

**立法會**  
**Legislative Council**

LC Paper No. CB(2)3022/02-03  
(These minutes have been  
seen by the Administration)

Ref : CB2/PL/HS

**Panel on Health Services**

**Minutes of special meeting  
held on Wednesday, 25 June 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 Albert HO Chun-yan  
Dr Hon LAW Chi-kwong, JP  
Dr Hon TANG Siu-tong, JP  
Hon LI Fung-ying, JP
- Members absent** : Hon CHAN Kwok-keung  
Hon CHAN Yuen-han, JP  
Hon Mrs Sophie LEUNG LAU Yau-fun, SBS, JP  
Dr Hon YEUNG Sum  
Hon Andrew CHENG Kar-foo
- Members attending** : Dr Hon David CHU Yu-lin, JP  
Hon Fred LI Wah-ming, JP  
Hon SIN Chung-kai
- Public Officers attending** : Mr Thomas YIU, JP  
Deputy Secretary for Health, Welfare and Food (Health)

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Miss Joanna CHOI  
Principal Assistant Secretary for Health, Welfare and Food (Health) 2

Dr S V LO  
Head, Research Office  
Health, Welfare and Food Bureau

Dr Sarah CHOI  
Principal Medical and Health Officer (Research Office)  
Health, Welfare and Food Bureau

Miss Eleanor JIM  
Assistant Secretary for Health, Welfare and Food (Health) 7

Dr P Y LAM, JP  
Deputy Director of Health (2)

Dr Thomas TSANG  
Consultant (Community Medicine)  
Department of Health

Dr Regina CHING  
Assistant Director (Personal Health Services)  
Department of Health

Dr W M KO, JP  
Director (Professional Services & Public Affairs)  
Hospital Authority

Dr CHENG Man-yung  
Deputy Director (Professional Services and Facilities Management)  
Hospital Authority

Mr Donald LI  
Executive Manager (Hospital Planning)  
Hospital Authority

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

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**Staff in attendance** : Mr Raymond LAM  
Senior Assistant Secretary (2) 5

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**I. Update on Severe Acute Respiratory Syndrome**  
(LC Paper Nos. CB(2)2658/02-03(01) to (03))

At the invitation of the Chairman, Deputy Secretary for Health, Welfare and Food (DSHWF) briefed Members on the latest development regarding the fight against Severe Acute Respiratory Syndrome (SARS) as set out in the Administration's paper tabled at the meeting (LC Paper No. CB(2)2658/02-03(03)). Director (Professional Services & Public Affairs), Hospital Authority (Director, HA) briefed Members on the proposals to enhance the infectious disease facilities in the public hospital system, as detailed in the paper provided by the Administration (LC Paper No. CB(2)2658/02-03(02)).

Infection control measures

2. Mr Michael MAK said that the World Health Organization (WHO) had warned of the possible re-emergence of SARS later in the year. He asked what criteria would be adopted to assess whether there was an outbreak of SARS. He also said that some recovered SARS patients were worried that they might contract the disease again.

3. Director, HA responded that there was so far no report of any recovered SARS patient contracting the disease again or infecting others. He said that WHO was of the view that measures should be adopted to prevent the spreading of the disease in the community and in hospitals. Thus, the existing infection control measures adopted in acute hospitals should be continued to prevent any possible outbreak.

4. Deputy Director of Health (2) (DDH) said that surveillance was vital to the containment of SARS. He added that one of the signs of an outbreak of SARS was person-to-person transmission of the disease in the community. He informed Members that health check measures at border control points would be continued for 12 months, pending any changes in WHO recommendation or new scientific discovery.

5. DSHWF added that the Administration would remain vigilant and ensure

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that adequate preventive measures were in place to prevent an outbreak of SARS. It would continue to -

- (a) launch public education campaigns to promote personal and environmental hygiene;
- (b) maintain health check measures at border control points;
- (c) strengthen notification mechanism between Guangdong Province and Hong Kong; and
- (d) enhance infectious disease facilities in the public hospital system.

6. Ms LI Fung-ying asked whether the infectious disease facilities proposed to be enhanced were designed for handling other infectious diseases besides SARS. She also asked whether there were facilities for monitoring and treatment of suspected SARS patients who did not display any symptom of fever.

7. Director, HA responded that the infectious disease facilities to be enhanced were designed for handling SARS as well as other infectious diseases. He stressed that the concept of universal precaution was adopted in infection control. As most infectious diseases were transmitted through air-borne or droplet transmission, the proposed enhancement of facilities should be effective in containing the spreading of infectious diseases. In reply to Ms LI's second question, Director, HA said that different types of patients were suitably placed in appropriate facilities. Patients with and without fever as well as suspected cases of SARS were all treated separately. However, Director, HA pointed out that most SARS patients displayed the symptom of fever.

Attendance of health care workers at meetings with the SARS Expert Committee

8. Referring to frontline health care workers' meetings with the SARS Expert Committee (Expert Committee), Ms LI Fung-ying asked how the frontline health care workers were selected.

9. Director, HA responded that any frontline health care workers could request to meet with the Expert Committee. DSHWE said that he would look into how the frontline health care workers were selected and revert back to the Panel. The Chairman requested the Administration to consider inviting representatives of health care workers' unions and medical groups to join the representatives of frontline health care workers. DSHWE agreed to convey the suggestion to the secretariat of the Expert Committee.

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Manpower and training requirements

10. Ms Cyd HO expressed concern about the adequacy of health care staff, especially in view of recent reports of a drop in the number of students taking up medicine and nursing degree courses. She said that the provision of adequate training, the length of working hours and the provision of a good retirement benefits scheme were areas to which attention should be paid in maintaining adequate health care staff. She referred to the previous proposals to strengthen community medical services and asked whether there was now a need to adjust the measures.

11. Director, HA said that the new infection control measures and enhancement of infectious disease facilities would also have implications on the long-term manpower requirements. HA was looking into the manpower related issues and examining ways of encouraging more people to join the health care professions. HA would take into consideration the recommendations to be made by the Expert Committee before deciding the way forward. In the meantime, HA would also strengthen infectious control training for its health care staff. Director, HA said that the outbreak of SARS had clearly shown the importance of strengthening community medical services, which would help reduce the risk of cross-infection in hospitals.

12. The Chairman said that the provision of on-the-job training and internal redeployment of health care staff should also be considered in meeting the new requirements for new infection control measures. In this connection, DSHWF said that a new commitment of \$200 million would be sought at the Finance Committee meeting on 27 June 2003 for strengthening the training of health care staff to enhance their expertise in infectious disease control in the hospital setting.

13. Ms Cyd HO said that in the past HA had sought to reduce the number of hospital beds and strengthen community medical services. As there was now a need for increasing the number of beds in hospitals, it was important to achieve the right balance. She further said that instead of seeking funds on a piecemeal basis, HA should conduct a review on its overall use of funds, including the provision of beds and the deployment of health care staff. She considered that the subject should be discussed in the next legislative session.

14. Director, HA responded that an important factor in the fight against SARS was the availability of isolation facilities. It was necessary to enhance such facilities rather than to increase the total number of beds in hospitals.

15. DSHWF said that the use of funds by HA was always transparent. He said that additional funds had been sought because of the outbreak of SARS. In

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the longer term, expenditure arising from the new infection control measures would be met within the recurrent expenditure.

Enhancement of infectious disease facilities

16. Mr Albert HO said that besides the enhancement of infectious disease facilities, contingency plans should be drawn up to prevent and prepare for the resurgence of SARS. He expressed concern that infectious disease facilities were scattered in different locations in Hong Kong. He asked whether the Administration would make reference to the Xiaotangshan Hospital model in Beijing and construct similar isolation facilities in Hong Kong to prepare for any resurgence of SARS.

17. Director, HA said that the various measures as mentioned earlier should effectively prevent the outbreak of SARS. As to the Xiaotangshan Hospital model in Beijing, some staff members of HA had visited it and were analyzing the information gathered in the visit. He pointed out that a Xiaotangshan type of hospital was needed only if there was a massive outbreak of an infectious disease.

18. DSHWF said that as set out in the Administration's paper, the proposed enhancement of infectious disease facilities in nine major acute hospitals would provide over 1 000 isolation beds. The Administration was examining whether centralized or decentralized isolation facilities were more suitable for Hong Kong and whether there was a need to construct an infectious disease hospital in Hong Kong in the long term.

19. Mr Fred LI questioned whether it was appropriate to proceed with the proposed enhancement of infectious disease facilities, given that the Expert Committee was still to hold meetings and make recommendations.

20. DSHWF responded that the need for the proposed enhancement of facilities was identified during the outbreak of SARS. There was no question of conflict between the proposed enhancement of facilities and the recommendations to be made by the Expert Committee. Director, HA added that previous discussions at the special meetings of the Panel had also pointed to the need for the proposed enhancement of infectious disease facilities as a short-term measure. Decisions on facilities of a long-term nature would not be made until the Expert Committee's recommendations were available.

21. Mr Fred LI asked when the existing restrictions on visits to in-patients of acute wards would be lifted. Director, HA responded that the existing infection control measures would be maintained for the time being. HA was reviewing the control measures with a view to stepping down some of measures to a "new

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normal" level in July 2003.

22. Mr Fred LI asked whether there would be a mechanism for coordination of the use of the infectious disease facilities in the nine acute hospitals. Mr LI expressed concern that there might be cross-infection among suspected SARS patients placed in four-bedded rooms and asked whether single ensuite rooms would be provided in the medium term facilities.

23. Director, HA responded that during the SARS outbreak, all decisions relating to the use acute hospitals for treating SARS patients were centrally coordinated. However, it should be noted that it was practically difficult to anticipate the pattern of outbreak in different districts and adjustments had to be made in the light of new developments.

24. As to the chance of cross-infection, Director, HA explained that it depended not only on the number of beds in a room, but also whether there were other facilities as referred to in paragraph 6 of the Administration's paper on the enhancement of infectious disease facilities. He pointed out that to reduce the risk of cross infection, patients under the similar degree of suspicion could be put in the same room. He added that at the initial stage of an outbreak when the number of patients was small, it should be possible to put only one patient in a twin-bedded or four-bedded room. Director, HA confirmed that the 300 beds to be provided in the infectious disease blocks to be constructed in Princess Margaret Hospital (PMH), Alice HO Miu Ling Nethersole Hospital (AHNH) and Tuen Mun Hospital (TMH) would all be isolation beds.

25. Dr TANG Siu-tong expressed support for the medium-term measure of constructing infectious disease blocks at PMH, AHNH and TMH. He asked whether the 167 isolation rooms for confirmed SARS patients could be used for suspected SARS patients, and whether the 369 isolation rooms for suspected SARS patients could also be used for confirmed SARS patients. Director, HA confirmed that the two types of isolation rooms could be used interchangeably.

Rehabilitation programme for discharged SARS patients

26. Mr Albert HO said that many recovered SARS patients were of the view that rehabilitation service was inadequate. He asked whether there was any rehabilitation programme to assist recovered SARS patients and whether there were sufficient resources for the provision of rehabilitation service for SARS patients.

27. Director, HA said that there was a rehabilitation programme which lasted for three to six weeks. He said that as SARS was a new disease and the recovery

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process was still unknown, the worries of patients were understandable. The Chairman suggested that consideration be given to establishing an association of recovered SARS patients for mutual support. Director, HA said that the Administration was encouraging recovered SARS patients to form such an association.

28. Dr TANG Siu-tong asked whether the Administration would work with pharmaceutical manufacturers in the development of a vaccine against SARS.

29. DSHWF responded that the investment required for development of new vaccine was very substantial. Regarding research, he said that the Administration would submit a funding request for the establishment of a research fund for the control of infectious disease. Dr TANG Siu-tong expressed concern that if the Government did not provide financial support for the development of a vaccine against SARS, such a vaccine would not be available in the near future. The Chairman suggested that consideration could also be given to cooperating with the Mainland on the development of a vaccine against SARS.

New infection control measures

30. Dr TANG Siu-tong asked for more details of the "new normal" infection control measures being considered by HA. Director, HA said that consideration was being given to measures such as whether people visiting patients in acute hospitals should undergo temperature screening, whether visitors should be required to wear masks, and which clinical procedures would require special protective gear and equipment.

31. Dr TANG Siu-tong asked whether temperature screening would be conducted for both departing passengers and passengers arriving in Hong Kong. DDH responded that temperature screening was being conducted at the Hong Kong International Airport both for arriving, departing and transit passengers. He added that the Administration had undertaken to continue such temperature screening for a period of 12 months, subject to any new recommendations to be made by WHO in the meantime.

Death rate of SARS patients in Hong Kong

32. Mr SIN Chung-kai asked why the death rate of 16.8% for confirmed cases of SARS patients in Hong Kong was higher than the death rates of many other places.

33. Director, HA responded that as the situation in some other places was still not yet stabilized, it was not yet an appropriate time to compare the death rates.



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He pointed out medical experts in Hong Kong had been working closely together on the treatment regime for SARS patients. Despite criticism by some overseas experts, there was yet no agreed treatment protocol for the disease. He explained that different places had different treatment results and patients' background, such as their age and history of chronic illness, would effect the death rate. DDH shared the view that a direct comparison of the death rates should not be made without taking into account relevant factors, in particular the age factor.

34. Mr SIN Chung-kai asked whether the Government could use a scientific method to explain the issue to the public. Director, HA explained that comments on the death rate should be based on objective analysis. He said that when the other places had each conducted a detailed analysis after the situation had stabilized, a comparison of the death rates of different places would be more meaningful.

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35. Mr SIN Chung-kai requested the Administration to provide the relevant findings when available. He hoped that the Panel would follow up the matter.

Establishment of research fund for the control of infectious diseases

36. Members agreed that the Administration's paper on the establishment of research fund for the control of infectious diseases (LC Paper No. CB(2)2658/02-03(01)) should be discussed at the next meeting to be held on 9 July 2003. They noted that the funding request was scheduled for consideration at the Finance Committee meeting on 18 July 2003.

Date of next meeting

37. Members agreed that as WHO had removed Hong Kong from the list of areas with recent local transmission of SARS, the next meeting scheduled to be held on 9 July 2003 would be the last special meeting on SARS to discuss the notification mechanism with Guangdong Province and measures to prepare for possible re-emergence of SARS later in the year.

**II. Any other business**

38. Members also agreed that the next regular Panel meeting originally scheduled for 14 July 2003 would be advanced and combined with the special meeting to be held on 9 July 2003 at 8:30 am.

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39. There being no other business, the meeting ended at 10:35 am.

Council Business Division 2  
Legislative Council Secretariat  
26 August 2003