

Legislative Council Panel on Health Services

Obstetric Services in Public Hospitals

Purpose

This paper briefs members on the obstetric services provided in public hospitals.

Prenatal Services

2. The Government attaches great importance to providing appropriate and comprehensive prenatal services for pregnant women. The Maternal and Child Health Centres (“MCHCs”) of the Department of Health (“DH”) and the obstetrics departments of the Hospital Authority (“HA”) provide a comprehensive prenatal shared-care programme for pregnant women during the entire pregnancy and delivery process. The first prenatal check-up includes checking of personal and family medical history, physical examination and blood test. If necessary, public hospitals will arrange specific tests including foetal morphology scan (ultrasound scan), blood sugar and oral glucose tolerance tests, amniocentesis, chorionic villus sampling and umbilical cord blood sampling.

3. Since July 2011, public hospitals have been providing a series of free prenatal services for all local pregnant women with a residential hospital booking, including screening for Down syndrome carried out before 20 weeks of pregnancy. According to the statistics collated by HA, over 35 000 pregnant women received such service per year on average. A basic blood test will be provided for all pregnant women at public hospitals during their first prenatal check-up, and ultrasound examination will be arranged by doctors if there is a clinical need. In respect of Down syndrome, around 6 percent (i.e. about 2 000 cases) of the screened pregnancies show positive results each year, and amniocentesis or chorionic villus sampling will be provided to identify Down syndrome in the fetuses. As for other hereditary diseases, public hospitals

will offer screening for alpha-thalassaemia and beta-thalassaemia by conducting blood tests on pregnant women. If both parents-to-be have thalassaemia, the expectant mother will receive amniocentesis or chorionic villus sampling in public hospital to detect whether the foetus may suffer from such disease.

Introduction of Chromosomal Microarray Test and Non-invasive Prenatal Test

4. HA will further enhance its prenatal testing services by introducing Chromosomal Microarray test and Non-invasive Prenatal Test (“NIPT”) in public hospitals. HA plans to include Chromosomal Microarray test as a standard service in HA in 2019-20 of which will enhance the accuracy of prenatal tests for detecting chromosomal abnormalities including Down syndrome.

5. The Hong Kong Children’s Hospital (“HKCH”), which has commenced its service by phases since 18 December 2018, will serve as the tertiary referral centre for complex, serious and uncommon paediatric cases which require multidisciplinary management. In particular, it will support genetic testing such as NIPT for chromosomal abnormality.

6. NIPT is a testing technique in the form of a blood test to analyse foetal DNA present in a pregnant woman’s plasma. HA is exploring the facilities required for the introduction of NIPT in HKCH as a second-tier prenatal screening test for Down syndrome. HA strives to launch the NIPT service in HKCH within 2019.

Clinical Governance of Obstetric Surgeries of HA

7. Coordinating Committee in Obstetrics & Gynaecology (“COC(O&G)”) of HA plays an important role to link between clinical governance and corporate governance. The COC(O&G) advises HA on professional matters in O&G services, specifically in setting service standards, developing clinical practice guidelines, education and training, conducting clinical audits, managing clinical risk management and introduction of new technology and service development. The COC(O&G) members meet regularly to review and discuss the service needs.

Managing Post-partum Haemorrhage and Other Medical Emergencies

8. HA has reviewed obstetric surgery services in public hospitals. Recommendations have been made to enhance the medical teams' preparedness in managing post-partum haemorrhage and other medical emergencies. Ongoing and regular drills on emergency response to post-partum haemorrhage have been conducted by obstetrics units in HA since 2017. For the continued improvement of obstetric care, the Prince of Wales Hospital has launched a pilot programme in 2018-19 to provide maternal special care beds in the labour ward and offer training to nursing staff in high-risk pregnancy care. The programme will be rolled out to Queen Mary Hospital, Queen Elizabeth Hospital and Tuen Mun Hospital ("TMH") in 2019-20. Web-based cardiotocographs training for midwives and obstetricians and relevant central commissioned training programme have also been conducted in 2018- 19.

Patient Education and Empowerment

9. Obstetric units have a long-standing history of offering antenatal classes to prepare mothers-to-be to walk through various anxiety stages of pregnancy. The HA obstetric mobile application "HApi Journey" (Hospital Authority Pregnancy Information Journey) was launched on 22 February 2017 to provide updated information and useful tools for mothers-to-be in a timely manner. The mobile application provides useful and up-to-date health information, with the aim to empower mothers-to-be and reduce their anxiety by improving their understanding on the health-related matters during pregnancy. Moreover, expectant mothers could record their health status (e.g. blood pressure and glucose level) and labour condition (by contraction timer) in the mobile application to facilitate doctors' review and decision. As at end February 2019, the mobile application recorded over 62 400 downloads in total.

Provision of Treatment for Termination of Pregnancy

10. For providing medical procedures for termination of pregnancy ("MPTP") for a pregnant woman at the O&G departments under HA, the pregnant woman and her foetus of less than 24 weeks of gestation must be assessed by two registered medical practitioners and both are of the opinion that continuous pregnancy will involve risk to the life of or constitute serious physical/mental health hazards to the pregnant woman, or the child would suffer

from serious physical or mental abnormality if he/she was born. The registered medical practitioner will have to perform the MPTP in accordance with the relevant laws of Hong Kong and the case must be reported to the DH. HA will also provide bereavement counselling service to support parents suffering miscarriage.

Provision of Antenatal Check-ups in the New Territories West Cluster

11. O&G services in the New Territories West Cluster are provided by TMH. The O&G department of TMH was established in March 1990. The department consists of an obstetrics team and a gynaecology team. The serving area includes Tuen Mun, Tin Shui Wai, Yuen Long, and Northwest regions of the New Territories. The department unit is also an assigned specialist training centre for obstetricians and gynaecologists by The Royal College of Obstetricians and Gynaecologists and The Hong Kong College of Obstetricians and Gynaecologists. The birth rate in the department is about 5 000 to 6 000 deliveries per year. The modes of deliveries are mainly normal vaginal deliveries, and followed by cesarean section delivery and instrumental delivery. The O&G unit also provides epidural analgesia service.

12. Similar to other O&G departments of HA, expectant mothers shall go to the nearby MCHC or Specialist Outpatient Clinics (Obstetrics) for booking of antenatal check-ups once confirmed pregnant. The Antenatal Clinic of TMH and the four MCHCs in Tuen Mun, Yuen Long and Tin Shui Wai jointly provide prenatal services to pregnant women in the district. TMH mainly caters for high-risk pregnant mothers of those with complication during pregnancy.

Provision of Obstetric Services in the Kowloon East Cluster

13. Public healthcare services of HA are provided on a cluster basis. Services for Kwun Tong, Tseung Kwan O and Sai Kung districts are provided through the Kowloon East Cluster (“KEC”), which comprises Tseung Kwan O Hospital (“TKOH”), United Christian Hospital (“UCH”) and Haven of Hope Hospital. With the rapid increase of population in the Tseung Kwan O and Sai Kung districts in recent years, the demand for acute secondary and community medical services in the two districts has been increasing.

14. According to the planning reference drawn up based on the advice of HA's COC(O&G), in general a public hospital in a cluster will only provide obstetric services when the number of births is projected to reach 3 000 per year. This reference aims to ensure that the healthcare personnel can accumulate sufficient clinical experience to handle sudden changes of clinical condition of the pregnant patient. In addition, all public hospitals providing O&G services must be equipped with appropriate supportive facilities both in terms of hardware and software so as to provide the public with safe and cost-effective O&G services. Under the clustering arrangement, the KEC has been meeting the demand of obstetric services in the region through services provided at UCH.

Planning for the Opening of Obstetric and Neonatal Intensive Care Unit Services in TKOH

15. TKOH currently provides antenatal check-up and postnatal care specialist outpatient services, the inpatient obstetric services and neonatal intensive care service of the KEC are converged in UCH.

16. The role and function of the three hospitals in the KEC were guided by the Clinical Services Plan for the KEC released in 2014. With respect to the inpatient obstetric services in the KEC, HA has taken into account various factors such as patient volume in the districts, patient safety, manpower support, resources, training needs and so forth, and considers it appropriate to maintain a single maternal unit in the KEC, i.e. UCH, at the present stage. With the development plan of the new acute hospital at Kai Tak Development Area and the expansion project of UCH, HA will review the overall obstetric and neonatal service needs in the KEC.

17. The expansion project plan in 2008 of TKOH has reserved space for establishment of obstetric wards and neonatal intensive care unit. At present, such wards and areas would be well utilised during high demand of inpatient services or decanting purpose for other wards renovation. Timeline on the commissioning plan of obstetric services in TKOH is subject to the review of obstetric services of the KEC upon the completion of expansion project of UCH or new Kai Tak Hospital by early 2020s.

Advice Sought

18. Members are invited to note the contents of the paper.

**Food and Health Bureau
Hospital Authority
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