

# Chapter 2

## Public Views on Private Healthcare Facilities to be Regulated

### What We Consulted the Public on

2.1 In Chapter 3 of the Consultation Document, we consulted the public on the types of PHFs that should be regulated. By adopting a risk-based approach, three categories of PHFs (i.e. hospitals, facilities providing high-risk medical procedures in ambulatory setting and facilities providing medical services under the management of incorporated bodies) were identified for regulation under the new regulatory regime.

### How the Public Responded

#### Proposed Regulatory Regime

2.2 There was solid support for our proposal of having a more modernized and comprehensive regulatory control for different categories of PHFs in Hong Kong. Respondents generally agreed that the current regulatory regime, which is limited to a narrow set of facilities drawn up decades ago mainly covering private hospitals and non-profit-sharing medical clinics, was not adequate amid the evolving landscape of private healthcare services. A clear majority of respondents (88.8%) of the telephone survey strongly agreed or agreed that the regulation on the service quality of the PHFs (in terms of governance structure, patients' safety and risk management, etc.) should be strengthened, with a very small minority (1.9%) strongly disagreeing or disagreeing. Noting that the Government was also consulting the public on the Voluntary Health Insurance Scheme (VHIS) in parallel, some respondents urged for early implementation of a new regulatory regime for PHFs.

#### Classification of PHFs

2.3 There was strong support for covering the three types of PHFs proposed under the revamped regulatory regime. A clear majority of respondents (86.7%) under the telephone survey strongly agreed or agreed that the Government should in particular establish a mechanism to regulate the medical groups, such as the existing chains of clinics, which were held in the name of private healthcare companies and only employed medical practitioners to provide healthcare services. Only a very small percentage (2.8%) strongly disagreed or disagreed. There were views pointing out that the names of the second and third categories of PHFs (i.e. "facilities providing high-risk medical procedures in ambulatory setting" and "facilities providing medical services under the management of incorporated bodies") were too complex and should be simplified to avoid confusion and unnecessary disputes. It was also suggested that the scope and definitions of PHFs to be regulated should be reviewed regularly.

2.4 As for the approach in determining the types of PHFs to be regulated, there was solid support for adopting a risk-based approach by assessing the risk of procedures and operational risks involved in each type of PHFs. The telephone survey results revealed that a vast majority of respondents (81.4%) strongly agreed or agreed with the proposal of defining high-risk medical procedures and regulating facilities where high-risk medical procedures were performed. A small percentage (3.8%) strongly disagreed or disagreed with the proposal. There was a view that other contributing factors (e.g. the technology employed for procedures) should also be considered in risk assessment for delineating high-risk procedures.

2.5 There was also general consensus that facilities providing medical services in the form of incorporated bodies should be regulated under the proposed regulatory regime. A few respondents considered that the scope of regulation should go further to cover PHFs owned, managed, operated and serviced solely by identical registered medical practitioners, or even medical laboratories.