立法會 Legislative Council

LC Paper No. CB(2)2332/02-03

(These minutes have been seen by the Administration)

Ref : CB2/PL/HS

Panel on Health Services

Minutes of meeting held on Monday, 12 May 2003 at 8:30 am in Conference Room A of the Legislative Council Building

Members Present	: Dr Hon LO Wing-lok (Chairman) Hon Michael MAK Kwok-fung (Deputy Chairman) Hon Cyd HO Sau-lan Hon CHAN Kwok-keung Dr Hon YEUNG Sum Hon Andrew CHENG Kar-foo Dr Hon LAW Chi-kwong, JP Dr Hon TANG Siu-tong, JP Hon LI Fung-ying, JP
Members Absent	: Hon Albert HO Chun-yan Hon CHAN Yuen-han, JP Hon Mrs Sophie LEUNG LAU Yau-fun, SBS, JP
Members Attending	: Hon Fred LI Wah-ming, JP Hon CHEUNG Man-kwong
Public Officers Attending	: <u>All Items</u> Mr Thomas YIU, JP Deputy Secretary for Health, Welfare and Food (Health)

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Assistant Secretary for Health, Welfare and Food (Health)

Items III and IV

Dr P Y LAM, JP Deputy Director of Health

Dr Constance CHAN Assistant Director (Health Administration and Planning) Department of Health

Dr T H LEUNG Assistant Director (Chinese Medicine) Department of Health

Miss Angela LUK Principal Assistant Secretary for Health, Welfare and Food (Health)

Item V

Mr Eddy CHAN Deputy Secretary for Health, Welfare and Food (Food and Environmental Hygiene)

Clerk in	: Ms Doris CHAN
Attendance	Chief Assistant Secretary (2) 4

Staff in
Attendance: Ms Joanne MAK
Senior Assistant Secretary (2) 2

<u>Mr Michael MAK</u> chaired the meeting on behalf of the Chairman, who would attend the meeting later due to other urgent commitments.

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I.

2. <u>Members</u> noted the paper entitled "The Malaysian vessel with sick crew seeking to enter Hong Kong waters" provided by the Administration.

II. Items for discussion at the next meeting

(LC Paper Nos. CB(2)2012/02-03(01) and (02))

3. <u>Members</u> agreed to discuss the following items at the next regular meeting to be held on 9 June 3002 at 8:30 am -

- (a) Redevelopment of Caritas Medical Centre, Phase II;
- (b) Parenting programme; and
- (c) Establishment of a Community Health and Wellness Centre at Yan Chai Hospital.

III. Progress on the registration of Chinese medicine practitioners in Hong Kong (LC Paper Nos. CB(2)2012/02-03(03) to (05))

4. At the invitation of the Chairman, <u>Deputy Director of Health</u> (DD(H)) briefed members on the latest progress of the registration of Chinese medicine practitioners (CMPs) in Hong Kong as detailed in the Administration's paper.

5. Referring to his letter addressed to the Chairman, Mr CHEUNG Mankwong said that he had received complaints from many students who were currently enrolled in diploma courses in Chinese medicine offered by the School of Professional and Continuing Education (SPACE) of the University of Hong Kong (HKU). He said that the Practitioners Board had earlier decided that students had to be enrolled in undergraduate degree courses in Chinese medicine run by the local universities by 2002 in order to be allowed to sit for the Licensing Examination when they had satisfactorily completed their degree courses. pointed out that SPACE, however, had continued to accept students to study diploma courses in Chinese medicine in 2001-02. These students, before completing the diploma courses, could hardly meet the entry requirements of undergraduate degree courses in Chinese medicine. As they could not be enrolled in undergraduate degree courses in Chinese medicine by 2002, they would not be allowed to sit for the Licensing Examination in the future. Mr CHEUNG said that it was unfair to these students because when they were enrolled in the diploma courses in Chinese medicine offered by SPACE, they had been told by the University that they could be enrolled in relevant undergraduate degree courses after completing the diploma courses. He said that the students wished to take the Licensing Examination after completing the relevant studies but were now stranded halfway.

6. <u>Mr CHEUNG Man-kwong</u> further said that he had contacted the Practitioners Board and SPACE but had received no response. He stressed that while he respected the full autonomy of universities in setting their admission requirements, it was unfair to the students concerned who would have no opportunity to sit for the Licensing Examination. He requested the Administration to look into the case.

7. <u>DD(H)</u> said that the Practitioners Board was of the view that since Chinese medicine was a medical profession, CMPs should also be required to have completed full-time degree courses in Chinese medicine. As regards students who were currently enrolled in diploma courses in Chinese medicine offered by local universities, the Practitioners Board had permitted those who had taken part-time diploma courses in Chinese medicine from HKU and the Hong Kong Baptist University (HKBU) by 2002 to sit for the Licensing Examination after they had switched to and completed the relevant bridging course and part-time/full-time degree course in Chinese medicine. The Administration was of the view that the universities had full autonomy in assessing whether or not their students were competent to switch to the relevant degree course.

8. DD(H) said that students and graduates of the Professional Diploma in Chinese Medicine (offered by HKBU) and the Bachelor of Health Science (Chinese medicine) [jointly organised by HKBU and the Royal Melbourne Institute of Technology University (RMITU)] had requested the Practitioners Board to allow graduates of these two courses to sit for the Licensing Examination. The Practitioners Board had evaluated the standard, duration of studies and clinical internship of these two courses and considered that they failed to meet the basic requirements of undergraduate degree courses in Chinese medicine. The Practitioners Board had decided that graduates of these courses could sit for the Licensing Examination as long as they had studied and satisfactorily completed the bridging course and degree course in Chinese medicine. DD(H) said that HKBU had offered bridging course to these graduates, who would be transferred to the final year of part-time degree course in Chinese medicine of HKBU upon satisfactory completion of the bridging course.

9. <u>DD(H)</u> further said that given the principle of full autonomy of universities in setting their admission requirements and in evaluating their students' standards, the Administration was not in the position to require the universities to accept all the students currently enrolled in diploma courses for degree courses in Chinese

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medicine.

10. <u>Mr CHEUNG Man-kwong</u> considered that it was very unfair to those students studying the diploma courses in Chinese medicine (2001-02) offered by SPACE. <u>Mr CHEUNG</u> said that since these students had studied the courses only for a short period of time, SPACE was unable to assess whether or not they were competent for switching to the undergraduate degree courses in Chinese medicine. He considered that the arrangements made by HKBU, which offered their diploma students to study a bridging course first and would further assess the students only after they had completed the bridging course, were well thought out. He requested the Administration to look into the case of SPACE and work out better arrangements with SPACE.

11. <u>DD(H)</u> explained that the decision made by the Practitioners Board that students had to be enrolled in undergraduate degree courses in Chinese medicine run by the local universities by 2002 in order to be allowed to sit for the Licensing Examination was a responsible decision. Nevertheless, he agreed that it was reasonable to give the SPACE students enrolled in the diploma courses in Chinese medicine (2001-02) more time to prove their ability and interests to engage in the relevant part-time degree courses. He undertook to convey the concerns of Mr CHEUNG to SPACE and the Practitioners Board.

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12. <u>Ms Cyd HO</u> said that she was a member of the previous Bills Committee on Chinese Medicine Bill. She recalled that during the scrutiny of the Bill, the Administration had all along emphasised that an important objective of the Bill was to provide some transitional arrangements to facilitate the registration of the existing 7 000 CMPs. She further considered that the fundamental principle of the Chinese Medicine Ordinance (the Ordinance) was to make transitional arrangements for the affected parties, including students currently enrolled in Chinese medicine courses. However, she felt that the Chinese Medicine Council had failed to take this need into account, as seen from its handling of the students currently enrolled in the degree course in Health Science (Chinese medicine) jointly organised by HKBU and RMITU.

13. <u>Ms Cyd HO</u> said that students of the above-mentioned degree course had lodged a complaint to the Complaints Division of the Legislative Council (LegCo). She said that the degree course was made up of some 1 900 hours of studies for a duration of four years. When the course was first offered in 1998, the HKBU's prospectus had stated that the course aimed at enhancing the standard of CMPs in Hong Kong and preparing graduates to practise Chinese medicine. The students were disappointed to know that the Practitioners Board had now decided that graduates of the course were not even eligible to attend the CMP Registration Assessment, after assessing the standard and curriculum of the course. As to the bridging course offered by HKBU, it required the students to study for another

three years and pay for a fee of some \$200,000 which many of the students were unable to afford.

14. <u>Ms Cyd HO</u> stressed that the students were not asking for exemption from the Licensing Examination to enable them to practise Chinese medicine immediately, but only an opportunity to attend the CMP Registration Assessment. She was of the view that since graduates of the course had received a systematic training of some 1 900 hours, they should be eligible to attend the CMP Registration Assessment. She added that the Guangzhou and Nanking Institutes of Chinese Medicine, which were recognised by Practitioners Board, accepted graduates of the course to study in the Master degree course in Chinese Medicine offered by the institutes.

15. <u>Ms Cyd HO</u> asked whether the Administration had clearly explained to the members of the Chinese Medicine Council that the fundamental principle of the Ordinance was to make transitional arrangements. She also asked whether the Administration would take the RMITU case up with the Practitioners Board.

16. DD(H) responded that many of the members of the Practitioners Board had also served on the Preparatory Committee on Chinese Medicine and understood clearly the objective of the Ordinance. He said that over the years, many people in the community had expressed strong views on the qualifications of some CMPs who had only completed non full-time undergraduate degree courses. He said that the Practitioners Board considered that the training of five years of non fulltime undergraduate degree courses was not adequate. The course offered by RMITU, with a duration even shorter than non full-time undergraduate degree courses, fell short of the requirements laid down by the Practitioners Board. Nevertheless, the Practitioners Board recognised that the 1 900-hour-training provided by the RMITU course was useful. Hence, it had decided that graduates of the course could sit for the Licensing Examination as long as they had studied and satisfactorily completed the bridging course and degree course in Chinese medicine. <u>DD(H)</u> said that he had also met with some of the students of RMITU course and discussed their problems. He explained that given the principle of professional autonomy, the Administration was not in the position to overturn the decisions made by the Practitioners Board.

17. <u>Ms Cyd HO</u> pointed out that some students of the RMITU course actually possessed considerable experience in practising Chinese medicine but they had not applied for a business registration certificate which could be produced as proof of their practice. She considered that these students should be allowed to attend the CMP Registration Assessment and asked whether the Administration would provide any assistance to them. As to those who had no experience in practising Chinese medicine, <u>Ms HO</u> suggested that the Administration should consider providing grants and loans to the students to meet the fee of the bridging course

which was unaffordable to many of them.

18. $\underline{DD(H)}$ explained that the Practitioners Board had taken into consideration different factors and supporting documents in the vetting of the experience and academic qualifications of listed CMPs. The Board had also accepted some CMPs who did not have a business registration certificate to be registered as listed CMPs after taking into account other documents or evidence provided by the applicants. $\underline{DD(H)}$ said that he was satisfied with the vetting done by the Practitioners Board. He added that the Practitioners Board had conducted a full evaluation of the standard and curriculum of the RMITU course before concluding that it failed to meet the basic requirements for Chinese medicine undergraduate degree course.

As to the suggestion of providing grants and loans to students to meet the fee of the bridging course, <u>DD(H)</u> said that he could not come to a view at the present moment. <u>Ms Cyd HO</u> requested the Administration to actively consider her suggestion and give a response as soon as possible. She pointed out that the Practitioners Board had committed many mistakes in the vetting of the experience and academic qualifications of listed CMPs and, in fact, the LegCo Complaints Division had received more than 100 complaints. She suggested that the Administration should look into the administrative arrangements made by the Practitioners Board and advise the Board what improvements it could make to provide better transitional arrangements. She considered that the Practitioners Board was lacking in experience in public administration.

20. Deputy Secretary for Health, Welfare and Food (Health) (DS(HWF)(H)) said that, in the interest of the public, the ultimate objective of various regulatory measures put in place for CMPs and Chinese medicine was to enhance the standard of the Chinese Medicine sector. However, in order not to affect the livelihood of CMPs, it was necessary to put in place transitional arrangements for practising CMPs to allow them to continue their practice. Under the transitional arrangements, people who could not immediately satisfy the relevant requirements to be registered CMPs were required to pass either the Registration Assessment or Licensing Examination to qualify as registered CMPs.

21. $\underline{DS(HWF)(H)}$ further said that the Practitioners Board had laid down objective standards and criteria, based on professional judgment and after taking into account the views of non-CMP members of the Board, in setting the scope and format of the relevant examinations and in screening candidates for the examinations. He stressed that it was important to draw up objective standards and criteria for conducting the examinations in order to enhance the standard of the Chinese Medicine sector. $\underline{DS(HWF)(H)}$ said that the Practitioners Board had completed assessment of university programmes in Chinese medicine based on objective standards and criteria. He agreed that arrangements should be made as

far as possible to give a chance to the students currently enrolled in these programmes to sit for the Licensing Examination.

22. In reply to Dr TANG Siu-tong's questions, <u>DD(H)</u> said that the first CMP Licensing Examination would be held in August 2003. The Examination would be held once a year. Before the cessation date of the transitional arrangements for Listed CMPs, Listed CMPs could sit for the Licensing Examination as many times as they wished.

23. <u>Ms LI Fung-ying</u> requested the Administration to explain the detailed arrangements for the CMP Registration Assessment to be held later this year. <u>DD(H)</u> said that the next Registration Assessment would be held in October 2003. It was expected that about 300 candidates would be eligible to attend it. He said that candidates would be notified of the date and time of the Registration Assessment in writing individually. <u>Ms LI</u> said that the Practitioners Board should make better logistical arrangements for the next Registration Assessment to facilitate candidates to attend it.

24. <u>Ms LI Fung-ying</u> said that complaints had been received from candidates of the Licensing Examination that Listed CMPs specialised in bone-setting had been tested on their knowledge in another specialty in Chinese medicine. She said that the Practitioners Board should listen more to the views and comments of the trade in setting the scope of the examination and standards of assessment. <u>DD(H)</u> said that he would convey Ms LI's comments to the Practitioners Board.

25. In response to Ms LI Fung-ying, DS(HWF)(H) said that the Secretary for Health, Welfare and Food (SHWF) would take into account factors in the public interest, including the latest development of CMPs and the views of the community before deciding on the schedule for putting an end to the transitional arrangements. He undertook that the Administration would consult the Panel and take into account members' views prior to promulgating the cessation date of the transitional arrangements for Listed CMPs by notice in the Gazette.

26. <u>Mr Andrew CHENG</u> said that he had also received many complaints from Listed CMPs about arrangements made for the CMP Registration Assessment and many of them requested that a review mechanism for the Registration Assessment should be put in place. <u>Assistant Director (Chinese Medicine)</u> responded that the Practitioners Board was not empowered by the Ordinance to let candidates who had failed in the Registration Assessment to take it again. <u>DD(H)</u> explained that a review mechanism was actually in place. He pointed out that the process of the assessment was tape-recorded and candidates were entitled to ask for listening to the tape record and to seek a review. The Practitioners Board, after review, could change the result of the previous assessment. 27. <u>DD(H)</u> further said that as the Registration Assessment was to determine whether a candidate was really a practising CMP, the questions asked during the assessment only aimed at testing basic knowledge that a CMP was expected to know. He added that during the assessment, the examiner would consult the supervisor who was also present in deciding whether the candidate passed or failed. He also invited members to note that the majority (over 80%) of candidates attending the last Registration Assessment had passed it.

28. In response to Ms Cyd HO's criticisms of arrangements made for the Registration Assessment, DD(H) made the following response -

- (a) a mechanism had been put in place requiring the examiners to declare interests;
- (b) much information on the examination syllabus had been provided to candidates and, compared with the same examinations conducted on the Mainland, information on the syllabus given by the Practitioners Board was even more detailed; and
- (c) a candidate attending the Registration Assessment was first given 15 minutes to read the questions and prepare his answers before he was invited to the interview room.

 $\underline{DD}(\underline{H})$ agreed that the current arrangements could be reviewed to see if there was room for improvement.

29. <u>Ms Cyd HO</u> remained of the view that graduates of the RMITU course should be allowed to attend the Registration Assessment as they had completed 1 900 hours of training in Chinese medicine. She requested the Administration to take it up with the Practitioners Board. <u>The Chairman</u> requested the Administration to convey members' concerns to the Practitioners Board and provide a paper on actions taken to improve the transitional arrangements.

IV. Regulation of medical devices in Hong Kong

(LC Paper No. CB(2)2012/02-03(06))

30. At the invitation of the Chairman, DD(H) briefed members on the salient points of the proposed arrangements to regulate the supply and use of medical devices in Hong Kong as detailed in the Administration's paper.

31. <u>Mr Fred LI</u> said that the lack of regulatory control over beauty parlours, qualification of beauticians and the use of devices (such as medical lasers or intense pulsed light equipment) in beauty parlours had posed a health risk to

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consumers. He expressed dissatisfaction with the current proposal that, only starting from 2004, an administrative control system on the regulation of medical devices would be introduced in stages. In the interim, no measure was proposed to regulate the use of medical devices in beauty parlours to safeguard safety of consumers. Referring to the proposal of limiting the operation of high risk medical devices to "trained personnel", <u>Mr LI</u> queried how the Administration could ensure the standard of the "trained personnel" of beauty parlours when there was no registration system for beauty parlours or professional qualification required of beauticians. <u>Mr LI</u> further suggested that it might be necessary for the Health, Welfare and Food Bureau (HWFB) to look at the need to introduce regulatory control on beauty parlours in collaboration with the Economic Development and Labour Bureau (ESLB).

32. DD(H) explained that over the years, the Administration had intended to impose control over the use and operation of medical devices to safeguard public health. However, there had been problems in establishing whether the use of such devices was for medical treatment or beauty therapy and, on this, the Administration and the court held different views in some cases. DD(H) said that the Administration also considered it necessary to impose control on persons allowed to operate a medical device, but it was open-minded as to whether the operation should be restricted to medical professionals. It wished to invite the public to give views on the requirements imposed on the operators.

33. <u>Mr Fred LI</u> said that he was not suggesting that the operation of certain medical devices such as intense pulsed light equipment had to be limited to medical professionals. However, he considered that there was a need to impose control over beauty parlours, including the products they used and services provided, hygiene and staff training, in order to protect consumers' interests. He said that the Administration should not only look at problems relating to the use of medical lasers or intense pulsed light equipment in beauty parlours, as the use of such equipment only formed part of the wide range of services provided in beauty parlours. He suggested that HWFB should tackle the issue of regulation of beauty parlours in collaboration with relevant policy bureaux such as ESLB.

34. <u>DS(HWF)(H)</u> said that some of the issues raised by Mr Fred LI were outside the scope of the proposed arrangements under discussion. However, he agreed that HWFB could further study those issues in collaboration with other policy bureaux.

35. <u>DS(HWF)(H)</u> said that the Administration planned to issue a consultation paper on the proposed control arrangements in June 2003. He said that the Administration would try to expedite the implementation of the proposed administrative control system with a view to introducing it as early as possible.

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36. <u>Ms LI Fung-ying</u> asked if there would be problems in the implementation of the proposed control arrangements, since it was difficult to prove that the use of certain medical devices in beauty parlours was for medical treatment. <u>DD(H)</u> said that it was important to define clearly what constituted the use of a medical device for beauty therapy or for medical treatment. He agreed that the provision of a definition for medical devices was important to the framework proposed in the paper. He said that the Administration would try to plug any possible loopholes in the future legislation to prevent beauty parlours from evading regulatory control by claiming that their use of medical devices was only for beauty therapy. Particular attention would be paid to the use of devices such as medical lasers which could have serious adverse effects.

37. <u>Ms LI Fung-ying</u> asked the Administration whether it had made an assessment of the impact of the proposed control arrangements on the people in beauty parlour business which would be affected by the proposed arrangements. <u>DD(H)</u> said that the Administration was also concerned about the impact and did not want to see many people losing their jobs as a result of the implementation of over stringent control. He said that consideration would be given to allowing non medical professionals to operate low risk medical devices.

38. <u>Ms Cyd HO</u> asked whether measures would be put in place under the proposed framework to regulate re-sale of medical devices belonging to Class II and above and to keep track of the transfer of such devices to new users. <u>DD(H)</u> responded that under the proposed arrangements, owners of certain high risk medical devices (including second-hand ones) were required to file an application with the regulatory authority to possess the machine and to undertake to comply with a set of conditions of use. In this connection, a code of practice setting out the requirements for operators in terms of training, safety precautions and maintenance of devices would be promulgated.

39. In response to the Chairman, DD(H) explained that contact lens disinfectants were included under Class III (medium-high) in line with international classification rules.

V. Proposed Creation of Permanent Directorate Posts of Permanent Secretary for Health, Welfare and Food and Administrative Assistant to the Secretary for Health, Welfare and Food (LC Paper No. CB(2)1923/02-03(01))

40. <u>DS(HWF)(H)</u> briefed members on the Administration's proposal to create two permanent directorate posts of a Permanent Secretary for Health, Welfare and Food (PSHWF) and an Administrative Assistant (AA) to SHWF. The Administration planned to submit the proposal to the Establishment Subcommittee (ESC) of the Finance Committee (FC) for consideration at its meeting on 28 May 2003.

41. Noting that the proposed creation of a permanent post of AA to SHWF (AA/SHWF) was held against the post of Principal Assistant Secretary (Food and Environmental Hygiene)2 [P(FEH)2] in the Food and Environmental Hygiene (FEH) Division, Mr Andrew CHENG was concerned whether this arrangement would undermine the FEH Division. <u>Mr CHENG</u> said that as the policy areas under SHWF's purview were complex, he did not oppose that SHWF should be provided with an AA to support his work. However, he was worried that the proposal of having the existing two Principal Assistant Secretaries (PASs) in the FEH Division to take up additional duties and responsibilities would impact on the efficiency and effectiveness of the Division. He further pointed out that the additional duties and responsibilities to be assumed by the two remaining PASs included policy areas of veterinary health, provision of slaughtering facilities, agriculture and fisheries policies, etc. which were recently matters of wide concern to the community. He was worried that the proposal would undermine the manpower for handling these important policy areas and put great strain on the Mr CHENG said that the proposal also failed to achieve any savings Division. by the redistribution of duties and responsibilities.

42. DS(HWF)(H) clarified that the current proposal did not entail redistribution of duties and responsibilities among the existing PASs in the FEH Division. He explained that when the accountability system was implemented on 1 July 2002, it was agreed that each Director of Bureau should have his/her own private office, comprising an AA [equivalent to an Administrative Officer Staff Grade C (AOSGC) (D2) rank] and other non-directorate support staff. The financial provisions for those posts in the Director of Bureau's private office were to be made available through redeployment of existing resources by the bureau concerned. A supernumerary AOSGC (D2) post in HWFB, held against the post of P(FEH)2 in the FEH Division at the rank of AOSGC (D2), to serve as AA/SHWF had been created with effect from 4 July 2002 for 12 months under delegated authority from FC. <u>DS(HWF)(H)</u> explained that the arrangements of having the existing two PASs in the FEH Division to take up the duties and responsibilities of the post of former P(FEH)2 had already been implemented for almost one year and, upon review, the Administration was satisfied that the arrangements could continue. The current proposal was only to rationalise the existing directorate structure of the HWFB on 1 July 2003 without incurring any additional cost or manpower implication to the Government.

43. <u>DS(HWF)(H)</u> further pointed out that achievement of savings was not the objective of the current proposal. He explained that there was a separate exercise to review the Government establishment with a view to achieving savings. He reiterated that the Administration was only proposing to convert the existing

supernumerary posts of PSHWF and AA/SHWF, which had already been in existence for about one year, into permanent posts. The additional staff cost required for the creation of the proposed posts would be fully offset by the savings from the deletion of other posts as explained in the paper. He added that the proposal entailed no changes to the existing schedules of duties of the two PASs in FEH Division.

44. Deputy Secretary for Health, Welfare and Food (Food and Environmental Hygiene) [DS(HWF)(FEH)] supplemented that since the redistribution of duties and responsibilities which took effect in July 2002, the Division had managed to cope with its workload, even during the avian flu outbreak which occurred around end of December 2002 and early January 2003.

45. <u>Ms Cyd HO</u> asked whether the current proposal entailed the transfer of any statutory powers. She said that during the discussion on the accountability system, Members had expressed the view that the exercise of statutory powers, including powers to implement the Government's policies and discretionary powers, should continue to be vested in civil servants instead of Directors of Bureaus who were politically appointed. In response, DS(HWF)(H) explained that the necessary transfer of statutory powers after 1 July 2002 had already been completed. He confirmed that the current proposal did not entail the transfer of any statutory powers.

46. <u>Mr Michael MAK</u> asked to put on record that the Chairman, who arrived at this juncture, had requested him to continue to chair the meeting on his behalf.

47. Referring to a media report on that day that the Administration intended to set up a new organisation solely responsible for handling matters relating to the prevention of infectious diseases, Ms Cyd HO requested the Administration to provide more information on its plan. <u>DS(HWF)(H)</u> said that the Administration was actively exploring the possibility of establishing a Centre for Diseases Control (CDC)-type organisation, making reference to overseas models, and would submit a paper to the Panel for discussion when more details were worked out. In response to Ms HO, DS(HWF)(H) said that the Administration could provide some information on the framework of the CDC-type of organisation being planned to fight and prevent infectious diseases for discussion by the Panel. Ms HO asked if it was possible to include the subject for discussion at the next regular The Chairman considered that as the agenda for the next regular meeting. meeting was already quite full, it was more appropriate to discuss the subject of CDC at one of the special meetings of the Panel held on every Wednesday. Members agreed.

48. <u>Ms Cyd HO</u> further asked whether it implied that the Administration had already drawn up a plan on the merger of HWFB and departments under its

purview. DS(HWF)(H) responded that the policy areas under the purview of HFWB were complex and SHWF was of the view the Bureau actually needed two Permanent Secretaries (PSs) for its work. However, given the financial constraint of the Government, it was reckoned that the provision of an additional PS would not be feasible unless room for redeployment of a PS from another bureau could be identified by conducting a comprehensive review on all bureaux. DS(HWF)(H) further said that plans on the merger of HWFB and departments under its purview could not be further explored until the Bureau was provided with two PSs.

49. <u>Dr LAW Chi-kwong</u> commented that it was an unsatisfactory arrangement for each bureau to submit to ESC its own proposal to create permanent directorate posts of a PS and an AA. In order to facilitate the ESC's consideration of the overall financial implications incurred by the proposals to be submitted by all bureaux, <u>Dr LAW</u> suggested that the Administration should submit to ESC a composite paper on all the relevant proposals. <u>DS(HWF)(H)</u> said that he would convey the suggestion to the Administration.

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50. The meeting ended at 10:25 am.

Council Business Division 2 <u>Legislative Council Secretariat</u> 6 June 2003