

立法會
Legislative Council

LC Paper No. CB(2)628/18-19

(These minutes have been
seen by the Administration)

Ref : CB2/PL/HS

Panel on Health Services

**Minutes of meeting
held on Monday, 21 May 2018, at 4:30 pm
in Conference Room 3 of the Legislative Council Complex**

- Members present** : Prof Hon Joseph LEE Kok-long, SBS, JP (Chairman)
Dr Hon Pierre CHAN (Deputy Chairman)
Hon Starry LEE Wai-king, SBS, JP
Hon CHAN Kin-por, GBS, JP
Hon Paul TSE Wai-chun, JP
Hon YIU Si-wing, BBS
Hon Charles Peter MOK, JP
Hon CHAN Chi-chuen
Hon Alice MAK Mei-kuen, BBS, JP
Dr Hon KWOK Ka-ki
Dr Hon Fernando CHEUNG Chiu-hung
Dr Hon Helena WONG Pik-wan
Dr Hon Elizabeth QUAT, BBS, JP
Hon POON Siu-ping, BBS, MH
Dr Hon CHIANG Lai-wan, JP
Hon CHU Hoi-dick
Hon SHIU Ka-fai
Hon SHIU Ka-chun
- Member attending** : Hon KWOK Wai-keung, JP
- Members absent** : Hon Tommy CHEUNG Yu-yan, GBS, JP
Hon WONG Ting-kwong, GBS, JP
Hon Mrs Regina IP LAU Suk-yee, GBS, JP
Hon CHAN Han-pan, JP

Dr Hon Junius HO Kwan-yiu, JP
Hon KWONG Chun-yu

Public Officers : Items V to VI
attending

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

Miss Grace KWOK Wing-see
Principal Assistant Secretary for Food and Health (Health) 1
Food and Health Bureau

Item V

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

Dr Regina CHING Cheuk-tuen, JP
Consultant Community Medicine (Non-Communicable
Disease)
Department of Health

Item VI

Dr Bobby SHUM Shui-fung
Consultant Forensic Pathologist i/c
Department of Health

Dr Kellie SO Pui-sheung
Assistant Director of Health (Health Administration &
Planning) (Acting)
Department of Health

Mr David CHAK Wing-pong
Project Director 2
Architectural Services Department

Mr Michael LI Kiu-yin
Chief Project Manager 202
Architectural Services Department

Clerk in : Ms Maisie LAM
attendance Chief Council Secretary (2) 5

Staff in attendance : Miss Kay CHU
Senior Council Secretary (2) 5

Ms Priscilla LAU
Council Secretary (2) 5

Miss Maggie CHIU
Legislative Assistant (2) 5

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I. Information paper(s) issued since the last meeting
[LC Paper No. CB(2)1395/17-18(01)]

Members noted that a letter dated 14 May 2018 from Dr KWOK Ka-ki requesting the Panel to discuss the healthcare manpower situation in the Hospital Authority ("HA") had been issued since the last meeting. The Chairman suggested that the subject should be addressed in the context of discussing "Implementation of the recommendations of the strategic review on healthcare manpower planning and professional development" (item 29 on the Panel's list of outstanding items for discussion referred). Members raised no objection.

II. Items for discussion at the next meeting
[LC Paper Nos. CB(2)1388/17-18(01) and (02)]

2. Members agreed that the Panel would discuss the subjects "Update on Samaritan Fund and Community Care Fund Medical Assistance Programmes" and "Legislative proposal to regulate electronic cigarettes and other new tobacco products" as proposed by the Administration at the next regular meeting scheduled for 19 June 2018 at 2:30 pm.

(Post-meeting note: Arising from the discussion under agenda item IV of this meeting and on the instruction of the Chairman, an additional item of "Matter arising from the meeting on 21 May 2018" has been added to the agenda of the June regular meeting to discuss priority setting for activation of subcommittees on policy issues under the Panel.)

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III. Matter arising from the meeting on 24 April 2018

[LC Paper Nos. CB(2)1292/17-18(01), CB(2)1388/17-18(03) and CB(2)1402/17-18(01)]

Proposed study on issues relating to electronic cigarettes and heated tobacco products

3. The Chairman recapitulated that in the context of discussing "Smoking ban at bus interchanges leading to tunnels or expressways" at the meeting on 24 April 2018, Dr Helena WONG proposed commissioning the Research Office of the Legislative Council ("LegCo") Secretariat to study issues relating to electronic cigarettes ("e-cigarettes") and heated tobacco products ("HTPs") to enable members to have a better understanding in this regard. Members noted a letter dated 26 April 2018 from Dr Helena WONG on the suggested scope of the proposed study; and two submissions for the agenda item under discussion from Philip Morris Asia Limited and British-American Tobacco Company (Hong Kong) Limited respectively.

4. The Chairman remarked that having regard to the suggested scope and the complexity of issues to be covered, the Research Office suggested first preparing an information note on the regulation of e-cigarettes and HTPs in selected places, then a fact sheet on the potential health effects and risks of e-cigarettes and HTPs. The Chairman invited members to give views in this regard.

5. Members raised no objection to the proposed study and the work plan suggested by the Research Office. Mr KWOK Wai-keung urged the Administration to regulate e-cigarettes without further delay. Dr Helena WONG considered that the Administration should provide information on the results of the tests on e-cigarettes and other new tobacco products conducted by the Government Laboratory for members' reference. In this connection, the Chairman requested the Administration to provide the requisite information, if available, in its discussion paper for the agenda item "Legislative proposal to regulate electronic cigarettes and other new tobacco products" of the June regular meeting.

(Post-meeting note: The information note on "Regulation of e-cigarettes and HTPs in selected places" and the fact sheet on "Health effects of e-cigarettes and HTPs" prepared by the Research Office of the LegCo Secretariat were issued to members vide IN11/17-18 on 14 June 2018 and FS09/17-18 on 6 August 2018 respectively.)

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IV. Proposal for setting up a subcommittee under the Panel on Health Services on issues relating to the support for cancer patients

[LC Paper No. CB(2)1326/17-18(01)]

6. Members raised no objection to the proposal from Mr CHAN Han-pan and Dr CHIANG Lai-wan for setting up a subcommittee under the Panel on issues relating to the support for cancer patients as well as the terms of reference, work plan and time frame of the subcommittee set out in the proposal (LC Paper No. CB(2)1326/17-18(01)).

7. The Chairman informed members that there were currently 10 subcommittees on policy issues appointed by Panels or the House Committee in operation, which had reached the maximum number of such subcommittees that might be in operation at any one time. The subcommittee would be put on the waiting list of subcommittees on policy issues to be activated. The Chairman drew members' attention that according to the board principles adopted by the House Committee for activation, operation and extension of period of work of subcommittees on policy issues, no more than two subcommittees under each Panel should be in operation at the same time. At present, apart from the above newly appointed subcommittee, there were three subcommittees appointed under the Panel (i.e. the Joint Subcommittee on Issues Relating to the Regulation of Devices and Development of the Beauty Industry appointed under the Panel and the Panel on Commerce and Industry, the Subcommittee on Issues Relating to the Development of Chinese Medicine under the Panel and the Joint Subcommittee on Long-term Care Policy under the Panel and the Panel on Welfare Services) on the waiting list. The order of subcommittees on the waiting list, unless decided otherwise by the House Committee as provided for under rule 26(e) of the House Rules, was in the order of their appointment.

8. Dr Elizabeth QUAT expressed her wish to have an early activation of the newly appointed subcommittee in view of the growing number of cancer patients. Expressing a similar view, Dr CHIANG Lai-wan suggested that subject to the Panel's endorsement, the newly appointed subcommittee should be accorded the highest priority among the four policy subcommittees under the Panel on the waiting list for activation when a vacant slot arose. The Chairman instructed the Clerk to seek views on the suggestion from all Panel members by way of circulation of paper.

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(Post-meeting note: Members have been invited to indicate their views on priority setting for activation of the subcommittees on policy issues under the Panel vide LC Paper No. CB(2)1566/17-18

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issued on 11 June 2018. Since a consensus on the proposal has not been reached by circulation of paper, the Chairman has instructed that the matter should be considered at the June regular meeting.)

V. Strategy and action plan to prevent and control non-communicable diseases in Hong Kong

[Document entitled "Towards 2025: Strategy and Action Plan to Prevent and Control Non-Communicable Diseases in Hong Kong" and LC Paper Nos. CB(2)1388/17-18(04) to (05)]

9. At the invitation of the Chairman, Under Secretary for Food and Health ("USFH") briefed members on the latest situation of non-communicable diseases ("NCD") in Hong Kong and the introduction of the document entitled "Towards 2025: Strategy and Action Plan to Prevent and Control NCD in Hong Kong" ("the Strategy and Action Plan"), details of which were set out in the Administration's paper (LC Paper No. CB(2)1388/17-18(04)).

10. Members noted an information note entitled "Strategy and action plan to prevent and control NCD in Hong Kong" prepared by the LegCo Secretariat (LC Paper No. CB(2)1388/17-18(05)).

Effectiveness of the Strategy and Action Plan

11. Members including Dr Elizabeth QUAT, Dr Pierre CHAN, Ms Starry LEE, Dr Helena WONG and Mr YIU Si-wing expressed support for the Government's adoption of nine local health targets for prevention and control of NCD. Dr Elizabeth QUAT and Ms Starry LEE, however, cast doubt on the effectiveness of the strategies and actions set out in the Strategy and Action Plan to contribute to the overall achievement of the targets. Dr Helena WONG was particularly concerned about whether the Administration would devise quantifiable indicators to track the progress and achievement in NCD prevention and control in Hong Kong.

12. USFH responded that to effectively monitor the progress for achieving the nine local health targets by 2025 and to facilitate the implementation of the Strategy and Action Plan, the Department of Health ("DH") had devised relevant indicators for regular monitoring of the targets based on enhanced Population Health Survey and other sources which would shed light on the progress and achievements in reducing NCD morbidity and mortality. At the request of Dr Helena WONG, USFH agreed to provide details of the indicators adopted by the Administration to quantify the achievement or progress made under each target by 2025.

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Strategies and action plan for promoting healthy diet

13. Dr Elizabeth QUAT expressed concern about the rising trend of overweight and obesity among school students in recent years. Pointing out that the strategies set out in the Strategy and Action Plan for achieving the target of halting the rise of diabetes and obesity only focused on measures encouraging and promoting healthy living, she called on the Administration to make reference to the practice of other places to implement more effective measures to tackle the problem of childhood obesity, such as imposing restrictions on the sale of food products with high salt, sugar and fat contents to children and adolescents. Dr Helena WONG suggested that the Administration should regulate the levels of salt and sugar and prohibit the use of trans fat in school lunch boxes prepared by lunch suppliers.

14. Consultant Community Medicine (Non-Communicable Disease), DH ("CCM(NCD), DH") advised that the Administration had been running the EatSmart@school.hk campaign since 2006-2007 school year to cultivate healthy eating practices from an early age. On top of the campaign, DH launched the "Salt Reduction Scheme for School Lunches" from September 2017 onwards, under which students in about 450 primary schools in Hong Kong would be supplied with sodium-reduced lunches. The target was to cut down the average sodium level of primary school lunch box to not more than 500 mg in 10 years by gradually lowering the sodium level of school lunches with an average reduction of 5% to 10% per year. This apart, DH published a Handbook of Selection of Lunch Suppliers and Nutritional Guidelines on Lunch for Students encouraging schools to incorporate nutritional requirements (e.g. restricting the use of trans fat) into the tender documents for lunch suppliers. USFH assured members that efforts had been and would continuously be made by the Administration to strengthen publicity and education work to build up healthy eating habits among children and adolescents.

15. Dr Helena WONG considered that the Administration should make reference to the practice of the United Kingdom and introduce the traffic-light food labelling system (i.e. a voluntary scheme under which participating manufacturers or retailers used green, amber and red colour-coding (traffic lights) to indicate whether levels of nutrients (e.g. fat, saturated fat, sugar and salt) were low, medium or high for front-of-pack labelling) to guide consumers at a glance on the levels of fat, salt and sugar of food products. Dr Elizabeth QUAT enquired whether the Administration would consider enhancing the nutrition labelling requirements by tightening the use of nutrition claims such as "low salt" and "low sugar".

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16. USFH and CCM(NCD), DH responded that the Administration had implemented a mandatory nutrition labelling scheme for prepackaged foods since 1 July 2010 to help consumers make informed food choices. The labelling scheme required all prepackaged food to declare the values of energy and seven specified nutrients (including, among others, sodium, sugars and trans fat) on nutrition labels, unless otherwise exempted. This apart, the Administration and the Committee on Reduction of Salt and Sugar in Food had jointly launched the voluntary Salt/Sugar Label Scheme for Prepackaged Food Products in October 2017 to assist consumers to easily identify low-salt and low-sugar food products. If individual nutrient contents were inconsistent with the declared values on nutrition labels, the Administration would take necessary follow-up actions against the traders concerned.

17. Making reference to the Soft Drinks Industry Levy of the United Kingdom, Mr POON Siu-ping enquired whether the Administration would study the feasibility of imposing sugar tax on beverages with sugar content. Dr Helena WONG asked whether the Administration had any plan to enact legislation to echo the call of the World Health Organization ("WHO") for the elimination of industrially-produced trans fat from the global food supply. USFH advised that the Administration would keep in view global and regional developments and emerging evidence on strategies to address the obesogenic environment based on WHO guidance and would give full and thorough consideration to the local situation in mapping out relevant measures suitable for Hong Kong.

18. Dr Helena WONG suggested that consideration be given to encouraging restaurants to reduce the size of sugar packs they provided in order to reduce sugar intake by members of the public. CCM(NCD), DH advised that DH had been running the EatSmart@restaurant.hk campaign to encourage and assist restaurants to provide dishes with more fruit and vegetables and less oil, salt and sugar, so as to allow healthier food choices for the general public when eating out. At present, there were over 600 restaurants participating in the campaign. The Administration would continue discussion with the trade in modifying the recipe to supply a greater variety of food with less salt and sugar.

19. Mr SHIU Ka-chun noted that one of the strategies for halting the rise in diabetes and obesity was to enhance the promotion and support of breastfeeding. He enquired about the measures implemented by the Administration to encourage the community to adopt breastfeeding friendly workplace policy. He hoped that government departments could take the lead in providing more baby care facilities in public places under their management to facilitate breastfeeding.

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20. USFH responded that the Government had all along endeavoured to promote, protect and support breastfeeding through a comprehensive strategy. Guidelines had been issued to encourage government departments and private enterprises to provide an appropriate and friendly environment for their breastfeeding employees to express breastmilk in the workplace. The Administration was also actively promoting the provision of babycare facilities in government premises and public places through various measures. It was encouraging to note that the MTR Corporation had recently begun to provide babycare rooms at some MTR stations. At the request of Mr SHIU Ka-chun, USFH undertook to provide supplementary information on the latest number of babycare rooms in government premises after the meeting.

Health assessment and counselling services

21. Ms Starry LEE considered that regular medical check-up was an effective mean to enable individuals to identify health issues at an early stage and to motivate them to improve their health. She called on the Administration to incorporate an initiative in the Strategy and Action Plan to provide free basic body check-ups (including tests on blood pressure, blood sugar level and cholesterol) to members of the public, especially the elderly and the less privileged. This apart, DH should provide actively health advisory and counselling services by Chinese medicine practitioners ("CMPs") and dietitians in order to motivate lifestyle changes of members of the public for the prevention of NCD. Mr POON Siu-ping enquired about the role of CMPs in the prevention and control of NCD.

22. USFH advised that one of the objectives of the Strategy and Action Plan was to strengthen health systems for early detection and optimal management of NCD through primary healthcare. As part of the Administration's efforts to develop primary healthcare, the pilot District Health Centre ("DHC") to be established in Kwai Tsing District would offer basic health risk assessment to facilitate early identification of the target chronic diseases and health risk factors, as well as health advisory and counselling services by multi-disciplinary healthcare professionals. Separately, the Administration would explore the feasibility of implementing evidence-based screening for target population under the pilot DHC. As regards the role of CMPs in promoting primary healthcare, it should be noted that a member from the sector had been appointed to the Steering Committee on Primary Healthcare Development to help contribute to the formulation of the blueprint for the development of primary healthcare services. In addition, the operator of the pilot DHC in Kwai Tsing District was expected to include CMPs in the DHC's network of service providers.

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23. In response to the Chairman's follow-up enquiry, CCM(NCD), DH advised that the 18 Elderly Health Centres ("EHCs") set up by DH in the territory provided integrated primary healthcare services including health assessment, physical check-up, health education, individual counselling and curative treatment to elders aged 65 on a membership basis. Elders would be referred to DH's allied health professionals (e.g. physiotherapists, clinical psychologists and dietitians) for consultation and management of their conditions if necessary. At the request of Ms Starry LEE, CCM(NCD), DH undertook to provide the details of the health assessment service provided by EHCs after the meeting.

Collaboration with other government bureaux and departments

24. Dr Pierre CHAN opined that certain action areas in the Strategy and Action Plan, such as alcohol free, tobacco free and healthy diet, might affect the business of some sectors. He asked whether the Food and Health Bureau ("FHB") had ensured that the policies of different government bureaux and departments could complement the achievement of the targets under the Strategy and Action Plan. Mr CHU Hoi-dick raised a similar concern. Taking health risks arising from air pollution as an example, he considered that FHB should incorporate in the Strategy and Action Plan improvement measures, such as promoting the use of electric vehicles in franchised buses, to reduce the concentration of nitrogen dioxide in public transport interchanges. Mr CHAN Chi-chuen said that international studies had revealed that long working hours would increase the risk of stroke and cardiovascular diseases. He questioned why the policy on standard working hours, which was under the purview of the Labour and Welfare Bureau, was not incorporated into the Strategy and Action Plan for achieving Target 1 (i.e. reducing premature mortality of NCD) and Target 3 (i.e. reducing physical inactivity). Dr Helena WONG called on the Correctional Services Department to ensure that meals provided to persons in custody had sufficient nutritional values and to provide more choices of fruits to them.

25. USFH and Principal Assistant Secretary for Food and Health (Health) 1 ("PAS(H)1") advised that the strategies and actions set out in the Strategy and Action Plan were formulated in consultation with various government bureaux and departments, such as the Education Bureau and the Leisure and Cultural Services Department. The introduction of the Strategy and Action Plan served as a first step to demonstrate the Government's commitment to reduce NCD burden. While FHB would take a leading role in taking forward the agenda, it would join hands with other government bureaux and departments in working out specific initiatives favourable to the achievement of the nine local targets by 2025. CCM(NCD), DH

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supplemented that the nine local targets and the Strategy and Action Plan were adapted from the nine voluntary global targets and a menu of policy options laid down in WHO's Global Action Plan for the Prevention and Control of NCD 2013-2020, which focused on four NCD (namely cardiovascular diseases, cancers, chronic respiratory diseases and diabetes) and four shared behavioural risk factors (namely unhealthy diet, physical inactivity, tobacco use and harmful use of alcohol) that were potentially preventable or modifiable. The policy options comprised 88 population-based interventions which were published in peer reviewed journal with demonstrated and quantifiable effect size. The interventions adopted by the Administration were appropriate to the local context in Hong Kong.

Prevention and control of rare diseases and mental disorders

26. Referring to Target 9 in relation to improving availability of affordable basic technologies and essential medicines to treat major NCD, Dr Fernando CHEUNG opined that the Administration did not make any breakthrough to improve the availability and affordability of drug treatments, some of which were ultra-expensive, for patients with rare diseases or cancers. He was particularly concerned about the long lead time for introducing new drugs to HA's Drug Formulary and safety net. He suggested the Administration to set a specific target on patient's maximum contribution to drug expenses in the Strategy and Action Plan, say 10% of the annual household disposable income, so as to provide sustainable and affordable drug treatment for patients suffering from rare diseases and cancers.

27. USFH advised that HA had put in place mechanisms to regularly include new drugs in the HA Drug Formulary or in the scope of subsidies under the safety net. To expedite the process for introducing suitable new drugs to the safety net, HA had increased the frequency of the prioritization exercise for including self-financed drugs in the safety net. Separately, HA had commissioned a consultancy study in December 2017 to review the existing means test mechanism for various drug subsidy programmes to help alleviate household financial burden for purchasing ultra-expensive drugs in the long run. With the above efforts, it was expected that the availability and affordability of ultra-expensive drugs would gradually be improved.

28. Dr Fernando CHUENG hoped that the newly developed Hong Kong Children's Hospital could pool together relevant expertise and facilities and help collate relevant data to facilitate scientific research and manpower training for the prevention and treatment of paediatric and genetic diseases. Replying in the affirmative, USFH said that the Hong Kong Children's

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Hospital would collate clinical data and develop research programmes on uncommon disorders after it came into operation by phases starting from December 2018.

29. Mr YIU Si-wing asked whether the Administration would implement strategies and action plan for the prevention and control of mental disorders which was also a type of NCD. USFH advised that the Administration recognized the essential role of mental health in achieving body health. In April 2017, the Review Committee on Mental Health published the Mental Health Review Report, which set out 40 recommendations on enhancing the overall mental health services in Hong Kong. The Administration was actively taking forward the recommendations put forth in the report. The standing Advisory Committee on Mental Health, which was established in December 2017, would follow up on and monitor the implementation of these recommendations. USFH further advised that since the risk factors associated with mental health were different from those associated with the four NCD under the Strategy and Action Plan, separate resources would be deployed to support the Administration's efforts in the prevention and control of mental disorders.

VI. Reprovisioning of Fu Shan Public Mortuary

[LC Paper Nos. CB(2)1388/17-18(06), CB(2)1433/17-18(01) and CB(2)1440/17-18(01)]

30. The Chairman reminded members that in accordance with Rule 83A of the Rules of Procedures, they should disclose the nature of any direct or indirect pecuniary interests relating to this funding proposal before they spoke on the subject.

31. USFH briefed members on the proposed reprovisioning of Fu Shan Public Mortuary ("FSPM") at Sha Tin, details of which were set out in the Administration's paper (LC Paper No. CB(2)1388/17-18(06)).

32. Members noted the respective submissions on the subject under discussion from The Incorporated Owners of Lakeview Garden and Mr YUNG Ming-chau, member of Shatin District Council.

Body storage capacity and utilization rate of public mortuaries

33. Mr POON Siu-ping expressed support for the proposed project. Noting the Administration's projection that public mortuaries in Hong Kong should provide a total of 1 300 body storage spaces in 2031, he enquired whether the overall body storage capacity would be sufficient to

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cope with the projected demand after the commissioning of the reprovisioned FSPM and the reprovisioning of Victoria Public Mortuary ("VPM") under the Administration's plan.

34. USFH advised that the three public mortuaries operated by DH, i.e. FSPM, Kwai Chung Public Mortuary ("KCPM") and VPM, had been reaching their critical body storage limits. In view of the above and having taken into account the population projections as well as the need to provide storage space for use during emergencies or times of disaster, the Administration proposed to reprovision FSPM with body storage capacity increased from currently 216 to 830. In addition, the Administration was planning to reprovision VPM. Upon the reprovisioning of FSPM and VPM, the overall body storage capacity of the three public mortuaries would be sufficient to meet the projected demand in 2031.

35. Dr Helena WONG expressed support for the proposed project. Noting that the overall average utilization rate of the three operating public mortuaries had reached 101% in 2017, she urged the Administration to expedite the reprovisioning of FSPM in order to cope with the increasing demand. She was also concerned about how the Administration would handle the dead bodies overflowing from these three mortuaries at present.

36. Consultant Forensic Pathologist i/c, DH responded that the Administration would deploy mobile body storage trolleys in the circulation areas inside the cold rooms in the three public mortuaries when necessary to enhance the temporary body storage capacity. Each mobile body storage trolley could store two bodies (on separate decks) at the same time. Apart from the three operating mortuaries, Kowloon Public Mortuary ("KPM") at Hung Hom was reserved for storage of bodies during emergency situations. As the three operating mortuaries usually reached their critical storage limits after long holidays and during winter, KPM would be opened to receive bodies overflowing from these three mortuaries. USFH supplemented that subject to the funding approval of the Finance Committee, the Administration planned to commence the construction work of the proposed reprovisioning of FSPM in the first quarter of 2019 for completion in the fourth quarter of 2021. It was expected that the reprovisioned FSPM would be commissioned in around mid-2022.

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37. The Chairman and Dr Helena WONG requested the Administration to provide, before submitting the proposed project to the Public Works Subcommittee for consideration, written information on the respective body storage capacity and utilization rate of FSPM, KCPM, VPM and KPM in 2017, with a breakdown of storage racks and mobile body storage

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trolleys in the cold rooms therein; and the respective average lengths of time for body storage at the above four public mortuaries in 2017.

Car parking facilities in the vicinity

38. Dr Helena WONG expressed concern that illegal parking in the vicinity of FSPM had been a long-standing problem and caused nuisances to nearby residents. She queried the proposed provision of 50 car parking spaces in the covered car park within the reprovisioned FSPM could meet the existing and future demands. In her view, the Administration should consider maximizing the number of car parking spaces in the covered car park. The Chairman sought clarification as to whether the proposed car park would be reserved solely for the use of visitors of FSPM and in emergency situations.

39. USFH and PAS(H)1 advised that the use of the covered car park would be confined to vehicles visiting the mortuary and similar facilities nearby, including Po Fook Memorial Hall and Fu Shan Crematorium. In addition, there would be lay-bys for four large vehicles (including coaches). Taking into account that vehicles would visit FSPM and the nearby facilities at different times, the Administration believed that the new parking spaces and lay-bys would address the parking demand and alleviate the traffic condition in the surrounding areas.

40. Noting that the Administration had undertaken to convert some areas of the existing FSPM to car parking spaces to further alleviate the impact on the surrounding traffic when it consulted local residents on the proposed project, Mr POON Siu-ping sought about the details and progress of the proposed conversion plan.

41. Assistant Director of Health (Health Administration & Planning) (Acting), DH ("AD(HA&P)(Atg), DH") advised that after the commissioning of the reprovisioned FSPM, the existing FSPM would cease operation and would be used for administration, disaster and training purposes, including converting the area in the vicinity of the outdoor farewell pavilion to parking spaces for coaches and light goods vehicles. These parking spaces would also be open for use by vehicles visiting the mortuary and similar facilities nearby when they were not in use for the above purposes. At present, a Traffic Impact Assessment on the proposed conversion was underway. The Administration would take forward the proposed conversion plan according to the assessment findings in due course. In response to Mr POON Siu-ping's follow-up enquiry, AD(HA&P)(Atg), DH advised that the Administration would submit a separate funding proposal for the proposed modification works of the existing FSPM.

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Conclusion

42. In closing, the Chairman concluded that the Panel did not object to the submission of the proposal to the Public Works Subcommittee for consideration.

VII. Any other business

43. There being no other business, the meeting ended at 6:10 pm.

Council Business Division 2
Legislative Council Secretariat
17 January 2019