

## **LEGISLATIVE COUNCIL BRIEF**

### **PREVENTION AND CONTROL OF DISEASE ORDINANCE (CAP.599)**

### **COMPULSORY QUARANTINE OF CERTAIN PERSONS ARRIVING AT HONG KONG REGULATION**

### **PREVENTION AND CONTROL OF DISEASE (DISCLOSURE OF INFORMATION) REGULATION**

#### **INTRODUCTION**

At the meeting of the Executive Council on 7 February 2020, the Council **ADVISED** and the Chief Executive **ORDERED** that the Compulsory Quarantine of Certain Persons Arriving at Hong Kong Regulation and the Prevention and Control of Disease (Disclosure of Information) Regulation at Annex should be made under section 8 of the Prevention and Control of Disease Ordinance (Cap. 599) to cover –

Annex

- (a) **Compulsory Quarantine of Certain Persons Arriving at Hong Kong** : A person who arrives at Hong Kong from the Mainland or a place outside the Mainland but has stayed in the Mainland for any period of time during 14 days preceding the date of arrival would be subject to a compulsory quarantine for a period of 14 days beginning on the date of arrival; and
- (b) **Disclosure of Information:**
  - (i) A health officer may require a person to give any information that the health officer reasonably believes is within the knowledge, in the possession or under the control of the person and is relevant to the handling of the public health emergency. A person commits an offence if he fails to comply with such a requirement or if he knowingly gives a health officer any

information that is false or misleading in a material particular;  
and

- (ii) A person commits an offence if the person, when attended by a medical practitioner acting in the course of professional practice, knowingly gives the medical practitioner any false or misleading information in relation to the person that is relevant to the risk of exposure to or contracting the disease

and be tabled at the Legislative Council (“LegCo”).

## **PRESENT POSITION**

### **(a) Strategy – speed, rigour and transparency, building on science and expert advice**

2. The fight against the novel coronavirus has been extremely challenging. The Department of Health (“DH”) received the first notification from the National Health Commission (“NHC”) on 31 December 2019 about a cluster of 27 pneumonia cases with unknown causes (with seven cases being serious). Having consulted our experts, the Secretary for Food and Health (“SFH”) met the media and alerted the community to stay vigilant that very evening. DH and the Hospital Authority (“HA”) launched immediately a surveillance system to trace cases of individuals with traveling history to the wet market in Wuhan in the past 14 days. On 4 January 2020, SFH promulgated the Preparedness and Response Plan for Novel Infectious Diseases (“the Plan”) and concurrently activated the Serious Response Level under the Plan. An inter-departmental response mechanism was instituted.

3. On 7 January 2020, the Chief Executive (“CE”) advised that we should adhere to three principles in meeting this public health challenge – **speed, rigour and transparency**. We also rely on science and the advice of world-renowned experts in developing our response.

4. By way of amendment to the Prevention and Control of Disease Ordinance (Cap.599) published on the gazette on 8 January 2020, we named “Serious Respiratory Disease associated with a Novel Infectious Agent” as a statutorily notifiable infectious disease. This was necessary to oblige relevant parties – clinics included, to report cases to the Centre for Health

Protection (“CHP”) to facilitate surveillance.

5. A delegation led by Under Secretary for Food and Health with two experts from DH and HA was invited by the NHC and the Hong Kong and Macao Affairs Office of the State Council to visit Wuhan on 13 to 14 January 2020. At about the same time upon the return of the delegation, NHC released the genome sequencing of the novel infectious agent, confirming that it was a new strain of coronavirus. The World Health Organization (“WHO”) subsequently named this the 2019-nCoV.

### **(b) Containment – challenges on the ground**

6. In the light of the rapidly-changing infection situation in the Mainland and experts’ advice, we have adopted a strategy of “**containment**” with specific measures to achieve early identification, early isolation and early treatment of the infected as well as measures to significantly reduce population mobility and in-population social contacts. This dovetails with our experience of the 2003 Severe Acute Respiratory Syndrome (“SARS CoV”) outbreak which showed that effective measures to control the spread of the infection include early detection of cases and swift control measures such as isolation, quarantine and disinfection were key in preventing outbreaks in Hong Kong.

7. The key components of our strategy include –

- (a) **Surveillance** - as the Wuhan cases multiply and spread outside of the Mainland, CHP has stepped up surveillance by tightening the reporting criteria four times – so that, as of now, all cases presenting with fever or (formerly “and”) acute respiratory symptoms; and either with travelling history to Hubei (formerly just Wuhan or its wet market), or having visited hospitals in the Mainland; or having contacts with confirmed 2019-nCoV cases – all within the past 14 days, require reporting.
- (b) **Temperature screening and health declarations** - while temperature screening has been conducted at all boundary control points (“BCPs”) on all **incoming** passengers, CHP has doubled its efforts and mounted extra targeted temperature checks on Wuhan-related and now Mainland travellers. **Health declarations** - to facilitate contact tracing more so than health tracking, were introduced at the airport on 21 January 2020, and rolled out to

selected land crossings as from 24 January 2020. Temperature screening for **outbound** travellers (i.e. exit screening) was also introduced on 1 February 2020 at the airport.

- (c) **Isolation** – for all cases notified as reasonably believed to be infected, HA will admit them into isolation beds in hospitals, with a view to preventing transmission into the community. As an extra precautionary measure, HA has implemented the Enhanced Laboratory Surveillance Scheme since 13 January 2020 to conduct testing on pneumonia patients meeting relevant criteria, which was extended twice to cover all pneumonia inpatients. As at noon 5 February 2020, 844 isolation beds were used with occupancy of 44%. When community outbreak is evident, HA would need to divert some mild cases for handling in Designated Clinics.
- (d) **Testing** - as testing against the new virus is made available, the Public Health Laboratory Centre (“PHLC”) under DH and recently HA have stepped up their capacities. Rapid testing in HA will considerably shorten the time to have results so that those with negative outcome may be discharged early in order not to overburden the hospital staff. There are two to three rounds of testing each day.
- (e) **Quarantine** – CHP has been sending close contacts of confirmed cases to quarantine facilities. Since 31 January 2020, individuals with travelling history to Hubei province have also been placed under quarantine for surveillance. Three quarantine facilities with a capacity of 97 units have been deployed but they are fast reaching full capacity. Making available extra sites for quarantine remains an overriding priority.
- (f) **Treatment** – confirmed cases would be sent to the Infectious Disease Centre of the Princess Margaret Hospital for isolation and treatment. Upon reaching its maximum capacity of 20 cases, the patients would be treated in other HA hospitals. Antivirals are given for the patients. As of noon on 6 February 2020, out of the 24 confirmed cases, one has passed away, two are in critical condition, and the rest are in stable condition.

### **(c) Health Emergency – Hong Kong and Worldwide**

8. Given the rapid spread of confirmed cases from Hubei to other provinces in the Mainland as well as places outside the Mainland, in tandem with the new year break, there is evident concern that Hong Kong, being a major transportation hub, could be affected.

9. CE elevated Hong Kong's response level from "Serious" to "Emergency" on 25 January 2020. Apart from personally chairing the Steering Committee cum Command Centre to oversee concerted efforts in fighting the disease, CE set up an expert advisory panel, comprising four world-renowned experts with rich experience in public health, epidemiology and clinical aspects to provide professional advice to her and the HKSAR Government in a direct and timely manner.

10. On 31 January 2020, the WHO declared that the outbreak of the new coronavirus constituted a Public Health Emergency of International Concern ("PHEIC"). A series of recommendations were made to prevent and control the spread of the disease globally.

11. As at 11:30 pm on 6 February 2020, the number of confirmed cases in the Mainland had reached 28 140 (565 deaths; 1 408 discharged), that in Hubei Province alone reached 19 665. More and more confirmed cases are also reported in remaining parts of the world. We now have 24 confirmed cases in Hong Kong, with 11 cases imported from Wuhan (as of 6 February 2020). However, an increasing number of cases without history of travelling outside Hong Kong or contact with known confirmed cases was detected in the past few days. The chances of a community outbreak in Hong Kong are high. One death case was recorded among the 24 cases and two other cases were in critical condition (as of 6 February 2020).

### **(d) Other all-out efforts to cut mobility at source**

#### *Reducing passenger traffic between the Mainland and Hong Kong*

12. From 27 January 2020, we imposed restriction on Hubei residents and those, with the exception of Hong Kong residents, who had visited Hubei Province in the past 14 days from entering Hong Kong. We suspended flights between Hong Kong and Wuhan from 24 January 2020, halved and would further reduce the number of flights between Hong Kong and other

Mainland cities by stages from 30 January 2020, suspended all services of the Hong Kong section of the Guangzhou-Shenzhen-Hong Kong Express Rail Link and the Intercity Through Train, and reduced cross-boundary coaches/shuttle bus and ferry services from the same date. The Mainland authorities have suspended issuing Group Tour endorsements and those under the Individual Visit Scheme since 28 January 2020. On 30 January 2020, we suspended passenger clearance at six control points linking Hong Kong and the Mainland. From 4 February 2020, all control points, except the airport and two land BCPs<sup>1</sup>, were closed to further curtail cross-boundary passenger traffic.

13. As a result of the above efforts, the number of passengers (including visitors and Hong Kong residents) who arrived in Hong Kong on 4 February 2020 via the two land BCPs dropped to about 28 700 (by 83 per cent compared with the figure before the closure of BCPs on 29 January 2020).

14. As from 5 February 2020, cross boundary transport services and flights to the Mainland were further trimmed. We also suspended services at the Kai Tak Cruise Terminal and Ocean Terminal.

15. We will keep the situation under close monitoring and will continue to liaise with the Mainland to explore further consolidation and tightening the management of the control points as the situation warrants.

#### *Enhancing “social distancing” to prevent spread of the disease*

16. To reduce social contacts in the community, the HKSAR Government earlier on extended the Chinese New Year holidays of secondary schools, primary schools, kindergartens, child care centres and special schools to 17 February 2020. In light of the latest developments, we have further extended class suspension to 1 March 2020 and will keep the situation under review. We have introduced “work from home” arrangement from 21 January 2020 to 2 February 2020 and CE announced on 31 January 2020 the extension of this arrangement to 9 February 2020. She also asked that apart from providing emergency and essential public services, departments should provide basic services to members of the public, albeit on a limited scale. The HKSAR Government has appealed to employers to continue to make flexible work arrangements for employees in accordance

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<sup>1</sup> Passenger clearance at the Kai Tak Cruise Terminal remained in service on 4 February 2020. Its service has been suspended with effect from 6 February 2020.

with their operational needs. Public events organized or sponsored by the Government that will attract a large number of people will continue to be cancelled by the HKSAR Government.

#### *Hong Kong residents returning from the Mainland*

17. To reduce the risk of the disease spreading in the community, all Hong Kong residents who have visited Hubei Province in the past 14 days have to submit themselves to health assessment upon their return to Hong Kong. Those who are asymptomatic will be placed under quarantine for surveillance. Hong Kong residents returning from other places on the Mainland have been advised to stay home for 14 days upon their return as far as the circumstances permit. Those who need to go out should wear a surgical mask for 14 days upon their return.

#### *Efforts to support front-line healthcare staff*

18. We are grateful to all front-line healthcare staff and other personnel committed to these disease prevention and control efforts. We will continue to fully support front-line healthcare staff. Although the supply of surgical masks remains tight, we will accord priority to their needs.

#### *Increasing supply of surgical masks through a multi-pronged approach*

19. The HKSAR Government will continue to spare no effort in sourcing globally, increasing local production, liaising with mask suppliers in the Mainland and seeking assistance from relevant authorities to help supplies reach Hong Kong, with a view to meeting the needs of healthcare workers and other personnel providing services to the public, as well as stabilising the market supply. The HKSAR Government also appeals to private and charitable organisations to donate surgical masks to the underprivileged, and stands ready to play a facilitation role with financial resources and co-ordination.

#### *Transparency*

20. Risk communication is key to managing the public anxieties during this critical period. Apart from daily briefings (normally at 4:30 p.m.) by the CHP and HA senior representatives on the number of cases (suspected, confirmed or under investigation), relevant contact tracing, quarantine, etc., the latest situation of the novel coronavirus infection in Hong Kong could

be found at the dedicated webpage: ([www.chp.gov.hk/en/features/102465.html](http://www.chp.gov.hk/en/features/102465.html)). Press conferences are also held by senior officials to announce major government decisions and measures, as well as to update the public on major developments in combating the virus.

## CHALLENGES ENCOUNTERED

21. Despite best endeavours, we have run into practical difficulties which necessitate the making of new regulations to tackle the public health emergency, as explained below -

- (a) **On limiting mobility to reduce risks of infection:** Notwithstanding the recent suspension of most of the land and sea BCPs and reduction in flights between Hong Kong and the Mainland, the number of cross-boundary passenger traffic remains high. After the implementation of further suspension of the BCPs on 4 February 2020, there were some 52 000 people crossing the two remaining land BCPs. We see an urgent need to introduce **new** provisions under the Prevention and Control of Disease Ordinance (Cap. 599) so that we can impose even more forceful measure to curtail cross-boundary passenger flow amidst clear and increasing risks of a community outbreak;
- (b) **On getting reliable travel histories:** As revealed from some confirmed cases, the patients involved did not give full details of their travel history or other relevant information to the health officer or the medical staff attending to them. This had caused unnecessary delay in identifying the patient for proper isolation and treatment as well as preventing the chance of further spreading and transmission of the disease. At the moment, sections 5, 7 and 8 of the Prevention and Control of Disease Regulation (Cap. 599A) require specified persons including medical practitioners, operators of cross-boundary conveyances and travellers<sup>2</sup> to give information as required by health officer. The existing law is **not** applicable to those who have already entered Hong Kong or are residents in Hong Kong. Moreover, there are no provisions under the current Prevention and Control of Disease Regulation (Cap. 599A) that

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<sup>2</sup> means a person arriving in or seeking to leave Hong Kong



empower health officers<sup>3</sup> to request patients or anyone to give relevant information or penalize a person (other than some particular categories of persons) for giving false or misleading information. There is a strong need to plug these loopholes by compelling the patients as well as anyone who is believed to possess information that would be useful or relevant to any suspected/confirmed case to provide such information to a health officer in this context. At the same time, it is important to make the provision of false or misleading information to health officer/attending medical practitioner a criminal offence.

We believe that swift and robust actions including introduction of relevant regulations must be done as soon as possible to address the above problems for effectively containing the spread of the disease in Hong Kong.

## **PROPOSED ENHANCEMENT MEASURES**

22. We propose the following enhancement measures –

- (a) **To mandate for all persons having stayed in the Mainland for any period during the 14 days preceding arrival, regardless of nationality and travel documents used, to compulsory quarantine for 14 days:** The CE announced on 5 February 2020 that this measure would take effect on 8 February 2020. It should be noted that these persons are considered to be relatively lower risks as compared with those who are close contacts with the confirmed cases or have been to Hubei Province in the past 14 days. Hence, our level of monitoring and support to these persons would be adjusted accordingly. We consider it necessary for the requirement to cover all travellers entering Hong Kong either from the Mainland or having travelled to the Mainland in the past 14 days, since the 2019-nCoV infection has gone viral across all parts of the Mainland. Nevertheless, the Chief Secretary for Administration (“CS”) will be empowered to exempt certain categories of people providing specified services etc. from the quarantine requirement. As set out in the subsidiary legislation, these include services for the purposes that –

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<sup>3</sup> means the Director of Health, Deputy Director of Health or the Controller, Centre for Health Protection of the Department of Health; or medical practitioners appointed by the Director as a health officer or port health officer.

- (i) are necessary for the supply of goods or services required for the normal operation of Hong Kong or the daily needs of the people in Hong Kong;
- (ii) are necessary for governmental operation;
- (iii) are necessary for the protection of the safety or health of the people in Hong Kong or the handling of the health emergency;
- or
- (iv) because of the exceptional circumstances of the case, otherwise serve the public interest of Hong Kong.

CS would exercise his power to designate categories of people which can be exempted from the quarantine within the remit of the above four categories. Breaching the quarantine requirement would be an offence and liable to a penalty of a fine at level 4 and imprisonment for six months.

- (b) **To empower a health officer to require a person to disclose or furnish any information** whom the health officer reasonably suspects or believes is in the possession, within the knowledge or under the control of that person and is relevant to the handling of a state of the public health emergency. We also consider it necessary to extend the power to other medical practitioners who would have encountered a person involved in such public health emergency. It would be a criminal offence for any person to provide false or misleading information to the health officer/medical practitioners concerned. Committing the relevant offences would be liable to a penalty of a fine at level 3 and imprisonment for six months.

## **OTHER OPTIONS**

23. There are no other timely options other than making emergency regulations under the Prevention and Control of Disease (Cap.599) having regard to the current situation of public health emergency.

## **THE REGULATIONS**

24. The main provisions of the **Compulsory Quarantine of Certain Persons Arriving at Hong Kong Regulation** are set out below –

- (a) Section 3 provides for the compulsory quarantine arrangements and exceptions;
- (b) Section 4 empowers CS to grant exemption to persons who meet certain criteria;
- (c) Section 8 sets out the restrictions during a quarantine period; and
- (d) Section 10 empowers an authorized officer to cancel a quarantine order in certain circumstances.

25. The main provisions of the **Prevention and Control of Disease (Disclosure of Information) Regulation** are set out below -

- (a) Section 3 makes it an offence for failing to give information required by a health officer, or giving to a health officer information that is false or misleading in a material particular; and
- (b) Section 4 makes it an offence for giving to a medical practitioner false or misleading information on specified particulars.

The regulations would be valid for three months (i.e. expires at midnight on 7 May 2020).

## **LEGISLATIVE TIMETABLE**

26. The legislative timetable will be –

Publication in the Gazette	7 February 2020
Commencement	8 February 2020
Tabling at the Legislative Council	19 February 2020

## **IMPLICATIONS OF THE PROPOSAL**

27. The proposal is in conformity with the Basic Law, including the provisions concerning human rights.

## **PUBLIC CONSULTATION**

28. Given the exigency of the situation, public consultation is not feasible.

## **PUBLICITY**

29. The Administration arranged a press conference and issued a press release on 7 February 2020. A spokesperson will be made available to respond to public or media enquiries.

## **BACKGROUND**

30. Section 8 of the Prevention and Control of Disease Ordinance (Cap. 599) empowers the CE in Council to make public health emergency regulation for the purposes of preventing, combating or alleviating the effects of a public health emergency and protecting public health. Among others, the occurrence of a novel infectious disease or the imminent threat of an epidemic that has a high probability of causing large number of deaths or serious disabilities (whether or not long term) constituted a public health emergency.

## **ENQUIRIES**

31. For enquiries on this brief, please contact the Food and Health Bureau at 3509 8765.

**Food and Health Bureau  
February 2020**

## Compulsory Quarantine of Certain Persons Arriving at Hong Kong Regulation

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## Compulsory Quarantine of Certain Persons Arriving at Hong Kong Regulation

(Made by the Chief Executive in Council under section 8 of the Prevention and Control of Disease Ordinance (Cap. 599))

### 1. Commencement

This Regulation comes into operation on 8 February 2020.

### 2. Interpretation

In this Regulation—

*assigned place of quarantine* (指派檢疫地點) means a place mentioned in section 6(a);

*authorized officer* (獲授權人員) means an authorized officer appointed under section 11;

*Mainland* (內地) means the part of China other than Hong Kong, Macao and Taiwan;

*place of quarantine* (檢疫地點) means—

(a) an assigned place of quarantine; or

(b) a place mentioned in section 6(b);

*public health emergency* (公共衛生緊急事態) means the public health emergency within the meaning of section 8(5) of the Ordinance concerning the disease specified in item 34AAA of Schedule 1 to the Ordinance;

*quarantine order* (檢疫令) means an order made under section 3(1);

*quarantine period* (檢疫期) means the period of 14 days mentioned in section 3(1).

### 3. **Compulsory quarantine of certain persons arriving at Hong Kong**

- (1) An authorized officer must, by written order, place a person who arrives at Hong Kong under quarantine for a period of 14 days beginning on the date of arrival if—
  - (a) the person arrives at Hong Kong from the Mainland; or
  - (b) the person arrives at Hong Kong from a place outside the Mainland but has stayed in the Mainland for any period of time during the 14 days before the date of arrival.
- (2) A quarantine order must specify the terms of quarantine.
- (3) An authorized officer may vary the terms of quarantine specified in a quarantine order.
- (4) Subsection (1)(a) does not apply to—
  - (a) a person who—
    - (i) arrives at the Hong Kong International Airport from the Mainland or enters the waters of Hong Kong solely for the purpose of leaving Hong Kong and, while in Hong Kong, does not pass through immigration control; or
    - (ii) falls within the description of subsection (1)(b) and, while in Hong Kong, does not pass through immigration control;
  - (b) a person who is designated under section 4(1); or
  - (c) a person who falls within a category of persons designated under section 4(1).
- (5) For the purposes of subsection (1), a person who arrives at the Hong Kong International Airport on an aircraft that landed in Hong Kong after taking off in the Mainland is not regarded as arriving from the Mainland if no person entered the cabin of the aircraft when the aircraft was in the Mainland.

- (6) For the purposes of subsection (1), if a person travels from Macao to Hong Kong, or from Hong Kong to Macao, via the Hong Kong-Zhuhai-Macao Bridge—
  - (a) the person's passing through the section of the Bridge in the Mainland during the journey is not regarded as a stay in the Mainland; and
  - (b) accordingly, if the person travels from Macao to Hong Kong, the person is not regarded as arriving at Hong Kong from the Mainland.

### 4. **Chief Secretary may exempt certain persons**

- (1) The Chief Secretary for Administration (*Chief Secretary*) may designate any person or category of persons for the purposes of section 3(4)(b) or (c) if the Chief Secretary is satisfied that the person's or persons' entry into Hong Kong—
  - (a) is necessary for the supply of goods or services required for the normal operation of Hong Kong or the daily needs of the people of Hong Kong;
  - (b) is necessary for governmental operation;
  - (c) is necessary for the protection of the safety or health of the people of Hong Kong or the handling of the public health emergency; or
  - (d) because of the exceptional circumstances of the case, otherwise serves the public interest of Hong Kong.
- (2) The Chief Secretary may, if the Chief Secretary considers necessary, attach conditions to a designation.
- (3) The Chief Secretary may cancel or vary a designation or a condition attached to a designation.
- (4) A designation, attachment of conditions, cancellation or variation under this section must be made in writing.



- (5) A designation does not derogate from any power of a health officer under the Prevention and Control of Disease Regulation (Cap. 599 sub. leg. A) concerning quarantine and isolation of persons.

#### 5. Giving false or misleading information about status is offence

- (1) A person who is not designated under section 4(1) must not represent to any public officer that the person is so designated.
- (2) A person who does not fall within a category of persons designated under section 4(1) must not knowingly or recklessly give any information that is false or misleading in a material particular to any public officer with a view to making the officer believe that the person falls within that category of persons.
- (3) A person who contravenes subsection (1) or (2) commits an offence and is liable on conviction to a fine at level 4 and to imprisonment for 6 months.

#### 6. Place of quarantine

A person placed under quarantine under section 3 must, during the quarantine period, be quarantined—

- (a) in a place assigned by an authorized officer; or
- (b) if an authorized officer considers it prudent and appropriate in the circumstances of the case—in a place nominated by the person when the quarantine order is made against the person.

#### 7. Power to restrain persons for quarantine etc.

If a person placed under quarantine under section 3 is to be quarantined in an assigned place of quarantine (*the place*), an authorized officer may, for effecting the quarantine—

- (a) restrain the person and convey the person to the place; and

- (b) detain the person in the place.

#### 8. Restrictions during quarantine

- (1) A person must not leave the place of quarantine in which the person is placed under quarantine under section 3 without permission given by an authorized officer.
- (2) A person must not, without permission given under subsection (3), knowingly enter an assigned place of quarantine in which another person is placed under quarantine under the Ordinance unless—
- (a) the person is an authorized officer or a health officer; or
- (b) the person is to be placed under quarantine under section 3 in the place.
- (3) An authorized officer may give written permission for the purposes of subsection (2) to any person or persons of any category specified in the permission to enter an assigned place of quarantine subject to the exceptions, conditions or restrictions specified in the permission.
- (4) A person against whom a quarantine order is made must not contravene the terms of quarantine specified in the order.
- (5) A person who, without reasonable excuse, contravenes subsection (1), (2) or (4) commits an offence and is liable on conviction to a fine at level 4 and to imprisonment for 6 months.

#### 9. Giving false or misleading information to authorized officer is offence

A person who knowingly or recklessly gives any information that is false or misleading in a material particular to an authorized officer in connection with the performance of the officer's function under this Regulation commits an offence and is liable on conviction to a fine at level 4 and to imprisonment for 6 months.

**10. Cancellation of quarantine order**

- (1) This section applies to a person placed under quarantine under section 3 if, during the quarantine period—
  - (a) the person is designated under section 4(1);
  - (b) a category of persons within which the person falls is designated under section 4(1); or
  - (c) the person establishes that when the quarantine order was made, the person—
    - (i) was a person designated under section 4(1); or
    - (ii) fell within a category of persons designated under section 4(1).
- (2) An authorized officer must, as soon as practicable after becoming aware that this section applies to the person, cancel the quarantine order made against the person.

**11. Authorized officers**

- (1) The Director may appoint any public officer as an authorized officer for the purposes of this Regulation.
- (2) No personal liability is incurred by an authorized officer or a person acting under the officer's direction in respect of anything done or omitted to be done by the officer or person in good faith in the performance or purported performance of a function under this Regulation.

**12. Expiry**

This Regulation expires at midnight on 7 May 2020.

Clerk to the Executive Council

COUNCIL CHAMBER

2020

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### **Explanatory Note**

The object of this Regulation is to introduce a temporary system of mandatory quarantine for—

- (a) persons arriving at Hong Kong from the Mainland; and
- (b) persons arriving at Hong Kong from other places but having stayed in the Mainland during the 14 days before the date of arrival.

- 2. Section 1 prescribes the commencement date.
- 3. Section 2 contains the definitions used in the Regulation.
- 4. Section 3 empowers authorized officers to place the target persons under quarantine and prescribes several types of persons who are not subject to the measure.
- 5. Section 4 empowers the Chief Secretary to exempt individual persons or categories of persons who satisfy certain criteria. Section 5 provides for related offences.
- 6. Section 6 makes provisions for places of quarantine.
- 7. Section 7 confers enforcement powers on authorized officers.
- 8. Section 8 prescribes restrictions during quarantine.
- 9. Section 9 prohibits giving false or misleading information to authorized officers.
- 10. Section 10 empowers authorized officers to cancel quarantine orders in certain circumstances.
- 11. Section 11 makes provisions for authorized officers.
- 12. Section 12 provides for the expiry of the Regulation.

## Prevention and Control of Disease (Disclosure of Information) Regulation

(Made by the Chief Executive in Council under section 8 of the Prevention and Control of Disease Ordinance (Cap. 599))

### 1. Commencement

This Regulation comes into operation on 8 February 2020.

### 2. Interpretation

In this Regulation—

*disease* (疾病) means the disease specified in item 34AAA of Schedule 1 to the Ordinance;

*public health emergency* (公共衛生緊急事態) means the public health emergency within the meaning of section 8(5) of the Ordinance concerning the disease.

### 3. Requirement to give information to health officer

- (1) A health officer may require a person to give any information that the health officer reasonably believes—
  - (a) is within the knowledge, in the possession or under the control of the person; and
  - (b) is relevant to the handling of the public health emergency.
- (2) A person commits an offence if the person fails to comply with a requirement made under subsection (1).
- (3) It is a defence to a charge under subsection (2) to prove that the information required to be given was not within the knowledge, in the possession or under the control (as the case may be) of the person charged, and could not reasonably have been ascertained or obtained (as the case may be) by the person.

- (4) A person commits an offence if the person, in purported compliance with a requirement made under subsection (1), knowingly gives to a health officer any information that is false or misleading in a material particular.
- (5) A person who commits an offence under subsection (2) or (4) is liable on conviction to a fine at level 3 and to imprisonment for 6 months.

### 4. Giving false or misleading information to medical practitioner is offence

- (1) A person commits an offence if the person, when attended by a medical practitioner acting in the course of professional practice, knowingly gives to the medical practitioner any false or misleading information of the person that is relevant to the risk of exposure to or contracting the disease.
- (2) A person who commits an offence under subsection (1) is liable on conviction to a fine at level 3 and to imprisonment for 6 months.
- (3) In this section—
 

*information* (資料), in relation to a person, means any information about—

  - (a) the places where the person has been to;
  - (b) the medical history of the person; or
  - (c) any contact between the person and other persons.

**5. Expiry**

This Regulation expires at midnight on 7 May 2020.

Clerk to the Executive Council

COUNCIL CHAMBER

2020

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**Explanatory Note**

The object of this Regulation is to provide for certain offences in respect of the public health emergency concerning the disease specified in item 34AAA of Schedule 1 to the Prevention and Control of Disease Ordinance (Cap. 599), which is also known as the 2019-nCoV acute respiratory disease.

2. Section 1 prescribes the commencement date.
3. Section 2 contains the definitions used in the Regulation.
4. Section 3 makes it an offence for failing to give information required by a health officer, or giving to a health officer information that is false or misleading in a material particular.
5. Section 4 makes it an offence for giving to a medical practitioner false or misleading information on specified particulars.
6. Section 5 provides for the expiry of the Regulation.