

**Replies to written questions raised by Finance Committee Members
in examining the Estimates of Expenditure 2007-08**

**Controlling Officer : Director of Health
Head 37 - Department of Health**

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Reply Serial No.	Question Serial No.	Name of Member	Programme
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**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

CSB042

Question Serial No.

2274

Head: 37 Department of Health

Subhead (No. & title):

Programme: (7) Medical and Dental Treatment for Civil Servants

Controlling Officer: Director of Health

Director of Bureau: Secretary for the Civil Service

Question:

“The Government, working together with the Hospital Authority (HA), aims to develop an on-line Medical and Dental Benefits Eligibility Checking System”. Please advise this Committee:

- (i) What are the details of the plan, and timeframe of implementation? How the efficiency of medical and dental service institutions is expected to be enhanced by the system?
- (ii) What is the expenditure involved?

Asked by: Hon. SIN Chung-kai

Reply:

At present, persons eligible for civil service medical and dental benefits (eligible persons) are required to present a valid treatment application form or a pensioner's card to prove their eligibility when seeking medical or dental treatment at the facilities of the Department of Health and the Hospital Authority (HA) (designated facilities). Eligible persons are also required to produce proof of identity for inspection by staff of the designated facilities. As a measure to streamline administrative procedures, the Government is working jointly with HA to develop a Medical and Dental Benefits Eligibility Checking System (ECS) to replace the current mode of paper-based eligibility checking. The ECS is a computer-based system which will enable all designated facilities to have on-line access to the data stored in the system for verification of eligibility status of the eligible persons when they seek treatment. Upon implementation of the ECS, eligible persons will no longer be required to present a treatment application form/pensioner's card when they attend the designated facilities. They will only be required to produce proof of identity for inspection by staff of the designated facilities, the latter will check their eligibility status through the ECS. The ECS will enhance efficiency of the eligibility verification process, bring greater convenience to eligible persons and save administrative work of departmental management in issuing the treatment application forms/pensioner's cards.

The ECS will be implemented in two phases. We aim to roll out the first and second phases in the fourth quarter of 2007 and the second quarter of 2008 respectively.

The non-recurrent cost of developing the ECS is estimated at \$8.8 million and the annual recurrent cost is estimated at \$2.9 million.

Signature _____

Name in block letters _____ Dr P Y LAM

Post Title _____ Director of Health

Date _____ 15 March 2007

Examination of Estimates of Expenditure 2007-08

**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

CSB043

Question Serial No.

2603

Head: 37 Department of Health

Subhead (No. & title):

Programme: (7) Medical and Dental Treatment for Civil Servants

Controlling Officer: Director of Health

Director of Bureau: Secretary for the Civil Service

Question:

Please list respectively by civil servants, retired civil servants and their eligible dependants:

- a. attendances of medical and dental benefits provided by the Government in 2006-07. Please list the attendances of in-patient, out-patient and dental services and other benefits;
- b. medical cost incurred by the medical and dental benefits used by the above persons in 2006-07;
- c. the number of people joining voluntary medical insurance schemes and the Government expenditure on the relevant insurance schemes.

Asked by: Hon. YEUNG Sum

Reply:

- (a) & (b) Medical and dental benefits are provided to civil service eligible persons through the facilities managed by the Hospital Authority (HA) and Department of Health (DH). The projected attendance figures and estimated costs of providing civil service medical and dental benefits for 2006-07 are as follows -

<u>Services</u>	<u>Attendance</u>	<u>Estimated Expenditure</u> (\$ million)
(i) In-patient services provided by HA	335 000*	992.0
(ii) Out-patient services		
- provided by HA	1 851 000	975.0
- provided by DH	172 000	45.5
(iii) Dental services provided by DH	632 000	350.2
(iv) Payment and reimbursement of medical fees and hospital charges	-	<u>85.0</u>
Total		<u>2,447.7</u>

* figure refers to bed-days

Breakdown of the above figures by civil servants, pensioners and eligible dependants is not available.

- (c) The Voluntary Medical Insurance Scheme for Civil Servants and Non-Civil Service Staff, introduced in May 1996 and co-ordinated by the Civil Service Bureau, is open to serving officers only. The scheme aims to provide an option for officers to take out medical insurance for themselves and their families. As at 31 December 2006, 36 122 applications from civil servants to join the scheme have been approved. Those who join the scheme are required to pay the full premium and there is no subsidy from the Government.

Signature _____

Name in block letters Dr P Y LAM

Post Title Director of Health

Date 15 March.2007

**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB(H)009

Question Serial No.

0169

Head: 37 Department of Health

Subhead (No. & title):

Programme: (1) Statutory Functions

Controlling Officer: Director of Health

Director of Bureau: Secretary for Health, Welfare and Food

Question:

The provision for 2007-08 amounts to \$308 million, representing an increase of 13.8% over the revised estimate of \$270.7 million for 2006-07. What are the reasons for the increase?

Asked by: Hon. CHAN Yuen-han

Reply:

The increase is mainly due to additional provision for carrying out enforcement duties as required under the Smoking (Public Health) Ordinance, implementing temperature screening measures at new Immigration Control Points, and strengthening port health measures in relation to the revised International Health Regulations.

Signature _____

Name in block letters _____ Dr P Y LAM

Post Title _____ Director of Health

Date _____ 13.3.2007

**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB(H)010

Question Serial No.

0170

Head: 37 Department of Health

Subhead (No. & title):

Programme: (2) Disease Prevention

Controlling Officer: Director of Health

Director of Bureau: Secretary for Health, Welfare and Food

Question:

The financial provision for Government sector has been revised from the original estimate of \$1,341.5 million to \$1,239.7 million for 2006-07, representing a decrease of 7.6%. What are the reasons for the decrease?

Asked by: Hon. CHAN Yuen-han

Reply:

The decrease is mainly due to two reasons. First, the delivery of certain consignments of antivirals for influenza pandemic was advanced to 2005-06, hence advancing the payments to 2005-06 and reducing the cashflow requirements in 2006-07. Also, it has taken longer time than anticipated to introduce the new childhood immunisation programme. As a result, only part of the funding earmarked in 2006-07 for the purchase of the new vaccines will be used.

Signature _____

Name in block letters _____ Dr P Y LAM

Post Title _____ Director of Health

Date _____ 13.3.2007

**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB(H)011

Question Serial No.

0171

Head: 37 Department of Health

Subhead (No. & title):

Programme: (2) Disease Prevention

Controlling Officer: Director of Health

Director of Bureau: Secretary for Health, Welfare and Food

Question:

The total financial provision for subvented sector has been revised from the original estimate of \$32.9 million to \$31.4 million for 2006-07, representing a decrease of 4.6%. What are the reasons for the decrease?

Asked by: Hon. CHAN Yuen-han

Reply:

There is only one subvented organisation under this Programme, namely the Family Planning Association of Hong Kong. The decrease in provision reflects the requirements of the organisation.

Signature _____

Name in block letters _____ Dr P Y LAM

Post Title _____ Director of Health

Date _____ 15.3.2007

**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB(H)012

Question Serial No.

0243

Head: 37 Department of Health

Subhead (No. & title):

Programme: (2) Disease Prevention

Controlling Officer: Director of Health

Director of Bureau: Secretary for Health, Welfare and Food

Question:

It is mentioned under Matters Requiring Special Attention in 2007-08 that a new childhood immunisation programme will be introduced in phases starting from 2007. Please inform this Committee of the respective cost of switching from a 3-in-1 formulation vaccine to a 4-in-1 combined formulation vaccine. What are the details of the provision under this programme?

Asked by: Hon. KWOK Ka-ki

Reply:

The vaccine cost for the former childhood immunisation programme (involving the use of the 3-in-1 formulation) was \$1.3 million a year. The provision for the new programme in 2007 which will use the 4-in-1 formulation is \$30.7 million.

Signature _____

Name in block letters _____ Dr P Y LAM

Post Title _____ Director of Health

Date _____ 13.3.2007

**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB(H)013

Question Serial No.

0255

Head: 37 Department of Health

Subhead (No. & title):

Programme: (1) Statutory Functions

Controlling Officer: Director of Health

Director of Bureau: Secretary for Health, Welfare and Food

Question:

As revealed by the Central Registry of Drug Abuse (CRDA), there is a rising trend of the abuse of cough preparations containing codeine (commonly called cough medicine) recently. It was indicated at the LegCo Panel on Health Services in June 2005 that the Administration was aware of the situation and was closely monitoring the sale of pharmaceutical products containing codeine and would step up enforcement actions to curb their illegal sale. However, the number of inspection of licensed retail drug premises conducted by the Department of Health in 2005, 2006 and 2007 (Estimate) remained/remains as 6 700. As such, will the Administration advise this Committee how to effectively curb the rising trend of abuse of cough medicine with the same number of inspection?

Asked by: Hon. KWOK Ka-ki

Reply:

The Department of Health adopts a risk-based approach in inspection. While the target of inspection of licensed retail drug premises is an average of twice a year per premises, those with a poor track record of law compliance are inspected more frequently than others. On top of inspections of licensed retail drug premises, the Department of Health has stepped up test-purchases to detect illegal sale of cough medicines and prosecution of offenders. The number of test-purchases increased from 679 in 2004 to 1 657 in 2006, and the number of prosecutions from 11 to 27.

Signature _____

Name in block letters _____ Dr P Y LAM

Post Title _____ Director of Health

Date _____ 13.3.2007

**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB(H)014

Question Serial No.

0256

Head: 37 Department of Health

Subhead (No. & title):

Programme: (1) Statutory Functions

Controlling Officer: Director of Health

Director of Bureau: Secretary for Health, Welfare and Food

Question:

As revealed by the Central Registry of Drug Abuse (CRDA), there is a rising trend of the abuse of cough preparations containing codeine (commonly called cough medicine) recently. It was indicated at the LegCo Panel on Health Services in June 2005 that the Administration was aware of the situation and was closely monitoring the sale of pharmaceutical products containing codeine and would step up enforcement actions to curb their illegal sale. However, the number of inspection of licensed retail drug premises conducted by the Department of Health in 2005, 2006 and 2007 (Estimate) remained/remains as 6700. As such, will the Administration advise this Committee what were/are the resources and manpower involved for the above work in the past three years and the coming financial year?

Asked by: Hon. KWOK Ka-ki

Reply:

In the Pharmaceutical Service of the Department of Health, the professional staff involved in law enforcement duties (including inspections of retail drug premises, investigations on receipt of complaints, test-purchases to detect illegal sale of cough medicines and prosecution of the offenders) comprise four Senior Pharmacists and 24 Pharmacists. The staff cost in 2004-05, 2005-06 and 2006-07 was \$18.1 million, \$17.4 million and \$17.4 million respectively, and the estimated staff cost for 2007-08 is \$17.4 million.

Signature _____

Name in block letters _____ Dr P Y LAM

Post Title _____ Director of Health

Date _____ 13.3.2007

**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB(H)020

Question Serial No.

0480

Head: 37 Department of Health

Subhead (No. & title):

Programme: (2) Disease Prevention

Controlling Officer: Director of Health

Director of Bureau: Secretary for Health, Welfare and Food

Question:

The Administration will continue to enhance the preparedness for influenza pandemic and other public health emergencies in 2007-08. Please inform this Committee of the details of the relevant measures and the expenditure involved.

Asked by: Hon. CHAN Wai-yip, Albert

Reply:

Enhancing preparedness for influenza pandemic and other public health emergencies is part and parcel of the Department of Health's work on prevention and control of infectious diseases, which is mainly undertaken by the Centre for Health Protection (CHP) and the Port Health Office (PHO). In 2007-08, total allocation to the CHP and PHO for their overall functions, which include prevention and control of infectious diseases, is \$1,006.1 million.

In 2007-08, the CHP will continue to work towards its three strategic directions, namely real-time surveillance, rapid intervention and responsive risk communication in enhancing the preparedness for influenza pandemic and other public health emergencies. For example, the CHP has drawn up and will regularly update preparedness plans for major infectious disease outbreaks with public health significance, including influenza pandemic. It will continue to strengthen its disease surveillance system; stockpile antivirals; build surge capacity and collaborate with regional and international partners on the prevention and control of infectious diseases. It will also conduct exercises and drills for emergency response against major infectious disease outbreaks. Temperature screening measures for inbound passengers at immigration control points will continue.

Signature _____

Name in block letters _____ Dr P Y LAM

Post Title _____ Director of Health

Date _____ 15.3.2007

**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB(H)048

Question Serial No.

0975

Head: 37 Department of Health

Subhead (No. & title):

Programme: (1) Statutory Functions

Controlling Officer: Director of Health

Director of Bureau: Secretary for Health, Welfare and Food

Question:

Under this programme, the target of inspection of licensed retail drug premises at an average of twice a year per premises was 100% achieved in 2005 and 2006. Will the Administration consider increasing the number of inspection so as to crack down on unlawful operations? If so, what are the estimated additional manpower and resources? If not, why?

Asked by: Hon. LI Kwok-ying

Reply:

The Department of Health (DH) adopts a risk-based approach in inspection. While the target of inspection of licensed retail drug premises is an average of twice a year per premises, those with a poor track record of law compliance are inspected more frequently than others. In addition, DH has stepped up test-purchases to detect illegal sale of cough medicines and prosecution of offenders. The number of test-purchases increased from 679 in 2004 to 1 657 in 2006, and the number of prosecutions from 11 to 27. The manpower and resources for the inspections and test purchases will remain unchanged in 2007/08.

Signature _____

Name in block letters _____ Dr P Y LAM

Post Title _____ Director of Health

Date _____ 13.3.2007

**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB(H)049

Question Serial No.

0976

Head: 37 Department of Health

Subhead (No. & title):

Programme: (2) Disease Prevention

Controlling Officer: Director of Health

Director of Bureau: Secretary for Health, Welfare and Food

Question:

The number of attendances at Maternal and Child Health Centres for family planning service has dropped from 210 000 in 2005 to 179 000 in 2006. Similarly, the number of attendances at family planning clinics operated by Family Planning Association has dropped from 163 000 in 2005 to 155 000 in 2006. In this regard, please advise this Committee the reasons for such decrease. Will any measures be adopted to promote the relevant service? If yes, what are the estimated manpower and resources involved?

Asked by: Hon. LI Kwok-ying

Reply:

The decrease in attendance for the family planning service in 2006 at both Maternal and Child Health Centres (MCHCs) of the Department of Health (DH) and the Family Planning Association of Hong Kong (FPAHK) is a result of streamlining of procedures, which enables clients to make less re-visits.

DH promotes its family planning service to potential clients during their visits for antenatal, postnatal and child health services at MCHCs. The service is also publicised through the DH's website and information leaflets. Similarly, the FPAHK promotes its family planning service to its clients during their visits and through its website, the electronic media and information leaflets.

In addition, new arrivals from the Mainland will be provided with information on MCHCs and FPAHK in a booklet published specifically for them.

Signature _____

Name in block letters _____ Dr P Y LAM

Post Title _____ Director of Health

Date _____ 15.3.2007

**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB(H)050

Question Serial No.

0977

Head: 37 Department of Health

Subhead (No. & title):

Programme: (3) Health Promotion

Controlling Officer: Director of Health

Director of Bureau: Secretary for Health, Welfare and Food

Question:

In 2007-08, the Department of Health will strengthen publicity and education programme on smoking prevention and cessation. Please advise on the expenditures in 2005-06 and 2006-07 for the corresponding work. What work will commence in 2007-08? In this regard, what will the expenditure on smoking prevention and cessation be?

Asked by: Hon. LI Kwok-ying

Reply:

Both the Tobacco Control Office (TCO) of the Department of Health (DH) and the Hong Kong Council on Smoking and Health (COSH) conduct publicity, health education and promotional activities on tobacco control including that on smoking prevention and cessation. The actual expenditure for such activities in 2005-06 was \$29.4 million while the revised estimate for 2006-07 is \$28.8 million. The estimate for 2007-08 is \$29.6 million. Smoking prevention and cessation are both part of the publicity activities and we do not have their revised expenditures.

In 2007-08, TCO will focus its publicity on new no smoking areas through TV and radio as well as posters and pamphlets. Education and publicity efforts on the harmful effects of smoking and secondhand smoke and the smoking cessation hotline service will continue. COSH will conduct media publicity campaign to promote smoking cessation, as well as the benefits of a smoke-free environment. For youth smoking intervention, COSH will organise a new interactive education theatre programme and a youth tobacco control advocate training programme.

Signature _____

Name in block letters _____ Dr P Y LAM

Post Title _____ Director of Health

Date _____ 15.3.2007

**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB(H)051

Question Serial No.

0978

Head: 37 Department of Health

Subhead (No. & title):

Programme: (2) Disease Prevention

Controlling Officer: Director of Health

Director of Bureau: Secretary for Health, Welfare and Food

Question:

Among the number of new born babies attending maternal and child health centres in 2006, what was the percentage of the babies who were born in Hong Kong and whose parents were not Hong Kong residents? Does the Administration have any further plan to increase the number of attendances of such babies? What are the estimated staff establishment and expenditure involved?

Asked by: Hon. LI Kwok-ying

Reply:

Among the 57 000 local-born babies aged under one year who registered in Maternal and Child Health Centres (MCHCs) in 2006, about 9 700 (17%) were babies whose parents were not Hong Kong residents. The workload in providing services to these babies has been absorbed by the existing manpower resource in MCHCs.

Information about services of the MCHCs is available in the postnatal wards of all public hospitals and through various channels. However, babies born to non-Hong Kong-resident parents may leave Hong Kong soon after birth or attend other service providers in Hong Kong or elsewhere. The Department of Health (DH) will continue to promote the use of MCHC's services by new born babies. The DH will make available to parents who leave Hong Kong soon after giving birth, the necessary health advice, such as those related to the care of the newborn and the need to receive immunisation.

Signature _____

Name in block letters _____ Dr P Y LAM

Post Title _____ Director of Health

Date _____ 15.3.2007

**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB(H)052

Question Serial No.

1335

Head: 37 Department of Health

Subhead (No. & title):

Programme: (2) Disease Prevention

Controlling Officer: Director of Health

Director of Bureau: Secretary for Health, Welfare and Food

Question:

Please inform this Committee the details of the integrated health care services for the elderly and the expenditure incurred in 2006-07. In 2007-08, what are the details of the services and the expenditure involved?

Asked by: Hon. LEUNG Yiu-chung

Reply:

The Elderly Health Service (EHS) provides integrated health services to the elderly through 18 Elderly Health Centres (EHCs) and 18 Visiting Health Teams (VHTs). Services provided by EHCs include physical checkup, health assessment, counselling, curative treatment and health education. VHTs reach out to the community in collaboration with other service providers to deliver promotional programmes to the elderly and their carers. The teams also carry out influenza vaccination programme for the elderly residing in institutions. The expenditure for EHS in the 2006-07 Revised Estimate and the 2007-08 Estimate is \$143.2 million and \$147.1 million respectively.

Signature _____

Name in block letters _____ Dr P Y LAM

Post Title _____ Director of Health

Date _____ 16.3.2007

Examination of Estimates of Expenditure 2007-08
**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB(H)053

Question Serial No.

1336

Head: 37 Department of Health

Subhead (No. & title):

Programme: (2) Disease Prevention

Controlling Officer: Director of Health

Director of Bureau: Secretary for Health, Welfare and Food

Question:

Please inform this Committee the details of work involved in woman health service and the expenditure incurred in 2006-07. In 2007-08, what are the details of such work and the expenditure involved?

Asked by: Hon. LEUNG Yiu-chung

Reply:

The Woman Health Service provides health promotion and disease prevention programmes for women at or below 64 years of age. The Service promotes the health of women and addresses their health needs at various stages of life through the provision of health education, counselling, physical examination and appropriate screening tests.

The estimated expenditure of Woman Health Service for the year 2006-07 and 2007-08 is \$23.1 million and \$23.5 million respectively.

Signature _____

Name in block letters Dr P Y LAM

Post Title Director of Health

Date 14.3.2007

**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB(H)055

Question Serial No.

1338

Head: 37 Department of Health

Subhead (No. & title): 700 General non-recurrent

Programme: (3) Health Promotion

Controlling Officer: Director of Health

Director of Bureau: Secretary for Health, Welfare and Food

Question:

Regarding Item 727 "Setting up a Tobacco Control Office", please inform the Committee the details of work conducted by the Tobacco Control Office of the Department of Health and the expenditure on law enforcement and education incurred in 2006-07? What are the details of such work and the expenditure involved in 2007-08? Will they be adjusted in light of the enforcement of the amended Smoking (Public Health) Ordinance?

Asked by: Hon. LEUNG Yiu-chung

Reply:

Item 727 of Subhead 700 (General non-recurrent) is a non-recurrent account intended for procurement of office equipment and furniture items for the Tobacco Control Office (TCO).

Provision for health education and promotion activities on tobacco control is made under Programme (3). The provision for the TCO of the Department of Health will be increased from a revised estimate of \$17.7 million for 2006-07 to \$18.5 million for 2007-08. In 2006-07, TCO conducted a series of media publicity campaigns to promote smoking prevention and cessation and to support the passage of new tobacco control legislation. TCO also conducted workshops and published guidelines to assist managers of statutory no smoking areas to understand and to comply with the new legislative requirements. In 2007-08, TCO will focus its publicity on new no smoking areas through TV and radio as well as posters and pamphlets. Education and promotion efforts about the harmful effects of smoking and secondhand smoke and the smoking cessation hotline service will continue.

Provision for enforcement duties on tobacco control carried out by TCO is made under Programme (1). Such provision will be increased from a revised estimate of \$6.6 million for 2006-07 to \$23.3 million for 2007-08. Before the gazettal of the amended Smoking (Public Health) Ordinance on 27 October 2006, TCO had made preparations for law enforcement duties including staff training, development of operational guidelines and protocol. Enforcement actions have been taken since Tobacco Control Inspectors were empowered to do so with the gazettal of the amended Ordinance on 27 October 2006. These include inspection of statutory no smoking areas, investigation of complaints and issue of summons. Enforcement actions will be further strengthened in 2007-08.

Signature _____

Name in block letters _____ Dr P Y LAM

Post Title _____ Director of Health

Date _____ 15.3.2007

**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB(H)073

Question Serial No.

1657

Head: 37 Department of Health

Subhead (No. & title):

Programme: (3) Health Promotion

Controlling Officer: Director of Health

Director of Bureau: Secretary for Health, Welfare and Food

Question:

Please advise this Committee the details of the publicity and education activities on smoking prevention and cessation and the expenditures involved in 2006-07. What are the details and expenditure involved in such work in 2007-08?

Asked by: Hon. LEUNG Yiu-chung

Reply:

Both the Tobacco Control Office (TCO) of the Department of Health (DH) and the Hong Kong Council on Smoking and Health (COSH) carry out publicity, health education and promotional activities on tobacco control including smoking prevention and cessation. The revised estimate for 2006-07 is \$28.8 million. The estimate for 2007-08 is \$29.6 million.

In 2006-07, TCO conducted a series of media publicity campaigns to promote smoking prevention and cessation and to support the passage of new tobacco control legislation. Capacity building workshops were conducted and guidelines have been published to assist managers of statutory no smoking areas to understand and to comply with the new legislative requirements. COSH organised an award scheme to give recognition to those small and medium sized enterprises which had successfully implemented smoke-free workplace policy. In addition, COSH continued to work with district organisations to promote smoke-free environment.

In 2007-08, TCO will focus its publicity on new no smoking areas through TV and radio as well as posters and pamphlets. Education and publicity efforts on the harmful effects of smoking and secondhand smoke, and smoking cessation hotline service will continue. COSH will conduct media publicity campaign to promote smoking cessation, as well as the benefits of a smoke-free environment. For youth smoking intervention, COSH will organise a new interactive education theatre programme and a youth tobacco control advocate training programme.

Signature _____

Name in block letters _____ Dr P Y LAM

Post Title _____ Director of Health

Date _____ 15.3.2007

**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB(H)074

Question Serial No.

1796

Head: 37 Department of Health

Subhead (No. & title):

Programme: (2) Disease Prevention

Controlling Officer: Director of Health

Director of Bureau: Secretary for Health, Welfare and Food

Question:

Under "Indicators" of this Programme, as compared with the actual figure in 2006, the estimated attendances for cervical screening and maternal health services show no increase in 2007-08. In this regard, has the Administration reviewed if resources allocated to this area are adequate to meet the demand in 2007-08 and used properly?

Asked by: Hon. TAM Heung-man

Reply:

The Department of Health (DH) is one of many providers of cervical screening and maternal health services in Hong Kong. All demands for cervical screening and maternal health services of the DH are met adequately.

Signature _____

Name in block letters _____ Dr P Y LAM

Post Title _____ Director of Health

Date _____ 16.3.2007

**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB(H)075

Question Serial No.

1797

Head: 37 Department of Health

Subhead (No. & title):

Programme: (2) Disease Prevention

Controlling Officer: Director of Health

Director of Bureau: Secretary for Health, Welfare and Food

Question:

Woman health service is not included in the key work areas of 2007-08. Please list the programmes of woman health service and details of the relevant expenditure in 2007-08.

Asked by: Hon. TAM Heung-man

Reply:

The Woman Health Service provides health promotion and disease prevention programmes for women at or below 64 years of age. The Service promotes the health of women and addresses their health needs at various stages of life through the provision of health education, counselling, physical examination and appropriate screening tests. The estimated expenditure of Woman Health Service for the year 2007-08 is \$23.5 million.

Signature _____

Name in block letters _____ Dr P Y LAM

Post Title _____ Director of Health

Date _____ 14.3.2007

**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB(H)076

Question Serial No.

1798

Head: 37 Department of Health

Subhead (No. & title):

Programme: (4) Curative Care

Controlling Officer: Director of Health

Director of Bureau: Secretary for Health, Welfare and Food

Question:

In 2006, only 70% of the new dermatology cases were attended to within 12 weeks. There is a gap between the above rate and the target of 90%. Would the Administration consider allocating additional resources for this in 2007-08 to ensure that the target can be reached at?

Asked by: Hon. TAM Heung-man

Reply:

A main reason for the Department of Health (DH) not meeting the target was high wastage of doctors. DH has endeavoured to fill vacancies arising from staff wastage as soon as possible. However, it takes time for the newly recruited doctors to gain experience in the dermatology specialty and to clear the accumulated cases. DH expects that the manpower situation would improve, which would in turn shorten the waiting time.

Signature _____

Name in block letters Dr P Y LAM

Post Title Director of Health

Date 16.3.2007

Examination of Estimates of Expenditure 2007-08
**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB(H)077

Question Serial No.

1799

Head: 37 Department of Health

Subhead (No. & title):

Programme: (1) Statutory Functions

Controlling Officer: Director of Health

Director of Bureau: Secretary for Health, Welfare and Food

Question:

With regard to the enforcement of the Undesirable Medical Advertisements Ordinance (UMAO), please inform this Committee of the expenditures and staff establishment involved in enforcing the above Ordinance in 2004-05, 2005-06 and 2006-07.

Asked by: Hon. KWOK Ka-ki

Reply:

The staffing for enforcement of UMAO is as follows:

	2004-05	2005-06	2006-07
Professionals (doctor & pharmacist)	2	2.5	2.5
Supporting staff	9	10	10

The expenditure for enforcement of the UMAO in 2004-05, 2005-06 and 2006-07 was about \$2.5 million, \$3.0 million and \$3.0 million respectively.

Signature _____

Name in block letters Dr P Y LAM

Post Title Director of Health

Date 15.3.2007

**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB(H)078

Question Serial No.

1800

Head: 37 Department of Health

Subhead (No. & title):

Programme: (1) Statutory Functions

Controlling Officer: Director of Health

Director of Bureau: Secretary for Health, Welfare and Food

Question:

With regard to the enforcement of the Undesirable Medical Advertisements Ordinance, please inform this Committee whether monitoring on media of different nature (e.g. television, radio, newspaper and magazine) was conducted in enforcing the above Ordinance in 2004-05, 2005-06 and 2006-07. What were the details? What were the numbers of warning given, cases for referrals to the police and prosecutions eventually instituted?

Asked by: Hon. KWOK Ka-ki

Reply:

The Department of Health (DH) adopts a risk-based approach in screening advertisements in different media, including screening of newspapers, magazines and webpages on the internet. DH also acts on complaints regarding TV and radio advertisements.

The numbers of advertisements screened, warning letters issued, referrals to the Police and prosecutions instituted in the past three years were as follows:

	2004	2005	2006
No. of advertisements screened	28 617	43 286	50 246
No. of warning letters issued	3 751	4 117	1 845
No. of referrals to the Police	27	77	48
No. of prosecutions instituted	17	59	35

Signature _____

Name in block letters Dr P Y LAM

Post Title Director of Health

Date 15.3.2007

**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB(H)079

Question Serial No.

1801

Head: 37 Department of Health

Subhead (No. & title):

Programme: (1) Statutory Functions

Controlling Officer: Director of Health

Director of Bureau: Secretary for Health, Welfare and Food

Question:

With regard to the enforcement of the Undesirable Medical Advertisements Ordinance (UMAO), could the Department inform this Committee the expenditures and staff establishment involved in enforcing the above Ordinance in financial year 2007-08. Have additional resources been allocated? If not, what is/are the reason(s)?

Asked by: Hon. KWOK Ka-ki

Reply:

The provision for the enforcement of the UMAO in 2007-08 is about \$4.3 million. This has included an additional \$1.3 million for the implementation of the UMA (Amendment) Ordinance 2005. The current staffing level is 2.5 professionals and 10 supporting staff.

Signature _____

Name in block letters Dr P Y LAM

Post Title Director of Health

Date 15.3.2007

**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB(H)080

Question Serial No.

1802

Head: 37 Department of Health

Subhead (No. & title):

Programme: (1) Statutory Functions

Controlling Officer: Director of Health

Director of Bureau: Secretary for Health, Welfare and Food

Question:

With regard to the enforcement of the Undesirable Medical Advertisements Ordinance (UMAO), please inform this Committee whether there is any plan to set indicators for monitoring the media of different nature (e.g. television, radio, newspaper and magazine) in financial year 2007-08. If yes, what are the details?

Asked by: Hon. KWOK Ka-ki

Reply:

The Department of Health (DH) adopts a risk-based approach in screening advertisements.

DH screens 18 local daily newspapers and at least 10 magazines every week. There is a standard set of screening procedures which was certified by the Hong Kong Quality Assurance Agency in 2005 to meet the ISO 9001:2000 quality management system standard. DH also acts on complaints against TV and radio advertisements.

Signature _____

Name in block letters Dr P Y LAM

Post Title Director of Health

Date 15.3.2007

**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB(H)081

Question Serial No.

1803

Head: 37 Department of Health

Subhead (No. & title):

Programme: (1) Statutory Functions

Controlling Officer: Director of Health

Director of Bureau: Secretary for Health, Welfare and Food

Question:

Various problems have been found in public mortuaries in recent years. Have additional resources and manpower been allocated for 2007-08 by the Department of Health to improve the situation? If yes, what are the details?

Asked by: Hon. KWOK Ka-ki

Reply:

Various improvement measures have been introduced in public mortuaries in 2006-07. Additional provisions for 15 Mortuary Attendant posts will be allocated to enhance service quality of public mortuaries in 2007-08. This will increase the manning provision for public mortuaries outside normal opening hours and improve customer service.

Signature _____

Name in block letters Dr P Y LAM

Post Title Director of Health

Date 16.3.2007

**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB(H)082

Question Serial No.

1804

Head: 37 Department of Health

Subhead (No. & title):

Programme: (2) Disease Prevention

Controlling Officer: Director of Health

Director of Bureau: Secretary for Health, Welfare and Food

Question:

In 2007-08, what is the expenditure on procuring influenza vaccines and the number of people at risk (including the elderly, patients with chronic illnesses and school children) arranged for receiving the vaccines? How is the vaccination programme arranged to ensure the effective prevention of influenza?

Asked by: Hon. KWOK Ka-ki

Reply:

In 2006-07, the Government Influenza Vaccination Programme (GIVP) covered about 270 000 high risk clients and the estimated expenditure was \$9.0 million. The Department of Health (DH) is planning for the 2007-08 GIVP.

DH undertakes reviews to assess vaccination coverage and effectiveness of the programme. It also conducts research for better understanding of population needs and service planning. The Scientific Committee on Vaccine Preventable Diseases will recommend target groups to receive vaccination. The Administration will take into account the aforesaid to work out the number of vaccines to be procured.

DH works closely with the Hospital Authority, the private medical sector, welfare agencies and relevant government departments in providing vaccination to recommended groups, and will continue to strengthen coordination with relevant parties to maximise vaccination coverage of high risk individuals.

Signature _____

Name in block letters _____ Dr P Y LAM

Post Title _____ Director of Health

Date _____ 15.3.2007

**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB(H)083

Question Serial No.

1805

Head: 37 Department of Health

Subhead (No. & title):

Programme: (2) Disease Prevention

Controlling Officer: Director of Health

Director of Bureau: Secretary for Health, Welfare and Food

Question:

Please inform this Committee the number of doses of antiviral (such as Tamiflu) procured in the past three years and in 2007-08 for the stockpile for influenza and the expenditure involved. Is the antiviral stockpile sufficient to meet any exigencies?

Asked by: Hon. KWOK Ka-ki

Reply:

The amount of antiviral stockpile for avian/pandemic influenza in the past three years and 2007-08 and the corresponding expenditure are as follows :

	<u>Antiviral</u> (million doses)	<u>Expenditure</u> (\$ million)
2004-05	2.75	38.5
2005-06	5.40	71.3
2006-07	7.92	114.8
2007-08	3.66	53.1

The Government aims to maintain a target level of around 20 million doses of antiviral as part of the Government's Preparedness Plan for Influenza Pandemic. This stockpiling strategy has been formulated with reference to the recommendations of the Scientific Committee on Emerging and Zoonotic Diseases (SCEZD). The Government will continue to review the strategy based on SCEZD's recommendations as well as the World Health Organization's latest advice.

Signature _____

Name in block letters Dr P Y LAM

Post Title Director of Health

Date 16.3.2007

**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB(H)084

Question Serial No.

1806

Head: 37 Department of Health

Subhead (No. & title):

Programme: (2) Disease Prevention

Controlling Officer: Director of Health

Director of Bureau: Secretary for Health, Welfare and Food

Question:

Please inform this Committee the resources committed, staffing establishment and operating cost by year since the establishment of Centre for Health Protection (CHP) in June 2004. What is the estimated expenditure for 2007-08? Are there plans to enhance the CHP's functions and increase the provision in light of the risk of influenza outbreak? If so, what are the details?

Asked by: Hon. KWOK Ka-ki

Reply:

The resources, staffing establishment and other operating cost (mainly under Head 37 Department of Health) since the establishment of the CHP were as follows:

Financial year	Manpower	Staff cost	Other operating cost	Total
2004-05 (Actual)	1 646	\$570 million	\$360 million	\$930 million
2005-06 (Actual)	1 678	\$585 million	\$290 million	\$875 million
2006-07 (Revised Estimate)	1 662	\$590 million	\$315 million	\$905 million

In 2007-08, the CHP will continue to work towards its three strategic directions, namely real-time surveillance, rapid intervention and responsive risk communication in enhancing the emergency response system for infectious diseases. For example, the CHP has drawn up and will regularly update preparedness plans for major infectious disease outbreaks with public health significance, including influenza pandemic. It will continue to strengthen its disease surveillance system; stockpile antivirals; build surge capacity and collaborate with regional and international partners on the prevention and control of infectious diseases. It will also conduct exercises and drills for emergency response against major infectious disease outbreaks.

The CHP adopts a cross-sectoral, population-based approach for combating influenza pandemic. In collaboration with other government departments and relevant agencies, it has been fine-tuning and will continue to enhance its services and use of resources for meeting the challenges posed by emerging infectious diseases, including the influenza pandemic.

The estimated expenditure for 2007-08 for the CHP is \$940 million.

Signature _____

Name in block letters _____ Dr P Y LAM

Post Title _____ Director of Health

Date _____ 15.3.2007

**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB(H)085

Question Serial No.

1807

Head: 37 Department of Health

Subhead (No. & title):

Programme: (1) Statutory Functions

Controlling Officer: Director of Health

Director of Bureau: Secretary for Health, Welfare and Food

Question:

The 2006-07 Revised Estimate is 12.1% higher than the Original Estimate, why?

Asked by: Hon. KWOK Ka-ki

Reply:

The increase of 12.1% is mainly due to the implementation of temperature screening measures at Immigration Control Points, which was not budgeted for in the 2006-07 Original Estimate.

Signature _____

Name in block letters _____ Dr P Y LAM

Post Title _____ Director of Health

Date _____ 14.3.2007

**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB(H)086

Question Serial No.

1808

Head: 37 Department of Health

Subhead (No. & title):

Programme: (1) Statutory Functions

Controlling Officer: Director of Health

Director of Bureau: Secretary for Health, Welfare and Food

Question:

The 2007-08 Estimate is 13.8% higher than the 2006-07 Revised Estimate and this is mainly due to:

- (i) additional provision for temperature screening measures at Immigration Control Points;
- (ii) strengthening port health measures in relation to revised International Health Regulations;
- (iii) increased operating expenses and creation of 28 posts for carrying out enforcement duties as required under the Smoking (Public Health) Ordinance; and
- (iv) creation of 19 posts to meet other operational needs.

Please list the reasons for increasing the provisions, the amount involved, the additional staffing and their ranks.

Asked by: Hon. KWOK Ka-ki

Reply:

Provision for 2007-08 in this Programme is \$37.3 million or 13.8% higher than the revised estimate for 2006-07. This mainly comprises -

- (a) \$10 million for temperature screening measures at new Immigration Control Points. There will be no creation of civil service post for this.
- (b) \$9.8 million for strengthening port health measures in relation to revised International Health Regulations, including creation of 16 civil service posts (five Medical & Health Officers, one Senior Health Inspector, five Health Inspectors, one Nursing Officer and four Registered Nurses) to monitor and inspect conveyance and points of entry (PoE) and to develop guidelines and provide relevant training to conveyance and PoE operators regarding the prevention and control of public health emergencies. The total additional annual staff cost is about \$7.1 million.
- (c) \$16.7 million for carrying out enforcement duties as required under the Smoking (Public Health) Ordinance. The number of tobacco control inspectors will be increased by 37, from 34 in 2006-07 to 71 in 2007-08. In addition, there will be an increase of 12 civil service posts, including one Senior Medical & Health Officer, two Medical & Health Officers, two Police Sergeants, and seven administrative and supporting staff. The total additional annual staff cost is about \$11.8 million.

- (d) creation of 19 civil service posts (one Scientific Officer (Medical), three Pharmacists and 15 Mortuary Attendants) to meet long-term operational need in radiation health, regulation of medicines and operation of public mortuaries. A large proportion of the additional expenditure involved will be absorbed within the original provision under this programme.

Signature _____

Name in block letters _____ Dr P Y LAM

Post Title _____ Director of Health

Date _____ 15.3.2007

**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB(H)087

Question Serial No.

1809

Head: 37 Department of Health

Subhead (No. & title):

Programme: (1) Statutory Functions

Controlling Officer: Director of Health

Director of Bureau: Secretary for Health, Welfare and Food

Question:

The Department of Health will carry out enforcement duties as required under the Smoking (Public Health) Ordinance in 2007-08. In relation to the relevant enforcement duties, please advise this Committee the resources and staffing involved, and the increase by each year as compared with the previous three years.

Asked by: Hon. KWOK Ka-ki

Reply:

For enforcement duties under the Smoking (Public Health) Ordinance, the Tobacco Control Office (TCO) will increase the number of tobacco control inspectors by 37, from 34 in 2006-07 to 71 in 2007-08. In addition, there will be an increase of 12 civil service posts, including one Senior Medical & Health Officer, two Medical & Health Officers, two Police Sergeants, and seven administrative and supporting staff. The total additional annual staff cost is about \$11.8 million. The total expenditure for carrying out enforcement duties in 2007-08 will be \$23.3 million, representing an increase of \$16.7 million over 2006-07.

No expenditure was incurred by the TCO in 2004-05 and 2005-06 for enforcement duties under Programme (1) as it had not been vested with any statutory enforcement powers at that time.

Signature _____

Name in block letters _____ Dr P Y LAM

Post Title _____ Director of Health

Date _____ 15.3.2007

**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB(H)088

Question Serial No.

1810

Head: 37 Department of Health

Subhead (No. & title):

Programme: (2) Disease Prevention

Controlling Officer: Director of Health

Director of Bureau: Secretary for Health, Welfare and Food

Question:

It was mentioned in 2006 that as at the end of 2005, the median waiting time of first-time registration for services provided by the Elderly Health Centres was 37.5 months. Please advise this Committee if there was any improvement in 2006 and what were the longest, shortest, average and median time for the elderly to wait for the relevant services? In the 2007-08 Estimates, the Department of Health has not enhanced the targets of the relevant services by the centres. Does it mean that the Administration refuses to allocate additional resources to improve the relevant services? Why?

Asked by: Hon. KWOK Ka-ki

Reply:

The median waiting time for new enrolment was shortened from 37.5 months in 2005 to 37.2 months in 2006. The median waiting time for individual Elderly Health Centre (EHC) ranged from 18 months to 51.5 months.

EHCs are not the only service provider to cater for the health care needs of the elderly. All the stakeholders have to work together to meet the varying needs of the elderly through various measures and services. Apart from EHCs, the Visiting Health Teams (VHTs) of Elderly Health Service (EHS) reach out into the community to provide health promotion activities for elders and carers. The 75 general out-patient clinics operated by the Hospital Authority (HA) also provide essential curative medical services to the elderly population especially those with low-income or chronic illnesses. Community health care services of HA, such as the Community Geriatric Assessment Teams and the Community Nurses, are also playing a pivotal role in providing health care for the elders. Besides, some non-government organisations (NGOs) are operating health centres on a self-financing basis. The Department of Health will strengthen collaboration with stakeholders including private practitioners and NGOs to enhance primary health services for the elderly in Hong Kong. At present, there is no plan to expand EHCs and VHTs.

Signature _____

Name in block letters _____ Dr P Y LAM

Post Title _____ Director of Health

Date _____ 16.3.2007

Examination of Estimates of Expenditure 2007-08
**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB(H)089

Question Serial No.

1811

Head: 37 Department of Health

Subhead (No. & title):

Programme: (2) Disease Prevention

Controlling Officer: Director of Health

Director of Bureau: Secretary for Health, Welfare and Food

Question:

Apart from the elderly health centres, what are the estimated resources and manpower to be allocated in 2007-08 financial year for promotion of elderly health education and prevention of elderly diseases?

Asked by: Hon. KWOK Ka-ki

Reply:

The Central Health Education Unit (CHEU), amongst other activities, also undertakes health promotion activities that cover non-communicable diseases commonly seen in old age and includes the elderly as one of its target groups. The provision for CHEU in 2007-08 is \$34.9 million. Financial resources and manpower allocated for health education for the elderly cannot be itemised.

Signature _____

Name in block letters _____ Dr P Y LAM

Post Title _____ Director of Health

Date _____ 16.3.2007

**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB(H)090

Question Serial No.

1812

Head: 37 Department of Health

Subhead (No. & title):

Programme: (4) Curative Care

Controlling Officer: Director of Health

Director of Bureau: Secretary for Health, Welfare and Food

Question:

It was stated in the Department's reply to my question in the previous year that -

"In 2005, the performance was affected by the resignation and retirement of three specialists in dermatology from the Social Hygiene Service (SHS). Only 61% of the new dermatology cases during the year were attended to within 12 weeks whilst the target of 90% of new dermatology cases attended to within 12 weeks cannot be achieved.

The Department of Health (DH) has arranged internal redeployment and appointment of new recruits to replace doctors who left the SHS. Besides, DH plans to employ four contract doctors on a part-time basis in 2006-07 to shorten the appointment time."

Yet, it is revealed in the 2007-08 Estimates that only 70% of the new dermatology cases in 2006 were attended to within 12 weeks, which is still far below the target of 90% set by the Department. Does the Department have any more effective measures to ensure that the relevant performance target can be met in 2007-08?

Asked by: Hon. KWOK Ka-ki

Reply:

In 2006, 70% of new dermatology cases were given an appointment within 12 weeks. This represented an improvement from the situation in 2005. A main reason for the Department of Health (DH) not meeting the target was high wastage of doctors. DH has endeavoured to fill vacancies arising from staff wastage as soon as possible. However, it takes time for the newly recruited doctors to gain experience in the dermatology specialty and to clear the accumulated cases. DH expects that the manpower situation would improve, which would in turn shorten the waiting time.

Signature _____

Name in block letters _____ Dr P Y LAM

Post Title _____ Director of Health

Date _____ 16.3.2007

**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB(H)091

Question Serial No.

1813

Head: 37 Department of Health

Subhead (No. & title):

Programme: (3) Health Promotion

Controlling Officer: Director of Health

Director of Bureau: Secretary for Health, Welfare and Food

Question:

In 2007-08, the Department of Health will enhance its public health promotion programmes to instil a healthy lifestyle concept in the community, with emphasis on healthy eating programme. What are the details, resources involved, staffing and performance indicators of the programme?

Asked by: Hon. KWOK Ka-ki

Reply:

The Department of Health (DH) launched the 'EatSmart@school.hk' campaign in September 2006. Comprehensive strategies are adopted, including alliance building, research and evaluation, publicity and advocacy, education and empowerment, and creating supportive environments in primary schools. In 2007-08, DH will facilitate schools to develop and implement policies that support healthy eating, promote collaboration among food suppliers, parents and schools, and strengthen nutritional education for parents and food suppliers.

Activities under the campaign are carried out by a multi-disciplinary team of doctors, nurses, dietitians, health promotion officers and educational, research and marketing personnel. Expenditures on these activities will be absorbed in the Department's overall provision on health promotion and will not be separately identifiable. The DH envisages an increase in the number of schools adopting healthy eating policies, an increase in the proportion of lunch and snack choices meeting nutritional standards promulgated by the DH, and improvement in students' knowledge, attitude and practice of healthy eating.

Signature _____

Name in block letters _____ Dr P Y LAM

Post Title _____ Director of Health

Date _____ 15.3.2007

**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB(H)092

Question Serial No.

1814

Head: 37 Department of Health

Subhead (No. & title):

Programme: (3) Health Promotion

Controlling Officer: Director of Health

Director of Bureau: Secretary for Health, Welfare and Food

Question:

In 2007-08, the Department of Health will enhance its public health promotion programmes to instil a healthy lifestyle concept in the community, with emphasis on healthy eating programme. Does the above-mentioned programme include:

- i) instilling the concept about healthy lunch boxes in school children?
- ii) encouraging school tuck shops to stop selling unhealthy snacks?

If yes, what are the resources, staffing and performance indicators involved? If those items are not included, what are the reasons for that?

Asked by: Hon. KWOK Ka-ki

Reply:

The Department of Health (DH) launched the 'EatSmart@school.hk' campaign in September 2006 to promote healthy eating habits among primary school children. It includes instilling into school children the concept of healthy eating and encouraging schools to limit the sale of unhealthy snacks.

The above activities are carried out by a multi-disciplinary team of doctors, nurses, dietitians, health promotion officers and educational, research and marketing personnel. Expenditures on these activities will be absorbed in the Department's overall provision on health promotion and will not be separately identifiable.

The DH envisages an increase in the number of schools adopting healthy eating policies, an increase in the proportion of lunch and snack choices meeting nutritional standards promulgated by the DH, and improvement in students' knowledge, attitude and practice of healthy eating.

Signature _____

Name in block letters _____ Dr P Y LAM

Post Title _____ Director of Health

Date _____ 15.3.2007

**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB(H)093

Question Serial No.

1815

Head: 37 Department of Health

Subhead (No. & title):

Programme: (3) Health Promotion

Controlling Officer: Director of Health

Director of Bureau: Secretary for Health, Welfare and Food

Question:

In 2006-07, what were the manpower and resources (including the procurement of medication) involved in the smoking cessation service provided by the Department to smokers? What is the attendance of service recipients?

Asked by: Hon. KWOK Ka-ki

Reply:

The Department of Health (DH) promotes smoking cessation through health education, a smoking cessation hotline and the running of smoking cessation programmes in DH clinics. In addition, the Tobacco Control Office has produced smoking cessation information kits for doctors, dentists and pharmacists, and has organised workshops on smoking cessation to promote smoking cessation at the community level.

In 2006-07, over 2 000 people participated in the smoking cessation programmes and over 4 000 calls were handled by the smoking cessation hotline. The resources devoted to these activities and services, including staffing required for providing smoking cessation programmes, were absorbed within the existing resources of the respective service units and were not separately itemised. The estimated expenditure on medication for smoking cessation is about \$0.8 million in 2006-07.

Signature _____

Name in block letters _____ Dr P Y LAM

Post Title _____ Director of Health

Date _____ 15.3.2007

**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB(H)094

Question Serial No.

1816

Head: 37 Department of Health

Subhead (No. & title):

Programme: (3) Health Promotion

Controlling Officer: Director of Health

Director of Bureau: Secretary for Health, Welfare and Food

Question:

Regarding the work on “strengthening the publicity and education programme on smoking prevention and cessation”, what are the estimate, staff establishment and performance indicators in 2007-08? Are additional resources available? If yes, please provide the details.

Asked by: Hon. KWOK Ka-ki

Reply:

Both the Tobacco Control Office (TCO) of the Department of Health (DH) and the Hong Kong Council on Smoking and Health (COSH) carry out publicity, health education and promotional activities on tobacco control including smoking prevention and cessation. In 2007-08, the provision for such activities is \$29.6 million as compared to \$28.8 million in 2006-07.

In 2007-08, COSH plans to conduct 340 publicity, educational and research programmes focusing on youth smoking interventions and promotion of smoking cessation and a smoke-free environment. TCO will also have four additional health promotion officers, bringing the total staffing on health promotion in TCO to nine, for strengthening publicity and education activities on tobacco control. DH will also conduct surveys to measure public knowledge and support of the tobacco control legislation and compliance with the statutory smoking ban, and will also continue to monitor the prevalence of smoking in Hong Kong.

Signature _____

Name in block letters _____ Dr P Y LAM

Post Title _____ Director of Health

Date _____ 15.3.2007

**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB(H)095

Question Serial No.

1817

Head: 37 Department of Health

Subhead (No. & title):

Programme: (3) Health Promotion

Controlling Officer: Director of Health

Director of Bureau: Secretary for Health, Welfare and Food

Question:

Regarding the resources allocated to “strengthening the publicity and education programme on smoking prevention and cessation” in 2007-08, how much are allocated to assist smoking cessation and purchase medication for smokers who wish to cease smoking? What are the details and service targets?

Asked by: Hon. KWOK Ka-ki

Reply:

The Department of Health (DH) promotes smoking cessation through health education, a smoking cessation hotline and running of smoking cessation programmes in DH clinics. The expenditures on publicity and education activities on tobacco control including those on smoking prevention and cessation will be increased from \$28.8 million in 2006-07 (revised estimates) to \$29.6 million in 2007-08. There is no further breakdown on the resources for such activities on smoking prevention and cessation alone. The resource devoted to smoking cessation services, including staffing required for providing smoking cessation programmes, will be absorbed within the existing resources of respective service units and are not separately itemised.

The smoking cessation rate at one year for smokers attending smoking cessation clinics is about 35% which is comparable to performance reported in overseas countries.

Signature _____

Name in block letters Dr P Y LAM

Post Title Director of Health

Date 15.3.2007

**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB(H)096

Question Serial No.

1819

Head: 37 Department of Health

Subhead (No. & title):

Programme: (3) Health Promotion

Controlling Officer: Director of Health

Director of Bureau: Secretary for Health, Welfare and Food

Question:

How does the Department work in tune with Hong Kong Council on Smoking and Health on the promotion of tobacco control?

Asked by: Hon. KWOK Ka-ki

Reply:

Both the Tobacco Control Office (TCO) of the Department of Health (DH) and the Hong Kong Council on Smoking and Health (COSH) carry out publicity, health education and promotional activities on tobacco control including smoking prevention and cessation. A senior representative of DH is appointed as a member of COSH and serves the purpose of facilitating communication and coordination between DH and COSH on tobacco control efforts.

In 2007-08, TCO will focus its publicity on new no smoking areas through TV and radio as well as posters and pamphlets. Education and publicity efforts on the harmful effects of smoking and secondhand smoke and the smoking cessation hotline service will continue. COSH will conduct media publicity campaign to promote smoking cessation, as well as the benefits of a smoke-free environment. For youth smoking intervention, COSH will organise a new interactive education theatre programme and a youth tobacco control advocate training programme.

Signature _____

Name in block letters _____ Dr P Y LAM

Post Title _____ Director of Health

Date _____ 15.3.2007

**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB(H)097

Question Serial No.

1820

Head: 37 Department of Health

Subhead (No. & title):

Programme: (3) Health Promotion

Controlling Officer: Director of Health

Director of Bureau: Secretary for Health, Welfare and Food

Question:

The 2007-08 Estimate is \$4.1 million (1.9%) higher than the 2006-07 Revised Estimate. This is due to creation of four posts for developing a computerised organ donation database and meeting other operational needs. Please give details of the work, the resource involved and the ranks of the four posts.

Asked by: Hon. KWOK Ka-ki

Reply:

The four posts to be created in 2007-08 will include one Executive Officer II for a centralised organ donation register (CODR), two Dietitians for the Adolescent Health Programme and one Librarian for the Centre for Health Protection.

Regarding the CODR, it will be a computerised database for prospective organ donors to voluntarily register their organ donation details, accessible over network by authorised persons in the Hospital Authority. The register will be developed, operated and maintained by the Department of Health. It is estimated that the capital expenditure of the project will be about \$6.8 million.

Signature _____

Name in block letters _____ Dr P Y LAM

Post Title _____ Director of Health

Date _____ 15.3.2007

**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB(H)098

Question Serial No.

1821

Head: 37 Department of Health

Subhead (No. & title):

Programme: (3) Health Promotion

Controlling Officer: Director of Health

Director of Bureau: Secretary for Health, Welfare and Food

Question:

In addition, what other plans does the Department have to promote organ donation in 2007-08? What will be the resources and staff establishment involved?

Asked by: Hon. KWOK Ka-ki

Reply:

In 2007-08, the Department of Health will continue to work closely with the Hospital Authority and the Hong Kong Medical Association in the campaign "Light up Lives - Support Organ Donation" to promote social acceptance and enhance public awareness of the importance of cadaveric organ donation. Youth groups, non-governmental organisations and corporations will be invited as partners in promotion and education activities. Roving exhibitions will be staged and a publicity drive will also be mounted to tie in with the launch of the centralised organ donation register in late 2007. In particular, efforts will be made to promote organ donation and facilitate registration of donors through various public service channels. The above promotional activities will be carried out by a multi-disciplinary team of doctors, nurses, health promotion officers, research and marketing personnel. The resources and staffing for these activities will be absorbed in the Department's overall provision on health promotion and are not separately budgeted for.

Signature _____

Name in block letters _____ Dr P Y LAM

Post Title _____ Director of Health

Date _____ 15.3.2007

Examination of Estimates of Expenditure 2007-08
**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB(H)099

Question Serial No.

1822

Head: 37 Department of Health

Subhead (No. & title):

Programme: (1) Statutory Functions

Controlling Officer: Director of Health

Director of Bureau: Secretary for Health, Welfare and Food

Question:

Please inform this Committee the number of posts to be created for implementation of the amended Smoking (Public Health) Ordinance in 2007-08. Please list the post titles, ranks, relevant duties and annual staff remuneration involved, and compare with current corresponding figures. What are the criteria for creating the additional posts? Are there any estimates for the number of complaints received, and operations and prosecutions conducted by the Tobacco Control Office in 2007-08? Compared with the relevant figures in 2006-07, what are the increases respectively?

Asked by: Hon. CHEUNG Yu-yan, Tommy

Reply:

For the Tobacco Control Office (TCO) of the Department of Health to implement the Smoking (Public Health) Ordinance especially to carry out enforcement duties, the overall staffing in TCO will be increased from 66 in 2006-07 to 109 in 2007-08 with annual staff remuneration of \$13.5 million and \$25.3 million respectively. The increase is mainly in the number of tobacco control inspectors (TCI), which will increase by 37 from 34 in 2006-07 to 71 in 2007-08. The additional staffing is determined having regard to the operational needs to strengthen the enforcement capacity of TCO to cope with the anticipated increase in enforcement duties, and resources available. In addition, there will be an increase of 12 civil service posts, including one Senior Medical & Health Officer, two Medical & Health Officers, two Police Sergeants and seven administrative and supporting staff. Details of staffing and their scope of duties are set out at the Annex.

As the TCO has been vested with statutory enforcement powers under the amended Smoking (Public Health) Ordinance only since October 2006 and the expanded statutory no smoking areas have only come into effect since January 2007, it is difficult to estimate the volume of complaints and enforcement actions in 2007-08.

Signature _____

Name in block letters _____ Dr P Y LAM

Post Title _____ Director of Health

Date _____ 16.3.2007

<u>Scope of Duties / Responsible Staff</u>	<u>Original Estimate 2006-07</u>	<u>Original Estimate 2007-08</u>
Head TCO		
Principal Medical & Health Officer	0	1
Senior Medical & Health Officer	1	0
Enforcement		
Senior Medical & Health Officer / Medical & Health Officer	0	3
Superintendent of Police/Police Sergeant	5	7
Tobacco Control Inspectors	34	71
Health Education and Smoking Cessation		
Senior Medical & Health Officer/Contract Doctor/Part-time Senior Contract Doctor	2	2
Registered Nurse	2	2
Health Promotion Officer	0	4
Research Officer	1	1
Administrative and Logistics Support		
Senior Executive Officer/Executive Officer /Administrative Assistant	3	4
Clerical Officer/Clerical Assistant/Project Assistant/General Worker	17	13
Motor Driver	1	1
<i>Total:</i>	<i>66</i>	<i>109</i>

**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB(H)100

Question Serial No.

1823

Head: 37 Department of Health

Subhead (No. & title): 700 General non-recurrent

Programme:

Controlling Officer: Director of Health

Director of Bureau: Secretary for Health, Welfare and Food

Question:

Regarding item 733 "Smoke-free Workplace Programme", please inform this Committee the details of works in 2007-08. Will publicity activities in restaurants be enhanced? How to resolve the conflict between smokers and non-smokers? Has any performance indicator been set?

Asked by: Hon. CHEUNG Yu-yan, Tommy

Reply:

In 2007-08, with the implementation of the amended Smoking (Public Health) Ordinance in particular the statutory smoking ban, the Department of Health (DH) will continue its education and promotion activities to enhance public understanding of and compliance with the statutory smoking ban.

Specifically, capacity building workshops on the implementation of the statutory smoking ban targeting employees of the catering and entertainment industries will continue to be organised. Guidelines on implementation of smoke-free restaurants and smoking cessation services will continue to be promoted among the two industries. In 2007-08, the Hong Kong Council on Smoking and Health will also enhance its publicity on promoting the benefits of smoke-free dining environments.

Implementation of the smoking ban has been generally smooth and the public, including some smokers, have shown support and acceptance of the statutory smoking ban. The Tobacco Control Office of DH will monitor complaints received and carry out targeted enforcement on black-spots as necessary. In addition, DH will conduct surveys to measure public knowledge and support of the tobacco control legislation and compliance with the statutory smoking ban. DH will also continue to monitor the prevalence of smoking in Hong Kong.

Signature _____

Name in block letters _____ Dr P Y LAM

Post Title _____ Director of Health

Date _____ 15.3.2007

**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB(H)101

Question Serial No.

1824

Head: 37 Department of Health

Subhead (No. & title):

Programme: (1) Statutory Functions

Controlling Officer: Director of Health

Director of Bureau: Secretary for Health, Welfare and Food

Question:

There will be "increased operating expenses and creation of 28 posts for carrying out enforcement duties as required under the Smoking (Public Health) Ordinance" in the Department of Health. Is the required manpower employed on civil service terms? Please advise on the details of their work and establishment, as well as the expenditure involved in 2007-08.

Asked by: Hon. EU Yuet-mee, Audrey

Reply:

As stated in the Controlling Officer's Report, the 28 civil service posts will be for strengthening port health measures in relation to revised International Health Regulations and carrying out enforcement duties as required under the Smoking (Public Health) Ordinance. Amongst these, 12 civil service posts will be created in the Tobacco Control Office (TCO) in 2007-08 to support tobacco control.

The 12 posts will include one Senior Medical & Health Officer, two Medical & Health Officers, two Police Sergeants and seven administrative and supporting staff for the enforcement of the Smoking (Public Health) Ordinance, as well as other related publicity, education and promotion efforts on tobacco control and smoking cessation. In addition, the number of tobacco control inspectors will be increased by 37, from 34 in 2006-07 to 71 in 2007-08. The total additional annual staff cost will be about \$11.8 million.

Signature _____

Name in block letters _____ Dr P Y LAM

Post Title _____ Director of Health

Date _____ 15.3.2007

**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB(H)102

Question Serial No.

1818

Head: 37 Department of Health

Subhead (No. & title):

Programme: (3) Health Promotion

Controlling Officer: Director of Health

Director of Bureau: Secretary for Health, Welfare and Food

Question:

After the implementation of the amended Smoking (Public Health) Ordinance, has the Department allocated additional resources to the Hong Kong Council on Smoking and Health (COSH)? If no, what are the reasons?

Asked by: Hon. KWOK Ka-ki

Reply:

The financial provision for COSH has been increased over the past few years to enable it to garner public support for tobacco control, including amendments to the Smoking (Public Health) Ordinance in 2006. Actual expenditure was increased from \$8.0 million in 2002-03 to a revised estimate of \$11.1 million for 2006-07. For 2007-08, the provision for COSH will remain at the same level, but the focus of COSH's work will be on promotion of smoking cessation, in addition to its efforts on smoking prevention. Meanwhile, implementation of the amended Smoking (Public Health) Ordinance especially enforcement duties under the Ordinance will be carried out by the Government, mainly the Tobacco Control Office of the Department of Health.

Signature _____

Name in block letters _____ Dr P Y LAM

Post Title _____ Director of Health

Date _____ 15.3.2007

**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB(H)109

Question Serial No.

1943

Head: 37 Department of Health

Subhead (No. & title):

Programme: (3) Health Promotion

Controlling Officer: Director of Health

Director of Bureau: Secretary for Health, Welfare and Food

Question:

With regard to the strengthening of the publicity and education programmes on smoking prevention and cessation, please advise:

1. the estimated expenditure involved;
2. the details of the publicity and education programmes; and
3. whether the Administration has set any indicators to review the effectiveness of the publicity and education programmes.

Asked by: Hon. CHAN Yuen-han

Reply:

Both the Tobacco Control Office (TCO) of the Department of Health (DH) and the Hong Kong Council on Smoking and Health (COSH) carry out publicity, health education and promotional activities on tobacco control including smoking prevention and cessation. The provision for these activities in 2007-08 is \$29.6 million.

In 2007-08, TCO will focus its publicity on new no smoking areas through TV and radio as well as posters and pamphlets. Education and publicity efforts on the harmful effects of smoking and secondhand smoke and the smoking cessation hotline service will continue. COSH will conduct media publicity campaign to promote smoking cessation, as well as the benefits of a smoke-free environment. For youth smoking intervention, COSH will organise a new interactive education theatre programme and a youth tobacco control advocate training programme.

DH will conduct surveys to measure public knowledge and support of the tobacco control legislation and compliance with the statutory smoking ban. DH will also continue to monitor the prevalence of smoking in Hong Kong.

Signature _____

Name in block letters Dr P Y LAM

Post Title Director of Health

Date 15.3.2007

**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB(H)110

Question Serial No.

1944

Head: 37 Department of Health

Subhead (No. & title):

Programme: (8) Personnel Management of Civil Servants Working in Hospital Authority

Controlling Officer: Director of Health

Director of Bureau: Secretary for Health, Welfare and Food

Question:

Under the indicator on “no. of civil servants working in the HA”, the number has decreased from 3 553 in 2006 to 3 339 in 2007, representing a reduction of 214. What are the reasons for the decrease? Does it involve manpower reduction?

Asked by: Hon. CHAN Yuen-han

Reply:

The reduction of 214 civil servants working in the Hospital Authority (HA) is due to normal wastage including retirement. The HA will cover the loss of capacity through internal redeployment or by recruitment of new staff on HA terms of service.

Signature _____

Name in block letters _____ Dr P Y LAM

Post Title _____ Director of Health

Date _____ 14.3.2007

**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB(H)111

Question Serial No.

2110

Head: 37 Department of Health

Subhead (No. & title): 000 Operational expenses

Programme:

Controlling Officer: Director of Health

Director of Bureau: Secretary for Health, Welfare and Food

Question:

Regarding the subventions amounting to \$143 million in 2007-08, please list the subvented institutions and the amount allocated to each of them.

Asked by: Hon. CHENG Kar-foo, Andrew

Reply:

The recurrent subvention to various subvented organisations for 2007-08 is as follows:

<u>Subvented Organisation</u>	<u>\$ million</u>
Caritas Hong Kong	4.7
The Family Planning Association of Hong Kong	31.5
Hong Kong Christian Service	4.9
Hong Kong Council on Smoking and Health	11.1
Hong Kong Red Cross	0.8
Hong Kong St. John Ambulance	11.2
The Society for the Aid and Rehabilitation of Drug Abusers	76.2
Tung Wah Group of Hospitals – Chinese Medicine Clinics	2.7
Total :	143.1

Signature _____

Name in block letters _____ Dr P Y LAM

Post Title _____ Director of Health

Date _____ 15.3.2007

Examination of Estimates of Expenditure 2007-08
**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB(H)112

Question Serial No.

2111

Head: 37 Department of Health

Subhead (No. & title): 000 Operational expenses

Programme:

Controlling Officer: Director of Health

Director of Bureau: Secretary for Health, Welfare and Food

Question:

What is the amount of expenditure on the prevention of influenza pandemic in 2006-07? Please set out the expenditure items, amount of expenditure as well as the staffing and establishment involved. What is the provision earmarked for combating influenza pandemic in 2007-08? Has provision been earmarked for studying the possibility of setting up vaccine factories in Hong Kong and for the necessary support? If yes, what is the amount and which party is responsible for the study?

Asked by: Hon. CHENG Kar-foo, Andrew

Reply:

Enhancing preparedness for influenza pandemic is part and parcel of the Department of Health's work on prevention and control of infectious diseases, which is mainly undertaken by the Centre for Health Protection (CHP) and the Port Health Office (PHO). Total allocation to the CHP and the PHO in 2006-07 was \$954.8 million and the number of staff involved was 1 911.

For 2007-08, total provision for CHP and the PHO is \$1,006.1 million. No provision has been earmarked in DH for studying the possibility of setting up vaccine factories in Hong Kong.

Signature _____

Name in block letters _____ Dr P Y LAM

Post Title _____ Director of Health

Date _____ 16.3.2007

**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB(H)113

Question Serial No.

2112

Head: 37 Department of Health

Subhead (No. & title): 000 Operational expenses

Programme:

Controlling Officer: Director of Health

Director of Bureau: Secretary for Health, Welfare and Food

Question:

Please set out the items and the breakdown of expenditure in respect of the prevention and combat of AIDS in 2006-07.

Asked by: Hon. CHENG Kar-foo, Andrew

Reply:

The Special Preventive Programme (SPP) of the Department of Health (DH) prevents and controls AIDS through surveillance, education and publicity, counselling, and treatment of AIDS patients and people who are HIV positive. The total expenditure for these services in 2006-07 was about \$100.3 million.

Besides providing direct services through the SPP under DH, the Government also seeks to prevent and control AIDS by providing financial resources for community-based AIDS programmes through the AIDS Trust Fund. Total grants made by the Fund for 2005-06 amounted to \$39.3 million.

Signature _____

Name in block letters _____ Dr P Y LAM

Post Title _____ Director of Health

Date _____ 16.3.2007

**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB(H)114

Question Serial No.

2157

Head: 37 Department of Health

Subhead (No. & title):

Programme: (1) Statutory Functions

Controlling Officer: Director of Health

Director of Bureau: Secretary for Health, Welfare and Food

Question:

Regarding the item “(the Department) will carry out enforcement duties as required under the Smoking (Public Health) Ordinance” under Matters Requiring Special Attention in 2007-08 under this Programme, could the Administration advise:

1. What are the work progress, the expenditure and staffing involved?
2. How many complaints against smoking behaviour in new no-smoking areas have been received in each district and what follow-up actions have been taken?
3. How many summonses have been issued in each district after the ordinance leading to the extension of no-smoking areas has come into effect? Would the Administration consider increasing the manpower in districts with a higher count of law breakers so as to step up prosecution and strengthen the education on people committing a smoking offence?

Asked by: Hon. FUNG Kin-kee, Frederick

Reply:

In 2007-08, the Tobacco Control Office (TCO) will have a provision of \$23.3 million for carrying out enforcement duties under the amended Smoking (Public Health) Ordinance. The planned staff complement for TCO in 2007-08 is 109, comprising six doctors, seven police officers, 71 tobacco control inspectors, two nurses, four health promotion officers, one research officer and 18 administrative staff. Since end October 2006 when the tobacco control inspectors of the TCO were vested with enforcement powers under the Ordinance, TCO has taken enforcement actions, including conducting inspections of statutory no smoking area and issuing summonses to offenders as necessary. Implementation of the statutory smoking ban has so far been generally smooth and the public has shown support and acceptance of the legislative amendments.

In the two months after the implementation of the smoking ban in new statutory no smoking areas, TCO received about 3 500 complaints, of which some 2 800 were related to smoking in newly expanded no smoking areas. More than 120 summonses have been issued in the first two months. The particulars of another 60 offenders have also been collected for issuing summonses. The complaints received and summonses issued have been broken down by region but not by district, as set out at the Annex. TCO will take stock of the complaints with a view to identifying black-spots for targeted enforcement actions and will deploy appropriate resources and staffing for enforcement in the light of actual caseload.

Signature _____

Name in block letters _____ Dr P Y LAM

Post Title _____ Director of Health

Date _____ 16.3.2007

Breakdown of complaints and summonses by region

Region	Distribution of complaints by region (number/percentage)	Distribution of summonses by region (number/percentage)
Hong Kong	799 (23%)	40 (22%)
Kowloon	1 402 (41%)	85 (46%)
New Territories	1 228 (36%)	59 (32%)

Examination of Estimates of Expenditure 2007-08
**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB(H)115

Question Serial No.

2283

Head: 37 Department of Health

Subhead (No. & title):

Programme: (2) Disease Prevention

Controlling Officer: Director of Health

Director of Bureau: Secretary for Health, Welfare and Food

Question:

What are the financial provisions for the maternal and child health centres (MCHCs) and the expenditure items concerned in 2007-08?

Asked by: Hon. KWOK Ka-ki

Reply:

The Maternal and Child Health Centres provide a comprehensive range of health promotion and disease prevention services for children below six; antenatal and postnatal care; family planning service and cervical cancer screening. The estimated expenditure for 2007-08 is \$402 million.

Signature _____

Name in block letters _____ Dr P Y LAM

Post Title _____ Director of Health

Date _____ 14.3.2007

**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB(H)116

Question Serial No.

2284

Head: 37 Department of Health

Subhead (No. & title):

Programme: (2) Disease Prevention

Controlling Officer: Director of Health

Director of Bureau: Secretary for Health, Welfare and Food

Question:

It is stated by the Department that since there was an increase in the number of local deliveries of babies whose parents were not Hong Kong residents and who had left Hong Kong after birth, without attending the Maternal Child Health Centres (MCHCs) for service, therefore a lower participation rate (87%) of new born babies attending MCHCs was recorded in 2006. As the Hospital Authority has announced recently that the number of local deliveries of babies whose parents are not Hong Kong residents will be increasing, does the Department have any plan to achieve more than 90% participation rate of new born babies attending MCHCs in 2007?

Asked by: Hon. KWOK Ka-ki

Reply:

Information about services of the MCHCs is available in the postnatal wards of all public hospitals and through various channels. However, babies born to non-Hong Kong-resident parents may leave Hong Kong soon after birth or attend other service providers in Hong Kong or elsewhere. The Department of Health (DH) will continue to promote the use of MCHC's services by new born babies. DH will make available to parents who leave Hong Kong soon after giving birth, the necessary health advice such as those related to the care of the newborn and the need to receive immunisation.

Signature _____

Name in block letters _____ Dr P Y LAM

Post Title _____ Director of Health

Date _____ 16.3.2007

**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB(H)117

Question Serial No.

2285

Head: 37 Department of Health

Subhead (No. & title):

Programme: (2) Disease Prevention

Controlling Officer: Director of Health

Director of Bureau: Secretary for Health, Welfare and Food

Question:

The attendances at MCHCs for cervical screening service decreased from 99 000 in 2005 to 97 000 in 2006. What was/were the reason(s)? And what was the cost per case concerned?

Asked by: Hon. KWOK Ka-ki

Reply:

The change in attendances from 99 000 in 2005 to 97 000 in 2006 is within normal fluctuations. The full cost per cervical screening test is \$200.

Signature _____

Name in block letters Dr P Y LAM

Post Title Director of Health

Date 14.3.2007

**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB(H)118

Question Serial No.

2396

Head: 37 Department of Health

Subhead (No. & title):

Programme: (2) Disease Prevention

Controlling Officer: Director of Health

Director of Bureau: Secretary for Health, Welfare and Food

Question:

According to the figures under this Programme, the actual number of enrolment in Elderly Health Centres increased from 37 400 in 2005 to 38 000 in 2006 while the number of attendances for health assessment and medical consultation decreased from 195 000 in 2005 to 190 000 in the same period. There was also a decrease in the attendances at health education activities organised by the Elderly Health Centres and Visiting Health Teams. Please explain the reasons and list the cost per person of health assessment and medical consultation at the Elderly Health Centres in 2005-06 and 2006-07, and the average operational cost of each Elderly Health Centre in 2005-06 and 2006-07. What is the current appointment time and number of people on the waiting list in the Elderly Health Centres? Are there plans to set up additional Elderly Health Centres in some areas with population aging and enhance the services of Elderly Health Centres and Visiting Health Teams subject to demand?

Asked by: Hon. CHEUNG Chiu-hung, Fernando

Reply:

The slight reduction in the number of attendances for health assessment and medical consultation in 2006 was related to difficulties in recruiting nurses for the Elderly Health Centres (EHCs). The mode of delivery of health education activities has been changed from general health talks to more focused in-depth small group learning, resulting in a decrease in the total number of attendances at health education activities.

The respective costs per attendance for health assessment and medical consultation at EHCs are \$470 and \$320 in 2005-06 and \$470 and \$340 in 2006-07. The average operating cost for each EHC was \$4.6 million for 2005-06 and \$4.8 million for 2006-07. As at the end of 2006, there were about 26 700 applications for new enrolment and the median waiting time for new enrolment was 37.2 months.

Elderly Health Centres (EHCs) and Visiting Health Teams (VHTs) are not the only service provider to cater for the health care needs of the elderly. All the stakeholders have to work together to meet the varying needs of the elderly through various measures and services. Private practitioners are also key providers of primary health care. The 75 general out-patient clinics operated by the Hospital Authority (HA) also provide essential curative medical services to the elderly population especially those with low-income or chronic illnesses. Community health care services of HA, such as the Community Geriatric Assessment Teams and the Community Nurses, are also playing a pivotal role in providing health care for the elders. Besides, some non-government organisations (NGOs) are operating health centres on a self-financing basis. The Department of Health will strengthen collaboration with stakeholders including private practitioners and NGOs to enhance primary health services for the elderly in Hong Kong. At present, there is no plan to expand EHCs and VHTs.

Signature _____

Name in block letters _____ Dr P Y LAM

Post Title _____ Director of Health

Date _____ 16.3.2007

**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB(H)119

Question Serial No.

2400

Head: 37 Department of Health

Subhead (No. & title):

Programme: (1) Statutory Functions

Controlling Officer: Director of Health

Director of Bureau: Secretary for Health, Welfare and Food

Question:

How many complaints against healthcare professionals were received in 2006-07? Please list the number of cases respectively by healthcare authorities handling the complaints and results of investigation.

Asked by: Hon. CHENG Kar-foo, Andrew

Reply:

The numbers of complaints against healthcare professionals received in 2006-07 by various boards and councils and results of investigation are set out in Annex.

Signature _____

Name in block letters _____ Dr P Y LAM

Post Title _____ Director of Health

Date _____ 16.3.2007

**Numbers of complaints received in 2006-07 against healthcare professionals by various Boards and Councils
and results of investigation**

	No. of Complaints Received (up to 8 March 2007)	No. of Cases Unsubstantiated and Dismissed	No. of Cases under Investigation	No. of Cases Substantiated #
Medical Council	448	179	269	0 (17)
Dental Council	128	92	36	0 (7)
Nursing Council	11	7	3	1 (1)
Midwives Council	0	0	0	0 (0)
Supplementary Medical Professions Council *	24	11	12	1 (0)
Chiropractors Council	4	0	4	0 (0)
Chinese Medicine Council	145	24	120	1 (22)
Pharmacy and Poisons Board	1	0	0	1 (0)

Note

* Supplementary Medical Professions Council is underpinned by five boards, namely, Medical Laboratory Technologists Board, Optometrists Board, Radiographers Board, Occupational Therapists Board and Physiotherapists Board.

The figures in brackets refer to cases concluded in 2006-07 but were received before 2006-07.

**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB(H)120

Question Serial No.

2401

Head: 37 Department of Health

Subhead (No. & title):

Programme: (1) Statutory Functions

Controlling Officer: Director of Health

Director of Bureau: Secretary for Health, Welfare and Food

Question:

Please list the respective expenditures incurred by various health care authorities such as the Medical Council in 2006-07. Are registration fees paid by their members sufficient to cover the relevant expenditures? If not, please list respectively the percentage of expenditures covered by the fees and the amount to be subsidised by public funding.

Asked by: Hon. CHENG Kar-foo, Andrew

Reply:

The Department of Health (DH) provides secretariat services to various statutory boards and councils which are responsible for, among other things, the regulation of health care professions. The total expenditure in 2006-07 for these services is estimated to be around \$46 million. The amount does not cover expenditure on litigation, professional services, simultaneous interpretation, office rents, etc. DH does not keep the breakdown by individual boards and councils.

The estimated fee income (which covers registration, renewal of practising certificates, licensing examination, etc.) in 2006-07 is \$22 million.

Signature _____

Name in block letters _____ Dr P Y LAM

Post Title _____ Director of Health

Date _____ 16.3.2007

**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB(H)121

Question Serial No.

2402

Head: 37 Department of Health

Subhead (No. & title):

Programme: (1) Statutory Functions

Controlling Officer: Director of Health

Director of Bureau: Secretary for Health, Welfare and Food

Question:

Please list the monthly expenditure and the breakdown, staffing and establishment of the Tobacco Control Office (TCO) subsequent to the implementation of the smoking amendment bill. Will there be an increase in the staffing and provision earmarked for the TCO in 2007-08?

Asked by: Hon. CHENG Kar-foo, Andrew

Reply:

For the Tobacco Control Office (TCO) of the Department of Health (DH), the provision included under Programme (1) Statutory Functions covers mainly staff cost for implementing and enforcing the amended Smoking (Public Health) Ordinance. The actual expenditures were \$0.8 million in January and \$1.0 million in February 2007. It is estimated that the expenditure will rise to \$1.1 million in March 2007. The provision for 2007-08 is increased to \$23.3 million.

The overall staffing in TCO will be increased from 66 in 2006-07 to 109 in 2007-08. Details of staffing are set out at the Annex. The major increase is in the number of tobacco control inspectors (TCI), which will rise from 34 in 2006-07 to 71 in 2007-08 - an increase of 37. In addition, 12 new civil service posts will be created, including one Senior Medical & Health Officer, two Medical & Health Officers, two Police Sergeants and seven administrative and supporting staff. To cope with the increased enforcement duties since 1 January 2007, the staff complement has already been increased with internally redeployed resources to 55 in January, 70 in February and 80 in March. There is no monthly breakdown of staff number as the figure changes from time to time depending on when new recruits report for duty.

Signature _____

Name in block letters _____ Dr P Y LAM

Post Title _____ Director of Health

Date _____ 16.3.2007

<u>Scope of Duties / Responsible Staff</u>	<u>Original Estimate 2006-07</u>	<u>Original Estimate 2007-08</u>
Head TCO		
Principal Medical & Health Officer	0	1
Senior Medical & Health Officer	1	0
Enforcement		
Senior Medical & Health Officer / Medical & Health Officer	0	3
Superintendent of Police/Police Sergeant	5	7
Tobacco Control Inspectors	34	71
Health Education and Smoking Cessation		
Senior Medical & Health Officer/Contract Doctor/Part-time Senior Contract Doctor	2	2
Registered Nurse	2	2
Health Promotion Officer	0	4
Research Officer	1	1
Administrative and Logistics Support		
Senior Executive Officer/Executive Officer /Administrative Assistant	3	4
Clerical Officer/Clerical Assistant/Project Assistant/General Worker	17	13
Motor Driver	1	1
Total:	66	109

**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB(H)122

Question Serial No.

2428

Head: 37 Department of Health

Subhead (No. & title):

Programme: (2) Disease Prevention

Controlling Officer: Director of Health

Director of Bureau: Secretary for Health, Welfare and Food

Question:

Under the new immunisation programme for new born babies recently introduced by the Department of Health, the 4-in-1 formulation vaccine chosen does not include vaccines for infections caused by streptococcus pneumoniae, rotavirus, etc. which are common among new born babies. As a 5-in-1 formulation vaccine is now generally used in the community, would the Administration consider introducing newer and more effective vaccines? If no, what are the reasons for that? What is the cost of a 4-in-1 formulation vaccine as compared with that of a 5-in-1 formulation vaccine?

Asked by: Hon. LI Kwok-ying

Reply:

The Scientific Committee on Vaccine Preventable Diseases of the Centre for Health Protection regularly reviews the local epidemiology of diseases; scientific development and application of new vaccines as well as their formulations and cost-effectiveness; and the experiences of other health authorities before making recommendations to the Administration. Based on these recommendations, the Administration will consider updating the childhood immunisation programme.

The 5-in-1 formulation vaccine contains Haemophilus influenzae type b as the additional component. The need to incorporate Haemophilus influenzae type b vaccination into the childhood immunisation programme is being reviewed by the Scientific Committee. Since there are more than one potential supplier of the 5-in-1 vaccine, the unit cost of the vaccine to be procured in large quantities would have to be determined through tender and therefore cannot be provided at this stage. The current unit cost of a 4-in-1 formulation vaccine is about \$90 to \$120.

Signature _____

Name in block letters _____ Dr P Y LAM

Post Title _____ Director of Health

Date _____ 16.3.2007

**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB(H)123

Question Serial No.

2429

Head: 37 Department of Health

Subhead (No. & title):

Programme: (2) Disease Prevention

Controlling Officer: Director of Health

Director of Bureau: Secretary for Health, Welfare and Food

Question:

Would the Administration consider including vaccines for streptococcus pneumoniae and rotavirus in the immunisation programme for new born babies?

Asked by: Hon. LI Kwok-ying

Reply:

The Administration regularly updates the childhood immunisation programme taking into consideration the recommendations of the Scientific Committee on Vaccine Preventable Diseases. Inclusion of vaccines for streptococcus pneumoniae and rotavirus in the immunisation programme for new born babies is being reviewed by the Scientific Committee.

Signature _____

Name in block letters _____ Dr P Y LAM

Post Title _____ Director of Health

Date _____ 15.3.2007

**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB(H)124

Question Serial No.

1082

Head: 37 Department of Health

Subhead (No. & title):

Programme: (2) Disease Prevention

Controlling Officer: Director of Health

Director of Bureau: Secretary for Health, Welfare and Food

Question:

There was a lower participation rate of new born babies attending maternal and child health centres in 2006, because there was an increase in the number of local deliveries of babies whose parents were not Hong Kong residents and who had left Hong Kong after birth, without attending the maternal and child health centres for service.

Is there any plan to encourage these parents to attend maternal and child health centres?

Asked by: Hon. CHAN Bernard

Reply:

Information about services of the Maternal and Child Health Centre (MCHCs) is available in the postnatal wards of all public hospitals and through various channels. However, babies born to non-Hong Kong-resident parents may leave Hong Kong soon after birth or attend other service providers in Hong Kong or elsewhere. The Department of Health (DH) will continue to promote the use of MCHC's services by new born babies. The DH will make available to parents who leave Hong Kong soon after giving birth, the necessary health advice, such as those related to the care of the newborn and the need to receive immunisation.

Signature _____

Name in block letters _____ Dr P Y LAM

Post Title _____ Director of Health

Date _____ 15.3.2007

**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB(H)125

Question Serial No.

1088

Head: 37 Department of Health

Subhead (No. & title):

Programme: (2) Disease Prevention

Controlling Officer: Director of Health

Director of Bureau: Secretary for Health, Welfare and Food

Question:

The Administration projects that the number of enrolment in elderly health centres, the number of attendances for health assessment and medical consultation at the elderly health centres, and attendances at health education activities organised by the elderly health centres and the visiting health teams in 2007-08 will be the same as those in 2006-07. Does it mean that no additional resources would be provided by the Administration to strengthen the above services? Then, what are the plans with regard to the health care services for the elderly?

Asked by: Hon. LEE Kok-long, Joseph

Reply:

Elderly Health Centres (EHCs) and Visiting Health Teams (VHTs) are not the only service provider to cater for the health care needs of the elderly. All the stakeholders have to work together to meet the varying needs of the elderly through various measures and services. Private practitioners are also key providers of primary health care. The 75 general out-patient clinics operated by the Hospital Authority (HA) also provide essential curative medical services to the elderly population especially those with low-income or chronic illnesses. Community health care services of HA, such as the Community Geriatric Assessment Teams and the Community Nurses, are also playing a pivotal role in providing health care for the elders. Besides, some non-government organisations (NGOs) are operating health centres on a self-financing basis. The Department of Health will strengthen collaboration with stakeholders including private practitioners and NGOs to enhance primary health services for the elderly in Hong Kong. At present, there is no plan to expand EHCs and VHTs.

Signature _____

Name in block letters _____ Dr P Y LAM

Post Title _____ Director of Health

Date _____ 15.3.2007

**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB(H)126

Question Serial No.

1089

Head: 37 Department of Health

Subhead (No. & title):

Programme: (2) Disease Prevention

Controlling Officer: Director of Health

Director of Bureau: Secretary for Health, Welfare and Food

Question:

Regarding disease prevention of the elderly, what are the service plans and expenditure in 2007-08 as compared with those in 2006-07? What are the details of the plans concerned? Has the Administration allocated resources for the provision of eye and dental care services to prevent eye and dental diseases among the elderly? If yes, what are the details? If no, what is/are the reason(s)?

Asked by: Hon. LEE Kok-long, Joseph

Reply:

The Elderly Health Service (EHS) provides integrated preventive health services to the elderly through 18 Elderly Health Centres (EHCs) and 18 Visiting Health Teams (VHTs). Services provided by EHCs include physical checkup, health assessment, counselling, curative treatment and health education. VHTs deliver health promotional programmes to the elderly and their carers in both community and residential care settings. The teams also carry out influenza vaccination programme for the elderly residing in institutions. In 2007-08, EHS will also provide support for the Pilot Elder Learning Scheme to promote active aging for elders. The total expenditure will increase from \$143.2 million in 2006-07 to \$147.1 million in 2007-08.

The Department of Health (DH) promotes eye health and dental health among the elderly. The VHTs of EHS work with other service providers in reaching out into the community to deliver health promotional programme on various topics, including eye and dental health. The Oral Health Education Unit also organises oral health promotion activities for the community to increase knowledge and awareness of dental health and promoting the proper use of dental care services.

There is no plan to provide eye or dental care services specifically for the elderly. The DH will strengthen collaboration with other stakeholders, including private practitioners and non-government organisations, to enhance the primary health services for the elderly in Hong Kong.

Signature _____

Name in block letters Dr P Y LAM

Post Title Director of Health

Date 15.3.2007

**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB(H)127

Question Serial No.

1095

Head: 37 Department of Health

Subhead (No. & title):

Programme: (1) Statutory Functions

Controlling Officer: Director of Health

Director of Bureau: Secretary for Health, Welfare and Food

Question:

The Administration has stated under this Programme that the Administration will promote/ protect the health of radiation workers and set the target proportion of workers getting radiation dose <20mSv a year as 100%. Please advise the number of radiation workers who were provided with physical examination in 2004, 2005 and 2006 and also whether the Administration will review and enhance the current standard so as to further protect the health of radiation workers.

Asked by: Hon. LEE Kok-long, Joseph

Reply:

The *International Basic Safety Standards for Protection against Ionizing Radiation and for the Safety of Radioactive Sources*, adopted by almost all countries, promulgate a dose limit of 20 mSv per year averaged over five consecutive years and 50 mSv in any single year. The target of 20 mSv in any year adopted by Hong Kong is stricter than the international standard.

In 2004, 2005 and 2006, physical examinations were arranged for 973, 1 045 and 1 018 radiation workers respectively. All of them were certified fit for radiation work and there was no report of illness arising from radiation work during this period. The average annual radiation doses recorded by the individual occupational radiation monitoring programme for radiation workers in the same period were 0.08, 0.07 and 0.08 mSv respectively. These doses were well below the statutory limit of 20 mSv. There is no scientific basis to revise the statutory limit.

Signature _____

Name in block letters _____ Dr P Y LAM

Post Title _____ Director of Health

Date _____ 15.3.2007

**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB(H)128

Question Serial No.

1097

Head: 37 Department of Health

Subhead (No. & title):

Programme: (3) Health Promotion

Controlling Officer: Director of Health

Director of Bureau: Secretary for Health, Welfare and Food

Question:

As regards the training of health promoters, the target in 2007 is to train more than 1 500 promoters. Would the Administration advise this Committee on the following-

1. What are the specific functions of health promoters and the health promotion duties to be performed?
2. What are the criteria for estimating the number of health promoters to be appointed? What is the expenditure involved?
3. As a result of their promotion, what are the expected improvements to the health of the general public?

Asked by: Hon. LEE Kok-long, Joseph

Reply:

To enhance the effectiveness of health promotion work, the Department of Health will train more than 1 500 health promoters in 2007-08. After training, health promoters will organise and support health promotional activities in different sectors, helping to enhance health knowledge and practices in the community.

The number of health promoters to be trained has taken into consideration the nature and content of health promotion programmes to be launched in 2007-08. Expenditures on these training activities will be absorbed in the Department's overall provision on health promotion and will not be separately identifiable.

Signature _____

Name in block letters _____ Dr P Y LAM

Post Title _____ Director of Health

Date _____ 15.3.2007

**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB(H)129

Question Serial No.

1098

Head: 37 Department of Health

Subhead (No. & title):

Programme: (3) Health Promotion

Controlling Officer: Director of Health

Director of Bureau: Secretary for Health, Welfare and Food

Question:

The Administration mentioned that in 2007-08, the Department of Health will enhance its public health promotion programmes to instil a healthy lifestyle concept in the community, with emphasis on healthy eating programme. Could the Administration advise this Committee –

1. what are the details of the programmes and the expenditure involved?
2. what kinds of benchmarks are adopted by the Administration to measure the effectiveness of healthy eating and whether the expected performance has been achieved?

Asked by: Hon. LEE Kok-long, Joseph

Reply:

The Department of Health (DH) launched the 'EatSmart@school.hk' campaign in September 2006 to promote healthy eating habits among primary school children. Comprehensive strategies are adopted, including alliance building, research and evaluation, publicity and advocacy, education and empowerment, and creating supportive environments in primary schools. In 2007-08, DH will facilitate schools to develop and implement policies that support healthy eating, promote collaboration among food suppliers, parents and schools, and strengthen nutritional education for parents and food suppliers. Expenditures on these activities will be absorbed in the Department's overall provision on health promotion and will not be separately identifiable.

The DH envisages an increase in the number of schools adopting healthy eating policies, an increase in the proportion of lunch and snack choices meeting nutritional standards promulgated by the DH, and improvement in students' knowledge, attitude and practice of healthy eating.

Signature _____

Name in block letters _____ Dr P Y LAM

Post Title _____ Director of Health

Date _____ 15.3.2007

**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB(H)130

Question Serial No.

1099

Head: 37 Department of Health

Subhead (No. & title):

Programme: (3) Health Promotion

Controlling Officer: Director of Health

Director of Bureau: Secretary for Health, Welfare and Food

Question:

The Administration estimated that the AIDS counselling attendances will increase by 150 in 2007 as compared with the actual figure in 2006. Could the Administration advise –

1. the reason(s) for estimating the number of HIV infected persons to increase?
2. whether there is a rising trend in the number of HIV infected persons?
3. what is the distribution of patients by age and sex in 2004, 2005 and 2006?

Asked by: Hon. LEE Kok-long, Joseph

Reply:

The Department of Health runs the AIDS Counselling and Testing Service (ACTS), which offers free, confidential and anonymous HIV tests for the public. Clients attending ACTS may or may not be HIV infected.

For the past three years, the distribution of clients attending ACTS by age and sex is as follows:

<u>Age</u>	<u>2004</u>	<u>2005</u>	<u>2006</u>
<20	119	148	140
20-29	1 179	1 057	1 113
30-39	1 006	946	954
40-49	454	360	362
50-59	156	120	132
60-69	58	61	52
>70	20	13	13
<i>Not disclosed</i>	8	295	84
<i>Total</i>	3 000	3 000	2 850

<u>Sex</u>	<u>2004</u>	<u>2005</u>	<u>2006</u>
<i>Male</i>	2 536	2 233	2 342
<i>Female</i>	456	472	424
<i>Not disclosed</i>	8	295	84
<i>Total</i>	3 000	3 000	2 850

There are signs of increase of HIV infections in Hong Kong in the past two to three years, with sexual transmission being the dominant route. In particular, the past two years have seen a substantial rise in HIV infections among men who have sex with men.

Signature _____

Name in block letters _____ Dr P Y LAM

Post Title _____ Director of Health

Date _____ 15.3.2007

**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB(H)131

Question Serial No.

1100

Head: 37 Department of Health

Subhead (No. & title):

Programme: (4) Curative Care

Controlling Officer: Director of Health

Director of Bureau: Secretary for Health, Welfare and Food

Question:

It is stated in Matters Requiring Special Attention 2007-08 that the Department of Health will continue to provide specialised curative services to the public and dental service to patients with special oral healthcare needs or emergency. Can the Administration advise the Committee:

1. the detail of the plan and expenditure involved;
2. whether dental examination service will be provided on the basis of "health care and welfare voucher" and the elderly will be given priority in the promotion of service.

Asked by: Hon. LEE Kok-long, Joseph

Reply:

The Department of Health provides specialist dental treatment to hospital in-patients, groups with special oral healthcare needs and emergency cases in seven public hospitals. Patients who are medically compromised, such as having conditions prone to infection and bleeding, physically or mentally disabled or those who have facial deformities are regarded as "groups with special oral healthcare needs". Patients who have dental pain and trauma are regarded as "emergency cases". Also, there are 11 designated government dental clinics providing free emergency dental services to the general public. In 2007-08, the provision for dental service under Programme 4 "Curative Care" is \$35.2 million.

There is no plan to use "health care and welfare voucher" to provide dental check-up services for the elderly.

Signature _____

Name in block letters _____ Dr P Y LAM

Post Title _____ Director of Health

Date _____ 15.3.2007

**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB(H)155

Question Serial No.

2062

Head: 37 Department of Health

Subhead (No. & title): 000 Operational expenses

Programme:

Controlling Officer: Director of Health

Director of Bureau: Secretary for Health, Welfare and Food

Question:

The Secretary for Health, Welfare and Food and the Secretary for Security have announced earlier that the arrival clearance checks for non-local pregnant women would be stepped up at the immigration control points starting from February 2007. The Health, Welfare and Food Bureau would also deploy medical staff to assist staff of the Immigration Department in the implementation of the new immigration measures. Please set out the number of relevant medical staff and medical facilities deployed to each immigration control point as well as the provision and other relevant expenditure items.

Asked by: Hon. KWOK Ka-ki

Reply:

Since 1 February 2007, the Department of Health (DH) has been providing a team of one doctor and one nurse at each of the Lo Wu and Lok Ma Chau Immigration Control Points to offer professional support to the Immigration Department. The above duties are currently covered by 12 doctors, 14 nurses and four midwives specifically engaged for the purpose and mostly on a part-time basis. Essential medical equipment is provided on site. The expenditure for the above staff will be absorbed from within the allocated resources of DH.

Signature _____

Name in block letters _____ Dr P Y LAM

Post Title _____ Director of Health

Date _____ 19.3.2007

**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB(H)172

Question Serial No.

2471

Head: 37 Department of Health

Subhead (No. & title):

Programme: (1) Statutory Functions

Controlling Officer: Director of Health

Director of Bureau: Secretary for Health, Welfare and Food

Question:

What is the current staff establishment involved in enforcing the Undesirable Medical Advertisements Ordinance in the Department of Health?

Asked by: Hon. LI Kwok-ying

Reply:

The current staffing level involved in enforcing the Undesirable Medical Advertisements Ordinance is 2.5 professionals and 10 supporting staff.

Signature _____

Name in block letters _____ Dr P Y LAM

Post Title _____ Director of Health

Date _____ 14.3.2007

**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB(H)173

Question Serial No.

2472

Head: 37 Department of Health

Subhead (No. & title):

Programme: (1) Statutory Functions

Controlling Officer: Director of Health

Director of Bureau: Secretary for Health, Welfare and Food

Question:

Are there any plan and provision earmarked by the Department of Health (DH) for discussion with the industries about the enforcement details and organisation of workshops to enhance their understanding of the Undesirable Medical Advertisements Ordinance (UMAO)? If yes, what are the details of the plan and expenditure involved?

Asked by: Hon. LI Kwok-ying

Reply:

The Department of Health (DH) has organised briefing sessions and workshops for pharmaceutical companies, publishers and advertising agencies to familiarise them with the requirements of the UMAO. Furthermore, guidelines have been developed and uploaded on to DH's Homepage. DH will continue to liaise with parties concerned in this regard.

The expenditure for the above activities will be absorbed from within the existing resources of DH and will not be separately identifiable.

Signature _____

Name in block letters _____ Dr P Y LAM

Post Title _____ Director of Health

Date _____ 15.3.2007

**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB(H)174

Question Serial No.

2473

Head: 37 Department of Health

Subhead (No. & title):

Programme: (1) Statutory Functions

Controlling Officer: Director of Health

Director of Bureau: Secretary for Health, Welfare and Food

Question:

The implementation of new measures on immigration control on Mainland pregnant women has started since 1 February 2007 and the Department of Health has to deploy medical staff to conduct examination for those Mainland pregnant women suspected of failing to meet the immigration requirements. What is the staff establishment involved? Is there any provision earmarked for providing the above medical professional support at other border control points?

Asked by: Hon. LI Kwok-ying

Reply:

Since 1 February 2007, the Department of Health (DH) has been providing a team of one doctor and one nurse at each of the Lo Wu and Lok Ma Chau Immigration Control Points to offer professional support to the Immigration Department. The above duties are currently covered by 12 doctors, 14 nurses and four midwives specifically engaged for the purpose and mostly on a part-time basis.

The expenditure for the above staff will be absorbed from within DH's allocated resources. There is at present no plan to deploy medical staff at other control points and no provision has been earmarked for that purpose.

Signature _____

Name in block letters _____ Dr P Y LAM

Post Title _____ Director of Health

Date _____ 19.3.2007

**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB(H)175

Question Serial No.

2474

Head: 37 Department of Health

Subhead (No. & title):

Programme: (2) Disease Prevention

Controlling Officer: Director of Health

Director of Bureau: Secretary for Health, Welfare and Food

Question:

Please set out the number and the breakdown by age group of the participants served under each project in respect of the Government Influenza Vaccination Programme implemented by the Department of Health in 2005-06 and 2006-07. What is the unit cost of vaccination given under each project?

Asked by: Hon. LI Kwok-ying

Reply:

The vaccine uptake by groups covered under the Government Influenza Vaccination Programme (GIVP) in 2005-06 and 2006-07 are listed below:

Eligible Clients	Uptake in 2005-06	Uptake in 2006-07* (as at 3.3.2007)
Residents in Residential Care Homes for the Elderly	57 000	56 000
Residents in Residential Care Homes for the Disabled	9 600	11 000
Community living elderly with chronic illnesses requiring follow-up in public hospitals or clinics or elderly receiving Comprehensive Social Security Assistance (CSSA)	94 300	118 600
Persons under 65 years with chronic illnesses and on CSSA or in-patients of Hospital Authority (HA) with chronic illnesses	16 200	18 700
Health care workers in the Government, HA, and Residential Care Homes	60 000	49 000
Poultry workers or staff to be involved in culling operation	11 000	8 200
Children (6 to 23 months) from families receiving CSSA	3 900	2 600
Pregnant women on CSSA	26	17
TOTAL	252 026	264 117
Cost per dose of vaccine	\$28.0	\$33.3

* Programme still in progress

Signature _____

Name in block letters _____ Dr P Y LAM

Post Title _____ Director of Health

Date _____ 15.3.2007

**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB(H)176

Question Serial No.

2475

Head: 37 Department of Health

Subhead (No. & title):

Programme: (2) Disease Prevention

Controlling Officer: Director of Health

Director of Bureau: Secretary for Health, Welfare and Food

Question:

Were there any unused stock of influenza vaccines under the Government Influenza Vaccination Programme (GIVP) implemented by the Department of Health in 2005-06 and 2006-07? If yes, how would those remaining vaccines be treated? How many doses of influenza vaccines are estimated to be procured in 2007-08 and what is the unit cost?

Asked by: Hon. LI Kwok-ying

Reply:

There were around 25 000 unused doses of vaccines in the Department of Health in 2005-06. They served for contingency purpose and were discarded upon expiry. Since the 2006-07 GIVP is still in progress, the number of unused vaccines is not yet available.

DH undertakes reviews to assess vaccination coverage and effectiveness of the programme. It also conducts research for better understanding of population needs and service planning. The Scientific Committee on Vaccine Preventable Diseases will recommend target groups to receive vaccination. The Administration will take into account the aforesaid to work out the number of vaccines to be procured. At this stage, the number of doses and unit cost of vaccine for 2007-08 are not yet available.

Signature _____

Name in block letters _____ Dr P Y LAM

Post Title _____ Director of Health

Date _____ 15.3.2007

**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB(H)177

Question Serial No.

2476

Head: 37 Department of Health

Subhead (No. & title):

Programme: (3) Health Promotion

Controlling Officer: Director of Health

Director of Bureau: Secretary for Health, Welfare and Food

Question:

Regarding the problems of obesity and balanced diet in school children, what are the plans and measures in 2007-08? What will be the expenditure and staff establishment involved?

Asked by: Hon. LI Kwok-ying

Reply:

The Department of Health (DH) launched the 'EatSmart@school.hk' campaign in September 2006 to promote healthy eating habits among primary school children. Comprehensive strategies are adopted, including alliance building, research and evaluation, publicity and advocacy, education and empowerment, and creating supportive environments in primary schools. In 2007-08, DH will facilitate schools to develop and implement policies that support healthy eating, promote collaboration among food suppliers, parents and schools, and strengthen nutritional education for parents and food suppliers. The campaign instils into school children the importance of healthy eating and encourages schools to limit the sale of unhealthy snacks.

Activities under the campaign are carried out by a multi-disciplinary team of doctors, nurses, dietitians, health promotion officers and educational, research and marketing personnel. Expenditures on these activities will be absorbed in the Department's overall provision on health promotion and will not be separately identifiable.

Signature _____

Name in block letters _____ Dr P Y LAM

Post Title _____ Director of Health

Date _____ 15.3.2007

**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB(H)179

Question Serial No.

2481

Head: 37 Department of Health

Subhead (No. & title):

Programme: (2) Disease Prevention

Controlling Officer: Director of Health

Director of Bureau: Secretary for Health, Welfare and Food

Question:

The actual number of laboratory tests relating to public health is 2 240 000 for 2006. Please set out the categories of laboratory tests performed and the allocation of the relevant expenditures.

Asked by: Hon. LEE Kok-long, Joseph

Reply:

The types of laboratory tests relating to public health and their respective recurrent expenditures are as follows:

<u>Type of laboratory tests</u>	<u>No. of laboratory tests in 2006</u>	<u>Estimated Recurrent expenditure for 2006-07</u> <u>(\$million)</u>
Virology	570 000	51.5
Cytology	540 000	39.8
Microbiology	1 130 000	96.2
Total	2 240 000	187.5

Signature _____

Name in block letters _____ Dr P Y LAM

Post Title _____ Director of Health

Date _____ 15.3.2007

**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB(H)180

Question Serial No.

2482

Head: 37 Department of Health

Subhead (No. & title):

Programme: (4) Curative Care

Controlling Officer: Director of Health

Director of Bureau: Secretary for Health, Welfare and Food

Question:

The target under "appointment time for new dermatology cases within 12 weeks (% of cases)" could not be achieved in 2006 and a longer waiting time was recorded because a number of experienced doctors had left the service. Please advise:

1. which hospitals had been affected and how would the quality of healthcare service be affected?
2. will the Administration recruit more staff to solve the problem? If yes, what will be the expenditure involved? What will the estimated reduction in the waiting time for new and old dermatology cases respectively be?
3. if no, what will the estimated waiting time for new and old cases be?

Asked by: Hon. LEE Kok-long, Joseph

Reply:

More than 95% of dermatology patients served by the Department of Health (DH) are treated in the outpatient clinics of Social Hygiene Service.

In 2006, 70% of new dermatology cases were given an appointment within 12 weeks. This represented an improvement from the situation in 2005. New cases are prioritised to ensure that urgent ones are attended to in a timely manner. An internal triage system for screening new skin referrals has been established and over 95% of new skin cancer referrals were attended to within two weeks in 2006.

DH has endeavoured to fill vacancies arising from staff wastage as soon as possible. However, it takes time for the newly recruited doctors to gain experience in the dermatology specialty and to clear the accumulated cases. DH expects that the manpower situation would improve, which in turn would shorten the waiting time.

Signature _____

Name in block letters _____ Dr P Y LAM

Post Title _____ Director of Health

Date _____ 16.3.2007

**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

HWFB(H)181

Question Serial No.

2492

Head: 37 Department of Health

Subhead (No. & title):

Programme: (3) Health Promotion

Controlling Officer: Director of Health

Director of Bureau: Secretary for Health, Welfare and Food

Question:

In 2007-08, the Department will enhance its public health promotion programmes, promoting a healthy living concept to the public, with emphasis on healthy eating. Regarding the promotion of healthy eating, could the Administration advise –

1. how to enhance the promotion of the existing programmes? What are the contents of the existing programmes? What are the new performance indicators set for the existing work in 2007-08? and
2. have additional resources been allocated to new publicity projects to promote organic diet to different groups such as the general public, traders, students, parents and school lunch providers in order to popularise the culture of organic diet, to enhance the knowledge of the public, especially the grassroot level, on organic food so that they can have more choices? If yes, please provide the details.

Asked by: Hon. LEE Kok-long, Joseph

Reply:

The Department of Health (DH) launched the 'EatSmart@school.hk' campaign in September 2006 to promote healthy eating habits among primary school children. Comprehensive strategies are adopted, including alliance building, research and evaluation, publicity and advocacy, education and empowerment, and creating supportive environments in primary schools. In 2007-08, DH will facilitate schools to develop and implement policies that support healthy eating, promote collaboration among food suppliers, parents and schools, and strengthen nutritional education for parents and food suppliers.

The DH envisages an increase in the number of schools setting up healthy eating policies, an increase in the proportion of lunch and snack choices meeting nutritional standards promulgated by the Department, and improvement in students' knowledge, attitude and practice of healthy eating.

The DH has no plan in 2007-08 to allocate additional resources to specifically promote organic diet.

Signature _____

Name in block letters _____ Dr P Y LAM

Post Title _____ Director of Health

Date _____ 15.3.2007

**CONTROLLING OFFICER'S REPLY TO
INITIAL WRITTEN QUESTION**

Reply Serial No.

SB191

Question Serial No.

1101

Head: 37 Department of Health

Subhead (No. & title):

Programme: (6) Treatment of Drug Abusers

Controlling Officer: Director of Health

Director of Bureau: Secretary for Security

Question:

Both the average attendance rate of patients registered with methadone clinics and the completion rate of the Society for the Aid and Rehabilitation of Drug Abusers (SARDA)'s inpatient treatment courses for detoxification in 2006 show a rising trend as compared with the figures in 2005. Could the Administration provide information on –

1. Whether there is a rising trend in the number of drug abusers in Hong Kong?
2. What are the distributions by sex and age of the patients registered with methadone clinics and admitted for SARDA's inpatient treatment courses in 2006?
3. With regard to the above-mentioned distributions, what measures would the Administration take to tackle the problem of rising number of drug abusers?

Asked by: Hon. LEE Kok-long, Joseph

Reply:

According to the Central Registry of Drug Abuse, the number of reported drug abusers decreased from 14 852 in 2004 to 14 087 in 2005. There are 10 779 abusers in the first three quarters of 2006, representing a 9.5% decrease as compared with that in the same period of 2005. Slight fluctuations in the attendance rate of patients registered with methadone clinics and the completion rate of SARDA's inpatient treatment course for detoxification do not reflect an increase in the number of drug abusers. The distribution of patients in 2006 is listed below:

Age	Registration with Methadone clinics			Admission into SARDA drug treatment centres		
	Male	Female	Total	Male	Female	Total
under 21	6	3	9	19	12	31
21 or above	7 225	1 073	8 298	1 384	149	1 533
Total	7 231	1 076	8 307	1 403	161	1 564

The Department of Health (DH) will continue to provide methadone maintenance and detoxification treatment and subvent residential treatment and rehabilitation programmes operated by voluntary agencies. DH will also continue to promote healthy lifestyle and educate the public about the adverse effect of drug abuse.

Signature _____

Name in block letters _____ Dr PY Lam

Post Title _____ Director of Health

Date _____ 14.3.2007