Replies to written questions raised by Finance Committee Members in examining the Estimates of Expenditure 2005-06

Controlling Officer: Director of Health Head 37 - Department of Health

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HWFB205	0905	Hon. CHEUNG Chiu-hung, Fernando	Disease Prevention	
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Reply Serial No.	Question Serial No.	Name of Member	Programme	
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Reply Serial No.

CONTROLLING OFFICER'S REPLY TO INITIAL WRITTEN/SUPPLEMENTARY QUESTION

HWFB036

<u>Head</u>: 37 Department of Health <u>Subhead</u> (No. & title): Question Serial No.

<u>Programme</u>: (3) Health Promotion

0043

Controlling Officer: Director of Health

<u>Director of Bureau</u>: Secretary for Health, Welfare and Food

<u>Question</u>: Please set out the information for the past 3 years about the following:

- (1) the total expenditure on tobacco control and the specific use(s)?
- (2) the subvention to the Hong Kong Council on Smoking and Health for anti-smoking initiatives; the breakdown of departmental expenditure; the expenses on public education, in particular anti-smoking education targetting the staff of catering and entertainment industries and their customers?

Asked by: Hon. CHEUNG Yu-yan, Tommy

Reply:

Various services under the Department of Health support tobacco control. In 2001, the Department set up the Tobacco Control Office (TCO) to enhance and coordinate Government's tobacco control efforts.

The expenditure of TCO in the past three years was \$12.7M for 2004-05, \$9.2M for 2003-04, and \$15.9M for 2002-03. Various anti-smoking activities to facilitate compliance with the Smoking (Public Health) Ordinance were organised, including visits to restaurants with 200 seats or more and workshops on smoke-free workplace. Publicity campaigns through the mass media and other electronic channels were launched to promote a smoke-free culture in the community. The TCO also runs a smoking cessation hotline to provide counselling and information to help smokers quit smoking.

Separately, the Hospital Authority also runs smoking cessation services through 16 hospital and community-based smoking cessation and counselling centres.

As regards the subvention to the Hong Kong Council on Smoking and Health (COSH) in the past three years, they are as follows:

			Provision for	
		General	Promotional	
	<u>Salarie</u> s	Expenses	Projects	<u>Total</u>
	\$M	\$M	\$M	\$M
2004-05	2.7	3.7	4.4	10.8
2003-04	2.6	3.7	3.0	9.3
2002-03	3.0	3.5	1.5	8.0

COSH has a comprehensive strategy in promoting publicity and education programmes, including in the corporate and business sectors where the catering and entertainment industries are covered. In this respect, large-scale campaigns on smoke-free workplace have been conducted since 2000 targeting at employers, employees and customers. A recognition scheme for the corporate and business sectors including catering and entertainment industries was also introduced in 2004-05.

Signature	
Name in block letters	Dr P Y LAM
Post Title	Director of Health
— Date	7 April 2005

Reply Serial No.

CONTROLLING OFFICER'S REPLY TO INITIAL WRITTEN/SUPPLEMENTARY QUESTION

HWFB037

<u>Head</u> : 37 Department of Health	Subhead (No. & title)	: Ques	stion Serial N
<u>Programme</u> : (3) Health Promotion			0044
Controlling Officer : Director of He	ealth		
<u>Director of Bureau</u> : Secretary for I	Health, Welfare and Foo	d	
Question: In 2005-06, what are the Smoking (Public Health) Ordinance such expenditure.	•	-	_
Asked by: Hon. CHEUNG Yu-yan	, Tommy		
Reply:			
In 2005-06, upon the enac (Public Health) Ordinance (Cap 3 (TCO) of the Department of Health be realigned to undertake new enfo 2005-06, the total expenditure of Total	71), the staffing level will be enhanced from preement duties, publici	of Tobacco Cont 30 to 60 and the ty and education	trol Office work will
	Q.		
	Signature _		
	Name in block letters _	Dr P Y LAM	
	Post Title _	Director of Hea	alth

Date 8 April 2005

Reply Serial No.

CONTROLLING OFFICER'S REPLY TO INITIAL WRITTEN/SUPPLEMENTARY QUESTION

HWFB102

<u>Head</u> : 37 Department of Health	Subhead (No. & title):	Ques	stion Serial No
<u>Programme</u> : (2) Disease Preventio	n		0538

Controlling Officer: Director of Health

<u>Director of Bureau</u>: Secretary for Health, Welfare and Food

Question: The provision for disease prevention is reduced by 3.2%, from a total of \$1,234.2M in 2004-05 to \$1,195.2M in 2005-06. Among such reduction, the provision for the subvented sector is reduced by 5.1%, which is higher than the 3.1% decrease for the Government sector. What is/are the reason(s)?

Asked by: Hon. LI Fung-ying

Reply:

The reduction in provision for the Government sector and the subvented sector results from the need to deliver additional efficiency savings in 2005-06 and the 2005 civil service pay adjustment. Both the Government and subvented sectors are subject to a similar level of reduction. Nevertheless, in the context of the Government sector, there is an additional provision for disease control in the Centre for Health Protection for 2005-06, hence resulting in a smaller reduction in the provision for Government than that for the subvented sector.

Signature	
Name in block letters	Dr P Y LAM
Post Title	Director of Health
 Date	8 April 2005

Reply Serial No.

CONTROLLING OFFICER'S REPLY TO INITIAL WRITTEN/SUPPLEMENTARY QUESTION

HWFB103

<u>Head</u> : 37 Department of Health	Subhead (No. & title):	Ques	stion Serial No.	
Programme : (2) Disease Prevention	n		0539	

Controlling Officer: Director of Health

<u>Director of Bureau</u>: Secretary for Health, Welfare and Food

Question: Under brief description 8, the work of the Department of Health involves: providing genetic screening and counselling services; reducing preventable death and ill-health among pregnant women, infants and children; providing promotive health care to primary and secondary school students; the oral health of primary school children; maintaining the surveillance and control of communicable diseases; providing laboratory services for the diagnosis and surveillance of various infections and other screening activities; treating patients with sexually-transmitted diseases and controlling the spread of such diseases; providing integrated health care service to the elderly; and providing woman health service. Please set out the corresponding estimates for each of the above specific items of work in 2005-06 and their actual expenditures and percentages of changes in the past three years.

<u>Asked by</u>: Hon. LI Fung-ying

Reply:

The expenditure/provision analyses for individual activities under Programme (2) from 2002-03 to 2005-06 are given in the Annex.

Signature _	
Name in block letters	Dr P Y LAM
Post Title	Director of Health
Date	7 April 2005

Annex

Analysis of Expenditure/Provision for Activities under Programme 2

		2005-06 Estimate \$M	Change %	2004-05 <u>Rev Est</u> \$M	Change %	2003-04 <u>Actual</u> \$M	Change %	2002-03 <u>Actual</u> \$M
(a)	providing genetic screening and counselling services	22.6	-2.2%	23.1	-15.7%	27.4	-9.6%	30.3
(b)	reducing preventable death and ill-health among pregnant women, infants and children	411.4	-2.8%	423.4	-0.7%	426.5	6.1%	402.1
(c)	providing promotive health care to primary and secondary school student	130.3	-3.6%	135.2	-4.7%	141.9	-0.7%	142.9
(d)	providing oral health service to primary school children	170.5	-2.2%	174.3	-3.3%	180.3	2.0%	176.8
(e)	maintaining the surveillance and control of communicable diseases	150.4	-3.2%	155.4	10.8%	140.2	46.2%	95.9
(f)	providing laboratory services for the diagnosis and surveillance of various infections and other screening activities	39.3	-5.1%	41.4	-10.2%	46.1	40.1%	32.9
(g)	treating patients with sexually-transmitted diseases and controlling the spread of such diseases	62.6	-6.1%	66.7	-9.0%	73.3	0.7%	72.8
` '	providing integrated health care service to the elderly	148.6	-2.5%	152.4	-4.3%	159.3	3.6%	153.8
(i)	providing woman health service	22.7	-2.2%	23.2	6.4%	21.8	9.0%	20.0
(j)	others	5.4	-10.0%	6.0	1.7%	5.9	11.3%	5.3
Exp	penditure for Government Sector	<u>1,163.8</u>	<u>-3.1%</u>	<u>1,201.1</u>	<u>-1.8%</u>	1,222.7	<u>7.9%</u>	<u>1,132.8</u>

CONTROLLING OFFICER'S REPLY TO INITIAL WRITTEN/SUPPLEMENTARY QUESTION

Reply Serial No.

HWFB104

<u>Head</u>: 37 Department of Health <u>Subhead</u> (No. & title):

Question Serial No.

0540

Programme: (3) Health Promotion

Controlling Officer: Director of Health

<u>Director of Bureau</u>: Secretary for Health, Welfare and Food

<u>Question</u>: The Department of Health provides subvention to the Hong Kong Council on Smoking and Health to implement initiatives against smoking. Please provide the details of the initiatives for preventing adolescents and youth from smoking and the expenditure involved.

Asked by: Hon. LI Kwok-ying

Reply:

The Hong Kong Council on Smoking and Health (COSH) organises various tobacco control activities for the public. COSH also conducts activities specifically targeted at adolescents and youth, including health talks and lectures to schools and social service organisations, interactive anti-smoking musical dramas, and training of students as tobacco control advocates.

A non-recurrent subvention of \$6M has been allocated to COSH for tobacco control activities targeted at youth and women for the period from 2001 to 2005.

Signature	
Name in block letters _	Dr P Y LAM
,	
Post Title _	Director of Health
Date	6 April 2005

CONTROLLING OFFICER'S REPLY TO INITIAL WRITTEN/SUPPLEMENTARY QUESTION

Reply Serial No.

HWFB105

<u>Head</u>: 37 Department of Health <u>Subhead</u> (No. & title):

Question Serial No.

Programme: (1) Statutory Functions

0541

Controlling Officer: Director of Health

<u>Director of Bureau</u>: Secretary for Health, Welfare and Food

Question:

- (a) Please set out the respective number of samples taken for analysis by the Department of Health on western medicine, proprietary Chinese medicines and health foods in the past three years. How many cases of violation of standards are there? What are the expenditure and establishment involved?
- (b) Has the Department of Health set any target(s) for the samples taken for analysis on pharmaceutical products and health foods for each year? If yes, what are the target numbers?

Asked by: Hon. LI Kwok-ying

Reply:

(a) The respective numbers of samples of western medicines, proprietary Chinese medicines and health foods taken by the Department of Health for analysis in the past three years are as follows:

	Western	Medicines	Proprietary Chinese Medicines Health Foods		
Year	Year No. of samples tested No. found to be below quality standards		No. of samples tested	No. found to be below quality standards	
2002	1 862	65	2 345	49	
2003	2 125	69	2 528	59	
2004	2 076	93	2 834	47	

Four Senior Pharmacists and 24 Pharmacists are responsible for the inspection and licensing of manufacturers, importers, wholesalers and retailers of western medicines, investigations of drug-related complaints, prosecution of offenders, and the sampling of western medicines, proprietary Chinese medicines and health foods for analysis. The staff cost involved for these activities in 2005-06 is \$17.4M.

(b) The target is to test about 2 000 samples of western medicines and 2 500 samples of proprietary Chinese medicines / health foods each year.

Signature	
Name in block letters	Dr P Y LAM
Post Title	Director of Health
	8 April 2005

CONTROLLING OFFICER'S REPLY TO INITIAL WRITTEN/SUPPLEMENTARY QUESTION

Reply Serial No.

HWFB106

Head: 37 Department of Health	Subhead (No. & title):	Question Serial No.

<u>Programme</u>: (1) Statutory Functions

0542

Controlling Officer: Director of Health

<u>Director of Bureau</u>: Secretary for Health, Welfare and Food

Question: Concerning inspection of retail outlets of Chinese herbal medicines, how many front-line staff currently deployed by the Department to perform such duty have received relevant training? Will the Department provide training in future to facilitate the existing inspection staff to undertake the inspection duty? If yes, what are the details of such training and the expenditure involved?

Asked by: Hon. LI Kwok-ying

Reply:

Six officers in the Department of Health trained in Chinese medicines are responsible for inspection of retailers of Chinese herbal medicines in Hong Kong.

In 2005-06, \$160,000 will be allocated to relevant staff training, including diploma/degree course, postgraduate certificate course, seminars and conference.

Signature	
Name in block letters	Dr P Y LAM
Post Title	Director of Health
Date	7 April 2005

CONTROLLING OFFICER'S REPLY TO INITIAL WRITTEN/SUPPLEMENTARY QUESTION

Reply Serial No.

HWFB107

Head: 37 Department of Health

Subhead (No. & title):

Question Serial No.

0543

Programme: (2) Disease Prevention

Controlling Officer: Director of Health

<u>Director of Bureau</u>: Secretary for Health, Welfare and Food

Question:

- (a) In 2004-05, how many new cases are managed in Social Hygiene Service? How many cases are revisit cases? How are the distribution of age and sex of these cases? What is the average cost for managing a case in Social Hygiene Service?
- (b) Comparing the data in 2003 and 2004, there was an increase in the number of attendees in Social Hygiene Clinics and this increasing trend will continue in coming year. Does the government have any reason for such trend? Any plan to address this problem and if so, how much additional resource required?

Asked by: Hon. LI Kwok-ying

Reply:

In 2004, there were some 18 000 new attendances and 134 000 revisit cases in Social Hygiene Clinics (SHCs).

There is no readily available information on the age and sex distribution of all attendances in SHCs. Nonetheless, data have been compiled on patients of the five most common sexually transmitted diseases, which together accounted for over 85% of the total clientele. Based on these figures, the ratio of male to female is 1.3:1. The age profile of patients is as follows:

Age	<u>Percentage</u>
Below 20	3.4%
20-29	24.3%
30-39	30.2%
40 and above	42.1%

The average cost for handling a case is about \$620.

The increase in attendances in the year 2004 compared to those in 2003 was due to the relatively low attendances in 2003. It could be attributed to the SARS outbreak in 2003 which might have an impact on people's consultation behaviour and pattern.

Signature _	
Name in block letters	Dr P Y LAM
Post Title	Director of Health
Date	7 April 2005

CONTROLLING OFFICER'S REPLY TO INITIAL WRITTEN/SUPPLEMENTARY QUESTION

Reply Serial No.

HWFB108

<u>Head</u>: 37 Department of Health <u>Subhead</u> (No. & title):

Question Serial No.

0544

Programme: (2) Disease Prevention

Controlling Officer: Director of Health

Director of Bureau: Secretary for Health, Welfare and Food

Question: Under the indicator of attendances at maternal and child health centres, the 2005 estimate on the attendance for the cervical screening service is 100 000. The Department of Health publicises that female aged 25 or above should undergo such examination annually in the first two years and then once in every three year. According to the projection made by the Census and Statistics Department on the local population, there will be nearly 2.7 million females aged 25 or above in 2005. Please provide the following information:

- (a) What are the criteria for estimating the attendance for cervical screening service at maternal and child health centres to be 100 000 in 2005?
- (b) Why is the indicator set by the Department of Health on the attendance for the cervical screening service far smaller than the population requiring such service as publicised by the Department of Health?
- (c) Please set out the respective estimates for the publicity and provision of the cervical screening service for 2004 and 2005.

Asked by: Hon. LI Fung-ying

Reply:

The territory-wide Cervical Screening Programme (CSP) is organised by the Department of Health (DH) with participation of public and private medical sectors, and non-governmental organisations.

Based on the recommendations of the Cervical Screening Task Force, the CSP would target at women aged 25 to 64 and the screening interval would be once every three years, following two consecutive annual smears producing negative results. Also, the initial target of CSP is to cover 60% of the target

female population. This target coverage is comparable to that achieved in many developed countries. According to the Census and Statistics Department, the total population of women aged 25 to 64 is about 2.2 million. This means about 1.3 million women aged 25 to 64 should have a smear test over a period of three years, or 440 000 women each year.

The actual number of attendances for cervical screening at DH during the 10-month period since its launch in March 2004 was 80 000. The estimated attendance of 100 000 in 2005 represents about a quarter of the target population, and also has taken into account the market share potentially to be taken up by the private sector and non-governmental organisations.

The provision for CSP in DH, including publicity, is \$35M in 2004-05. The provision remains unchanged in 2005-06.

Signature	
Name in block letters	Dr P Y LAM
Post Title	Director of Health
— Date	7 April 2005

Reply Serial No.

CONTROLLING OFFICER'S REPLY TO INITIAL WRITTEN/SUPPLEMENTARY QUESTION

HWFB109

<u>Head</u>: 37 Department of Health <u>Subhead</u> (No. & title):

Question Serial No.

0597

<u>Programme</u>: (3) Health Promotion

Controlling Officer: Director of Health

<u>Director of Bureau</u>: Secretary for Health, Welfare and Food

<u>Question</u>: Regarding the upgrade of facilities at Red Ribbon Centre, the Government's AIDS resource and education centre, what is the estimated expenditure required? Please list in detail the amount for each expenditure item.

Asked by: Hon. CHAN Yuen-han

Reply:

An amount of \$7.3M has been earmarked for renovating the Red Ribbon Centre. Major renovation items include the following:

- (a) extension of floor area;
- (b) conversion of the extension into one conference room, one production room, one store room and a toilet;
- (c) construction of a new activity hall;
- (d) conversion of current areas into an open plan office and a library extension; and
- (e) upgrading air conditioning, fire services installation and security provisions.

The breakdown of the major expenditures is as follows:

		\$M
(a) Building works		2.8
(b) Building services		3.4
(c) Contingencies and others		1.1
	Total	7.3

Signature _	
Name in block letters _	Dr P Y LAM
Post Title _	Director of Health
Date	7 April 2005

Reply Serial No.

CONTROLLING OFFICER'S REPLY TO INITIAL WRITTEN/SUPPLEMENTARY QUESTION

HWFB110
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<u>Head</u>: 37 Department of Health <u>Subhead</u> (No. & title): Question Serial No.

<u>Programme</u>: (2) Disease Prevention

0598

Controlling Officer: Director of Health

<u>Director of Bureau</u>: Secretary for Health, Welfare and Food

<u>Question</u>: Regarding the evaluation of regular urine HIV testing programme for drug users:

- (1) What is the estimated expenditure involved? What are the details?
- (2) Are any objectives set for the testing programme? If yes, what are the details?

Asked by: Hon. CHAN Yuen-han

Reply:

- (1) The programme offers urine HIV tests for all drug users attending methadone clinics. The cost for conducting urine HIV tests in 2005-06 is estimated to be \$500,000.
- (2) The programme aims to enhance prevention and control of HIV infection among drug users. Drug users found to be HIV positive will be followed up for medical treatment.

Signature	
Name in block letters	Dr P Y LAM
Post Title	Director of Health
Date	6 April 2005

Reply Serial No.

CONTROLLING OFFICER'S REPLY TO INITIAL WRITTEN/SUPPLEMENTARY QUESTION

HWFB111

Head: 37 Department of Health

Subhead (No. & title): 000

Operational
expenses

Operational
expenses

<u>Controlling Officer</u>: Director of Health

<u>Director of Bureau</u>: Secretary for Health, Welfare and Food

Question: For the item of temporary staff, the 2005-06 estimate is \$211,697,000, an increase of \$4,300,000 as compared with the 2004-05 revised estimate at \$207,397,000. Does it involve the employment of additional temporary staff? If so, what is the number of additional temporary staff intended to employ? What are their ranks and scope of responsibilities?

Asked by: Hon. CHAN Yuen-han

Reply:

The provision in 2005-06 includes the provision for recruitment of additional 32 full time contract staff in 2005-06. Details are at Annex.

Signature	
Name in block letters	Dr P Y LAM
Post Title _	Director of Health
Date	8 April 2005

Projected no. of additional contract staff to be employed by Department of Health in 2005-06

		Monthly		No. of state	
Programme Area	Job Title	Salary \$	Less than 1 year	1 – 2 year(s)	3 years
(1) Statutory Functions	Smoke-free Ambassador	6,300		2	
(1) Statutory Functions	Assistant Tobacco Control Officer	8,200		4	
(1) Statutory Functions	Tobacco Control Officer	10,000		2	
(1) Statutory Functions	Contract Engineer (Biomedical)	33,355 - 51,870		2	
(1) Statutory Functions	Project Officer (Chinese Medicine)	26,540		1	
(1) Statutory Functions	Chinese Medicine Assistant	17,145		4	
(2) Disease Prevention	Project Assistant	6,800	7		

		Monthly		No. of state	
Programme Area	Job Title	Salary \$	Less than 1 year	1 – 2 year(s)	3 years
(2) Disease Prevention	Assistant Manager	22,000 - 26,000		1	
(2) Disease Prevention	Service Administrator	77,000		1	
(2) Disease Prevention	Contract Medical Laboratory Technician	10,700		1	
(2) Disease Prevention	Contract Doctor	33,355 - 54,255			5
(3) Health Promotion	Research Officer (Public Health)	26,540		1	
(3) Health Promotion	Infectious Disease Physician	72,135			1
		Total:	7	19	6

CONTROLLING OFFICER'S REPLY TO INITIAL WRITTEN/SUPPLEMENTARY QUESTION

R	eply	Serial	No.

Question Serial No.

HWFB112

	1				
Programme	: (2) Disease Pr	evention			0600

Subhead (No. & title):

Controlling Officer: Director of Health

Head: 37 Department of Health

<u>Director of Bureau</u>: Secretary for Health, Welfare and Food

Question: Please set out the individual subventions provided to each of the subvented institutions under this programme in 2005-06, and make a comparison with their corresponding revised estimates for 2004-05.

Asked by: Hon. LI Kwok-ying

Reply:

Under this programme area, the Family Planning Association of Hong Kong is the only organisation being subvented. The total subvention for 2005-06 will be \$31.4M. Compared with the revised estimates of \$33.1M in 2004-05, there is a decrease of \$1.7M.

Signature	
Name in block letters	Dr P Y LAM
Post Title	Director of Health
Date	7 April 2005

CONTROLLING OFFICER'S REPLY TO INITIAL WRITTEN/SUPPLEMENTARY QUESTION

Reply Serial No.

HWFB113

<u>Head</u>: 37 Department of Health <u>Subhead</u> (No. & title):

Question Serial No.

Programme: (2) Disease Prevention

0601

Controlling Officer: Director of Health

Director of Bureau: Secretary for Health, Welfare and Food

Question:

- 1. What are the differences between the family planning services provided by the maternal and child health centres and those by the Family Planning Association? What are the expenditure and income concerning such services?
- 2. In view of decreasing birth rate, does the Government plan to transfer the family planning services provided by the maternal and child health centres to the Family Planning Association? If so, what are details of the plan and what will be the changes in the subvention granted to the Family Planning Association? If not, what are the reasons?

Asked by: Hon. LI Kwok-ying

Reply:

The Maternal and Child Health Centres (MCHCs) provide family planning services to enable all women of childbearing age to decide freely and responsibly on the number and spacing of children. Appropriate contraceptive methods including emergency contraception are prescribed according to individual needs. For clients with infertility problem, counselling and referral to specialist will be arranged as appropriate. The MCHCs also provide maternal health services and women after delivery attending the centres for postnatal checkup will be given contraceptive counselling to ensure better spacing of children. The Family Planning Association of Hong Kong (FPAHK) provides family planning services including contraceptive counselling, prescription of birth control methods, infertility counselling and termination of pregnancy to women of childbearing age at extended office hours. They also provide specialised services for newly-wed couples as well as youth sexual health services for women aged below 27 years. In 2004, the actual number of attendances for family planning service at MCHCs was 248 500 and that for the family planning clinics operated by the FPAHK was 182 000.

The scopes of family planning services provided in MCHCs and FPAHK are complementing each other to ensure accessibility to women of childbearing age in Hong Kong. Although the birth rate in Hong Kong is decreasing, the current family planning services at MCHCs need to be maintained because family planning is not merely the prescription of contraceptive methods but also helping to identify infertile couples for early treatment, and there is no plan to transfer the services to the FPAHK.

The family planning service forms an integral part of the services provided by MCHCs for which the total provision in 2005-06 is \$389.2M. The estimated revenue in 2005-06 is about \$0.3M, based on the standard charge of a nominal rate of \$1 for Hong Kong residents. As family planning service is an integral part of FPAHK's overall service, separate breakdown on its income and expenditure is not readily available.

Signature	
Name in block letters	Dr P Y LAM
Post Title _	Director of Health
Date	7 April 2005

CONTROLLING OFFICER'S REPLY TO INITIAL WRITTEN/SUPPLEMENTARY QUESTION

Reply Serial No.

HWFB114

<u>Head</u>: 37 Department of Health <u>Subhead</u> (No. & title):

Question Serial No.

0602

Programme: (4) Curative Care

Controlling Officer: Director of Health

<u>Director of Bureau</u>: Secretary for Health, Welfare and Food

Question:

(a) At present, what is the waiting time in general regarding the government dental service provided to patients with special oral healthcare needs?

(b) Please set out the respective average costs of treatment and the corresponding charges for the following three categories: hospital patients, emergency treatment by dental clinics and patients with special oral healthcare needs.

Asked by: Hon. LI Kwok-ying

Reply:

- (a) The waiting time for patients with special oral healthcare needs seeking government dental service depends on the severity and nature of their dental conditions. Patients with emergency needs will be given immediate consultation and treatment, while the waiting time for other patients ranges from one week to six months.
- (b) The average unit cost for treatment of hospital patients (including those with special oral healthcare needs) is about \$750 and that for emergency treatment in dental clinics is about \$100.

There is no charge for emergency treatment in dental clinics for eligible persons, and non-eligible persons will be charged at \$700 per attendance. For dental treatment provided to hospital patients (including those with special oral healthcare needs), the Department of Health does not charge patients for the service, which forms part and parcel of the services chargeable by the Hospital Authority.

Signature_		
Name in block letters _	Dr P Y LAM	
Post Title_	Director of Health	
Date	7 April 2005	

Reply Serial No.

CONTROLLING OFFICER'S REPLY TO INITIAL WRITTEN/SUPPLEMENTARY QUESTION

HWFB141

Head: 37 Department of Health Subhead (No. & title): 000

Question Serial No.

Operational

expenses

0695

Programme:

Controlling Officer: Director of Health

<u>Director of Bureau</u>: Secretary for Health, Welfare and Food

<u>Question</u>: Please set out the respective numbers of staff of the following establishments under the Department of Health:

- 1. Civil servants on pensionable terms;
- 2. Civil servants on agreement terms;
- 3. Non-civil service contract staff;
- 4. Staff employed by contractors for outsourced services

Asked by: Hon. LEUNG Yiu-chung

Reply:

Civil service posts are not classified into pensionable or agreement terms of employment. As at 1 March 2005, the Department had an establishment of 4 957 civil service posts (excluding 117 posts for general grades officers working in general out-patient clinics of the Hospital Authority), with 4 751 civil servants on pensionable terms and 57 on agreement terms. The Department also employed 1 113 full-time non-civil service contract staff. The Department's contractors employed some 80 staff for the provision of contract services to the Department.

Signature	
Name in block letters	Dr P Y LAM
Post Title	Director of Health
Date	8 April 2005

CONTROLLING OFFICER'S REPLY TO INITIAL WRITTEN/SUPPLEMENTARY QUESTION

Reply Serial No.

HWFB142

Head: 37 Department of Health	Subhead (No. & title):	Question Serial No.

<u>Programme</u>: (1) Statutory Functions

0696

Controlling Officer: Director of Health

<u>Director of Bureau</u>: Secretary for Health, Welfare and Food

<u>Question</u>: What is/are the target(s) of the Chinese Medicine Council in relation to the registration of Chinese medicine practitioners in 2005-06?

Asked by: Hon. LEUNG Yiu-chung

Reply:

The Chinese Medicine Council in 2005 will hold licensing examination for about 500 candidates and register those who pass the examination. The practising certificates of about 2 400 registered Chinese Medicine Practitioners will also be renewed.

Signature	
Name in block letters	Dr P Y LAM
Post Title	Director of Health
 Date	6 April 2005

CONTROLLING OFFICER'S REPLY TO INITIAL WRITTEN/SUPPLEMENTARY QUESTION

Reply Serial No.

CSB036

0755

Head: 37 Department of Health

Subhead (No. & title):

Question Serial No.

<u>Programme</u>: (7) Medical and Dental Treatment for Civil Servants

Controlling Officer: Director of Health

<u>Director of Bureau</u>: Secretary for the Civil Service

Question: In terms of financial provision, the 2005-06 estimate is \$447.8M, representing an increase of 1.7% as compared with the 2004-05 revised provision of \$440.5M, which is mainly due to an increase in non-operational expenditure and an increasing demand for reimbursement and payment of medical expenses and hospital charges. Please provide the details concerning the payment of medical expenses.

Asked by: Hon. CHAN Yuen-han

Reply:

The provision for Programme (7) under Head 37 covers medical and dental services provided by the Department of Health to civil service eligible persons (i.e. civil servants, pensioners and their eligible dependants) as well as payment and reimbursement of medical fees and hospital charges incurred by civil service eligible persons. Under the existing policy, civil service eligible persons may apply to the Government for reimbursement of expenses on drugs/equipment/services which form an essential part of the medical treatment as prescribed and certified by the attending Hospital Authority (HA) doctors on medical grounds but which are not available in HA or are chargeable by HA. In addition, the Government reimburses reasonable expenses on necessary treatment incurred by civil servants on duty/training/postings outside Hong Reimbursement to HA for the use of special accommodation beds by civil service eligible persons (for which the hospital is allowed to retain 50% of the hospital maintenance fee income and thus the Government has to reimburse HA the difference between 50% of the public rates and the rates payable by civil service eligible persons) is also covered by this programme.

The 2004-05 revised estimate for payment and reimbursement of medical fees and hospital charges incurred by civil service eligible persons is \$41M. The 2005-06 draft estimate for the same expenses is \$44.6M.

Signature	
Name in block letters _	Dr P Y LAM
Post Title	Director of Health
Date	6 April 2005

CONTROLLING OFFICER'S REPLY TO INITIAL WRITTEN/SUPPLEMENTARY QUESTION

Reply Serial No.

HWFB192

<u>Head</u>: 37 Department of Health <u>Subhead</u> (No. & title):

Question Serial No.

<u>Programme</u>: (3) Health Promotion

0842

Controlling Officer: Director of Health

Director of Bureau: Secretary for Health, Welfare and Food

Question: Please list in detail the respective amounts of actual and estimated subventions granted by the Administration to the Hong Kong Council on Smoking and Health and to the Tobacco Control Office of the Department of Health for the years from 2000-01 to 2005-06. Please also set out the relevant research projects and publicity/educational programmes completed and still in progress as well as the specific outcomes of such initiatives and their future directions.

Asked by: Hon. KWOK Ka-ki

Reply:

The provisions for Hong Kong Council on Smoking and Health (COSH) and Tobacco Control Office (TCO) of the Department of Health (DH) from 2000-01 to 2005-06 are as follows:

Financial Year	<u>COSH</u>	<u>TCO</u>
	\$M	\$M
2005-06	6.1*	17.5
2004-05	10.8	12.7
2003-04	9.3	9.2
2002-03	8.0	15.9
2001-02	11.7	11.7
2000-01	8.3	1.5

^{*} In addition to the \$6.1M allocated to COSH under Head 37, an amount of \$5M has been set aside for COSH to organise activities in respect of building a smoke-free community. The total subvention for COSH for 2005-06 would therefore be \$11.1M, representing an increase of \$0.3M when compared with 2004-05.

The total numbers of publicity, educational and research programmes conducted by COSH in the past years are as follows:

<u>Year</u>	<u>Number</u>
2000	222
2001	260
2002	260
2003	266
2004	325

In 2005, COSH plans to conduct 320 publicity, educational and research programmes concentrating on youth smoking intervention, promotion of smoke-free community and supporting legislative amendments of the Smoking (Public Health) Ordinance.

The TCO was set up in February 2001 to enhance and coordinate Government's tobacco control efforts. In the past years, TCO conducted various anti-smoking activities to facilitate compliance with the Smoking (Public Health) Ordinance. Over 1 200 restaurants with 200 seats or more had been visited since 2001 and about 220 workshops on smoke-free workplace were conducted in 2003 and 2004.

In 2005-06, TCO will launch mass media publicity campaigns to raise public awareness on the hazards of secondhand smoke and create a supportive environment for the forthcoming legislative amendments. Workshops will be organised to equip staff of statutory no-smoking areas with knowledge and skills to enforce the new legislative requirements. In addition, the DH smoking cessation counselling hotline will be upgraded to assist smokers to quit smoking.

Signature	
Name in block letters	Dr P Y LAM
Post Title	Director of Health
Date	7 April 2005

CONTROLLING OFFICER'S REPLY TO INITIAL WRITTEN/SUPPLEMENTARY QUESTION

Reply Serial No.

HWFB193

<u>Head</u>: 37 Department of Health <u>Subhead</u> (No. & title):

Question Serial No.

<u>Programme</u>: (1) Statutory Functions, (3) Health Promotion

0843

Controlling Officer: Director of Health

<u>Director of Bureau</u>: Secretary for Health, Welfare and Food

Question: As regards the implementation of the existing "Smoking (Public Health) Ordinance" in 2004-05, please give a breakdown of the expenditure involved, the staffing arrangement and the prosecution figures. When making amendments to the Ordinance in 2005-06, what are the necessary provision for expenditure and the package required?

Asked by: Hon. KWOK Ka-ki

Reply:

In 2004-05, Tobacco Control Office (TCO) had 30 staff, including one Senior Medical & Health Officer, Tobacco Control Officers and supporting staff. \$12.7M was spent on salaries and other expenditure such as health education and publicity. At present, the Department of Health does not have prosecution power under Smoking (Public Health) Ordinance (Cap 371).

In 2005-06, upon the enactment of the proposed amendments to Cap 371, the staffing level of TCO will be enhanced from 30 to 60 and the work will be realigned to undertake the new enforcement duties, publicity and education work. In 2005-06, the total expenditure of TCO is expected to be \$17.5M.

Signature _	
Name in block letters	Dr P Y LAM
Post Title	Director of Health
Date	8 April 2005

CONTROLLING OFFICER'S REPLY TO INITIAL WRITTEN/SUPPLEMENTARY QUESTION

Reply Serial No. **HWFB194**

<u>Head</u>: 37 Department of Health

Subhead (No. & title):

Question Serial No.

0852

<u>Programme</u>: (2) Disease Prevention

Controlling Officer: Director of Health

Director of Bureau: Secretary for Health, Welfare and Food

Question: For the year 2005-06, what plan(s) does the Government have to provide integrated services to the elderly? What are their expenditures and staff establishment?

Asked by: Hon. LEE Kok-long, Joseph

Reply:

In 2005-06, the Elderly Health Services of the Department of Health will continue to provide services to the elderly through 18 Elderly Health Centres (EHCs) and 18 Visiting Health Teams (VHTs). Services provided by EHCs include physical checkup, health assessment, counselling, curative treatment and health education. VHTs reach out into the community and residential care homes for the elderly in collaboration with other care providers to achieve wide dissemination of health knowledge to elderly and their carers. The teams also carry out influenza vaccination programme for elderly residing in institutions.

The provision for Elderly Health Services in 2005-06 is \$148.6M and the number of staff is as follows -

Medical	34
Nursing	100
Allied Health	51
Executive and Clerical	42
Other Supporting	36
Total	<u>263</u>

Signature_		
Name in block letters _	Dr P Y LAM	
Post Title _	Director of Health	
Date	6 April 2005	

CONTROLLING OFFICER'S REPLY TO INITIAL WRITTEN/SUPPLEMENTARY QUESTION

Reply Serial No.

HWFB195

<u>Head</u>: 37 Department of Health

Subhead (No. & title):

Question Serial No.

0853

Programme: (2) Disease Prevention

Controlling Officer: Director of Health

<u>Director of Bureau</u>: Secretary for Health, Welfare and Food

Question: The attendance at maternal and child health centers for the family planning service is expected to decrease from 248 500 in 2004 (Actual) to 220 000 in 2005 (Estimate), while the attendance for the maternal health service is anticipated to stand at 128 000. Would the Administration inform us of:

- The reasons for the projected decrease in the attendance for the family planning service?
- The measures to promote the family planning services among the public?

<u>Asked by</u>: Hon. LEE Kok-long, Joseph

Reply:

The change in estimated attendance figure for Maternal and Child Health Centres (MCHCs) of the Department of Health (DH) for family planning service in 2005 is a result of streamlining of procedures, which will save service users from making frequent visits to the MCHCs.

The family planning service is publicised to the general public through DH webpage and information leaflets. It is introduced in the booklet for new immigrants prepared by the Home Affairs Department. DH also promotes the service to potential clients during their attendances for antenatal, postnatal and child health services at MCHCs, and to patients of the Obstetrics & Gynaecological Departments of public hospitals.

Signature _	
Name in block letters _	Dr P Y LAM
Post Title _	Director of Health
Date	7 April 2005

CONTROLLING OFFICER'S REPLY TO INITIAL WRITTEN/SUPPLEMENTARY QUESTION

Reply Serial No.

HWFB196

Head: 37 Department of Health Sub

Subhead (No. & title):

Question Serial No.

0854

Programme: (2) Disease Prevention

Controlling Officer: Director of Health

<u>Director of Bureau</u>: Secretary for Health, Welfare and Food

<u>Question</u>: The attendance at maternal and child health centres for the cervical screening service is expected to increase from 80 000 in 2004 (Actual) to 100 000 in 2005 (Estimate). Would the Administration inform us of:

- the reason(s) for the estimated increase in the attendance for the cervical screening service.
- the expenditure and staff establishment involved for such programme.
- the age group and education level of women who received the screening service in 2004-05.

Asked by: Hon. LEE Kok-long, Joseph

Reply:

The territory-wide Cervical Screening Programme (CSP) is organised by the Department of Health (DH) with participation of public and private medical sectors, and non-governmental organisations.

The actual number of attendances for cervical screening at Maternal and Child Health Centres (MCHCs) of DH during the 10-month period since its launch in March 2004 was 80 000. We project that the total number of attendances will reach 100 000 in the full year period in 2005.

There is no data on the education attainment of CSP clients of MCHCs. The age distribution of the clients between March and December 2004 is as follows:

Age Group (years)	Percentage
< 25	0.3%
25-49	76.8%
50-64	22.2%
> 64	0.7%

The provision for CSP in DH is \$35M in 2005-06 with 78 staff involved in providing the service.

Signature	
Name in block letters	Dr P Y LAM
Post Title	Director of Health
_ Date	7 April 2005

CONTROLLING OFFICER'S REPLY TO INITIAL WRITTEN/SUPPLEMENTARY QUESTION

Reply Serial No.

HWFB197

Head: 37 Department of Health

Subhead (No. & title):

Question Serial No.

0855

Programme: (3) Health Promotion

Controlling Officer: Director of Health

Director of Bureau: Secretary for Health, Welfare and Food

Question: Regarding the enhancement of public health promotion programmes to instil a healthy lifestyle concept in the community, would the Government inform us of:

- the reason(s) for the estimated drop in the attendances for health education activities from 1 237 000 in 2004 (Actual) to 1 100 000 in 2005 (Estimate). What is/are the implication(s) of the reduction in the number of activities on the implementation of the programmes?
- the expenditure and staff establishment involved for such programmes in 2005 as compared to 2004.

Asked by: Hon. LEE Kok-long, Joseph

Reply:

In 2005-06, the Department of Health will enhance its health promotion programmes on healthy living. The estimated attendance for 2005 reflects the baseline level of health education activities planned for the year. The relatively high attendance in 2004 is related to the enhancement of the dengue fever awareness programmes conducted in that summer.

The expenditure for health promotion programmes in the Department is \$59.2M and \$57.3M in 2004-05 and 2005-06 respectively. The establishment is 83 for both years.

Signature_		
Name in block letters _	Dr P Y LAM	
Post Title_	Director of Health	
Date	7 April 2005	

CONTROLLING OFFICER'S REPLY TO INITIAL WRITTEN/SUPPLEMENTARY QUESTION

Reply Serial No.

HWFB198

<u>Head</u>: 37 Department of Health <u>Subhe</u>

Subhead (No. & title):

Question Serial No.

0877

<u>Programme</u>: (1) Statutory Functions

Controlling Officer: Director of Health

<u>Director of Bureau</u>: Secretary for Health, Welfare and Food

Question: In supporting the Chinese Medicine Council in the registration of Chinese medicine practitioners and proprietary Chinese medicines (pCm), what are the expenditure and staff establishment in 2005-06? What is the estimated number of pCm that could be registered in the coming year? What is the anticipated time of completion for the registration of pCm currently on sale?

<u>Asked by</u>: Hon. LEE Kok-long, Joseph

Reply:

The provision in 2005-06 for registration of Chinese medicine practitioners (CMPs) is about \$2M. The number of staff deployed to handle registration and renewal of practising certificates of CMPs in 2005-06 is as follows -

	Full-time
	Equivalent
Executive Officer	1
Administrative Assistant	2
Clerical staff	10.5
Total	13.5

The provision in 2005-06 for registration of proprietary Chinese medicines (pCm) is about \$10M. The number of staff deployed to handle registration of pCm in 2005-06 is as follows -

	Full-time
	Equivalent
Senior Pharmacist	1
Pharmacist	10
Chinese Medicine Officer	1
Assistant Chinese Medicine Officer	4.5
Administrative Assistant	1
Dispenser	3
Clerical staff	19
Total	39.5

We expect to complete the registration of those pCm applications in hand in about two years. About 6 000 applications will be processed in 2005-06.

Signature	
Name in block letters	Dr P Y LAM
Post Title	Director of Health
Date	6 April 2005

Reply Serial No.

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HWFB199

CONTROLLING OFFICER'S REPLY TO INITIAL WRITTEN/SUPPLEMENTARY QUESTION

Question Serial No. Head: 37 Department of Health Subhead (No. & title):

<u>Programme</u>: (1) Statutory Functions

0878

Controlling Officer: Director of Health

Director of Bureau: Secretary for Health, Welfare and Food

Question: Ten permanent posts are to be created under this Programme.

What are their ranks and scope of responsibilities?

Asked by: Hon. LEE Kok-long, Joseph

Reply:

In 2005-06, the Department of Health will create 22 posts and delete 12 vacant posts under Programme (1). The net creation is 10 posts. Most of the posts to be created are related to the formation of a core team of staff to undertake new enforcement duties, publicity and education work upon the enactment of the proposed amendments to the Smoking (Public Health) Ordinance (Cap. 371). The ranks of the posts are under consideration.

Signature	
Name in block letters	Dr P Y LAM
Post Title	Director of Health
— Date	6 April 2005

CONTROLLING OFFICER'S REPLY TO INITIAL WRITTEN/SUPPLEMENTARY QUESTION

Reply Serial No.

HWFB200

Head: 37 Department of Health

Subhead (No. & title):

Question Serial No.

0879

<u>Programme</u>: (2) Disease Prevention

Controlling Officer: Director of Health

<u>Director of Bureau</u>: Secretary for Health, Welfare and Food

Question: Since the operation of the Centre for Health Protection (CHP) in 2004-05,

- (a) what is the effectiveness in enhancing the capacity in the control of communicable diseases?
- (b) what are the numbers and distribution of various healthcare workers in CHP?

Asked by: Hon. LEE Kok-long, Joseph

Reply:

The CHP has launched a number of initiatives to enhance the effectiveness in the control of communicable diseases. In respect of surveillance, the CHP has created a central notification office and an on-line electronic system to facilitate doctors to report communicable diseases more easily and rapidly. The CHP has also expanded the disease surveillance network to cover child care centres, and will further expand it to include elderly homes and pharmacies.

The CHP collaborates with local, regional and international stakeholders in preventing and controlling communicable diseases. At the local level, it works closely with the Hospital Authority and private doctors in strengthening the control of hospital outbreaks. At the regional and global levels, a speedy and effective communication channel has been established with the Guangdong Department of Health and Macao Centre for Disease Control and Prevention. The CHP also monitors communicable disease intelligence globally and maintains close liaison with the World Health Organisation and other international health authorities.

To enhance effective risk communication, the CHP publishes information on communicable diseases and issues communicable diseases alerts to the public and health care providers. A Field Epidemiology Training Programme has been

established to strengthen capacity building on communicable disease control. The programme will provide training to CHP professionals, paramedical staff and others with an interest in communicable disease epidemiology including professionals in the Hospital Authority and private doctors.

On prevention and control of sexually-transmitted infections, human immunodeficiency virus (HIV) and tuberculosis (TB), various guidelines have been promulgated. These include guidelines on case management of sexually-transmitted infections, infection control practice for HIV transmission in health care settings, and treatment of latent TB infections. The CHP has also expanded voluntary urinary HIV testing in methadone clinics and put in place sentinel surveillance of syndromic sexually-transmitted infections in the private sector.

Laboratory capacity has been enhanced by the development of various rapid molecular methods for the detection of emerging infections. For example, results of SARS and H5N1 avian influenza testing can be available within three hours.

Preparedness for major communicable disease outbreaks has been improved, and contingency plans developed and reviewed. Exercises and drills have also been and will be conducted to ensure smooth running of these plans.

With the above major initiatives, Hong Kong is now much more prepared in the combat against communicable diseases.

There are 967 medical, nursing and para-medical posts in CHP. The breakdown is at Annex.

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Signature_	
Name in block letters	Dr P Y LAM
Post Title	Director of Health
	7 April 2005

Distribution of Medical, Nursing and ara-medical Posts in CHP (31 March 2005)

	Controller's Office	SEB	ICB	ERIB	PHSB	PHLSB	PMPDB	Total
Medical	1	60	11	2	78	20	17	189
Nursing	0	97	11	0	319	0	21	448
Para-medical*	0	3	1	0	64	261	1	330
Total	1	160	23	2	461	281	39	967

^{*} Para-medical posts include medical laboratory personnel, dispensers, radiographers etc.

Note:

SEB: the Surveillance and Epidemiology Branch

ICB: the Infection Control Branch

ERIB: the Emergency Response and Information Branch

PHSB: the Public Health Services Branch

PHLSB: the Public Health Laboratory Services Branch

PMPDB: the Programme Management and Professional Development Branch

CONTROLLING OFFICER'S REPLY TO INITIAL WRITTEN/SUPPLEMENTARY QUESTION

Reply Serial No.

HWFB201

<u>Head</u>: 37 Department of Health <u>Subhead</u> (No. & title):

Question Serial No.

0880

Programme: (2) Disease Prevention

Controlling Officer: Director of Health

<u>Director of Bureau</u>: Secretary for Health, Welfare and Food

Question: It is mentioned under this Programme that specific work of the Department of Health in 2005-06 includes improving the oral health of primary school children. In this respect, can the Administration provide:

- (a) the details of such work;
- (b) the staffing level involved in such work and the related expenditure;
- (c) the correlation, if any, between such work and the projected 415 000 primary school children participating in the School Dental Care Service as forecasted by the Administration under 2005 (Estimate), and the reason(s) for such correlation?

Asked by: Hon. LEE Kok-long, Joseph

Reply:

- (a) The Department of Health promotes the oral health of primary school children through the School Dental Care Service. The Service provides dental examinations, preventive dental services and treatments to primary school children and promotes good oral health habits among them.
- (b) The establishment of the School Dental Care Service in 2005-06 will be 451, comprising Dental Officers, Dental Therapists and other supporting staff. The provision for this service in 2005-06 is \$170.5M.
- (c) The projected 415 000 primary school children will be the recipients of the above preventive and promotive dental services. The number is directly proportional to the workload of the School Dental Care Service.

Signature_		
Name in block letters _	Dr P Y LAM	
Post Title _	Director of Health	
Date	7 April 2005	

CONTROLLING OFFICER'S REPLY TO INITIAL WRITTEN/SUPPLEMENTARY QUESTION

Subhead (No. & title):

Reply Serial No.

HWFB202

Question Serial No.

0881

Head: 37 Department of Health

Programme: (2) Disease Prevention

<u>Controlling Officer</u>: Director of Health

<u>Director of Bureau</u>: Secretary for Health, Welfare and Food

Question: The provisions for the Department of Health and the Hospital Authority in 2005-06 are 2.5% and 3.3% less than the 2004-05 (Revised) provisions respectively and both organisations provide preventive services to the public. In this respect, can the Administration advise if a mechanism has been established to coordinate the work of the two organisations in disease prevention so as to ensure effective utilisation and allocation of resources? If yes, please provide the details of such mechanism.

<u>Asked by</u>: Hon. LEE Kok-long, Joseph

Reply:

The Department of Health (DH) has the overall responsibility for public health, and the prevention and control of diseases. In fulfilling this role, DH works closely with various sectors, institutions and agencies including the Hospital Authority (HA).

HA is primarily responsible for patient care and medical treatment. In respect of the prevention of diseases, HA is mainly responsible for disease surveillance in the hospital and clinical setting and adopting effective strategies to prevent disease progression and complications.

DH and HA work closely together at all levels to ensure that the work of the two organisations is coordinated with minimum duplication of efforts. In addition, the Health, Welfare and Food Bureau, in formulating public health policies and managing the use of resources amongst the departments and agencies under its purview, also ensures that resources are used by DH and HA in targetted areas without duplications. For specific matters of public health concern, ad hoc working groups or meetings are formed or convened with the

participation of DH, HA and relevant parties. There are a number of committees and working groups which serve as a platform of coordination and collaboration in the disease prevention context for DH and HA, as well as for other stakeholders, such as Advisory Committee on Centre for Health Protection (CHP), Cancer Coordinating Committee and Working Group on Poison Prevention and Control. Furthermore, the Director of Health serves as one of the members of the HA Board and contributes towards the direction-setting of HA's disease prevention work.

For the prevention and control of infectious diseases, the CHP has adopted an integrated approach in carrying out many of its health protection functions. Apart from collaborating closely with HA in the development of health protection programmes, the CHP has engaged a team of professional staff from HA for stronger partnerships in the areas of infection control and epidemiological investigations.

Signature	
Name in block letters	Dr P Y LAM
Post Title	Director of Health
 Date	8 April 2005

CONTROLLING OFFICER'S REPLY TO INITIAL WRITTEN/SUPPLEMENTARY QUESTION

Reply Serial No.

Question Serial No.

HWFB203

<u>Head</u> : 37 Department of Health	Subhead (No. & title):	Question Serial No
Programme : (4) Curative Care		0882

Controlling Officer: Director of Health

<u>Director of Bureau</u>: Secretary for Health, Welfare and Food

Question: What are the respective amounts of subventions provided by the Department of Health under this Programme to the two Chinese Medicine Clinics run by the Tung Wah Group of Hospitals in 2005-06? How do they compare with the actual subventions in 2004-05?

<u>Asked by</u>: Hon. LEE Kok-long, Joseph

Reply:

The Department of Health provided a subvention of \$2.9M in 2004-05 to Tung Wah Group of Hospitals to meet part of the operating expenses of two Chinese Medicine Clinics. The subvention in 2005-06 will be \$2.7M. The reduction in subvention has taken into account the civil service pay adjustment and the need for efficiency savings.

Signature	
Name in block letters _	Dr P Y LAM
Post Title	Director of Health
Date	8 April 2005

CONTROLLING OFFICER'S REPLY TO INITIAL WRITTEN/SUPPLEMENTARY QUESTION

Reply Serial No.

HWFB205

<u>Head</u>: 37 Department of Health <u>Subhead</u> (No. & title):

Question Serial No.

<u>Programme</u>: (2) Disease Prevention

0905

Controlling Officer: Director of Health

<u>Director of Bureau</u>: Secretary for Health, Welfare and Food

Question: The 2005 Policy Address stated that the Government would launch a Head Start Programme for pre-school children and their families. Is there any formal platform to allow different sectors (medical, welfare, child care and child protection, etc.) to deliberate the programme framework?

Asked by: Hon. CHEUNG Chiu-hung, Fernando

Reply:

Community-based coordinating committees will be set up in the four selected communities to implement the Head Start Programme (HSP) and to consult various stakeholders of health, social welfare and education sectors in the community. For instance, a Sham Shui Po HSP Coordinating Committee led by the Department of Health with representatives from the Hospital Authority, the Social Welfare Department, and the Education and Manpower Bureau at the district level has been set up to prepare for the launch of the pilot HSP in Sham Shui Po.

Signature _	
Name in block letters	Dr P Y LAM
Post Title	Director of Health
Date	7 April 2005

CONTROLLING OFFICER'S REPLY TO INITIAL WRITTEN/SUPPLEMENTARY QUESTION

Reply Serial No.

HWFB249

Question Serial No.

<u>Head</u>: 37 Department of Health

Subhead (No. & title):

0923

<u>Programme</u>: (3) Health Promotion

Controlling Officer: Director of Health

<u>Director of Bureau</u>: Secretary for Health, Welfare and Food

Question: On health promotion, the 2005-06 estimate for the subvented sector represents a significant decrease of 22.6% against the 2004-05 revised provision. What is/are the reason(s)?

Asked by: Hon. LEUNG Yiu-chung

Reply:

The aim of Programme (3), Health Promotion, is to promote health and increase health awareness in the community and among specific target groups. The work is discharged by the Department's various units in collaboration with other community groups. Under this Programme, the Department subvents activities of three organisations with the following details:

Subvented organisation	2004-05	<u>2005-06</u>	Difference
	\$M	\$M	\$M
Hong Kong St. John Ambulance	11.9	11.3	-0.6
Hong Kong Red Cross	0.8	0.8	_
Hong Kong Council on Smoking	10.8	6.1*	-4.7*
and Health (COSH)			

* In addition to the \$6.1M allocated to COSH under Head 37, an amount of \$5M has been set aside to organise activities in respect of building a smoke-free community. The total subvention for COSH for 2005-06 would therefore be \$11.1M, representing an increase of \$0.3M when compared with 2004-05. The question of a reduction of subvention of 22.6% therefore does not arise. This latest development has not been reflected in the 2005-06 Estimates, which was prepared before the subvention arrangement for COSH for 2005-06 was finalised.

Signature_		
Name in block letters _	Dr P Y LAM	
Post Title _	Director of Health	
Date	7 April 2005	

CONTROLLING OFFICER'S REPLY TO INITIAL WRITTEN/SUPPLEMENTARY QUESTION

Reply Serial No.

HWFB250

<u>Head</u>: 37 Department of Health <u>Subhead</u> (No. & title): 000

Question Serial No.

Operational

<u>Programme</u>: expenses

0924

<u>Controlling Officer</u>: Director of Health

<u>Director of Bureau</u>: Secretary for Health, Welfare and Food

Question:

- (a) The overall financial provision for the Department of Health for the year is 2.5% less than the 2004-05 revised provision. Seven out of the eight Programmes have a decreased provision when compared with the previous year. As explained in the Analysis of Financial and Staffing Provision, the decrease is mainly due to the effect of the civil service pay adjustment. Apart from the civil service pay adjustment, what other items will have their expenditure reduced? Will it affect the services originally provided?
- (b) Under Programme (2) Disease Prevention, owing to the deletion of 48 permanent posts in the year, the 2005-06 estimate is reduced significantly by \$39M or 3.2%. Regarding these 48 posts, what are their ranks, annual salaries and scope of responsibilities? How will the work be distributed upon their deletion?
- (c) Under Programme (3) Health Promotion, the estimate is decreased by \$11.1M or 5%. Is such decrease due to reduced work programmes, in addition to the civil service pay adjustment and the deletion of one permanent post?

Asked by: Hon. FANG Kang, Vincent

Reply:

(a) The decrease in provision in 2005-06 is mainly due to the effect of 2005 civil service pay adjustment and implementation of various saving measures such as service re-organisation, service mode re-engineering and reduction in departmental expenses. Service standards will not be adversely affected.

- (b) In 2005-06, the Department of Health will create one post and delete 49 posts which will fall vacant through natural wastage under Programme (2). The net deletion is 48 posts. They are involved in services responsible for prevention and control of diseases, e.g. family health, social hygiene and laboratory support. The level of service will be maintained through re-engineering of operations and staff redeployment. The annual salaries of the posts to be deleted are at Annex.
- (c) Apart from the effect of the civil service pay adjustment and deletion of the post, the decreased provision for 2005-06 in Programme (3) is mainly due to full year effect of posts deleted in 2004-05 and \$4.5M reduction in non-recurrent subvention to the Council on Smoking and Health (COSH) in the year. The latter reduction is more than offset by the additional \$5M set aside for COSH to launch a community building programme to foster a smoke-free environment in Hong Kong.

Signature	
Name in block letters	Dr P Y LAM
Post Title	Director of Health
— Date	8 April 2005

Annex

Posts to be deleted under Programme (2)

<u>Rank</u>	Annual Salaries (per post) (estimated at mid-point salary value as at 1.4.2005) \$	<u>No.</u>
Medical and Health Officer	651,060	5
Registered Nurse	289,620	5
Inoculator	152,280	6
Midwife	216,120	12
Dental Surgery Assistant	182,580	3
Senior Medical Technologist	622,440	1
Medical Laboratory Technician I	365,160	1
Medical Laboratory Technician II	216,120	1
Scientific Officer (Medical)	568,020	1
Typist	134,040	1
Artisan	142,860	1
Property Attendant	115,380	3
Workman II	106,512	9
Total		49

CONTROLLING OFFICER'S REPLY TO INITIAL WRITTEN/SUPPLEMENTARY QUESTION

Reply Serial No.

HWFB251

Head: 37 Department of Health Subhead (No. & title): 000

Question Serial No.

Operational

<u>Programme</u>: expenses

0925

Controlling Officer: Director of Health

<u>Director of Bureau</u>: Secretary for Health, Welfare and Food

Question: Please account for the following -

- (a) In the establishment ceiling 2005-06, it is indicated that there will be a deletion of 91 non-directorate posts during the year. And in the analysis of financial and staffing provision, it is stated that there would be a deletion of 48 permanent posts under Programme (2), 1 under Programme (3), 26 under Programme (4) and 6 under Programme (5), adding to a total of 81. At the same time, there will be a net creation of 10 posts under Programme (1), giving a total deletion of 71 posts. What Programme do the remaining 20 posts to be deleted belong to?
- (b) What are the ranks of the posts to be deleted in the year? What kinds of work support do they provide? By what way(s) will the Department achieve such deletion? On a voluntary basis or via other means?
- (c) Will there be any replacement for the posts to be deleted? If yes, will their ranks be lower or higher than the original posts?
- (d) Will such staff change affect the services currently provided by the Department of Health? Will any services be reduced consequently or even be transferred to other departments or cancelled?

Asked by: Hon. FANG Kang, Vincent

Reply:

(a) The 20 posts are for general grades staff working in the general out-patient clinics of the Hospital Authority (HA).

- (b) In 2005-06, the Department of Health will create 25 posts and delete 116 posts which will fall vacant through natural wastage. The net deletion is 91 posts. 20 posts are general grades posts in the general out-patient clinics of the HA. Others provide support to statutory functions, disease prevention, health promotion, curative care and rehabilitation programme. Details are at Annex.
- (c) The Department of Health will re-distribute the duties and does not have plans to recruit replacement staff.
- (d) The current level of service will be maintained through service re-engineering and staff redeployment.

Signature	
Name in block letters	Dr P Y LAM
Post Title	Director of Health
Date	6 April 2005

Annex

Posts to be deleted in 2005-06

Rank		Number
Medical and Health Officer		12
Senior Nursing Officer		1
Registered Nurse		10
Midwife		12
Inoculator		6
Dental Officer		4
Dental Surgery Assistant		4
Pharmacist		6
Chief Dispenser		2
Radiographic Technician		1
Senior Medical Technologist		1
Medical Laboratory Technician I		1
Medical Laboratory Technician II		1
Scientific Officer (Medical)		1
Physiotherapist I		2
Assistant Clerical Officer		19
Clerical Assistant		1
Office Assistant		2
Telephone Operator		1
Typist		1
Supplies Assistant		1
Artisan		3
Property Attendant		8
Workman II		16
	Total	116

CONTROLLING OFFICER'S REPLY TO INITIAL WRITTEN/SUPPLEMENTARY QUESTION

HWFB252

Reply Serial No.

Head: 37 Department of Health Su

Subhead (No. & title):

Question Serial No.

0998

Programme: (3) Health Promotion

Controlling Officer: Director of Health

<u>Director of Bureau</u>: Secretary for Health, Welfare and Food

Question:

- (1) Please set out the respective subventions to be granted under this Programme to various subvented organisations in 2005-06, and make a comparison with the 2004-05 revised provision.
- (2) What is/are the reason(s) for a reduction of over 20% in the subvention for the subvented sector under this Programme?

Asked by: Hon. LI Kwok-ying

Reply:

The subvention to various subvented organisations for 2004-05 and 2005-06 is as follows:

Subvented organisation	2004-05	<u>2005-06</u>	<u>Difference</u>
	\$M	\$M	\$M
Hong Kong St. John Ambulance	11.9	11.3	-0.6
Hong Kong Red Cross	0.8	0.8	-
Hong Kong Council on Smoking	10.8	6.1*	-4.7*
and Health (COSH)			

* In addition to the \$6.1M allocated to COSH under Head 37, an amount of \$5M has been set aside for COSH to organise activities in respect of building a smoke-free community. The total subvention for COSH for 2005-06 would therefore be \$11.1M, representing an increase of \$0.3M when compared with 2004-05. The question of a reduction of subvention of over 20% therefore does not arise.

Signature_		
Name in block letters _	Dr P Y LAM	
Post Title _	Director of Health	
Date	8 April 2005	

CONTROLLING OFFICER'S REPLY TO INITIAL WRITTEN/SUPPLEMENTARY QUESTION

Reply Serial No.

HWFB253

0999

<u>Head</u>: 37 Department of Health <u>Subhead</u> (No. & title):

Question Serial No.

Programme: (3) Health Promotion

Controlling Officer: Director of Health

Director of Bureau: Secretary for Health, Welfare and Food

<u>Question</u>: What is the government expenditure for the coming year on services provided to help smokers quit smoking? What is the anticipated number of smokers receiving such services? What is the figure for successful cases of smoking cessation?

Asked by: Hon. LI Kwok-ying

Reply:

The Department of Health (DH) promotes smoking cessation through health education, cessation counselling telephone hotline and smoking cessation service in various clinics.

In 2005-06, it is estimated that about 3 000 calls will be handled by the cessation hotline and around 2 200 clients will utilise the smoking cessation service run by DH. The estimated cessation rate at one year is up to 30%. In 2005-06, the estimated expenditure on medication for smoking cessation is about \$1.4M.

Hospital Authority (HA) also provides smoking cessation service through 16 hospital and community-based smoking cessation and counselling centres. HA expects to recruit about 3 000 smokers during 2005-06. According to HA, the estimated cessation rate at one year is also up to 30%. As the smoking cessation programmes are provided as part of HA services, the expenditure involved in rendering such services cannot be separately identified.

Signature_	
Name in block letters _	Dr P Y LAM
Post Title_	Director of Health
Date	8 April 2005

CONTROLLING OFFICER'S REPLY TO INITIAL WRITTEN/SUPPLEMENTARY QUESTION

Reply	Serial	No.
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SB151

Head: 37 Department of Health

Subhead (No. & title):

Question Serial No.

1000

<u>Programme</u>: (6) Treatment of Drug Abusers

<u>Controlling Officer</u>: Director of Health

<u>Director of Bureau</u>: Secretary for Security

Question: In view of the increasing number of soft drug users, what measures does the Administration have in providing treatment to them? What are the expenditure and subvention/provision involved?

Asked by: Hon. LI Kwok-ying

Reply:

Drug treatment and rehabilitation services are provided by various Government departments and institutions, including Correctional Services Department, Social Welfare Department, Department of Health, clinics under the Hospital Authority and institutions run by non-government organisations.

The Department of Health operates a Methadone Treatment Programme to provide treatment of opiate abusers through a network of 20 clinics. The Department also provides subvention to three non-governmental organisations to operate five centres for residential treatment and rehabilitation services to drug abusers. The majority of patients admitted to these centres are opiate abusers. Multiple drug abusers including psychotrophic substance abusers are also admitted. The subvention for 2005-06 is \$82M.

Signature _	
Name in block letters	Dr P Y LAM
Post Title	Director of Health
Date	7 April 2005

Reply Serial No.

Question Serial No.

CONTROLLING OFFICER'S REPLY TO INITIAL WRITTEN/SUPPLEMENTARY QUESTION

HWFB254

Head: 37 Department of Health Subhead (No. & title): 700

: 700 General

1052

non-recurrent

Programme: (2) Disease Prevention

Controlling Officer: Director of Health

<u>Director of Bureau</u>: Secretary for Health, Welfare and Food

Question: Regarding the programme to conduct a population health survey under item 726, please provide the details for its content, the breakdown of its estimated expenditure, working schedule and progress? What is/are the performance target(s) envisaged in 2005-06?

<u>Asked by</u>: Hon. LAU Chin-shek

Reply:

The Department of Health has a plan to conduct a series of surveys on the health status of the Hong Kong population.

The first survey was conducted in 2003-04 to obtain information on physical health, psychological health and lifestyle practices. Two other surveys are also being conducted, one covers cardiovascular disease and its risk factors and another on child health. The former is expected to be completed by the end of 2005 and the latter, mid-2006. The costs of the three surveys are \$1.3M, \$0.9M and \$1.3M respectively.

Signature	
Name in block letters	Dr P Y LAM
Post Title	Director of Health
	7 April 2005

CONTROLLING OFFICER'S REPLY TO INITIAL WRITTEN/SUPPLEMENTARY QUESTION

Reply Serial No.

HWFB255

Head: 37 Department of Health Subhead (No. & title): 700

Question Serial No.

General

Programme: (3) Health Promotion non-recurrent

1053

Controlling Officer: Director of Health

<u>Director of Bureau</u>: Secretary for Health, Welfare and Food

Question: Regarding the Smoke-free Workplace Programme under item 733, please provide the details for its content, the breakdown of its estimated expenditure, working schedule and progress. What is/are the performance target(s) envisaged in 2005-06?

Asked by: Hon. LAU Chin-shek

Reply:

The Smoke-free Workplace Programme (SWP) commenced in January 2003. The aim is to educate and assist management and staff of companies to implement indoor smoke-free workplace policy. Activities of the SWP include: (1) training workshops to facilitate the managers and staff of workplace to implement the smoke-free policy; (2) roving exhibitions to promote smoke-free culture in the community; and (3) health education to the general public.

The programme was launched in early 2003. Up to end of 2004, over 5 100 staff from more than 1 800 companies have been trained on implementing smoke-free policy, about 120 roving exhibitions were conducted in public premises and 1.6 million items of health education materials were provided to the target population.

The provision for implementing the SWP is \$3.3M, comprising staff cost of \$3M and cost for production of health education materials of \$0.3M.

In 2005-06, it is planned to launch a series of media publicity campaigns to raise public awareness on the hazards of secondhand smoke. Training workshops will also be organised to equip the managers and staff of statutory no smoking areas with knowledge and skills to enforce the new legislative requirements. We aim to increase the participants' knowledge on hazards of secondhand smoke and enlist their support for the smoke-free workplace policy.

Signature	
Name in block letters	Dr P Y LAM
Post Title	Director of Health
 Date	6 April 2005

CONTROLLING OFFICER'S REPLY TO INITIAL WRITTEN/SUPPLEMENTARY QUESTION

Reply Serial No.

HWFB256

1072

<u>Head</u>: 37 Department of Health <u>Subhead</u> (No. & title):

Question Serial No.

Programme: (2) Disease Prevention

Controlling Officer: Director of Health

Director of Bureau: Secretary for Health, Welfare and Food

<u>Question</u>: Please provide the breakdown of expenditure, provision allocated and percentage changes for various services provided by maternal and child health centres for the years from 2002-03 to 2005-06, and account for the corresponding percentage increases or decreases.

Asked by: Hon. KWOK Ka-ki

Reply:

The services provided by the Maternal and Child Health Centers (MCHCs) include a comprehensive range of health promotion and disease prevention services for children below six; antenatal and postnatal care, family planning service to women of reproductive ages; and cervical cancer screening for women aged 25 to 64 years. There is no separate provision for each of the services as they are funded by the provision for the Maternal and Child Health Service as a whole. The expenditure/provision for these services is as follows:

Financial		Percentage
<u>Year</u>	<u>\$M</u>	<u>change</u>
2005-06	389.2	-2.9%
2004-05	401.0	-1.5%
2003-04	407.3	+3.4%
2002-03	394.0	-

The increased expenditure in 2003-04 was mainly due to the full year effect of providing a parenting programme and increased expenditure for conducting HIV tests for antenatal mothers. The decrease in 2004-05 and 2005-06 was mainly due to civil service pay adjustments for 2004 and 2005, and savings arising from rationalisation of services. The decrease was partly offset by the effect of launching the cervical screening service in March 2004.

Signature	
Name in block letters	Dr P Y LAM
Post Title	Director of Health
_ Date	6 April 2005

CONTROLLING OFFICER'S REPLY TO INITIAL WRITTEN/SUPPLEMENTARY QUESTION

Reply Serial No.

CSB037

Head: 37 Department of Health Subhead (No. & title):

Question Serial No.

Programme: (7) Medical and Dental Treatment for Civil Servants

1074

Controlling Officer: Director of Health

<u>Director of Bureau</u>: Secretary for the Civil Service

Question: What is/are the reason(s) for the increasing demand for payment

and reimbursement of medical fees and hospital charges?

Asked by: Hon. LEE Cheuk-yan

Reply:

The provision for Programme (7) under Head 37 covers medical and dental services provided by the Department of Health to civil service eligible persons (i.e. civil servants, pensioners and their eligible dependants) as well as payment and reimbursement of medical fees and hospital charges incurred by civil service eligible persons. Under the existing policy, civil service eligible persons may apply to the Government for reimbursement of expenses on drugs/equipment/services which form an essential part of the medical treatment as prescribed and certified by the attending Hospital Authority (HA) doctors on medical grounds but which are not available in HA or are chargeable by HA. In addition, the Government reimburses reasonable expenses on necessary treatment incurred by civil servants on duty/training/postings outside Hong Reimbursement to HA for the use of special accommodation beds by civil service eligible persons (for which the hospital is allowed to retain 50% of the hospital maintenance fee income and thus the Government has to reimburse HA the difference between 50% of the public rates and the rates payable by civil service eligible persons) is also covered by this programme. Expenditure on reimbursement of medical expenses is largely demand driven. projected an increase in the estimated expenditure for 2005-06 having regard to the expenditure trend in recent years.

Signature_	
Name in block letters _	Dr P Y LAM
Post Title _	Director of Health
Date	6 April 2005

Reply Serial No.

CONTROLLING OFFICER'S REPLY TO INITIAL WRITTEN/SUPPLEMENTARY QUESTION

HWFB257

Question Serial No. Head: 37 Department of Health Subhead (No. & title): 000 Operational 1147 expenses <u>Programme</u>: Controlling Officer: Director of Health Director of Bureau: Secretary for Health, Welfare and Food Question: What is the anticipated number of temporary staff to be employed in 2005-06? Please provide the breakdown by Programme, post, salary and contract period. Asked by: Hon. LEE Cheuk-yan Reply: Compared with 2004-05, it is estimated that the Department of Health will recruit about 32 additional full time contract staff in 2005-06. Details are at Annex. Signature Name in block letters Dr P Y LAM Director of Health Post Title

Date 7 April 2005

Projected no. of additional contract staff to be employed by Department of Health in 2005-06

		Monthly	No. of staff in different contract duration		
Programme Area	Job Title	Salary \$	Less than 1 year	1 – 2 year(s)	3 years
(1) Statutory Functions	Smoke-free Ambassador	6,300		2	
(1) Statutory Functions	Assistant Tobacco Control Officer	8,200		4	
(1) Statutory Functions	Tobacco Control Officer	10,000		2	
(1) Statutory Functions	Contract Engineer (Biomedical)	33,355 - 51,870		2	
(1) Statutory Functions	Project Officer (Chinese Medicine)	26,540		1	
(1) Statutory Functions	Chinese Medicine Assistant	17,145		4	

		Monthly	No. of staff in different contract duration		
Programme Area	Job Title	Salary \$	Less than 1 year	1 – 2 year(s)	3 years
(2) Disease Prevention	Project Assistant	6,800	7		
(2) Disease Prevention	Assistant Manager	22,000 - 26,000		1	
(2) Disease Prevention	Service Administrator	77,000		1	
(2) Disease Prevention	Contract Medical Laboratory Technician	10,700		1	
(2) Disease Prevention	Contract Doctor	33,355 - 54,255			5
(3) Health Promotion	Research Officer (Public Health)	26,540		1	
(3) Health Promotion	Infectious Disease Physician	72,135			1
		Total:	7	19	6

CONTROLLING OFFICER'S REPLY TO INITIAL WRITTEN/SUPPLEMENTARY QUESTION

Reply Serial No.

HWFB332

<u>Head</u> : 37 Department of Health <u>Subhead</u> (No. & title):	Question Serial No.
<u>Programme</u> : (1) Statutory Functions	1293
<u>Controlling Officer</u> : Director of Health	
<u>Director of Bureau</u> : Secretary for Health, Welfare and Food	
<u>Question</u> : What is the estimated expenditure for providing supportation Chinese Medicine Council of Hong Kong in registration of Chinese practitioners and proprietary Chinese medicines?	
Asked by: Hon. CHAN Yuen-han	
Reply:	
In 2005-06, the provision for registration of Chinese practitioners and registration of proprietary Chinese medicines is ab and \$10M respectively.	
Signature	
Name in block letters Dr P Y LAM	
Post Title Director of He	alth

Date 6 April 2005

CONTROLLING OFFICER'S REPLY TO INITIAL WRITTEN/SUPPLEMENTARY QUESTION

Reply Serial No.

HWFB333

Question Serial No.

	1		-	(,	
ъ	(a) D:	ъ	. •			1294

Subhead (No. & title):

Controlling Officer: Director of Health

Programme: (2) Disease Prevention

Head: 37 Department of Health

<u>Director of Bureau</u>: Secretary for Health, Welfare and Food

Question: The Administration estimates that the attendance at maternal and child health centres for "family planning service" will decrease from 248 500 in 2004 to 220 000 in 2005. How is the new indicator calculated and what is/are the reason(s) for its downward adjustment?

Asked by: Hon. CHAN Yuen-han

Reply:

The estimated attendance figure for Maternal and Child Health Centres (MCHCs) for family planning service in 2005 is based on the actual attendances in 2004 and the anticipated change in attendance as a result of streamlining of procedures, which will save service users from making frequent visits to the MCHCs.

Signature	
Name in block letters	Dr P Y LAM
Post Title	Director of Health
Date	7 April 2005

CONTROLLING OFFICER'S REPLY TO INITIAL WRITTEN/SUPPLEMENTARY QUESTION

Reply Serial No.

HWFB334

Head: 37 Department of Health	Subhead (No. & title):	Question Serial No.
•		

<u>Programme</u>: (2) Disease Prevention

1295

Controlling Officer: Director of Health

<u>Director of Bureau</u>: Secretary for Health, Welfare and Food

Question: The Administration has set new indicators for the "number of training activities on infection control" and the "number of attendances to training activities on infection control", with the former increased from 31 in 2004 to 70 in 2005 and the latter from 3 460 in 2004 to 8 500 in 2005. What is the estimated expenditure? What are the details?

Asked by: Hon. CHAN Yuen-han

Reply:

Infection control training will be organised for doctors, nurses and other staff of hospitals, clinics, elderly homes and child care centers in public and private sectors in 2005-06. It is estimated that \$8M will be spent on these activities in 2005-06.

Signature	
Name in block letters	Dr P Y LAM
Post Title	Director of Health
_ Date	7 April 2005

Reply Serial No.

CONTROLLING OFFICER'S REPLY TO INITIAL WRITTEN/SUPPLEMENTARY QUESTION

<u>Head</u>: 37 Department of Health <u>Subhead</u> (No. & title): 003 Question Serial No.

Recoverable salaries and

1296

allowance

<u>Programme</u>: (8) Personnel Management of Civil Servants Working in Hospital Authority

<u>Controlling Officer</u>: Director of Health

<u>Director of Bureau</u>: Secretary for Health, Welfare and Food

<u>Question</u>: The 2005 estimate for the indicator "number of civil servants working in HA managed" is 3 779, which represents a decrease of 585 against the actual number of 4 364 in 2004. What are the reasons? Does it involve manpower cut?

Asked by: Hon. CHAN Yuen-han

Reply:

The reduction of 585 civil servants working in the Hospital Authority (HA) is due to retirement and other wastage. The HA will replenish the vacated positions through internal redeployment or by new recruits.

Signature_	
Name in block letters	Dr P Y LAM
Post Title	Director of Health
Date	7 April 2005

Reply Serial No.

CONTROLLING OFFICER'S REPLY TO INITIAL WRITTEN/SUPPLEMENTARY QUESTION

HWFB336

Head: 37 Department of Health

Subhead (No. & title): 000

Operational
Programme:

expenses

Question Serial No.

Operational
expenses

<u>Controlling Officer</u>: Director of Health

<u>Director of Bureau</u>: Secretary for Health, Welfare and Food

Question:

What are the ranks and scope of responsibilities of the 91 permanent posts to be deleted?

Asked by: Hon. CHAN Yuen-han

Reply:

In 2005-06, the Department of Health will create 25 posts and delete 116 posts. The net deletion is 91 posts which include 20 posts for general grades staff working in general out-patient clinics of the Hospital Authority. Other posts to be deleted are involved in statutory functions, disease prevention, health promotion, curative care and rehabilitation programme. Details of the posts to be deleted are at Annex.

Signature	
Name in block letters	Dr P Y LAM
Post Title	Director of Health
Date	6 April 2005

Annex

Posts to be deleted in 2005-06

Rank		Number
Medical and Health Officer		12
Senior Nursing Officer		1
Registered Nurse		10
Midwife		12
Inoculator		6
Dental Officer		4
Dental Surgery Assistant		4
Pharmacist		6
Chief Dispenser		2
Radiographic Technician		1
Senior Medical Technologist		1
Medical Laboratory Technician I		1
Medical Laboratory Technician II		1
Scientific Officer (Medical)		1
Physiotherapist I		2
Assistant Clerical Officer		19
Clerical Assistant		1
Office Assistant		2
Telephone Operator		1
Typist		1
Supplies Assistant		1
Artisan		3
Property Attendant		8
Workman II	<u>-</u>	16
	Total	116

CONTROLLING OFFICER'S REPLY TO INITIAL WRITTEN/SUPPLEMENTARY QUESTION

SB152

Question Serial No.

	(, .	
Programme: (6) Treatment of Drug Abuse	ers 1298	

Subhead (No. & title):

Controlling Officer: Director of Health

Head: 37 Department of Health

<u>Director of Bureau</u>: Secretary for Security

<u>Question</u>: Regarding the reduction in the subvention for the subvented sector in 2005-06, how many subvented organisations will be affected? What is the average reduction in the subvention for each subvented organisation?

Asked by: Hon. CHAN Yuen-han

Reply:

There are three non-governmental organisations receiving subvention from the Department of Health to provide residential treatment and rehabilitation services to drug abusers. They are the Society for the Aid and Rehabilitation of Drug Abusers, the Caritas Hong Kong and the Hong Kong Christian Service.

The subvention for these organisations will be slightly decreased by 2% on average in 2005-06.

Signature	
Name in block letters	Dr P Y LAM
Post Title	Director of Health
Date	7 April 2005

CONTROLLING OFFICER'S REPLY TO INITIAL WRITTEN/SUPPLEMENTARY QUESTION

Reply Serial No.

HWFB337

Head: 37 Department of Health Sub

Subhead (No. & title): 003

Question Serial No.

Recoverable

salaries and

1300

allowance

<u>Programme</u>: (8) Personnel Management of Civil Servants Working in

Hospital Authority

<u>Controlling Officer</u>: Director of Health

<u>Director of Bureau</u>: Secretary for Health, Welfare and Food

Question:

- 1. What is the number of civil servants working in the Hospital Authority (HA) in 2004 as a result of the transfer of 59 general outpatient clinics to the HA in July 2003?
- 2. In 2005-06 estimate, the number of civil servants working in the HA managed by the Department of Health is reduced by 585 as compared with 2004. Please set out the posts of these 585 civil servants and the reason(s) for such decrease.

Asked by: Hon. LI Fung-ying

Reply:

With the Hospital Authority (HA) taking over the management of General Out-patient Clinics in July 2003, 805 civil servants were transferred to work in the HA.

The reduction of 585 civil servants working in the HA is due to retirement and other wastage. Details are at Annex.

Signature _		
Name in block letters	Dr P Y LAM	
Post Title	Director of Health	
Date	7 April 2005	

Details of Civil Servants working in HA who have left HA from 1 April 2004 to 31 March 2005

Rank	Total
Consultant D2	1
Senior Medical & Health Officer	5
Medical & Health Officer	22
Departmental Operations Manager	6
Ward Manager	37
Senior Nursing Officer	8
Nursing Officer (Education)	2
Nursing Officer	94
Registered Nurse	40
Senior Nursing Officer (Psychiatric)	1
Nursing Officer (Psychiatric)	13
Registered Nurse (Psychiatric)	9
Enrolled Nurse	50
Enrolled Nurse (Psychiatric)	27
Midwife	2
Department Manager	6
Chief Dispenser	3
Senior Dispenser	6
Dispenser	2
Electrical Technician	1
Medical Technologist	2
Medical Laboratory Technician I	1
Occupational Therapy Assistant	7
Senior Radiographer	5
Radiographer I	2
Artisan	10
Cook	11
Darkroom Technician	4
Chief Hospital Foreman	1
Senior Hospital Foreman	1
Hospital Foreman	1
Foreman	3

Rank	Total
Head Property Attendant	3
Mortuary Attendant	2
Mortuary Technician	3
Operating Theatre Assistant	13
Machinist	1
Laboratory Attendant	3
Laundry Worker	8
X-Ray Mechanic	1
Health Care Assistant	32
Gardener	1
Ganger	3
Property Attendant	7
Ward Attendant	41
Workman I	6
Workman II	48
Senior Hospital Administrator	1
Assistant Clerical Officer	28
Clerical Assistant	1
Total	585

CONTROLLING OFFICER'S REPLY TO INITIAL WRITTEN/SUPPLEMENTARY QUESTION

Reply Serial No.

HWFB338

<u>Head</u>: 37 Department of Health <u>Subhead</u> (No. & title):

Question Serial No.

Programme: (2) Disease Prevention

1328

Controlling Officer: Director of Health

<u>Director of Bureau</u>: Secretary for Health, Welfare and Food

<u>Question</u>: The attendance for cervical screening service is 100 000. What percentage does this figure represent among the local female population that should be screened? What is the basis on which the attendance of 100 000 is set?

Asked by: Hon. SHEK Lai-him, Abraham

Reply:

The territory-wide Cervical Screening Programme (CSP) is organised by the Department of Health (DH) with participation of public and private medical sectors, and non-governmental organisations.

Based on the recommendations of the Cervical Screening Task Force, the CSP would target at women aged 25 to 64 and the screening interval would be once every three years, following two consecutive annual smears producing negative results. Also, the initial target of CSP is to cover 60% of the target female population. This target coverage is comparable to that achieved in many developed countries. According to the Census and Statistics Department, the total population of women aged 25 to 64 is about 2.2 million. This means about 1.3 million women aged 25 to 64 should have a smear test over a period of three years, or 440 000 women each year.

The actual number of attendances for cervical screening at DH during the 10-month period since its launch in March 2004 was 80 000. The estimated attendance of 100 000 in 2005 represents about a quarter of the target population, and also has taken into account the market share potentially to be taken up by the private sector and non-governmental organisations.

Signature_		
Name in block letters _	Dr P Y LAM	
Post Title _	Director of Health	
Date	7 April 2005	

CONTROLLING OFFICER'S REPLY TO INITIAL WRITTEN/SUPPLEMENTARY QUESTION

Reply Serial No.

HWFB339

<u>Head</u> : 37 Department of Health <u>Subhead</u> (No. & title):	Question Serial No.
<u>Programme</u> : (2) Disease Prevention	1329
<u>Controlling Officer</u> : Director of Health	
<u>Director of Bureau</u> : Secretary for Health, Welfare and Food	
Question: The number of primary school children participating in the Dental Care Service is lower when compared with the previous year. to a decrease in the number of students, or other reasons?	
Asked by: Hon. SHEK Lai-him, Abraham	
Reply:	
The decrease in number of primary school children participat School Dental Care Service in 2004 was mainly due to the decreasing of primary school children.	•
Signature	
Name in block letters Dr P Y LAM	
Post Title Director of He	ealth

Date 6 April 2005

CONTROLLING OFFICER'S REPLY TO INITIAL WRITTEN/SUPPLEMENTARY QUESTION

Reply Serial No.

HWFB340

Question Serial No.

<u>Head</u> : 37 Department of Health	Subhead (No. & title):	Question Serial	NO
Programme: (4) Curative Care		1330	

Controlling Officer: Director of Health

Director of Bureau: Secretary for Health, Welfare and Food

Question: A decrease of 1 000 is noted in the attendance at dermatology clinics when compared with the previous year. The attendances for other items are set according to their actual attendances in the previous year, then why the attendance at dermatology clinics alone is anticipated to decrease?

Asked by : Hon. SHEK Lai-him, Abraham

Reply:

The attendance at dermatology clinics in 2004-05 was 251 000. The attendance for 2005-06 is only an estimate rounded off to the nearest hundred, like other indicators of this programme. We estimate that the attendance in 2005-06 to be similar to those of previous years.

Signature _	
Name in block letters _	Dr P Y LAM
Post Title	Director of Health
 Date	7 April 2005

CONTROLLING OFFICER'S REPLY TO INITIAL WRITTEN/SUPPLEMENTARY QUESTION

Reply Serial No.

CSB038

Head: 37 Department of Health

Subhead (No. & title):

Question Serial No.

Programme: (7) Medical and Dental Treatment for Civil Servants

1331

Controlling Officer: Director of Health

Director of Bureau: Secretary for the Civil Service

Question: Please explain in detail the increase of 4% in the 2005-06 estimate for medical and dental treatment for civil servants as compared with the 2004-05 original provision in spite of the fact that the service indicators remain unchanged.

Asked by: Hon. SHEK Lai-him, Abraham

Reply:

The provision for Programme (7) under Head 37 covers medical and dental services provided by the Department of Health to civil service eligible persons (i.e. civil servants, pensioners and their eligible dependants) as well as the payment and reimbursement of medical fees and hospital charges incurred by civil service eligible persons. The 4% increase in the estimated expenditure for 2005-06 over the 2004-05 original provision is mainly attributable to the increased provision for payment and reimbursement of medical fees and hospital charges incurred by civil service eligible persons.

Under the existing policy, civil service eligible persons may apply to the Government for reimbursement of expenses on drugs/equipment/services which form an essential part of the medical treatment as prescribed and certified by the attending Hospital Authority (HA) doctors on medical grounds but which are not available in HA or are chargeable by HA. In addition, the Government reimburses reasonable expenses on necessary treatment incurred by civil servants on duty/training/postings outside Hong Reimbursement to HA for the use of special accommodation beds by civil service eligible persons (for which the hospital is allowed to retain 50% of the hospital maintenance fee income and thus the Government has to reimburse HA the difference between 50% of the public rates and the rates payable by civil service eligible persons) is also covered by this programme. Expenditure on reimbursement of medical expenses is largely demand driven. We have projected an increase in the estimated expenditure for 2005-06 having regard to the expenditure trend in recent years.

Signature	
Name in block letters	Dr P Y LAM
Post Title	Director of Health
Date	6 April 2005

CONTROLLING OFFICER'S REPLY TO INITIAL WRITTEN/SUPPLEMENTARY QUESTION

HWFB341

Reply Serial No.

<u>Head</u>: 37 Department of Health

Subhead (No. & title):

Question Serial No.

<u>Programme</u>: (3) Health Promotion

1397

Controlling Officer: Director of Health

<u>Director of Bureau</u>: Secretary for Health, Welfare and Food

<u>Question</u>: Regarding the subvention granted to the Hong Kong Council on Smoking and Health (COSH) for measures against smoking, would the Administration list in detail:

- the subventions allocated to COSH in the past five years?
- the means for assessing the effectiveness of such anti-smoking measures?
- the reason(s) for the slight decrease in the number of publicity/educational activities delivered by COSH in 2005?

Asked by: Hon. LEE Kok-long, Joseph

Reply:

The subvention provided to COSH for the past five years is:

Financial Year	<u>\$M</u>
2004-05	10.8
2003-04	9.3
2002-03	8.0
2001-02	11.7
2000-01	8.3

COSH conducts pre- and post-activity evaluation on the knowledge, attitude and practice of participants on tobacco control related activities. It also conducts public opinion surveys on tobacco control and youth smoking prevalence surveys regularly to show the level of public's support towards anti-smoking measures and to ascertain the need to conduct health education about the hazards of smoking and passive smoking.

The slightly reduced number of publicity/educational activities from 325 in 2004 to 320 in 2005 is due to a change in strategy to organise more large scale promotional campaigns.

Signature _	
Name in block letters	Dr P Y LAM
Post Title _	Director of Health
Date	7 April 2005

CONTROLLING OFFICER'S REPLY TO INITIAL WRITTEN/SUPPLEMENTARY QUESTION

HWFR342	

Reply Serial No.

Question Serial No. Head: 37 Department of Health Subhead (No. & title): 1401 <u>Programme</u>: (4) Curative Care Controlling Officer: Director of Health Director of Bureau: Secretary for Health, Welfare and Food Regarding the 26 permanent posts to be deleted under this Ouestion: Programme, what are their ranks and scope of responsibilities? Asked by: Hon. LEE Kok-long, Joseph Reply: The 26 posts to be deleted under Programme (4) are mainly related to direct curative care and clinic supporting service. The rank of the concerned posts are at Annex. Signature Name in block letters Dr P Y LAM Post Title Director of Health

Date 6 April 2005

Annex

Posts to be deleted under Programme (4)

Rank	<u>Number</u>
Medical and Health Officer	3
Registered Nurse	4
Dental Officer	4
Dental Surgery Assistant	1
Chief Dispenser	2
Radiographic Technician	1
Assistant Clerical Officer	1
Supplies Assistant	1
Artisan	1
Property Attendant	4
Workman II	4
Total	26

CONTROLLING OFFICER'S REPLY TO INITIAL WRITTEN/SUPPLEMENTARY QUESTION

Reply Serial No.

HWFB343

<u>Head</u>: 37 Department of Health <u>Subhead</u> (No. & title):

Question Serial No.

1402

Programme: (3) Heath Promotion

Controlling Officer: Director of Health

<u>Director of Bureau</u>: Secretary for Health, Welfare and Food

Question: Regarding the enhancement of public health promotion programmes to instil a healthy lifestyle concept in the community, would the Administration set out the programme content, the relevant implementation unit(s), the expenditure required, the staffing establishments, the target group(s) and the means for assessing the effectiveness of such programmes.

<u>Asked by</u>: Hon LEE Kok-long, Joseph

Reply:

In 2005-06, the Department of Health (DH) will enhance its health promotion programmes to instil a healthy lifestyle concept in the community. The Central Health Education Unit (CHEU) of DH is responsible for coordinating the Department's efforts on this front. Health promotion programmes in the areas of exercise, healthy diet, anti-smoking and communicable disease prevention will be enhanced through various means like educational materials, health promotion activities, collaborative partnerships with health care providers and health promotion agencies, and social marketing. The establishment of CHEU in 2005-06 will be 33 and the provision for this service in 2005-06 is \$30.5M.

DH will assess the effectiveness of health promotion programmes through various means like questionnaires, telephone or face-to-face interviews to gauge the changes in knowledge, attitude and practice of the community on specific health issues, as well as health outcomes.

Signature _	
Name in block letters _	Dr P Y LAM
Post Title _	Director of Health
Date	6 April 2005

CONTROLLING OFFICER'S REPLY TO INITIAL WRITTEN/SUPPLEMENTARY QUESTION

Reply Serial No.

HWFB344

Head: 37 Department of Health	Subhead (No. & title):	Question Serial P

Programme: (2) Disease Prevention

1403

Question Serial No.

Controlling Officer: Director of Health

Director of Bureau: Secretary for Health, Welfare and Food

Question: The provision under this Programme in 2005-06 is 3.2% lower than the 2004-05 revised provision. With reduced provision, how does the Administration ensure that the quality of the services provided by the Department of Health can be maintained?

Asked by: Hon. LEE Kok-long, Joseph

Reply:

The decrease in provision in 2005-06 is mainly due to the effect of 2005 civil service pay adjustment and implementation of various saving measures such as service re-organisation, service mode re-engineering and reduction in departmental expenses. Service standards will not be affected.

Signature	
Name in block letters	Dr P Y LAM
Post Title	Director of Health
— Date	6 April 2005

CONTROLLING OFFICER'S REPLY TO INITIAL WRITTEN/SUPPLEMENTARY QUESTION

Reply Serial No.

HWFB345

<u>Head</u>: 37 Department of Health <u>Subhead</u> (No. & title):

Question Serial No.

<u>Programme</u>: (2) Disease Prevention

1545

Controlling Officer: Director of Health

Director of Bureau: Secretary for Health, Welfare and Food

<u>Question</u>: Please set out the provision allocated to the Centre for Health Protection, its major initiatives as well as the breakdown of the expenditure, manpower and establishment of such initiatives.

<u>Asked by</u>: Hon. CHENG Kar-foo, Andrew

Reply:

The Centre for Health Protection (CHP) was established to strengthen the public health system against communicable diseases and other public health hazards. Major initiatives are as follows:

- To strengthen the surveillance system and network for infectious diseases
- To improve the preparedness for health protection emergencies
- To respond quickly and effectively to infectious disease outbreaks
- To enhance the efficiency and quality of public health and clinical diagnostic laboratory services
- To strengthen the prevention and control of tuberculosis, human immunodeficiency virus/Acquired Immune Deficiency Syndrome, and sexually transmitted infections
- To reinforce the protection against non-communicable diseases and environmental health hazards
- To set up and maintain a sound mechanism for pooling and sharing the professional knowledge and expertise in combating diseases
- To introduce strategic training and research programmes to meet new demands
- To buttress dissemination of health information to the public
- To encourage and facilitate community participation in health protection

In 2005-06, government provisions (mainly Head 37 of the Department of Health) for the CHP amount to \$920M, of which \$680M and \$240M will be allocated for staffing and operating expenses respectively.

As at 31 March 2005, the breakdown of 1 662 posts in the CHP is

Medical	189
Nursing	448
Para-Medical	330
Other Professional & Technical	174
Administrative & Clerical	521

Signature	
Name in block letters	Dr P Y LAM
Post Title	Director of Health
— Date	7 April 2005

CONTROLLING OFFICER'S REPLY TO INITIAL WRITTEN/SUPPLEMENTARY QUESTION

Reply Serial No.

HWFB347

<u>Head</u> : 37 Department of Health	Subhead (No. & title):	Question Serial N

Programme: (2) Disease Prevention

1547

Question Serial No.

Controlling Officer: Director of Health

Director of Bureau: Secretary for Health, Welfare and Food

Question: The rate of new born babies attending maternal and child health centres is 95% in 2004. Does this rate include babies born in Hong Kong by mothers who are non-local residents? What is the number of new born babies not attending maternal and child health centres, and what is/are the reason(s) for their non-attendance?

Asked by: Hon. CHENG Kar-foo, Andrew

Reply:

Newborns attending Maternal and Child Health Centres (MCHCs) include babies of mothers who are not Hong Kong residents. About 2 800 newborns in 2004 did not attend MCHCs. These babies might have left Hong Kong after birth or attended private clinics for child health services.

Signature	
Name in block letters	Dr P Y LAM
Post Title	Director of Health
Date	8 April 2005

CONTROLLING OFFICER'S REPLY TO INITIAL WRITTEN/SUPPLEMENTARY QUESTION

Reply Serial No.

HWFB348

<u>Head</u>: 37 Department of Health

Subhead (No. & title):

Question Serial No.

1548

<u>Programme</u>: (2) Disease Prevention

Controlling Officer: Director of Health

<u>Director of Bureau</u>: Secretary for Health, Welfare and Food

Question: What are the expenditures for treating patients with sexually transmitted diseases (STD) and the numbers of STD patients treated in 2004-05 and 2005-06? Among such patients, how many of them are non-local residents? Please set out the major initiatives for controlling the spread of STD and their respective expenditures.

Asked by: Hon. CHENG Kar-foo, Andrew

Reply:

In the year 2004, there were 151 200 attendances for sexually transmitted diseases (STD) in Social Hygiene Clinics (SHCs) of which about 1 000 attendances were non-eligible persons (NEPs). A similar level of attendances is expected for the year 2005.

The following works are conducted in Department of Health (DH) to control and to prevent spread of STD:

- (a) operation of SHCs to provide counselling and clinical services to public with STD;
- (b) provision of regular check up services every two weeks for sex workers;
- (c) public education to contain the spread of STDs;
- (d) training of medical and healthcare professionals by DH to set the benchmark for all health professionals who are involved in management of STD and to maintain the good professional standard in the management of STD; and

(e) DH has planned, developed and conducted various surveillance and survey programmes in the past years to study the prevalence and pattern of STD in the community so as to guide the direction and to focus the effort of DH to certain groups for tackling the STD/AIDS problems in the community.

The provisions for these services in 2004-05 and 2005-06 are \$66.7M and \$62.6M respectively. Detailed breakdown of the above expenditures into different activity areas is not readily available.

Signature	
Name in block letters	Dr P Y LAM
Post Title	Director of Health
 Date	7 April 2005

Reply Serial No.

CONTROLLING OFFICER'S REPLY TO INITIAL WRITTEN/SUPPLEMENTARY QUESTION

HWFB349

<u>Head</u>: 37 Department of Health <u>Subhead</u> (No. & title): Question Serial No.

<u>Programme</u>: (2) Disease Prevention

1549

<u>Controlling Officer</u>: Director of Health

<u>Director of Bureau</u>: Secretary for Health, Welfare and Food

<u>Question</u>: What are the respective expenditures on cervical screening service in 2004-05 and 2005-06? Please set out the major expenditure items.

Asked by: Hon. CHENG Kar-foo, Andrew

Reply:

The provision for Cervical Screening Programme in 2004-05 and 2005-06 is as follows:

	2004-05	2005-06
	\$M	\$M
Salary	19.9	24.7
Publicity and production of educational	5.6	5.8
materials		
Laboratory equipment and consumables	4.5	4.5
Capital expenditure on cervical screening	5.0	-
equipment		
	<u>35.0</u>	<u>35.0</u>

Signature _	
Name in block letters _	Dr P Y LAM
Post Title	Director of Health
Date	6 April 2005

CONTROLLING OFFICER'S REPLY TO INITIAL WRITTEN/SUPPLEMENTARY QUESTION

Reply Serial No.

HWFB350

<u>Head</u>: 37 Department of Health <u>Subhead</u> (No. & title):

Question Serial No.

<u>Programme</u>: (2) Disease Prevention

1550

Controlling Officer: Director of Health

<u>Director of Bureau</u>: Secretary for Health, Welfare and Food

<u>Question</u>: What are the expenditures on vaccination in 2004-05 and 2005-06? Please provide the following information for each vaccine:

- the overall expenditure
- the cost of vaccine
- the target groups for vaccination and the number of recipients

Asked by: Hon. CHENG Kar-foo, Andrew

Reply:

Vaccination is part and parcel of many services in the Department of Health (DH) such as Elderly Health Services and Family Health Services, and the overall expenditure involves staff and other operating costs incurred in different divisions and resources shared by different services. Hence, the total expenditure of vaccination service alone is not separately identifiable.

The cost of vaccine, target groups and number of doses of vaccines given by the DH in 2004 are as follows:

Vaccine Type	Cost per dose	Main Target Groups	No. of doses in 2004	Total Vaccine Cost
BCG vaccine	\$2.3	New born babies School children	50 046	\$0.1M
Polio vaccine	\$2.1	New born babies Pre-school children School children	255 245	\$0.5M

Diphtheria, Tetanus and Pertussis vaccine	\$3.4	Pre-school children	139 293	\$0.5M
Diphtheria and Tetanus vaccine	\$1.7	School children	150 781	\$0.3M
Measles, Mumps and Rubella vaccine	\$38.3	Pre-school children School children	122 604	\$4.7M
Hepatitis B vaccine	\$11.7	New born babies Pre-school children School children	112 106	\$1.3M
Influenza vaccine	\$23.1	Residents in elderly homes Inmates in disabled institutions Elderly clients of DH clinics Health care workers in DH	75 906	\$1.8M
			Total	<u>\$9.2M</u>

It is estimated that the number of doses of vaccines to be given in 2005 will be about the same.

Signature _	
Name in block letters	Dr P Y LAM
Post Title	Director of Health
Date	7 April 2005

CONTROLLING OFFICER'S REPLY TO INITIAL WRITTEN/SUPPLEMENTARY QUESTION

Reply Serial No.

CSB039

Head: 37 Department of Health

Subhead (No. & title):

Question Serial No.

1720

<u>Programme</u>: (7) Medical and Dental Treatment for Civil Servants

Controlling Officer: Director of Health

<u>Director of Bureau</u>: Secretary for the Civil Service

Question: Despite the explanation given in the Budget that the increase in provision under Programme (7) "Medical and Dental Treatment for Civil Servants" is mainly due to the increase in capital expenditure and additional provision to meet increasing demand for payment and reimbursement of medical fees and hospital charges, would the Administration advise on the following:

- (1) Why is there still an increase of \$7.3M in the expenditure for medical and dental treatment for civil servants in spite of the general decrease in expenditure for the provision of healthcare services to the public?
- (2) The medical fees to be reimbursed in the year is expected to reach \$44.6M, an increase of \$3.6M over 2004-05; what is/are the reason(s)?
- (3) There is a significant increase of \$12.9M, or 45.9% in 2004-05 revised provision over the 2004-05 estimated provision; what is/are the reason(s)?
- (4) Why is the expenditure under Programme (7) on the increase in spite of the decreasing number of civil servants over the years?
- (5) What is the number of eligible persons using such service, and how does it compare with that in last year? How many of them are civil servants, and how many are dependants?
- (6) Why is the capital expenditure under Programme (7) increasing instead of decreasing in spite of the fact that all departments are broadening sources of income and reducing expenditure? What plan(s) does the Department of Health have to reduce the expenditure in this area?

Asked by: Hon. FANG Kang, Vincent

Reply:

- (1) The increase of \$7.3 million in the 2005-06 estimated expenditure for Programme (7) under Head 37 over 2004-05 is to cater for an anticipated increase in payment and reimbursement of medical fees and hospital charges incurred by civil service eligible persons (i.e. civil servants, pensioners and their eligible dependants) and the capital expenditure mainly for replacement of dental chairs and other equipment which are beyond economical repair, partly offset by the effect of the 2005 civil service pay reduction.
- (2) (5) The provision for Programme (7) under Head 37 covers medical and dental services provided by the Department of Health to civil service eligible persons as well as payment and reimbursement of medical fees and hospital charges incurred by civil service eligible persons. Under the existing policy, civil service eligible persons may apply to the Government for reimbursement of expenses on drugs/equipment/services which form an essential part of the medical treatment as prescribed and certified by the attending Hospital Authority (HA) doctors on medical grounds but which are not available in HA or are chargeable by HA. In addition, the Government reimburses reasonable expenses on necessary treatment incurred by civil servants on duty/training/postings outside Hong Kong. Reimbursement to HA for the use of special accommodation beds by civil service eligible persons (for which the hospital is allowed to retain 50% of the hospital maintenance fee income and thus the Government has to reimburse HA the difference between 50% of the public rates and the rates payable by civil service eligible persons) is also covered by this programme.

Expenditure on reimbursement of medical expenses is largely demand driven. We have projected an increase of \$3.6 million in the estimated expenditure on payment and reimbursement of medical fees and hospital charges for 2005-06 over the revised estimate for 2004-05 having regard to the expenditure trend in recent years. The increase of \$12.9 million in the 2004-05 revised estimate over the 2004-05 approved estimate is attributable to an increase in the amount of reimbursement claims processed in that year (including claims carried forward from 2003-04).

The estimated number of civil service eligible persons has remained fairly stable in recent years at around 600 000, 40% of whom are civil servants and pensioners and the rest eligible dependants.

The reasons for the increase in the estimated expenditure on Programme (7) under Head 37 in 2005-06 are set out under (1) above.

(6) The estimated increase in capital expenditure in 2005-06 is mainly due to replacement of dental chairs, air compressor system, air-conditioning pipelines and water pump systems in Government dental clinics, which amount to \$5.6 million. The expenditure is necessary as the items are beyond economical repair.

Signature_	
Name in block letters	Dr P Y LAM
Post Title	Director of Health
Date	6 April 2005

CONTROLLING OFFICER'S REPLY TO INITIAL WRITTEN/SUPPLEMENTARY QUESTION

Reply Serial No.

HWFB354

<u>Head</u>: 37 Department of Health <u>Subhead</u> (No. & title): 000

Question Serial No.

Operational

expenses

1831

Programme:

<u>Controlling Officer</u>: Director of Health

<u>Director of Bureau</u>: Secretary for Health, Welfare and Food

<u>Question</u>: The change in 2005-06 establishment is a deletion of 91 posts. Would the Administration set out in detail the establishment of the posts to be deleted before and after such deletion?

<u>Asked by</u>: Hon. LEE Kok-long, Joseph

Reply:

In 2005-06, the Department of Health will create 25 posts and delete 116 posts which will fall vacant through natural wastage. The net deletion is 91 posts, which include 20 posts for general grades staff working in general out-patient clinics of the Hospital Authority, details at Annex.

Signature	
Name in block letters	Dr P Y LAM
Post Title	Director of Health
_ Date	7 April 2005

Annex

Posts to be deleted in 2005-06

Rank	Number to be <u>deleted</u>	Establishment after net deletion
Medical and Health Officer	12	250
Senior Nursing Officer	1	20
Registered Nurse	10	647
Midwife	12	9
Inoculator	6	29
Dental Officer	4	150
Dental Surgery Assistant	4	174
Pharmacist	6	47
Chief Dispenser	2	4
Senior Medical Technologist	1	18
Medical Laboratory Technician I	1	18
Medical Laboratory Technician II	1	113
Radiographic Technician	1	4
Scientific Officer (Medical)	1	17
Physiotherapist I	2	8
Assistant Clerical Officer	19	281
Clerical Assistant	1	533
Office Assistant	2	119
Telephone Operator	1	3
Typist	1	4
Supplies Assistant	1	13
Property Attendant	8	41
Artisan	3	10
Workman II	16	565
7	Total 116	3 077

CONTROLLING OFFICER'S REPLY TO INITIAL WRITTEN/SUPPLEMENTARY QUESTION

Reply Serial No.

HWFB414

<u>Head</u>: 37 Department of Health <u>Subhead</u> (No. & title):

Question Serial No.

<u>Programme</u>: (1) Statutory Functions

1832

Controlling Officer: Director of Health

Director of Bureau: Secretary for Health, Welfare and Food

<u>Question</u>: The number of registration applications from healthcare professionals processed by the Department of Health is expected to increase from 2 810 in 2004 (Actual) to 3 000 in 2005 (Estimate). Would the Administration inform us of:

- the reason(s) for the increase in the number of registration applications?
- the respective numbers of registration applicants obtaining their approved qualifications locally and overseas?
- the anticipated distribution of various healthcare professionals among such registration applicants and the corresponding percentage increases?
- the respective numbers of various healthcare professionals employed by the public and private sectors?

Asked by: Hon. LEE Kok-long, Joseph

Reply:

The estimated increase in number of registration applications from healthcare professionals for 2005 is mainly due to an expected increase in the number of nursing graduates from local universities.

The breakdowns of registration applications by local and non-local qualifications and by healthcare professionals are at Annexes I and II respectively.

Health Manpower Surveys are conducted regularly to ascertain, amongst others, the employment distribution and status of healthcare professionals. Surveys on medical practitioners and dentists were conducted in 2003. In 2004, surveys were conducted on supplementary medical

professionals, pharmacists, nurses, midwives and chiropractors as well. Results for the 2004 surveys, except for those in relation to the supplementary medical professionals, are still being compiled. Surveys findings, in respect of employment in public or private sector, that are available at the moment, are set out below:

	Public Sector	Private Sector	<u>Others</u>
Medical Practitioners (2003)	54%	39%	7%
Dentists (2003)	18%	72%	10%
Supplementary Medical			
Professionals (including			
Medical Laboratory			
Technologists, Occupational	46%	41%	13%
Therapists, Optometrists,			
Physiotherapists and			
Radiographers) (2004)			

Manpower survey on Chinese Medicine Practitioners will be conducted for the first time in 2005.

Signature	
Name in block letters	Dr P Y LAM
Post Title	Director of Health
 Date	6 April 2005

Annex I

Breakdown of Registration Applications by Local and Non-local Qualifications

Healthcare	Year 2004 (Actual)		Year 2005 (Estimate)	
Professionals				
	Non-local	Local	Non-local	Local
	Qualification	Qualification	Qualification	Qualification
Chinese Medicine	87	248	90	250
Practitioners				
Medical Practitioners	182	888	172	888
Dentists	5	72	5	65
Pharmacists	56	30	46	29
Nurses	43	580	21	801
Midwives	0	27	2	34
Supplementary	54	531	56	544
Medical Professionals *				
Chiropractors	11	0	6	0

^{*} Supplementary Medical Professionals include Medical Laboratory Technologists, Occupational Therapists, Optometrists, Physiotherapists and Radiographers.

Annex II

Breakdown of Registration Applications by Healthcare Professionals

	Year 2004	Year 2005	Percentage of
	(Actual)	(Estimate)	Increase/Decrease in
			<u>Year 2005</u>
Chinese Medicine Practitioners	335	340	+1.5%
Medical Practitioners	1 070	1 060	-0.9 %
Dentists	77	70	-9.1 %
Pharmacists	86	75	-12.8 %
Nurses	623	822	+31.9 %
Midwives	27	36	+33.3%
Supplementary Medical	585	600	+2.6 %
Professionals *			
Chiropractors	11	6	-45.5 %
Total	2 814	3 009	+6.9%

^{*} Supplementary Medical Professionals include Medical Laboratory Technologists, Occupational Therapists, Optometrists, Physiotherapists and Radiographers.

CONTROLLING OFFICER'S REPLY TO SUPPLEMENTARY OUESTION

Reply Serial No.

S-HWFB30

Head: 37 Department of Health Subhead (No. & title): Question Serial No.

S84

Programme: (2) Disease Prevention

Controlling Officer: Director of Health

<u>Director of Bureau</u>: Secretary for Health, Welfare and Food

Question: According to the reply to Hon. LI Fung-ying (Reply Serial No.: HWFB103; Question Serial No.: 0539), the following items will have significantly higher levels of reductions in their expenditures than the others under 2005-06 Estimate of the Department of Health. Please explain the reasons for that.

- (1) Providing laboratory services for the diagnosis and surveillance of various infections and other screening activities (-5.1%)
- (2) Treating patients with sexually-transmitted diseases and controlling the spread of such diseases (-6.1%)
- (3) Others (-10%)

Asked by: Hon. KWOK Ka-ki

Reply:

- (1) The decrease in provision for providing laboratory services for the diagnosis and surveillance of various infections and other screening activities in 2005-06 is mainly due to pay adjustment and savings from streamlining of operation.
- (2) The decrease in provision for treating patients with sexually-transmitted diseases and controlling the spread of such diseases in 2005-06 is mainly due to pay adjustment and service rationalisation.
- (3) The decrease in provision for others in 2005-06 is mainly due to pay adjustment and reduced expenditure on general support service.

Signature	
Name in block letters	Dr P Y LEUNG
Post Title	Ag. Director of Health
Date	16 April 2005