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Panel on Health Services meeting on 14 November 2005

Background paper prepared by the Legislative Council Secretariat

**Provision of Chinese medicine outpatient clinics
in the public sector**

Purpose

This paper gives an account of the past discussions by the Panel on Health Services (the Panel) on the provision of Chinese medicine outpatient clinics in the public sector.

Background

2. Following the enactment of the Chinese Medicine Ordinance in 1999 to provide the statutory framework for the regulatory control and development of Chinese medicine in Hong Kong, the Administration first informed the Panel on 13 November 2000 of its intention to provide outpatient Chinese medicine services in the public sector.

3. At the briefing on the policy objectives and initiatives for health services on 12 November 2001, the Administration stated that it would introduce Chinese medicine in the public health sector, initially in the form of outpatient services, with a view to integrating Chinese medicine and western medicine in the public healthcare system in the long run. Over the next few years, the Administration would be setting up Chinese medicine outpatient clinics in the territory, with a view to setting up 18 clinics by 2005.

4. The actual progress of opening Chinese medicine clinics was slower than the target set by the Administration. The first public Chinese medicine outpatient clinic at Tung Wah Hospital was opened on 1 December 2003, followed by two more clinics at Yan Chai Hospital and Alice Ho Miu Ling Nethersole Hospital, which were opened in late December 2003. In his briefing on the policy initiatives of the Health, Welfare and Food Bureau (HWFB) on 20 January 2005, the Secretary for Health, Welfare and Food

(SHWF) informed members that taking into account operational experience of three Chinese medicine clinics operating in Hospital Authority (HA) hospitals, the Administration aimed to increase the number of Chinese medicine clinics to no fewer than six in 2005-06 by stages.

Deliberations of the Panel

Target of opening Chinese medicine clinics in the public sector

5. On 13 November 2000, the Administration briefed members on the latest developments in the regulation of Chinese medicine, and the arrangements for the introduction of Chinese medicine in the public healthcare system. Members noted that the Administration was considering the modes of provision of outpatient Chinese medicine services in the public sector with a view to introducing pilot services in 2001-02. The Administration would report and consult members as soon as it had formulated detailed proposals.

6. Members welcomed the proposal and asked the Administration whether Chinese medicine would be extended to hospital services. Members were concerned that if the introduction of Chinese medicine in the public healthcare system was confined to outpatient service, the development of Chinese medicine in the public sector would be limited, and students of Chinese medicine graduating from local universities in 2003 would not be able to have their internship in local hospitals.

7. The Administration responded that it was its ultimate goal to provide Chinese medicine in the hospital services. As the introduction of Chinese medicine in the public healthcare system was a new policy, it was necessary to take the introduction forward in a cautious manner. To this end, the Administration planned to provide outpatient Chinese medicine services in the public sector as a start.

8. At the meeting of the Panel on 10 February 2003, the Administration consulted the Panel on the implementation plan for the introduction of Chinese medicine in the public sector. The proposed Chinese medicine outpatient clinics would be attached to selected public hospitals or health centres to provide Chinese medicine services in general practice. Each clinic would be staffed by four Chinese medicine practitioners and supporting staff including Chinese medicine dispensers.

9. The Administration pointed out that apart from promoting the development of “evidence-based” Chinese medicine practice through clinical research, clinical services provided at the clinics would help to derive the experience and expertise to systematise the knowledge base of Chinese medicine and develop standards in Chinese medicine practice. The

participation of western medicine practitioners in the joint clinical teams would help develop models of interface between western and Chinese medicine. The clinics would also serve as training grounds for Chinese medicine practitioners, particularly those graduates of local universities.

10. At the Panel meeting on 8 December 2003, the Administration briefed members on the latest development in the provision of Chinese medicine service in the public sector in Hong Kong. The Administration reported that the Chinese medicine clinic at Tung Wah Hospital, which was established by initiative of the Tung Wah Group of Hospitals and was already in operation, had joined HA as the first Chinese medicine clinic in the public sector. The Chinese medicine clinics at Yan Chai and Alice Ho Miu Ling Nethersole Hospital would commence operation in late December 2003. As to whether the 18 Chinese medicine clinics would be set up before 2005 as planned, the Administration said that it was unlikely that such a target could be met.

11. In its paper setting out the policy initiatives of HWFB for discussion at the Panel meeting on 20 January 2005, the Administration stated that taking into account experience of operating three Chinese medicine clinics in HA hospitals, it aimed to increase the number of Chinese medicine clinics to no fewer than six in 2005-06 by stages. The Administration aimed to consult the Panel and seek capital works funding support from the Finance Committee of the Legislative Council (LegCo) within the 2004-05 legislative session.

12. Members noted that the Administration's long-term goal was to establish a treatment mode in which Chinese medicine practitioners and western medical practitioners could work together in a complementary manner to treat inpatients of hospitals. In this connection, HA had planned to conduct pilot schemes in hospitals where treatments were primarily provided by western medical practitioners, to be supplemented by consultation of Chinese medicine practitioners for cases where appropriate.

Recent discussions

13. The Administration briefed the Panel on the way forward in the development of Chinese medicine service in the public sector at the Panel meeting on 13 June 2005.

14. Members noted that the Administration had decided to proceed with the development of Chinese medicine in the public sector by phases. The next phase would probably involve the Wanchai and Yuen Long districts because sites were already available. The Administration was identifying a suitable site for a Chinese medicine clinic in West Kowloon.

15. The Panel urged the Administration to expedite the setting up of more Chinese medicine clinics and requested the Administration to provide -

- (a) more details of its plan of setting up more Chinese medicine clinics in the territory; and
- (b) how it would further develop Chinese medicine and the interface between western and Chinese medicine

in its paper for the Public Work Subcommittee seeking funding approval for the building projects.

16. The subject was also briefly discussed at the Panel meeting on 17 October 2005 when SHWF briefed members on the policy initiatives of the Health, Welfare and Food Bureau. Members noted that the Administration had been able to identify six additional suitable clinic sites (in Wan Chai, Tseung Kwan O, Yuen Long, Kwai Tsing, Tuen Mun and Kwun Tong). The Administration aimed to consult the Panel and seek capital works funding support from the Legislative Council Finance Committee before the end of 2005.

Relevant papers

17. Members are invited to access the LegCo website (<http://www.legco.gov.hk>) to view the minutes of the meetings of the Panel held on 13 November 2000, 12 November 2001, 10 February 2003, 8 December 2003, 20 January 2005, and 13 June 2005 a relevant question asked by Hon Michael MAK at the Council meeting on 4 December 2002 and a relevant motion moved by Hon LI Kwok-ying at the Council meeting on 2 December 2004.

Council Business Division 2
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