

**Replies to written questions raised by Finance Committee Members
in examining the Estimates of Expenditure 2006-07**

**Controlling Officer : Director of Health
Head 37 – Department of Health**

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Examination of Estimates of Expenditure 2006-07
**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB031

Question Serial No.

0005

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

Programme : (1) Statutory Functions

Controlling Officer : Director of Health

Director of Bureau : Secretary for Health, Welfare and Food

Question :

- (a) Does the Government have any plan to inspect medical clinics in 2006-07 for checking the use of medicines in these clinics?
- (b) Please set out the respective numbers of samples taken for analysis by the Department of Health on western medicines, proprietary Chinese medicines and health foods in the past three years. How many cases of non-compliance were identified? What were the expenditure and staff establishment involved?

Asked by : Hon. LI Kwok-ying

Reply :

- (a) The Department of Health has been monitoring clinics registered under the Medical Clinics Ordinance for their compliance with the statutory requirements, including record-keeping and storage of medicines, and upon receipt of referrals and complaints, inspects practices of medical doctors on their use of medicines, dangerous drugs in particular.

In 2006-07, the Department of Health will further strengthen the regulation of the use of medicines in private medical practice by carrying out random checks.

- (b) 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 -

Year	Western Medicines		Proprietary Chinese Medicines / Health Foods	
	Number of samples tested	Number found below quality standards	Number of samples tested	Number found below quality standards
2003	2 125	69	2 528	59
2004	2 076	93	2 834	47
2005	2 104	53	2 221	54

During the three years in question, four Senior Pharmacists and 24 Pharmacists were 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 2003-04, 2004-05 and 2005-06 was \$18.2M, \$18.1M and \$17.4M respectively.

Signature _____

Name in block letters _____ Dr P Y LAM

Post Title _____ Director of Health

Date _____ 10 March 2006

Examination of Estimates of Expenditure 2006-07
**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB032

Question Serial No.

0006

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

Programme : (1) Statutory Functions

Controlling Officer : Director of Health

Director of Bureau : Secretary for Health, Welfare and Food

Question :

The Government will allocate additional provision to strengthen port health measures in preparation for the coming into force of the revised International Health Regulations. In this regard, what is the amount of such provision? What specific port health measures will be strengthened by using such provision?

Asked by : Hon. LI Kwok-ying

Reply :

In 2006-07, an additional funding of \$13.2M will be provided to strengthen port health measures in preparation for the coming into force of the revised International Health Regulations, including recruitment of 47 additional staff.

The port health measures to be strengthened include the following-

- (a) establishing health posts at immigration control points (ICPs) for carrying out health screening measures and public education programmes;
- (b) installing infra-red thermo-imaging machines to facilitate the implementation of body temperature screening measures and stockpiling of personal protective equipment at future ICPs;
- (c) constructing isolation facilities at existing and future ICPs as temporary accommodation for sick travellers who need to be transferred to hospitals;
- (d) establishing a sanitation monitoring and inspection system for ICPs and conveyances to minimise the risk of spread of infectious disease; and
- (e) developing guidelines for prevention and control of public health emergencies for, and providing relevant training to ICP and conveyance operators.

Signature _____

Name in block letters Dr P Y LAM

Post Title Director of Health

Date 9 March 2006

Examination of Estimates of Expenditure 2006-07
**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB033

Question Serial No.

0007

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

Programme : (2) Disease Prevention

Controlling Officer : Director of Health

Director of Bureau : Secretary for Health, Welfare and Food

Question :

Please list the respective expenditures on elderly health centres and visiting health teams in 2004-05 and 2005-06, and inform this Council of the number of elderly persons waiting for enrolment in elderly health centres. Does the Government have further plans to expand the elderly health centres and visiting health teams?

Asked by : Hon. LI Kwok-ying

Reply :

The expenditures of Elderly Health Services (EHS) in 2004-05 and 2005-06 are as follows -

	<u>2004-05</u> (Actual) \$M	<u>2005-06</u> (Revised Estimate) \$M
Clinic Service provided by Elderly Health Centres (EHCs)	87.0	84.1
Public Health Administration and Outreaching Health Service provided by Visiting Health Teams (VHTs)	52.8	60.2
	-----	-----
Total	<u>139.8</u>	<u>144.3</u>

In 2005, EHCs had 37 400 members and provided 195 000 health assessment and medical consultations for members. As at end of 2005, there were some 28 000 applications for enrolment. Although currently there is no plan to expand the EHCs and VHTs, EHS will strengthen collaboration with stakeholders including private practitioners and non-government organisations to enhance primary health services for the elderly in Hong Kong.

Signature _____

Name in block letters Dr P Y LAM

Post Title Director of Health

Date 10 March 2006

Examination of Estimates of Expenditure 2006-07
**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB034

Question Serial No.

0008

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

Programme : (1) Statutory Functions

Controlling Officer : Director of Health

Director of Bureau : Secretary for Health, Welfare and Food

Question :

Under this Programme, the Government will create four posts for carrying out enforcement duties upon enactment of the bill on the provision of enforcement power to Tobacco Control Office staff. In this regard, what are the establishment and expenditure of these four posts? What are the specific duties of these newly created posts?

Asked by : Hon. LI Kwok-ying

Reply :

Since 2005, the Department has had the assistance of a Superintendent of Police for planning the formation of the enforcement team comprising a total of 34 tobacco control inspectors to carry out enforcement duties upon the enactment of the Smoking (Public Health) (Amendment) Bill 2005. In 2006-07, a further provision of \$1.1M has been made for four posts of police officers to train and assist tobacco control inspectors to carry out their enforcement function.

Signature _____

Name in block letters _____ Dr P Y LAM

Post Title _____ Director of Health

Date _____ 10 March 2006

Examination of Estimates of Expenditure 2006-07
**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB035

Head : 37 Department of Health

Subhead (No. & title) :

Question Serial No.

0012

Programme : (3) Health Promotion

Controlling Officer : Director of Health

Director of Bureau : Secretary for Health, Welfare and Food

Question :

It is stated under Matters Requiring Special Attention (paragraph 18 on page 155 of Estimates - Volume IA) that the Department of Health will “strengthen the publicity and education programme on smoking prevention”. Could the Department set out the specific details of the work concerned as well as the expenditure and staffing arrangement involved? Since the Smoking (Public Health) (Amendment) Bill 2005 is expected to be enacted in this legislative year, will the Administration consider allocating additional resources to strengthen the work in this area?

Asked by : Hon. FUNG Kin-kee, Frederick

Reply :

The Department of Health (DH) adopts an integrated approach to promoting a smoke-free culture in Hong Kong including anti-smoking activities to educate the public about the harmful effects of smoking and secondhand smoke, and a 24-hour smoking cessation telephone hotline service. In 2006-07, DH will strengthen publicity through TV and radio announcements of public interests as well as posters and pamphlets, particularly on the new legislative requirements.

Specifically for employees of the catering and entertainment industries, DH will provide implementation guidelines and conduct capacity building workshops to assist them to understand and comply with the new legislative requirements.

In 2006-07, the Government will have a provision of \$29.1M for Tobacco Control Office (TCO) and the Hong Kong Council on Smoking and Health to carry out publicity and education programmes, representing an increase of \$2.5M over 2005-06. The TCO will increase its staffing complement to 66, from the current strength of 36.

Signature _____

Name in block letters Dr P Y LAM

Post Title Director of Health

Date 10 March 2006

Examination of Estimates of Expenditure 2006-07
**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB036

Question Serial No.

0013

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

Programme : (2) Disease Prevention

Controlling Officer : Director of Health

Director of Bureau : Secretary for Health, Welfare and Food

Question :

Given the increasing threat of avian influenza, could the Administration inform this Council of the specific contingency work undertaken by the Department of Health? What are the expenditure and staffing arrangement involved? Furthermore, what is the amount of additional resources allocated in 2005-06 to the Department for such work?

Asked by : Hon. FUNG Kin-kee, Frederick

Reply :

Preparedness for outbreaks of human avian influenza is part and parcel of the Department of Health's work on prevention and control of infectious diseases, which is mainly undertaken by the Centre for Health Protection (CHP) and the Port Health Office. In 2006-07, total allocation to the CHP and port health services for their overall functions, which include prevention and control of infectious diseases, is \$956M. Their staff complement is about 1 900.

To enhance Hong Kong's preparedness against influenza pandemic caused by avian influenza, etc., the CHP has drawn up and will regularly update preparedness plans for major infectious disease outbreaks with public health significance, including influenza pandemic, etc. Under these plans, the CHP has been strengthening their disease surveillance system in hospitals; stockpiling antivirals, personal protective equipment and laboratory diagnostics reagents; enhancing the capacity of laboratories in the public sector; building up surge capacity by setting up a mechanism for mobilising volunteers during public health emergencies; organising infection control training and developing relevant guidelines for relevant government departments and healthcare professionals in the public and private sectors; holding briefing sessions/forums and education/publicity programmes on preparedness for influenza pandemic for different sectors of the community; strengthening communication and collaboration with regional and international partners; and supporting applied research on the prevention and control of infectious diseases. Moreover, the CHP has

been conducting and will continue to conduct inter-departmental drills/exercises for emergency response against major infectious disease outbreaks. On the port health front, temperature screening measures for inbound passengers at immigration control points have been enhanced.

In 2005-06, major new expenditure items for combating avian influenza include an extra amount of about \$90M to increase the stockpile of antivirals for influenza pandemic, and to step up temperature screening measures for inbound travellers and other port health measures.

Signature _____

Name in block letters _____ Dr P Y LAM

Post Title _____ Director of Health

Date _____ 10 March 2006

Examination of Estimates of Expenditure 2006-07
**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB037

Question Serial No.

0026

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

Programme : (2) Disease Prevention

Controlling Officer : Director of Health

Director of Bureau : Secretary for Health, Welfare and Food

Question :

Regarding the "pilot Comprehensive Child Development Service" mentioned in the Analysis of Financial and Staff Provision under this Head, could the Administration provide information on -

- (a) the progress and details of the work concerned, the areas served as well as the expenditure and manpower involved?
- (b) the service targets and the specific indicators?
- (c) the assistance rendered to the poor families and its effectiveness?

Asked by : Hon. FUNG Kin-kee, Frederick

Reply :

- (a) The pilot Comprehensive Child Development Service (CCDS), which aims to identify the varied needs of children of 0 to 5 years and their families at an early stage, has been launched in Sham Shui Po since July 2005 and extended to Tin Shui Wai, Tuen Mun and Tseung Kwan O in January 2006. Starting from 2005-06, a recurrent sum of \$10M per annum has been allocated to launch the pilot CCDS in the five Maternal and Child Health Centres (MCHCs) in the above four communities. Additional manpower has been recruited for the pilot service, including doctors, nurses and research assistants in the Department of Health and the Hospital Authority. From 2006-07, an additional sum of \$20M per annum is allocated to improve the pilot service, and subject to a review of the pilot service in the third quarter of 2006, extend the service in the other communities in phases.

(b) The CCDS aims to achieve -

- early identification and holistic management of at risk pregnant women;
- early identification and management of mothers with postnatal depression;
- early identification of children and families for social service intervention; and
- early identification and referral of pre-school children with physical, developmental and behavioural problems.

Performance indicators for the pilot CCDS include the development of assessment tools and protocols, establishment of referral and feedback system, outcome of staff training courses, nature and number of referred cases, and staff and clients perception and satisfaction.

(c) CCDS is not purely a poverty alleviation initiative. It helps identify needy children and families, including poor families, and provide them with assistance at an early stage. Those who are identified to be in need of further support services are offered appropriate services, including MCHCs and Integrated Family Service Centres (IFSC) services, such as supportive counseling and/or groups/programmes, to help solve their psychosocial problems. Appropriate services, including child-care, financial, employment or accommodation assistance, etc are provided if required.

Signature _____

Name in block letters Dr P Y LAM

Post Title Director of Health

Date 10 March 2006

Examination of Estimates of Expenditure 2006-07
**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB038

Question Serial No.

0037

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

Programme : (2) Disease Prevention

Controlling Officer : Director of Health

Director of Bureau : Secretary for Health, Welfare and Food

Question :

The Administration mentioned in the Indicators that the figure of attendances for health assessment and medical consultation at elderly health centres in 2006 Estimate is 195 000 while the figure of attendances at health education activities organised by elderly health centres and visiting health teams is estimated to be 450 000. In this regard, could the Administration -

- set out the respective costs per attendance for the above two services; and
- set out the operating costs of each elderly health centre ?

Asked by : Hon. CHEUNG Chiu-hung, Fernando

Reply :

The cost per attendance for health assessment and medical consultation at Elderly Health Centres (EHCs) in 2005-06 are \$410 and \$360 respectively. The cost per attendance for health education activities organised by EHCs and visiting health teams is not readily available.

The average operating cost for each EHC in 2005-06 is \$4.7M.

Signature _____

Name in block letters Dr P Y LAM

Post Title Director of Health

Date 10 March 2006

Examination of Estimates of Expenditure 2006-07
**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

SB143

Question Serial No.

0115

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

Programme : (6) Treatment of Drug Abusers

Controlling Officer : Director of Health

Director of Bureau : Secretary for Security

Question :

During 2006-07, the Administration starts subventing a treatment and rehabilitation centre for adult females. Please inform this Council of -

- (a) the estimated expenditure involved and the details of the subvention plan;
- (b) the location and the scope of service of the centre; and
- (c) whether the Administration has set any indicators to review the effectiveness of the subvention plan.

Asked by : Hon. CHAN Yuen-han

Reply :

- (a) The Society for the Aid and Rehabilitation of Drug Abusers (SARDA) has been operating a treatment and rehabilitation centre for adult females (the Centre) since 1997. Its current funding from the Hong Kong Jockey Club Charities Trust will cease in 2006-07. The Government will increase the subvention for SARDA in 2006-07 by \$3.3M to cover the operating cost of the Centre.
- (b) The Centre is located at Sun Chui Estate in Shatin with a bed capacity of 24. It is the only centre in Hong Kong that services female drug abusers aged 25 and above and allows children aged under five to stay with their mothers who are under rehabilitation in the Centre.

The Centre runs a three to six month voluntary residential treatment and rehabilitation programme for adult female drug abusers who have completed detoxification in other centres. It also offers short-term rehabilitation to female methadone patients who are maintained on low dosage and are desirous of completing detoxification in a residential setting. On completion of the rehabilitation programme, there is a one-year aftercare service.

- (c) The planned performance indicators for the Centre in 2006 are 8 000 occupied bed-days and 90 admissions. The target completion rate of in-patient treatment and rehabilitation courses is 60%.

Signature _____

Name in block letters Dr P Y LAM

Post Title Director of Health

Date 9 March 2006

Examination of Estimates of Expenditure 2006-07
**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB067

Question Serial No.

0352

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

Programme : (4) Curative Care

Controlling Officer : Director of Health

Director of Bureau : Secretary for Health, Welfare and Food

Question :

The target related to the appointment time for new dermatology cases cannot be achieved because a number of experienced doctors have left the service in the year. In this regard, please advise if the Administration has already recruited sufficient number of doctors to meet the target for 2006-07. What is the estimated expenditure involved? What are the details?

Asked by : Hon. CHAN Yuen-han

Reply :

Three specialists in dermatology left the Social Hygiene Service (SHS) in 2005, amounting to a wastage rate of 9.6%.

The Department of Health (DH) has arranged internal redeployment and appointment of new recruits to replace doctors who left the SHS. Besides, DH plans to employ four contract doctors on a part-time basis in 2006-07 to shorten the appointment time. The estimated expenditure is about \$0.5M.

Signature _____

Name in block letters Dr P Y LAM

Post Title Director of Health

Date 11 March 2006

Examination of Estimates of Expenditure 2006-07
**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB068

Question Serial No.

0353

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

Programme : (2) Disease Prevention

Controlling Officer : Director of Health

Director of Bureau : Secretary for Health, Welfare and Food

Question :

With respect to the relevant financial provision, the amount allocated to the subvented sector is increased by 4.8%, from \$31.4M in 2005-06 to \$32.9M in 2006-07. In this regard, could the Administration advise if the increased provision will result in an increase in the number of subvented organisations? What are the details?

Asked by : Hon. CHAN Yuen-han

Reply :

There is only one subvented organisation under this Programme, namely the Family Planning Association of Hong Kong. The increase in provision of 4.8% is mainly due to capital subvention of \$943,000 in 2006-07 for the repair works of its Yuen Long Clinic Building.

Signature _____

Name in block letters Dr P Y LAM

Post Title Director of Health

Date 9 March 2006

Examination of Estimates of Expenditure 2006-07
**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB069

Question Serial No.

0354

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

Programme : (3) Health Promotion

Controlling Officer : Director of Health

Director of Bureau : Secretary for Health, Welfare and Food

Question :

With respect to the relevant financial provision, the amount allocated to the subvented sector is reduced by 6.4%, from \$25M in 2005-06 Revised Estimate to \$23.4M in 2006-07 Estimate. In this regard, could the Administration advise the reason(s) for the decrease? Will the number of subvented organisations be affected as a result of reduction in provision? What are the details?

Asked by : Hon. CHAN Yuen-han

Reply :

The number of subvented organisations under this programme in 2006-07 will remain at three, viz the Hong Kong Council on Smoking and Health (COSH), Hong Kong St John Ambulance and Hong Kong Red Cross.

The decrease in provision in 2006-07 is mainly due to the completion of general non-recurrent projects in 2005-06 by COSH.

Signature _____

Name in block letters Dr P Y LAM

Post Title Director of Health

Date 10 March 2006

Examination of Estimates of Expenditure 2006-07
**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB635

Question Serial No.

0493

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

Programme : (3) Health Promotion

Controlling Officer : Director of Health

Director of Bureau : Secretary for Health, Welfare and Food

Question :

Does the Tobacco Control Office under the Department of Health employ staff on non-civil service contract terms? If yes, what are the details?

Asked by : Hon. LEE Cheuk-yan

Reply :

In 2006-07, the Tobacco Control Office (TCO) will have an establishment of 66 staff members, among which 10 are civil servants and the remaining 56 are non-civil service contract (NCSC) employees, with the latter comprising 34 newly created tobacco control inspectors and 22 administrative and supporting staff.

The ranking structure of tobacco control inspectors is as follows -

<u>Rank</u>	<u>Number</u>	<u>Monthly Salary</u>	<u>Contract Gratuity</u>
Senior Tobacco Control Inspectors (STCIs)	2	\$26,000)	
Tobacco Control Inspectors (TCIs)	8	\$17,000)	15% of gross salary
Assistant Tobacco Control Inspectors (ATCIs)	24	\$11,000)	

Since talents experienced in both tobacco control and law enforcement are not readily available in the current manpower market, the Department of Health (DH) will provide new recruits with in-service training covering communication skills and law enforcement so as to equip them with the competencies required by future duties. The monthly salaries for newly recruited SCTIs, TCIs and ATCIs are \$21,000, \$14,000 and \$9,000 respectively. Having received appropriate training and accumulated practical experience through actual work, officers with satisfactory performance upon internal appraisal could become substantively appointed within one

year. The contract period for substantive appointment is three years, and the salary and contract gratuity are as above.

As DH's TCO is still preparing and planning for the initiatives arising from the Smoking (Public Health) (Amendment) Bill 2005, newly created tobacco control inspectors as well as administrative and supporting staff will be employed on NCSC terms. Subsequent to the implementation of the amended Ordinance, DH will conduct a review on the ranking and establishment of TCO staff.

Signature _____

Name in block letters Dr P Y LAM

Post Title Director of Health

Date 10 March 2006

Examination of Estimates of Expenditure 2006-07
**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

CSB056

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

Operational
expenses

Question Serial No.

0494

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

Controlling Officer : Director of Health

Director of Bureau : Secretary for the Civil Service

Question :

What are the reasons for the increasing demand for payment and reimbursement of medical fees and hospital charges? In the past three years, what are the respective payments and reimbursements of medical fees and hospital charges made to (a) serving civil servants; (b) retired civil servants and (c) their eligible dependants?

Asked by : Hon. LEE Cheuk-yan

Reply :

Expenditure on payment and reimbursement of medical expenses and hospital charges is largely demand driven. We have projected an increase of \$28M in the estimated expenditure on payment and reimbursement of medical fees and hospital charges for 2006-07 over the revised estimate for 2005-06 having regard to the expenditure trend in recent years.

We do not have the breakdown of expenditure on claims submitted by civil servants, pensioners and their eligible dependants respectively. The total expenditure on payment and reimbursement of medical fees and hospital charges incurred by eligible persons in the past three years are as follows -

<u>Year</u>	\$M
2003-04	31.1
2004-05	44.5
2005-06 (Revised Estimate)	65.0

Signature _____

Name in block letters Dr P Y LAM

Post Title Director of Health

Date 8 March 2006

Examination of Estimates of Expenditure 2006-07
**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB636

Question Serial No.

0523

Head : 37 Department of Health

Subhead (No. & title) :

Programme : (1) Statutory Functions

Controlling Officer : Director of Health

Director of Bureau : Secretary for Health, Welfare and Food

Question :

Has provision been earmarked for increasing the manpower of tobacco control with a view to enhancing enforcement of the Smoking (Public Health) Ordinance? If yes, please list the amount of provision earmarked as well as the number and ranks of additional staff.

Asked by : Hon. CHENG Kar-foo, Andrew

Reply :

In 2006-07, the Department of Health (DH) will have a provision of \$35.7M for tobacco control activities. Out of this, the Tobacco Control Office (TCO) will have an allocation of \$17.9M for health promotion and \$6.6M for salaries of officers to carry out enforcement activities. The remaining sum of \$11.2M will be allocated to the Hong Kong Council on Smoking and Health for health promotion.

TCO in DH will increase its staff complement to 66, from the current strength of 36. There will be 34 tobacco control inspectors in place of the current 14 tobacco control officers. In addition, there will be four posts of police officers to train and assist tobacco control inspectors to carry out their enforcement function.

Signature _____

Name in block letters _____ Dr P Y LAM

Post Title _____ Director of Health

Date _____ 11 March 2006

Examination of Estimates of Expenditure 2006-07
**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB637

Question Serial No.

0542

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

Programme : (1) Statutory Functions

Controlling Officer : Director of Health

Director of Bureau : Secretary for Health, Welfare and Food

Question :

It is stated under Matters Requiring Special Attention in 2006-07 that the Department of Health will, upon enactment of the bill on the provision of enforcement power to Tobacco Control Office (TCO) staff, carry out enforcement duties as required under the Smoking (Public Health) Ordinance. Please set out the estimated number of TCO staff and the expenditure incurred?

Asked by : Hon. LEUNG Kwok-hung

Reply :

In 2006-07, the Department of Health (DH) will have a provision of \$35.7M for tobacco control activities. Out of this, the Tobacco Control Office (TCO) will have an allocation of \$17.9M for health promotion and \$6.6M for salaries of officers to carry out enforcement activities. The remaining sum of \$11.2M will be allocated to the Hong Kong Council on Smoking and Health for health promotion.

TCO in DH will increase its staff complement to 66, from the current strength of 36. There will be 34 tobacco control inspectors in place of the current 14 tobacco control officers. In addition, there will be four posts of police officers to train and assist tobacco control inspectors to carry out their enforcement function.

Signature _____

Name in block letters Dr P Y LAM

Post Title Director of Health

Date 11 March 2006

Examination of Estimates of Expenditure 2006-07
**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB638

Head : 37 Department of Health

Subhead (No. & title) :

Question Serial No.

Programme : (3) Health Promotion

0588

Controlling Officer : Director of Health

Director of Bureau : Secretary for Health, Welfare and Food

Question :

With regard to the strengthening of the publicity and education programme on smoking prevention, please advise this Committee of:

- (a) the estimated expenditure involved;
- (b) the details of the publicity and education programme;
- (c) whether the Administration has set any indicators to review the effectiveness of the publicity and education programme.

Asked by : Hon. KWONG Chi-kin

Reply :

- (a) The Department of Health (DH) will have a provision of \$29.1M in 2006-07 to carry out publicity and education programmes on tobacco control, representing an increase of \$2.5M over 2005-06. Of this, \$17.9M will be allocated to the Tobacco Control Office in DH and the remaining sum of \$11.2M to the Hong Kong Council on Smoking and Health (COSH).
- (b) DH adopts an integrated approach to promoting a smoke-free culture in Hong Kong including anti-smoking activities to educate the public about the harmful effects of smoking and secondhand smoke, and a 24-hour smoking cessation telephone hotline service. In 2006-07, DH will strengthen publicity through TV and radio announcements of public interests as well as posters and pamphlets, particularly on the new legislative requirements.

Specifically for employees of the catering and entertainment industries, DH will provide implementation guidelines and conduct capacity building workshops to assist them to understand and comply with the new legislative requirements.

- (c) COSH will conduct pre- and post-activity evaluation on the knowledge, attitude and practice of participants on tobacco control related activities. Public opinion surveys on tobacco control and youth smoking prevalence surveys will also be conducted to show the level of public's support towards anti-smoking measures and to assess the effectiveness of the strategies adopted in our health education about the hazards of smoking and passive smoking.

DH will also keep in view the compliance of the Smoking (Public Health) Ordinance and the prevalence of smoking in Hong Kong.

Signature _____

Name in block letters Dr P Y LAM

Post Title Director of Health

Date 10 March 2006

Examination of Estimates of Expenditure 2006-07
**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB639

Question Serial No.

0611

Head : 37 Department of Health

Subhead (No. & title) :

Programme : (2) Disease Prevention; (4) Curative Care

Controlling Officer : Director of Health

Director of Bureau : Secretary for Health, Welfare and Food

Question :

Despite the increasing public demand for healthcare service and the persistent threat of avian influenza, the Administration is going to cut the manpower on disease prevention and curative care. In this regard, please set out the specific details of the manpower cut and advise whether the relevant services will be affected by the deletion of the posts concerned.

Asked by : Hon. TAM Heung-man

Reply :

In 2006-07, the Department of Health will delete 24 posts under Programmes (2) and (4) which will fall vacant through natural wastage. Details of the posts to be deleted are at Annex. The level of the relevant services will be maintained through re-engineering of operations, staff redeployment and outsourcing of services.

Signature _____

Name in block letters Dr P Y LAM

Post Title Director of Health

Date 10 March 2006

Posts to be deleted in Programmes (2) and (4) in 2006-07

<u>Rank</u>	<u>Number</u>
<u>Programme (2)</u>	
Inoculator	1
Workman II	13
Property Attendant	3
Total	<hr/> 17 <hr/>

<u>Programme (4)</u>	
Chief Dispenser	1
Clerical Assistant	1
Workman II	4
Property Attendant	1
Total	<hr/> 7 <hr/> <hr/>

Examination of Estimates of Expenditure 2006-07
**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB320

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

Question Serial No.

Programme : (4) Curative Care

0690

Controlling Officer : Director of Health

Director of Bureau : Secretary for Health, Welfare and Food

Question :

It is stated in item 21 under this Programme that the target for the appointment time for new dermatology cases was not achieved because a number of experienced doctors had left the service in the year. Please provide the present establishment of dermatologists and advise if there are any measures or financial arrangements to prevent the recurrence of the problem.

Asked by : Hon. EU Yuet-mee, Audrey

Reply :

As at end 2005, there were 31 doctors in the Social Hygiene Service (SHS). Three specialists in dermatology left the SHS in 2005, amounting to a wastage rate of 9.6%.

The Department of Health (DH) has arranged internal redeployment and appointment of new recruits to replace doctors who left the SHS. Besides, DH plans to employ four contract doctors on a part-time basis in 2006-07 to shorten the appointment time. The estimated expenditure is about \$0.5M.

Signature _____

Name in block letters Dr P Y LAM

Post Title Director of Health

Date 11 March 2006

Examination of Estimates of Expenditure 2006-07
**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB321

Question Serial No.

0691

Head : 37 Department of Health Subhead (No. & title) :
603 Plant, vehicles and
equipment & 974 Subvented
institutions – maintenance,
repairs and minor improvements
(block vote)

Programme :

Controlling Officer : Director of Health

Director of Bureau : Secretary for Health, Welfare and Food

Question :

Please set out in detail the estimated expenditure under Subhead 603 “Plant, vehicles and equipment” and Subhead 974 “Subvented institutions - maintenance, repairs and minor improvements (block vote)”.

Asked by : Hon. EU Yuet-mee, Audrey

Reply :

The provision of \$6.4M Subhead 603 “Plant, vehicles and equipment” is made up of the following items -

	\$M
Replacement of two sets of air-cooled chillers and the associated accessories at Lam Tin Polyclinic	0.8
Acquisition of an Automated Haematology System	3.1
Replacement of one General X-ray machine with Computed Radiography System, Picture Archiving and Communication System and Radiology Information System at Tai Po Chest X-ray Unit	2.5
Total	6.4

The provision of \$0.9M under Subhead 974 “Subvented institutions – maintenance, repairs and minor improvements (block vote)” is for subventing the Family Planning Association of Hong Kong for the repair works of its Yuen Long Clinic Building.

Signature _____

Name in block letters Dr P Y LAM

Post Title Director of Health

Date 9 March 2006

Examination of Estimates of Expenditure 2006-07
**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB322

Question Serial No.

Head : 37 Department of Health
General non-recurrent

Subhead (No. & title) : 700

0692

Programme :

Controlling Officer : Director of Health

Director of Bureau : Secretary for Health, Welfare and Food

Question :

Could the Administration explain in detail the expenses for item 481 "Antiviral Stockpile for Influenza Pandemic" under subhead 700 "General non-recurrent" and advise on the present stockpile and the number of patients that can be catered for?

Asked by : Hon. EU Yuet-mee, Audrey

Reply :

A commitment of \$254M has been approved for increasing the stockpile of antivirals for influenza pandemic. Owing to the advancement of the delivery of the antivirals, the actual expenditure in 2005-06 will be around \$71M, instead of the revised estimate of \$29M.

As at 2 March 2006, the Department of Health and the Hospital Authority together have a stockpile of about 10 million doses of antivirals. This is equivalent to about 1 million treatment courses.

Signature _____

Name in block letters _____ Dr P Y LAM

Post Title _____ Director of Health

Date _____ 9 March 2006

Examination of Estimates of Expenditure 2006-07
**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB368

Question Serial No.

1063

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

Programme : (2) Disease Prevention

Controlling Officer : Director of Health

Director of Bureau : Secretary for Health, Welfare and Food

Question :

The Department of Health is the major government department in promoting primary medical care. The Administration also emphasises the importance of primary prevention in "Building a Healthy Tomorrow – Discussion Paper on the Future Service Delivery Model for our Health Care System" released last year. In this regard, what specific work has been done by the Department of Health in the past three years to tie in with the above direction and how much has been spent on primary medical care services?

Asked by : Hon. FUNG Kin-kee, Frederick

Reply :

Under this Programme, the Department of Health has been providing integrated primary health care services to the public through a number of preventive services, the expenditure for which in 2003-04, 2004-05 and 2005-06 is about \$1,256M, \$1,222M and \$1,204M respectively. These services include the following -

- Family Health Service, which provides integrated child health and development programme for children from birth to five years of age; maternal health service for antenatal and postnatal women; and family planning services for women, with the aim to ensure better maternal and child health among the population.
- Woman Health Service, which provides integrated health promotion and disease prevention programme including physical examination and appropriate screening tests for women at or below 64 years of age with the aim to promote the health of women through addressing their health needs at different stages in life.
- School Dental Care Service, which provides annual dental examination, preventive and basic dental care as well as oral health education for primary school children with the aim to reduce dental problems among the population through early inculcation of good dental care habits.

- Student Health Service, which provides annual health assessment for primary and secondary school students including physical examination, screening for health problems, individual counselling and health education.
- Elderly Health Services aim to enhance primary health care for the elderly, improve their self-care ability, encourage healthy living and strengthen carer support so as to minimize illness and disability. Integrated primary health services for elders aged 65 and above are provided through elderly health centres and visiting health teams reach out into the community to provide health promotion programmes in collaboration with other elderly service providers.
- Cervical Screening Programme, which was launched in 2004 in collaboration with public and private providers and laboratories, provides cervical screening services at the maternal and child health centres.

Signature _____

Name in block letters Dr P Y LAM

Post Title Director of Health

Date 10 March 2006

Examination of Estimates of Expenditure 2006-07
**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

SB144

Question Serial No.

1066

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

Programme : (6) Treatment of Drug Abusers

Controlling Officer : Director of Health

Director of Bureau : Secretary for Security

Question :

The financial provision for the subvented sector is estimated to be increased by 5.7% to \$86.7M for 2006-07. In this regard, please inform this Council of (a) the names of the subvented organisations and their respective amounts allocated and increases in provision; and (b) whether the Administration has assessed the effectiveness of services provided by its methadone clinics and various subvented voluntary organisations in facilitating detoxification? If yes, please elaborate by listing relevant indicators such as the success rate of detoxification; if not, what is/are the reasons?

Asked by : Hon. FUNG Kin-kee, Frederick

Reply :

The subvention to various subvented organisations for 2005-06 and 2006-07 is as follows -

<u>Subvented Organisation</u>	<u>2005-06 Revised Estimate</u> \$M	<u>2006-07 Estimate</u> \$M	<u>Difference</u> \$M
Society for the Aid and Rehabilitation of Drug Abusers	72.2	76.7	+4.5
Caritas Hong Kong	4.6	4.7	+0.1
Hong Kong Christian Service	5.2	5.3	+0.1

The increased provision is mainly for subventing a treatment and rehabilitation centre for adult females.

The Department has been closely monitoring the performance and effectiveness of the methadone clinic service and subvented residential treatment and rehabilitation programmes. The key performance measures are -

Targets

	<u>Target</u>
average attendance rate of patients registered with methadone clinics	70%
completion rate of the in-patient treatment courses	
- detoxification	70%
- rehabilitation	60%

Indicators

	<u>2006 (Estimate)</u>
patients registered with methadone clinics	9 150
average daily attendances at methadone clinics	6 800
patients admitted for residential treatment	2 100
bed-days occupied at residential treatment and rehabilitation centres	113 000

Signature _____

Name in block letters Dr P Y LAM

Post Title Director of Health

Date 9 March 2006

Examination of Estimates of Expenditure 2006-07
CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION

Reply Serial No.

HWFB369

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

Question Serial No.

Programme : (3) Health Promotion

1067

Controlling Officer : Director of Health

Director of Bureau : Secretary for Health, Welfare and Food

Question :

It is mentioned under Matters Requiring Special Attention (in paragraph 18 on page 155 of Estimates - Volumes IA) that the Department will (put) "emphasis on childhood obesity programme". Could the Department set out the specific details of the work concerned, the expenditure incurred and the staffing arrangements involved?

Asked by : Hon. FUNG Kin-kee, Frederick

Reply :

The Department of Health (DH) promotes healthy eating among members of the community as part of its ongoing activities in fostering a healthy lifestyle. To enhance its efforts in tackling the problem of childhood obesity, DH will launch a school-based campaign in 2006, targeting at over 440 000 primary school students. The campaign enlists intersectoral and multidisciplinary support from schools, health and dietary professionals, caterers as well as relevant Government departments. Guidelines on healthy school lunchboxes will be reviewed, updated and issued to schools, and educational resources for teachers and parents will be developed, coupled with training and publicity. The additional allocation for the campaign in 2006-07 will be \$3M. With internal redeployment and appointment of new recruits, a multidisciplinary team of doctors, nurses, dietitians, health promotion officers, research and marketing personnel will be formed to carry out the campaign.

Signature _____

Name in block letters _____ **Dr P Y LAM**

Post Title _____ **Director of Health**

Date _____ **9 March 2006**

Examination of Estimates of Expenditure 2006-07
**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB370

Question Serial No.

1068

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

Programme : (2) Disease Prevention

Controlling Officer : Director of Health

Director of Bureau : Secretary for Health, Welfare and Food

Question :

It is stated under Matters Requiring Special Attention (in paragraph 12 on page 154 of Estimates – Volume 1A) that the Department of Health will “continue to enhance the preparedness for influenza pandemic and other public health emergencies”. Would the Administration set out the specific details of the work concerned, the expenditure and the staffing arrangements involved?

Asked by : Hon. FUNG Kin-kee, Frederick

Reply :

Enhancing preparedness for outbreaks of human avian influenza is part and parcel of the Department of Health's work on prevention and control of infectious diseases, which is mainly undertaken by the Centre for Health Protection (CHP) and the Port Health Office. For example, the CHP has been strengthening their disease surveillance system in hospitals; stockpiling antivirals, personal protective equipment and laboratory diagnostics reagents; enhancing the capacity of laboratories in the public sector; building up surge capacity by setting up a mechanism for mobilising volunteers during public health emergencies; organising infection control training and developing relevant guidelines for relevant government departments and healthcare professionals in the public and private sectors; holding briefing sessions/forums and education/publicity programmes on preparedness for influenza pandemic for different sectors of the community; strengthening communication and collaboration with regional and international partners; and supporting applied research on the prevention and control of infectious diseases. Moreover, the CHP has been conducting and will continue to conduct inter-departmental drills/exercises for emergency response against major infectious disease outbreaks. On the port health front, temperature screening measures for inbound passengers at immigration control points have been enhanced. In 2006-07, total allocation to the CHP and port health services for their overall functions, which include prevention and control of infectious diseases, is \$956M, and the staff complement is about 1 900.

Signature _____

Name in block letters Dr P Y LAM

Post Title Director of Health

Date 10 March 2006

Examination of Estimates of Expenditure 2006-07
**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB371

Question Serial No.

1069

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

Programme : (2) Disease Prevention

Controlling Officer : Director of Health

Director of Bureau : Secretary for Health, Welfare and Food

Question :

It is mentioned under Matters Requiring Special Attention (in paragraph on page 154 of Estimates – Volume 1A) that the Department of Health will “review the childhood immunisation programme”. Could the Department set out the specific details of the work concerned and the progress of the review; the arrangements and timetable for implementing the results of the review; and the expenditure and staffing arrangements involved in the whole review?

Asked by : Hon. FUNG Kin-kee, Frederick

Reply :

In line with international development in childhood immunisation practice, the Department of Health (DH) is actively considering replacing oral poliovirus vaccine with inactivated poliovirus vaccine and whole-cell pertussis vaccine with acellular pertussis vaccine. It is estimated that this change will require an additional annual recurrent cost of \$29.4M. DH will set up an internal working group to undertake the review. The new immunisation programme is expected to be implemented in 2007.

Signature _____

Name in block letters Dr P Y LAM

Post Title Director of Health

Date 10 March 2006

Examination of Estimates of Expenditure 2006-07
**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB372

Question Serial No.

1070

Head : 37 Department of Health

Subhead (No. & title) :

Programme : (2) Disease Prevention

Controlling Officer : Director of Health

Director of Bureau : Secretary for Health, Welfare and Food

Question :

The financial provision for the subvented sector is estimated to be increased by 4.8% to \$32.9M for 2006-07. Please list the names of the subvented organisations and their respective amounts allocated and increases in provision.

Asked by : Hon. FUNG Kin-kee, Frederick

Reply :

There is only one subvented organisation under this Programme, namely the Family Planning Association of Hong Kong. The 4.8% increase in provision is mainly due to the capital subvention of \$943,000 in 2006-07 for the repair works of its Yuen Long Clinic Building.

Signature _____

Name in block letters Dr P Y LAM

Post Title Director of Health

Date 9 March 2006

Examination of Estimates of Expenditure 2006-07
**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB373

Question Serial No.

1071

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

Programme : (2) Disease Prevention

Controlling Officer : Director of Health

Director of Bureau : Secretary for Health, Welfare and Food

Question :

It is stated under Indicators (in paragraph 11 on page 153 of Estimates - Volumes IA) that the number of attendances at family planning clinics operated by Family Planning Association (FPA) has decreased in recent years. It has dropped from 180 000 in 2003 to 178 000 and 163 000 in 2004 and 2005 respectively. Please advise if the Administration has examined the underlying reason(s). Could the decrease be related to inadequate publicity and promotion? Has the subvention granted to FPA adjusted downward accordingly in recent years? Could the Administration list the respective subventions granted to FPA by the Department in the past five years?

Asked by : Hon. FUNG Kin-kee, Frederick

Reply :

Since March 2004, the Family Planning Association has adopted more cost-effective practices in performing cervical screening test at three yearly intervals for women who have had two initial consecutive normal results instead of doing it annually, and increasing the number of cycles of oral contraceptive pills prescribed per visit. This change in practice has enabled clients to make less visits, thereby resulting in a decrease in attendances in 2004 and 2005. The subvention to the Association for the past five years and in 2006 are as follows –

<u>Year</u>	<u>Amount</u>
	\$M
2001-02	36.6
2002-03	35.0
2003-04	33.0
2004-05	29.8
2005-06	31.4
2006-07	32.9

Signature _____

Name in block letters Dr P Y LAM

Post Title Director of Health

Date 10 March 2006

Examination of Estimates of Expenditure 2006-07
**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB628

Question Serial No.

1125

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

Programme : (2) Disease Prevention

Controlling Officer : Director of Health

Director of Bureau : Secretary for Health, Welfare and Food

Question :

In response to my written enquiry made on 21 October 2005 concerning the services provided by the Maternal and Child Health Centres (MCHCs) and mentioning the inadequate exchange of information between the Hospital Authority (HA) and the Department of Health (DH) on women and babies visiting MCHCs, the Administration replied that DH was now working closely with HA in exploring the feasibility of exchanging information through the use of information technology so as to strengthen their mutual exchange of information. In this regard, what are the specific items of work conducted by the Administration in this area for strengthening the exchange of information between HA and DH and what are the expenditure and manpower involved?

Asked by : Hon. FUNG Kin-kee, Frederick

Reply :

Capital funding of about \$9M has been earmarked for the Department of Health (DH) to develop an information system for Maternal and Child Health Centres. DH is in discussion with the Hospital Authority on the feasibility of electronic data exchange. Issues being discussed include the set of data to be exchanged and the seeking of data owners' consent. Project planning, coordination and management are mainly undertaken by officers from the Information Technology Management Unit (ITMU) and the Family Health Service. Since such activity is an integral part of the work of the ITMU, the resources designated for the specific purpose of developing the information system cannot be separately identifiable.

Signature _____

Name in block letters Dr P Y LAM

Post Title Director of Health

Date 10 March 2006

Examination of Estimates of Expenditure 2006-07
**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB088

Question Serial No.

1204

Head : 37 Department of Health

Subhead (No. & title) :

Programme : (2) Disease Prevention

Controlling Officer : Director of Health

Director of Bureau : Secretary for Health, Welfare and Food

Question :

Under this Programme, the Government allocates additional provision for reviewing the childhood immunisation programme in the light of changes in disease epidemiology and immunisation practices. In this regard, what are the details of such review? How much additional resource is involved? When will the new childhood immunisation programme be implemented?

Asked by : Hon. LI Kwok-ying

Reply :

In line with international development in childhood immunisation practice, the Department of Health is actively considering replacing oral poliovirus vaccine with inactivated poliovirus vaccine and whole-cell pertussis vaccine with acellular pertussis vaccine. It is estimated that this change will require an additional annual recurrent cost of \$29.4M. The new immunisation programme is expected to be implemented in 2007.

Signature _____

Name in block letters _____ Dr P Y LAM

Post Title _____ Director of Health

Date _____ 10 March 2006

Examination of Estimates of Expenditure 2006-07
**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB104

Question Serial No.

1211

Head : 37 Department of Health

Subhead (No. & title) :

Programme : (4) Curative Care

Controlling Officer : Director of Health

Director of Bureau : Secretary for Health, Welfare and Food

Question :

Only 61% of the cases met the targeted appointment time within 12 weeks for new dermatology cases on account that a number of experienced doctors had left the service in the year. How many dermatology specialists quit or resigned and please advise – (a) the turnover rate of dermatology specialist; (b) whether the situation would expect to continue or worsen in the coming year; and (c) possible solution to the problem?

Asked by : Hon. CHAN Bernard

Reply :

Three specialists in dermatology left the Social Hygiene Service (SHS) in 2005, amounting to a wastage rate of 9.6%.

The Department of Health (DH) has arranged internal redeployment and appointment of new recruits to replace doctors who left the SHS. Besides, DH plans to employ four contract doctors on a part-time basis in 2006-07 to shorten the appointment time. The estimated expenditure is about \$0.5M.

Signature _____

Name in block letters _____ Dr P Y LAM

Post Title _____ Director of Health

Date _____ 11 March 2006

Examination of Estimates of Expenditure 2006-07
**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB105

Question Serial No.

1212

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

Programme : (3) Health Promotion

Controlling Officer : Director of Health

Director of Bureau : Secretary for Health, Welfare and Food

Question :

With regard to the childhood obesity programme, what is the estimated expenditure involved and what are the details?

Asked by : Hon. CHAN Yuen-han

Reply :

The Department of Health (DH) promotes healthy eating among members of the community as part of its ongoing activities in fostering a healthy lifestyle. To enhance its efforts in tackling the problem of childhood obesity, DH will launch a school-based campaign in 2006, targeting at over 440 000 primary school students. The campaign enlists intersectoral and multidisciplinary support from schools, health and dietary professionals, caterers as well as relevant Government departments. Guidelines on healthy school lunchboxes will be reviewed, updated and issued to schools, and educational resources for teachers and parents will be developed, coupled with training and publicity. The additional allocation for the campaign in 2006-07 will be \$3M. With internal redeployment and appointment of new recruits, a multidisciplinary team of doctors, nurses, dietitians, health promotion officers, research and marketing personnel will be formed to carry out the campaign.

Signature _____

Name in block letters Dr P Y LAM

Post Title Director of Health

Date 9 March 2006

Examination of Estimates of Expenditure 2006-07
CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION

Reply Serial No.

HWFB106

Question Serial No.

1237

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

Programme : (2) Disease Prevention

Controlling Officer : Director of Health

Director of Bureau : Secretary for Health, Welfare and Food

Question :

Under the indicator on “no. of enrolment in elderly health centres”, the estimated number for 2006 is 38 000. Could the Administration inform this Council of the percentage represented by this number among the elderly population in Hong Kong? Will the Administration consider increasing the number under this indicator? If so, what are the details? If not, what is/are the reason(s)?

Asked by : Hon. CHAN Yuen-han

Reply :

38 000 enrolments in Elderly Health Centres (EHCs) represents about 4.5 % of the total population aged 65 or above in Hong Kong as at end 2005.

EHCs are not the only means to address the health care needs of the elderly. All the stakeholders have to work together to take concerted efforts to meet the varying needs of the elderly through various measures and services. Apart from EHCs, the Visiting Health Teams of Elderly Health Services (EHS) reach out into the community to provide health promotion activities for elders and carers. Also, there are more than 70 general out-patient clinics run by the Hospital Authority which provide general medical services to members of the public, including elders. Private practitioners are also key providers of primary health care. Besides, some non-government organisations (NGOs) are operating health centres on a self-financing basis. EHS will strengthen collaboration with stakeholders including private practitioners and NGOs to enhance primary health services for the elderly in Hong Kong. At present, there is no plan to expand EHCs.

Signature _____

Name in block letters Dr P Y LAM

Post Title Director of Health

Date 9 March 2006

Examination of Estimates of Expenditure 2006-07
**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB107

Question Serial No.

1238

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

Programme :

Controlling Officer : Director of Health

Director of Bureau : Secretary for Health, Welfare and Food

Question :

With respect to the item on “Departmental Expenses / Temporary Staff”, the provision for temporary staff is increased by \$19,584,000 from \$218,937,000 in 2005-06 (Revised Estimate) to \$238,521,000 in 2006-07 (Estimate). In this regard, please inform this Council of the following -

- (a) What is the basis used by the Administration for making such projection?
- (b) What is the estimated expenditure involved?
- (c) What are the ranks and scope of responsibilities of these additional temporary staff?
What are the details?

Asked by : Hon. CHAN Yuen-han

Reply :

It is anticipated that 81 additional contract staff (doctor, nurse, research officer, tobacco control inspector, health promotion project manager, health surveillance staff, administrative and clerical support staff) are required for new initiatives in tobacco control, comprehensive child development service, health promotion programmes on childhood obesity and port health measures in preparation for the revised International Health Regulations which will soon come into effect. The additional cost is estimated at \$15M broken down as follows -

	Contract Staff <u>No.</u>	<u>Provision</u> (\$M)
Port health measures in relation to the revised International Health Regulations	47	8.1
Tobacco control enforcement	22	3.6
Health promotion programmes on childhood obesity	3	1.6
Comprehensive child development service	9	1.7
	<u>81</u>	<u>15.0</u>

Another \$4.6M is required mainly to cover the full-year effect of posts partially filled in 2005-06 and salary adjustments implemented for contract staff in December 2005.

Signature _____

Name in block letters Dr P Y LAM

Post Title Director of Health

Date 10 March 2006

Examination of Estimates of Expenditure 2006-07
**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB108

Question Serial No.

1272

Head : 37 Department of Health

Subhead (No. & title) :

Programme : (5) Rehabilitation

Controlling Officer : Director of Health

Director of Bureau : Secretary for Health, Welfare and Food

Question :

- (a) What was the expenditure spent by the Department of Health in 2005-06 for providing therapy to children with developmental problems? What was the number of clients involved? In 2006-07, what is the estimated expenditure in this regard?
- (b) What was the expenditure spent by the Department of Health in 2005-06, for counselling parents of children with developmental problems? What was the number of parents counselled? In 2006-07, what is the estimated expenditure in this regard?

Asked by : Hon. LEUNG Yiu-chung

Reply :

- (a) The Child Assessment Service (CAS) assesses children with developmental problems through a multidisciplinary approach. The total attendances for assessment and other services at the CAS in 2005 were 27 500, involving 15 600 children. In 2005-06, the expenditure for CAS is about \$71.2M. For 2006-07, the provision is \$71.9M.
- (b) Counselling to parents is an integral part of the services provided by the CAS and the expenditure on such counselling is not separately identifiable. There are no readily available statistics on the number of parents having been counselled.

Signature _____

Name in block letters _____ Dr P Y LAM

Post Title _____ Director of Health

Date _____ 10 March 2006

Examination of Estimates of Expenditure 2006-07
**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB109

Head : 37 Department of Health

Subhead (No. & title) :

Question Serial No.

1276

Programme : (3) Health Promotion

Controlling Officer : Director of Health

Director of Bureau : Secretary for Health, Welfare and Food

Question :

In the past three years, what were the respective annual expenditures spent by the Department of Health in the publicity and education programme on smoking prevention? Out of these expenditures, what were the respective annual expenses for conducting publicity and education on smoking prevention among minors? In 2006-07, what are the details and estimated expenditure involved?

Asked by : Hon. LEUNG Yiu-chung

Reply :

The expenditures on publicity and education programmes on tobacco control in 2003-04, 2004-05 and 2005-06 were \$18.5M, \$23.1M and \$26.6M respectively. In 2006-07, the provision will be \$29.1M, representing an increase of \$2.5M.

The Department of Health (DH) adopts an integrated approach to promoting a smoke-free culture in Hong Kong including anti-smoking activities to educate the public about the harmful effects of smoking and secondhand smoke, and a 24-hour smoking cessation telephone hotline service. In 2006-07, DH will strengthen publicity through TV and radio announcements of public interests as well as posters and pamphlets, particularly on the new legislative requirements.

Specifically for employees of the catering and entertainment industries, DH will provide implementation guidelines and conduct capacity building workshops to assist them to understand and comply with the new legislative requirements.

While publicity and education programmes generally cover all ages, there were some specific programmes directed at youth and women. In 2006-07, such activities will include health talks and lectures to schools and social service organisations, interactive education theatre programmes, and training of students as tobacco control advocates. The anticipated spending in 2006-07 will be \$1.4M, which will be at the same level as those of the past three years.

Signature _____

Name in block letters Dr P Y LAM

Post Title Director of Health

Date 9 March 2006

Examination of Estimates of Expenditure 2006-07
**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB110

Question Serial No.

1295

Head : 37 Department of Health

Subhead (No. & title) :

Programme : (4) Curative Care

Controlling Officer : Director of Health

Director of Bureau : Secretary for Health, Welfare and Food

Question :

In regard to this Programme, please advise on the following -

- (a) What were the respective expenditures incurred by various specialised outpatient clinics under the Department of Health in 2005-06? What is the estimated expenditure for 2006-07?
- (b) Does the Department of Health have any plan to take measures in 2006-07 with a view to shortening the waiting time for specialised outpatient clinics? If yes, what is the estimated expenditure?

Asked by : Hon. LEUNG Yiu-chung

Reply :

- (a) The expenditure for the specialised outpatient clinics providing curative service in the Department of Health (DH) is as follows -

	<u>2005-06</u> (Revised Estimate) \$M	<u>2006-07</u> (Estimate) \$M
Tuberculosis and Chest Service	214.8	223.3
Social Hygiene (Dermatology and Special Skin Service)	96.1	97.4
HIV Management	80.2	81.8

- (b) There is essentially no waiting time for Tuberculosis and Chest Clinics and HIV clinics. In 2005, the performance of the Social Hygiene Service (SHS) was affected by the resignation and retirement of three specialists in dermatology from the SHS. The wastage rate of doctors was 9.6%. DH has arranged internal redeployment and appointment of new recruits to replace doctors who left the SHS. Besides, DH plans to employ four contract doctors on a part-time basis in 2006-07 to shorten the appointment time. The estimated expenditure is about \$0.5M.

Signature _____

Name in block letters Dr P Y LAM

Post Title Director of Health

Date 11 March 2006

Examination of Estimates of Expenditure 2006-07
**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB640

Question Serial No.

1302

Head : 37 Department of Health

Subhead (No. & title) :

Programme : (2) Disease Prevention

Controlling Officer : Director of Health

Director of Bureau : Secretary for Health, Welfare and Food

Question :

Please advise on the following –

1. The Administration estimates that in 2006, the number of enrolment in elderly health centres (EHCs) will increase to 38 000 from 37 400 in 2005 while the number of attendances at health education activities organised by EHCs and visiting health teams will decrease to 450 000 from 460 000 in 2005. What is/are the reason(s)? Is this related to insufficient resources from the Administration for publicity?

2. The Administration estimates an increase in the number of enrolment in EHCs in 2006 but a zero change in the number of attendances for health assessment and medical consultation at EHCs in 2006. What is/are the reason(s)?

Asked by : Hon. LEE Kok-long, Joseph

Reply :

1. We have lowered our projection on the number of attendances at health education activities for 2006 because we have been changing our mode of delivery of health education activities from general health talks to more focused in-depth small group learning, which may result in a slight decrease in the total number of attendances.

2. The staffing situation and the complexity of the cases being handled may affect the total number of enrolments of the Elderly Health Centres (EHCs) and the total number of attendances for health assessment and medical consultation conducted by the EHCs in a particular year.

We project that the EHCs will increase their enrolment from the current 37 400 in 2005 to 38 000 in 2006, although this is lower than the number in 2004 because of difficulties in recruiting nurses in EHCs.

Signature _____

Name in block letters Dr P Y LAM

Post Title Director of Health

Date 10 March 2006

Examination of Estimates of Expenditure 2006-07
**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB641

Question Serial No.

1303

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

Programme : (2) Disease Prevention

Controlling Officer : Director of Health

Director of Bureau : Secretary for Health, Welfare and Food

Question :

The Administration has increased the estimate for disease prevention. Given the global spread of avian influenza, could the Administration provide exact figures on provision earmarked for prevention and treatment of avian influenza?

Asked by : Hon. TAM Heung-man

Reply :

Enhancing preparedness for outbreaks of human avian influenza is part and parcel of the Department of Health's work on prevention and control of infectious diseases, which is mainly undertaken by the Centre for Health Protection (CHP) and the Port Health Office. In 2006-07, \$956M has been earmarked for the CHP and port health services for their overall functions, which include prevention and control of infectious diseases. Moreover, a commitment of \$254M has been approved for increasing the stockpile of antivirals to enhance our preparedness against influenza pandemic.

Signature _____

Name in block letters Dr P Y LAM

Post Title Director of Health

Date 10 March 2006

Examination of Estimates of Expenditure 2006-07
**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB643

Question Serial No.

1305

Head : 37 Department of Health

Subhead (No. & title) :

Programme : (3) Health Promotion

Controlling Officer : Director of Health

Director of Bureau : Secretary for Health, Welfare and Food

Question :

What is the estimated total expenditure on tobacco control and the specific uses after the implementation of Smoking (Public Health) (Amendment) Bill in 2006-07? What is the subvention granted to the Hong Kong Council on Smoking and Health for anti-smoking initiatives? What are the specific items of expenditure? What are the staff establishment and expenditure involved in law enforcement? Please give a breakdown of the uses of the expenditure.

Asked by : Hon. LEE Kok-long, Joseph

Reply :

In 2006-07, the Department of Health (DH) will have a provision of \$35.7M for tobacco control activities. Out of this, the Tobacco Control Office will have an allocation of \$17.9M for health promotion and \$6.6M for salaries of officers to carry out enforcement activities. The remaining sum of \$11.2M will be allocated to the Hong Kong Council on Smoking and Health for health promotion.

DH adopts an integrated approach to promoting a smoke-free culture in Hong Kong including anti-smoking activities to educate the public about the harmful effects of smoking and secondhand smoke, and a 24-hour smoking cessation telephone hotline service. In 2006-07, DH will strengthen publicity through TV and radio announcements of public interests as well as posters and pamphlets, particularly on the new legislative requirements.

Specifically for employees of the catering and entertainment industries, DH will provide implementation guidelines and conduct capacity building workshops to assist them to understand and comply with the new legislative requirements.

In 2006-07, DH will have a total of 34 tobacco control inspectors in place of the current 14 tobacco control officers. In addition, there will be four posts of police officers to train and assist tobacco control inspectors to carry out their enforcement function.

Signature _____

Name in block letters Dr P Y LAM

Post Title Director of Health

Date 11 March 2006

Examination of Estimates of Expenditure 2006-07
**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB644

Question Serial No.

1306

Head : 37 Department of Health

Subhead (No. & title) :

Programme : (8) Personnel Management of Civil Servants Working in
Hospital Authority

Controlling Officer : Director of Health

Director of Bureau : Secretary for Health, Welfare and Food

Question :

As regards the number of civil servants working in the Hospital Authority (HA), could the Administration advise on the following:

1. What are the reason(s) for the estimated decrease in the number of civil servants working in HA in 2006? What are the provision and establishment required for this Programme?
2. From 2004-05 to 2005-06, what were the number of civil servants working in HA; the breakdown in terms of their respective departments, grades and posts; and the expenditure involved?

Asked by : Hon. LEE Kok-long, Joseph

Reply :

- (1) The reduction of civil servants working in the Hospital Authority (HA) is mainly due to retirement and redeployment back to the civil service. The staff establishment directly supporting the activities under this programme is 31. There are other general administration staff at the Headquarters of the Department also indirectly providing support to this Programme. The financial provision in 2006-07 is \$10.1M.
- (2) Breakdowns of the number of civil servants working in HA by ranks and by hospitals are at Annexes I and II respectively. The provision of \$1,157M in 2006-07 (under Subhead 003 Recoverable salaries and allowance) is in respect of salaries and allowances for civil servants working in HA, which is fully reimbursed by HA.

Signature _____

Name in block letters Dr P Y LAM

Post Title Director of Health

Date 10 March 2006

Civil Servants Working in Hospital Authority by Ranks

GRADE/RANK	1.4.2004	1.4.2005	1.4.2006
MEDICAL & HEALTH OFFICER GRADES			
General Manager (Clinical Services)	1	1	1
Consultant D3	3	3	3
Consultant D2	8	7	7
Senior Medical & Health Officer	48	43	42
Medical & Health Officer	118	95	90
Sub-total	178	149	143
NURSING & ALLIED GRADES			
General Manager (Nursing)	3	3	3
Senior Nursing Officer	17	11	8
Departmental Operations Manager	22	17	19
Ward Manager	146	108	101
Nurse Specialist	27	27	27
Nursing Officer	450	359	355
Nursing Officer (Education)	12	10	10
Registered Nurse	366	328	319
Enrolled Nurse	217	165	151
Student Nurse	7	2	-
Senior Nursing Officer (Psychiatric)	6	4	4
Nursing Officer (Psychiatric)	84	74	72
Registered Nurse (Psychiatric)	127	115	113
Enrolled Nurse (Psychiatric)	160	133	128
Student Nurse (Psychiatric)	-	-	1
Midwife	5	3	3
Sub-total	1 649	1 359	1 314

GRADE/RANK	1.4.2004	1.4.2005	1.4.2006
SUPPLEMENTARY MEDICAL GRADES			
Department Manager	22	16	15
General Manager (Allied Health Services)	1	1	1
Audiology Technician I	1	1	1
Senior Dietitian	-	1	1
Chief Dispenser	6	3	3
Senior Dispenser	100	94	92
Dispenser	196	194	190
Senior Medical Technologist	11	11	7
Medical Technologist	45	43	42
Medical Laboratory Technician I	7	6	6
Medical Laboratory Technician II	1	1	1
Mould Laboratory Technologist	1	1	1
Senior Mould Laboratory Technician	1	1	1
Mould Laboratory Technician	3	3	3
Occupational Therapy Assistant	87	80	78
Orthoptist I	1	1	1
Pharmacist	6	6	6
Physicist	3	3	3
Senior Physiotherapist	5	5	5
Physiotherapist I	5	5	5
Prosthetist-Orthotist I	3	3	3
Senior Radiographer	16	11	12
Radiographer I	66	63	62
Scientific Officer (Med)	3	3	3
Sub-total	590	556	542

GRADE/RANK	1.4.2004	1.4.2005	1.4.2006
HOSPITAL ADMINISTRATOR GRADE			
Chief Hospital Administrator	1	1	1
Senior Hospital Administrator	6	5	5
Hospital Administrator I	10	10	9
General Manager (Administrative Services)	3	3	3
Sub-total	20	19	18
OTHER DEPARTMENTAL GRADES			
Senior Artisan	5	5	5
Artisan	104	94	89
Cook	58	47	46
Darkroom Technician	36	32	28
Chief Electrical Technician	2	2	5
Senior Electrical Technician	7	7	4
Electrical Technician	8	7	8
Senior Foreman	3	3	3
Foreman	11	8	7
Head Property Attendant	6	3	3
Chief Hospital Foreman	8	7	6
Senior Hospital Foreman	12	11	11
Hospital Foreman	34	32	32
Senior Hostel Manager/Manageress	1	-	-
Hostel Manager/Manageress	1	1	1
Laboratory Attendant	70	67	63
Laundry Manager	1	1	1
Laundry Worker	62	54	48
Linen Production Unit Supervisor	1	1	1
Machinist	11	10	10

GRADE/RANK	1.4.2004	1.4.2005	1.4.2006
Mortuary Attendant	10	8	6
Mortuary Officer	1	1	1
Mortuary Technician	5	2	1
Operating Theatre Assistant	68	55	50
Photographer I	1	1	1
X-Ray Mechanic	6	5	4
Health Care Assistant	242	210	191
Sub-total	774	674	625
MODEL SCALE I GRADES			
Barber	5	5	5
Ganger	15	12	11
Gardener	1	-	-
Ward Attendant	321	279	246
Property Attendant	40	32	27
Workman I	41	34	32
Workman II	594	545	512
Sub-total	1 017	907	833
GENERAL GRADES			
Assistant Clerical Officer	34	3	2
Clerical Assistant	39	38	22
Office Assistant	55	55	53
Personal Secretary II	1	1	1
Telephone Operator	6	6	5
Motor Driver	1	1	1
Sub-total	136	104	84
TOTAL	4 364	3 768	3 559

Civil Servants working in Hospital Authority by Hospitals

Hospital	1.4.2004	1.4.2005	1.4.2006
Alice HML Nethersole Hospital	75	71	66
Cheshire Home, Chung Hom Kok	4	4	4
Cheshire Home, Sha Tin	4	4	4
Caritas Medical Centre	37	33	31
Castle Peak Hospital / Siu Lam Hospital	252	223	212
Tung Wah Fung Yiu King Hospital	2	2	2
Grantham Hospital	4	4	3
HA Head Office (including CPO)	11	11	9
Haven of Hope Hospital	3	3	3
Hong Kong Buddhist Hospital	2	2	2
Hong Kong Eye Hospital	27	18	18
Kwai Chung Hospital / LCKH HACare Home	327	290	265
Kowloon Hospital	203	171	162
Kwong Wah Hospital/Wong Tai Sin Hospital	32	32	32
Maclehose Medical Rehabilitation Centre	1	2	2
North District Hospital	90	86	85
Our Lady of Maryknoll Hospital	39	34	30
Princess Margaret Hospital	430	361	337
Pok Oi Hospital	4	3	4
Prince of Wales Hospital	477	419	387
Pamela Youde Nethersole Eastern Hospital	267	236	218
Queen Elizabeth Hospital	655	572	547
Queen Mary Hospital/Tsan Yuk Hospital	560	471	448
Ruttonjee Hospital / Tang Shiu Kin Hospital	68	54	49
St John Hospital	11	6	5

Hospital	1.4.2004	1.4.2005	1.4.2006
Shatin Hospital	107	62	58
Tseung Kwan O Hospital	62	65	60
Tuen Mun Hospital	385	323	315
Tai Po Hospital	22	22	23
Tung Wah Eastern Hospital	5	6	4
Tung Wah Hospital	2	3	3
United Christian Hospital	118	105	99
Wong Chuk Hang Hospital	1	1	1
Yan Chai Hospital	77	69	71
TOTAL	4 364	3 768	3 559

Examination of Estimates of Expenditure 2006-07
**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB645

Question Serial No.

1309

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

Programme : (2) Disease Prevention

Controlling Officer : Director of Health

Director of Bureau : Secretary for Health, Welfare and Food

Question :

The Administration will review the childhood immunisation programme in 2006-07. What are the specific details and the expenditure? What is the current expenditure on immunisation and what types of vaccines are used?

Asked by : Hon. LEE Kok-long, Joseph

Reply :

In line with international development in childhood immunisation practice, the Department of Health is actively considering replacing oral poliovirus vaccine with inactivated poliovirus vaccine and whole-cell pertussis vaccine with acellular pertussis vaccine. It is estimated that this change will require an additional annual recurrent cost of \$29.4M.

The current childhood immunisation programme include BCG, oral poliovirus vaccine, diphtheria, pertussis and tetanus vaccine, hepatitis B vaccine and measles, mumps and rubella vaccine. The expenditure is about \$6M in 2005-06.

Signature _____

Name in block letters Dr P Y LAM

Post Title Director of Health

Date 10 March 2006

Examination of Estimates of Expenditure 2006-07
**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB646

Question Serial No.

1330

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

Programme : (1) Statutory Functions

Controlling Officer : Director of Health

Director of Bureau : Secretary for Health, Welfare and Food

Question :

Under this Programme, four posts will be created for carrying out enforcement duties as required under the Smoking (Public Health) Ordinance upon enactment of the bill on the provision of the enforcement power to Tobacco Control Office staff. In this regard,

- (a) what is the additional provision required for the creation of these four posts in 2006-07?
- (b) what are the respective ranks, post titles, scopes of duties and annual salaries of the four posts? When will these posts be filled?
- (c) what factor(s) have been taken into consideration by the Administration in making the projection that four additional posts are required after the commencement of the Ordinance?
- (d) since the Administration initially plans to implement the Smoking (Public Health) Ordinance by phases, apart from these four posts, will the Administration create relevant posts by phases to tie in with the implementation and enforcement of the Ordinance concerned? If yes, please set out the details.

Asked by : Hon. CHEUNG Yu-yan, Tommy

Reply :

- (a) In 2006-07, a further provision of \$1.1M has been made for four posts of police officers to train and assist tobacco control inspectors to carry out their enforcement function.
- (b) DH is in discussion with the Hong Kong Police Force on the duties and ranking of these police officers.

- (c) Since talents experienced in both tobacco control and law enforcement are not readily available in the current manpower market, DH will provide new recruits of tobacco control inspectors with in-service training covering communication skills and law enforcement so as to equip them with the competencies required for future duties. After consultation with the Hong Kong Police Force, we believe that the necessary training and assistance could be provided by members of the Force. The provision for four posts of police officers has been made after consultation with the Police Force.
- (d) In 2006-07, DH will have a total of 34 tobacco control inspectors in place of the current 14 tobacco control officers for enforcement duties. The staffing structure and complement will be kept under review.

Signature _____

Name in block letters Dr P Y LAM

Post Title Director of Health

Date 10 March 2006

Examination of Estimates of Expenditure 2006-07
**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB647

Question Serial No.

1340

Head : 37 Department of Health

Subhead (No. & title) :

Programme : (2) Disease Prevention

Controlling Officer : Director of Health

Director of Bureau : Secretary for Health, Welfare and Food

Question :

Regarding the 17 posts to be deleted under this Programme, what are their respective ranks and scopes of responsibilities?

Asked by : Hon. WONG Kwok-hing

Reply :

The 17 posts to be deleted in 2006-07 include one Inoculator, three Property Attendants and 13 Workmen II. They provide inoculation, security and cleansing/manual labour services.

Signature _____

Name in block letters _____ Dr P Y LAM

Post Title _____ Director of Health

Date _____ 10 March 2006

Examination of Estimates of Expenditure 2006-07
**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB648

Question Serial No.

1341

Head : 37 Department of Health

Subhead (No. & title) :

Programme : (2) Disease Prevention

Controlling Officer : Director of Health

Director of Bureau : Secretary for Health, Welfare and Food

Question :

Regarding the review of childhood immunisation programme, what is the estimated expenditure involved? What are the details?

Asked by : Hon. WONG Kwok-hing

Reply :

In line with international development in childhood immunisation practice, the Department of Health is actively considering replacing oral poliovirus vaccine with inactivated poliovirus vaccine and whole-cell pertussis vaccine with acellular pertussis vaccine. It is estimated that this change will require an additional annual recurrent cost of \$29.4M.

Signature _____

Name in block letters _____ Dr P Y LAM

Post Title _____ Director of Health

Date _____ 10 March 2006

Examination of Estimates of Expenditure 2006-07
**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

SB145

Question Serial No.

1352

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

Programme : (6) Treatment of Drug Abusers

Controlling Officer : Director of Health

Director of Bureau : Secretary for Security

Question :

During 2006-07, the Department of Health starts subventing a treatment and rehabilitation centre for adult females. What are the details and the estimated expenditure involved?

Asked by : Hon. LEUNG Yiu-chung

Reply :

The Society for the Aid and Rehabilitation of Drug Abusers (SARDA) has been operating a treatment and rehabilitation centre for adult females (the Centre) since 1997. Its current funding from the Hong Kong Jockey Club Charities Trust will cease in 2006-07. The Government will increase the subvention for SARDA in 2006-07 by \$3.3M to cover the operating cost of the Centre.

The Centre is located at Sun Chui Estate in Shatin with a bed capacity of 24. It is the only centre in Hong Kong that services female drug abusers aged 25 and above and allows children aged under five to stay with their mothers who are under rehabilitation in the Centre.

The Centre runs a three to six month voluntary residential treatment and rehabilitation programme for adult female drug abusers who have completed detoxification in other centres. It also offers short-term rehabilitation to female methadone patients who are maintained on low dosage and are desirous of completing detoxification in a residential setting. On completion of the rehabilitation programme, there is a one-year aftercare service.

Signature _____

Name in block letters Dr P Y LAM

Post Title Director of Health

Date 9 March 2006

Examination of Estimates of Expenditure 2006-07
**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

SB146

Question Serial No.

1353

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

Programme : (6) Treatment of Drug Abusers

Controlling Officer : Director of Health

Director of Bureau : Secretary for Security

Question :

What were the respective numbers of male and female drug abusers being provided with voluntary treatment by the Department of Health in 2005-06 and what was the expenditure involved? In 2006-07, how many voluntary treatment places will be provided by the Department of Health to male and female drug abusers respectively and what is the estimated expenditure?

Asked by : Hon. LEUNG Yiu-chung

Reply :

Voluntary treatment services to drug abusers are provided through methadone clinics and subvented residential treatment and rehabilitation programmes. The revised estimate for 2005-06 is \$116.3M and the estimate for 2006-07 is \$120.2M.

The average daily attendances at methadone clinics in 2005 were 6 800 (6 100 males and 700 females). It is estimated that these attendance rates will be about the same in 2006.

The capacity and admission figures for subvented residential programmes are –

	<u>Total</u>	<u>Male</u>	<u>Female</u>
<u>Capacity (places)</u>			
<u>Year 2005</u>			
The Society for the Aid and Rehabilitation of Drug Abusers (<i>3 centres</i>)	378	336	42
Caritas - Hong Kong (<i>1 centre</i>)	20	20	-
Hong Kong Christian Service (<i>1 centre</i>)	<u>20</u>	<u>20</u>	<u>-</u>
Total :	<u>418</u>	<u>376</u>	<u>42</u>

	<u>Total</u>	<u>Male</u>	<u>Female</u>
<u>Year 2006 (Estimate)</u>			
The Society for the Aid and Rehabilitation of Drug Abusers (<i>4 centres</i>)	402	336	66
Caritas - Hong Kong (<i>1 centre</i>)	20	20	-
Hong Kong Christian Service (<i>1 centre</i>)	<u>20</u>	<u>20</u>	<u>-</u>
Total :	<u>442</u>	<u>376</u>	<u>66</u>

Admissions

<u>Year 2005</u>			
The Society for the Aid and Rehabilitation of Drug Abusers (<i>3 centres</i>)	1 830	1 675	155
Caritas - Hong Kong (<i>1 centre</i>)	100	100	-
Hong Kong Christian Service (<i>1 centre</i>)	<u>70</u>	<u>70</u>	<u>-</u>
Total :	<u>2 000</u>	<u>1 845</u>	<u>155</u>

<u>Year 2006 (Estimate)</u>			
The Society for the Aid and Rehabilitation of Drug Abusers (<i>4 centres</i>)	1 920	1 675	245
Caritas - Hong Kong (<i>1 centre</i>)	110	110	-
Hong Kong Christian Service (<i>1 centre</i>)	<u>70</u>	<u>70</u>	<u>-</u>
Total :	<u>2 100</u>	<u>1 855</u>	<u>245</u>

Signature _____

Name in block letters _____ Dr P Y LAM

Post Title _____ Director of Health

Date _____ 9 March 2006

Examination of Estimates of Expenditure 2006-07
**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB289

Question Serial No.

1365

Head : 37 Department of Health

Subhead (No. & title) :

Programme : (4) Curative Care

Controlling Officer : Director of Health

Director of Bureau : Secretary for Health, Welfare and Food

Question :

It is stated in paragraph 21 that the target “appointment time for new dermatology cases within 12 weeks (90 % of cases)” cannot be fully met because a number of experienced doctors had left the service in the year. Could the Department state the longest waiting time and the average waiting time among the new dermatology cases per year from 2001-02 to 2005-06? Does the Department have any contingency plan in 2006-07 to ensure that the relevant target can be achieved and that the quality of service will not be affected by the departure of experienced doctors?

Asked by : Hon. KWOK Ka-ki

Reply :

From 2001 to 2004, the target appointment time for new dermatology cases was generally met and the longest waiting time was mostly about ten weeks.

In 2005, the performance was affected by the resignation and retirement of three specialists in dermatology from the Social Hygiene Service (SHS). The wastage rate of doctors was 9.6%. Nonetheless, over 60% of the new dermatology cases during the year were attended to within the 12-week target, with all urgent cases seen within two weeks. The other less urgent cases generally involved a longer waiting time of approximately 15 weeks.

The Department of Health (DH) has arranged internal redeployment and appointment of new recruits to replace doctors who left the SHS. Besides, DH plans to employ four contract doctors on a part-time basis in 2006-07 to shorten the appointment time. The estimated expenditure is about \$0.5M.

Signature _____

Name in block letters Dr P Y LAM

Post Title Director of Health

Date 11 March 2006

Examination of Estimates of Expenditure 2006-07
**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB290

Question Serial No.

1366

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

Programme : (2) Disease Prevention

Controlling Officer : Director of Health

Director of Bureau : Secretary for Health, Welfare and Food

Question :

The following information is given under Indicators in paragraph 11 -

	<u>2004</u> (Actual)	<u>2005</u> (Actual)	<u>2006</u> (Estimate)
no. of enrolment in elderly health centres	39 900	37 400	38 000
no. of attendances for health assessment and medical consultation at elderly health centres	199 000	195 000	195 000
attendances at health education activities organised by elderly health centres and visiting health teams	440 000	460 000	450 000

Generally speaking, the above three indicators show that the estimated figures for 2006 are lower than those for 2004 and 2005. What is the Department's justification for making downward adjustment to these indicators? Given the reduction of such indicators, what plan does the Government have to address the increase in service demand for "elderly health centres" brought about by the aging population in Hong Kong?

Asked by : Hon. KWOK Ka-ki

Reply :

We project that the Elderly Health Centres (EHCs) will increase their enrolment from the current 37 400 in 2005 to 38 000 in 2006, although this is lower than the number in 2004 because of difficulties in recruiting nurses in EHCs.

EHCs are not the only means to address the health care needs of the elderly. All the stakeholders have to work together to take concerted efforts to meet the varying needs of the elderly through various measures and services. Apart from EHCs, the Visiting Health Teams of Elderly Health Services (EHS) reach out into the community to provide health promotion activities for elders and carers. Also, there are more than 70 general out-patient clinics run by the Hospital Authority which provide general medical services to members of the public, including elders. Private practitioners are also key providers of primary health care. Besides, some non-government organisations (NGOs) are operating health centres on a self-financing basis. EHS will strengthen collaboration with stakeholders including private practitioners and NGOs to enhance primary health services for the elderly in Hong Kong. At present, there is no plan to expand EHCs.

We have lowered our projection on the number of attendances at health education activities for 2006 because we have been changing our mode of delivery of health education activities from general health talks to more focused in-depth small group learning, which may result in a slight decrease in the total number of attendances.

Signature _____

Name in block letters _____ Dr P Y LAM

Post Title _____ Director of Health

Date _____ 10 March 2006

Examination of Estimates of Expenditure 2006-07
CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION

Reply Serial No.

HWFB291

Question Serial No.

1396

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

Programme : (3) Health Promotion

Controlling Officer : Director of Health

Director of Bureau : Secretary for Health, Welfare and Food

Question :

In 2006-07, additional resources will be allocated to the childhood obesity programme. What are the expenditure, staffing, programme content and number of clients involved?

Asked by : Hon. CHEUNG Man-kwong

Reply :

The Department of Health (DH) promotes healthy eating among members of the community as part of its ongoing activities in fostering a healthy lifestyle. To enhance its efforts in tackling the problem of childhood obesity, DH will launch a school-based campaign in 2006, targeting at over 440 000 primary school students. The campaign enlists intersectoral and multidisciplinary support from schools, health and dietary professionals, caterers as well as relevant Government departments. Guidelines on healthy school lunchboxes will be reviewed, updated and issued to schools, and educational resources for teachers and parents will be developed, coupled with training and publicity. The additional allocation for the campaign in 2006-07 will be \$3M. With internal redeployment and appointment of new recruits, a multidisciplinary team of doctors, nurses, dietitians, health promotion officers, research and marketing personnel will be formed to carry out the campaign.

Signature _____

Name in block letters _____ Dr P Y LAM

Post Title _____ Director of Health

Date _____ 9 March 2006

Examination of Estimates of Expenditure 2006-07
**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB386

Question Serial No.

1510

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

Programme : (2) Disease Prevention

Controlling Officer : Director of Health

Director of Bureau : Secretary for Health, Welfare and Food

Question :

According to the figures under Indicators (in paragraph 11 on page 153 of Estimates - Volume 1A), the number of primary school children participating in the School Dental Care Service has decreased in recent years, from 436 000 in 2003 to 426 500 and 414 000 in 2004 and 2005 respectively. In this regard, please advise if the trend is related to the decrease in the number of primary school children? If no, what is/are the reason(s)? How much resource was thus saved in this period? How does the Department make use of the resource saved? Will it consider expanding the dental care service to secondary school children and the elderly or other needy groups?

Asked by : Hon. FUNG Kin-kee, Frederick

Reply :

The decrease in the number of primary school children participating in the School Dental Care Service (SDCS) from 2003 to 2005 was mainly due to the decreasing number of primary school children. Resources thus saved are not separately identifiable. With the decrease in the number of students, the SDCS has redeployed resources to strengthen its infection control, quality assurance, dental disease prevention and oral health education.

As far as dental services for secondary school children, the elderly and other needy groups are concerned, the Oral Health Education Unit (OHEU) under the Department of Health (DH) has been training secondary school students as Peer Promoters to assist in oral health promotion in secondary schools. OHEU also organises promotional and educational activities to adults and elderly. Besides, DH also provides free emergency dental services, mainly dental extraction and dressing, to members of the public, at 11 designated government dental clinics. There is no plan to expand dental care services to these groups for the time being.

Signature _____

Name in block letters Dr P Y LAM

Post Title Director of Health

Date 11 March 2006

Examination of Estimates of Expenditure 2006-07
**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB387

Question Serial No.

1514

Head : 37 Department of Health

Subhead (No. & title) :

Programme : (2) Disease Prevention

Controlling Officer : Director of Health

Director of Bureau : Secretary for Health, Welfare and Food

Question :

It is stated under Targets (in paragraph 11 on page 153 of Estimates - Volume IA) that both the infant and maternal mortality rates have shown slight increases over the figures of 2004. Please advise if the Administration has examined the underlying reasons and formulated the corresponding counter-measures. Please also provide details of the work done in this regard over the past three years as well as the expenditure and staff establishment involved.

Asked by : Hon. FUNG Kin-kee, Frederick

Reply :

Hong Kong's infant mortality rate (IMR) and maternal mortality ratio (MMR) are among the best in the world. This is largely attributable to the overall efforts and effectiveness of the various health promotion, preventive and curative services provided in the public and private sectors.

The quoted IMR of 3.0 per 1 000 live births and the MMR of 5.0 per 100 000 live births are estimated figures for 2005, with reference to the actual figures in 2004. The provisional figures for 2005, as recently worked out by the Department of Health, are 2.4 and 1.8 respectively. It is very likely that the actual figures for 2005 will be lower than those for 2004.

Signature _____

Name in block letters _____ Dr P Y LAM

Post Title _____ Director of Health

Date _____ 11 March 2006

Examination of Estimates of Expenditure 2006-07
**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB388

Question Serial No.

1516

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

Programme : (2) Disease Prevention

Controlling Officer : Director of Health

Director of Bureau : Secretary for Health, Welfare and Food

Question :

It is stated under Targets (in paragraph 11 on page 153 of Estimates - Volume 1A) that the target of School Dental Care Service participation rate is set only at > 80%. Will the Department consider setting the target at 100% to enable all school-age children to receive dental care service? If no, what is/are the reason(s)?

Asked by : Hon. FUNG Kin-kee, Frederick

Reply :

All primary school children are eligible and welcome to join the School Dental Care Service (SDCS). Participation is however voluntary and parents are free to decide whether or not to enrol their children in the SDCS. Given the voluntary nature of SDCS, the setting of target at >80% is considered reasonable.

Signature _____

Name in block letters Dr P Y LAM

Post Title Director of Health

Date 10 March 2006

Examination of Estimates of Expenditure 2006-07
**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB389

Question Serial No.

1600

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

Programme : (3) Health Promotion

Controlling Officer : Director of Health

Director of Bureau : Secretary for Health, Welfare and Food

Question :

Please inform this Committee of the following:

- (a) The revised estimate under this Programme for 2006-07 is increased by \$8.3M (3.9%). The Administration states that one of the reasons is to strengthen the publicity and education programme on smoking prevention. Why does the number of publicity/educational activities delivered by the Hong Kong Council on Smoking and Health in 2006 remain at 340, the same figure as in 2005?
- (b) In this regard, please provide the total expenditure on the publicity and education programme on smoking prevention in the past three years. In addition, what is the increased expenditure required in strengthening the publicity and education programme on smoking prevention in 2006-07. Please explain in detail how the related services will be strengthened? Also, how will the anti-smoking education targetting employees of the catering and entertainment industries and their customers be strengthened?

Asked by : Hon. CHEUNG Yu-yan, Tommy

Reply :

- (a) The \$8.3M increase represents the net increase under this Programme. In relation to tobacco control activities, the Department of Health (DH) will have a provision of \$29.1M in 2006-07 for the Tobacco Control Office and the Hong Kong Council on Smoking and Health (COSH) to carry out publicity and education programmes, representing an increase of \$2.5M over 2005-06.

With the completion of general non-recurrent projects in 2005-06, COSH will still maintain its publicity/educational activities at 340.

- (b) The provision for conducting publicity and education programmes on smoking prevention in 2003-04, 2004-05 and 2005-06 was \$18.5M, \$23.1M and \$26.6M respectively.

DH adopts an integrated approach to promoting a smoke-free culture in Hong Kong including anti-smoking activities to educate the public about the harmful effects of smoking and secondhand smoke, and a 24-hour smoking cessation telephone hotline service. In 2006-07, DH will strengthen publicity through TV and radio announcements of public interests as well as posters and pamphlets, particularly on the new legislative requirements.

Specifically for employees of the catering and entertainment industries, DH will provide implementation guidelines and conduct capacity building workshops to assist them to understand and comply with the new legislative requirements.

Signature _____

Name in block letters Dr P Y LAM

Post Title Director of Health

Date 10 March 2006

Examination of Estimates of Expenditure 2006-07
**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB390

Question Serial No.

1638

Head : 37 Department of Health

Subhead (No. & title) :

Programme : (1) Statutory Functions

Controlling Officer : Director of Health

Director of Bureau : Secretary for Health, Welfare and Food

Question :

Concerning inspection and control of retail drugs, the Government has not increased the number of inspections in 2006-07 (Estimate). In this regard, could the Administration list the figures for the past three years and for 2006-07 in respect of inspections to retail points of prescription drugs, cough medicines and other dangerous drugs (such as antibiotics), the number of inspectors and related expenditure? How will the Government strengthen enforcement of the related ordinance(s)?

Asked by : Hon. KWOK Ka-ki

Reply :

The number of inspection of licensed retail drug premises in 2003, 2004 and 2005 were 6 485, 6 453 and 6 686 respectively. It is estimated that 6 700 inspections will be conducted in 2006.

Four Senior Pharmacists and 24 Pharmacists are responsible for inspection duties, including inspection of licensed retail drug premises. The staff cost involved in 2003-04, 2004-05 and 2005-06 was \$18.2M, \$18.1M and \$17.4M respectively, and the estimated staff cost for 2006-07 will remain at \$17.4M.

The Department of Health will continue to inspect licensed retail drug premises on a regular basis. Surprise visit, test purchases and joint operation with the Customs and Police will be conducted. Priority will be given to repeated offenders such that those drug retailers with a poor track record of law compliance will be inspected more frequently.

Signature _____

Name in block letters _____ Dr P Y LAM

Post Title _____ Director of Health

Date _____ 10 March 2006

**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB391

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

Question Serial No.

Programme : (2) Disease Prevention

1639

Controlling Officer : Director of Health

Director of Bureau : Secretary for Health, Welfare and Food

Question :

Could the Administration set out the figures for the past three years and for 2006-07 in respect of the government expenditure spent on purchasing influenza vaccines and the number of high-risk people (including the elderly, the chronically ill and the school children) receiving vaccination. How will the Government arrange for vaccination to ensure the effectiveness of influenza prevention initiatives?

Asked by : Hon. KWOK Ka-ki

Reply :

The number of high risk clients who have received influenza vaccination under the Government Influenza Vaccination Programme (GIVP) in the past three years and the corresponding expenditure on vaccine procurement are -

	<u>Expenditure</u>	<u>Doses given</u>
	\$M	
2003-04	3.2	152 500
2004-05	5.3	202 000
2005-06	7.3	260 000

The Department of Health (DH) is planning for the GIVP for 2006-07. DH undertakes annual reviews to assess vaccination coverage and adverse effects, and where appropriate, conducts research for better understanding of population needs and service planning, as well as assessment of programme effectiveness. Planning of the 2006-07 GIVP will take into account the findings of the above reviews, as appropriate. DH works closely with the Hospital Authority, private medical sector, welfare agencies and relevant government departments in providing vaccination to recommended groups, and will continue to strengthen coordination with relevant parties to maximise vaccination coverage of high risk individuals.

Signature _____

Name in block letters Dr P Y LAM

Post Title Director of Health

Date 10 March 2006

Examination of Estimates of Expenditure 2006-07
**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB392

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

Question Serial No.

1640

Programme : (2) Disease Prevention

Controlling Officer : Director of Health

Director of Bureau : Secretary for Health, Welfare and Food

Question :

Could the Administration set out the figures for the past three years and for 2006-07 in respect of the government resources allocated to the Centre for Health Protection (CHP), including staff establishment, disease prevention / epidemic prevention systems and operating expenses? In response to the risk of influenza outbreak, does the Government have any plan to enhance the capacity of CHP and increase the provision? If yes, what are the details?

Asked by : Hon. KWOK Ka-ki

Reply :

The Government's recurrent provision (mainly under Head 37: Department of Health) for the Centre for Health Protection (CHP), which is a public health infrastructure set up in June 2004 for enhancing Hong Kong's capacity for disease prevention and control, for the recent three years are set out below –

	<u>2004-05</u>	<u>2005-06</u> (Revised estimates)	<u>2006-07</u> (Estimates)
	\$M	\$M	\$M
Staff cost	570	600	600
Operating expenses	<u>360</u>	<u>310</u>	<u>330</u>
	<u>930</u>	<u>910</u>	<u>930</u>

The Government attaches great importance to enhancing Hong Kong's preparedness for influenza pandemic. Specifically, the CHP has drawn up and will regularly update preparedness plans for major infectious disease outbreaks with public health significance. Under these plans, the CHP has been strengthening their disease surveillance system in hospitals; stockpiling antivirals, personal protective equipment and laboratory diagnostics reagents; enhancing the capacity of laboratories in the public sector; building up surge capacity by setting up a mechanism for mobilizing volunteers during public health emergencies; organising infection control training and developing relevant guidelines for relevant government departments and healthcare professionals in the public and private sectors; holding briefing sessions/forums and education/publicity programmes on preparedness for influenza pandemic for different sectors of the community; strengthening communication and collaboration with regional and international partners; and supporting applied research on the prevention and control of infectious diseases. Moreover, the CHP has been conducting and will continue to conduct inter-departmental drills/exercises for emergency response against major infectious disease outbreaks.

CHP adopts a cross-sectoral, population-based approach for combating influenza pandemic. In collaboration with other government departments and relevant agencies, it has been fine-tuning and will continue to enhance their services and use of resources for meeting the challenges posed by emerging infectious diseases, including the influenza pandemic. The Administration will closely monitor the situation, and will enhance CHP's capacity, steer concerted efforts from all fronts and seek to provide the necessary resources as appropriate.

Signature _____

Name in block letters _____ Dr P Y LAM

Post Title _____ Director of Health

Date _____ 10 March 2006

Examination of Estimates of Expenditure 2006-07
**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB393

Question Serial No.

1641

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

Programme :

Controlling Officer : Director of Health

Director of Bureau : Secretary for Health, Welfare and Food

Question :

What are the detailed plans carried out / to be carried out by the Government in the past three years and in 2006-07 for regulating undesirable medical advertisements? Please list the related expenditures and amounts of provision.

Asked by : Hon. KWOK Ka-ki

Reply :

The Department of Health (DH) has been regulating undesirable medical advertisements by enforcing the Undesirable Medical Advertisements Ordinance (UMAO) to prevent improper self-medication by members of the public. Regular and systematic monitoring is conducted to monitor medical advertisements. Warnings are issued and referrals made to the Hong Kong Police Force for investigation or prosecution actions as appropriate. The expenditures for regulation of undesirable medical advertisement in 2003-04, 2004-05 and 2005-06 were about \$1.0M, \$2.5M and \$3.0M respectively. The provision for 2006-07 is \$4.3M.

In June 2005, the UMA (Amendment) Ordinance 2005 was enacted to extend the scope of regulations. Preparatory work in relation to commencement of the Amendment Ordinance is in progress. Guidelines have been issued to facilitate the understanding of the trade about and their legal obligation under the new legal requirements. Publicity and internal staff training and streamlining of workflow will be arranged to facilitate effective implementation of the Amendment Ordinance.

Signature _____

Name in block letters Dr P Y LAM

Post Title Director of Health

Date 9 March 2006

Examination of Estimates of Expenditure 2006-07
**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN/SUPPLEMENTARY QUESTION**

Reply Serial No.

HWFB394

Question Serial No.

1642

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

Programme :

Controlling Officer : Director of Health

Director of Bureau : Secretary for Health, Welfare and Food

Question :

What are the detailed plans carried out / to be carried out by the Government in the past three years and in 2006-07 for conducting public education and promotion in respect of human organ transplant? Please list the related expenditures and amounts of provision.

Asked by : Hon. KWOK Ka-ki

Reply :

Promotion of organ donation is a concerted effort of the Government, the Hospital Authority, the Hong Kong Medical Association, and other non-government organisations.

Specifically, the Department of Health (DH) focuses on the following activities to raise public awareness of and increase community support for organ donation -

- (a) distribution of promotional pamphlets and organ donation cards widely in health care and community settings. In the financial year of 2004-05, DH has distributed over 240 000 organ donation cards through its clinics, hospitals under the Hospital Authority, other government departments and public amenities as well as non-government organisations.
- (b) provision of audio-visual materials to facilitate community-initiated activities;
- (c) dissemination of information through telephone hotline and educational website; and
- (d) regular visits by a mobile promotion bus (Donormobile) to public housing estates, schools, shopping centres and other public venues. In the financial year of 2004-05, Donormobile has visited a total of 55 sites.

DH will continue to carry out the above activities in 2006-07. Expenditures on these activities are absorbed in the Department's overall provision on health promotion.

Signature _____

Name in block letters Dr P Y LAM

Post Title Director of Health

Date 10 March 2006

Examination of Estimates of Expenditure 2006-07
**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB395

Question Serial No.

1643

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

Programme : (3) Health Promotion

Controlling Officer : Director of Health

Director of Bureau : Secretary for Health, Welfare and Food

Question :

- (a) From 2001-02 to 2005-06, what were the manpower and resources involved in, and the capacities of, smoking cessation service provided by the Department to smokers? Is the Department satisfied with the relevant performance?
- (b) In 2006-07, what are the planned manpower and resources involved in, and the expected capacity of, smoking cessation service provided by the Department to smokers?

Asked by : Hon. KWOK Ka-ki

Reply :

- (a) The Department of Health promotes smoking cessation through health education, smoking cessation counselling telephone hotline and smoking cessation service in elderly health centres and accredited Family Medicine training clinics. The smoking cessation hotline was upgraded with a computerised call handling system in 2005-06. Smoking information kits were also distributed to doctors and dentists.

In the five years to 2005-06, some 12 000 calls to the hotline were handled by nursing staff and over 49 000 clients utilised the smoking cessation service. The expenditure on medication was \$5.7M. The resources including staffing required for smoking cessation clinics were absorbed within the existing resources of the respective services and were not separately budgeted for.

The smoking cessation rate at one year for smokers attending smoking cessation clinics at 35% is comparable to the performance in overseas countries.

- (b) In 2006-07, it is estimated that there would be about 4 000 calls to the smoking cessation hotline and the estimated expenditure on medication for smoking cessation is \$1.4M. The resources including staffing required were absorbed within the existing resources of the respective services.

Signature _____

Name in block letters Dr P Y LAM

Post Title Director of Health

Date 10 March 2006

Examination of Estimates of Expenditure 2006-07
**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB396

Question Serial No.

1644

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

Programme : (3) Health Promotion

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 the Tobacco Control Office of the Department of Health in 2006-07. Please also set out the relevant research projects and publicity/educational programmes completed and in progress as well as the specific outcomes of such initiatives and their future directions.

Asked by : Hon. KWOK Ka-ki

Reply :

The provision for the Hong Kong Council on Smoking and Health (COSH) in 2006-07 is \$11.2M. Health promotion activities are on-going. In 2006, COSH plans to conduct 340 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 provision for the Tobacco Control Office (TCO) in 2006-07 for health promotion is \$17.9M. TCO will continue to educate the public about the harmful effects of smoking and secondhand smoke. In 2006, TCO will strengthen publicity through TV and radio announcements of public interests as well as posters and pamphlets, particularly on the new legislative requirements.

Specifically for employees of the catering and entertainment industries, DH will provide implementation guidelines and conduct capacity building workshops to assist them to understand and comply with the new legislative requirements.

The Department seeks, through a step-by-step approach, to discourage smoking, contain the proliferation of tobacco use and protect the public from passive smoking to maximum possible.

Signature _____

Name in block letters Dr P Y LAM

Post Title Director of Health

Date 9 March 2006

Examination of Estimates of Expenditure 2006-07
**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB397

Question Serial No.

1645

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

Programme : (3) Health Promotion

Controlling Officer : Director of Health

Director of Bureau : Secretary for Health, Welfare and Food

Question :

As regards the implementation of the existing Smoking (Public Health) Ordinance by the Administration in 2005-06, please give a breakdown of the expenditure and the staff establishment involved. When making amendments to the Ordinance in 2006-07, what are the necessary provision for the expenditure incurred and the complementary initiatives required? Has such expenditure been included in the estimate for this year?

Asked by : Hon. KWOK Ka-ki

Reply :

Financial provision for tobacco control activities comes under Programme (1) Statutory Functions and Programme (3) Health Promotion. In 2006-07, the total provision will be \$35.7M, representing an increase of \$7.6M over 2005-06.

Tobacco control activities are delivered mainly through the Tobacco Control Office (TCO) in the Department of Health (DH) and the subvented Hong Kong Council on Smoking and Health (COSH). In 2006-07, the TCO will have a provision \$24.5M and a staff complement of 66, compared to the current strength of 36. As for COSH, the subvention will be \$11.2M.

Tobacco control inspectors will be employed to carry out enforcement duties upon enactment of the amendment bill, including investigation, collection of evidence and initiation of prosecution actions for contravention of the law.

On health promotion, DH will continue to educate the public about the harmful effects of smoking and secondhand smoke, and provides a 24-hour smoking cessation telephone hotline service. DH will strengthen publicity through TV and radio announcements of public interests as well as posters and pamphlets, particularly on the new legislative requirements.

Specifically for employees of the catering and entertainment industries, DH will provide implementation guidelines and conduct capacity building workshops to assist them to understand and comply with the new legislative requirements.

Signature _____

Name in block letters Dr P Y LAM

Post Title Director of Health

Date 9 March 2006

Examination of Estimates of Expenditure 2006-07
**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB398

Question Serial No.

1646

Head : 37 Department of Health

Subhead (No. & title) :

Programme : (1) Statutory Functions

Controlling Officer : Director of Health

Director of Bureau : Secretary for Health, Welfare and Food

Question :

Regarding this Programme, it is stated under Targets that “inspections of licensed institutions registered under the Hospitals, Nursing Homes and Maternity Homes Registration Ordinance not less than once a year”. With what justification does the Department consider that inspection not less than once a year should provide adequate protection to the general public? Between 2001-02 to 2005-06, what were the yearly maximum and minimum numbers of inspections made to the same institution by the Department? What is/are the reason(s)?

Asked by : Hon. KWOK Ka-ki

Reply :

Institutions applying for registration under the Hospitals, Nursing Homes and Maternity Homes Registration Ordinance will be inspected to ensure that the statutory requirements on accommodation, staffing and equipment have been complied with. Registration has to be renewed on an annual basis. All institutions are required to comply with the “Code of Practice for Private Hospitals, Nursing Homes and Maternity Homes” as a condition of registration.

When the registration is due for renewal at the end of the year, the institution is required to submit an annual report on their management, staffing and equipment. A thorough inspection will be conducted to ensure that the institution continues to be suitable for the purpose of operating as a hospital, nursing home or maternity home.

In addition to annual registration inspection, at least one unannounced inspection will be conducted every year to each institution. During these inspections, surprise check on the adequacy of manpower, maintenance of equipment and implementation of quality assurance programme is carried out to monitor the service provided by the institutions. DH considers that the annual registration inspections and unannounced inspections are sufficient to ensure proper operation of the institutions.

The maximum and minimum numbers of inspections performed for registered institutions for the years from 2001-02 to 2005-06, including registration and unannounced inspections, are as follows :

	Minimum number of inspection to <u>the same institution</u>	Maximum number of inspection to <u>the same institution</u>
2001-02	2	3
2002-03	2	4
2003-04	1	4
2004-05	2	5
2005-06	2	4

Additional inspections were required for some institutions because of opening of new facilities or relocation of existing ones.

In 2003-04, the target of minimum two inspections per institution was not attained for some institutions because some staff had been deployed to combat SARS.

Signature _____

Name in block letters Dr P Y LAM

Post Title Director of Health

Date 10 March 2006

Examination of Estimates of Expenditure 2006-07
**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB399

Question Serial No.

1659

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

Programme : (8) Personnel Management of Civil Servants
Working in Hospital Authority

Controlling Officer : Director of Health

Director of Bureau : Secretary for Health, Welfare and Food

Question :

As at 1 April, the number of civil servants working in the Hospital Authority managed has decreased from 4 364 in 2004 to 3 768 in 2005. However, the estimated provision for such service in 2006-07 remains at the same level as in 2004-05 and 2005-06. In this regard, please inform the Committee of the detailed allocation of the estimated provision for 2006-07. What is the specific content of such service? Is there any other data which can reflect the effectiveness of the work concerned? What is the detailed scope of responsibilities for personnel management?

Asked by : Hon. KWONG Chi-kin

Reply :

The day-to-day personnel management functions in respect of civil servants working in the Hospital Authority (HA) have been devolved to HA. However, the Department of Health (DH) retains certain major personnel management responsibilities for these staff. These responsibilities include -

- operating a staff consultative machinery comprising one departmental consultative committee and four grade consultative committees, and conducting good-will visits to civil servants working in various hospitals;
- advising HA on issues which may affect the working conditions and morale of civil servants, such as the job-related allowance review;
- processing cases relating to staff discipline;

- processing cases relating to appointment and promotion under the Shadow Promotion Scheme. Civil servants working in HA enjoy the same promotion prospect as their counterparts employed on HA terms of service. Through the Scheme, DH ensures that on promotion, civil servants will continue with their civil service terms of service; and
- preparing pension papers for retiring civil servants. This function extends to cover ex-civil servants (who have opted for HA terms of employment) upon their final departure from HA. The number of ex-civil servants serving in HA as at 1 March 2006 is 6 931 and the workload involved is not reflected in the indicator under this Programme.

Most of the duties have to be performed and the decrease in number of civil servants does not necessarily result in a proportionate reduction in workload. The above functions are integral parts of management of civil servants.

The provision of \$10.1M in 2006-07 comprises \$9.8M for personal emoluments and \$0.3M for departmental expenses.

Signature _____

Name in block letters Dr P Y LAM

Post Title Director of Health

Date 9 March 2006

Examination of Estimates of Expenditure 2006-07
**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

CSB057

Question Serial No.

1660

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

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

Controlling Officer : Director of Health

Director of Bureau : Secretary for the Civil Service

Question :

The increase of \$27.5M (5.9%) in the provision for 2006-07 over the revised estimate for 2005-06 is mainly due to the increasing demand for payment and reimbursement of medical fees and hospital charges. In this regard, please inform this Committee of the details of provision allocation for the various specific work items under this Programme? Are there any overlapping services? To which services will the increased provision be mainly allocated?

Asked by : Hon. KWONG Chi-kin

Reply:

The provision for Programme (7) under Head 37 covers medical and dental services provided by the Department of Health (DH) to serving and retired civil servants and other eligible persons as well as payment and reimbursement of medical fees and hospital charges incurred by eligible persons. Under the existing policy, eligible persons may apply to the Government for payment and 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.

The 2006-07 Estimate for this Programme is \$492.6M and the breakdown is as follows –

	\$M
Dental services provided by DH	353.2
Medical services provided by DH	46.4
Payment and reimbursement of medical fees and hospital charges	93.0

There is no overlapping in the services covered. The additional provision is required to meet the increasing demand for payment and reimbursement of medical fees and hospital charges incurred by eligible persons.

Signature _____

Name in block letters Dr P Y LAM

Post Title Director of Health

Date 8 March 2006

Examination of Estimates of Expenditure 2006-07
**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB400

Question Serial No.

1661

Head : 37 Department of Health

Subhead (No. & title) :

Programme : (2) Disease Prevention

Controlling Officer : Director of Health

Director of Bureau : Secretary for Health, Welfare and Food

Question :

Among the various services provided by the Department of Health (DH) in 2005, the number of attendances at maternal and child health centers for family planning service was 210 000 while the number of attendances at family planning clinics operated by Family Planning Association (FPA) was only 163 000. When compared with 2004, the numbers of attendances for both services have dropped. In this regard, please inform this Committee of the specific details of FPA's family planning service subvented by DH? What is the provision concerned? What is the detailed breakdown of the provision? What effectiveness has been achieved? Is there sufficient subvention for promoting the service concerned?

Asked by : Hon. KWONG Chi-kin

Reply :

The subvented services of Family Planning Association (FPA) include contraceptive counselling, prescription of birth control methods, infertility counselling and termination of pregnancy. Specialised services for newly-wed couples as well as youth sexual health services for women aged below 27 years are also provided.

Since March 2004, in a bid to improve cost-effectiveness of its services, the FPA has started to perform cervical screening tests at three yearly intervals for women who have had two initial consecutive normal results instead of doing it annually. FPA has also increased the number of cycles of oral contraceptive pills prescribed per visit. These changes in practice have enabled clients to make less frequent visits and hence caused a decrease in attendances in 2004 and 2005.

The services rendered by FPA are either of established effectiveness (e.g. various contraceptive methods) or subject to regular review and evaluation by the FPA. Outcomes of such review showed that FPA's services were generally effective for their intended objectives.

The provision for FPA in 2006-07 is \$32.9M, comprising recurrent subvention of \$31,915,000 and capital subvention of \$943,000.

Subvention to FPA covers promotion of its services. FPA has been formulating its own publicity strategies and actively promoting its family planning services through various channels including its website as well as printed and electronic media. These services are well known by and easily accessible to the public.

Signature _____

Name in block letters Dr P Y LAM

Post Title Director of Health

Date 11 March 2006

Examination of Estimates of Expenditure 2006-07
CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION

Reply Serial No.

HWFB480

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

Question Serial No.

Programme : (2) Disease Prevention

1699

Controlling Officer : Director of Health

Director of Bureau : Secretary for Health, Welfare and Food

Question :

Regarding the total provision allocated by the Administration for 2006-07 Estimate on disease prevention, there is an increase of 15% over 2005-06 Original Estimate, and among which the increase in provision for the government sector accounts for 14.4%, 4.8% higher than that for the subvented sector. What is/are the reason(s)? Please set out the specific details of disease prevention initiatives.

Asked by : Hon. LEE Kok-long, Joseph

Reply :

The increase in the provision for the government sector is mainly due to the increase in cashflow for procurement of antiviral stockpile and the additional provision for other new initiatives in 2006-07 including the full year effect of the pilot Comprehensive Child Development Scheme (CCDS) and the review of childhood immunisation programme.

A capital commitment of \$254M has been approved for increasing the stockpile of antivirals for influenza pandemic to 20.6 million doses. As at 2 March 2006, the Department of Health (DH) and the Hospital Authority together have a stockpile of about 10 million doses of antivirals for prophylaxis and treatment purposes.

CCDS is a community-based programme which aims at augmenting the existing universal service in our Maternal and Child Health Centres through better alignment of the delivery of health, education and social services. The varied needs of children aged 0 to 5 and their families are identified at an early stage, so that appropriate and timely services could be provided for them. The pilot CCDS was launched in Sham Shui Po in July 2005. It has been extended to Tin Shui Wai, Tuen Mun and Tseung Kwan O since January 2006.

In line with international development in childhood immunisation practice, DH is actively considering replacing oral poliovirus vaccine with inactivated poliovirus vaccine and whole-cell pertussis vaccine with acellular pertussis vaccine. DH will set up an internal working group to undertake the review. The new immunisation programme is expected to be implemented in 2007.

In respect of the subvented sector, the Family Planning Association (FPA) is the only organisation subvented by DH under this Programme. Services provided by FPA include contraceptive counselling, prescription of birth control methods, infertility counselling and termination of pregnancy. Specialised services for newly-wed couples as well as youth sexual health services for women aged below 27 years are also provided. The increase in provision of 4.8% is mainly due to capital subvention of \$943,000 in 2006-07 for the repair works of its Yuen Long Clinic Building.

Signature _____

Name in block letters Dr P Y LAM

Post Title Director of Health

Date 11 March 2006

Examination of Estimates of Expenditure 2006-07
**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB481

Question Serial No.

1700

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

Programme : (2) Disease Prevention

Controlling Officer : Director of Health

Director of Bureau : Secretary for Health, Welfare and Food

Question :

The number of attendances at Social Hygiene Clinics in 2005 is 6 200 less than that in 2004 (145 000 – 151 200), but the Administration estimates an increase (5 000 more) in the number of attendances this year. What is/are the reason(s)? What is the estimated unit cost of handling one case? What is the total expenditure involved? In the past two years, what were the types of symptoms presented by clients attending social hygiene clinics? Among the cases of each type of symptoms, how many of them required a referral to hospitals for specialist follow-up?

Asked by : Hon. LEE Kok-long, Joseph

Reply :

The Social Hygiene Clinics (SHC) provide specialised outpatient services for patients with sexually transmitted infections on a walk-in basis and there is no turning away of patients. The past attendance figures showed the actual demand for the service. The attendance figure projected for 2006 is a rounded estimate, making reference to the actual attendance in 2005.

In the past two years, the major presenting symptoms among patients included urethral discharge, genital ulcer and genital growth. There was essentially no referral of SHC patients to hospitals in the past two years.

Provision for 2005-06 and 2006-07 is \$61.2M and \$61.9M respectively. The unit cost per attendance in the SHC is estimated to be \$610 for 2005.

Signature _____

Name in block letters Dr P Y LAM

Post Title Director of Health

Date 10 March 2006

Examination of Estimates of Expenditure 2006-07
**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB482

Question Serial No.

1702

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

Programme : (3) Health Promotion

Controlling Officer : Director of Health

Director of Bureau : Secretary for Health, Welfare and Food

Question :

The Administration estimates an increase of 3.9% in the total provision for health promotion in 2006-07 over the original estimate for 2005-06 while a decrease of 6.4% in the provision for the subvented sector over last year. What is/are the reason(s)? How does the Administration ensure that the subvented sector can maintain its service quality?

Asked by : Hon. LEE Kok-long, Joseph

Reply :

In 2006-07, the total provision for conducting publicity and education programmes on smoking prevention will be \$29.1M, representing an increase of \$2.5M. These health promotion activities are carried out by the Tobacco Control Office in the Department of Health and the subvented Hong Kong Council on Smoking and Health (COSH). The two organisations complement one another. The decrease in provision for the subvented sector is mainly due to the completion of general non-recurrent projects in 2005-06.

Signature _____

Name in block letters Dr P Y LAM

Post Title Director of Health

Date 9 March 2006

Examination of Estimates of Expenditure 2006-07
**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB483

Head : 37 Department of Health

Subhead (No. & title) :

Question Serial No.

Programme : (5) Rehabilitation

1704

Controlling Officer : Director of Health

Director of Bureau : Secretary for Health, Welfare and Food

Question :

The Administration plans to provide comprehensive assessment for children with developmental problems in 2006-07. What is the estimated expenditure involved? What are the details of the assessment items? How many children have been assessed in the past two years? What are the respective numbers of new and old cases?

Asked by : Hon. LEE Kok-long, Joseph

Reply :

The provision in 2006-07 for comprehensive assessment services for children with developmental problems is \$71.9M.

The Child Assessment Service (CAS) assesses children with developmental problems through a multidisciplinary approach. The conditions that require assessment include developmental delay and mental retardation, cerebral palsy, hearing impairment, visual impairment, autistic spectrum disorder, specific language impairment, dyslexia, mathematics disorder, developmental coordination disorder, attention deficit/hyperactivity disorder and acquired cognitive impairment.

In the past two years, 11 700 children were assessed by the CAS in 2004 which included 5 300 new clients and for 2005, 12 600 children were assessed which included 6 000 new clients.

Signature _____

Name in block letters Dr P Y LAM

Post Title Director of Health

Date 11 March 2006

Examination of Estimates of Expenditure 2006-07
**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB484

Question Serial No.

1715

Head : 37 Department of Health

Subhead (No. & title) :

Programme : (2) Disease Prevention

Controlling Officer : Director of Health

Director of Bureau : Secretary for Health, Welfare and Food

Question :

Under this Programme, the provision for 2006-07 Estimate is increased by 14.1% over 2005-06 Revised Estimate. Out of such provision, how much will be allocated for elderly care services?

Asked by : Hon. LEE Kok-long, Joseph

Reply :

The additional provision for Elderly Health Services in 2006-07 is \$2.3M.

Signature _____

Name in block letters Dr P Y LAM

Post Title Director of Health

Date 9 March 2006

Examination of Estimates of Expenditure 2006-07
**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB485

Question Serial No.

1716

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

Programme : (2) Disease Prevention

Controlling Officer : Director of Health

Director of Bureau : Secretary for Health, Welfare and Food

Question :

As regards the health assessment and medical consultation provided by the elderly health centres (EHCs), could the Administration inform us of the following –

- (a) What are the cost per attendance, the total cost involved and the scope of services provided by the centres?
- (b) What are the utilisation rate, the number of people on the waiting list and the average waiting time in 2005-06?
- (c) What is the number of attendances achieved per year by the centres?
- (d) What is the number of healthcare personnel serving in the centres and what are their posts?
- (e) At present, there are only 18 EHCs over the territory. Will the Administration allocate additional resources to establish more EHCs? If yes, what is the number of new centres to be established, their locations and their estimated service capacities? If no, what is/are the reason(s)?

Asked by : Hon. LEE Kok-long, Joseph

Reply :

- (a) The Elderly Health Centres (EHCs) provide integrated health services to enrolled members, including physical check up, health assessment, counselling, curative treatment and health education. The costs per attendance for health assessment and medical consultation in EHCs in 2005-06 are \$410 and \$360 respectively. The total expenditure on EHCs is \$84.1M in 2005-06.
- (b) The utilisation rate on health assessment in 2005 was 98.6%. As at end of 2005, there were about 28 000 applications for enrolment. The median waiting time for new enrolment was 37.5 months.
- (c) EHCs provided about 37 400 enrolments in 2005. They aim to provide about 38 000 enrolments in 2006.

- (d) In 2005, there were a total of 163 staff working in EHCs including 24 doctors and 55 nurses.
- (e) EHCs are not the only means to address the health care needs of the elderly. All the stakeholders have to work together to take concerted efforts to meet the varying needs of the elderly through various measures and services. Apart from EHCs, the Visiting Health Teams of Elderly Health Services (EHS) reach out into the community to provide health promotion activities for elders and carers. Also, there are more than 70 general out-patient clinics run by the Hospital Authority which provide general medical services to members of the public, including elders. Private practitioners are also key providers of primary health care. Besides, some non-government organisations (NGOs) are operating health centres on a self-financing basis. EHS will strengthen collaboration with stakeholders including private practitioners and NGOs to enhance primary health services for the elderly in Hong Kong. At present, there is no plan to expand EHCs.

Signature _____

Name in block letters Dr P Y LAM

Post Title Director of Health

Date 9 March 2006

Examination of Estimates of Expenditure 2006-07
**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB486

Question Serial No.

1717

Head : 37 Department of Health

Subhead (No. & title) :

Programme : (2) Disease Prevention

Controlling Officer : Director of Health

Director of Bureau : Secretary for Health, Welfare and Food

Question :

The Administration has not committed any resources for establishing elderly ophthalmic/dental clinics to provide ophthalmic and dental services and conduct regular examination for the elderly to ensure their ophthalmic and dental health. What is/are the reason(s)? Will the Administration consider providing ophthalmic or dental care services for the elderly? If yes, what are the specific arrangements? If no, what is/are the reasons?

Asked by : Hon. LEE Kok-long, Joseph

Reply :

The Elderly Health Centres under the Department of Health provide integrated primary health care services for enrolled members, including general assessment on eye and oral health problems. There is no plan to provide separate ophthalmic or dental care services for the elderly. The Department will strengthen collaboration with other stakeholders, including private practitioners and non-government organisations, to enhance primary health services for the elderly in Hong Kong.

Signature _____

Name in block letters Dr P Y LAM

Post Title Director of Health

Date 9 March 2006

Examination of Estimates of Expenditure 2006-07
**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB487

Question Serial No.

1718

Head : 37 Department of Health

Subhead (No. & title) :

Programme : (3) Health Promotion

Controlling Officer : Director of Health

Director of Bureau : Secretary for Health, Welfare and Food

Question :

In paragraph 13 under this Programme, it is stated that “to promote health and increase health awareness in the community and among specific target groups”. Please advise whether elderly is one of these “specific target groups”. If yes, what is the provision earmarked for increasing health awareness among the elderly. If no, what is/are the reason(s)?

Asked by : Hon. LEE Kok-long, Joseph

Reply :

Activities to promote health and increase health awareness in the community include the elderly as one of the target groups. The work is mainly undertaken by the Central Health Education Unit (CHEU) under the Department of Health (DH). The provision for CHEU in 2006-07 is \$32.2M. However, the amount of resources allocated for health education for the elderly is not separately identifiable.

Health promotion work for the elderly is also undertaken by the Elderly Health Services (EHS). EHS provide integrated primary health care services for the elderly and their carers through elderly health centres (EHCs) and visiting health teams (VHTs). VHTs reach out into the community to provide health promotion activities to the elderly people and carers through collaboration with other elderly service providers, and provide influenza vaccination to the elderly in elderly homes. The provision for EHS in 2006-07 is \$146.6M.

Signature _____

Name in block letters _____ Dr P Y LAM

Post Title _____ Director of Health

Date _____ 11 March 2006

**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB488

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

Question Serial No.

1772

Programme :

Controlling Officer : Director of Health

Director of Bureau : Secretary for Health, Welfare and Food

Question :

The Department of Health plans to delete 26 non-directorate permanent posts in 2006-07. Could the Administration inform us of the details and the expenditure saved?

Asked by : Hon. LEUNG Yiu-chung

Reply :

In 2006-07, the Department of Health will create four posts and delete 30 posts. The net deletion is 26 posts. Details of the posts to be deleted are at Annex. The estimated annual savings are \$2.8M. The level of service will be maintained through re-engineering of operations, staff redeployment and outsourcing of services.

Signature _____

Name in block letters _____ Dr P Y LAM

Post Title _____ Director of Health

Date _____ 9 March 2006

Posts to be deleted in 2006-07

<u>Rank</u>	<u>Number</u>
Chief Dispenser	1
Inoculator	1
Assistant Clerical Officer	1
Clerical Assistant	2
Office Assistant	1
Telephone Operator	1
Property Attendant	5
Workman II	18
Total	<hr/> 30 <hr/>

Examination of Estimates of Expenditure 2006-07
**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB489

Question Serial No.

1773

Head : 37 Department of Health

Subhead (No. & title) :

Programme : (2) Disease Prevention

Controlling Officer : Director of Health

Director of Bureau : Secretary for Health, Welfare and Food

Question :

Regarding this Programme, please advise the respective expenditures incurred by the integrated health care service to the elderly and the elderly health centres in 2005-06? What are the respective estimated expenditures in 2006-07?

Asked by : Hon. LEUNG Yiu-chung

Reply :

The total expenditure for Elderly Health Services in the year 2005-06 is \$144.3M, including \$84.1M for Elderly Health Centres (EHCs). The estimated expenditures in the year 2006-07 are \$146.6M for Elderly Health Services and \$85.4M for EHCs respectively.

Signature _____

Name in block letters Dr P Y LAM

Post Title Director of Health

Date 9 March 2006

Examination of Estimates of Expenditure 2006-07
**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB490

Question Serial No.

1774

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

Programme : (2) Disease Prevention

Controlling Officer : Director of Health

Director of Bureau : Secretary for Health, Welfare and Food

Question :

Regarding this Programme, please advise the total number of eligible persons receiving influenza vaccination from the Department of Health in 2005-06? What was the expenditure involved? In 2006-07, what are the details of work concerned and the estimated expenditure involved?

Asked by : Hon. LEUNG Yiu-chung

Reply :

In 2005-06, the Government Influenza Vaccination Programme (GIVP) covers about 260 000 high risk clients for influenza vaccination and the estimated expenditure is \$7.3M.

The Department of Health (DH) is planning for the GIVP for 2006-07. DH undertakes annual reviews to assess vaccination coverage and adverse effects, and where appropriate, conducts research for better understanding of population needs and service planning, as well as assessment of programme effectiveness. Planning of the 2006-07 GIVP will take into account the findings of the above review as appropriate. Provision is earmarked for implementing the 2006-07 GIVP, with regard to the actual expenditure in 2005-06. Actual expenditure for 2006-07 GIVP will however depend on the final scope of the 2006-07 programme. DH works closely with the Hospital Authority, private medical sector, welfare agencies and relevant government departments in providing vaccination to recommended groups.

Signature _____

Name in block letters Dr P Y LAM

Post Title Director of Health

Date 11 March 2006

Examination of Estimates of Expenditure 2006-07
**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB491

Question Serial No.

1775

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

Programme : (2) Disease Prevention

Controlling Officer : Director of Health

Director of Bureau : Secretary for Health, Welfare and Food

Question :

Regarding this Programme, please advise the number of patients with sexually-transmitted diseases treated by the Department of Health in the past three years? How many of them were non-Hong Kong residents? What was the expenditure incurred by the overall work? In 2006-07, what are the details of the work concerned and the estimated expenditure involved?

Asked by : Hon. LEUNG Yiu-chung

Reply :

The annual sexually transmitted infections (STI) attendances for the past three years are as follows -

	<u>Total</u>	<u>Non-resident cases</u>
2003	143 605	1 431
2004	152 428	1 009
2005	143 558	899

The expenditures from 2003-04 to 2005-06 are as follows -

	\$M
2003-04	73.3
2004-05	66.0
2005-06	61.2

In 2006-07 DH will continue with its work to control and prevent the spread of sexually transmitted infections (STI) through the following measures -

- (a) operation of the Social Hygiene Clinics to provide counselling and clinical services to public with STI;
- (b) provision of regular check up services every two weeks for sex workers;
- (c) public education to contain the spread of STI;
- (d) training of medical and healthcare professionals by DH to set the benchmark for all health professionals who are involved in management of STI and to maintain the good professional standard in the management of STI; and
- (e) planning, developing and conducting various surveillance and survey programmes to study the prevalence and pattern of STI in the community so as to guide the direction and to focus the effort of DH to certain groups for tackling the STI/AIDS problems in the community.

The estimated expenditure in 2006-07 will be \$61.9M.

Signature _____

Name in block letters Dr P Y LAM

Post Title Director of Health

Date 10 March 2006

**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB492

Question Serial No.

1776

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

Programme : (2) Disease Prevention

Controlling Officer : Director of Health

Director of Bureau : Secretary for Health, Welfare and Food

Question :

Regarding this Programme, please advise the details of work undertaken by the Department of Health in the past three years to prevent the spread of sexually-transmitted diseases and the expenditure involved? In 2006-07, what are the details of the work concerned and the estimated expenditure involved?

Asked by : Hon. LEUNG Yiu-chung

Reply :

The expenditure designated for prevention and spread of sexually transmitted diseases from 2003-04 to 2005-06 are as follows -

	\$M
2003-04	73.3
2004-05	66.0
2005-06	61.2

In 2006-07 DH will continue with its work to control and prevent the spread of sexually transmitted infections (STI) through the following work -

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

- (e) planning, developing and conducting various surveillance and survey programmes to study the prevalence and pattern of STI in the community so as to guide the direction and to focus the effort of DH to certain groups for tackling the STI/AIDS problems in the community.

The estimated expenditure in 2006-07 will be \$61.9M.

Signature _____

Name in block letters Dr P Y LAM

Post Title Director of Health

Date 10 March 2006

Examination of Estimates of Expenditure 2006-07
**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB493

Question Serial No.

1777

Head : 37 Department of Health

Subhead (No. & title) :

Programme : (1) Statutory Functions

Controlling Officer : Director of Health

Director of Bureau : Secretary for Health, Welfare and Food

Question :

Regarding this Programme, what was the expenditure incurred by the Tobacco Control Office in the past three years? Out of such expenditure, how much was spent per year on suppressing the sale of tobacco products by retailers to minors? In 2006-07, what are the details of such work and the estimated expenditure involved?

Asked by : Hon. LEUNG Yiu-chung

Reply :

The Department of Health (DH) adopts an integrated approach to tobacco control in Hong Kong including the prevention of sale of tobacco products to minors. However, no separate account has been kept on the allocation to the latter. The Tobacco Control Office (TCO) of DH conducts health education activities, inspection to retailers and provides a 24-hour smoking cessation telephone hotline service.

In 2005-06, TCO has incurred \$1.5M to prepare for the enactment of the Smoking (Public Health) (Amendment) Bill 2005. In 2006-07, TCO will have a provision of \$6.6M to carry out the statutory functions. Tobacco control inspectors will be employed to carry out enforcement duties, including investigation, collection of evidence and initiating prosecution actions for contravention of the law, and conduct health education activities. No expenditure was incurred by TCO in 2003-04 and 2004-05 under Programme (1) as TCO had no statutory functions in the past.

Signature _____

Name in block letters _____ Dr P Y LAM

Post Title _____ Director of Health

Date _____ 10 March 2006

Examination of Estimates of Expenditure 2006-07
**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB494

Question Serial No.

1778

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

Programme : (1) Statutory Functions

Controlling Officer : Director of Health

Director of Bureau : Secretary for Health, Welfare and Food

Question :

Regarding this Programme, what were the details of work undertaken by the Department of Health in 2005-06 to prevent the importation of quarantinable diseases into Hong Kong and the expenditure incurred? In 2006-07, what are the details of such work and the estimated expenditure involved?

Asked by : Hon. LEUNG Yiu-chung

Reply :

Regarding the prevention of importation of quarantinable diseases, the Port Health Office (PHO) has implemented the following measures -

- (a) to monitor the sanitation conditions of the Hong Kong International Airport, seaports and land crossings;
- (b) to conduct inspections of incoming ocean-going vessels to ensure that they are free of rodent infestation, and to monitor the health conditions of passengers and crew members of incoming ocean-going vessels; and
- (c) to provide yellow fever vaccination for travellers going to yellow fever endemic areas.

The PHO also operates two Travel Health Centres to provide travel health risk assessment and advice for travellers.

The PHO will continue the above measures in 2006-07. Port health measures will be strengthened in preparation for the coming into force of the revised International Health Regulations (IHR).

The PHO's expenditure in 2005-06 amounts to \$39.6M. The provision for 2006-07 is \$54.1M, including an additional funding of \$13.2M for strengthening port health measures in preparation for the revised IHR.

In addition to the above expenditure in 2005-06, DH also deployed \$17.9M to meet operating expenditure for conducting temperature screening for inbound travellers at the Hong Kong International Airport and all other immigration control points.

Signature _____

Name in block letters Dr P Y LAM

Post Title Director of Health

Date 10 March 2006

Examination of Estimates of Expenditure 2006-07
**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB495

Question Serial No.

1803

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

Programme : (4) Curative Care

Controlling Officer : Director of Health

Director of Bureau : Secretary for Health, Welfare and Food

Question :

The Department of Health explains that the failure to achieve the target on the appointment time for new dermatology cases in 2005 is due to the departure of a number of experienced doctors from the service in the year. In this regard, could the Government inform this Committee of –

- (a) the respective numbers of departed doctors in various specialised outpatient clinics in the past three years and the reason(s) for their departure;
- (b) doctors' average hours of work per week in the clinics and the doctor-to-patient ratio(s);
- (c) whether the Administration has assessed the negative impact brought about by the departure of experienced doctors and formulated any solution to the problem.

Asked by : Hon. LI Fung-ying

Reply :

- (a) The numbers of doctors who resigned or retired from the Social Hygiene Service (SHS) in 2003, 2004 and 2005 were two, six and three respectively.
- (b) On average, a doctor works 44 hours a week and attends to about 70 patients a day.
- (c) In 2003 and 2004, the target appointment time for new dermatology cases was generally met and the longest waiting time was mostly about ten weeks.

In 2005, the performance was affected by the resignation and retirement of three specialists in dermatology from the SHS. The wastage rate of doctors was 9.6%. Nonetheless, over 60% of the new dermatology cases during the year were attended to within the 12-week target, with all urgent cases seen within two weeks. The other less urgent cases generally involved a longer waiting time of approximately 15 weeks.

The Department of Health (DH) has arranged internal redeployment and appointment of new recruits to replace doctors who left the SHS. Besides, DH plans to employ four contract doctors on a part-time basis in 2006-07 to shorten the appointment time. The estimated expenditure is about \$0.5M.

Signature _____

Name in block letters Dr P Y LAM

Post Title Director of Health

Date 11 March 2006

Examination of Estimates of Expenditure 2006-07
**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

CSB058

Question Serial No.

1804

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

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

Controlling Officer : Director of Health

Director of Bureau : Secretary for the Civil Service

Question :

Regarding this Programme, please list by departments –

- (a) the number of applications submitted to the authority for payment and reimbursement of medical fees and hospital charges in the past three years;
- (b) the respective numbers of applications receiving full payment/reimbursement, receiving partial payment/reimbursement and being rejected;
- (c) the major reasons for not granting full payment/reimbursement and those for rejection.

Asked by : Hon. LI Fung-ying

Reply :

Under the existing policy, serving and retired civil servants and other eligible persons may apply to the Government for payment and 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.

The total number of approved and rejected applications for payment and reimbursement of medical fees and hospital charges for the past two years are summarised as follows -

	<u>Number of cases</u>	
	<u>Approved</u>	<u>Rejected</u>
2004-05	5 400	280
2005-06 (for the first three quarters)	3 900	220

The number of applications processed in 2003-04 and the breakdown of applications by departments for the past three years are not readily available.

Applications were rejected if they did not fulfil the stated criteria for payment and reimbursement of medical fees and hospital charges incurred.

Signature _____

Name in block letters Dr P Y LAM

Post Title Director of Health

Date 8 March 2006

Examination of Estimates of Expenditure 2006-07
**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB496

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

Question Serial No.

Programme : (2) Disease Prevention

1811

Controlling Officer : Director of Health

Director of Bureau : Secretary for Health, Welfare and Food

Question :

Under this Programme, the number of attendances to training activities on infection control was 11 000 in 2005, representing a substantial increase of 7 540 over the number of 3 460 in 2004. What is/are the reason(s) for the increase? What is the additional expenditure required?

Asked by : Hon. LI Kwok-ying

Reply :

The Infection Control Branch of the Centre for Health Protection was established in June 2004. The 2004 figure therefore only accounted for the half-year output of the Branch from June to December 2004. The number of attendances increased to 11 000 in 2005 mainly because the Branch was in full operation in 2005. The extra resources were absorbed within the existing allocation of the Branch.

Signature _____

Name in block letters Dr P Y LAM

Post Title Director of Health

Date 10 March 2006

Examination of Estimates of Expenditure 2006-07
**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB497

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

Question Serial No.

1823

Programme : (8) Personnel Management of Civil Servants Working in
Hospital Authority

Controlling Officer : Director of Health

Director of Bureau : Secretary for Health, Welfare and Food

Question :

What are the ranks of the civil servants currently working in the Hospital Authority and their respective percentages?

Asked by : Hon. SIN Chung-kai

Reply :

Breakdowns of the number of civil servants working in the Hospital Authority (HA) by ranks and their respective percentages in the establishment of the Department of Health (DH) are at the Annex.

Signature _____

Name in block letters _____ Dr P Y LAM

Post Title _____ Director of Health

Date _____ 9 March 2006

(Position as at 1.4.2006)

GRADE/RANK	(a) No. of Civil Servants in HA	(b) No. of Civil Service posts in DH	(c)=(a)+(b)) Total	a/c x 100% Percentage
MEDICAL & HEALTH OFFICER GRADES				
General Manager (Clinical Services)	1	0	1	100.0%
Consultant	10	20	30	33.3%
Senior Medical & Health Officer	42	102	144	29.2%
Medical & Health Officer	90	250	340	26.5%
Sub-total	143	372	515	27.8%
NURSING & ALLIED GRADES				
General Manager (Nursing)	3	0	3	100.0%
Senior Nursing Officer	8	20	28	28.6%
Departmental Operations Manager	19	0	19	100.0%
Ward Manager	101	0	101	100.0%
Nurse Specialist	27	0	27	100.0%
Nursing Officer	355	280	635	55.9%
Nursing Officer (Education)	10	0	10	100.0%
Registered Nurse	319	647	966	33.0%
Enrolled Nurse	151	221	372	40.6%
Senior Nursing Officer (Psychiatric)	4	0	4	100.0%
Nursing Officer (Psychiatric)	72	0	72	100.0%
Registered Nurse (Psychiatric)	113	0	113	100.0%
Enrolled Nurse (Psychiatric)	128	0	128	100.0%
Student Nurse (Psychiatric)	1	0	1	100.0%
Midwife	3	21	24	12.5%
Sub-total	1 314	1 189	2 503	52.5%

GRADE/RANK	(a) No. of Civil Servants in HA	(b) No. of Civil Service posts in DH	(c)=(a)+(b) Total	a/c x 100% Percentage
SUPPLEMENTARY MEDICAL GRADES				
Department Manager	15	0	15	100.0%
General Manager (Allied Health Services)	1	0	1	100.0%
Audiology Technician I	1	0	1	100.0%
Senior Dietitian	1	1	2	50.0%
Chief Dispenser	3	4	7	42.9%
Senior Dispenser	92	18	110	83.6%
Dispenser	190	40	230	82.6%
Senior Medical Technologist	7	18	25	28.0%
Medical Technologist	42	90	132	31.8%
Medical Laboratory Technician I	6	18	24	25.0%
Medical Laboratory Technician II	1	113	114	0.9%
Mould Laboratory Technologist	1	0	1	100.0%
Senior Mould Laboratory Technician	1	0	1	100.0%
Mould Laboratory Technician	3	0	3	100.0%
Occupational Therapy Assistant	78	0	78	100.0%
Orthoptist I	1	4	5	20.0%
Pharmacist	6	47	53	11.3%
Physicist	3	7	10	30.0%
Senior Physiotherapist	5	1	6	83.3%
Physiotherapist I	5	8	13	38.5%
Prosthetist-Orthotist I	3	0	3	100.0%
Senior Radiographer	12	3	15	80.0%
Radiographer I	62	13	75	82.7%
Scientific Officer (Med)	3	17	20	15.0%
Sub-total	542	402	944	57.4%

GRADE/RANK	(a) No. of Civil Servants in HA	(b) No. of Civil Service posts in DH	(c)=(a)+(b) Total	a/c x 100% Percentage
HOSPITAL ADMINISTRATOR GRADE				
Chief Hospital Administrator	1	1	2	50.0%
Senior Hospital Administrator	5	8	13	38.5%
Hospital Administrator I	9	13	22	40.9%
General Manager (Administrative Services)	3	0	3	100.0%
Sub-total	18	22	40	45.0%
OTHER DEPARTMENTAL GRADES				
Senior Artisan	5	0	5	100.0%
Artisan	89	11	100	89.0%
Cook	46	0	46	100.0%
Darkroom Technician	28	13	41	68.3%
Chief Electrical Technician	5	0	5	100.0%
Senior Electrical Technician	4	0	4	100.0%
Electrical Technician	8	4	12	66.7%
Senior Foreman	3	0	3	100.0%
Foreman	7	0	7	100.0%
Head Property Attendant	3	0	3	100.0%
Chief Hospital Foreman	6	0	6	100.0%
Senior Hospital Foreman	11	3	14	78.6%
Hospital Foreman	32	5	37	86.5%
Hostel Manager/Manageress	1	0	1	100.0%
Laboratory Attendant	63	59	122	51.6%
Laundry Manager	1	0	1	100.0%
Laundry Worker	48	0	48	100.0%
Linen Production Unit Supervisor	1	0	1	100.0%
Machinist	10	0	10	100.0%

GRADE/RANK	(a) No. of Civil Servants in HA	(b) No. of Civil Service posts in DH	(c)=(a)+(b) Total	a/c x 100% Percentage
Mortuary Attendant	6	18	24	25.0%
Mortuary Officer	1	4	5	20.0%
Mortuary Technician	1	3	4	25.0%
Operating Theatre Assistant	50	0	50	100.0%
Photographer I	1	3	4	25.0%
X-Ray Mechanic	4	0	4	100.0%
Health Care Assistant	191	0	191	100.0%
Sub-total	625	123	748	83.6%
MODEL SCALE I GRADES				
Barber	5	0	5	100.0%
Ganger	11	5	16	68.8%
Ward Attendant	246	0	246	100.0%
Property Attendant	27	46	73	37.0%
Workman I	32	3	35	91.4%
Workman II	512	565	1 077	47.5%
Sub-total	833	619	1 452	57.4%
GENERAL GRADES				
Assistant Clerical Officer	2	274	276	0.7%
Clerical Assistant	22	493	515	4.3%
Office Assistant	53	65	118	44.9%
Personal Secretary II	1	20	21	4.8%
Telephone Operator	5	2	7	71.4%
Motor Driver	1	55	56	1.8%
Sub-total	84	909	993	8.5%
TOTAL	3 559	3 636	7 195	49.5%

Examination of Estimates of Expenditure 2006-07
**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB498

Question Serial No.

1824

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

Programme : (8) Personnel Management of Civil Servants
Working in Hospital Authority

Controlling Officer : Director of Health

Director of Bureau : Secretary for Health, Welfare and Food

Question :

What are the specific items of work carried out by the Department of Health in 2005 under this Programme with regard to the following aims and the respective expenditures involved:

- (a) to discharge the personnel management responsibility for the civil servants working in the Hospital Authority;
- (b) to maintain morale and efficiency?

Asked by : Hon. SIN Chung-kai

Reply :

The day-to-day personnel management functions in respect of civil servants working in the Hospital Authority (HA) have been devolved to HA. However, the Department of Health (DH) retains certain major personnel management responsibilities for these staff. These responsibilities include-

- operating a staff consultative machinery comprising one departmental consultative committee and four grade consultative committees, and conducting good-will visits to civil servants working in various hospitals;
- advising HA on issues which may affect the working conditions and morale of civil servants, such as the job-related allowance review;
- processing cases relating to staff discipline;

- processing cases relating to appointment and promotion under the Shadow Promotion Scheme. Civil servants working in HA enjoy the same promotion prospect as their counterparts employed on HA terms of service. Through the Scheme, DH ensures that on promotion, civil servants will continue with their civil service terms of service; and
- preparing pension papers for retiring civil servants. This function extends to cover ex-civil servants (who have opted for HA terms of employment) upon their final departure from HA. The number of ex-civil servants serving in HA as at 1 March 2006 is 6 931 and the workload involved is not reflected in the indicator under this Programme.

The operation of the staff consultative machinery, rendering advice to HA on issues which may affect conditions of civil servants etc mentioned above all contribute to the aims listed in paragraphs (a) and (b) in the question.

The expenditure in 2005-06 was \$10.1M, comprising \$9.8M for personal emoluments and \$0.3M for departmental expenses.

Signature _____

Name in block letters Dr P Y LAM

Post Title Director of Health

Date 9 March 2006

Examination of Estimates of Expenditure 2006-07
**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB499

Question Serial No.

1825

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

Programme : (8) Personnel Management of Civil Servants
Working in Hospital Authority

Controlling Officer : Director of Health

Director of Bureau : Secretary for Health, Welfare and Food

Question :

What is the distribution of ranks and staff under this Programme?

Asked by : Hon. SIN Chung-kai

Reply :

The distribution of ranks and staff responsible for personnel management of civil servants working in Hospital Authority is as follows -

<u>Rank</u>	<u>Number</u>
Chief Executive Officer	1
Senior Executive Officer	2
Executive Officer I	4
Personal Secretary II	1
Senior Clerical Officer	1
Clerical Officer	6
Assistant Clerical Officer	10
Clerical Assistant	5
Office Assistant	1
Total	<u>31</u>

There are other general administration staff at the Headquarters of the Department also indirectly providing support to this Programme.

Signature _____

Name in block letters Dr P Y LAM

Post Title Director of Health

Date 10 March 2006

Examination of Estimates of Expenditure 2006-07
**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB500

Question Serial No.

1877

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

Programme : (1) Statutory Functions

Controlling Officer : Director of Health

Director of Bureau : Secretary for Health, Welfare and Food

Question :

There is an increase of \$5.6M in the provision for 2006-07 over the revised estimate for 2005-06. Out of the increased provision,

(1) how much will be used to strengthen port health measures in preparation for the coming into force of the revised International Health Regulations? What are the specific details of the enhanced measures? What is the detailed allocation of the provision?

(2) how much will be used to cater for the increased operating expenses and creation of four posts after the enactment of the Smoking (Public Health) Ordinance? What are the scopes of duties of these newly created posts? How is work demarcated?

Asked by : Hon. KWONG Chi-kin

Reply :

In 2006-07, the additional funding to be provided to the Port Health Office (PHO) for enhancing the port health measures in preparation for the coming into force of the revised International Health Regulations and the Tobacco Control Office (TCO) under this Programme will be \$13.2M and \$5.1M respectively. As some resources in respect of other services within this Programme Area (Statutory Functions) have been redeployed to other Programme Areas, the net increase in this Programme in 2006-07 will be \$5.6M.

The port health measures to be strengthened include the following -

- (a) establishing health posts at immigration control points (ICPs) for carrying out health screening measures and public education programmes;
- (b) installing infra-red thermo-imaging machines to facilitate the implementation of body temperature screening measures and stockpiling of personal protective equipment at future ICPs;

- (c) constructing isolation facilities at existing and future ICPs as temporary accommodation for sick travelers who need to be transferred to hospitals;
- (d) establishing a sanitation monitoring and inspection system for ICPs and conveyances to minimise the risk of spread of infectious diseases; and
- (e) developing guidelines for prevention and control of public health emergencies for, and providing relevant training to ICP and conveyance operators.

Out of the additional funding of \$13.2M for enhancing port health measures, \$8.1M and \$5.1M will be used for recruiting 47 additional staff and other expenditure respectively.

There will be 34 tobacco control inspectors to carry out enforcement duties upon the enactment of the bill. These duties include investigation, collection of evidence and initiation of prosecution actions for contravention of the law. Included in the additional provision of \$5.1M are four posts of police officers for training and assisting tobacco control inspectors to carry out their enforcement function.

Signature _____

Name in block letters Dr P Y LAM

Post Title Director of Health

Date 10 March 2006

Examination of Estimates of Expenditure 2006-07
**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB501

Question Serial No.

1879

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

Programme : (2) Disease Prevention

Controlling Officer : Director of Health

Director of Bureau : Secretary for Health, Welfare and Food

Question :

What is the reason for the number of enrolments in Elderly Health Centre (EHC) to drop from 39 900 in 2004 (actual) to 37 400 in 2005 (actual) and 38 000 (estimate)? Again, what is the reason for the number of attendance for health assessment and medical consultation at EHCs to drop from 199 000 (actual) in 2004 to 195 000 (actual) in 2005?

Asked by : Hon. CHEUNG Chiu-hung, Fernando

Reply :

The staffing situation and the complexity of the cases being handled may affect the total number of enrolments of the Elderly Health Centres (EHCs) and the total number of attendances for health assessment and medical consultation conducted by the EHCs in a particular year.

Signature _____

Name in block letters Dr P Y LAM

Post Title Director of Health

Date 9 March 2006

Examination of Estimates of Expenditure 2006-07
**CONTROLLING OFFICER'S REPLY TO
SUPPLEMENTARY QUESTION**

Reply Serial No.

S-HWFB02

Question Serial No.

S88

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

Programme : (4) Curative Care

Controlling Officer : Director of Health

Director of Bureau : Secretary for Health, Welfare and Food

Question :

Regarding the provision of dental service for groups with special oral healthcare needs and emergency cases, please provide information on the following:

- (a) What are the respective definitions of “groups with special oral healthcare needs” and “emergency cases”? Are patients with periodontal disease included? If no, what is/are the reason(s)?
- (b) How many government dental clinics are currently providing dental service to the public? Among members of the public, who are eligible for receiving treatment at government dental clinics? What is the waiting time? What are the charges? and
- (c) What kinds of treatment are included in the emergency treatment provided by dental clinics to the public?

Asked by : Hon. SIN Chung-kai

Reply :

- (a) Patients who are medically compromised, physically or mentally disabled or those who have facial deformities are regarded as “groups with special oral healthcare needs”. Patients who have dental pain and trauma are regarded as “emergency cases”. Patients with dental pain caused by periodontal diseases are also included.
- (b) There are 11 designated government dental clinics, eight school dental clinics and seven hospital dental units in Hospital Authority hospitals providing dental service to the public. The eligibility, waiting time and charges of these clinics are as follows -

- Designated government dental clinics: They provide emergency dental treatment to the public in designated sessions. The service is free of charge. About 40 discs per dentist are distributed before each session, and patients getting a disc will be treated on the same day.
- School dental clinics: All primary school children are eligible to join the School Dental Care Service. Enrolled children will be provided with an annual check up within the same school year. Follow up appointments will also be arranged if necessary in the same school year. The annual enrolment fee is \$20.
- Hospital dental units: They provide specialist treatment to patients with special oral healthcare needs. Patients with emergency needs will be given immediate consultation and treatment. The waiting time of other patients will depend on the severity and nature of their dental conditions, ranging from one week to eight months. Eligible Persons have to pay a gazetted Specialist Outpatient Clinic charge of \$100 for the first attendance and \$60 for each subsequent attendance.

(c) Emergency dental treatments include pain relief and extraction of teeth.

Signature _____

Name in block letters Dr P Y LAM

Post Title Director of Health

Date 17 March 2006