

Our ref: FH/H/3/80 Pt.2
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2 March 2009

Ms Mary So
Clerk to Panel
Panel on Health Services
Legislative Council
8 Jackson Road
Central

Dear Ms So,

**Handling of requests from the public
for urgent medical assistance by public hospitals
and the Caritas Medical Centre incident**

I refer to item 4 of LC Paper No. CB(2)774/08-09(02). At the Panel meeting held on 12 January 2009, the Administration was requested to provide information on the existing and the new guidelines for handling requests from persons for emergency medical assistance within or in the vicinity of the hospitals and clinics under the Hospital Authority (HA).

There are all along guidelines for HA hospitals/clinics on the handling of emergencies and ad-hoc situations within hospital compounds i.e. covering all clinical and non-clinical areas. All hospitals have also developed their own response plans on the handling of requests for emergency assistance within the hospital compound. Some of these response plans also covered the vicinity (outside) of hospital/clinic compound.

Following the Caritas Medical Centre incident, HA has immediately reviewed the existing emergency response mechanism as well as fortified the over-arching corporate-wide, patient-centred value for all hospital staff. A set of guiding principles for handling persons requiring emergency medical assistance in the vicinity of hospitals/clinics has been drawn up and promulgated in early January 2009 (at Annex). By now, all hospitals/clinics have covered the vicinity of hospital/clinic compound in their response plans and a notification mechanism (with designated

subject officers and contact numbers) in case of emergency is also included in the response plans.

Yours sincerely,

(Kirk YIP)
for Secretary for Food and Health

cc Hospital Authority (Attn.: Dr PY Leung)

**General Principles for Handling Persons
Requiring Emergency Medical Assistance
in the Vicinity of HA Hospitals and Clinics (“HA Institutions”)**

Principles

Saving people’s life is HA’s first priority.

All staff on duty at HA Institutions will render all reasonable assistance that they can offer to anyone who requires emergency medical assistance at any time.

Core Requirements

All HA Institutions should have a response plan to deal with potential medical emergency in their vicinities. Flexibility should be exercised on interpreting “vicinity”, having regard to the circumstances.

Each HA Institution’s response plan should be locally customized and should at least include the following essential components:

- (a) Staff when being called for help, he/ she or colleagues should :
 - (i) immediately assess the situation and call the Designated Response Person/Team* (with assigned telephone number), giving information on the location of the emergency and general conditions of the person(s); and
 - (ii) offer assistance, e.g. by calling 999;
- (b) The Designated Response Person / Team will arrive at the scene to assist and/or contact the designated clinical unit /staff for dispatch of clinical team to the scene with first-aid equipment;
- (c) Appropriate patient transfer to the Accident & Emergency Department or clinical unit assigned by the HA Institution should be arranged without delay.

The HA Institutions should conduct training to staff, as well as periodical review on the response plan to ensure compliance.

Please contact the Hospital Chief Executive or designated colleague for any enquiry about this General Principles.

**Designated Response Person / Team is the staff or clinical unit designated by a HA Institution to handle persons requiring emergency medical assistance with its vicinity.*