



Service Priorities and Programmes Electronic Presentations

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Emergency preparedness for the first public private partnership catering services in public health sector

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Introduction

According to Centre for Food Safety report, the numbers of food poisoning cases have increased by 22% in the recent years – from 279 cases in 2010 to 341 cases in 2012. In view of increasing risk of susceptibility to food poisoning and having a large group of vulnerable patients, hospitals have to be well-prepared for emergencies in catering services. Being the pilot cluster among Hospital Authority to outsource patient catering services, New Territories West Cluster(NTWC) implemented emergency preparedness which requires close cooperation among hospitals and service provider.

Objectives

(1)To enhance communication and information flow between hospitals and operator, from production to ward level;(2)to review the effectiveness and responsiveness of parallel operation of back-up Central Production Units(CPUs);(3)to refine necessary service requirements and arrangement;(4)to minimize service interruption to patients during contingency.

Methodology

A working group was formed by hospitals and service provider to review and revise the contingency plan. To ensure the contingency plan is functional and to identify areas for improvement, a contingency drill was held on August 8, 2013 to simulate suspected food contamination in CPU of NTWC. CPU was fully suspended and meals for the 5 receptor hospitals have to be supplied from back-up CPU of service provider. Around 650 meals were produced by back-up CPU in the drill, which equivalents to 16% of total meals per meal time. Over 500 staff from service provider and 100 staff from hospitals were deployed, and observers from hospitals were invited to evaluate service provider in: (1)Adequacy of communication;(2)Timeliness of communication and meals delivery;(3)Quality of contingency meals.

Result

In NTWC, 12 wards had participated in the drill and they all expressed adequate contingency information were received from service provider. All notifications, interim snacks and contingency meals were received within designated timeframe. Among 38

surveys received on quality of contingency meals, 89.5% expressed food appearance and textures were acceptable while 94.7% expressed meal portion and food temperature were adequate. 76.3% pointed out lunchboxes packaging were friendly and 68.4% expressed taste of contingency meals were acceptable. The result of the drill showed that the contingency catering arrangement was well-received by hospitals. Yet, for up-keeping emergency preparedness in public hospitals, regular review of contingency plan and drill would be required.