Controlling officer: the Director of Health will account for expenditure under this Head.	
Estimate 2006–07	\$3,062.0m
<b>Establishment ceiling 2006–07</b> (notional annual mid-point salary value) representing an estimated 4 903 non-directorate posts as at 31 March 2006 reducing by 26 posts to 4 877 posts as at 31 March 2007	\$1,451.9m
In addition, there will be an estimated 57 directorate posts as at 31 March 2006 and as at 31 March 2007.	
Commitment balance	\$271.0m

## **Controlling Officer's Report**

## **Programmes**

Programme (1) Statutory Functions Programme (2) Disease Prevention Programme (3) Health Promotion Programme (4) Curative Care Programme (5) Rehabilitation	These programmes contribute to Policy Area 15: Health (Secretary for Health, Welfare and Food).
<b>Programme (6) Treatment of Drug Abusers</b>	This programme contributes to Policy Area 9: Internal Security (Secretary for Security).
Programme (7) Medical and Dental Treatment for Civil Servants	This programme contributes to Policy Area 26: Central Management of the Civil Service (Secretary for the Civil Service).
Programme (8) Personnel Management of Civil Servants Working in Hospital Authority	This programme contributes to Policy Area 15: Health (Secretary for Health, Welfare and Food).

#### Detail

### **Programme (1): Statutory Functions**

	2004–05	2005–06	2005–06	2006–07
	(Actual)	(Original)	(Revised)	(Estimate)
Financial provision (\$m)	220.3	233.5	235.9 (+1.0%)	<b>241.5</b> (+2.4%)

(or +3.4% on 2005–06 Original)

#### Aim

2 The aim is to enforce legislation to ensure a high standard of public health protection.

## **Brief Description**

- **3** The work involves:
- preventing the importation of quarantinable diseases and their spread in Hong Kong;
- ensuring the safety, quality and efficacy of pharmaceutical products through product registration and licensing control;
- promoting/protecting the health of radiation workers and minimising public exposure to radiation hazards;
- providing secretariat support to the various boards and councils responsible for the registration and regulation of healthcare professionals and healthcare institutions;
- · licensing of healthcare institutions; and
- providing services in forensic medicine and operating public mortuaries.

- 4 The Department achieved its targets in 2005.
- 5 The key performance measures in respect of statutory functions are:

## **Targets**

	Target	2004 (Actual)	2005 (Actual)	2006 (Plan)
maintaining at zero level importation and spread of quarantinable diseases (namely, yellow fever and plague) registration of pharmaceutical products	Yes	Yes	Yes	Yes
within five months (% of applications) inspection of licensed retail drug premises at an average of twice a year per	>90	99	97	>90
premises	Yes	Yes	Yes	Yes
proportion of workers getting radiation dose <20mSv a year (%) processing of registration application from healthcare professionals within	100	100	100	100
ten working days (%)investigation upon receipt of complaint against healthcare professionals within	>90	95	95	>90
14 working days (%)inspections of licensed institutions registered under the Hospitals, Nursing Homes and Maternity Homes Registration Ordinance not less than	>90	95	95	>90
once a year  Indicators	Yes	Yes	Yes	Yes
		2004 (Actual)	2005 (Actual)	2006 (Estimate)
registration applications of pharmaceutical produprocessed	ating	3 900 6 500 9 000	3 800 6 700 8 870	3 800 6 700 9 000
processedno. of inspections of licensed institutions register the Hospitals, Nursing Homes and Maternity	red under	2 810	2 660	2 690
Registration Ordinance		112	112	110

## Matters Requiring Special Attention in 2006–07

- 6 During 2006–07, the Department will:
- strengthen port health measures in preparation for the coming into force of the revised International Health Regulations; and
- upon enactment of the bill on the provision of enforcement power to Tobacco Control Office staff, carry out enforcement duties as required under the Smoking (Public Health) Ordinance.

## **Programme (2): Disease Prevention**

	2004–05	2005–06	2005–06	2006–07
	(Actual)	(Original)	(Revised)	(Estimate)
Financial provision (\$m) Government sector	1,192.6	1,163.8	1,172.9 (+0.8%)	<b>1,341.5</b> (+14.4%)

(or +15.3% on 2005–06 Original)

2006-07 (Estimate)	2005–06 (Revised)	2005–06 (Original)	2004–05 (Actual)	
<b>32.9</b> (+4.8%)	31.4 (—)	31.4	29.8	Subvented sector
(or +4.8% on 2005–06 Original)				
1,374.4 (+14.1%)	1,204.3 (+0.8%)	1,195.2	1,222.4	Total
(or +15.0% on 2005–06 Original)				

#### Aim

7 The aim is to prevent and control diseases and reduce preventable diseases and premature deaths.

#### **Brief Description**

- **8** This aim is achieved through a wide range of health services and activities covering different age groups and targeted at various communicable and non-communicable diseases. The work involves:
  - providing genetic screening and counselling services;
  - reducing preventable death and ill-health among pregnant women, infants and children;
  - providing promotive and preventive health care to primary and secondary school students;
  - improving the oral health of primary school children;
  - maintaining the surveillance and control of communicable diseases;
  - providing laboratory services for the diagnosis and surveillance of various infections and other screening activities;
  - treating patients with sexually-transmitted diseases and controlling the spread of such diseases;
  - · providing integrated health care service to the elderly; and
  - · providing woman health service.
- **9** The Department subvents the family planning services provided by the Family Planning Association of Hong Kong.
  - 10 The Department achieved its targets in 2005.
  - 11 The key performance measures in respect of disease prevention are:

## **Targets**

	Target	2004 (Actual)	2005 (Actual)	2006 (Plan)
achieving a high participation rate of new born babies attending maternal and child health centres (%)contributing to achieving low infant	>90	95	94	>90
mortality rate (IMR) and maternal mortality rate (MMR)  IMR per 1 000 live births  MMR per 100 000 live births  School Dental Care Service participation	<6 <6	2.5# 4.1#	3.0 5.0	<6 <6
rate (%)	>80	90	92	>80
investigating reports of outbreaks of communicable diseases within 24 hours (%)	100	100	100	100
programme for school children (%)	>95	99	99	>95

<sup>#</sup> The figure has been updated after the preparation of the 2005–06 Estimates.

In	dica	itors
	uicu	uvis

2			
	2004	2005	2006
	(Actual)	(Actual)	(Estimate)
	( )	( )	()
attendances at maternal and child health centres			
child health service	657 000	$680\ 000$	680 000
maternal health service	128 000	129 000	129 000
family planning service	248 500	210 000	210 000
cervical screening service	80 000	99 000	99 000
attendances at family planning clinics operated by Family			
Planning Association	178 000#	163 000	163 000
school children participating in the Student Health Service			
primary school students	422 000	403 000	400 000
secondary school students	309 000#	351 000	350 000
primary school children participating in the School Dental			
Care Service	426 500	414 000	410 000
no. of training activities on infection control	31	116	120
no. of attendances to training activities on infection control	3 460	11 000	11 000
doses of vaccines given to school children	403 000	392 000	390 000
attendances at social hygiene clinics	151 200	145 000	150 000
no. of enrolment in elderly health centres	39 900	37 400	38 000
no. of attendances for health assessment and medical	37 700	37 400	50 000
consultation at elderly health centres	199 000	195 000	195 000
attendances at health education activities organised by	177 000	175 000	175 000
elderly health centres and visiting health teams	440 000	460 000	450 000
no. of enrolment for woman health service	22 000	22 000	22 000
			42 000
no. of attendances for woman health service	44 000	42 000	
no. of laboratory tests relating to public health	2 420 000	2 350 000	2 400 000

<sup>#</sup> The figure has been updated after the preparation of the 2005–06 Estimates.

## Matters Requiring Special Attention in 2006-07

- 12 During 2006–07, the Department will:
- review the childhood immunisation programme in the light of changes in disease epidemiology and immunisation practices; and
- continue to enhance the preparedness for influenza pandemic and other public health emergencies.

## **Programme (3): Health Promotion**

	2004–05 (Actual)	2005–06 (Original)	2005–06 (Revised)	2006–07 (Estimate)
Financial provision (\$m) Government sector	195.7	194.2	188.5 (-2.9%)	<b>198.4</b> (+5.3%)
				(or +2.2% on 2005–06 Original)
Subvented sector	26.4	18.2	25.0 (+37.4%)	<b>23.4</b> (-6.4%)
				(or +28.6% on 2005–06 Original)
Total	222.1	212.4	213.5 (+0.5%)	221.8 (+3.9%)
				(or +4.4% on 2005–06 Original)

#### Aim

13 The aim is to promote health and increase health awareness in the community and among specific target groups.

#### **Brief Description**

- 14 This aim is achieved through a wide range of health promotion activities. The work is discharged by the Department's various units in collaboration with other community groups and interested agencies.
- 15 The Department subvents the first aid training and service provided by the Hong Kong St. John Ambulance and the first aid training provided by the Hong Kong Red Cross. It also subvents the Hong Kong Council on Smoking and Health (COSH) in providing a focal point for initiatives against smoking.
  - 16 The Department achieved its targets in 2005.
  - 17 The key performance measures in respect of health promotion are:

### Target

	Target	2004 (Actual)	2005 (Actual)	2006 (Plan)
training of health promoters (annual total).	>1 000	1 400	1 940	>1 000
Indicators				
		2004	2005	2006
		(Actual)	(Actual)	(Estimate)
production of health education materials (annual 1	no. of			
titles)		478	547	500
attendances at health education activities		1 237 000	1 150 000	1 100 000
AIDS counselling attendances		3 000	3 000	3 000
utilisation of the AIDS telephone enquiry service.		16 500	15 700	16 000
no. of publicity/educational activities delivered by no. of secondary schools joining the Adolescent F		325	340	340
Programme		358	346	340

## Matters Requiring Special Attention in 2006-07

- 18 During 2006–07, the Department will:
- enhance its public health promotion programmes to instil a healthy lifestyle concept in the community, with emphasis on childhood obesity programme; and
- strengthen the publicity and education programme on smoking prevention.

### Programme (4): Curative Care

	2004–05 (Actual)	2005–06 (Original)	2005–06 (Revised)	2006–07 (Estimate)
Financial provision (\$m) Government sector	526.8	529.4	517.4 (-2.3%)	<b>526.8</b> (+1.8%)
				(or -0.5% on 2005–06 Original)
Subvented sector	2.9	2.7	2.7 (—)	2.7 (—)
				(or same as 2005–06 Original)
Total	529.7	532.1	520.1 (-2.3%)	<b>529.5</b> (+1.8%)
				(or -0.5% on 2005–06 Original)

#### Aim

19 The aim is to provide specialised outpatient treatment for various illnesses.

#### **Brief Description**

- 20 Specialised outpatient clinics provide curative services to patients with tuberculosis (TB) and chest diseases, skin diseases or human immunodeficiency virus (HIV) infection. Dental service is provided to hospital patients, emergency cases and groups with special oral healthcare needs. The Department subvents two Chinese Medicine Clinics run by the Tung Wah Group of Hospitals.
- 21 The Department achieved its targets in 2005, except for the appointment time for new dermatology cases. A longer wait was recorded in 2005 mainly because a number of experienced doctors had left the service in the year.
  - 22 The key performance measures in respect of curative care are:

#### **Targets**

	Target	2004 (Actual)	2005 (Actual)	2006 (Plan)
coverage rate of tuberculosis vaccination (BCG) at birth (%)cure rate of tuberculosis patients under	>99	>99	>99	>99
supervised treatment (%)appointment time for new dermatology	>85	88	87	>85
cases within 12 weeks (% of cases)	>90	94	61	90
Indicators				
		2004 (Actual)	2005 (Actual)	2006 (Estimate)
BCG vaccinations given to new born babies attendances at specialised outpatient clinics		47 600	57 200	57 200
TB and Chest Dermatology HIV/AIDS		790 000 251 000 10 600	829 000 242 000 10 600	829 000 242 000 11 000
dental treatment cases hospital patients (attendances) dental clinics emergency treatment (attenda special needs group (no. of patients)	nces)	56 000 43 000 10 600	54 000 43 000 11 500	54 000 43 000 11 500

### Matters Requiring Special Attention in 2006-07

23 During 2006–07, the Department will continue to provide specialised curative services to the public and dental service to patients with special oral healthcare needs or emergency.

#### Programme (5): Rehabilitation

	2004–05 (Actual)	2005–06 (Original)	2005–06 (Revised)	2006–07 (Estimate)
Financial provision (\$m)	76.1	73.0	71.2 (-2.5%)	<b>71.9</b> (+1.0%)
				(or -1.5% on 2005-06 Original)

#### Aim

24 The aim is to provide comprehensive assessment for children with developmental disabilities.

## **Brief Description**

- 25 The Department runs child assessment centres which are responsible for:
- providing comprehensive assessment for children with disabilities or other developmental problems;
- · providing therapy for children and counselling for parents; and
- referring children to rehabilitation services.

- 26 The Department achieved its targets in 2005.
- 27 The key performance measures in respect of rehabilitation are:

### **Targets**

	Target	2004 (Actual)	2005 (Actual)	2006 (Plan)
appointment time for new cases in child assessment centres within three weeks (%)completion time for assessment of new	>90	99	99	>90
cases in child assessment centres within six months (%)	>90	96	95	>90
Indicator				
		2004 (Actual)	2005 (Actual)	2006 (Estimate)
attendances at child assessment centres		26 500	27 500	27 500

### Matters Requiring Special Attention in 2006-07

28 During 2006–07, the Department will continue to provide comprehensive assessment services to children with developmental disabilities and counselling services for their parents.

### Programme (6): Treatment of Drug Abusers

	2004–05 (Actual)	2005–06 (Original)	2005–06 (Revised)	2006–07 (Estimate)
Financial provision (\$m) Government sector	32.7	34.3	34.3 (—)	<b>33.5</b> (-2.3%)
				(or -2.3% on 2005–06 Original)
Subvented sector	79.8	82.0	82.0 (—)	<b>86.7</b> (+5.7%)
				(or +5.7% on 2005–06 Original)
Total	112.5	116.3	116.3	120.2 (+3.4%)
				(or +3.4% on 2005–06 Original)

## Aim

29 The aim is to contribute to Government's overall strategy for the control of drug abuse.

#### **Brief Description**

- 30 This aim is achieved by providing voluntary treatment services to drug abusers through the methadone clinic service and by subventing residential treatment and rehabilitation programmes operated by voluntary agencies, namely, the Society for the Aid and Rehabilitation of Drug Abusers (SARDA), the Caritas Hong Kong and the Hong Kong Christian Service.
  - **31** The Department achieved its targets in 2005.

32 The key performance measures in respect of treatment of drug abusers are:

### **Targets**

	Target	2004 (Actual)	2005 (Actual)	2006 (Plan)
average attendance rate of patients registered with methadone clinics (%) completion rate of SARDA's inpatient treatment courses	70	72	74	70
detoxification (%)	70	78	79	70
rehabilitation (%)	60	70	72	70
Indicators				
		2004 (Actual)	2005 (Actual)	2006 (Estimate)
patients registered with methadone clinics		9 350	9 150	9 150
average daily attendances at methadone clinics		6 800	6 800	6 800
patients admitted for residential treatmentbed-days occupied at residential treatment and ref		2 120	2 000	2 100
centres		115 000	105 000	113 000

### Matters Requiring Special Attention in 2006-07

33 During 2006–07, the Department starts subventing a treatment and rehabilitation centre for adult females.

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

	2004–05 (Actual)	2005–06 (Original)	2005–06 (Revised)	2006–07 (Estimate)
Financial provision (\$m)	437.8	447.8	465.1 (+3.9%)	<b>492.6</b> (+5.9%)
				(or +10.0% on 2005-06 Original)

#### Aim

34 The aim is to provide medical and dental services for serving and retired civil servants and other eligible persons.

## **Brief Description**

- 35 The work involves:
- providing medical services to eligible persons at non-public clinics;
- providing dental treatment services to eligible persons at dental clinics; and
- effecting payment for medical fees and hospital charges incurred by eligible persons in authorised cases.
- **36** The Department achieved its targets in 2005.
- 37 The key performance measures in respect of medical and dental treatment for eligible persons are:

### Target

	Target	2004 (Actual)	2005 (Actual)	2006 (Plan)
appointment time for new dental cases within six months (%)	>90	91	97	>90
Indicators				
		2004 (Actual)	2005 (Actual)	2006 (Estimate)
attendances at non-public clinics		175 000 630 000	168 000 650 000	170 000 650 000

#### Matters Requiring Special Attention in 2006-07

**38** During 2006–07, the Department will continue to provide medical and dental services for civil servants and other eligible persons.

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

	2004–05	2005–06	2005–06	2006–07
	(Actual)	(Original)	(Revised)	(Estimate)
Financial provision (\$m)	10.6	10.1	10.1 (—)	10.1 (—)

(or same as 2005–06 Original)

#### Aim

**39** The aim is to discharge the personnel management responsibility for the civil servants working in the Hospital Authority (HA), to maintain their morale and efficiency to facilitate the smooth operation of all public hospitals in a mixed staff situation, and to look after the interests of these civil servants.

### **Brief Description**

- **40** Since 1 April 1999, the Department took over from the former Hospital Services Department the role of ensuring an effective liaison with HA in respect of the personnel management of the public hospital staff who chose to retain their civil servant status.
  - 41 The key performance measures are:

#### Indicator

2006	2005	2004	
(Estimate)	(Actual)	(Actual)	
3 559	3 768	4 364	no. of civil servants working in HA managed as at 1 April

### Matters Requiring Special Attention in 2006-07

**42** During 2006–07, the Department will continue to discharge the personnel management responsibility for the civil servants working in HA.

#### ANALYSIS OF FINANCIAL PROVISION

Programme	2004–05	2005–06	2005–06	2006-07
	(Actual)	(Original)	(Revised)	(Estimate)
	(\$m)	(\$m)	(\$m)	(\$m)
(1) Statutory Functions	220.3	233.5	235.9	241.5
	1,222.4	1,195.2	1,204.3	1,374.4
	222.1	212.4	213.5	221.8
	529.7	532.1	520.1	529.5
	76.1	73.0	71.2	71.9
	112.5	116.3	116.3	120.2
<ul> <li>(7) Medical and Dental Treatment for Civil Servants</li> <li>(8) Personnel Management of Civil Servants Working in Hospital Authority</li> </ul>	437.8	447.8	465.1	492.6
	10.6	10.1	10.1	10.1
	2,831.5	2,820.4	2,836.5 (+0.6%)	3,062.0 (+7.9%)

(or +8.6% on 2005–06 Original)

#### **Analysis of Financial and Staffing Provision**

#### Programme (1)

Provision for 2006–07 is \$5.6 million (2.4%) higher than the revised estimate for 2005–06. This is mainly due to additional provision for strengthening port health measures in preparation for the coming into force of the revised International Health Regulations, and increased operating expenses and creation of four posts for carrying out enforcement duties as required under the Smoking (Public Health) Ordinance upon enactment of the bill on the provision of enforcement power to Tobacco Control Office staff.

#### Programme (2)

Provision for 2006–07 is \$170.1 million (14.1%) higher than the revised estimate for 2005–06. This is mainly due to increase in cash flow requirement for procurement of antiviral drugs for Influenza Pandemic, full-year provision for the pilot Comprehensive Child Development Service and additional provision for the review of the childhood immunisation programme in the light of changes in disease epidemiology and immunisation practices, partly offset by deletion of 17 posts.

#### Programme (3)

Provision for 2006–07 is \$8.3 million (3.9%) higher than the revised estimate for 2005–06. This is mainly due to additional provision for enhancing public health promotion programmes with emphasis on childhood obesity programme and for strengthening the publicity and education programme on smoking prevention, partly offset by deletion of two posts.

## Programme (4)

Provision for 2006–07 is \$9.4 million (1.8%) higher than the revised estimate for 2005–06. This is mainly due to anticipated increase in expenditure on drugs and chemicals for laboratory testing, partly offset by deletion of seven posts.

#### Programme (5)

Provision for 2006–07 is \$0.7 million (1.0%) higher than the revised estimate for 2005–06. This is mainly due to increased operating expenses.

### Programme (6)

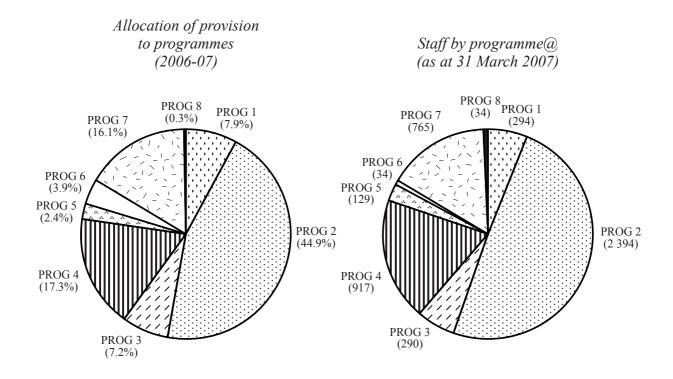
Provision for 2006–07 is \$3.9 million (3.4%) higher than the revised estimate for 2005–06. This is mainly due to additional provision for subventing a treatment and rehabilitation centre for adult females.

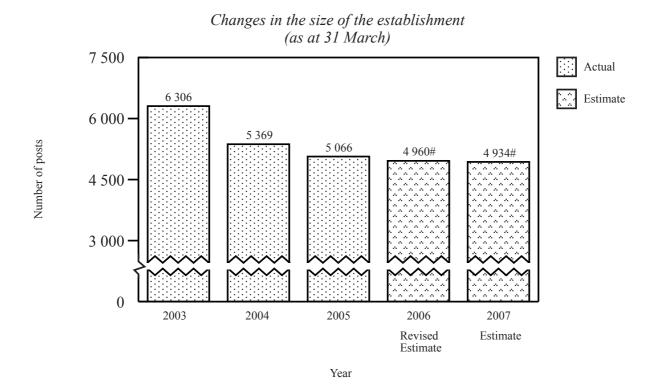
## Programme (7)

Provision for 2006–07 is \$27.5 million (5.9%) higher than the revised estimate for 2005–06. This is mainly due to additional provision to meet the increasing demand for payment and reimbursement of medical fees and hospital charges.

## Programme (8)

Provision for 2006–07 is the same as the revised estimate for 2005–06.





- @ Excludes 77 posts to accommodate general grades officers working in general outpatient clinics of the Hospital Authority.
- # Includes 81 and 77 posts as at 31 March 2006 and 31 March 2007 respectively to accommodate general grades officers working in general outpatient clinics of the Hospital Authority.

Sub- head (Code)		Actual expenditure 2004–05	Approved estimate 2005–06	Revised estimate 2005–06	<b>Estimate 2006–07</b>
	\$'000	\$'000	\$'000	\$'000	\$'000
	Operating Account				
	Recurrent				
000 003	Operational expenses	2,805,361	2,771,539	2,770,584	2,847,274
	Deduct reimbursements <u>Cr.1,156,894</u>	_	_	_	_
	Total, Recurrent	2,805,361	2,771,539	2,770,584	2,847,274
	Non-Recurrent				
700	General non-recurrent	16,998	27,994	47,597	191,400
	Total, Non-Recurrent	16,998	27,994	47,597	191,400
	Total, Operating Account	2,822,359	2,799,533	2,818,181	3,038,674
	Capital Account				
	Plant, Equipment and Works				
603 661	Plant, vehicles and equipment	4,995	1,500	1,500	6,400
001	Minor plant, vehicles and equipment (block vote)	3,676	19,256	16,637	15,485
	Total, Plant, Equipment and Works	8,671	20,756	18,137	21,885
	Subventions				
974 975	Subvented institutions - maintenance, repairs and minor improvements (block vote)	511	64	153	943
	and equipment (block vote)				450
	Total, Subventions	511	64	153	1,393
	Total, Capital Account	9,182	20,820	18,290	23,278
	Total Expenditure	2,831,541	2,820,353	2,836,471	3,061,952

#### **Details of Expenditure by Subhead**

The estimate of the amount required in 2006–07 for the salaries and expenses of the Department of Health is \$3,061,952,000. This represents an increase of \$225,481,000 over the revised estimate for 2005–06 and of \$230,411,000 over actual expenditure in 2004–05.

#### Operating Account

#### Recurrent

- **2** Provision of \$2,847,274,000 under *Subhead 000 Operational expenses* is for the salaries, allowances and other operating expenses of the Department of Health, including recurrent subventions to institutions.
- 3 The establishment as at 31 March 2006 will be 4 960 permanent posts, including 81 posts to accommodate general grades officers working in general outpatient clinics of Hospital Authority (HA). It is expected that net 26 permanent posts (including four posts to accommodate general grades officers working in general outpatient clinics of HA) will be deleted in 2006–07. Subject to certain conditions, the controlling officer may under delegated power create or delete non-directorate posts during 2006–07, but the notional annual mid-point salary value of all such posts must not exceed \$1,451,893,000.
  - 4 An analysis of the financial provision under Subhead 000 Operational expenses is as follows:

	2004–05 (Actual) (\$'000)	2005–06 (Original) (\$'000)	2005–06 (Revised) (\$'000)	2006–07 (Estimate) (\$'000)
Personal Emoluments				
- Salaries	1,845,836	1,812,975	1,763,200	1,765,793
- Allowances	14,876	17,697	16,567	16,410
- Job-related allowances	2,195	4,000	1,500	1,500
Personnel Related Expenses				
- Mandatory Provident Fund				
contribution	630	780	780	780
Departmental Expenses				
- Temporary staff	193,545	211,697	218,937	238,521
- Specialist supplies and equipment	250,789	212,913	226,433	251,392
- General departmental expenses	312,560	325,148	331,527	328,128
Other Charges				
- Contracting out of dental prostheses	2,459	5,100	5,100	5,100
- Payment and reimbursement of medical fees and hospital charges	44,478	44,600	65,000	93,000
- Supply, repair and renewal of prostheses	11,170	11,000	05,000	<b>&gt;2,000</b>
and surgical appliances	2,324	2,450	2,450	2,450
Subventions	,	,	,	,
- Subvented institutions	135,669	134,179	139,090	144,200
	2,805,361	2,771,539	2,770,584	2,847,274

5 Gross provision of \$1,156,894,000 under *Subhead 003 Recoverable salaries and allowances* is for salaries and allowances for civil servants working in HA. Expenditure under this subhead is reimbursed by HA. Subject to certain conditions, the controlling officer may under delegated power create or delete both directorate and non-directorate posts under the subhead during 2006–07. Before exercising his delegated power, the controlling officer is required to seek the endorsement of HA that the proposals and their financial implications are acceptable. In addition, the gross estimate under the subhead must not be exceeded without the prior approval of the Secretary for Financial Services and the Treasury.

## Capital Account

#### Subventions

- 6 Provision of \$943,000 under Subhead 974 Subvented institutions—maintenance, repairs and minor improvements (block vote) is for the maintenance of buildings, including repairs, repainting, refurbishment and rewiring, and minor improvements, costing over \$150,000 but not exceeding \$2,000,000 for each project. The increase of \$790,000 (516.3%) over the revised estimate for 2005–06 is mainly due to increased cash flow requirement for maintenance works.
- 7 Provision of \$450,000 under Subhead 975 Subvented institutions—minor plant, vehicles and equipment (block vote) is for replacement and acquisition of miscellaneous items of plant, vehicles and equipment costing over \$150,000 but not exceeding \$2,000,000 each. The provision for 2006–07 is to cater for replacement of equipment.

## Commitments

Sub- head (Code)	Item (Code)	Ambit	Approved commitment	Accumulated expenditure to 31.3.2005	Revised estimated expenditure for 2005–06	Balance
			\$'000	\$'000	\$'000	\$'000
Operating Account						
700		General non-recurrent				
	481	Antiviral Stockpile for Influenza Pandemic	254,000	_	28,940	225,060
	717	Consultancy service to review and improve the Regulatory System on Drug Control	500	302	100	98
	718	Conditioning of radioactive waste	9,800	8,476	820	504
	725	Implementation of statutory requirements under the Chinese Medicine Ordinance	9,200	3,413	1,000	4,787
	726	Conducting a population health survey.	9,000	1,081	1,347	6,572
	727	Setting up a Tobacco Control Office	5,000	3,018		1,982
	728	Studies on Chinese medicinal herbs	46,600	16,759	12,000	17,841
	729	Preparatory work for implementing an inspection system for reproductive technology centres in Hong Kong	700	68	_	632
	731	Acquisition of data entry service and procurement of specimens of Chinese herbal medicines for regulation of Chinese medicines in Hong Kong	975	11	145	819
	733	Smoke-free Workplace Programme	3,300	177	200	2,923
	734	Launching of the registration system for proprietary Chinese medicines	2,277	836	600	841
			341,352	34,141	45,152	262,059
Capital Account						
603		Plant, vehicles and equipment				
	449	Replacement of two sets of air-cooled chillers and the associated accessories at Lam Tin Polyclinic	2,320	_	1,500	820
	844	Acquisition of an Automated Haematology System	3,080	_	_	3,080
	845	Replacement of one General X-ray machine with Computed Radiography System, Picture Archiving and Communication System and Radiology Information				
		System at Tai Po Chest X-ray Unit	5,000			5,000
			10,400		1,500	8,900
		Total	351,752	34,141	46,652	270,959