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Replies to initial written questions raised by Finance Committee Members in examining the Estimates of Expenditure 2019-20

Director of Bureau : Secretary for Food and Health

Session No. : 14

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S-FHB(H)002	S070	POON Siu-ping	140	(2) Subvention : Hospital Authority
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CONTROLLING OFFICER'S REPLY

S-FHB(H)001

(Question Serial No. S076)

Head: (140) Government Secretariat: Food and Health Bureau
(Health Branch)

Subhead (No. & title): (000)

Programme: (2) Subvention: Hospital Authority

Controlling Officer: Permanent Secretary for Food and Health (Health)
(Ms Elizabeth Tse)

Director of Bureau: Secretary for Food and Health

Question:

In reply Serial No. FHB(H)002 to the question on the establishment of Gender Identity Disorder (GID) Clinic at the Prince of Wales Hospital (PWH), the Bureau has only provided the number of "attendances", in which both new and follow-up cases are included. In this connection, please advise this Committee on the following:

1. What are the number of attendances at the GID Clinic of the PWH and the number of new attendances among them in each of the past 4 years?
2. What are the number of patients who had sex reassignment surgery at the PWH, and the respective numbers of patients who received "male-to-female" and "female-to-male" surgeries in each of the past 4 years?
3. Currently, what is the longest, shortest and average waiting time for first appointment at the GID Clinic of the PWH after consultation at general out-patient clinics?
4. What is the current number of patients waiting for first appointment at the GID Clinic of the PWH?
5. What are the current healthcare manpower arrangements at the GID Clinic? What are the number of healthcare personnel who possess relevant experience or qualifications to conduct GID diagnosis and the respective numbers of plastic surgeons, psychiatrists and clinical psychologists among them? Is there sufficient manpower to provide services to patients?
6. It is noted that as there are insufficient operating theatres for allocation at the PWH, only a limited number of operating theatre sessions are assigned for sex reassignment surgeries every month. How many operating theatre sessions are available for sex reassignment surgeries every month? Can more sessions be assigned for this purpose?

Asked by: Hon CHAN Chi-chuen

Reply:

1. The table below sets out the number of total and new psychiatric outpatient attendances at the Gender Identity Disorder (GID) clinic of the Prince of Wales Hospital (PWH) from 2016-17 to 2018-19 (up to 31 December 2018).

Year	Number of total attendances	Number of new attendances
2016-17	181	51
2017-18	689	134
2018-19 (up to 31 December 2018) [provisional figures]	612	64

Note:

The GID clinic of PWH commenced services in October 2016.

2. The table below sets out the number of patients having received sex-reassignment surgery (SRS) or related surgeries at PWH from 2016-17 to 2018-19 (up to 31 December 2018).

Year	Number of patients having received SRS or related surgeries		
	Male to Female (MtF)	Female to Male (FtM)	Total
2016-17	6	6	12
2017-18	6	9	15
2018-19 (up to 31 December 2018) [provisional figures]	3	12	15

Note:

1. The SRS or related surgeries for MtF include breast augmentation and vaginal reconstruction.
2. The SRS or related surgeries for FtM include mastectomy, hysterectomy & ovariectomy, metoidioplasty and phalloplasty.
3. In 2018-19 (up to 31 December 2018), the provisional figures for the shortest (25th percentile), median and longest (90th percentile) waiting time of new cases under routine category at psychiatric specialist out-patient clinics are 11, 31 and 96 weeks respectively. Separate statistics on the waiting time for the first appointment at the GID Clinic of PWH are not readily available.
4. As at 31 December 2018, there were 26 patients waiting for first appointment at the GID Clinic of PWH.

5. The Hospital Authority (HA) delivers GID services using multi-disciplinary team approach that allows flexible deployment of staff to cope with service needs and operational requirements. As such, professionals in the GID clinic also provide medical services to patients suffering from other diseases. Separate statistics on the number of professionals who provide medical services specifically for GID patients are not readily available. HA will continue to review its service provision to ensure that there is sufficient manpower to meet patients' needs.

6. On average, there are three operating theatre sessions assigned for SRS and related surgeries in each month at PWH. HA will continue to review its overall service provision, including but not limited to the number of operating theatre sessions, for patients requiring surgical procedure in their course of treatment.

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CONTROLLING OFFICER'S REPLY

S-FHB(H)002

(Question Serial No. S070)

Head: (140) Government Secretariat: Food and Health Bureau
(Health Branch)

Subhead (No. & title): (-) Not specified

Programme: (2) Subvention: Hospital Authority

Controlling Officer: Permanent Secretary for Food and Health (Health)
(Ms Elizabeth Tse)

Director of Bureau: Secretary for Food and Health

Question:

Regarding the manpower of care-related support staff provided in the reply to my question (Reply Serial No. FHB(H)153), the attrition number in 2018-19 was compiled on the basis of calendar year (rolling 12 months from January to December 2018) while the intake number in the same year on the basis of financial year. The manpower of care-related support staff in the past years was also compiled on the basis of financial year. In this connection, please provide the above figures, in a consistent manner, on the basis of financial year. Further, please set out by hospital cluster the total number, intake number, and attrition number of full-time and part-time care-related support staff working in public hospitals, and the total salary expenditure involved in 2018-19 financial year.

Asked by: Hon POON Siu-ping

Reply:

Attrition figures are normally provided on a 12-month rolling basis in order to provide a full cycle picture and to mitigate the effects of seasonal variations, if any. As figures as at the end of the 2018-19 financial year, i.e. 31 March 2019, are not yet available, the number of "care-related support staff" as at 31 December 2018 in each cluster of the Hospital Authority (HA) together with the total salary expenditure projected for 2018-19, with cluster breakdown, is provided below, whereas only nine-month figures in 2018-19 on the intake and attrition numbers as at 31 December 2018 are provided.

2018-19 (9 months)

Cluster	No. of Staff (as at 31 December 2018) (Include FT and PT)	Intake (Apr – Dec 2018) (Include FT and PT)	Attrition No. (Apr - Dec 18)		Total Salary Expenditure (Full year Projection) (\$ million)
			FT	PT	
HKEC	1 526	187	184	0	372
HKWC	1 400	173	176	1	342
KCC	3 193	384	312	0	715
KEC	1 631	201	173	0	398
KWC	2 270	289	228	0	533
NTEC	2 632	383	311	1	624
NTWC	2 562	251	244	0	588

The following table which sets out relevant figures for the 2017-18 financial year is also provided for reference.

2017-18 (full year)

Cluster	No. of Staff (as at 31 March 2018) (Include FT and PT)	Intake (Include FT and PT)	Attrition No.		Total Salary Expenditure (\$ million)
			FT	PT	
HKEC	1 534	254	250	0	354
HKWC	1 421	224	239	0	332
KCC	3 042	456	413	0	662
KEC	1 606	226	232	1	375
KWC	2 201	312	279	0	501
NTEC	2 582	454	420	1	591
NTWC	2 553	430	341	1	547

Figures for 2017-18 (full year from 1 April 2017 to 31 March 2018) and 2018-19 (nine months from 1 April to 31 December 2018) are not directly comparable.

Note:

1. The “care-related support staff” group includes health care assistants, ward attendants, patient care assistants, etc.
2. The manpower figures are calculated on full-time equivalent basis including permanent, contract and temporary staff in HA.
3. Intake refers to total no. of permanent & contract staff joining HA on headcount basis during the period. Transfer, promotion & staff movement within HA will not be regarded as Intake.
4. Attrition (Wastage) includes all types of cessation of service from HA for permanent and contract staff on headcount basis.

5. Since April 2013, attrition (wastage) for the HA full-time and part-time workforce has been separately monitored and presented.
6. The salary expenditure includes basic salary, allowance, gratuity and other on cost such as provision of home loan interest subsidy benefit and death & disability benefit. The figures for 2018-19 represent full-year projection.

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CONTROLLING OFFICER'S REPLY

S-FHB(H)003

(Question Serial No. SV021)

Head: (140) Government Secretariat: Food and Health Bureau
(Health Branch)

Subhead (No. & title): (-) Not Specified

Programme: (1) Health

Controlling Officer: Permanent Secretary for Food and Health (Health)
(Ms Elizabeth Tse)

Director of Bureau: Secretary for Food and Health

Question:

A follow-up question on Reply Serial No. SB179:

According to the information provided by the Government, the public will be consulted in 2019 on arrangements of advance directives and the relevant end-of-life care for terminally-ill patients. What is the exact launching date of the public consultation?

Asked by: Hon TAM Man-ho, Jeremy

Reply:

The Government will consult the public on advance directives and related end-of-life care arrangement in the second half of 2019.

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CONTROLLING OFFICER'S REPLY

S-FHB(H)004

(Question Serial No. S071)

Head: (37) Department of Health

Subhead (No. & title): (-) Not specified

Programme: (2) Disease Prevention

Controlling Officer: Director of Health (Dr. Constance CHAN)

Director of Bureau: Secretary for Food and Health

Question:

Regarding the Elderly Health Care Voucher (EHV) Scheme, please provide, broken down by type of service provider, the numbers of transactions in which an amount below \$500, between \$2,000 and \$3,000 and over \$3,000 was spent on a single occasion, their respective percentages in all transactions under that category of healthcare service, as well as their respective percentages in the total number of voucher claims in each of the past 5 years.

Asked by: Hon CHAN Hoi-yan (LegCo internal reference no.:)

Reply:

Under the Elderly Health Care Voucher (EHV) Scheme, the numbers of voucher claim transactions with the amount of "\$500 or below", "\$2,001 - \$3,000" and "\$3,001 or above" made by participating healthcare service providers in Hong Kong in the past 5 years with breakdown by types of healthcare services, and their respective percentages of the total number of voucher claim transactions made by types of healthcare services, as well as their respective percentages of the total number of voucher claim transactions in Hong Kong in each of the past 5 years are at **Annex**.

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Breakdown of Voucher Claim Transactions in 2014
by the Voucher Amount in a Single Transaction and Types of Healthcare Services

Healthcare Services Amount of vouchers claimed per transaction	Number of voucher claim transactions in 2014 (Percentage of the total number of voucher claim transactions made by respective type of healthcare services in the year) [Percentage of the total number of voucher claim transactions in Hong Kong in the year]										
	Medical Practitioners	Chinese Medicine Practitioners	Dentists	Occupational Therapists	Physiotherapists	Medical Laboratory Technologists	Radiographers	Nurses	Chiropractors	Optometrists	Total
\$500 or below	1 646 419 (95%) [74%]	367 098 (96%) [17%]	39 811 (54%) [2%]	361 (62%) [0.02%]	12 209 (92%) [1%]	2 096 (57%) [0.1%]	2 176 (71%) [0.1%]	417 (45%) [0.02%]	998 (51%) [0.04%]	3 577 (60%) [0.2%]	2 075 162 [93%]
\$2,001 - \$3,000	2 345 (0.1%) [0.1%]	579 (0.2%) [0.03%]	3 455 (5%) [0.2%]	1 (0.2%) [<0.01%]	19 (0.1%) [<0.01%]	80 (2%) [<0.01%]	30 (1%) [<0.01%]	27 (3%) [<0.01%]	14 (0.7%) [<0.01%]	600 (10%) [0.03%]	7 150 [0.3%]
\$3,001 or above	638 (0.04%) [0.03%]	211 (0.1%) [0.01%]	1 516 (2%) [0.1%]	1 (0.2%) [<0.01%]	5 (0.04%) [<0.01%]	20 (1%) [<0.01%]	10 (0.3%) [<0.01%]	9 (1%) [<0.01%]	3 (0.2%) [<0.01%]	258 (4%) [0.01%]	2 671 [0.1%]

Breakdown of Voucher Claim Transactions in 2015
by the Voucher Amount in a Single Transaction and Types of Healthcare Services

Healthcare Services Amount of vouchers claimed per transaction	Number of voucher claim transactions in 2015 (Percentage of the total number of voucher claim transactions made by respective type of healthcare services in the year) [Percentage of the total number of voucher claim transactions in Hong Kong in the year]										
	Medical Practitioners	Chinese Medicine Practitioners	Dentists	Occupational Therapists	Physiotherapists	Medical Laboratory Technologists	Radiographers	Nurses	Chiropractors	Optometrists	Total
\$500 or below	1 847 223 (92%) [68%]	492 131 (92%) [18%]	53 015 (48%) [2%]	360 (75%) [0.01%]	17 966 (90%) [1%]	3 040 (54%) [0.1%]	3 548 (71%) [0.1%]	706 (48%) [0.03%]	1 766 (57%) [0.1%]	3 738 (18%) [0.1%]	2 423 493 [90%]
\$2,001 - \$3,000	5 687 (0.3%) [0.2%]	1 662 (0.3%) [0.1%]	6 048 (6%) [0.2%]	2 (0.4%) [<0.01%]	28 (0.1%) [<0.01%]	220 (4%) [0.01%]	90 (2%) [<0.01%]	91 (6%) [<0.01%]	13 (0.4%) [<0.01%]	4 749 (22%) [0.2%]	18 590 [1%]
\$3,001 or above	2 207 (0.1%) [0.1%]	908 (0.2%) [0.03%]	5 383 (5%) [0.2%]	1 (0.2%) [<0.01%]	13 (0.1%) [<0.01%]	56 (1%) [<0.01%]	22 (0.4%) [<0.01%]	78 (5%) [<0.01%]	3 (0.1%) [<0.01%]	3 114 (15%) [0.1%]	11 785 [0.4%]

Breakdown of Voucher Claim Transactions in 2016
by the Voucher Amount in a Single Transaction and Types of Healthcare Services

Healthcare Services Amount of vouchers claimed per transaction	Number of voucher claim transactions in 2016 (Percentage of the total number of voucher claim transactions made by respective type of healthcare services in the year) [Percentage of the total number of voucher claim transactions in Hong Kong in the year]										
	Medical Practitioners	Chinese Medicine Practitioners	Dentists	Occupational Therapists	Physiotherapists	Medical Laboratory Technologists	Radiographers	Nurses	Chiropractors	Optometrists	Total
\$500 or below	1 772 541 (91%) [63%]	554 529 (91%) [20%]	55 844 (47%) [2%]	472 (76%) [0.02%]	19 272 (88%) [1%]	3 071 (32%) [0.1%]	3 887 (66%) [0.1%]	1 309 (43%) [0.05%]	4 018 (80%) [0.1%]	7 179 (10%) [0.3%]	2 422 122 [86%]
\$2,001 - \$3,000	5 592 (0.3%) [0.2%]	2 227 (0.4%) [0.1%]	5 945 (5%) [0.2%]	2 (0.3%) [<0.01%]	13 (0.1%) [<0.01%]	248 (3%) [0.01%]	112 (2%) [<0.01%]	241 (8%) [0.01%]	9 (0.2%) [<0.01%]	15 436 (21%) [1%]	29 825 [1%]
\$3,001 or above	2 484 (0.1%) [0.1%]	1 053 (0.2%) [0.04%]	4 972 (4%) [0.2%]	2 (0.3%) [<0.01%]	12 (0.1%) [<0.01%]	71 (1%) [<0.01%]	52 (1%) [<0.01%]	236 (8%) [0.01%]	3 (0.1%) [<0.01%]	10 021 (14%) [0.4%]	18 906 [1%]

Breakdown of Voucher Claim Transactions in 2017 ^{Note 1}
by the Voucher Amount in a Single Transaction and Types of Healthcare Services

Healthcare Services Amount of vouchers claimed per transaction	Number of voucher claim transactions in 2017 (Percentage of the total number of voucher claim transactions made by respective type of healthcare services in the year) [Percentage of the total number of voucher claim transactions in Hong Kong in the year]										
	Medical Practitioners	Chinese Medicine Practitioners	Dentists	Occupational Therapists	Physiotherapists	Medical Laboratory Technologists	Radiographers	Nurses	Chiropractors	Optometrists	Total
\$500 or below	1 972 915 (89%) [57%]	780 633 (91%) [22%]	76 234 (45%) [2%]	1 424 (64%) [0.04%]	21 343 (85%) [1%]	4 281 (36%) [0.1%]	5 415 (61%) [0.2%]	2 139 (42%) [0.1%]	3 932 (74%) [0.1%]	15 963 (9%) [0.5%]	2 884 279 [83%]
\$2,001 - \$3,000	6 080 (0.3%) [0.2%]	3 813 (0.4%) [0.1%]	6 005 (4%) [0.2%]	117 (5%) [<0.01%]	11 (0.04%) [<0.01%]	309 (3%) [0.01%]	186 (2%) [0.01%]	286 (6%) [0.01%]	8 (0.1%) [<0.01%]	24 088 (14%) [1%]	40 903 [1%]
\$3,001 or above	2 533 (0.1%) [0.1%]	1 995 (0.2%) [0.1%]	4 544 (3%) [0.1%]	408 (18%) [0.01%]	15 (0.1%) [<0.01%]	83 (1%) [<0.01%]	67 (1%) [<0.01%]	281 (6%) [0.01%]	2 (0.04%) [<0.01%]	16 942 (10%) [0.5%]	26 870 [1%]

Note 1: The eligibility age for the EHV Scheme has been lowered from 70 to 65 with effect from 1 July 2017.

Breakdown of Voucher Claim Transactions in 2018 ^{Note 2}
by the Voucher Amount in a Single Transaction and Types of Healthcare Services

Healthcare Services Amount of vouchers claimed per transaction	Number of voucher claim transactions in 2018 (Percentage of the total number of voucher claim transactions made by respective type of healthcare services in the year) [Percentage of the total number of voucher claim transactions in Hong Kong in the year]										
	Medical Practitioners	Chinese Medicine Practitioners	Dentists	Occupational Therapists	Physiotherapists	Medical Laboratory Technologists	Radiographers	Nurses	Chiropractors	Optometrists	Total
\$500 or below	2 487 813 (85%) [48%]	1 309 248 (87%) [25%]	118 512 (40%) [2%]	1 642 (47%) [0.03%]	32 538 (80%) [1%]	6 603 (35%) [0.1%]	8 839 (53%) [0.2%]	2 847 (44%) [0.1%]	6 924 (64%) [0.1%]	26 883 (7%) [1%]	4 001 849 [77%]
\$2,001 - \$3,000	18 494 (1%) [0.4%]	17 423 (1%) [0.3%]	17 482 (6%) [0.3%]	433 (12%) [0.01%]	142 (0.3%) [<0.01%]	929 (5%) [0.02%]	865 (5%) [0.02%]	613 (9%) [0.01%]	48 (0.4%) [<0.01%]	84 043 (23%) [2%]	140 472 [3%]
\$3,001 or above	8 238 (0.3%) [0.2%]	8 586 (1%) [0.2%]	13 423 (5%) [0.3%]	919 (26%) [0.02%]	188 (0.5%) [<0.01%]	243 (1%) [<0.01%]	559 (3%) [0.01%]	620 (10%) [0.01%]	21 (0.2%) [<0.01%]	80 838 (22%) [2%]	113 635 [2%]

Note 2: On 8 June 2018, each eligible elder was provided with an additional voucher amount of \$1,000 on a one-off basis, and the accumulation limit of the vouchers was increased from \$4,000 to \$5,000 as a regular measure.