Guidance Notes for Management of Communicable Disease Outbreaks in Private Hospitals

1 Purpose

1.1 This document serves as a general guide for persons registered of private hospitals (including maternity homes) under the Hospitals, Nursing Homes, and Maternity Homes Registration Ordinance (Cap. 165) to manage outbreaks of communicable diseases in the hospital setting.

1.2 According to the World Health Organization, a disease outbreak is defined as the occurrence of cases of disease in excess of what would normally be expected in a defined community, geographical area or season.

2 Relevant Regulatory Requirements

2.1 Under Cap.165, the Department of Health (DH) registers private hospitals and maternity homes subject to their conditions relating to accommodation, staffing and equipment. DH has also promulgated the Code of Practice for Private Hospitals, Nursing Homes and Maternity Homes (CoP) which sets out the standards of good practice with a view to enhancing patient safety and quality of service.

2.2 Clause 12.1.2(C)(iii) of the CoP stipulates that the licensee should notify the Director of Health outbreaks of any infectious diseases occurring in the establishment.

2.3 Section 9.6 of the CoP stipulates that private hospitals should establish an infection control team (ICT) to deal with infection acquired or brought into the establishment. ICT should be headed by a designated and trained infection control practitioner. Written policies, procedures and guidance for the prevention and control of infection should be developed, including, among others, notification of suspected outbreaks of infectious disease to the Centre for Health Protection (CHP) of DH and management of the outbreaks. The ICT should also undertake on-going activities and surveillance to monitor nosocomial infections, outbreaks of infectious diseases and to detect multi-drug resistant organisms.

3 Notification of Hospital Outbreak and Conducting Outbreak Investigations

3.1 ICT of a private hospital is headed by a designated and trained infection control practitioner, the Infection Control Officer (ICO), who leads a team of Infection Control Nurses (ICNs). The hospital management should render full support for the ICO. The work of ICT is supported by timely medical and microbiological services. ICT conducts timely risk assessment of a suspected cluster of infectious disease cases in the hospital, to document the findings properly and to implement appropriate infection control measures. ICT should seek advice from CHP with respect to investigation and strengthening management measures as appropriate.

3.2 In the event that a hospital outbreak is suspected or established, ICT should notify Central Notification Office (CENO) of CHP via fax or email by a standardised report form, and should be preceded by phone if immediate action is necessary. The notification form is available at the following URL:
https://cdis.chp.gov.hk/CDIS_CENO_ONLINE/ceno.html

Place of notification	**Telephone (office hour)**	**Fax**	**E-mail**	**Emergency after office hour (pager)**
CENO	2477 2772	2477 2770	diseases@dh.gov.hk	7116 3300 call 9179 (MCO)

3.3 Upon notification, CHP will contact ICT to verify the details. In general, CHP may request ICT to provide the following information:

- Background information of the affected ward(s)
- Information of the affected cases
- Actions taken by ICT for outbreak investigation and control

3.4 ICT must take full responsibility of monitoring the implementation of appropriate infection control measures at the earliest possible time. ICT should consult CHP to assess if a meeting on outbreak management with CHP is to be convened. If such a meeting is to be convened, the composition of the meeting should include:

- Private hospital representatives:
  Medical superintendent, ICT, physician in-charge, a senior nursing staff, a senior administrative staff and media relations persons
- CHP representatives

3.5 The meeting will discuss epidemiological information, infection control measures and actions to be taken, including risk communication measures. CHP representatives may also visit the affected areas with ICT to review infection control measures and provide recommendation if necessary. Private hospitals should cooperate with CHP's instructions / advice.

3.6 ICT should be responsible to conduct contact tracing, medical surveillance and to implement infection control measures. ICT should update CHP during the medical surveillance period.

3.7 CHP will communicate with the Office for Regulation of Private Healthcare Facilitates (ORPHF) about its investigation findings. ORPHF will assess if there is noncompliance with Cap. 165 and CoP and institute regulatory actions against the private hospital concerned as appropriate.

4 Risk Communications

4.1 The private hospital has to inform relatives / visitors and post up notice in the hospital. Private hospitals should keep their staff, public, and media informed without prejudicing the investigation and without compromising any statutory responsibilities and legal requirements.

4.2 CHP and/or private hospital may consider to issue press release concerning the outbreak, and issue press updates when further cases are identified.

4.3 Any press statements or responses to press enquiries to be issued by the private hospital that involves DH should have obtained prior agreement from DH.

5 Reference

5.1 Private hospitals are advised to take reference from "ICB Infection Control Guidelines" devised by CHP, which are available at the following URL:
http://www.chp.gov.hk/en/guideline1/346/349/365.html

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