# 1996 Health Manpower Survey

# **Results of Enumeration**

### 1. Objectives

- 1.1 The 1996 Health Manpower Survey (HMS) was conducted by the Department of Health during July 1996. This is the seventh survey of the same series, with six previous rounds conducted in 1980, 1982, 1984, 1987, 1990 and 1992. The main objectives of the 1996 HMS were:
  - (a) to provide updated information on the size and structure of all medical and health personnel working in Hong Kong;
  - (b) to compare the survey results from the 1996 HMS with previous rounds of HMS; and
  - (c) to study the inter-sector flow of different types of medical and health personnel between 1992 and 1996.

# 2. Coverage

2.1 The 1996 HMS aimed to cover all medical and health personnel working in Hong Kong. All institutions in which such personnel were likely to be employed were covered. The number of institutions covered amounted to 8 516 whilst a total of 46 429 medical and health personnel were covered in the survey.

#### 3. Survey methodology

- 3.1 In view of the large number of institutions covered, a mail questionnaire survey method was adopted. Before the conduct of the survey, letters were sent to the professional associations and related institutions in end-June 1996 explaining the objectives of the survey and seeking their co-operation. A press release was issued on 26.6.96, publicizing the survey and soliciting the co-operation of medical and health personnel.
- 3.2 As the unit of enumeration was confined to institution, invitation letters and questionnaires were first sent to the institutions covered. The non-responded institutions were followed-up by sending reminder letters, and then by telephone and field visits. A supplementary survey in the form of mail questionnaires was further conducted in October 1996 to improve the response rates of the gazetted type of medical and health personnel, namely, doctors, dentists, pharmacists, medical laboratory technologists, occupational therapists and optometrists.

#### 4. Results of enumeration by type of institutions

4.1 The overall response rate for institutions compared with that of the 1992 HMS is as follows:

		1992	1996
Number covered	(a)	8 542	8 5 1 6
Number responded	(b)	7 941	7 898
Overall response rate	(c)=(b)/(a)	93.0%	92.7%

4.2 The response rates of Hospital Authority institutions, government medical services/clinics, and private hospitals and nursing homes were 100.0% while those of other institutions were all over 80.0%. Further details are presented in **Table 1**.

**Table 1: Response Rate by Type of Institutions** 

Type of Institutions	Number Covered	Response Rate (%)
Caterer/Brewery/Hotel	26	96.2
Chiropractic Clinic	28	89.3
Dental Laboratory	236	88.6
Dental Surgery	1 069	92.8
Exempted Clinic	116	99.1
Geriatric Home	439	95.9
Government Medical Service/Clinic	319	100.0
Health Club	6	83.3
Hospital Authority Institution	99	100.0
Medical and X-ray Laboratory	216	90.3
Medical Clinic	82	92.7
Medical Equipment Company	811	98.5
Miscellaneous Health Services*	76	90.8
Nursery/Child Care Centre	319	97.8
Optical Company/Shop	1 093	94.1
Pharmaceutical Company	504	94.4
Private Hospital/Nursing Home	23	100.0
Private Practitioner	2 620	87.5
Rehabilitation Institute	316	97.5
Special School	87	89.7
University/Military/Others	31	100.0
Total	8 516	92.7

Note: \* Refers to private clinics/institutions providing miscellaneous health services, such as clinical management, physiotherapy and speech therapy services.

# 5. Preliminary results of enumeration by type of medical and health personnel

5.1 The overall response rate for medical and health personnel compared with that of the 1992 HMS is as follows:

		1992	1996
Number covered	(a)	38 880	46 429
Number responded	(b)	35 975	38 349
Overall response rate	(c)=(b)/(a)	92.5%	82.6%

5.2 A decrease in the overall response rate was noted in the 1996 HMS compared with the 1992 HMS. As for individual type of medical and health personnel, the response rate was highest for ancillary dental personnel (93.0%), followed by optometrists (87.0%), nurses

and allied nursing personnel (86.1%), and other allied health personnel (81.8%), whilst the lowest was observed for pharmacists (69.4%), followed by dentists (70.4%). In absolute terms, the non-response was highest for nurses and allied nursing personnel, amounted to 3 402, followed by doctors, which totalled 1 889. Further details are presented in **Table 2**.

Table 2: Response Pattern by Type of Medical and Health Personnel

Type of Medical and	Total	Responded				Nor	-		
Health Personnel	Covered	Active Inactive <b> </b> Total		al	responded				
		No.	%	No.	%	No.	%	No.	%
Doctor	8 069 €	5 750	71.3	430	5.3	6 180	76.6	1 889	23.4
Dentist	1 4780	977	66.1	64	4.3	1 041	70.4	437	29.6
Nurse and Allied Nursing	24 524	21 122	86.1	N.A.	N.A.	21 122	86.1	3 402	13.9
Personnel	1 010 5		40.0	0.4	0.0	-0-	40.4		20.4
Pharmacist	1 0180	613	60.2	94	9.2	707	69.4	311	30.6
Medical Laboratory	2 603 <b>0</b>	1 718	66.0	169	6.5	1 887	72.5	716	27.5
Technologist									
Occupational Therapist	674 <b>0</b>	492	73.0	39	5.8	531	78.8	143	21.2
Optometrist	1 2570	1 036	82.4	58	4.6	1 094	87.0	163	13.0
Ancillary Dental	1 9652	1 828	93.0	N.A.	N.A.	1 828	93.0	137	7.0
Personnel 4							'		
Other Allied Health	4 841 2	3 959	81.8	N.A.	N.A.	3 959	81.8	882	18.2
Personnel <b>9</b>									
Total	46 429	37 495	80.8	854	1.8	38 349	82.6	8 080	17.4
	(38 880)	(35 409)	(91.1)	(566)	(1.5)	(35 975)	(92.5)	(2 905)	(7.5)

Notes: • Figures refer to the numbers of professionals on respective registers maintained by the Boards and Councils Office. For doctors and dentists, those on the overseas lists were excluded.

- **2** Figures refer to the respective numbers of personnel reported by the institutions.
- Inactive cases refer to those reported to have migrated, retired, deceased or ceased practising in the medical and health profession as registered etc.
- Ancillary Dental Personnel refer to dental hygienist, student dental hygienist, dental surgery assistant, dental technician/technologist, dental therapist and student dental therapist.
- Other Allied Health Personnel refer to audiologist, audiology technician, chiropodist, chiropractor, clinical psychologist, dietitian, dispenser, student dispenser, educational psychologist, medical laboratory worker, mould laboratory technician, student mould laboratory technician, occupational therapy worker, optical technician, orthoptist, physiotherapist, physiotherapy worker, prosthetist-orthotist, radiographer (diagnostic radiology), radiographer (therapeutic radiology), X-ray technician/assistant, scientific officer (medical) and speech therapist.

N.A. = Not applicable.

Annual renewal of practising certificate was required only for doctors, dentists, pharmacists, medical laboratory technologists, occupational therapists and optometrists.

Figures in brackets refer to the results of the 1992 Health Manpower Survey.

Figures may not add up to total due to rounding.

- 5.3 Those responded to the 1996 HMS and claimed to be inactive (854), i.e. doctors, dentists, pharmacists, medical laboratory technologists, occupational therapists and optometrists, experienced an increase compared with the corresponding figure of the 1992 HMS (566). About half of these inactive personnel was doctors.
- Possible explanations for the decrease in overall response rate would be that the HMS is a voluntary survey and that subjects' responses rely heavily upon their co-operation. Furthermore, there may be an increase in the number of medical and health personnel ceased practising in Hong Kong or out of Hong Kong during the survey period due to retirement,

emigration or other reasons but this is not reflected adequately through the channels like the gazette.

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