

# 2022 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

我很榮幸獲委任為私營醫療機構投訴委員會（下稱“投訴委員會”）首屆主席，並帶領投訴委員會投入運作超過兩年。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。投訴委員會向私營醫療機構提出有關改善措施的建議，以及就關於對機構投訴的事宜，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。

對投訴委員會來說，剛過去一年跟前年同樣是充實的，工作亦極具意義。隨著社會迅速發展和醫療技術持續進步，市民對醫療服務的期望正不斷提高。來年，投訴委員會除了繼續以改善私營醫療機構的服務及提升病人安全為主要目標外，亦會致力促進私營醫療機構與病人之間的了解和溝通，以及進一步提高公眾對兩層投訴管理制度的認識。

It is my honour to be appointed as the first Chairperson of the Committee on Complaints against Private Healthcare Facilities (“Complaints Committee”) and have led the Complaints Committee to operate for more than two years. The Complaints Committee, which is a statutory committee established under the Private Healthcare Facilities Ordinance (“the Ordinance”), 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 concerned.

The past year, like the preceding year, has been fulfilling for the Complaints Committee, which has been laden with meaningful work. Given the rapid development and advancement of the society and medical technology, the public nowadays have ever-higher expectation on healthcare services. In the year ahead, while continuing its efforts to improve services of PHFs and enhance patient safety as its key objectives, the Complaints Committee will also aim to improve the understanding and communication between PHFs and patients, and further raise public awareness of the two-tier complaints management system.



政府在《條例》下設立了兩層的投訴管理制度，以處理對機構投訴。私營醫療機構的持牌人須訂立投訴處理程序，在其服務提供者的層面接受、處理和回應投訴。在過去兩年處理投訴的過程中，我們留意到有不少投訴跟私營醫療機構的職員和病人之間的溝通不善或誤解有關。為使私營醫療機構能妥善處理投訴，投訴委員會將繼續致力改善私營醫療機構處理投訴的技巧。我們會透過本年度報告第五章內的案例說明和分析，分享有關處理投訴的一些經驗和對私營醫療機構作出的建議。我們相信藉著這些經驗分享帶出的學習要點，將有助私營醫療機構改善其服務。

就一些投訴事宜而言，另類爭端排解可能是投訴人與私營醫療機構達致雙贏的一個可行方法。其實，《條例》已授權投訴委員會可在合適的情況下提議投訴人就有關爭議尋求另類爭端排解。為使投訴委員會能夠有效作出有關建議，我們透過參考文獻、最佳的海外實踐方案及專家意見，正研究在《條例》的框架下對另類爭端排解之應用。我們相信另類爭端排解為解決問題帶來好處，同時避免加劇雙方在過程中出現的緊張關係。

The two-tier complaints management system for handling facility complaints was established under the Ordinance, which requires the licensee of a PHF to put in place a complaints handling procedure for receiving, managing and responding to complaints at the PHF level. During complaints handling over the past two years, we observed that quite a number of complaints were related to miscommunication or misunderstanding between PHFs' staff and patients. To facilitate PHFs in handling the complaints properly, the Complaints Committee will continue its effort to improve PHFs' complaints handling skills. We will present some case illustrations and analysis in Chapter 5 of this annual report to share our experience in complaints handling and recommendations for the PHFs. We believe that the learning points provided through such experience sharing would contribute to service improvement of PHFs.

Alternative dispute resolution ("ADR") may be a useful way out for the complainants and PHFs to reach a win-win outcome for some complaint issues. In fact, the Ordinance empowers the Complaints Committee to advise the complainant to seek the ADR under suitable conditions. To facilitate the making of such recommendations by the Complaints Committee, we are studying the application of ADR within the framework provided under the Ordinance through considering literature, best overseas practices and expert opinion. We believe that ADR offers the benefits of resolving issues while avoiding escalating tension in the process for both parties.



最後，我衷心感謝投訴委員會所有委員對投訴委員會的工作所作出的重大貢獻。他們的努力，以及公平且有見地的建議鞏固了獨立和不偏不倚的投訴處理機制。我亦必須感謝秘書處職員在處理對機構投訴的工作上不懈的支持。展望未來，我們會繼續秉持專業和公正的態度處理每一宗投訴，致力促進私營醫療機構服務的提升和病人安全。

Last but not least, I would like to extend my heartfelt appreciation to all our members for their considerable contributions to the work of the Complaints Committee. Their endeavours, and fair and insightful recommendations underpinned the independent and impartial complaints handling mechanism. I must also thank the Secretariat for their unfailing support in our work of handling facility complaints. Looking forward, we will continue to handle every complaint in a professional and impartial manner, aiming to bring forth service improvement of PHFs and enhancement of patient safety.

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二份年報，載錄投訴委員會由二零二二年一月一日至十二月三十一日內的工作。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，以促進私營醫療機構就投訴個案的經驗學習和服務提升。

《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對機構投訴的工作。

投訴委員會就對機構投訴的事宜上，考慮該機構有否遵守《條例》及相關實務守則。儘管投訴委員會沒有司法權力去處理涉及註冊醫護專業人員的專業操守事宜的投訴，但在適當的個案中，仍會將該投訴轉介予相關專業規管機構採取行動。

This annual report, covering the period from 1 January to 31 December 2022, is the second 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 experience 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 (DPCs) 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 facility complaints since 1 January 2021 when the hospital licences and the first batch of day procedure centre licences under the Ordinance took effect.

The Complaints Committee considers facility complaints on matters related to their compliance with the Ordinance and relevant codes of practice. While the Complaints Committee has no jurisdiction over complaints related to matter of professional conduct of registered healthcare professional, those complaints would be referred to the relevant professional regulatory authorities for action as appropriate.



## 第二章 Chapter 2

# 投訴委員會的委員及職能

## Membership and Functions of Complaints Committee

### 2.1 投訴委員會

#### 2.1.1 投訴委員會的組成

根據《條例》，投訴委員會的委員由醫務衛生局局長委任，任期為三年。投訴委員會由註冊醫生／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。

### 2.1 Complaints Committee

#### 2.1.1 Composition of Complaints Committee

In accordance with the Ordinance, members of the Complaints Committee are appointed by the Secretary for Health 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2022年12月31日)

2.1.2 Membership of Complaints Committee  
(as at 31 December 2022)



**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**

**陳清霞議員, GBS, JP**

**Dr the Honourable CHAN Ching-har, Eliza, GBS, 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 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 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

由主席委任的初步處理小組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，任期一年。

初步處理小組的成員（於二零二二年十二月三十一日）如下：

陳永佳先生

郭晶強先生, SBS, FSDSM

黎卓先教授

廖偉明醫生

楊超發醫生（由二零二二年七月一日起）

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；
- (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。

### 2.2.1 Composition and Functions of Preliminary Processing Panel

A PPP is appointed by the Chairperson which consists of five Complaints Committee members, including at least one lay member, for a term of one year.

Membership of the PPP (as at 31 December 2022) are set out below:

Mr CHAN Wing-kai

Mr KWOK Jing-keung, SBS, FSDSM

Professor LAI Cheuck-seen, Edward

Dr LIU Wai-ming, Haston

Dr YEUNG Chiu-fat, Henry (from 1 July 2022 onwards)

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) 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 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。

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。

### 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.

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紀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，例如在適當的個案中，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。

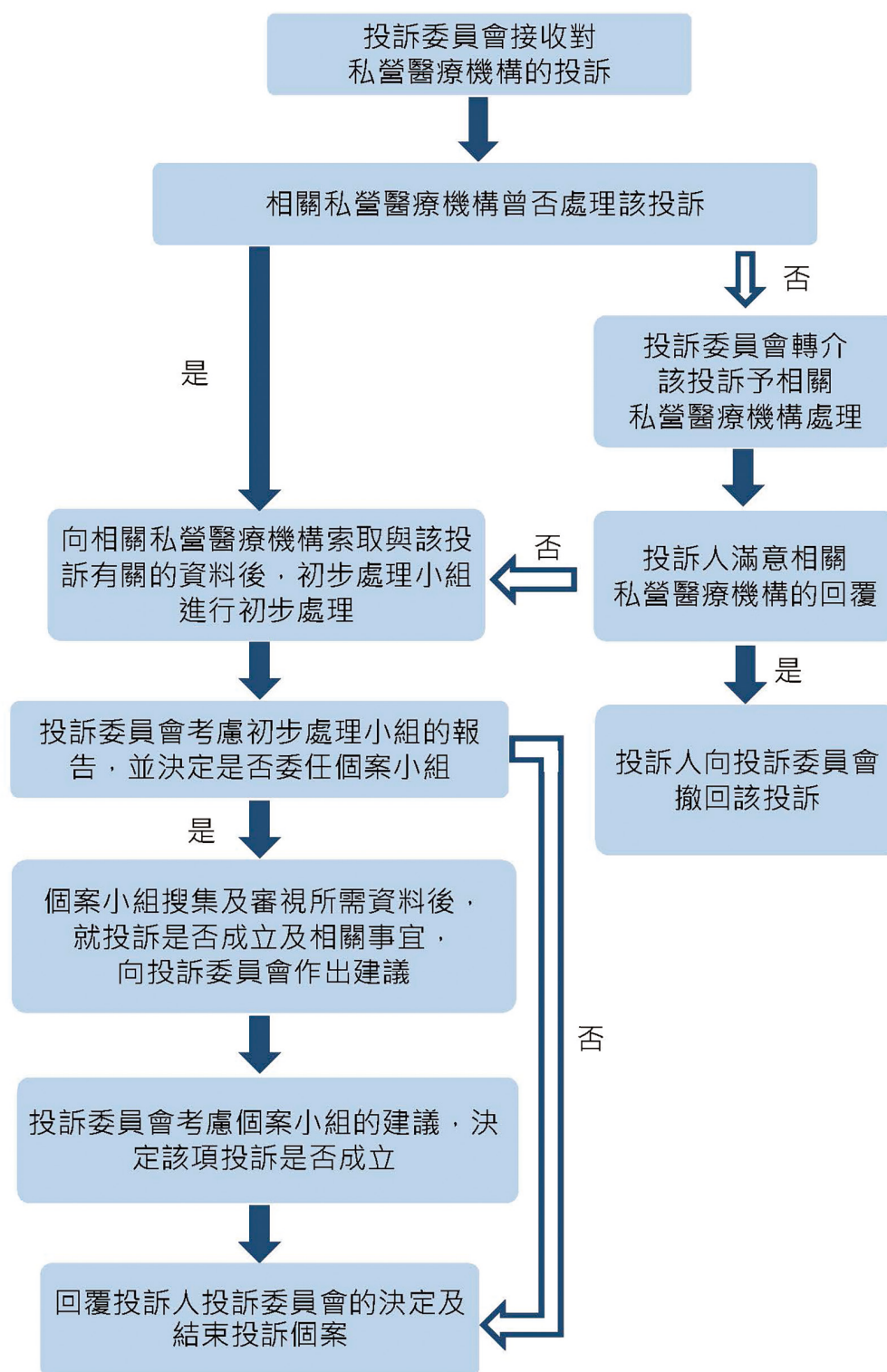
### 3.2 Complaints Handling Procedures

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.

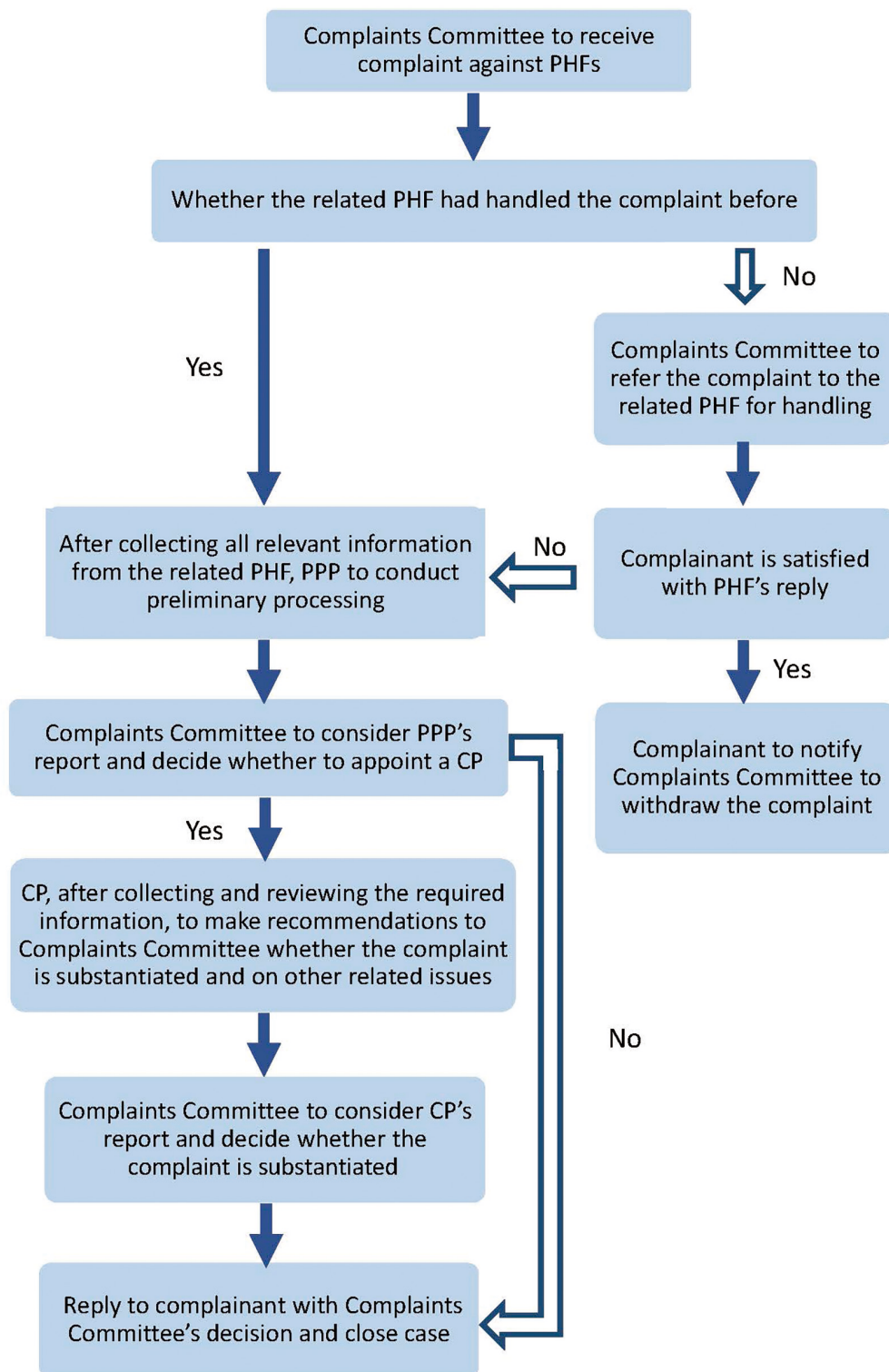
If the complaint is substantiated, the Complaints Committee will take follow-up actions as appropriate. For example, the Complaints Committee may refer the case to the Department of Health for any necessary regulatory action against the PHF, if appropriate. Whenever required, the Complaints Committee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

### 4.1 投訴委員會工作的概覽

於二零二二年，投訴委員會收到24宗對持牌私營醫療機構的投訴（20宗為對私家醫院的投訴及四宗為對日間醫療中心的投訴），而去年則收到22宗投訴（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）。此外，投訴委員會在二零二二年處理了212宗查詢，而去年則處理了173宗查詢（請參閱附錄內之統計圖表）。查詢數字的增加可能與公眾對投訴委員會工作的認識有所提高有關。

在二零二二年，初步處理小組及個案小組分別舉行了12次及八次會議以考慮投訴個案；而在已考慮並總結的16宗投訴個案中，兩宗個案的投訴成立、五宗個案的投訴不成立、八宗個案經初步處理後不獲進一步考慮，以及一宗個案在投訴委員會總結相關個案前投訴人已撤回有關投訴。截至二零二二年十二月三十一日，投訴委員會正在處理的個案有19宗。

### 4.1 Overview of the Work of Complaints Committee

In 2022, the Complaints Committee received 24 complaints against licensed PHFs (20 cases were against private hospitals and four cases were against DPCs) as compared to 22 for the previous year (21 were complaints against private hospitals and one was against DPC). The Complaints Committee also handled 212 enquiries during the year compared to 173 for the previous year (please refer to the statistics in the Appendix). The increase in number of enquiries may suggest an increase in public awareness of the work of the Complaints Committee.

A total of 12 PPP meetings and eight CP meetings were held in the year to consider the complaint cases. Amongst the 16 considered and concluded cases in 2022, two cases were substantiated, five cases were not substantiated, eight cases were dismissed after preliminary processing, and one case was withdrawn by the complainant before the case was concluded by the Complaints Committee. As at 31 December 2022, 19 cases were under consideration by the Complaints Committee.

就遵從實務守則的事項上，投訴委員會根據條例將三宗個案轉介予署長作所需的跟進行動，並向12宗投訴個案所涉及的私營醫療機構提出改善措施建議，以避免日後發生同類事件。

有關收到和已總結的投訴的統計摘要載於附錄。

## 4.2 加強宣傳

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，我們製作了相關宣傳單張及常見問題，並翻譯成六種少數族裔語言。有關資料已上載於投訴委員會的網站([www.ccphf.org.hk/CCIntro/tc](http://www.ccphf.org.hk/CCIntro/tc))內。

為了讓市民更了解投訴委員會的架構、服務範圍及投訴程序，我們於二零二二年八月將三套備有粵語、英語和普通話版本的動畫短片上載至投訴委員會的網站。來年，投訴委員會會繼續加強其宣傳工作，包括將上述動畫短片翻譯成六種少數族裔語言，以接觸更多不同群體。

In accordance with the Ordinance, the Complaints Committee referred three cases to the Director for follow up actions as required concerning compliance issue on the code of practice and made recommendations to the PHFs involved in 12 complaint cases on improvement measures to avoid similar incidents in the future.

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

## 4.2 Enhanced Publicity

To facilitate the public in understanding the work of the Complaints Committee and the two-tier complaints management system established under the Ordinance, the corresponding leaflets and frequently asked questions with translation in six ethnic minority languages were available at the website of the Complaints Committee ([www.ccphf.org.hk/CCIntro/en](http://www.ccphf.org.hk/CCIntro/en)).

To let the public better understand the structure and scope of the Complaints Committee, as well as the complaints procedures, three sets of animated videos in Cantonese, English and Mandarin have been uploaded onto the website of the Complaints Committee in August 2022. In the coming year, the Complaints Committee will continue to enhance its publicity work, including translating the above animated videos in six ethnic minority languages to serve the needs of different populations.



### 4.3 投訴委員會大會及有關另類爭端排解的經驗交流

於二零二二年十二月舉行的投訴委員會大會上，李偉雄醫生以醫療機構另類爭端排解專家的身分應邀與委員交流及分享他在應用另類爭端排解於處理糾紛上的經驗。投訴委員會希望透過行使《條例》賦予的權力，於處理投訴的過程中引入另類爭端排解，能夠使投訴人與私營醫療機構達致雙贏的局面。此外，投訴委員會非常榮幸得到衛生署規管事務總監趙佩燕醫生出席是次大會。趙醫生在投訴委員會的工作上所給予的支持，實在是非常寶貴。

### 4.3 Meeting of the Complaints Committee and Experience Sharing on Alternative Dispute Resolution

At the meeting of the Complaints Committee held in December 2022, Dr LEE Wai-hung, Danny, an expert in ADR in healthcare settings, was invited to exchange and share experience in the use of ADR for dispute settlement. The Complaints Committee hopes that, by exercising the power provided under the Ordinance to introduce ADR in its complaints handling procedures, a win-win situation can be achieved between complainants and PHFs. Besides, the Complaints Committee was very honoured to have Dr CHIU Pui-yin, Amy, Controller, Regulatory Affairs of the Department of Health to attend the meeting. The support of Dr CHIU to the work of the Complaints Committee was most valuable.



講者李偉雄醫生（左二）於投訴委員會大會上與委員分享另類爭端排解的經驗。

Dr LEE Wai-hung, Danny, the speaker (second left) shared his experience in ADR with members of the Complaints Committee in the meeting.



委員與講者李偉雄醫生（前排左四）和衛生署規管事務總監趙佩燕醫生（前排右五）於交流會後合照。

Members, Dr LEE Wai-hung, Danny, the speaker (front row, fourth left) and Dr CHIU Pui-yin, Amy, Controller, Regulatory Affairs, Department of Health (front row, fifth right) took a group photo after the experience sharing session.

## 第五章 Chapter 5

# 案例說明及分析

## Case Illustrations and Analysis

### 案例說明及分析

憑藉過去一年在處理投訴個案，以及跟私營醫療機構及其服務使用者溝通所累積的經驗，投訴委員會得以更有效地向私營醫療機構給予有用的建議。我們會在這一章內就一些常見的地方分享我們的觀察，並透過案例闡釋從中汲取的經驗，希望能讓私營醫療機構更完善地處理投訴。

### Case Illustrations and Analysis

Over the past year, the experience in complaints handling and communication with PHFs and their service users have rendered us a better position to give useful advice to PHFs. In this chapter, we would share our observations in some common areas for betterment in handling complaints by PHFs, followed by cases illustrating the lessons learnt.



### 適時提供充分、準確和相關的資料

當收到對機構投訴後，投訴委員會會就投訴個案展開調查，以評估該私營醫療機構有否違反相關實務守則。在考慮投訴人提供的資料後，投訴委員會會告知私營醫療機構有關投訴的事宜，並要求該私營醫療機構就實務守則之相關要求提供資料，以有效地評估個案的情況是否符合相關要求。

私營醫療機構在提供資料時，若能緊記上述調查目的，集中提供能展示證據（如文件、紀錄和陳述等）的相關資料，將有助證明他們有否遵守實務守則之相關要求。此做法既可讓私營醫療機構避免糾纏於多番資料補充，從而節省回應的準備工作，亦使其能夠依從實務守則之要求適時回覆投訴委員會。過多與個案或實務守則無關的資料不會對個案調查帶來任何幫助，反而會導致浪費精力及延誤調查的不理想後果。

### Provision of Sufficient, Relevant and Accurate Information in a Timely Manner

Upon receipt of a facility complaint, the Complaints Committee would initiate investigation of the case to assess if non-compliance with the relevant codes of practice occurred. Having considered the information provided by the complainant, the Complaints Committee would inform the PHF of the complaint issues under investigation. The Complaints Committee would request the PHF to provide information corresponding to the relevant requirements under the code of practice that is useful to assess compliance having regard to the complaint issues.

In providing information, it would be helpful if PHF would bear in mind the above objective of complaints investigation and provide relevant information focusing on showing evidence (such as documents, records or statements, etc.) to substantiate their response on whether the relevant requirements under the codes of practice have been complied with. This would save PHF's effort of preparing response by avoiding engaging in multiple rounds of supplementary information. This would also enable the PHFs to reply to the Complaints Committee in a timely manner, which is a requirement under the codes of practice. Information that is excessive, irrelevant or unrelated to compliance with the codes of practice is not helpful but would lead to unnecessary efforts spent in investigation and the undesirable consequences of delay.



## 案例說明

投訴委員會相信從處理投訴個案中汲取的經驗，將有助私營醫療機構提升服務。為此，我們藉著以下四個案例帶出不同的學習要點：

### 個案一：過度倚賴科技—— 用藥安全

#### 背景資料

一名三歲的病人因急性支氣管炎入住一家私營醫療機構，並獲處方定量噴霧吸入劑。雖然該私營醫療機構設有電子系統以供職員在配發及施用藥物前檢查其有效日期，但一支當時已過期的吸入劑仍錯誤地被藥房配發到病房。病人在留醫期間合共施用了五劑量已過期的吸入劑。此外，該私營醫療機構在病人出院時，把該支已使用及過期的吸入劑給予病人家屬。

## Case Illustrations

The Complaints Committee believes that gaining experiences through complaints handling would be conducive to service improvement of PHFs. To this end, summaries of four cases highlighting different aspects of lessons learnt are provided below:

### Case 1: Over Reliance on Technology - Medication Safety

#### Background

A 3-year-old patient who was admitted to a PHF for acute bronchitis, was prescribed with an inhaler. Though an electronic system was in place at the PHF for checking the expiry date of medicines before dispensing and administration, an expired inhaler was wrongly dispensed by the pharmacy to the ward. A total of five doses of the expired inhaler were administered to the patient during hospital stay. Further, the used expired inhaler was given to the patient's family on his discharge.





### 調查及評估

投訴委員會在調查中發現，由於該私營醫療機構的員工在接收藥物時在系統輸入了不正確的有效日期，因而導致相關電子系統未能有效偵測及防止已過期的吸入劑被配發與施用。這正是相關員工在配發與施用藥物時，過度依賴該電子系統和忽略了人手檢查藥物的有效日期所致。

### 觀察及學習要點

儘管科技是一種有用的工具，但投訴委員會建議私營醫療機構亦不應忽略上述人手檢查之重要性，以確保藥物的安全配發。私營醫療機構亦應就員工遵守有關藥物配發及施用的政策和程序的情況定期進行審核，以強調人手檢查之重要性。

### Investigation and assessment

On investigation, it was found that the PHF's electronic system concerned failed to detect and prevent the expired inhaler from being dispensed and administered due to wrong input of its expiry date into the system upon receipt of the inhaler. There was over-reliance on the electronic system during dispensing and administration and manual checking of expiry date of drugs was overlooked by the staff concerned.

### Observation and learning points

The Complaints Committee recommended that while technology is a useful supporting tool, the PHFs should not overlook the importance of the said manual checking to ensure safe dispensing of drugs. Regular audits to ensure staff compliance with relevant policies and procedures on dispensing and administration of medicine should also be conducted to emphasise the importance of manual checking.



## 個案二：有效地推行一致的政策和程序

### 背景資料

一名病人因發燒及有痰到一家私營醫療機構求診，被診斷為患上肺炎及處方抗生素，並留下痰液樣本進行化驗。然而，病人於求診後未有預約覆診；及後病人因病情轉差而須於公立醫院留醫兩星期至康復出院。其妻子之後發現該痰液檢驗早在病人就診的三日後已有結果，但該私營醫療機構並未知會病人。其妻子認為該檢驗結果可能對公立醫院在治療病人方面有幫助，因而作出投訴。

## Case 2: Effective Implementation of Consistent Policies and Procedures

### Background

A patient who presented with fever and sputum, attended a PHF for consultation. He was diagnosed with pneumonia and was prescribed antibiotics, while his sputum sample was collected for testing. The patient did not make any follow-up appointment after the consultation. Subsequently, the patient was admitted to a public hospital due to deteriorating condition, and discharged on recovery after two weeks. The patient's wife later found out that the sputum test result was available three days after the consultation, but the PHF did not inform the patient of the result. The wife believed that the result might be helpful to the subsequent management of the patient at the public hospital, thus lodged a complaint.





### 調查及評估

調查發現，該私營醫療機構的相關政策訂明員工須在檢驗有結果時通知沒有預約覆診的病人到機構取回化驗報告，但機構給予員工的工作指示卻沒有提及該相關程序。由於私營醫療機構的政策及既定程序對處理化驗報告的方法不一致，因此導致病人在檢驗有結果後卻未被知會。

### 觀察及學習要點

投訴委員會建議私營醫療機構應定期檢視他們的政策和程序，以確保其內容是一致及最新的。此外，私營醫療機構亦應適當地透過定期培訓或審核使員工熟悉相關內容，以確保政策及程序得以有效推行。

### Investigation and assessment

Investigation revealed that the PHF had a policy for staff to notify patients with no follow-up appointment to collect the laboratory reports when available. However, the procedure was not included in the operation instructions to staff. The discrepancy between the policy and operational procedure has led to a failure in informing the patient of the availability of laboratory report.

### Observation and learning points

The Complaints Committee recommended that the PHFs should regularly review their policies and procedures to ensure they are consistent and up-to-date. Staff should also be conversant with them through regular training or audit, as appropriate, in order to ensure effective implementation.



### 個案三：有關政策及價目資料的溝通

#### 背景資料

一名病人因貧血被安排入住一家私營醫療機構接受輸血。由於入院前須出示2019冠狀病毒病核酸檢測之陰性結果，因此病人被安排在單人病房內接受檢測。後來，病人的檢測結果證實為陽性，該私營醫療機構遂安排病人出院。

投訴人因應病人2019冠狀病毒病核酸檢測的處理而產生了額外費用，包括單人房間、實驗室化驗和提供N95口罩等的收費，但病人最終卻在沒有接受治療下被安排出院；因而向投訴委員會作出投訴。

### Case 3: Communication on Policies and Price Information

#### Background

A patient was found to have anaemia and was arranged to be admitted for blood transfusion in a PHF. Since a negative test result for Coronavirus Disease 2019 ("COVID-19") was required before admission, the patient underwent testing in a single room in the PHF. Later, the test result came back to be positive, thus the PHF discharged the patient.

The complainant lodged a complaint to the Complaints Committee for the additional charges incurred during the process of COVID-19 test, including charges for single room, laboratory testing and N95 respirators, etc. and eventually the patient was discharged without treatment.





## 調查及評估

調查發現，主診醫生曾與病人家屬商討進行2019冠狀病毒病核酸檢測的必要性及該私營醫療機構的入院政策。該私營醫療機構亦有向病人及其家屬提供相關收費的資料。

然而，投訴委員會認為私營醫療機構就其向2019冠狀病毒病核酸檢測呈陽性之患者所提供的收費資料和臨床支援服務有改善的空間。投訴委員會建議該私營醫療機構應對病人及其家屬的感受提高敏感度，並就入院政策及收費方面加強溝通。

## 觀察及學習要點

值得指出的是，收費資料是一項常見的投訴事項。投訴委員會希望藉此強調，主動披露收費資料可幫助病人及其家屬在知情的情況下作出選擇，並可避免帶來紛爭。我們明白提供醫療服務的過程中可能出現變數，因而提供詳細且涵蓋所有治療選項的費用預算會有實際困難。儘管如此，我們仍鼓勵私營醫療機構盡可能向病人及其家屬披露相關資料並坦誠溝通，從而減少誤會，以及達至令病人有更好的滿意度和信賴。

## Investigation and assessment

Investigation revealed that the attending doctor had discussed with the patient's family about the need of COVID-19 test and the PHF's admission policy. It was also shown that the PHF had provided the patient and her family with relevant price information.

Having said that, the Complaints Committee considered there were rooms for improvement on providing the price information and clinical support to the COVID-19 positive patients. The Complaints Committee recommended that the PHF should be more sensitive towards the feelings of patients and their relatives, and enhance communication with them in regard to admission policy and pricing.

## Observation and learning points

It is worthwhile to point out that price information has been a common issue of complaints. The Complaints Committee would like to take this opportunity to stress that proactive provision of price information could facilitate informed choices by patients and their relatives and avoiding disputes. While preparation of detailed budget estimates for all management possibilities is often difficult due to the dynamic nature of medical service provision, disclosure of relevant information and open discussion with patients and their relatives should be encouraged as far as practicable. This could minimise misunderstanding and lead to better patient satisfaction and trust.





## 個案四：投訴管理中坦誠及適時的溝通

### 背景資料

一名顧客前往私營醫療機構接種 2019 冠狀病毒疫苗。當負責注射的護士把針頭插進顧客的上臂後，才發現疫苗注射器是空的，於是沒有施行注射並立即抽掉針頭。該名護士檢查另一劑疫苗注射器無誤後，替該名顧客完成注射。顧客當時只被告知，由於第一個注射器有問題，因此須要施行第二次注射。翌日，投訴人（顧客的姊妹）因擔憂第一個注射器的針頭曾經被使用過，而代表顧客要求該私營醫療機構就事故作出詳細解釋。該私營醫療機構回應時只聲稱第一支注射器是全新但內裡是空的，並沒有交代事故發生的原因。

投訴人表示憂慮第一個注射器的安全性，要求該私營醫療機構就事故提供進一步資料。該私營醫療機構在約一個月後回覆投訴人，表示由於藥房跟護理人員在準備疫苗過程中溝通上出現誤會，因而把空的注射器配發至注射間。投訴人不滿該私營醫療機構回應投訴的時間過長，以及披露事實的過程欠缺透明度，因此向投訴委員會作出投訴。

## Case 4: Frank and Timely Communication in Complaints Management

### Background

A client attended a PHF for vaccination. After the insertion of needle into the client's upper arm, the nurse giving the injection found that the syringe was empty. Without injecting, the needle was removed immediately. Another dose of vaccine was checked and administered. On the spot, the client was told that the first syringe was defective and hence a second injection was needed. On the next day, worrying that the first syringe was a used one, the complainant (client's sister) asked for a comprehensive explanation of the incident on behalf of the client. The PHF claimed that the first syringe was brand new but empty without giving any explanation on how the incident occurred.

After the complainant asked for further information about the cause of incident and showed the worry of the safety of the first injection, the PHF informed the complainant around a month later that the empty syringe was delivered to the injection booth due to a miscommunication between a pharmacy and nursing staff during the vaccine preparation process. The complainant was dissatisfied with the PHF's long response time and the lack of transparency in disclosing the truth in the process; therefore, lodging a complaint to the Complaints Committee.





## 調查及評估

調查發現，值班護士在事故發生後告知該顧客第一個注射器有問題，並沒有明確表示內裡是空的。

雖然該私營醫療機構在事故發生翌日曾向投訴人保證注射器是全新的，並在及後根據其處理投訴的政策和程序向投訴人交代了經調查得出可能引致該事故的成因，但此做法可能會使投訴人認為該私營醫療機構以“擠牙膏”方式披露資料而影響其對該私營醫療機構的信心。

## 觀察及學習要點

投訴委員會建議，私營醫療機構在處理事故時應盡早向顧客提供坦誠和準確的事實說明。若須要對事故作進一步調查以確定其原因，私營醫療機構應告知顧客在調查完成後會就事故提供詳細的解釋，以及預計調查所需的時間。這將有助於保持雙方關係融洽及管理顧客的期望，並且避免因不信任而導致將投訴升級。

## Investigation and assessment

On investigation, it was revealed that the nurse on duty when the incident occurred told the client that the first syringe was defective without specifically mentioned that it was found to be empty.

While the PHF did assure the complainant that the syringe was a brand new one on the day after the incident and subsequently replied the complainant on the investigation results on the possible cause of the incident according to their written policies and procedure on handling complaints, the impression of drip-fed provision of information might affect the complainant's confidence in the PHF.

## Observation and learning points

The Complaints Committee recommended that it is important to provide an early, open and accurate account of facts to clients in incident management as far as possible. If further investigation on the incident is required to identify the causes, the PHF should inform the clients of the estimated time required for the investigation and that a reply with detailed explanation of the incident would be furnished upon completion of the investigation. This would help to maintain rapport, manage expectation and reduce the risk of escalating their complaints due to mistrust.





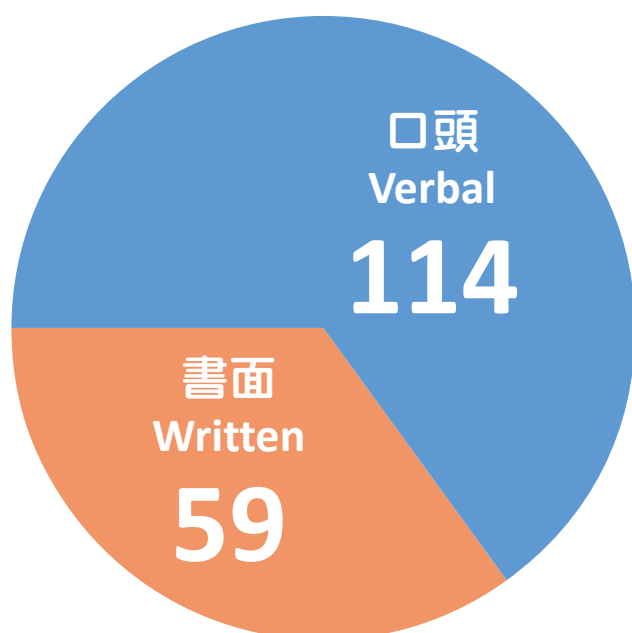
## 附錄 Appendix

1

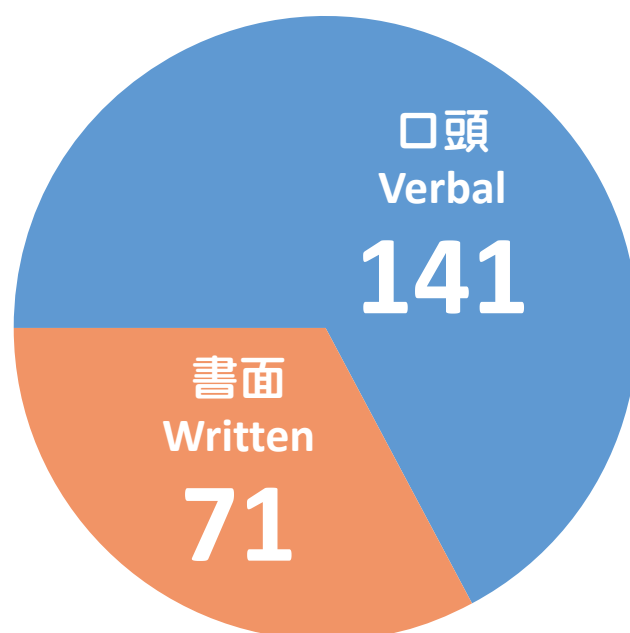
### 查詢數字

Number of enquiries

2021



2022



收到的查詢數目  
Number of enquiries received

合計  
Total 173

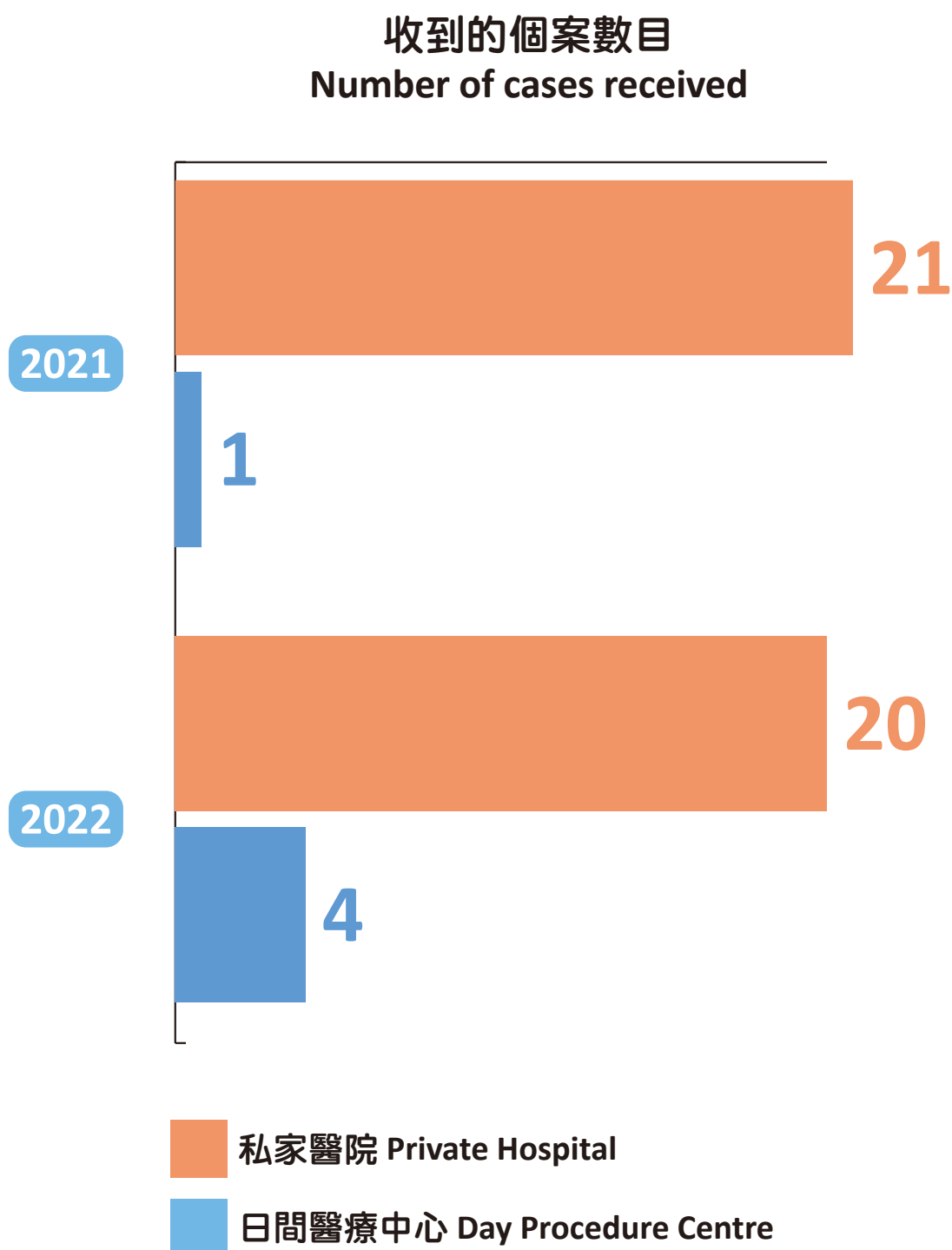
合計  
Total 212



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## 對持牌私營醫療機構的投訴數字

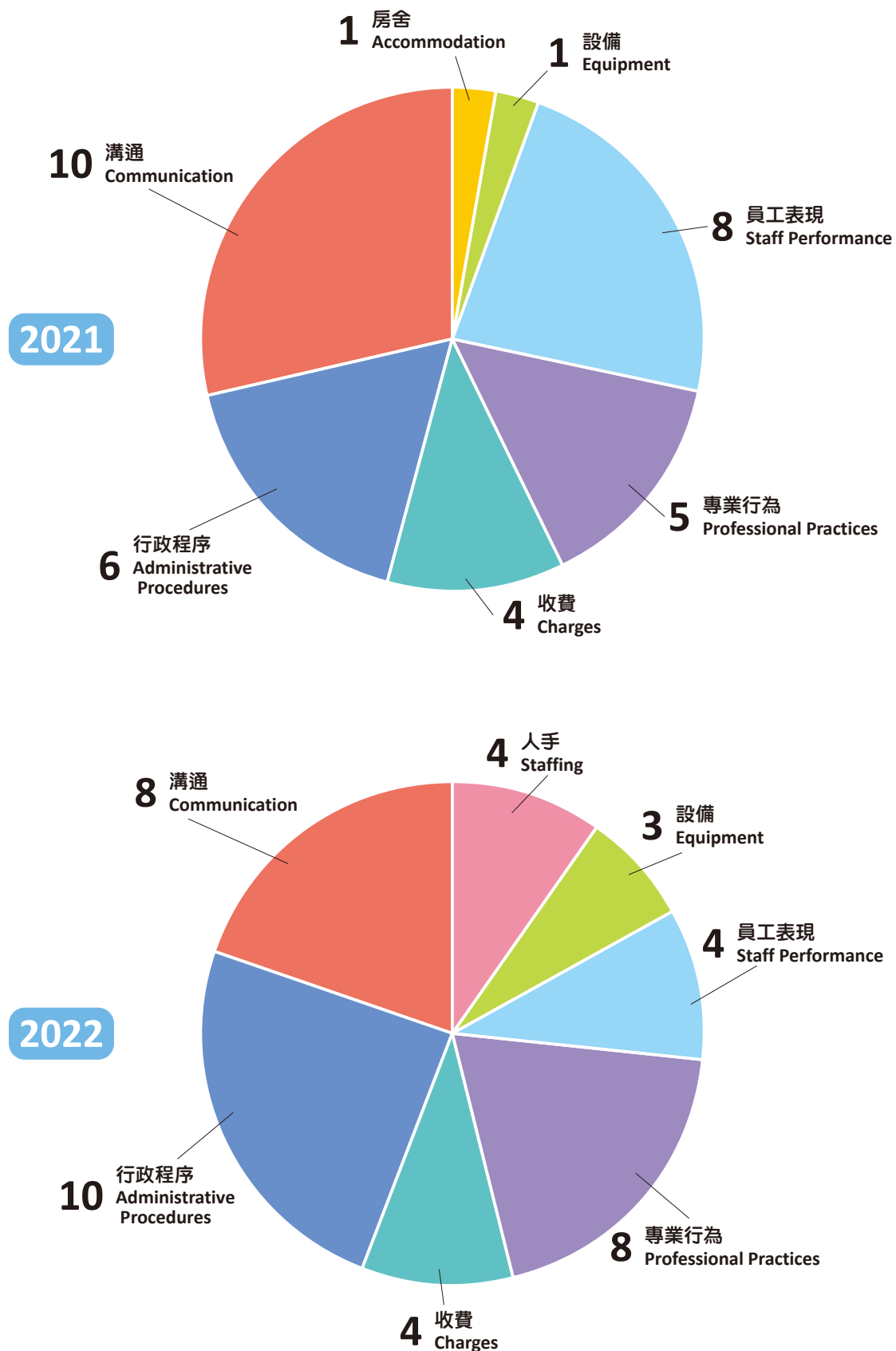
Number of complaints against licensed private healthcare facilities



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## 收到的個案中投訴事宜的類別\*

## Categories of complaint issues for cases received\*



\*一宗投訴可能涉及多個類別。

\*One complaint may involve more than one category.

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## 截至2022年12月31日的個案進度

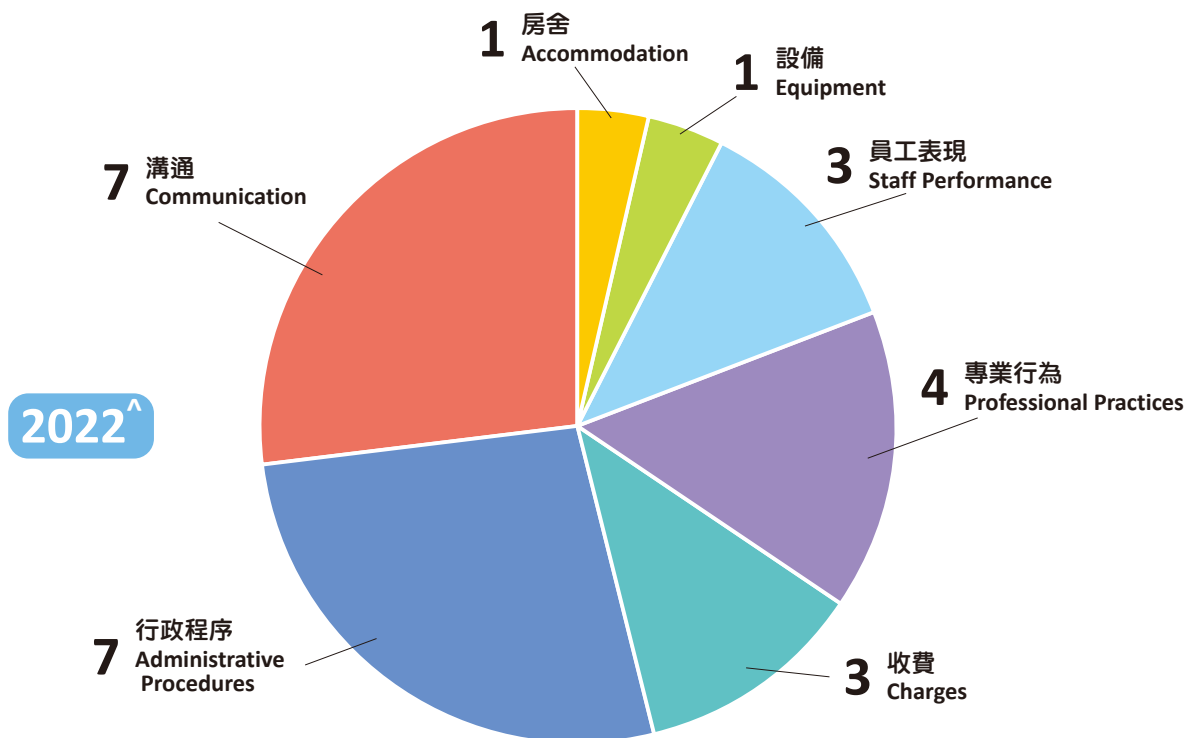
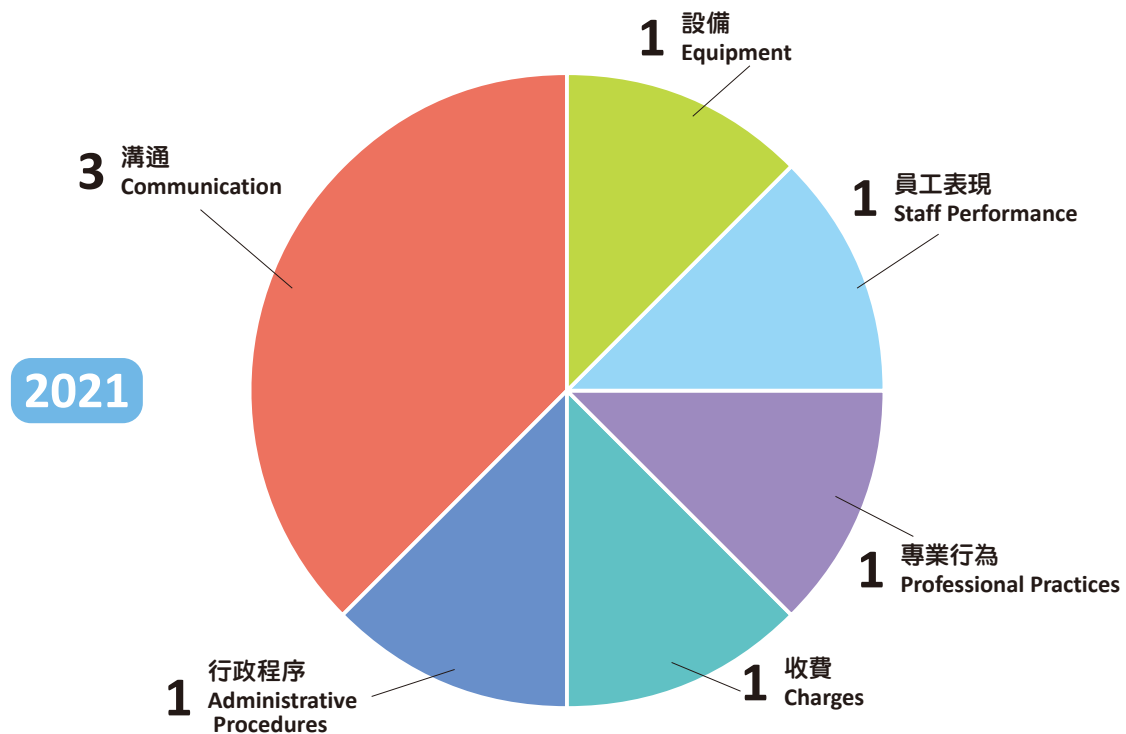
## Progress of cases as at 31 December 2022

個案進度 Processing of cases	個案數目 Number of cases
(a) 2022年收到的個案 Cases received in 2022	<b>24</b>
(b) 由上年度轉入的個案 Cases brought forward from last year	<b>11</b>
(c) 2022年已考慮並總結的個案 Cases considered and concluded in 2022	<b>16</b>
(i) 投訴成立 Substantiated	<b>2</b>
(ii) 投訴不成立 Not substantiated	<b>5</b>
(iii) 經初步處理後不獲進一步考慮的個案 Dismissed after preliminary processing	<b>8</b>
(iv) 投訴人主動撤回的個案 Withdrawn by the complainant	<b>1</b>
(d) 正在考慮中並會轉撥下年度的個案 Cases under consideration and carried forward = (a) + (b) – (c)	<b>19</b>

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## 已總結個案中投訴事宜的類別\*

## Categories of complaint issues for cases concluded\*



\*一宗投訴可能涉及多個類別。

\*One complaint may involve more than one category.

<sup>^</sup>由2022年開始，經初步處理後不獲進一步考慮的個案或投訴人主動撤回的個案也被包括在內。

<sup>^</sup>Complaints dismissed after preliminary processing or withdrawn by the complainant were included since 2022.

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## 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

## 2021

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

## 2022

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	12	24
個案小組會議 Case Panel Meeting	8	10

\*一宗投訴個案可能在多於一個初步處理小組／個案小組會議上被考慮。

\*One complaint case may be considered in more than one Preliminary Processing Panel/ Case Panel Meeting.





# 私營醫療機構投訴委員會

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