



**Submission to the Legislative Council
on the
Appointment and responsibilities of Medical Directors
among private health care providers**

Legco Health Care Panel, Monday June 11 2007

As a leading private healthcare services provider in Hong Kong, we warmly support the goal of the Government and of the Legislative Council to raise the overall standards of the healthcare sector, both public and private, and to offer greater choice and transparency for consumers.

We believe that the concept of the appointment of medical director with legal responsibilities to the management of private health care groups is theoretically attractive and could have the potential to contribute to improvement in service standards. In practice, most larger private health care providers already have medical practitioners involved as directors or senior managers.

Quality HealthCare has a Medical Standards and Compliance Committee composed of practising, senior medical practitioners. It oversees medical centre standards, medical ethics, patient confidentiality, pharmacy review and compliance with all requirements of the Medical Council of Hong Kong, Government Ordinances and international best practice.

The Committee's responsibilities include the review of the group's practice standards, advisor to management and new doctors, continuing medical education programmes, and the review of complaints from patients. Matters relating to radiological, laboratory, and drug and dispensing services are also within the ambit of the MSCC. This is done on a purely voluntary and personal basis with no commercial or legal liability accorded by the organisation.

While the idea of appointing a medical director is well founded, the role and responsibilities of such a director should be carefully considered and clearly defined, and the government and the Legislative Council must be fully aware this is not the sole answer, but at best a small part of an overall solution. Indeed most of the recent press cases involved personal ethics of practitioners who are medical directors of their own practice.

In particular, the integrity of the doctor-patient relationship should not be impugned. A medical director will not have skills or experience in all aspects of medical practice and should not be able to interfere with an individual doctor's treatment of a particular patient. However, if a medical director were to be made legally responsible for a patient's treatment, the person would be motivated to interfere in individual doctor's treatment, protocols, patient care, medicine dispensing and so forth. No doubt this would not be acceptable to individual practitioners.

We believe that the Medical Code presently satisfactorily governs medical practice in Hong Kong and the Medical Council as a statutory body presently safeguards the integrity of the medical profession and the treatment of patients. We fully respect the authority of the Medical Council and expect our medical practitioners to do likewise. We believe that new legislation which confuses or compromises this authority could be counterproductive.

Lastly, we take this opportunity to point out that all healthcare providers -- from solo practitioners, group practices, scheme administrators and even the Hospital Authority -- are facing cost containment and financial pressures. While cost pressures have been blamed as the culprit for malpractices of some panel doctors, it is no excuse. How we as medical professionals respond to such pressures, as an individual or as an organisation, ultimately comes down to personal choices and ethics, and not because of legislation or ownership of an organisation. It is also an undeniable effect that the competitive market has brought greater efficiency and benefit to the public and patients.

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