

LCQ7: Services of the psychiatric wards in public hospitals

Following is a question by the Dr the Hon Cheng Chung-tai and a written reply by the Secretary for Food and Health, Professor Sophia Chan, in the Legislative Council today (June 2):

Question:

Some members of the public have relayed to me that the healthcare personnel of public hospitals have not explained to the patients of the psychiatric wards in the hospitals and their family members the provisions regarding the reception, detention and discharge of patients under the Mental Health Ordinance (Cap. 136), and have only placed the relevant information in inconspicuous areas inside the wards. As a result, the lawful rights and interests of those patients cannot be safeguarded. Regarding the services of the psychiatric wards in public hospitals (psychiatric wards), will the Government inform this Council if it knows:

(1) the respective general procedures involved in (i) the admission of voluntary patients to the psychiatric wards, and (ii) the detention of patients by public hospitals in such wards for observation or treatment under Cap. 136;

(2) the number of admissions to the psychiatric wards in the past five years and, among them, the respective numbers of those to which the following circumstances applied: (i) the patients completed and submitted by themselves the form called "Application for reception as a voluntary patient" (VP Form), (ii) the patients' guardians completed and submitted the VP Form on their behalf and (iii) the hospitals detained the patients for observation or treatment under the authority of Cap. 136, together with a tabulated breakdown by name of hospital;

(3) whether the Hospital Authority (HA) has put in place measures to ensure that when patients are admitted to the psychiatric wards, the healthcare personnel under HA will clearly explain to them the provisions regarding the reception, detention and discharge of patients of the psychiatric wards under Cap. 136, and to ensure that they understand the contents; if HA has, of the details (including the relevant procedures);

(4) the maximum and minimum numbers of days for which patients were detained in the psychiatric wards for observation in the past five years; among these patients, the respective numbers of those who were subsequently (i) discharged directly, (ii) categorised as voluntary patients after they had completed and submitted by themselves the VP Form, (iii) categorised as voluntary patients after their guardians had completed and submitted the VP Form on their behalf, and (iv) proved to be certified patients under Cap. 136 and hospitalised for one year or more for treatment, together with a

tabulated breakdown by name of hospital;

(5) among the applications for discharge made in the past five years by psychiatric ward patients themselves or their family members on their behalf, the respective numbers of those approved and rejected, together with a tabulated breakdown by name of hospital;

(6) the number of complaints received by HA in the past five years about members of the public being misled into consenting to be admitted to the psychiatric wards, as well as how HA followed up such complaints, and set out such information in a table by name of hospital;

(7) the details of the current mechanism adopted by HA for handling complaints lodged by patients of the psychiatric wards about the following: (i) the approach of the treatments provided to them, or the assessments of their mental conditions made, by their attending doctors, and (ii) non-compliance with the procedures for the detention of patients under Cap. 136 by healthcare personnel; and

(8) whether HA issued guidelines in the past five years on the admission of patients to the psychiatric wards for the hospitals under HA; if HA did, of the date on which such guidelines were last revised, and whether HA has put in place measures to monitor the compliance with these guidelines by the hospitals under HA; if HA did not issue such guidelines, the reasons for that, and whether HA will consider issuing relevant guidelines to enhance the management of the administrative work of admitting patients to the psychiatric wards?

Reply:

President,

Having consulted the Hospital Authority (HA), I provide the consolidated reply to the question raised by Dr the Hon Cheng Chung-tai as follows:

Generally speaking, patients in need of psychiatric in-patient services of the HA will be sent to designated mental hospitals under the HA. The designated mental hospitals under the Declaration of Mental Hospital (Consolidation) Order (Cap. 136B) include Castle Peak Hospital, Kwai Chung Psychiatric Observation Unit, Pamela Youde Nethersole Eastern Psychiatric Observation Unit, New Territories East Psychiatric Observation Unit and Kowloon Psychiatric Observation Unit.

For a patient who has been assessed by doctors of the HA to be in need of psychiatric in-patient services and has indicated his/her consent for hospitalisation, the HA will ask him/her (or his/her parent if the patient is under the age of 16) or his/her guardian to sign the "Application for reception as a voluntary patient" (VP form) in accordance with section 30 of the Mental Health Ordinance. Upon receipt of the VP form, the medical superintendent of the mental hospital concerned will admit the patient as a voluntary patient.

Separately, according to section 31 of the Mental Health Ordinance, the HA may make an application to a District Judge or magistrate for detention of a patient who is suffering from mental disorder of a nature or degree which warrants his/her detention in a mental hospital for at least a limited period for observation in the interests of the patient's own health or safety or with a view to protecting other persons. A patient detained in a mental hospital by virtue of section 31 of the Mental Health Ordinance may make an application to the Mental Health Review Tribunal to seek a review of his/her case under section 59B of the Mental Health Ordinance.

The number of admissions to psychiatric wards of the HA through the above-mentioned routes in the past five years is set out in Table 1.

Table 1: Number of admissions to psychiatric wards of HA through various routes

Year	2016-17	2017-18	2018-19	2019-20	2020-21 (Provisional figures)
Number of admissions for which the VP forms were completed and lodged by the patients themselves	9 850	9 650	10 010	9 100	8 970
Number of admissions for which the VP forms were completed and lodged by the patients' guardians	180	200	210	250	350
Number of admissions for observation in accordance with section 31 of the Mental Health Ordinance	3 180	3 320	3 320	3 330	3 600

Note:

1. Figures are rounded to the nearest 10.
2. Due to the emergence of the COVID-19 epidemic in Hong Kong since early 2020, the HA has stepped up infection control measures and adjusted its services according to the epidemic situation. Hence, its service throughput across a wide range of services might have been reduced when compared with that of previous years.

The length of stay of patients admitted to psychiatric wards varies from a single day to more than a year depending on their conditions. Doctors will assess the patients' conditions from time to time and arrange services such as community rehabilitation for patients who are suitable for discharge. In the past five years, the number of patients discharged each year remained at around 16 000 to 18 000.

For patients who need to be admitted to psychiatric wards, the healthcare personnel will explain to them and their family members the contents of the VP form and the operation of the psychiatric wards concerned, such as rules that patients must comply with and the procedures and arrangements for discharge. The healthcare personnel of the psychiatric wards will also explain the details to the patients upon their admission and provide them with information such as hospitalisation notes and Patients' Charter, so as to ensure that the patients and their family members understand the relevant in-patient arrangements.

If patients admitted to psychiatric wards have any views on the services of the HA, including dissatisfaction towards the treatments or mental assessments by the attending doctors, they may lodge complaints with the HA.

The HA has put in place a two-tier complaint mechanism for handling public complaints against its hospitals. At the first tier, all complaints will first be handled by the respective public hospitals. Upon receipt of a complaint case, the Patient Relations Officer will pass it to the department concerned for follow-up and investigation. The patient will be informed of the results after investigation. If the complainant is not satisfied with the investigation results and the reply of the hospital, he/she may file an appeal to the HA's Public Complaints Committee (PCC) (i.e. the second tier of the complaint mechanism). PCC is a committee under the HA, comprising members from different sectors of the community and responsible for handling and considering all appeals for the HA in an independent, fair and impartial manner.

The number of complaints received by the HA clusters in the past five years about members of the public being misled into giving consent for admission to psychiatric wards is set out in Table 2.

Table 2: Number of complaints about being misled into giving consent for admission to psychiatric wards

Cluster/Year	2016-17	2017-18	2018-19	2019-20	2020-21
Hong Kong East Cluster	0	0	0	0	0
Hong Kong West Cluster	0	0	0	0	0
Kowloon East Cluster	1	0	1	0	2
Kowloon West Cluster	1	0	0	2	3
Kowloon Central Cluster	0	0	0	0	0
New Territories East Cluster	0	0	0	0	1
New Territories West Cluster	0	0	0	0	0
Total	2	0	1	2	6

Number of appeals lodged to the HA's PCC	0	1	0	1	1
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The HA issues from time to time guidelines on the operation and administration of wards (including psychiatric wards) to improve the management of hospital wards. The HA will keep in view the operational arrangements of psychiatric in-patient services, and make appropriate improvement as and when necessary.