

Head 37 — DEPARTMENT OF HEALTH

Controlling officer: the Director of Health will account for expenditure under this Head.

Estimate 2011–12	\$4,870.3m
Establishment ceiling 2011–12 (notional annual mid-point salary value) representing an estimated 5 575 non-directorate posts as at 31 March 2011 rising by 125 posts to 5 700 posts as at 31 March 2012	\$2,030.8m
In addition, there will be an estimated 59 directorate posts as at 31 March 2011 rising by two posts to 61 posts as at 31 March 2012.	
Commitment balance	\$424.1m

Controlling Officer's Report

Programmes

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

Detail

Programme (1): Statutory Functions

	2009–10 (Actual)	2010–11 (Original)	2010–11 (Revised)	2011–12 (Estimate)
Financial provision (\$m)	395.5	440.3	414.3 (–5.9%)	502.6 (+21.3%)
				(or +14.1% on 2010–11 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 spread of infectious diseases;
 - 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;
 - providing services in forensic medicine and operating public mortuaries; and
 - enforcing laws on tobacco control.

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4 The key performance measures in respect of statutory functions are:

Targets

	Target	2009 (Actual)	2010 (Actual)	2011 (Plan)
free pratique to be granted within 30 minutes of receiving application (%)	>95	98	99	>95
registration of pharmaceutical products within five months (% of applications) ...	>90	97	94	>90
inspection of licensed retail drug premises at an average of twice a year per premises (%)	100	100	100	100
proportion of workers getting radiation dose <20mSv a year (%).....	100	100	100	100
processing of registration application from healthcare professionals within ten working days (%).....	>90	100	100	>90
investigation upon receipt of complaint against healthcare professionals within 14 working days (%).....	>90	99	99	>90
inspections of licensed institutions registered under the Hospitals, Nursing Homes and Maternity Homes Registration Ordinance (Cap. 165) not less than once a year (%)	100	100	100	100

Indicators

	2009 (Actual)	2010 (Actual)	2011 (Estimate)
registration applications of pharmaceutical products processed	4 700#	4 200	4 200
inspection of licensed retail drug premises	7 800	8 000	8 000
licences, notices and permits processed for irradiating substances/apparatus	11 100	11 000	11 000
registration applications from healthcare professionals processed	3 400	4 200	4 500
no. of inspections of licensed institutions registered under the Hospitals, Nursing Homes and Maternity Homes Registration Ordinance.....	162	205	205

The figure has been updated after the preparation of the 2010–11 Estimates.

Matters Requiring Special Attention in 2011–12

5 During 2011–12, the Department will:

- continue to enforce the Smoking (Public Health) Ordinance (Cap. 371) and the Fixed Penalty (Smoking Offences) Ordinance (Cap. 600);
- expedite the setting of standards for Chinese herbal medicines commonly used in Hong Kong; and
- expand Pharmaceutical Service to meet increasing drug regulatory needs.

Programme (2): Disease Prevention

	2009–10 (Actual)	2010–11 (Original)	2010–11 (Revised)	2011–12 (Estimate)
Financial provision (\$m)				
Government sector	1,966.3	2,096.0	1,616.5 (–22.9%)	2,204.8 (+36.4%)
				(or +5.2% on 2010–11 Original)

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	2009–10 (Actual)	2010–11 (Original)	2010–11 (Revised)	2011–12 (Estimate)
Subvented sector	36.7	39.1	37.8 (–3.3%)	36.8 (–2.6%) (or –5.9% on 2010–11 Original)
Total	2,003.0	2,135.1	1,654.3 (–22.5%)	2,241.6 (+35.5%) (or +5.0% on 2010–11 Original)

Aim

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

Brief Description

7 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 healthcare 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 healthcare service to the elderly;
- providing woman health service; and
- co-ordinating the development and implementation of initiatives aiming to promote primary care.

8 The Department subvents the family planning services provided by the Family Planning Association of Hong Kong.

9 A lower participation rate of new born babies attending maternal and child health centres was recorded in both 2009 and 2010 because there was an increase in the number of local deliveries of babies whose parents were not Hong Kong residents and who left Hong Kong after birth, without attending the maternal and child health centres for service.

10 The number of secondary school students participating in the Student Health Service was lower in 2010 because the service for secondary two to secondary seven students was suspended in 2010 for the redeployment of manpower for the Human Swine Influenza vaccination.

11 The key performance measures in respect of disease prevention are:

Targets

	Target	2009 (Actual)	2010 (Actual)	2011 (Plan)
achieving a high participation rate of new born babies attending maternal and child health centres (%)	>90	76§	76	76
contributing to achieving low infant mortality rate (IMR) and maternal mortality rate (MMR)				
IMR per 1 000 live births	<6.0	1.8	1.8	<6.0
MMR per 100 000 live births	<6.0	2.5	2.5	<6.0
School Dental Care Service participation rate (%)	>90	94	95	>90

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	Target	2009 (Actual)	2010 (Actual)	2011 (Plan)
investigating reports of outbreaks of communicable diseases within 24 hours (%)	100	100	100	100
coverage rate of immunisation programme for school children (%)	>95	99	99	>95

§ The figure has been updated after the preparation of the 2010–11 Estimates.

Indicators

	2009 (Actual)	2010 (Actual)	2011 (Estimate)
attendances at maternal and child health centres			
child health service	596 000@	613 000	608 000
maternal health service.....	164 000	152 000	152 000
family planning service	145 000	128 000	128 000
cervical screening service	99 000	99 000	99 000
attendances at family planning clinics operated by Family Planning Association.....	131 900	120 000	131 900
school children participating in the Student Health Service			
primary school students	350 000	331 000	315 000
secondary school students.....	388 000	73 000	373 000
primary school children participating in the School Dental Care Service	347 000	328 000	315 000
no. of training activities on infection control	90	83	83
no. of attendances to training activities on infection control....	10 570	7 600	7 600
doses of vaccines given to school children	200 000	183 000	175 000
attendances at social hygiene clinics	99 000	86 000	86 000
no. of enrolment in elderly health centres	38 500	38 500	38 500
no. of attendances for health assessment and medical consultation at elderly health centres.....	175 000	175 000	175 000
attendances at health education activities organised by elderly health centres and visiting health teams.....	437 000	460 000	460 000
no. of enrolment for woman health service	19 300	19 000	19 000
no. of attendances for woman health service.....	35 000	36 000	36 000
no. of laboratory tests relating to public health.....	2 725 000	2 570 000	2 570 000

@ The figure has been updated after the preparation of the 2010–11 Estimates.

Matters Requiring Special Attention in 2011–12

12 During 2011–12, the Department will:

- continue to enhance the preparedness for influenza pandemic and other public health emergencies;
- continue to implement the three-year pilot scheme to provide healthcare vouchers for elderly aged 70 or above as a partial subsidy for their use of private primary healthcare services;
- continue to support the Government's initiative to develop an Electronic Health Record infrastructure for Hong Kong;
- continue to co-ordinate the development and implementation of primary care initiatives and to implement a primary care campaign in partnership with healthcare professionals to raise public awareness of the benefits of primary care in disease prevention and management; and
- conduct a territory-wide oral health survey to continuously monitor the oral health status of the population.

Programme (3): Health Promotion

	2009–10 (Actual)	2010–11 (Original)	2010–11 (Revised)	2011–12 (Estimate)
Financial provision (\$m)				
Government sector	191.5	244.3	232.8 (–4.7%)	249.1 (+7.0%)
				(or +2.0% on 2010–11 Original)

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	2009–10 (Actual)	2010–11 (Original)	2010–11 (Revised)	2011–12 (Estimate)
Subvented sector	29.4	44.4	42.9 (–3.4%)	43.7 (+1.9%)
				(or –1.6% on 2010–11 Original)
Total	220.9	288.7	275.7 (–4.5%)	292.8 (+6.2%)
				(or +1.4% on 2010–11 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 promotional initiatives in support of tobacco control. In January 2009, the Department launched a pilot community-based smoking cessation programme in collaboration with the Tung Wah Group of Hospitals which has been extended to 31 March 2013. In collaboration with Pok Oi Hospital, the Department launched another pilot community-based smoking cessation programme using traditional Chinese Medicine in 2010–11.

16 The key performance measures in respect of health promotion are:

Target

	Target	2009 (Actual)	2010 (Actual)	2011 (Plan)
training of health promoters (annual total).....	>1 500	2 200	2 300	>1 500

Indicators

	2009 (Actual)	2010 (Actual)	2011 (Estimate)
production of health education materials (annual no. of titles).....	700	700	700
attendances at health education activities.....	985 000	909 000	909 000
AIDS counselling attendances	2 620	2 470	2 470
utilisation of the AIDS telephone enquiry service.....	14 400	14 200	14 200
no. of publicity/educational activities delivered by COSH	340	340	340
no. of secondary schools joining the Adolescent Health Programme	320	320	320

Matters Requiring Special Attention in 2011–12

17 During 2011–12, the Department will:

- enhance its public health promotion programmes to instil a healthy lifestyle concept in the community, with continued emphasis on healthy eating;
- continue to strengthen the publicity and education programme and adopt a community approach on smoking prevention and cessation; and
- continue with publicity efforts to promote organ donation and registration with the Centralised Organ Donation Register in collaboration with relevant organisations.

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Programme (4): Curative Care

	2009–10 (Actual)	2010–11 (Original)	2010–11 (Revised)	2011–12 (Estimate)
Financial provision (\$m)				
Government sector	648.0	649.5	649.0 (–0.1%)	722.1 (+11.3%) (or +11.2% on 2010–11 Original)
Subvented sector	2.9	2.9	2.9 (—)	3.0 (+3.4%) (or +3.4% on 2010–11 Original)
Total	650.9	652.4	651.9 (–0.1%)	725.1 (+11.2%) (or +11.1% on 2010–11 Original)

Aim

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

Brief Description

19 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.

20 The key performance measures in respect of curative care are:

Targets

	Target	2009 (Actual)	2010 (Actual)	2011 (Plan)
coverage rate of TB vaccination (BCG) at birth (%)	>99	>99	>99	>99
cure rate of TB patients under supervised treatment (%)	>85	86	86	>85
appointment time for new dermatology cases within 12 weeks (% of cases)	>90	65	56	56

Indicators

	2009 (Actual)	2010 (Actual)	2011 (Estimate)
BCG vaccinations given to new born babies.....	82 000	88 000	88 000
attendances at specialised outpatient clinics			
TB and Chest	756 000	752 000	752 000
Dermatology	253 500	252 700	252 700
HIV/AIDS.....	12 600	13 400	13 400
dental treatment cases			
hospital patients (attendances)	55 500	57 100	57 100
dental clinics emergency treatment (attendances)	41 100	40 100	40 100
special needs group (no. of patients).....	10 100	10 600	10 600

Matters Requiring Special Attention in 2011–12

21 During 2011–12, the Department will continue to provide specialised curative services to the public and dental service to patients with special oral healthcare needs or emergency.

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Programme (5): Rehabilitation

	2009–10 (Actual)	2010–11 (Original)	2010–11 (Revised)	2011–12 (Estimate)
Financial provision (\$m)	79.1	80.1	81.0 (+1.1%)	82.3 (+1.6%)
				(or +2.7% on 2010–11 Original)

Aim

22 The aim is to provide comprehensive assessment for children with developmental problems and disabilities.

Brief Description

23 The Department runs child assessment centres which are responsible for:

- providing comprehensive physical, psychological and social assessment for children with developmental anomalies;
- formulating rehabilitation plan after developmental diagnosis;
- assisting to arrange appropriate pre-school and school placements for training, remedial and special education where necessary; and
- providing interim support to parents and the children through counselling, talks and support groups.

24 The key performance measures in respect of rehabilitation are:

Targets

	Target	2009 (Actual)	2010 (Actual)	2011 (Plan)
appointment time for new cases in child assessment centres within three weeks (%)	>90	99	99	>90
completion time for assessment of new cases in child assessment centres within six months (%)	>90	91	97	>90

Indicator

	2009 (Actual)	2010 (Actual)	2011 (Estimate)
attendances at child assessment centres	26 200	32 300	32 300

Matters Requiring Special Attention in 2011–12

25 During 2011–12, the Department will continue to provide comprehensive assessment services to children with developmental problems and disabilities, and interim support and educational activities to these children, their families and the public.

Programme (6): Treatment of Drug Abusers

	2009–10 (Actual)	2010–11 (Original)	2010–11 (Revised)	2011–12 (Estimate)
Financial provision (\$m)				
Government sector	40.1	36.8	36.9 (+0.3%)	38.1 (+3.3%)
				(or +3.5% on 2010–11 Original)

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	2009–10 (Actual)	2010–11 (Original)	2010–11 (Revised)	2011–12 (Estimate)
Subvented sector	89.6	96.3	91.6 (–4.9%)	94.3 (+2.9%)
				(or –2.1% on 2010–11 Original)
Total	129.7	133.1	128.5 (–3.5%)	132.4 (+3.0%)
				(or –0.5% on 2010–11 Original)

Aim

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

Brief Description

27 This aim is achieved by providing 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.

28 To facilitate better management and control of government subvention, the Department is in discussion with SARDA with a view to finalising a Funding and Service Agreement with it.

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

Targets

	Target	2009 (Actual)	2010 (Actual)	2011 (Plan)
average attendance rate of patients registered with methadone clinics (%)....	>70	76	76	>70
completion rate of SARDA's inpatient treatment courses				
detoxification (%).....	>70	82	85	>70
rehabilitation (%).....	>60	72	73	>60

Indicators

	2009 (Actual)	2010 (Actual)	2011 (Estimate)
patients registered with methadone clinics.....	8 500	8 400	8 400
average daily attendances at methadone clinics	6 400	6 400	6 400
patients admitted for residential treatment	1 970 [^]	1 770	1 790
bed-days occupied at residential treatment and rehabilitation centres	125 100 [^]	111 300	113 000

[^] The figure has been updated after the preparation of the 2010–11 Estimates.

Matters Requiring Special Attention in 2011–12

30 During 2011–12, the Department will continue to provide treatment services to drug abusers.

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

	2009–10 (Actual)	2010–11 (Original)	2010–11 (Revised)	2011–12 (Estimate)
Financial provision (\$m)	669.1	823.5	764.6 (–7.2%)	886.5 (+15.9%)
				(or +7.7% on 2010–11 Original)

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Aim

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

Brief Description

32 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.

33 The key performance measures in respect of medical and dental treatment for eligible persons are:

Targets

	Target	2009 (Actual)	2010 (Actual)	2011 (Plan)
appointment time for new dental cases within six months (%)	>90	73	72	80
processing of applications for reimbursement of medical expenses within four weeks (%)¶	>90	—	—	>90

¶ New target as from 2011.

Indicators

	2009 (Actual)	2010 (Actual)	2011 (Estimate)
attendances at non-public clinics	186 000	209 000	219 000
attendances at dental clinics	600 000	611 000	617 000

Matters Requiring Special Attention in 2011–12

34 During 2011–12, 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

	2009–10 (Actual)	2010–11 (Original)	2010–11 (Revised)	2011–12 (Estimate)
Financial provision (\$m)	6.7	6.9	7.0 (+1.4%)	7.0 (—)
				(or +1.4% on 2010–11 Original)

Aim

35 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

36 On 1 April 1999, the Department took over from the former Hospital Services Department the role of ensuring an effective liaison with the HA in respect of the personnel management of the public hospital staff who chose to retain their civil servant status.

37 The key performance measure is:

Indicator

	2009 (Actual)	2010 (Actual)	2011 (Estimate)
no. of civil servants working in the HA managed as at 1 April	2 883	2 688	2 526

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Matters Requiring Special Attention in 2011–12

38 During 2011–12, the Department will continue to discharge the personnel management responsibility for the civil servants working in the HA.

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ANALYSIS OF FINANCIAL PROVISION

Programme	2009–10 (Actual) (\$m)	2010–11 (Original) (\$m)	2010–11 (Revised) (\$m)	2011–12 (Estimate) (\$m)
(1) Statutory Functions.....	395.5	440.3	414.3	502.6
(2) Disease Prevention	2,003.0	2,135.1	1,654.3	2,241.6
(3) Health Promotion	220.9	288.7	275.7	292.8
(4) Curative Care	650.9	652.4	651.9	725.1
(5) Rehabilitation	79.1	80.1	81.0	82.3
(6) Treatment of Drug Abusers	129.7	133.1	128.5	132.4
(7) Medical and Dental Treatment for Civil Servants	669.1	823.5	764.6	886.5
(8) Personnel Management of Civil Servants Working in Hospital Authority	6.7	6.9	7.0	7.0
	4,154.9	4,560.1	3,977.3 (-12.8%)	4,870.3 (+22.5%)
				(or +6.8% on 2010–11 Original)

Analysis of Financial and Staffing Provision

Programme (1)

Provision for 2011–12 is \$88.3 million (21.3%) higher than the revised estimate for 2010–11. This is mainly due to additional provision for expanding Pharmaceutical Service to meet increasing drug regulatory needs; expediting the setting of standards for Chinese herbal medicines; introducing mandatory Good Manufacturing Practice requirements for manufacturing of proprietary Chinese medicines (pCm) and implementing a pharmacovigilance programme for pCm; enhancing the capacity for regulation of private healthcare institutions including hospitals in support of development of private hospitals and healthcare industry; and the net increase of 65 posts in 2011–12 to meet operational needs.

Programme (2)

Provision for 2011–12 is \$587.3 million (35.5%) higher than the revised estimate for 2010–11. This is mainly due to additional provision for continuing the implementation of the three-year pilot scheme to provide health care vouchers for the elderly, meeting claims under subsidised vaccination schemes; implementing the universal screening of Group B Streptococcus under the antenatal shared-care programme; responding to the need of the community for better child care services and support for families and children in need; increase in cash flow requirement for procurement of equipment; and the net increase of 44 posts in 2011–12 to meet operational needs.

Programme (3)

Provision for 2011–12 is \$17.1 million (6.2%) higher than the revised estimate for 2010–11. This is mainly due to the increase in cash flow requirement for procurement of equipment and increased requirement for operating expenses.

Programme (4)

Provision for 2011–12 is \$73.2 million (11.2%) higher than the revised estimate for 2010–11. This is mainly due to increased drug expenditure, increase in cash flow requirement for procurement of equipment, partly offset by the net decrease of four posts in 2011–12.

Programme (5)

Provision for 2011–12 is \$1.3 million (1.6%) higher than the revised estimate for 2010–11. This is mainly due to increased requirement for operating expenses.

Programme (6)

Provision for 2011–12 is \$3.9 million (3.0%) higher than the revised estimate for 2010–11. This is mainly due to increased requirement for operating expenses.

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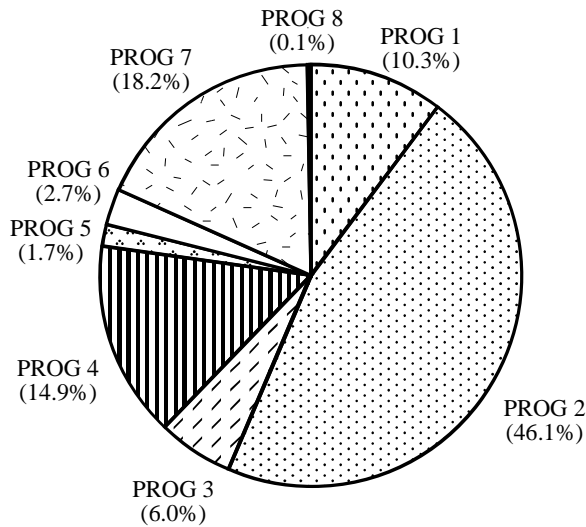
Programme (7)

Provision for 2011–12 is \$121.9 million (15.9%) higher than the revised estimate for 2010–11. This is mainly due to additional provision for meeting the increasing demand for payment and reimbursement of medical fees and hospital charges in respect of civil service eligible persons; enhancing the dental services for civil service eligible persons; increase in cash flow requirement for procurement of equipment; and the net increase of 22 posts in 2011–12 to meet operational needs.

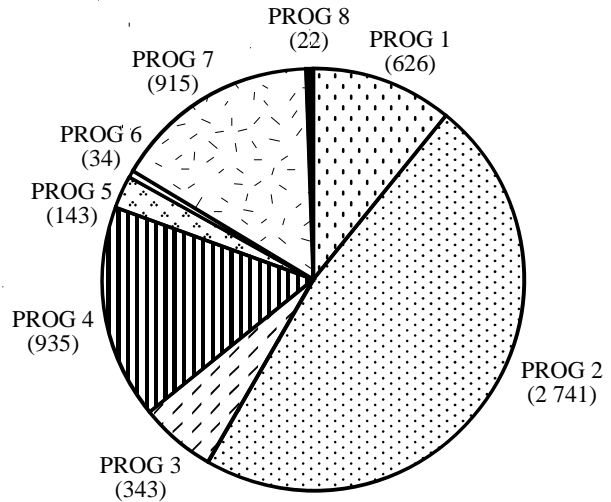
Programme (8)

Provision for 2011–12 is the same as the revised estimate for 2010–11.

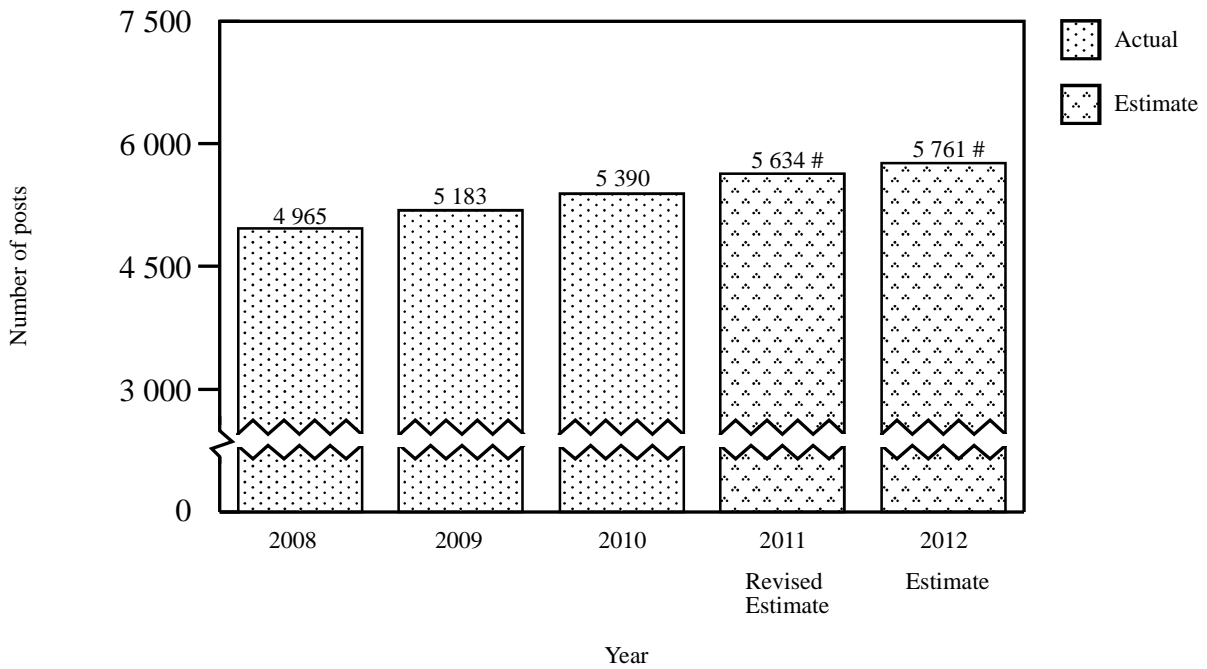
Allocation of provision to programmes (2011-12)



Staff by programme@ (as at 31 March 2012)



Changes in the size of the establishment (as at 31 March)



@ Excludes two posts to accommodate general grades officers working in general outpatient clinics of the Hospital Authority

Includes two posts to accommodate general grades officers working in general outpatient clinics of the Hospital Authority

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Sub-head (Code)		Actual expenditure 2009–10	Approved estimate 2010–11	Revised estimate 2010–11	Estimate 2011–12
	\$'000	\$'000	\$'000	\$'000	\$'000
Operating Account					
Recurrent					
000	Operational expenses.....	3,756,163	4,185,565	3,847,547	4,383,256
003	Recoverable salaries and allowances (General).....	992,000			
	<i>Deduct reimbursements..... Cr.992,000</i>	—	—	—	—
	Total, Recurrent	<u>3,756,163</u>	<u>4,185,565</u>	<u>3,847,547</u>	<u>4,383,256</u>
Non-Recurrent					
700	General non-recurrent	379,306	280,472	93,630	371,332
	Total, Non-Recurrent	<u>379,306</u>	<u>280,472</u>	<u>93,630</u>	<u>371,332</u>
	Total, Operating Account.....	<u>4,135,469</u>	<u>4,466,037</u>	<u>3,941,177</u>	<u>4,754,588</u>
Capital Account					
Plant, Equipment and Works					
603	Plant, vehicles and equipment	4,980	24,570	691	34,999
661	Minor plant, vehicles and equipment (block vote).....	11,798	60,823	28,092	72,215
	Total, Plant, Equipment and Works	<u>16,778</u>	<u>85,393</u>	<u>28,783</u>	<u>107,214</u>
Subventions					
974	Subvented institutions - maintenance, repairs, and minor improvements (block vote)	1,220	4,976	3,681	5,160
975	Subvented institutions - minor plant, vehicles and equipment (block vote)	1,397	3,684	3,684	3,384
	Total, Subventions	<u>2,617</u>	<u>8,660</u>	<u>7,365</u>	<u>8,544</u>
	Total, Capital Account	<u>19,395</u>	<u>94,053</u>	<u>36,148</u>	<u>115,758</u>
	Total Expenditure	<u><u>4,154,864</u></u>	<u><u>4,560,090</u></u>	<u><u>3,977,325</u></u>	<u><u>4,870,346</u></u>

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Details of Expenditure by Subhead

The estimate of the amount required in 2011–12 for the salaries and expenses of the Department of Health is \$4,870,346,000. This represents an increase of \$893,021,000 over the revised estimate for 2010–11 and of \$715,482,000 over actual expenditure in 2009–10.

Operating Account

Recurrent

2 Provision of \$4,383,256,000 under *Subhead 000 Operational expenses* is for the salaries, allowances and other operating expenses of the Department of Health, including recurrent subventions to institutions. The increase of \$535,709,000 (13.9%) over the revised estimate for 2010–11 is mainly due to the additional provision for meeting claims under the subsidised vaccination schemes, meeting the increasing demand for payment of medical fees and hospital charges in respect of civil service eligible persons, and expanding Pharmaceutical Service to meet increasing drug regulatory needs.

3 The establishment as at 31 March 2011 will be 5 634 permanent posts, including two posts to accommodate general grades officers working in general outpatient clinics of the Hospital Authority (HA). It is expected that there will be a net increase of 127 permanent posts in 2011–12. Subject to certain conditions, the controlling officer may under delegated power create or delete non-directorate posts during 2011–12, but the notional annual mid-point salary value of all such posts must not exceed \$2,030,768,000.

4 An analysis of the financial provision under *Subhead 000 Operational expenses* is as follows:

	2009–10 (Actual) (\$'000)	2010–11 (Original) (\$'000)	2010–11 (Revised) (\$'000)	2011–12 (Estimate) (\$'000)
Personal Emoluments				
- Salaries	2,120,968	2,230,099	2,199,094	2,304,028
- Allowances	14,287	14,144	15,487	16,254
- Job-related allowances.....	1,342	1,407	1,263	1,325
Personnel Related Expenses				
- Mandatory Provident Fund contribution	7,713	8,049	8,719	7,632
- Civil Service Provident Fund contribution	4,161	4,623	8,661	22,466
Departmental Expenses				
- Temporary staff	250,535	185,556	172,983	160,393
- Specialist supplies and equipment	468,042	469,230	406,890	487,655
- General departmental expenses.....	490,886	630,998	528,437	694,611
Other Charges				
- Contracting out of dental prostheses.....	5,309	5,100	5,500	6,000
- Payment and reimbursement of medical fees and hospital charges	222,642	335,400	290,000	380,000
- Supply, repair and renewal of prostheses and surgical appliances.....	3,325	2,900	3,300	3,300
- Vaccination reimbursements.....	10,935	124,022	39,357	130,271
Subventions				
- Subvented institutions.....	156,018	174,037	167,856	169,321
	3,756,163	4,185,565	3,847,547	4,383,256

5 Gross provision of \$992,000,000 under *Subhead 003 Recoverable salaries and allowances* is for salaries and allowances for civil servants working in the HA. Expenditure under this subhead is reimbursed by the 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 2011–12. Before exercising his delegated power, the controlling officer is required to seek the endorsement of the 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

Plant, Equipment and Works

6 Provision of \$72,215,000 under *Subhead 661 Minor plant, vehicles and equipment (block vote)* represents an increase of \$44,123,000 (157.1%) over the revised estimate for 2010–11. This is mainly due to increased requirement for replacement of plant and equipment.

Head 37 — DEPARTMENT OF HEALTH

Subventions

7 Provision of \$5,160,000 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 \$1,479,000 (40.2%) over the revised estimate for 2010–11 is mainly due to increased requirement for repair and renovation works.

8 Provision of \$3,384,000 under *Subhead 975 Subvented institutions - minor plant, vehicles and equipment (block vote)* is for replacement and acquisition of miscellaneous items of plants, vehicles and equipment costing over \$150,000 but not exceeding \$2,000,000 each. The decrease of \$300,000 (8.1%) against the revised estimate for 2010–11 is mainly due to decreased requirement for replacement of equipment.

Head 37 — DEPARTMENT OF HEALTH

Commitments

Sub-head (Code)	Item (Code)	Ambit	Approved commitment	Accumulated expenditure to 31.3.2010	Revised estimated expenditure for 2010-11	Balance
			\$'000	\$'000	\$'000	\$'000
Operating Account						
700	<i>General non-recurrent</i>					
481	Antiviral Stockpile for Influenza Pandemic		254,000	250,808	1,784	1,408
718	Conditioning of radioactive waste		9,800	8,896	400	504
725	Implementation of statutory requirements under the Chinese Medicine Ordinance		9,200	7,430	1,000	770
726	Conducting a population health survey		9,000	3,372	1,750	3,878
728	Studies on Chinese medicinal herbs.....		46,600	43,249	1,707	1,644
731	Acquisition of data entry service and procurement of specimens of Chinese herbal medicines for regulation of Chinese medicines in Hong Kong		975	309	140	526
887	Health Care Voucher Pilot Scheme.....		505,330	55,587	84,000	365,743
			834,905	369,651	90,781	374,473

Capital Account

603	<i>Plant, vehicles and equipment</i>					
841	Replacement of the X-ray Machine at Kowloon Bay Radio-diagnostic and Imaging Centre		6,500	—	—	6,500
842	Replacement of the X-ray Machine at East Kowloon Chest X-ray Unit.....		6,000	—	—	6,000
843	Replacement of the Liquid Chromatography Mass Spectrometry System at Biotoxin Laboratory.....		2,910	—	—	2,910
846	Acquisition of a Virology Genome Sequencing System at Molecular Laboratory		2,500	—	—	2,500
847	Acquisition of a Digital Imaging System for School Dental Care Service		2,100	—	—	2,100
848	Replacement of one refrigerator air handling unit for Kwai Chung Public Mortuary.....		4,600	—	—	4,600
849	Replacement of the X-ray Machine at Yaumatei Chest X-ray Unit		6,000	—	—	6,000
850	Replacement of the X-ray Machine at Sai Ying Pun Chest X-ray Unit		6,000	—	—	6,000
859	Acquisition of an Array Comparative Genomic Hybridisation System at Cytogenetic Laboratory		2,200	—	—	2,200
860	Acquisition of a Cone Beam Digital 3-Dimensional X-ray Unit at Pamela Youde Nethersole Eastern Hospital...		3,430	—	—	3,430

Head 37 — DEPARTMENT OF HEALTH

Commitments—Cont'd.

Sub-head (Code)	Item (Code)	Ambit	Approved commitment	Accumulated expenditure to 31.3.2010	Revised estimated expenditure for 2010–11	Balance
			\$'000	\$'000	\$'000	\$'000
Capital Account—Cont'd.						
603		<i>Plant, vehicles and equipment—Cont'd.</i>				
	879	Acquisition of one set of General Chemistry Analyser System for Clinical Pathology Laboratory Centre	8,050	—	691	7,359
			<u>50,290</u>	<u>—</u>	<u>691</u>	<u>49,599</u>
		Total	<u>885,195</u>	<u>369,651</u>	<u>91,472</u>	<u>424,072</u>