

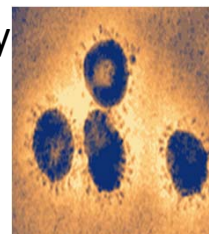
Crisis management  
as illustrated by  
**SARS**  
(March – June 2003)

7.12.2012



## CRISIS in every sense (1)

- Unprecedented in modern history of Hong Kong in terms of magnitude and severity
- Virus completely unknown initially but public panic immediately; totally unanticipated



## CRISIS in every sense (2)

- Tragedy for many: 1,755 people infected; 299 died; more than 20% infected healthcare workers (8 died); hundreds of families directly affected
- Devastating consequences on economy : GDP in 2<sup>nd</sup> Quarter declined by 0.5% (against 4.5% increase in 1<sup>st</sup> Quarter), visitor arrivals dropped substantially by 17.5% over same period in 2002

## Many lessons .....

- Focus today on a few general aspects of crisis and media handling
- Subsequent detailed studies and investigations by LegCo, Experts Committees etc. covered many other aspects, e.g. public health, hospital management.....

# The Three-month Battle in 2003



March	April	May
<p>10/3 Beginning of the epidemic: report of an outbreak of respiratory infections involving 11 staff from Prince of Wales Hospital.</p> <p>12/3 WHO issued global alert about cases of acute respiratory syndrome.</p> <p>14/3 Index case of Prince of Wales Hospital outbreak confirmed.</p> <p>15/3 WHO named the illness Severe Acute Respiratory Syndrome (SARS).</p> <p>19/3 DH announced the chain of transmission of the <i>Hotel M</i> outbreak and the identity of the index case of the epidemic in Hong Kong.</p> <p>21/3 Outbreaks in Baptist Hospital and two private clinics reported.</p> <p>22/3 The University of Hong Kong announced the identification of coronavirus as the causative agent responsible for SARS.</p> <p>26/3 Community outbreak in Amoy Gardens: United Christian Hospital reported admission of 15 suspected SARS cases from Amoy Gardens.</p> <p>27/3 SARS added to the list of infectious diseases in the Quarantine and Prevention of Disease Ordinance (Cap 141).</p> <p>29/3 Health declaration for incoming visitors to Hong Kong. Classes suspended in schools and childcare centres.</p> <p>31/3 DH served an order to isolate Block E of Amoy Gardens for 10 days. DH also established 4 designated medical centres for medical surveillance of close contacts.</p>	<p>1/4 Residents of Block E of Amoy Gardens evacuated to holiday camps. Outbreak in Alice Ho Miu Ling Nethersole Hospital reported.</p> <p>2/4 WHO issued travel advisory against Hong Kong and Guangdong Province.</p> <p>3/4 HA implemented no-visiting policy for all acute wards.</p> <p>10/4 DH introduced the home confinement scheme for close contacts of all SARS patients.</p> <p>17/4 Body temperature check on departing passengers at airport. The Government announced investigation findings of the Amoy Gardens outbreak.</p> <p>23/4 Outbreaks in Caritas Medical Centre and Tai Po Hospital identified.</p> <p>27/4 Outbreak in Tuen Mun Hospital identified.</p>	<p>2/5 Second outbreak in Baptist Hospital identified.</p> <p>5/5 'Team Clean' led by the Chief Secretary for Administration was established.</p> <p>16/5 WHO released investigation findings on the Amoy Gardens outbreak.</p>

## Lesson 1 : leadership and clear chain of command

- Need of an individual/committee/structure to assume overall command – CE set up CESC on 25.3.2003
- Speedy policy making and coordination involving different parties – final decision on issuance of Isolation Order on Block E of Amoy Gardens on 30.3.2003
- Quicker and more effective resources deployment -- contact tracing with help of Police's super-computer; environmental investigation of Amoy Gardens with engineers



## Lesson 2 : risk assessment and preparedness

- Risk alertness at all levels
- Develop contingency plans and update them regularly

## Lesson 3 : Communications

### **A) Internal communication**

- Clear, up-to-date, inclusive of all stakeholders e.g. with frontline staff, Outstations.....
- Modes of communication e.g. HA posting of information on Intranet, use of English only, during SARS excluded some groupings of staff

## Lesson 3 : Communications (2)

### **B) External communication**

- Vitally important. especially in dealing with major crisis, e.g. public safety, public health, public interest
- Candidness and transparency with good grasp of knowledge
- Define and match purpose, message, medium and audience
- Regular presence in public to instill public confidence -- 4:30 briefings during SARS

## Lesson 3 : Communications (3)

- Face: adequate training in media skills especially in how best to communicate risk and uncertainty
- Make use of multiple modes of communication, e.g. mass media, press conferences/briefings, websites, hotlines, publicity campaigns