

**For discussion  
on 28 April 2014**

**Legislative Council Panel on Health Services**

**Provision of  
Cataract Surgeries in the Hospital Authority**

**PURPOSE**

This paper sets out the latest position regarding the provision of cataract surgeries in the Hospital Authority (HA) and the progress of the HA's Cataract Surgeries Programme.

**BACKGROUND**

2. There has been a steady increase in the number of patients requiring cataract surgeries in hospitals under the management of the HA over the years. With an ageing population, it is anticipated that the demand for cataract surgery will continue to grow. It is projected that there will be about 25 000 to 30 000 new cataract cases per year in the next few years. To better address the service demand and reduce the waiting time for patients, the HA has been implementing a series of measures to increase cataract surgeries throughput.

**MEASURES IN WAITING TIME MANAGEMENT**

3. In recent years, the HA has been implementing a series of measures in managing the waiting time for cataract surgeries. Details of the measures are provided in the following paragraphs.

***(a) Increasing HA Service Throughput***

4. The HA Cluster Eye Teams have increased cataract surgeries throughput by increasing the number of surgeries in day time and had provided additional operation sessions after office hours and over weekends. As a result, the annual throughput was increased from about 16 000 surgeries in 2007-08 to more than 27 000 surgeries in 2012-13.

***(b) Setting Up of Cataract Centres***

5. In 2009 and 2011, the HA established Cataract Centres at Grantham Hospital of Hong Kong West Cluster and Tseung Kwan O Hospital of Kowloon East Cluster respectively with an aim to boost up service capacity, reduce waiting time and improve efficiency through high volume cataract surgery. These high volume Cataract Centres are designed with state-of-the-art operation theatre facilities for operations in an ambulatory settings. Operations thereat are performed with efficient workflow, standardised pathways and protocols for the same single diagnosis. Designated staff undertakes operations with efficiency and skill in terms of speed and quality of services is enhanced through practice. These high volume Cataract Centres not only reduce turnover time in between operations but also enhance individual surgeon's competence and efficiency. The notional waiting time for cataract surgeries for the Hong Kong West Cluster and Kowloon East Cluster has substantially been shortened as well as other clusters through cross-cluster referral mechanism.

6. With the experience gained from the two high volume Cataract Centres, other HA Cluster Eye Teams have also revised their workflow and improved the operation efficiency.

***(c) Triage and Prioritization***

7. The HA has implemented the patient prioritization system for elective operation of cataract surgeries to ensure that urgent conditions requiring early intervention are treated with priority. Under the current triage system, referrals of new cataract patients are screened by an ophthalmologist for classification into priority 1 (urgent cases such as mature cataract, eye with poor vision), priority 2 (early cases such as for occupational needs) and routine categories. The HA's targets are to carry out elective cataract surgery within two months for priority 1 patients, and within 12 months for priority 2 patients.

***(d) Cataract Surgeries Programme***

8. In February 2008, the HA introduced a pilot Cataract Surgeries Programme (CSP) under a Public-Private Partnership (PPP) delivery model. Under the CSP, patients who have been on the HA clusters' routine cataract surgery waiting list for a specified period are invited to join the Programme, on a voluntary basis, to undertake

surgeries in the private sector with a fixed government subsidy of \$5,000 subject to co-payment of no more than \$8,000 for each cataract surgery. For patients (including the elderly) with limited economic means such as recipients of the Comprehensive Social Security Assistance and those granted medical fee waiver, they can choose to receive surgeries without co-payment in the public hospitals through additional operating services. The Programme can provide more choices for patients while expediting the conduct of surgeries for patients.

9. As at end-February 2014, a total of 109 private ophthalmologists (about 85% of the total registered private ophthalmologists in Hong Kong) have joined the CSP to conduct surgeries for patients who choose to use the service in the private sector. So far, the HA has invited a total of 72 764 eligible patients on the waiting list for cataract surgeries to join the CSP, of whom 19 343 patients joined the Programme and 14 600 of them have already undertaken surgeries. Positive feedback was received from participating patients in regular surveys conducted by the HA. Over 97% of the patients surveyed were satisfied and agreed that their surgeries dates were advanced by participating in the CSP.

*(e) Enhancing Transparency*

10. Since April 2013, the HA has uploaded waiting time for cataract surgeries on its website to enhance transparency and maintain public accountability and confidence in the HA's services. Such information will facilitate patients' understanding of the waiting time situation in the HA and where appropriate, patients can discuss with their doctors to see whether it is suitable for them to transfer to another hospital where the waiting time for cataract surgery is shorter. Details of the throughput for cataract surgeries in the past seven years are at **Annex A**. The notional waiting time by hospital clusters since 2007-08 is at **Annex B**.

## **WAY FORWARD**

11. The annual clinical throughput of cataract surgery in the HA has substantially increased in the past few years. The CSP has provided additional cataract surgeries throughput, shortened waiting time, and improved cost-effectiveness. As at end-December 2013, the notional waiting time for cataract surgery in the HA has been shortened to about 14 months.

12. The HA will continue to maintain a similar level of cataract surgeries throughput in its hospitals, including the CSP under a PPP delivery model. It is estimated that the throughput of cataract surgeries of the HA hospitals will generally be able to meet the demand arising from the new cataract cases in the next few years. The HA will continue to manage the waiting time for cataract surgeries, and make appropriate service provision to meet the demand arising from the ageing population.

### **ADVICE SOUGHT**

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

**Food and Health Bureau  
Hospital Authority  
April 2014**

**Annex A**

**Number of Cataract Surgeries Performed**

	<b>2007-08</b>	<b>2008-09</b>	<b>2009-10</b>	<b>2010-11</b>	<b>2011-12</b>	<b>2012-13</b>	<b>2013-14</b> <i>(Up to December 2013)</i>
All HA Hospital Clusters	16 000	16 784	19 603	25 372	28 648	27 345	21 829
Cataract Surgeries Programme (CSP) #	-	5 304	1 840	3 228	2 703	900	700
<b>Total</b>	<b>16 000</b>	<b>22 088</b>	<b>21 443</b>	<b>28 600</b>	<b>31 351</b>	<b>28 245</b>	<b>22 529</b>

# The CSP started in February 2008 and thus no figure is available for 2007-08.

**Annex B**

**Notional Waiting Time (months) of Cataract Surgeries in the HA (as at 31 March)**

<b>HA Clusters</b>	<b>2007-08</b>	<b>2008-09</b>	<b>2009-10</b>	<b>2010-11</b>	<b>2011-12</b>	<b>2012-13</b>	<b>2013-14</b> <i>(as at December 2013)</i>
Hong Kong East	30	46	32	32	18	13	10
Hong Kong West	37	50	5	3	1	7	2
Kowloon Central	56	55	26	25	19	18	19
Kowloon East	127	127	40	37	16	13	18
Kowloon West	10	14	19	22	22	20	19
New Territories East	26	29	33	23	19	15	12
New Territories West	27	30	16	19	20	21	22
<b>HA Overall Notional Waiting Time</b>	<b>37</b>	<b>44</b>	<b>25</b>	<b>22</b>	<b>16</b>	<b>15</b>	<b>14</b>