

Head 37 — DEPARTMENT OF HEALTH

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

Estimate 2019–20 **\$13,300.8m**

Establishment ceiling 2019–20 (notional annual mid-point salary value) representing an estimated 6 570 non-directorate posts as at 31 March 2019 rising by 332 posts to 6 902 posts as at 31 March 2020..... **\$3,695.9m**

In addition, there will be an estimated 64 directorate posts as at 31 March 2019 rising by four posts to 68 posts as at 31 March 2020.

Commitment balance..... **\$9.1m**

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

	2017–18 (Actual)	2018–19 (Original)	2018–19 (Revised)	2019–20 (Estimate)
Financial provision (\$m)	886.8	1,286.4	1,043.3 (–18.9%)	1,451.9 (+39.2%)
				(or +12.9% on 2018–19 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 and 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;
 - licensing of healthcare institutions;
 - providing services in forensic medicine and operating public mortuaries;
 - enforcing laws on tobacco control; and
 - enforcing the law prohibiting commercial sale and supply of alcohol to minors.

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

Targets

	Target	2017 (Actual)	2018 (Actual)	2019 (Plan)
free pratique to be granted within 30 minutes of receiving application (%)	>95	99	99	>95
registration of pharmaceutical products within five months (% of applications) ...	>90	99	96	>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	100	100	>90
inspections of private hospitals (including maternity homes) registered under the Hospitals, Nursing Homes and Maternity Homes Registration Ordinance (Cap. 165) not less than twice a year (%).....	100	100	100	100
inspections of nursing homes registered under the Hospitals, Nursing Homes and Maternity Homes Registration Ordinance not less than once a year (%).....	100	100	100	100

Indicators

	2017 (Actual)	2018 (Actual)	2019 (Estimate)
registration applications of pharmaceutical products processed	3 000	3 500	3 500
inspection of licensed retail drug premises	9 100	9 100	9 100
licences, notices and permits processed for irradiating apparatus/radioactive substances	14 600	15 000	15 000
registration applications from healthcare professionals processed	5 900	6 300	6 700
no. of inspections of private hospitals (including maternity homes) registered under the Hospitals, Nursing Homes and Maternity Homes Registration Ordinance	134	143	130
no. of inspections of nursing homes registered under the Hospitals, Nursing Homes and Maternity Homes Registration Ordinance	164	167	155
no. of inspections conducted for smoking, commercial sale and supply of alcohol to minors and related offences under the Smoking (Public Health) Ordinance (Cap. 371), the Fixed Penalty (Smoking Offences) Ordinance (Cap. 600) and Part 5 of the Dutiable Commodities (Liquor) Regulations (Cap. 109B)§.....	—	—	35 000

§ New indicator as from 2019.

Matters Requiring Special Attention in 2019–20

5 During 2019–20, the Department will:

- set up a full-fledged Office for Regulation of Private Healthcare Facilities to undertake the statutory enforcement work of the Private Healthcare Facilities Ordinance (Cap. 633);
- enforce the law prohibiting commercial sale and supply of alcohol to minors;

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- continue to operate the Government Chinese Medicines Testing Institute at the temporary site to conduct research on reference standards and testing methods of Chinese medicines;
- continue to enforce the Smoking (Public Health) Ordinance and the Fixed Penalty (Smoking Offences) Ordinance; and
- continue to support the Food and Health Bureau on private hospital development and in taking forward the legislative proposal to regulate medical devices.

Programme (2): Disease Prevention

	2017–18 (Actual)	2018–19 (Original)	2018–19 (Revised)	2019–20 (Estimate)
Financial provision (\$m)				
Government sector	4,142.2	5,934.9	5,753.6 (–3.1%)	7,542.6 (+31.1%) (or +27.1% on 2018–19 Original)
Subvented sector	97.6	97.6	99.3 (+1.7%)	111.7 (+12.5%) (or +14.4% on 2018–19 Original)
Total	4,239.8	6,032.5	5,852.9 (–3.0%)	7,654.3 (+30.8%) (or +26.9% on 2018–19 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, diagnostic 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 diseases including infections, and for 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;
- promoting and implementing the Elderly Health Care Voucher Scheme; and
- supporting the implementation of policies and initiatives aiming to enhance primary healthcare.

8 The Department subvents the family planning services provided by the Family Planning Association of Hong Kong and the outreach dental service provided by other non-governmental organisations under the “Outreach Dental Care Programme for the Elderly”.

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

Targets

	Target	2017 (Actual)	2018 (Actual)	2019 (Plan)
achieving a high participation rate of new born babies of local mothers attending maternal and child health centres (%)	>90	94	94	>90
contributing to achieving low infant mortality rate (IMR) and maternal mortality rate (MMR)				
IMR per 1 000 live births	<6.0	1.8Δ	1.6	<6.0
MMR per 100 000 live births	<6.0	1.8Δ	0.0	<6.0
School Dental Care Service participation rate (%)	>90	97	96	>90
investigating reports of outbreaks of communicable diseases within 24 hours (%)	100	100	100	100
coverage rate of immunisation programme for school children (%)	>95	98	98	>95

Δ The figure has been updated after the finalisation of the 2018–19 Estimates.

Indicators

	2017 (Actual)	2018 (Actual)	2019 (Estimate)
attendances at maternal and child health centres			
child health service	588 000	559 000	559 000
maternal health service	167 000	155 000	155 000
family planning service	98 000	92 000	92 000
cervical screening service	103 000	98 000	98 000
attendances at family planning clinics operated by Family Planning Association	102 000	104 000	100 000
school children participating in the Student Health Service			
primary school students	332 000	345 000	355 000
secondary school students	294 000	288 000	281 000
primary school children participating in the School Dental Care Service	336 500	349 300	359 200
no. of training activities on infection control	85	85	85
no. of attendances to training activities on infection control ...	8 400	8 400	8 400
doses of vaccines given to school children	167 000	212 000	167 000
attendances at social hygiene clinics	86 700	83 000	83 000
no. of enrolment in elderly health centres	45 000	48 000	50 000
no. of attendances for health assessment and medical consultation at elderly health centres	178 000	184 000	195 000
attendances at health education activities organised by elderly health centres and visiting health teams	486 000	478 000	478 000
no. of enrolment for woman health service	14 400	14 400	14 400
no. of attendances for woman health service	24 500	24 400	24 400
no. of laboratory tests relating to public health	6 290 000	6 580 000	6 850 000

Matters Requiring Special Attention in 2019–20

10 During 2019–20, the Department will:

- continue to promote and implement the Elderly Health Care Voucher Scheme, which will be enhanced in 2019 by increasing the accumulation limit of the voucher from \$5,000 to \$8,000. Also, the Government will provide each eligible elder with an additional \$1,000 as a one-off arrangement;
- launch a free human papillomavirus vaccination programme for school girls;
- continue to support the steering committee for viral hepatitis control;
- continue to implement a strategy and action plan for prevention and control of non-communicable diseases and reduction of their common behavioural risk factors such as tobacco use, physical inactivity, unhealthy diet and alcohol consumption through enhanced health promotion and education activities and strengthened surveillance systems;

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- embark on new initiatives to strengthen the Department's information technology infrastructure, Clinical Information Management System and data analytics in support of enhanced service delivery and the Government's Electronic Health Record Programme;
- regularise the colorectal cancer screening programme to cover persons at specific ages in phases;
- continue to enhance the preparedness for public health emergencies;
- continue the work in combating public health threats from antimicrobial resistance; and
- continue to enhance the seasonal influenza vaccination arrangements for better protection of high risk groups.

Programme (3): Health Promotion

	2017–18 (Actual)	2018–19 (Original)	2018–19 (Revised)	2019–20 (Estimate)
Financial provision (\$m)				
Government sector	269.5	386.7	332.6 (–14.0%)	391.7 (+17.8%) (or +1.3% on 2018–19 Original)
Subvented sector	92.2	93.7	93.4 (–0.3%)	94.7 (+1.4%) (or +1.1% on 2018–19 Original)
Total	361.7	480.4	426.0 (–11.3%)	486.4 (+14.2%) (or +1.2% on 2018–19 Original)

Aim

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

Brief Description

12 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.

13 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. The Department also provides community-based smoking cessation programmes and promotes smoking prevention in collaboration with non-governmental organisations.

- 14 The key performance measures in respect of health promotion are:

Target

	Target	2017 (Actual)	2018 (Actual)	2019 (Plan)
training of health promoters (annual total).....	>2 000	2 350	2 350	>2 000

Indicators

	2017 (Actual)	2018 (Actual)	2019 (Estimate)
production of health education materials (annual no. of titles).....	720	720	720
attendances at health education activities.....	912 000	912 000	912 000
AIDS counselling attendances.....	2 650	2 780	2 780
utilisation of the AIDS telephone enquiry service.....	19 100	15 600	15 600
no. of publicity/educational activities delivered by COSH.....	430	430	420

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	2017 (Actual)	2018 (Actual)	2019 (Estimate)
no. of secondary schools joining the Adolescent Health Programme.....	310	310	310

Matters Requiring Special Attention in 2019–20

15 During 2019–20, the Department will:

- continue to conduct the pilot scheme of Accredited Registers Scheme for Healthcare Professions and commence evaluation of the scheme;
- launch an ongoing mental health educational and destigmatisation campaign;
- explore the feasibility of extending the health promoting school model in Hong Kong; and
- continue to strengthen the publicity and education programme and adopt a community approach on smoking prevention and cessation.

Programme (4): Curative Care

	2017–18 (Actual)	2018–19 (Original)	2018–19 (Revised)	2019–20 (Estimate)
Financial provision (\$m)				
Government sector	1,009.3	1,095.1	1,086.8 (–0.8%)	1,210.5 (+11.4%) (or +10.5% on 2018–19 Original)
Subvented sector	3.5	9.5	9.5 (—)	16.8 (+76.8%) (or +76.8% on 2018–19 Original)
Total	1,012.8	1,104.6	1,096.3 (–0.8%)	1,227.3 (+11.9%) (or +11.1% on 2018–19 Original)

Aim

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

Brief Description

17 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.

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

Targets

	Target	2017 (Actual)	2018 (Actual)	2019 (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)δ.....	—	33	—	—
appointment time for new cases with serious dermatoses within eight weeks (% of cases)Φ.....	>90	—	99	>90

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δ Target removed as from 2018.

Φ New target as from 2018. The new target replaces the target “appointment time for new dermatology cases within 12 weeks”. Starting from 2018, the Department is pledging to offer appointments to new patients with serious dermatosis of indicator diseases within eight weeks (versus 12 weeks). With the increasing complexity of skin conditions and management, there is a need to accord higher priority to patients with more severe diseases and track the efficiency in offering the first appointments.

Indicators

	2017 (Actual)	2018 (Actual)	2019 (Estimate)
BCG vaccinations given to new born babies	56 000Δ	53 200	53 200
attendances at specialised outpatient clinics			
TB and Chest.....	669 500Δ	644 800	644 800
Dermatology.....	236 200	216 900	216 900
HIV/AIDS	17 900	17 700	18 000
dental treatment cases			
hospital patients (attendances)	61 200	67 000	67 000
dental clinics emergency treatment (attendances)	41 100	40 400	40 400
special needs group (no. of patients).....	11 600	11 500	11 500

Δ The figure has been updated after the finalisation of the 2018–19 Estimates.

Matters Requiring Special Attention in 2019–20

19 During 2019–20, the Department will:

- continue the three-year programme (known as Healthy Teeth Collaboration) in collaboration with non-governmental organisations to provide dental care services for adult persons with intellectual disabilities; and
- continue to provide specialised curative services to the public and dental service to patients with special oral healthcare needs or emergency.

Programme (5): Rehabilitation

	2017–18 (Actual)	2018–19 (Original)	2018–19 (Revised)	2019–20 (Estimate)
Financial provision (\$m)	123.8	138.6	136.3 (–1.7%)	162.2 (+19.0%)
				(or +17.0% on 2018–19 Original)

Aim

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

Brief Description

21 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.

22 The key performance measures in respect of rehabilitation are:

Targets

	Target	2017 (Actual)	2018 (Actual)	2019 (Plan)
appointment time for new cases in child assessment centres within three weeks (%)	>90	100	100	>90

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	Target	2017 (Actual)	2018 (Actual)	2019 (Plan)
completion time for assessment of new cases in child assessment centres within six months (%).....	>90	55	49	>70

Indicator

	2017 (Actual)	2018 (Actual)	2019 (Estimate)
attendances at child assessment centres	37 400	39 300	39 300

Matters Requiring Special Attention in 2019–20

23 During 2019–20, 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

	2017–18 (Actual)	2018–19 (Original)	2018–19 (Revised)	2019–20 (Estimate)
Financial provision (\$m)				
Government sector	51.9	48.4	52.0 (+7.4%)	59.4 (+14.2%) (or +22.7% on 2018–19 Original)
Subvented sector	123.8	131.0	131.8 (+0.6%)	137.8 (+4.6%) (or +5.2% on 2018–19 Original)
Total	175.7	179.4	183.8 (+2.5%)	197.2 (+7.3%) (or +9.9% on 2018–19 Original)

Aim

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

Brief Description

25 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.

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

Targets

	Target	2017 (Actual)	2018 (Actual)	2019 (Plan)
average attendance rate of patients registered with methadone clinics (%)	>70	74	76	>70
completion rate of SARDA's inpatient treatment courses				
detoxification (%)	>70	81	82	>70
rehabilitation (%)	>60	87	83	>60

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Indicators

	2017 (Actual)	2018 (Actual)	2019 (Estimate)
patients registered with methadone clinics	5 800	5 800	5 800
average daily attendances at methadone clinics.....	4 300	4 400	4 400
patients admitted for residential treatment.....	1 450	1 360	1 360
bed-days occupied at residential treatment and rehabilitation centres.....	97 300	102 300	101 400

Matters Requiring Special Attention in 2019–20

27 During 2019–20, the Department will continue to provide treatment services to drug abusers.

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

	2017–18 (Actual)	2018–19 (Original)	2018–19 (Revised)	2019–20 (Estimate)
Financial provision (\$m)	1,513.7	1,848.9	1,650.9 (–10.7%)	2,111.1 (+27.9%)
				(or +14.2% on 2018–19 Original)

Aim

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

Brief Description

29 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.

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

Targets

	Target	2017 (Actual)	2018 (Actual)	2019 (Plan)
appointment time for new dental cases within six months (%).....	>90	97	98	>90
processing of applications for reimbursement of medical expenses within four weeks (%).....	>90	99	99	>90

Indicators

	2017 (Actual)	2018 (Actual)	2019 (Estimate)
attendances at non-public clinics	297 000	285 000	290 000
attendances at dental clinics.....	766 400	769 600	775 000

Matters Requiring Special Attention in 2019–20

31 During 2019–20, the Department will continue to provide medical and dental services to civil servants and other eligible persons.

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

	2017–18 (Actual)	2018–19 (Original)	2018–19 (Revised)	2019–20 (Estimate)
Financial provision (\$m)	9.6	9.9	10.2 (+3.0%)	10.4 (+2.0%)
				(or +5.1% on 2018–19 Original)

Aim

32 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

33 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.

34 The key performance measure is:

Indicator

	2017 (Actual)	2018 (Actual)	2019 (Estimate)
no. of civil servants working in the HA managed as at 1 April.....	1 354	1 154	969

Matters Requiring Special Attention in 2019–20

35 During 2019–20, 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	2017–18 (Actual) (\$m)	2018–19 (Original) (\$m)	2018–19 (Revised) (\$m)	2019–20 (Estimate) (\$m)
(1) Statutory Functions	886.8	1,286.4	1,043.3	1,451.9
(2) Disease Prevention	4,239.8	6,032.5	5,852.9	7,654.3
(3) Health Promotion	361.7	480.4	426.0	486.4
(4) Curative Care	1,012.8	1,104.6	1,096.3	1,227.3
(5) Rehabilitation	123.8	138.6	136.3	162.2
(6) Treatment of Drug Abusers.....	175.7	179.4	183.8	197.2
(7) Medical and Dental Treatment for Civil Servants.....	1,513.7	1,848.9	1,650.9	2,111.1
(8) Personnel Management of Civil Servants Working in Hospital Authority	9.6	9.9	10.2	10.4
	8,323.9	11,080.7	10,399.7 (-6.1%)	13,300.8 (+27.9%)
				(or +20.0% on 2018–19 Original)

Analysis of Financial and Staffing Provision

Programme (1)

Provision for 2019–20 is \$408.6 million (39.2%) higher than the revised estimate for 2018–19. This is mainly due to increased requirement for operating expenses and a net increase of 98 posts in 2019–20 to meet operational needs.

Programme (2)

Provision for 2019–20 is \$1,801.4 million (30.8%) higher than the revised estimate for 2018–19. This is mainly due to additional provision for meeting funding requirement for the Elderly Health Care Voucher Scheme, improving uptake of seasonal influenza vaccine, regularising the colorectal cancer screening programme, and a net increase of 157 posts in 2019–20 to meet operational needs.

Programme (3)

Provision for 2019–20 is \$60.4 million (14.2%) higher than the revised estimate for 2018–19. This is mainly due to increased requirement for operating expenses, and an increase of 23 posts in 2019–20 to meet operational needs.

Programme (4)

Provision for 2019–20 is \$131.0 million (11.9%) higher than the revised estimate for 2018–19. This is mainly due to increased requirement for operating expenses, increased cash flow requirement for procurement of equipment and a net increase of four posts in 2019–20 to meet operational needs.

Programme (5)

Provision for 2019–20 is \$25.9 million (19.0%) higher than the revised estimate for 2018–19. This is mainly due to increased requirement for operating expenses and an increase of 22 posts in 2019–20 to meet operational needs.

Programme (6)

Provision for 2019–20 is \$13.4 million (7.3%) higher than the revised estimate for 2018–19. This is mainly due to increased requirement for operating expenses and increased cash flow requirement for procurement of equipment.

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Programme (7)

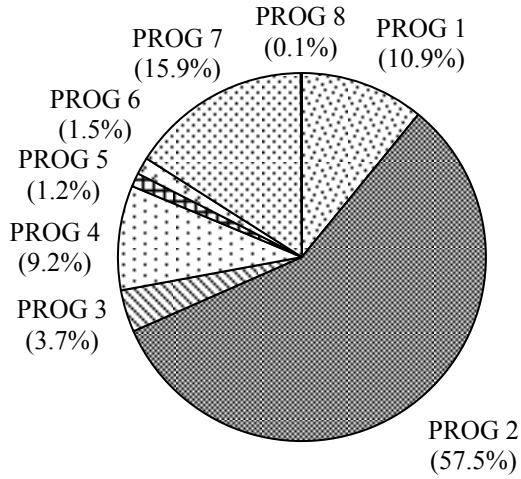
Provision for 2019–20 is \$460.2 million (27.9%) higher than the revised estimate for 2018–19. This is mainly due to additional provision for meeting the increasing demand for payment and reimbursement of medical fees and hospital charges in respect of civil service eligible persons, enhancing the medical and dental services for civil service eligible persons, increased cash flow requirement for procurement of equipment and an increase of 32 posts in 2019–20 to meet operational needs.

Programme (8)

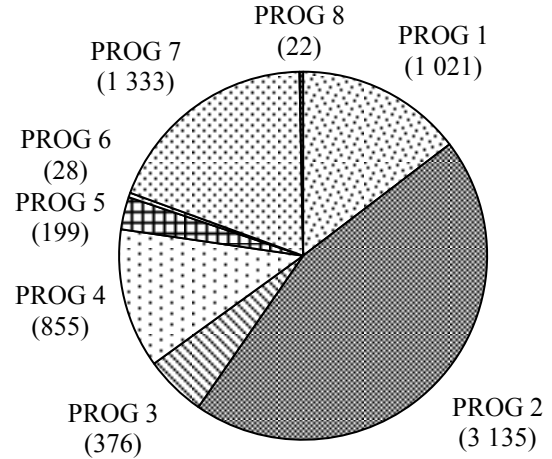
Provision for 2019–20 is \$0.2 million (2.0%) higher than the revised estimate for 2018–19. This is mainly due to increased requirement for operating expenses.

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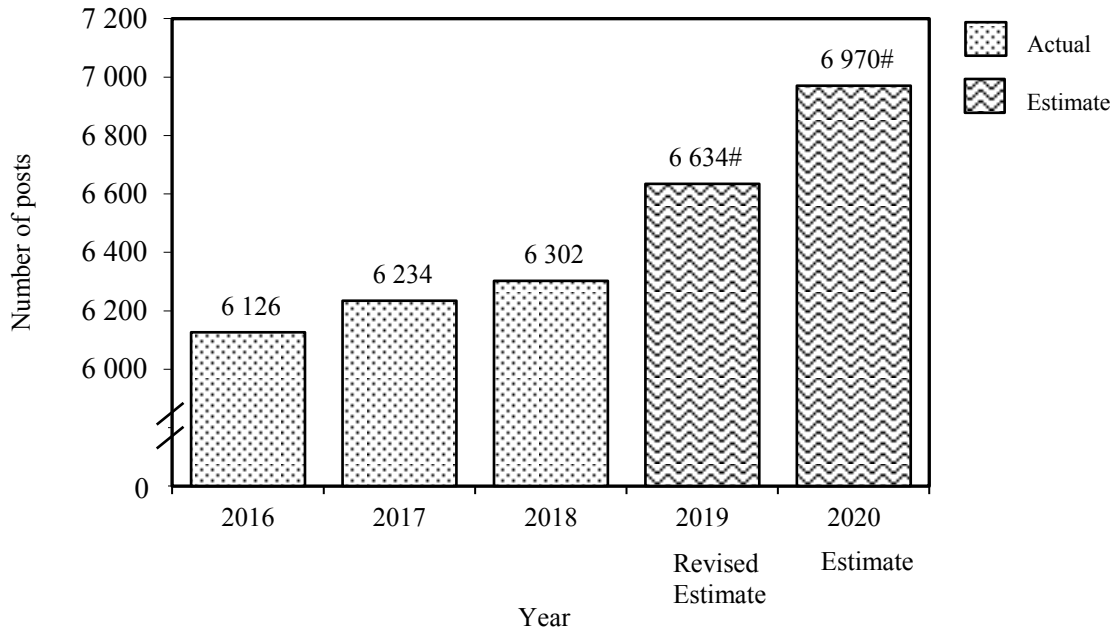
*Allocation of provision
to programmes
(2019-20)*



*Staff by programme @
(as at 31 March 2020)*



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



@ Excludes one post to accommodate a general grades officer working in a general outpatient clinic of the HA.

Includes one post to accommodate a general grades officer working in a general outpatient clinic of the HA.

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Sub-head (Code)		Actual expenditure 2017-18	Approved estimate 2018-19	Revised estimate 2018-19	Estimate 2019-20
	\$'000	\$'000	\$'000	\$'000	\$'000
Operating Account					
Recurrent					
000	Operational expenses	8,257,777	10,941,441	10,279,449	13,183,352
003	Recoverable salaries and allowances (General)..... 635,000				
	Deduct reimbursements <i>Cr. 635,000</i>	—	—	—	—
	Total, Recurrent.....	<u>8,257,777</u>	<u>10,941,441</u>	<u>10,279,449</u>	<u>13,183,352</u>
Non-Recurrent					
	General non-recurrent	151	20	20	—
	Total, Non-Recurrent.....	<u>151</u>	<u>20</u>	<u>20</u>	<u>—</u>
	Total, Operating Account	<u>8,257,928</u>	<u>10,941,461</u>	<u>10,279,469</u>	<u>13,183,352</u>
Capital Account					
Plant, Equipment and Works					
603	Plant, vehicles and equipment.....	8,785	16,853	19,480	2,579
661	Minor plant, vehicles and equipment (block vote).....	55,158	113,121	93,514	101,328
	Total, Plant, Equipment and Works.....	<u>63,943</u>	<u>129,974</u>	<u>112,994</u>	<u>103,907</u>
Subventions					
974	Subvented institutions - maintenance, repairs, and minor improvements (block vote)	883	5,669	3,595	8,310
975	Subvented institutions - minor plant, vehicles and equipment (block vote).....	1,156	3,595	3,595	5,182
	Total, Subventions	<u>2,039</u>	<u>9,264</u>	<u>7,190</u>	<u>13,492</u>
	Total, Capital Account.....	<u>65,982</u>	<u>139,238</u>	<u>120,184</u>	<u>117,399</u>
	Total Expenditure	<u><u>8,323,910</u></u>	<u><u>11,080,699</u></u>	<u><u>10,399,653</u></u>	<u><u>13,300,751</u></u>

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Details of Expenditure by Subhead

The estimate of the amount required in 2019–20 for the salaries and expenses of the Department of Health is \$13,300,751,000. This represents an increase of \$2,901,098,000 over the revised estimate for 2018–19 and \$4,976,841,000 over the actual expenditure in 2017–18.

Operating Account

Recurrent

2 Provision of \$13,183,352,000 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 \$2,903,903,000 (28.2%) over the revised estimate for 2018–19 is mainly due to the additional provision for meeting the estimated expenditure for the Elderly Health Care Voucher Scheme, improving uptake of seasonal influenza vaccine, regularising the colorectal cancer screening programme, increased demand for payment and reimbursement of medical fees and hospital charges in respect of civil service eligible persons, and a net increase of 336 posts in 2019–20 to meet operational needs.

3 The establishment as at 31 March 2019 will be 6 634 posts, including one post to accommodate a general grade officer working in a general outpatient clinic of the Hospital Authority (HA) and two supernumerary posts. It is expected that there will be a net increase of 336 posts in 2019–20. Subject to certain conditions, the controlling officer may under delegated power create or delete non-directorate posts during 2019–20, but the notional annual mid-point salary value of all such posts must not exceed \$3,695,934,000.

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

	2017–18 (Actual) (\$'000)	2018–19 (Original) (\$'000)	2018–19 (Revised) (\$'000)	2019–20 (Estimate) (\$'000)
Personal Emoluments				
- Salaries.....	3,364,604	3,622,989	3,585,984	4,027,259
- Allowances.....	24,331	26,791	20,460	27,946
- Job-related allowances.....	2,300	2,348	2,165	2,448
Personnel Related Expenses				
- Mandatory Provident Fund contribution.....	12,984	11,065	15,179	13,085
- Civil Service Provident Fund contribution.....	152,917	205,200	176,131	258,422
Departmental Expenses				
- Temporary staff.....	183,835	271,107	220,748	289,168
- Specialist supplies and equipment.....	724,580	872,034	871,686	1,012,510
- General departmental expenses.....	1,006,207	1,416,825	1,091,387	1,675,006
Other Charges				
- Contracting out of dental prostheses.....	8,501	9,000	11,400	11,400
- Payment and reimbursement of medical fees and hospital charges.....	687,801	895,200	750,000	1,101,100
- Supply, repair and renewal of prostheses and surgical appliances.....	4,613	4,620	5,500	5,500
- Health Care Voucher Scheme.....	1,697,455	3,155,600	2,983,307	4,206,875
- Vaccination reimbursements.....	72,661	126,159	218,719	205,100
Subventions				
- Subvented institutions.....	314,988	322,503	326,783	347,533
	8,257,777	10,941,441	10,279,449	13,183,352

5 Gross provision of \$635 million under *Subhead 003 Recoverable salaries and allowances* is for salaries and allowances for civil servants working in the HA and the Prince Philip Dental Hospital (PPDH). Expenditure under this subhead is reimbursed by the HA and PPDH. Subject to certain conditions, the controlling officer may under delegated power create or delete both directorate and non-directorate posts in HA under the subhead during 2019–20. 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.

Head 37 — DEPARTMENT OF HEALTH

Capital Account

Subventions

6 Provision of \$8,310,000 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 \$200,000 but not exceeding \$10 million for each project. The increase of \$4,715,000 (131.2%) over the revised estimate for 2018–19 is mainly due to increase in requirement for repair and renovation works.

7 Provision of \$5,182,000 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 \$200,000 but not exceeding \$10 million each. The increase of \$1,587,000 (44.1%) over the revised estimate for 2018–19 is mainly due to the increased requirement for scheduled replacement of minor plant and equipment.

Head 37 — DEPARTMENT OF HEALTH

Commitments

Sub-head (Code)	Item (Code)	Ambit	Approved commitment	Accumulated expenditure to 31.3.2018	Revised estimated expenditure for 2018–19	Balance
			\$'000	\$'000	\$'000	\$'000
<i>Capital Account</i>						
603		<i>Plant, vehicles and equipment</i>				
	855	Replacement of a thermoluminescent dosimetry system for Radiation Monitoring Service	22,000	8,831	9,300	3,869
	856	Replacement of a standard radiological dosimetry calibration facility for Radiation Health Unit	15,500	60	10,180	5,260
		Total	<u>37,500</u>	<u>8,891</u>	<u>19,480</u>	<u>9,129</u>