

Bureau Serial No.

HWB 007

Question Serial No.

0075

Examination of Draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head : 37 Department of Health Subhead (No. & title) :

Programme (No. & title) : 1 Statutory Functions

Controlling Officer : Director of Health

Bureau Secretary : Secretary for Health and Welfare

Question : The number for processing the registration applications from healthcare professionals jumps drastically from the actual 4,000 in 1999 to the estimated 11,000 in 2000 (paragraph 5, Indicators). Please explain.

Asked by : Hon Christine LOH

Reply :

The increase in the estimated number of registration applications from healthcare professionals is mainly due to the anticipated registration of Chinese medicine practitioners in 2000-01.

Signature

Name in block letters Dr Margaret CHAN

Post Title Director of Health

Date 17 March 2000

Bureau Serial No.

HWB-022

Question Serial No.

0195

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 177 Subhead (No. & title) : 514 Hospital Authority

Programme : Health

Controlling Officer : Secretary for Health and Welfare

Bureau Secretary : Secretary for Health and Welfare

Question :

In 1999-2000 and 2000-01, what are the expenses for medicines and their percentages in the total expenditures of Hospital Authority? How much of such expenses is spent on acquiring newly developed medicines?

Asked by : The Hon Law Chi-kwong

Reply : The projected drug expenditure of the Hospital Authority (HA) for 1999-2000 is \$1,500M, representing 5.3% of HA's total recurrent expenditure budget for the year. The estimated drug expenditure for 2000-2001 is \$1,575M, accounting for 5.4% of HA's total recurrent expenditure budget for the year.

In 1999-2000, an estimated amount of \$8M will be spent on new drugs. The expenditure on new drugs for 2000-2001 will be at a similar level.

Signature _____

Name in block letters Dr E K YEOH

Post Title Secretary for Health and Welfare

Date 14 March 2000

Bureau Serial No.

HWB-023

Question Serial No.

0196

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 177 Subhead (No. & title) : 514 Hospital Authority

Programme : Health

Controlling Officer : Secretary for Health and Welfare

Bureau Secretary : Secretary for Health and Welfare

Question :

The number of general beds is expected to reach 19 822 by the end of 1999-2000. In 1999-2000, Hospital Authority has redesignated 68 general beds to mentally ill beds and another 68 to rehabilitation. However, the estimated number of general beds as at 31 March 2000 comes up to 19 890 which is in effect 204 higher than the original projection. What are the reasons for the discrepancy in figures and where comes the provision for these additional beds? In 1999-2000 and 2000-01, what are the ratio of the number of doctors to that of general beds ?

Asked by : Hon LAW Chi-kwong

Reply : In last year's Controlling Officers' Report, the number of general beds as at 31 March 2000 was estimated to be 19 822. In arriving at this figure, we have taken into account Hospital Authority's plan to implement the bed redesignation programme in 1999-2000, i.e. to redesignate 68 general beds as mentally ill beds and another 68 as infirmary beds. However, in order to relieve the pressure on acute beds and to cater for the demand of patients for rehabilitation services, the Hospital Authority has subsequently modified the 1999-2000 bed redesignation programme and redesignated the 68 general beds originally planned to be infirmary beds as rehabilitation beds. Since rehabilitation beds are categorised as general beds, the estimated number of general beds as at 31 March 2000 has been adjusted upwards by 68 beds, and hence the revised estimate of 19 890 in this Controlling Officer's report.

The ratio of the number of doctors to that of general beds in 1999-2000 and 2000-01 is 5.4 beds and 5.3 beds per doctor respectively. However, the ratio is not an appropriate indicator for the provision of hospital service. Factors such as the occupancy rate, patient throughput rate, number of patients admitted and type of patients treated should also be taken into account in the provision for hospital service.

Signature _____

Name in block letters Dr E K YEOH

Post Title Secretary for Health and Welfare

Date 16 March 2000

Bureau Serial No.

HWB-024

Question Serial No.

0197

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 177 Subhead (No. & title) : 514 Hospital Authority

Programme : Health

Controlling Officer : Secretary for Health and Welfare

Bureau Secretary : Secretary for Health and Welfare

Question :

Why have 68 infirmary beds originally planned for 1999/2000 been redesignated to rehabilitation? In what ways has the redesignation affected the waiting time for infirmary places? What are the daily costs of an infirmary bed and a rehabilitation bed respectively?

Asked by : The Hon Law Chi-kwong

Reply : Under the bed redesignation programme implemented in 1999-2000, 68 general beds were redesignated as rehabilitation beds, instead of as infirmary beds, in order to relieve the pressure on acute beds and to cater for the need of patients requiring medical rehabilitation services. On the other hand, a total of 270 additional infirmary beds have been opened in 1999-2000 to cater for the need of infirmary patients.

The estimated daily cost of an infirmary bed and a rehabilitation bed at 1999-2000 price level is \$1,230 and \$3,480 respectively.

Signature _____

Name in block letters Dr E K YEOH

Post Title Secretary for Health and Welfare

Date 15 March 2000

Bureau Serial No.

HWB-025

Question Serial No.

0198

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 177 Subhead (No. & title) : 514 Hospital Authority

Programme : Health

Controlling Officer : Secretary for Health and Welfare

Bureau Secretary : Secretary for Health and Welfare

Question :

- a) With what centres have the services of the three community nursing centres been merged? Has the utilisation of resources become more cost-effective as shown in, e.g., the savings in resources and manpower as a result of merging? Please provide information on the establishment and resources required for the provision of the services in question before and after merging.
- b) The number of community nurses for 2000-01 will be the same as 1999-2000, and the number of home visits by community nurses for 2000-01 will increase by 8000. While the average number of home visits by a community nurse will increase, the costs of each visit will remain the same as last year. What are the reasons for that?

Asked by : Hon LAW Chi-kwong, JP

Reply : (a) Three community nursing service (CNS) centres, namely Shun On CNS Centre, Kai Yip CNS Centre and Wo Lok CNS Centre, in the Kowloon East area under the CNS of United Christian Hospital (UCH) have been merged with UCH's existing CNS centres with a view to achieving more efficient utilisation of resources. While the total number of nursing staff serving the merged centres remains the same, it is estimated that the total number of home visits will be increased by about 5% (or 4 200 visits) in 2000-01.

(b) No detailed costing exercise has been conducted for the purpose of estimating

the per visit cost of running CNS in 1999-2000 and 2000-01. Instead, a historical costing approach has been adopted. The unit cost is projected from the 1998-99 unit cost, taking into account movement in prices over the years. Since the change in price level during 1999-2000 and 2000-01 is expected to be minimal and the number of visit is expected to increase by only 1.5%, the cost per CNS visit for 1999-2000 and 2000-01 is estimated to be at the same level. We shall review the projection formula for computing unit costs for various services for the purpose of preparing next year's draft estimates.

Signature _____

Name in block letters Dr E K YEOH

Post Title Secretary for Health and Welfare

Date 18 March 2000

Bureau Serial No.

HWB-026

Question Serial No.

0199

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 177 Subhead (No. & title) : 514 Hospital Authority

Programme : Health

Controlling Officer : Secretary for Health and Welfare

Bureau Secretary : Secretary for Health and Welfare

Question :

- (a) The Hospital Authority (HA) has planned to shorten the average waiting time for first appointment at all specialist clinics, the average queuing time for consultation at specialist clinics, and the average waiting time for major elective surgery in General Surgery, Orthopaedics and Obstetrics and Gynaecology in 2000-2001. Will additional funding be provided for these purposes? If so, why does the unit cost of the specialist out-patient services per attendance remain the same as it was last year (\$549), and what additional resources will be allocated to these three areas respectively? If not, how does the HA seek to acquire the necessary resources?
- (b) Which specialist service's waiting time for first appointment is the longest, and which the shortest? Will resources be allocated to the specialist service with the longest waiting time so as to improve its service?

Asked by : Hon LAW Chi-kwong, JP

Reply :

- (a) The Hospital Authority (HA) will deploy additional resources and manpower to be funded by new monies amounting to \$388M for the provision of new hospital beds and facilities in the 2000-01 budget to shorten the waiting and queuing time for its services. The HA will also implement various improvement measures to streamline and expedite treatment process in order to shorten the waiting time.

The HA has not conducted detailed costing exercise for the purpose of estimating the cost of the specialist outpatient services per attendance in 1999-2000 and 2000-01. Instead, a historical costing approach has been adopted. The unit cost is projected

from the 1998-99 unit cost, taking into account movement in prices over the years. Since the change in price level during 1999-2000 and 2000-01 is expected to be minimal, the cost per specialist outpatient attendance for 1999-2000 and 2000-01 is estimated to be at the same level. We shall review the projection formula for computing unit costs for various services for the purpose of preparing next year's draft estimates.

- (b) As at January 2000, Surgery has the longest average waiting time of 8.6 weeks for the first appointment at specialist outpatient clinics, while Oncology has the shortest average waiting time of 0.3 week. The HA has introduced various improvement measures to shorten the overall waiting time in various specialist outpatient clinics, including arranging doctors undergoing family medicine training to provide treatment for patients who are in stabilised conditions and referred from the specialist outpatient clinics; according priority treatment to patients in need of urgent treatment; co-ordinating the booking of appointments and redirecting patients from busy clinics to less busy ones; and enhancing cooperation with private general practitioners through the use of standardised clinical protocols, enabling patients referred by them to HA's specialist outpatient clinics to receive treatment from doctors immediately, without having to undergo duplicate examinations or tests.

Signature _____

Name in block letters Dr E K YEOH

Post Title Secretary for Health and Welfare

Date 18 March 2000

Bureau Serial No.

HWB-027

Question Serial No.

0200

Examination of draft Estimates of Expenditure 2000-01
CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION

Head 177 Subhead (No. & title) : 514 Hospital Authority

Programme : Health

Controlling Officer : Secretary for Health and Welfare

Bureau Secretary : Secretary for Health and Welfare

Question :

In 1999-2000 and 2000-01, the average numbers of home visits by each community psychiatric nurse are 482 and 472 respectively, but the cost per visit is the same (\$1,113). What are the reasons ?

Asked by : Hon LAW Chi-kwong, JP

Reply : No detailed costing exercise has been conducted for the purpose of estimating the per visit cost of community psychiatric nursing service (CPNS) in 1999-2000 and 2000-01. Instead, a historical costing approach has been adopted. The unit cost is projected from the 1998-99 unit cost, taking into account movement in prices over the years. Since the change in price level during 1999-2000 and 2000-01 is expected to be minimal and estimated changes in number of visits marginal, the cost per CPNS visit for 1999-2000 and 2000-01 is estimated to be at the same level. We shall review the projection formula for computing unit costs for various services for the purpose of preparing next year's draft estimates.

Signature _____

Name in block letters Dr E K YEOH

Post Title Secretary for Health and Welfare

Date 17 March 2000

Bureau Serial No.

HWB-028

Question Serial No.

0201

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 177 Subhead (No. & title): 514 Hospital Authority

Programme: Health

Controlling Officer: Secretary for Health and Welfare

Bureau Secretary: Secretary for Health and Welfare

Question:

With regard to manpower :

- (a) What are the numbers of posts and vacancies at each rank of the medical, nursing, allied health and other staff as at 1st March?
- (b) What are the expenditures on personal emoluments for each individual rank in 1999-2000 and 2000-01?
- (c) While the attendance rate of services provided by the Hospital Authority is expected to rise, and the number of medical staff will increase by 150 in 2000-01, there will be a decrease of 360 nursing staff in 2000-01 as compared with the 1999-2000 figures. What are the reasons?
- (d) The number of staff under the "others" category shows a decrease of 550 in 2000-01. Please provide details on the ranks and salaries of these 550 staff members.

Asked by: Hon LAW Chi-kwong, JP

Reply: (a) Unlike government departments, the Hospital Authority (HA) does not operate an "establishment" system. Information on the number of posts and vacancies at each rank is therefore not available. The staff strength of HA by group as at 1 March 2000 are as follows:

		<u>Staff Strength</u>
Medical		
	Doctors	3 542
	Family medicine	122
trainees		314
	Interns	<u> </u>
	Dentists	<u>4</u>
	sub-total	3 982
 Nursing		
	Qualified nurses	17 364
	Trainees	<u>2 562</u>
	sub-total	19 926
Allied Health		4 385
Others		<u>22 026</u>
<hr/>		
Total		50 319
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		=====

(b) The projected expenditures on personal emoluments (which include salary and allowances) are as follows:

	<u>1999-2000 (\$M)</u>	<u>2000-01* (\$M)</u>
Medical	3,528	3,647
Nursing	6,643	6,819
Allied Health	1,843	1,878
Others	<u>3,967</u>	<u>3,985</u>
	<u>15,981</u>	<u>16,329</u>

* The reduction in pay points for new recruits has not been taken into account in the 2000-01 estimate as the arrangement has not yet been finalized.

- (c) The nursing support for 2000-01 will be strengthened through the planned net increase of 737 additional qualified nurses, resulting from lower turnover rates and high planned intake. The need for intake of trainee nurses will correspondingly be reduced. In the year 2000-01 there is a planned reduction of 1 097 nurse trainees resulting in an overall net reduction of 360 nursing staff. (Trainee nurses spend approximately 70% of their time in clinical services, contributing to patient care.)
- (d) The planned reduction of 550 staff under the “others” category in 2000-01 includes mainly staff performing hospital support functions. A breakdown by major group and salaries is set out below.

Rank	Projected Reduction in Number	Projected Reduction in Salaries (\$M)
Management staff	7	4.9
Other professional /administrative staff	28	6.2
Clerical/secretarial	81	6.9
Workman	124	7.5
Ward Attendant	150	9.7
Artisan / Cook / Property Attendant / Foreman / Laboratory Attendant / Laundry Worker	104	8.0
Other support staff (eg Machinist, Driver, Darkroom Technician, Operating Theatre Assistant, Gardener, Ganger)	56	5.0
Total	550	48.2

Signature _____

Name in block letters Dr E K YEOH

Post Title Secretary for Health and Welfare

Date 18 March 2000

Bureau Serial No.

HWB-029

Question Serial No.

0202

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 177 Subhead (No. & title) : 514 Hospital Authority

Programme : Health

Controlling Officer : Secretary for Health and Welfare

Bureau Secretary : Secretary for Health and Welfare

Question : The Hospital Authority (HA) will train at least 100 additional family medicine physicians in 2000-01 to reduce unnecessary referrals to specialists services. What is the cost of the treatment given by family medicine physicians per attendance ? Has the HA set any targets for the attendance rate of the specialist service to be reduced and the resources to be saved under the above programme ?

Asked by : The Hon LAW Chi-Kwong, JP

Reply : The Hospital Authority (HA) has established in July 1999 family-medicine-based integrated clinics, where doctors undergoing family medicine training at these clinics will provide treatment to patients who are referred from the specialist outpatient clinics (SOPC). Since the mode of operation of these integrated clinics is similar to that of the SOPC, the estimated average unit cost of treating patients at integrated clinics is the same as that of the SOPC, which is in the region of \$550.

The HA will introduce a new programme in July 2000, requiring all hospital-based family medicine trainees to provide one session of outpatient consultation service per week at the integrated clinics. At present, the integrated clinics attend to about 1 200 patients referred from the SOPC every month. The target of the new programme is that the integrated clinics would attend an additional 2 000 follow-up patients every month, thus reducing the load of SOPC follow-up patients. With the enhanced family medicine practice, HA has set a target for SOPC to attend to an additional 700 new patients a month, which would in turn shorten the

waiting list for specialist outpatient services. In the first 10 months of 1999-2000, the average monthly new SOPC attendance is about 54 000.

The objective of the initiative is to improve productivity, not to generate “actual dollar savings”. We envisage that under the new programme, consultation with a family physician rather than with specialists from different sub-specialities can reduce the number of overall attendances required by a patient.

Signature _____

Name in block letters Dr E K YEOH

Post Title Secretary for Health and Welfare

Date 18 March 2000

Bureau Serial No.

HWB-030

Question Serial No.

0203

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 177 Subhead (No. & title) : 514 Hospital Authority

Programme : Health

Controlling Officer : Secretary for Health and Welfare

Bureau Secretary : Secretary for Health and Welfare

Question :

The in-patient obstetric service in Tsan Yuk Hospital will be relocated to Queen Mary Hospital by 2001. Please provide information on the respective establishment of medical staff, nursing staff and other staff, the respective costs incurred and the respective numbers of hospital beds provided prior to and subsequent to the re-engineering of the service.

Asked by : Hon LAW Chi-kwong

Reply : In view of the declining birth rate in the territory, the Hospital Authority plans to rationalise the obstetric and neonatal services in Tsan Yuk Hospital (TYH) and Queen Mary Hospital (QMH) within the Hong Kong West cluster to achieve optimal utilisation of resources. While the obstetric and neonatal inpatient services in TYH will be relocated to and amalgamated with the services in QMH in 2001, TYH will continue to run a specialist outpatient clinic on obstetrics.

At present, there are a total of 221 beds for the obstetric and neonatal inpatient services in TYH and QMH, and the number of beds will be reduced by 62 upon rationalisation of service. It should however be noted that in parallel, the ambulatory services provided by TYH will be strengthened.

The current total number of staff covering the obstetric and neonatal services in TYH and QMH, plus the gynaecology services in QMH, is 543, comprising 50 medical staff, 235 nursing staff and 258 staff of other grades. After the planned service amalgamation, the estimated number of staff required has been assessed with a proposed reduction. As the total number of patients to be seen will be similar but there will be efficiencies generated by the amalgamation, the number of doctors planned is 45. Greater efficiencies are envisaged in the ward and hospital support services arising from reduced shift doctors requirement, with proposed staffing of 182 for nurses and 108 for other grades.

Signature _____

Name in block letters Dr E K YEOH

Post Title Secretary for Health and Welfare

Date 18 March 2000

Bureau Serial No.

HWB 031

Question Serial No.

0182

Examination of Draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 37 Department of Health Subhead (No. & title) :

Programme : 1 Statutory Functions

Controlling Officer : Director of Health

Bureau Secretary : Secretary for Health & Welfare

Question : What is the additional staff establishment for supporting the work of the Chinese Medicine Council and the expenditure involved?

Asked by : Hon YEUNG Yiu-chung

Reply :

A total of 67 posts (including 25 new posts to be created in 2000-01) involving an annual cost of \$26m is provided to assist in the registration of Chinese medicine practitioners, and to regulate the use, trading and manufacture of Chinese medicines.

Signature

Name in block letters Dr Margaret CHAN

Post Title Director of Health

Date 17 March 2000

Bureau Serial No.

HWB 032

Question Serial No.

0183

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 37 Department of Health Subhead (No. & title) :

Programme : 2 Disease Prevention

Controlling Officer : Director of Health

Bureau Secretary : Secretary for Health & Welfare

Question : Hong Kong will continue to admit new arrivals from the Mainland. Among them, some have never received any type of vaccination. What is the provision of resources reserved for providing vaccination to this group of people? What is the estimated adult population to be vaccinated?

Asked by : Hon YEUNG Yiu-chung

Reply :

New arrival children and teenagers are covered by the existing childhood and school immunisation programmes and the resources involved will be absorbed by the existing provision.

Vaccinations for childhood infectious diseases are not recommended to adult population as they generally have immunity acquired from previous exposure or vaccinations.

Signature

Name in block letters Dr Margaret CHAN

Post Title Director of Health

Date 17 March 2000

Bureau Serial No.

HWB 033

Question Serial No.

0184

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 37 Department of Health Subhead (No. & title) :

Programme : 3 Health Promotion

Controlling Officer : Director of Health

Bureau Secretary : Secretary for Health & Welfare

Question : With the number of sexually transmitted diseases rising in recent years, will the Government allocate resources for relevant publicity and education work? What are the specific tasks and the expenditure involved?

Asked by : Hon YEUNG Yiu-chung

Reply :

The Department of Health conducts health education programmes on the prevention of sexually transmitted diseases and HIV infection through the Social Hygiene Service, Special Preventive Programme and the Central Health Education Unit.

Health promotion activities include health counselling, health talks, workshops, telephone hotlines and distribution of health education materials. These activities form an integral part of the various services and the resources involved are not readily identifiable.

Signature

Name in block letters Dr Margaret CHAN

Post Title Director of Health

Date 17 March 2000

Bureau Serial No.

HWB 034

Question Serial No.

0185

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 37 Department of Health Subhead (No. & title) :

Programme : 2 Disease Prevention

Controlling Officer : Director of Health

Bureau Secretary : Secretary for Health & Welfare

Question : Will resources be allocated to extend the area of surveillance for communicable diseases next year, including increasing the number of diseases and medical institutes for surveillance? What is the estimated expenditure on the surveillance of communicable diseases next year and its percentage in the total expenditure under this programme?

Asked by : Hon YEUNG Yiu-chung

Reply :

In the 2000-01 Estimates, an additional financial provision of \$16m is provided to enhance the surveillance of communicable diseases, including increasing the number of diseases under surveillance, expanding the sentinel surveillance system and strengthening public health laboratory service to perform more quick tests. The estimated expenditure on the surveillance of communicable disease in 2000-01 is \$87m which accounts for 8% of the total expenditure for programme 2.

Signature

Name in block letters Dr Margaret CHAN

Post Title Director of Health

Date 17 March 2000

Bureau Serial No.

HWB 035

Question Serial No.

0186

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 37 Department of Health Subhead (No. & title) :

Programme : 2 Disease Prevention

Controlling Officer : Director of Health

Bureau Secretary : Secretary for Health & Welfare

Question : (a) What specific plans and new services does the Government have to promote elderly health next year? What is the provision of resources required and its percentage in the total expenditure under this programme? (b) What is the estimated number of vaccine doses to be given to elderly people over 60 next year and the expenditure required?

Asked by : Hon YEUNG Yiu-chung

Reply :

- (a) The promotion of elderly health is a core activity of the Elderly Health Services of the Department. In 2000-01, the elderly health centres and visiting health teams, amongst other activities, will continue to provide health promotion and health education programmes to the elderly and their carers. The Department also advises the Elderly Commission on strategies and initiatives to promote healthy ageing. The financial provision for the Elderly Health Services is \$133.7m, constituting 12% of the financial provision for the programme.
- (b) In 2000-01, influenza vaccination will be given to about 40 000 elderly in residential care homes. The financial provision for the influenza immunization programme is \$1.2m.

Signature

Name in block letters Dr Margaret CHAN

Post Title Director of Health

Date 17 March 2000

Bureau Serial No.

HWB 036

Question Serial No.

0187

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 37 Department of Health Subhead (No. & title) : 511 Subvented institutions

Programme : 4 Curative Care

Controlling Officer : Director of Health

Bureau Secretary : Secretary for Health & Welfare

Question : What is the expenditure on subvention for the two Chinese medicine clinics operated by the Tung Wah Group Hospitals and its percentage in the operating cost of the two clinics?

Asked by : Hon YEUNG Yiu-chung

Reply :

In the 2000-01 draft estimates, the subvention to the two Chinese medicine clinics operated by the Tung Wah Group of Hospitals amounts to \$3,143,000, which is about 50% of the estimated total expenditure of the clinics for the year.

Signature

Name in block letters Dr Margaret CHAN

Post Title Director of Health

Date 17 March 2000

Bureau Serial No.

HWB 037

Question Serial No.

0188

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 37 Department of Health Subhead (No. & title) :

Programme : 2 Disease Prevention

Controlling Officer : Department of Health

Bureau Secretary : Secretary for Health & Welfare

Question : What is the level of Government expenditure on improving the oral health of primary school children in the coming year ? What is the work involved ? What are the expected effects ?

Asked by : Hon YEUNG Yiu-chung

Reply :

The financial provision of the School Dental Care Service in 2000-01 is \$165.8 million. It provides basic dental treatments to primary school children and promotes good oral health care habits for the prevention of dental diseases. The service now covers 86.5% of Hong Kong's primary school children population and renders over 86% of them dentally fit.

Signature

Name in block letters Dr Margaret CHAN

Post Title Director of Health

Date 17 March 2000

Bureau Serial No.

HWB 038

Question Serial No.

0287

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 37 Department of Health Subhead (No. & title) :

Programme : 4 Curative Care

Controlling Officer : Director of Health

Bureau Secretary : Secretary for Health & Welfare

Question : As far as the waiting time in general out-patient clinics for patients with episodic illnesses or chronic diseases is concerned, it seems quite satisfactory that the percentage for both cases to be seen within target time is above 99%. However, this target percentage is only calculated in terms of appointment time while the queuing time for a consultation disc that has remained a subject of criticism has not been taken into account. Will consideration be given to calculating the queuing time for a disc as well and allocating more resources to further improve and shorten the queuing time?

Asked by : Hon Mrs Selina CHOW LIANG Shuk-ye, JP

Reply :

Consideration has been given to include the queuing time at general out-patient clinics as one of the performance measures. However, the queuing time depends on a number of factors which are beyond the control of the Department, for example, early arrival of elderly clients in the morning. Additional manpower has been deployed to busy clinics during peak hours to shorten the queuing time. The advance appointment system for patients with chronic diseases, which minimises queuing time, will be further promoted among patients.

Signature

Name in block letters Dr Margaret CHAN

Post Title Director of Health

Date 17 March 2000

Bureau Serial No.

HWB 039

Question Serial No.

0288

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 37 Department of Health Subhead (No. & title) :

Programme :

Controlling Officer : Director of Health

Bureau Secretary : Secretary for Health & Welfare

Question : Why is there an increase of 20.6% in the financial provision under Subhead 106 Temporary Staff? Will the quality of services be affected by employment of additional temporary staff?

Asked by : Hon Mrs Selina CHOW LIANG Shuk-yee, JP

Reply :

The increase in the financial provision for Subhead 106 is transferred from personal emoluments for the employment of non-civil service contract staff on a short term basis to provide flexibility and efficiency in service delivery.

Employment of additional non-civil service contract staff will not undermine the quality of services delivered to the public. Training and coaching will be provided as necessary to ensure that the staff can meet the requirements of the job.

Signature

Name in block letters Dr Margaret CHAN

Post Title Director of Health

Date 17 March 2000

Bureau Serial No.

HWB-048

Question Serial No.

0376

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 177 Subhead (No. & title) : 514 Hospital Authority

Programme : Health

Controlling Officer : Secretary for Health and Welfare

Bureau Secretary : Secretary for Health and Welfare

Question :

It is estimated that the number of doctors will be 3 552 in 2000/2001. How will this estimated figure help alleviate the problem of doctors working overtime and improve the quality of hospital services?

Asked by : The Hon HO Sau-lan

Reply : In 2000/01, the medical manpower of the Hospital Authority (HA) will comprise 4 140 medical staff, namely 3 808 Registered Doctors which include 256 doctors recruited to undergo training in family medicine, 328 interns (Provisionally Registered Doctors) and 4 dentists, representing an increase of 150 Registered Doctors over that of 1999/00. The additional staff will be allocated to various hospitals to meet manpower needs arising from introduction of new services, increased service demand and enhanced family medicine training. The additional manpower will help alleviate the workload of doctors and ensure quality standards in the delivery of hospital service. The HA is committed to addressing the problem of long working hours of public hospital doctors, and will continue to implement the following measures to alleviate the workload of medical staff without sacrificing the quality of patient care -

- (a) schedule on-call cycle for interns and junior doctors at no more than 1 in 3 days;

- (b) arrange statutory holiday compensation off for doctors;
- (c) arrange time-off for doctors following excessive continuous hours of work; and
- (d) streamline work process and minimise non-clinical duties to relieve doctor's workload and pressure.

A Working Group on Work hours of Doctors in HA hospitals is being set up by the HA to tackle the problem of long working hours of doctors and make recommendations on further improvement measures in six months' time.

Signature _____

Name in block letters Dr E K YEOH

Post Title Secretary for Health and Welfare

Date 16 March 2000

Bureau Serial No.

HWB 054

Question Serial No.

0347

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 37 Department of Health Subhead (No. & title) :

Programme : 1 Statutory Functions

Controlling Officer : Director of Health

Bureau Secretary : Secretary for Health & Welfare

Question : What is the financial provision in 2000-01 for the Chinese Medicine Council? What are the targets and projected performance indicators for this area? Amongst the 11,000 estimated "registration applications from healthcare professionals processed", how many would be Chinese Medicine Practitioners?

Asked by : Dr Hon LEONG Che-hung, JP

Reply :

A provision of \$26m is provided in 2000-01 to support the Chinese Medicine Council.

Subject to the enactment of subsidiary legislation under the Chinese Medicine Ordinance, the target is to commence the registration of Chinese medicine practitioners and regulation of Chinese medicines in phases in 2000. Performance targets for registration of Chinese medicine practitioners and proprietary Chinese medicines and the licensing of Chinese medicines traders will be made after the registration and licensing schemes have been set up.

Of the estimated 11 000 registration applications, about 7 000 will be from Chinese medicine practitioners.

Signature

Name in block letters Dr Margaret CHAN

Post Title Director of Health

Date 17 March 2000

Bureau Serial No.

HWB 055

Question Serial No.

0348

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 37 Department of Health Subhead (No. & title) :

Programme : 1 Statutory Functions

Controlling Officer : Director of Health

Bureau Secretary : Secretary for Health & Welfare

Question : What are the respective financial provisions for the Human Organ Transplant Board and the Provisional Council on Reproductive Technology 1999-2000 and the next financial year? Has the provision included the establishment of the forthcoming Council on Reproductive Technology?

Asked by : Dr Hon LEONG Che-hung, JP

Reply :

The financial provision of \$3.4m and \$3.54m has been included in 1999-2000 & 2000-01 respectively for a secretariat to support the Provisional Council/Council of Reproductive Technology and Human Organ Transplant Board.

Signature

Name in block letters Dr Margaret CHAN

Post Title Director of Health

Date 17 March 2000

Bureau Serial No.

HWB 056

Question Serial No.

0349

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 37 Department of Health Subhead (No. & title) :

Programme : 1 Statutory Functions

Controlling Officer : Director of Health

Bureau Secretary : Secretary for Health & Welfare

Question : It is estimated that the "registration applications from healthcare professionals processed" in 2000-01 would have a sharp rise over this financial year. Please provide breakdown according to types of profession.

Asked by : Dr Hon LEONG Che-hung, JP

Reply :

A breakdown of the estimated number of applications by type of profession is as follows :

Chinese medicine practitioners	7 000
Medical practitioners	1 000
Dentists	60
Nurses	2 000
Midwives	120
Pharmacists	70
Supplementary medical professions	750
	<u>11 000</u>

Signature

Name in block letters Dr Margaret CHAN

Post Title Director of Health

Date 17 March 2000

Bureau Serial No.

HWB 057

Question Serial No.

0350

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 37 Department of Health Subhead (No. & title) :

Programme : 1 Statutory Functions

Controlling Officer : Director of Health

Bureau Secretary : Secretary for Health & Welfare

Question : There are fluctuations in the "number of inspections of licensed institutions registered under the Hospitals, Nursing Homes and Maternity Homes Registration Ordinance". Please explain why there is a surge in 1999 over the previous year; yet a predicted reduction for 2000. How many warnings or prosecutions has the Department given to these institutions in 1999? Please provide breakdown according to the nature of offence.

Asked by : Dr Hon LEONG Che-hung, JP

Reply :

Additional inspections to licensed institutions were conducted in 1999 to ensure that all mission-critical medical equipment and computer systems were Y2K compliant and contingency plans were in place. There was no prosecution in 1999. Twelve advisory letters were issued.

Signature

Name in block letters Dr Margaret CHAN

Post Title Director of Health

Date 17 March 2000

Bureau Serial No.

HWB 058

Question Serial No.

0351

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 37 Department of Health Subhead (No. & title) :

Programme : 2 Disease Prevention

Controlling Officer : Director of Health

Bureau Secretary : Secretary for Health & Welfare

Question :

- (a) Regarding the Student Health Service, what are the participation rates of primary students and secondary students respectively, as well as financial provision and manpower establishment in 1999-2000 and the next financial year? Please give breakdown of the abnormalities and major diseases detected. Amongst these, how many required referral for specialised or hospital services?
- (b) From the data of the Student Health Service and School Dental Care Service, can the Administration tell what are the quantifiable differences in health status of children born in Hong Kong and children arrived to stay in Hong Kong in the past few years? Has there been any financial provision specified for addressing the discrepancy, if any?

Asked by : Dr Hon LEONG Che-hung, JP

Reply :

- (a) The participation rates of primary and secondary school students in the Student Health Service in school year 1999-2000 are 87.7% and 61.9% respectively.

The financial provision for the Service in 1999-2000 and 2000-01 is \$130.1m and \$131.6m respectively.

The establishment for the Service in 1999-2000 and 2000-01 is 298, comprising 31 doctors, 138 nurses, 13 paramedical staff and 116 other staff.

Of the 411 470 students who attended the centres in the school year 1998-99, 94 611 required referral to the specialists for further treatment. A breakdown of the reasons for referral is as follows :

<u>Reasons for referral</u>	Percentage
Eyesight problems	64.0%
Height & weight problems	10.3%
Psychosocial problems	6.4%
Spine problems	4.1%
Foreskin problems	2.3%
Others	12.9%
Total	100%

- (b) The Student Health Service does not observe any significant difference in the prevalence of common health problems between the local born and new arrival children.

On the other hand, according to the data of the School Dental Care Service, the mean number of teeth requiring treatment and the proportion of children requiring treatment is higher among children born outside Hong Kong. The services for these children have been accommodated within the existing financial provision.

Signature	_____
Name in block letters	<u>Dr Margaret CHAN</u>
Post Title	<u>Director of Health</u>
Date	<u>17 March 2000</u>

Bureau Serial No.

HWB 059

Question Serial No.

0352

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 37 Department of Health Subhead (No. & title) :

Programme : 3 Health Promotion

Controlling Officer : Director of Health

Bureau Secretary : Secretary for Health & Welfare

Question : What is the financial provisions for "promotion" activities designated for organ donation, AIDS prevention, and healthy lifestyle respectively in 1999-2000? Please provide corresponding estimates for the next financial year.

Asked by : Dr Hon LEONG Che-hung, JP

Reply :

The financial provision is as follows :

	<u>1999-2000</u>	<u>2000-01</u>
	\$m	\$m
(a) AIDS prevention	15.7	16.4
(b) Healthy lifestyle	7.7	10.4

There is no separate provision for the promotion of organ donation which forms part of the work of the Central Health Education Unit.

Signature

Name in block letters Dr Margaret CHAN

Post Title Director of Health

Date 17 March 2000

Bureau Serial No.

HWB 060

Question Serial No.

0353

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 37 Department of Health Subhead (No. & title) :

Programme : 3 Health Promotion

Controlling Officer : Director of Health

Bureau Secretary : Secretary for Health & Welfare

Question : Regarding the work on instilling a healthy lifestyle concept amongst the community, please provide information relating to "targets" and "performance indicators". What yardstick does the Department adopt in measuring whether these works have helped improving the health of the public at large or the target groups? Based on such yardstick, have the works on healthy lifestyle produced any quantifiable achievement to justify the resources obtained in this area yet?

Asked by : Dr Hon LEONG Che-hung, JP

Reply :

In 1999-2000, the Department has provided training to 1 018 health ambassadors, disseminated health promotion messages to 830 000 attendances at exhibitions and seminars, received 420 000 calls at the 24-hour telephone information system, produced nine episodes of television series on healthy diet and completed a survey to obtain baseline data on the knowledge, attitude and practice of the local population in relation to health. Educational kits are being produced for distribution to about 2 500 nurseries, kindergartens and schools.

In 2000-01, the theme will be to promote physical activity. Specific indicators are being developed. In the longer term, the effectiveness of health promotion programmes may be assessed by relating to the community's change in knowledge, attitude and practice of healthy lifestyle.

Signature

Name in block letters Dr Margaret CHAN

Post Title Director of Health

Date 17 March 2000

Bureau Serial No.

HWB 061

Question Serial No.

0354

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 37 Department of Health Subhead (No. & title) :

Programme : 4 Curative Care

Controlling Officer : Director of Health

Bureau Secretary : Secretary for Health & Welfare

Question : What is the annual expenses in drugs in 1999-2000 and the corresponding projection for 2000-01?

Asked by : Dr Hon LEONG Che-hung, JP

Reply :

The expenditure on purchasing drugs in 1999-2000 and the estimates for 2000-01 are \$177.4 million and \$186.2 million respectively.

Signature

Name in block letters Dr Margaret CHAN

Post Title Director of Health

Date 17 March 2000

Bureau Serial No.

HWB 062

Question Serial No.

0355

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 37 Department of Health Subhead (No. & title) :

Programme : 4 Curative Care

Controlling Officer : Director of Health

Bureau Secretary : Secretary for Health & Welfare

Question : What is the financial provision for AIDS related works under the programme area of "Curative Care" in 1999-2000, and the corresponding projection for 2000-01?

Asked by : Dr Hon LEONG Che-hung, JP

Reply :

The financial provision for curative care of HIV/AIDS patients was \$34.8 million in 1999-2000, increasing to \$39.6 million for 2000-01.

Signature

Name in block letters Dr Margaret CHAN

Post Title Director of Health

Date 17 March 2000

Bureau Serial No.

HWB 063

Question Serial No.

0356

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 37 Department of Health Subhead (No. & title) :

Programme : 4 Curative Care

Controlling Officer : Director of Health

Bureau Secretary : Secretary for Health & Welfare

Question : What is the financial provisions for treating patients of "special oral needs group" in 1999-2000, and the corresponding estimate for 2000-01? How many patients in each category of "special oral needs group" would be catered for in 2000? Given the Department's previous estimation that 11,500 persons required such services annually, does the Administration has any plan to address the service shortfall with the resources.

Asked by : Dr Hon LEONG Che-hung, JP

Reply :

As treatment of "special oral needs group" forms an integral part of the activities of the oral maxillofacial surgery and dental units, the expenditure incurred in 1999-2000 and estimated for 2000-01 cannot be readily quantified.

The estimated numbers of patients to be treated for each of the categories in the "special oral needs groups" are as follows :

Category	Estimated number of patients in 2000
Serious and disabling oral diseases	5 400
Mental and physical handicaps requiring special facilities in hospitals for dental treatment	1 100
<u>Special medical diseases</u>	1 850
Total	<u><u>8 350</u></u>

To meet the demand, the capacity at Prince of Wales Hospital will be expanded with 2 additional chairs by end 2000, increasing the number of patients that may be treated to about 9 150 per year.

Signature	<hr/>
Name in block letters	<u>Dr Margaret CHAN</u>
Post Title	<u>Director of Health</u>
Date	<u>17 March 2000</u>

Bureau Serial No.

HWB 064

Question Serial No.

0357

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 37 Department of Health Subhead (No. & title) :

Programme : 4 Curative Care

Controlling Officer : Director of Health

Bureau Secretary : Secretary for Health & Welfare

Question : Please provide targets or performance indicators of the two Chinese medicine clinics in 1999-2000, and the corresponding projection for 2000-01.

Asked by : Dr Hon LEONG Che-hung, JP

Reply :

The attendances at the two Chinese medicine clinics in 1999 were 382 000. The projected attendances at the two clinics in 2000 are 409 800.

Signature

Name in block letters Dr Margaret CHAN

Post Title Director of Health

Date 17 March 2000

Bureau Serial No.

HWB 065

Question Serial No.

0358

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 37 Department of Health Subhead (No. & title) :

Programme : 4 Curative Care

Controlling Officer : Director of Health

Bureau Secretary : Secretary for Health & Welfare

Question : What is the number of sessions provided by evening/Sunday/public holiday clinics in 1999-2000, as well as the financial provision required, the number of attendances and utilisation rate? Please provide the corresponding projection for 2000-01.

Asked by : Dr Hon LEONG Che-hung, JP

Reply :

The numbers of clinic sessions provided by evening and Sunday/public holiday clinics in 1999-2000 were 5 500 and 891 respectively.

The attendances and utilisation rates in 1999 are as follows:-

	Attendances	Utilisation rate (%)
Evening clinics	892 386	81.8
Sunday/public holiday clinics	193 985	83.2

The number of clinic sessions, attendances and utilisation rate for 2000-01 are expected to be about the same.

The financial provision for 1999-2000 and 2000-01 is about \$109m each year.

Signature

Name in block letters Dr Margaret CHAN

Post Title Director of Health

Date 17 March 2000

Bureau Serial No.

HWB 066

Question Serial No.

0370

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 37 Department of Health Subhead (No. & title) :

Programme :

Controlling Officer : Director of Health

Bureau Secretary : Secretary for Health & Welfare

Question : What are the objectives of the 10th International Conference of Drug Regulatory Authorities for which a provision has been made in the capital account? Will issues on Chinese medicines be discussed?

Asked by : Hon Cyd HO Sau-lan

Reply :

The Conference is organized in collaboration with the World Health Organization (WHO). The aims are to exchange drug information, foster consensus on contemporaneous issues, and harmonise standards of drug approval among drug regulatory authorities of WHO Member States. Various issues including traditional medicine will be discussed.

Signature

Name in block letters Dr Margaret CHAN

Post Title Director of Health

Date 17 March 2000

Bureau Serial No.

HWB 067

Question Serial No.

0416

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 37 Department of Health Subhead (No. & title) : 603 Plant, vehicles and equipment

Programme :

Controlling Officer : Director of Health

Bureau Secretary : Secretary for Health & Welfare

Question : Under Subhead 603 Plant, vehicles and equipment, the approved estimate for 1999-2000 is \$48,350,000 and the revised estimate is \$11,044,000, much less than the approved estimate. Please explain. Please also give a detailed breakdown of the revised estimate of \$11,044,000 and the estimate of \$48,230,000 for 2000-01 for this item.

Asked by : Hon Bernard CHAN

Reply :

Regarding Subhead 603 Plant, vehicles and equipment, the reduction in the 1999-2000 revised estimate by \$37m against the approved estimate is mainly due to the re-tendering of the Laboratory Automation System, and the consequential deferment of the procurement of two discrete clinical chemistry systems from 1999-2000 to 2000-01.

A detailed breakdown of this item in 1999-2000 and 2000-01 is at Annex.

Signature

Name in block letters Dr Margaret CHAN

Post Title Director of Health

Date 17 March 2000

Detailed Breakdown of Subhead 603 Plant, vehicles and equipment (1999-2000)

	Revised Estimate 1999-2000 <hr/> \$m
Improvement of indoor air quality in 37 venues in the Department of Health	3.7
Replacement of the existing 1600A main low voltage switchboard and switchgear at the Yaumatei Jockey Club Polyclinic	2.0
Replacement of two sets of air-cooled chiller package units for the central air-conditioning system in the Yan Oi Polyclinic - Phase I Premises	0.5
One dental simulator system	4.8
	<hr/> <u>11.0</u>

Detailed Breakdown of Subhead 603 Plant, vehicles and equipment (2000-01)

	<u>Draft Estimate 2000-01</u> \$m
One discrete clinical chemistry system, Sai Ying Pun Institute of Pathology	2.4
One discrete clinical chemistry system, Lek Yuen Institute of Pathology	2.4
One Laboratory Automation System	33.0
Improvement of indoor air quality in 37 venues in the Department of Health	1.0
Replacement of the existing 1600A main low voltage switchboard and switchgear at the Yaumatei Jockey Club Polyclinic	1.5
Replacement of two sets of air-cooled chiller package units for the central air-conditioning system in the Yan Oi Polyclinic - Phase I Premises	1.8
Replacement of electricity supply system at Yung Fung Shee Memorial Centre	2.8
Replacement of two sets of air-cooled chillers in MacLehose Dental Clinic	3.3
	<u>48.2</u>

Bureau Serial No.

HWB 101

Question Serial No.

0527

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 37 Department of Health Subhead (No. & title) :

Programme : 4 Curative Care

Controlling Officer : Director of Health

Bureau Secretary : Secretary for Health & Welfare

Question :

- (a) Please give a breakdown of the expenditure on general out-patient service in the past 5 years and the estimated expenditure in the coming year.
- (b) With both service quality and the indicator of waiting time remaining unchanged, how can the Department cope with the projected increase in attendances at general out-patient clinics in the coming year?
- (c) When will the new general out-patient clinic in the Cheung Sha Wan Government Offices Building be put into service? What is the estimated attendance quota for each year?
- (d) Please state how the Department is going to improve or enhance its dispensing service with a detailed breakdown of :
 - (i) the expenditure involved
 - (ii) names of clinics involved
 - (iii) the professionals involved

Asked by : Hon Michael HO Mun-ka

Reply :

- (a) The financial provision for general out-patient clinics in the past five years and in 2000-01 is :

	\$ million
1995-96	442.4
1996-97	492.7
1997-98	548.4
1998-99	620.8
1999-2000	656.8
2000-01 (estimate)	672.7

- (b) The estimated increase in attendances at general out-patient clinics in 2000 is due to the full year effect of the opening of the Kowloon Bay General Out-patient Clinic and

the commencement of operation of the new clinic in Cheung Sha Wan.

- (c) The general out-patient clinic in the Cheung Sha Wan Government Offices Building will commence operation in March 2000. It will cater for about 36 000 attendances in 2000.
- (d) (i) A financial provision of \$10.5m is included in the 2000-01 estimates for employing 5 Pharmacists and 23 Dispensers to strengthen the staffing support at clinic dispensaries.

(ii)&(iii) A list of the clinics with enhanced staffing support is provided at Annex.

Signature	_____
Name in block letters	<u>Dr Margaret CHAN</u>
Post Title	<u>Director of Health</u>
Date	<u>17 March 2000</u>

Clinics with additional pharmacists :

- i. Violet Peel Health Centre
- ii. Yaumatei Jockey Club Clinic
- iii. West Kowloon Health Centre
- iv. Lek Yuen Health Centre
- v. Lady Trench Polyclinic

Clinics with additional dispensers :

- i. Ma On Shan Health Centre (Evening Clinic)
- ii. Tung Chung Health Centre (Evening Clinic)
- iii. Tseung Kwan O Po Ning Road Health Centre (Evening Clinic)
- iv. Tin Shui Wai Health Centre (Evening Clinic)
- v. Shau Kei Wan Chest Clinic
- vi. South Kwai Chung Chest Clinic
- vii. Kowloon Chest Clinic
- viii. Kwun Tong Jockey Club Health Centre
- ix. Ma On Shan Health Centre
- x. Li Po Chun Health Centre
- xi. Sai Ying Pun Jockey Club Clinic
- xii. Lady Trench Polyclinic
- xiii. Tai Po Jockey Club Clinic
- xiv. Shek Wu Hui Jockey Club Clinic
- xv. Anne Black Health Centre
- xvi. Tsing Yi Town Clinic
- xvii. Tin Shui Wai Health Centre
- xviii. Lam Tin Polyclinic

Bureau Serial No.

HWB 102

Question Serial No.

0523

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 37 Department of Health Subhead (No. & title) :

Programme : 1 Statutory Functions

Controlling Officer : Director of Health

Bureau Secretary : Secretary for Health & Welfare

Question : In the recurrent account, other than the deletion of posts resulted from posts transferred to the Food and Environmental Hygiene Department and those deleted under the Enhanced Productivity Programme, there will be a net deletion of 186 permanent posts. Please provide a breakdown of the posts concerned by service unit and the number of posts involved.

Asked by : Hon Michael HO Mun-ka

Reply :

In 2000-01, there will be a net deletion of 142 posts under the Enhanced Productivity Programme (EPP), 16 posts consequential to the implementation of the first phase of the Laboratory Information System (LIS) and 58 posts in favour of employment of non-civil service contract staff on a short term basis to provide flexibility and efficiency in service delivery. With 30 posts created for time-limited projects, the net deletion will be 186 posts. A breakdown of the posts by programme area and rank is at Annex. A breakdown by service unit is not readily available.

Signature

Name in block letters Dr Margaret CHAN

Post Title Director of Health

Date 17 March 2000

Breakdown of posts by programme area and rank

<u>Programme</u>	<u>Rank</u>	<u>Number of posts created</u>	<u>Number of posts deleted</u>	<u>Net</u>
1	Assistant Clerical Officer	14	-	14
	Calligraphist	1	-	1
	Chinese Language Officer II	1	-	1
	Clerical Assistant	7	-	7
	Dispenser	-	(1)	(1)
	Personal Secretary II	4	-	4
	Registered Nurse	-	(1)	(1)
	Workman II	<u>2</u>	<u>(2)</u>	<u>0</u>
	29	(4)	25	
2	Assistant Clerical Officer	-	(1)	(1)
	Clinical Psychologist	-	(3)	(3)
	Dietitian	-	(3)	(3)
	Dispenser	-	(9)	(9)
	Enrolled Nurse	-	(11)	(11)
	Laboratory Attendant	-	(1)	(1)
	Medical and Health Officer	-	(10)	(10)
	Medical Laboratory Technician II	-	(3)	(3)
	Midwife	-	(9)	(9)
	Nursing Officer	-	(2)	(2)
	Occupational Therapist I	-	(3)	(3)
	Office Assistant	-	(1)	(1)
	Pharmacist	-	(2)	(2)
	Physiotherapist I	-	(3)	(3)
	Registered Nurse	-	(33)	(33)
	Scientific Officer (Medical)	-	(1)	(1)
	Senior Medical and Health Officer	-	(2)	(2)
	Ward Attendant	-	(22)	(22)
Workman II	<u>-</u>	<u>(11)</u>	<u>(11)</u>	
	0	(130)	(130)	
3	Assistant Clerical Officer	-	(5)	(5)
	Clerical Assistant	-	(2)	(2)
	Clerical Officer	2	-	2
	Executive Officer I	3	-	3
	Hospital Administrator I	-	(2)	(2)
	Hospital Administrator II	-	(2)	(2)
	Nursing Officer	-	(2)	(2)
	Office Assistant	-	(5)	(5)
	Senior Nursing Officer	-	(1)	(1)
	Typist	-	(2)	(2)
	Workman II	<u>-</u>	<u>(4)</u>	<u>(4)</u>
	5	(25)	(20)	
4	Assistant Clerical Officer	-	(1)	(1)

<u>Programme</u>	<u>Rank</u>	<u>Number of posts created</u>	<u>Number of posts deleted</u>	<u>Net</u>
	Chinese Language Officer II	1	-	1
	Dispenser	-	(13)	(13)
	Inoculator	-	(8)	(8)
	Laboratory Attendant	-	(2)	(2)
	Medical and Health Officer	-	(5)	(5)
	Medical Laboratory Technician II	-	(4)	(4)
	Pharmacist	-	(2)	(2)
	Property Attendant	-	(2)	(2)
	Workman II	-	(11)	(11)
		<u>1</u>	<u>(48)</u>	<u>(47)</u>
8	Dental Technician II	-	(5)	(5)
	Dispenser	-	(3)	(3)
	Medical and Health Officer	-	(1)	(1)
	Medical Laboratory Technician II	-	(1)	(1)
	Pharmacist	-	(1)	(1)
	Property Attendant	-	(1)	(1)
	Workman II	-	(2)	(2)
		<u>0</u>	<u>(14)</u>	<u>(14)</u>
		<u>35</u>	<u>(221)</u>	<u>(186)</u>

Bureau Serial No.

HWB 103

Question Serial No.

0524

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 37 Department of Health Subhead (No. & title) :

Programme : 1 Statutory Functions

Controlling Officer : Director of Health

Bureau Secretary : Secretary for Health & Welfare

Question : (a) Complaints have been received from pharmaceutical traders that it takes almost ten months to complete an application for registration of pharmaceutical product, exceeding the performance target of processing an application within 5 months. Please explain from which step the 5 months start to count. (b) Given that the number of applications for registration of pharmaceutical products is estimated to remain the same and given the request from the trader for reducing the time for processing the applications, please explain why a lower percentage of applications is estimated to meet the performance targets in 2000-01. (c) In Programme (1), is the substantial increase in the number of applications for the registration of healthcare professionals related to the registration of Chinese medicine practitioners, or any other reasons? (d) The reason for the decrease in number of inspections to hospitals and nursing homes.

Asked by : Hon Michael HO Mun-ka

Reply :

- (a) The 5-month processing time refers to the period starting from the receipt of all supporting documents for an application of registration until the issue of Registration Certificate. The target that more than 90% of applications are processed within this time frame has been achieved in 1999. For new drugs that are required to be classified for the purpose of sale control, legislative amendments are necessary before the registration certificate is issued.
- (b) At present, the target is that more than 90% of applications are processed within the specified time frame. This target remains unchanged in 2000.
- (c) The increase in the registration applications from healthcare professionals processed in 2000-01 is due to the inclusion of the estimated 7 000 applications from Chinese medicine practitioners.
- (d) Additional inspections to licensed institutions were conducted in 1999 to ensure that all mission-critical medical equipment and computer systems were Y2K compliant and

contingency plans were in place. The average number of inspections for each licensed institution for the year 1999 was 2.7 and is estimated to be 2.1 in 2000.

Signature	_____
Name in block letters	<u>Dr Margaret CHAN</u>
Post Title	<u>Director of Health</u>
Date	<u>18 March 2000</u>

Bureau Serial No.

HWB 104

Question Serial No.

0525

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 37 Department of Health Subhead (No. & title) :

Programme : 2 Disease Prevention

Controlling Officer : Director of Health

Bureau Secretary : Secretary for Health & Welfare

Question : What is the reason for the expected decline in number of participants to the School Dental Care Service under Programme (2) ?

Asked by : Hon Michael HO Mun-ka

Reply :

A decline in the number of participants in the School Dental Care Service is not expected. The estimated number of participants in 2000 is about the same as the actual number in 1999 (i.e. 429 000).

Signature

Name in block letters Dr Margaret CHAN

Post Title Director of Health

Date 17 March 2000

Bureau Serial No.

HWB 105

Question Serial No.

0526

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 37 Department of Health Subhead (No. & title) :

Programme : 3 Health Promotion

Controlling Officer : Director of Health

Bureau Secretary : Secretary for Health & Welfare

Question :

The estimated provision for promotion of health under Programme (3) will decrease further next year but the estimated performance indicators remain unchanged. With an ever-increasing population, how can the Department ensure that the provision can cope with the needs of the community and that the targets can be achieved with reduced resources?

Asked by : Hon Michael HO Mun-Ka

Reply :

The reduction in provision for programme 3 in 2000-01 is mainly due to the decrease in capital expenditure in subvented organisations. There should not be any effect on the level of service provided.

Signature

Name in block letters Dr Margaret CHAN

Post Title Director of Health

Date 17 March 2000

Bureau Serial No.

HWB 106

Question Serial No.

0602

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 37 Department of Health Subhead (No. & title) :

Programme : 1 Statutory Functions

Controlling Officer : Director of Health

Bureau Secretary : Secretary for Health & Welfare

Question :

- (a) What are the ranks and responsibilities of the additional posts for regulating traditional Chinese medicine? What is the estimated expenditure?
- (b) The estimated number of complaints against healthcare professionals to be dealt with in 2000 is the same as that in 1999. Do healthcare professionals include Chinese medicine practitioners? If so, has the Government considered that the number of cases that needs to be dealt with may increase due to the complaints against Chinese medicine practitioners after the enforcement of the Chinese Medicine Ordinance? If not, what is the estimated number of complaints against Chinese medicine practitioners and the Chinese medicine trade respectively? How many days will it take before investigation of a complaint is carried out?

Asked by : Hon LAW Chi-kwong, JP

Reply :

- (a) A total of 67 posts are required in 2000-01 to support the operation of the Chinese Medicine Council of Hong Kong and to implement the regulatory measures in phases. These regulatory measures include registration of Chinese medicine practitioners, licensing of traders and manufacturers of Chinese medicines, inspection of licensed premises and registration of proprietary Chinese medicines. The total expenditure is estimated to be \$26 million. The posts are as follows :-

Chief Executive Officer	1
Senior Executive Officer	1
Executive Officer I	4
Senior Pharmacist	1
Pharmacist/Scientific Officer	18
Secretarial Grade Staff	5
Clerical Staff	31
Chinese Language Officer II	1
Other (Workman, Calligraphist)	4
Total	<u>67</u>

(b) Registered Chinese medicine practitioners are healthcare professionals. As the regulation of Chinese medicine will commence in phases in 2000, it is difficult to estimate the number of complaints against registered Chinese medicine practitioners and the Chinese medicine trade at this stage. The performance targets for investigation of complaints will be set in consultation with the Chinese Medicine Council of Hong Kong.

Signature	_____
Name in block letters	<u>Dr Margaret CHAN</u>
Post Title	<u>Director of Health</u>
Date	<u>17 March 2000</u>

Bureau Serial No.

HWB 107

Question Serial No.

0603

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 37 Department of Health Subhead (No. & title) :

Programme : 1 Statutory Functions

Controlling Officer : Director of Health

Bureau Secretary : Secretary for Health & Welfare

Question : What is the reason for the decrease in number of inspections to hospitals and nursing homes from 112 in 1999 to 90 in 2000? What is the average number of inspections for each licensed institution for the year 1999 and 2000?

Asked by : Hon LAW Chi-kwong, JP

Reply :

Additional inspections to licensed institutions were conducted in 1999 to ensure that all mission-critical medical equipment and computer systems were Y2K compliant and contingency plans were in place. The average number of inspections for each licensed institution for the year 1999 was 2.7 and is estimated to be 2.1 in 2000.

Signature

Name in block letters Dr Margaret CHAN

Post Title Director of Health

Date 17 March 2000

Bureau Serial No.

HWB 108

Question Serial No.

0604

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 37 Department of Health Subhead (No. & title) :

Programme : 1 Statutory Functions

Controlling Officer : Director of Health

Bureau Secretary : Secretary for Health & Welfare

Question : A total of 32 posts were created in 1998-99 and 1999-2000 to strengthen professional support for the establishment of a statutory organisation to regulate the practice, use and trading of traditional Chinese medicine. However, 25 additional posts will be created in next year for the same purpose. What are the justifications of creating such new posts?

Asked by : Dr Hon TANG Siu-tong, JP

Reply :

A total of 67 posts made up of 6 existing posts, 32 posts for 1998-99 and 1999-2000, and 25 posts to be created and 4 posts redeployed in 2000-01 are required to assist the Chinese Medicine Council of Hong Kong to regulate Chinese medicine.

The posts created in 1998-99 and 1999-2000 were required to support the establishment and operation of the Chinese Medicine Council of Hong Kong.

As registration of Chinese medicine practitioners will commence in 2000 and statutory control over Chinese medicines will be introduced in phases from 2000, 25 additional posts and 4 redeployed posts are required to carry out the regulatory measures. These regulatory measures include registration of Chinese medicine practitioners, licensing of traders and manufacturers of Chinese medicines, inspection of licensed premises and registration of proprietary Chinese medicines.

Signature

Name in block letters Dr Margaret CHAN

Post Title Director of Health

Date 17 March 2000

Bureau Serial No.

HWB 109

Question Serial No.

0605

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 37 Department of Health Subhead (No. & title) :

Programme : 3 Health Promotion

Controlling Officer : Director of Health

Bureau Secretary : Secretary for Health & Welfare

Question : What is the funding arrangement for Health Promotion in the year 2000-01?
How are the programmes being evaluated?

Asked by : Hon Emily LAU Wai-hing, JP

Reply :

The financial provision in 2000-01 for public health promotion programmes is :

	\$m
Central Health Education	32.4
Oral Health Education	19.9
AIDS Health Education	16.4
	<hr/>
	68.7
	<hr/>

Specific targets of performance have been set for the publicity and educational programmes and activities planned. These programmes are evaluated by the number of health education materials produced, attendances at health education activities and measurement of specific health habits.

Signature

Name in block letters Dr Margaret CHAN

Post Title Director of Health

Date 17 March 2000

Bureau Serial No.

HWB 110

Question Serial No.

0606

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 37 Department of Health Subhead (No. & title) :

Programme : 2 Disease Prevention

Controlling Officer : Director of Health

Bureau Secretary : Secretary for Health & Welfare

Question : What is the average time required for previous investigations on communicable diseases and the average cost for each investigation? Will there be a review of the time and resources spent on such work so as to enhance working efficiency and effectiveness?

Asked by : Hon Emily LAU Wai-hing, JP

Reply :

All cases of communicable diseases of public health importance notified to the Department of Health will be investigated within 24 hours of notification. The essential field investigation will usually be completed within 48 hours. In view of the diverse nature, different size and complexity of outbreaks, the cost for each investigation is not readily available. The Department of Health regularly reviews the investigation procedures to ensure efficient use of resources.

Signature

Name in block letters Dr Margaret CHAN

Post Title Director of Health

Date 17 March 2000

Bureau Serial No.

HWB 111

Question Serial No.

0607

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 37 Department of Health Subhead (No. & title) :

Programme : 2 Disease Prevention

Controlling Officer : Director of Health

Bureau Secretary : Secretary for Health & Welfare

Question :

- (a) What are the financial provision and staff establishment for the Elderly Health Centres and Visiting Health Teams respectively in 1999-2000? Please provide the corresponding projection for the next year. Why is the average projected number of enrollment in each elderly health centre for 2000 lower than the original target of 2,300 as mentioned in the reply to one of my questions on the Draft Estimates last year.
- (b) The Department also predicted in the reply to one of my question on the Draft Estimate last year that the Elerly Health Centres would help reduce demand for general out-patient (GOPD) service by 20,000 attendances a year. Please indicate to what extent has this prediction been realised in 1999-2000 and the previous years? Any corresponding prediction for the next year.

Asked by : Dr Hon LEONG Che-hung, JP

Reply :

- (a) The financial and manpower provision for Elderly Health Centres and Visiting Health Teams are as follows :

	<u>Elderly Health Centres</u>		<u>Visiting Health Teams</u>	
	<u>1999-2000</u>	<u>2000-01</u>	<u>1999-2000</u>	<u>2000-01</u>
Financial provision	\$73.8m	\$91.9m	\$25.4m	\$30.8m
Number of funded posts	203	203	89	89

The enrollment projection for Elderly Health Centres next year has taken into account that four centres were newly opened and it takes time to build up the enrollment of these centres.

- (b) About 40% of the clients of Elderly Health Centres indicated that they would seek general out-patient service if no curative service was provided in Elderly Health Centres. Based on this, it is estimated that Elderly Health Centres helped to reduce the demand of general out-patient service by about 30 000 in 1999. It is expected that

the reduction of demand for general out-patient service in 2000 would be similar.

Signature	_____
Name in block letters	<u>Dr Margaret CHAN</u>
Post Title	<u>Director of Health</u>
Date	<u>17 March 2000</u>

Bureau Serial No.

HWB 112

Question Serial No.

0608

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 37 Department of Health Subhead (No. & title) :

Programme : 2 Disease Prevention

Controlling Officer : Director of Health

Bureau Secretary : Secretary for Health & Welfare

Question : What are the financial provision and staff establishment in 1999-2000 and 2000-01 for the Woman Health Centres? What contribute to the estimated some 70% rise in attendances in 2000? Please provide breakdown of the abnormalities or major diseases detected amongst the clients. Amongst these, how many required referral to specialised or hospital services?

Asked by : Dr Hon LEONG Che-hung, JP

Reply :

The financial provision in 1999-2000 and 2000-01 for the Woman Health Centres is \$11.4m and \$12.1m respectively. The staff establishment of the three Woman Health Centres in both years is 28.

The increase in the number of attendances from 1999 to 2000 is due to the abolition of the lower age limit of clients, the revision of protocols and streamlining of procedures which resulted in enhanced capacity.

In 1999, a total of 2 212 abnormalities were detected. Of these, 1 766 were referred to specialists for further management. A breakdown of the abnormalities is as follows -

	Number of cases detected
Gynaecological conditions	862
Medical conditions	774
Breast conditions	309
Other surgical conditions	124
Miscellaneous conditions	<u>143</u>
	2 212

Signature

Name in block letters

Dr Margaret CHAN

Post Title

Director of Health

Date

17 March 2000

Bureau Serial No.

HWB 113

Question Serial No.

0609

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 37 Department of Health Subhead (No. & title) :

Programme : 2 Disease Prevention

Controlling Officer : Director of Health

Bureau Secretary : Secretary for Health & Welfare

Question : What are the staff establishment and financial provision for the Elderly Health Centres and Visiting Health Teams under the Department of Health, and for the Community Geriatric Assessment Team under the Hospital Authority respectively? What is their respective number of attendances?

Asked by : Hon LAW Chi-kwong, JP

Reply :

The financial and manpower provision, and attendance statistics of Elderly Health Centres and Visiting Health Teams are as follows :

	<u>Elderly Health Centres</u>	<u>Visiting Health Teams</u>
Financial provision in 1999-2000 (in million)	\$73.8m	\$25.4m
Number of funded posts in 1999-2000	203	89
Attendance for health assessment/medical consultation	146 000	-
Attendance for health education activities	156 000	228 000

In 1999-2000, the Hospital Authority operates 10 Community Geriatric Assessment Teams (CGATs) which serve a total of 16 250 elderly persons in 1999-2000. A standard CGAT comprises 1 doctor, 1 nurse and 4 supporting professionals.

Signature

Name in block letters Dr Margaret CHAN

Post Title Director of Health

Date 18 March 2000

Bureau Serial No.

HWB 114

Question Serial No.

0610

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 37 Department of Health Subhead (No. & title) :

Programme : 4 Curative Care

Controlling Officer : Director of Health

Bureau Secretary : Secretary for Health & Welfare

Question : What is the attendance for each evening/Sunday/public holiday clinics? What is the average cost for each consultation? What is the cost for each consultation at the general out-patient clinics under the Department of Health and at the general out-patient departments under the Hospital Authority respectively?

Asked by : Hon LAW Chi-kwong, JP

Reply :

The attendances of evening clinics and Sunday/public holiday clinics in 1999 were 892 386 and 193 985 respectively.

The average cost for each consultation in general out-patient clinics under the Department of Health is \$219 and that of the Hospital Authority is about the same.

Signature

Name in block letters Dr Margaret CHAN

Post Title Director of Health

Date 18 March 2000

Bureau Serial No.

HWB 115

Question Serial No.

0611

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 37 Department of Health Subhead (No. & title) :

Programme : 2 Disease Prevention

Controlling Officer : Director of Health

Bureau Secretary : Secretary for Health & Welfare

Question : The work of preventing food-borne diseases has been transferred to the Food and Environmental Hygiene Department under programme (2). There will be no new services or additional posts under programme (2) next year. Moreover, deflation is expected to continue in the market next year. Then, what is the justification for raising the estimated expenditure by 43.4 million? Please also state the purposes for an increased estimate?

Asked by : Dr Hon TANG Siu-tong, JP

Reply :

The increase of 4.1% (\$43.4m) in the 2000-01 estimates over its 1999-2000 revised estimates under programme 2 is mainly attributable to the full year effect for setting up 6 elderly health centres and 6 visiting health teams, and for strengthening the capacity to conduct disease surveillance and enhance prevention and control of infectious diseases.

Signature

Name in block letters Dr Margaret CHAN

Post Title Director of Health

Date 17 March 2000

Bureau Serial No.

HWB 116

Question Serial No.

0612

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 37 Department of Health Subhead (No. & title) :

Programme : 4 Curative Care

Controlling Officer : Director of Health

Bureau Secretary : Secretary for Health & Welfare

Question : What is the financial provision for setting up Chinese medicine clinics in 2000-01? What is the expected effect on the overall medical services after these clinics come into operation?

Asked by : Hon Emily LAU Wai-hing, JP

Reply :

The Department of Health at present has no plans to set up Chinese medicine clinics in 2000-01. The provision of \$3.1m included in 2000-01 is for subventing the two existing Chinese medicine clinics operated by the Tung Wah Group of Hospitals.

Signature

Name in block letters Dr Margaret CHAN

Post Title Director of Health

Date 17 March 2000

Bureau Serial No.

HWB 117

Question Serial No.

0613

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 37 Department of Health Subhead (No. & title) :

Programme : 4 Curative Care

Controlling Officer : Director of Health

Bureau Secretary : Secretary for Health & Welfare

Question :

- (a) What is the average consultation time for every patient of episodic illnesses in general out-patient clinics?
- (b) What is the balance between supply and demand of the general out-patient clinic service? What will the department do to enhance the efficiency of the clinic service so that such service can be expanded without sacrificing the service quality?

Asked by : Hon Emily LAU Wai-hing, JP

Reply :

- (a) The average time for each consultation is about 5 minutes.
- (b) The demand for general out-patient service depends on a number of factors, including variation in disease pattern and seasonal fluctuations. In 1999, the average utilisation rate in day clinics was 92%. The Department will continue to monitor service provision and implement improvement measures such as internal redeployment of resources to accommodate changing service needs.

Signature

Name in block letters Dr Margaret CHAN

Post Title Director of Health

Date 17 March 2000

Bureau Serial No.

HWB 118

Question Serial No.

0614

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 37 Department of Health Subhead (No. & title) :

Programme : 4 Curative Care

Controlling Officer : Director of Health

Bureau Secretary : Secretary for Health & Welfare

Question : In respect of the service provided by the general out-patient clinics of the department in the year 2000-01 :

- (a) Are there any plans to allocate more resources to enhance the services in the evenings, on Sundays and during public holidays ? If there are such plans, what are these additional clinics providing the additional services ?
- (b) Will the department consider allocating more resources to holiday clinics to provide service on all Sundays and public holidays with both morning and afternoon sessions ? If not, what are the reasons ?

Asked by : Hon Fred LI Wah-ming, JP

Reply :

By end 1999, the public holiday clinic service has been extended to all gazetted public holidays with both morning and afternoon sessions. At present, there are 22 evening clinics and 11 Sunday/public holiday clinics. The average utilisation rate of evening clinics and Sunday/public holiday clinics in 1999 was about 82% and 83% respectively. The situation will be closely monitored.

Signature

Name in block letters Dr Margaret CHAN

Post Title Director of Health

Date 18 March 2000

Bureau Serial No.

HWB 119

Question Serial No.

0615

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 37 Department of Health Subhead (No. & title) :

Programme : 4 Curative Care

Controlling Officer : Director of Health

Bureau Secretary : Secretary for Health & Welfare

Question : Which areas have not achieved the target of providing one general out-patient clinic for every 100 000 population? What resources will be allocated to implement practical measure in 2000-01 to meet the demand for general out-patient clinic service in these areas?

Asked by : Hon Fred LI Wah-ming, JP

Reply :

The ratio in the Hong Kong Planning Standards and Guidelines is to be applied with flexibility to meet different district needs. Overall, this ratio has been achieved.

In districts of substantial population build-up and/or where demand for public primary medical care is high, evening/Sunday/public holiday clinics services will be introduced or enhanced to meet service demand.

Signature

Name in block letters Dr Margaret CHAN

Post Title Director of Health

Date 17 March 2000

Bureau Serial No.

HWB 120

Question Serial No.

0616

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 37 Department of Health Subhead (No. & title) :

Programme : 4 Curative Care

Controlling Officer : Director of Health

Bureau Secretary : Secretary for Health & Welfare

Question :

- (a) What are the utilization rates of those Chinese medicine clinics subvented by the department?
- (b) Has the department received from other organizations any subvention application for the establishment/running of Chinese medicine clinics? If yes, what are the details and decisions of the department? If not, does the department plan to allocate additional resources for establishing Chinese medicine clinics?

Asked by : Dr Hon TANG Siu-tong, JP

Reply :

- (a) The number of total attendances at the two Chinese medicine clinics operated by the Tung Wah Group of Hospitals in 1999 is 382 000.
- (b) The Department has not received any subvention applications from other institutions for setting up Chinese medicine clinics. The Department at present has no plans to set up additional Chinese medicine clinics.

Signature

Name in block letters Dr Margaret CHAN

Post Title Director of Health

Date 18 March 2000

Bureau Serial No.

HWB 121

Question Serial No.

0617

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 37 Department of Health Subhead (No. & title) :

Programme : 4 Curative Care

Controlling Officer : Director of Health

Bureau Secretary : Secretary for Health & Welfare

Question :

- (a) The anticipated number of attendances at general out-patient clinics of the department is 4.76 million next year. Apart from the additional quota provided by the new clinic in Cheung Sha Wan Government Offices Building, what is the actual increase in the quota provided by the rest of the out-patient clinics in other districts ?
- (b) What is the utilisation rate of each general out-patient clinic run by the department ? Will the department increase the quota and extend the service hours of those out-patient clinics with high utilisation rates ? If yes, what are the details and resources committed ? If not, what is the reason ?

Asked by : Dr Hon TANG Siu-tong, JP

Reply :

- (a) The estimated increase in attendances at general out-patient clinics in 2000 is due to the full year effect of the opening of the Kowloon Bay General Out-patient Clinic and the commencement of operation of the new clinic in Cheung Sha Wan.
- (b) In 1999, the average utilisation rate in general out-patient clinics was 92%. The Department will continue to monitor service provision and introduce improvement measures where practicable.

Signature

Name in block letters Dr Margaret CHAN

Post Title Director of Health

Date 17 March 2000

Bureau Serial No.

HWB 122

Question Serial No.

0618

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 37 Department of Health Subhead (No. & title) :

Programme : 5 Rehabilitation

Controlling Officer : Director of Health

Bureau Secretary : Secretary for Health & Welfare

Question : For the 30% of child assessment cases, who could not receive appointment within 3 weeks, in 1999, what is the range of their waiting time? How many are on waiting list now? The Department has been failing to achieve its target in appointment time for several years continuously. Does the Department has any plan to address the problem? If yes, any additional financial or manpower provision required?

Asked by : Dr Hon LEONG Che-hung, JP

Reply :

The remaining cases in 1999 were seen within three to eight weeks. There are currently 79 children on the waiting list for first appointment. A new child assessment centre in Fanling will be opened in 2002. Moreover, service efficiency will be enhanced through streamlining of procedures.

Signature

Name in block letters Dr Margaret CHAN

Post Title Director of Health

Date 17 March 2000

Bureau Serial No.

HWB 123

Question Serial No.

0619

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 37 Department of Health Subhead (No. & title) :

Programme : 5 Rehabilitation

Controlling Officer : Director of Health

Bureau Secretary : Secretary for Health & Welfare

Question :

- (a) What is the average unit cost of providing a comprehensive assessment for each child with development problems ?
- (b) What is the number of children who have received remedial treatment in child assessment centres in 1999 and 2000 respectively?
- (c) What is the average appointment time for new cases in child assessment centres? Why has the department failed to achieve the target in 1999 that 75% of the new cases in child assessment centres would be handled within 3 weeks? Without additional resources, what will the department do to achieve the planned target of handling 80% of the new cases within 3 weeks this year.

Asked by : Hon LAW Chi-kwong, JP

Reply :

- (a) The average unit cost of providing a comprehensive assessment for each child is \$3,600.
- (b) Child Assessment Centres provide comprehensive assessment services for children. A total of 5 892 children were assessed in 1999. In 2000, it is expected that 6 200 children will be assessed. Children requiring remedial treatment will be referred to specialists for treatment or for appropriate placement in nurseries, special child care centres and special schools.
- (c) About 70% of children were seen within three weeks. The main reason for not achieving the planned target was due to the increase in the number of referred cases. It is expected that the target of "80% of cases have their first appointment within 3 weeks" can be achieved with the full operation of Central Kowloon Child Assessment Centre, better coordinated team assessment approach and streamlining of assessment procedures.

Signature

Name in block letters Dr Margaret CHAN

Post Title Director of Health

Date 17 March 2000

Bureau Serial No.

HWB 124

Question Serial No.

0620

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 37 Department of Health Subhead (No. & title) : 106 Temporary staff

Programme :

Controlling Officer : Director of Health

Bureau Secretary : Secretary for Health & Welfare

Question : What are the implications of the increase of 20.6% in the provision under Subhead 106 Temporary Staff on the permanent establishment of evening/Sunday/public holiday clinics, evening dental clinics and methadone treatment clinics ? What is the relationship between the increase in expenditure for temporary staff and service enhancement ? What is the impact on existing staff ?

Asked by : Hon CHAN Yuen-han

Reply :

The increase in the provision under subhead 106 is for the employment of non-civil service contract staff on a short term basis to provide flexibility and efficiency in service delivery. The provision is transferred from personal emoluments. It will not affect the permanent establishment of the evening/Sunday/public holiday clinics, evening dental clinics and methadone treatment clinics.

Existing staff will not be affected by the employment of additional non-civil service contract staff who are mainly deployed to fill vacancies.

Signature

Name in block letters Dr Margaret CHAN

Post Title Director of Health

Date 17 March 2000

Bureau Serial No.

HWB 125

Question Serial No.

0621

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 37 Department of Health Subhead (No. & title) :

Programme :

Controlling Officer : Director of Health

Bureau Secretary : Secretary for Health & Welfare

Question : What are the establishment, strength and wastage rate of medical, dental, nursing, allied health, administrative and other staff in 1999-2000? Please provide the projected establishment of these ranks for the next financial year.

Asked by : Dr Hon LEONG Che-hong, JP

Reply:

The establishment, strength and wastage rate of medical, nursing, dental, allied health, administrative and other staff in 1999-2000 and the projected establishment of each grade for 2000-01 are as follows -

<u>Grade</u>	<u>Establishment (at 1.3.2000)</u>	<u>Strength (at 1.3.2000)</u>	<u>Projected Wastage rate in 1999-2000</u>	<u>Projected Establishment for 2000-01</u>
Medical	609	561	3.89%	653
Supplementary Medical	781	717	2.59%	838
Nursing	1 649	1 573	1.76%	1 703
Nursing Allied	168	124	6.06%	160
Dental	226	225	0.44%	236
Para-dental	651	641	1.08%	657
Administrative	1 457	1 453	1.14%	1 577
Others	1 419	1 343	4.02%	1 420
Total	<u>6 960</u>	<u>6 637</u>	<u>2.38%</u>	<u>7 244</u>

Signature

Name in block letters Dr Margaret CHAN

Post Title Director of Health

Date 17 March 2000

Bureau Serial No.

HWB 126

Question Serial No.

0622

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 37 Department of Health Subhead (No. & title) :

Programme :

Controlling Officer : Director of Health

Bureau Secretary : Secretary for Health & Welfare

Question : What are the average unit cost of each attendance at general out-patient clinics, specialist out-patient clinics, dental clinics, student health clinics, school dental clinics, maternal and child clinics, women health centres, elderly health centre and other major services in 1999-2000? Please provide the corresponding projection for the next financial year.

Asked by : Dr Hon LEONG Che-hung, JP

Reply : The average unit cost per attendance of the following services is :

	<u>1999-2000</u>
	\$
General out-patient clinics	219
Specialist out-patient clinics	572
Dental clinics	779
School dental clinics	506
Student health service centres	278
Maternal health centres	553
Child health centres	296
Women health centres	454
Elderly health centres	634

The average unit cost for various services is expected to be the same in 2000-01.

Signature

Name in block letters Dr Margaret CHAN

Post Title Director of Health

Date 17 March 2000

Bureau Serial No.

HWB 127

Question Serial No.

0623

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 37 Department of Health Subhead (No. & title) :

Programme : 3 Health Promotion/4 Curative Care

Controlling Officer : Director of Health

Bureau Secretary : Secretary for Health & Welfare

Question : Regarding dental services, what are the financial provision for oral health education for general public; oral health education programmes for pre-school and kindergarten children; School Dental Care service; curative dental services for the public; and curative dental service for special needs group respectively in 1999-2000? Please provide the corresponding projection for the next financial year.

Asked by : Dr Hon LEONG Che-hung, JP

Reply : The financial provision for the dental services is given as follows :

	<u>Revised Estimate</u>	
	<u>1999-2000</u>	<u>2000-01</u>
	\$m	\$m
Oral health education for general public including pre-school and kindergarten children	19.7	19.9
School Dental Care Service	162.7	165.8
Curative dental services for public	45.2	47.1

As curative dental service for special needs group forms an integral part of the activities of the oral maxillofacial surgery and dental units, its financial provision cannot be readily quantified.

Signature

Name in block letters Dr Margaret CHAN

Post Title Director of Health

Date 17 March 2000

Bureau Serial No.

HWB 128

Question Serial No.

0624

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 37 Department of Health Subhead (No. & title) :

Programme :

Controlling Officer : Director of Health

Bureau Secretary : Secretary for Health & Welfare

Question : Please provide breakdown of the number of temporary staff employed according to their ranks as well as the "programme" areas they are deployed to in 1999-2000 and the next financial year.

Asked by : Dr Hon LEONG Che-hung, JP

Reply :

The number of non-civil service contract staff is 133 in 1999-2000 and estimated to increase to 285 in 2000-01. The number of other temporary staff is 201 in 1999-2000 and estimated to remain the same in 2000-01. They are detailed in Annexes A & B respectively.

Signature

Name in block letters Dr Margaret CHAN

Post Title Director of Health

Date 17 March 2000

Non-civil Service Contract Staff

<u>Programme</u>	<u>Rank</u>	<u>Number of Posting</u>	
		<u>1999-2000[#]</u>	<u>2000-01[*]</u>
1. Statutory functions	Medical and Health Officer	2	0
	Mortuary Attendant	0	4
	Property Attendant	0	1
	Scientific Officer (Medical)	4	5
	Workman II	1	3
2. Disease prevention	Chiropodist I	0	2
	Clinical Psychologist	3	9
	Dietitian	4	7
	Dispenser	3	4
	Enrolled Nurse	0	11
	Hospital Administrator II	1	1
	Hospital Foreman	0	1
	Laboratory Attendant	1	1
	Medical and Health Officer	6	17
	Medical Laboratory Technician II	5	5
	Occupational Therapist I	1	7
	Pharmacist	2	8
	Physiotherapist I	0	6
	Property Attendant	0	2
	Registered Nurse	18	52
	Scientific Officer (Medical)	1	4
Workman II	6	18	
3. Health promotion	Medical and Health Officer	0	4
	Registered Nurse	3	0
	Workman II	4	3
4. Curative care	Darkroom Technician	0	1
	Dispenser	6	5
	Hospital Administrator II	0	1
	Hospital Foreman	0	1
	Inoculator	0	1
	Laboratory Attendant	0	1
	Medical and Health Officer	9	17
	Medical Laboratory Technician II	6	7
	Pharmacist	6	4
	Property Attendant	1	4
	Radiographer II	6	6
	Registered Nurse	10	3
	Scientific Officer (Medical)	1	1
	Workman II	6	15
5. Rehabilitation	Clinical Psychologist	1	2

[#] based on the position at 1 February 2000

^{*} projected number of posts involved

Non-civil Service Contract Staff

<u>Programme</u>	<u>Rank</u>	<u>Number of Posting</u>	
		<u>1999-2000[#]</u>	<u>2000-01[*]</u>
	Electrical Technician	0	1
	Enrolled Nurse	0	1
	Medical and Health Officer	0	1
	Occupational Therapist I	0	1
	Optometrist	1	1
	Physiotherapist I	1	1
	Registered Nurse	0	2
	Scientific Officer (Medical)	1	1
	Speech Therapist	0	2
	Workman II	0	1
6. Treatment of drug abusers	--	0	0
7. Prince Philip Dental Hospital	--	0	0
8. Medical and dental treatment for civil servants	Dental Officer	1	1
	Dental Hygienist	1	6
	Dental Surgery Assistant	5	6
	Dispenser	2	3
	Hospital Administrator II	1	0
	Medical Laboratory Technician II	1	1
	Pharmacist	1	2
	Property Attendant	0	2
	Workman II	1	8
9. Personnel management of civil servants working in Hospital Authority	--	0	0
		<u>133</u>	<u>285</u>

based on the position at 1 February 2000

* projected number of posts involved

Other Temporary Staff

	Programme	Rank	Number	
			1999-2000	2000-01
1.	Statutory functions	Scientific Officer (Medical)	1	1
		Clerical Staff	4	4
		Registration Supervisor	2	2
		Registration/ Licensing Assistant	11	11
2.	Disease prevention	Registered Nurse	19	19
		Clerical Staff	20	20
		Labourer	3	3
		Research Assistant	3	3
		Hospital Administrator Assistant	1	1
4.	Curative care	Registered Nurse	47	47
		Dispenser	38	38
		Health Care Information Co-ordinator	1	1
		Labourer	4	4
		Clerical Staff	46	46
8.	Medical & dental Treatment for civil servants	Dental Officer	1	1
		Total	201	201

Bureau Serial No.

HWB 129

Question Serial No.

0625

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 37 Department of Health Subhead (No. & title) :

Programme :

Controlling Officer : Director of Health

Bureau Secretary : Secretary for Health & Welfare

Question : The Department expected to delete a net 186 permanent posts in 2000-01. Please provide breakdown according to their ranks as well as the "programme" areas they belonged to. Please also indicate whether these deleted posts are to be replaced by temporary staff; and, if yes, the corresponding number.

Asked by : Dr Hon LEONG Che-hung, JP

Reply :

In 2000-01, there will be a net deletion of 186 posts. A breakdown of these posts by programme area and rank is given as follows -

<u>Programme</u>	<u>Rank</u>	<u>Number of posts created</u>	<u>Number of posts deleted</u>	<u>Net</u>
1	Assistant Clerical Officer	14	-	14
	Calligraphist	1	-	1
	Chinese Language Officer II	1	-	1
	Clerical Assistant	7	-	7
	Dispenser	-	(1)	(1)
	Personal Secretary II	4	-	4
	Registered Nurse	-	(1)	(1)
	Workman II	2	(2)	0
		<u>29</u>	<u>(4)</u>	<u>25</u>
2	Assistant Clerical Officer	-	(1)	(1)
	Clinical Psychologist	-	(3)	(3)
	Dietitian	-	(3)	(3)
	Dispenser	-	(9)	(9)
	Enrolled Nurse	-	(11)	(11)
	Laboratory Attendant	-	(1)	(1)
	Medical and Health Officer	-	(10)	(10)
	Medical Laboratory Technician II	-	(3)	(3)

<u>Programme</u>	<u>Rank</u>	<u>Number of posts created</u>	<u>Number of posts deleted</u>	<u>Net</u>
	Midwife	-	(9)	(9)
	Nursing Officer	-	(2)	(2)
	Occupational Therapist I	-	(3)	(3)
	Office Assistant	-	(1)	(1)
	Pharmacist	-	(2)	(2)
	Physiotherapist I	-	(3)	(3)
	Registered Nurse	-	(33)	(33)
	Scientific Officer (Medical)	-	(1)	(1)
	Senior Medical and Health Officer	-	(2)	(2)
	Ward Attendant	-	(22)	(22)
	Workman II	-	(11)	(11)
		<u>0</u>	<u>(130)</u>	<u>(130)</u>
3	Assistant Clerical Officer	-	(5)	(5)
	Clerical Assistant	-	(2)	(2)
	Clerical Officer	2	-	2
	Executive Officer I	3	-	3
	Hospital Administrator I	-	(2)	(2)
	Hospital Administrator II	-	(2)	(2)
	Nursing Officer	-	(2)	(2)
	Office Assistant	-	(5)	(5)
	Senior Nursing Officer	-	(1)	(1)
	Typist	-	(2)	(2)
	Workman II	-	(4)	(4)
		<u>5</u>	<u>(25)</u>	<u>(20)</u>
4	Assistant Clerical Officer	-	(1)	(1)
	Chinese Language Officer II	1	-	1
	Dispenser	-	(13)	(13)
	Inoculator	-	(8)	(8)
	Laboratory Attendant	-	(2)	(2)
	Medical and Health Officer	-	(5)	(5)
	Medical Laboratory Technician II	-	(4)	(4)
	Pharmacist	-	(2)	(2)
	Property Attendant	-	(2)	(2)
	Workman II	-	(11)	(11)
		<u>1</u>	<u>(48)</u>	<u>(47)</u>
8	Dental Technician II	-	(5)	(5)
	Dispenser	-	(3)	(3)
	Medical and Health Officer	-	(1)	(1)
	Medical Laboratory Technician II	-	(1)	(1)
	Pharmacist	-	(1)	(1)
	Property Attendant	-	(1)	(1)

<u>Programme</u>	<u>Rank</u>	<u>Number of posts created</u>	<u>Number of posts deleted</u>	<u>Net</u>
	Workman II	-	(2)	(2)
		<u>0</u>	<u>(14)</u>	<u>(14)</u>
		<u>35</u>	<u>(221)</u>	<u>(186)</u>
		<u><u>35</u></u>	<u><u>(221)</u></u>	<u><u>(186)</u></u>

The net reduction of 186 posts has included the deletion of 58 posts for employment of non-civil service contract staff on a short term basis to provide flexibility and efficiency in service delivery.

Signature

Name in block letters Dr Margaret CHAN

Post Title Director of Health

Date 17 March 2000

Bureau Serial No.

HWB 130

Question Serial No.

0626

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 37 Department of Health Subhead (No. & title) :

Programme :

Controlling Officer : Director of Health

Bureau Secretary : Secretary for Health & Welfare

Question : What kinds of inter-departmental charges the Department of Health needs to pay in 1999-2000 and the next financial year? Please provide the estimate for each item.

Asked by : Dr Hon LEONG Che-hung, JP

Reply :

The inter-departmental charges are :

<u>Type of charges</u>	<u>1999-2000</u>	<u>2000-01</u>
	\$m	\$m
Electrical and mechanical services	68.5	70.4
Printing service	9.9	10.1
Postal service	2.9	2.7
Telecommunication service	0.1	0.1
Others	0.1	0.1
	<u>81.5</u>	<u>83.4</u>

Signature

Name in block letters Dr Margaret CHAN

Post Title Director of Health

Date 17 March 2000

Bureau Serial No.

HWB 131

Question Serial No.

0627

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 37 Department of Health Subhead (No. & title) :

Programme :

Controlling Officer : Director of Health

Bureau Secretary : Secretary for Health & Welfare

Question : Please provide details and corresponding financial provision of the initiatives on new and improved services in 1999-2000 that are financed through productivity gains.

Asked by : Dr Hon LEONG Che-hung, JP

Reply : In 1999-2000, the Department of Health has achieved productivity gains of \$24.82m to fund new and improved services as follows :

<u>New and Improved Services</u>	<u>Productivity Gains (\$m)</u>
(a) Increase the enrolment in Elderly Health Centres by 2 070	4.00
(b) Increase the number of consultations in general out-patient clinics by 79 000 for episodic illnesses and 60 000 for chronic patients	6.70
(c) Provide 20 000 additional annual assessment for diabetic patients in general out-patient clinics	2.30
(d) Enhance radiography service in the Kowloon Bay Radiography Centre by additional 29 000 plain X-ray and 1 600 special X-ray examinations	2.65
(e) Improve clinic services	4.57
(f) Setting up two additional pest control teams	1.30
(g) Others	3.30
	<hr/>
	24.82
	<hr/>

Signature

Name in block letters Dr Margaret CHAN

Post Title Director of Health

Date 17 March 2000

Bureau Serial No.

HWB 132

Question Serial No.

0628

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 37 Department of Health Subhead (No. & title) :

Programme :

Controlling Officer : Director of Health

Bureau Secretary : Secretary for Health & Welfare

Question : Would the Department set up training posts for Family Physicians in 2000-01? Is there any such plan for the next 3 years? How many clinics under the Department are certified as training centres by the Hong Kong College of Family Physicians?

Asked by : Dr Hon LEONG Che-hung, JP

Reply :

There is no provision for training posts for family medicine in the establishment of the Department of Health. There is at present no plans to create such posts in the next three years.

Currently, six clinics are certified as training centres by the Hong Kong College of Family Physicians.

Signature

Name in block letters Dr Margaret CHAN

Post Title Director of Health

Date 17 March 2000

Bureau Serial No.

HWB-133

Question Serial No.

0891

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 177 Subhead (No. & title) : 514 Hospital Authority

Programme : Health

Controlling Officer : Secretary for Health and Welfare

Bureau Secretary : Secretary for Health and Welfare

Question :

Please list the breakdowns of personal emoluments and staff on-costs for the following groups of staff respectively :

- (1) doctors
- (2) family medicine trainees
- (3) interns
- (4) qualified nursing staff
- (5) nurse trainees

and give a comparison between the above estimated expenditures and the actual expenditures in 1998-99. (Please also provide a comparison with the actual expenditures in 1999-2000 later this year.)

Asked by : Hon Michael HO Mun-ka

Reply : Information on personal emoluments and staff on-cost expenditures pertaining to medical and nursing staff in 1998-99 and 2000-01 are set out below -

Staff Group	1998-99 Actual Expenditure			2000-01 Estimated Expenditure		
	Personal Emoluments (\$M)	Staff On-costs (\$M)	Total (\$M)	Personal Emoluments (\$M)	Staff On-costs (\$M)	Total (\$M)
Doctors	3,199	2,115	5,314	3,434	2,279	5,713

(excluding Family Medicine Trainees)						
Family Medicine Trainees	25	11	36	131	56	187
Interns	80	Not Applicable	80	82	Not Applicable	82
Qualified Nursing Staff (excluding Nursing Trainees)	5,858	2,268	8,126	6,542	2,491	9,033
Nurse Trainees	488	148	636	277	78	355
Total	9,650	4,542	14,192	10,466	4,904	15,370

Signature _____

Name in block letters Dr E K YEOH

Post Title Secretary for Health and Welfare

Date 17 March 2000

Bureau Serial No.

HWB-134

Question Serial No.

0892

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 177 Subhead (No. & title) : 514 Hospital Authority

Programme : Health

Controlling Officer : Secretary for Health and Welfare

Bureau Secretary : Secretary for Health and Welfare

Question :

With an increase in the number of hospital beds, there is only a 2.2% increase in the total provision. The additional provision does not reflect the expenditure on them, and there should not be no change at all in the unit costs of hospital beds, out-patient service, etc. as figured out in the Expenditure Estimates. Please explain.

Asked by : Hon Michael HO Mun-ka

Reply : The Hospital Authority (HA), as part of the public sector, has undertaken to implement the Enhanced Productivity Programme to improve productivity and efficiency in the delivery of public hospital services. In 2000-01, the HA aims to achieve productivity savings of 1% of its total recurrent expenditure, which amounts to about \$281M. The HA will deploy the additional recurrent resources allocated in 2000-01, amounting to \$626.8M, as well as implement various productivity gain measures, to provide new and improved services in 2000-01. The productivity gain measures include centralising and networking hospital services among hospitals, service reengineering, streamlining administrative and management processes, and rationalising hospital services. Through the implementation of these initiatives, the HA is able to re-deploy 602 existing staff to open 460 new hospital beds.

The HA has not conducted detailed costing exercise for the purpose of estimating the unit costs of providing inpatient, outpatient and other services in 1999-2000 and 2000-01. Instead, a historical costing approach has been adopted. The unit costs of the services are projected from the 1998-99 unit costs, taking into account movement in prices over the years. Since the change in price level during 1999-2000 and 2000-01 is expected to be minimal, and the change in bed days and bed number is in the region of 2%, the unit costs of the services for 1999-2000 and 2000-01 are estimated to be the same level. We shall review the projections formula for computing unit costs for various services for the purpose of preparing next year's draft estimates.

Signature _____

Name in block letters Dr E K YEOH

Post Title Secretary for Health and Welfare

Date 18 March 2000

Bureau Serial No.

HWB-135

Question Serial No.

0897

Examination of draft Estimates of Expenditure 2000-01
CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION

Head 177 Subhead (No. & title) : 514 Hospital Authority

Programme : Health

Controlling Officer : Secretary for Health and Welfare

Bureau Secretary : Secretary for Health and Welfare

Question :

The actual situation concerning the implementation of new or improved services by the Hospital Authority under the Enhanced Productivity Programme for the year 1999-2000.

Asked by : The Hon Michael HO Mun-ka

Reply : The progress in implementing the new and improved services funded by the Hospital Authority's productivity gains under the Enhanced Productivity Programme during 1999-2000 is as follows –

New/improved services funded by productivity gains in 1999-2000	Progress
(a) Open 120 infirmary beds in the Cheshire Home at Chung Hom Kok.	All 120 infirmary beds in the Cheshire Home at Chung Hom Kok have been opened.
(b) Introduce nuclear medicine to complement other imaging modalities in radiological examination for about 1 100 patients a year in Kwong Wah Hospital and Princess Margaret Hospital.	Nuclear medicine service has been introduced in both hospitals. As at 31 December 1999, some 960 patients were treated with nuclear medicine. The target of serving 1 100 patients is expected to be achieved by end 1999-2000.
(c) Shorten waiting time for first attendance in Hospital Authority's specialist outpatient	The target timeframe of 9 weeks has been achieved. The average waiting time for first attendance in

clinics in four specialties, namely Medicine, Ophthalmology, Orthopaedics and Traumatology and Surgery, from the present 11 to 18 weeks to 9 weeks.	specialist outpatient clinics in the four specialties was 4-9 weeks as at January 2000.
(d) Increase the number of cataract surgery operations in Hospital Authority institutions by 1 300 a year.	As at 31 December 1999, an additional 703 cataract surgery operations have been performed. The target of performing additional 1 300 operations is expected to be achieved by end 1999-2000.
(e) Enhancement of maintenance of biomedical equipment, electrical equipment and building services at Schedule II hospitals.	The maintenance of biomedical equipment, electrical equipment and building services of 20 Schedule II hospitals has been enhanced.

Signature _____

Name in block letters Dr E K YEOH

Post Title Secretary for Health and Welfare

Date March 2000

Bureau Serial No.

HWB-136

Question Serial No.

0898

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head : 177 Subhead (No. & title) : 514 Hospital Authority

Programme : Health

Controlling Officer : Secretary for Health and Welfare

Bureau Secretary : Secretary for Health and Welfare

Question :

Why is the number of nursing staff for the next financial year reduced by 360 as compared to this year? How much resources will be saved as a result? The next financial year's plan includes facilitating 200 nurses to attend degree conversion courses. What are the expenses incurred and in what way will the plan be implemented?

Asked by : Hon Michael HO Mun-ka

Reply : The nursing support for 2000-01 will in fact be strengthened through the planned net increase of 737 additional qualified nurses, resulting from lower turnover rate and high planned intake. The need for intake of trainee nurses will be correspondingly reduced. Trainee nurses spend approximately 70% of their time in clinical services, contributing to patient care. In the year 2000-01 there is a planned reduction of 1 097 nurse trainees resulting in an overall net reduction of 360 nursing staff. This change in staff-mix will not generate any savings and will instead result in a net additional cost of \$170M.

The Hospital Authority plans to implement a nursing conversion degree subsidy scheme in 2000-01 to assist 200 successful nurse applicants nominated by hospitals to attend conversion degree courses by granting a subsidy of \$5,000 to each applicant to cover the conversion degree course fee in part.

Signature _____

Name in block letters Dr E K YEOH

Post Title Secretary for Health and Welfare

Date 18 March 2000

Bureau Serial No.

HWB-137

Question Serial No.

1061

Examination of draft Estimates of Expenditure 2000-01
CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION

Head 177 Subhead (No. & title) : 514 Hospital Authority

Programme : Health

Controlling Officer : Secretary for Health and Welfare

Bureau Secretary : Secretary for Health and Welfare

Question : Regarding the number of beds in public hospitals, please advise –

- (1) The categories and geographical distribution of the 460 beds to be opened in 2000-01;
- (2) The number of beds and ratio to every 1000 people of the 8 regional hospital clusters as at 31.3.2000;
- (3) Which hospital clusters still fail to comply with the standard ratio of 5.5 beds to every 1000 people under the Hong Kong Planning Standards and Guidelines of the Planning Department? Does the Government have any specific measures or plans in hand to meet the demand for hospital beds in such region?

Asked by : Hon LI Wah-ming

Reply : (a) The bed type and geographical distribution of the 460 new beds to be opened in 2000-01 are set out below –

Region	Hospital	Acute General	Intensive Care	Infirmatory	Mentally Ill	All Types
Kowloon	Kowloon Hospital			68		68
Kowloon	Tseung Kwan O Hospital	354	4			358
New Territories	Tai Po Hospital				34	34
Total		354	4	68	34	460

- (b) Hospital clusters are created to enhance operational and management efficiency. The effective population served by each cluster is influenced by a number of factors including places of employment, nature of services and patient preference. Because of significant cross-cluster utilization of services, public hospital services are planned on a regional basis. Furthermore, the provision of certain specialised services, such as psychiatric, mentally-handicapped, cardiothoracic, tuberculosis & chest, radiotherapy & oncology and infirmary services, is planned on a territory-wide basis. The estimated number of hospital beds and the bed to population ratio by region as at 31 March 2000 are as follows –

Region	No of HA beds	Beds per 1000 population (for HA beds)
Hong Kong Island	7 016	4.9
Kowloon	7 493	3.7
New Territories	14 008	4.2
Overall	28 517	4.2

- (c) The planning ratio of 5.5 beds (including private hospital beds) per 1 000 population only serves as a territory-wide planning reference and should not be applied rigidly without assessing the local needs. Furthermore, supported by modern medical technology, the international trend has been to replace inpatient services, as far as possible, by more cost-effective ambulatory and community care. The need for hospital beds is expected to gradually decline. Over the next 4 years, while we shall put more emphasis on the development of ambulatory and community care services, we will continue to open an additional 1 500 hospital beds to meet growing needs, increasing the Hospital Authority's bed complement to over 30 000 by 2004-05. We shall closely monitor the demand for medical facilities in different regions, and expand our services as appropriate.

Signature _____

Name in block letters Dr E K YEOH

Post Title Secretary for Health and Welfare

Date 15 March 2000

Bureau Serial No.

HWB-140

Question Serial No.

0799

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 149 Government Secretariat
Health and Welfare Bureau

Subhead (No. & title) :

Programme : (2) Health

Controlling Officer : Secretary for Health and Welfare

Bureau Secretary : Secretary for Health and Welfare

Question : At the Special Finance Committee Meeting last year, the Bureau undertook to review the existing programmes on the promotion of public health (including the Healthy Living into the 21st Century Campaign) and their effectiveness. With regard to the review, what are the findings and the actual findings and the actual expenditure incurred?

Asked by : Dr Hon TANG Siu-tong, JP

Reply : The Health and Welfare Bureau (HWB) and the Department of Health are continuously monitoring the health promotion programmes, using existing resources. The content and mode of delivery of the programmes are reviewed and improvement measures are introduced where appropriate. For example, in view of the public's interest in information technology, health education will now be disseminated through multi-media means, including CD Rom, VCD and internet homepage.

The Environment and Food Bureau (EFB) has taken over the responsibility for co-ordinating the Healthy Living Campaign from the HWB since 1 January 2000. The EFB, in conjunction with HWB, is conducting an assessment on the impact of the Campaign with existing resources.

Signature _____

Name in block letters DR YEOH ENG KIONG

Post Title Secretary for Health and Welfare

Date 17 March 2000

Bureau Serial No.

HWB-141

Question Serial No.

0888

Examination of draft Estimates of Expenditure 2000-01
CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION

Head 149 Government Secretariat
Health and Welfare Bureau

Subhead (No. & title) :

Programme : (2) Health

Controlling Officer : Secretary for Health and Welfare

Bureau Secretary : Secretary for Health and Welfare

Question : The provision for the coming year is \$7.90m (34.3%) higher than the revised estimate for the current year and is mainly due to additional expenses required for the Review on Hong Kong's Health Care System and the net creation of one post. Please provide the following information:

- (a) the specific areas being examined under the Review and a breakdown of the expenditure involved; and
- (b) the reasons for the creation of one post and the expenditure to be incurred.

Asked by : Hon Michael HO Mun-ka

Reply : (a) The Review on Hong Kong's Health Care System will look into reform strategies that will improve the service delivery, quality assurance and financial sustainability of our health care system. The recommended way forward will be set out in the form of a consultation document to be released shortly for public consultation.

The estimated increase in expenditure under Programme 2 is to account for, amongst others, the expenses to be incurred for the consultation process, including printing of the consultation document, promotional pamphlets and publicity posters, production of radio and TV APIs; and the organization of related discussion fora, seminars and workshops.

Another area of major expenditure will be the commissioning of further studies. Many of the recommendations contained in the consultation document require further professional studies, researches and analyses. Funding has been earmarked for undertaking such studies, though the actual scope and subjects will have to be determined at a later stage in the light of the public consultation.

For planning purposes, we have prepared a rough breakdown of the projected expenditure as follows :

Publicity	\$2 million
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Administrative Support	\$1.5 million
Research and Studies	\$4.4 million

(b) One Senior Chinese Language Officer post and one Chinese Language Officer I post will be created in Health and Welfare Bureau to enhance the in-house translation support. A net creation of one post will be counted under each of the two programme areas, namely Programme (1) Social Welfare and Programme (2) Health. The expense involved for the creation of these two posts is about \$1 million in 2000-01.

Signature _____

Name in block letters DR YEOH ENG KIONG

Post Title Secretary for Health and Welfare

Date 17 March 2000

Bureau Serial No.

HWB-142

Question Serial No.

0889

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 149 Government Secretariat Subhead(No. & title) : 001 Salaries
Health and Welfare Bureau 002 Allowances
Programme: (1) Social Welfare and (2) Health

Controlling Officer : Secretary for Health and Welfare

Bureau Secretary : Secretary for Health and Welfare

Question : Compared with this year's revised estimates, why is it that the provision for the coming year's salaries (Subhead 001) under the Personal Emoluments Account is lower, while the provision for the allowances (Subhead 002) is higher?

Asked by : Hon Michael HO Mun-ka

Reply : The provision for salaries in 2000-01 under Subhead 001 is lower than the revised estimate for 1999-2000 as it takes into account the full-year savings arising from the transfer of posts to the new Environment and Food Bureau with effect from 1.1.2000.

The provision for allowances in 2000-01 under Subhead 002 is higher than the revised estimate for 1999-2000 because of the inclusion of \$29,000 to meet the increased expenditure on overtime allowance for Driver and Workman grades staff.

Signature _____

Name in block letters DR YEOH ENG KIONG

Post Title Secretary for Health and Welfare

Date 17 March 2000

Bureau Serial No.

HWB-143

Question Serial No.

0890

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 149 Government Secretariat
Health and Welfare Bureau

Subhead (No. & title) :

Programme : (2) Health

Controlling Officer : Secretary for Health and Welfare

Bureau Secretary : Secretary for Health and Welfare

Question : Provision under Subhead 149 General departmental expenses for the coming year represents an increase of \$8.92m (124%) over the revised estimate for 1999-2000. This is mainly due to the provision for the engagement of further studies and other expenses in relation to the Review on Hong Kong's Health Care System, partly offset by reduced operating expenses under the Enhanced Productivity Programme. Please give details about the items being studied and the expenses involved.

Asked by : Hon Michael HO Mun-ka

Reply : The Review on Hong Kong's Health Care System will look into reform strategies that will improve the service delivery, quality assurance and financial sustainability of our health care system. The recommended way forward will be set out in the form of a consultation document to be released shortly for public consultation.

The estimated increase in expenditure under Subhead 149 of \$8.923 million is due mainly to the estimated expenditure in relation to the Review of the Hong Kong Health Care System. These include expenses to be incurred for the consultation process such as printing of the consultation document, promotional pamphlets and publicity posters, production of radio and TV APIs; and the organization of related discussion fora, seminars and workshops.

Another area of major expenditure will be the commissioning of further studies. Many of the recommendations contained in the consultation document require further professional studies, researches and analyses. Funding has been earmarked for undertaking such studies, though the actual scope and subjects will have to be determined at a later stage in the light of the public consultation.

For planning purposes, we have prepared a rough breakdown of the projected expenditure as follows :

Publicity

\$2 million

Administrative Support
Research and Studies

\$1.5 million
\$4.4 million

Signature _____

Name in block letters DR YEOH ENG KIONG

Post Title Secretary for Health and Welfare

Date 17 March 2000

Bureau Serial No.
HWB-144
Question Serial No.
0896

Examination of draft Estimates of Expenditure 2000-01
CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION

Head 149 Government Secretariat Subhead (No. & title) : 001 Salaries
Health and Welfare Bureau

Programme: (1) Social Welfare and (2) Health

Controlling Officer : Secretary for Health and Welfare

Bureau Secretary : Secretary for Health and Welfare

Question : Please itemize the provision for allowances under Subhead 001 of the Estimates and provide a breakdown as well.

Asked by : Hon Michael HO Mun-ka

Reply : Expenditure under Subhead 001 is the provision for Salaries which amounts to \$52,252,000 in 2000-01. Provision for allowances is grouped under Subhead 002 and Subhead 007 and the detailed breakdown is as follows:-

Subhead 002	Provision in 2000-01 HK\$
Overtime allowance	220,000
Acting allowance	4,461,000
Typhoon allowance	2,000
Rainstorm Black Warning allowance	2,000
Total for Subhead 002	<hr/> 4,685,000
Subhead 007	
Job-related allowances --- Hardship allowance (Management consideration)	7,000

Signature _____

Name in block letters DR YEOH ENG KIONG

Post Title Secretary for Health and Welfare

Date 17 March 2000

Bureau Serial No.

HWB-146

Question Serial No.

0743

Examination of draft Estimates of Expenditure 2000-2001

**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head : 708-Capital Subventions and Major Systems and Equipment Subhead : 8001MJ United Christian Hospital extension

Programme : Health

Controlling Officer : Director of Architectural Services

Bureau Secretary : Secretary for Health and Welfare

Question : It was originally planned to provide 466 additional hospital beds under Subhead 8001MJ : United Christian Hospital extension. Of these beds, 215 were commissioned in 1999-2000 and according to the Administration, the remaining 251 cannot be put into service until 2003-04. Under this plan,

- (a) why the remaining 251 hospital beds cannot be commissioned until 2003-04 ?
- (b) how will the estimated expenditure of about \$22.95 million for 2000-01 be used ?
- (c) is it feasible to allocate the above estimated expenditure for full or partial commission of the remaining hospital beds ? If not, why not ?

Asked by : Hon Fred LI Wah-ming, JP

Reply : (a) The Hospital Authority (HA) organises hospital services in Kowloon East as a network of services in a hospital cluster arrangement. The Kowloon East cluster of hospitals serves primarily the residents in Kwun Tong and Tseung Kwan O. Two major capital works projects are being commissioned in the Kowloon East cluster, i.e. the United Christian Hospital (UCH) extension project and the construction of the Tseung Kwan O Hospital (the TKOH). The proposed phase commissioning of the new beds and facilities in the two projects have taken into consideration the needs of the community, the effective population served and the optimal utilisation of resources available. With the opening of the Tseung Kwan O Hospital, 458 new beds and in-patient facilities will be commissioned in 2000-01 and 2002-03. This will in turn alleviate the patient load of UCH by serving the local residents in Tseung Kwan O district who would otherwise seek medical treatment from UCH.

- (b) The estimated expenditure of \$22.95 million in 2000-01 under the UCH extension project is reserved for the payment of final accounts for furniture and equipment and construction costs of Block P of UCH.
- (c) The project estimate of the UCH extension project was approved by the Finance Committee for the specific purpose of construction of extension Blocks B, C, D and S, redevelopment of Block P as well as minor refurbishment to Block G of UCH. As such, the estimated cashflow in 2000-01 under the approved project estimate cannot be re-deployed for other purposes.

Signature _____

Name in block letters _____ S.H. PAU _____

Post Title _____ Director of Architectural Services _____

Date _____ 20 March 2000 _____

Bureau Serial No.

HWB-147

Question Serial No.

0655

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 48 Subhead (No. & title) :

Programme : (1) Statutory Testing,

Controlling Officer : Government Chemist

Bureau Secretary : Secretary for Health and Welfare

Question :

With regard to Programme (1),

- a. which department has proposed that the number of pharmaceuticals (quality control) tested be reduced from 22 805 to 14 600 in the coming year ?
- b. what are the reasons for the reduction in the number of samples tested and how can the original monitoring requirements be maintained ?
- c. what are the pharmaceuticals for which the number of samples tested will be reduced ?
- d. with regard to Programme (1), the number of pharmaceuticals (registration) tested will increase to an estimated total of more than 15 000 in the coming year from more than 5 000 in the current year. Please specify the reason(s) for the increase in the estimate.

Asked by : Hon Michael HO Mun-ka

Reply :

The 22 805 quality control tests on pharmaceuticals in 1999 represented an unexpected increase (78%) over 1998. The increase was due to an increase in ad hoc submissions from the Customs and Excise Department with respect to action taken against suspected pharmaceutical products (4 695 tests in 1999) and of special investigation samples submitted by the Department of Health (3 776 tests in 1999). The forecast for the year 2000 has taken account only of client departments' normal programmes. It is not anticipated that there will be any reduction of samples under normal programmes during 2000.

The increase in the forecast of pharmaceuticals tested for registration is to support the decision of the Department of Health to increase from 25% to 100% the pharmaceutical products submitted in connection with their application for registration. At the same time, to step up market surveillance on registered pharmaceutical products, the percentage of tests

on these products will increase from 2.5% to 5% per annum.

Signature _____

Name in block letters _____ D. G. CLARKE

Post Title _____ Ag Government Chemist

Date _____ 18 March 2000

Bureau Serial No.

HWB-148

Question Serial No.

1074

Examination of draft Estimates of Expenditure 2000-01
CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION

Head 48 Subhead (No. & title) :

Programme : (1) Statutory Testing

Controlling Officer : Government Chemist

Bureau Secretary : Secretary for Health and Welfare

Question :

There is an estimated 36% decrease in pharmaceuticals (quality control) tested, yet a 2.7 times increase in pharmaceuticals (registration) tested in 2000, compared to 1999. On what basis does the Administration arrive at these estimations ?

Asked by : Dr Hon Leong Che-hung, JP

Reply :

The 22 805 quality control tests on pharmaceuticals in 1999 represented an unexpected increase (78%) over 1998. The increase was due to an increase in ad hoc submissions from the Customs and Excise Department with respect to action taken against suspected pharmaceutical products (4 695 tests in 1999) and of special investigation samples submitted by the Department of Health (3 776 tests in 1999). The forecast for the year 2000 has taken account only of client departments' normal programmes. It is not anticipated that there will be any reduction of samples under normal programmes during 2000.

The increase in the forecast of pharmaceuticals tested for registration is to support the decision of the Department of Health to increase from 25% to 100% the pharmaceutical products submitted in connection with their application for registration. At the same time, to step up market surveillance on registered pharmaceutical products, the percentage of tests on these products will increase from 2.5% to 5% per annum.

Signature _____

Name in block letters D. G. CLARKE

Post Title Ag Government Chemist

Date 18 March 2000

Bureau Serial No.

HWB-150

Question Serial No.

1137

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 177 Subhead (No. & title) : 514 Hospital Authority

Programme : Health

Controlling Officer : Secretary for Health and Welfare

Bureau Secretary : Secretary for Health and Welfare

Question :

- (a) What are the wastage rates for doctors, nurses, allied health, clerical staff, administrative staff and others in 1999-2000? Please provide corresponding projection for the next financial year.
- (b) There is an estimated reduction of 550 staff members in the "others" category in 2000-01. Please provide breakdown of the rank and the corresponding financial savings.
- (c) How many staff of various ranks are required for the operation of the new beds in Tai Po Hospital, Kowloon Hospital Rehabilitation Building and Tseung Kwan O Hospital respectively? Amongst these, how many are from deployment of existing staff?

Asked by : Dr Hon LEONG Che-hung, JP

Reply : (a) The wastage rates for 1999-2000 projected from the actual wastage rates for the first ten months of the current financial year, and the estimated wastage rates for 2000-01 are set out below.

	Estimated Wastage Rates
	1999-2000 2000-01
Doctors	2.5% 2.3% - 2.7%
Nurses	2.7% 2.8% - 3.3%
Allied health professionals	1.8% 1.7% - 2.4%
Administrative staff	4.7% 4.9% - 5.6%
Others (including clerical staff)	3.4% 3.5% - 3.9%

- (b) The planned reduction of 550 staff under the “others” category in 2000-01 includes mainly staff performing hospital support functions. A breakdown by their major group and salaries is given below.

Rank	Projected Reduction in Number	Projected Reduction in Salaries (\$M)
Management staff	7	4.9
Other professional /administrative staff	28	6.2
Clerical/secretarial	81	6.9
Workman	124	7.5
Ward Attendant	150	9.7
Artisan / Cook / Property Attendant / Foreman / Laboratory Attendant / Laundry Worker	104	8.0
Other support staff (eg Machinist, Driver, Darkroom Technician, Operating Theatre Assistant, Gardener, Ganger, etc.)	56	5.0
Total	550	48.2

- (c) The estimated manpower required for the operation of 460 new beds in Tai Po Hospital, Kowloon Hospital Rehabilitation Building and Tseung Kwan O Hospital is given in the table below. Of the total manpower required,

about 600 staff will be provided through internal deployment from within the Hospital Authority.

Medical	80
Nursing	300
Allied Health	75
Others	410
Total	<u>865</u>

Signature _____

Name in block letters Dr E K YEOH

Post Title Secretary for Health and Welfare

Date 18 March 2000

Bureau Serial No.

HWB-151

Question Serial No.

1138

Examination of draft Estimates of Expenditure 2000-2001

**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY QUESTION**

Head 177 Subhead (No. & title) : 514 Hospital Authority

Programme : Health

Controlling Officer : Secretary for Health and Welfare

Policy Secretary : Secretary for Health and Welfare

Question : Please provide the unit cost for infirmary, mentally ill and mentally handicapped in-patient service; as well as general out-patient clinic service in 1999-2000. Please provide corresponding projection for the next financial year.

Asked by : Dr Hon LEONG Che-hung, JP

Reply : The requested information is provided as follows:

	1999-2000	2000-2001
	<u>Projected (\$)</u>	<u>Projected (\$)</u>
<u>Average unit cost per bed day</u>		
Mentally Ill	933	933
Mentally Handicapped	1,139	1,139
Infirmary	1,400	1,400

	<u>1999-2000</u> <u>Projected (\$)</u>	<u>2000-2001</u> <u>Projected (\$)</u>
<u>Average unit cost per attendance</u>		
General Outpatient clinics	219	219

Signature _____

Name in block letters Dr E K YEOH

Post Title Secretary for Health and Welfare

Date 18 March 2000

Bureau Serial No.

HWB- 152

Question Serial No.

1139

Examination of draft Estimates of Expenditure 2000-01
CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION

Head 177 Subhead (No. & title) : 514 Hospital Authority

Programme : Health

Controlling Officer : Secretary for Health and Welfare

Bureau Secretary : Secretary for Health and Welfare

Question :

Please provide breakdown of the expenditure on professional training for medical, nursing, dental, allied health and other types of staff in 1999-2000, as well as the respective number of beneficiaries. Please provide corresponding projection for the next financial year.

Asked by : Dr Hon LEONG Che-hung, JP

Reply : The requested breakdown is set out below –

Grade of Staff	Estimated expenditure on professional training		Estimated No. of beneficiaries (i.e. No. of participation)	
	1999-2000 (\$'000)	2000-2001 (\$'000)	1999-2000	2000-2001
Medical (including dental)	16,191	16,700	5 675	5 200
Nursing	14,699	14,600	15 973	15 100
Allied Health	5,809	5,800	5 870	5 600
Others	5,012	5,000	4 276	4 250

Signature _____
Name in block letters Dr E K YEOH
Post Title Secretary for Health and Welfare
Date 17 March 2000

Bureau Serial No.

HWB-153

Question Serial No.

1140

Examination of draft Estimates of Expenditure 2000-2001

**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY QUESTION**

Head 177 Subhead (No. & title) : 514 Hospital Authority

Programme : Health

Controlling Officer : Secretary for Health and Welfare

Policy Secretary : Secretary for Health and Welfare

Question :

Please provide breakdown of the amount for each type of cross-charging for Government services or payment for trading fund services in 1999-2000 and the estimates for 2000-01.

Asked by : Dr Hon LEONG Che-hung, JP

Reply : A breakdown of the estimated charges for Government services or trading fund payments in 1999-2000 and 2000-01 is provided below:

Type of services	Estimated Charges	
	1999-2000 (\$M)	2000-01 (\$M)
Electrical and mechanical services	683.2	719.0
Water supply	32.6	32.5
Printing services	22.7	22.5
Laboratory services	9.8	9.8
Government rent	11.4	11.3
Services provided by the Food and Environmental Hygiene Department	11.9	11.9
Services provided by Audit Commission	5.1	-
Other services provided by various Government departments	22.0	21.9
Total	798.7	828.9

Signature

Name in block letters

Post Title

Date

Dr E K YEOH

Secretary for Health and Welfare

17 March 2000

Bureau Serial No.

HWB-154

Question Serial No.

1145

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 177 Subhead (No. & title) : 514 Hospital Authority

Programme : Health

Controlling Officer : Secretary for Health and Welfare

Bureau Secretary : Secretary for Health and Welfare

Question :

Please give a breakdown by rank, number and salary (including cash allowance) of doctors of the Hospital Authority. What percentage of HA's total expenditure on staff remuneration does the remuneration for different ranks of medical officers account for ?

Asked by : Hon YEUNG Yiu-chung

Reply :

A breakdown of the number of medical staff by rank, with projected remuneration (comprising personal emoluments (PE) and staff on-costs) for the rank concerned and their corresponding share of the total projected PE and on-costs expenditure of the Hospital Authority in 1999-2000 are set out below

-

**Staff Strength
as at 1 March 2000**

Medical	
Consultant	496
Senior Medical Officer	873
Medical Officer	2 295
Others (e.g. Dental Officer)	4
Intern	314
Total Medical Staff	<hr/> 3 982
	=====

<u>Rank</u>	<u>Projected Expenditure in 1999-2000 (\$M)</u>	<u>As Percentage of 1999- 2000 Total Projected PE & On-costs*</u>
Consultant		
Emoluments	757	
	598	
	<u>1,355</u>	5.9%
	=====	
Senior Medical Officer		
Personal Emoluments	920	
On-costs	728	
	<u>1,648</u>	7.2%
	=====	
Medical Officer		
Personal Emoluments	1,766	
On-costs	929	
	<u>2,695</u>	11.7%
	=====	
Others (e.g. Dental Officer)		
Personal Emoluments	3	
On-costs	2	
	<u>5</u>	0.02%
	=====	
Intern		
Emoluments	82	0.4%
Total		
Personal Emoluments	3,528	
On-costs	2,257	
	<u>5,785</u>	25.2%
	=====	

*The latest revised estimate of PE plus staff on-costs for 1999-2000 is \$22,967 million.

Signature _____

Name in block letters Dr E K YEOH

Post Title Secretary for Health and Welfare

Date 17 March 2000

Bureau Serial No.
HWB-155
Question Serial No.
1183

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head : 177 Subhead (No. & title) : 514 Hospital Authority

Programme : Health

Controlling Officer : Secretary for Health and Welfare

Bureau Secretary : Secretary for Health and Welfare

Question :

How much will be saved as a result of the suspension of the nursing schools under HA? How will the savings be used?

Asked by : Hon YEUNG Yiu-chung

Reply : The low turnover rates of qualified nurses and the high planned intake of qualified nurses is anticipated to result in a planned net increase of 737 additional qualified nurses. The need for intake of trainee nurses will be correspondingly reduced and consequently, suspension of intake of nurse trainees. This change in staff-mix will not generate any savings and will instead result in a net additional cost of \$170 million.

Signature _____

Name in block letters Dr E K YEOH

Post Title Secretary for Health and Welfare

Date 18 March 2000

Bureau Serial No.
HWB-156
Question Serial No.
1205

Examination of draft Estimates of Expenditure 2000-2001

**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY QUESTION**

Head : 177 Subhead (No. & title) : 514 Hospital Authority

Programme : Health

Controlling Officer : Secretary for Health and Welfare

Policy Secretary : Secretary for Health and Welfare

Question :

What are the financial provisions for handling sewage, clinical wastes, chemical wastes, and other types of wastes respectively in 1999-2000, and the corresponding estimates for 2000-01?

Asked by : Dr Hon LEONG Che-hung, JP

Reply : The Hospital Authority's financial provisions for handling sewage, clinical wastes and chemical wastes in 1999-2000 are \$10.4M, \$4.5M, and \$0.1M respectively, and the estimated expenditure on these items in 2000-2001 is \$10.4M, \$4.4M, and \$0.2M respectively.

Signature	_____
Name in block letters	Dr E K YEOH
Post Title	Secretary for Health and Welfare
Date	17 March 2000

Bureau Serial No.

HWB-157

Question Serial No.

1206

Examination of draft Estimates of Expenditure 2000-01
CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION

Head 177 Subhead (No. & title) : 514 Hospital Authority

Programme : Health

Controlling Officer : Secretary for Health and Welfare

Bureau Secretary : Secretary for Health and Welfare

Question :

Please provide breakdown of the financial provision for each major specialties in 1998-99, 1999-2000, as well as the estimates for 2000-01.

Asked by : Dr Hon LEONG Che-hung, JP

Reply :

The Hospital Authority (HA) allocates resources to individual medical institutions based mainly on historical provisions with adjustments on the basis of clinical specialty benchmarks and taking into account factors such as individual hospital's new initiatives and the changing community needs. In 1998-99, the actual expenditure incurred in the 12 major acute hospitals totalled \$18,409.1 million, and the approximate percentage split for each major clinical specialty is as follows -

Medical (including Geriatrics)	29%
Surgery (including Neurosurgery)	23%
Obstetrics & Gynaecology	11%
Orthopaedics & Traumatology	11%
Paediatrics	11%
Intensive Care Unit	6%
Radiotherapy & Oncology	4%
Others (including ear, nose & throat, ophthalmology, psychiatry and dental)	5%
	<hr/>
100%	<hr/> <hr/>

The projected total expenditure of the 12 major acute hospitals in 1999-2000 is \$18,741.4 million. The cost analysis of the clinical specialties for 1999-2000 has yet to be completed. However, HA does not anticipate any major deviation in the distribution of costs of the clinical specialties for 1999-2000 compared with 1998-99.

In 2000-01, the budget for the 12 major acute hospitals is \$18,788 million. Taking into account the changing community health needs due to the declining birth rate, HA has proceeded with the rationalisation in obstetrics and gynaecology services. As a result, there will be adjustment in the resource provision for obstetrics and gynaecology.

Signature _____

Name in block letters Dr E K YEOH

Post Title Secretary for Health and Welfare

Date 21 March 2000

Bureau Serial No.

HWB-158

Question Serial No.

1207

Examination of draft Estimates of Expenditure 2000-01
CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION

Head 177 Subhead (No. & title) : 514 Hospital Authority

Programme : Health

Controlling Officer : Secretary for Health and Welfare

Bureau Secretary : Secretary for Health and Welfare

Question :

- (a) Please provide funding breakdown for new initiatives in 2000-01 which are financed by “new money” and not through “productivity gains”.
- (b) Please provide funding breakdown for each of the initiatives on new or service improvements in 2000-01 that are financed through productivity gains.

Asked by : Dr Hon LEONG Che-hung, JP

Reply :

- (a)&(b) In 2000-01, an additional recurrent provision of \$626.8M will be allocated to the Hospital Authority (HA). HA has also committed to achieve productivity savings amounting to \$281M, being 1% of its total recurrent expenditure in 2000-01. In delivering new initiatives and commitments, the HA does not differentiate the source of funding, ie whether funded by new monies or through productivity. New initiatives funded by new monies and productivity gains are set out below :

New Initiatives	\$M
Opening of 460 new hospital beds	387.9
Relocation of Polyclinic at Tuen Mun Hospital	0.6

Enhanced maintenance for HA hospitals	39.2
Strengthening the community care services for the elderly	22.4
Shortening the average waiting time for first appointment at all specialist clinics to 5 weeks	37.0
Others : - Shortening the average queuing time for consultation at specialist clinics to less than 60 minutes - Shortening the average waiting time for elective surgery in General Surgery, Orthopaedics and Obstetrics and Gynaecology to less than 4 months - Conducting training programmes for doctors to enhance the provision of quality patient care - Subsidising 200 registered nurses to attend degree conversion courses to enhance quality patient care	3

Other projects funded by new monies and productivity gains include :

Projects	\$M
Full year provision for 853 new beds commissioned in 1999-2000	392.5
Full year provision for new facilities commissioned in 1999-2000	20.1

Signature _____

Name in block letters Dr E K YEOH

Post Title Secretary for Health and Welfare

Date 21 March 2000

Bureau Serial No.

HWB-159

Question Serial No.

1208

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 177 Subhead (No. & title) : 514 Hospital Authority

Programme : Health

Controlling Officer : Secretary for Health and Welfare

Bureau Secretary : Secretary for Health and Welfare

Question :

What measures would be taken to reduce the average waiting time for first appointment at all specialist clinics to 5 weeks? Will additional financial and manpower provisions be provided?

Asked by : Dr Hon LEONG Che-hung, JP

Reply : The Hospital Authority (HA) aims to achieve the target average waiting time of five weeks for first appointment at all specialist outpatient clinics in 2000-01 through deployment of additional resources and manpower for the provision of specialist outpatient services which will be funded by new monies amounting to \$388M for the provision of new hospital beds and facilities in the current budget, and introduction of various improvement measures to streamline and expedite treatment process and increase the throughput at the specialist outpatient clinics. The improvement measures include –

- (a) arranging doctors undergoing family medicine training in Family Medicine-based integrated clinics to provide treatment for patients who are in stabilised conditions and referred from the specialist outpatient clinics;
- (b) according priority treatment to patients in need of urgent treatment;
- (c) co-ordinating the booking of appointments and redirecting patients from busy clinics to less busy ones; and
- (d) enhancing cooperation with private general practitioners through the use of standardized clinical protocols, enabling patients referred by them to HA's specialist outpatient clinics to receive treatment from doctors immediately, without having to undergo duplicate examinations or tests.

Signature _____

Name in block letters Dr E K YEOH

Post Title Secretary for Health and Welfare

Date 16 March 2000

Bureau Serial No.
HWB-160
Question Serial No.
1209

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 177 Subhead (No. & title) : 514 Hospital Authority

Programme : Health

Controlling Officer : Secretary for Health and Welfare

Bureau Secretary : Secretary for Health and Welfare

Question :

Please specify what are the “additional provision for community care services for the elderly” in terms of manpower, financial provision, and clients to be benefited in 2000-01.

Asked by : Dr Hon LEONG Che-hung, JP

Reply : An additional provision of \$22M has been allocated to the Hospital Authority (HA) for enhancing community care services for the elderly clients in private residential care homes and discharged mentally ill patients, particularly those living alone.

The HA will recruit 17 Family Medicine Trainees, 9 Community Nurses and 9 Psychiatric Community Nurses in 2000-01, strengthening the manpower of the existing Community Geriatric Assessment Teams and Psychogeriatric Teams. The number of regular visits and attendances to the elderly in private residential care homes and the community will be increased.

Signature

Name in block letters

Dr E K YEOH

Post Title

Secretary for Health and Welfare

Date

18 March 2000

Bureau Serial No.

HWB-161

Question Serial No.

1210

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 177 Subhead (No. & title) : 514 Hospital Authority

Programme : Health

Controlling Officer : Secretary for Health and Welfare

Bureau Secretary : Secretary for Health and Welfare

Question :

Please provide details of the number of teams, financial and manpower provisions, and clients served by Community Geriatric Assessment Teams and Psycho-geriatric Teams in 1999-2000 respectively; as well as the corresponding projections for 2000-01. Has there been any overlap of works between the Community Geriatric Assessment Teams under the Hospital Authority and the Visiting Health Teams under the Department of Health? Has there been, or would there be, any measures to enhance co-ordination and hence cost-efficiency?

Asked by : Dr Hon LEONG Che-hung, JP

Reply : The Hospital Authority (HA) currently operates 10 Community Geriatric Assessment Teams (CGATs) and 9 Psychogeriatric Teams (PGT) which, together, provided 78 000 patient attendances and 41 000 home visits in 1999-2000. A standard CGAT comprises 1 doctor, 1 nurse and 4 supporting professionals. For the PGT, a standard team comprises 7 doctors, 6 nurses and 2 supporting professionals. The financial provision for the 19 teams in 1999-2000 totalled \$162M.

An additional provision of \$22M has been allocated to the HA for enhancing community care services for the elderly clients in 2000-01. The HA will recruit 17 doctors, 9 community nurses and 9 community

psychiatric nurses to strengthen the manpower of the existing CGATs and PGTs. In 2000-01, CGATs and PGTs will, together, provide an additional 20 000 patient attendances and 4 320 home visits.

There is no overlap in the functions between HA's CGATs and the Visiting Health Teams (VHTs) under the Department of Health (DH). CGATs offer medical assessment and direct specialist consultation and treatment to frail elderly people living in residential care homes through their regular visits. On the other hand, the service of VHTs is targetted at the elderly population in general. Apart from organising health promotion and health education programmes for the elderly and their carers through outreach programmes, VHTs also provide influenza vaccination to elderly people living in residential care homes. There has been co-ordination between DH and HA at both the policy level and the operational level to enhance interface of the services provided by CGATs and VHTs.

Signature _____

Name in block letters Dr E K YEOH

Post Title Secretary for Health and Welfare

Date 21 March 2000

Bureau Serial No.

HWB-162

Question Serial No.

1211

Examination of draft Estimates of Expenditure 2000-01
CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION

Head 177 Subhead (No. & title) : 514 Hospital Authority

Programme : Health

Controlling Officer : Secretary for Health and Welfare

Bureau Secretary : Secretary for Health and Welfare

Question : For the Samaritan Fund, how many applications did it receive and approve in 1999-2000? Please provide breakdown of financial provision for the approved cases according to nature of service.

Asked by : Dr the Hon C H Leong

Reply : The total number of applications received and approved by the Samaritan Fund in 1999-2000 as at 20 February 2000, with a breakdown of the financial provision for the approved cases, grouped by nature of service, is as follows -

Service Items	Total No. of Applications	Approved Cases	
		No. of cases	Amount (\$M)
1. Pacemaker	187	185	3.6
2. Automatic Implantable Cardioverter Defibrillator	20	20	2.9
3. Wheelchair	255	241	1.5
4. Percutaneous Transluminal Coronary Angioplasty	693	659	15.8
5. Other Surgical Appliances	286	279	0.4
6. Orthopaedic Appliances	37	36	0.2
7. Equipment for Home Use	515	495	1.9
8. Drugs	18	13	0.3
9. Gamma Knife	40	40	4.0
10. Bone Marrow Matching & Harvest	2	2	0.2
11. Cochlear Implant	6	6	0.8
Total	2 059	1 976	31.6

Signature

Name in block letters

Dr E K Yeoh

Post Title

Secretary for Health and Welfare

Date

16 March 2000

Bureau Serial No.

HWB-163

Question Serial No.

1212

Examination of draft Estimates of Expenditure 2000-01
CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION

Head 177 Subhead (No. & title) : 514 Hospital Authority

Programme : Health

Controlling Officer : Secretary for Health and Welfare

Bureau Secretary : Secretary for Health and Welfare

Question :

How much has been allocated under the Health Services Research Fund and the Health Care & Promotion Fund respectively in 1999-2000? Please provide breakdown of the successful applications according to the nature of projects. What is the amount in each Fund now available for application? How many applications for overseas treatment of rare diseases have been received and approved? Please provide breakdown according to the types of diseases or treatments as well as the corresponding expenses required.

Asked by : Dr Hon LEONG Che-hung, JP

Reply :

Health Services Research Fund

A total of \$11.35M was allocated to 26 research projects under the Health Services Research Fund in 1999-2000. A breakdown by project nature is as follows –

<u>Nature of projects</u>	<u>No. of approved applications</u>	<u>Allocation (\$M)</u>	
Clinical care evaluation	8	4.06	
Epidemiology	5		3.71
Validation of instruments	5	1.46	
Disease prevention/early detection	3		1.05
Assessment of health care needs	3	0.77	
Knowledge, attitude & behaviour of health care service providers			1
0.28			
Clinical audit	1	0.02	
Total	26	11.35	

The Health Services Research Fund was set up in July 1993, with a Government grant of \$50M. Since its establishment, the Fund has allocated a total amount of \$60.7M (including accrued interest) to fund 170 research projects, with an uncommitted balance of about \$0.7M as at end February 2000 to cover the administrative costs for monitoring the progress of the approved projects and assessment of research results. A review will be conducted by the Health Services Research Committee to assess the effectiveness of the funding scheme. We shall consider whether further Government injection into the Fund is necessary in the light of the review results.

Health Care & Promotion Fund

The Health Care and Promotion Fund was set up in 1995 with an allocation of \$80M. Normally, only interests accrued from the principal are used.

A total of \$8.05M was allocated under the Health Care & Promotion Fund in 1999-2000 to the following projects :

<u>Nature of projects</u>	<u>No. of approved applications</u>	<u>Allocation(\$M)</u>
Promotion projects		
Health education/promotion focusing on exercise, diet or obesity	3	1.07
General health education/promotion	2	0.33
Health education/promotion focusing on specific diseases	1	0.50
Elderly health	1	0.61
Maternal & child health	1	0.10
Sub-total	8	2.61
Research projects		
Epidemiology	2	1.04
Health promotion	2	1.42
Validation of instruments	2	0.16
Health care financing	1	0.86
Knowledge, attitude & behaviour of health care service providers	1	0.82
Clinical care evaluation	1	0.08
Sub-total	9	4.38
Treatment of rare diseases		
Gaucher disease Type I (purchase of drug from overseas for local Enzyme Replacement Therapy)	1	1.06
Total	18	8.05

As at end February 2000, the amount of accrued interest available for allocation is \$1.62M.

Since the establishment of the Fund, we have received a total of 4 applications for treatment of rare diseases, and so far only 1 case has been approved as set out below:

- (a) The application for treatment of Gaucher disease Type I mentioned above was received and approved in 1997/98 with an initial funding of \$0.17M per year to be reviewed annually. \$0.47M and \$1.06M were granted in 1998-99 and 1999/2000 respectively to allow for a stepped up dosage to improve clinical outcome.
- (b) One application for treatment of reflex sympathetic dystrophy was received in 1999-2000. We are awaiting further information from the applicant about the proposed treatment plan and cost estimate.
- (c) One application for Tetralogy of Fallot correction with valvuloplasty received in 1997/98 was rejected because the treatment was available in Hong Kong. The operation was later on successfully carried out in Hong Kong.
- (d) One application for hormonal assays for diagnosis received in 1996/97 was rejected because no treatment was involved.

Signature _____

Name in block letters Dr E K YEOH

Post Title Secretary for Health and Welfare

Date 18 March 2000

Bureau Serial No.

HWB-164

Question Serial No.

1213

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 177 Subhead (No. & title) : 514 Hospital Authority

Programme : Health

Controlling Officer : Secretary for Health and Welfare

Bureau Secretary : Secretary for Health and Welfare

Question :

What is the annual financial provision for purchasing drugs in 1999-2000, as well as the corresponding projection for 2000-01? Amongst these, how much is for psychiatric patients?

Asked by : Dr the Hon Leong Che-hung, JP

Reply : The projected drug expenditure of the Hospital Authority for 1999-2000 is \$1,500M, while the estimated drug expenditure for 2000-01 is \$1,575M.

The estimated drug expenditure for the treatment of psychiatric patients in 1999-2000 is \$63M and that for 2000-01 is \$69M.

Signature _____

Name in block letters Dr E K YEOH

Post Title Secretary for Health and Welfare

Date 16 March 2000

Bureau Serial No.

HWB-165

Question Serial No.

1214

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 177 Subhead (No. & title) : 514 Hospital Authority

Programme : Health

Controlling Officer : Secretary for Health and Welfare

Bureau Secretary : Secretary for Health and Welfare

Question : How many medical social workers are now serving Hospital Authority institutions? Amongst these, how many are employed directly by the HA and the Social Welfare Department respectively? Please provide caseload or other indicators of the performance of the workers employed by the HA.

Asked by : Dr Hon LEONG Che-hung, JP

Reply : As at 31 December 1999, there were 501 medical social workers serving the Hospital Authority (HA) institutions, of which 146 and 355 were employed by the HA and the Social Welfare Department (SWD) respectively. In 1999, the average number of patient attendance per medical social worker in hospitals solely staffed by social workers employed by HA was 1 960.

Signature _____

Name in block letters Dr E K YEOH

Post Title Secretary for Health and Welfare

Date 20 March 2000

Bureau Serial No.

HWB-166

Question Serial No.

1215

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 177 Subhead (No. & title) : 514 Hospital Authority

Programme : Health

Controlling Officer : Secretary for Health and Welfare

Bureau Secretary : Secretary for Health and Welfare

Question :

Amongst the family medicine trainees in 1998-99, 1999-2000 and 2000-01, how many are on contract terms and permanent terms respectively? So far, how many have their initial two-year contracts expired; amongst these how many can secure renewed contracts?

Asked by : Dr Hon LEONG Che-hung, JP

Reply : All family medicine trainees in the Hospital Authority (HA) are employed on contract terms since the commencement of the family medicine training programme in 1997-98. The cumulative number of family medicine trainees employed on contract terms in 1998-1999, 1999-2000 and 2000-2001 are 51, 121 and 256 (projected) respectively. Thirty of them have completed their initial two-year contracts, with 29 having their contracts renewed for another 2 years (i.e. up to 2000-2001 and 2001-2002 as appropriate). The remaining one did not seek further employment with the HA.

Signature _____

Name in block letters Dr E K YEOH

Post Title Secretary for Health and Welfare

Date 21 March 2000

Bureau Serial No.

HWB-167

Question Serial No.

1272

Examination of draft Estimates of Expenditure 2000-01

**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 177 Subhead (No. & title) : 514 Hospital Authority

Programme : Health

Controlling Officer : Secretary for Health and Welfare

Bureau Secretary : Secretary for Health and Welfare

Question :

Please list the types of the 460 new hospital beds to be opened, the hospitals in which these beds are to be opened, the dates of availability and the provision required.

Asked by : Hon Michael Ho Mun-ka

Reply : A breakdown of the 460 new beds to be opened in 2000-01 by type and hospital, together with information on the commissioning dates and provision required, are set out below –

Hospital	No. of beds				Commissioning Date	Provision Required (\$M)
	Acute General	Intensive Care	Infirmatory	Mentally Ill		
Kowloon Hospital			68		July 2000	20
Tseung Kwan O Hospital	354				July 2000	353
		4			July 2000	9
Tai Po Hospital				34	October 2000	6
Sub-total	354	4	68	34		
Total	460					388

Signature _____

Name in block letters Dr E K YEOH

Post Title Secretary for Health & Welfare

Date 15 March 2000

Bureau Serial No.

HWB-168

Question Serial No.

1273

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 177 Subhead (No. & title) : 514 Hospital Authority

Programme : Health

Controlling Officer : Secretary for Health and Welfare

Bureau Secretary : Secretary for Health and Welfare

Question :

In relation to reducing the average waiting time for first appointment at all specialist clinics:

- (a) If the target is to reduce it to 5 weeks in the next financial year, what is the additional provision and manpower required?
- (b) What is the percentage of specialties that can achieve the target of 9 weeks (estimate) this year? Which specialties fail to achieve the target and how long is the waiting time for these clinics? Will additional resources be provided for the specialties that fail to achieve the target and what is the provision required?

Asked by : Hon Michael HO Mun-ka

Reply :

- (a) The Hospital Authority (HA) will deploy additional resources and manpower to be funded by new monies amounting to \$388M for the provision of new hospital beds and facilities in the 2000-01 budget to shorten the average waiting time for first appointment at all specialist outpatient clinics to 5 weeks. The HA will also implement various improvement measures to streamline and expedite treatment process in order to shorten the waiting time. These measures include arranging doctors undergoing family medicine training in family medicine-based integrated clinics to provide treatment for patients who are in stabilised conditions and referred

from the specialist outpatient clinics; according priority treatment to patients in need of urgent treatment; co-ordinating the booking of appointments and redirecting patients from busy clinics to less busy ones; and enhancing cooperation with private general practitioners through the use of standardised clinical protocols, enabling patients referred by them to HA's specialist outpatient clinics to receive treatment from doctors immediately, without having to undergo duplicate examinations or tests.

- (b) As at January 2000, all specialties in HA's specialist outpatient clinics can achieve the average target waiting time of 9 weeks. The average waiting time for HA's specialist outpatient clinics as a whole is 6.1 weeks, and that for the respective specialties ranges from 0.3 week to 8.6 weeks.

Signature _____

Name in block letters Dr E K YEOH

Post Title Secretary for Health and Welfare

Date 20 March 2000

Bureau Serial No.

HWB-169

Question Serial No.

1331

Examination of draft Estimates of Expenditure 2000-01
CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION

Head 177 Subhead (No. & title) : 514 Hospital Authority

Programme : Health

Controlling Officer : Secretary for Health and Welfare

Bureau Secretary : Secretary for Health and Welfare

Question :

460 new hospital beds will be opened by the Authority next year. What types of beds will these be and what is the rationale for such an allocation? From where do the resources for opening these hospital beds come from?

Asked by : Hon TANG Siu-tong

Reply : A breakdown of the 460 new beds by type and hospital is as follows :

Bed Type	Infirmary	Mentally Ill	Acute General	Intensive Care	Total
Hospital					
Kowloon Hospital	68				68
Tai Po Hospital		34			34
Tseung Kwan O Hospital			354	4	358
Total :	68	34	354	4	460

To ensure that hospital services provided can meet the health care needs of the community, the Hospital Authority conducts annual review of its medical service development plan, taking into account, among others, the changing demographic trend, the movement of population and the distribution of different bed types in the territory. The allocation is made having regard to the review results and in the context of the facilities that will be available for commissioning and the resources available.

The provision for the opening of new beds in 2000-01 amounting to \$388 million will be funded by new resources allocated by Government.

Signature _____

Name in block letters Dr E K YEOH

Post Title Secretary for Health and Welfare

Date 16 March 2000

Bureau Serial No.

HWB-170

Question Serial No.

1332

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 177 Subhead (No. & title) : 514 Hospital Authority

Programme : Health

Controlling Officer : Secretary for Health and Welfare

Bureau Secretary : Secretary for Health and Welfare

Question :

How many family medicine physicians does the Authority plan to train next year and what is the expenses incurred? For every additional family medicine physician trained, how many “unnecessary referrals to specialist services” are expected to be reduced and/or what other benefits will it bring?

Asked by : Dr Hon TANG Siu-tong, JP

Reply : The Hospital Authority (HA) plans to recruit in 2000-01 135 additional registered doctors to undergo family medicine training. The estimated annual staff cost (including salary and staff oncost) of the total 256 family medicine trainees being trained by the HA in 2000-01 is about \$183 million (this amount has not taken into account the adjustments of pay for new recruits as the arrangement has yet to be finalised).

At present, doctors undergoing family medicine training at the family medicine-based integrated clinics provide treatment to about 1 200 patients in stabilised conditions referred from the specialist outpatient clinics (SOPC) every month. Patient consultation with a family medical physician rather than with several specialists from different sub-specialties can reduce the number of attendances on specialist services, thereby improvement

productivity. The HA will introduce a new programme in July 2000, requiring all hospital-based family medicine trainees to provide one session of outpatient consultation service per week at the integrated clinics. The target of the new programme is that the integrated clinics would attend an additional 2 000 follow-up patients every month, thus reducing the load of SOPC follow-up patients. With the enhanced family medicine practice, HA has set a target for SOPC to attend to an additional 700 new patients a month, which would in turn shorten the waiting list for first appointment for SOPC. In the first 10 months of 1999-2000, the average monthly new SOPC attendance is about 54 000.

Signature _____

Name in block letters Dr E K YEOH

Post Title Secretary for Health and Welfare

Date 21 March 2000

Bureau Serial No.

HWB 171

Question Serial No.

1163

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 37 Department of Health Subhead (No. & title) :

Programme : 1 Statutory Functions

Controlling Officer : Director of Health

Bureau Secretary : Secretary for Health & Welfare

Question :

- (a) According to the reply to the question I raised on the 1999-2000 Estimates, in the year 1999-2000, new resources (namely 22 newly created posts and a provision of 8.31 million) have been allocated to enhance the monitoring and safeguarding of food safety. However, in 2000, food safety surveillance work that fall under Programme (1) previously is transferred to the Food and Environmental Hygiene Department. How are these original resources for food safety surveillance and the additional resources for the year 1999-2000 dealt with by the Department?
- (b) With the food safety surveillance work originally under Programme (1) transferred to the Food and Environmental Hygiene Department, the amount of work under Programme (1) should reduce. In view of the fact that there are no new services or new commitments, what sufficient justifications does the Administration have to increase the expenditure by 9.1% ? Please explain in details.

Asked by : Dr Hon TANG Siu-tong, JP

Reply :

- (a) The provision for both existing and new services related to food safety previously attributable to the activities of the former Hygiene Division of this Department has been transferred to the new Food and Environmental Hygiene Department with effect from 1.1.2000.
- (b) The increase of 9.1% (\$15.5 million) in the 2000-01 estimate over its 1999-2000 revised estimate under Programme 1 is mainly attributable to increase in capital expenditure for the conditioning of radioactive waste and additional provision for the regulation of Chinese medicine.

Signature

Name in block letters Dr Margaret CHAN

Post Title Director of Health

Date 17 March 2000

Bureau Serial No.

HWB 172

Question Serial No.

1164

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 37 Department of Health Subhead (No. & title) :

Programme : 2 Disease Prevention

Controlling Officer : Director of Health

Bureau Secretary : Secretary for Health & Welfare

Question : Concerning the work "preventing food-borne and vector-borne diseases", should the work concerning food be undertaken by the Food and Environmental Hygiene Department ? If yes, why is the work listed under Programme (2) ? If no, what are the reasons ?

Asked by : Dr Hon TANG Siu-tong, JP

Reply :

The Department of Health (DH) and the Food and Environmental Hygiene Department (FEHD) complement each other in the prevention of food-borne and vector-borne diseases. Focusing on human health, the DH operates an effective and efficient surveillance network on infectious diseases. Health education is delivered to the community to promote personal, food and environmental hygiene. DH also co-ordinates other departments and institutions to enable prompt identification and investigation of outbreaks and rapid response to contain the spread of infection through appropriate control measures.

The FEHD is responsible for ensuring that food is fit for human consumption and maintaining a clean and hygienic living environment. With the focus on hygienic and safe food practices, the FEHD safeguards public health through regulation of food premises and testing and control of live food animals.

Signature

Name in block letters Dr Margaret CHAN

Post Title Director of Health

Date 17 March 2000

Bureau Serial No.

HWB 173

Question Serial No.

1165

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 37 Department of Health Subhead (No. & title) :

Programme : 2 Disease Prevention

Controlling Officer : Director of Health

Bureau Secretary : Secretary for Health and Welfare

Question : According to the reply to the question I raised for the 1999-2000 Estimates, in the current financial year, the Department obtained 62 additional staff and a provision of \$20,450,000 to

- i) increase the capacity in disease surveillance;
- ii) enhance the work capacity for all public health laboratories; and
- iii) shorten the time required for various microbiological laboratory tests.

What is the actual attainments for the past year and why are performance measures targets/indicators not set for such work ?

Asked by : Dr Hon TANG Siu-tong, JP

Reply :

In 1999-2000, the Department of Health has enhanced its surveillance of communicable diseases by expanding the sentinel surveillance programme, strengthening the networking with overseas and Mainland health authorities and enhancing the public health laboratory service. A new laboratory surveillance programme for antibiotic resistance was introduced and the work capacity of public health laboratories was expanded. The number of microbiological tests performed has increased from 1 499 740 in 1998 to 1 588 670 in 1999.

Additional performance targets and indicators would be devised upon full implementation of improvement measures.

Signature

Name in block letters Dr Margaret CHAN

Post Title Director of Health

Date 17 March 2000

Bureau Serial No.

HWB 174

Question Serial No.

1279

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 37 Department of Health Subhead (No. & title) :

Programme :

Controlling Officer : Director of Health

Bureau Secretary : Secretary for Health & Welfare

Question : Please provide a breakdown of the net deletion 186 non-directorate posts in 2000-01 by programme area and rank and the reasons for such deletion.

Asked by : Hon LAW Chi-kwong, JP

Reply :

In 2000-01, there will be a net deletion of 142 posts under the Enhanced Productivity Programme, 16 posts consequential to the implementation of the first phase of the Laboratory Information System and 58 posts in favour of employment of non-civil service contract staff on a short term basis to provide flexibility and efficiency in service delivery. With 30 posts created for time-limited projects, the net deletion will be 186 posts. A breakdown of these posts by programme area and rank is at Annex.

Signature

Name in block letters Dr Margaret CHAN

Post Title Director of Health

Date 17 March 2000

Breakdown of posts by programme area and rank

<u>Programme</u>	<u>Rank</u>	<u>Number of posts created</u>	<u>Number of posts deleted</u>	<u>Net</u>
1	Assistant Clerical Officer	14	-	14
	Calligraphist	1	-	1
	Chinese Language Officer II	1	-	1
	Clerical Assistant	7	-	7
	Dispenser	-	(1)	(1)
	Personal Secretary II	4	-	4
	Registered Nurse	-	(1)	(1)
	Workman II	2	(2)	0
		<u>29</u>	<u>(4)</u>	<u>25</u>
2	Assistant Clerical Officer	-	(1)	(1)
	Clinical Psychologist	-	(3)	(3)
	Dietitian	-	(3)	(3)
	Dispenser	-	(9)	(9)
	Enrolled Nurse	-	(11)	(11)
	Laboratory Attendant	-	(1)	(1)
	Medical and Health Officer	-	(10)	(10)
	Medical Laboratory Technician II	-	(3)	(3)
	Midwife	-	(9)	(9)
	Nursing Officer	-	(2)	(2)
	Occupational Therapist I	-	(3)	(3)
	Office Assistant	-	(1)	(1)
	Pharmacist	-	(2)	(2)
	Physiotherapist I	-	(3)	(3)
	Registered Nurse	-	(33)	(33)
	Scientific Officer (Medical)	-	(1)	(1)
	Senior Medical and Health Officer	-	(2)	(2)
	Ward Attendant	-	(22)	(22)
	Workman II	-	(11)	(11)
			<u>0</u>	<u>(130)</u>
3	Assistant Clerical Officer	-	(5)	(5)
	Clerical Assistant	-	(2)	(2)
	Clerical Officer	2	-	2
	Executive Officer I	3	-	3
	Hospital Administrator I	-	(2)	(2)
	Hospital Administrator II	-	(2)	(2)
	Nursing Officer	-	(2)	(2)
	Office Assistant	-	(5)	(5)
	Senior Nursing Officer	-	(1)	(1)
	Typist	-	(2)	(2)
	Workman II	-	(4)	(4)

<u>Programme</u>	<u>Rank</u>	<u>Number of posts created</u>	<u>Number of posts deleted</u>	<u>Net</u>
		<u>5</u>	<u>(25)</u>	<u>(20)</u>
4	Assistant Clerical Officer	-	(1)	(1)
	Chinese Language Officer II	1	-	1
	Dispenser	-	(13)	(13)
	Inoculator	-	(8)	(8)
	Laboratory Attendant	-	(2)	(2)
	Medical and Health Officer	-	(5)	(5)
	Medical Laboratory Technician II	-	(4)	(4)
	Pharmacist	-	(2)	(2)
	Property Attendant	-	(2)	(2)
	Workman II	-	(11)	(11)
		<u>1</u>	<u>(48)</u>	<u>(47)</u>
8	Dental Technician II	-	(5)	(5)
	Dispenser	-	(3)	(3)
	Medical and Health Officer	-	(1)	(1)
	Medical Laboratory Technician II	-	(1)	(1)
	Pharmacist	-	(1)	(1)
	Property Attendant	-	(1)	(1)
	Workman II	-	(2)	(2)
		<u>0</u>	<u>(14)</u>	<u>(14)</u>
		<u>35</u>	<u>(221)</u>	<u>(186)</u>

Bureau Serial No.

HWB 175

Question Serial No.

1280

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 37 Department of Health Subhead (No. & title) :

Programme : 2 Disease Prevention

Controlling Officer : Director of Health

Bureau Secretary : Secretary for Health & Welfare

Question : The estimated number of school children participating in the Student Health Service in 2000 is the same as that in 1999. Has the department considered that new arrival children from the Mainland may lead to the increase of participants when planning the services? What is the participation rate for the Student Health Service in 1999 and 2000 planned respectively? What is the cost for providing Student Health Service to each student?

Asked by : Hon LAW Chi-kwong, JP

Reply :

The participation rate of school children in the Student Health Service in the school year 1999–2000 is 76%. The participation rate in 2000–01 is expected to remain at a similar level, notwithstanding the increase in the number of new arrival children. The unit cost of providing the service in 1999–2000 is \$278.

Signature

Name in block letters Dr Margaret CHAN

Post Title Director of Health

Date 17 March 2000

Bureau Serial No.

HWB 176

Question Serial No.

1281

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 37 Department of Health Subhead (No. & title) :

Programme : 2 Disease Prevention

Controlling Officer : Director of Health

Bureau Secretary : Secretary for Health & Welfare

Question : The estimated number of attendances for health assessment and medical consultation at elderly health centres in 1999 was 99 200 but the actual number was 146 000. What are the reasons for this discrepancy? What are the attendances, appointment time and waiting time for health assessment and medical consultation at each centre respectively?

Asked by : Hon LAW Chi-kwong, JP

Reply :

The increase in attendance was due to the opening of six new elderly health centres ahead of schedule. The total number of attendance for health assessment and medical consultations in 1999 were 65 000 and 81 000 respectively. The average waiting time for first appointment for a newly enrolled client of the elderly health centres was 6.5 weeks and over 90% of the clients were attended to within 30 minutes of the specified appointment time.

Signature

Name in block letters Dr Margaret CHAN

Post Title Director of Health

Date 17 March 2000

Bureau Serial No.

HWB 177

Question Serial No.

1282

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 37 Department of Health Subhead (No. & title) :

Programme : 4 Curative Care

Controlling Officer : Director of Health

Bureau Secretary : Secretary for Health & Welfare

Question : What is the provision for subventing the 2 Chinese medicine clinics operated by the Tung Wah Group of Hospitals? What is the cost of each consultation? What is the attendance for each clinic?

Asked by : Hon LAW Chi-kwong, JP

Reply :

In 2000-01 a provision of \$3,143,000 is provided for subventing the two Chinese medicine clinics operated by the Tung Wah Group of Hospitals. In 1999, the attendances at the two clinics, one in Tung Wah Hospital and another in Kwong Wah Hospital, were 75 000 and 307 000 respectively. As the Department of Health does not have detailed costing information on the operation of the two clinics, it is not possible to provide the unit cost for each consultation.

Signature

Name in block letters Dr Margaret CHAN

Post Title Director of Health

Date 17 March 2000

Bureau Serial No.

HWB 178

Question Serial No.

1314

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 37 Department of Health Subhead (No. & title) :

Programme :

Controlling Officer : Director of Health

Bureau Secretary : Secretary for Health & Welfare

Question : Please provide a breakdown of the net deletion of 186 posts in 2000-01 by rank and the reasons for such deletion.

Asked by : Hon CHAN Yuen-han

Reply :

In 2000-01, there will be a net deletion of 142 posts under the Enhanced Productivity Programme (EPP), 16 posts consequential to the implementation of the first phase of the Laboratory Information System (LIS) and 58 posts in favour of employment of non-civil service contract staff on a short term basis to provide flexibility and efficiency in service delivery. With 30 posts created for time-limited projects, the net deletion will be 186 posts. A breakdown of these posts is at Annex.

Signature

Name in block letters Dr Margaret CHAN

Post Title Director of Health

Date 17 March 2000

Annex

Breakdown of posts by rank and reasons for creation/deletion

<u>Rank</u>	<u>Number of post created</u>	<u>Number of post deleted</u>	<u>Net</u>	<u>Remarks</u>
Assistant Clerical Officer	-	(5)	(5))
Clerical Assistant	-	(2)	(2))
Clerical Officer	2*	-	2)
Clinical Psychologist	-	(1)	(1))
Dental Technician II	-	(5)	(5))
Dietitian	-	(1)	(1))
Dispenser	-	(26)	(26))
Executive Officer I	3*	-	3)
Hospital Administrator I	-	(2)	(2))
Hospital Administrator II	-	(2)	(2))
Inoculator	-	(8)	(8))
Medical and Health Officer	-	(7)	(7)) Posts deleted for delivery
Midwife	-	(9)	(9)) of EPP savings
Nursing Officer	-	(4)	(4))
Occupational Therapist I	-	(1)	(1))
Office Assistant	-	(5)	(5))
Physiotherapist I	-	(1)	(1))
Property Attendant	-	(3)	(3))
Registered Nurse	-	(10)	(10))
Senior Medical and Health Officer	-	(2)	(2))
Senior Nursing Officer	-	(1)	(1))
Typist	-	(2)	(2))
Ward Attendant	-	(22)	(22))
Workman II	-	(28)	(28))
	5	(147)	(142)	
Assistant Clerical Officer	-	(2)	(2))
Medical Laboratory Technician II	-	(8)	(8)) Posts deleted for delivery
Office Assistant	-	(1)	(1)) of manpower savings
Laboratory Attendant	-	(3)	(3)) consequential to
Workman II	-	(2)	(2)) implementation of the
	0	(16)	(16)) first phase of the LIS

* posts to be created arising from regrading of posts

<u>Rank</u>	<u>Number of post created</u>	<u>Number of post deleted</u>	<u>Remarks</u>
Clinical Psychologist	-	(2)	(2))
Dietitian	-	(2)	(2))
Enrolled Nurse	-	(11)	(11))
Medical and Health Officer	-	(9)	(9))
Occupational Therapist I	-	(2)	(2))
Pharmacist	-	(5)	(5))
Physiotherapist I	-	(2)	(2))
Registered Nurse	-	(24)	(24))
Scientific Officer (Medical)	-	(1)	(1))
	0	(58)	(58)
Assistant Clerical Officer	14	-	14)
Calligraphist	1	-	1)
Chinese Language Officer II	2	-	2)
Clerical Assistant	7	-	7)
Personal Secretary II	4	-	4)
Workman II	2	-	2)
	30	0	30
	35	(221)	186

Bureau Serial No.

HWB 179

Question Serial No.

1325

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 37 Department of Health Subhead (No. & title) :

Programme : 1 Statutory Functions

Controlling Officer : Director of Health

Bureau Secretary : Secretary for Health & Welfare

Question : How will the department support the work of the Chinese Medicine Council? What are the manpower and other resources involved?

Asked by : Hon Emily LAU Wai-hing, JP

Reply :

The Department of Health will provide professional, administrative and secretarial support to the Chinese Medicine Council of Hong Kong. A total of 67 posts involving an annual cost of \$26m is provided to assist in the registration of Chinese medicine practitioners and Chinese medicines, and to regulate the use, trading and manufacture of Chinese medicines.

Signature

Name in block letters Dr Margaret CHAN

Post Title Director of Health

Date 17 March 2000

Bureau Serial No.

HWB 180

Question Serial No.

1346

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 37 Department of Health Subhead (No. & title) :

Programme : 3 Health Promotion

Controlling Officer : Director of Health

Bureau Secretary : Secretary for Health & Welfare

Question : The Hong Kong St. John Ambulance receives a subvention of over \$10 million every year. What kind of mechanism does the government have to monitor the proper use of these financial provisions?

Asked by : Hon Fred LI Wah-ming, JP

Reply :

The following mechanisms are in place to monitor the proper use of the subvention to the Hong Kong St. John Ambulance:

- (a) regular submissions to the Department of Health account statements of expenditure, progress reports on capital expenditure, and reports on establishment, strength and vacancy;
- (b) annual inspection by the Department of Health;
- (c) submission of annual report on service indicators;
- (d) compliance with Government subvention guidelines on personnel and financial management.

Signature

Name in block letters Dr Margaret CHAN

Post Title Director of Health

Date 17 March 2000

Bureau Serial No.

HWB 193

Question Serial No.

0658

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 48 Subhead (No. & title) :007 Job-related allowances

Programme : (1) Statutory Testing, (2) Advisory and Investigative Services,
and (3) Forensic Science Service

Controlling Officer : Government Chemist

Bureau Secretary : Secretary for Health and Welfare

Question :

The expenditure under Subhead 007 Job-related allowances sees an increase of 43.6% over the estimate for this year. Please tell us why the on-call duty allowances are estimated to increase, who the recipients of these allowances are and the number of such recipients.

Asked by : Hon Michael HO Mun-ka

Reply :

The increase in 2000-01 is mainly due to full year effect of payment of on-call duty allowances to 13 staff of the Science Laboratory Technician grade for carrying out emergency duties related to the Daya Bay Contingency Plan starting from January 2000. These officers will be reached through pagers outside their conditioned working hours to perform the emergency laboratory testing duties. As such, three months provision (\$17,000) was given in 1999-2000. The full year provision of such allowance for 2000-01 amounts to \$68,000.

Signature	<hr/>
Name in block letters	D. G. CLARKE
Post Title	<hr/> Ag Government Chemist
Date	<hr/> 17 March 2000

The recruitment of these new staff will be subject to the overall strategy as announced regarding the freezing of civil service recruitment.

Signature	_____
Name in block letters	<u>D. G. CLARKE</u>
Post Title	<u>Ag Government Chemist</u>
Date	<u>17 March 2000</u>

Bureau Serial No.

HWB 195

Question Serial No.

0739

Examination of draft Estimates of Expenditure 2000-2001

**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head : 703 - Buildings

Subhead : 3027MC Kowloon Bay
primary health care centre
and nursing home for the
elderly

Programme :

Controlling Officer : Director of Architectural Services

Bureau Secretary : Secretary for Health and Welfare

Question: Kowloon Bay primary health care centre and nursing home for the elderly was completed and opened for public use early last year. How will the estimated expenditure of about \$1.8m be spent under this item in 2000-01?

Asked by :Hon Fred LI Wah-ming, JP

Reply : The 2000-01 estimate of \$1.8 million is reserved for the settlement of final accounts in 2000.

Signature _____

Name in block letters S.H. PAU

Post Title Director of Architectural Services

Date 16 March 2000

Bureau Serial No.

HWB-198

Question Serial No.

1083

Examination of draft Estimates of Expenditure 2000-01
CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION

Head 149 Government Secretariat
Health and Welfare Bureau

Subhead (No. & title) :

Programme : (2) Health

Controlling Officer : Secretary for Health and Welfare

Bureau Secretary : Secretary for Health and Welfare

Question : How many new posts, as estimated, will be required for regulating the trading and manufacture of Chinese medicines and overseeing the implementation of the transitional arrangements provided for the registration of existing Chinese medicine practitioners in 2000-01?:

Asked by : Hon CHAN Yuen-han

Reply : Health and Welfare Bureau does not have any plans to create additional posts in the Bureau in 2000-01 to supervise the regulation of the trading and manufacture of Chinese medicines and the implementation of the transitional arrangements for the registration of existing Chinese medicine practitioners.

The above functions are to be performed by the Department of Health. A total of 67 posts involving an annual cost of \$26 million to assist in the registration of Chinese medicine practitioners and Chinese medicines, and to regulate the use, trading and manufacture of Chinese medicines is provided.

Signature _____

Name in block letters DR YEOH ENG KIONG

Post Title Secretary for Health and Welfare

Date 17 March 2000

Bureau Serial No.

HWB-199

Question Serial No.

1084

Examination of draft Estimates of Expenditure 2000-01

**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 149 Government Secretariat
Health and Welfare Bureau

Subhead(No. & title) :

Programme : (2) Health

Controlling Officer : Secretary for Health and Welfare

Bureau Secretary : Secretary for Health and Welfare

Question : With regard to the work on the reform options proposed by the Administration in the Review on Hong Kong's Health Care System, what is the estimated number of consultants and technical staff required and the expenses entailed? And what is the estimated expenditure on publicity?

Asked by : Hon CHAN Yuen-han

Reply : The Review on Hong Kong's Health Care System will look into reform strategies that will improve the service delivery, quality assurance and financial sustainability of our health care system. The recommended way forward will be set out in the form of a consultation document to be released shortly for public consultation.

The estimated increase in expenditure under Programme 2 is to account for, amongst others, the expenses to be incurred for the consultation process, including printing of the consultation document, promotional pamphlets and publicity posters, production of radio and TV APIs; and the organization of related discussion fora, seminars and workshops.

Another area of major expenditure will be the commissioning of

further studies. Many of the recommendations contained in the consultation document require further professional studies, researches and analyses. Funding has been earmarked for undertaking such studies, though the actual scope and subjects will have to be determined at a later stage in the light of the public consultation.

For planning purposes, we have prepared a rough breakdown of the projected expenditure as follows :

Publicity	\$2 million
Administrative Support	\$1.5 million
Research and Studies	\$4.4 million

Signature _____

Name in block letters DR YEOH ENG KIONG

Post Title Secretary for Health and Welfare

Date 17 March 2000

Bureau Serial No.

HWB-200

Question Serial No.

1136

Examination of draft Estimates of Expenditure 2000-01

**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 149 Government Secretariat
Health and Welfare Bureau

Subhead(No. & title) :

Programme : (2) Health

Controlling Officer : Secretary for Health and Welfare

Bureau Secretary : Secretary for Health and Welfare

Question : The Review on Hong Kong's Health Care System is being attributed as a major cause for the 34.3% increase in the financial provision for "Health" programme for 2000-01. Please provide details of what areas do the "additional expenses required" for the Review cover, as well as the corresponding funding for each item. Is there any additional manpower required for this purpose?

Asked by : Dr Hon LEONG Che-hung, JP

Reply : The Review on Hong Kong's Health Care System will look into reform strategies that will improve the service delivery, quality assurance and financial sustainability of our health care system. The recommended way forward will be set out in the form of a consultation document to be released shortly for public consultation.

The estimated increase in expenditure under Programme 2 is to account for, amongst others, the expenses to be incurred for the consultation process, including printing of the consultation document, promotional pamphlets and publicity posters, production of radio and TV APIs; and the organization of related discussion fora, seminars and workshops.

Another area of major expenditure will be the commissioning of further studies. Many of the recommendations contained in the consultation document require further professional studies, researches and analyses. Funding has been earmarked for undertaking such studies, though the actual scope and subjects will have to be determined at a later stage in the light of the public consultation.

For planning purposes, we have prepared a rough breakdown of the projected expenditure as follows :

Publicity	\$2 million
Administrative Support	\$1.5 million
Research and Studies	\$4.4 million

Signature _____

Name in block letters DR YEOH ENG KIONG

Post Title Secretary for Health and Welfare

Date 17 March 2000

Bureau Serial No.

HWB-201

Question Serial No.

1283

Examination of draft Estimates of Expenditure 2000-01

**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 149 Government Secretariat
Health and Welfare Bureau

Subhead(No. & title) :

Programme : (2) Health

Controlling Officer : Secretary for Health and Welfare

Bureau Secretary : Secretary for Health and Welfare

Question : Provision of \$16,118,000 under Subhead 149 General departmental expenses represents an increase of \$8,923,000 (124.0%) over the revised estimate for 1999-2000. This is mainly due to the provision for the engagement of further studies and other expenses in relation to the Review on Hong Kong's Health Care System. What is the expected date of completion of the studies and will the findings be published for public references?

Asked by : Dr Hon David LI Kwok-po, JP

Reply : Some of the recommendations set out in the forthcoming consultation document on health care sector reform will require further professional studies, researches and analyses. The actual subjects, scope and timing of these studies will be determined at a later stage in the light of the public consultation. In line with our usual practice, the findings would be made available for public information at the appropriate time.

Signature _____

Name in block letters _____

DR YEOH ENG KIONG

Post Title _____

Secretary for Health and Welfare

Date _____

17 March 2000

Bureau Serial No.

HWB 202

Question Serial No.

0530

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 37 Department of Health Subhead (No. & title) :

Programme :

Controlling Officer : Director of Health

Bureau Secretary : Secretary for Health and Welfare

Question : Provision under Subhead 106 Temporary Staff will increase by 20.6% in 2000-01. Please advise the new services to be provided and the manpower involved.

Asked by : Hon Michael HO Mun-ka

Reply :

The increase in the financial provision for Subhead 106 is transferred from personal emoluments for the employment of non-civil service contract staff on a short term basis to provide flexibility and efficiency in service delivery.

Signature

Name in block letters Dr Margaret CHAN

Post Title Director of Health

Date 18 March 2000

Bureau Serial No.

HWB 203

Question Serial No.

0531

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 37 Department of Health Subhead (No. & title) :

Programme :

Controlling Officer : Director of Health

Bureau Secretary : Secretary for Health and Welfare

Question : When will items 717, 720 and 721 be conducted or when will the results be available?

Asked by : Hon Michael HO Mun-ka

Reply :

Item 717 (Consultancy service to review and improve the Regulatory System on Drug Control) has commenced in December 1999 and will be completed before the end of 2000.

Item 720 (Feasibility study on establishing an accreditation system for hospitals and institutions registered under the Hospitals, Nursing Homes and Maternity Homes Registration Ordinance, Chapter 165) will begin in April 2000 and be completed within 12 months.

The survey day for Item 721 (Health Manpower Survey) is 1 July 2000. A total of 16 reports covering various medical and health personnel will be compiled and released in phases. The last one is expected to be released by the first quarter of 2002.

Signature

Name in block letters

Dr Margaret CHAN

Post Title

Director of Health

Date

17 March 2000

Bureau Serial No.

HWB 205

Question Serial No.

1315

Examination of draft Estimates of Expenditure 2000-01
**CONTROLLING OFFICER'S REPLY TO
WRITTEN/SUPPLEMENTARY WRITTEN QUESTION**

Head 37 Department of Health Subhead (No. & title) : 700 General
other non-recurrent

Programme :

Controlling Officer : Director of Health

Bureau Secretary : Secretary for Health & Welfare

Question : In prior years, responses to questions regarding expenditures on consultants and outside contractors have resulted in vague responses such as : “while we do not anticipate any immediate savings through contracting out services, the employment of contractors permits greater flexibility in varying the number of staff employed on the various types of services according to demand. We anticipate that this will result in savings in costs in the longer term, though it is difficult to quantify these savings.” (11 March 1999 response by the Director of Lands to question on consultants and contractors, Bureau Serial Number PEL173). This year, there has been \$500,000* included in the approved commitments and estimated 1999-2000 expenditures for various consultations by just Department of Health alone. In light of the stated difficulty in quantifying savings through contracting out services, what criteria are established to ensure that the government and taxpayers are getting value for money?

* <u>Subhead (Code)</u>	<u>Item (Code)</u>	<u>Approved commitment</u>
700	717	\$'000 500

Asked by : Hon Christine LOH

Reply :

The employment of the consultancy service is to review and improve the regulatory system on drug control and the provision of related training to pharmacists in evaluating registration applications according to international standards and practices. Value for money is ensured through proper selection of consultants. The selection criteria include the relevant experience, capability, reputation, expertise and proposed methodology. The terms and fees to be offered are also subject to negotiation.

Signature

Name in block letters Dr Margaret CHAN

Post Title Director of Health

Date 17 March 2000