



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

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24 April 2020

Ms Maisie Lam
Clerk to Subcommittee
Subcommittee on Issues Relating to the Support for Cancer Patients
Panel on Health Services
Legislative Council Complex
1 Legislative Council Road
Central

Dear Ms Lam,

**Legislative Council Panel on Health Services
Subcommittee on Issues Relating to the Support for Cancer Patients
Follow-up to the meetings on 21 January and 17 March 2020**

Thank you for your letter dated 9 April 2020 regarding follow-up actions required arising from the discussion at the Subcommittee meetings on 21 January and 17 March 2020. Having consulted the Hospital Authority (HA), our reply is as follows.

Follow-up to the meeting on 21 January

(a) Integrated Chinese-Western Medicine Pilot Programme

2. The evaluation study on the Integrated Chinese-Western Medicine (ICWM) Pilot Programme (the Programme) aims to identify problems encountered during implementation of the Programme and consolidate relevant experience with a view to enhancing ICWM services and providing suggestions for the future development of the Chinese Medicine Hospital (CMH) and postgraduate Chinese medicine (CM) training. The evaluation study was not

conducted for the purpose of evaluating the effectiveness of the Programme.

3. Results of the evaluation study are positive. The report will serve as reference for the future development of ICWM services and the CMH. We would follow up on the results and suggestions of the evaluation study as appropriate and explore with the HA on the further development of the Programme.

(b) Cancer patient episodes that received treatment in the HA

4. In 2019-20, the total number of cancer patient episodes that received treatment at standard fees and charges in the HA was 144 000 (projection as of 31 December 2019). According to the latest cancer statistics published by the Hong Kong Cancer Registry, there were a total of 33 075 new cancer cases in Hong Kong in 2017. Figures for 2018 and 2019 are not yet available.

(c) CM services funding

5. The Government has earmarked \$147 million for the HA's CM services in 2019-20. As the Chinese Medicine Clinics cum Centres for Training and Research (named Chinese Medicine Centres for Training and Research before March 2020) are operated by individual non-governmental organisation and the CM services they provide are not the HA's regular services, given that the types and nature of the services provided are different, it would not be appropriate to make a direct comparison between the recurrent subvention to the HA and the designated CM budget.

(d) Proposed partnership with hospitals of Tier 3 Class A in the Greater Bay Area

6. When considering proposals of partnership with other institutions, the HA needs to evaluate various factors, including quality of healthcare, clinical governance structure, administrative procedures, legal considerations, financial and insurance arrangement, operating environment and employee skills of the institution concerned, as well as the views of other stakeholders (including healthcare professionals and patients in Hong Kong). As the healthcare system of Hong Kong is different from those in the Mainland and overseas countries in terms of legal and regulatory regimes, the HA has no plan to establish the proposed partnership with hospitals of Tier 3 Class A in the Greater Bay Area at this stage.

Follow-up to the meeting on 17 March

Cancer Case Manager Programme

7. According to the current clinical workflow in public hospitals, patients with suspected diagnosis of cancer will first be seen by respective specialists in outpatient clinics for evaluation and diagnosis, with priority to receive necessary investigations according to urgency of their clinical conditions. Cancer Case Managers (CCMs), as overall care coordinator, would recruit patients diagnosed with breast or colorectal cancer through referrals from doctors or screening of pathology reports, and immediately start the follow-up and coordination of the necessary diagnostic process and treatment of the patients. In general, CCM and patient will first meet on the day that the doctor informs the patient about the diagnosis. As no waiting time is involved in the process, the HA does not maintain the requested statistics.

Yours sincerely,



(Clarissa Wan)

for Secretary for Food and Health

c.c. Chief Executive, Hospital Authority (Attn.: Ms Dorothy Lam)