

2021年報ANNUAL REPORT



私營醫療機構投訴委員會
COMMITTEE ON COMPLAINTS AGAINST
PRIVATE HEALTHCARE FACILITIES

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主席的話

Message from the Chairperson

私營醫療機構投訴委員會（下稱“投訴委員會”）自二零二零年十二月一日成立，至今運作已逾一年。投訴委員會是根據《私營醫療機構條例》（下稱“《條例》”）成立的法定委員會。投訴委員會就對持有相關牌照的私營醫療機構作出的投訴（下稱“對機構投訴”），考慮該機構有否遵守《條例》及相關實務守則。為達改善私營醫療機構的服務及提升病者安全的主要目標，投訴委員會會向私營醫療機構提出改善措施的建議，及就關乎對機構投訴的事宜，向衛生署署長（下稱“署長”）作出建議，包括是否向有關的私營醫療機構採取任何規管行動。

投訴委員會的委員由註冊醫生／註冊牙醫，以及來自不同背景的業外委員，包括病人團體、法律界、工程界、醫護專業人員（醫生和牙醫除外）和消費者權益組織組成。

The Committee on Complaints against Private Healthcare Facilities (“Complaints Committee”) has been operating for over one year since its establishment on 1 December 2020. It is a statutory committee established under the Private Healthcare Facilities Ordinance (“the Ordinance”). The Complaints Committee considers complaints against licensed private healthcare facilities (“facility complaints”) on matters related to their compliance with the Ordinance and relevant codes of practice. It makes recommendations to private healthcare facilities (“PHFs”) on improvement measures and to the Director of Health (“the Director”) on matters relating to the facility complaints including whether to take any regulatory actions against the PHFs with the key objective to improve services of PHFs and enhance patient safety.

The Complaints Committee is composed of members from registered medical practitioners/ registered dentists, as well as lay members from various backgrounds including patient groups, legal sector, engineering sector, healthcare professionals (other than doctors and dentists) and consumer rights sector.

就過去一年處理對機構投訴的經驗，我們注意到私營醫療機構的員工和病人之間的誤解或溝通不善是不滿的常見原因之一。因此，就私營醫療機構管理投訴方面，有效的溝通、耐心的解釋和同理心對於解決衝突和處理病人的不滿尤為重要。本報告中公布的統計數字和個案報告，旨在促進私營醫療機構的經驗分享、學習和服務提升。

展望未來，我們會繼續增進公眾對《條例》下的兩層投訴管理制度，及投訴委員會在處理對機構投訴的角色的了解。

最後，我衷心感謝在過去一年為支持投訴委員會工作作出寶貴和慷慨貢獻的投訴委員會委員，以及向秘書處職員處理對機構投訴的不懈支持致以謝意。透過共同的努力下，我希望我們的工作能為私營醫療機構帶來正面發展，市民的健康亦得以改善。

From our experience in handling of facility complaints in the past year, we noticed that one of the common causes of dissatisfaction was related to misunderstanding or miscommunication between PHFs' staff and patients. Effective communication, giving explanation patiently and empathy are crucial in resolving conflicts and addressing grievance of patients in complaints management at PHFs. We publish statistics and summary reports of cases in this report with a view to facilitating experience sharing, learning and service improvement of PHFs.

Looking forward, we will continue to enhance public understanding of the two-tier complaints management system under the Ordinance and the role of the Complaints Committee in facility complaints handling.

Last but not the least, I would like to express my sincere gratitude to the Complaints Committee members for their invaluable and generous contributions to the work of the Complaints Committee in the past year. I must also thank the Secretariat for their unfailing support in our work of handling facility complaints. With concerted efforts, I hope our work would bring about positive development of PHFs and improvement of the health of the population.

劉文文女士, BBS, MH, JP

私營醫療機構投訴委員會主席

Ms LAU Man-man, Lisa, BBS, MH, JP

Chairperson, Committee on Complaints against Private Healthcare Facilities

第一章

Chapter 1

引言 Introduction

本年度報告為投訴委員會發布的第一份年報，載錄投訴委員會由二零二一年一月一日至十二月三十一日的工作。投訴委員會希望藉此與私營醫療機構分享處理投訴個案的經驗，並促進私營醫療機構就投訴個案的學習和服務提升。

《條例》於二零一八年十一月獲立法會通過，並於二零一八年十一月三十日刊憲，為註冊醫生和/或註冊牙醫執業的私營醫療機構，包括醫院、日間醫療中心及診所，提供新的規管制度。《條例》是按不同類型的私營醫療機構的風險程度分階段實施。

於二零二零年十二月一日，投訴委員會在《條例》下成立，處理對持有相關牌照的私營醫療機構就牌照生效當日或之後的事宜作出的投訴。《條例》下的醫院牌照及首批日間醫療中心牌照於二零二一年一月一日起開始生效，投訴委員會自此開始處理投訴的工作。

This annual report, covering the period from 1 January to 31 December 2021, is the first report published by the Complaints Committee. Through this publication, the Complaints Committee aims to share experience of handling of complaint cases with PHFs and to facilitate learning from the complaint cases and service improvement of PHFs.

The Ordinance was passed by the Legislative Council in November 2018 and was published in the gazette on 30 November 2018 to provide a new regulatory regime for PHFs where registered medical practitioners and/or registered dentists practise, including hospitals, day procedure centres and clinics. The Ordinance is being implemented in phases based on the risk level of various types of PHFs.

The Complaints Committee was established under the Ordinance on 1 December 2020 to handle complaints against licensed PHFs related to matters occurred on or after the licence came into effect. The Complaints Committee has started its work in handling complaints since 1 January 2021 when the hospital licences and the first batch of day procedure centre licences under the Ordinance took effect.

第二章

Chapter 2

投訴委員會的委員及職能

Membership and Functions of the Complaints Committee

2.1 投訴委員會

2.1 The Complaints Committee

2.1.1 投訴委員會的組成

2.1.1 Compositions of the Complaints Committee

根據《條例》，投訴委員會的委員由食物及衛生局局長委任，其中包括主席、副主席及委員，任期為三年。投訴委員會的委員由註冊醫生/牙醫和來自不同背景的業外委員，包括其他醫護專業人員、病人組織、法律界、工程界和消費者權益組織組成。

In accordance with the Ordinance, the Secretary for Food and Health appointed the Complaints Committee which consists of a chairperson, a deputy chairperson and members for a term of three years. The Complaints Committee consists of registered medical practitioners/ dentists, as well as lay members from various backgrounds including other healthcare professionals, patient groups, legal sector, engineering sector and consumer rights sector.

2.1.2 投訴委員會的成員
(於2021年12月31日)

2.1.2 Membership of the Complaints Committee
(as at 31 December 2021)



主席
Chairperson

劉文文女士, BBS, MH, JP
Ms LAU Man-man, Lisa, BBS, MH, JP



副主席
Deputy Chairperson
張德康醫生, JP
Dr CHEUNG Tak-hong, JP



委員
Member

陳清霞博士, SBS, JP
Dr CHAN Ching-har, Eliza, SBS, JP



委員
Member

陳秀雯教授
Professor CHAN Sau-man, Sandra



委員
Member

陳永佳先生
Mr CHAN Wing-kai



委員
Member

鄭荔英教授
Professor CHEING Lai-ying, Gladys



委員

Member

鄭俊平工程師

Ir CHENG Chun-ping, Norman



委員

Member

馮玉娟教授, BBS

Professor FUNG Yuk-kuen, Sylvia, BBS



委員

Member

何錦源醫生

Dr HO Kam-yuen, Simon



委員

Member

何應富先生

Mr HO Ying-foo, Francis



委員
Member

郭晶強先生, SBS, FSDSM
Mr KWOK Jing-keung, SBS, FSDSM



委員
Member

郭亮明先生, SBS, CSDSM
Mr KWOK Leung-ming, SBS, CSDSM



委員
Member

黎卓先教授
Professor LAI Cheuck-seen, Edward



委員
Member

梁熊顯教授
Professor LANG Hung-hin, Brian



委員
Member

李慧琴醫生
Dr LEE Hui-cheng, Angeline



委員
Member

李繼堯醫生, BBS
Dr LEE Kai-yiu, Anthony, BBS



委員
Member

梁國齡醫生
Dr LEUNG Kwok-ling, Ares



委員
Member

梁彥欣醫生
Dr LEUNG Yin-yan, Jenny



委員

Member

廖偉明醫生

Dr LIU Wai-ming, Haston



委員

Member

劉西恩醫生

Dr LOW Say-woon, John Matthew



委員

Member

彭佳源醫生

Dr PANG Kai-yuen



委員

Member

潘偉麟醫生

Dr POON Wai-lun



委員
Member

湯熾忠先生
Mr TONG Chi-chung, Eddy



委員
Member

黃吳潔華女士
Mrs WONG NG Kit-wah, Cecilia



委員
Member

黃婉芳女士
Ms WONG Yuen-fong, Pauline



委員
Member

胡偉強先生
Mr WU Wai-keung, Paul



委員

Member

楊超發醫生

Dr YEUNG Chiu-fat, Henry



委員

Member

楊協和醫生

Dr YEUNG Hip-wo, Victor



委員

Member

葉秀華女士, JP

Ms YIP Sau-wah, Lisa, JP



委員

Member

袁少林先生

Mr YUEN Siu-lam

2.1.3 投訴委員會的職能

《條例》第 73 條訂明，投訴委員會的職能如下：

- 就私營醫療機構的投訴管理政策，向署長提供意見；
- 接收和考慮對機構投訴；
- 就關乎對機構投訴的事宜，向署長作出建議，包括是否向有關的私營醫療機構採取規管行動；
- 在適當的個案中，將該投訴轉介予相關的規管機構，以作出跟進行動；
- 就任何改善措施，向私營醫療機構作出建議；
- 將處理對機構投訴時所帶出的規管問題，向署長報告；
- 定期發表摘要報告；及
- 向公眾宣傳如何作出投訴。

2.2 投訴委員會的小組

投訴委員會轄下設有初步處理小組和個案小組，分別支援投訴委員會對機構投訴進行初步處理，及決定對機構投訴的指控是否成立。

2.1.3 Functions of the Complaints Committee

The functions of the Complaints Committee as set out in section 73 of the Ordinance are as follows:

- to advise the Director on the policies on complaints management for PHFs;
- to receive and consider facility complaints;
- to make recommendations to the Director on matters relating to facility complaints, including whether to take any regulatory action against the PHFs concerned;
- to refer, in appropriate cases, facility complaints to regulatory authorities for any follow-up action;
- to make recommendations to PHFs on any improvement measures;
- to report to the Director any general regulatory issue arising from the facility complaints;
- to publish summary reports on a regular basis; and
- to publicise how complaints may be made to the public.

2.2 Panels of the Complaints Committee

Two types of panels, namely Preliminary Processing Panel (“PPP”) and Case Panel (“CP”), are set up under the Complaints Committee to support the Committee in preliminary processing of the facility complaints and in deciding whether the allegations in the facility complaints are substantiated respectively.

2.2.1 初步處理小組的組成和職能

根據《條例》，主席於二零二一年委任由五名投訴委員會委員組成（當中須包括最少一名業外委員）的初步處理小組，任期一年。

初步處理小組的成員（於二零二一年十二月三十一日）如下：

陳永佳先生

鄭荔英教授

郭晶強先生, SBS, FSDSM

廖偉明醫生

劉西恩醫生

初步處理小組考慮對機構投訴的所有相關資料，就初步處理有關投訴的結果，向投訴委員會提交報告，特別是關於是否委出個案小組。《條例》第 84(2) 條訂明，投訴委員會可於以下情況拒絕委出個案小組：

- (i) 投訴的事項並非關於該私營醫療機構有否違反《條例》或其相關實務守則；
- (ii) 投訴於相關事件發生後2年後才作出；
- (iii) 匿名投訴，或投訴人的身分不明，或投訴人無法聯絡；
- (iv) 是項投訴關乎商業事宜；

2.2.1 *Composition and Functions of Preliminary Processing Panel*

Pursuant to the Ordinance, a PPP was appointed by the Chairperson which consisted of five Complaints Committee members (including at least one lay member) in 2021 for a term of one year.

Membership of the PPP (as at 31 December 2021) are set out below:

Mr CHAN Wing-kai

Professor CHEING Lai-ying, Gladys

Mr KWOK Jing-keung, SBS, FSDSM

Dr LIU Wai-ming, Haston

Dr LOW Say-woon, John Matthew

The PPP will consider all related information about the facility complaint and report to the Complaints Committee on the result of preliminary processing of the facility complaint, in particular whether to appoint a CP. The Complaints Committee may refuse to appoint a CP under the following circumstances as stipulated in section 84(2) of the Ordinance:

- (i) the facility complaint is not related to compliance with the Ordinance or the related code of practice;
- (ii) the facility complaint is made two years or later after the subject event happened;
- (iii) the facility complaint is made anonymously or the complainant cannot be identified or traced;
- (iv) the facility complaint relates to a commercial matter;

- (v) 投訴的事宜已轉介予死因裁判官，或死因裁判官正考慮該事宜；
- (vi) 投訴人已就同一事宜，已提出法律程序；或
- (vii) 有關對機構投訴為瑣屑無聊或缺理據。

2.2.2 個案小組的組成和職能

個案小組由召集人及二或四名其他非初步處理小組的投訴委員會委員組成（當中須包括最少一名屬註冊醫生或註冊牙醫及最少一名業外委員），該等成員須由投訴委員會主席委任。於二零二一年，共委出六個個案小組。

個案小組將根據收集到的資料決定投訴中的指控是否成立。如個案小組認為有關投訴成立，個案小組可適當地在向投訴委員會提交的報告中，作出一項或多於一項以下的建議：

- (i) 將該投訴轉介予署長，以評估有關私營醫療機構違反牌照規定的情況，以及針對該機構的任何必要規管行動；
- (ii) 將該投訴轉介予另一規管機構，以調查該投訴，以及作任何跟進行動；
- (iii) 就任何改善措施，向有關私營醫療機構提供意見；及
- (iv) 將有關個案的事實所帶出的任何規管問題，或個案小組在考慮該機構投訴時所作的觀察，向署長報告。

- (v) the subject matter of the facility complaint has been referred to, or is being considered by, the coroner;
- (vi) the complainant has instituted legal proceedings for the same subject matter; or
- (vii) the facility complaint is frivolous or groundless.

2.2.2 Composition and Functions of Case Panel

A CP consists of a convener and two or four members, who are not PPP members, from the Complaints Committee (including at least one registered medical practitioner or registered dentist and one lay member) appointed by the Chairperson. In 2021, a total of six CP was appointed.

The CP will, in accordance with the information gathered, decide whether the allegations in the complaints are substantiated, and make one or more of the following recommendations as appropriate in its report to the Complaints Committee if the CP finds the facility complaint is substantiated:

- (i) refer the facility complaint to the Director for assessment of any breach of a licensing requirement by the PHF and any necessary regulatory action against the facility;
- (ii) refer the facility complaint to another regulatory authority for investigation and any follow-up action;
- (iii) advise the PHF on any improvement measures; and
- (iv) report to the Director any regulatory issue arising from the case or the CP's observations during consideration of the facility complaint.

第三章

Chapter 3

投訴處理機制

Complaints Handling Mechanism

3.1 兩層投訴管理制度

第一層

在兩層的投訴管理制度下處理對機構投訴，私營醫療機構的持牌人須設立投訴處理程序，在其服務提供者的層面接受、處理和回應公眾對該機構的投訴。

服務使用者的任何意見、不滿或投訴應先由相關持牌私營醫療機構處理。

第二層

在有關私營醫療機構處理該投訴後，如投訴人對其處理及回覆仍感到不滿，可向投訴委員會作進一步投訴。

投訴委員會在處理對機構投訴時，會審視該機構有否遵守《條例》及其相關實務守則，以考慮有關投訴是否成立。

3.1 Two-tier Complaints Management System

Tier One

Under the two-tier complaints management system in handling facility complaint, the licensee of a PHF is required to put in place a complaints handling procedure for receiving, managing and responding to complaints that are against the PHF.

It is recommended that feedbacks, dissatisfactions or complaints from service users should first be handled by the licensed PHFs.

Tier Two

If the complainant is still not satisfied with the handling and reply of the PHF concerned, the complainant may then make a further complaint to the Complaints Committee.

The Complaints Committee, when handling a facility complaint, will examine if the said PHF has complied with the Ordinance and the relevant code of practice to consider whether the complaint is substantiated.

3.2 投訴處理程序

在調查及考慮投訴時，投訴委員會會審視所有相關資料，包括投訴人提交的資料、有關私營醫療機構的記錄和報告及專家意見等。調查完成後，投訴委員會會以書面回覆投訴人有關投訴委員會的決定。

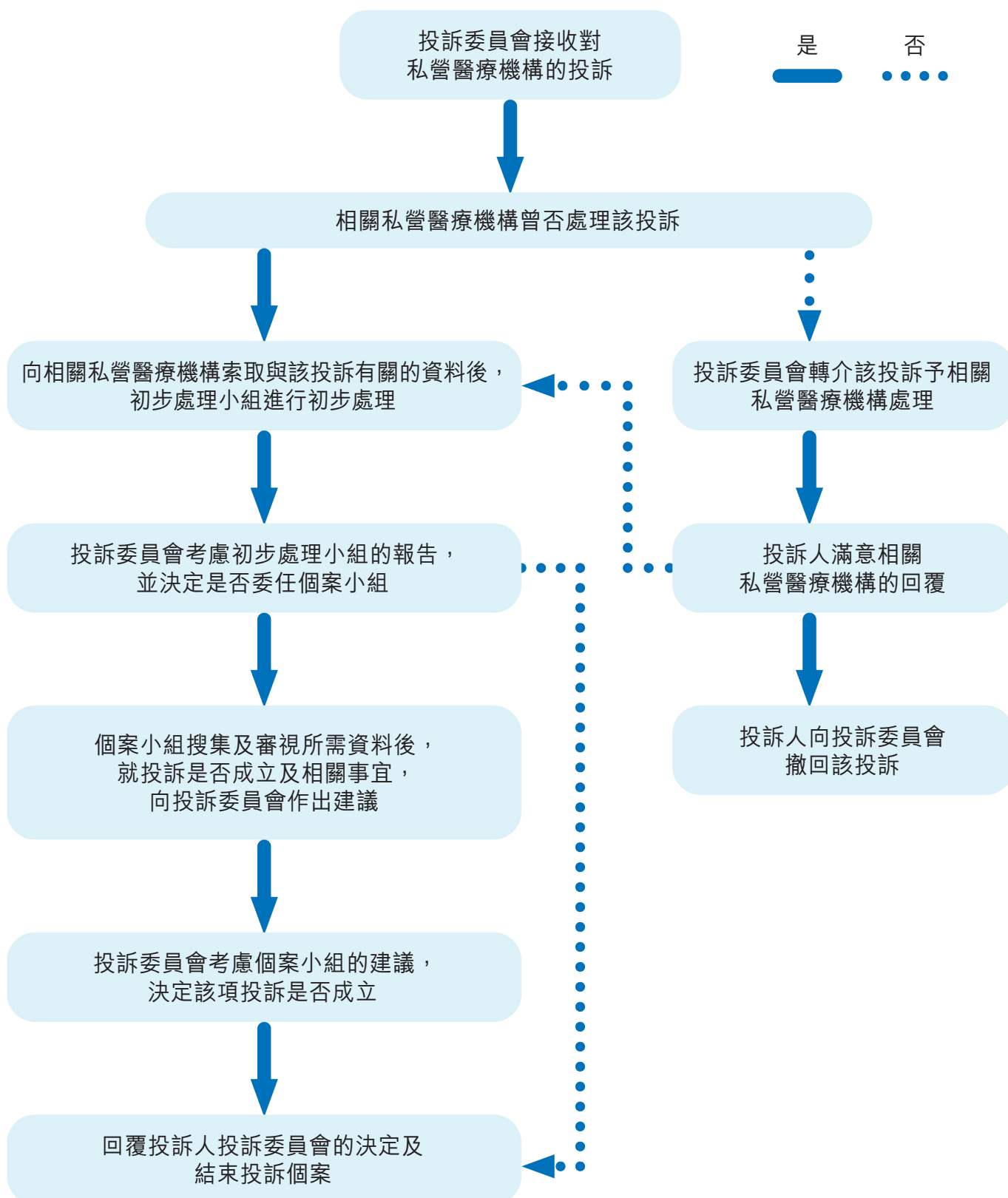
如投訴成立，投訴委員會會作出適當的跟進行動，例如，投訴委員會可將該投訴轉介予衛生署就該機構作出所需的規管行動。如有需要，投訴委員會可就任何改善措施，向有關私營醫療機構提出建議。

3.2 Complaints handling procedures

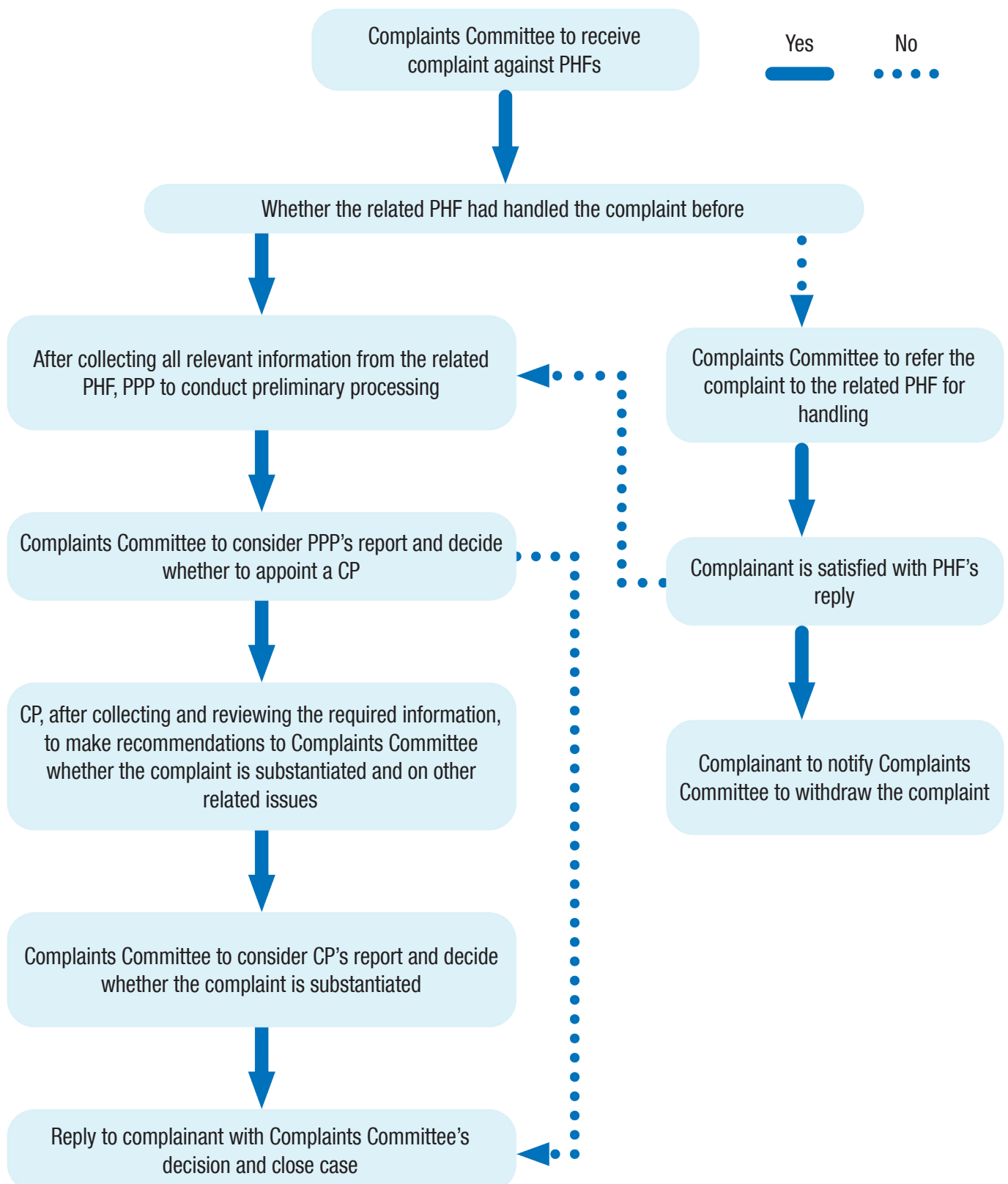
In investigating and considering complaints, the Complaints Committee will examine all the relevant information including the information provided by the complainant, records and reports of the PHF concerned and professional opinions etc. Upon completion of investigation, the Complaints Committee will inform the complainant in writing of its decision.

If the complaint is substantiated, the Complaints Committee will take follow-up actions as appropriate. For example, the Complaints Committee may refer the case to the Department of Health for any necessary regulatory action against the PHF, if appropriate. Whenever required, the Complaints Committee may make recommendations to PHFs on any improvement measures.

投訴委員會對私營醫療機構的投訴處理程序概覽如下：



An overview of the complaints handling procedures of the Complaints Committee is illustrated below:



第四章 Chapter 4

投訴委員會在過往一年的工作 Work of the Complaints Committee in the past year

4.1 投訴委員會工作的概覽

於二零二一年，投訴委員會接到 22 宗對持牌私營醫療機構的投訴，當中 21 宗為對私家醫院的投訴及一宗為對日間醫療中心的投訴。在本年度內，投訴委員會亦接到 173 宗查詢。

在該年內，初步處理小組及個案小組各舉行了六次會議考慮投訴個案。截至二零二一年十二月三十一日，投訴委員會完成處理九宗投訴，包括五宗已考慮並總結的個案，以及四宗經初步處理後不獲進一步考慮的個案。另外，兩宗個案的投訴人在投訴委員會總結相關個案前撤回所提出的投訴。其餘的 11 宗投訴仍在考慮中。

4.1 Overview of the work of the Complaints Committee

In 2021, the Complaints Committee received 22 complaints against licensed PHFs. Amongst them, 21 cases were against private hospitals and one case was against a day procedure centre. The Complaints Committee also received 173 enquiries during the year.

A total of six PPP meetings and six CP meetings were held in the year to consider the complaint cases. As at 31 December 2021, the Complaints Committee completed processing nine cases, including five considered and concluded cases, and four dismissed cases after preliminary processing. In addition, two cases were withdrawn by the complainants before the cases were concluded by the Complaints Committee. The remaining 11 cases are still under consideration.

在二零二一年內總結的五宗個案中，由於投訴委員會沒有發現私營醫療機構違反《條例》或其相關實務守則的規定，全部個案被決定為“不成立”。在調查個案期間，審查所收集的資料後，投訴委員會發現大部分投訴的主要原因是由於誤解或溝通不善。七宗投訴個案（包括兩宗投訴人在投訴委員會作出決定前撤回投訴的個案）所涉及的私營醫療機構，均獲投訴委員會書面提供改善措施的建議，以避免日後發生同類事件。

在處理投訴的過程中，投訴委員會發現兩宗個案所涉及的私營醫療機構懷疑未有遵從私家醫院實務守則的一項條款。儘管相關事宜不屬投訴事項的一部分，投訴委員會已根據《條例》第 73(1)(f) 條，就上述個案帶出的規管問題，向署長報告。

有關接到和已總結的投訴的統計摘要，載於[附錄](#)。

4.2 案例說明

投訴處理系統是服務評估的有用工具。投訴委員會相信在私營醫療機構之間分享投訴個案的經驗，將有助促進學習和服務提升。在這方面，以下是投訴委員會就兩個個案摘要作出的觀察：

Amongst the five cases concluded in 2021, all of them were decided to be ‘not substantiated’ as the Complaints Committee did not find the PHF breaching any requirement under the Ordinance or relevant code of practice. On examining the information gathered during the investigation of the cases, the Complaints Committee found that the main cause of most of them was due to misunderstanding or miscommunication. The PHFs concerned in seven complaint cases (including two cases which the complainants withdrew the complaint cases before the decision was made by the Complaints Committee) were given written advice on improvement measures to avoid similar incidents in the future.

In the course of handling the complaints, the Complaints Committee has detected and reported two cases to the Director on regulatory issues in accordance with section 73(1)(f) of the Ordinance for suspected non-compliance with a requirement in the Code of Practice for Private Hospitals, though the matters were not part of the complaint issues.

Summary statistics on complaints received and concluded are at the [Appendix](#).

4.2 Case illustrations

Complaint handling system is a useful tool for service evaluation. The Complaints Committee believes that sharing of experiences in complaint cases among PHFs would be useful in facilitating learning and service improvement. In this regard, the following are summary of two cases to illustrate the observations of the Complaints Committee:

個案一：

病人與私營醫療機構的溝通落差

Case 1 :

Communication gap between patient and PHF

背景

投訴人於一家私營醫療機構接受了全身麻醉的手術。在手術完成當晚，投訴人出現血壓低和呼吸困難的情況。經該私營醫療機構的處理後，投訴人的情況穩定下來並在五天後出院。投訴人在出院時被告知其診斷為“吸入性肺炎”，而此情況很可能與全身麻醉有關。

投訴人隨後向該私營醫療機構對涉事的麻醉科專科醫生作出投訴，並要求私營醫療機構為此併發症作出詳細的解釋。

該私營醫療機構收到投訴後作出調查，包括邀請一位未有參與護理過程的放射科專科醫生對投訴人住院期間進行的造影檢查作獨立的審視。該私營醫療機構最終的結論指診斷應為一個比較罕見與全身麻醉相關的併發症，即“拔喉後肺水腫”，而非“吸入性肺炎”，並回覆投訴人。

投訴人不滿此解釋並決定向投訴委員會作出投訴。

Background

The complainant underwent a surgery under general anaesthesia in a PHF. During the night after the surgery, the complainant presented with low blood pressure and breathing difficulty. Upon management by the PHF, the complainant's condition was stabilized and was discharged five days later. The complainant was informed a diagnosis of “aspiration pneumonia” during discharge, and was told that it was likely related to the general anaesthesia.

The complainant subsequently lodged a complaint to the PHF against the anaesthetist and requested a detailed explanation on the occurrence of the complication.

The PHF conducted an investigation upon receiving the complaint, including an independent imaging review by a radiologist who was not involved in patient care for the case. The PHF eventually concluded that instead of “aspiration pneumonia”, the diagnosis was “extubation pulmonary oedema”, a rare but known complication of general anaesthesia and replied to the complainant accordingly.

The complainant was dissatisfied with the explanation given and lodged a complaint with the Complaints Committee.

調查及評估

在審視相關資料後，投訴委員會注意到投訴的主要原因是投訴人並非醫學專業人員，難以理解“拔喉後肺水腫”等醫學專有名詞，這是一個比較罕見但已知的與全身麻醉相關的併發症。在審視臨時診斷的變化時，未有向投訴人提供較容易明白的解釋，可能給人誤診的印象，而引致不滿。

觀察和學習要點

由於沒有證據顯示違反《條例》及其相關實務守則，投訴個案不成立。投訴委員會建議私營醫療機構應改善與投訴人及其家屬的溝通，提供更詳盡的解釋，以讓一般服務使用者更容易理解，並盡量避免使用醫學專有名詞。

Investigation and Assessment

After reviewing the relevant information, it was noted that the complaint was mainly due to the difficulty of the patient, who was a lay person, to understand medical jargons like “extubation pulmonary oedema” which is a rare but known complication of general anaesthesia. The lack of explanation in language suitable for consumption by a lay person on the change of the provisional diagnosis upon review might give the impression of misdiagnosis and thus leading to the dissatisfaction.

Observations and learning point

The complaint case was not substantiated as there was no evidence suggesting non-compliance with the Ordinance and relevant code of practice. The Complaints Committee recommended that the PHF should improve communication with complainants and their family members by providing more detailed explanations in a way that are easier for lay person to understand and avoid use of medical jargon as far as possible.

個案二：
價目資料透明度

背景

投訴人因為暈眩於一家私營醫療機構接受住院治療，其後於該私營醫療機構的門診部覆診。在兩次治療中，投訴人均獲處方兩種相同的藥物。在檢查賬單後，投訴人發現該兩種藥物在住院的價格高門診接近一倍。

投訴人隨後向該私營醫療機構就上述收費差異作出投訴。

該私營醫療機構收到投訴後作出調查，並回覆投訴人，解釋其定價策略，並指由於住院病人和門診病人之藥物處理程序有別，因此收費有所不同。在投訴人要求再加以解釋後，該私營醫療機構向投訴人闡述其設定及評估定價策略的機制。

投訴人不滿該私營醫療機構的解釋並決定向投訴委員會作出投訴。

Case 2 :
Transparency on price information

Background

The complainant received in-patient care in a PHF because of dizziness, and attended an out-patient follow-up in the PHF after discharge. In both occasions, the prescriptions included two same medications. Upon examining the bills, the complainant discovered that the in-patient charges for the two medications were almost double when compared to the out-patient charges.

The complainant lodged a complaint with the PHF regarding the price discrepancy.

The PHF conducted an investigation upon receiving the complaint, and replied to the complainant with its pricing strategy and explained that the price discrepancy reflected the differences in medication processing between in-patient and out-patient settings. In response to the complainant's subsequent requests for further explanation, the PHF elaborated on its mechanism for setting and estimating its pricing strategy.

The complainant was dissatisfied with the explanation of the PHF and lodged a complaint with the Complaints Committee.

調查及評估

在審視相關資料後，投訴委員會認為在住院部和門診部的相關價格差異難免與病人期望有落差。

建議

由於該私營醫療機構已於入院前向投訴人提供是次入院的費用估算，及在可行的情況下將醫院收費的資料提供給病人參考，有關投訴個案不成立。投訴委員會提醒私營醫療機構在住院部和門診部對相同藥物的收費差異，難免與病人期望有落差，私營醫療機構可提醒病人其收費政策以更好地作出期望管理。

Investigation and Assessment

Upon reviewing relevant information, it was noted that such discrepancy in medication charges in in-patient and out-patient settings might not meet patients' expectations.

Recommendations

The complaint case was not substantiated as the PHF had provided an estimate of charges to the complainant before admission and informed patients of the charges of service whenever practicable. The Complaints Committee reminded the PHF that discrepancy in charges of the same medication for in-patient and out-patient settings might not meet patients' expectation and the PHF might alert patients of this pricing policy to better manage the expectation.

4.3 與業界及市民的溝通

過去一年，我們在處理投訴方面與私營醫療機構的溝通大致順暢和有效。在某些情況下，投訴委員會需額外要求相關澄清和補充資料，因而延長了處理時間。私營醫療機構可提供全面和相關的資料，以便利投訴委員會更有效率地處理、考慮和總結投訴個案。

為了讓市民更了解投訴委員會的工作及《條例》下訂立的兩層投訴管理制度，投訴委員會的網站 (www.ccphf.org.hk/CCIntro/tc) 已於二零二零年十二月正式啟用。投訴委員會亦製作了中文及英文的宣傳單張。

投訴委員會網站內的宣傳單張及常見問題已翻譯為六種少數族裔語言。

來年，投訴委員會將會繼續其宣傳工作，例如製作短篇動畫，並將會於不同渠道發放更多資訊，讓市民了解投訴委員會的工作。

4.3 Communication with the PHFs and the Public

During the past year, our communication with the PHFs in complaint handling was in general smooth and effective. Additional requests by the Complaints Committee for clarification and supplementary information were required which prolonged the processing time in some cases. PHFs are advised to provide comprehensive and relevant information to facilitate efficient complaints handling, consideration and conclusion of cases by the Complaints Committee.

To facilitate the public in understanding the work of the Complaints Committee and the two-tier complaints management system established under the Ordinance, the website of the Complaints Committee (www.ccphf.org.hk/CCIntro/en) was launched in December 2020. A leaflet of the Complaints Committee in Chinese and English version was also produced.

The leaflet and frequently asked questions on the website of the Complaints Committee have been translated into six ethnic minority languages.

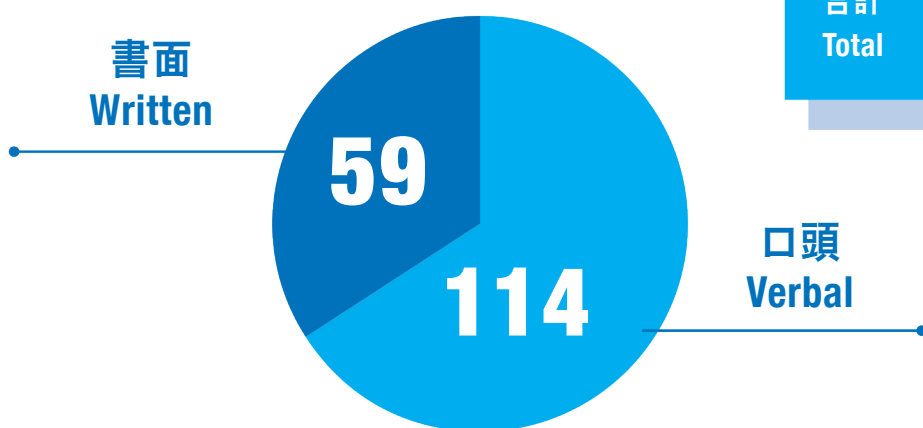
In the coming year, the Complaints Committee would continue with its publicity work such as video clips and disseminate more information via different channels to the public on the work of the Complaints Committee.

附錄

Appendix

1. 查詢數字

Number of Enquiries



接到的查詢數目

Number of enquiries received

合計
Total

173

2. 投訴數字

Number of Complaints

被投訴的機構類別
Types of facilities
complained against

私家醫院
Private Hospital

日間醫療中心
Day Procedure Centre



接到的個案數目

Number of cases received

合計
Total

22

3. 2021 年收到的個案中投訴事宜的類別

Categories of Complaints Issues for Cases received in 2021



* 一宗投訴可能涉及多個類別。

One complaint may involve more than one category.

4. 個案進度

Progress of Cases

個案進度 Processing of cases	個案數目 Number of cases
(a) 接到的個案 Cases received	22
(b) 由上年度轉入的個案 Case brought forward from last year	不適用 Not applicable
(c) 已考慮並總結的個案 Considered and concluded	5
(d) 經初步處理後不獲進一步考慮的個案 Dismissed after preliminary processing	4
(e) 投訴人主動撤回的個案 Withdrawn by the complainant	2
(f) 正在考慮中並會轉撥下年度的個案 Cases under consideration and carried forward = (a) + (b) — (c) — (d) — (e)	11

5. 已總結個案 (表 4 中第 (c) 項) 的類別

Categories of Complaints Issues of Concluded Cases (Item (c) in Table 4)

已總結個案的投訴事宜類別
Categories of issues of
concluded cases

次數 *
Number of counts*

人手
Staffing

0

房舍
Accommodation

0

設備
Equipment

1

員工表現
Staff Performance

1

專業行為
Professional Practices

1

收費
Charges

1

行政程序
Administrative Procedures

1

溝通
Communication

3

其他
Others

0

* 一宗投訴可能涉及多個類別。

One complaint may involve more than one category.

6. 初步處理小組和個案小組的工作統計數字

Work Statistics of Preliminary Processing Panel and Case Panel

會議類別 Types of meetings	會議數目 Number of meetings	考慮的個案數目 Number of cases considered
初步處理小組會議 Preliminary Processing Panel Meeting	6	13
個案小組會議 Case Panel Meeting	6	8

