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Replies to supplementary questions raised by Finance Committee Members in examining the Estimates of Expenditure 2017-18

Director of Bureau : Secretary for Food and Health

Session No. : 18

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CONTROLLING OFFICER'S REPLY

S-FHB(H)01

(Question Serial No. SV032)

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

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

Programme: (2) Subvention: Hospital Authority

Controlling Officer: Permanent Secretary for Food and Health (Health) (Patrick T K NIP)

Director of Bureau: Secretary for Food and Health

Question:

Regarding Reply Serial No. FHB(H)002, please advise on the number of patients who underwent sex reassignment surgeries in each of the past 5 years.

Asked by: Hon CHAN Chi-chuen

Reply:

The table below sets out the number of patients having received sex-reassignment surgery (SRS) from 2012-13 to 2016-17.

Year	Number of patients having received SRS
2012-13	5
2013-14	12
2014-15	16
2015-16	12
2016-17 (up to 31 December 2016) [provisional figure]	5

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CONTROLLING OFFICER'S REPLY

S-FHB(H)02

(Question Serial No. S0070)

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

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

Programme: (-) Not Specified

Controlling Officer: Permanent Secretary for Food and Health (Health) (Patrick T K NIP)

Director of Bureau: Secretary for Food and Health

Question:

According to Reply Serial No. FHB(H)062, 41 clinics are still only capable of accessing electronic health record sharing system (eHRSS) data and 51 clinics are not even connected with eHRSS since electronic medical record systems have been in place in the Department of Health (DH). The performance is disappointing. The Electronic Patient Record (ePR) system under the Hospital Authority, by contrast, has been well developed. In this connection, would the Government please inform this Council of DH's expenditures, with breakdown by type, on the research into and implementation of electronic medical record systems in the past 10 years, including the expenditures for engaging consultants to conduct system strategy studies and creating supernumerary posts?

Asked by: Hon CHAN Pierre

Reply:

The Department of Health (DH) set up the Electronic Health Record Management Team (eHRMT) in 2009 to develop the Clinical Information Management System (CIMS) and facilitate the sharing of medical records with the Electronic Health Record Sharing System (eHRSS). The first stage of CIMS, a pilot model of a full-fledged electronic medical record system for DH that connects with eHRSS, was launched in 2014. It covered 6 clinical services of DH (including Antenatal Service of Family Health Service, Clinical Genetic Service, Dental Service, Families Clinics, Social Hygiene Service and Special Preventive Programme) and the roll-out is ongoing. The expenditure for carrying out the relevant study, and developing and implementing the CIMS between 2009-10 and 2016-17 was about \$102.4 million.

In January 2016, DH engaged a consultancy firm to conduct an Information Systems Strategy Study (ISSS) for formulating an information systems strategy for the Department in the short, medium and long-term. The ISSS will make recommendations for improving DH's current IT management structure and help draw up a detailed programme of the strategic IT applications and initiatives. With the benefit of the ISSS, we would be in a better position to consider how to enhance the implementation roadmap for clinical services

improvements, including connection to the eHRSS and the second stage of CIMS (which will cover the remaining clinical services that will be interfaced with eHRSS), for incorporation into DH's overall IT strategy. Upon completion of the study by mid-2017, suitable follow-up actions will be conducted. The total consultancy fee was about \$5.1 million.

As at 31 March 2017, there were 2 permanent and 20 time-limited/supernumerary civil service posts in the eHRMT as follows. The relevant salary provision in 2016-17 was about \$16.1 million.

Rank	Number of posts
<i>Permanent Posts</i>	
Senior Medical and Health Officer	1
Senior Executive Officer	1
<i>Time-limited/Supernumerary Posts</i>	
Senior Systems Manager	1
Medical and Health Officer	1
Systems Manager	4
Senior Nursing Officer	1
Executive Officer II	1
Analyst/Programmer I	2
Analyst/Programmer II	10
Total:	22

In addition, as at 31 March 2017, there were 5 time-limited civil service posts in DH for the management of the ISSS as follows. The relevant salary provision in 2016-17 was about \$4.7 million.

Rank	Number of posts
Senior Systems Manager	1
Systems Manager	2
Analyst/Programmer I	2
Total:	5

For the study and implementation of eHRSS, DH has also spent on other related items such as staff training, operation of registration centres and software installation, etc.. As the relevant expenditure has been subsumed in the departmental expenses, it cannot be quantified separately.

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CONTROLLING OFFICER'S REPLY

S-FHB(H)03

(Question Serial No. S0069)

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

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

Programme: (-) Not Specified

Controlling Officer: Permanent Secretary for Food and Health (Health) (Patrick T K NIP)

Director of Bureau: Secretary for Food and Health

Question:

According to Reply Serial No. FHB(H)039, the recurrent expenditure on healthcare for 2017-18 will be \$61.9 billion, to be allocated to 4 heads of expenditure, namely Head 140 – Government Secretariat: Food and Health Bureau (Health Branch), Head 37 – Department of Health, Head 48 – Government Laboratory and Head 155 – Government Secretariat: Innovation and Technology Commission. However, by consulting the budget documents (Estimates) for the financial year only, it is impossible to learn that there will be an estimated expenditure of \$46.5 million and \$3.6 million under Head 48 and Head 155 respectively which is recurrent expenditure on healthcare, let alone to work out the total recurrent expenditure on healthcare. Please advise on whether an ordinary citizen, who does not have any power to put questions to the Government, can work out the recurrent expenditure on healthcare for each financial year by consulting the Estimates alone. If yes, please illustrate how the recurrent expenditure on healthcare in the past 3 financial years and the current one can be worked out (and state the source of the figures). If not, will the Government consider providing the relevant information in the annual Estimates in the future?

Asked by: Hon CHAN Pierre

Reply:

The recurrent expenditure on healthcare covers a wide range of recurrent expenditure items under various programmes of a number of Heads of Expenditure in the Estimates contributing to Policy Area 15: Health. The total recurrent expenditure on health is published in Appendix B of the Budget Speech of the respective financial year.

The table below sets out the breakdown and source of figures of the recurrent expenditure allocated to the 4 Heads of Expenditure in the past 3 financial years and the current one:

Head of Expenditure	Recurrent Expenditure on Health ¹ (\$ million)			
	2014-15 (Actual)	2015-16 (Actual)	2016-17 (Revised Estimate)	2017-18 (Estimate)
Head 140 – Government Secretariat: Food and Health Bureau (Health Branch) ²	49,340.5	51,151.6	53,037.8	54,885.4
Head 37 – Department of Health ³	4,705.6	5,271.2	5,677.1	6,989.7
Head 48 – Government Laboratory ⁴	41.6	46.5	47.4	46.5
Head 155 – Government Secretariat: Innovation and Technology Commission ⁵	3.1	3.6	3.3	3.6
Total:	54,090.8	56,472.9	58,765.6	61,925.2⁶

Note:

1. The recurrent expenditure on Health covers the salaries, allowances and other operating expenses incurred under the respective Heads of Expenditure related to Health programmes. For Head 140 - Government Secretariat: Food and Health Bureau (Health Branch), it also includes the subventions to the Hospital Authority and Prince Philip Dental Hospital.
2. The relevant recurrent expenditure of the Food and Health Bureau is under Programmes (1) to (3) of Head 140 - Government Secretariat: Food and Health Bureau (Health Branch)'s Controlling Officer's Report. All the 3 programmes contribute solely to Policy Area 15: Health.
3. The relevant recurrent expenditure of the Department of Health is under Programmes (1) to (5) and (8) of Head 37 - Department of Health's Controlling Officer's Report. All the 6 programmes contribute solely to Policy Area 15: Health.
4. The relevant recurrent expenditure of the Government Laboratory is under Programme (1) of Head 48 - Government Laboratory's Controlling Officer's Report. The programme contributes to 2 policy areas, with one being Policy Area 15: Health.
5. The relevant recurrent expenditure of the Innovation and Technology Commission is under Programme (6) of Head 155 - Government Secretariat: Innovation and Technology Commission's Controlling Officer's Report. The programme contributes to 2 policy areas, with one being Policy Area 15: Health.
6. The total recurrent expenditure for Policy Area Group (PAG): Health amounts to \$61,935 million per Appendix B of the Budget Speech. It has included \$9.7 million Additional Commitments under Head 106 – Miscellaneous Services apportioned to PAG: Health to meet funding for initiatives under planning and also any unavoidable recurrent expenditure that may arise during the year in excess of the amounts provided under other heads and subheads of the Estimates.

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CONTROLLING OFFICER'S REPLY**S-FHB(H)04****(Question Serial No. S0065)**

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) (Patrick T K NIP)

Director of Bureau: Secretary for Food and Health

Question:

Regarding Question Serial No. 2007/Reply Serial No. FHB(H)064, the Government, by just responding that there are a total of 282 baby care rooms in government premises, has not provided concrete information on the number of breastfeeding rooms for public use, total number of those premises/facilities in Hong Kong and the percentage of premises/facilities fitted with breastfeeding rooms for public use. Please further set out the figures in detail in the table below.

Department	Type of premises/ facilities	Number of breastfeeding rooms for public use	Total number of such premises/ facilities in Hong Kong	Number of premises/ facilities fitted with breastfeeding rooms for public use	Percentage of premises/ facilities fitted with breastfeeding rooms for public use
	Government office buildings				
Home Affairs Department	Community halls/centres				
Housing Department	Housing Authority shopping centres				
Immigration Department	Birth registries				
	Immigration branch offices				
Leisure and Cultural Services Department	Public libraries				
	Public swimming pools				
	Parks				
	Museums				
	Sports centres				
	Sports grounds				
	Playgrounds				

Food and Environmental Hygiene Department	Public markets				
Transport Department	Public transport interchanges				
Department of Health	Maternal and child health centres				
Hospital Authority	Hospitals and clinics				
Judiciary	Law courts				
MTR	MTR stations				

Asked by: Hon HO Kai-ming

Reply:

All of the baby care rooms listed in Part (1) of the reply to Question Serial No. 2007/Reply Serial No. FHB(H)064 also serve as breastfeeding rooms which are all open for public use. The Department of Health does not have readily available figures on the total number of public facilities and venues and the percentage of such facilities equipped with baby care / breastfeeding rooms.

The Government will continue to co-operate with different sectors and organisations to promote and support breastfeeding on various fronts, including exploring ways to facilitate the establishment of baby care rooms in public venues.

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