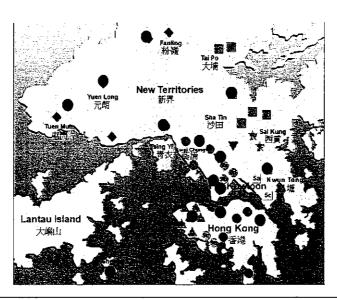
<u>專責委員會(2)文件編號:A100</u>

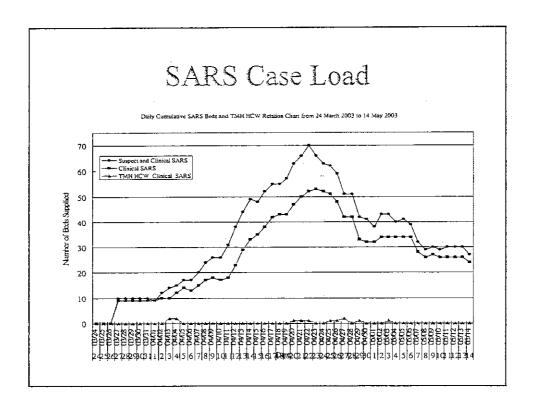
SC2 Paper No.: A100

New Territories West Cluster



NTWC The Three Main Phases

- 1. Sporadic SARS & Support NTEC on Non-SARS
- 2. Support KWC to Receive YCH cases and DH cases
- 3. Receive Own NTWC Cases

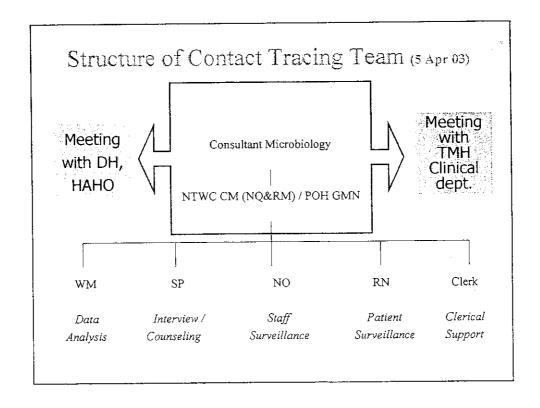


C8 Incident

- 26-27April:
 - 3 staff in C8 reported sick admitted.
- Urgent actions:
 - investigate the possible causes
 - prevent further spread of the infection
- Conclusion of outbreak in early June
 - a total of 5 staff, 10 patients and 1 patient relative were confirmed as having clinical SARS.

Background

- Acute medical ward for female medical / geriatrics cases.
- · No visiting policy
- Personal protection equipment standard was of isolation ward level
- Fever cohort cubicles for isolation of high risk cases
- Established structure and guidelines for contact tracing

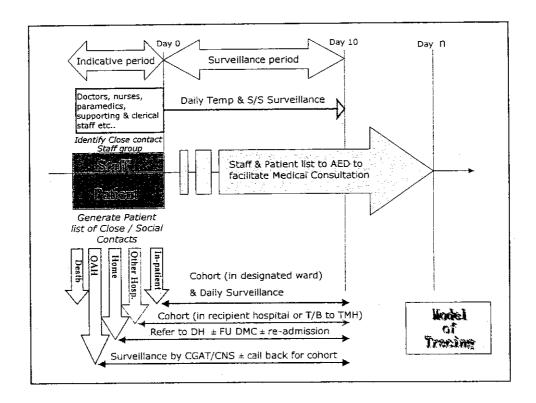


C8 Incident

- Two unsuspected index patients
- Classified as high risk cases & put under observation in fever cohort cubicles in C8
- Both did not present with features of SARS on admission

C8 Incident

- Control of Infection Spread
 - Notified DH on April 27
 - Freeze patient movement & admission
 - Identify index cases
 - Working meeting with DH on April 28
 - Risk stratification basing on contact level
 - Cohorting and surveillance of contacts
 - Active contact tracing partnering with DH with daily communication
 - Isolation & spacing out of cohorted cases



Extra Measures

- Disinfection & Closure Of C8
- Special leave for self isolation
- Changing the nursing team
- Further Spacing Out Patients
 - Transfer to WTS
 - Strategically spacing and grouping patients according to risk
- Use of Single Rooms To Enhance Isolation

C8 Incident

- Total Tracing
 - 132 patients, 87 staff and 51 persons who had been to C8.
- Outcome
 - 5 staff
 - 10 patients
 - 1 patient relative
 - No spread of infection to community

End