
Code of Practice
For Clinics Registered Under
The Medical Clinics Ordinance (Cap. 343)

Department of Health
Hong Kong SAR, China

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Preface

The *Medical Clinics Ordinance* (Cap. 343) (the Ordinance), enacted in 1963, provides regulation on the registration, control and inspection of medical clinics and other related purposes. In this Ordinance, clinic means any premises used or intended to be used for the medical diagnosis or treatment of persons. Among others, private consultation rooms used exclusively by registered medical practitioners and premises used exclusively by a Chinese medicine practitioner registered or listed under the Chinese Medicine Ordinance (Cap. 549) are excluded. Also, the income derived from the establishment or operation of the clinic is required to be applied solely towards the promotion of the objects of the clinic. In other words, the clinic registered under this Ordinance should be non-profit sharing in nature. The details of the scope of the medical clinics governed by this Ordinance can be found in the website of Department of Justice: bilingual laws information: <http://www.legislation.gov.hk/eng/index.htm>.

With the advancement of medicine and rising expectations of the community, there is a need to ensure that quality services are provided by clinics registered under this Ordinance. The Director of Health, as the Registrar of Clinics, is conferred power by the Ordinance to regulate and monitor these clinics, which are required to comply with conditions that are considered to be fit by the Director in order to register or re-register. This “Code of Practice” (Code) is promulgated to facilitate these clinics to meet the standards of good practice with a view to foster a culture of quality assurance.

The Code covers various aspects including registration, employment of staff, accommodation and equipment, medical record keeping, patients care and rights, drug records and dispensing, infection control and complaint handling procedures. Individual clinic should take the Code as a guide and observe the recommendations of different sections as appropriate to their own setting. With the rapid advancement of modern medicine, new guidelines may be added to the Code in future. We hope that these guidelines will serve as a practical handbook on the standards required for operating medical clinics in our community.

Clinics registered under the *Medical Clinic Ordinance* (Cap. 343) shall also comply with relevant Ordinances and Regulations of Hong Kong. It

is the applicant's responsibility to consult and seek approval from relevant government departments and other authorities regarding various aspects of the clinic as appropriate.

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Chapter 1

Registration

- 1.1 The applicant shall make an application for registration of the clinic to the Director of Health, in compliance with the *Medical Clinics Ordinance* (Cap. 343).
- 1.2 The registration shall be renewed annually by making an application for re-registration and provide relevant information as required by the Director of Health.
- 1.3 Where the applicant is a person, he/she shall be of integrity and good character, and be physically and mentally fit to operate the clinic.
- 1.4 Where the applicant is an organisation, the directors of the organisation shall be of integrity and good character, and be physically and mentally fit to supervise the operation of the clinic.
- 1.5 The income derived or to be derived from the establishment or operation of the clinic is applied solely towards the promotion of the objects of the clinic and shall not be transferred to employees of the clinic by way of dividend or bonus or otherwise by way of profit to the applicant himself (i.e. shall be non-profit sharing).
- 1.6 The clinic shall be under the continuous personal supervision of a registered medical practitioner (including medical practitioner with limited registration in accordance with Promulgation (No. 3 and 4) under Section 14A of the *Medical Registration Ordinance* (Cap. 161)). Where there is any change in the Medical In-charge, the Director of Health's prior approval shall be sought once the arrangement is made.
- 1.7 Where there is any change in the operating hours, the Director of Health's prior approval shall be sought once the arrangement is made.

- 1.8 The establishment is considered fit for registration if the situation, construction, accommodation, staffing and equipment are fit to be used for the purposes of a clinic. This shall include, but not limited to, general cleanliness, lighting, ventilation, washing facilities, water supply and refuse disposal.

- 1.9 The registered clinic shall display the current certificate of registration in a conspicuous place in the clinic.

Chapter 2

Human Resources Management

Overview

2.1 Healthcare service is a labour intensive business. The skills, competence and attitude of the healthcare providers are essential factors in determining the quality of care that patients receive. It is the responsibility of the licensee to ensure the personnel who provide healthcare services in his/her clinic are appropriately qualified and skilled.

General Requirements

2.2 All clinical staff shall abide by relevant codes of professional practice where applicable.

2.3 All staff shall wear staff badges with name and post for identification by clients.

Medical Staff

2.4 The licensee shall appoint a registered medical practitioner (including medical practitioner with limited registration in accordance with Promulgation (No. 3 and No. 4) under Section 14A of the *Medical Registration Ordinance* (Cap. 161)) as Medical In-charge who shall be responsible for the medical management of the clinic.

2.5 All medical practitioners practicing in the clinic shall possess valid annual practising certificates.

2.6 All medical practitioners shall possess the skills and experience in general practice or other relevant specialties.

2.7 The Director of Health's prior approval shall be sought as soon as practicable if there is any change in medical staff.

Nursing Staff

2.8 Nursing staff employed by the clinic shall possess valid registration certificates.

2.9 Nursing staff shall possess appropriate qualifications and skills in performing nursing duties.

Clinic Assistants

2.10 Clinic assistants should work under the supervision of the registered medical practitioner.

2.11 Clinic assistants shall receive appropriate training relevant to their duties.

Staff Training and Education

2.12 All staff involved in clinical care shall be appropriately trained, including training in the use of any clinical equipment, performing injection and dispensing medications.

2.13 It is advised that at least one staff in the clinic shall be familiar with cardio-pulmonary resuscitation (CPR).

2.14 Where injection or immunization services are provided in the clinic, the licensee shall ensure that personnel involved are qualified and trained to perform such duties. Mechanisms should also be in place for management of severe immediate reactions or other emergencies.

2.15 Opportunities shall be provided for staff to receive on-the-job training and participate in continuing education where appropriate.

Chapter 3

Accommodation and Equipment

Overview

3.1 The condition of the establishment shall be able to meet the purpose of the clinic. All equipment used in the clinic shall be used as intended for its purpose, in good working condition and be properly maintained.

Accommodation

3.2 The physical design, size and layout of the establishment shall be appropriate for the safe and effective delivery of clinic services.

3.3 Ventilation and lighting shall be adequate and appropriate.

3.4 The establishment shall be kept clean and hygienic.

3.5 Water supply, latrine and sanitary facilities shall be adequate.

3.6 Hand-washing facilities shall be adequate.

3.7 There are facilities to provide for privacy of patients, where necessary (e.g. screens).

3.8 Aids to facilitate the movement of the disabled are available where appropriate (e.g. rails).

3.9 There are adequate and appropriate signages to direct clients to the clinic premises.

3.10 Fire exits and escape routes are clearly marked in a conspicuous place. All staff shall be familiar with fire safety and emergency evacuation procedures.

Equipment

- 3.11 The clinic shall have the necessary equipment for a clinic setting.
- 3.12 Equipment shall be kept in good conditions and serviced according to the manufacturer's instruction as appropriate.
- 3.13 A record of maintenance and servicing of medical equipment shall be kept as appropriate.
- 3.14 Medical equipment intended for single use should not be reused.
- 3.15 Staff using the medical equipment shall know the safe and proper use of the equipment.

Others

- 3.16 An examination couch is available.
- 3.17 A telephone line is available to facilitate patient access and summon assistance in emergencies.

Chapter 4

Rights of Patients

Overview

- 4.1 Patients have the right to be treated with dignity. All services shall be delivered without discrimination with respect to the age, sex, religion, ethnicity and disability of the patient. Patients have the right to be informed of the treatment planned for them. There should also be a system to address patients' complaints.

General Requirements

- 4.2 Patients have the right to receive timely, appropriate and accurate medical assessment, treatment and care.
- 4.3 Patients have the right to obtain information regarding the diagnosis, treatment, progress and investigation results.
- 4.4 Patients have the right to obtain information necessary to give informed consent to any investigation, procedure or treatment modalities. Details of clinical procedures, their effectiveness and associated risks shall be explained to patients. Available treatment options shall be made explicit to patients to facilitate them to give an informed consent.
- 4.5 Consent should be obtained for all intimate physical examinations and in this case, it is advisable to have a chaperon in the scene. For procedures or treatments that may possess significant risk or side effects, a written consent is advisable.
- 4.6 Patients have the right to refuse any procedure or treatment.
- 4.7 Patients have the right to access their own health records.

4.8 A patient's health information should be forwarded to a third party only with his/her consent, unless there is a court order.

4.9 There are appropriate facilities to ensure privacy and to meet the special needs of patients.

Charges

4.10 Patients have the right to know the fees and charges prior to consultation and their undertaking of any procedure.

4.11 A notice of charges, written in both Chinese and English, should be posted in conspicuous places and easily available to patients.

4.12 The scale of charges shall be updated in a timely manner when there is any change and made known to patients.

Handling of Complaints

4.13 A mechanism is in place for handling complaints made by a patient or his/her representative.

4.14 Information on the channels for making a complaint shall be readily available to patients (e.g. posting notice in the clinic).

Chapter 5

Medical Records

Overview

- 5.1 Medical records encompass both written and electronically stored information of patients. Proper medical documentation is essential to achieve and maintain a high standard of medical practice. All doctors have a responsibility to maintain clear, accurate, adequate and contemporaneous medical records of their patients. Doctors should be aware of the provisions of the *Personal Data (Privacy) Ordinance* (Cap. 486), and have due regard to their responsibilities and liabilities under that Ordinance.

General Requirements

- 5.2 Each patient's health information is stored in a dedicated patient medical record.
- 5.3 A notice about the purpose of collecting patient information should be placed in a conspicuous area of the clinic.
- 5.4 It is advisable for the medical record to include patient's name, gender, date of birth, residential address, contact telephone number of the patient and his/her next of kin, consultation note(s), investigation(s), treatment and where appropriate, sick leave and referral record(s).
- 5.5 All medical records shall be accurate, legible and up-to-date.
- 5.6 All entries in the record shall be dated and signed where appropriate.
- 5.7 Patients shall have access to their health records.

Security, Storage and Destruction of Medical Records

- 5.8 Patient records are confidential and shall be kept secure. This includes ensuring that unauthorised persons do not have access to the information contained in the records and that there are adequate procedures to prevent improper disclosure, amendment, damage or loss.
- 5.9 Where records are kept in an electronic format, all the information shall be made available and accessible when needed. Security measures such as protection by a password shall be adopted. There shall be a mechanism in place to ensure regular back up of the data.
- 5.10 A policy is set to retain medical records for a certain period of time, which depends on the nature of the record and the likelihood of legal proceedings.
- 5.11 Destruction of medical records shall be undertaken in a secure manner.
- 5.12 Consent from patient must be obtained when transferring health information to another healthcare provider or a third party such as the insurance company.

Chapter 6

Drug Dispensing

General Requirements

- 6.1 Medicines must be handled according to the requirements of the legislations in Hong Kong.
- 6.2 A drug formulary is kept by the Medical In-charge.
- 6.3 The staff shall have access to up-to-date reference sources for drug use.
- 6.4 Drug procurement documents shall be kept appropriately for future reference and inspection.
- 6.5 Medicines shall be stored appropriately. A refrigerator, where applicable, shall be available to store medicines in an appropriate range of temperature.
- 6.6 All antiseptics, medicines for external use and disinfectants must be stored separately from medicines that are administered through the internal routes.
- 6.7 A system is in place to check the expiry dates of medicines. Medicines that are expired shall not be used for dispensing and shall be disposed properly.
- 6.8 All medicines shall be clearly labeled.

Dangerous Drugs

- 6.9 Dangerous drugs should be handled in strict compliance with the Dangerous Drugs Ordinance (Cap. 134). Each medical practitioner who practices in a clinic exempted from section 7 of the Ordinance

shall not possess, at any time, a stock in excess of 2000 tablets or capsules of each of the 14 drugs specified below:

1. Alprazolam
2. Bromazepam
3. Chlordiazepoxide
4. Clonazepam
5. Diazepam
6. Flurazepam
7. Lorazepam
8. Medazepam
9. Nitrazepam
10. Oxazolam
11. Temazepam
12. Clobazam
13. Clorazepate
14. Pinazepam

6.10 Medical practitioners are required to maintain proper records of ALL dangerous drugs, whether supplied, dispensed, administered or disposed, and in strict accordance with the statutory forms under the *Dangerous Drugs Regulations* (Cap. 134).

6.11 Dangerous drugs must be stored in a locked cabinet.

6.12 Expired and unused dangerous drugs shall be returned to the Pharmaceutical Division of the Department of Health or the supplying pharmaceutical company, or dispose via the Environmental Protection Department licensed chemical wastes collectors. The documents of return or disposal should be kept in clinic for future reference.

6.13 Medical practitioners are advised to acquaint themselves with the latest Guidelines on the Proper Prescription and Dispensing of Dangerous Drugs promulgated by the Medical Council of Hong Kong.

Dispensing and Administration of Medicines

6.14 Medicines are dispensed and administered under the supervision of

the Medical In-charge. A system is in place to monitor the accuracy of dispensing and administration of medicines which includes proper documentation and regular stock taking.

- 6.15 Staff responsible for dispensing and administering medicines (e.g. giving injection) shall receive appropriate training.
- 6.16 Staff should familiarise themselves with the procedures of administering medicines in the latest guidelines of “Good Dispensing Practice Manual” as promulgated by the Medical Council.

Chapter 7

Fire Safety & Occupational Health

Fire Safety

- 7.1 Advice shall be sought from the Fire Services Department (FSD) or agencies approved by the FSD on measures of fire safety, where necessary.
- 7.2 Adequate precautions against the risk of fire shall be taken.
- 7.3 Fire escape routes and emergency exits shall be displayed in conspicuous places in the clinic.
- 7.4 All staff shall be familiarised with the evacuation procedures.

Occupational Safety

- 7.5 The clinic shall comply with the relevant occupational safety requirements as stipulated by legislations in Hong Kong.
- 7.6 The clinic shall purchase ergonomically friendly furniture / apparatus and adopt occupational healthy procedures as far as practical.
- 7.7 Staff are provided with protective equipment and clothing to prevent injury.
- 7.8 A record of staff accidents that take place in the clinic shall be kept when applicable.

Chapter 8

Infection Control

- 8.1 The Medical In-charge shall ensure that ALL staff of clinic observe, including but not limited to, the following control and prevention measures:
1. standard precautions of infections;
 2. hand washing procedures;
 3. safe handling of clinical waste;
 4. collection, packaging, handling and delivery of laboratory specimens;
 5. management of patients suffering or suspected to be suffering from infectious diseases;
 6. management of needle-prick injuries; and
 7. management of spills or accidents with infectious substances.

Reference shall be made to international or local health authorities or agencies (e.g. the Centre for Health Protection of the Department of Health).

- 8.2 Appropriate Personal Protective Equipment (PPE) are available for use by staff.
- 8.3 Staff suffering from acute illness such as fever, upper respiratory tract infection or diarrhoeal symptoms shall refrain from work and seek medical treatment promptly.
- 8.4 The Medical In-charge shall report any patient suspected or diagnosed to have a statutory notifiable disease to the Department of Health in accordance to the Prevention and Control of Disease Ordinance (Cap. 599).

Chapter 9

Reporting to the Department of Health

- 9.1 The clinic shall inform the Department of Health (DH) if there is change in the address, operating time, charges, medical personnel, etc.

- 9.2 Medical incidents such as erroneous dispensing and administration of medication shall be reported to DH as soon as practicable.

References

1. Code of Practice for Private Hospitals, Nursing Homes and Maternity Homes. Department of Health HKSAR, November 2009.
2. Medical Clinics Ordinance (Cap.343). The Government of Hong Kong SAR.
3. Guidelines on Infection Control Practice in the Clinic Setting (revised 2006). Centre for Health Protection, Department of Health, Hong Kong
http://www.chp.gov.hk/files/pdf/grp_IC_practice_in_clinic2005011101.pdf.
4. Revised Guidelines on the Proper Prescription and Dispensing of Dangerous Drugs by Registered Medical Practitioners (Oct 2003). The Medical Council of Hong Kong
http://www.mchk.org.hk/code/pdf/Revised_Guidelines.pdf.
5. Professional Code and Conduct for the Guidance of Registered Medical Practitioners (revised in January 2009). Medical Council of Hong Kong.
6. Standards for General Practice. Royal Australian College of General Practitioner <http://www.racgp.org.au/standards>.
7. Practice Management. Equip on-line, National Health Service, United Kingdom
http://www.essexequip.nhs.uk/content.asp?page_id=177.
8. Accreditation Program Improving Quality in Health Care. Canadian Council on Health Services
<http://www.cchsa.ca/upload/files/pdf/International/ImprovingQualityinHealthCare.ppt#466>.
9. Independent health care national minimum standards regulations. National Health Services, United Kingdom
http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_4085259.

10. Standard for better Health. National Health Services, United Kingdom. http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_4086665.
11. Guidelines under the private hospitals and medical clinics act (1980) and regulations (1991). Ministry of Health, Government of Singapore http://www.moh.gov.sg/mohcorp/uploadedFiles/Publications/Guidelines/Private_Healthcare_Institutions/PHMC_Guidelines.pdf .
12. A practical Guide for Safe and Effective Office-based Practices November 2005. The College of Physician and Surgeons of Ontario, Canada <http://www.cpso.on.ca/Publications/Safe%20Office%20Guide.pdf>.