

**For information
on 19 July 2004**

Legislative Council Panel on Health Services

Report on Approved SARS-related Fundings

Purpose

This paper reports on the updated position of the use of SARS-related fundings approved since March 2003.

Background

2. Since March 2003, the Finance Committee (FC) of the Legislative Council (LegCo) has approved total funds of **\$2.8 billion** for the fight against the Severe Acute Respiratory Syndrome (SARS) and control of infectious diseases; and to provide the necessary support and assistance to healthcare staff as well as those who suffered from the impact of SARS. Altogether six items have been approved -

	<u>Approved Commitment/Estimate</u> \$ million
(a) Commitment for the fight against SARS	940.0
(b) Training and Welfare Fund for the Hospital Authority	200.0
(c) Enhancement of infection control facilities in the public hospital system	477.7
(d) Funding research projects on controlling infectious diseases	500.0
(e) Trust Fund for SARS	150.0
(f) Construction of a new infectious disease centre <u>attached to Princess Margaret Hospital</u>	538.3
<hr/> <hr/>	Total: 2,806.0

(a) Commitment for the fight against SARS

- We have approved a total of \$686.9 million under the commitment for the fight against SARS to provide additional funding to the Hospital Authority, Department of Health, Information Services Department and other bureaux/departments for treatment of patients with SARS, and to step up infection control and public health education; and
- We have rolled out a wide variety of publicity and educational measures to remind the public to stay vigilant and prepared for SARS.

(b) Training and Welfare Fund for the HA

- HA has drawn up a 5-year training plan with a view to equipping healthcare staff with knowledge and skills in infection control and infectious disease management and to sustaining continuous learning and enhancement in that aspect;
- Attendance for basic infection control training between September 2003 and April 2004 totals around 46 000. Among them, over 600 received local and overseas sponsorship to attend more in depth infectious disease / infection control training. Infection Control Resources Centres have been set up in the seven clusters of HA and are available for service;
- The Fund has also provided financial assistance to the staff who contracted SARS while on duty and subsequently passed away. Apart from providing each of their family a special relief grant of \$100,000 to meet urgent needs and full funeral expenses, a payment equal to 60 months' basic salary will also be paid from the Fund to each of their estate upon completion of the necessary legal formalities. The total amount paid or reserved for the above purposes amounted to \$14.37 million;
- Staff who suffered permanent incapacity as a result of contracting SARS while on duty will be eligible for a payment under the Fund equal to 90 months basic salary multiplied by the percentage of incapacity as assessed by the Labour Department. HA has reserved \$10 million under the Fund for this purpose;
- A special recuperation grant of \$50,000 has also been paid to

each of the 327 HA staff (including civil servants working in HA) who were confirmed to have contracted SARS while on duty; and

- \$1.4 million has been allocated under the Fund to the seven clusters of HA to enable them to run staff health and wellness programmes that suit their local needs. Another \$7.7 million has been earmarked to expand the services of HA's centre for personal growth and crisis intervention (OASIS) for the next four years.

(c) Enhancement of infection control facilities in the public hospital system

- We have made available improved isolation facilities, including 1 262 isolation beds in nine public hospitals, namely, Pamela Youde Nethersole Eastern Hospital, Prince of Wales Hospital, Princess Margaret Hospital, Queen Elizabeth Hospital, Queen Mary Hospital, Tuen Mun Hospital, Alice Ho Mui Ling Nethersole Hospital, Kwong Wah Hospital and United Christian Hospital.
- In addition, the HA has also redeployed resources to provide for 153 isolation beds in five other hospitals, namely, Caritas Medical Centre, Ruttonjee Hospital, North District Hospital, Tseung Kwan O Hospital and Yan Chai Hospital. 88% of the works in these five hospitals has been completed and 135 isolation beds are ready for use. Hitherto, \$61.5 million have been redeployed for the works in these five hospitals.
- In sum, we will provide a total of 1 415 isolation beds in 14 acute hospitals, out of which 1 397 are now ready for use. The remaining 18 beds shall be completed by end of September 2004.

(d) Funding Research Projects on Controlling Infectious Diseases

We have established a \$500 million research fund to support further investigation into the prevention, treatment and control of infectious diseases. As of June 2004, a total of \$144.7 million has been committed to support various research studies on infectious diseases in Hong Kong and the Mainland. Among them, a total of \$67 million is allocated to various universities to undertake a portfolio of research studies commissioned by the Bureau.

(f) Trust Fund for SARS

- We have approved a total of \$93.89 million under the Trust Fund for SARS to provide special ex-gratia financial assistance to 760 cases who are either dependents of deceased SARS victims, or eligible recovered SARS patients or eligible “suspected” SARS patients treated with steroids. 122 cases are being examined.

(g) Construction of a new infectious disease centre attached to Princess Margaret Hospital

- We have also planned to construct a modern, state-of-the-art infectious disease centre in Princess Margaret Hospital (PMH). We plan to commence the construction works in November 2004 for completion in June 2007.
- Upon completion, the infectious disease centre will provide 108 isolation beds, a procedure room with associated facilities, radio-diagnostic imaging facilities, a clinical laboratory for handling, collecting and distributing highly infectious specimens, staff infection control facilities and other supporting and ancillary facilities. Besides, it will house an Office of the Infection Control Branch of the Centre for Health Protection. In addition, the facilities of the existing mortuary in the Mainland Block of PMH will be upgraded to meet current safety standards in the management of infectious diseases.

Advice Sought

5. Members are invited to note the contents of this paper and the enclosures attached.

Health, Welfare and Food Bureau
16 July 2004

**Commitment for the Fight
against the Severe Acute Respiratory Syndrome (SARS)**

Background

On 31 March 2003, the LegCo FC approved via paper FCR(2002-03)66 the creation of a new commitment of \$200 million to provide additional funds for the fight against SARS. The commitment is to provide additional funding to HA, DH and other bureaux/departments for the treatment of SARS patients, and to step up infection control and public health education.

2. On 18 July 2003, FC approved via paper FCR(2003-04)40 an increase of the commitment by \$500 million to \$700 million, having regard to the committed and estimated funding requirements up to July 2003 and the need to make necessary preparations for the possible resurgence of SARS. On 20 February 2004, FC approved via paper FCR(2003-04)55 a further increase of the commitment by \$240 million to \$940 million to meet the post-SARS measures planned for the delivery of hospital services in 2003-04 and enhancing port health measures until the end of 2004.

Expenditure To-date

3. Up to 30.6.2004, \$686.9 million has been spent, representing 73% of the total approved commitment of \$940 million.

Position Update

4. In our prior submission to the LegCo FC, the Administration undertook to keep the LegCo Panel on Health Services posted on applications approved under the commitment. Since our last report to Members on the funding position of the commitment vide paper no. CB(2)524/03-04(08) dated 8 December 2003, the Secretary for Health, Welfare and Food has approved an additional funding of \$240 million to HA and the Housing Authority, which can be accounted for as follows -

(a) \$217.7 million was allocated to HA to meet its additional expenditure incurred up to October 2003 mainly for recruiting extra staff; procuring additional masks and other protective items, hospital supplies (e.g. cleansing and disinfection materials and paper towels), medical consumables, and drugs and pharmaceutical supplies; conducting facility improvement works projects in public hospitals on emergency and ad hoc basis during the SARS crisis; additional utilities; contracting out of cleansing services; development of SARS-related information systems; and consultancy and research fees for Chinese medicine services.

(b) \$22.3 million was allocated to the Housing Authority to meet the

additional expenditure incurred in the provision of temporary quarters to healthcare staff and contingency isolation facilities at King Hin Court and Tin Yan Estate during the outbreak of SARS, such as the costs of fitting out works, the procurement of furniture and appliances, the utility charges, and the costs of cleansing, telecommunication and management services. Another \$8.4 million will be paid to the Housing Authority as rental charges for the use of the two estates up to end July 2003.

5. A breakdown of the expenditure under the commitment up to end June 2004 is at the Annex.

**Total Expenditure under the
“Commitment for the fight against SARS” up to June 2004**

Department / Organization and Purpose	Amount (\$M)
Hospital Authority (HA)	
To meet additional expenditure on the following items up to October 2003 –	
(a) Recruitment of additional staff (including some 110 doctors, 240 nurses, 26 radiographers, and 250 supporting staff up to end October 2003) and payment of leave encashment / additional allowances	93.6
(b) Procurement of 65.2 million pieces of surgical masks and N95/N100 respirators, and other protective items such as disposable gowns, eye shields, face shields and goggles	196.4
(c) Drugs and pharmaceutical supplies such as ribavirin, steroid, antibiotics, immunoglobulin and disinfectant, and diagnostic services (including laboratory tests and radiological examinations)	54.9
(d) Procurement of essential medical equipment (including 181 ventilators to assist critically ill patients to breathe, 220 physiologic monitors to monitor the vital signs of severely ill patients, 261 pulse oximeters to monitor patients’ blood oxygen saturation level, 824 infusion pumps for intravenous infusion and 20 X-ray machines)	88.3
(e) Enhanced outreach support to elderly care homes	9.5
(f) Facility improvement works (including installation of exhaust fans and high efficiency particulate air filters at air exhaust ducts, installation of handwashing, shower and sanitary facilities, replacement of drainage pipes, and setting up of designated wards for SARS patients)	84.1 ¹
(g) Miscellaneous (including additional hospital supplies, medical consumables and utilities, contracting out of services, development of SARS-related information systems, consultancy and research fees for Chinese medicine services, transfer of infirmary patients to convalescent institutions)	73.6
<i>Sub-total (HA):</i>	<i>600.4</i>
Department of Health (DH)	
To meet additional expenditure on the following items up to July 2003 -	
(a) Port health measures (including staffing support from AMS/CAS, printing and distribution of health declaration forms, and procurement of temperature measuring devices and equipment)	32.3
(b) Home confinement & isolation arrangements (including additional cost for managing the isolation camps and Designated Medical Centres, and procurement of masks and other protective gear for use by staff in operations)	14.6
(c) Laboratory support to HA in performing tests for the confirmation of SARS infection	2.4
(d) Public health education programmes	4.9
<i>Sub-total (DH):</i>	<i>54.2</i>

¹ Subject to further adjustments upon finalization of the project accounts with the works agents.

Department / Organization and Purpose	Amount (\$M)
Information Services Department Publicity programmes to raise public awareness on the prevention of SARS	3.2
Government Logistics Department Procurement of household items and daily necessities for use in isolation camps and temporary quarters for healthcare staff	6.2
Constitutional Affairs Bureau Arranging a chartered flight to bring home a quarantined Hong Kong tour group from Chinese Taipei	0.2
Auxiliary Medical Service / Electrical and Mechanical Services Department / Fire Services Department / Hong Kong Police Force Special recuperation grant to a total of seven civil servants / public officers (not working in HA) infected with SARS while on duty	0.3
Health, Welfare and Food Bureau Commission the University of Hong Kong to produce a report on Epidemiological and Modelling Study on SARS Epidemic	0.1
Housing Authority Provision of temporary quarters to healthcare staff and contingency isolation facilities during the outbreak of SARS	22.3 ²
Total expenditure:	686.9

² Another \$8.4 million will be paid to the Housing Authority as rental charges for the use of King Hin Court and Tin Yan Estate as temporary quarters for healthcare staff.

Training and Welfare Fund for the Hospital Authority

Background

On 27 June 2003, the LegCo FC approved via paper FCR(2003-04)16 the creation of a new commitment in the amount of \$200 million for the establishment of a Training and Welfare Fund for the Hospital Authority (HA). The purpose of the Fund is to enable HA to provide its healthcare staff with additional training to maintain and enhance their expertise in infectious disease control in the hospital setting, provide special recuperation grant for those health care staff who contracted SARS while on duty, and implement other staff welfare initiatives.

2. The original proposed split between Training Fund and Welfare Fund was \$130/\$70 million but was subsequently changed to \$150/\$50 million to meet increased demand for training in infection control and infectious disease management.

3. The Fund is administered by the HA through a Central Committee chaired by the Chief Executive of HA. HA will report on a half-yearly basis to the Health, Welfare and Food Bureau and on a yearly basis to the Health Panel of the LegCo on the utilization of the Fund.

Expenditure To-date

4. Up to 30.6.2004, approximately \$36 million has been spent, of which \$6 million is on staff training and \$30 million is on providing financial assistance to those staff who contracted SARS while on duty and on implementing other staff welfare initiatives. The total expenditure to-date represents 18% of the approved commitment of \$200 million.

Position Update

5. In the paper submitted to the Finance Committee proposing the establishment of the Fund, the Administration undertook to submit to the LegCo Panel on Health Services an annual report on the utilization of the Fund. The first yearly report to the LegCo was submitted on 14 June 2004 vide paper no. CB(2)2692/03-04(05). Members may wish to refer to the paper for an update on the utilization of the Fund.

**Enhancement of Infection Control Facilities
in the Public Hospital System**

Background

On 18 July 2003, the LegCo FC approved via paper PWSC(2003-04)47 the upgrading of two capital items, namely 56MM and 57MM, to Category A at a total cost of \$409.6M for the enhancement of the infection control facilities in nine hospitals i.e. the Pamela Youde Nethersole Eastern Hospital, Prince of Wales Hospital, Princess Margaret Hospital, Queen Elizabeth Hospital, Queen Mary Hospital, Tuen Mun Hospital, Alice Ho Mui Ling Nethersole Hospital, Kwong Wah Hospital and United Christian Hospital.

2. On 7 January 2004, the FC further approved via paper PWSC(2003-04)58 an increase in the approved project estimate for 56MM by \$68.1M. The approved project commitment for enhancement of infection control facilities at the above-mentioned hospitals is now totaled at \$477.7M.

Expenditure To-date

3. Up to 30.6.2004, \$332.7 million has been spent, representing 69.6% of the total approved commitment of \$477.7 million.

Position Update

4. Alteration and addition works were conducted in the nine public hospitals to improve infection control facilities for handling future outbreaks of infectious diseases, including SARS.

5. 65 wards in the nine hospitals were modified to provide the standard facilities required for isolation rooms, where such facilities are not previously provided. These modifications included –

- (a) creation of negative pressure gradient with air flowing from “clean” zones (e.g. ward corridors) to “dirty” zones (e.g. patient rooms);
- (b) provision of 100% fresh air supply at no less than 12 air changes per hour;
- (c) installation of low level exhaust for better air flow pattern;
- (d) installation of high efficiency particulate air (HEPA) filter for filtering

- out droplets and aerosols;
- (e) air-tight construction for patient rooms to prevent cross contamination;
 - (f) addition of doors to close off existing open cubicles;
 - (g) provision of en-suite toilet / shower facilities in ward cubicles where existing building structure and building services installations permit; and
 - (h) provision of infection control facilities for hospital staff, such as gowning / de-gowning areas, changing rooms, shower facilities and clinical wash-hand basins.
6. Alteration works for existing treatment facilities, such as operating theatres, intensive care units and accident and emergency departments in eight of the nine hospitals were also conducted to provide infection control / isolation facilities for handling infectious diseases, including SARS.
7. A total of 516 rooms with over 1 262 beds for isolation purposes have now been made available in nine hospitals.

Other Improvement Works Funded by Redeployment of Resources

8. In addition, the HA has also redeployed resources to provide for 153 isolation beds in five other hospitals, namely, Caritas Medical Centre, Ruttonjee Hospital, North District Hospital, Tseung Kwan O Hospital and Yan Chai Hospital. 88% of the works in these five hospitals has been completed and 135 isolation beds are ready for use. Hitherto, \$61.5 million have been redeployed for the works in these five hospitals.

Total Number of Isolation Beds Provided by Conversion Works

9. In sum, we will provide a total of 1 415 isolation beds in 14 acute hospitals, out of which 1 397 are now ready for use. The remaining 18 beds shall be completed by end of September 2004.

Funding Research on Control of Infectious Diseases

Background

On 18 July 2003, the LegCo FC approved via paper FCR(2003-04)41 the creation of a commitment of \$500 million for financing research projects on controlling infectious diseases. Of the \$500 million approved,

- (a) \$450 million is for a fund to finance research projects on controlling infectious diseases to encourage, facilitate and support research on the prevention, treatment and control of infectious diseases, in particular emerging infectious diseases such as SARS, in the territory; and
- (b) \$50 million is to be provided to Mainland China for financing research projects on controlling infectious diseases.

Expenditure To-date

- 2. Up to 30.6.2004, \$50.6 million has been spent, representing 10.1% of the total approved commitment of \$500 million.

Position Update

- 3. To build up and strengthen the knowledge base with regard to the prevention and control of infectious diseases, both locally and across the border with Mainland China, a total of \$50 million has been provided to support research projects on infectious diseases in Mainland China through the Ministry of Science and Technology.

- 4. Locally, the Research Fund for the Control of Infectious Diseases (RFCID), with a capital commitment of \$450 million, was established under the Health, Welfare and Food Bureau to support studies initiated by individual investigators, and those commissioned by the Bureau, to address health problems, fill scientific gaps and respond to public threats or needs. As of June 2004, the RFCID has committed a total of \$94.7 million to support a wide portfolio of research projects as follows:

- Commissioned projects to the University of Hong Kong:
 - \$22 million for the university to undertake a portfolio of basic laboratory, epidemiological and public health research in emerging infectious diseases, and
 - \$8 million for the university to strengthen its Biosafety Level 3 laboratory facilities.

- Commissioned projects to the Chinese University of Hong Kong:
 - \$25 million for the university to undertake a portfolio of clinical trial and public health research in emerging infectious diseases.

- Commissioned projects to a consortium comprising The Hong Kong University of Science and Technology, The Hong Kong Polytechnic University and the Hospital Authority:
 - \$12 million for the consortium to undertake a portfolio of research studies on nosocomial infection and long term follow-up of SARS patients.

- Investigator-initiated projects:
 - \$27.7 million for a total of 38 research projects, received in the first and second open call, on infectious diseases covering aetiology, epidemiology and public health, basic research, clinical and health services.

Trust Fund for the Severe Acute Respiratory Syndrome (SARS)

Background

On 7 November 2003, the LegCo FC approved via paper FCR(2003-04)44 the creation of a one-off commitment of \$150 million for setting up a Trust Fund for SARS to provide -

- (a) special ex-gratia relief payments to families with deceased SARS patients;
 - (b) assistance, including special ex-gratia financial assistance, for recovered SARS patients suffering from longer term effects, attributable to SARS (including the effects of medication received for SARS, if any), which may result in some degree of bodily dysfunction, subject to medical proof and financial need (hereinafter called “recovered SARS patients”); and
 - (c) assistance, including special ex-gratia financial assistance, for patients who were clinically diagnosed as having SARS on admission, treated with steroids as medication for SARS, but turned out subsequently not to have SARS, suffering from longer term effects, attributable to the effects of steroids received (if any), which may result in some degree of physical dysfunction, subject to medical proof and financial need, in case this happens (hereinafter called “suspected” SARS patients treated with steroids).
2. The purview of the proposed Trust Fund would be confined to families of deceased SARS patients and those recovered SARS patients who contracted SARS during the outbreak in Hong Kong from March to June 2003, and those “suspected” SARS patients with presumptive clinical diagnosis of SARS and subsequently found not to have SARS, treated with steroids as medication for SARS, during the outbreak in Hong Kong in the same period.

Expenditure To-date

3. Up to 30.6.2004, \$93.89 million has been spent³, representing 63% of the total approved commitment of \$150 million.

Position Update

4. Since our last progress report to Members on the utilization of the Fund vide paper no. CB(2)1739/03-04(01) submitted in March 2004, the Committee on Trust Fund for SARS has continued to process applications expeditiously. Up to end June 2004, a total of 1 011 applications have been received, involving 315 deceased cases, 692 from recovered SARS patients and 4 from “suspected” SARS patients treated with steroids. The Committee has met a total of 15 times to process the applications and circulated 14 times of papers to expedite processing. A total of 760 applications have been approved up till end June 2004, involving a total amount of \$93.89 million so far. The details are :

- (a) 244 deceased cases have been approved with a total amount of \$79.3 million. This has been or is being disbursed; and
- (b) 516 recovered/’suspected’ cases have been approved, with a total amount of \$14.59 million up to end June 2004. Of the \$14.59 million, the total amount of monthly financial assistance approved is \$8.75 million and the total claims for ex-gratia grants for medical expenditure up to this stage is \$5.84 million (which has not included any other claims for medical and rehabilitation expenditure that the successful applicants may submit during the approval period).

³ This amount shows the total approved amount as at end June 2004. As it takes some time to arrange for actual payment for successful applicants, the total actual disbursements as at end June 2004 was \$88.8 million only.

**Construction of a New Infectious Disease Centre
attached to Princess Margaret Hospital**

Background

On 25 June 2004, the Finance Committee approved via paper PWSC(2004-05)24 funding for the construction of a new infectious disease centre attached to the Princess Margaret Hospital. The scope of the project comprises –

- (a) the construction of an infectious disease centre attached to PMH to provide –
 - (i) 108 isolation beds in wards with a capacity of ten to 14 beds each. The wards will accommodate single-bed and double-bed rooms with en-suite toilet/ shower facilities and ante-rooms where appropriate. We will designate 14 out of the 108 isolation beds as intensive care unit (ICU) beds which will be separately accommodated;
 - (ii) a procedure room with associated facilities;
 - (iii) radio-diagnostic imaging facilities, including a computer tomography scanner suite;
 - (iv) a clinical laboratory for the handling, collection and distribution of highly infectious specimens;
 - (v) staff infection control facilities, including gowning/ de-gowning areas, changing rooms, shower facilities and emergency showers;
 - (vi) an Office of the Infection Control Branch of the Centre for Health Protection (CHP); and
 - (vii) other supporting and ancillary facilities;
- (b) the upgrading of the facilities of the existing mortuary in the Main Block of PMH to meet current safety standards in the management of infectious diseases; and
- (c) the construction of a bridge linking the infectious disease centre with the existing Blocks E and F, and a connection linking the centre with the existing Block G.

2. The construction works is planned to commence in November 2004 and complete in June 2007.

Expenditure To-date

3. This project was only approved by the FC on 25 June 2004. There is no expenditure as at 30 June 2004.

Position Update

4. D Arch S has completed the detailed design of the proposed infectious disease centre and is preparing the tender document with in-house staff resources.