For Information on 13 December 2011

Subcommittee to Study Issues Relating to Mainland-HKSAR Families

Obstetric Services for non-local women

PURPOSE

This paper briefs Members on the latest situation of obstetric services provided by the public hospitals for non-local women.

GOVERNMENT'S POLICY ON OBSTETRIC SERVICES

- 2. It is the Government's policy to ensure that Hong Kong residents are given proper and priority obstetric services. The demand for obstetric services in Hong Kong by non-local women (including Mainland women), all being Non-eligible persons (NEPs)¹, has increased rapidly in recent years and has caused tremendous pressure on the capacity of obstetric service in public hospitals and affected such services to Hong Kong resident. To tackle the issue, the Hospital Authority (HA) has implemented since 1 February 2007 revised arrangements for obstetric services for non-local women ². The purpose is to ensure that Hong Kong resident women are given priority for proper obstetric services, to limit the number of non-local women coming to Hong Kong to give births to a level that can be supported by our healthcare system, and to deter dangerous behaviour of non-local pregnant women in seeking emergency hospital admissions through Accident & Emergency Departments (A&EDs) shortly before labour.
- 3. Under the revised arrangements, HA would reserve sufficient places in public hospitals for delivery by local pregnant women and would only

¹ Our public healthcare services are available to our local residents (as Eligible Persons) at highly subsidized rates. Non-local people (as Non-eligible Persons) should pay the specified charges applicable to them for access to our public healthcare services.

² Under the revised arrangements, all NEPs who wish to seek obstetric services in public hospitals have to make prior booking and pay for a package charge of \$39,000. For cases of delivery by emergency admission through the Accident and Emergency Departments and/or without having attended any antenatal attendance at a HA specialist outpatient clinic during the concerned pregnancy, the charge would be \$48,000. A booking system is also in place in the private hospitals which would issue booking certificates to non-local women using their delivery services.

- 2 -

accept booking from NEP when spare service capacity is available. Once the service capacity is reached, HA would stop making bookings for non-local pregnant women. In anticipation of rising service demand from local women in 2011, HA since 8 April 2011 has suspended the booking of obstetric services from non-local women till the end of 2011. This is to ensure that adequate service can be provided to local women.

LATEST SITUATION OF DEMAND OF OBSTETRIC SERVICES

- 4. The demand for local obstetric services from both local and non-local women (mainly from the Mainland) has continued to increase since 2007. The total number of live births born in Hong Kong has increased from 70 900 in 2007 to 88 500 in 2010. Specifically, the number of live births born to Mainland women has increased from 27 600 to over 40 000 during the same period. In the period from January to October 2011, the total number of deliveries in public and private hospitals were about 38 000 and 40 000 respectively. Further to the information provided to the Subcommittee in April and June 2011, the latest deliveries figures at public and private hospitals, with breakdown of deliveries by local and non-local women, are set out at **Annex A** for reference.
- 5. The number of deliveries by non-local women at public hospitals via the Accident and Emergency departments (A&EDs) has been increasing since April 2011 and reached 205 in November 2011. Among these cases, some have made prior bookings in public hospitals but were unable to be admitted to the booked hospitals in time for delivery. Separately, about 25% of these cases in January to November 2011 involved non-local women with Hong Kong spouses. The statistics of emergency deliveries via A&EDs are at **Annex B**.

NEW MEASURES TO CONTROL THE USE OF OBSTETRIC SERVICE BY NON-LOCAL WOMEN

6. The Administration is very concerned about the surge of demand for obstetric services in Hong Kong by non-local women and the pressure on our overall obstetric and neonatal care services. The Food and Health Bureau has discussed and agreed with HA, the Department of Health (DH), the 10 private hospitals providing obstetric services and the professional groups of the

obstetricians and paediatricians to implement a series of measures to control the use of obstetric services by non-local women and alleviate the pressure on the overall obstetric and neonatal services in Hong Kong.

- 7. The major measures are summarized as follows
 - (a) the number of non-local pregnant women giving birth in Hong Kong in 2012 will be limited to 35 000. The delivery places at public and private hospitals for non-local women are estimated to be 3 400 and 31 000 respectively. HA will stop accepting bookings once this service capacity is full or when more capacity has to be reserved to cope with increase in demand of local women;
 - (b) non-local pregnant women who intend to have deliveries in Hong Kong will be required to undergo antenatal checkups by obstetricians in Hong Kong at an appropriate stage. The Hong Kong College of Obstetricians and Gynaecologists has drawn up updated guidelines in September 2011 to assist obstetricians in examining non-local pregnant women, so that high-risks pregnancy cases may be denied giving birth in Hong Kong to avoid subjecting these women to additional risks associated with travelling;
 - (c) the delivery booking certificates of public and private hospitals have been standardized since end September 2011 to facilitate checking of non-local women at the border control points and tracking of the record of antenatal check-ups; and
 - (d) the quota of delivery by non-local women in 2013 will be determined after discussion among the Government, HA and the private hospitals in the first quarter of 2012.

WAY FORWARD

8. The Government will continue to endeavour to maintain the sustainability of our obstetric and paediatric services and ensure that Hong Kong residents are given priority services. We will closely monitor the implementation of the measures mentioned in paragraph 7 above, with a view to

limiting the number of deliveries by non-local women in Hong Kong with regard to the overall capacity of our obstetric and neonatal care services.

ADVICE SOUGHT

9. Members are invited to note the content of the paper.

Food and Health Bureau December 2011

Annex A

Number of deliveries and bookings at public hospitals in 2011

		Number of deliveries (as at end October 2011)	Number of bookings (Expected date of confinement from November to December 2011)
Eligible Persons		28 256	8 598 Note 1
Non-eligible persons	Booked cases	8 485 (2 507) Note 2	376 Note 3
	Non-booked cases	1 249 (315)	-
Total		37 990 (2 822)	8 974

Number of deliveries and bookings at private hospitals in 2011

	Approximate number of deliveries (as at end October 2011)	Approximate number of bookings (Expected date of confinement from November to December 2011)			
Local pregnant women	12 000	2 600			
Non-local pregnant women Note 4	28 000	5 400			
Total	40 000	8 000			

Notes

- (1) There is no data on the number of local women who had made bookings for obstetric services in both public and private hospitals.
- (2) The number in bracket refers to the number of deliveries by Non-eligible persons (NEPs) whose spouses are Hong Kong residents. NEPs are not obliged to disclose the resident status of their spouses when using HA's service and hence the figures are provided based on the information available to HA.
- (3) NEPs are not obliged to disclose the resident status of their spouses when they make booking for the service.
- (4) There is no breakdown on the number of non-local women using private obstetric services whose spouses are Hong Kong residents.

Annex B

Number of deliveries by NEPs via public hospital AEDs

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Total
2010	55	50	50	51	42	52	54	74	84	93	103	708
2011	86	70	71	86	103	122	155	156	175	224	205	1453*

Note

^{* 30%} of the total delivery cases have prior booking in public hospitals but were unable to admit to the booked hospitals in time.