





Tel: 2871 8844 Fax: 2580 7071 E-mail:hkccm@hkam.org.hk

Administrative Medicine Part II Fellowship Examination 2011

Case Study 2

Q.3

The lobbying has paid off and the Minister for Health last year announced a new public hospital for your region, which covers 300,000 people. The new hospital will provide secondary inpatient services to a level commensurate with 90% self sufficiency, some tertiary (regional) services and some outpatient services, which will be networked with community health centres and multifunction services across the region. The hospital will have an Emergency Department which will have Trauma Unit level capacity.

The architects have been appointed and they are drawing up the design of the new hospital on a green field site (existing health service buildings are to be given new roles after the transition to the new site).

You are the Medical Administrator on the Project Team. You have been asked to submit a Clinical Services Plan for the Palliative Care service for this new site.

Outline your approach to this task and the key elements that you would expect to form your response.

How will your Plan ensure that the design meets the needs of the clinical services?







Tel: 2871 8844 Fax: 2580 7071 E-mail:hkccm@hkam.org.hk

Administrative Medicine Part II Fellowship Examination 2011

Case Study 2

Q.3

Key Points for Examiners

Planning process..... Service plan so buildings can be built, users group, current numbers of patients, planned numbers, gaps, set targets and service goals etc

What should go into the new buildings, what will be retained in old buildings, then patient spaces – numbers of patients, average length of stay, all single rooms?, staff spaces, circulation/visitor space etc as relates to clinical activity - quiet rooms? Garden?

- congregate care, circular buildings or meeting areas, family residing in the hospital, special cooking areas? Proximity to radiotherapy areas.

Specifics about Palliative Care:

Stages of palliative care – influences acute spaces, private spaces etc Inpatient services, casemix funding Domiciliary services – cars, equipment, training of RNs, OHS (drugs, rostering etc) Bereavement services for families Debriefing for staff