立法會 Legislative Council

LC Paper No. CB(2)843/19-20 (These minutes have been seen by the Administration)

Ref : CB2/PL/HS

Panel on Health Services

Minutes of policy briefing held on Monday, 21 October 2019, at 5:00 pm in Conference Room 2 of the Legislative Council Complex

Members present	:	Dr Hon CHIANG Lai-wan, SBS, JP (Chairman) Hon CHAN Hoi-yan (Deputy Chairman) Hon WONG Ting-kwong, GBS, JP Hon Starry LEE Wai-king, SBS, JP Hon CHAN Hak-kan, BBS, JP Hon CHAN Kin-por, GBS, JP Dr Hon Priscilla LEUNG Mei-fun, SBS, JP Hon Mrs Regina IP LAU Suk-yee, GBS, JP Hon YIU Si-wing, BBS Hon MA Fung-kwok, SBS, JP Hon CHAN Chi-chuen Hon CHAN Han-pan, BBS, JP Hon Alice MAK Mei-kuen, BBS, JP Dr Hon KWOK Ka-ki Dr Hon Helena WONG Pik-wan Hon Elizabeth QUAT, BBS, JP Hon POON Siu-ping, BBS, MH Dr Hon Junius HO Kwan-yiu, JP Hon SHIU Ka-fai, JP Hon Wilson OR Chong-shing, MH Hon YUNG Hoi-yan, JP Dr Hon Pierre CHAN Hon KWONG Chun-yu
Members absent	:	Hon Abraham SHEK Lai-him, GBS, JP Hon Tommy CHEUNG Yu-yan, GBS, JP Prof Hon Joseph LEE Kok-long, SBS, JP Hon WONG Kwok-kin, SBS, JP

	Hon Steven HO Chun-yin, BBS Hon LEUNG Che-cheung, SBS, MH, JP Dr Hon Fernando CHEUNG Chiu-hung Hon CHU Hoi-dick Hon HO Kai-ming Hon SHIU Ka-chun Hon SHIU Ka-chun Hon LUK Chung-hung, JP Hon LAU Kwok-fan, MH Hon Kenneth LAU Ip-keung, BBS, MH, JP Hon Vincent CHENG Wing-shun, MH, JP
Public Officers : attending	Prof Sophia CHAN Siu-chee, JP Secretary for Food and Health
	Ms Elizabeth TSE Man-yee, JP Permanent Secretary for Food and Health (Health)
	Dr CHUI Tak-yi, JP Under Secretary for Food and Health
	Mr Howard CHAN Wai-kee, JP Deputy Secretary for Food and Health (Health) 1 Food and Health Bureau
	Miss Amy YUEN Wai-yin, JP Deputy Secretary for Food and Health (Health) 2 Food and Health Bureau
	Dr CHEUNG Wai-lun, JP Project Director, Chinese Medicine Hospital Project Office Food and Health Bureau
	Miss Lily LEE Lee-man Acting Deputy Secretary for Food and Health (Health) 3/ Principal Assistant Secretary for Food and Health (Health) 4 Food and Health Bureau
	Dr Constance CHAN Hon-yee, JP Director of Health
	Dr Amy CHIU Pui-yin, JP Controller, Regulatory Affairs Department of Health

		Dr Tony KO Pat-sing Chief Executive Hospital Authority
		Dr Deacons YEUNG Tai-kong Director (Cluster Services) Hospital Authority
Clerk in attendance	:	Ms Maisie LAM Chief Council Secretary (2) 5
Staff in attendance	:	Miss Kay CHU Senior Council Secretary (2) 5
		Mr Ronald LAU Council Secretary (2) 5
		Miss Maggie CHIU Legislative Assistant (2) 5

I. Briefing by the Secretary for Food and Health on the Chief Executive's 2019 Policy Address [LC Paper No. CB(2)13/19-20(01), The Chief Executive's 2019 Policy Address and The Chief Executive's 2019 Policy Address Supplement]

At the invitation of the Chairman, <u>Secretary for Food and Health</u> ("SFH") briefed members on the policy initiatives in respect of health matters set out in the Chief Executive's 2019 Policy Address ("the 2019 Policy Address"), details of which were set out in the Administration's paper (LC Paper No. CB(2)13/19-20(01)). The speaking note of SFH (LC Paper No. CB(2)36/19-20(01)) was tabled at the meeting.

Admin 2. <u>The Chairman</u> requested the Administration to provide a written response to the issues raised by Mr SHIU Ka-chun in his letter dated 21 October 2019 concerning the policy initiatives in respect of health matters set out in the 2019 Policy Address (LC Paper No. CB(2)36/19-20(02)), which was tabled at the meeting.

Service capacity of the Hospital Authority

3. Sharing the observation from her recent visit to Taiwan to understand its healthcare system that people in general were satisfied with

the system, the Chairman urged the Administration to improve Hong Kong's healthcare system. Dr KWOK Ka-ki expressed disappointment that there was no commitment in the 2019 Policy Address to shorten the unduly long waiting time for specialist outpatient ("SOP") services provided by the Hospital Authority ("HA"), in particular diagnostic investigations, which could stand as long as four years as revealed by a study. Ms Starry LEE criticized that while an aim of the 2019 Policy Address was to address deep-seated social problems, she saw no new macro policies to address the long-standing healthcare problems such as long service waiting time. inadequate hospital beds, healthcare manpower shortage, and slow progress in introducing new drugs into the Drug Formulary of HA. Mr Wilson OR said that many residents of the Kowloon East Cluster were discontent with the long waiting time for public SOP services, in particular cataract surgeries and the specialty of Orthopaedics and Traumatology, and the inadequacy of evening public general outpatient service. However, the 2019 Policy Address lacked initiatives in healthcare. The Chairman opined that HA should set a target for shortening the waiting time for its SOP services.

4. SFH advised that to ease enormous pressure on the public healthcare system, the Administration embarked on shifting the emphasis of the present healthcare system and mindset from treatment-oriented to prevention-focused in the provision of primary healthcare services. As announced in the 2019 Policy Address, following the commencement of operation of the first District Health Centre ("DHC") in Kwai Tsing, fullfledged DHCs in six more districts and "DHC Express" in the remaining 11 districts would be established within the term of the current Government. It should be noted that the Administration had continuously increased the recurrent funding for HA and had undertaken to increase the recurrent funding progressively on a triennium basis having regard to population growth and demographic changes to enable HA to address service demands in a more effective and sustained manner. There were also a number of hospital projects in the pipeline under the 10-year Hospital Development The provision of additional recurrent funding in the 2019-2020 Plan. Budget for HA to implement enhancement measures to boost staff morale and retain talents and the increase in the number of local medical graduates to 420 would help alleviate the healthcare manpower shortage problem of HA. Chief Executive, HA ("CE, HA") supplemented that HA was exploring various ways to manage demand for its specialist services. For instance, a Glaucoma Public-Private Partnership Programme was recently launched for suitable patients to opt for specialist services from private ophthalmologists.

5. <u>Mr SHIU Ka-fai</u> urged HA to make better use of the capacity of the private healthcare sector and the manpower of non-locally trained medical

Admin/ HA practitioners to ensure that patients could receive medical treatment in a timely manner. <u>Ms Elizabeth QUAT</u> requested the Administration and HA to advise in writing the new measure(s) putting in place for shortening the waiting time for public healthcare services, in particular SOP services; and attracting more qualified non-locally trained specialist medical practitioners to serve in the public healthcare sector.

6. Referring to the high wastage rate of specialist doctors and the provision of additional recurrent funding in the 2019-2020 Budget for HA on staff retention measures, <u>Ms CHAN Hoi-yan</u> asked about the concrete measures in place to alleviate the healthcare manpower constraint and boost staff morale of HA by, say, improving the working environment. <u>CE, HA</u> advised that HA had adopted a multi-pronged approach in addressing the issue of healthcare manpower constraint. Measures in place to attract and retain healthcare professionals included enhancing training opportunities; continuation of Special Retired and Rehire Scheme to attract suitable serving healthcare professionals to rejoin upon their retirement; recruitment of part-time clinical staff to further increase manpower strength; and making use of the \$5 billion earmarked fund to expedite the upgrading and acquisition of medical equipment.

Healthcare manpower projection

7. Pointing out that many members considered that findings of the first round healthcare manpower projection exercise released in June 2017 did not accurately reflect the manpower situation in the professions concerned, <u>Ms CHAN Hoi-yan</u> asked how the Administration would address the above concern in the present round of projection exercise which was expected to be completed in 2020. <u>SFH</u> advised that the projection exercise would take into account, among others, externalities and policy interventions as well as the known manpower shortage in the public and subvented sectors. Subject to the findings of the manpower projection, the Administration would formulate relevant policies on sustaining the manpower of the healthcare profession. <u>The Chairman</u> proposed that arrangements should be made to enable members of the Panel to meet with representatives of The University of Hong Kong ("HKU"), which was commissioned to conduct the projection, to exchange views on the present round of manpower projection exercise.

Professionalism of HA's healthcare personnel

8. <u>Dr KWOK Ka-ki</u> and <u>Dr Helena WONG</u> were worried about the carrying out of investigation and arrests by the Police in public hospital premises during the recent social events. In particular, <u>Dr Helena WONG</u> was concerned about whether healthcare professionals' decision to contact

the family members of patients in the interest of the patients concerned would be overridden. Apart from the above, <u>Mr CHAN Chi-chuen</u> was concerned about the impacts brought about by the holding of petition activities by members of the public in public hospital premises, the doxxing cases on healthcare staff of HA and the arrest of healthcare personnel who provided first aid services at the scene to persons injured during enforcement actions on the morale of HA's healthcare staff. He also sought clarification as to whether the Police could access to patient information through the Accident and Emergency ("A&E") Information System in the A&E Departments of public hospitals, which, in his view, might deter injured people from seeking treatment in public hospitals. <u>Mr SHIU Ka-fai</u> opined that HA should make timely public statements to clarify any fake news or rumours concerning the co-operation between the frontline Police officers and frontline staff of HA.

9. <u>SFH</u> advised that arising from the recent social events, there were so far some 1 300 attendances at the A&E Departments of public hospitals. To strengthen communication and operation of HA and the Police at both headquarters and district levels, a two-tier communication platform had been set up. <u>CE, HA</u> supplemented that at head office level, management of both parties would meet regularly to discuss on policy issues. At district level, police district which had hospital with A&E service had set up a liaison mechanism with the hospital concerned to enhance mutual trust and cooperation. <u>Dr Helena WONG</u> requested HA to advise in writing the policies and measures putting in place by HA for enhancing communication with the Police to ensure the provision of a safe and stable environment for patients in public hospitals.

Referring to the hate speech targeted the Police posted by some 10. healthcare staff of HA on social media in their personal capacity, Ms Starry LEE remarked that some police officers were worried that public hospitals might not be able to provide equitable services to them. She asked about the measures put in place by the Administration and HA to ease such Pointing out that there were cases where staff of HA wore concern. symbols to indicate their political stance in the workplace and hold mass gatherings in public hospital premises, Ms Elizabeth QUAT raised a similar question. Mr CHAN Han-pan expressed concern about the expression of political stance by the healthcare personnel of HA in their workplace and that some frontline police officers were being impolitely treated by medical staff at the A&E Department of public hospitals. Mr SHIU Ka-fai urged HA to ensure that the views and actions of its healthcare staff would not give rise to any conflict with their professional duties. Dr Helena WONG was confident that healthcare professionals would maintain professionalism in the provision of services and should enjoy the right to express their

Admin/ HA views on social issues when they were off duty. She, however, was concerned about whether the management of HA could uphold the principle of political neutrality in the face of external political pressure.

11. <u>SFH</u> and <u>CE</u>, <u>HA</u> advised that HA had reminded its frontline staff members that public hospital premises were not suitable places for public assemblies, and they should continue to uphold professionalism and mutual respect to provide equitable service regardless of patients' identity and background. Staff expressing views should be mindful of the perceptions of patients and their families, as well as relations with the patients. In addition, it was inappropriate to use any offensive and insulting language in their expression of views. <u>CE</u>, <u>HA</u> added that he had maintained close communication with staff of different clusters to understand and address their concerns. <u>The Chairman</u> urged HA to explore more concrete ways to ensure that its staff would uphold the principle of political neutrality in service delivery, no matter what their own political beliefs were.

Health effect of tear gas

12. Mr KWONG Chun-yu questioned how the Food and Health Bureau ("FHB") would address the community's public health concern arising from the use of tear gas by the Police in dispersal operations. To his understanding, tear gas residues could remain on surface of objects where they settled for two to three weeks. SFH and Director of Health ("DoH") advised that in general, post-exposure symptoms to tear gas might include stinging and burning sensation to eyes and other mucous membranes, tearing, salivation, runny nose, tight chest, headache, nausea, burning sensation of skin, and erythema of skin. These symptoms would usually disappear within a short time after exposure to tear gas. Skin exposed to tear gas should be washed thoroughly with water and soap and contaminated clothing should be changed. Eyes with discomfort should be irrigated with large amount of water or saline. Individuals who had persistent symptoms should promptly seek medical advice. SFH further advised that the Food and Environmental Hygiene Department had issued guidelines to its employees and cleansing service contractors on the points to note on cleaning chemical residues.

Prevention and treatment of diseases

13. <u>Mr Wilson OR</u> said that he did not see how the current mode of operation of the first DHC in Kwai Tsing could effectively achieve the objective of establishing a prevention-focused primary healthcare system. In his view, the Administration should engage the community to ensure that DHCs to be set up in other districts could better cater for the primary

healthcare needs and characteristics of the districts concerned. While welcoming the Administration's commitment to expedite the setting up of DHCs or "DHC Express" in the remaining 17 districts to enhance primary healthcare, <u>Ms CHAN Hoi-yan</u> urged the Administration to ensure that there would be adequate healthcare manpower to meet the service demand. <u>Mr POON Siu-ping</u> sought elaboration about the Administration's plan to expedite the setting up of DHCs in six more districts and whether manpower constraint was the reason why smaller interim "DHC Express" but not DHCs would be set up in the remaining 11 districts. <u>Dr Helena</u> WONG raised a similar question.

14. <u>SFH</u> explained that after having taken into account the time needed to identify suitable sites for setting up DHCs and to issue invitation to tender for the provision of services to operate the DHCs concerned for a three-year operation period, it was expected that six more DHCs, the premises of which had been identified, could be established within the term of the current Government. As a next step, the invitation to tender for the DHCs in Sham Shui Po and Wong Tai Sin would be issued by the end of 2019. For the remaining 11 districts where full-fledged DHCs would yet to be set up within the term of the current Government, the Administration planned to allocate around \$600 million over a three-year period to fund non-governmental organizations ("NGOs") to set up "DHC Express" by way of invitation for proposals. These "DHC Express" services would migrate as appropriate to the local DHC at a later stage. In the longer term, it was expected that all 18 DHCs would be operated in permanent premises.

15. At the suggestion of the Chairman, <u>SFH</u> undertook to arrange members of the Panel to pay a visit to DHC in Kwai Tsing to facilitate their better understanding of its operation.

16. <u>Mr KWONG Chun-yu</u> sought confirmation from the Administration that the wearing of surgical masks for preventing infection of seasonal influenza would not contravene the Prohibition on Face Covering Regulation (Cap. 241K), under which "facial covering" was defined as "a mask or any other article of any kind (including paint) that covered all or part of a person's face". <u>SFH</u> stressed that the prohibition on the use of facial covering is applicable only to those events regulated under the Regulation. The receiving of vaccination, the maintaining of good personal and environmental hygiene and the wearing of surgical masks to prevent the infection and transmission of diseases had all long been effective ways to prevent seasonal influenza.

17. Pointing out that vaccination was one of the effective means to prevent seasonal influenza and its complications and that Macao had

provided free seasonal influenza vaccination to students of kindergartens, primary schools, secondary schools and higher educational institutions, <u>Ms CHAN Hoi-yan</u> asked whether the Administration would consider providing free seasonal influenza vaccination to all Hong Kong residents. <u>SFH</u> advised that free and subsidized seasonal influenza vaccination were currently provided to the target groups which were generally at a higher risk. It would step up its publicity efforts to encourage more people to receive vaccination for the prevention of seasonal influenza.

18. <u>Ms YUNG Hoi-yan</u> welcomed the initiative to provide pregnant women with one dose of acellular pertussis-containing vaccine during each pregnancy which members had called for. She sought information about the implementation details of the initiative. <u>DoH</u> advised that the Department of Health ("DH") was actively planning the implementation in collaboration with HA with the target to incorporate the vaccination as part of routine antenatal care services provided by public hospitals and Maternal and Child Health Centres starting from mid-2020.

19. <u>Dr KWOK Ka-ki</u> asked whether any new measures would be introduced to enhance HA's services for people with mental health needs, especially those with dementia and students with special educational needs. <u>CE, HA</u> advised that having made reference to the practice of other places, HA planned to leverage on paediatricians to handle relatively mild and stable attention deficit/hyperactivity disorder cases to relieve the pressure of its child and adolescent psychiatric services.

20. <u>Dr KWOK Ka-ki</u> expressed concern that many cancer patients in need of expensive therapy drugs for treatment were unable to receive financial assistance under the safety net. In response to Mr Wilson OR's enquiries about the measures in place to improve the quality of life of cancer patients, <u>SFH</u> advised that one of the measures put forward in the Hong Kong Cancer Strategy was the setting up of a "Cancer Network of Partners" to pool together all key resources available and align community efforts with a view to strengthening all-round support to cancer patients, cancer survivors and carers.

21. <u>The Chairman</u> asked about the progress of the commissioned study by HKU on risk factors associated with breast cancer for local women. <u>SFH</u> advised that the study was expected to be completed in the latter half of 2019. The Cancer Expert Working Group on Cancer Prevention and Screening under the Cancer Coordinating Committee would consider the findings of the study and make recommendations to the Administration on the type of screening to be adopted for women of different risk profiles.

Uncommon disorders and genomic medicine

Action

22. Mr CHAN Han-pan called for the introduction of prenatal screening for uncommon disorders to help identify the genetic conditions before He sought elaboration about how the Administration would take birth. forward the Hong Kong Genome Project to develop databases for, among others, uncommon genetic disorders to facilitate diagnosis and treatment. SFH advised that the setting up of the Hong Kong Genome Institute in 2020 to co-ordinate the implementation of the Project would help enhance the diagnostic rate of uncommon disorders and promote research on hereditary diseases. CE, HA added that the handling of uncommon and genetic paediatric cases centrally at the Hong Kong Children's Hospital with the pooling of advanced equipment and expertise would enable more targeted clinical management. In response to the Chairman's question about the site for the Hong Kong Genome Institute, SFH advised that one of the possible locations would be in the Hong Kong Science Park.

23. <u>Ms YUNG Hoi-yan</u> considered that the objective of establishing genomic databases should go beyond enhancing the local diagnostic rate of uncommon disorders but enable Hong Kong to become a leader in research on genomic medicine for treatment, which would in turn contribute towards making the treatment more affordable to the local population. <u>SFH</u> advised that places such as the United Kingdom and Singapore had already developed genomic medicine for years. As a start, the policy objectives of the Hong Kong Genome Project were to enhance clinical application of genomic medicine to benefit patients and their families, and to promote research in genomic medicine and related field to facilitate future medical development in Hong Kong. Local universities had indicated strong support for the Project and keen interest in participation.

[At 6:29 pm, the Chairman informed members of her decision to extend the policy briefing for 15 minutes beyond its appointed ending time to allow more time for discussion.]

Development of Chinese medicine

24. <u>Mr POON Siu-ping</u> was concerned about the number of prequalified tenderers to be identified through the prequalification exercise for the operation of the Chinese Medicine Hospital launched in September 2019 and the Administration's timetable for seeking the Finance Committee's approval for the funding proposal for the construction of the Hospital. <u>SFH</u> advised that more than 10 interested parties had attended the briefing session of the prequalification exercise conducted in late September 2019. The Administration intended to identify not more than four applicants as

prequalified tenderers to participate in the official tender process scheduled for mid-2020. The relevant funding proposals would be submitted to the Finance Committee for consideration at a later stage for the commencement of the Hospital's operation in phases by end of 2024 the earliest.

25. Referring to the Administration's plan to further review the remuneration package, promotion and training opportunities for staff employed in the Chinese Medicine Centres for Training and Research to enhance their career prospects, <u>Mr POON Siu-ping</u> asked about the timetable in this regard. <u>SFH</u> advised that the Administration had allocated additional funding for the operating NGOs to increase the salaries of staff including the Chinese Medicine Practitioners at all ranks in the past two years.

Dental care services

26. <u>Ms Starry LEE</u>, <u>Ms Elizabeth QUAT</u> and <u>Mr Wilson OR</u> were concerned that the existing public dental care service was far from adequate to meet the dental care needs of members of the public. <u>Ms CHAN Hoi-yan</u> called on the Administration to consider extending the School Dental Care Service of DH to cover all secondary students and increasing the annual amount of the Elderly Health Care Voucher to address the dental care needs of the elders. <u>SFH</u> advised that a Special Oral Care Service had been set up by DH in the third quarter of 2019 in the Hong Kong Children's Hospital to provide dental care for pre-school children under six years old with intellectual disabilities. In addition, children under six years old with intellectual disabilities who were receiving service at Special Child Care Centres under the Social Welfare Department would be provided with free on-site oral examination and oral health education.

Regulation of pharmaceutical products and private healthcare facilities

27. <u>Dr Helena WONG</u> asked about the measures put in place by the Administration to combat the emergence of suspected counterfeit vaccines in the market. <u>DoH</u> advised that acting upon a complaint, DH and Hong Kong Customs and Excise ("C&ED") had conducted joint enforcement action in July 2019 with suspected counterfeit human papillomavirus ("HPV") vaccines being seized. Investigations of the case were ongoing. In the meantime, DH had stepped up inspections to combat the import, use and export of unregistered 9-valent HPV vaccine; liaised with the licensed vaccine dealers on the adoption of track-and-trace technology; and provided information on Import Licences and Export Licences of 9-valent HPV vaccine to C&ED to facilitate inspection. On education front, DH had reminded registered healthcare professionals to procure registered

pharmaceutical products only from licensed dealers, and discussed with the Consumer Council on promotion and publicity targeted at consumers.

28. Noting that a medical centre was involved in the use of unregistered HPV vaccines, <u>the Chairman</u> asked about the regulatory regime for such centres. <u>Controller, Regulatory Affairs, DH</u> advised that a medical centre which fell within the meaning of private healthcare facility under the Private Healthcare Facilities Ordinance (Cap. 633) would be subject to regulation. The regulatory regime would be implemented in phases based on the types of private healthcare facilities and their risk levels.

Voluntary Health Insurance Scheme

Admin 29. At the request of the Chairman, <u>SFH</u> undertook to advise in writing the number of people who had purchased Certified Plans under the Voluntary Health Insurance Scheme ("VHIS") since its launch in April 2019 when the relevant figures were available. She added that 55 Certified Plans under VHIS were introduced into the market, offering more than 200 products for consumers' choice.

II. Any other business

30. There being no other business, the meeting ended at 6:45 pm.

Council Business Division 2 Legislative Council Secretariat 22 April 2020