



中華人民共和國香港特別行政區政府總部食物及衛生局

Food and Health Bureau, Government Secretariat
The Government of the Hong Kong Special Administrative Region
The People's Republic of China

Our Ref. : FHB/H/19/102 pt.13
Your Ref. :

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28 June 2019

Ms Doris LO
Clerk to Public Works Subcommittee
Legislative Council Secretariat
Legislative Council Complex
1 Legislative Road
Central
Hong Kong

Dear Ms LO,

**Public Works Subcommittee
Follow-up to the meeting on 31 May 2019**

Further to the Public Works Subcommittee meeting on 31 May 2019,
the requested supplementary information is provided at **Enclosure**.

Yours sincerely,

(Ricky WU)
for Secretary for Food and Health

**Public Works Subcommittee
Follow-up to the meeting on 31 May 2019
Supplementary Information**

Upon Hon CHAN Chi-chuen and Dr Hon Helena WONG Pik-wan's request, we provide supplementary information on the project as follows –

- 1(a) Details of the special furniture and equipment ("F&E") to be procured by the University of Hong Kong, as well as the cost breakdown are set out in **Annex 1**.
- 1(b) The guidelines for the procurement of medical equipment of University Grants Committee ("UGC")-funded universities and the Hospital Authority ("HA") are similar. The objective of both procurement mechanism is to uphold the principles of fairness, competitiveness and accountability to purchase the best value of goods.

Procurement of medical equipment is subject to the guidelines and procedures established by the UGC-funded universities and HA, and is generally purchased through tendering or quotations. Under the open tendering process, all interested suppliers can submit bids in accordance with the tender notice.

Both UGC-funded universities and HA have set up tender committees to review tenders and make final approvals in order to purchase the best value of goods. Regarding HA, the Main Tender Board is responsible for vesting the tenders for HA Head Office and tenders for purchases of tender value over \$4.5 million in all clusters. The Cluster Tender Boards are responsible for vesting the tenders for purchases of tender value less than or equal to \$4.5 million in respective clusters.

UGC-funded universities and HA can purchase medical equipment according to their respective guidelines. However, they should normally obtain approval from relevant government bureaux or departments before conducting procurement.

For UGC-funded universities, the UGC's Notes on Procedures set out clearly that when seeking approval to upgrade a capital project to Category A, UGC-funded universities should provide an indicative F&E list to the UGC Secretariat for vetting of the project estimates for F&E provisions together with the information justifying the requirements.

After funding approval for the works project and before procurement of the F&E items for the project concerned, universities should submit an application setting out the scope and latest programme of the project relevant to the application and the details of the proposed F&E items to be procured with justifications showing that the items are properly charged¹ to the F&E vote.

Universities should not commit funding to procure the F&E items before securing approval of the UGC Secretariat. Transfer of funds between the F&E budget and the construction budget without prior approval from the UGC Secretariat is not allowed. Upon completion of the project, universities are required to confirm within three months after completion of the project that they had procured the items as per the approved F&E list.

For HA, purchases with a total value of less than \$200,000 are not subject to the approval from government bureaux or departments. If the item to be purchased falls under Capital Block Vote ("CBV") or the Capital Works Reserve Fund ("CWRF"), the HA is required to obtain funding approval from the Food and Health Bureau.

- 1(c) In adopting contemporary technologies like Telepresence, AR & VR, the University of Hong Kong employs and subscribes to prestigious international consultancy services to ensure alignment of the facilities with the right direction of technological development. Regular technology update and review meetings are arranged with the relevant consultants to upkeep technical competency with the support of the latest knowledge. The technology acquired is expected to stay on-trend for a period of at least 10 years.
2. The Government published the report of the Strategic Review on Healthcare Manpower Planning and Professional Development in June 2017, setting out ten recommendations to lay the foundation for healthcare manpower planning and the direction for professional development and regulation of healthcare professionals, with a view to ensuring that there are qualified

¹ General speaking, F&E items may be charged to the F&E vote of a project if such items are -

- (a) integral to the project concerned;
- (b) strictly essential to meet users' operational needs;
- (c) used solely in the project premises; and
- (d) not consumable or recurrent (e.g. lease line rental fee) in nature.

healthcare professionals to support the healthy and sustainable development of the healthcare system in Hong Kong. The Review covers mainly 13 healthcare professions which are subject to statutory registration, including doctors, dentists and dental hygienists, nurses, midwives, Chinese medicine practitioners, pharmacists, occupational therapists, physiotherapists, medical laboratory technologists, optometrists, radiographers and chiropractors.

For healthcare manpower, the projections have taken into account demographic changes and other relevant factors, including the known and planned services and developments, the requirements of public and private healthcare, social welfare and education sectors, as well as the demand for primary, secondary and tertiary care services in Hong Kong.

The Strategic Review projects that there is a general shortage of doctors, dentists, dental hygienists, general nurses, occupational therapists, physiotherapists, medical laboratory technologists, optometrists and radiographers. The supply of psychiatric nurses, pharmacists, Chinese medicine practitioners and chiropractors is projected to be sufficient to meet the demand given the existing service levels and models. Relevant projected manpower gaps in 2020, 2025 and 2030 are set out in **Annex 2**.

The Government will conduct manpower planning and projections for healthcare professionals once every three years in step with the triennial planning cycle of the UGC. A new round of manpower projection exercise has already commenced, and the results are expected to be published in 2020.

Enhancement of facilities cum medical campus development

The University of Hong Kong

Implementation of Technology-Enabled Teaching Measures Including Telepresence Solutions & AR/VR and Conversion Works for Additional Anatomy Dissecting Laboratories + Storage for Cadavers

Special Furniture and Equipment

Cost Summary	Total Cost (\$)
1a. IT infrastructure and equipment	127,369,920
1b. VR and AR special equipment	15,350,840
2. Additional dissecting tables and storage for cadavers	16,384,991
	159,105,751
	(in MOD prices)

1a. IT infrastructure and equipment

Telepresence Platform	58,009,821.64
Cyber Resilience System	8,915,533.07
Cable Connection	11,215,148.33
Control System for LED Lights	3,512,734.00
LED Wall	17,987,357.46
AV System	27,729,325.50

Sub-total of 1a	127,369,920.00
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1b. VR and AR special equipment

Sub-total of 1b	15,350,840.00
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2. Additional dissecting tables and storage for cadavers

Sub-total of 2	16,384,991.03
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Annex 2

Healthcare Professions	Best Guestimate		
	2020	2025	2030
Doctors	500 (3.9%)	755 (5.5%)	1 007 (6.8%)
Dentists	96 (4.2%)	121 (5.1%)	127 (5.1%)
Dental Hygienists	30 (7.8%)	48 (10.7%)	62 (12.2%)
General Nurses	455 (1.2%)	1 383 (3.0%)	1 669 (3.3%)
Psychiatric Nurses	-487 (-14.8%)	-708 (-19.8%)	-623 (-16.1%)
Chinese Medicine Practitioners	-354 (-4.9%)	25 (0.3%)	222 (2.9%)
Pharmacists	16 (0.7%)	-129 (-5.4%)	-283 (-11.0%)
Occupational Therapists	181 (8.9%)	178 (7.6%)	186 (7.1%)
Physiotherapists	710 (20.2%)	854 (21.4%)	933 (21.6%)
Medical Laboratory Technologists	44 (1.4%)	3 (0.1%)	49 (1.3%)
Optometrists	167 (8.6%)	302 (15.0%)	497 (24.1%)
Radiographers	26 (1.1%)	14 (0.5%)	106 (3.3%)
Chiropractors	-1 (-0.4%)	-21 (-7.6%)	-40 (-13.8%)

Note :

1. Figures in terms of full time equivalents (“FTEs”)
2. A positive number indicates shortfall. Percentages in brackets refer to the percentages of manpower gaps in FTEs over the overall demands for the profession
3. Base year of projection is 2015, taking into account known shortage in the public and subvented sectors