

中華人民共和國香港特別行政區政府總部食物及衞生局

Food and Health Bureau, Government Secretariat
The Government of the Hong Kong Special Administrative Region
The People's Republic of China

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23 April 2020

Clerk to Panel on Health Services Legislative Council Complex 1 Legislative Council Road Central, Hong Kong (Attn.: Ms. Maisie LAM)

Dear Ms LAM,

Legislative Council Panel on Health Services Letter from Hon Kwok Ka-ki

Thank you for your letter of 16 April 2020 addressed to the Secretary for Food and Health. Our response to the questions raised by Hon Kwok Ka-ki is at **Annex**.

Yours, sincerely,

(Lilian TSE)

for Secretary for Food and Health

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Secretary for Food and Health's Office

Food and Health Bureau

(Attn.: Mrs Winnie KANG)

(Attn.: Mr Kelvin CHENG) (Attn.: Miss Clarissa WAN)

(Attn.: Ms Sarah NG)

Response on the Hospital Authority Launching New Public-Private Partnership Initiatives as Part of Prevention and Control Measures

- 1. In response to the development of the coronavirus disease 2019 epidemic, the Hospital Authority (HA) has activated measures under the Emergency Response Level, including closely monitoring the manpower and service situation of public hospitals and making timely adjustments.
- 2. With regard to the development of the epidemic, HA has significantly adjusted non-emergency and non-essential medical services since 17 February so as to focus manpower and resources such as personal protective equipment, etc. to provide care for the most critical patients and respond to the epidemic. Except for emergency and essential treatment, non-emergency services such as elective surgeries have been postponed. Specialist outpatient clinics have also arranged to reschedule appointments for patients with stable conditions and arranged drug refills for them according to their needs. Furthermore, except for emergency and essential examinations, non-emergency examinations have also been rescheduled.
- 3. On the other hand, HA will change its service model where practicable and continue to serve patients with the use of video conferencing technologies. For example, psychiatric services have tried using telemedicine consultations to provide psychiatric consultation services. Allied health staff have been using video conferences to follow up on treatments, or providing videos of rehabilitation exercises to patients through HA's mobile application "HA Go", so as to allow patients to continue their training at home according to the designated times.
- 4. The arrangement of providing relevant services through Public-Private Partnership (PPP) has been part of HA's overall strategic service framework to meet the demand of suitable patients. Faced with the current outbreak situation, HA has strived to enhance the overall service capacity and expand the service scope of some of the existing PPP Programmes¹, including the following:
 - (i) starting from mid-February this year, the Project on Enhancing Radiological Investigation Services through Collaboration with the

¹ The HA currently runs eight PPP Programmes, namely the Cataract Surgeries Programme, Haemodialysis PPP Programme, Patient Empowerment Programme, Project on Enhancing Radiological Investigation Services through Collaboration with the Private Sector, General Outpatient Clinic PPP Programme, Infirmary Service PPP Programme, Colon Assessment PPP Programme and Glaucoma PPP Programme.

Private Sector has expanded its service group to cover all eligible cancer patients². Over 5 900 computed tomography scans and magnetic resonance imaging scans were performed between March and mid-April. In terms of the number of scans performed, there is an 144% increase in March (4 116 scans) compared with February (1 686 scans);

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- (ii) the service quota of the Haemodialysis PPP Programme has been increased since end January this year. As at 15 April, an additional 36 patients had been referred to community haemodialysis centres for treatment;
- (iii) on 16 March, HA also extended the Colon Assessment PPP Programme to cover colonoscopy cases recently delayed due to the epidemic. As at 15 April, 64 patients had received colonoscopy at private healthcare facilities under this arrangement.
- 5. At the same time, HA is also actively liaising with private hospitals to launch new PPP programmes, with a view to diverting some patients from public hospitals to private hospitals to receive treatment, such as neonatal jaundice treatment, caesarean delivery, radiotherapy for cancer patients and orthopaedic surgery. Patients can receive early treatment while paying the fees charged by public hospitals. As at 15 April, HA had referred 66 infants, 15 pregnant women and 5 cancer patients to private hospitals for treatment. As for orthopaedic surgery, HA has reached an agreement with private hospitals and is actively discussing the arrangements for patient referral.
- 6. When exploring new PPP programmes or launching new collaborative initiatives, HA will carefully consider the relevant factors, including the potential complexity of the project, and the capacity and level of readiness in the private market, etc. HA will continue to communicate with the public and patient groups and work closely with stakeholders, so as to explore the feasibility of implementing other PPP programmes or collaborative initiatives in the future.

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The scope of service was expanded from 11 types of cancers (namely colorectal cancer, breast cancer, nasopharyngeal cancer, lymphoma, prostate cancer, stomach cancer, cervix cancer, corpus uteri cancer, head and neck cancer, sarcoma or germ cell tumour) to all cancer types.