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Replies to supplementary questions raised by Finance Committee Members in examining the Estimates of Expenditure 2015-16

Director of Bureau : Secretary for Food and Health Session No. : 17

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Reply Serial No.

S-FHB(H)01

CONTROLLING OFFICER'S REPLY

(Question Serial No. SV023)

Head: (140) Government Secretariat: Food and Health Bureau

(Health Branch)

Subhead (No. & title): (-) Not Specified

<u>Programme</u>: (2) Subvention: Hospital Authority

<u>Controlling Officer</u>: Permanent Secretary for Food and Health (Health) (Richard YUEN)

<u>Director of Bureau</u>: Secretary for Food and Health

Question:

Pursuant to reply no. FHB(H)001, the Administration is requested to provide information on the number of cases where babies born in Hong Kong in the past three years have exhibited ambiguous genitalia symptoms.

Asked by: Hon CHAN Chi-chuen

Reply:

Ambiguous genitalia are appearances caused by many different underlying conditions, such as genetic or metabolic diseases. There is no defined coding, hence statistics, on the number of babies born with ambiguous genitalia in the Hospital Authority (HA).

As examples and not meant to be exhaustive, seven babies had hermaphroditism, pseudohermaphroditism and indeterminate sex diagnosed at birth in HA during April to December 2014.

Reply Serial No.

CONTROLLING OFFICER'S REPLY

S-FHB(H)02

(Question Serial No. SV025)

Head: (140) Government Secretariat: Food and Health Bureau

(Health Branch)

Subhead (No. & title): (-) Not Specified

<u>Programme</u>: (2) Subvention: Hospital Authority

<u>Controlling Officer</u>: Permanent Secretary for Food and Health (Health) (Richard YUEN)

<u>Director of Bureau</u>: Secretary for Food and Health

Question:

The Administration is requested to provide information on the number of cases in the past three years where Mainland pregnant women giving birth in public hospitals in Hong Kong have not paid up hospital fees.

Asked by: Hon CHAN Chi-chuen

Reply:

The Hospital Authority (HA) classifies patients into Eligible Persons (EP, note 1) and Non-eligible Persons (NEP). NEP includes, among others, Mainland patients.

The table below sets out the number of NEP deliveries in HA in 2012-13, 2013-14 and 2014-15 (up to 31 December 2014) and the corresponding number of deliveries which had not been fully paid as at end of the respective financial year:

Financial year	Number of NEP deliveries in HA (note 2)	Number of NEP deliveries in HA which had not been fully paid (%)		
2012-13	2 354	199 (8.5%)		
2013-14	440	116 (26.4%)		
2014-15 (up to 31 December 2014)	320	89 (27.8%)		

Notes:

- 1. According to the Gazette (G.N. 5708 issued on 27 September 2013), patients falling into the following categories are eligible to the rates of charges applicable to EP:
 - holders of Hong Kong Identity Card issued under the Registration of Persons Ordinance (Chapter 177), except those who obtained their Hong Kong Identity Card by virtue of a previous permission to land or remain in Hong Kong granted to them and such permission has expired or ceased to be valid;

- ii) children who are Hong Kong residents and under 11 years of age; or
- iii) other persons approved by the Chief Executive of the Hospital Authority.
- 2. Booking of obstetric service for non-local women was suspended in early 2013, which potentially accounted for the drop in the number of NEP deliveries in HA from 2013-14 onwards.

- End -

Reply Serial No.

S-FHB(H)03

CONTROLLING OFFICER'S REPLY

(Question Serial No. S0093)

Head: (140) Government Secretariat: Food and Health Bureau

(Health Branch)

Subhead (No. & title): (-) Not Specified

<u>Programme</u>: (1) Health

Controlling Officer: Permanent Secretary for Food and Health (Health) (Richard YUEN)

<u>Director of Bureau</u>: Secretary for Food and Health

Question:

Pursuant to the reply FHB(H)078, given that the number of child and adolescent patients has been on the increase in each of the past 3 years, will the Administration enhance the service in this regard, including strengthening the manpower and services of other clusters and implementing public-private partnership programme in healthcare so that the needy students can obtain suitable assistance as early as possible? If yes, what are the details? If no, why?

As regards manpower, the Administration stated that the manpower of child and adolescent psychiatric teams in the Kowloon West Cluster and the New Territories East Cluster was strengthened. What are the details? Please provide a breakdown by grade.

Asked by: Hon LEE Kok-long, Joseph

Reply:

To enhance the support for child and adolescent (C&A) psychiatric patients, the Hospital Authority (HA) strengthened its C&A psychiatric services in the Kowloon West Cluster and the New Territories East Cluster in 2014-15. Two doctors, four nurses, two occupational therapists and two clinical psychologists have been deployed to the clusters for enhancement.

In 2015-16, HA will further expand its C&A psychiatric services in the Kowloon East Cluster. It is estimated that one doctor, two nurses, one occupational therapist and one clinical psychologist will be required to enhance the services.

HA will examine a series of factors including but not limited to service demand, service capacity of both the public and private sectors, and patient acceptance when considering the suitability of public-private partnership (PPP). HA has no plan to launch PPP programme for C&A psychiatric services for the time being. Nevertheless, HA will continue to review

and monitor its service provision and explore feasible options to ensure that its service can meet the needs of the patients.

Reply Serial No.

S-FHB(H)04

CONTROLLING OFFICER'S REPLY

(Question Serial No. S0091)

Head: (140) Government Secretariat: Food and Health Bureau

(Health Branch)

Subhead (No. & title): (-) Not specified

<u>Programme</u>: (1) Health

Controlling Officer: Permanent Secretary for Food and Health (Health) (Richard YUEN)

<u>Director of Bureau</u>: Secretary for Food and Health

Question:

With reference to Reply Serial No. FHB(H)020, the overall manpower shortfall of nurses and allied health professionals in the Hospital Authority (HA) is around 500 and 200 respectively in 2014-15. Please advise this Committee whether there will be a shortfall of nurses and allied health professionals in each of the coming 3 years according to the Government's estimation; if so, what are their estimated numbers; if not, will there be a surplus of nurses and allied health professionals?

Asked by: Hon LEE Kok-long, Joseph

Reply:

In 2015-16, the Hospital Authority (HA) plans to recruit around 1 830 nursing staff. This includes the recruitment of around 370 nurses which is intended to meet the existing manpower shortfall.

The supply of nurse graduates available to HA is projected to be around 1 500, 2 000 and 2 000 in 2016-17, 2017-18 and 2018-19 respectively. HA anticipates that the projected total nurse supply in the coming three years, which includes around 300 nurses recruited from the market each year on top of the nurse graduates, will be able to fill the vacancies and to meet the operational needs of HA.

With the increase in the number of University Grants Committee funded first-year first-degree places for allied health professionals in 2012-13, the supply of graduates of allied health professionals will be increased in 2015-16. It is anticipated that most of the vacancies of allied health professionals in HA will be filled in 2015-16. For Physiotherapists, there may still be some unfilled vacancies in 2015-16 but the situation will be further improved from 2016-17 onwards.

Reply Serial No.

S-FHB(H)05

CONTROLLING OFFICER'S REPLY

(Question Serial No. S0092)

Head: (140) Government Secretariat: Food and Health Bureau

(Health Branch)

Subhead (No. & title): (-) Not Specified

<u>Programme</u>: (1) Health

Controlling Officer: Permanent Secretary for Food and Health (Health) (Richard YUEN)

Director of Bureau: Secretary for Food and Health

Question:

In connection with Reply Serial No. FHB(H)081, as for the Primary Care Directory, apart from doctors, dentists and Chinese medicine practitioners, does the Government have plans to include other allied health professionals providing primary care services, such as optometrists and physiotherapists? If yes, what are the details, progress and timeframe of the plans? If no, please explain. Please provide a breakdown of the figures by type of allied health professional.

Asked by: Hon LEE Kok-long, Joseph

Reply:

The Primary Care Directory (PCD) is a web-based directory giving details about the personal and practice-based information of different primary care professionals in Hong Kong. The PCD is being developed in phases. The sub-directories for doctors and dentists were launched in April 2011, followed by the sub-directory for Chinese medicine practitioners in October 2012. The sub-directory for optometrists is being compiled and will be launched in 2015. Development of sub-directory for other primary care professionals will be considered after the launch of the sub-directory for optometrists.

As at end-March 2015, the numbers of doctors, dentists and Chinese medicine practitioners enrolled in the PCD were 1 409, 378 and 1 569 respectively.

Reply Serial No.

S-FHB(H)06

CONTROLLING OFFICER'S REPLY

(Question Serial No. S0094)

Head: (140) Government Secretariat: Food and Health Bureau

(Health Branch)

Subhead (No. & title): (-) Not specified

<u>Programme</u>: (1) Health

Controlling Officer: Permanent Secretary for Food and Health (Health) (Richard YUEN)

<u>Director of Bureau</u>: Secretary for Food and Health

Question:

With reference to the reply with serial no. FHB(H)077, how many patients with severe mental illness are there in Hong Kong at present? Is the addition of 5 peer support workers adequate for the effective implementation of the service concerned and what are the details of the service?

Asked by: Hon LEE Kok-long, Joseph

Reply:

In 2014, the Hospital Authority (HA) provided psychiatric support for a total of around 47 200 patients diagnosed with severe mental illness (SMI). HA does not have statistics on the number of patients with SMI in Hong Kong.

In 2015-16, HA will introduce a peer support element into the Case Management Programme to enhance community support for patients with SMI. People who have rehabilitated from past mental illness will be engaged to assist case managers in supporting patients in the recovery process through experience sharing. It is estimated that five peer support workers (one in the Kowloon Central Cluster, two in the Kowloon West Cluster and two in the New Territories West Cluster) will be recruited. HA will continue to review and monitor its service provision to ensure that its service can meet the needs of the patients.

Reply Serial No.

S-FHB(H)07

CONTROLLING OFFICER'S REPLY

(Question Serial No. S0095)

Head: (140) Government Secretariat: Food and Health Bureau

(Health Branch)

Subhead (No. & title): (-) Not specified

<u>Programme</u>: (1) Health

Controlling Officer: Permanent Secretary for Food and Health (Health) (Richard YUEN)

<u>Director of Bureau</u>: Secretary for Food and Health

Question:

Pursuant to the reply FHB(H)075, it is noted that officers leaving the service are mostly the allied health staff with 1 to 5 years of service. What specific measures will be taken to retain them? As regards the pay policy for the nurses who return to work for the Hospital Authority (HA), will the Government further improve their remuneration so as to attract more nurses to rejoin HA? If so, what are the details? If not, what are the reasons for that?

Asked by: Hon LEE Kok-long, Joseph

Reply:

The Hospital Authority (HA) has been implementing a number of measures to retain frontline allied health staff including those with one to five years of service. Such measures include enhancing their training opportunities by offering training sponsorship for related master degree courses, formulating long-term structured training plans, adopting relieving arrangements to facilitate staff to participate in the training, etc. In addition, HA will continue to recruit additional professional and supporting staff and re-engineer work processes in order to relieve their workload.

Regarding the measures for retaining frontline nursing staff including those with one to five years of service, HA has been actively recruiting locally trained graduates available in the market to relieve workload of the frontline nursing staff. The number of nurse graduates recruited in 2014-15 (up to 31 December 2014) is 1 064. HA will also continue to enhance their training and development opportunities through various training initiatives which include provision of preceptorship programme for newly recruited nurse graduates, formulation of long-term structured training plans, and increasing the amount of training subsidy to support Registered and Enrolled Nurses to undertake degree or post-graduate programmes in nursing.

As regards the pay policy for new recruits including those who re-join HA, HA's Human Resources Policy Manual provides that an employee normally enters at the first point of an incremental pay scale, while entry at higher points on the scale may be granted to take account of special qualifications and experience subject to the recommendation of the selection board and the required approval. Pursuant to this prevailing policy, newly recruited nurses may be granted higher entry points on the scale taking into account their additional years of relevant experience.

HA will continue to monitor and review the effectiveness of the above measures to attract and retain nurses as and when necessary.

- End -

Reply Serial No.

S-FHB(H)08

CONTROLLING OFFICER'S REPLY

(Question Serial No. S0096)

<u>Head</u>: (140) Government Secretariat: Food and Health Bureau

(Health Branch)

Subhead (No. & title): (-) Not Specified

<u>Programme</u>: (1) Health

<u>Controlling Officer</u>: Permanent Secretary for Food and Health (Health) (Richard YUEN)

<u>Director of Bureau</u>: Secretary for Food and Health

Question:

It is stated in Reply Serial No. FHB(H)074 that for allied health staff, those who have 1-5 years of service have the highest number of staff attrition. What targeted measures do the Government have to retain them?

Asked by: Hon LEE Kok-long, Joseph

Reply:

The Hospital Authority (HA) has been implementing a number of measures to retain frontline allied health staff including those with one to five years of service. Such measures include enhancing their training opportunities by offering training sponsorship for related master degree courses, formulating long-term structured training plans, adopting relieving arrangements to facilitate staff to participate in the training, etc. In addition, HA will continue to recruit additional professional and supporting staff and re-engineer work processes in order to relieve their workload.

Reply Serial No.

S-FHB(H)09

CONTROLLING OFFICER'S REPLY

(Question Serial No. S0097)

Head: (140) Government Secretariat: Food and Health Bureau

(Health Branch)

Subhead (No. & title): (-) Not specified

<u>Programme</u>: (1) Health

<u>Controlling Officer</u>: Permanent Secretary for Food and Health (Health) (Richard YUEN)

<u>Director of Bureau</u>: Secretary for Food and Health

Question:

Pursuant to the reply FHB(H)072, will the Government extend the hospice care service in view of the increasing number of elderly who know of "dying-in-place" and who wish to spend the last moments of their life at home, so that patients' wishes are respected and health care services that meet their needs can be provided at the same time?

Asked by: Hon LEE Kok-long, Joseph

Reply:

The Hospital Authority (HA) understands that some terminally-ill patients may wish to stay with their families in a familiar environment until their passing away. In collaboration with residential care homes for the elderly (RCHEs), HA will continue to strengthen the Community Geriatric Assessment Team service in phases to better support terminally-ill residents living in RCHEs. Meanwhile, HA will regularly review the demand for various medical services and plan its services (including palliative care services) having regard to factors such as population growth and changes, advancement of medical technology and healthcare manpower; and collaborate with community partners to better meet the needs of terminally-ill patients to facilitate "dying-in-place".

Reply Serial No.

S-FHB(H)10

CONTROLLING OFFICER'S REPLY

(Question Serial No. S0098)

Head: (140) Government Secretariat: Food and Health Bureau

(Health Branch)

Subhead (No. & title): (-) Not Specified

<u>Programme</u>: (1) Health

Controlling Officer: Permanent Secretary for Food and Health (Health) (Richard YUEN)

<u>Director of Bureau</u>: Secretary for Food and Health

Question:

Referring to reply serial no. FHB(H)059, please provide a breakdown of the use of Health Care Vouchers by the type of healthcare services. How will the Government further encourage the use of Health Care Vouchers to access healthcare services for disease prevention and health promotion?

Asked by: Hon LEE Kok-long, Joseph

Reply:

The number of voucher claims from 2012 to 2014 with breakdown by the type of healthcare professionals is as below:

	Number of Voucher Claims					
	2012	2013	2014	Total (2012 to 2014)		
Medical Practitioners	812 872	1 229 078	1 734 967	3 776 917		
Chinese Medicine	98 189	190 017	383 613	671 819		
Practitioners						
Dentists	19 239	36 783	73 586	129 608		
Occupational	101	79	584	764		
Therapists						
Physiotherapists	3 058	6 922	13 201	23 181		
Medical Laboratory	935	1 941	3 697	6 573		
Technologists						
Radiographers	867	1 507	3 047	5 421		
Nurses	334	317	921	1 572		
Chiropractors	377	823	1 975	3 175		
Optometrists	1 228	2 972	5 956	10 156		
Total:	937 200	1 470 439	2 221 547	4 629 186		

The amount of vouchers claimed from 2012 to 2014 with breakdown by the type of healthcare professionals is as below:

	Amount of the Vouchers Claimed (in \$'000)						
	2012	2013	2014	Total (2012 to 2014)			
Medical Practitioners	139,683	256,296	444,401	840,380			
Chinese Medicine	13,808	31,968	82,369	128,145			
Practitioners							
Dentists	7,751	20,805	55,131	83,687			
Occupational	27	28	390	445			
Therapists							
Physiotherapists	614	1,758	3,981	6,353			
Medical Laboratory	362	1,046	2,273	3,681			
Technologists							
Radiographers	242	512	1,358	2,112			
Nurses	125	265	773	1,163			
Chiropractors	171	485	1,276	1,932			
Optometrists	436	1,541	5,587	7,564			
Total:	163,219	314,704	597,539	1,075,462			

To encourage more eligible elders to join the Elderly Health Care Voucher Scheme and use the vouchers for primary care services including preventive care, the Department of Health launched in February 2015 another round of publicity to promote the Scheme via television and radio announcements of public interest, free newspapers, and advertisements in the public transport system.

Reply Serial No.

S-FHB(H)11

CONTROLLING OFFICER'S REPLY

(Question Serial No. S0120)

Head: (140) Government Secretariat: Food and Health Bureau

(Health Branch)

Subhead (No. & title): (-) Not Specified

<u>Programme</u>: (2) Subvention: Hospital Authority

<u>Controlling Officer</u>: Permanent Secretary for Food and Health (Health) (Richard YUEN)

<u>Director of Bureau</u>: Secretary for Food and Health

Question:

Please provide the monthly figures on injuries allegedly sustained in the "occupy movement" or public meetings treated at public hospitals, medical institutions, specialist outpatient clinics and general outpatient clinics under the Hospital Authority since September 2014, and the number of injured persons who have claimed police actions as the cause of injury among these cases. Please give a breakdown of cases by public hospitals, medical institutions, specialist outpatient clinics and general outpatient clinics, and by type of injuries.

Asked by: Hon LEUNG Kenneth

Reply:

The table below sets out the number of attendances in the Accident & Emergency (A&E) departments under the Hospital Authority since September 2014 which were reported to be related to mass gathering:

	A&E attendances reported to be related to mass gathering
September 2014	109
October 2014	288
November 2014	176
December 2014	104
January 2015	2
February 2015	8
March 2015	22
Total	709

Statistical record on the breakdown of the above attendances is not readily available.

Reply Serial No.

S-FHB(H)12

CONTROLLING OFFICER'S REPLY

(Question Serial No. SV029)

Head: (140) Government Secretariat: Food and Health Bureau

(Health Branch)

Subhead (No. & title): (-) Not Specified

<u>Programme</u>: (1) Health

Controlling Officer: Permanent Secretary for Food and Health (Health) (Richard YUEN)

<u>Director of Bureau</u>: Secretary for Food and Health

Question:

The Administration is requested to provide information on the

- (a) passing rates of different parts of the Licensing Examination administered by the Medical Council for non-local medical practitioners seeking registration in Hong Kong;
- (b) number of medical practitioners allowed to practice in Hong Kong under limited registration; and
- (c) number of non-local medical practitioners recruited and assessed by the Hospital Authority ("HA") to be qualified for practice in HA hospitals,

over the past few years.

Asked by: Hon TSE Wai-chun, Paul

Reply:

(a) The table below sets out the passing rates of different parts of the Licensing Examination administered by the Medical Council of Hong Kong in the past five years from 2010 to 2014 –

Examination in Year Professional Knowledg				ciency To		Clinical Examination			
	Sat	Passed	%	Sat	Passed	%	Sat	Passed	%
2010	168	43	26	65	64	98	72	21	29
2011	221	51	23	54	50	93	76	21	28
2012	237	61	26	74	67	91	108	47	44
2013	280	102	36	115	103	90	143	46	32
2014 (1 st sitting)	107	25	23	28	22	79	85	45	53
2014 (2 nd sitting)	200	35	18	77	58	75	71	28	39

Note: Starting from 2014, two sittings of Licensing Examination are held in a year instead of previously one.

- (b) The number of medical practitioners with limited registration for the five years from 2010 to 2014 were 171, 162, 175, 166 and 146 respectively.
- (c) The table below sets out the number of non-local doctors engaged by the Hospital Authority in 2012-13, 2013-14 and 2014-15 –

2012-13	2013-14	2014-15		
13	15	18		

Note: Figures refer to the total number of non-local doctors recruited, including doctors who have completed or ended their contracts during the said period.

Reply Serial No.

S-FHB(H)13

CONTROLLING OFFICER'S REPLY

(Question Serial No. SV026)

Head: (140) Government Secretariat: Food and Health Bureau

(Health Branch)

Subhead (No. & title): (-) Not Specified

<u>Programme</u>: (2) Subvention: Hospital Authority

Controlling Officer: Permanent Secretary for Food and Health (Health) (Richard YUEN)

<u>Director of Bureau</u>: Secretary for Food and Health

Question:

Pursuant to reply no. FHB(H)004, the Administration is requested to provide information on the measures to be implemented to retain experienced healthcare professionals.

Asked by: Hon WONG Pik-wan, Helena

Reply:

In 2014-15, the Hospital Authority (HA) has earmarked around \$321 million for the recruitment and retention of healthcare professionals. The same level of funding has been earmarked in 2015-16 to continue to implement a series of measures to retain medical and nursing staff. Major measures are outlined below:

- (a) Enhancing training opportunities: HA will continue to earmark designated resources for enhancing training opportunities of healthcare professionals. The measures include provision of additional overseas training places for the HA Corporate Scholarship Programmes, enhancement of simulation training and increase in the training budget for Commissioned Training Programmes.
- (b) Strengthening manpower support: In 2015-16, HA plans to recruit around 400 doctors, 1830 nursing staff, as well as part-time doctors in all specialties to further increase manpower strength and improve staff retention. HA will continue to recruit non-local doctors under limited registration to supplement local recruitment drive, and provide training to registered nursing students and enrolled nursing students at HA's nursing schools. Furthermore, to help alleviate manpower shortage and retain suitable expertise for training of and knowledge transfer to the new generation of medical doctors, a re-employment programme for rehiring suitable serving doctors on contract full-time basis upon their retirement or completion of contract at the age of 60 in 2015-16 and 2016-17 has been implemented commencing from 1 April 2015.

(c) Enhancing promotion prospects: HA will continue to create additional Associate Consultant posts for promotion of doctors with five years' post-fellowship experience by merits and to enhance the career advancement opportunities of experienced nurses.

Other measures for retaining experienced healthcare professionals include, for example, the reimbursement of examination fees, increasing training subsidy to support Enrolled Nurses and Registered Nurses to undertake degree or post-graduate programmes in nursing, and enhanced recognition through honorarium scheme, etc.

- End -

Reply Serial No.

S-FHB(H)14

CONTROLLING OFFICER'S REPLY

(Question Serial No. S0090)

Head: (37) Department of Health

Subhead (No. & title): (-) Not Specified

<u>Programme</u>: (1) Statutory Functions

<u>Controlling Officer</u>: Director of Health (Dr. Constance CHAN)

<u>Director of Bureau</u>: Secretary for Food and Health

Question:

The Tobacco Control Office (TCO) of the Department of Health is responsible for enforcing the Smoking (Public Health) Ordinance (the Ordinance), instituting prosecutions against offending business establishments and individuals during routine inspections or in response to complaints. In this regard, would the Government advise this Committee on the following:

- (1) How many individuals were prosecuted for violating the Ordinance in the past three years? Among them, what were the number and percentage of, as well as the amount of penalty imposed on, offenders from Hong Kong, Macau, the Mainland, Taiwan and foreign countries respectively?
- (2) How many offenders did not pay the penalty in the past three year? Among them, what were the number and percentage of offenders from Hong Kong, Macau, the Mainland, Taiwan and foreign countries respectively? What was the amount of default payment involved?
- (3) How many business establishments were prosecuted for violating the Ordinance in the past three years? What was the geographical distribution of these business establishments in the 18 districts? In which district were the numbers of violations and repeated offences greatest?
- (4) How many offending business establishments did not pay the penalty in the past three years? What was the geographical distribution of these business establishments in the 18 districts? What was the amount of default payment involved?
- (5) What were the staff establishment and expenditure of TCO in the past three years?

- (6) What are the estimated staff establishment and expenditure of TCO in the coming year? If additional staff is provided, what are the scope and nature of their work? If no, what are the reasons?
- (7) In the face of default payment, will TCO conduct reviews accordingly with a view to improving the payment of penalty by offending business establishments and individuals?

Asked by: Hon CHAN Chi-chuen

Reply:

- In 2012, 2013 and 2014, a total of 8 198, 8 562, and 8 027 fixed penalty notices (FPNs) and summonses were issued to smoking offenders respectively. A total of 7 866, 8 043, and 7 514 FPNs were issued to Hong Kong Identity Card holders and the amount of fixed penalty involved were \$11,799,000, \$12,064,500, and \$11,271,000 in 2012, 2013 and 2014 respectively. TCO does not have information on the nationality of the smoking offenders.
- As of 2 April 2015, there were a total of 121, 177, and 304 unsettled FPNs in 2012, 2013, and 2014 respectively. Among them, 55, 104, and 224 were issued to Hong Kong Identity Card holders and the amount of fixed penalty involved were \$82,500, \$156,000, and \$336,000 in 2012, 2013 and 2014 respectively. TCO does not have information on the nationality of the smoking offenders.
- (3) & (4) TCO does not have the requested prosecution figures on business establishments. Under the Smoking (Public Health) Ordinance (Cap 371), there is no legal liability for venue managers and business establishment for smoking offences in their premises. However, venue managers are empowered to request smokers to cease smoking or leave the no smoking area, and may call for police assistance if necessary.
- (5) & (6) The expenditures / provisions and staffing situation of TCO from 2012-13 to 2015-16 are at **Annexes 1 and 2** respectively. The Department of Health will continue to review the need for strengthening its manpower to cope with the enforcement duties.
- (7) Court warrants for non-payment have been issued for the recovery of unsettled payment of penalty. TCO will continue to educate the public on the importance of law compliance and payment of fixed penalty on time.

<u>Annex 1</u>

<u>Expenditures / Provisions of the Department of Health's Tobacco Control Office</u>

	2012-13	2013-14	2014-15 Revised Estimate	2015-16 Estimate
	(\$ million)	(\$ million)	(\$ million)	(\$ million)
<u>Enforcement</u>				
Programme 1: Statutory Functions	39.6	42.7	39.4	40.5
Health Education and Smoking Cessation				
Programme 3: Health Promotion	102.6	120.2	125.7	126.4
(a) General health education and promotion of sn	noking cessati	<u>on</u>		
TCO	46.3	48.2	46.2	46.8
Subvention to Council on Smoking and Health	20.7	22.0	24.3	21.4
Sub-total	<u>67.0</u>	<u>70.2</u>	<u>70.5</u>	<u>68.2</u>
(b) Provision for smoking cessation and related so	ervices by nor	n-government	al organisation	<u>18</u>
Subvention to Tung Wah Group of Hospitals	26.5	34.7	37.1	39.1
Subvention to Pok Oi Hospital	6.0	7.3	7.8	7.6
Subvention to Po Leung Kuk	1.7	2.2	2.0	2.0
Subvention to Lok Sin Tong	1.4	1.9	1.9	2.3
Subvention to United Christian Nethersole Community Health Service	-	2.6	2.6	2.6
Subvention to Life Education Activity Programme	-	1.3	2.3	2.3
Subvention to The University of Hong Kong	<u>-</u> _	<u>-</u> _	1.5	2.3
Sub-total	<u>35.6</u>	<u>50.0</u>	<u>55.2</u>	<u>58.2</u>
Total	<u>142.2</u>	<u>162.9</u>	<u>165.1</u>	<u>166.9</u>

<u>Annex 2</u>

<u>Staff Establishment of Tobacco Control Office of the Department of Health</u>

Rank	2012-13	2013-14	2014-15	2015-16 Estimate			
Head, TCO							
Principal Medical & Health Officer	1	1	1	1			
Enforcement							
Senior Medical & Health Officer	1	1	1	1			
Medical & Health Officer	2	2	2	2			
Land Surveyor	1	1	1	1			
Police Officer	5	5	5	5			
Overseer/ Senior Foreman/ Foreman	89	89	89	89			
Senior Executive Officer/ Executive Officer	9	9	9	9			
Sub-total	<u>107</u>	<u>107</u>	<u>107</u>	<u>107</u>			
Health Education and Smoking Co	Health Education and Smoking Cessation						
Senior Medical & Health Officer	1	1	1	1			
Medical & Health Officer/ Contract Doctor	2	1	1	1			
Scientific Officer (Medical)	1	1	1	1			
Nursing Officer/ Registered Nurse/ Contract Nurse	4	3	3	3			
Hospital Administrator II/ Health Promotion Officer/	6	4	4	4			
Sub-total	<u>14</u>	<u>10</u>	<u>10</u>	<u>10</u>			
Administrative and General Supp	<u>ort</u>						
Senior Executive Officer/ Executive Officer	4	4	4	4			
Clerical and support staff	19	17	17	17			
Motor Driver	1	1	1	1			
Sub-total	<u>24</u>	<u>22</u>	<u>22</u>	<u>22</u>			
Total no. of staff:	<u>146</u>	<u>140</u>	<u>140</u>	<u>140</u>			

Reply Serial No.

S-FHB(H)15

CONTROLLING OFFICER'S REPLY

(Question Serial No. SV024)

<u>Head</u>: (37) Department of Health

Subhead (No. & title): (-) Not Specified

<u>Programme</u>: (1) Statutory Functions

<u>Controlling Officer</u>: Director of Health (Dr. Constance CHAN)

<u>Director of Bureau</u>: Secretary for Food and Health

Question:

The Administration is requested to provide information on the number of cases in the past three years where fixed penalty tickets issued by the Tobacco Control Office (TCO) were not paid on time, and the proportion of these cases that involved Mainland people.

Asked by: Hon CHAN Chi-chuen

Reply:

As of 2 April 2015, there were a total of 121, 177 and 304 fixed penalty notices which have not been settled in 2012, 2013, and 2014 respectively. Among them, 55, 104, and 224 were issued to Hong Kong Identity Card holders in 2012, 2013, and 2014 respectively. TCO does not have information on the nationality of the smoking offenders.