

**Membership for The Central Task Force on SARS Supplies  
& Environmental Control**

Chairman : Dr. Fung Hong, CCE NTEC

Members : Dr. M Y Cheng, DD(PS&FM)  
Dr. Louis Chan, NTEC Coordinator  
Mr. Raymond Wong, SEM(BSS)  
Mr. P L Yuen, EM(EM)  
Mr. K K Tang, M(EM)  
Mrs. Mary Wan, CSC HKEC  
Dr. Susanna Lo, SD(CS&SS) NTEC  
Mr. H C Hui, ADM NTEC  
Mr. Desmond Ng, CGM(BSS&CW) HKWC  
Ms. Nancy Chow, CM(Admin) KWC  
Mrs. Grace Leung, Cluster Coordinator (AS) KEC  
Mr. Benjamin Lee, CGM(A) NTWC  
Mrs. Lori Leung, CM(P&MM) KCC  
Dr. Che Kit Lin, SD(BSS) KCC  
Mrs. Wena Pang, GM(AS) KCH

Recorder : Ms. Pauline Lo, EM(BSS)I

**Objectives**

- (a) To review the efficiency and adequacy of the Personal Protective Equipment (PPE) supplies.
- (b) To analyse the effectiveness of PPE supplies logistics.
- (c) To review the facilities requirement and improvement for effective management of SARS and other infectious diseases.

Present : Dr. Fung Hong, CCE NTEC (Chairman)  
Dr. M Y Cheng, DD(PS&FM)  
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Mr. K K Tang, M(EM)  
Mrs. Mary Wan, GM(AS) PYNEH  
Dr. Susanna Lo, HCE (SH)  
Mr. H C Hui, GM(AS) NDH  
Mr. Desmond Ng, GM(AS) GH  
Ms. Nancy Chow, GM(AS), PMH  
Mrs. Grace Leung, GM(AS) UCH  
Mrs. Lori Leung, SHM (S) QEH  
Ms. Pauline Lo, EM(BSS)1 (Recorder)

Absent with : Mr. Benjamin Lee, GM(AS) TMH  
Apology

#### **I. Survey on PPE**

1. Data collected from the PPE survey were not quite matching and further verifications would be sought from hospitals.  
(Post-meeting notes: DD(PS&FM) had clarified with M(BSS)3 that, in most areas, the reason accounted for the deviation between the data on requirements collected from survey and those recorded by PMMS according to the latest hospital's daily consumption is that the latter covered the provision of PPE to patients (in respect of surgical mask) and SOPDs.)

#### **II. Supplies Issues**

##### **A. PPE Standard and Stock Position**

2. A general standard on the provision of PPE would soon be issued to hospitals. There was a concern on the insufficient stock of N95 mask. It was agreed that Desmond would review the stocks held in HKW with a view to re-distributing some stocks to other clusters. Face shield requirements would be increased as well.

##### **B. Supplies Logistics and Control Mechanism**

3. GM(AS)s were reminded to ensure that there is a mechanism in place to facilitate the logistic flow of the PPE supplies. Furthermore, a known two-way communication system with end users on the daily stock/usage pattern should also be established.

#### **III. Environmental Control**

4. PL would send the EMSD's report on hospital ventilation improvements to members.
5. Dr. Fung would organize a meeting with CE and Secretary for the Environment, Transport and Works on the overall environmental improvements to hospitals including UCH.

**IV. Date of Next Meeting**

**080460**

6. The next meeting will be held on 13 May 2003 at 6:00 p.m. in Room 513S, HAHO.

Meeting of the Task Force on Supplies and Environmental Control Held on 13.5.03

Present : Dr. Fung Hong, CCE NTEC (Chairman)  
 Dr. M Y Cheng, DD(PS&FM)  
 Dr. Louis Chan, NTEC Coordinator  
 Mr. Raymond Wong, SEM(BSS)  
 Mr. P L Yuen, EM(EM)  
 Mr. K K Tang, M(EM)  
 Mrs. Mary Wan, CSC HKEC  
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 Ms. Nancy Chow, CM(Admin) KWC  
 Mrs. Grace Leung, Cluster Coordinator (AS) KEC  
 Mrs. Wena Pang, GM(AS) KCH  
 Mrs. Lori Leung, CM(P&MM) KCC  
 Ms. Pauline Lo, EM(BSS)1 (Recorder)

Absent with : Mr. Benjamin Lee, CGM(A) NTWC  
 Apology

## I. Survey on PPE

1. Members were requested to give feedbacks on the survey forms which would be e-mailed out by Dr. M Y Cheng.

## II. Supplies Issues

### A. Respirators

2. Hospitals were requested to give a more realistic forecast to Raymond on the requirements of N95 (S) [REDACTED] basing on the PPE guidelines. *"brand name"*
3. In view of the tight stock of [REDACTED], it might be necessary, if circumstances permit, to focus the supply to ICU/SARS wards or for carrying out 'procedures'. Furthermore, the small size N95 mask could be re-used if covered by a surgical mask/face shield. *"brand name"*
4. Members noted the supply/stock positions of the various models of respirators tabled at the meeting by Raymond. Provision of stocks to the cluster hospitals would better be based on the number of staff working in critical areas.

### B. Face Shields

5. A weekly supply of 10000 to 20000 nos. of face shield would be available through the production organized by the [REDACTED]. Face shield could be re-used if properly disinfected.

### C. New PPE Item

6. HC Hui would arrange a tender for the supply of Hood (disposable) for trial by various hospitals. *"Company name"*

D. Committed Expenditure on PPE / Related Items

7. Raymond highlighted that as at present a total of 217M had been committed for the purchase of various items.

E. Communication / Monitoring / Assessment of Need on the Provision of PPE

8. Members were requested to amend / update the current practice on the supply of PPE to users as e-mailed out by Dr. M Y Cheng.
9. Dr. Fung reiterated the importance of ascertaining the available stock level and the usage patterns at various communication meetings.

III. Environmental Control

10. A chemical dosing system by sodium hypochlorite (NaOCL) to flushing water tanks would be installed at : PMH (completed), TMH, PYNEH, QMH by Arch.S.D, whereas RH would request EMSD for the work.
11. Medium Term Measure - To improve the air conditioning in existing SARS wards by:
- i) switching back more A/C return air for recirculation
  - ii) incorporating HEPA filters in the A/C return air ducts / industrial type HEPA units in cubicles to clean the room air
12. Long Term Measure (for major acute hospitals) - To carry out large scale improvement to the air conditioning and physical layout. Each hospital had to designate wards as infection / fever / triage wards and to identify the required isolation facilities. P L would co-ordinate with EMSD / ASD and the design input from Donald Li to work out a master plan with cost estimations on the long term environmental improvements. Funding could either be bidden from the Government or the SARS budget.

IV. Date of Next Meeting

13. The next meeting will be held on 20 May 2003 at 6:00 p.m. in Room 527N, HAHO.

Present : Dr. Fung Hong, CCE NTEC (Chairman)  
 Dr. M Y Cheng, DD(PS&FM)  
 Dr. Louis Chan, NTEC Coordinator  
 Mr. Raymond Wong, SEM(BSS)  
 Mr. P L Yuen, EM(EM)  
 Mr. K K Tang, M(EM)  
 Mrs. Mary Wan, CSC HKEC  
 Dr. Susanna Lo, SD(CS&SS) NTEC  
 Mr. H C Hui, ADM NTEC  
 Mr. Benjamin Lee, CGM(A) NTWC  
 Ms. Nancy Chow, CM(Admin) KWC  
 Mrs. Grace Leung, Cluster Coordinator (AS) KEC  
 Mrs. Wena Pang, GM(AS) KCH  
 Mrs. Lori Leung, CM(P&MM) KCC  
 Mr Joe Hung, M(BSS)2 (Recorder)

Absent with : Desmond Ng, CGM(BSS&CW) HKWC  
 Apology

## I. Survey on PPE

Action By

1. Based on hospitals' recent enduser surveys, in general, the supply of PPE to the wards / units was considered adequate, except for N95(S).  
 (Post-meeting notes: According to the survey result, 89% of the responded ward managers were 100% satisfied with the supply of PPE and 88.8% for N95(S).)

## II. Specific Supplies Issues

### A. Respirators

2. The secured weekly supply of N95(S) or equivalent (e.g. [redacted] brand name) was 47,000 nos, which fell short of HA's projected weekly requirement of around 100,000 nos. [redacted] had increased its supply from 15,000 nos to 20,000 nos in the past week. HA would continue to press for more supply from various suppliers, for instance:- [redacted] brand name

(a) [redacted] company name approval was obtained for it to set up a production line in China to produce N95. N95(S) samples would be available for HA's inspection in 2 days. (Post-meeting note: Samples received and were under evaluation.)

(b) [redacted] brand name - actions would be escalated to urge them to deliver the promised quantity according to schedule i.e. 100,000 nos of [redacted] by end May 2003.

(c) [redacted] company name - HKSAR liaised with the US Government for more supply of N95(S) from this manufacturer in future.

(Post-meeting notes: As the supply of N95(S) became stable subsequently, assistance was not required from the HKSAR.)

### B. Face Shields

- 3 The current face shield provision level for KEC was considered inadequate. BSS would increase the supply.  
(Post-meeting notes: An order for 10,000 pcs of face shields was made on 22 May 2003 and KEC Cluster Procurement Unit was notified of the delivery arrangement.)
- M(BSS)3  
080464
- C. New PPE Item
4. Samples of Hood (disposable) would be available for trial by hospitals by the end of this week.
- ADM  
NTEC
- D. Committed Expenditure on PPE / Related Items & DPA Approval
5. EM(EM) reminded hospitals to include any committed expenditures on engineering works in their returns to HAHO Finance Division.
- Cluster  
GM(AS)s
6. BSS would seek covering DPA approval on the committed expenditures on PPE or related items from the AOM meeting in June 2003. Hospitals would provide purchase details for inclusion into BSS's DPA request paper, if covering DPA approval was required.
- Cluster  
GM(AS)s
- E. Communication / Monitoring / Assessment of Need on the Provision of PPE
7. Dr Fung reminded clusters to step up and document all communication works done for future inspection by the SARS Review Panel.
- Cluster  
GM(AS)s
- III. Environmental Control
8. The installation status of chemical dosing system for flushing water tanks was: (a) PMH (completed), (b) TMH, PYNEH & QMH (to complete by 10 June 2003) and (c) RH (to complete by 13 June 2003)
- EM(EM)
9. Medium Term Measures -
- i) install industrial type HEPA units plus bedside local HEPA unit in cubicles to filter the room air (aim to complete within one month depending on the availability of equipment) - hospitals to propose the specific wards for installation. Based on the clusters' planning returns, EM(EM) would work with EMSD to finalise the installation locations and quantity requirement. (NB further procurement of domestic type HEPA units should be avoided because of their lower efficiency.)
- EM(EM) &  
Cluster  
GM(AS)s
- ii) Local Hepa Unit and BIPAP Extraction Unit - Cluster GM(AS)s and clinicians to make arrangement to visit those units installed in AHNH and PMH respectively and inform EM(EM) their requirements.
- Ditto-
- iii) Other air purifier / improvement systems proposed by [redacted] and [redacted] etc - EM(EM) to seek as appropriate ETWB's advice and recommendation for their use in HA.
- "Company name"  
EM(EM)
10. Long Term Measure (for major acute hospitals) - to carry out large-scale improvement to the air conditioning and physical layout before this winter. Hospitals would identify wards requiring this improvement, including also A&E and additional isolation rooms.
- Cluster  
GM(AS)s
- IV. Any Other Business
11. The BSS SARS Sub-command Centre would be stepped down gradually.

12. Trial use of an Ozone Steriliser to disinfect PPE was worth pursuing. Concealed type of sterilizer would be used to ensure occupational safety. 080465

**V. Date of Next Meeting**

13. The next meeting will be held on 27 May 2003 at 6:00 p.m. in Room 527N, HAHO.



Present : Dr. Fung Hong, CCE NTEC (Chairman)  
Dr. M Y Cheng, DD(PS&FM)  
Mr. Raymond Wong, SEM(BSS)  
Mr. P L Yuen, EM(EM)  
Mr. K K Tang, M(EM)  
Desmond Ng, CGM(BSS&CW) HKWC  
Dr. Susanna Lo, SD(CS&SS) NTEC  
Mr. H C Hui, ADM NTEC  
Mr. Benjamin Lee, CGM(A) NTWC  
Ms. Nancy Chow, CM(Admin) KWC  
Mrs. Lori Leung, CM(P&MM) KCC  
Ms. Pauline Lo, EM(BSS)1 (Recorder)

Absent with : Mrs. Mary Wan, CSC HKEC  
Apology Mrs. Grace Leung, Cluster Coordinator (AS) KEC

**I. Survey on PPE**

1. Dr. Cheng presented the general survey results as per attached. (Appendix I)

**II. Specific Supplies Issues**

**A. Respirators**

2. With the donations from China and the [REDACTED] (European style) if acceptable, the total stock for N95(S) would be around 200,000 nos. WHO also recommended the use of P100 and filter could be changed after 2 – 3 days' usage. With the current stock of 42,000 nos. of N100, there should be sufficient stock to enable every staff to have a fitted mask.

3. Cluster representatives were reminded to record usage in the ICS system.

4. Position in other alternative source:

[REDACTED] – still no confirmation on increasing the supply.  
[REDACTED] – evaluation on the N95(S) produced in China not yet finalized.

**B. Face Shields**

5. Members confirmed that face shields were mostly used as disposable items. A new design with the face shield covering the ears would soon be available for evaluation.

**C. Hoods**

6. Stocks were available for trial use in Accident & Emergency Departments.

**D. Protective Suit**

7. The use of this item would be put on hold as it failed in the required filtration test.

**E. Expenditure on PPE/Medical Equipment**

8. Hospital would submit their justifications for the various purchases to Finance Unit.

9. Raymond showed the attached charts showing the supply Vs consumption of small size N95. (Appendix II).

**III. Environmental Control**

10. EM(EM) would give the technical calculations and recommended criteria for assessing the requirements of HEPA units for specific wards. A site visit to be arranged to enable members to make sure that the HEPA units could be fitted in the ward environment. All the requirements to be finalized by 31 May 2003 and the purchase would be arranged in two lots.
11. For improvements before this winter, hospitals had identified certain wards for physical layout improvements which should include changing areas, shower cubicles, isolation facilities, etc. All major acute hospitals and hospitals with Accident & Emergency Department are to be included.

**IV. Date of Next Meeting**

12. The next meeting will be held on 3 June 2003 at 6:00 p.m. in Room 513S, HAHO.

Meeting of the Task Force on Supplies and Environmental Control Held on 3.6.03

Present : Dr. Fung Hong, CCE NTEC (Chairman)  
 Dr. M Y Cheng, DD(PS&FM)  
 Mr. Raymond Wong, SEM(BSS)  
 Mr. P L Yuen, EM(EM)  
 Desmond Ng, CGM(BSS&CW) HKWC  
 Dr. Susanna Lo, SD(CS&SS) NTEC  
 Mr. H C Hui, ADM NTEC  
 Mr. Benjamin Lee, CGM(A) NTWC  
 Ms. Nancy Chow, CM(Admin) KWC  
 Mrs. Wena Pang, GM(AS), KCH  
 Mrs. Lori Leung, CM(P&MM) KCC  
 Mrs. Mary Wan, CSC HKEC  
 Mrs. Grace Leung, Cluster Coordinator (AS) KEC  
 Ms. Pauline Lo, EM(BSS)1 (Recorder)

**I. Supplies Issues**

1. Members agreed that generally there were no major issues on the supply of PPE items.

**II. Specific Supplies Issues****A. Respirators**

"brand name"

2. Stocks of [REDACTED] and [REDACTED] from China would last up to end June. Members should inform staff of the alternative accepted models. There would be 120,000 nos. of "[REDACTED]" model by end of June 03. The meeting agreed that advance order to be placed for September stocks.

**B. Face Shields**

"brand name"

3. Stocks for face shields would last for one month.

**C. Protective Suit**

4. Payment paid for 450 units received but usage would be put on hold.

**D. Communication / Monitoring / Assessment of Need on the Provision of PPE**

5. Chairman reminded members to keep up the communication forum with ward managers.

**III. Environmental Control**

6. The requirements of HEPA units to be confirmed by Thursday (29 May 03) the latest.

7. Members were requested to provide the following information to P. L. Yuen a.s.a.p. as control plans for the coming winter:
  - (a) Wards for proven SARS cases;
  - (b) Wards for suspected cases (fever wards, triage wards);
  - (c) ICU facilities;
  - (d) Convalescent wards (could be located away from the parent hospital).

**IV. Date of Next Meeting**

8. As most urgent issues were resolved, members agreed that the Task Force could be dissolved.
9. Raymond reported that the BSS Sub-command Centre closed on 31 May 03.