



民主黨立法會議員秘書處

Secretariat of Legislative Councillors  
The Democratic Party

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衛生事務委員會主席梁家騮議員：

產科服務關注組日前致函立法會議員，指出醫管局原訂於 2013 年在將軍澳醫院開設產科服務，但是以現時產科醫護人手嚴重不足的情況，不但將軍澳醫院難以提供高質素服務，其他醫院的產科服務亦可能因人手被攤薄而受到影響，關注組建議暫緩該項計劃。

本人特此致函 閣下，建議事務委員會就以上事項作出討論，並邀請關注組出席會議，反映意見。

如有垂詢，請聯絡研究主任陳懷嫻小姐（電話：25372315）。

祝工作順利！



劉慧卿

二零一一年四月十八日

From: Hong Kong Obstetric Service Concern Group  
To: Mr HO Chun Yan (Legislative Council Member)  
Date: 14 April 2011

Dear Mr Ho,

We are writing to propose the suspension of plans to open a maternity ward in Tseung Kwan O Hospital, scheduled for 2013.

The obstetric services are under great pressure because of substantial and rapid increase in number of births and manpower drainage of obstetricians and midwives from the public hospitals to the private hospitals. Currently, there is a deficit of 10-20% of obstetricians and midwives which cannot be made up for at least 2 to 3 years, and the public obstetric service is at the verge of collapse. The Hong Kong Obstetric Service Concern Group therefore have urged the Bureau to take immediate action to reduce the number of deliveries in HK to ensure that the standard of services could be maintained and the safety of the pregnant woman and their baby are protected.

For the same reason, the Group would like to seek your support in delaying the commissioning of inpatient obstetric service in TKO Hospital because of the extreme shortage of obstetrician and midwifery manpower within Hospital Authority. An extra manpower of 20-30% is required to manage two maternity wards in separate locations (TKO Hospital and United Christian Hospital) when compared to managing a single maternity ward, even though the workload remains the same in Kowloon East Cluster. Commissioning of services in TKO implies redeployment of HA staff from the existing eight obstetric units and inevitably exacerbate the stress and strain of existing staff. It is definitely a wrong decision to have 9 understaffed units than having 8 units that are more properly staffed.

In fact there is no urgent need to have another maternity unit in Kowloon East Cluster. The generally agreed minimal number of births to justify a comprehensive maternity service is 3000. However, the number of deliveries in United Christian Hospital was only 5200 in 2010, and 2000 of them were pregnant women from mainland China (NEP). As the number of NEP will be restricted, the figure is not great enough to justify two labour wards in the same cluster. The number of citizens in TKO and Sai Kung that had delivered heir babies in UCH was less than 2000. Setting up a maternity unit with such a low delivery rate is highly cost-ineffective and the low

volume of work in a small-size unit also implies that the staff will get less experience and proper training is not possible. It was exactly for this reason that maternity units in Caritas Medical Centre, Our Lady of Maryknoll Hospital and Tsan Yuk Hospital were closed 10 years ago. The maternity ward that was opened in Alice Ho Miu Ling Nethersole Hospital in 2001 but then closed after SARS is another sound proof of the failure of division of manpower and resources. With the current shortage of manpower, every effort should be made to improve efficiency. Opening this new labour ward in the present circumstances is neither sensible nor necessary.

Although the second phase construction of Tseung Kwan O Hospital has been started, and some resources have already been allocated to the new maternity service, it is still not too late to suspend the plan. Most of the resources that have been put into the new maternity ward will not be wasted as they could be utilized for other purposes or reserved for future use. On the other hand, if the Government presses ahead, the only outcome will be more wastage of manpower and resources.

We understand the wishes of TKO residents to have a maternity in their community but we are sure that they would prefer high quality service to accessibility or convenience for the time being. Although residents of TKO may be disappointed, we do believe that they would understand our intention is to protect them but not anything else. In fact the public health care services to TKO residents may actually be improved by putting the precious resources to a few key areas than to have a comprehensive services that are not properly staffed and funded.

We hope that you will help to bring our concern and proposal to the Legislative Council for consideration. Thank you for your attention.

Yours sincerely,

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