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Room 901, Hang Shing Bldg., 363-373 Nathan Road, Kowloon. Email: hkdu@hkdu.org Home page: http://www.hkdu.org Tel. No.: 2388 2728 Fax: 2385 5275

Our Ref.: HKDU/156/2014

6<sup>th</sup> October 2014

By fax and email

Dear Legislative Council Members,

# Re: Pharmacy & Poisons (Amendment) Bill 2014

We feel obliged to inform you all the true scenario of private clinic operations and it is the totally lack of appreciation of the real happenings in a clinic that Government officials come up with a useless cumbersome totally ineffective but dangerous requirement that affects all private clinics and pharmacies and the suppliers and distributors of drugs adversely while threatening patient safety.

We write to clarify the apparent confusion and the understandable lack of understanding that some legislative Council members may have from the 17.7.2014 Legislative Council Bills Committee meeting on Pharmacy and Poisons (Amendment) Bill 2014 and also want to supply more information following events that have developed since.

First Hong Kong Doctors Union is grateful for the patience and understanding of the Legislative Council Members in the above Bills Committee.

Since one Government official claimed in that meeting that doctors can use drugs delivered before signing the invoice which do not come together with the drugs but later, we must rectify this false picture presented. The fact is the doctor does have to sign the invoice of the drug delivered immediately, or else, the drug will be taken back. There is NO SUCH THING as the drug delivered will be used before the arrival of the invoice for signage in the clinic.

Regarding checking of drugs on delivery to the clinic, every doctor has his own system to check for nearly 100 years and there is no need for Written Order. Sometimes, the drug delivered will not 100% correspond to the drugs ordered due to shortage or wrong delivery. In this case the invoice delivered that come with the drug is the most appropriate, environmental friendly and accurate record for the doctor to sign and keep. The patients' safety is thus protected.

Some Government officials want to play down the dangerous delay of drug delivery resulting from the cumbersome written order system and claim such drugs can be obtained in Accident & Emergency (A&E) departments if not available in our clinics. When we talk about urgently needed drugs, we are not talking about life saving situations. Such life threatening cases will always be referred to the A&E departments of the hospitals immediately. We are worrying about the following situations such as patients with chronic illnesses e.g. hypertension who have to refill antihypertensive drugs; patients have to travel the next day and who require vaccination...etc. These cases would not warrant referral to A&E departments. But they can be served in private clinics if drugs can be delivered within 24 hours. Telephone orders will be most appropriate especially when these patients arrive late at night in the private clinics.





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One Government official quoted the claim by a representative of The Hong Kong Association of Pharmaceutical Industry (HKAPI) that written orders will not cause delay in drug delivery saying the reason as "...delivery after verification and thus the drug delivery time would not be delayed..." but Written Order involves many more steps before verification with extra time and effort as explained in (Annex 1), all causing delay while verbal verification is really the verbal order we are now using. Invoice is much more accurate than written confirmation. In all business transactions, there would be invoice after phone order and we do not know why Medical practice should be singled out.

We have a meeting with Ms. Linda Woo of Department of Health on 22.7.2014 after the 17.7.2014 Bills committee meeting on Pharmacy and Poisons (Amendment) Bill 2014 but short of any response from the Government. Ms. Linda Woo did not dare to answer the question of whether there is invoice accompanying drug delivery in Hong Kong. Attached is our opinion on Written order to the government for your perusal. (Annex 2)

As for those associations consisting of members only in public service, their members are not familiar with the working environment of colleagues in private practice. Their opinion on the ways of private practice is without basis, is questionable and cannot reflect the real situation at all.

As far as patients' groups support, Hong Kong Alliance for Patients' Organization Limited is the largest patients' group in Hong Kong and has stated her objection against mandatory written order for drug purchase in the Legislative Council Bills Committee meeting on Pharmacy and Poisons (Amendment) Bill on 20.5.2014.

By fully grasping the real operation logistics in clinics, we can visualize the importance and usefulness of retaining the existing verbal ordering system of communication while reinforcing this method by compelling doctors and pharmacists legally to personally verify the delivered drugs in their offices and signing all forms that accompany.

We are looking forward to a Deputation meeting to explain further in person.

Yours truly.

Dr. Ho Ook Ling Thomas

Hon. Secretary

Hong Kong Doctors Union

Encl.

Cc Mr. the Hon Leung Chun Ying Dr. Ko Wing Man, Secretary for Food & Health



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26<sup>th</sup> September 2014

By fax & mail

Mr. the Honourable Leung Chun Ying Chief Executive of HKSAR Office of the Chief Executive Tamar, Hong Kong.

Dear Mr. Leung,

#### Re: Hong Kong Doctors Union (HKDU) Ask Ms. Janice Tse to step down from her Office

Thank you for your reply through Food & Health Bureau, to our call for the resignation of Ms. Janice Tse of Food & Health Bureau. HKDU is amazed that the rusty, overused but totally unfounded slogan of "enhancing patient's drug safety" is again used by another senior government official without any evidence to support. Please be rest assured patient safety is our utmost concern.

# Written order does not prevent dispensing mishaps

The only case cited in your letter concerns 153 patients wrongly given unwanted drugs in 2005, the doctor was found guilty by the Medical Council for failing to verify if the drugs received corresponded with his order. Signing for the receipt of the drugs without verification was his problem. By accepting the drugs he implied he wanted them and willing to pay. However whether this corresponded to his orders be it verbal or written is immaterial. His another fatal mistake was to allow his staff to take the drugs from the original container and transfer to other containers so that original label was not traceable, definitely not because his order was verbal.

#### Drug Recall

The Review Committee recommended written order and your letter claimed this was because it helped tracing the origin. Yet the origin is clearly written on the invoice and a written order is superfluous. Without this invoice and its signature no doctor would pay for any undelivered drugs. Recall can only occur if drugs are received and therefore signed for in the receipt. Recall is not facilitated therefore by written order. Since signing however is not put down by law as a requirement, we recommend putting this into law so that verification and signing will be done by pharmacists and doctors instead of their staff, which will dispel any concern as to failure to verify.

#### Using written order to form a complete set of records

Again for the same reason that we have practiced signing for invoices and poison forms, the invoice having clearly stating the ordering doctor, the salesman, the date and the drugs all of which are written record of the orders, making it superfluous to have a so called written order.



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Once more the verification of drugs by doctors is most important and if carried out would have prevented this mishap of 153 cases whereas verification will not be affected by whether the order is verbal or written.

#### Hong Kong Medical Association's recommendation

The promulgated Good Dispensing Practice Manual serves as a guide and **does not compel** doctors to use written orders using the word "**recommended**". As far as we know only about ten doctors in Hong Kong are doing written orders.

#### Claims of written orders efficacy

Quoted claims of support in your letter are without basis and said to be from four organizations but they do not represent the great majority of patients, pharmacists and doctors. As far as we know the membership of the Alliance for Renal Patient's Mutual Help Association is small while Mr. Alex Lam, the Vice-president of another much bigger patient organization which consists of 43 member patient mutual help associations, Hong Kong Alliance for Patients' Organization Limited, voiced his strong objection against mandatory Written Order for drug purchase on 20 May 2014 in Legislative Council Bills Committee meeting on Pharmacy and Poisons (Amendment) Bill 2014. The Federation of Medical Societies and Hong Kong Pharmaceutical Manufacturers Association did not have opinion survey among their members. The former is a loosely linked group as a social club for doctors and pharmacists etc and does not hold meetings for members.

#### Written orders cause delay endangering patient safety

The claim by the Hong Kong Association of Pharmaceutical Industry (HKAPI) that written order does not cause delay is unfounded as Sabrina Chan, Executive Director of HKAPI, in her letter (Annex 1) claimed "since delivery occur after ordering and verification and so does not cause delay..." She does not make sense. The steps prior to verification involve several communication procedures of fax and checking for fax/s reception and ascertaining details verbally or other means which involve time and manpower. Electronic means do not simplify these procedures at all.

#### Unregistered drugs and unregistered traders

Unsubstantiated claims that Written Orders will deter illegal ordering unregistered drugs or from unregistered traders. If such do exist we like to ask how written orders by these people can actually occur in place of verbal orders. We cannot envisage if such a doctor does exist that he will be deterred by this requirement. Yet he can be convicted still for possession even without proof of ordering.

It is strange that written orders can be made for so called unregistered drugs. We like to ask Mr. Yuen or Ms. Janice Tse of the Food & Health Bureau where these unregistered drugs can be ordered. If they do not know we doctors do not know too; and those who manage to get them, we Cont'd...P.3



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are sure will not have written orders. The officials are speaking fibs. Once again you talk of purchase from unregistered traders, so please do tell us these people's names and their phone and fax numbers just in case some doctors out of their minds dare to order from them verbally or in written form. Requirement to use written order therefore will not affect the rest of us who will do neither illegal acts mentioned and as for those infringing the law this requirement will not deter them. They can just carry on verbally.

## Dodging the real issue

Once more, our Hon Mr. Leung, the letters by Food & Health Bureau did not answer our call for the resignation of Ms. Janice Tse of Food & Health Bureau. The Bureau mentioned 11 cases of dangerous drugs record impropriety are not Ketamine tablets claimed openly by Ms. Janice Tse. The outcome of these cases could not have been altered by written orders because the invoices issued by delivering drug firms are sufficient to show who order them and when. Ms. Janice Tse is still guilty of confabulating the Ketamine story and guilty of slandering the medical profession for which she should step down.

Yours sincerely,

Dr. Ho Ook Ling

Hon. Secretary

Hong Kong Doctors Union

Encl.

Dr. Ko Wing Man, Secretary for Food & Health Legislative Council Members







# The Hong Kong Association of The Pharmaceutical Industry

UNIT A, 20/F., TIMES MEDIA CENTRE, 133 WANCHAI ROAD, WANCHAI, HONG KONG. TEL: (852) 2528 3061/2 FAX: (852) 2865 6283 WEBSITE: www.hkapi.hk

14<sup>th</sup> July, 2014

Dr. Yeung Chiu Fat, Henry President Hong Kong Doctors Union Room 901, Hang Shing Building, 363-373 Nathan Road, Kowloon

Dear Dr. Yeung,

### Re: Proposed changes in requirements for drug ordering

It has been brought to my attention that your association together with Hong Kong Pharmacists Union, Pharmaceutical Trade Alliance and Hong Kong General Chamber of Pharmacy are requesting information from our members regarding drug delivery timeline and arrangement when the requirement of written order is implemented.

Members of the Hong Kong Association of the Pharmaceutical Industry, including 40 international companies engaged in the R&D of pharmaceuticals as well as regional distribution of pharmaceutical products, currently provide over 70% of the prescription medicines and distribute over 80% of imported pharmaceutical products in Hong Kong. Drug and patient safety has always been our first priority. Our members have been following Good Distribution Practice developed under the WHO and European Commission and we support the proposed requirement on written order as we believe that it can minimize errors arisen as a result of miscommunication when placing verbal orders and reduce wastage due to wrong delivery.

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We also receive written order now. Orders received from clinics and pharmacies will be processed after verification and thus the drug delivery time would not be delayed.

Yours sincerely,

Śąbrina Chan

Executive Director

c.c. Ms Linda Woo, Assistant Director (Drug), Drug Office, Department of Health

# 擾民政策 - 「強制書面訂藥」 - 李作短醫生

我們並非搞事之人,只以事論事,對事不對人。今出席會議討論,只想把事情搞好,盡行業一些責任、發表意見,指 出不當之處,協助當局完善處理問題。不過從幾千年歷史來看,諫官通常都是不好下場,諫官下場通常都是悲慘的, 還好我們不是官是民,香港今時今日市民還有言論自由,能發揮監察政府之效。不會以言入罪,慶幸慶幸。

#### 強制書面訂藥為何更添隱憂:一

(1) 事故主因,各說各話,真正原因要說明,是「連環錯誤」,並 非單一「電話溝通」錯誤造成,若不理解,將無可改善,不幸 事故必將再現。

1錯-涉事醫生過份下放職責權力

2錯-電話溝通「說錯」或「聽錯」

3錯-收貨不驗

4錯-慣性手作,不作覆檢

事故最錯在於「假手於人」那麼,如何改善?行業早已作出改 善,漏洞早已填補。建議「親力親為」、「貨到必檢」、「對單 驗貨」、「簽名作實」、「專業驗證」、「力保民安」。當時, 已即刻印發指引,立竿見影,至今未再發生,行業尊重病人權 益,普遍己作改善。書面訂藥因未專注以上缺陷,不能確保民安 之餘,更中門大開,仍「假手於人」,如何沒有隱憂。

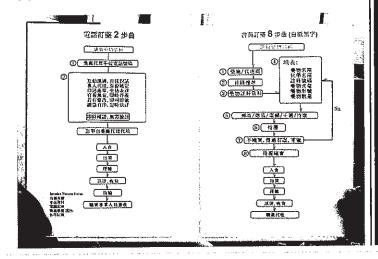
- (2) 若醫生不作檢討,一心以為聽從政府建議,以符合要求,大安 旨意,在沒有有效監控措施之下仍假手於人,這錯誤概念不 改,風險更高。即『不明所以,錯誤妄為,風險更高。』
- (3) 書面訂藥,文件可作法律文件,不可忽視。因涉簽署,更有法 律責任問題,所以更需謹慎。
- (4) 為何要謹慎: -
  - (a) 涉刑責,當罰則 (要管與被管,香港講法治,不存在這
  - (b) 涉財務、債項
  - (c) 涉假冒
  - (d) 涉運作-
  - 如何確保收fax的人,手上收的是100%清晰的文件( 確實無誤),與正本百份百相同
  - 如何得知是無誤,沒有錯
  - 如何取回錯誤的 fax order
  - 如何避免有重覆order的可能性
  - (v) 如何更改已發出的order
  - (vi) 如何防避被重覆使用order
  - (vii) 如何處理被「屈」的order
  - (viii) 若雙方手上的order有出入,政府如何處理
- (5)政府不做研究調查,如何令業界相信/信服:-
  - (i) 書面訂藥的用意 (ii) 書面文件的用途

  - (iii) 書面訂藥確能保障藥物安全

(iv) 若是,政府應向社會保證製藥過程由化學物品至原料至 1 藥物製作工序,每一步驟,也要書面記錄誰人order

#### 書面訂藥為何有可能有延誤: --

- (1) 訂藥延誤表述 電話訂藥2步曲 / 書面訂藥8步曲
- (2) 任何工序若需經人手/機械/聯繫/了解,
  - (a) 必會增添時間,越簡單越省時;
  - (b) 工序越繁複,出錯機會越多,需更改也多;
  - (c) 更正需時頗長,必要時還需重做;
  - (d) 工序若涉多重部門,問題更多,時間更長:
  - 如 (i) Written Order收不到
    - (ii) Written Order 不清晰
    - (iii) Written Order 有重複
    - (iv) Written Order 不見了(遺失了)
    - (v) Written Order 不能執行 (貨數量不足/貸款不同)
    - (vi) Written Order 需確認(真與假)
    - (vii) Written Order 簽字不同以往
    - (viii) 部門不協調
    - (ix) Written Order需Sales認頭
  - (e) 通訊系統不靈或設施不足
  - (f) 人手不足或訓練不足
  - (g) 錯失車隊送貨時序
  - (h) 人為錯誤
- (3) 失卻流動終端機的功能
- (4) 不利廠商 / 公司電腦化 / 電訊通訊發展(以人手取代電訊)



#### 書面訂藥政府用意何在:-

	局方聲稱用於:-	我們的回應:-
(1)	方便根查藥物來源/數量/批次…等等	所有資料已詳列於Invoice上
	可知落單時情況,可追查問題所在,作出改善	專業人仕,包括醫生/藥劑師可作專業判斷(即專業自主自我處理)
(3)	可作刑事偵査之用(誰應負責)	專業人仕已負起專業責任
(4)	可追溯不明來歷之藥物	講明來歷不明,那有Written Order,荒謬無稽
	可保障病人安全(用藥安全)	是否對病人安全有脾益,未必,有懷疑,無科學/實質理據支持
	要求當事人保留,否則可作檢控	擔憂,fax記錄隨時間有變,會褪色
-	可作對單檢貨(藥)	貨到單到,對Invoice驗藥,更確保來貨真偽,是否你叫的不重要,是否你需要的才重要,藥物、標籤、單上標明是一致才是最重要。『對單檢收』