Panel on Health Services

List of follow-up actions
(Position as at 2 January 2004)

	Subject	Date of meeting	Follow-up action required	Administration's response
1.	Reform of the Medical Council of Hong Kong	4 February 2002	The Administration agreed to give a response on whether it would set up a Complaints Office in the Department of Health (DH) to receive medical complaints, conduct preliminary investigation, make referrals and conduct mediation; and to examine at an appropriate time on gradually moving such Office towards independence.	Letters were issued on 26 April, 30 May, 26 June, 19 September, 29 October, 27 November, 23 December 2002, 30 January, 28 February, 3 and 30 April, 29 May, 25 June, 2 October, 3 and 29 November and 24 December 2003 to remind the Administration to provide a response. To this end, the Administration has repeatedly responded that it is working on the operational framework of the Complaints Office and will report to members in due course.
2.	Rehabilitation of discharged mental patients	11 March 2002	The Administration agreed to provide a paper on rehabilitation services for discharged mental patients.	Letters were issued on 30 May, 26 June, 19 September, 29 October, 27 November, 23 December 2002, 30 January, 28 February, 3 and 30 April, 29 May, 25 June, 2 October and 3 and 29 November and 24 December 2003 to remind the Administration to provide a response. The Administration would provide a paper in due course.

	Subject	Date of meeting	Follow-up action required	Administration's response
3.	Working Group on Public/Private Interface - Progress Report	9 December 2002	The Administration undertook to provide statistics on the use of HA private services in the past year, including the number of patients who had used the private services and the types of services they used.	The Administration has advised that liaison with Hospital Authority (HA) is in progress on the requested information.
4.	Redevelopment of Caritas Medical Centre, Phase 2	9 June 2003	The Administration undertook to provide information on established planning standards for public hospitals, and on the planning standards for public hospitals adopted in some developed economies.	The Administration is liaising with Hospital Authority on the requested information.
5.	Tendering system for pharmaceutical products	9 July 2003	In a letter to the Panel dated 11 April 2003, the Administration undertook to amend Clause 4.1.2 of the tender document for drug procurement with a view to improving the clarity of the tender conditions concerning Marketing Authorisation.	Clause 4.1.2 of the tender document for drug procurement has been amended. The Administration would report to the Panel by means of a letter in the near future.

Subject	Date of meeting	Follow-up action required	Administration's response
6. Collaboration on infectious disease surveillance among Guangdong Province, Hong Kong and Macao	10 November 2003	The Administration agreed to consider providing - (a) clear definition of sudden upsurge of any infectious diseases of unknown nature or of public health significance under the tripartite agreement on collaboration on infectious disease surveillance; and (b) a copy of the tripartite agreement on collaboration on infectious disease surveillance.	There is no formal definition of "sudden upsurge of any infectious diseases of unknown nature or of public health significance under the tripartite agreement on collaboration on infectious disease surveillance" under the tripartite agreement on collaboration on infectious disease surveillance. The parties concerned have been working on the understanding that this refers to a general increase of infected cases above the normal level. Copies of the tripartite agreements on collaboration on infectious disease surveillance could not be released to members, as they are internal correspondences between the Central People's Government and the Hong Kong Special Administrative Region. Members may wish to refer to the outcome of the first and second tripartite meetings given in the Appendix.

Council Business Division 2
<u>Legislative Council Secretariat</u>
2 January 2004

Outcome of the First Tripartite Meeting

The First Tripartite Meeting of Guangdong-Hong Kong-Macao Expert Group on Prevention and Treatment of Infectious Atypical Pneumonia, attended by health and medical professionals from the three places, was held on 29-30 May 2003 in Hong Kong. The three places agreed to enhance cooperation in the following areas:

1. Extend present notification mechanism and set up point-to-point information exchange

The three parties agreed to extend the present notification mechanism on SARS to cover Hong Kong, Guangdong and Macao. The existing point-to-point information exchange set-up between certain health units of Hong Kong and Guangdong will further be expanded to health administrative bodies, disease surveillance and control units as well as medical sectors of the three places.

2. Strengthen the network of information flow on infectious diseases

Noting that effective tracing of cases and source of infection is of paramount importance to the surveillance and control of diseases, the three sides agreed to strengthen the network of information flow on infectious diseases and arrange experts' visits to each other.

3. Set up medical facility for admission and treatment of patients with infectious diseases

Experts of the three sides will continue to actively explore and study the characteristics of infectious diseases. This will serve as the basis and reference to the setting up of a medical facility for admission and treatment of patients with infectious diseases. The three sides agreed to further discuss the issue at the next meeting.

4. Enhance infection control and data analysis on clinical treatment

On infection control and clinical treatment of SARS, the three places saw the need for further enhancing the exchange of information and cooperation, in particular, information interflow on infection control in hospitals, data analysis on epidemic situation and clinical treatment. This will enable the three places to have more complete information on the prevention and treatment of the disease. The three sides agreed to provide relevant data analysis for discussion at the next meeting.

5. Expand the list of other infectious diseases for notification and information exchange

To safeguard public health and contain the spread of infectious diseases, the three places agreed to expand the list of notifiable infectious diseases including AIDS, dengue fever, influenza, tuberculosis, cholera and malaria. The information includes cumulative case reports, the number of deaths and patients discharged. The three places will also notify each other the latest situation under special circumstances. The three places agreed to discuss in the next meeting the prevention and control of seasonal infectious diseases, like dengue fever.

6. Enhance cooperation on scientific research and set up mutual visit programme for professionals and technical staff

The three places agreed to further enhance co-operation on scientific research and set up mutual visit programme for professionals and technical staff. The programme covers professionals and technical staff engaged in different scope of works including epidemiological investigations, pathological studies and clinical treatment. On prevention and control of infectious diseases, the three sides agreed that information exchange and co-operation on blending the merits of Western and Chinese medicines would be further enhanced.

Outcome of the Second Tripartite Meeting

The Second Tripartite Meeting of Guangdong-Hong Kong-Macau Expert Group on Prevention and Treatment of Infections diseases was held on 4 and 5 August 2003 in Macao. The three places agreed to enhance collaboration on the following areas:

- 1. Expand the list of notifiable diseases and exchange information about the statutory notifiable diseases of the three places on a regular monthly basis; and
- 2. Expand the list of notifiable diseases in the three places to cover infectious diseases of concern as and when necessary. Where a report is made to the relevant authorities, a copy of such report should also be made to the health authorities of the two other places for information. The disease notification mechanism will be reviewed and updated regularly under the coordination of the Ministry of Health of the People's Republic of China.