

For information
on 7 May 2003

LegCo Panel on Health Services

Training and Welfare Fund for the Hospital Authority

Purpose

This paper briefs Members on the Administration's proposal to set up a Training and Welfare Fund for the Hospital Authority (HA).

Background

2. The Chief Executive announced on 22 April 2003 that the Administration would seek the approval of the Finance Committee (FC) of the Legislative Council to establish a fund for the medical and nursing staff for training or further studies, as well as the provision of some form of assistance to health care staff infected with the Severe Acute Respiratory Syndrome (SARS).

3. The outbreak of SARS has posed a major challenge to HA's infection control system. There is need for HA to enhance the expertise of its health care professionals in infectious disease control. The whole system needs to be geared towards the better understanding and management of infection control and infectious disease. This requires a fundamental change to HA's existing work practices and culture.

The Administration's Proposal

4. We propose to establish a Training and Welfare Fund for HA to provide its health care staff with training to enhance their expertise in infectious disease control in the hospital setting, provide special recuperation grant for those health care staff who contracted SARS while on duty, and implement other staff welfare initiatives. The Fund will be operated for five years. HA will administer the Fund by setting up a Central Committee which will be chaired by the Chief Executive of HA, with members comprising HA Senior Executives and Cluster Chief Executives. HA will report on a half-yearly basis to the Health, Welfare and Food Bureau on the utilisation of the Fund. The Health, Welfare

and Food Bureau would, on behalf of HA, provide an annual report on the utilisation of the Fund to the LegCo Panel on Health Services.

Training

5. HA proposes to set up an Infectious Disease Control Unit to be headed by an expert with international expertise to steer the development of the new culture on understanding and management of infection control and infectious disease. The function of this Unit is to formulate infection control procedures, protocols and guidelines and oversee their implementation in hospital clusters, as well as to monitor the epidemiological development in the clusters. To support the Infectious Disease Control Unit, an Infectious Disease Control Training Centre will be established under the existing Hospital Authority Institute of Health Care to identify suitable training programmes and provide local training for HA health care staff across all disciplines. The head of the Infectious Disease Control Unit will also serve as the advisor of the Infectious Disease Control Training Centre. HA will need to recruit additional trainers and administration staff to run the Training Centre. Apart from providing local training programmes through the Infectious Disease Control Training Centre, HA will also send its health care professionals overseas to attend training programmes. In this regard, provisions have to be made for the recruitment of relief staff to replace staff on training, both locally and overseas.

6. Set-up costs will need to be incurred for the new Infectious Disease Control Training Centre for the establishment of different levels of infectious disease wards for simulation training, and the procurement of relevant medical/resuscitation equipment for training purpose as well as audio-visual equipment required for a training centre.

Staff Welfare

7. HA employees who contracted SARS while on duty will be compensated in accordance with the Employees' Compensation Ordinance, namely, paid sick leave in addition to their normal sick leave entitlements and compensation for permanent incapacity if so assessed by the Labour Department. HA proposes that in addition, a non-accountable one-off fixed sum of \$50,000 be granted to an HA staff confirmed to have contracted SARS while on duty and whose case has been reported to the Labour Department according to the Employees'

Compensation Ordinance. The sum will be granted to eligible persons irrespective of their length of stay in hospital or the seriousness of the disease. The grant is intended to compensate for the possible financial loss suffered by family members of an infected staff for undergoing the quarantine period, and as a token of compensation for the physical turmoil and psychological stress experienced by the staff and his family members during treatment and the quarantine period.

8. A Task Force with staff participation will be established to develop and implement other initiatives for the well-being and welfare of staff. These may include ex-gratia payment and funeral expenses for staff infected with SARS who subsequently passed away, setting up satellite OASIS, a clinical psychology service operated by HA, at cluster level to provide psychosocial support and services to staff, establishing a corporate-wide Employee Assistance Programme with counselling hotline services, strengthening the services of HA Staff Clinics, etc.

Way Forward

9. We intend to seek FC's approval on 16 May 2003 for the establishment of the Fund.

Advice Sought

10. Members are invited to comment on the Administration's proposal.