## Introduction

# COMPOSITION OF EXPERT COMMITTEE

1.1 The emergence of Severe Acute Respiratory Syndrome (SARS) was a severe challenge to Hong Kong, a personal tragedy for many of its citizens, a heavy blow to its healthcare sector, and had devastating consequences in the short term for its economy. The epidemic highlighted the urgent need to review the capacity of the healthcare system, and to better prepare for any future outbreaks. The Chief Executive of the Hong Kong Special Administrative Region announced on 28 May 2003 the setting up of a SARS Expert Committee (the Committee) to conduct this review.

### **Membership of SARS Expert Committee**

#### Co-chairs

Sir Cyril CHANTLER (Hospital Management and Administration)

Senior Associate, King's Fund, London; and Chairman, Board of the Great Ormond Street Hospital for Children NHS Trust, UK

Prof Sian GRIFFITHS (Public Health)

President, Faculty of Public Health, Royal Colleges of Physicians, UK

#### **Members**

Dr Sherene DEVANESEN

President, Royal Australasian College of Medical Administrators, Australia

Dr Meirion EVANS

Senior Lecturer, Department of Epidemiology, Statistics and Public Health, University of Wales College of Medicine, UK

**Prof Harvey FINEBERG** 

President, Institute of Medicine, National Academy of Sciences, USA

Dr Jeffrey KOPLAN

Vice President for Academic Health Affairs, Emory University, USA

Prof LEE Shiu-hung

Emeritus Professor of Community Medicine, The Chinese University of Hong Kong

Mr John Wyn OWEN

Secretary, The Nuffield Trust, UK

Dr TANG Xiao-ping

Director, No. 8 People Hospital in Guangzhou, China

Prof Rosie YOUNG

Professor, Department of Medicine, The University of Hong Kong

Prof ZHONG Nan-shan

Head, Institute for Respiratory Disease in Guangzhou, China

Short biographies of members can be found on the Committee's website at <a href="www.sars-expertcom.gov.hk">www.sars-expertcom.gov.hk</a>.

1.2 Members of the Committee were selected for their wide range of experience in their respective fields, which included health systems, public health, epidemiology and communicable disease control, medical expertise, and hospital management and operation.

#### SCOPE OF REVIEW

- 1.3 The terms of reference given to the Committee were
  - To review the work of the Government, including the Hospital Authority, in the management and the control of the outbreak
  - To examine and review the capabilities and structure of the healthcare system in Hong Kong and the organisation and operation of the Department of Health and the Hospital Authority in the prevention and management of infectious diseases such as SARS, and
  - To identify lessons to be learnt, and to make recommendations on areas of improvements in order to better prepare our system for any future outbreaks.
- 1.4 A Hospital Management and Administration Group and a Public Health Group were set up. The two groups separately held their own series of meetings in June and July before joining in a final series of plenary meetings in August.

1.5 Given the complexity of the issues dealt with, and the tight time schedules for completion of the review, the Committee has focused on the areas most relevant to its terms of reference. It is acknowledged that there are elements of policy and action that could be important in the longer term for the health services and health of the people of Hong Kong, but have not been deliberated upon in this Report. Examples of such elements are town planning, building and drainage design, food and environmental hygiene (including managing wet markets). They are mentioned here to draw the attention of the authorities to them.

#### **MODUS OPERANDI**

- 1.6 The intention of every member of the Committee has been, and continues to be, to do his or her best for the people of Hong Kong. Great importance is attached to the independence of the Committee, and the openness and transparency with which the investigation was undertaken.
- 1.7 In conducting the review, the Committee has
  - Collected relevant public documents, media reports and other information and statistics relating to the SARS epidemic and, more fundamentally, the health and hospital systems of Hong Kong

- Invited members of the public to provide submissions on the SARS epidemic and on issues relevant to the terms of reference of the Committee, particularly on areas of improvement to the healthcare system, the prevention and management of infectious diseases, the public health system and lessons to be learnt in order to better prepare the system for any future outbreaks
- Conducted various meetings with those who were involved in, or affected by, the SARS epidemic
- Made site visits.



Site visit to Amoy Gardens by Committee members

1.8 Apart from formal meetings, discussions have been conducted by video/ tele-conference, email and letters. Some Committee members have also taken the opportunity to meet and discuss further amongst themselves once members had returned to their home countries.

- 1.9 The Committee received a total of 93 written submissions from individuals, medical practitioners, healthcare workers, academics, tertiary institutions, non-government organisations and other concerned groups. In keeping with the spirit of openness and transparency which the Committee emphasised in conducting the review, the Committee has decided that, subject to obtaining the consent of the parties concerned and compliance with the relevant legislation in Hong Kong on personal data privacy, the submissions should be made available to the public on the Committee's website at www.sars-expertcom.gov.hk. A list of persons/ organisations who have given consent to the disclosure of their submissions is at Appendix I.
- discussed with many stakeholders and persons who have played various parts in the epidemic. These groups included frontline healthcare workers, Amoy Gardens residents, recovered SARS patients, chronic illness patient groups, operators of residential care homes for the elderly, media representatives, healthcare sector organisations, experts and academics, private practitioners, Members of the Legislative Council, hospital and public health authorities, policymakers, and heads of Government departments. A full list of these groups is at **Appendix II**.
- 1.11 All the submissions and views received have been carefully studied and considered. Where appropriate, additional

information and clarification have been obtained, and relevant authorities and persons were given the opportunity to respond. As a result of this process of thorough investigation, the Committee has been able to produce what it believes to be a reliable account of the major events of the SARS epidemic in Hong Kong (see chapter 3), and to identify various issues and themes arising from the chronology (see chapters 4-16). We would like to take this opportunity to express our gratitude to all those who have contributed to this fact-finding process.

#### STRUCTURE OF REPORT

1.12 In chapter 2, we describe the background of the SARS epidemic in Hong Kong. Chapter 3 is a factual account of the SARS epidemic, and chapter 4 provides the Committee's commentary on key issues. Chapters 5-16 cover various inter-related lessons and themes which we have identified for exploration, and from which key lessons and recommendations emanate. Chapter 17 contains the conclusions of the Committee. In chapter 18, the main recommendations are grouped in order of importance/priority for ease of reference.