## Summary of Key Findings of Public Opinion Survey on Regulation of Private Healthcare Facilities

## Introduction

The Food and Health Bureau commissioned the Consumer Search Group to conduct a Public Opinion Survey on Regulation of Private Healthcare Facilities (the Survey) to collect the public's views on the proposal for revamping the regulatory regime for the private healthcare facilities, which was put forward in the public consultation on Regulation of Private Healthcare Facilities launched from 15 December 2014 to 16 March 2015.

A total of 5,012 persons aged 18 or above (excluding domestic helpers) were successfully enumerated between 19 January 2015 and 2 June 2015 for telephone interviews in the Survey. The overall response rate was 29.7%. The maximum sampling error or precision level at 95% confidence level was in the region of ±1.4%. Please refer to the Healthcare Planning and Development Office website (http://www.hpdo.gov.hk) for the full report on this opinion survey.

## **Major Findings**

- Over eight-in-ten respondents agreed with the following proposals on regulation of high-risk medical procedures and service quality of private healthcare facilities -
  - (a) strengthening the regulation on the service quality of the private healthcare facilities in terms of governance structure, patients' safety and risk management, etc. (where the existing legislation regulated only staffing and equipment of the private healthcare facilities) (88.8%); and
  - (b) defining high-risk medical procedures and regulating facilities where high-risk medical procedures (including general anaesthesia, liposuction, chemotherapy,etc.) were performed (81.4%).
- On the scope of regulation, 86.7% of the respondents 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.
- 5 As regards the complaints handling system, 93.6% of the respondents agreed

that the Government should establish a complaint system to handle complaints lodged by patients against the regulated private healthcare facilities.

- Regarding the provision of more fee information to public and patients by the private healthcare facilities, over seven-in-ten respondents agreed with the following -
  - (a) providing details of fees, such as a detailed fee schedule (92.7%);
  - (b) providing clear estimate of charges for treatment (89.9%); and
  - (c) providing statistics on historical bill sizes of patients (70.5%).
- 7 On the sanctions imposed on private hospitals, over half of the respondents considered the following increments appropriate -
  - (a) increasing sanctions against registered private hospitals for non-compliance with the regulatory provisions from the existing fine of \$2,000 to a maximum fine of \$1,000,000 (60.4%); and
  - (b) increasing sanctions against unlicensed private hospitals from the existing fine of \$2,000 and imprisonment for three months, to a maximum fine of \$5,000,000 and imprisonment for two years (57.9%).
- 8 For the new sanctions to be imposed on other regulated private healthcare facilities, around half of the respondents considered them a bit lenient/ too lenient, and around four-in-ten of the respondents considered them appropriate -
  - (a) imposing sanctions against unlicensed medical groups with a maximum fine of \$100,000 and imprisonment for three months (a bit lenient/ too lenient, 56.4%; appropriate, 37.9%); and
  - (b) imposing sanctions against unlicensed facilities where high-risk medical procedures were performed, with a maximum fine of \$100,000 and imprisonment for three months (a bit lenient/ too lenient, 49.6%; appropriate, 44.0%)
- 9 Over eight-in-ten respondents agreed that the following statutory powers of the authority concerned should be enhanced -
  - issuing regulations and codes of practice, and initiating prosecutions or imposing penalties against those who had violated these regulations or codes of practice (89.7%); and
  - (b) issuing orders to cease the operation of facilities, instruments or services which posed risk to patients' safety (86.6%).