

Panel on Health Services**List of follow-up actions**

(Position as at 10 October 2018)

| Subject | Date of meeting | Follow-up action required | Administration's response |
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| 1. Briefing by the Secretary for Food and Health on the Chief Executive's 2017 Policy Address | 26 January 2017 | <p>The Administration was requested to provide information on:</p> <p>(a) the increase in public health expenditure in the light of a growing number of elders aged 65 or above under an ageing population; and</p> <p>(b) programmes to promote preventive care for middle-aged adults in primary care setting and the expenditure involved.</p> | The Administration will provide a response in due course. |
| 2. Mechanism for handling medical incidents in public and private hospitals | 19 June 2017 | <p>The Administration/Hospital Authority ("HA") was requested to:</p> <p>(a) advise on whether HA had taken any disciplinary actions against its staff for delaying or omitting the reporting of medical incidents classified as sentinel events or serious untoward events to HA Head Office within 24 hours of their identification, as was required under the Sentinel and Serious Untoward Event Policy;</p> | The Administration's response was issued to members vide LC Paper No. CB(2)1855/17-18(01) on 18 July 2018. |

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| | | <p>(b) explain the reason(s) why the sentinel events relating to "retained instruments or other material after surgery/interventional procedure" and "death of an inpatient from suicide (including home leave)" remained as the top two categories of sentinel events reported by HA during the period of 1 October 2007 to 30 September 2016, albeit HA had implemented improvement measures identified by the relevant Root Cause Analysis Panels for these incidents, including whether healthcare manpower constraint of HA was a factor attributing to the above phenomenon; and</p> <p>(c) provide details of the support provided by the clusters or hospitals concerned for their staff who were involved in sentinel events or serious untoward events.</p> | |
| 3. Preparation for winter surge | 20 November 2017 | <p>The Administration was requested to:</p> <p>(a) in respect of the media reports in mid-November 2017 concerning the recent respective outbreaks of pulmonary tuberculosis in a secondary school in Shatin and a middle school in Hunan Province, advise:</p> | <p>The Administration's response was issued to members vide LC Paper No. CB(2)1856/17-18(01) on 18 July 2018.</p> |

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|-----------------|-----------------|--|---|
| | | <p>(i) the surveillance and control measures put in place by the Department of Health ("DH") to contain the spread of pulmonary and extrapulmonary tuberculosis in the school setting and in the community, in particular how DH could prevent delay in reporting any suspected cases or outbreaks of the diseases by schools; and</p> <p>(ii) the measures taken by DH at the border control point(s) in the territory to avoid imported cases of tuberculosis to safeguard public health; and</p> <p>(b) provide information on the number of HA's patients who were transferred to private hospitals with low-cost hospital bed arrangement for completion of treatment during summer surge in 2017, and the number of private hospital beds and expenditure so involved.</p> | |
| 4. Review of HA | 15 January 2018 | <p>The Administration/HA was requested to:</p> <p>(a) advise the details of the pay scale for, and the mechanism put in place by HA</p> | <p>The Administration's response was issued to members vide LC Paper No. CB(2)1857/17-18(01) on 18 July 2018.</p> |

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| | | <p>to consider and decide the remuneration packages of and the annual pay adjustment for, its senior executives at HA Head Office and clusters;</p> <p>(b) provide, if available, statistics on the number of experienced doctors and nurses drained from HA to private healthcare providers and the number of returnees to HA in the past five years; and</p> <p>(c) advise the measures taken by HA in recent years to attract and retain its care-related supporting staff.</p> | |
| 5. Development of primary healthcare services | 12 February 2018 | <p>The Administration/HA was requested to:</p> <p>(a) provide information on the respective funding provision for, as well as establishment and service throughputs of the Tin Shui Wai, North Lantau and Kwun Tong Community Health Centres in each year since their commencement of services in 2012, 2013 and 2015 respectively; and</p> <p>(b) provide information on the number of complaints received under the Elderly Health Care Voucher Scheme since the</p> | The Administration will provide a response in due course. |

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| | | conversion of the Scheme into a recurrent support programme in 2014, with a breakdown by the number of substantiated cases and the claims involved, and the actions taken by the Administration in respect of these cases. | |
| 6. Cancer strategy | 2 March 2018 | The Administration/HA was requested to advise the annual expenditure involved if all the 44 cancer drugs, irrespective of their current categorization under the HA Drug Formulary, were to be provided by HA as part of its subsidized services. | The Administration's response was issued to members vide LC Paper No. CB(2)1897/17-18(01) on 26 July 2018. |
| 7. The legislative proposal for introducing tax deduction under the Voluntary Health Insurance Scheme | 19 March 2018 | <p>The Administration was requested to:</p> <p>(a) advise, in table form, a breakdown by expenditure items of the amount originally planned to be used and the amount that had been used so far under the \$50 billion earmarked in the 2008-2009 Budget for healthcare reform; and</p> <p>(b) advise the proportions of public and private inpatient services as at present and in 2040 with the implementation of the Voluntary Health Insurance Scheme.</p> | The Administration will provide a response in due course. |

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| 8. Response measures for seasonal influenza | 19 March 2018 | <p>The Administration/HA was requested to:</p> <ul style="list-style-type: none">(a) provide information on the amount and cost of the stockpile of antiviral drugs (e.g. Tamiflu) which had been disposed of by HA in 2017 due to expiry of the shelf-life;(b) advise the measures to be introduced to facilitate the organization of outreach seasonal influenza vaccination activities at primary schools, the estimated financial and manpower resources so required and the target vaccination rate; and(c) advise the expenditure involved for transferring 21 patients of HA (since the commencement of the 2017-2018 winter influenza season and up to 19 March 2018) to private hospitals with low-cost hospital bed arrangement for completion of treatment. | <p>The Administration's response was issued to members vide LC Paper No. CB(2)1858/17-18(01) on 18 July 2018.</p> |

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| 9. Mental health of children and adolescents ¹ | 23 April 2018 (Joint meeting with the Panel on Education and Panel on Welfare Services) | <p>The Administration/HA was requested to:</p> <ul style="list-style-type: none"> (a) advise the annual expenditure for and the respective numbers of psychiatric doctors, psychiatric nurses, clinical psychologists, speech therapists, occupational therapists and medical social workers involved in the provision of child and adolescent psychiatric service at HA in the past three years; (b) advise the average waiting time for the services provided by DH and HA for assessing the developmental conditions of children, including attention deficit/hyperactivity disorder and autism spectrum disorder; (c) advise the respective numbers of Early Education and Training Centres, Special Child Care Centres and Integrated Programme in Kindergarten-cum-Child Care Centres in Hong Kong; (d) advise the number of cases whereby the parents concerned did not give consent for passing the assessment or progress information of their pre-school children, | The Administration will provide a response in due course. |

¹ The item has been separately included in the respective lists of follow-up actions of the Panel on Education and Panel on Welfare Services.

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|----------------|------------------------|--|----------------------------------|
| | | <p>who had undergone assessment under the Child Assessment Centres of DH or were under the subvented rehabilitation services or On-site Pre-school Rehabilitation Services of SWD and would proceed to primary schooling, to the Education Bureau for onward transmission to the recipient public sector primary schools;</p> <p>(e) advise, with the support of relevant statistics, whether the promulgation of guidelines on school-based homework policy in October 2015 had helped alleviate the pressure from homework on students and improved their mental well-being; and</p> <p>(f) in respect of the 34 and 10 children who were found to have borderline raised blood lead levels during the follow-up work on the 2016 lead in drinking water incidents and were respectively assessed by DH as having mild developmental problems and signs of developmental delay (as at end-March 2017), advise the actions taken by the Administration to facilitate appropriate follow-up and the latest development status of these children.</p> | |

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| 10. Proposed extension of Kowloon Psychiatric Observation Unit | 24 April 2018 | The Administration/HA was requested to advise the respective numbers of doctors, psychiatric nurses and allied health staff (with a breakdown by the grades involved), as well as the respective ratios of these healthcare professionals to patients, to support the operation of the Kowloon Psychiatric Observation Unit before and after the new "gazetted" ward commenced operation. | The Administration will provide a response in due course. |
| 11. Role and operation of Chinese Medicine Centres for Training and Research | 30 April 2018 | <p>The Administration/HA was requested to:</p> <p>(a) advise the respective average costs per attendance of the Chinese medicine general consultation service provided by the Chinese Medicine Centres for Training and Research ("CMCTRs") and the general outpatient services provided by HA;</p> <p>(b) in respect of the \$112 million earmarked by the Government in the 2018-2019 Estimates for, among others, the operation of CMCTRs, (i) advise the respective percentages of the provision as a share of the recurrent subvention to HA and public health expenditure in 2018-2019; and (ii) provide a breakdown of the provision by the expenditure items, including the amount of subsidy provided to each CMCTR directly;</p> | The Administration will provide a response in due course. |

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| | | <p>(c) advise whether the annual subsidy provided to each CMCTR directly had fully covered the annual salary costs for the 12 training places for Chinese medicine practitioner ("CMP") trainees required to be provided by each CMCTR for graduates of local undergraduate programmes in Chinese medicine;</p> <p>(d) advise the mechanism being put in place by HA to monitor the salary levels and annual pay adjustments for CMPs employed by the 18 CMCTRs; and</p> <p>(e) advise, in the form of table(s), the entry requirements, monthly salary range and the range of actual years of experience of each rank of the CMPs employed by the 18 CMCTRs and that of the medical staff employed by HA.</p> | |
| <p>12.Strategy and action plan to prevent and control non-communicable diseases in Hong Kong</p> | <p>21 May 2018</p> | <p>The Administration was requested to:</p> <p>(a) in respect of the nine targets set out in the document "Towards 2025: Strategy and Action Plan to Prevent and Control Non-communicable Diseases in Hong Kong", advise the details of the</p> | <p>The Administration's response was issued to members vide LC Paper No. CB(2)1637/17-18(01) on 20 June 2018.</p> |

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| | | <p>indicators adopted by the Administration to quantify the achievement or progress made under each target by 2025;</p> <p>(b) provide the latest number of baby care facilities on government premises; and</p> <p>(c) advise the details of health assessment service provided by the 18 Elderly Health Centres under DH for their enrolled members.</p> | |
| 13.Reprovisioning of Fu Shan Public Mortuary | 21 May 2018 | <p>The Administration was requested to provide the following supplement information before submitting the funding proposal to the Public Works Subcommittee for consideration:</p> <p>(a) the respective body storage capacities and utilization rates of the Fu Shan Public Mortuary, Kwai Chung Public Mortuary, Victoria Public Mortuary and Kowloon Public Mortuary in 2017, with a breakdown by the number of storage racks and body-holding trolleys in the cold chambers therein; and</p> <p>(b) the respective average lengths of time for body storage at the four public mortuaries referred to in (a) above in 2017.</p> | The Administration's response was issued to members vide LC Paper No. CB(2)1688/17-18(01) on 25 June 2018. |

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| <p>14. Update on Samaritan Fund and Community Care Fund Medical Assistance Programmes</p> | <p>19 June 2018</p> | <p>The Administration/HA was requested to:</p> <ul style="list-style-type: none"> (a) advise, with the aid of a flowchart, the processes in respect of regular reviews of and new drug listing on the HA Drug Formulary and the time required of for each process; (b) advise whether, and if so, when the self-financed drug Trastuzumab emtansine (also known as "T-DM1") would be included in the coverage of the safety net for treatment of HER2-positive advanced breast cancer; and (c) advise the respective estimated amount of additional expenditure involved for the scenarios whereby HA would subsidize 80%, 90% or 100% of patients' out-of-pocket expenses to purchase those self-financed drugs currently covered by the Samaritan Fund and the Community Care Fund Medical Assistance Programmes. | <p>The Administration will provide a response in due course.</p> |
| <p>15. District Health Centre Pilot Project in Kwai Tsing District</p> | <p>16 July 2018</p> | <p>The Administration/HA was requested to:</p> <ul style="list-style-type: none"> (a) provide, when available, for members' reference a copy of the tender document | <p>The Administration will provide a response in due course.</p> |

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| | | <p>in respect of the provision of services to operate the Kwai Tsing District Health Centre; and</p> <p>(b) advise the types of service to be provided by the Kwai Tsing District Health Centre which the Administration would provide subsidy for the patients concerned, and the respective levels of subsidies so offered.</p> | |

Council Business Division 2
Legislative Council Secretariat
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