## **SARS Expert Committee**

## Health, Welfare and Food Bureau's Comments on Submission from Hong Kong Doctors Union

This paper encloses a letter dated 14 August 2003 from the Health, Welfare and Food Bureau providing its comments on the submission from the Hong Kong Doctors Union dated 28 June 2003 (Submission No. 034E to SARS EC 38/03), for Members' reference.

SARS Expert Committee Secretariat August 2003



## 中華人民共和國香港特別行政區政府總部衛生福利及食物局 Health, Welfare and Food Bureau Government Secretariat, Government of the Hong Kong Special Administrative Region The People's Republic of China

Our Ref : HWF/H/19/69 Pt.2 02

Tel: 29738101

14<sup>th</sup> August 2003

Mr. Patrick Nip, JP Secretary SARS Expert Committee

Dear Patrick,

## Submission by the Hong Kong Doctors Union

The submission by the Hong Kong Doctors Union dated 28 June 2003 to the SARS Expert Committee made a number of comments relating to the Health, Welfare & Food Bureau, the Department of Health and the Hospital Authority. I would like to respond to a few specific comments therein concerning the HWFB:

On Page 2, last paragraph

The Government had always taken the views of the public including the health care professionals seriously in combating SARS. Indeed SHWF had convened a meeting on 25 March 2003 with the health care professionals with a view to seeking a united front with them in the control of SARS and to achieve better communication and understanding with them. On proposed measures such as closing schools and carrying out quarantine controls, participants at the meeting had been assured that the Government would monitor the emerging picture of the disease before firming up the measures. For information I enclose a summary note of the meeting.

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## On Page 4, first two paragraphs

Both the SHWF and the Director of Health had not tried to suppress panic in the hope that SARS would not affect the economy of Hong Kong. On 13 and 14 March, the SHWF had clearly reported and assessed the situation to the public on the basis of the information available then. He specifically stressed that he was not saying that infection would not occur in the community, but only that thus far investigation showed that the infection mainly affected health care workers and some of the close relatives and infected patients. He undertook to report new information to the public on a daily basis and stressed that Government was highly concerned outbreak and he personally would with the coordinate information exchange and preventive efforts. He had not underplayed the seriousness of the situation.

## <u>On Page 4, paragraph 6</u>

The SHWF did not advocate "go slow". In fact at the meeting with health care professionals on 25 March, SHWF asserted that the Government would continue to monitor the emerging picture of the disease in firming up its measures and that Government was totally committed to ensure that the control of SARS was adequately resourced.

## On Page 5, second paragraph

The Government had placed great emphasis on transparency of information for the public. Statistical information relating to SARS patients in public hospitals had been announced to the public on a daily basis from the very early stage of the SARS crisis.

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## <u>On Page 5, paragraph 6</u>

The criticism that the Government was unwilling to communicate with the private sector in the course of the SARS outbreak was invalid. The fact that the SHWF had convened a meeting on 25 and 27 March 2003 with the healthcare professionals clearly demonstrated Government's wish to achieve better communication with the private sector and better understanding between the public and private sectors in forming a united front in the fight against SARS. The Hospital Authority, during the whole process, had also been examining ways and means to cooperate with the private health care sector in the provision of services.

## <u>On Page 5, last paragraph</u>

The provision of adequate protective gears in the public health care sector was a task which the Government had all along placed great emphasis on. While the Government had stressed to the private health care professionals the importance of adopting general infection control guidelines based on clinical evidence, the private sector was expected to acquire their own personal protective gears. The private health care sector had not formally informed the Government during the SARS crisis that they were unable to acquire adequate protective gears.

## On Page 5, second last paragraph

On the use of drugs, the SHWF had made known to the public at the very beginning that as SARS was a new disease, there were no clinically and empirically proven drugs, which were universally accepted for the treatment of the disease. The comment on the effectiveness of Ribarivin, steroids, etc. was only made on the basis of experience in treating SARS thus far. The basis of the comment was made known to the public.

Yours sincerely,

(Thomas Yiu)

for Secretary for Health, Welfare & Food

## Meeting Summary

A meeting on Severe Respiratory Syndrome (SRS)

Date: 25 March 2003 Time: 2:30pm – 4:45pm Venue: Room 2005, Murray Building, HWFB. Number of Participants: 48 health care professionals

#### Introduction

Dr Yeoh thanked the health care professionals for their participation in the meeting. The purpose was to seek a united front from health care professional in the control of the Severe Respiratory Syndrome (SRS). Dr Yeoh provided an update on the government's activities including etiological investigation by DH, HKU and CUHK, tracking the development of SRS, identifying effective treatment, and close communication with Ministry of Health in Mainland China and WHO.

#### Disease Update

Dr Thomas Tsang updated the epidemiological profile, disease pattern of each infected clusters, period of communicability and mode of transmission of SRS. He also provided the best and worst scenarios.

#### Update by HA

Dr Vivian Wong reported steps taken by HA to help health care workers in dealing with Severe Respiratory Syndrome:

- Most elective procedures at all HA hospitals have been postponed
- Regular drug-refill appointments are undertaken without doctor consultation
- Guidelines for Prince of Wales Hospital have been adapted and standardized for all HA hospitals. The new standardized guidelines is available on HA intranet
- Intranet chat room has been set up on HA website for sharing information amongst staff
- A recent case-control study shows wearing a mask (regardless it is surgical or N-95) and washing hands are the most effective preventive measures against Severe Respiratory Syndrome transmissions for healthcare workers

## Health Care Professionals' Views

# Information to the Health Care Workers

- There is a need to standardize infection control guidelines and procedures for all health care workers and high-risk professionals in workplace as well as after work
- . There is a need to develop guidelines for dentists and TCM practitioners
- Health safety officers appear not to have adequate knowledge of Severe Respiratory Syndrome – need to reinforce health education messages

#### Information to the Public

- Inadequate release of details of the spread of the disease (e.g. how the transmission spreads from the index case to the community)
- Need to delineate government's strategies on tackling Severe Respiratory Syndrome

#### Resources

- It appears that inadequate financial support to tackle the problems
- It appears that inadequate supply of equipment in the hospitals e.g. surgical masks, soap for hand washing and paper towels.

#### <u>Measures</u>

- Noted the evidence-based guidelines provided by HA
- Need to emphasise hand washing and mask wearing as a package
- Consider closing all schools for 10-14 days
- Consider quarantine measures
- . Further scale back frontline health care workers' workload

## Public Health Education

- Provide focused health education on prevention (e.g. wearing masks alone is not enough)
- To strengthen promotion of public awareness of prevention
- To strengthen health advice to all visitors to HK

### Dr EK Yeoh's Response

Dr Yeoh emphasized the government and health care professionals need to work together as one entity to send a consistent message to the public regarding the control of Severe Respiratory Syndrome. Participants agreed.

Regarding sending a consistent message from various health care professionals, Dr Yeoh proposed a general infection control guidelines to be adopted by all health care sectors. The guidelines will be developed by infection control experts and based on clinical evidence. Individuals or institutions can choose to adopt standards more stringent than the guidelines.

To stop transmissions, Dr Yeoh emphasized all health care workers should wear masks when attending patients and adhere to a rigorous hands washing regime. Regarding how long health care workers should stay away from homes, he stressed the guidelines to be developed should to be practical enough to ensure high degree of compliance to stop transmissions.

With regards to prevention in the community, Dr Yeoh stressed the need of public health education and publicity drives to encourage those who are sick should wear masks. Proper usage of masks should also be stressed. However, it is not mandatory for those who are not ill to wear masks at all times. The government is intensifying its public health education resources devoted to Severe Respiratory Syndrome.

Regarding measures such as closing schools and carrying out quarantine controls, Dr Yeoh asserted the Government will continue to monitor the emerging picture of the decease before firming up its measures.

Dr Yeoh reported the government is totally committed to ensure that the control of Severe Respiratory Syndrome is adequately resourced.

Dr Yeoh proposed to have another meeting on March 27, 2003 afternoon to further discussion.