

S.A.M.P.

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## An unfair way to judge a hospital

WHILE recognising it is not wise to get involved in the annual battle between the Director of Audit and Government department directors, I believe that the audit debate as reported in your columns (SCM Post, January 11) may distress many people who have a regard for the Nethersole Hospital and feel it is under criticism for slackness. I hope that in a few words we can convince them of our integrity.

Reference is made to "weakness in procedure," a complaint which was to some extent justified.

The Government has for years refused to allow us to employ a purchasing officer, a purchasing clerk or even a store-keeper, so no wonder our procedures could not conform to the best standards.

We hope that we shall be allowed these people in the near future. In fact, a year ago we had already taken steps to tighten up procedures, and it seems a pity that complaints about "weaknesses" which existed 18 months ago should surface now.

This is also the case with the leasing of quarters where it is stated that \$34,000 was wasted. One of these incidents occurred over three years ago. Everybody knows the difficulties in renting flats, especially if they have to be within 10 minutes' walk from the hospital.

If the Government could see its way to giving our doctors the same kind of housing allowance that it gives its own doctors these difficulties would be less.

On the question of overstaffing, the Director of Medical and Health Services is correct when he says this is due to the particular nature of the hospital. When Nethersole can afford to re-build with large efficient wards and labour-saving equipment, no doubt staff ratios will change. In the meantime may I point out that the nurses are not sitting around idly.

About half of our nursing staff are students, requiring supervision and tuition, a much higher percentage than in Government hospitals.

Our nurses attend to all the needs of the patients, including bathing and toilet needs. This is not left to amahs as it is in some other hospitals.

Nurses have to work in the busy outpatient departments which last year had 175,000 visits, whereas for Queen Mary Hospital (for example) this function is largely conducted at the Sai Ying Pun Polyclinic, outside the hospital.

I hope that even the Director of Audit will be glad to know that the number of admissions per nurse in the past year was 59, a big step up from the figure he quoted.

What it boils down to is that there is no good index for comparing one hospital directly with another; to assess a hospital's need for staff requires a study by an expert team.

We therefore welcome the Medical and Health Department's inspection team and feel sure it will do a good job.

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