# 立法會 Legislative Council

LC Paper No. FC38/11-12 (These minutes have been seen by the Administration)

Ref: CB1/F/1/2

## **Finance Committee of the Legislative Council**

Minutes of the 22<sup>th</sup> meeting held at the Legislative Council Chamber on Friday, 24 June 2011, at 7:05 pm

## **Members present:**

Hon Emily LAU Wai-hing, JP (Chairman)

Hon Albert HO Chun-yan

Ir Dr Hon Raymond HO Chung-tai, SBS, S.B.St.J., JP

Hon LEE Cheuk-yan

Hon CHEUNG Man-kwong

Hon CHAN Kam-lam, SBS, JP

Hon Mrs Sophie LEUNG LAU Yau-fun, GBS, JP

Dr Hon Philip WONG Yu-hong, GBS

Hon LAU Kong-wah, JP

Hon Miriam LAU Kin-yee, GBS, JP

Hon TAM Yiu-chung, GBS, JP

Hon LI Fung-ying, SBS, JP

Hon Audrey EU Yuet-mee, SC, JP

Hon WONG Kwok-hing, MH

Hon LEE Wing-tat

Dr Hon Joseph LEE Kok-long, SBS, JP

Hon Jeffrey LAM Kin-fung, SBS, JP

Hon Andrew LEUNG Kwan-yuen, GBS, JP

Hon WONG Ting-kwong, BBS, JP

Hon Ronny TONG Ka-wah, SC

Hon KAM Nai-wai, MH

Hon Cyd HO Sau-lan

Hon Starry LEE Wai-king, JP

Hon CHAN Hak-kan
Hon CHAN Kin-por, JP
Dr Hon Priscilla LEUNG Mei-fun
Hon WONG Sing-chi
Hon IP Wai-ming, MH
Hon IP Kwok-him, GBS, JP
Dr Hon PAN Pey-chyou
Dr Hon Samson TAM Wai-ho, JP
Hon LEUNG Kwok-hung

#### **Members absent:**

Prof Hon Patrick LAU Sau-shing, SBS, JP (Deputy Chairman)

Dr Hon David LI Kwok-po, GBM, GBS, JP

Hon Fred LI Wah-ming, SBS, JP

Dr Hon Margaret NG

Hon James TO Kun-sun

Hon LEUNG Yiu-chung

Hon WONG Yung-kan, SBS, JP

Hon LAU Wong-fat, GBM, GBS, JP

Hon Andrew CHENG Kar-foo

Hon Timothy FOK Tsun-ting, GBS, JP

Hon Abraham SHEK Lai-him, SBS, JP

Hon Tommy CHEUNG Yu-yan, SBS, JP

Hon Frederick FUNG Kin-kee, SBS, JP

Hon Vincent FANG Kang, SBS, JP

Hon CHEUNG Hok-ming, GBS, JP

Hon CHIM Pui-chung

Dr Hon LAM Tai-fai, BBS, JP

Hon Paul CHAN Mo-po, MH, JP

Dr Hon LEUNG Ka-lau

Hon CHEUNG Kwok-che

Hon WONG Kwok-kin, BBS

Hon Mrs Regina IP LAU Suk-yee, GBS, JP

Hon Paul TSE Wai-chun

Hon Alan LEONG Kah-kit, SC

Hon Tanya CHAN

Hon Albert CHAN Wai-yip

Hon WONG Yuk-man

## **Public officers attending:**

Ms Alice LAU, JP Deputy Secretary for Financial Services and the Treasury (Treasury)1 Principal Executive Officer (General), Ms Elsie YUEN Financial Services and the Treasury Bureau (The Treasury Branch) Under Secretary for Food and Health Prof Gabriel M LEUNG, JP Deputy Secretary for Food and Health Mr Thomas CHAN Chung-ching, JP (Health) 2 Principal Assistant Secretary for Food Mr Chris SUN Yuk-han and Health (Health) 3 Assistant Director of Health (Family Dr Shirley LEUNG Sze-lee and Elderly Health Services) Acting Deputy Secretary for Transport Miss Erica NG Lai-man and Housing (Transport) 3 Mr Albert SU Yau-on Principal **Transport** Officer (Management), Transport Department Secretary Assistant Principal Mr Aaron LIU Kong-cheung Commerce and **Economic** Development (Communications and Technology) A Chief Engineer (Project), Electrical Mr Herman CHAN Ng-lick and Mechanical Services Department **Telecommunications** Mr CHENG Chi-keung Acting Chief Engineer (Advisory and Spectrum Management), Office of the **Telecommunications Authority** Deputy Secretary for Development Mr Tommy YUEN Man-chung, JP (Planning and Lands) 2 Mr Edward TO Principal Assistant Secretary for Development (Planning and Lands) 3 Deputy Director of Buildings Mr LAM Siu-tong Mr Jacky IP Kam-shing Director (Property Management), Hong Kong Housing Society Executive Director (Operations and Ir Calvin LAM Che-leung Project Control), Urban Renewal Authority

#### **Clerk in attendance:**

Mrs Constance LI Assistant Secretary General 1

#### **Staff in attendance:**

Ms Annette LAM

Mr Daniel SIN

Mr Frankie WOO

Chief Council Secretary (1)7

Senior Council Secretary (1)7

Senior Legislative Assistant (1)3

Ms Christy YAU Legislative Assistant (1)8

Item No. 3 - FCR(2011-12)31 HEAD 37 - DEPARTMENT OF HEALTH Subhead 700 General non-recurrent Item 887 Health Care Voucher Pilot Scheme

The Finance Committee (FC) resumed discussion on this item which was carried over from the preceding meeting at 3:45 pm of the same day.

## Scope and participation rate of the Elderly Health Care Voucher Pilot Scheme

- 2. <u>Mr LEUNG Kwok-hung</u> was of the view that, instead of offering health care vouchers, the Administration should hand out \$1,000 in cash to elderly people who could choose to spend it on healthcare service or health food supplements.
- 3. <u>Under Secretary for Food and Health</u> (USFH) advised that the proposal was to extend the period of the Elderly Health Care Voucher Pilot Scheme (the Pilot Scheme) which was considered useful by the elderly beneficiates and healthcare service providers according to a review conducted by the School of Public Health and Primary Care of the Faculty of Medicine of the Chinese University of Hong Kong. The Administration recommended that the Pilot Scheme be extended for another three years and the total value of vouchers for each elderly beneficiary each year be increased from \$250 to \$500 during the extended period. As the Administration had completed the review and the Panel on Health Services had considered the proposal, it would not be appropriate to make substantial changes to the Pilot Scheme at this stage.
- 4. <u>Ms LI Fung-ying</u> noted that only about 50% of eligible elderly people had used the vouchers, as many elderly people preferred public health services. Moreover, many private medical practitioners had not participated in

the Pilot Scheme. She suggested that the Administration should encourage elderly people to seek private medical service and encourage more medical practitioners to participate in the Pilot Scheme.

- 5. <u>Mr WONG Sing-chi</u> noted that the vouchers could only offset a small proportion of elderly patients' medial expenses. Though the Pilot Scheme sought to encourage elderly people to take up more preventive care services, the value of the vouchers was not sufficient for them to do so. Noting the low usage of the Pilot Scheme, he asked how the Administration evaluated the effectiveness of the Pilot Scheme, such as how elderly people had sought more preventive care services as a result of the Pilot Scheme.
- 6. <u>USFH</u> advised that according to the report on the interim review on the Pilot Scheme, which had been submitted to the Panel on Health Services, elderly beneficiaries considered the Pilot Scheme useful in reducing their burden of medical expenses. Many elderly people had made use of the vouchers to attend more preventive medical checks. <u>USFH</u> said that the Administration considered the Pilot Scheme effective and recommended doubling the voucher value so as to further promote preventive care and enhance development of the primary healthcare service in the community.
- 7. Mr WONG Sing-chi criticized that the Pilot Scheme could hardly be considered successful when only about 52% of medical practitioners had participated in the Pilot Scheme. The Chairman asked if medical practitioners were deterred by the onerous patient data entry tasks required under the Pilot Scheme.
- 8. <u>USFH</u> said that some medical practitioners might consider that the Pilot Scheme did not offer sufficient incentive to attract their participation. However, with the doubling of the voucher value in the extended pilot period, and with the additional flexibility for elderly beneficiaries to carry forward unused vouchers, more medical practitioners should be attracted to take part in the Pilot Scheme. He added that more than 1 400 medical practitioners of various medical disciplines had, by now, registered in the Pilot Scheme. Patients now had wider choices on medical service providers.
- 9. <u>Mr WONG</u> questioned whether the Pilot Scheme had effectively diverted elderly patients to seek private medical service and reduced the pressure on the public health service. <u>USFH</u> explained that one objective of the Pilot Scheme was to promote primary healthcare service in the community by encouraging elderly people to make better use of preventive care services by providing economic incentive for them. The Pilot Scheme was not intended to divert elderly patients or patients with chronic illness from the public medical

service sector. He stressed that the Administration would not reduce the commitment or resources in these areas.

- 10. <u>Ms LI Fung-ying</u> noted that the Administration had reached out certain districts to promote the Pilot Scheme. She asked how the Administration selected the districts to carry out the publicity and promotion initiatives. <u>USFH</u> responded that the Administration would prioritize efforts in districts where the participation rates of medical practitioners in the Pilot Scheme was low and where the elderly population was high.
- 11. <u>Mr LEE Cheuk-yan</u> expressed concern that family medicine was still not well developed and should be promoted. <u>Mr LEE</u> said the public could be encouraged to consult family doctors in order to reduce the burden on specialist services, and the sharing of patient information between the public and private healthcare sector should be promoted. He asked when such database could be implemented.
- 12. <u>USFH</u> advised that the Administration had sought resources to implement a ten-year programme for the development of a territory-wide patient-oriented Electronic Health Record (eHR) Sharing System which enabled sharing of patients' records between the public and private healthcare sectors. It was expected that the eHR sharing platform would be in operation by 2014-2015. <u>USFH</u> added that there was already a system where private medical practitioners could obtain prescription records of his patients who were discharged from public hospitals.

## General out-patient telephone appointment booking service

13. Mr LEE Cheuk-yan said that many elderly patients experienced difficulties in making use of the telephone appointment booking service to seek medical consultation at General Out-patient Clinics. Very often, bookings were full and the patients had to wait for a day or two before an appointment Mr LEE considered that such delays might aggravate could be arranged. patients' conditions and asked if the system would be improved with the USFH responded that the telephone introduction of the voucher scheme. booking service was mainly set up for making appointments for chronic illnesses. Some elderly patients were still not familiar with the operation of the service, and many community organizations (including the local offices of Legislative Council or District Council members) had provided assistance to elderly patients to make use of the service. Improvements would continue to be made to the service as necessary.

14. <u>The Chairman</u> put the item to vote. The Committee approved the funding proposal.

Item No. 4 - FCR(2011-12)32
CAPITAL WORKS RESERVE FUND
HEAD 708 - CAPITAL SUBVENTIONS AND MAJOR SYSTEMS
AND EQUIPMENT
Transport Department
New Subhead "Installation of radio re-broadcasting system for digital

audio broadcasting at 11 government road tunnels"

- 15. <u>The Chairman</u> advised that FC was invited to approve a new commitment of \$46.4 million for installation of radio re-broadcasting system for digital audio broadcasting (DAB) at 11 government road tunnels. The Panel on Transport had been consulted on the proposal at its meeting on 2 June 2011.
- In response to the enquiry of Mr WONG Ting-kwong as to whether similar devices would be installed in private tunnels, <u>Deputy Secretary for Transport and Housing (Transport) 3</u> (DS(T)3) advised that the Administration encouraged tunnel companies to install DAB signal re-broadcasting facilities in their tunnels. To this end, the Administration had introduced the private tunnel operators to the prospective DAB operators to facilitate their discussion on the feasibility and terms for installing such systems in private tunnels. <u>Principal Assistant Secretary (Communications and Technology) A</u> added that the Administration would monitor the situation and facilitate discussion between tunnel operators and DAB operators as appropriate.
- 17. Referring to the implementation timetable of the re-broadcasting system, Ms Miriam LAU asked whether the Administration could further expedite the progress of the installation work. DS(T)3 advised that the Administration had reviewed the proposed implementation timetable with the Electrical and Mechanical Services Department. The preparatory work (consisting of site investigation, detailed design and tendering) would take about ten months, while the remaining 22 months were mainly needed for system installation in the 11 tunnels. DS(T)3 explained that as the configurations of each of the tunnels were different, the laying of the radiating coaxial cables would have to be tailor-designed for every tunnel. To facilitate early launch of the DAB service, the Administration aimed to complete the installation works in four government road tunnels with the highest traffic volume first by December 2012. These tunnels were the Aberdeen Tunnel, the Cross Harbour Tunnel, the Lion Rock Tunnel and the Tseung Kwan O Tunnel. DS(T)3 said that as the project progressed, the Administration would identify

further room for expediting the work programme whenever possible in the light of actual experience.

18. <u>The Chairman</u> put the item to vote. The Committee approved the funding proposal.

Item No. 5 - FCR(2011-12)33

HEAD 138 - GOVERNMENT SECRETARIAT:

DEVELOPMENT BUREAU

(PLANNING AND LANDS BRANCH)

Subhead 700 General Non-recurrent

Subhead 700 General Non-recurrent Item 865 Operation Building Bright

19. The Chairman advised that FC was invited to approve an increase in commitment from \$2.2 billion by \$1 billion to \$3.2 billion for the implementation of Operation Building Bright (OBB). The Panel on Development had been consulted on the proposal at its meeting held on 29 March 2011. A supplementary information note on barrier-free access facilities was provided by the Administration and tabled at the meeting for members' reference.

## Arrangement for reimbursement of subsidies

- 20. Mr KAM Nai-wai expressed support for the proposal which allowed elderly owners living in premises converted from a commercial use to receive subsidies under OBB. However, he was concerned that elderly property owners would have to pay their share of the prescribed inspection and repair cost in the first instance, and many of these elderly owners might have difficulties in this respect. There was also a possibility that the owners would not receive the reimbursement since the subsidies under OBB credited to the respective Owners' Corporations' (OC) accounts. Some owners might even have moved when the reimbursement was made. He requested the Administration to adopt a more flexible approach in disbursing subsidies granted under OBB.
- 21. <u>Director (Property Management)</u>, <u>Hong Kong Housing Society</u> (HKHS) advised that OCs could apply for the grants under OBB to be paid by four instalments, and payments could be made within 28 days after submission of all required documents. He pointed out that there might be a time gap between the submission of invoices by works contractors and the submission of documents by OCs. HKHS and the Urban Renewal Authority (URA) would provide assistance to the OCs concerned to monitor their cash flow situation.

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Executive Director (Operations and Project Control), URA advised that OCs should negotiate a longer payment period with the works contractors, to allow time for the Authorized Persons who supervised the prescribed works to recommend/submit the relevant documents and subsequent verification by HKHS/URA.

Mr KAM Nai-wai considered that the Administration should formulate clear guidelines to OCs about the application and reimbursement procedures. Deputy Secretary for Development (Planning and Lands) 2 (DS(PL)2) advised that there were already guidelines on the operation of OBB. The Administration could further discuss with HKHS and URA to see if more detailed guidelines should be developed. The Chairman requested the Administration to forward a copy of such supplementary guidelines for members' reference when available.

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### Provision and maintenance of barrier-free access under OBB

- 23. The Chairman asked whether OBB had ever granted subsidies for the improvement and maintenance of barrier-free access facilities for the elderly and persons with disabilities. Principal Assistant Secretary (Planning and Lands)3 (PAS(PL)3) advised that items related to barrier-free access facilities were permitted under the scope of prescribed repairs under OBB. While the objective of OBB was primarily to provide subsidies and technical assistance to help owners of old and dilapidated buildings carry out repair and maintenance works to enhance structural and fire safety, property owners or OCs could make use of any unused amount of subsidies on other works such as the acquisition of fire fighting equipments, lifts and barrier-free access facilities to improve the functioning of the buildings. PAS(PL)3 added that apart from subsidies under OBB, there was a series of measures to assist owners and OCs to enhance barrier-free access. He quoted an OBB case in Central and Western District where a vertical lift platform was built in an old building to facilitate wheelchair users to move from one level to another in the building.
- The Chairman remarked that the amount of subsidies that could be used on barrier-free access might not be adequate as some of these facilities were rather expensive. DS(PL)2 responded that while OBB was a special initiative designed to improve building safety, works to enhance the communal facilities included in the second priority list would also be subsidised. Besides, there were various funding sources or loan schemes to assist property owners or OCs to provide barrier-free access in buildings. The Chairman requested the Administration to step up publicity on the availability of the various funding sources for improving barrier-free access in buildings.

#### Action

- 25. <u>The Chairman</u> put the item to vote. The Committee approved the funding proposal.
- 26. The meeting was adjourned at 7:45 pm.

<u>Legislative Council Secretariat</u> 28 December 2011