

For Information
on 8 January 2004

**Legislative Council Panel on Security and
Panel on Health Services**

**Progress of implementation of recommendations of
the Report of the Special Task Group set up in relation to the
death of an inmate in Siu Lam Psychiatric Centre in November 2001**

Purpose

This paper provides information on the implementation of the recommendations of the captioned report and the review of the guidelines for conducting medical examination on inmates of penal institutions upon admission.

Background

2. At the meeting of the Panel on Security on 23 January 2003 , Members were informed that the Special Task Group appointed by the Commissioner of Correctional Services to conduct a detailed study into the circumstances surrounding the death of an inmate in Siu Lam Psychiatric Centre (SLPC) in November 2001 had proposed 34 recommendations to enhance the quality of service at the Centre. Members were informed vide LC Paper No. CB(2)947/02-03(01) that 19 of the 34 recommendations, as set out in Chapter 10 of the report of the Special Task Group, had been implemented by the Correctional Services Department (CSD) as of January 2003. The Administration undertook to report in one year's time the progress and details of implementation of the recommendations.

3. At the joint meeting of the Panel on Security and Panel on Health Services held on 18 July 2003 to discuss follow-up issues relating to the death of the inmate, the Administration was requested to provide information on the review of the guidelines for conducting medical examination on inmates of penal institutions upon admission.

Implementation of recommendations made by the Special Task Group

4. As of 31 December 2003, 29 of the 34 recommendations have

already been implemented. Details of their implementation are set out at Annex. CSD is following up with the implementation of the remaining five recommendations (shown in italics in the Annex). Among them, Recommendations 10.3, 10.4 and 10.13 are related to regular review of the nursing manpower of SLPC, external certification of the services of the Centre, and accreditation of the procedures and documentation adopted. Recommendations 10.17 and 10.24 are in relation to the provision of digital closed circuit television (CCTV) monitoring systems in all penal institutions and the installation of local system to back up the central system where necessary. As a matter of priority, the improvement works at SLPC will be completed by April 2004.

Other improvements in SLPC

5. Separately, in response to an Honourable Member's suggestion at the joint panel meeting on 5 March 2003 for improving the communication and observation facilities of the Observation Unit of the Admission Ward (AOU) in SLPC, CSD has -

- (a) started to install intercom in all single rooms of the AOU to provide better communication between inmates and CSD staff. The installation works are scheduled for completion by April 2004.
- (b) installed an additional observation window at each of the 20 single rooms of the AOU to enhance staff surveillance on the conditions of inmates.

Guidelines and procedures for conducting medical examination on inmates of penal institutions upon admission and transfer

6. Under Prison Rule 14, every prisoner shall, as soon as possible after his admission, be examined by a medical officer, who shall record the state of health of the prisoner, and such other particulars as he may deem necessary. It is also a standard practice to perform medical examination on prisoners upon their transfer among penal institutions.

7. CSD has reviewed the guidelines and procedures for such medical examinations, with input from the Department of Health(DH). With effect from 1 September 2002, two newly designed forms have been adopted. These forms are aimed at facilitating documentation of the findings of a

comprehensive medical examination by a medical officer. The Reception Health Screen (RHS) Form A is to be completed for all newly admitted remands/prisoners, whereas RHS Form B is to be completed by the receiving institution for prisoners subsequent to their transfer from other penal institutions.

8. All newly admitted remands/prisoners will be examined by a medical officer. The remand/prisoner will first be enquired about his past and present medical history. These include, among others, his drug history and follow-up medical arrangements. A thorough physical examination, which includes the checking of blood pressure, pulse rate, temperature, respiration and urine tests for sugar and protein, will then be conducted. Other investigations, e.g. blood tests, will be performed as indicated by the medical officer. All the above findings will be documented in the RHS Form A which will be kept by CSD to form part of the medical record of the inmate.

9. In the case of prisoners transferred among penal institutions, they will be examined by a medical officer of the receiving institution. Taking into account the inmate's medical record and any recent medical complaints, a thorough medical examination will be conducted. Findings will be documented in the RHS Form B and kept by CSD as part of the medical record of the inmate.

Way forward

10. The Administration is committed to providing proper care to inmates for their safe custody and effective rehabilitation. CSD will ensure full implementation of the recommendations of the report of the Special Task Group. With the use of the new Reception Health Screen forms, health conditions of newly admitted inmates and transferred inmates will be systematically identified to facilitate treatment. The procedures and guidelines for conducting medical examination on newly admitted inmates will be regularly reviewed by CSD and DH and updated to reflect advances in medical care.

Recommendations

Implementation Progress

The Medical, Psychiatric and Nursing Staff Arrangements at SLPC

10.1 To rotate where possible the medical officers' (MO) postings regularly to allay concerns that they might be staying in a particular institution for too long. (para. 3.34 – 3.35 of the report of the Special Task Group)

Action taken. The posting policy of MOs has been discussed and agreed at the meeting of the Medical Services Committee jointly held by CSD and the Department of Health on 24.1.2003.

10.2 To formulate the work methods, procedures and evaluative service benchmarks specific to a psychiatric hospital for SLPC where appropriate. (para. 3.36 – 3.37)

Action taken. Dr. YUEN Cheung-hang (Chief of Service of the Forensic Psychiatrist Team, Castle Peak Hospital) of the HA commented that the current nursing procedures in SLPC are largely in line with the practices in the mental hospitals in Hong Kong. As recommended by Dr. Yuen, a Psychiatric Nursing Practice Liaison Group, consisting of members from the HA and CSD, has been formed to review and update periodically the psychiatric services of CSD. The liaison group will meet at half-yearly intervals, with the first meeting held on 31.12.2003.

10.3 To pursue regular reviews of the nursing manpower in the SLPC and its overall service quality by external authorities such as the HA or other competent bodies. (para. 3.38)

A review was undertaken by the HA in 1995 in respect of the nursing manpower in SLPC. It is CSD's on-going practice to review the nursing manpower from time to time taking into account the workload and service needs. The HA will be invited to conduct a comprehensive review of the nursing manpower in the SLPC and its overall service quality in 2005.

Recommendations

- 10.4 To seek external accreditation of the SLPC services by local or overseas professional associations such as eminent scholars and the Royal College of Psychiatry.
(para. 3.39)

Nursing Practices and Procedures in Relation to Medical Drugs and Monitoring System

- 10.5 To use the proper terminology whenever injectable tranquilizers is being used and referred to.
(para. 4.16)
- 10.6 To strengthen the recording system in the use of injectable tranquilizers as in the case of Dangerous Drugs.
(para. 4.17)
- 10.7 To adopt the practice of having two nursing staff sign on the patient's medical record to corroborate the dosage and condition of use whenever injectable tranquilizers is prescribed.
(para. 4.17)

Implementation Progress

The Royal College of Psychiatry used to visit SLPC every 2 to 3 years and its last visit was made in November 2002. The College will be invited to comment on the services provided in SLPC during its next visit to Hong Kong.

Action taken. Although the staff members are aware that prisoners are to be discouraged from uttering jargon vide previous instruction, all staff members have been reminded again on the issue with emphasis on the need to avoid misconception and misnomer brought about by inappropriate and casual use of jargon such as "Doping Injection".

Action taken. Instruction has been given to implement this recommendation vide the Quarterly Oi/c Hospital Meeting held on 10.12.2002. Periodic thematic checks will be conducted by Superintendent (Nursing and Health Services) to ensure that this is fully complied with.

Action taken. Instruction has been given to implement this recommendation and periodic thematic checks will be conducted.

Recommendations

Implementation Progress

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| 10.8 | To reinforce the practice adopted in the HA such that if a verbal order is given, the nursing staff has to record the details into the patient's medical record and recite the same instantly to the medical officer for verification before implementation. The relevant entry has to be signed by the medical officer on his subsequent return to the hospital as proper authority.
(para. 4.20) | Action taken. Instruction has been given to implement this recommendation and periodic thematic checks will be conducted. |
| 10.9 | Nursing staff will ensure full and proper maintenance of all relevant, correctly signed and dated records such as the prisoner's medical records, medicine issue records and injection records.
(para. 4.20) | Action taken. Instruction has been given to implement this recommendation and periodic thematic checks will be conducted. |
| 10.10 | Medical officers should refrain from giving verbal orders if they have not attended to the patients before, in particular in the use of injectable tranquilizers.
(para. 4.21) | Action taken. All MOs in penal institutions have been instructed to comply with the requirement. |
| 10.11 | To make more general use of mechanical restraints under rule 67 of the Prison Rules in dealing with prisoner's violent and agitated behaviour when the medical officer is not available.
(para. 4.25) | Action taken. Instruction has been given to implement this recommendation, and close monitoring of the actual practice in institutions will be carried out. |
| 10.12 | In the event the use of mechanical restraint is ordered by the Superintendent, immediate notice, preferable within 15 minutes, has to be given to the medical officer who is away from the institution.
(para. 4.25) | Action taken. Instruction has been given to implement this recommendation. |

Recommendations

- 10.13 To pursue external accreditation such as ISO certification as a means of external auditing and control of procedures and documentation.
(para. 4.26)

Implementation Progress

Funds have been secured for SLPC to pursue ISO certification in 2004.

Dispensary Sheet in Use in SLPC

- 10.14 To adopt the newly formatted “Prescription and Medicine Issue Record” for use in SLPC and other penal institutions.
(para. 5.8)

Action taken. The new format has been put in use in all penal institutions, including SLPC.

- 10.15 The used up record sheet be filed into the respective inmate’s medical record for future reference.
(para. 5.9)

Action taken. All penal institutions have been instructed to implement this recommendation.

- 10.16 To maintain a list of sample initial/signatures of all nursing staff and the list be reviewed regularly, say, every six months.
(para. 5.10)

Action taken. Senior Superintendent, SLPC has been instructed to maintain a list of sample initial/signatures to be reviewed every six months.

CCTV Monitoring System and Related Guidelines

- 10.17 The analogue system be progressively replaced by digital system.
(para. 6.18 – 6.19 and 6.26)

Replacement of the existing analogue CCTV system by digital CCTV system in SLPC will be completed by April 2004. Improvement projects in 13 other penal institutions have either commenced or would commence by April 2004. For the remaining 10 institutions, feasibility study and bidding for funds are being conducted.

Recommendations

- 10.18 In anticipating the full implementation of an enhanced digital system, spare VCRs and DVRs will be provided for use in the penal institutions to serve as back-up data storage.
(para. 6.20)
- 10.19 To consolidate the current operational guidelines into Action Cards for easy reference by responsible staff.
(para. 6.21)
- 10.20 To adopt the 14-day data retention/storage period as the standard for both the existing analogue CCTV system and the future digital CCTV system.
(para. 6.22)
- 10.21 To adopt a 14-time re-usable limit for videotapes to achieve better replay effects.
(para. 6.23)
- 10.22 To provide comprehensive, continuous and well-thought-out training for selected staff before the full implementation of the digital CCTV system.
(para. 6.24)
- 10.23 To work out comprehensive procedural guidelines relating to the operation, monitoring and recording of digital CCTV system.
(para. 6.25)

Implementation Progress

- Action taken. VCR has been procured and delivered to SLPC to provide back-up data storage. Subject to the availability of funds, action will be taken to provide spare VCR/DVR for use in other institutions' CCTV systems.
- Action taken. Instruction has been issued to consolidate the current operational guidelines relating to CCTV system into Action Cards for easy reference by responsible staff.
- Action taken. Instruction has been issued to adopt a 14-day data retention/storage period as a standard for existing and future CCTV systems.
- Action taken. Instruction has been issued to adopt the 14-time re-usable limit for videotapes. Additional videotapes will be made available for this purpose.
- Action taken. Selected staff are provided with training on the use of digital CCTV system by the equipment supplier as well as during in-service training.
- Action taken. Comprehensive procedural guidelines relating to the operation, monitoring and recording of digital CCTV system have been worked out for implementation at all penal institutions.

Recommendations

Implementation Progress

10.24 To give priority in the provision of a local digital CCTV monitoring system to back up the central system in specific locations where vulnerable prisoners requiring constant and close surveillance are accommodated.

(para. 6.27 – 6.28)

The installation of local digital CCTV monitoring system for SLPC has been completed whereas those of other institutions are progressing in good pace.

10.25 To preserve at least 48 hours' recording prior to any particular incident which might be needed for subsequent inquiries.

(para. 6.29)

Action taken. Penal institutions have been instructed to implement this recommendation.

10.26 To work out necessary provisions in the Service Level Agreement with EMSD prior to the operation of the new system for regular testing and check, standard response time and contingency arrangements, etc.

(para. 6.30)

Action taken. Necessary provisions have been worked out in the Service Level Agreement with the Electrical and Mechanical Services Department.

10.27 To draw up detailed operational guidelines in relation to operation and security control of the digital CCTV system.

(para. 6.31)

Action taken. Detailed operational guidelines in relation to operation and security control of the digital CCTV system have been drawn up for implementation at all penal institutions.

Other Findings and Recommendations

10.28 To ensure that prisoners are medically examined by the medical officers prior to transfer to the SLPC in accordance with laid down procedures.

(para. 8.1)

Action taken. All penal institutions have been instructed to strictly comply with the new requirement.

Recommendations

- 10.29 To ensure that the transfer of prisoners to the SLPC for assessment and management be effected at appropriate times taking into consideration of the duty pattern of the visiting psychiatrists and the residential medical officer at the SLPC unless under very special circumstances.
(para. 8.2)
- 10.30 Medication and treatments prescribed by medical officers prior to transfers had to be re-examined and endorsed by the medical officers of the receiving institution before continuation with such medication and treatments. Following the same logic, any somatic complaints and vital signs of the patient have to be viewed seriously and promptly attended to each time, even though medical investigations may have been conducted on him shortly before.
(para. 8.3)
- 10.31 To provide discussion venues for the psychiatrists, medical officers and nursing staff with a view to sharing knowledge and practical experience in the psychiatric, medical and nursing spheres.
(para. 8.4)
- 10.32 To conduct refresher and regular in-service training on selected topics to nursing staff so as to update their nursing knowledge from time to time.
(para. 8.5)

Implementation Progress

Action taken. All penal institutions have been instructed to stop the transfer of prisoners/inmates from penal institutions to SLPC for assessment on Public Holidays and Sundays and after office hours.

Action taken. The matter was brought up for discussion at the quarterly Senior Medical Officers' Meeting held on 20.12.2002. All attendees agreed to observe the new requirement.

Action taken. Psychiatrists from the HA have been enlisted as members of the Medical Services Committee to hold discussion with medical officers and nursing staff.

Action taken. Selected topics have been included in the refresher and regular in-service training programmes for the nursing staff of all penal institutions.

Recommendations

- 10.33 To relocate the CCTV monitor of the AOU to a suitable position e.g. at eye level and near the duty desk to enhance supervision.
(para. 8.6)
- 10.34 To ensure the air-conditioners inside the single rooms of AOU are tuned to a suitable temperature to ensure adequate warmth of the prisoners kept therein.
(para. 8.7)

Implementation Progress

Action taken. The CCTV monitor has been relocated accordingly.

Action taken. The management of SLPC has been instructed to ensure that the room temperature of the single rooms of AOU is maintained at a suitable level when occupied.