<u>Secretary for Health chairs joint</u> <u>meeting of Chinese Medicine</u> <u>Development Committee and its three</u> <u>Subcommittees (with photo)</u>

The Secretary for Health, Professor Lo Chung-mau, chaired the joint meeting of the Chinese Medicine Development Committee (CMDC) as well as its Chinese Medicine Practice Subcommittee, Chinese Medicines Industry Subcommittee and Chinese Medicine Development Blueprint Subcommittee today (December 17) to take forward various policy initiatives relating to Chinese medicine (CM) under "The Chief Executive's 2024 Policy Address". He also had in-depth discussions with members on the progress of formulating the Chinese Medicine Development Blueprint and the latest progress of the preparation for the commissioning of the Chinese Medicine Hospital of Hong Kong (CMHHK).

Professor Lo said, "CM not only constitutes an integral part of the healthcare system of Hong Kong but also serves as a traditional strength of the city. The Chief Executive put forward a number of policy initiatives on CM development in his 2024 Policy Address. The Government will continue to capitalise on the characteristics and strengths of CM in Hong Kong and promote the high-quality and high-standard development of CM in Hong Kong on all fronts, with a view to contributing to the overall national CM development."

During the meeting, representatives of relevant government departments and organisations briefed members on the latest progress and major achievements of the following CM policy initiatives:

• The Government continues to press ahead with the stakeholder engagement and consultation work for formulating the Blueprint;

• Leveraging the strength of Hong Kong's dual-track healthcare system that incorporates both Chinese and Western medicine to contribute to the country's promotion of the internationalisation of CM and discover more evidence of clinical significance on herb-drug interaction;

• The Hospital Authority (HA) will further expand integrated Chinese-Western medicine (ICWM) services, including launching pilot programmes for the treatment of respiratory diseases and knee osteoarthritis, to help tackle common elderly degenerative diseases in an ageing population;

• Launching preparation work with relevant organisations for commissioning the CMHHK, which is expected to commence services in phases starting from the end of next year. The CMHHK will promote CM development in terms of medical services, education and training, research, multilateral collaboration and creating health values. It will provide outpatient and inpatient services in pure CM, CM-predominant and ICWM. It will also provide six specialised CM services, namely Internal Medicine in CM, External Medicine in CM, Gynaecology in CM, Paediatrics in CM, Orthopaedics and Traumatology in CM, and Acupuncture and Moxibustion in CM, as well as services for 23 special disease programmes;

• The Government Chinese Medicines Testing Institute established the worldclass Digital Herbarium for Chinese Medicines in March this year;

• The Department of Health is committed to promoting CM international cooperation and supported the World Health Organization in holding a meeting in Hong Kong in November this year to discuss the roadmap for developing the International Herbal Pharmacopoeia (IHP), the draft outline, the framework and more of the IHP in order to provide a globally recognised reference to ensure the quality and safety of herbal medicines;

• Continuing to take forward a number of new and enhancement measures for the Chinese Medicine Development Fund, including inviting organisations to submit applications for Strategic Theme Commissioned Project Funding Programme and broadening its funding scopes;

• Promoting various types of high-quality CM talent nurturing projects, including co-organising the Hong Kong Chinese Medicine Talent Training Programme with the National Administration of Traditional Chinese Medicine;

• Organising the first Hong Kong Chinese Medicine Culture Festival from this December to February next year to enhance citizens' interest in and understanding of the traditional wisdom and concepts of CM; and

• Leverage the strengths of CM in disease prevention and treatment as well as the resources in the private market by calling on the CM sector to extend the consultation hours and the CM traders to ensure stable and sufficient CM drug supply during the demand surge in seasonal influenza seasons.

Professor Lo said, "I led delegations to attend the 6th Guangdong-Hong Kong-Macao Greater Bay Area Conference on Inheritance, Innovation and Development of Traditional Chinese Medicine in Dongguan and the 2024 World Conference on Traditional Medicine in Beijing in November and December this year respectively. At these two conferences, we conducted in-depth exchanges with national, provincial and municipal officials on CM services, education and industry development, with a view to fostering multilateral collaboration. We also introduced Hong Kong's achievements in promoting CM development and the strategic direction of promoting the internationalisation of CM to attendees from all over the world. I would like to express my gratitude to members for their invaluable advice on policy initiatives relating to CM development. I look forward to working with members and stakeholders of the CM sector to jointly formulate the Blueprint, setting out concrete strategies for the overall development of CM in Hong Kong, as well as the short, medium and long-term objectives and action plans, to develop Hong Kong into a bridgehead for the internationalisation of CM."

The Permanent Secretary for Health, Mr Thomas Chan; the Under Secretary for Health, Dr Libby Lee; Deputy Secretary for Health Mr Eddie Lee; the

Project Director of the Chinese Medicine Hospital Project Office of the Health Bureau, Dr Cheung Wai-lun; the Controller of Regulatory Affairs of the DH, Dr Amy Chiu; the Director (Strategy and Planning) of the HA, Dr Ching Wai-kuen; the Hospital Chief Executive of the CMHHK, Professor Bian Zhaoxiang, and representatives of the relevant government departments and organisations also attended the meeting today.

Established in 2013 and chaired by the Secretary for Health, the CMDC drives the direction and long-term strategies of the future development of CM in Hong Kong by providing recommendations to the Government on four key areas, namely the development of CM services, personnel training and professional development, scientific research and development, and development of the CM drug industry (including CM drug testing).



Pamela Youde Nethersole Eastern Hospital announces root cause analysis report of previous event involving insertion of nasogastric tube

The following is issued on behalf of the Hospital Authority:

The spokesperson for Pamela Youde Nethersole Eastern Hospital (PYNEH) today (December 17) announced the root cause analysis report of a previous event involving the insertion of a nasogastric tube.

A 76-year-old male patient was clinically admitted to PYNEH on October 9 in preparation for a colonoscopy. Owing to his clinical needs, a nasogastric (NG) tube was inserted on the day of admission for drug administration. The NG tube was subsequently found to have been misplaced and the medication had entered the patient's lungs. After the NG tube was removed and appropriate treatment was provided, the patient's condition gradually improved and he was discharged from the hospital on October 23.

A Root Cause Analysis Panel (the Panel) was subsequently set up to identify the causes. The Panel completed the investigation and has submitted the report to the Hospital Authority Head Office (HAHO). The Panel was of the view that the intern who reviewed the X-ray images did not have adequate clinical experience in interpreting the findings correctly and did not seek assistance from supervisors, thus failing to make a timely judgment that the NG tube was improperly positioned.

The Panel made the following recommendations:

- enhance simulation training or scenario-based training on topics associated with a high-risk procedure for interns to enhance their knowledge and clinical risk awareness;
- enhance the competency assessment for interns regarding the confirmation of NG tube positions on X-rays; and
- 3. enhance the mentorship programme for interns to provide clinical and decision support, and encourage a speak-up culture among junior staff.

The HAHO has made arrangements for all interns to complete the training and competency assessment on the confirmation of NG tube positions on X-rays by the end of October this year. The HA will continue to arrange different on-the-job training programmes to enhance the clinical standards of interns.

PYNEH accepted the investigation findings and recommendations. The hospital will implement the relevant recommendations and continue to enhance the training and supervision for interns in collaboration with the HAHO. The hospital again apologised to the patient and his family for the incident.

The hospital also expressed gratitude for the work of the Panel. The Panel members are as follows:

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Chairperson:
Dr Michael Wong
Director (Quality and Safety), Hospital Authority
Members:
Dr Ng Man-fai
Consultant, Department of Medicine and Geriatrics, Tuen Mun Hospital
Ms Louisa Leung
Senior Manager (Nursing), Hospital Authority
Dr Nicole Chau
Senior Manager (Patient Safety and Risk Management), Hospital Authority
Dr Sara Ho
Service Director (Quality and Safety), Hong Kong East Cluster
Mr Mok Long-chau
Cluster General Manager (Nursing), Hong Kong East Cluster
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Inspection of aquatic products imported from Japan

In response to the Japanese Government's plan to discharge nuclearcontaminated water at the Fukushima Nuclear Power Station, the Director of Food and Environmental Hygiene issued a Food Safety Order which prohibits all aquatic products, sea salt and seaweeds originating from the 10 metropolis/prefectures, namely Tokyo, Fukushima, Ibaraki, Miyagi, Chiba, Gunma, Tochigi, Niigata, Nagano and Saitama, from being imported into and supplied in Hong Kong.

For other Japanese aquatic products, sea salt and seaweeds that are not prohibited from being imported into Hong Kong, the Centre for Food Safety (CFS) of the Food and Environmental Hygiene Department will conduct comprehensive radiological tests to verify that the radiation levels of these products do not exceed the guideline levels before they are allowed to be supplied in the market.

As the discharge of nuclear-contaminated water is unprecedented and will continue for 30 years or more, the Government will closely monitor and step up the testing arrangements. Should anomalies be detected, the Government does not preclude further tightening the scope of the import ban.

From noon on December 16 to noon today (December 17), the CFS conducted tests on the radiological levels of 201 food samples imported from Japan, which were of the "aquatic and related products, seaweeds and sea salt" category. No sample was found to have exceeded the safety limit. Details can be found on the CFS's thematic website titled "Control Measures on Foods Imported from Japan"

(www.cfs.gov.hk/english/programme/programme_rafs/programme_rafs_fc_01_30_Nucl ear_Event_and_Food_Safety.html).

In parallel, the Agriculture, Fisheries and Conservation Department (AFCD) has also tested 50 samples of local catch for radiological levels. All the samples passed the tests. Details can be found on the AFCD's website (www.afcd.gov.hk/english/fisheries/Radiological_testing/Radiological_Test.htm 1).

The Hong Kong Observatory (HKO) has also enhanced the environmental monitoring of the local waters. No anomaly has been detected so far. For details, please refer to the HKO's website (www.hko.gov.hk/en/radiation/monitoring/seawater.html).

From August 24, 2023, to noon today, the CFS and the AFCD have conducted tests on the radiological levels of 105 798 samples of food imported from Japan (including 68 518 samples of aquatic and related products, seaweeds and sea salt) and 23 966 samples of local catch respectively. All the samples passed the tests.

CSSA caseload for November 2024

The overall Comprehensive Social Security Assistance (CSSA) caseload in November showed a drop of 489 cases, representing a decrease of 0.2 per cent compared with that of October, according to the latest CSSA caseload statistics released by the Social Welfare Department today (December 17).

The total CSSA caseload at the end of November stood at 195 988 (see attached table), with a total of 264 371 recipients.

Analysed by case nature, low-earnings cases registered a month-to-month decrease of 1.8 per cent to 1 394 cases. Both single parent cases and unemployment cases decreased by 0.6 per cent to 19 265 cases and 16 251 cases respectively. Permanent disability cases dropped by 0.5 per cent to 16 792 cases. Old age cases declined by 0.1 per cent to 110 551 cases.

Ill-health cases remained steady at 27 851 cases.

<u>TCU's third quarterly report of 2024</u> <u>released</u>

The following is issued on behalf of the Transport Advisory Committee:

The Transport Complaints Unit (TCU) of the Transport Advisory Committee received 14 519 complaints and suggestions in the third quarter of 2024, with 230 being pure suggestions.

The complaints and suggestions received during the quarter were mostly related to public transport services (91 per cent), enforcement matters (4 per cent) and traffic conditions (4 per cent).

The number of cases on public transport services increased from 11 349 in the previous quarter to 13 160 this quarter, while that on illegal parking and other enforcement matters decreased from 767 to 643. The number of complaints and suggestions on traffic conditions increased from 509 to 629 and that on road maintenance decreased from 82 to 40.

All the complaints and suggestions received by the TCU in the quarter were referred to the relevant government departments and public transport operators for follow-up action.

During the period under review, investigations into 8 863 cases were completed. Of these, 8 347 cases (94 per cent) were found to be substantiated, two cases (less than 1 per cent) were unsubstantiated, and the remaining 514 cases (6 per cent) could not be pursued due to a lack of evidence.

For the substantiated cases, the relevant government departments and public transport operators have either taken steps to rectify the situation or are considering possible solutions to the problems identified. Among these cases, 14 drivers were summonsed by the Police.

During the quarter, the relevant government departments and public transport operators took on board 12 suggestions made by the public to enhance public transport services and improve traffic conditions. A summary of the cases is in the Appendix.

Members of the public may make their suggestions or complaints to the TCU by dialling the hotline 2889 9999 (voice mail service is available outside office hours), by fax to 2577 1858, by email to <u>info@tcu.gov.hk</u> or by filling in a form on the TCU website (<u>www.tcu.gov.hk</u>).