



中華人民共和國香港特別行政區政府總部食物及衛生局
Food and Health Bureau, Government Secretariat
The Government of the Hong Kong Special Administrative Region
The People's Republic of China

Our Ref. : FHB/H/33/32 Pt. 24

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Mr Colin CHUI
Clerk to Panel
Legislative Council Panel on Welfare Services
Legislative Council Complex
1 Legislative Council Road
Central, Hong Kong

Dear Mr CHUI,

**Legislative Council Panel on Welfare Services and
Panel on Health Services**

**Looking into Mental Health Services and Relevant Welfare Issues
in light of the MTR Arson Attack**

At the joint-panel meeting of the Legislative Council Panel on Welfare Services and the Panel on Health Services held on 24 February 2017, Members requested the Hospital Authority (“HA”) to provide the following information –

- (a) HA’s performance pledges, key performance indicators and other indicators, if any, on medical services provided for patients with mental health needs;
- (b) a breakdown of the number of HA’s patients who had been diagnosed as suffering from severe mental illness by their existing mental conditions and by HA’s medical services (e.g. community support under the Case Management Programme) they currently received; and

- (c) the latest ratio of Hong Kong's population to clinical psychologists in HA.

With information provided by HA, I am authorised to provide the reply as follows -

- (a)&(b) HA delivers mental health services using an integrated and multi-disciplinary approach involving doctors, nurses, clinical psychologists, occupational therapists and medical social workers, etc. The multi-disciplinary teams of HA provide a spectrum of mental health services for patients with mental health problems and carers, including inpatient, outpatient, ambulatory and community support services, having regard to their severity of the condition and clinical needs. Healthcare professionals also work closely with relevant departments or organisations (such as the Social Welfare Department (“SWD”) and the non-governmental organisations subvented by SWD) to ensure its services meet the needs of patients and carers.

At present, patients in need of psychiatric inpatient services of HA will be arranged for admission immediately in accordance with the Mental Health Ordinance (Cap. 136).

In addition, HA has implemented the triage system at psychiatric specialist outpatient clinics to ensure patients with urgent conditions requiring early intervention are treated with priority. Under the current triage system, referrals of new patients are usually first screened by a nurse and then by a specialist doctor of the relevant specialty for classification into priority 1 (urgent), priority 2 (semi-urgent) and routine categories. HA's targets are to maintain the median waiting time for cases in priority 1 and 2 categories within two weeks and eight weeks respectively. HA insofar has been able to keep the median waiting time of priority 1 and priority 2 cases within this pledge.

In 2016-17, there were a total of 49 100 patients with severe mental illness (“SMI”) receiving psychiatric services in HA. Among them, 15 300 participated in the Case Management Programme which aims to provide intensive, continuous and personalised support for patients with SMI residing in the

community. As the clinical condition of patients may vary from time to time, HA does not maintain the breakdown of services they currently receive.

- (c) As at 31 March 2017, there were a total of 158¹ clinical psychologists in HA. The healthcare services of HA are provided by multi-disciplinary teams comprising doctors, nurses and allied health professionals (including clinical psychologists), etc. In planning services, HA has taken into account a number of factors, including the increase of service demand as a result of population growth and demographic changes, advancement of medical technology, manpower availability as well as organisation of services of the clusters and hospitals and the service demand of local community. Population is only one of the factors under consideration. Hence, HA does not have the requested staffing ratios which may not reflect the actual level of service provision.

Yours sincerely,



(Chris FUNG)

for Secretary for Food and Health

c.c.

Clerk to Legislative Council Panel on Health Services
(Attn: Ms Maisie LAM)

¹ The manpower figures are calculated on full-time equivalent basis including permanent, contract and temporary staff in all HA clusters, but exclude those in HA Head Office.