

立法會

Legislative Council

LC Paper No. CB(4)531/20-21
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by the Administration)

Ref : CB4/PL/HS

Panel on Health Services

Minutes of meeting
held on Friday, 20 March 2020, at 10:45 am
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 Tommy CHEUNG Yu-yan, GBS, JP
 - Prof Hon Joseph LEE Kok-long, SBS, JP
 - Hon WONG Ting-kwong, GBS, JP
 - Hon Starry LEE Wai-king, SBS, JP
 - Hon CHAN Kin-por, GBS, JP
 - Hon YIU Si-wing, BBS
 - Hon CHAN Chi-chuen
 - Hon CHAN Han-pan, BBS, JP
 - Hon Alice MAK Mei-kuen, BBS, JP
 - Dr Hon KWOK Ka-ki
 - Dr Hon Fernando CHEUNG Chiu-hung
 - Dr Hon Helena WONG Pik-wan
 - Hon Elizabeth QUAT, BBS, JP
 - Hon POON Siu-ping, BBS, MH
 - Hon CHU Hoi-dick
 - Hon SHIU Ka-fai, JP
 - Hon SHIU Ka-chun
 - Dr Hon Pierre CHAN
 - Hon KWONG Chun-yu
- Members attending** :
- Hon James TO Kun-sun
 - Hon Michael TIEN Puk-sun, BBS, JP
 - Hon WU Chi-wai, MH
 - Hon Charles Peter MOK, JP
 - Ir Dr Hon LO Wai-kwok, SBS, MH, JP
 - Hon Tanya CHAN

Hon Jeremy TAM Man-ho

**Member
absent** : Hon Mrs Regina IP LAU Suk-ye, GBS, JP

**Public Officers : Item III
attending**

Prof Sophia CHAN Siu-chee, JP
Secretary for Food and Health

Miss Amy YUEN Wai-yin, JP
Deputy Secretary for Food and Health (Health) 2
Food and Health Bureau

Dr Cissy CHOI Yu-sze
Head (Primary Healthcare Office)
Food and Health Bureau

Item IV

Prof Sophia CHAN Siu-chee, JP
Secretary for Food and Health

Ms Leonie LEE Hoi-lun
Principal Assistant Secretary for Food and Health (Health)1
Food and Health Bureau

Dr WONG Ka-hing, JP
Controller, Centre for Health Protection
Department of Health

Dr CHUNG Kin-lai
Director (Quality & Safety)
Hospital Authority

Dr Vivien CHUANG
Chief Manager (Infection, Emergency & Contingency)
Hospital Authority

Item V

Dr CHUI Tak-yi, JP
Under Secretary for Food and Health

Miss Trista LIM Mei-yee
Principal Assistant Secretary for Food and Health (Health)2
Food and Health Bureau

Ms Maisie HO Mei-chi
Principal Assistant Secretary for Food and Health (Health)5
Food and Health Bureau

Dr Deacons YEUNG
Director (Cluster Services)
Hospital Authority

Dr TOM Kam-tim
Cluster Chief Executive
Kowloon East Cluster
Hospital Authority

Dr Christina MAW
Hospital Chief Executive
Grantham Hospital
Hospital Authority

Dr CHAN Kam-hoi
Chief Manager (Planning & Commissioning
Section), Hong Kong West Cluster
Hospital Authority

Dr David SUN
Hospital Chief Executive, North District Hospital
Hospital Authority

Dr Michael WONG
Deputy Hospital Chief Executive, North Lantau Hospital
Hospital Authority

Mr Donald LI
Chief Manager (Capital Planning)
Hospital Authority

Mr Michael LI Kiu-yin
Project Director/2
Architectural Services Department

Mr Ben Yeung King-on
Senior Project Manager 127
Architectural Services Department

Mr Anfield CHIU Chun-ting
Senior Project Manager 227
Architectural Services Department

Dr Teresa LI Mun-pik
Assistant Director of Health (Health Administration
& Planning)
Department of Health

Mr Charles LEUNG Sai-cheong
Chief Social Work Officer (RM)2
Social Welfare Department

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

Action

I. Information paper(s) issued since the last meeting
[LC Paper Nos. CB(2)727/19-20(1) and CB(2)731/19-20(01)]

Members noted that the following papers had been issued since the last meeting:

- (a) letter dated 17 March 2020 from Mr CHAN Han-pan suggesting the Panel to discuss the effectiveness of the internal auditing mechanisms of the Department of Health ("DH") and the Hospital Authority ("HA"); and
- (b) referral from the Subcommittee on Issues Relating to the Support for Cancer Patients on the implementation of breast cancer screening in Hong Kong.

Action

II. Items for discussion at the next meeting

[LC Paper Nos. CB(2)711/19-20(01) and (02)]

2. Members noted that the Administration had not proposed any items for discussion at the next regular meeting of the Panel scheduled for Friday, 3 April 2020, at 10:45 am.

3. Mr CHAN Han-pan said that as set out in his letter dated 17 March 2020 (LC Paper No. CB(2)727/19-20(01)), he requested the Panel to study at its future meeting the respective internal audit reports of DH and HA so as to examine their efficiency in discharging their functions, in particular the reasons for the long waiting time for HA's specialist outpatient services. Separately, Ms Elizabeth QUAT requested the Administration to timely revert to the Panel on the findings of the commissioned study conducted by The University of Hong Kong on risk factors associated with breast cancer for local women. The Chairman instructed the Clerk to follow up with the Administration on the proposed timing for discussion of the above subjects and the items for discussion at the April regular meeting.

(Post-meeting note: Members were informed vide LC Paper No. CB(2)758/19-20 on 31 March 2020 of the Chairman's decision to reschedule the April regular meeting to a later date in view of the situation of the outbreak of coronavirus disease 2019 ("COVID-19") in Hong Kong. Subsequently, members were informed vide LC Paper No. CB(2)819/19-20 on 15 April 2020 that the April regular meeting would be held on 24 April 2020 to discuss the measures for the prevention and control of COVID-19 in Hong Kong.)

III. Development of primary healthcare and setting up of DHC Express

[LC Paper Nos. CB(2)468/19-20(10) to (11) and CB(2)734/19-20(01) to (03)]

4. At the invitation of the Chairman, Secretary for Food and Health ("SFH") briefed members on the progress in establishing District Health Centres ("DHCs") and the introduction of the "DHC Express" Scheme, details of which were set out in the Administration's paper (LC Paper No. CB(2)468/19-20(10)).

5. Members noted the background brief prepared by the Legislative Council ("LegCo") Secretariat (LC Paper No. CB(2)468/19-20(11)); the letter dated 19 March 2020 from Dr Pierre CHAN (LC Paper No. CB(2)734/19-20(01)); and two submissions from The Osteoporosis

Action

Management Primary Care Task Force and 聚賢社 respectively (LC Paper Nos. CB(2)734/19-20(02) and (03)) on the subject under discussion.

Service scope of DHCs and "DHC Express"

6. Expressing support for the setting up of DHCs and "DHC Express", Ms Alice MAK called on the Administration to step up its publicity and promotion on the newly employed service model which shifted from treatment-oriented to prevention-focused. SFH advised that efforts had been and would continue to be made by the operator of the first DHC set up in the Kwai Tsing District ("K&TDHC") to promote its primary, secondary and tertiary prevention services, with a view to enhancing the understanding and acceptance of members of the public of the new service model.

7. Mr SHIU Ka-chun enquired whether K&TDHC had met the target attendance of 4 500 per month since it commenced operation in September 2019. Head (Primary Healthcare Office), Food and Health Bureau ("H(PHO))" advised that there was a progressive increase in the monthly service attendance of K&TDHC. The Administration would provide the requisite information in writing after the meeting.

Admin

8. The Chairman said that the Subcommittee on Issues Relating to the Support for Cancer Patients had passed a motion at its meeting on 17 March 2020 requesting the Administration to, among others, incorporate cancer-related items in the service scope of DHC and "DHC Express", which should cover not only those relating to the lowering of cancer-related health risk factors but also public education and simple medical check-up services to enable early identification of the disease among members of the public. She called on the Administration to take necessary action in this regard.

9. Ms Alice MAK considered that the service scope of DHCs and "DHC Express" should cover osteoporosis and stroke prevention education as well as screening services to facilitate early identification of the two diseases. Pointing out that there was an increasing number of elders suffering from osteoporosis, Ms CHAN Hoi-yan urged the Administration to extend the scope of the chronic disease management service of DHC to cover the disease. Prof Joseph LEE was concerned that speech therapy was not provided at K&TDHC on a full-scale service wide basis. Dr KWOK Ka-ki asked if the Administration had consulted residents of the catchment districts on the service scope of each DHC and "DHC Express".

Action

10. SFH advised that while the screening services of K&TDHC would focus on the target chronic diseases as identified through the earlier studies on the district-based health data, the operator would continue to broaden the scope of the primary prevention to cover, among others, more female health issues including osteoporosis. Considering the population portfolio in Kwai Tsing, the service scope would also be enhanced to cover the ethnic minorities. H(PHO) added that depending on the need of the clients, speech therapy was one of the components of the stroke rehabilitation programme of K&TDHC.

11. To ration the use of the resources earmarked for the development of primary healthcare, Ms CHAN Hoi-yan considered that the Administration should specify the percentage of the funding to be used by the operators of DHCs for the provision of different types of services such as health promotion, health assessment, acute and chronic disease management, and support to persons with disabilities and terminal illness. SFH and H(PHO) advised that the tender document for the operation of K&TDHC had set out the service output targets in respect of the annual attendance for the health promotion, health assessment, chronic disease management and community rehabilitation services. A management committee had been set up to oversee the operation of K&TDHC.

12. Dr Fernando CHEUNG was gravely concerned that while the district-based primary healthcare service provided by DHCs were positioned by the Administration as a key component of the public healthcare system, K&TDHC had failed to provide the general public with advice on prevention of COVID-19 and relevant health assessment and referral services at the district level during the epidemic but had closed for more than a month. The Chairman opined that K&TDHC should at least provide half-day onsite services amid the epidemic to meet the service demand at district level. Mr CHAN Chi-chuen was of the view that K&TDHC and other future DHCs should play a greater role in the prevention and control of communicable diseases. Taking the epidemic of COVID-19 as an example, K&TDHC could collect market information on the supplies and price levels of surgical masks, provide viral testing services and conduct surprise visits to ensure persons under home quarantine were staying at their dwelling places. Dr Pierre CHAN remarked that while doctors in private practice had an important role to play in the fight against the epidemic in the primary healthcare setting, they were neither being included as part of the core team of staff of DHCs nor a party covered under the Anti-epidemic Fund. He expressed regret at the primary healthcare policy of the current term Government.

Action

13. SFH and H(PHO) advised that while K&TDHC had suspended its onsite services for a certain period of time during the epidemic, it had maintained its health promotion and care consultation services through telephone and social media platform as appropriate. The operator of K&TDHC would continue to explore the use of information technology and would further develop virtual platforms with a view to maintain services and case follow up during the epidemic. At present, K&TDHC had resumed part of its services whereby individual direct services would be provided by appointment. Online workshops on anti-epidemic and other health topics would continue to be organized to provide health related information to the general public. The operator had also been requested to submit a work plan on how K&TDHC could further strengthen its work in the fight against the epidemic for consideration of the Administration. It should also be noted that the network service providers of K&TDHC included private doctors.

Setting up of DHCs or "DHC Express" in the remaining 17 districts

14. Given that the Administration had so far only set up one DHC, Prof Joseph LEE cast doubt on how the Administration could achieve its target of establishing another six full-fledged DHCs and 11 smaller interim "DHC Express" within the term of the current Government. He sought information on the concrete timetable of the Administration in this regard. SFH advised that the invitation to tender for the provision of services to operate the DHCs in Sham Shui Po ("SSP") and Wong Tai Sin ("WTS") was issued in December 2019 and that for the operation of the DHCs in Tsuen Wan, Yuen Long, Tuen Mun and Southern District was planned to be issued in end-2020 or early 2021. Non-governmental organizations ("NGOs") would be identified to operate "DHC Express" by way of invitation of proposals in the third quarter of 2020. The premises for "DHC Express" would be proposed by the NGOs. The Food and Health Bureau ("FHB") would set up an assessment panel comprising representatives from the Bureau and other related bureaux or departments to evaluate and select an NGO operator for each district. "DHC Express" in the various districts were expected to commence services in 2021.

15. Ms CHAN Hoi-yau was concerned about whether the timing for the setting up of the two DHCs in SSP and WTS would be affected by the epidemic of COVID-19. Mr SHIU Ka-chun expressed concern about the impact of the epidemic on the setting up of six DHCs within the term of the current Government. In respect of the tendering exercises, he called on the Administration to learn from the experience gained from the invitation for tender for the operation of K&TDHC whereby SFH was the honorary patron of the entity which was awarded the operation service contract and

Action

ensure that all future tendering processes were open and fair. SFH assured members that all tender exercises had been conducted in an open, fair and impartial manner. She further advised that while the tender period for the provision of services to operate the DHCs in SSP and WTS had been extended from February to April 2020 due to the outbreak of COVID-19, the target of having six other DHCs be established within the term of the current Government would not be affected.

16. Dr Helena WONG sought information on the location of the sites earmarked for setting up DHCs in the remaining 17 districts. Expressing concern that K&TDHC which was located in a commercial building in Kwai Chung was not easily assessable to many elderly service users, Dr KWOK Ka-ki was discontent that DH had not given thought to the proposal of setting up a DHC in the new premises of Tsing Yi Maternal and Child Health Centre to improve accessibility.

17. SFH and Deputy Secretary for Food and Health (Health) 2 advised that the Administration had secured the support of the relevant District Councils ("DCs") on the location of seven DHCs. For those identified permanent sites which could only be available in the longer term, FHB would work with the relevant bureaux and departments on the land use and other related matters, with a view to consulting all the relevant DCs on the locations within the term of the current Government. Dr Helena WONG requested the Administration to advise in writing the address of the seven DHCs, for which support of the relevant DCs in respect of their locations had been secured, and the timetable for consulting the other DCs on the locations of the remaining 10 DHCs.

Admin

Assessing the effectiveness of DHCs and "DHC Express"

18. Noting that the operation of each DHC would involve a recurrent expenditure of about \$100 million a year and the implementation of "DHC Express" over three years would involve a non-recurrent expenditure of about \$600 million, Dr KWOK Kai-ki queried whether the Administration would assess the effectiveness of these initiatives in improving the health of the population to ensure a prudent use of public resources as many patients could not gain access to expensive drugs of better clinical efficacy due to finite public resources. SFH advised that the Administration had commissioned the Jockey Club School of Public Health and Primary Care of The Chinese University of Hong Kong to conduct an evaluation of the effectiveness of K&TDHC, which currently had more than 2 600 registered members with a cumulative attendance of over 11 000, and its contribution to the healthcare system.

Action

IV. Measures for the prevention and control of Coronavirus Disease in Hong Kong

[LC Paper No. CB(2)734/19-20(04)]

19. At the invitation of the Chairman, SFH briefed members on the latest situation and measures being taken by the Administration to prevent and control the spread of COVID-19 in Hong Kong, details of which were set out in the Administration's paper (LC Paper No. CB(2)734/19-20(04)).

Immigration control measures and quarantine arrangements

20. Expressing concern about the average daily arrival of thousands of visitors to Hong Kong and the recent surge in the number of confirmed cases of COVID-19 in Hong Kong with the majority being imported cases or close contacts of the imported cases, Ms Elizabeth QUAT called on the Administration to restrict the entry of non-Hong Kong residents from high-risk overseas places such as Europe and the United States into Hong Kong so as to guard against a collapse of the healthcare system. Ms CHAN Hoi-yan considered that all non-Hong Kong residents should be denied entry to Hong Kong. This apart, all arrivals but not only those with upper respiratory symptoms should be required to undergo virus testing. Only those who were tested negative could go to their place of accommodation to observe compulsory quarantine. Ms Alice MAK called on the Administration to follow the practice of Macao to deny the entry of non-residents. Noting that there was still an average of more than 1 000 non-Hong Kong residents arriving Hong Kong by air per day in mid-March 2020, Mr Michael TIEN queried about the circumstances under which the Administration would take heed of Members' call to restrict non-Hong Kong residents from entering Hong Kong. The Chairman raised a similar question and sought information on statistics on daily passage traffic.

21. Dr Pierre CHAN opined that a complete closure of immigration control points, which the Administration had all along unwilling to implement, was of utmost importance to contain the spread of the disease. He was concerned about the contact point for reporting cases involving the provision of false or misleading information on travel history to health officers or medical practitioners. Dr Helena WONG remarked that the Democratic Party had long called for a complete closure of immigration control points to restrict the entry of non-Hong Kong residents. Noting that Taiwan, Australia, New Zealand and European Union had denied the entry of non-residents, Mr CHAN Chi-chuen asked whether the Administration would do so. Dr Fernando CHEUNG considered that all non-Hong Kong residents should be denied entry to Hong Kong in order to guard against imported cases and local outbreak. Dr KWOK Ka-ki queried when the

Action

Administration would restrict the entry of non-Hong Kong residents from places both inside and outside China and conduct virus testing for all Hong Kong residents upon their arrival at Hong Kong from other places. Expressing concern about the number of daily arrivals by air, Ms Tanya CHAN criticized that the steps so far taken by the Administration to fight against the epidemic showed that it was lack of foresight. Mr Charles MOK urged the Administration to take prompt action to restrict the entry of non-Hong Kong residents from places both inside and outside China. Mr James TO asked whether the Chief Executive had to first seek the view of the Central Government before making a decision in this regard.

22. SFH advised that the Chief Executive chaired the Steering Committee cum Command Centre in relation to COVID-19 to formulate relevant strategies and measures to tackle the disease. Since 27 January 2020, any Hubei Province and non-Hong Kong residents who had visited the Hubei Province in the past 14 days preceding arrival were restricted from entering Hong Kong to contain the spread of the disease. Since then, various immigration control and quarantine measures had been put in place at different times to respond to the development of the disease. According to the statistics of the Airport Authority Hong Kong, there were now on average around 10 000 travellers arriving at the Hong Kong International Airport ("HKIA") per day. During the past 14-day period, over 90% of the daily arrivals were Hong Kong residents. Based on the latest public health risk assessment, starting from 19 March 2020, all persons who had stayed in overseas places for any period during the 14 days preceding arrival in Hong Kong, regardless of whether they were Hong Kong residents, would be subject to 14-day compulsory quarantine in accordance with the Compulsory Quarantine of Persons Arriving at Hong Kong from Foreign Places Regulation (Cap. 599E). The Administration would suitably review and rationalize the immigration control measures having regard to the latest development of the outbreak. It would not rule out that more stringent measures would be put in place in the future.

23. Mr WU Chi-wai asked whether the Centre for Health Protection ("CHP") and HA had the capacity to conduct virus testing for all inbound travellers to minimize the risk of community transmission, regardless whether they were Hong Kong residents. SFH advised that the scope of the Enhanced Laboratory Surveillance Programme had been progressively extended to cover all inpatient pneumonia cases of HA, outpatients with fever or respiratory symptoms at HA's Accident and Emergency Departments and general outpatient clinics ("GOPCs"), and patients of all private clinics and hospitals so that cases of COVID-19 could be identified early in order to minimize the risk of community transmission. Controller, CHP of DH ("C/CHP") explained that given the limited testing capacity of

Action

DH and HA, resources would be reserved for suspected cases. At present, a total of about 2 000 virus tests were performed by CHP and HA per day.

24. Mr WONG Ting-kwong asked whether the Administration could extend the scope of exemption from the 14-day compulsory quarantine to cover those Hong Kong manufacturers with factories in the Mainland, who had genuine need for frequent travel between Hong Kong and the Mainland to support the operation and business of their factories. Mr SHIU Ka-fai raised a similar request, adding that the exemption could be subject to their being tested negative for COVID-19 on a virus test upon arriving Hong Kong. He remarked that the implementation of any immigration control measures had to ensure that supply of goods and daily necessities would not be affected. SFH advised that under the Compulsory Quarantine of Certain Persons Arriving at Hong Kong Regulation (Cap. 599C), the Chief Secretary for Administration was empowered to designate any person or category of persons to be exempted from the quarantine requirement if certain criteria were satisfied. They included that the person's or persons' entry into Hong Kong was necessary for the supply of goods or services required for the normal operation of Hong Kong or the daily needs of the people of Hong Kong. The Administration would keep reviewing the above arrangement.

25. Mr Charles MOK expressed concern about the workflow of implementing mandatory quarantine for inbound travellers arriving in Hong Kong by air with effect from 19 March 2020 as there were reports that some travellers arriving at HKIA had to queue up at a close distance with each other for hours. SFH advised that with the coming into operation of the test centres set up by HA at the AsiaWorld-Expo and the North Lantau Hospital starting from the date of this meeting, the overall operation had become smoother.

26. Mr CHU Hoi-dick referred to the practice of Taiwan and asked whether the Administration would arrange and mandate inbound travellers arriving at HKIA to take designated transport carriers directly to their dwelling places to observe compulsory quarantine. SFH advised that transportation would be arranged for those asymptomatic inbound travellers that needed to be sent direct to designated quarantine centres upon arrival.

Quarantine facilities and surveillance

27. Ms Elizabeth QUAT said that she had repeatedly called on the Administration to use hotels as holding centres for students returning from overseas places to wait for their virus test results before going home to continue completion of the 14-day compulsory quarantine. To facilitate the

Action

arrangement in this regard, she and Mr YIU Si-wing had contacted some hotels and more than 10 hotels had responded positively to the suggestion. SFH said that persons under compulsory quarantine could stay at their residences or other self-nominated premises such as hotels.

28. Mr CHAN Han-pan considered that the Administration's existing arrangement to allow asymptomatic inbound travellers to serve their quarantine at hotels without alerting the hotels concerned might increase the risk of the hotel staff and other guests in the premises of being exposed to infection. Ir Dr LO Wai-kwok expressed a similar view. Mr SHIU Ka-fai said that there was a need to reduce the risk of household members of a home confinee being exposed to infection. Dr KWOK Ka-ki urged the Administration to designate certain hotels, such as hotels in the Hong Kong Disneyland Resort, to serve as temporary quarantine centres for Hong Kong residents to observe their 14-day quarantine. Expressing concern over loopholes in the surveillance of home quarantine cases and the health risks arising from persons placed under home quarantine given the small living area per capita in Hong Kong, Dr Helena WONG and Dr Fernando CHEUNG made a similar suggestion. Mr WU Chi-wai asked for the reasons why the Administration did not do so. Noting that some NGOs were granted land leases for hotel or hostel operation at nil or concessionary premiums, Mr CHU Hoi-dick urged the Administration to arrange the use of these premises as central quarantine facilities for returning Hong Kong residents as well as visitors to Hong Kong if the latter were still allowed to enter Hong Kong.

29. SFH advised that using hotel as quarantine centre would need to take into account their meeting of various requirements, in particular ventilation. C/CHP supplemented that CHP had issued guidelines on the infection control and prevention of COVID-19 for various businesses and workplaces, including hotel industry at the early stage of the outbreak.

30. Ir Dr LO Wai-kwok called on the Administration to speed up the construction of new quarantine facilities at Penny's Bay using the modular integrated construction method. In view of the expected increase in the number of close contacts due to the recent rise in the number of confirmed cases, Mr Jeremy TAM asked whether the Administration had assessed whether there would be adequate quarantine units for use before arranging the second batch of chartered flights to bring back Hong Kong residents stranded in Hubei Province. Replying in the affirmative, SFH added that apart from the existing 1 200-odd quarantine units, some 1 800 additional quarantine units would be available by phases. The Administration would monitor the latest development and make corresponding deployment in view of the situation.

Action

31. Casting doubt over the effectiveness of the new wristbands in ensuring that persons undergoing quarantine were staying at their dwelling places and given that many persons had become unemployed due to the epidemic, Ms Alice MAK considered that the Administration should create additional temporary posts to strengthen its manpower for the surveillance work. Ms Tanya CHAN and Dr Fernando CHEUNG were concerned that only about 2 000 out of the 6 000-odd wristbands distributed on 19 March 2020 could be activated. Mr POON Siu-ping was concerned that there were reports that some persons with wristbands had left their dwelling places. Dr Pierre CHAN queried about whether there was a dedicated hotline for reporting non-compliance with the home quarantine orders.

32. SFH stressed that self-discipline in fighting against the disease was of utmost importance. Any person under compulsory quarantine who left the dwelling place without permission might commit a criminal offence. With the efforts of DH, the disciplinary forces and various government departments such as the Home Affairs Department and the Social Welfare Department, the Administration would ensure that the persons concerned stayed at the premises by spot checks, telephone calls and via monitoring of the status of electronic devices, etc. While it took some time for the Office of the Government Chief Information Officer to rationalize the use of the new wristbands with the "StayHomeSafe" mobile app given the large number of inbound travellers, the problem had been resolved.

Risk communication

33. In view of the surge in the number of confirmed cases, Ms CHAN Hoi-yan urged the Administration to require all persons to wear a mask at all times when taking public transport and resume the special arrangement that except for those providing emergency, essential and basic public services, all other civil servants should work from home to reduce the risk of the spread of the disease in the community. Mr CHAN Chi-chuen queried whether the Administration considered the current situation of outbreak in Hong Kong not severe enough to resume the above special work arrangement of civil service so as to raise the general public's awareness of the need to reduce social contacts. Mr Charles MOK called for the resumption of the special work arrangement. Ms Tanya CHAN opined that an absence of the special work arrangement would convey a wrong message to the community that there was no need to remain vigilant. Mr SHIU Ka-chun asked whether the Administration was complacent with its anti-epidemic work. SFH advised that subject to the development of the epidemic, the Administration would not rule out the introduction of more stringent social distancing measures.

Action

Response measures of HA

34. Ms CHAN Hoi-yan asked about the number of intensive care beds available in public hospitals to handle severe confirmed cases. Ms Starry LEE asked whether the Administration had devised any contingency plan to combat possible large-scale community outbreak. Mr POON Siu-ping called for an early announcement of such plan, if any, to ensure preparedness. Prof Joseph LEE said that the paper provided by the Administration was silent on response plan to be implemented by HA to ensure that its supply of isolation and intensive care beds, manpower and personal protective equipment ("PPE") could meet the service need arising from a possible large-scale community outbreak.

35. Director (Quality & Safety), HA advised that at present, there were 97 intensive care beds among the negative pressure beds in public hospitals. In the coming few weeks, HA would retrofit certain general wards to provide 400 additional standard negative pressure beds for recovering patients requiring step down care. As regards manpower supply, HA had deferred 60% elective surgeries and 70% non-emergency diagnostic and check-up services such as endoscopy examination in order to focus its manpower and resources to respond to the COVID-19 epidemic. Special Emergency Response Allowance was provided for frontline staff engaging in high risk duties in response to the epidemic to recognize their efforts.

[At 12:58 pm, the Chairman informed members of her decision to extend the meeting for 15 minutes beyond its appointed ending time to allow more time for discussion.]

Supply of surgical mask

36. Ms Starry LEE queried whether the Administration had ensured that there was no need for members of the public to worry about the adequacy of the supply of surgical masks in the market for combating the epidemic. SFH advised that the Administration had increased the supply of surgical masks through a multi-pronged approach. For instance, the Government Logistics Department was actively sourcing surgical masks globally mainly for allocation to frontline employees of government departments and medical personnel with frequent contact with members of the public and the Correctional Services Department ("CSD") had also increased its production. Separately, the Administration had received donations of masks from various persons and organizations for distribution to those in need.

Action

37. Mr KWONG Chun-yu asked whether the Chief Executive would honour her announcement on 8 February 2020 to set aside an additional 700 000 masks produced by CSD each month for distribution to frontline cleansing workers engaged by outsourced cleansing service contractors. Stressing that the Administration attached great importance to protecting the health of frontline workers, SFH advised that the measure would continue for the time being after completion of a review by the departments concerned. Mr SHIU Ka-chun was concerned about whether surgical masks would also be provided to supervisors of the cleansing workers, drivers of refuse collection vehicles, members of pest control teams under the Food and Environmental Hygiene Department ("FEHD") as well as frontline workers engaged by Leisure and Cultural Services Department. In his view, all frontline personnel should be provided with more than one mask per day to cater for their job needs and they should be allowed to use their own masks or masks from donation. SFH advised that it would ensure that workers most in need would be covered in the distribution.

Financial assistance for industries and protection for employees

Admin

38. Mr KWONG Chun-yu requested the Administration to advise the timetable for the disbursement of the monthly allowance of \$1,000 under the Anti-epidemic Fund for a period of no less than four months to frontline cleansing workers, toilet attendants and security workers employed by service contractors of the Government and HA. Mr CHU Hoi-dick considered that the Administration should also provide the allowance for frontline supervisors of cleansing workers and drivers of refuse collection vehicles.

Motions

39. The Chairman ruled that the motion proposed by Mr CHAN Chi-chuen and the amendments to which as proposed by Mr CHAN Han-pan, Ms Alice MAK and Ms Elizabeth QUAT, as well as the motion proposed by Dr Helena WONG and the amendments to which as proposed by Mr CHAN Han-pan and Ms Alice MAK, the wordings of which were tabled at the meeting, were related to the agenda item under discussion. Members agreed that the motions should be proceeded with at the meeting.

The first motion

40. Mr CHAN Chi-chuen moved the following motion:

Action

"本委員會要求盡快研究禁止所有非香港居民從各口岸入境，以盡量減低武漢肺炎從世界各地輸入香港的風險。"

(Translation)

"This Panel requests the Government to expeditiously consider prohibiting all non-Hong Kong residents from entering Hong Kong through various boundary control points, so as to reduce as far as possible the risks of importation of pneumonia cases in Wuhan to Hong Kong from around the world."

41. Mr CHAN Han-pan, Ms Alice MAK and Ms Elizabeth QUAT moved the following amendments to Mr CHAN Chi-chuen's motion:

"本委員會要求盡快研究 **在目前禁制措施的情況下**，禁止所有非香港居民從各口岸入境，**並對入境人士進行百分百病毒檢測**，以盡量減低**武漢肺炎—2019 冠狀病毒病(COVID-19)**從世界各地輸入香港的風險。"

(Translation)

"This Panel requests the Government to, ***under the prevailing restrictive measures***, expeditiously consider prohibiting all non-Hong Kong residents from entering Hong Kong through various boundary control points ***and conducting virus tests for all inbound travellers***, so as to reduce as far as possible the risks of importation of ***pneumonia cases in—Wuhan of the Coronavirus Disease (COVID-19)*** to Hong Kong from around the world."

(Note: The amendments are marked in ***bold and italic type***.)

42. In response to Mr CHAN Chi-chuen's enquiry, Mr CHAN Han-pan explained that the proposed addition of the wording "under the prevailing restrictive measures" to the motion was to make it clear that the existing arrangement to ensure that freight services necessary for the provision of food and daily necessities to Hong Kong would continuously be maintained.

43. The Chairman then put the motion as amended to vote. At Mr CHAN Han-pan's request, the Chairman ordered that the voting bell be rung for five minutes to notify Panel members of the voting. All 17 members present at the meeting voted in favour of the motion. The Chairman declared that the motion as amended was carried.

Action

The second motion

44. Dr Helena WONG moved the following motion:

"本會促請政府收緊防疫措施，包括：

- (1) 立即向全球旅客封關，禁止非香港居民從各口岸入境；及
- (2) 與酒店業商討，承包合適酒店作臨時檢疫中心及回流港人自我隔離之用，解決隔離設施不足的問題，減低社區爆發的風險。"

(Translation)

"This Panel urges the Government to tighten anti-epidemic measures, including:

- (1) immediately closing the border to travellers from around the world to prohibit non-Hong Kong residents from entering Hong Kong through various boundary control points; and
- (2) discussing with the hotel industry on the underwriting of suitable hotels as temporary quarantine centres and self-isolation facilities for returning Hong Kong residents, so as to address the issue of insufficient isolation facilities and lower the risk of community outbreak."

45. Mr CHAN Han-pan and Ms Alice MAK moved the following amendments to Dr Helena WONG's motion:

"本會促請政府收緊防疫措施，包括：

- (1) 立即 ~~向全球旅客封關~~，禁止非香港居民從各口岸入境，**並對入境人士進行百分百病毒檢測**；及
- (2) 與酒店業商討，承包合適酒店作臨時檢疫中心及回流港人自我隔離之用，解決隔離設施不足的問題，減低社區爆發的風險。"

Action

(Translation)

"This Panel urges the Government to tighten anti-epidemic measures, including:

- (1) immediately ~~*closing the border to travellers from around the world to prohibit prohibiting*~~ non-Hong Kong residents from entering Hong Kong through various boundary control points, *and conducting virus tests for all inbound travellers*; and
- (2) discussing with the hotel industry on the underwriting of suitable hotels as temporary quarantine centres and self-isolation facilities for returning Hong Kong residents, so as to address the issue of insufficient isolation facilities and lower the risk of community outbreak."

(Note: The amendments are marked in *bold and italic type*.)

46. The Chairman then put the motion as amended to vote. All 17 members present at the meeting voted in favour of the motion. The Chairman declared that the motion as amended was carried.

V. Four projects under the first 10-year Hospital Development Plan and proposed creation of one supernumerary post of Government Architect in the Architectural Services Department
[LC Paper Nos. CB(2)711/19-20(03) to (04) and CB(2)734/19-20(01)]

47. At the invitation of the Chairman, Under Secretary for Food and Health ("USFH") briefed members on the four projects under the first 10-year Hospital Development Plan ("HDP") ("the four projects") and the proposed creation of one supernumerary post of Government Architect ("GA") (D2) for about seven years up to 31 March 2027 in the Architectural Services Department ("ArchSD") to steer and supervise the implementation of healthcare projects under HDP, details of which were set out in the Administration's paper (LC Paper No. CB(2)711/19-20(03)).

48. Members noted the background brief prepared by the LegCo Secretariat on the subject under discussion (LC Paper No. CB(2)711/19-20(04)).

[At 1:15 pm, Ms CHAN Hoi-yan, Deputy Chairman, took the Chairmanship in the absence of the Chairman.]

Action

49. The Deputy Chairman reminded members that in accordance with Rule 83A of the Rules of Procedure, they should disclose the nature of any direct or indirect pecuniary interests relating to the funding proposals under discussion before they spoke on the subject.

Four projects under the first 10-year HDP

Admin/
HA

50. Expressing support for the four projects, Dr Helena WONG sought information about the Administration's plan for enhancing the healthcare manpower of the public sector to meet the manpower requirements of the expanded United Christian Hospital and the redeveloped Grantham Hospital. She called on the Administration and HA to address the existing problem of shortage of visitors' carpark spaces and family-friendly facilities in public hospitals when carrying out the hospital projects and requested the Administration to advise in writing whether and, if so, how it would do so in the above two hospitals.

51. Mr POON Siu-ping expressed support for the four projects and the proposed creation of a supernumerary GA post in ArchSD. Referring to the demolition of the Senior Staff Quarters and Blocks 1 and 2 of the Nurse Quarters under the Phase 1 redevelopment of Grantham Hospital, he asked about the arrangement for the affected healthcare staff. Hospital Chief Executive, Grantham Hospital advised that the tenancy for the Senior Staff Quarters had expired in 2019. Separately, the accommodation, catering and other facilities in Blocks 1 and 2 of the Nurse Quarters would be reprovisioned to other premises within the site of Grantham Hospital.

52. On the Administration's proposal to develop a Community Health Centre in the North District by reprovisioning the GOPC at Shek Wu Hui Jockey Club Clinic to the proposed community health centre cum social welfare facilities to be constructed at Pak Wo Road, Mr POON Siu-ping asked about the future use of the premises so vacated. USFH advised that it was planned that the premises would be used for the expansion of the collocated Sheung Shui Chest Clinic and for future deployment by DH for the carrying out of renovation works in its other clinics in the future.

53. Noting that the proposed HA Supporting Services Centre building would house, among others, central emergency stores for critical PPE and key linen items, Mr POON Siu-ping queried how the amount of PPE to be kept in the proposed stores was determined. Expressing concern about the limitation in the provision of PPE by HA to its frontline hospital staff during the COVID-19 epidemic, Mr CHAN Chi-chuen asked whether HA would increase the stock level for PPE and linen items to ensure an adequate supply of these items for operational needs during emergency

Action

situations. Director (Cluster Services), HA ("D(CS), HA") advised that following the swine flu pandemic in 2009, HA's stockpile of PPE had been set at the level of 90 days. HA would conduct a review in this regard taking into account stock depletion during the COVID-19 epidemic.

[At 1:27 pm, the Deputy Chairman suggested and members agreed that the meeting be further extended to end until the completion of the discussion of the subject; and due to time constraint, the discussion of agenda item VI "Review of dental care services and relevant manpower plan" would be deferred to future meeting.]

54. Noting with concern that HA had to retrofit some general wards of individual public hospitals into standard negative pressure wards to combat the COVID-19 epidemic and that there was only one infectious disease centre at the Princess Margaret Hospital, Mr SHIU Ka-chun asked whether the Administration and HA would explore whether additional isolation facilities could be provided under HDP or whether the original site of Hong Kong Central Hospital could be made use for the purpose to prepare for any need in this regard in the future. USFH advised that the need for enhancing HA's capacity in this regard would be taken into account under the second 10-year HDP. D(CS), HA supplemented that HA would keep reviewing the need and consider how the hardware and ventilation of suitable wards of individual hospitals could be enhanced to facilitate the provision of additional negative pressure wards as and when necessary.

55. Mr Charles MOK expressed grave concern that the proposed HA Supporting Services Centre would house, among others, an information technology corporate data centre, a central laundry centre and a central food production unit. He was worried that such arrangement would affect the operation of the data centre which required, among others, stringent physical security control, uninterrupted power supply, and avoidance of physical vibration and water leakage threats. He requested HA to provide the Panel with the preliminary design and floor plan of the proposed building before the submission of the capital works proposal to the Public Works Subcommittee ("PWSC").

Admin/
HA

56. While expressing support for the four projects which, in his view, would like many other healthcare projects that no members would be against of, Dr Pierre CHAN highlighted the importance of the function of LegCo to monitor the implementation of such projects. Referring to his letter dated 19 March 2020 to the Administration (LC Paper No. CB(2)734/19-20(01)), he expressed concern about whether any healthcare projects had encountered delay and cost overrun problems as many public works projects did and considered that the creation of the proposed

Action

supernumerary GA post in ArchSD was imperative. USFH undertook to provide a written reply to the letter.

Creation of supernumerary GA post in ArchSD

57. Dr Helena WONG queried which healthcare projects under HDP would be overseen by the post holder of the proposed supernumerary GA post in ArchSD, the reasons for setting the proposed duration of the post at about seven years, and whether other supernumerary posts had been created in the past for the implementation of healthcare projects under HDP.

58. USFH and Project Director/2, ASD advised that with the approval of the Finance Committee ("FC"), a supernumerary Chief Quantity Surveyor post had been created in ArchSD in 2018 to strengthen professional support in quantity surveying for the delivery of the healthcare projects under HDP. There was a need to establish a new project management branch in ArchSD to be headed by a GA to take forward the implementation of the first 10-year HDP and the planning of the second 10-year HDP. Dr Helena WONG requested the Administration to provide a written response in this regard.

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Way forward

59. Dr Helena WONG sought clarification as to whether the four project proposals and the above staffing proposal would be submitted to FC separately via PWSC and the Establishment Subcommittee after the latter two committees' consideration. USFH replied in the affirmative. Dr Helena WONG requested the Administration to provide the requisite supplementary information before the respective submission of the relevant proposals to PWSC and the Establishment Subcommittee.

60. Mr CHAN Chi-chuen expressed support for the four projects. Noting that there were a large number of proposals in the pipeline for consideration of PWSC and FC, he asked whether discussion priority would be accorded to the four projects and whether the creation of the supernumerary GA post in ArchSD was a pre-requisite for the carrying out of these projects. Replying in the negative to the second question, USFH advised that the Administration hoped that the four project proposals and the staffing proposal would obtain early funding approval from FC.

Conclusion

61. In closing, the Deputy Chairman concluded that the Panel did not object to the submission of the four public works project proposals and the

Action

staffing proposal to PWSC and the Establishment Subcommittee respectively for consideration.

VI. Any other business

62. There being no other business, the meeting ended at 1:44pm.

Council Business Division 4
Legislative Council Secretariat
18 February 2021