



沙田國際醫務中心仁安醫院
SHATIN INTERNATIONAL MEDICAL CENTRE
UNION HOSPITAL



Your Ref.: CB2/PL/HS

Our Ref.: LET/DMD042/12

11 December 2012

Dr. Hon. LEUNG Ka-lau
Panel Chairman
Panel on Health Services
Legislative Council
Legislative Council Complex
1 Legislative Council Road
Central, Hong Kong

Dear Dr. Hon. Leung,

RE: Issues Relating to the Development & Operation of Private Hospitals

Thank you for your letter dated 23 November 2012. On behalf of Union Hospital, we would like to submit following views regarding the captioned topic:-

1 Sustainable development of private hospitals

1.1 Widespread popularity of medical insurances has contributed to increasingly accessible of private medical care to the lay public. It is healthy to Hong Kong that private and public arms of healthcare develop in parallel. Therefore it is logical that the society and government emphasize on monitoring of private hospitals.

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1.2 Union Hospital, being a private medical service provider has obligations to meet requirements in licensing. It is however important to distinguish a profit-making hospital from Non-Governmental Organizations (NGOs), in relationship to different expectations from society and requirements with establishment.

2 Monitoring, management and operation of private hospitals

2.1 The principle of monitoring

2.1.1 Service providers, including doctors and nurses, should be allowed to provide care under principles of professionalism and confidentiality with patients, in accordance to accepted culture in Western Medicine.

2.1.2 Private hospitals are responsible for monitoring service activities performed within the organization. These include the following:

- Practice of medical practitioners and health professionals.
- Maintenance of the estate, hardware, equipment and all facilities.
- Welfare and safety of all staffs including doctors, nurses, other professionals, patients and visitors.
- Prospective governance and retrospective peer review systems, to ensure that on-going activities and facilities perform up to current standards.

2.2 A private hospital should develop her systems to establish and monitor performance, but charge individual practitioners with responsibility of direct patient personal care to individual practitioners.

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- 2.3 Likewise, monitoring bodies such as the Department of Health concentrates on examination of governance and monitoring systems inside a private hospital, but not mere case by case monitoring to adverse outcome and allegations. Such approaches are also adopted by international hospital accreditation systems.
- 2.4 Adverse outcome events are analyzed with major focus on educational values rather than punishment considerations.
- 2.5 A single standard of performance assessment is adopted across both public and private sectors.

3. Relationship between private and public hospitals, and the public

- 3.1 For the welfare of the public, public and private hospitals should be partners in practice.
 - 3.1.1 The two sectors should cooperate and respect each other to provide best services to the public.
 - 3.1.2 Communication on patient information between professionals from public and private sectors is currently limited by confidentiality considerations. Knowledge and intellectual exchange should be actively promoted between the two sectors.
 - 3.1.3 Where appropriate, referral of patients across sectors is facilitated. Transfer of patients across public and private hospitals need facilitation.

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I hope that our submission would provide a background for an interactive discussion with Legislative Council members, and I appreciate the opportunity to share our views on the issues relating to the development and operation of private hospitals at the Special Meeting on 18 December 2012.

Yours Sincerely,

Dr. LEUNG Kwok Ling Ares

Deputy Medical Director