LCQ7: Specialist out-patient services of Hospital Authority

Following is a question by the Hon Chan Kin-por and a written reply by the Secretary for Food and Health, Professor Sophia Chan, in the Legislative Council today (July 21):

Ouestion:

Regarding the specialist out-patient (SOP) services of the Hospital Authority (HA), will the Government inform this Council:

- (1) whether it knows the respective numbers of new cases of various SOP services in each of the past three financial years;
- (2) given that new referral cases will be first screened by nurses and then reviewed by doctors of the relevant specialties for the purpose of classifying them into urgent, semi-urgent and stable cases, whether the Government knows the respective median waiting time of each classification of new cases of various SOP services, in each of the past three financial years;
- (3) whether it knows the HA's new measures to shorten the waiting time of new cases of the SOP services; and
- (4) whether it knows if the HA has assessed the extent to which SOP services has been affected by the epidemic, and the HA's new measures to mitigate the impacts?

Reply:

President,

In consultation with the Hospital Authority (HA), my reply to the various parts of the question raised by the Hon Chan Kin-por is as follows:

(1) and (2) The tables below set out the number of specialist out-patient (SOP) new cases triaged as Priority 1 (urgent), Priority 2 (semi-urgent) and Routine (stable) cases, as well as their respective median (50th percentile) waiting time in the HA in 2018-19, 2019-20 and 2020-21.

2018-19

	Priority 1		Priority 2		Routine	
Specially	number of new	Waiting	INIIMMER	waiting time	Number of new	Median waiting time (week)
Ear, Nose and Throat	15 274	<1	18 699	5	64 846	55

Medicine	12 993	1	26 553	5	102 033	69
Gynaecology	9 611	<1	8 555	5	43 232	34
Ophthalmology	46 498	<1	22 120	4	74 312	68
Orthopaedics and Traumatology	17 614	<1	16 378	5	77 992	71
Paediatrics	5 267	<1	5 279	4	15 136	14
Psychiatry	2 694	1	8 859	4	34 684	30
Surgery	15 196	1	31 404	6	129 031	38

2019-20

	Priority 1		Priority 2		Routine	
Specialty	Number of new cases	Median waiting time (week)	Number of new cases	Median waiting time (week)	Number of new cases	Median waiting time (week)
Ear, Nose and Throat	15 608	<1	18 234	5	58 013	60
Medicine	11 887	1	25 774	5	97 638	74
Gynaecology	8 821	<1	7 800	5	40 612	35
Ophthalmology	43 048	<1	20 543	4	66 343	62
Orthopaedics and Traumatology	16 336	<1	14 694	5	74 803	58
Paediatrics	4 968	<1	4 929	4	14 741	16
Psychiatry	2 761	1	8 523	3	31 978	27
Surgery	13 484	1	29 619	6	122 331	40

2020-21

	Priority 1		Priority 2		Routine	
Specialty	Number of new cases	Median waiting time (week)	Number of new cases	Median waiting time (week)	Number of new cases	Median waiting time (week)
Ear, Nose and Throat	14 076	<1	17 533	5	62 086	60
Medicine	11 406	<1	25 282	6	107 213	68
Gynaecology	8 293	<1	7 378	5	40 297	35
Ophthalmology	42 028	<1	23 755	3	59 246	55
Orthopaedics and Traumatology	15 131	<1	13 670	4	72 894	57
Paediatrics	3 812	<1	4 092	4	11 938	11

Psychiatry	3 377	1	10 637	3	33 411	27
Surgery	15 089	1	31 959	6	125 815	41

Note: 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.

- (3) In managing the waiting time for SOP services, the HA has implemented a series of measures including triage and service prioritisation, enhancing public primary care services, strengthening manpower, optimising the scheduling of appointments, as well as displaying information of the latest waiting time on the HA's website and at the SOP Clinics (SOPCs) to help patients to consider their treatment plans and options. Moreover, additional public-private partnership programmes have been implemented and the Integrated Model of SOP Services was introduced. The HA will review the effectiveness of these measures in a timely manner and implement supplementary measures as appropriate and necessary to further shorten the SOPC waiting time. In 2021-22, the HA will continue to implement the Annual Plan to enhance the service capacity of the SOPCs in various hospital clusters, covering the majority of major specialties.
- (4) During different stages of the epidemic, the HA made timely adjustments to non-emergency and non-essential medical services, including certain SOP services, so as to focus manpower on providing care for the most critical patients and responding to the epidemic situation. Since mid-February 2021, certain non-emergency services have progressively been resumed in public hospitals under safe and practicable circumstances. In mid-March, the HA's out-patient services largely returned to the level of the same period in 2019 (i.e. before the epidemic).

The HA adopts different modes of service where practicable, including piloting the use of telehealth consultations, to provide the SOP services for suitable patients. In addition, during service resumption, consideration was given to increasing the manpower and service sessions of the SOPCs through the Special Honorarium Scheme having regard to the operation of the SOPCs in order to render optimal services to patients.

In light of the development of the epidemic situation as well as the actual environment and operational needs of hospitals, the HA will continue to closely monitor the utilisation of anti-epidemic equipment and facilities, and flexibly adjust hospital services and deploy manpower with a view to minimising the impact on patients.