

**For Information  
on 9 March 2009**

**Legislative Council Panel on Health Services**

**Update on the Caritas Medical Centre Incident**

**Purpose**

This paper provides an update on the Caritas Medical Centre (CMC) incident (the Incident).

**Background**

2. At the meeting of the Panel on Health Services held on 12 January 2009, Members noted the Investigation Report of the Incident submitted by the Hospital Chief Executive (HCE) of the CMC vide paper LC Paper No. CB(2)591/08-09(03). Members also noted the follow-up actions taken by the Hospital Authority (HA) immediately following the Incident, including the drawing up of a set of guiding principles for handling requests for emergency medical assistance in the vicinity of hospitals/clinics under HA.

3. Members also noted that HA was very concerned about the Incident and had set up a Special Review Committee (the Committee) to determine the appropriate human resources actions against the staff involved in the Incident.

**Follow-up Actions**

4. Following the Incident, the following measures have been implemented by HA across the board :

- (a) all HA hospitals and general out-patient clinics (GOPCs) have prepared and enacted the response plans for handling emergency medical assistance in the vicinity of HA hospitals/ clinics in early February 2009;

- (b) 172 automatic electronic defibrillators for resuscitation have been purchased and delivered to the HA hospitals and GOPCs in early February 2009;
- (c) 491 staff had been trained for basic cardiac life support and first aid treatment in the Ruttonjee & Tang Shiu Kin Hospitals' Accident and Emergency Training Centre as at mid February 2009. The training programme will continue; and
- (d) all acute hospitals with Accident and Emergency Departments (A&EDs) have reviewed the external signage leading to their A&EDs. Additional signage were put up as interim improvement measures. HA will continue to liaise with the relevant government departments for long term improvements to the signage.

### **The Special Review Committee**

5. The Committee was chaired by the Chief Executive of HA (CE/HA), and included the following members:

- (a) Dr Anthony Ho (Chairman, HA Human Resources Committee);
- (b) Professor Fok Tai-fai (Chairman, HA Medical Services Development Committee); and
- (c) Professor David Cheung (Chairman, CMC Hospital Governing Committee).

6. The Committee has assessed the appropriateness of the response to the Incident by the CMC hospital management and staff, and also the shortcomings in the subsequent public handling of the Incident. It has also further looked into apportioning responsibilities between those involved, and determined the required human resources actions.

7. A total of 20 staff members involved in the Incident have been interviewed by the Committee. The Committee noted that the Investigation Report of the Incident was accurate in its chronology of what had occurred. It also believes that both the HCE of CMC and the Chief of Service of A&E

Department (CoS/A&ED) are responsible for the emergency response within the hospital and its immediate vicinity.

8. Based on the findings, the Committee, through its Chairman, has instructed HCE/CMC and COS/A&ED to develop an improvement plan which will include :

- (a) clear steps to improve the responsiveness within and outside the A&ED of CMC;
- (b) detailed steps for responding to all emergencies outside the A&ED, including emergencies in the immediate vicinity of the hospital compound, and creating the capacity to respond; and
- (c) training for staff in public first-contact positions in the hospital (A&ED and reception counters) to include a “customer service” dimension as well as understanding of hospital procedures.

9. HCE/CMC and COS/A&ED are required to present the improvement plan to the CE/HA and the Cluster Chief Executive of the Kowloon West Cluster within two months and to fully implement the plan within 12 months with a formal direct review of progress by the CE/HA. During this period, HCE/CMC and COS/A&ED will be barred from promotion and salary increase pending successful implementation of the plan as set out in paragraph 8 above. This measure will stay in force beyond the 12-months period if improvements are not made according to the plan.

10. Furthermore, counselling and follow up training will also be taken for the clerk concerned and the nursing staff at the A&ED to ensure clarity of HA’s expectation in relation to their roles and responses.

### **Advice Sought**

11. Members are invited to note the content of this paper.

**Hospital Authority**  
**March 2009**