

香港公共醫療醫生協會

Hong Kong Public Doctors' Association

Secretariat : Department of Surgery, Kwong Wah Hospital, Kowloon

Homepage : www.hkpda.org.hk

31 January, 2002

Ms Doris Chan,
LegCo Panel on Health Services

Dear Ms Chan,

Re ; Working Hours of Public Hospital Doctors

1. Thanks for your information about the Hospital Authority's report on our working hours.
2. The survey by Hospital Authority concentrated on 11 departments with the longest working hours in their last survey. Such sampling method can not reflect the true overall picture and the results could be misleading.
3. In a survey conducted on November 2001 by our association, we sent out questionnaires to all frontline doctors working in the Hospital Authority. ~750 returns were received. The relevant results are as follows :

	Survey on 11/2001	Survey on 11/1999
Working hours / week		
Intern	91.6	96.3
MO / Resident	71.1	70.7
SMO / Asso Con	66.2	64.6
Consultant	63.0	62.9
COS	67.5	59.6
Overall	70.3	68.8
Compensatory leave after on duty on Statutory holiday or Sunday (% of colleagues)	20%	19.3%
Compensatory leave after on duty on SH (% of colleagues)	70%	No data
1 rest day for every 7 days (% of colleagues)	20%	No data

We must admit that there were also potential sources of bias in our survey because the information was self-reported by the colleagues, and colleagues with longer working hours may tend to respond more. However, we do not expect the result to be dramatically different from the true picture.

4. In item 2(d) of the HA's report, the so called "mutually agreed arrangements on the provision of weekly rest days, and appropriate rest to doctors who have worked a stretch of excessively long working hours" is reported by some colleagues as a choice between "provision of weekly rest day" or "appropriate rest after excessively long working hours", **but not both**. When the administration conforms to the former, some colleagues may need to work for excessively long working hours without appropriate rest. Such situation would obviously jeopardize the quality of public medical services.
5. We appreciate the HA's effort in recruiting more doctors to alleviate our workload. However, the increase in number of public patients and the demand on quality seems to have exceeded the increase in manpower. We also have doubt on HA's commitment to maintain the growth in manpower, as HA has stopped employing Resident as permanent staff since 1997. The second contract of ~120 colleagues will end in mid 2003, and more than 250 colleagues yearly will have their contract ended from 2004 onwards.
6. We would like to thank the LegCo Health Panel on concerning our working condition in relation to the quality of public medical services. The current problems about health care, including manpower estimation, co-operation of private and public health sectors, health care financing, are in fact interrelated. They must be examined together in order to arrive at a long term solution.

Thank for your attention

Yours sincerely

KL Leung,
President, HKPDA