

**For Information
on 13 June 2011**

Legislative Council Panel on Health Services

**Issues Relating to the Provision of Obstetric Services in
the Tseung Kwan O Hospital**

Purpose

The purpose of this paper is to brief Members on issues relating to the provision of obstetric services in Tseung Kwan O Hospital (TKOH).

Services of TKOH

2. The public healthcare services of the Hospital Authority (HA) are provided on a cluster basis. Services for Kwun Tong, Tseung Kwan O and part of Sai Kung districts are provided through the Kowloon East (KE) cluster, which comprises TKOH, United Christian Hospital (UCH) and Haven of Hope Hospital. With the rapid increase of population in the Tseung Kwan O and Sai Kung districts in recent years, the demand for acute secondary and community medical services in the two districts has been increasing.

3. To cope with the increasing service demand, the Legislative Council Finance Committee has approved an allocation of \$1,944.9 million in July 2008 for a major renovation and expansion project in TKOH. The project includes the construction of a New Ambulatory Block to accommodate non-inpatient services and supporting facilities decanted from the existing Hospital Main Block, as well as the conversion/renovation of the spaces in the Hospital Main Block to accommodate additional inpatient services. The project is in progress with the target of completing the constructions works in early 2013. The expansion project will provide 178 additional inpatient beds, giving an eventual bed complement of 636 inpatient beds and 140 day beds/places at TKOH.

Provision of obstetric services in TKOH

4. According to the planning reference drawn up based on the advice of HA's expert committee on obstetrics and gynaecology (O&G) services, in general a public hospital in a cluster will only provide obstetric services when

the number of births is projected to reach 3 000 per year. This reference aims to ensure that the healthcare personnel can accumulate sufficient clinical experience to handle sudden changes of clinical condition of the pregnant patient. In addition, all public hospitals providing O&G services must be equipped with appropriate supportive facilities both in terms of hardware and software so as to provide the public with safe and cost-effective O&G services. Under the clustering arrangement, the KE cluster has been meeting the demand of obstetric service in the region through service provided at UCH.

5. The KE cluster has been monitoring closely the service demand in the region for planning of future services. Taking into account the special factor that there is no private hospital in the Tseung Kwun O district, HA projects that when obstetric services are provided at TKOH, the number of deliveries at TKOH per year will be close to the level of 3 000 by 2013 or 2014. On this basis, HA has planned to provide obstetric wards, Neonatal Intensive Care Unit (NICU) as well as Special Care Baby Unit under the expansion project of TKOH. Given the time required for the commissioning work of the building, such as the testing of the building systems, installation and testing of built-in equipment, defects rectification, it is estimated that these commissioning work can only be completed by late 2013-14.

6. Based on HA's experience, the caseload for a new obstetric and NICU unit will need time to build up to ensure smooth run in of the services and that the healthcare personnel can accumulate sufficient clinical experience to handle the risk of sudden changes of clinical condition of the pregnant patient. As such, HA plans to commission the obstetric and NICU services in TKOH in phases, from enhancement of antenatal & postnatal services, delivery of low risk pregnancies to full scale service.

Manpower situation of obstetric and NICU services

7. The provision of safe and quality obstetric and NICU services requires the support by a team of professional staff with the appropriate expertise and experience. The increase in demand for obstetric and NICU services in Hong Kong as a whole in recent years has caused notable increase in the turnover rates of doctors and nurses of HA obstetric and paediatric departments. The wastage of staff has put HA's obstetric and paediatric services under pressure as many of the staff departed are experienced professionals. The turnover rate of doctors and nurses of obstetric and paediatric staff of HA are set out in the **Annex**.

8. Over the past years, HA has been implementing a series of measures to enhance recruitment and retention of staff and to improve the working environment of staff. These measures include provision of additional supporting staff to relieve doctors and nurses from non-clinical duties, improvement of the promotion prospect of doctors and nurses, employment of part-time staff to augment the manpower, modernization of medical equipment to alleviate workload, etc.

9. HA has also implemented the following specific measures to address the manpower situation of obstetric department and NICU:

- (i) implementation of a central booking system for obstetric service to ensure priority service is provided to local pregnant women;
- (ii) increase of HA delivery capacity;
- (iii) addition of 14 NICU beds in 2008-09;
- (iv) granting of an additional increment for practicing midwives; and
- (v) increase in the capacity of midwives training from 40 to 80.

10. Meanwhile, the Administration has planned to increase the number of training places for doctors and nurses in recent years. It is anticipated that there will be an increase in the number of medical graduates and nurse graduates in the next few years. In 2011-12, HA will continue to recruit additional healthcare staff, including about 330 doctors and 1 720 nurses, to meet the service demand.

The Way Forward

11. In the long run, the Government will endeavour to maintain the sustainability of our obstetric and paediatric services while continuing to provide high quality and professional services. An adequate supply of experienced professional staff is vital for achieving this goal. For delivery of safe and quality obstetric and NICU services for Hong Kong residents, HA will monitor closely the manpower situation with regard to obstetric and paediatric services and will review in 2012-13 the appropriate timing for the commissioning of the obstetric and NICU services in TKOH. Before such services are provided in TKOH, the relevant demand in the KE region can continue to be catered for by UCH.

Advice Sought

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

**Food and Health Bureau
Hospital Authority
June 2011**

Obstetric and Paediatric Manpower Situation in the Hospital Authority

Medical Staff (Obstetric and Gynaecology)

Year	Turnover No.	Annualized Turnover %
2007/08	17	8.7%
2008/09	12	6.0%
2009/10	17	8.3%
2010/11	19	9.3%

Medical Staff (Paediatrics)

Year	Turnover No.	Annualized Turnover %
2007/08	17	5.8%
2008/09	20	6.6%
2009/10	11	3.5%
2010/11	20	6.5%

Nursing Staff (Obstetric and Gynaecology)

Year	Turnover No.	Annualized Turnover %
2007/08	58	6.00%
2008/09	48	5.00%
2009/10	41	4.20%
2010/11	67	7.00%

Nursing Staff (Paediatrics)

Year	Turnover No.	Annualized Turnover %
2007/08	64	5.70%
2008/09	73	6.50%
2009/10	66	6.00%
2010/11	95	8.80%