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Panel on Health Services

**Background brief prepared by the Legislative Council Secretariat
for the meeting on 14 November 2011**

Health and Medical Research Fund

Purpose

This paper provides background information on the Administration's proposal to set up a new Health and Medical Research Fund ("HMRF"), and summarizes the past discussions by the Panel on Health Services ("the Panel") on the Health and Health Services Research Fund ("HHSRF") and the Research Fund for the Control of Infectious Diseases ("RFCID").

Background

2. The Financial Secretary announced in his 2011-2012 Budget Speech the proposal to set up HMRF to promote research and development in public health and medical services. The existing HHSRF and RFCID will be subsumed into HMRF. The Government will earmark \$1 billion for injection into HMRF. Apart from continuing to fund projects within the original research ambits which cover a broad range of topics such as infectious disease, chronic disease prevention and management, primary and elderly healthcare, public health issues and Chinese medicine, HMRF will also finance research projects and facilities in areas of advanced medical research where Hong Kong enjoys comparative advantages, such as paediatrics, neuroscience and clinical genetics.

3. HHSRF was established in 2003 to fund health and health services research in support of policy formulation and service development. It aimed to maximize population health, improve the quality of life, and enhance the standard and cost-effectiveness of the health system through the generation of new knowledge in areas of human health and health services. RFCID was

established after the outbreak of Severe Acute Respiratory Syndrome ("SARS") in 2003 to encourage, facilitate and support research on the prevention, treatment and control of infectious diseases, such as SARS and avian influenza ("H5N1").

4. Both HHSRF and RFCID are governed by the Research Council under the Food and Health Bureau ("FHB"). Chaired by the Secretary of Food and Health ("SFH"), the Research Council comprises representatives from public institutes, academia and the private healthcare sector. The Research Council is supported by a secretariat and two working committees, namely, the Grant Review Board and the Referee Panel. The Grant Review Board acts as the scientific advisor to the Research Council, sets guidelines and procedures for grant applications and establishes an independent system for the two-tier peer review of applications. The Referee Panel provides critical appraisal of grant applications and reports.

5. Since 2003, a total of 1 815 grant applications for individual research projects have been submitted to HHSRF and RFCID, of which 495 projects worth \$311.41 million have been supported. Additional research worth \$191.38 million has been directly commissioned to address specific research needs, fill gaps in scientific knowledge and respond to public health needs and threats identified by FHB.

Past discussions

6. The Panel held three meetings between January 2005 and December 2009 to discuss the Administration's proposals to increase the approved commitment for HHSRF; and one meeting in July 2003 to discuss the establishment of RFCID. The deliberations and concerns of members are summarized below.

Assessment criteria

7. Concern was raised on the assessment criteria adopted for granting approval to applications for HHSRF and RFCID. Members were advised that eligible research applications had to undergo a stringent two-tier peer review process, to be performed by the Referee Panel and the Grant Review Board respectively, to ensure funded projects were of appropriate scientific design and high scientific merits. The assessment was based on the scientific merits of the research projects, such as originality, significance of the research questions, quality of scientific content, credibility of design and methods and applicability to local context. Other objective assessment criteria including research ethics, justification for budget, and track record of grant applicant would also be

considered. The Grand Review Board would make funding recommendations for consideration and endorsement by the Research Council.

8. Given the stringent criteria for vetting, members expressed concern on the difficulties encountered by public hospital doctors, particularly frontline doctors, who had to hold down a full-time job to successfully obtain funding from HHSRF. Members sought information as to whether consideration could be given to allowing public doctors to cutback their clinical duties if they successfully obtained grant under HHSRF.

9. According to the Administration, public hospital doctors and medical interns had been successful in obtaining grant from HHSRF in the past. The Clinical Fellowship Scheme operated by the Research Grant Council of the University Grants Committee also enabled young clinicians to devote themselves to a period of up to three years in clinical research at the two sponsoring universities, i.e. the University of Hong Kong or the Chinese University of Hong Kong.

Ambit of HHSRF

10. Whilst expressing support for HHSRF, some members requested the Administration to consider according priority to projects targeted at screening services for mental health, chronic diseases, and infectious diseases such as hepatitis B. The Administration advised that although three thematic priorities, namely, public health, health services and Chinese medicine, had been developed by the Research Council to guide the direction of research and decisions on fund allocation, all worthy proposals would be supported even if the focus of the projects was outside the scope of the thematic priorities.

Recent developments

11. According to the Administration's replies to Members' initial written questions during the examination of Estimates of Expenditure 2011-2012, HMRF will fund health and medical research projects and research infrastructure in a more comprehensive and coordinated manner. Its vetting and funding mechanism will be modelled upon the established mechanism of existing funds with appropriate adjustment to cater for the broadened scope of HMRF, as well as appropriate increase in grant ceilings to support more new research projects. The proposed injection of \$1 billion is expected to fund research projects and infrastructure over the next five years or more.

Relevant papers

12. A list of the relevant papers on the Legislative Council website is in the **Appendix**.

Council Business Division 2
Legislative Council Secretariat
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**Relevant papers on
Health and Health Services Research Fund and
Research Fund for the Control of Infectious Diseases**

Committee	Date of meeting	Paper
Panel on Health Services	9.7.2003 (Item VII)	Agenda Minutes
Panel on Health Services	31.1.2005 (Item III)	Agenda Minutes
Panel on Health Services	1.6.2007 (Item II)	Agenda Minutes
Panel on Health Services	14.12.2009 (Item VI)	Agenda Minutes
Finance Committee	25.3.2011 (Session No.4)	Agenda Administration's replies to Members' initial written questions in examining the Estimates of Expenditure 2011-2012 (Reply serial no.: FHB(H)068, FHB(H)233)