



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(P)/34/9/1 Pt.1

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15 May 2018

Ms Doris LO
Clerk to Public Works Subcommittee
Legislative Council Complex
1 Legislative Council Road
Central
Hong Kong

Dear Ms LO,

Public Works Subcommittee

Motion passed at the meeting on 25 April 2018

Regarding the motion moved by the Hon CHAN Chi-chuen and passed at the above meeting, our response is set out at **Annex**.

Yours sincerely,

A handwritten signature in black ink, appearing to be 'Kevin Ng'.

(Kevin Ng)

for Secretary for Food and Health

c.c. Secretary for Financial Services and the Treasury
(Attn: Miss June Ho, Assistant Secretary for Financial Services and the Treasury (Treasury)(Works)2) (Fax: 2147 5240)

Chief Executive, Hospital Authority
(Attn.: Ms Dorothy Lam, Manager (Boards & Support)) (Fax: 2895 0937)

Patients under the care of the Hospital Authority's (HA) general outpatient clinics (GOPCs) comprise two major categories, namely the chronically ill with stable medical conditions, such as patients with diabetes mellitus or hypertension, and patients with episodic diseases whose symptoms are relatively mild, such as those suffering from influenza, cold, fever, gastroenteritis, etc. Patients with chronic diseases requiring follow up will be assigned a timeslot for next visit after each consultation. They do not need to make separate appointments. As for patients with episodic diseases, consultation timeslots at GOPCs in the next 24 hours are available for booking through the telephone appointment system. As GOPCs are not intended for provision of emergency services, patients with severe and acute symptoms should go to the accident and emergency (A&E) departments of hospitals where the necessary staffing, equipment and ancillary facilities are in place to provide comprehensive and appropriate treatment and care for them.

Generally speaking, the smooth operation of GOPC relies on the performance of a wide range of duties by its whole team, basically comprising doctors, nurses, pharmacists, dispensers, patient services assistants, clerical staff, and supporting staff. Other multi-disciplinary professionals may also be included while the number of staff may be adjusted according to the service requirements. Considering the need to use general out-patient (GOP) resources efficiently, extending GOP services or providing overnight GOP services, which requires additional manpower, equipment and ancillary facilities, is not the best use of resources and will create greater pressure on healthcare staffing. In general, when seeking for medical treatment, patients mostly consider the appointment time, clinic location, transportation accessibility, and personal safety, etc. Patients in general do not incline to seek medical treatment for non-urgent symptom(s) during late hours.

We value highly the suggestion about extending the evening service hours of out-patient services of the Our Lady of Maryknoll Hospital (OLMH) Family Medicine Clinic (FMC) put forward by residents and community representatives of Wong Tai Sin (WTS) district and will continue to keep in view the demand and explore the feasibility of the suggestion. We have undertaken that if the A&E services of New Acute Hospital (NAH) at Kai Tak Development Area (KTDA) are yet to commence when the redevelopment of OLMH is completed, the HA will, having regard to the service needs, implement a pilot scheme to extend the evening out-patient service hours of the OLMH FMC to 12:00 midnight until the A&E services of NAH at KTDA are available. Upon commencement of the A&E services of NAH at KTDA, we will closely monitor the needs of the residents in WTS district for public healthcare services, and continue to review and study the A&E services, and general and evening out-patient services provided in the district.

During the redevelopment of OLMH, the services of OLMH FMC would not be affected and so does the overall GOP service provision for WTS district.

Upon completion, the capacity of OLMH FMC would be strengthened and it is anticipated that around 20,000 additional consultation quotes can be provided subject to the manpower and resources circumstances. The HA will continue to closely monitor the operation and service utilisation of its clinics in WTS district, and flexibly deploy manpower and other resources to ensure that primary care services could be appropriately provided for WTS residents.