

立法會
Legislative Council

LC Paper No. CB(4)1748/20-21

(These minutes have been
seen by the Administration)

Ref : CB2/PL/HS

Panel on Health Services

Minutes of meeting
held on Friday, 13 November 2020, at 10:00 am
in Conference Room 1 of the Legislative Council Complex

Members present :

- Hon Elizabeth QUAT, BBS, JP (Chairman)
- Hon Abraham SHEK Lai-him, GBS, JP (Deputy Chairman)
- Hon Tommy CHEUNG Yu-yan, GBS, JP
- Hon Jeffrey LAM Kin-fung, GBS, JP
- 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-yeet, GBS, JP
- Hon Paul TSE Wai-chun, JP
- Hon Michael TIEN Puk-sun, BBS, JP
- Hon Steven HO Chun-yin, BBS
- Hon YIU Si-wing, BBS
- Hon MA Fung-kwok, GBS, JP
- Hon CHAN Han-pan, BBS, JP
- Hon LEUNG Che-cheung, SBS, MH, JP
- Hon Alice MAK Mei-kuen, BBS, JP
- Hon KWOK Wai-keung, JP
- Hon POON Siu-ping, BBS, MH
- Dr Hon CHIANG Lai-wan, SBS, JP
- Hon SHIU Ka-fai, JP
- Hon Wilson OR Chong-shing, MH
- Hon YUNG Hoi-yan, JP
- Dr Hon Pierre CHAN
- Hon LAU Kwok-fan, MH
- Hon Kenneth LAU Ip-keung, BBS, MH, JP
- Dr Hon CHENG Chung-tai

Members attending : Ir Dr Hon LO Wai-kwok, SBS, MH, JP
Hon Holden CHOW Ho-ding

Member absent : Dr Hon Fernando CHEUNG Chiu-hung

Public Officers attending : Item V

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

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

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

Mr Louis KAU Kin-hong
District Planning Officer/HK
Planning Department

Item VI

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

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

Dr Deacons YEUNG
Director (Cluster Services)
Hospital Authority

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

Ms WONG Yin-yee
Assistant Director (Licensing & Regulation)
Social Welfare Department

Mr Benjamin MOK Kwan-yu
Deputy Secretary for Constitutional & Mainland Affairs (3)
Constitutional and Mainland Affairs Bureau

Mr Tony WONG Chi-kwong, JP
Deputy Government Chief Information Officer
Innovation and Technology Bureau

Mr Anson LAI Yat-ching
Assistant Commissioner for Tourism 2
Commerce and Economic Development Bureau

Item VII

Dr CHUI Tak-yi, JP
Under 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 Ada LIN Wai-chi
Principal Medical & Health Officer (Emergency Response
and Programme Management)2
Department of Health

Dr Deacons YEUNG
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

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I. Application for late membership
[LC Paper No. CB(2)39/20-21(01)]

Members accepted the application for the late membership from Dr CHENG Chung-tai.

II. Information paper(s) issued since the last meeting
[LC Paper Nos. CB(2)46/20-21(01), CB(2)162/20-21(01) and CB(2)264/20-21(01)]

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

- (a) letter dated 15 October 2020 from Dr KWOK Ka-ki^{Note} and joint letter dated 29 October 2020 from Mr Steven HO and Mr CHAN Han-pan concerning actions taken by the Hospital Authority ("HA") in respect of those staff who participated in a strike in February 2020; and
- (b) the Administration's response to the issues of concern raised in the joint letter dated 29 October 2020 from Mr Steven HO and Mr CHAN Han-pan.

III. Items for discussion at the next meeting
[LC Paper Nos. CB(2)191/20-21(01) and (02)]

Regular meeting in December 2020

3. Members agreed to discuss the subjects "Review of dental care services and relevant manpower plan" and "Proposal for injection into the Health and Medical Research Fund" as proposed by the Administration at the next regular meeting of the Panel scheduled for 11 December 2020 at 10:45 am.

^{Note} According to the announcement made by the Hong Kong Special Administrative Region Government on 11 November 2020 pursuant to the Decision of the Standing Committee of the National People's Congress on Issues Relating to the Qualification of the Members of the Legislative Council of the Hong Kong Special Administrative Region, Kenneth LEUNG, KWOK Ka-ki, Dennis KWOK Wing-hang and Alvin YEUNG were disqualified from being a member of the Legislative Council ("LegCo") on 30 July 2020.

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(Post-meeting note: Members were informed on 23 November 2021 that at the request of the Administration and with the concurrence of the Chairman, the above meeting would be converted as a policy briefing-cum-meeting such that apart from the discussion of the two items as referred to in paragraph 3 above, the Panel would receive a briefing by the Secretary for Food and Health ("SFH") on the Chief Executive's 2020 Policy Address. On 4 December 2020, members were further informed that in view of the latest epidemic situation of the coronavirus disease 2019 ("COVID-19"), the Chairman has decided to reschedule the meeting to a later date. Members were subsequently informed on 22 December 2020 that on the instruction of the Chairman, the January regular meeting of the Panel scheduled for 8 January 2021 would be converted as a policy briefing-cum-meeting to receive a briefing by SFH on the Chief Executive's 2020 Policy Address and to discuss the items "Proposal for injection into the Health and Medical Research Fund" and "Update on Samaritan Fund and Community Care Fund Medical Assistance Programmes".)

Joint meeting with the Panel on Education

4. The Chairman informed members that at the suggestion of the Administration and subject to the concurrence of Dr Priscilla LEUNG, Chairman of the Panel on Education, the two Panels would hold a joint meeting in December 2020 to discuss the subject "Enhancement of healthcare teaching facilities of University Grants Committee-funded universities".

(Post-meeting note: With the concurrence of the Chairmen of the two Panels, the joint meeting was originally scheduled for 11 December 2020. On 5 December 2020, members were informed that in view of the latest epidemic situation of COVID-19, the Chairmen of the two Panels have decided to reschedule the meeting to a later date. Members were subsequently informed on 16 February 2021 that the joint meeting would be held on 5 March 2021.)

Items proposed for discussion at future meetings

5. The Chairman informed members that it was agreed at the work plan meeting amongst she, the Deputy Chairman and SFH on 9 November 2020 that the Administration would examine the proposed timing for discussion of individual items on the list of outstanding items for discussion of the Panel, and provide progress report(s) for certain items for members' information as and when appropriate. In view of the number of outstanding

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items to be discussed, more than two items would be scheduled for discussion at each regular meeting of the Panel as and when necessary. To facilitate the work of the Panel, Mr YIU Si-wing proposed grouping the relevant subjects for discussion and where appropriate, inviting the Administration to provide information papers on certain subjects for consideration of the Panel by circulation.

6. Dr Pierre CHAN suggested that at the time of the epidemic, the Panel should discuss the subject "Measures for the prevention and control of COVID-19 in Hong Kong" at each of its regular meetings. Mr YIU Si-wing held a similar view. Dr CHENG Chung-tai considered that apart from arranging discussion of the subject at regular meetings of the Panel, consideration could be given to setting up a dedicated subcommittee to study all issues relating to the epidemic which straddled the purviews of different panels. The Chairman reminded members to use the official term as announced by the World Health Organization ("WHO") to name the disease under discussion.

7. Mr Steven HO and Mr Jeffery LAM suggested leaving the discretion to the Chairman to decide, depending on the development of the epidemic, whether the Administration should be required to provide the Panel with a monthly update on the subject for information of members by way of circulation or to brief members on the subject at a particular regular meeting or a special meeting of the Panel.

8. Having considered members' view, the Chairman said that she would request the Administration to provide an information paper at least once a month to update the Panel on the subject. Where necessary, she would arrange discussion of the subject at meetings of the Panel.

IV. Proposal for the appointment of a joint subcommittee under the Panel on Health Services and Panel on Welfare Services to study anti-epidemic policies relating to residential care homes and long-term care services

[LC Paper No. CB(2)26/20-21(01)]

9. The Chairman invited members' views on Dr Fernando CHEUNG's proposal to appoint a joint subcommittee under the Panel and the Panel on Welfare Services ("the WS Panel") to study anti-epidemic policies relating to residential care homes and long-term care services as set out in his letter dated 14 October 2020 (LC Paper No. CB(2)26/20-21(01)). Mr Steven HO expressed concern over Dr Fernando CHEUNG's use of an inappropriate term to refer to COVID-19 in his letter.

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10. Dr CHIANG Lai-wan, in her capacity as Chairman of the WS Panel, said that individual members of the WS Panel were of the view that the issues of concern set out in the proposal could be addressed more swiftly by the holding of a discussion at a meeting of this Panel. The Labour and Welfare Bureau had confirmed that its representatives would attend the discussion to answer questions from members. Mr LEUNG Che-cheung, Mrs Regina IP and Mr CHAN Han-pan echoed the above view. Mr CHAN Han-pan added that where necessary, representatives from the residential care sector could be invited to exchange views with members at the meeting. Mr Steven HO said that the subject could first be discussed at a meeting of this Panel. The question of whether there was a need to set up a subcommittee to follow up the discussion could be examined, where necessary, at a later stage.

11. In the light of members' views, the Chairman said that she would work with the Administration on the timing for discussion of the subject.

V. Development of a District Health Centre at the Caroline Hill Road Site

[LC Paper Nos. CB(2)191/20-21(03) to (04) and CB(2)229/20-21(01)]

12. The 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 financial proposal before they spoke on the subject.

13. SFH briefed members on the proposed development of the Wan Chai District Health Centre ("WCDHC") in a commercial development planned for a site at Caroline Hill Road ("the Site"), details of which were set out in the Administration's paper (LC Paper No. CB(2)191/20-21(03)).

14. Members noted the updated background brief prepared by the LegCo Secretariat on the development of district health centre ("DHC") (LC Paper No. CB(2)191/20-21(04)), and a submission from the Chairman of the Wan Chai District Council on the subject under discussion (LC Paper No. CB(2)229/20-21(01)).

Location of the proposed WCDHC

15. Mr CHAN Han-pan expressed appreciation for the Administration's effort to identify a site for commercial development to accommodate the proposed WCDHC with a Net Operating Floor Area of about 1 000 m². He urged the Food and Health Bureau ("FHB") to explore with the relevant government departments the reservation of other sites or new developments,

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and identification of vacant Government, Institution or Community sites or under-utilized government facilities for the setting up of future DHCs. Expressing support for the financial proposal, Mr KWOK Wai-keung remarked that the development of the proposed WCDHC at the Site which was primely located demonstrated the Administration's determination to enhance district-based primary healthcare services. Dr CHIANG Lai-wan raised no objection to use the prime land lots for the development of the proposed WCDHC, as the setting up of DHCs was aimed at alleviating the pressure on public healthcare system. SFH advised that FHB would work with the Development Bureau and the Planning Department in identifying suitable permanent sites for the setting up of DHCs. The Administration would identify suitable rental premises for the setting up of DHCs if the permanent sites identified could only be ready in the longer term.

16. Expressing concern about the desirability of setting up the proposed WCDHC in a commercial area, Mr YIU Si-wing said that an alternative was to transform the planned smaller interim "DHC Express" in the Wan Chai District to a full-fledged DHC in the longer term. Pointing out that grassroots were most in need of services of DHCs, Dr CHENG Chung-tai said that he was not supportive of developing the proposed WCDHC at the Site. Mrs Regina IP was concerned about the provision of parking facilities at the Site to facilitate the patronage of service users, in particular those with physical disabilities. SFH said that given the limited options available in the district, the Site was considered desirable in terms of people flow and accessibility of public transport.

Estimates of and timetable for the development of WCDHC

17. Noting that the successful developer-tenderer of the Site would be responsible for the design, construction, and provision of the fitting-out and finishing works for the facilities in the proposed WCDHC, Mr YIU Si-wing considered that the estimated capital cost of \$175.0 million in money-of-the-day prices was on the high side. While expressing support for the development of WCDHC, Ms YUNG Hoi-yan surmised that the development cost could be lowered if the Administration purchased available private premises in the district for accommodating the facility. In response to Mr POON Siu-ping and Dr CHIANG Lai-wan's enquiries, SFH and Principal Assistant Secretary for Food and Health (Health)⁵ affirmed that the estimated capital cost would cover, among others, building, building services and other engineering works, as well as furniture and equipment. Mr YIU Si-wing requested the Administration to provide a detailed breakdown of the project estimate in its paper for submitting the funding proposal to the Public Works Subcommittee ("PWSC").

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18. Pointing out that there was an imminent need for primary healthcare services in the district, Ms YUNG Hoi-yan asked about the timetable for the completion of the development of the proposed WCDHC. District Planning Officer/HK, Planning Department advised that the Site had been included in the Land Sale Programme for the financial year of 2020-2021. In general, successful developer-tenderer of a site would be required to complete the accommodation and make it fit for occupation and operation in about six years' time. Ms YUNG Hoi-yan considered it unsatisfactory to take years for the setting up of a DHC. SFH advised that the planned "DHC Express" in Wan Chai District and that of the other 10 districts would commence service provision within 2021.

Service scope and operation of DHCs

19. Mr KWOK Wai-keung asked whether the proposed WCDHC, which was easily accessible, could co-locate a renal dialysis centre and accept registration for membership from persons residing in Eastern District. Dr CHIANG Lai-wan considered that renal dialysis service, screening service for osteoporosis, drug management, general physical check-ups for the elderly and cancer-related services (e.g. breast cancer screening) should be provided at WCDHC and the other 17 DHCs to ensure that they were value for money. Mr Holden CHOW said that there had been repeated calls from the community for DHCs to provide renal dialysis service and screening services for breast and cervical cancers. The Chairman held the view that all DHCs should provide screening services for osteoporosis, hip joint fractures as well as breast and cervical cancers.

20. SFH advised that public dialysis service, which was not considered as a primary healthcare service, was currently provided by HA. In mapping out the service scope of DHCs, the Administration would take into account the health profile of the population and district needs. On cancer screening, the relevant expert working group would regularly review international and local scientific evidence and make recommendations on cancer prevention and screening applicable to the local situations. Mr Holden CHOW sought details about the services to be provided by the proposed WCDHC. SFH agreed to advise in writing the screening, health assessment and chronic disease management services currently provided by Kwai Tsing District Health Centre ("K&TDHC"), which would serve as a blueprint for the planning in this regard.

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21. Ms YUNG Hoi-yan sought clarification as to whether the proposed WCDHC would provide medical consultation services. Expressing support for the prevention-focused concept of DHCs, Mrs Regina IP asked whether the service scope of WCDHC covered Chinese medicine service. SFH

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advised that all DHCs would act as a service hub with a Core Centre serving as the headquarters and complemented by multi-disciplinary healthcare network of medical and healthcare practitioners in the district with multiple service points. As a reference, about 40 Chinese medicine practitioners were network service providers of K&TDHC. The Chairman opined that the DHC network should cover all medical practitioners and Chinese medicine practitioners in the district. SFH advised that all medical practitioners and Chinese medicine practitioners who were serving the districts concerned and listed in the Primary Care Directory of the Primary Healthcare Office of FHB could become the network service providers.

22. Noting that the proposed WCDHC would be a government property upon completion of the works, Mr POON Siu-ping asked whether the contract sum of the service contract could be lowered as there would be no rental expenses. SFH advised that rental expenses for DHCs, if any, would be borne by the Administration.

23. In response to Dr CHENG Chung-tai's concern that there had been public suspicion of transfer of benefits in the tender exercise of K&TDHC as SFH was the honorary patron of the successful tenderer at the time the operation service contract was awarded, SFH assured members that a stringent mechanism was in place to prevent any transfer of benefits in tender exercise. Mr WONG Ting-kwong remarked that the Administration should make prompt clarifications to any misinformation.

24. Dr CHENG Chung-tai asked about the mechanism in place to monitor the performance of operators of DHCs. SFH and Head (Primary Healthcare Office), FHB ("H(PHO)") advised that a management committee comprising representatives from different professions and the District Council, the District Officer, the District Social Welfare Officer and stakeholders of the district, would be set up for each DHC to oversee its operation. The Management committee would receive regular reports from the operator on its service output and financial position, and conduct district-based consultations twice a year on the service of the DHC concerned. Separately, The Chinese University of Hong Kong had been commissioned to conduct a Monitoring and Evaluation Study of K&TDHC.

25. Expressing support for the setting up of DHCs to enhance district-based primary healthcare services, Mr POON Siu-ping was concerned about whether the COVID-19 epidemic had affected the service provision of K&TDHC. Remarking that he was impressed by the services of K&TDHC during the Panel's visit in November 2019, Mr WONG Ting-kwong was concerned about the utilization rate and the sustainability of the services. H(PHO) advised that the cumulative membership enrolment of KTDHC had

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gradually increased to over 6 000 as of end-August 2020. The contract sum was adequate to support the operation and related expenses of KTDHC so far. She assured members that efforts would continuously be made to step up the promotion of the new service mode of DHCs.

26. In response to Mr KWOK Wai-keung's concern about the progress of the development of a DHC in Siu Sai Wan of Eastern District which had long been called for, SFH advised that the project, which had secured the support of the Planning, Works and Housing Committee of the Eastern District Council in November 2018, was expected to be completed in 2024.

27. In closing, the Chairman concluded that the Panel did not object to the submission of the proposal to PWSC for consideration.

VI. Measures for the prevention and control of coronavirus disease 2019 in Hong Kong

[LC Paper Nos. CB(2)34/20-21(01) and CB(2)191/20-21(05) to (07)]

28. SFH briefed members on the Administration's latest efforts and relevant measures to combat COVID-19, details of which were set out in the Administration's paper (LC Paper No. CB(2)191/20-21(05)).

29. Members noted the updated background brief prepared by the LegCo Secretariat (LC Paper No. CB(2)191/20-21(06)), and the two letters dated 16 and 23 October 2020 from Dr Pierre CHAN (LC Paper Nos. CB(2)34/20-21(01) and CB(2)191/20-21(07)) on the subject under discussion. Dr Pierre CHAN urged the Administration to provide written responses to his letters as soon as practicable. On Dr Pierre CHAN's remark that "coronavirus disease 2019" was the official term of WHO to refer to the disease, the Chairman requested members to use the said term during the discussion. Mr CHAN Han-pan said that the Director of Health should attend the discussion when the subject was next discussed.

Overall anti-epidemic strategy

30. Mr SHIU Ka-fai said that while the wholesale and retail sector would continue to support the implementation of various anti-epidemic measures, the Administration should strike a balance between public health protection and economic impact. Expressing concern that the local epidemic situation had been volatile for almost a year under the Administration's "suppress and lift" strategy, Ms Starry LEE urged for a change of the strategy to put in place more stringent and decisive measures with a view to achieving "zero infection" so that people could resume a normal life and the economy could

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return to an upward trend. Criticizing that many of the anti-epidemic measures, such as the Universal Community Testing Programme ("UCTP"), were not implemented on a compulsory basis, the Chairman made a similar call. Mr Wilson OR called on the Administration to work towards "zero infection". Casting doubt over the effectiveness of the "suppress and lift" strategy, Mr WONG Ting-kwong said that many persons recovered from COVID-19, family members of the deceased and members of the business sector had urged the Administration to introduce more decisive measures to end the epidemic. Mr POON Siu-ping was concerned that there would soon be another wave of the epidemic under the indecisive anti-epidemic approach adopted by the Administration.

31. SFH advised that the Administration had all along adopted the "suppress and lift" strategy to formulate the anti-epidemic plan, along with careful consideration of the "three-way tug-of-war" (i.e. the need to strike a proper balance amongst the three factors of public health, economic impact and social acceptance) when devising the appropriate measures. She assured members that the Administration would continue to closely monitor the epidemic situation and enhance the anti-epidemic measures under the approach of "preventing the importation of cases and the spreading of virus in the community" to guard against a possible rebound of the local epidemic and achieve the ultimate goal of "zero infection". Referring to the existing social distancing measures of the Administration, Mr Michael TIEN remarked that he did not see the rationale for limiting the number of persons allowed in a wedding ceremony at which no food or drink was served at 50 but allowing the total number of participants of a wedding banquet held at a catering premises to not exceeding 50% of the normal seating capacity of the premises or 200, whichever was the less.

Compulsory testing

32. Dr Priscilla LEUNG called on the Administration to implement compulsory universal testing, which was supported by the community as demonstrated by a survey that 70% (i.e. about 4 500) of the respondents had indicated support to do so, in order to identify invisible transmission chain in the community and achieve "zero infection" so that cross-border travel could be resumed and the economy could be revived as early as possible. She pointed out that under section 7(h) of the Prevention and Control of Disease Ordinance (Cap. 599) ("the Ordinance"), SFH had the power to make regulations to subject any person to testing. It should also be noted that according to paragraph 3 of article 19 of the International Covenant on Civil and Political Rights, exercise of the right to freedom of expression was subject to certain restrictions that were necessary for, among others, the protection of public health. In her view, the proposal could satisfy the

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proportionality test laid down in the case of *Hysan Development Co Ltd v Town Planning Board* [2016] 19 HKCFAR 372 under the common law. Mr YIU Si-wing, Mr Wilson OR and Mr WONG Ting-kwong echoed that there was a need to implement compulsory universal testing. Ms YUNG Hoi-yan called on the Administration to plan for compulsory universal testing, or at least another round of UCTP, to further identify the silent transmission chains in the community. Mr CHAN Han-pan remarked that in the absence of compulsory universal testing, invisible transmission chains would continue to exist in the community. Expressing concern that there were illegal immigrants with COVID-19 and persons with COVID-19 engaging in illegal activities in the community, Mrs Regina IP held the view that compulsory universal testing was the only effective means to cut transmission of the virus in the community.

33. SFH advised that with the support of the Central Government, more than 1700 000 specimens had been collected for testing under UCTP in September 2020 and at least 49 patients had been identified. At present, in the case of a sudden outbreak in certain groups, the Administration would arrange for urgent cluster testing for the relevant locations or premises with confirmed cases based on a need and risk assessment in order to identify the infected persons and cut the transmission chains as soon as possible. Separately, a legislative exercise to subject certain categories of persons, such as symptomatic patients, persons facing high infection risk due to cluster outbreak and persons of a higher risk of contracting the virus or of a higher exposure to the virus, to compulsory testing was close to completion. Mr POON Siu-ping called on the Administration to expedite the work in this regard. The Chairman and Dr Priscilla LEUNG urged the Administration to respond squarely to members' call for compulsory universal testing.

Preventing the importation of cases

34. Mr SHIU Ka-fai was concerned about the effectiveness of the measures taken by the Administration to prevent the importation of cases. Referring to the remarks made by the Administration on different occasions that air crew and sea crew members who were exempted from compulsory quarantine were possible cause of the third wave of the local epidemic and the genome sequencing of the viral samples of recent local cases was similar to that of the imported cases from Nepal, Dr Pierre CHAN held the view that exemption arrangement was the major cause of waves of the local epidemic. He requested the Administration to advise in writing whether any of the 1 485 locally acquired and possibly locally acquired cases of COVID-19 with unknown sources as at 25 October 2020 (as advised by the Administration in its reply to a question raised by him at the Council meeting of 28 October 2020) had travel history outside Hong Kong in the past 14

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days prior to symptom onset. Noting that there were around 395 000 persons (including air crew and sea crew members as well as members of the consular corps) exempted from compulsory quarantine from February to September 2020, Dr CHENG Chung-tai said that the lenient exemption arrangements had created an anti-epidemic loophole. Mr POON Siu-ping asked whether the Administration would further tighten the border control measures. Mr CHAN Han-pan opined that there was a need to tighten the epidemic control arrangement for exempted persons. Mr CHAN Hak-kan was worried that the emergence of cases involving exempted person and taxi drivers might bring about the fourth wave of the local epidemic.

35. SFH advised that at present, all ordinary non-Hong Kong residents coming from overseas places, except for exempted persons, were denied entry into Hong Kong. All persons entering Hong Kong through the Hong Kong International Airport ("HKIA"), including the exempted persons, were subject to testing. All ordinary inbound travellers were required to observe the "test-and-hold" requirement to wait for their test results. Starting from the date of the meeting, incoming travellers arriving from places outside China were subject to compulsory quarantine at hotels for 14 days. Apart from the above, additional testing and quarantine conditions were imposed on those incoming travellers from very high-risk places. A place-specific flight suspension mechanism was in place to prohibit all passenger flights from specified places from landing in Hong Kong. SFH stressed that supplemented with other measures, the testing arrangements for exempted persons, the majority being air crew and sea crew members, had been suitably adjusted in accordance with the risk levels of respective exemption categories. For instance, exempted persons with high risk level were required to present proof of a negative virus test result before boarding planes and conduct post-arrival tests. As set out in paragraph 11 of the Administration's paper, arrangements to further tighten the testing and isolation arrangement for exempted persons were under consideration.

36. Referring to some experts' view that asymptomatic incoming travellers with COVID-19 were the sources of silent transmission chains in the community, Mr Michael TIEN was concerned about the effectiveness of deep throat saliva specimen collection method as adopted in HKIA in identifying imported cases. He urged the temporary specimen collection centre of the Department of Health ("DH") at HKIA to employ the method of collecting specimen through combined nasal and throat swabs by trained medical or healthcare staff, which had been employed under UCTP and was used in the Mainland. The Chairman urged the Administration to ensure the accuracy of specimen collection for virus testing. Controller, Centre for Health Protection ("C, CHP") advised that the two sampling methods were generally similar in accuracy and sensitivity. Majority of the imported cases

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were identified under the existing testing arrangement at HKIA. SFH added that the Administration had gradually increased the use of combined nasal and throat swabs for specimen collection. In response to Mr Michael TIEN's enquiry as to whether any imported cases were routed through land boundary control points in the past two months, SFH replied in the negative.

37. Mr YIU Si-wing called on the Administration to liaise with the hotel industry on the implementation of the requirement that persons arriving from places outside China had to undergo compulsory quarantine at hotels for 14 days, including the provision of guidelines for the industry and inbound travellers on prevention of COVID-19 and advice on whether inbound travellers under the age of 18 could be accompanied by adults during quarantine. Dr CHENG Chung-tai was concerned about whether the hotel industry could meet the surge in demand and address possible outbreak in the premises under the new measure. Mr CHAN Han-pan was concerned that the use of public transport by inbound travellers to travel to hotels for quarantine might pose a health risk to the community. Noting that the majority of confirmed cases in the past few days were imported ones, Dr CHIANG Lai-wan considered that the Administration should be more decisive in combating the epidemic by, say, designating certain hotels as quarantine hotels and arranging dedicated personnel to station on the floors concerned to ensure that the requirements imposed on the persons under quarantine were complied with.

38. SFH affirmed that CHP had issued guidelines on prevention of COVID-19 for the hotel industry. At present, there were around 1 000 daily arrivals via HKIA. The Administration had closely liaised with the hotel industry to map out the implementation details of the new measure. On the arrangement for guests under the age of 18, it should be noted that subject to DH's approval, any minor subject to quarantine order could be accompanied by an adult to stay inside the same guest room. Leaving the room was not allowed during the quarantine period. Separately, the Administration did not rule out the possibility to amend the relevant regulations under the Ordinance to add "hotel or guesthouse" as a new type of scheduled premises and regulate group gatherings at any scheduled premises to further tighten the anti-epidemic measures. The Chairman urged for an early implementation of these measures.

[At 11:51 am, the Chairman proposed to deal with the motion proposed by Mr Michael TIEN, which was directly related to the agenda item under discussion and the wording of which was tabled at the meeting, towards the end of discussion of this agenda item. Members raised no objection.]

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Handling of community outbreak clusters

39. While expressing appreciation to the Administration's swift response to the community outbreak in Tai Po, Mr CHAN Hak-kan suggested that the Administration should extend the operation period of the mobile specimen collection stations set up in the district and step up publicity to encourage utilization of the service with a view to identifying the asymptomatic cases in the community. SFH assured members that the above measures would be enhanced as and when necessary. It should also be noted that four longer-term community testing centres on Hong Kong Island and in Kowloon, New Territories East and New Territories West would commence service starting from 15 November 2020 for providing affordable self-paid testing services for private purposes and meeting unexpected testing needs in a more efficient and flexible manner.

40. Mr Wilson OR considered that an additional community testing centre should be set up in Kowloon East to make the service more accessible to residents in the area. SFH advised that FHB had been working closely with the Home Affairs Bureau to identify suitable venues for the setting up of community testing centres. The Administration would keep in view the operation of the four centres and examine how to enhance the service.

Use of the "LeaveHomeSafe" mobile application

41. Referring to the recent launch of the "LeaveHomeSafe" COVID-19 exposure notification mobile application to encourage the public to record the date and time for checking into and leaving different venues by scanning the venue QR code so that users who visited the same venues at around the same time as a confirmed case would receive notifications with health advice, the Chairman was concerned that the use of which was not made mandatory. Dr CHIANG Lai-wan proposed that inbound travellers be required to use the mobile application to facilitate epidemiological surveillance in case any of them became a confirmed case after the 14-day compulsory quarantine period. Mr YIU Si-wing considered that the Administration should mandatorily request the display of QR code at all public venues to enhance public use. SFH advised that in the meantime, the Administration would strive for encouraging participation and step up promotion to solicit the support of various sectors and the public.

Procurement of vaccines

42. Mr Wilson OR called on the Administration to liaise with the Mainland and other places to expedite the delivery of COVID-19 vaccines to Hong Kong. SFH advised that the Government had joined the COVAX

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Facility to procure vaccines to cover 35% of the Hong Kong population. At the same time, with regard to scientific evidence and clinical data and in consultation with the relevant scientific committees under DH, the Government would pursue additional supplies through Advance Purchase Agreements with individual vaccine developers. Its goal was to procure at least two candidate vaccines from different vaccine developers across different vaccine platforms and sufficient doses of vaccines to cover at least twice the Hong Kong population.

43. Noting that the Health and Medical Research Fund had supported two local universities to conduct four vaccine-related research and development projects with a total commitment of \$29.5 million, Mr POON Siu-ping requested the Administration to expedite the implementation of the projects. SFH advised that the projects were at their early stage.

Suspension of face-to-face classes

44. Referring to the face-to-face classes suspension at kindergartens and kindergarten-cum-child care centres from 14 to 27 November 2020 owing to the recent outbreaks of upper respiratory tract infection ("URTI"), Ms YUNG Hoi-yan was concerned about the support for those students who lacked carers at home. She called on the Administration to take measures, such as enhancing school outreach vaccination services and providing updated information on private clinics with vaccine stock via various channels, to increase seasonal influenza vaccination uptake amongst school students. SFH advised that the schools would remain open during the period to take care of those student who had to return to schools for various reasons. As regards the vaccination coverage rate of school children, C, CHP advised that the vaccination uptake rate of children aged from six months to six years old was about 25%.

Motion

45. The Chairman referred members to the following motion moved by Mr Michael TIEN:

"鑒於本港面臨第四波疫情爆發，昨日(2020年11月12日)出現23宗2019冠狀病毒病確診個案，其中6宗為本地個案源頭不明。本會要求政府實施更為嚴格的檢測安排。據悉，現時機組人員等豁免人士，只需在家中採集樣本，或到衛生署臨時樣本採集中心提交深喉唾液樣本，不需獲得結果即可離開。本會要求所有經機場及海路入境，包括豁免人士在內，

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抵港時需到指定採集樣本場地，由職員為抵港者進行"鼻腔和咽喉合併拭子"測試。"

(Translation)

"Given that Hong Kong is facing the fourth wave of the epidemic with 23 confirmed cases of coronavirus disease 2019 identified yesterday (i.e. 12 November 2020) and six of them being local cases with unknown sources, this Panel requests the Government to implement more stringent testing arrangement. It is learnt that exempted persons (such as air crew members) are currently required only to have their deep throat saliva samples collected at home or submitted to the temporary specimen collection centre of the Department of Health and can leave immediately without having to wait for the results. This Panel requests that all inbound travellers (including exempted persons) arriving at Hong Kong by air or sea are required to proceed to a designated sample collection venue to undergo combined nasal and throat swab testing conducted by staff."

46. Ms Starry LEE sought elaboration about the existing testing and isolation arrangement for air crew and sea crew members. C, CHP advised that all incoming air crew and sea crew members arriving at HKIA were subject to compulsory testing and had to wait for the results at designated locations. SFH added that respective organizations had to arrange point-to-point transportation for exempted persons and the use of public transport was prohibited.

47. In response to the remarks of the Chairman and Mr Michael TIEN, SFH advised that while deep throat saliva was considered effective in identifying confirmed cases, the Administration was open to adopting other specimen collection methods based on scientific evidence. To facilitate their collection of deep throat saliva specimen at HKIA, a demonstration video would be showed to the people concerned. C, CHP supplemented that while it would be most desirable if the deep throat saliva was collected after a person get up in the morning and before eating, drinking and teeth brushing, the timing for specimen collection did not have significant impact on the accuracy of test results. The Chairman opined that if this was the case, there was a need to revise the relevant guidelines in the specimen collection pack to avoid delay in the collection and returning of specimens.

48. At the request of Mr Michael TIEN, the Chairman ordered that the voting bell be rung for five minutes to notify members of the voting. The Chairman then put the motion to vote. The results were: 19 members voted

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in favour of the motion, and no member voted against the motion or abstained from voting. The Chairman declared that the motion was carried.

[At 12:35 pm, the Chairman informed members of her decision to extend the meeting for 15 minutes beyond its appointed time to allow more time for discussion.]

VII. Supply of seasonal influenza vaccines

[LC Paper Nos. CB(2)47/20-21(01) and CB(2)191/20-21(08) to (09)]

49. Under Secretary for Food and Health ("USFH") briefed members on the measures taken by the Administration to ensure the supply of influenza vaccines, details of which were set out in the Administration's paper (LC Paper No. CB(2)191/20-21(08)).

50. Members noted the letter dated 19 October 2020 from Prof Joseph LEE (LC Paper No. CB(2)47/20-21(01)) and the information note prepared by the LegCo Secretariat (LC Paper No. CB(2)191/20-21(09)) on the subject under discussion.

Supply of seasonal influenza vaccines

51. In view of the tight supply of vaccine in the private healthcare sector in the past and current winter influenza seasons, Mr Michael TIEN called on the Administration to procure a larger quantity of vaccines for the provision of free vaccination for the whole population or at the very least, about half of the population. He remarked that all residents in Macao could receive influenza vaccines free of charge. The Chairman asked about the quantities of vaccines fell short of the demand, and how the Administration could ensure that there would be sufficient quantities of vaccine in the upcoming and future winter influenza seasons for all high-risk persons, in particular children and elders aged 60 or above. Mr Wilson OR queried about the factors the Administration had taken into account in deciding the quantities of vaccine procured.

52. USFH advised that at present, needy eligible groups under the Government Vaccination Programmes could receive seasonal influenza vaccination free of charge, whereas eligible groups under the Vaccination Subsidy Scheme were provided with subsidized vaccines. The coverage of these eligible groups would be reviewed annually by the Scientific Committee on Vaccine Preventable Diseases under DH. About half year prior to the coming winter influenza season, the Administration would make the best estimate on the quantity of vaccines required each year by making

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reference to the scope of eligibility, number of doses administered in the previous season, expected increase of vaccination rate and unavoidable wastage of vaccines, etc. For the 2020-2021 Government Vaccination Programme and the "Seasonal Influenza Vaccine School Outreach (Free of Charge) – Primary Schools", a total of 878 000 doses of inactivated influenza vaccine had been procured. In view of the recent keen demand for seasonal influenza vaccines by members of the public and the tight supply in this regard around the world, the Administration would procure additional doses of vaccines, and provide an additional 100 000 doses in phases to Public-Private-Partnership Team which provided vaccination for schoolchildren and doctors enrolled in the Vaccination Subsidy Scheme that required the vaccines.

53. In response to Mr POON Siu-ping's enquiry about the source of the additional 100 000 doses of seasonal influenza vaccines, USFH advised that about two-thirds of which would be from new procurement and the remaining was set aside from the quantities that had already been procured. Mr Wilson OR urged the Administration to advance the completion of the allocation of these 100 000 doses of vaccines to the private healthcare sector from the original target of end of December 2020 to mid-November 2020 and step up publicity to achieve a higher uptake rate under the Government Vaccination Programme. Director (Cluster Services), HA ("D(CS), HA") advised that around 220 000 and 38 000 doses of seasonal influenza vaccines had already been administered to patients and staff of HA respectively. It was expected that the total number of doses administered by HA would reach 480 000 doses.

54. Dr Priscilla LEUNG requested the Administration to give a response to the recent adverse events in Korea whereby some vaccinated persons died soon after administration. Mr Holden CHOW was concerned about whether the batches of vaccines involved in the Korean adverse events would be supplied to the private healthcare sector in Hong Kong. USFH advised that DH had been closely monitoring the situation and noted that according to the health authority concerned, there was no evidence indicating association between the deceased's outcome and vaccination. It should also be noted that most of the vaccines involved in the adverse events were manufactured locally in Korea. For the brand of vaccines that were supplied to Hong Kong, DH had confirmed with the vaccine supplier that the influenza vaccine supplied and to be supplied to Hong Kong was and would be of different batches. He appealed the public to receive influenza vaccines to prevent the disease and its complications.

55. Dr Pierre CHAN said that influenza vaccines under the "Seasonal Influenza Vaccines School Outreach (Free of Charge) – Primary Schools"

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and the "Seasonal Influenza Vaccines School Outreach (Free of Charge) – Kindergartens, Kindergartens-cum-Child Care Centres and Child Care Centres" were procured by the Administration and the participating private doctors respectively. Relaying the concern of some participating private doctors that they had difficulties in procuring appropriate doses of vaccine as the uptake rate would be affected by various factors, such as the Korean adverse events and class suspension due to the COVID-19 epidemic, he asked about the reason for the above different arrangements.

56. USFH advised that the making of the above arrangement was based on the fact that the number of kindergartens, kindergartens-cum-child care centres and child care centres was greater in number but the median number of students of each centre was smaller, and the feedback of some participating doctors that it would be more flexible in terms of logistic arrangement if the vaccines were procured on their own. That said, the Administration would keep in view the implementation in considering the arrangement for the next winter influenza season.

Response measures of HA

57. Mr POON Siu-ping was concerned about whether the manpower of healthcare professionals and allied health personnel of HA was adequate to address the surge in service demand arising from both the winter influenza season and the COVID-19 epidemic. The Chairman called on HA to plan early for enhancing its manpower and the service capacity to meet the demand. D(CS), HA advised that HA had put in place various measures to cope with the possible service demand surge during the COVID-19 epidemic and the winter influenza season. These measures included enhancing the use of telemedicine; diverting suitable patients from public hospitals for treatment in private hospitals under the Public-Private Partnership Programmes; and recruiting and training locum doctors to support the operation of the Community Treatment Facility at the AsiaWorld-Expo where necessary. Regarding the latter, 40 locum doctors had so far completed the training.

[At 12:57 pm, the Chairman suggested that the meeting be further extended to end at 1:15 pm. Members raised no objection.]

Outbreaks of URTI in the school setting

58. Mr CHAN Han-pan was concerned about the recent outbreaks of URTI in individual schools when all students had already been advised to wear surgical masks at all times inside the school premises under the COVID-19 epidemic. He called on the Administration to further enhance

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the measures for the prevention and control of the spread of communicable diseases in the school setting, such as maintaining good indoor ventilation and avoiding having large groups of student gathering. C, CHP advised that while DH had already provided health advices to take precautionary measures to minimize the risk of spreading of communicable diseases at schools, some children might be too young to maintain good personal hygiene. In view of the outbreaks of URTI, all kindergartens and kindergarten-cum-child care centres would start suspension of face-to-face classes and school activities from 14 to 27 November 2020.

[At 1:14 pm, the Chairman suggested that the meeting be further extended for five minutes. Members raised no objection.]

59. Ir Dr LO Wai-kwok asked whether the administration of seasonal influenza vaccines or other vaccines under the government vaccination programmes could help prevent URTI. USFH advised that rhinovirus, enterovirus and seasonal influenza virus were some of the infectious agents of URTI. While the illnesses associated with rhinovirus and enterovirus were generally mild, children, elders, patients with chronic diseases and pregnant women were of higher risk of influenza complications. Hence, it was a global trend to recommend the administration of seasonal influenza vaccine to prevent the disease and its complications.

Other issues of concern

60. Drawing the supply of seasonal influenza vaccines as a reference, Dr Priscilla LEUNG called on the Administration to ensure that there would be an adequate supply of COVID-19 vaccines across different vaccine platforms to cover the whole population.

61. On Ir Dr LO Wai-kwok's concern that high-risk groups of COVID-19 were currently not subject to compulsory testing, USFH advised that the legislative exercise to subject certain categories of persons to compulsory testing was in progress.

Conclusion

62. In closing, the Chairman urged the Administration to ensure adequate supply of seasonal influenza vaccines in the current winter influenza season and consider the suggestion of providing population-wide seasonal influenza vaccination in the future.

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VIII. Any other business

63. There being no other business, the meeting ended at 1:16 pm.

Council Business Division 4
Legislative Council Secretariat
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