FACT SHEET

Information on Organizations dealing with Infectious Disease Prevention and Control in Selected Places (in order of population size)

Table 1 - Organizations dealing with Infectious Disease Prevention and Control in New Zealand, Ireland, Singapore, Finland, Hong Kong and Sweden

	New Zealand	Ireland	Singapore	Finland	Hong Kong	Sweden
Estimated population as at 2003 ('000)	• 3 876	• 3 956	• 4252	• 5 207	• 6816	• 8 877
Area (sq km)	• 270 534	• 70 273	• 660	• 338 145	• 1 100	• 449 964
Population density (no. of persons per sq km)	• 14	• 56	• 6442	• 15	• 6196	• 20
Estimated per capita GDP as at 2002 (US\$)	• 14,854	• 31,489	• 21,699	• 25,413	• 23,912	• 26,881
Name of organization responsible for preventing and controlling infectious diseases	Institute of Environmental Science and Research Limited (ESR)	National Disease Surveillance Centre (NDSC)	Ministry of Health (MOH) - Epidemiology and Disease Control Division (E&DC) Ministry of the Environment (ENV) - Quarantine and Epidemiology Department (Q&ED)	National Public Health Institute	Department of Health (DH) - Disease Prevention and Control Division (DPCD)	Swedish Institute for Infectious Disease Control (SMI)
Type of organization	A Crown entity owned by the government. Governed by an independent board of directors.	A government agency established by the health boards (the administrative arms of the Department of Health and Children).	Government departments.	A government research body under the purview of the Health Department.	A government department.	A government agency. Governed by an independent board of directors.
Year of establishment	• 1992	• 1998	Information on the establishment of MOH is not available. ENV was established in 1972.	• 1982	• DPCD was established in 2000.	Information is not available.
No. of staff	• 320 (as at 2002)	• 29 (as at 2003)	Information is not available.	• 850 (as at 2000)	 Approx. 45 (as at 2003) 	 Approx. 280 (as at 2003)
Mission	To be a leading provider of specialist science solutions, contributing to innovation in New Zealand and protecting people in Asia/Pacific.	To improve the health of the Irish population by providing the best possible information on infectious diseases through surveillance and independent advices, epidemiological investigation, research and training.	The mission of E&DC is to prevent and control major non-communicable and communicable diseases through efficient surveillance systems and control measures. The mission of Q&ED is to provide a high standard of epidemiological services for the prevention and control of infectious diseases and environment-related health problems.	To research, monitor and promote the health of the Finns.	No specific mission statement for DPCD. The mission of DH is to safeguard the health of the community through promotive, preventive, curative and rehabilitative services.	To protect the Swedish population from communicable diseases.

Table 1 - Organizations dealing with Infectious Disease Prevention and Control in New Zealand, Ireland, Singapore, Finland, Hong Kong and Sweden (cont'd)

	New Zealand	Ireland	Singapore	Finland	Hong Kong	Sweden
Funding sources	Generated from services rendered.	Government appropriation.	Government appropriation.	Government appropriation.	Government appropriation.	Government appropriation and external grants.
Duties/ Functions	Providing specialist and reference microbiological laboratory services to all clinical microbiology laboratories in New Zealand; Providing information on and assessing the risks and benefits of food; Providing expertise in forensic biology, illicit drugs, toxicology, and all aspects of crime scene investigation; Conducting studies and undertaking specialist analysis for the pharmaceutical industry; Conducting studies on environmental and human health; Supporting information systems; Conducting studies and providing information on water; and Providing technical expertise to develop and implement drug testing programmes.	Acting as an authoritative body for consultation on matters of scientific interest concerning communicable diseases and environmental hazards or other subjects; and Undertaking and facilitating research on matters relating to communicable diseases.	E&DC is responsible for the control of the spread of infectious diseases. It carries out epidemiological investigations on all notifiable infectious diseases (except sexually-transmitted disease, tuberculosis, AIDS and leprosy). E&DC develops and maintains national disease surveillance / information systems. It also manages an epidemiological database with comparative information on major non-communicable and communicable diseases, and provides statistical modelling and advisory services. Q&ED carries out surveillance and investigations of all vector-borne, food-borne and other notifiable infectious diseases. Epidemiological research on environment-related problems such as building-related illnesses is conducted. Q&ED also provides airport and port health services including rodent and sanitary inspection of ships, supervision of fumigation and health clearance of international travellers.	Conducting research to promote the health of the population; Monitoring issues affecting the health of the population; Performing public health service functions (e.g. vaccination, maternity clinic, monitoring of infectious diseases, and conducting research in forensic medicine); Developing, assessing and performing laboratory research; Participating in professional education; and Disseminating health information.	Formulating strategies and implementing measures in the surveillance, prevention and control of communicable and non-communicable diseases; Assessing the health status and health needs of the community, planning and implementing health intervention programmes, and conducting research and evaluation; and Planning, developing and maintaining the Public Health Information System.	Controlling communicable diseases; Developing new methods and techniques to enhance the protection against communicable diseases; Performing special diagnostics which are not performed in other Swedish laboratories due to small volumes or specific biosafety measures required; Providing references to all clinical microbiology laboratories in Sweden; Collecting and disseminating information; and Conducting training.
Areas of activities	 Control of communicable diseases; Environmental toxicology; Epidemiology; Food safety; Forensic; Information research; Pharmaceuticals; Science information management services; Water quality; and Workplace drug testing. 	Antimicrobial resistance; Bioterrorism and agents of deliberate release; Surveillance and investigation of communicable diseases; Maintenance of the computerized infectious disease reporting system; Immunization; Infectious disease notifications; and Information and communications technology development.	The scope of communicable diseases covered by E&DC includes (a) childhood diseases; (b) poliomyelitis; (c) hand, foot and mouth disease; (d) tuberculosis; (e) hepatitis B; (f) HIV/AIDS; and (g) sexually- transmitted diseases. The scope of business of Q&ED includes (a) vector-borne diseases; (b) food-borne diseases; (c) viral hepatitis; (d) air-borne diseases; (e) environment-related diseases; (f) emerging infectious diseases; (g) epidemiological surveys; and (h) evaluation of the childhood immunization programme.	Environmental health; Epidemiology and health promotion; Infectious disease epidemiology; Inflammation and microbial ecology; Mental health and alcohol research; Microbiology; Molecular medicine; and Vaccines.	Surveillance of communicable diseases; Control of non-communicable diseases; and Maintenance of the public health information system.	 Animal research; Bacteriology; Epidemiology; Immunology; Microbiological preparedness; Parasitology; Quality assurance; Vaccine research; and Virology.

Table 1 - Organizations dealing with Infectious Disease Prevention and Control in New Zealand, Ireland, Singapore, Finland, Hong Kong and Sweden (cont'd)

	New Zealand	Ireland	Singapore	Finland	Hong Kong	Sweden
Infectious disease surveillance system	ESR is contracted by the Ministry of Health to operate the national surveillance system. Surveillance activities are split between local and national authorities. ESR co-ordinates the operation of the national notifiable disease surveillance database 'EpiSurv' and provides information on surveillance and development of the surveillance and development of the surveillance system. Information on notifiable diseases is electronically collated on a weekly basis from the public health services centres and analyzed at ESR. ESR disseminates the data to the public through reports, publications and web sites. For notifiable diseases, clinician surveillance by medical practitioners is mandatory. For diseases which are common, representative rather than complete surveillance data are required, and sentinel surveillance is adopted.	If a medical practitioner suspects or diagnoses a case of notifiable disease, he is required to transmit a written notification to a relevant medical officer in the health board. For some diseases or where a serious outbreak of an infectious disease is suspected, the medical practitioner is required to give immediate preliminary notification by phone or fax to the medical officer. The medical officer forwards notification data to NDSC once a week. At NDSC, data are analyzed and disseminated through a weekly report.	Private medical practitioners, academic institutions, hospitals, polyclinics, clinical laboratories, death registry and health promotion board submit infectious disease notifications to either MOH or ENV through the electronic notification system.	National Public Health Institute collects infection data from the whole country via computer networks into the infection register and provides timely information about new epidemics.	DPCD conducts surveillance on 28 statutorily notifiable diseases and other infections of public health significance. Medical practitioners are required to notify DH all suspected notifiable infectious diseases. DPCD maintains close ties with the Hospital Authority, other government departments, professional experts and health authorities in other places in the surveillance and control of communicable diseases. DH produces statistics on health status and disease surveillance of the local population.	Notifications of diseases are submitted to both the County Medical Officer and SMI. For some diseases, additional notifications must be sent to the Municipal Environmental Office. Except for sexually-transmitted infections, all infectious diseases are notified by medical practitioners as well as laboratories which diagnose the causing agent. The notification must be done within 24 hours of diagnosis. A patient with sexually-transmitted infectious disease is notified by the medical practitioner. Notification can be done within one week. These diseases are also notifiable by the laboratory through the voluntary reporting system.

Table 2 - Organizations dealing with Infectious Disease Prevention and Control in Australia, Canada, United Kingdom, Japan, United States of America and Mainland China

	Australia	Canada	United Kingdom	Japan	United States of America	Mainland China
Estimated population as at 2003 ('000)	• 19 730	• 31 510	• 59 251	• 127 654	• 294 043	• 1 304 196
Area (sq km)	• 7 686 850	• 9 976 140	• 244 820	• 377 835	• 9 629 091	• 9 596 960
Population density (no. of persons per sq km)	• 3	• 3	• 242	• 338	• 31	• 136
Estimated per capita GDP as at 2002 (US\$)	• 20,268	• 23,205	• 26,286	• 31,343	• 36,210	• 963
Name of organization responsible for preventing and controlling infectious diseases	Department of Health and Ageing - Population Health Division (PHD)	Health Canada (HC) - Population and Public Health Branch (PPHB)	Health Protection Agency (HPA)	National Institute of Infectious Diseases (NIID)	Centers for Disease Control and Prevention (CDC)	Chinese Centre for Disease Control and Prevention
Type of organization	A government department.	A government department.	A non-departmental public body.	A government agency under the guidance of the Ministry of Health, Labour and Welfare.	A government agency under the purview of the Department of Health and Human Services.	A government agency under the purview of the Ministry of Health.
Year of establishment	Information is not available.	PPHB was established in 2000.	• 2003	• 1947	• 1946	Information is not available.
No. of staff	Information is not available.	• > 1 300 (as at 2003)	• 2 700 (as at 2003)	Information is not available.	• > 8 500 (as at 2003)	Information is not available.
Mission	The mission of PHD is to help all Australians stay healthy and live longer by avoiding illness and injury.	The mission of PPHB is to work with its partners to safeguard the health of the people of Canada and enhance the conditions that contribute to their well-being.	To provide an integrated approach to protecting people's health and reducing the impact on human health from infections, poison, chemical, and radiation hazards.	To carry out extensive and original research projects on a variety of contagious diseases for the development of preventive medicine, to improve human health and welfare by suppressing infectious diseases, and to provide scientific support to the health and medical administration of the country.	To promote health and quality of life by preventing and controlling disease, injury, and disability.	To create a healthy environment, to maintain social stability, to safeguard national security and to enhance public health by preventing and controlling disease, disability and injury.
Funding sources	Government appropriation.	Government appropriation.	Government appropriation.	Information is not available.	Government appropriation and business/private donations.	Government appropriation.

Table 2 - Organizations dealing with Infectious Disease Prevention and Control in Australia, Canada, United Kingdom, Japan, United States of America and Mainland China (cont'd)

	Australia	Canada	United Kingdom	Japan	United States of America	Mainland China
Duties/ Functions	 Preventing epidemics; Protecting the environment; Promoting healthy behaviours; Responding to disasters; Monitoring population health status; Developing new insights and innovative solutions; and Formulating health policies. 	PPHB formulates policies, develops programmes and conducts research relating to disease surveillance, prevention and control, health promotion and community action. The Centre for Infectious Disease Prevention and Control under PPHB promotes improvement in population health through disease surveillance and epidemiology, risk management, research, health promotion, public health policy development, and prevention and care programmes. The Centre for Emergency Preparedness and Response under PPHB develops and maintains national emergency response plans for HC, monitors outbreaks and global disease events; assesses public health risks during emergencies and develops public health rules governing laboratory safety and security, quarantine and similar issues. It is also the health authority on bioterrorism, emergency health services and emergency response. The Centre for Surveillance Coordination under PPHB collaborates with public health stakeholders on the development, maintenance and use of health surveillance information, tools and skills to identify and reduce risk factors which can cause injury, illness, and disease.	Advising government on public health protection policies and programmes; Delivering services and supporting the National Health System and other agencies to protect people from infectious diseases, poisons, chemical and radiological hazards; Providing information and advice to professionals and the public; Responding to new threats to public health; Providing a rapid response to health protection emergencies, including the deliberate release of biological, chemical, poison or radioactive substances; and Improving knowledge of health protection, through research, development, and education and training. The Communicable Disease Surveillance Centre (CDSC) under HPA develops and strengthens the surveillance systems, and provides surveillance information for people involving in investigation, control and prevention of communicable diseases.	Conducting research; Providing reference services for infectious diseases; Conducting surveillance on infectious diseases; Conducting national control tests and other tests; Being a World Health Organization collaborating centre for various infectious diseases; and Providing training. The Infectious Disease Surveillance Centre is the national centre for infectious disease surveillance. It exchanges information on infectious diseases with surveillance centres in other countries.	Monitoring health; Detecting and investigating health problems; Conducting research to enhance prevention of infectious diseases; Developing and advocating sound public health policies; Implementing infectious disease prevention strategies; Promoting healthy behaviours; Fostering safe and healthy environments; and Providing leadership and training. The function of the National Center for Infectious Diseases (NCID) under CDC is to prevent illness, disability, and death caused by infectious diseases in the US and around the world. NCID conducts surveillance, epidemic investigations, epidemiologic and laboratory research, training, and public education programmes to develop, evaluate, and promote prevention and control strategies for infectious diseases.	 Providing a scientific basis for matters relating to the formulation of plans for disease prevention and control and public health, and providing policy consultation services for health administration departments. Formulating, implementing and reviewing national work plans for disease prevention and control and major public health service programmes. Directing the establishment of the national public health surveillance system, conducting epidemiological surveillance on the regularity in the occurrence, development and distribution of diseases, and proposing preventive and control solutions. Participating and directing local governments in handling epidemics and outbreaks of public health emergencies, and establishing a contingency response system for public health problems. Participating in the launching of vaccine researches, and providing technical directions and evaluations to the implementation of national immunization strategies. Establishing a quality control system, promoting the standardization of national public health inspections and launching quality tests, safety assessments and risk analyses for health-related products under the authorization of the Ministry of Health.

Table 2 - Organizations dealing with Infectious Disease Prevention and Control in Australia, Canada, United Kingdom, Japan, United States of America and Mainland China (cont'd)

	Australia	Canada	United Kingdom	Japan	United States of America	Mainland China
Duties/ Functions (cont'd)						Establishing and improving the national information network on disease prevention and control and public health, and taking charge of the collection, analysis and forecast of information pertaining to disease prevention and control and relevant information from the country and overseas.
						 Organizing and conducting topical investigations into major diseases and public health issues at national level.
						Conducting researches and assessments on strategies and measures dealing with prevention and treatment of diseases and public health issues.
						 Organizing and implementing national health education, directing, participating in and establishing demonstrative projects for community health services at national level.
						Studying problems related to the hygiene of potable water in the development of rural activities.
						 Organizing and undertaking scientific researches on disease prevention and control and public health.
						 Conducting training for disease prevention and control agencies at municipal/county level.
						Developing international co- operation and technological exchanges.
						 Institute of Communicable Disease Control and Prevention (ICDC) is the national centre for providing technological guidance in the prevention and control of infectious diseases.

Table 2 - Organizations dealing with Infectious Disease Prevention and Control in Australia, Canada, United Kingdom, Japan, United States of America and Mainland China (cont'd)

	Australia	Canada	United Kingdom	Japan	United States of America	Mainland China
inju inju Bio Chi Dru Env Foc Foc Her dise Innr Infe Nut Pub part Sur Tob you Wo	Alcohol, substance misuse and adjury prevention; Giosecurity; Child health; Drug strategy; Christonmental health; Cood policy; Cood safety and surveillance; Idealthy ageing and chronic isease prevention; Idepatitis C and HIV/AIDS; Immunization; Infection management; Idutrition and physical activity; Tublic health law and artnerships; Turveillance and epidemiology; Tobacco, drug prevention and outh policy; and Workforce development and esearch.	Business integration and information services; Chronic disease prevention and control; Emergency preparedness and response; Healthy human development; Infectious disease prevention and control; Laboratory for food-borne diseases; National microbiology laboratory; and Surveillance coordination.	Surveillance of communicable diseases; Emergency planning; Local and regional services; Poisons and chemical hazards; and Specialist and reference microbiology services.	AIDs research; Bacterial pathogenesis and infection control; Bacteriology; Bioactive molecules; Biochemistry and cell biology; Biosafety control and research; Experimental animal research; Genetic resources; Immunology; Surveillance of infectious diseases; Leprosy research; Medical entomology; Medical science; Molecular genetics; Parasitology; Pathology; Radiological protection and biology; Safety research on blood and biologics; Veterinary science; and Virology.	Birth defects and developmental disabilities; Chronic disease prevention and health promotion; Environmental health; Epidemiology; Health statistics; HIV, sexually-transmitted diseases, and tuberculosis prevention; Immunization; Infectious disease control and prevention; Injury prevention and control; Occupational safety and health; and Public health practice.	Prevention and control of infectious diseases; Prevention and control of viral diseases; Prevention and control of parasitic diseases; Prevention and control of sexually-transmitted diseases and AIDS; Prevention and control of chronic and non-infectious diseases; Nutrition and food safety; Safety of environmental and health-related products; Occupational health and poison control; Protection against radiation and nuclear safety; Technical guidance for water quality improvement in rural areas; Health education; Health education; Research on public health policy; Public health surveillance and information service; Immunization planning; Prevention and control of tuberculosis; Disease control and contingency measures; and Public health administration.

Table 2 - Organizations dealing with Infectious Disease Prevention and Control in Australia, Canada, United Kingdom, Japan, United States of America and Mainland China (cont'd)

	Australia	Canada	United Kingdom	Japan	United States of America	Mainland China
Infectious disease surveillance system	Communicable disease surveillance systems exist at national, state and local levels. The National Notifiable Diseases Surveillance System (NNDSS), under the auspices of the Communicable Diseases Network Australia, coordinates the national surveillance of communicable diseases. Under NNDSS, medical practitioners and laboratories notify state or territory health authorities of suspected cases, and these data are transferred to the Surveillance and Epidemiology Section of PHD for collation and analysis fortnightly. Results are published in a quarterly journal entitled Communicable Diseases Intelligence.	According to the Office of the Auditor General of Canada, the national surveillance system in Canada is weak. Many of the provincial surveillance systems lack timely, accurate, and complete disease information. Each province has its own public health legislation and public health priorities, resulting in 13 separate public health systems. Information on communicable diseases is provided by physicians, hospitals and public health workers. Only a few provinces have data sharing agreements with HC. There is no agreement on common standards and nationally reportable diseases among states. HC is establishing a national framework for health surveillance.	Medical practitioners have a statutory duty to notify local authorities of suspected cases of infectious diseases. Local authorities are required to inform CDSC on details of each case once a week. CDSC collates these weekly returns and publishes analyses of local and national trends. Although notification by laboratories is voluntary, CDSC receives huge volumes of laboratory reports from public and private laboratories.	A physician diagnosing a patient with infectious disease must notify a nearby health centre immediately. The health centre must notify the local health department and the district infectious disease surveillance centre via the computer network immediately. The health centre must also send the information on the incidence and their infectious agents obtained from the district infectious disease surveillance centre to the prefectural health institute (PHI), the medical institutions concerned, the Medical Association, the Board of Education, etc. through weekly and monthly reports or other media. PHI conducts laboratory tests and sends the results to the health centre, the local health department, and the district infectious disease surveillance centre. The physician receives the result through the health centre. Any tests difficult to conduct at PHI are transferred to NIID. NIID conducts laboratory tests and reports the results to PHI and the national infectious disease surveillance centre.	 Notification of nationally notifiable diseases at state level is mandatory. Notification to CDC by states is voluntary. When a health care provider suspects or diagnoses a case of notifiable disease, he has to notify the local or state health department by various means. If the case is reported at the local level, staff of the local health department will implement control measures and forward the report to the state health department. The state health department sends the report to CDC through the National Electronic Telecommunications System for Surveillance. Provisional weekly reports of notifiable diseases are published in CDC's Morbidity and Mortality Weekly Report (MMWR), while final, corrected data are published in the annual MMWR Summary of Notifiable Diseases, United States. 	 A person who is aware of a patient having contracted or suspected to have contracted an infectious disease should report timely to the nearest healthcare agency or health and epidemic prevention agency. In discharging their duties, medical and healthcare personnel or staff from a health and epidemic prevention agency who are aware of a patient having contracted plague, cholera, viral hepatitis, bacillary or amoebic dysentery, typhoid fever, pulmonary tuberculosis or influenza should report the case via the quickest means of communication to the health and epidemic prevention agency at the place of occurrence within six hours in towns or 12 hours in rural areas. When aware of an epidemic of an infectious disease or having received a report on the outbreak of AIDS or pulmonary anthrax, the health and epidemic prevention agency should immediately report to the local health administration department. The latter should report to the local government immediately and at the same time report to the health administration department at a higher level as well as the health administration department under the State Council. A person in breach of the regulations is liable to a fine or for criminal responsibilities.

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