

DEPARTMENT OF HEALTH

衛生署

2026 Health Manpower Survey on Optometrists

2026 年有關視光師的醫療衛生服務人力統計調查

Please read the explanatory notes on page 4 before completing this questionnaire.

Please tick ✓ as appropriate for answers with selection boxes provided.

填寫問卷前，請參閱第 4 頁的註釋。如答案旁邊設有方格，請在適當的方格內加上「✓」號。

A. PERSONAL DATA 個人資料

1. Sex 性別

☐ 1 Male 男

☐ 2 Female 女

2. Year of birth 出生年份

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3. Which of the following best describes your work status **as at 30.06.2026**?

下列哪項最符合你於 2026 年 6 月 30 日的就業情況？

“Practising in the optometry profession” includes the practice of optometry profession, or work that is principally related to the discipline of optometry. This includes research, administration and teaching of optometry.

「從事視光學專業」包括從事視光學臨床工作，或從事主要關乎視光學專科的工作。所涉及的範疇包括視光學的研究、行政及教學工作。

☐ 1 Practising in Hong Kong Special Administrative Region in the optometry profession
在香港特別行政區從事視光學專業

➡ (Go to Question 4)
(請答第 4 題)

☐ 5 Practising in Macao, other areas of the Greater Bay Area in the optometry profession
在澳門或大灣區其他地區從事視光學專業

☐ 4 Practising in other areas of the Mainland in the optometry profession
在內地其他地區從事視光學專業

(Thank you and no further questions)
(問卷完，多謝合作)

☐ 3 Practising overseas in the optometry profession
在海外從事視光學專業
(Please indicate the country 請說明國家) _____

☐ 2 Not practising in the optometry profession
並非從事視光學專業

➡ (Go to Question 9)
(請答第 9 題)

B. MAIN EMPLOYMENT as at 30.06.2026 於 2026 年 6 月 30 日的主要受僱工作

4. Where is / are your practice location(s)? (*You may ✓ more than one box)

你在哪個地區執業？(*你可在多於一個方格內加上✓號)

☐ 11 Central & Western
中西區

☐ 13 Eastern
東區

☐ 14 Southern
南區

☐ 12 Wan Chai
灣仔區

☐ 24 Kowloon City
九龍城區

☐ 26 Kwun Tong
觀塘區

☐ 23 Sham Shui Po
深水埗區

☐ 27 Yau Tsim Mong
油尖旺區

☐ 25 Wong Tai Sin
黃大仙區

☐ 39 Islands
離島區

☐ 31 Kwai Tsing
葵青區

☐ 35 North
北區

☐ 38 Sai Kung
西貢區

☐ 37 Sha Tin
沙田區

☐ 36 Tai Po
大埔區

☐ 32 Tsuen Wan
荃灣區

☐ 33 Tuen Mun
屯門區

☐ 34 Yuen Long
元朗區

- 5.(a) Please indicate the type of institution in which you **worked in the optometry profession as at 30.06.2026.**
(If you have more than one job in the optometry profession, please indicate the type of institution of **your MAIN JOB in which you spent most of your working time.**) (*Please ✓ **one box only**)

請註明你於 2026 年 6 月 30 日在何類型機構從事視光學專業工作。

(如你從事多於一份視光學專業工作，請註明佔用最多工作時間的主要職位所屬機構類型。)

(*請只選一個方格加上✓號)

☐ 01	Government 政府	☐ 02	Hospital Authority 醫院管理局
☐ 03	Academic institution 學術機構	☐ 04	Subvented organisation (Please specify) 資助機構 (請說明)
☐ 06	Private medical clinic (Note 1) 私營診療所 (註一)	☐ 14	Private optometric Centre 私營視光中心
☐ 10	Contact Lens company / Ophthalmic Lens company / Optical shop / Optical company 隱形眼鏡公司 / 鏡片公司 / 眼鏡店 / 眼鏡公司	☐ 13	Other private institution (Please specify) 其他私營機構 (請說明)
☐ 11	Private hospital (Note 2) 私家醫院 (註二)		

- 5.(b) What was your employment status of your **MAIN JOB** in the optometry profession **as at 30.06.2026?**

你於 2026 年 6 月 30 日在視光學專業內的**主要職位**屬何種僱傭類別？

☐ 1	Employee 僱員	☐ 2	Self-employed / Employer (Note 3) 自僱人士／僱主 (註三)
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- 5.(c) Please indicate the proportion of time you spent in various areas under your present position **as at 30.06.2026.**

就你於 2026 年 6 月 30 日的現任職位，請在下方註明你於各工作範疇的工作時間比例。

Area of Work 工作範疇	Code 編碼	Percentage of time spent 所佔工作時間的百分比
Service of optometric care 視光護理服務	05	%
Administration / Management 行政／管理	06	%
Teaching / Education 教學／教育	07	%
Research 研究	08	%
Others (Please specify) 其他 (請說明) (No abbreviation please 請勿使用縮寫)	09	%
Total 總數		100 %

- 5.(d) On **average**, what was the number of **WORKING HOURS PER WEEK** in your present position **as at 30.06.2026?**
(*Please round off to the nearest integer)

平均來說，就你於 2026 年 6 月 30 日的現任職位，每週的工作時數為多少？(*請四捨五入至最近整數)

(i) Hours of normal duty per week (excluding meal breaks and on-call duty) 每週日常職務時數 (不計用膳時間及候召工作)	Hours 小時
(ii) Hours of on-call duty per week (excluding normal duty and meal breaks) 每週隨時候召工作時數 (不計日常職務及用膳時間)	Hours 小時

- 5.(e) On **average**, how many **CONSULTATIONS/CLIENTS** did you handle **PER WORKING HOUR** in your present position **as at 30.06.2026?** (*Please round off to the nearest integer)

平均來說，就你於 2026 年 6 月 30 日的現任職位，你每個工作小時為多少名顧客提供專業服務？

(*請四捨五入至最近整數)

☐ 1	No. of consultations/clients per working hour (on average): 每個工作小時顧客數量 (平均):		
☐ 2	Not applicable 不適用		

C. PROFESSIONAL HEALTHCARE QUALIFICATIONS HELD 所持醫療衛生專業資格

- 6.(a) Please indicate your **earliest basic qualification** obtained in the optometry profession (Note 4).

(*Please ✓ **one box only**)

請註明你在視光學專業方面獲取的最早基本資格 (註四)。(*請只選一個方格加上✓號)

☐ 06	Higher Certificate 高級證書	☐ 09	Professional Diploma 專業文憑	☐ 12	Bachelor's Degree 學士學位
☐ 30	Passed the examination held by the Optometrists Board of Hong Kong under Section 15A of Allied Health Professions Ordinance (Chapter 359) for the purpose of provisional registration. 為獲取臨時註冊資格，在由香港視光師管理委員會按照《專職醫療業條例》(第 359 章第 15A 條)舉行的考試中考取合格				
☐ 31	Exemption from the examination held by the Optometrists Board of Hong Kong under Section 15A of Allied Health Professions Ordinance (Chapter 359) for the purpose of provisional registration. 在獲取臨時註冊資格時，豁免參加由香港視光師管理委員會按照《專職醫療業條例》(第 359 章第 15A 條)舉行的考試				
☐ 19	Others (Please specify) 其他 (請說明)				

6.(b) Was the above **earliest basic qualification** issued from an institution in Hong Kong (Note 4)?

以上**最早基本資格**是否由香港的機構頒授 (註四)?

☐ **01** In Hong Kong
香港

☐ **02** Outside Hong Kong (*Please specify*)
香港以外 (請說明) _____

7.(a) Have you **COMPLETED** or are you **RECEIVING** any **additional training(s)** (excluding the above earliest basic qualification), which is/are relevant to the optometry profession (Note 5)?

你是否**已完成**或**正在接受**有關視光學專業的**額外訓練**(不計以上最早基本資格) (註五)?

☐ **1** Yes
是 (*Go to Question 7b)
(*請答第 7b 題)

☐ **2** No
否 (*Go to Question 8)
(*請答第 8 題)

7.(b) Please indicate the **HIGHEST level of additional training** (excluding the above earliest basic qualification) you have **COMPLETED**, which is relevant to the optometry profession (Note 5). (**Please ✓one box only*)

請註明你所**完成**有關視光學專業的**額外訓練**(不計以上最早基本資格)所達至的**最高程度**(註五)。

(*請只選一個方格加上✓號)

☐ **01** Certificate
證書

☐ **07** Diploma
文憑

☐ **12** Bachelor's Degree
學士學位

☐ **13** Post-graduate Diploma
深造文憑

☐ **14** Master's Degree
碩士學位

☐ **15** Doctoral Degree
博士學位

☐ **18** Others (*Please specify*)
其他 (請說明) _____

☐ **19** Not applicable, as the additional training has not yet been completed.
不適用，因為額外訓練尚未完成。

7.(c) Please indicate below the field(s) in which you **COMPLETED** or are **RECEIVING additional training** relevant to the optometry profession. (Note 5) (**You may ✓more than one box*)

請在下方註明你**已完成**或**正在接受**有關視光學專業的**額外訓練**所屬的範疇 (註五)。

(*你可在多於一個方格內加上✓號)

(please indicate if the training has been completed)
(請註明額外訓練是否已經完成)

Field of additional training 額外訓練的範疇

Completed 已完成 Receiving 正在接受

☐ **018** Optometry 視光學

☐ **1**

☐ **2**

☐ **016** Optical Mechanics 光學機械

☐ **1**

☐ **2**

☐ **003** Contact Lens Technology 隱形眼鏡技術

☐ **1**

☐ **2**

☐ **017** Optometric Research 視光學研究

☐ **1**

☐ **2**

☐ **105** Orthokeratology 角膜矯形術

☐ **1**

☐ **2**

☐ **024** Others (*Please specify*)
其他 (請說明) _____

☐ **1**

☐ **2**

8. How many credits of Continuing Professional Development (CPD) training relevant to the optometry profession did you receive during the period of **01.07.2025 to 30.06.2026**?

在 **2025 年 7 月 1 日至 2026 年 6 月 30 日** 期間，你在視光學專業方面曾接受多少學分的持續專業發展培訓?

☐ **1** 1 to 10 credits
1 至 10 學分

☐ **2** 11 to 20 credits
11 至 20 學分

☐ **3** 21 to 30 credits
21 至 30 學分

☐ **4** 31 to 40 credits
31 至 40 學分

☐ **5** > 40 credits
多於 40 學分

☐ **8** Not applicable
不適用

(Thank you and no further questions)

(問卷完，多謝合作)

D. **THOSE NOT PRACTISING IN THE OPTOMETRY PROFESSION**

並非從事視光學專業的人士

9. If someone offered you a job in the optometry profession, were you available for work in the **past 7 days prior to 30.06.2026**?

如有人聘用你擔任視光學專業的工作，你能否在 **2026 年 6 月 30 日** 之前的過去 7 天內上任?

☐ **1** Yes (*Go to Question 11)
能夠 (*請答第 11 題)

☐ **2** No (*Go to Question 10)
不能夠 (*請答第 10 題)

10. Why were you **not available** for work in the **past 7 days prior to 30.06.2026**? (**Please ✓one box only*)

請說明你**不能夠**在 **2026 年 6 月 30 日** 之前的過去 7 天內上任的原因。 (*請只選一個方格加上✓號)

☐ **01** Due to health issues
基於健康問題

☐ **03** Undertaking training in the optometry field
進行視光學範疇的訓練

☐ **04** Engaged in work in other profession / fields
從事其他專業／範疇的工作

☐ **05** Engaged in household duties
料理家務

☐ **02** Others
其他

11. Did you seek work in the optometry profession during the **past 30 days prior to 30.06.2026**?
你在 **2026 年 6 月 30 日之前的過去 30 天**內有沒有尋找視光學專業的工作？
- | | |
|---|---|
| ☐ 1 Yes <i>(*Go to Question 12)</i>
有 <i>(*請答第 12 題)</i> | ☐ 2 No <i>(*Go to Question 13)</i>
沒有 <i>(*請答第 13 題)</i> |
|---|---|
12. Please indicate the type of work in the optometry profession you had sought during the **past 30 days prior to 30.06.2026**. *(*You may ✓ more than one box)*
請註明你在 **2026 年 6 月 30 日之前的過去 30 天**內曾尋找視光學專業的工作性質。 *(*你可在多於一個方格內加上✓號)*
- | | | |
|---|---|--|
| ☐ 2 Full time
全職 | ☐ 3 Part time
兼職 | ☐ 5 Locum / temporary
自選兼職／臨時 |
|---|---|--|
- (Thank you and no further questions)*
(問卷完，多謝合作)
13. Why did you not seek work in the optometry profession during the **past 30 days prior to 30.06.2026**?
*(*Please ✓ one box only)*
請說明你在 **2026 年 6 月 30 日之前的過去 30 天**內沒有尋找視光學專業工作的原因。 *(*請只選一個方格加上✓號)*
- | | |
|--|--|
| ☐ 07 Believe no work available in the optometry profession (job-seeking effort made in the past)
相信視光學專業暫無空缺 (曾經盡力尋找工作) | ☐ 01 Retired
退休 |
| ☐ 08 Expect to return to the original job in the optometry profession
期待重返原任的視光學專業崗位 | ☐ 05 Working in other profession
從事其他行業 |
| ☐ 10 Starting business in the optometry profession at subsequent date
即將開展視光學專業的生意 | ☐ 06 Others
其他 |
| ☐ 11 Waiting to take up new job in the optometry profession
等待出任有關視光學專業的新職位 | |
| ☐ 02 Emigrated
移民 | |
| ☐ 13 Want to take rest / No motive to work / No financial need
希望休息／不想工作／財政上沒有需要 | |
| ☐ 12 Engaged in household duties
料理家務 | |
| ☐ 03 Undertaking training in the optometry field
進行視光學範疇的訓練 | |
| ☐ 04 Due to health issues
基於健康問題 | |

~End of Questionnaire. Thank you for your participation 問卷完，多謝填寫問卷~

Explanatory Notes

註釋

- | | |
|---|---|
| <p>1. <u>Private medical clinic</u>
Refers to medical clinic registered under Section 5 of the Medical Clinics Ordinance (Chapter 343).</p> <p>2. <u>Private hospital</u>
Refers to private hospitals licensed under the Private Healthcare Facilities Ordinance (Chapter 633).</p> <p>3. <u>Self-employed / Employer</u>
Self-employed refers to the one works for himself or herself and is not employed as an employee. If you are a sole proprietor or partner of a partnership of a business, you will be regarded as self-employed.
An employer refers to a person who has entered into a contract of employment to employ another person as his employee.</p> <p>4. <u>Earliest basic qualification in the optometry profession</u>
Refers to the minimum entry qualification recognised for registration by the Optometrists Board of Hong Kong.</p> <p>5. <u>Additional training</u>
Relevant medical and health training obtained from recognised institutions in addition to the earliest basic qualification. In-house training or short courses with certificate of attendance/achievement issued only should not be considered as additional training.</p> | <p>1. 私營診療所
指根據《診療所條例》(第 343 章)(第 5 條)註冊的診療所。</p> <p>2. 私家醫院
指根據《私營醫療機構條例》(第 633 章) 領有牌照的私家醫院。</p> <p>3. 自僱人士／僱主
自僱人士指為自己工作，而不是以僱員身分受僱的人。如果你是獨資經營者，又或是合夥生意的合夥人，也是自僱人士。
僱主是指按訂立僱員合約以僱用另一人作為其僱員的人。</p> <p>4. 視光學專業的最早基本資格
指獲香港視光學師管理委員會認可的最低入職資格。</p> <p>5. 額外訓練
指除最早基本資格外另從認可機構獲得的相關醫療衛生訓練。只頒發聽講／訓練證書的內部培訓或短期課程不應視為額外訓練。</p> |
|---|---|

For enquiries about this survey or questionnaire, please contact the Health Manpower Section of the Department of Health at 2961 8759.

如對這次調查或這份問卷有任何查詢，請致電 2961 8759 與衛生署衛生服務人力組職員聯絡。