number of complaint cases the MCHK received per year ranged from around 500 to over 3 000. The number of cases requiring disciplinary inquiries and involving doctors in private practice and in the public sector, and the number of substantiated cases, are set out at Annex 1.

The MCHK had concluded over 8 700 complaint cases in the past five years. The average time taken since receipt of complaints till conclusion of cases is 27 months. In 98 per cent of these cases, disciplinary procedures were completed within four years after receiving the complaint. Other cases that required longer processing time were usually more complex in nature, requiring time to examine relevant medical record(s), seek medical experts' report(s), and consult legal advice, etc. Among these complaint cases, the Preliminary Investigation Committees (PICs) dismissed around 7 000 cases for being frivolous or complainant not providing further information, decided that no inquiry by an inquiry panel was to be held in around 1 500 cases, and referred three cases involving the physical and mental condition of the medical practitioner to the Health Committee for consideration. Disciplinary inquiries were required in only 221 cases, i.e. less than 3 per cent. Those some 8 700 concluded complaint cases, broken down by processing time, are set out at Annex 2.

President, the Government will continue to strive for reforms to enhance healthcare quality and efficiency, including inviting major institutions in the Hong Kong healthcare sector to establish the Institute for Medical Advancement and Clinical Excellence last December as a professional platform to develop evidence-based clinical protocols and explore the feasibility of devising service quality and efficiency standards for healthcare services with the plan to consult the sector within this year.

Regulatory bodies of healthcare professions must also undergo constant reform to meet the expectation of the community. The Government will keep the operation of the MCHK under ongoing review, and is happy to listen to the views of different sectors.

Thank you, President.