

**立法會**  
**Legislative Council**

LC Paper No. CB(4)1765/20-21  
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the Administration)

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**Panel on Health Services**

**Minutes of meeting held on  
Friday, 20 August 2021, at 10:45 am  
in Conference Room 3 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 WONG Ting-kwong, GBS, JP  
Hon Starry LEE Wai-king, SBS, JP  
Hon CHAN Kin-por, GBS, JP  
Dr Hon Priscilla LEUNG Mei-fun, SBS, JP  
Hon Mrs Regina IP LAU Suk-ye, GBM, GBS, JP  
Hon Michael TIEN Puk-sun, BBS, JP  
Hon YIU Si-wing, SBS  
Hon CHAN Han-pan, BBS, JP  
Hon LEUNG Che-cheung, SBS, MH, JP  
Hon Alice MAK Mei-kuen, BBS, JP  
Hon POON Siu-ping, BBS, MH  
Dr Hon CHIANG Lai-wan, SBS, JP  
Hon SHIU Ka-fai, JP  
Dr Hon Pierre CHAN  
Dr Hon CHENG Chung-tai

**Public Officers attending** : Agenda item III  
  
Prof Sophia CHAN Siu-chee, JP  
Secretary for Food and Health  
  
Ms Leonie LEE Hoi-lun  
Principal Assistant Secretary for Food & Health (Health)1

Dr Ronald LAM Man-kin, JP  
Controller, Centre for Health Protection  
Department of Health

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

Agenda item IV

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

Mr Chris FUNG Pan-chung  
Principal Assistant Secretary for Food and Health (Health)<sup>3</sup>

Prof Agnes TIWARI  
Chairman, Nursing Council of Hong Kong

Ms Alice TANG Suk-man  
Secretary (Nursing Council & Midwives Council)  
Department of Health

Mr Lawrence POON  
Chief Manager (Nursing)/Chief Nurse Executive  
Hospital Authority

**Clerk in attendance** : Mr Colin CHUI  
Chief Council Secretary (4)<sup>3</sup>

**Staff in attendance** : Ms Macy NG  
Senior Council Secretary (4)<sup>3</sup>

Miss Natalie YEUNG  
Council Secretary (4)<sup>3</sup>

Miss Ariel SHUM  
Legislative Assistant (4)<sup>3</sup>

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**I. Information paper(s) issued since the last meeting**

Members noted that no paper had been issued since the last meeting.

**II. Items for discussion at the next meeting**

[LC Paper Nos. CB(4)1375/20-21(01) and (02)]

2. Members agreed to discuss the following subjects at the next regular Panel meeting scheduled for 10 September 2021:

(a) Measures for the prevention and control of coronavirus disease 2019 ("COVID-19") in Hong Kong; and

(b) Implementation of the Hong Kong Genome Project.

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

[LC Paper Nos. CB(4)1375/20-21(03) and (04), CB(4)1272/20-21(01) to (03), CB(4)1292/20-21(01) to (05), CB(4)1332/20-21(01) to (11) and CB(4)1387/20-21(01) to (05)]

3. The Chairman said that on 19 August 2021, she invited the Secretary for Commerce and Economic Development ("SCED") to this meeting to explain the arrangements for exemption from compulsory quarantine in view of the public concern about such exemption given to Ms Nicole KIDMAN ("NK") and her crew for their recent visit to Hong Kong for filming ("NK's Exemption"). However, SCED had declined her invitation and referred members to note the relevant press release issued on 19 August 2021 at <https://www.info.gov.hk/gia/general/202108/19/P2021081900509.htm>, which was tabled at the meeting. She added that the Panel might from time to time invite policy bureaux other than the Food and Health Bureau ("FHB") to the Panel meeting to answer members' enquiries in relation to COVID-19. She expressed the hope that the bureaux which had been so invited would be willing to do so.

4. At the invitation of the Chairman, Secretary for Food and Health ("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(4)1375/20-21(03)).

Border control measures

*Arrangements on quarantine exemption*

5. In view of members' grave concern over NK's Exemption, the Chairman requested the Administration to explain the current quarantine exemption mechanism for inbound travellers.

6. SFH advised that under section 4(1) of the Compulsory Quarantine of Persons Arriving at Hong Kong from Foreign Places Regulation (Cap. 599E), the Chief Secretary for Administration ("CS") might designate any person or category of persons fulfilling certain criteria for quarantine exemption. Such criteria included the person's or persons' travelling was necessary for purposes relating to manufacturing operations, business activities or the provision of professional services in the interest of Hong Kong's economic development. Under section 4(1) of Cap. 599E, CS might also attach conditions to a designation.

7. SFH further explained that NK's Exemption was submitted by the Commerce and Economic Development Bureau ("CEDB") for CS's consideration, and FHB had offered its advice to CS in respect of public health. Exempted persons must comply with designated disease prevention measures and other conditions (including vaccination requirement) to minimize any transmission risk and contact with the public. CEDB had carried out and would conduct checks, verification and monitoring to ensure compliance. So far, no breach of the exemption conditions by the personnel concerned had been identified.

8. Considering that the Administration lacked a political sense in NK's incident, Mr Michael TIEN asked whether all Hollywood film stars were exempted from compulsory quarantine upon arrival, if not, why NK had preferential treatment; how CS measured the economic benefit brought by NK's visit to Hong Kong; the number of NK's crew members who were also exempted from compulsory quarantine; whether NK and her crew were required to wear masks all the time during their stay in Hong Kong except during filming; and whether they could eat at a local restaurant.

9. In response, SFH said that the conditions for quarantine exemption were stringent. Exempted persons were subject to self-isolation at designated location and should comply with mask-wearing requirement in public area. She added that the number of NK's crew members was minimal but could not be disclosed due to its confidential nature. As for taking meal at a local restaurant,

SFH advised that NK and her crew members were required to adhere to the pre-approved work-related itineraries and minimize any contact with the public.

10. Dr Priscilla LEUNG opined that NK's incident was not just about political sensitivity but also related to health and safety as well as fairness to Hong Kong people. She considered that FHB should not shift the duty to CEDB and should say "no" for granting such exemption from the perspective of public health.

11. SFH clarified that FHB had never shifted the duty to CEDB and explained that NK's Exemption had followed the established quarantine exemption mechanism of the Government under Cap. 599E. She stressed that the exempted persons were not allowed to tour around Hong Kong freely and had to comply with exemption conditions.

12. Mr POON Siu-ping asked about the number of persons who had been exempted from quarantine by the Administration so far. SFH replied that she did not have the requested information.

13. The Chairman considered that measures to prevent importation of cases should be fair to everyone to prevent any missing cases, and Hong Kong's infection control standard should be on par with that of the Mainland, otherwise, the goal to resume cross-border activities with the Mainland would become impossible. She requested the Administration not to grant quarantine exemption to persons from high-risk places. She was also concerned about how the Administration would monitor the compliance of exemption conditions by exempted persons.

14. SFH advised that when granting quarantine exemption to NK and her crew, Australia was not a high-risk place. The Administration was very cautious in granting quarantine exemption to persons especially those from high-risk places. There were cases in the past not being granted quarantine exemption. She further said that the subject bureau would monitor the compliance with the exemption conditions by exempted persons.

15. Mr SHIU Ka-fai noted that quarantine exemption had been granted to qualified persons in financial services sectors since May 2021 and exempted persons were subject to some conditions and requirements. He asked whether the above arrangement was the same as that of NK. He also enquired about whether there were any confirmed cases involving exempted persons in financial services sectors since May 2021. In his view, allowing NK for filming in Hong Kong might have a positive effect by promoting that Hong Kong was safe, when

foreigners might have a negative image of Hong Kong by the earlier "black violence" incidents therein. He also requested the Administration to give thoughts on Hong Kong's immigration control strategy in the long run which would have an impact on Hong Kong's economy, when Singapore and some European countries chose to live with virus and exempt some inbound travellers from quarantine.

16. SFH replied that so far, there were no confirmed cases involving exempted persons in financial services sectors. Those exempted persons were required to comply with quarantine, testing and vaccination requirements, and adhere to the approved work-related itinerary. The above exemption arrangements, together with NK's Exemption, were made under the established mechanism put into place under Cap. 599E. She added that the Administration would review the exemption mechanism from time to time on a risk-based approach having regard to the overseas epidemic situation.

17. Mrs Regina IP recognized that apart from NK, there were other categories of persons who were also exempted from compulsory quarantine requirement upon arrival in Hong Kong under the relevant legislation, such as cross-boundary goods vehicle drivers and consulate staff. She believed that when CEDB submitted the exemption application to CS for approval, it had duly considered the positive impact of NK's arrival on Hong Kong's image. She asked about the details of the safety package imposed on NK and her crew.

18. SFH advised that the exemption conditions of NK and her crew were stringent. They were subject to the "test-and-hold" arrangement upon arrival in the Hong Kong International Airport ("HKIA"). Besides, they were required to undergo COVID-19 tests on the 3<sup>rd</sup>, 7<sup>th</sup> and 12<sup>th</sup> day upon arrival, and were subject to medical surveillance for 14 days. In addition, for the first seven days upon arrival, they could only travel point-to-point, stay at a designated place and adhere to the pre-approved work-related itineraries. In case of any violation of exemption conditions, the exemption status of the relevant exempted persons would be revoked and they would be sent to government quarantine centre for compulsory quarantine. She added that according to section 15 of the Prevention and Control of Disease Regulation (Cap. 599A), contravention of the conditions in the Notification of Medical Surveillance would be liable to a fine of \$5,000 and to imprisonment for six months.

19. Mrs Regina IP further asked whether the Administration had strengthened the monitoring of consulate staff and their immediate family members being exempted from compulsory quarantine to ensure their compliance with the

exemption conditions after the incident of Saudi Arabian officials violating the exemption conditions after arrival. She also asked about the level of consulate staff who, together with their immediate family members, would be granted quarantine exemption under Cap. 599E. Dr CHIANG Lai-wan considered that whilst it was understandable to grant quarantine exemption to consulate staff, the need to grant such exemption to their immediate family members was questionable.

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20. SFH advised that after the incident of Saudi Arabian officials violating the exemption conditions, the Protocol Division had issued letters to respective Consulates General to advise relevant persons to strictly comply with the exemption conditions. The Administration had also notified the Ministry of Foreign Affairs of the People's Republic of China of the case. She added that only the highest level of consulate staff and their immediate family members would be granted quarantine exemption. At the request of Mrs IP, she agreed to provide supplementary information on such details.

*Shortening quarantine period for vaccinated inbound travelers*

21. Regarding Mr Michael TIEN's concern about shortening the quarantine period for vaccinated inbound travellers, SFH advised that such decision was recommended by the Scientific Committee on Vaccine Preventable Diseases and the Scientific Committee on Emerging and Zoonotic Diseases ("Joint Scientific Committee, JSC") joined by the Chief Executive's expert advisory panel ("EAP") ("JSC-EAP"). With the presence of mutant strains and in view of the latest scientific evidence, they subsequently made a new recommendation to tighten the quarantine period. She stressed that the Government had all along been adopting border control measures with a science-based approach.

*Measures to prevent persons in contact with inbound travellers from infection*

22. The Chairman, Mr LEUNG Che-cheung and Mr SHIU Ka-fai expressed concern over the case of a woman who worked at an airline lounge and was confirmed with the L452R variant of COVID-19 on 17 August 2021. Mr LEUNG asked about the Administration's measures to prevent infection at the airport. The Chairman asked whether the Administration would consider separating passengers who were arriving, leaving or merely transiting to prevent transmission of virus. Mr SHIU asked whether there was a requirement that staff working in high-risk jobs should receive vaccination. In the view of Dr CHIANG Lai-wan, only vaccinated staff should be arranged to perform jobs which would have chances of contact with inbound travellers and hence higher infection risks.

23. In response, SFH advised that the Airport Authority ("AA") was cooperating with the Transport and Housing Bureau ("THB") to review the infection control measures at the airport. She pointed out that AA had imposed a requirement (which would take effect from 1 August 2021) that all employees who entered the restricted area of HKIA must show either a certificate of vaccination or negative results of a COVID-19 test taken within 14 days. The Administration had requested AA to review whether the infection control measures for airport staff could be further strengthened in terms of vaccination and testing requirements including shortening the testing interval to seven days. The Centre for Health Protection of the Department of Health ("DH") ("CHP") would continue to assess the health risk in various spots in the airport.

24. SFH added that the infection control measures to guard against importation of cases had generally been tightened in August 2021, such measures included re-categorizing overseas places into high-risk, medium-risk and low-risk groups, and strengthening infection control measures for staff of airport, designated quarantine hotels ("DQHs") and designated transport to DQHs arranged by the Government.

25. Controller, CHP added that there were some confirmed cases recently involving persons working in the airport. CHP had investigated each case and had given some advice to AA for follow up. The advice covered appropriate level of personal protective equipment, disinfection procedures and segregation of work flow. He added that CHP's epidemiological investigation revealed that for the lounge worker case, she might have been infected by transit passengers who were mask-off while eating, while whole genome sequencing showed no match of previous imported cases. CHP and AA would study how the work process at airport lounge could be further enhanced to prevent infection.

*Health risk arising from the organization of the Standard Chartered Hong Kong Marathon 2021*

26. The Chairman, Mrs Regina IP and Mr SHIU Ka-fai expressed concern over possible COVID-19 transmission in the Standard Chartered Hong Kong Marathon 2021 to be organized, as runners would be mask-off during the event. Mrs IP asked whether overseas participants would be exempted from compulsory quarantine and whether the Administration had assessed the public health risks of the event. She cautioned that the Government would be held responsible if there was local transmission arising from the event. The Chairman said that if the event was going to be held, sufficient infection control measures should be taken.



27. In response, SFH believed that the Home Affairs Bureau ("HAB") had duly considered and balanced all factors before giving green light for the sport event. She further said that stringent measures to prevent COVID-19 would be taken for the event, which included all participants having vaccinated and obtained negative COVID-19 testing result. For overseas runners, only those from Group C low-risk countries and the Mainland would be allowed to participate in the event after observing the relevant quarantine period. Like all other vaccinated arrivals from Group C countries, they were required to undergo compulsory quarantine for seven days upon arrival at Hong Kong. HAB would monitor the implementation of the infection control measures for the event.

*Demand for designated quarantine hotel services and measures to avoid infection at hotels*

28. Mr YIU Si-wing expressed concern that following the Administration's upgrading of 15 overseas countries from medium-risk places to high-risk places, a large number of inbound travellers were subject to longer period of compulsory quarantine at DQHs. He enquired about the Administration's arrangements to increase the supply of rooms at DQHs to meet the increased demand. He also asked whether the Administration would issue guidelines to testing service contractors requiring them to take measures to prevent transmission of virus at DQHs during the process of collecting specimen, such as reminding hotel guests to close windows before opening doors, and avoid collecting specimen from more than one room at the same time.

29. SFH advised that to meet the surge in demand for rooms at DQH, the reserve rooms under the fourth cycle of the DQH Scheme had been released for booking. Up to 17 August 2021, the average booking rate under this cycle was about 72%. The Administration planned to request DQHs under the fifth cycle to release around 1 500 reserve rooms for booking. She added that the Administration would continue to monitor the demand for rooms at DQH and would review if there was any room for strengthening the infection control measures at DQHs.

30. Mr Tommy CHEUNG expressed concern that the tightened compulsory quarantine requirements for inbound travellers had caused practical problems to them, for example, some DQHs did not allow extension of stay nor refund after cancellation of booking. He requested the Administration to follow up the issues and provide assistance to inbound travellers who had difficulty in hotel and flight booking arising from its policy change. The Administration noted Mr CHEUNG's view.

*Resumption of "cruise-to-nowhere" itineraries*

31. Mr YIU Si-wing asked whether the Administration would consider relaxing the requirement that passengers of "cruise-to-nowhere" itineraries must present a negative result of a COVID-19 polymerase chain reaction-based nucleic acid test the sample of which must be taken within 48 hours prior to boarding by extending the duration to 72 hours, with a view to providing convenience to passengers.

32. SFH advised that the shorter the duration of the testing requirement prior to boarding, the safer would be for passengers. The Administration considered it appropriate to keep the current arrangement for the time being.

Coronavirus disease 2019 test

33. Mr WONG Ting-kwong noted that starting from August 2021, free COVID-19 testing at community testing centres would only be provided for individual eligible persons of targeted groups and those who did not meet the eligibility/conditions were required to pay for the testing service at \$240. Since some targeted groups were required to undergo testing more frequently if they had not been vaccinated and those who did not want to get vaccinated had to pay for the self-paid testing service, he asked whether the testing fee could be reduced.

34. SFH explained that the Administration had increased the frequency of undergoing test by some staff members of high-risk jobs to lower the risk of transmission and encourage vaccination. The testing fee for self-paid service was charged by testing service providers and could be subject to change if there was a next round of tender exercise.

35. Referring to a case where a cleaner was temporarily not medically fit to receive vaccination after undergoing an operation, Dr Pierre CHAN asked whether the cleaner concerned could undergo the test free of charge and, if yes, the relevant procedure.

36. SFH advised that the cleaner concerned under an eligible targeted group could undergo testing at a community testing centre free of charge upon presentation of medical certificate proving that he/she was medically unfit to receive COVID-19 vaccination. She explained that only unvaccinated persons who were fit to receive vaccination but did not do so would need to pay for taking the self-paid test.

## Vaccination Programme

### *Measures to boost the vaccination rate*

37. Dr CHIANG Lai-wan expressed grave concern that some schools had forced their students to receive vaccination before the new school year in September 2021. She pointed out that there was only one vaccine (i.e. the BioNTech vaccine) available for students and many parents were very worried about the possible heart muscle inflammation caused by the vaccine. She hoped that the Administration would reflect the above concern to the Education Bureau ("EDB") and explore with the drug manufacturer of Sinovac on lowering the age threshold for receiving its vaccine.

38. SFH said that the Administration would not mandate people to receive vaccination. Clinical research data was being sought from the drug manufacturer of Sinovac and would be referred to experts for consideration, assessment and recommendation. She also undertook to reflect Dr CHIANG's concern to EDB.

39. Mr POON Siu-ping asked about the Administration's measures to prevent outbreak in school for the coming school year. SFH said that EDB had earlier announced the arrangements in the new school year and there had been no change so far.

40. The Chairman enquired about the overall vaccination rate in the civil service and the Hospital Authority ("HA"), SFH replied that the vaccination rate of civil servants was more than 70%. The Chief Manager (Infection, Emergency & Contingency) of HA reported that as at 19 August 2021, the overall vaccination rate in HA was 88% with the relevant rate for its doctors to be 97% and nurses 86%.

41. Dr CHENG Chung-tai criticized that whilst the Administration had been saying that it would not mandate people to receive vaccination, the self-paid testing requirement for unvaccinated staff of targeted groups was de facto forcing the relevant personnel to get vaccinated, and was bullying the disadvantaged. He requested the Administration to explain whether the above requirement had violated the Basic Law. He added that as the vaccines' efficacy in preventing the infection of mutant strains was doubtful, it meant that testing for targeted groups was still necessary after vaccination. The Administration might have to resume the policy of offering free testing service by then.

42. SFH explained that unlike compulsory testing which was stipulated under the law, there was no legislation mandating people to receive vaccination. The Administration understood that not every person was suitable for receiving vaccines and so flexibility had been given to those persons who should instead obtain negative COVID-19 testing result. The Administration considered that those people who were medically fit should receive vaccination to protect themselves and other people, as the two COVID-19 vaccines authorized for use in Hong Kong had been rigorously evaluated by experts that they were safe, effective and of good quality, and could provide effective protection against mutant strains. She further explained that the targeted groups were determined based on risk and the test was provided to them free of charge at the beginning. With more people in society receiving vaccination, enhanced convenience of receiving vaccination, and availability of more information relating to vaccination, the Administration had earlier announced that a fee would be charged for taking the test in due course.

43. Mr Tommy CHEUNG considered the tightened measure which required unvaccinated staff of Type B catering premises to undergo regular test from every 14 days to every seven days starting from 26 August 2021 unfair to them, given that no outbreak had occurred in such type of premises. He urged the Administration to provide more incentives for those staff members to receive vaccination, for example, allowing vaccinated production-section staff to wear plastic transparent masks, which were more breathable, in the kitchen, instead of surgical masks.

44. SFH advised that the Administration had been liaising closely with the catering sector when implementing infection control measures. She explained that increasing the frequency of testing requirement for various high-risk groups or high exposure groups like DQH staff was a general measure to tighten the infection control measure and was not intended to target a particular trade. She strongly recommended staff of catering premises to receive vaccination in lieu of regular tests. For the time being, no experts had recommended mask-off for vaccinated staff but the Administration would review such requirement if the vaccination rate in Hong Kong was high.

#### *Herd immunity*

45. Mr Michael TIEN asked how the Administration would enhance public protection when there were findings that the antibody levels declined after vaccination for some time, and whether the Administration would consider

linking the herd immunity with the percentage of people with sufficient level of antibody, instead of vaccination rate.

46. SFH advised that the Administration had commissioned universities to undertake a study on the relationship between the level of antibodies and immunity against infection, and the relevant findings would be published in due course.

47. Mr POON Siu-ping asked about the target vaccination rate set by the Administration to achieve herd immunity. SFH advised that the vaccination rate in Hong Kong was on the rise and might reach 70% in late September 2021. She added that it was the goal of the Administration that all Hong Kong people who were medically fit would receive vaccination, in particular older adults and those with pre-existing medical conditions who had a higher risk of severe disease and death.

*Procurement, supply and administration of vaccines*

48. Dr Priscilla LEUNG, Mr WONG Ting-kwong and Mrs Regina IP enquired about whether the Administration would consider providing the third dose of vaccine to Hong Kong people to enhance protection.

49. SFH and Controller, CHP advised that JSC-EAP had discussed the above matter earlier and would hold a meeting in mid-September 2021 to further discuss it when more data would be available for consideration by then. SFH said that there was a view that persons with weakened immunity might need the third dose of COVID-19 vaccine.

50. Controller, CHP added that research institutes were collecting data and studying the matter. While there were some studies showing that the antibodies after vaccination could persist for six to nine months, the COVID-19 Vaccination Programme in Hong Kong had only been implemented for about six months, which fell short of a year to enable a comprehensive review of whether there was a need for the third dose to boost up the antibodies level. He further explained that antibodies level did not necessarily correlate with the full immunity level. Another indicator of immunity was related to T-cell response, which would protect against severe diseases. He added that the World Health Organization ("WHO") warned countries not to hoard vaccines for third dose while poor countries had limited supplies.

51. Mr SHIU Ka-fai noted that under the current arrangement, persons recovered from COVID-19 infection could only receive one dose of COVID-19 vaccine in Hong Kong. He asked whether they could receive the second dose of vaccine at their cost to facilitate their meeting the requirement for a double vaccination when travelling to overseas countries such as the United States of America and Canada.

52. Controller, CHP advised that JSC-EAP noted that the antibody level of those persons with previous COVID-19 infection could maintain for six to nine months and recommended that they would be further protected by one dose of COVID-19 vaccine. Regarding the dosing schedule, they could receive vaccine 90 days or 180 days after being discharged from COVID-19 infection subject to the type of vaccine to be received. JSC-EAP was concerned that providing the second dose of COVID-19 vaccine for those persons with previous COVID-19 infection might entail greater reactogenicity to the vaccines. He further advised that WHO had yet to produce guidelines on vaccination for persons who had recovered from COVID-19. Nevertheless, with the ongoing mutation of virus and accumulation of relevant data, JSC-EAP would monitor the latest scientific development and review the vaccination arrangement accordingly.

53. Mr WONG Ting-kwong asked whether the Administration would introduce a new type of vaccine to Hong Kong and whether mixing different COVID-19 vaccines was acceptable.

54. SFH advised that the two vaccines (i.e. the Sinovac vaccine and BioNTech vaccine) procured and authorized for emergency use by the Government were already sufficient for vaccination by the entire population of Hong Kong. She added that the Administration had started to consider procuring the next generation COVID-19 vaccines with better efficacy in terms of protection against mutant virus strains, with a view to planning for the next phase of vaccination programme in Hong Kong. The protection power of the vaccines against mutant virus strains was an important factor of consideration by the Administration in authorizing and procuring COVID-19 vaccines in the future.

55. Controller, CHP advised that JSC-EAP had discussed the mixing of different COVID-19 vaccines. It had concluded that mixing different brands of COVID-19 vaccines which were developed on the same technology platform, e.g. Moderna and BioNTech vaccines, due to special reasons could be acceptable. Meanwhile, the AstraZeneca vaccine, which was developed on the viral vector platform, had been mixed with mRNA vaccines in overseas countries. JSC-EAP considered that mixed vaccination of those vaccines was also acceptable. As for

mixing other vaccines with the Sinovac vaccine, JSC-EAP considered that this should be assessed by healthcare personnel case by case.

56. Referring to the recent media reports that the BioNTech vaccine, which had to be stored at below minus 70 degrees Celsius, could now be stored at 2-8 degrees, Mr POON Siu-ping asked whether private clinics could administer the BioNTech vaccines. In the light of the recent vaccination irregularities such as giving two doses of vaccines at one time and giving wrong vaccines, he also asked about the Administration's measures to ensure the safety of vaccination.

57. In reply, SFH said that the Administration was discussing the possibility of administration of the BioNtech vaccine in private clinics run by private medical organizations. DH would put in place a monitoring mechanism and would investigate any irregularities. The personnel involved might be warned against the irregularities.

58. Mr LEUNG Che-cheung appreciated the arrangement of distributing same-day tickets for the elderly and disabled persons to receive COVID-19 vaccination at Community Vaccination Centres without appointment. He expressed his hope that the arrangement could be extended to other people in particular those with mobility difficulty. The Administration noted Mr LEUNG's view.

*(At 12:27 pm, the Chairman extended the meeting for 15 minutes to 1 pm.)*

#### **IV. Voluntary scheme on advanced and specialised nursing practice** [LC Paper Nos. CB(4)1375/20-21(05) and (06)]

59. At the invitation of the Chairman, SFH briefed members on the Voluntary Scheme on Advanced and Specialised Nursing Practice ("the Scheme"), details of which were set out in the Administration's paper (LC Paper No. CB(4)1375/20-21(05)).

##### Salary level of Advanced Practice Nurses

60. Mr SHIU Ka-fai welcomed the Scheme and enquired whether Advanced Practice Nurses ("APNs") would be offered a salary higher than other nurses.

61. SFH responded that the purpose of introducing the Scheme was to provide a systematic framework for specialist qualifications and training of nurses,

thereby enhancing their remuneration and development prospects. Chief Manager (Nursing)/Chief Nurse Executive, HA ("CM(Nursing)/CNE, HA") added that HA in 2020 introduced a Specialty Nurse Allowance of \$2,000 per month for registered nurses ("RNs") who possessed recognized specialty qualification, with a view to encouraging professional development of nurses to support healthcare services.

#### Public-to-private ratio of Advanced Practice Nurses

62. Mr SHIU Ka-fai and Mr LEUNG Che-cheung asked why around 86% of the applications for recognition as APNs were received from HA while only around 14% were from private hospitals. Mr LEUNG also requested the Administration to explain why the approval rates of applications in some specialties were higher than the others.

63. Given that only RNs were eligible for the Scheme, SFH explained that the difference in the number of applications from HA and private hospitals was mainly due to the larger number of nurses in HA and the higher ratio of RNs therein (i.e. over 90%). Moreover, HA provided a favourable environment for the development of specialization of nursing practice in order to fulfill its operational needs. The Administration had reached out to The Hong Kong Private Hospitals Association and encouraged nurses in private hospitals to participate in the Scheme.

64. Chairman, Nursing Council of Hong Kong further advised that wards in private hospitals were usually mixed wards serving both medical and surgical purposes, where nursing specialization was not as prevailing as in HA. While a large number of applications received and handled earlier were from HA, more applications from private hospitals would be handled and approved in due course.

#### Supply of nurses in Hong Kong

65. Taking into account the tight supply of nurses in Hong Kong, Mr SHIU Ka-fai questioned if the increase in the number of APNs in certain specialties would lead to a shortage of nurses in other service areas. SFH replied that in order to be recognized as APNs in a certain specialty, applicants must be serving in the relevant specialty area. The number of nurses in other service areas would not be affected.

66. Expressing support to the Scheme, the Chairman requested the Administration to advise the overall supply, public-to-private ratio and shortage of nurses in Hong Kong.



67. SFH responded that according to the Healthcare Manpower Projection 2020, there was a shortfall of 3 405 nurses in 2020. The projected shortfall in 2025, 2030, 2035 and 2040 would reach 3 235, 3 679, 4 337 and 5 060 respectively. The Administration had been striving and would continue to tackle the shortage of nurses, by substantially increasing the number of nursing training places and providing a more desirable working environment with promising career prospects in HA to retain nurses.

68. CM(Nursing)/CNE, HA added that over the past three years, the number of HA nurses had been increasing and was expected to reach 30 000 at the end of 2021-2022. The attrition rate of HA nurses had dropped from 6.3% in 2018-2019 to 5.8% in 2020-2021. An increase in the attrition rate had been observed recently due to other factors. HA had so far recruited 2 050 fresh graduate nurses in 2021 and around 900 newly recruited fresh RN graduates reported for duty in mid-August 2021. The introduction of the Scheme was expected to provide better prospects for HA nurses and help retain them in the public healthcare system.

**V. Any other business**

69. There being no other business, the meeting ended at 12:57 pm.