

CONTROLLING OFFICER'S REPLY**FHB(H)050****(Question Serial No. 0553)**

Head: (140) Government Secretariat: Food and Health Bureau
(Health Branch)

Subhead (No. & title): (-) Not Specified

Programme: (1) Health

Controlling Officer: Permanent Secretary for Food and Health (Health) (Richard YUEN)

Director of Bureau: Secretary for Food and Health

Question:

The Government has set aside \$200 billion for the ten-year hospital development plan of the Hospital Authority. Please set out the details, expenditure and additional manpower involved in the projects each year by hospital cluster.

Asked by: Prof Hon Joseph LEE Kok-long (Member Question No. 1)

Reply:

The following table sets out the estimated number of additional beds and operating theatres, and the estimated annual capacity of specialist outpatient clinic and general outpatient clinic attendances by hospital cluster to be provided under the ten-year hospital development plan (HDP) of the Hospital Authority (HA).

Hospital Cluster	Proposed projects	Estimated Additional Provision ¹			
		beds	operating theatres	annual capacity of specialist outpatient clinic attendances	annual capacity of general outpatient clinic attendances
Hong Kong West	Redevelopment of Grantham Hospital, phase 1	-	3	-	-
	Redevelopment of Queen Mary Hospital (Phase 1) - main works	-	14	-	-
<i>Sub-total of the Hong Kong West Cluster</i>		-	<i>17</i>	-	-

Hospital Cluster	Proposed projects	Estimated Additional Provision ¹			
		beds	operating theatres	annual capacity of specialist outpatient clinic attendances	annual capacity of general outpatient clinic attendances
New Kowloon Central ²	Redevelopment of Our Lady of Maryknoll Hospital	16	-	75 900	20 800
	New Acute Hospital (NAH) at Kai Tak Development Area (Phase 1)	2 400	37	1 410 000	-
	NAH at Kai Tak Development Area (Phase 2)				
	Redevelopment of Kwong Wah Hospital - main works	350	10	255 600	-
	Community Health Centre (CHC) at ex-Mong Kok Market site	-	-	-	88 000
Sub-total		2 766	47	1 741 500	108 800
Kowloon East	Expansion of Haven of Hope Hospital	160	-	-	-
	Expansion of United Christian Hospital - main works (superstructure and remaining works)	560	5	681 800	-
Sub-total		720	5	681 800	-
New Kowloon West ²	Redevelopment of Kwai Chung Hospital (Phase 1)	80	-	254 500	-
	Redevelopment of Kwai Chung Hospital (Phases 2 & 3)				
	Expansion of Lai King Building in Princess Margaret Hospital	400	-	-	-
	CHC in Shek Kip Mei	-	-	-	154 000
Sub-total		480	-	254 500	154 000
New Territories East	Redevelopment of Prince of Wales Hospital (Phase 2) (stage 1)	450	16	-	-
	Expansion of North District Hospital	600	-	180 000	-
	Development of a CHC in North District	-	-	-	176 000

Hospital Cluster	Proposed projects	Estimated Additional Provision ¹			
		beds	operating theatres	annual capacity of specialist outpatient clinic attendances	annual capacity of general outpatient clinic attendances
<i>Sub-total</i>		<i>1 050</i>	<i>16</i>	<i>180 000</i>	<i>176 000</i>
New Territories West	Extension of Operating Theatre Block for Tuen Mun Hospital	-	9	-	-
	Hospital Authority Supporting Services Centre at Tin Shui Wai	-	-	-	-
<i>Sub-total</i>		<i>-</i>	<i>9</i>	<i>-</i>	<i>-</i>
<i>HA's Total</i>		<i>5 016</i>	<i>94</i>	<i>2 857 800</i>	<i>438 800</i>

Notes:

1. Actual deliverables of individual projects may be adjusted in the future subject to detailed planning and design.
2. According to the recommendations of the Steering Committee on Review of HA, the Wong Tai Sin district and Mong Kok area (Kwong Wah Hospital, Wong Tai Sin Hospital and Our Lady of Maryknoll Hospital), which are originally served by Kowloon West Cluster, will be re-grouped to Kowloon Central Cluster.

The Hospital Authority (HA) and Architectural Services Department are conducting planning and preparatory works for the above projects, such as ground investigations, technical assessments and detailed design works. Upon completion of the concerned works, HA will be able formulate a more concrete timetable and cost estimate for individual projects under the HDP.

The detailed operational arrangements for individual HDP projects, such as the distribution of beds by specialty and the resource implications, including the financial and manpower requirements, will be worked out at a later stage when the detailed design and commissioning plans are finalised. In general, a phased implementation approach for service commissioning of hospital development projects will be adopted to cater for prevailing service needs of the community. HA will continue to closely monitor the manpower situation, flexibly deploy its staff and recruit additional staff to ensure that the service and operational needs in relation to the projects under the HDP are met.

- End -

CONTROLLING OFFICER'S REPLY

FHB(H)051

(Question Serial No. 0554)

Head: (140) Government Secretariat: Food and Health Bureau
(Health Branch)

Subhead (No. & title): (-) Not Specified

Programme: (1) Health

Controlling Officer: Permanent Secretary for Food and Health (Health) (Richard YUEN)

Director of Bureau: Secretary for Food and Health

Question:

Regarding the Government's provision of \$10 billion for the Hospital Authority to establish an endowment fund for enhancing the implementation of public-private partnership initiatives,

- a. what are the details of such initiatives and the expenditure and manpower involved?
- b. will the initiatives cover optometric services to relieve the burden on the public healthcare system? If so, what are the details? If not, what are the reasons?
- c. will the initiatives cover chiropractic services to relieve the burden on the public healthcare system? If so, what are the details? If not, what are the reasons?
- d. will the initiatives cover dental services? If so, what are the details? If not, what are the reasons?

Asked by: Prof Hon Joseph LEE Kok-long (Member Question No. 2)

Reply:

(a)

The allocation of \$10 billion to the Hospital Authority (HA) for setting up an endowment fund, namely the HA Public-Private Partnership (PPP) Fund, aims to generate investment returns for regularising and enhancing existing clinical PPP programmes, as well as developing new clinical PPP initiatives in the future.

In line with the Government's healthcare reform proposals, HA has launched a variety of clinical PPP initiatives since 2008, including :

(i) Cataract Surgeries Programme (launched in 2008)

This Programme aims to address service demand and improve access of HA patients to cataract surgeries through a PPP delivery model. Patients on HA clusters' routine cataract surgery waiting lists for a specified period are invited to undertake surgeries in the private sector on a voluntary basis with a fixed government subsidy.

(ii) Tin Shui Wai Primary Care Partnership Project (TSW PPP) (launched in 2008)

This Programme is a pilot PPP model for the delivery of primary care service and promotion of the family doctor concept in the community. The Programme purchases primary care services from private medical practitioners in the TSW district.

(iii) Haemodialysis Public-Private Partnership Programme (HD PPP) (launched in 2010)

Clinically suitable end stage renal disease patients are invited to join the Programme voluntarily. Recruited patients may receive HD treatment in one of the partner community HD centres of their choice. The HD services are procured from 6 qualified community HD centres.

(iv) Patient Empowerment Programme (launched in 2010)

Suitable primary care chronic disease patients, mainly suffering from diabetes and hypertension, are referred by the HA to attend empowerment sessions. The empowerment sessions are procured from 3 non-governmental organisations in the community.

(v) Pilot Project on Enhancing Radiological Investigation Services through Collaboration with the Private Sector (launched in 2012)

This Pilot Project aims at exploring a new operation model to cope with the increasing demand for cancer radiological investigation services through purchase of Computed Tomography (CT) and Magnetic Resonance Imaging (MRI) services from the private sector. Subject to clinical eligibility screening, patients from selected cancer groups that are in need of CT/MRI examinations for sequential clinical management are invited to join the Pilot Project.

(vi) General Outpatient Clinic Public-Private Partnership Programme (GOPC PPP) (launched in 2014)

The GOPC PPP Programme was launched in Kwun Tong, Wong Tai Sin and Tuen Mun districts on a pilot basis in mid-2014. Clinically stable patients having hypertension with or without hyperlipidemia, and later diabetes mellitus patients, currently taken care of by HA GOPCs have been invited for voluntary participation. All private doctors practising in these 3 districts are welcome to participate in this Programme.

Each participating patient will receive up to 10 subsidised visits per year, including medical consultations covering both chronic and acute care; drugs for treating their chronic conditions and episodic illnesses to be received directly from private doctors at their clinics; and investigation services provided by HA as specified through private doctors' referral.

A roll-out plan for the Programme has been mapped out having considered the Government commitment, the initial positive feedback from the medical professional bodies, patients, private doctors, and staff as well as the community call for extension of the GOPC PPP to other districts. It is anticipated that the Programme will be extended to the remaining 15 districts of Hong Kong in 3 years, starting from 2016-17. The proposed roll-out plan is outlined as follows :

District	2016-17	2017-18	2018-19	Cluster Applicable
Central and Western		✓		HKWC
Eastern	✓			HKEC
Southern	✓			HKWC / HKEC
Wan Chai	✓			HKEC
Kowloon City	✓			KCC
Sham Shui Po	✓			KWC
Yau Tsim Mong			✓	KWC / KCC
Islands		✓		KWC / HKEC
Kwai Tsing	✓			KWC
North			✓	NTEC
Sai Kung	✓			KEC
Sha Tin	✓			NTEC
Tai Po		✓		NTEC
Tsuen Wan		✓		KWC
Yuen Long	✓			NTWC

In addition to the above existing programmes, 2 new PPP programmes are under planning :

- (i) The Infirmary Service PPP Programme aims to enhance the choices of infirmary care services for patients on the Central Infirmary Waiting List managed by HA. 64 beds will be provided under this Programme.
- (ii) Dovetailing with the Government's Colorectal Cancer Screening Pilot Programme, a Colonoscopy PPP Programme will be launched by HA to offer more choices to patients within the programme's clinical criteria.

In addition to the above programmes, new PPP initiatives to meet the emerging healthcare needs of the public and redress the imbalance between public and private healthcare services will continue to be explored.

The estimated expenditure for the clinical PPP initiatives in 2016-17 is as follows :

	2016-17 Estimated Annual Expenditure (in \$ million)
GOPC PPP and its expansion	58
Other existing PPP programmes and enhancements	123
New initiatives and development	43
Technology and administration	15
Total:	239

(b), (c) & (d)

At present, HA does not provide chiropractic and general dental services. Whilst currently having no plans on PPP for optometric services, HA will continue to communicate with the public and patient groups, and work closely with relevant stakeholders to explore the feasibility of providing other PPP programmes in the future.

Abbreviations

- HKEC - Hong Kong East Cluster
- HKWC - Hong Kong West Cluster
- KCC - Kowloon Central Cluster
- KEC - Kowloon East Cluster
- KWC - Kowloon West Cluster
- NTEC - New Territories East Cluster
- NTWC - New Territories West Cluster

- End -

CONTROLLING OFFICER'S REPLY

FHB(H)052

(Question Serial No. 0555)

Head: (140) Government Secretariat: Food and Health Bureau
(Health Branch)

Subhead (No. & title): (-) Not Specified

Programme: (1) Health

Controlling Officer: Permanent Secretary for Food and Health (Health) (Richard YUEN)

Director of Bureau: Secretary for Food and Health

Question:

Regarding the strategic review of healthcare manpower planning and professional development and the voluntary accredited registers scheme for supplementary healthcare professions mentioned in the 2016 Policy Address, has the Administration earmarked resources and manpower for the relevant implementation work? If yes, what are the details, expenditure and manpower involved? If no, what are the reasons?

Asked by: Prof Hon Joseph LEE Kok-long (Member Question No. 3)

Reply:

In response to the challenges of an ageing population and increasing demand for healthcare services with higher expectations, the Government is conducting a strategic review on healthcare manpower planning and professional development in Hong Kong (the Review). The Review aims to make recommendations that would better enable our society to meet the projected demand for healthcare professionals as well as to foster professional development. We expect that the Review will be completed in mid-2016. The Government will publish the report and take forward the recommendations as appropriate upon completion of the Review.

Furthermore, the Government will launch a voluntary accredited registers pilot scheme (the Scheme) in 2016 for healthcare personnel who are currently not subject to statutory regulation. The Scheme is under development at present.

No additional resources have been earmarked for the Review and the Scheme in 2016-17. The Government will absorb the additional workload by flexible redeployment of existing manpower resources.

- End -

CONTROLLING OFFICER'S REPLY

FHB(H)053

(Question Serial No. 0556)

Head: (140) Government Secretariat: Food and Health Bureau
(Health Branch)

Subhead (No. & title): (-) Not Specified

Programme: (1) Health

Controlling Officer: Permanent Secretary for Food and Health (Health) (Richard YUEN)

Director of Bureau: Secretary for Food and Health

Question:

Regarding the strategic review on healthcare manpower planning and professional development, has the Government assessed the manpower requirement for nurses for future public healthcare services? If yes, please provide the following information:

- a. What are the criteria for assessing the manpower requirement for nurses?
- b. Has the Government considered the feasibility of putting in place an indicator for nurse-to-patient ratio in its planning for the future manpower requirement for nurses in the Hospital Authority? If yes, what are the details? If not, what are the reasons?

Asked by: Prof Hon Joseph LEE Kok-long (Member Question No. 4)

Reply:

- (a) In response to the challenges of an ageing population and increasing demand for healthcare services with higher expectations, the Government is conducting a strategic review on healthcare manpower planning and professional development in Hong Kong (the Review). The Review aims to make recommendations that would better enable our society to meet the projected demand for healthcare professionals including nurses as well as to foster professional development. We expect that the Review will be completed in mid-2016. The Government will publish the report and take forward the recommendations as appropriate upon completion of the Review.
- (b) As the Hospital Authority (HA) provides different types and levels of services to patients having regard to the conditions and needs of each patient, HA does not prescribe any nurse-to-patient ratio for manpower planning or deployment purposes. Nevertheless, HA has developed a workload assessment model for estimating nursing manpower requirements. The model takes into account patient number, patient dependency and nursing activities, etc. The model is currently being used for

assessing nursing workload and staffing requirements. HA will make reference to the model when planning for new services.

- End -

CONTROLLING OFFICER'S REPLY

FHB(H)054

(Question Serial No. 0557)

Head: (140) Government Secretariat: Food and Health Bureau
(Health Branch)

Subhead (No. & title): (-) Not Specified

Programme: (1) Health

Controlling Officer: Permanent Secretary for Food and Health (Health) (Richard YUEN)

Director of Bureau: Secretary for Food and Health

Question:

Regarding the strategic review on healthcare manpower planning and professional development, please advise on:

- a. the number of nursing graduates (including registered nurses, enrolled nurses, registered psychiatric nurses and enrolled psychiatric nurses) for the next 5 years, with a breakdown by year of the number of nursing graduates in each of the institutions and nursing schools;
- b. the number of nurses currently employed at public and private healthcare facilities, with a breakdown by hospital and by rank; and
- c. the estimated number of nurses required in public and private healthcare facilities for the next 5 years, with a breakdown by hospital and by rank.

Asked by: Prof Hon Joseph LEE Kok-long (Member Question No. 5)

Reply:

- (a) We do not have information on the number of nursing graduates for the next 5 years. A breakdown of the training places of pre-service nursing programmes accredited by the Nursing Council of Hong Kong by stream and training school for the 5 academic years from 2016-17 to 2020-21 is set out in the following table –

Nurse Training Schools	Training Places by Academic Year																			
	2016/17				2017/18				2018/19				2019/20				2020/21			
	Pre-registration Nursing Programmes		Pre-enrolment Nursing Programmes		Pre-registration Nursing Programmes		Pre-enrolment Nursing Programmes		Pre-registration Nursing Programmes		Pre-enrolment Nursing Programmes		Pre-registration Nursing Programmes		Pre-enrolment Nursing Programmes		Pre-registration Nursing Programmes		Pre-enrolment Nursing Programmes	
	General	Psychiatric	General	Psychiatric	General	Psychiatric	General	Psychiatric	General	Psychiatric	General	Psychiatric	General	Psychiatric	General	Psychiatric	General	Psychiatric	General	Psychiatric
Hong Kong Baptist Hospital	-	-	64	-	-	-	64	-	-	-	64	-	-	-	64	-			64	
Hong Kong Sanatorium & Hospital	-	-	140	-	-	-	140	-	-	-	140	-	-	-	140	-			140	
St. Teresa's Hospital	-	-	66	-	-	-	80	-	-	-	80	-	-	-	80	-			80	
Union Hospital	-	-	40	-	-	-	40	-	-	-	40	-	-	-	40	-			40	
Tung Wah College	325	-	150	-	325	-	150	-	325	-	150	-	325	-	150	-	325		150	
HKU School of Professional and Continuing Education	32	-	-	-	32	-	-	-	32	-	-	-	32	-	-	-	32			
HKU Space Community College	-	-	40	-	-	-	40	-	-	-	40	-	-	-	40	-			40	
Caritas Institute of Higher Education	120	-	-	-	120	-	-	-	120	-	-	-	120	-	-	-	120			
The Open University of Hong Kong	460	185	155	85	460	185	155	85	460	185	155	85	460	185	155	85	460	185	155	85

Nurse Training Schools	Training Places by Academic Year																			
	2016/17				2017/18				2018/19				2019/20				2020/21			
	Pre-registration Nursing Programmes		Pre-enrolment Nursing Programmes		Pre-registration Nursing Programmes		Pre-enrolment Nursing Programmes		Pre-registration Nursing Programmes		Pre-enrolment Nursing Programmes		Pre-registration Nursing Programmes		Pre-enrolment Nursing Programmes		Pre-registration Nursing Programmes		Pre-enrolment Nursing Programmes	
	General	Psychiatric	General	Psychiatric	General	Psychiatric	General	Psychiatric	General	Psychiatric	General	Psychiatric	General	Psychiatric	General	Psychiatric	General	Psychiatric	General	Psychiatric
The Chinese University of Hong Kong ⁽¹⁾	272	-	-	-	272	-	-	-	272	-	-	-	75	-	-	-	75			
The Hong Kong Polytechnic University ⁽²⁾	173	70	-	173	70	-	-	-	173	70	-	-	-	-	-	-				
The University of Hong Kong ⁽³⁾	190	-	-	-	190	-	-	-	190	-	-	-	-	-	-	-	-	-	-	-
The Hospital Authority Nurse Training Schools	300	-	100	-	300	-	100	-	300	-	100	-	300	-	100	-	300	-	100	-

Notes: (1) Figures refer to the approved student intakes of University Grants Committee (UGC)-funded nursing programmes at both the first-year and senior-year levels from 2016/17 to 2018/19. The number of UGC-funded nurse training places after 2018/19 is not yet available. Figures from 2019/20 onwards refer to self-financed Master of Nursing Sciences (pre-registration) Programme.

(2) Figures refer to the approved student intakes of UGC-funded nursing programmes at both the first-year and senior-year levels from 2016/17 to 2018/19. The number of UGC-funded nurse training places after 2018/19 is not yet available. For the self-financed Master of Nursing Programme, the arrangements of which for the academic years from 2016/17 onwards have yet to be finalised.

(3) Figures refer to the approved student intakes of UGC-funded nursing programmes at both the first-year and senior-year levels from 2016/17 to 2018/19. The number of UGC-funded nurse training places after 2018/19 is not yet available.

- (b) The Department of Health (DH) conducts Health Manpower Surveys (HMS) on a regular basis to obtain up-to-date information on the characteristics and employment status of healthcare personnel practising in Hong Kong. According to the 2012 HMS on enrolled nurses, the 2013 HMS on registered nurses and the 2014 HMS on registered midwives, the distribution of nurses and midwives who were practising in the local nursing / midwifery profession among different service sectors is set out in the following table –

Survey Year	Healthcare Profession	Number of Healthcare Personnel [❖]	Service Sector				
			Hospital Authority	Government	Subvented Sector	Academic Sector	Private Sector
2012	Enrolled Nurse	10 326 ⁺	43.4%	7.2%	21.3%	0.4%	27.8%
2013	Registered Nurse	34 510 ⁺	68.5%	7.3%	4.4%	2.9%	16.9%
2014	Registered Midwife	4 630 [*]	62.1%	15.3%	4.1%	3.3%	15.1%

Notes :

- ❖ To tally with the HMS, the number of healthcare personnel is provided as at the respective reference date of the survey.
 - + Figures refer to the number of nursing personnel registered / enrolled with the Nursing Council of Hong Kong under the Nurses Registration Ordinance (Chapter 164) as at the 31st August of the survey years.
 - * Figure refers to the number of registered midwives registered with the Midwives Council of Hong Kong under the Midwives Registration Ordinance (Chapter 162) as at the 31st August of the survey year.
- There may be slight discrepancy between the sum of individual items and the total due to rounding.

We do not have information on the breakdown of nurses currently employed in the private sector by hospital and by rank. The breakdown information of nurses employed in DH and the Hospital Authority (HA) are set out in the following tables –

DH

	as at 1.2.2016
	Strength
<u>Registered Nurse grade</u>	
Principal Nursing Officer	1
Regional Nursing Officer	0
Chief Nursing Officer	2
Senior Nursing Officer	17
Nursing Officer	290
Registered Nurse	896
Sub-total:	1 206
<u>Enrolled Nurse grade</u>	
Enrolled Nurse	184
Sub-total:	184
Total:	1 390

HA

Cluster Rank Group	as at 31.12.2015							Total
	HK East	HK West	Kowloon Central	Kowloon East	Kowloon West	NT East	NT West	
Department Operations Manager / Senior Nursing Officer and above	43	41	44	44	92	55	44	363
Advanced Practice Nurse / Nurse Specialist / Nursing Officer / Ward Manager	479	544	667	506	1 140	759	654	4 749
Registered Nurse	1 717	1 786	2 197	1 749	3 762	2 566	2 109	15 886
Enrolled Nurse / Others	368	428	416	369	696	590	519	3 386
Total	2 607	2 799	3 323	2 667	5 689	3 969	3 326	Around 24 380

Note:

The manpower figures above are calculated on full-time equivalent basis including permanent, contract and temporary staff in HA. Individual figures may not add up to the total due to rounding.

(c) In response to the challenges of an ageing population and increasing demand for healthcare services with higher expectations, the Government is conducting a strategic review on healthcare manpower planning and professional development in Hong Kong (the Review). The Review aims to make recommendations that would better enable our society to meet the projected demand for healthcare professionals, including nurses, as well as to foster professional development. We expect that the Review will be completed in mid-2016. The Government will publish the report and take forward the recommendations as appropriate upon completion of the Review.

- End -

CONTROLLING OFFICER'S REPLY

FHB(H)055

(Question Serial No. 0558)

Head: (140) Government Secretariat: Food and Health Bureau
(Health Branch)

Subhead (No. & title): (-) Not Specified

Programme: (1) Health

Controlling Officer: Permanent Secretary for Food and Health (Health) (Richard YUEN)

Director of Bureau: Secretary for Food and Health

Question:

Regarding the strategic review on healthcare manpower planning and professional development, has the Government assessed the manpower requirement for each allied health grade for Hong Kong's overall healthcare services (including public and private healthcare facilities) in future? If yes, please advise on:

- a. the number of graduates of each allied health grade for the next 5 years, with a breakdown by institution and by grade;
- b. the number of staff in each allied health grade currently employed at public and private healthcare facilities, with a breakdown by hospital and by rank; and
- c. the estimated manpower requirement for each allied health grade in public and private healthcare facilities for the next 5 years, with a breakdown by hospital and by rank.

Asked by: Prof Hon Joseph LEE Kok-long (Member Question No. 6)

Reply:

- (a) At present, The Hong Kong Polytechnic University offers University Grants Committee (UGC)-funded training programmes on allied health professions, namely Medical Laboratory Science, Occupational Therapy, Physiotherapy, Radiography and Optometry, with graduates recognised by the Supplementary Medical Professions Council for registration under the Supplementary Medical Professions Ordinance (Cap. 359). The number of training places approved by UGC for the 2016/17 - 2018/19 triennium by programme is set out in the following table –

Programme	Academic Year		
	2016/17	2017/18	2018/19
BSc (Hons) Medical Laboratory Science	54	54	54
BSc (Hons) Occupational Therapy	100	100	100
BSc (Hons) Physiotherapy	130	130	130
BSc (Hons) Radiography	110	110	110
BSc (Hons) Optometry	40	40	40

The number of allied health training places after 2018/19 academic year is not available. We do not have information on the number of graduates of each allied health grade for the next five years.

- (b) The Department of Health (DH) conducts Health Manpower Surveys (HMS) on a regular basis to obtain up-to-date information on the characteristics and employment status of healthcare personnel practising in Hong Kong. According to the 2014 HMS on the 16 types of healthcare personnel included in the health services functional constituency and the 2014 HMS on medical laboratory technologists, occupational therapists, optometrists, physiotherapists and radiographers, the estimated distribution of allied health personnel who were practising in the respective local healthcare professions among different service sectors is set out in the following tables –

Healthcare Personnel	Number of Healthcare Personnel ^{♦*}	Service Sector				
		Hospital Authority	Government	Subvented Sector	Academic Sector	Private Sector
2014 HMS						
Audiologist	93	25.8%	7.5%	5.4%	-	61.3%
Audiology Technician	31	19.4%	-	6.5%	-	74.2%
Chiropodist / Podiatrist	63	57.1%	-	3.2%	-	39.7%
Clinical Psychologist	515	27.6%	24.1%	8.9%	3.7%	35.7%
Dental Hygienist	332	-	2.7%	-	5.4%	91.9%
Dental Surgery Assistant	3 727	0.3%	8.3%	1.2%	3.8%	86.4%
Dental Technician / Technologist	354	0.8%	13.3%	-	8.5%	77.4%
Dental Therapist	284	-	100.0%	-	-	-
Dietitian	387	34.9%	4.4%	5.9%	0.8%	54.0%
Dispenser	2 201	51.3%	2.7%	3.8%	0.3%	41.8%
Educational Psychologist	246	-	19.1%	25.6%	28.5%	26.8%
Mould Laboratory Technician	46	56.5%	-	-	-	43.5%
Orthoptist	59	25.4%	3.4%	-	-	71.2%
Prosthetist / Orthotist	165	76.4%	-	0.6%	1.2%	21.8%
Scientific Officer (Medical)	224	25.9%	49.1%	-	12.5%	12.5%
Speech Therapist	641	12.8%	3.4%	40.4%	8.0%	35.4%

Healthcare Personnel	Number of registered healthcare personnel ^{❖+}	Service Sector				
		Hospital Authority	Government	Subvented Sector	Academic Sector	Private Sector
2014 HMS						
Medical Laboratory Technologist	3 084	46.2%	9.0%	8.4%		36.3%
Occupational Therapist	1 608	49.8%	2.8%	32.0%	4.9%	10.5%
Optometrist	2 097	3.3%	5.4%			91.4%
Physiotherapist	2 538	38.5%	1.3%	15.9%	3.4%	40.8%
Radiographer (Diagnostic)	1 649	50.6%	6.1%			43.3%
Radiographer (Therapeutic)	318	59.6%	-		40.4%	

Notes :

❖ To tally with the HMS, the number of healthcare personnel is provided as at the respective reference date of the survey.

* Figures refer to number of the healthcare personnel employed by the surveyed institutions as at 31st March of the survey year.

+ Figures refer to the number of healthcare professions registered with the respective boards under the Supplementary Medical Professions Ordinance (Cap. 359) as at 31st March of the survey year. There may be slight discrepancy between the sum of individual items and the total due to rounding.

We do not have information on the breakdown of the allied health grade staff employed in the private sector by hospital and by rank. The breakdown information of the allied health grade staff currently employed in DH and the Hospital Authority (HA) are set out in the following tables –

DH

Grade	Rank	Strength as at 1.2.2016
Clinical Psychologist	Senior Clinical Psychologist	1
	Clinical Psychologist	34
Dental Hygienist		13
Dental Surgery Assistant	Senior Dental Surgery Assistant	53
	Dental Surgery Assistant	289
Dental Technician	Senior Dental Technologist	1
	Dental Technologist	2
	Dental Technician I	32
	Dental Technician II	13
Dental Therapist	Tutor Dental Therapist	1
	Senior Dental Therapist	27
	Dental Therapist	242
Dietitian	Senior Dietitian	0
	Dietitian	17

Dispenser	Chief Dispenser	2
	Senior Dispenser	17
	Dispenser	48

Grade	Rank	Strength as at 1.2.2016
Medical Laboratory Technician	Chief Medical Technologist	0
	Senior Medical Technologist	11
	Medical Technologist	91
	Medical Laboratory Technician I	26
	Medical Laboratory Technician II	125
Occupational Therapist	Senior Occupational Therapist	0
	Occupational Therapist I	15
Optometrist		16
Orthoptist	Orthoptist I	1
	Orthoptist II	1
Physiotherapist	Senior Physiotherapist	0
	Physiotherapist I	12
Radiographer	Senior Radiographer	3
	Radiographer I	13
	Radiographer II	21
Scientific Officer (Medical)		93
Speech Therapist		14
Total:		1 234

HA

Cluster Grade	2015-16 (as at 31.12.2015)							Total
	HK East	HK West	Kowloon Central	Kowloon East	Kowloon West	NT East	NT West	
Medical Laboratory Technologist	115	243	231	136	300	236	146	1 407
Radiographer (Diagnostic Radiographer & Radiation Therapist)	127	130	151	95	237	189	130	1 059
Occupational Therapist	82	79	111	77	179	131	119	778
Physiotherapist	115	106	159	120	195	160	110	965
Dispenser	149	127	150	133	318	207	153	1 237
Others	88	120	131	87	163	135	127	851

Notes:

1. The manpower figures above are calculated on full-time equivalent basis including permanent, contract and temporary staff in HA.
2. The group of "Others" includes audiology technicians, clinical psychologists, dental technicians, dietitians, mould laboratory technicians, optometrists, orthoptist, physicists, podiatrists, prosthetists & orthotists, scientific officers (medical)-pathology, scientific officers (medical)-audiology,

scientific officers (medical)-radiology, scientific officers (medical)-radiotherapy and speech therapists.

- (c) In response to the challenges of an ageing population and increasing demand for healthcare services with higher expectations, the Government is conducting a strategic review on healthcare manpower planning and professional development in Hong Kong (the Review). The Review aims to make recommendations that would better enable our society to meet the projected demand for healthcare professionals, as well as to foster professional development. We expect that the Review will be completed in mid-2016. The Government will publish the report and take forward the recommendations as appropriate upon completion of the Review.

- End -

CONTROLLING OFFICER'S REPLY

(Question Serial No. 0561)

Head: (140) Government Secretariat: Food and Health Bureau
(Health Branch)

Subhead (No. & title): (-) Not Specified

Programme: (1) Health

Controlling Officer: Permanent Secretary for Food and Health (Health) (Richard YUEN)

Director of Bureau: Secretary for Food and Health

Question:

Regarding the "Outreach Dental Care Programme for the Elderly", please advise on:

- a the expenditure involved, the number of attendances and the manpower required since the implementation of the programme;
- b the number of attendances by scope of services (including fillings, extractions and dentures); and
- c whether the programme will be extended to the 18 districts so that elders other than those in residential care homes / day care centres and similar facilities can enjoy dental services. If yes, what are the details? If not, what are the reasons?

Asked by: Prof Hon Joseph LEE Kok-long (Member Question No. 9)

Reply:

- a The financial provision was \$25.1 million in 2014-15 and \$44.5 million in 2015-16 respectively, and six civil service posts have been provided under Head 37 – Department of Health for implementing the "Outreach Dental Care Programme for the Elderly" (ODCP). Since the implementation of the ODCP in October 2014 up to end-January 2016, about 50 800 elders (involving about 63 200 attendances) benefitted from the ODCP.
- b Between October 2014 and January 2016, about 50 800 elders received annual oral check and dental treatments under the ODCP. Dental treatments received include scaling and polishing, denture cleaning, fluoride/X-ray and other curative treatments (such as fillings, extractions, dentures, etc.).
- c We do not have plan to extend the ODCP to cover elders other than those in residential care homes / day care centres and similar facilities. Elders aged 70 or above may make use of the Elderly Health Care Voucher to obtain primary care services

provided by the private sector, including dental services.

Furthermore, the Elderly Dental Assistance Programme under the Community Care Fund provides free dentures and related dental services for elders on low income who are users of the home care service or home help service schemes subvented by the Social Welfare Department and from September 2015 covers elders who are Old Age Living Allowance recipients by phases, starting with those aged 80 or above in the first phase involving some 130 000 elders.

- End -

CONTROLLING OFFICER'S REPLY

FHB(H)057

(Question Serial No. 0562)

Head: (140) Government Secretariat: Food and Health Bureau
(Health Branch)

Subhead (No. & title): (-) Not Specified

Programme: (1) Health

Controlling Officer: Permanent Secretary for Food and Health (Health) (Richard YUEN)

Director of Bureau: Secretary for Food and Health

Question:

Regarding the implementation of the Elderly Health Care Voucher Scheme, please advise on:

- a the utilisation of elderly health care vouchers, expenditure involved and percentage of beneficiaries in the total number of eligible persons in the past 3 years;
- b the expenditure on and effectiveness of another round of publicity launched by the Department of Health in February 2015; and
- c whether the voucher amount will be increased or a specific "elderly dental care voucher" will be introduced to subsidise and encourage elders to use dental services to improve their dental health. If yes, what are the details? If not, what are the reasons?

Asked by: Prof Hon Joseph LEE Kok-long (Member Question No. 10)

Reply:

- (a) Below are the number of elders who had made use of vouchers under the Elderly Health Care Voucher (EHV) Scheme in the past three years and its percentage as compared to the eligible elderly population:

	2013	2014	2015
Number of elders who had made use of vouchers	488 000	551 000	600 000
Number of eligible elders (i.e. elders aged 70 or above)*	724 000	737 000	760 000
Percentage of eligible elders who had made use of vouchers	67%	75%	79%

*Source: Hong Kong Population Projections 2012 - 2041 and Hong Kong Population Projections 2015 - 2064, Census and Statistics Department

Regarding the utilisation of EHV, the number of voucher claim transactions and the amount of vouchers claimed in the past three years from 2013 to 2015 are as follows:

Number of Voucher Claim Transactions

	2013	2014	2015
Medical Practitioners	1 229 078	1 734 967	2 006 263
Chinese Medicine Practitioners	190 017	383 613	533 700
Dentists	36 783	73 586	109 840
Occupational Therapists	79	584	478
Physiotherapists	6 922	13 201	19 947
Medical Laboratory Technologists	1 941	3 697	5 646
Radiographers	1 507	3 047	4 971
Nurses	317	921	1 457
Chiropractors	823	1 975	3 125
Optometrists	2 972	5 956	21 326
Sub-total (Hong Kong):	1 470 439	2 221 547	2 706 753
University of Hong Kong - Shenzhen Hospital ^{Note 1}	-	-	2 287
Total:	1 470 439	2 221 547	2 709 040

Note 1: The Pilot Scheme for use of EHV at the University of Hong Kong - Shenzhen Hospital was launched on 6 October 2015.

Amount of Vouchers Claimed (in \$'000)

	2013	2014	2015
Medical Practitioners	256,296	444,401	611,860
Chinese Medicine Practitioners	31,968	82,369	142,265
Dentists	20,805	55,131	98,563
Occupational Therapists	28	390	230
Physiotherapists	1,758	3,981	6,381
Medical Laboratory Technologists	1,046	2,273	3,820
Radiographers	512	1,358	2,365
Nurses	265	773	1,389
Chiropractors	485	1,276	1,825
Optometrists	1,541	5,587	37,092
Sub-total (Hong Kong):	314,704	597,539	905,790
University of Hong Kong - Shenzhen Hospital ^{Note 2}	-	-	537
Total:	314,704	597,539	906,327

Note 2: Since the launch of the Pilot Scheme on 6 October 2015.

- (b) To encourage more eligible elders to join the EHV Scheme and use the vouchers, the Department of Health launched a round of publicity programme in 2015 which included television and radio announcements of public interest, and advertisements in free newspapers and the public transport system. The expenditure involved was around \$1.9 million. Comparing the statistics in 2015 and 2014 as shown in (a) above, while the annual voucher amount to each eligible elder remained at \$2,000 in 2015, there was an increase over 2014 in the number of elders who had made use of vouchers and the amount of vouchers claimed by 49 000 (or 9%) and \$309 million (or 52%) respectively.
- (c) Under the EHV Scheme, eligible elders can use vouchers to pay for primary care services provided by various private healthcare professionals who have enrolled in the Scheme, including dental services. We have converted the EHV Scheme into a regular programme, doubled the annual voucher amount to \$2,000 and raised the financial cap on unspent vouchers to \$4,000 since 2014 which should provide much more room for eligible elders to use dental services. The present arrangement also provides elders with greater flexibility in using the vouchers for the healthcare services that best suit their needs. We therefore do not have any plan to increase the annual voucher amount or introduce a dental voucher at present.

- End -

CONTROLLING OFFICER'S REPLY

FHB(H)058

(Question Serial No. 0563)

Head: (140) Government Secretariat: Food and Health Bureau (Health Branch)

Subhead (No. & title): (-) Not Specified

Programme: (1) Health

Controlling Officer: Permanent Secretary for Food and Health (Health) (Richard YUEN)

Director of Bureau: Secretary for Food and Health

Question:

Regarding the health promotion and preventive programmes for parents, adolescents, men, women and elders, please advise on:

(a) whether consideration has been given to the provision of free cervical cancer vaccination for teenage girls in the territory. If yes, what are the details? If not, what are the reasons? What policies has the Government put in place to promote the health of teenage girls? Has the Government assessed the resources involved in providing free cervical cancer vaccination for teenage girls in the territory?

(b) whether consideration has been given to the launching of a breast cancer screening programme to carry out population-based mammography screening for women over 40. If yes, what are the details? If not, what are the reasons? What policies has the Government put in place to promote the health of women? Has the Government assessed the resources involved in launching a breast cancer screening programme?

(c) whether consideration has been given to the setting up of Man Health Centres to cater for the health needs of men such as prostate examination. If yes, what are the details? If not, what are the reasons? What policies has the Government put in place to promote the health of men? Has the Government assessed the resources involved in setting up Man Health Centres?

Asked by: Prof Hon Joseph LEE Kok-long (Member Question No. 11)

Reply:

(a)

The Scientific Committee on Vaccine Preventable Diseases (SCVPD) and the Scientific Committee on AIDS and Sexually Transmitted Infections (SCAS) under the Centre for Health Protection recommended in 2013 that human papilloma virus (HPV) vaccine is effective and safe for individual protection against cervical infection and cancer arising from specific types of viruses. As for whether the HPV vaccine should be added to the public health vaccination programme in Hong Kong in the future, SCVPD and SCAS considered that the duration of protection should be further established and universal vaccination programme should be supported by local cost-effectiveness evaluation.

In this connection, a cost-benefit analysis (CBA) of organised population-based vaccination on reducing the economic burden of cervical cancers is being conducted. The SCVPD and SCAS will review its recommendations when the results of CBA are available with a view to coming up with the long-term strategies for preventing cervical cancer in Hong Kong.

As a pilot scheme, the Chief Executive announced in the 2016 Policy Address that the Government will invite the Community Care Fund (CCF) to consider providing teenage girls from eligible low-income families with a free cervical cancer vaccination. The Food and Health Bureau is preparing the proposed implementation plan of the pilot scheme for submission to the CCF Task Force and the Commission on Poverty for consideration.

In parallel, the Department of Health (DH) will continue to provide preventive and promotive care, including education on reproductive health, to teenage students through Student Health Centres and outreaching Adolescent Health Programme to promote health of teenage girls in the territory.

(b)

The Cancer Expert Working Group on Cancer Prevention and Screening (CEWG) established under the Cancer Coordinating Committee chaired by the Secretary for Food and Health regularly reviews the local and international scientific evidence, with a view to providing recommendations on suitable measures for cancer prevention and screening for the local population.

Having studied the prevailing and increasing international evidence that questions overall benefits of population-based screening over harm, the CEWG considers there is insufficient evidence to recommend for or against population-based breast cancer screening for asymptomatic women at average risk in Hong Kong. In view of this, a study has been commissioned to develop a locally validated risk prediction tool to identify individuals who are more likely to benefit from screening.

Meanwhile, the DH promotes healthy lifestyles as the primary cancer prevention strategy, such as avoidance of alcohol, having regular physical activity and healthy eating, as well as maintaining a healthy body weight and waistline. The DH also encourages breastfeeding and raises women's breast awareness to seek early attention should abnormal changes be noted. Currently, women with high risk of developing breast cancer may be arranged to receive mammography screening after medical assessment conducted by the Women Health

Centres or Maternal and Child Health Centres of the DH which provide Woman Health Service. If abnormalities are found, the patients concerned will be referred to specialists for follow-up.

(c)

The DH operates a Men's Health Programme which provides through the Men's Health website, customer-centric information, useful links and advice in light of the request of the public to raise public awareness and increase understanding of men's health issues. Other modes of health communication include printed materials, media and web-based publicity and a telephone education hotline. At present, the programme does not include health check and personalised counselling which are provided primarily in the private and non-governmental sectors.

Resources for carrying out the programmes in part (b) and (c) are absorbed by the DH's overall provision for disease preventive and thus cannot be separately identified.

- End -