立法會 Legislative Council

LC Paper No. CB(3) 352/02-03

Paper for the House Committee meeting on 14 February 2003

Questions scheduled for the Legislative Council meeting on 19 February 2003

Questions by:

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(1)	Hon LAU Wong-fat	(Oral reply)
(2)	Hon Emily LAU	(Oral reply)
(3)	Ir Dr Hon HO Chung-tai	(Oral reply)
(4)	Hon HO Chun-yan	(Oral reply)
(5)	Hon SIN Chung-kai	(Oral reply)
(6)	Hon Michael MAK (The question was originally schedum)	(Oral reply) (Original No: 20) uled for a written reply)
(7)	Hon YEUNG Yiu-chung	(Written reply)
(8)	Dr Hon LAW Chi-kwong	(Written reply)
(9)	Hon NG Leung-sing	(Written reply)
(10)	Hon Henry WU	(Written reply)
(11)	Hon TAM Yiu-chung	(Written reply)
(12)	Dr Hon TANG Siu-tong	(Written reply)
(13)	Hon CHAN Kwok-keung	(Written reply)
(14)	Hon Eric LI	(Written reply)
(15)	Hon Frederick FUNG	(Written reply)
(16)	Hon LEUNG Fu-wah	(Written reply)
(17)	Hon CHOY So-yuk	(Written reply)
(18)	Hon SIN Chung-kai	(Written reply)
(19)	Hon LAU Kong-wah	(Written reply)
(20)	Hon Michael MAK (The question was originally schedum)	(Written reply) (Original No: 6) uled for an oral reply)

註 :

NOTE :

議員將採用這種語言提出質詢

Member will ask the question in this language

#(6) <u>麥國風議員</u> (口頭答覆)

公立醫院急症室服務收費於去年 11 月 29 日起實施。就此,政府可否告知本會:

- (一) 在該項服務實施收費之前及之後的一個 月,平均每日往急症室求診的人次;有否 評估急症室服務收費對求診人次的影響;
- (二) 至今向未能即時繳費的急症室病人或其家屬發出的付款通知書數目;付款通知書發出一個月後仍未收到付款的數目及百分比;政府會否補貼醫院管理局在這方面的損失;及
- (三) 至今有多少名急症室病人申請減免收費, 以及獲批准的申請數目及百分比?

(6) <u>Hon Michael MAK</u> (Oral Reply)

The charge for Accident and Emergency ("A&E") services at public hospitals was introduced on 29 November last year. In this connection, will the Government inform this Council:

- (a) of the respective average daily numbers of attendances in A&E departments in the months before and after the introduction of the A&E service charge; whether it has assessed the impact of the service charge on the number of attendances;
- (b) of the number of payment notices issued so far to A&E patients or their family members who were unable to settle the payment forthwith; the number and percentage of payment notices which remain unsettled one month after the date of their issue; whether the Government will make up for the loss of the Hospital Authority in this respect; and
- (c) of the number of A&E patients who have applied for fee remission so far, together with the number and percentage of the applications approved?

#(20) 麥國風議員 (書面答覆)

據報,一項調查發現,在 13 間爲市民進行切除食道手術的公立醫院中,有 10 間的病人在接受手術後的死亡率高於國際平均水平。關於病人在公、私營醫院接受切除手術後的死亡率,政府可否告知本會:

- (一) 會否調查病人在部分公立醫院接受切除手術後的死亡率較高的原因,例如這是否與有關醫生的技術水平有關;若不會調查,原因爲何;
- (二) 有否監察公立醫院醫生替病人進行切除手術的技術是否達到國際水準,以及如何保障病人獲得妥善的手術治療的權益;及
- (三) 有否比較病人在公、私營醫院接受切除手術後的死亡率;若有,結果爲何?

(20) Hon Michael MAK (Written Reply)

It has been reported that an investigation has revealed that, out of the 13 public hospitals in which oesophagectomy operations are performed, the post-operative mortality rates of patients of ten of these hospitals were higher than the average international benchmark. Regarding the mortality rates of patients after undergoing excision operations in public and private hospitals, will the Government inform this Council whether:

- it will investigate the reasons for the relatively higher mortality rates of patients after undergoing excision operations in some public hospitals, for instance, whether this is attributable to the skills of the surgeons; if no investigation will be conducted, of the reasons for that;
- (b) it has monitored the skills of surgeons in public hospitals who performed excision operations to see if they meet international standards, and how it protects the patients' rights to proper surgical treatments; and
- (c) it has compared the mortality rates of patients after undergoing such operations in public hospitals to those of private hospital patients; if it has, of the results?