

## Head 37 — DEPARTMENT OF HEALTH

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

**Estimate 2022–23** ..... **\$26,273.8m**

**Establishment ceiling 2022–23** (notional annual mid-point salary value) representing an estimated 7 051 non-directorate posts as at 31 March 2022 reducing by 11 posts to 7 040 posts as at 31 March 2023 ..... **\$3,952.3m**

In addition, there will be an estimated 69 directorate posts as at 31 March 2022 and as at 31 March 2023.

**Commitment balance**..... **\$8,138.0m**

### Controlling Officer's Report

#### Programmes

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

#### Detail

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

	2020–21 (Actual)	2021–22 (Original)	2021–22 (Revised)	2022–23 (Estimate)
Financial provision (\$m)	1,209.0	1,579.3	1,455.9 (–7.8%)	1,592.0 (+9.3%)
				(or +0.8% on 2021–22 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;
  - regulation of private healthcare facilities;
  - 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	2020 (Actual)	2021 (Actual)	2022 (Plan)
free pratique to be granted within 30 minutes of receiving application (%) .....	>95	98	98	>95
registration of pharmaceutical products within five months (% of applications) ...	>90	99	100	>90
inspection of licensed retail drug premises at an average of twice a year per premises (%) .....	100	14	71	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 (%)Ψ.....	100	100	—	—
inspections of nursing homes registered under the Hospitals, Nursing Homes and Maternity Homes Registration Ordinance not less than once a year (%)Ψ.....	100	100	—	—
inspections of private hospitals licensed under the Private Healthcare Facilities Ordinance (Cap. 633) at an average of twice a year (%)δ .....	100	—	100	100
inspections of day procedure centres licensed under the Private Healthcare Facilities Ordinance at an average of once a year (%)# .....	100	—	—	100

Ψ Targets removed as from 2021.

δ New target as from 2021. The new target replaces the target “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”. The target “inspections of nursing homes registered under the Hospitals, Nursing Homes and Maternity Homes Registration Ordinance not less than once a year” is no longer applicable after the repeal of the Hospitals, Nursing Homes and Maternity Homes Registration Ordinance. The Hospitals, Nursing Homes and Maternity Homes Registration Ordinance was replaced by the Private Healthcare Facilities Ordinance on 1 January 2021.

# New target as from 2022 following the phased implementation of the Private Healthcare Facilities Ordinance.

#### *Indicators*

	2020 (Actual)	2021 (Actual)	2022 (Estimate)
registration applications of pharmaceutical products processed .....	2 900	2 800	2 800
inspection of licensed retail drug premises .....	4 330	8 190	9 560
licences, notices and permits processed for irradiating apparatus/radioactive substances .....	15 600	16 800	15 600
registration applications from healthcare professionals processed .....	6 600	6 400	6 700
no. of inspections of private hospitals (including maternity homes) registered under the Hospitals, Nursing Homes and Maternity Homes Registration Ordinance‡ .....	130	—	—

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	2020 (Actual)	2021 (Actual)	2022 (Estimate)
no. of inspections of nursing homes registered under the Hospitals, Nursing Homes and Maternity Homes Registration Ordinance† .....	190	—	—
no. of inspections of private healthcare facilities licensed under the Private Healthcare Facilities Ordinance⊕ .....	—	370	320
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).....	33 000	36 000	34 000

† Indicator removed as from 2021.

⊕ New indicator as from 2021. The new indicator replaces the indicators “no. of inspections of private hospitals (including maternity homes) registered under the Hospitals, Nursing Homes and Maternity Homes Registration Ordinance” and “no. of inspections of nursing homes registered under the Hospitals, Nursing Homes and Maternity Homes Registration Ordinance”. The Hospitals, Nursing Homes and Maternity Homes Registration Ordinance was replaced by the Private Healthcare Facilities Ordinance on 1 January 2021.

### *Matters Requiring Special Attention in 2022–23*

5 During 2022–23, the Department will continue to:

- undertake statutory enforcement work of the Private Healthcare Facilities Ordinance;
- enforce the law prohibiting commercial sale and supply of alcohol to minors;
- operate the Government Chinese Medicines Testing Institute at the temporary site to conduct research on reference standards and testing methods of Chinese medicines;
- enforce the Smoking (Public Health) Ordinance and the Fixed Penalty (Smoking Offences) Ordinance; and
- support the Food and Health Bureau on private hospital development.

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

	2020–21 (Actual)	2021–22 (Original)	2021–22 (Revised)	2022–23 (Estimate)
Financial provision (\$m)				
Government sector	8,365.9	16,822.8	14,775.5 (–12.2%)	19,766.3 (+33.8%)  (or +17.5% on 2021–22 Original)
Subvented sector	94.9	124.4	122.3 (–1.7%)	124.1 (+1.5%)  (or –0.2% on 2021–22 Original)
Total	8,460.8	16,947.2	14,897.8 (–12.1%)	19,890.4 (+33.5%)  (or +17.4% on 2021–22 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;

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- 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 other 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”.

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

### *Targets*

	Target	2020 (Actual)	2021 (Actual)	2022 (Plan)
achieving a high participation rate of new born babies of local mothers attending maternal and child health centres (%) .....	>90	95Δ	88	>90
contributing to achieving low infant mortality rate (IMR) and maternal mortality rate (MMR)				
IMR per 1 000 live births .....	<6.0	2.0Δ	1.8	<6.0
MMR per 100 000 live births .....	<6.0	0.0	5.2	<6.0
School Dental Care Service participation rate (%) .....	>90	96	94	>90
investigating reports of outbreaks of communicable diseases within 24 hours (%) .....	100	100	100	100
coverage rate of immunisation programme for school children (%) .....	>95	96Δ	95	>95
coverage rate of human papillomavirus vaccination programme for Primary 5 and 6 female students (%).....	70	85	82	70

Δ These figures have been updated after the finalisation of the 2021–22 Estimates.

### *Indicators*

	2020 (Actual)	2021 (Actual)	2022 (Estimate)
attendances at maternal and child health centres			
child health service.....	354 000	346 000	346 000
maternal health service.....	93 000	89 000	102 000
family planning service .....	12 000	6 000	12 000
cervical screening service .....	18 000	54 000	94 000
attendances at family planning clinics operated by Family Planning Association .....	106 000	121 000	115 000
school children participating in the Student Health Service			
primary school students .....	354 000	332 500	322 000
secondary school students .....	278 000	52 000	270 000
primary school children participating in the School Dental Care Service.....	359 500	336 700	326 300
no. of training activities on infection control .....	203	88	85
no. of attendances to training activities on infection control ...	11 100	10 200	8 400
doses of vaccines given to school children .....	125 000	255 000	229 000
attendances at social hygiene clinics.....	60 000	61 000	61 000
no. of enrolment in elderly health centres.....	19 000	38 000	38 000

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	2020 (Actual)	2021 (Actual)	2022 (Estimate)
no. of attendances for health assessment and medical consultation at elderly health centres.....	89 000	133 000	<b>133 000</b>
attendances at health education activities organised by elderly health centres and visiting health teams .....	160 000	277 000	<b>277 000</b>
no. of enrolment for woman health service.....	900	3 600	<b>13 400</b>
no. of attendances for woman health service .....	2 600	5 500	<b>23 700</b>
no. of laboratory tests relating to public health.....	6 536 000	7 293 000	<b>7 584 000</b>

### *Matters Requiring Special Attention in 2022–23*

**10** During 2022–23, the Department will:

- continue the work in prevention and control of Coronavirus Disease 2019 (COVID-19), including planning and implementation of COVID-19 vaccination;
- continue to promote and implement the Elderly Health Care Voucher Scheme;
- continue to support the Steering Committee on Prevention and Control of Viral Hepatitis and co-ordinate and monitor implementation of the Hong Kong Viral Hepatitis Action Plan 2020 – 2024;
- continue to implement “Towards 2025: Strategy and Action Plan to Prevent and Control Non-communicable Diseases in Hong Kong” and Hong Kong Cancer Strategy through enhanced health promotion and education activities and strengthened surveillance systems;
- continue to strengthen the Department’s information technology systems and infrastructure, Clinical Information Management System and data analytics in support of enhanced service delivery, disease prevention and control, and the Government’s Electronic Health Record Programme;
- continue to enhance the preparedness for public health emergencies;
- continue the work in combatting public health threats from antimicrobial resistance;
- continue to enhance the seasonal influenza vaccination arrangements for better protection of high risk groups; and
- continue to implement the free human papillomavirus vaccination programme for school girls.

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

	2020–21 (Actual)	2021–22 (Original)	2021–22 (Revised)	2022–23 (Estimate)
Financial provision (\$m)				
Government sector	340.4	409.1	383.7 (–6.2%)	<b>413.0</b> (+7.6%)  (or +1.0% on 2021–22 Original)
Subvented sector	95.7	94.6	95.1 (+0.5%)	<b>97.4</b> (+2.4%)  (or +3.0% on 2021–22 Original)
Total	436.1	503.7	478.8 (–4.9%)	<b>510.4</b> (+6.6%)  (or +1.3% on 2021–22 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.

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**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	2020 (Actual)	2021 (Actual)	2022 (Plan)
training of health promoters (annual total).....	>2 000	2 350	2 350	>2 000

### *Indicators*

	2020 (Actual)	2021 (Actual)	2022 (Estimate)
production of health education materials (annual no. of titles) .....	740	740	740
attendances at health education activities .....	843 000	885 000	886 000
AIDS counselling attendances .....	980	1 380	1 380
utilisation of the AIDS telephone enquiry service .....	13 300	13 900	13 900
no. of publicity/educational activities delivered by COSH.....	432	432	432
no. of secondary schools joining the Adolescent Health Programme.....	230	130	210

### *Matters Requiring Special Attention in 2022–23*

**15** During 2022–23, the Department will:

- continue to implement a mental health promotion and public education initiative;
- 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**

	2020–21 (Actual)	2021–22 (Original)	2021–22 (Revised)	2022–23 (Estimate)
Financial provision (\$m)				
Government sector	1,131.8	1,317.4	1,224.8 (–7.0%)	1,164.3 (–4.9%)  (or –11.6% on 2021–22 Original)
Subvented sector	6.4	25.9	25.9 (—)	23.2 (–10.4%)  (or –10.4% on 2021–22 Original)
Total	1,138.2	1,343.3	1,250.7 (–6.9%)	1,187.5 (–5.1%)  (or –11.6% on 2021–22 Original)

### *Aim*

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

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### **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	2020 (Actual)	2021 (Actual)	2022 (Plan)
coverage rate of TB vaccination (BCG) at birth (%).....	>99	>99	>99	>99
cure rate of TB patients under supervised treatment (%).....	>85	>85	>85	>85
appointment time for new cases with serious dermatoses within eight weeks (% of cases) .....	>90	100	100	>90

#### **Indicators**

	2020 (Actual)	2021 (Actual)	2022 (Estimate)
BCG vaccinations given to new born babies .....	42 700Δ	36 400	36 400
attendances at specialised outpatient clinics			
TB and Chest.....	428 000	525 800	525 800
Dermatology.....	172 000	180 000	180 000
HIV/AIDS .....	14 200	14 700	15 250
dental treatment cases			
hospital patients (attendances) .....	51 400	61 800	61 800
dental clinics emergency treatment (attendances) .....	27 000	30 200	30 200
special needs group (no. of patients).....	9 100	9 100	9 100

Δ The figure has been updated after the finalisation of the 2021–22 Estimates.

### **Matters Requiring Special Attention in 2022–23**

19 During 2022–23, 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**

	2020–21 (Actual)	2021–22 (Original)	2021–22 (Revised)	2022–23 (Estimate)
Financial provision (\$m)	156.9	173.6	140.7 (–19.0%)	169.6 (+20.5%)
				(or –2.3% on 2021–22 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;

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- assisting to arrange appropriate pre-school and school placements for training, remedial and special education where necessary; and
- providing interim support to these children and their parents through counselling, talks and support groups.

22 The key performance measures in respect of rehabilitation are:

### *Targets*

	Target	2020 (Actual)	2021 (Actual)	2022 (Plan)
appointment time for new cases in child assessment centres within three weeks (%) .....	>90	100	100	>90
completion time for assessment of new cases in child assessment centres within six months (%).....	>90	65	73	>70

### *Indicator*

	2020 (Actual)	2021 (Actual)	2022 (Estimate)
attendances at child assessment centres .....	27 300	35 400	35 400

### *Matters Requiring Special Attention in 2022–23*

23 During 2022–23, 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**

	2020–21 (Actual)	2021–22 (Original)	2021–22 (Revised)	2022–23 (Estimate)
Financial provision (\$m)				
Government sector	57.4	60.7	55.0 (–9.4%)	56.6 (+2.9%)  (or –6.8% on 2021–22 Original)
Subvented sector	139.7	142.0	134.9 (–5.0%)	137.8 (+2.1%)  (or –3.0% on 2021–22 Original)
Total	197.1	202.7	189.9 (–6.3%)	194.4 (+2.4%)  (or –4.1% on 2021–22 Original)

### *Aim*

24 The aim is to contribute to the 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.



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

### *Targets*

	Target	2020 (Actual)	2021 (Actual)	2022 (Plan)
average attendance rate of patients registered with methadone clinics (%) ....	>70	77	76	>70
completion rate of SARDA's inpatient treatment courses				
detoxification (%) .....	>70	88	86	>70
rehabilitation (%) .....	>60	89	91	>60

### *Indicators*

	2020 (Actual)	2021 (Actual)	2022 (Estimate)
patients registered with methadone clinics .....	5 300	4 900	4 900
average daily attendances at methadone clinics .....	4 100	3 700	3 700
patients admitted for residential treatment .....	520	740	920
bed-days occupied at residential treatment and rehabilitation centres .....	65 200	70 500	81 500

### *Matters Requiring Special Attention in 2022–23*

27 During 2022–23, the Department will continue to provide treatment services to drug abusers.

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

	2020–21 (Actual)	2021–22 (Original)	2021–22 (Revised)	2022–23 (Estimate)
Financial provision (\$m)	1,870.2	2,734.9	1,993.4 (–27.1%)	2,718.6 (+36.4%)
				(or –0.6% on 2021–22 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	2020 (Actual)	2021 (Actual)	2022 (Plan)
appointment time for new dental cases within six months (%) .....	>90	75	41	41
processing of applications for reimbursement of medical expenses within four weeks (%) .....	>90	99	99	>90

### *Indicators*

	2020 (Actual)	2021 (Actual)	2022 (Estimate)
attendances at non-public clinics .....	228 000	263 000	263 000
attendances at dental clinics .....	321 700	708 600	708 600

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### *Matters Requiring Special Attention in 2022–23*

**31** During 2022–23, the Department will continue to provide medical and dental services to civil servants and other eligible persons.

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

	2020–21 (Actual)	2021–22 (Original)	2021–22 (Revised)	<b>2022–23 (Estimate)</b>
Financial provision (\$m)	10.3	10.9	10.8 (–0.9%)	<b>10.9</b> (+0.9%)
				(or same as 2021–22 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*

	2020 (Actual)	2021 (Actual)	<b>2022 (Estimate)</b>
no. of civil servants working in the HA managed as at 1 April.....	791	643	<b>510</b>

### *Matters Requiring Special Attention in 2022–23*

**35** During 2022–23, 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

	2020–21 (Actual) (\$m)	2021–22 (Original) (\$m)	2021–22 (Revised) (\$m)	2022–23 (Estimate) (\$m)
<b>Programme</b>				
(1) Statutory Functions .....	1,209.0	1,579.3	1,455.9	<b>1,592.0</b>
(2) Disease Prevention .....	8,460.8	16,947.2	14,897.8	<b>19,890.4</b>
(3) Health Promotion .....	436.1	503.7	478.8	<b>510.4</b>
(4) Curative Care .....	1,138.2	1,343.3	1,250.7	<b>1,187.5</b>
(5) Rehabilitation .....	156.9	173.6	140.7	<b>169.6</b>
(6) Treatment of Drug Abusers .....	197.1	202.7	189.9	<b>194.4</b>
(7) Medical and Dental Treatment for Civil Servants .....	1,870.2	2,734.9	1,993.4	<b>2,718.6</b>
(8) Personnel Management of Civil Servants Working in Hospital Authority .....	10.3	10.9	10.8	<b>10.9</b>
	13,478.6	23,495.6	20,418.0 (–13.1%)	<b>26,273.8 (+28.7%)</b>
				<b>(or +11.8% on 2021–22 Original)</b>

#### Analysis of Financial and Staffing Provision

##### Programme (1)

Provision for 2022–23 is \$136.1 million (9.3%) higher than the revised estimate for 2021–22. This is mainly due to increased requirement for operating expenses and an increase of 12 posts in 2022–23 to meet operational needs.

##### Programme (2)

Provision for 2022–23 is \$4,992.6 million (33.5%) higher than the revised estimate for 2021–22. This is mainly due to increased requirement for procurement and administration of COVID-19 vaccines and additional provision for meeting the funding requirement for the Elderly Health Care Voucher Scheme, partly offset by a decrease of 25 posts in 2022–23.

##### Programme (3)

Provision for 2022–23 is \$31.6 million (6.6%) higher than the revised estimate for 2021–22. This is mainly due to increased requirement for operating expenses.

##### Programme (4)

Provision for 2022–23 is \$63.2 million (5.1%) lower than the revised estimate for 2021–22. This is mainly due to reduced provision for operating expenses.

##### Programme (5)

Provision for 2022–23 is \$28.9 million (20.5%) higher than the revised estimate for 2021–22. This is mainly due to increased requirement for operating expenses and increased cash flow requirement for procurement of equipment.

##### Programme (6)

Provision for 2022–23 is \$4.5 million (2.4%) higher than the revised estimate for 2021–22. This is mainly due to increased requirement for operating expenses and increased cash flow requirement for procurement of equipment.

##### Programme (7)

Provision for 2022–23 is \$725.2 million (36.4%) higher than the revised estimate for 2021–22. 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 and an increase of two posts in 2022–23 to meet operational needs.

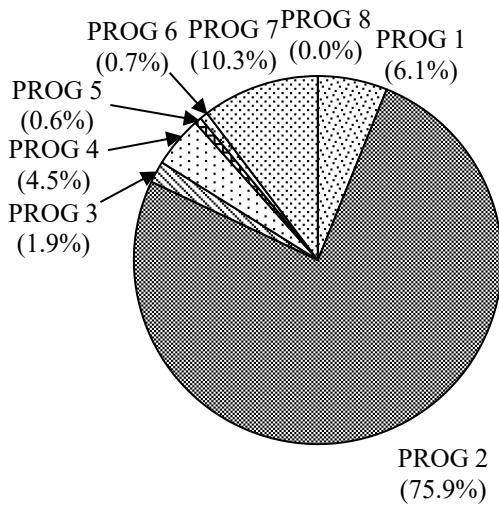
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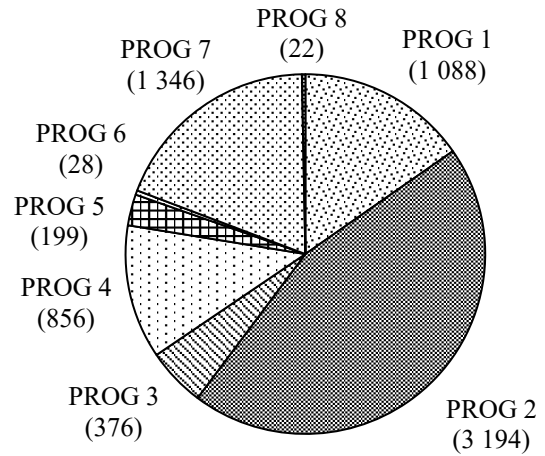
### Programme (8)

Provision for 2022–23 is \$0.1 million (0.9%) higher than the revised estimate for 2021–22. This is mainly due to increased requirement for operating expenses.

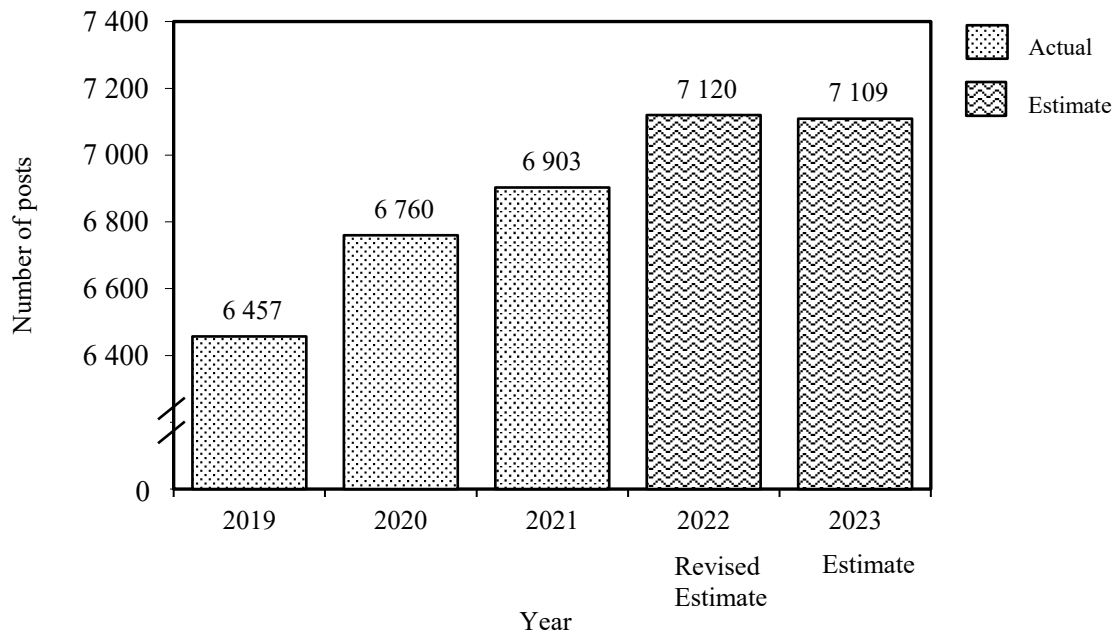
*Allocation of provision  
to programmes  
(2022-23)*



*Staff by programme  
(as at 31 March 2023)*



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



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Sub-head (Code)		Actual expenditure 2020–21	Approved estimate 2021–22	Revised estimate 2021–22	Estimate 2022–23
	\$'000	\$'000	\$'000	\$'000	\$'000
<b>Operating Account</b>					
Recurrent					
000	Operational expenses .....	11,538,725	16,783,386	15,845,104	<b>18,036,950</b>
003	Recoverable salaries and allowances (General)..... 386,000				
	Deduct reimbursements ..... <i>Cr. 386,000</i>	—	—	—	—
	Total, Recurrent.....	11,538,725	16,783,386	15,845,104	<b>18,036,950</b>
Non-Recurrent					
700	General non-recurrent .....	1,842,268	6,577,825	4,492,283	<b>8,138,049</b>
	Total, Non-Recurrent.....	1,842,268	6,577,825	4,492,283	<b>8,138,049</b>
	Total, Operating Account .....	13,380,993	23,361,211	20,337,387	<b>26,174,999</b>
<b>Capital Account</b>					
Plant, Equipment and Works					
661	Minor plant, vehicles and equipment (block vote).....	87,412	124,081	72,587	<b>90,728</b>
	Plant, vehicles and equipment.....	2,816	—	—	—
	Total, Plant, Equipment and Works.....	90,228	124,081	72,587	<b>90,728</b>
Subventions					
974	Subvented institutions - maintenance, repairs, and minor improvements (block vote) .....	2,240	7,295	3,622	<b>5,981</b>
975	Subvented institutions - minor plant, vehicles and equipment (block vote).....	5,144	2,967	4,421	<b>2,061</b>
	Total, Subventions .....	7,384	10,262	8,043	<b>8,042</b>
	Total, Capital Account.....	97,612	134,343	80,630	<b>98,770</b>
	Total Expenditure .....	13,478,605	23,495,554	20,418,017	<b>26,273,769</b>

## Head 37 — DEPARTMENT OF HEALTH

### Details of Expenditure by Subhead

The estimate of the amount required in 2022–23 for the salaries and expenses of the Department of Health is \$26,273,769,000. This represents an increase of \$5,855,752,000 over the revised estimate for 2021–22 and \$12,795,164,000 over the actual expenditure in 2020–21.

#### *Operating Account*

#### Recurrent

**2** Provision of \$18,036,950,000 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 \$2,191,846,000 (13.8%) over the revised estimate for 2021–22 is mainly due to the additional provision for meeting the funding requirement for the Elderly Health Care Voucher Scheme and the increased demand for payment and reimbursement of medical fees and hospital charges in respect of civil service eligible persons.

**3** The establishment as at 31 March 2022 will be 7 120 posts, including one supernumerary post. It is expected that there will be a net decrease of 11 posts in 2022–23. Subject to certain conditions, the controlling officer may under delegated power create or delete non-directorate posts during 2022–23, but the notional annual mid-point salary value of all such posts must not exceed \$3,952,349,000.

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

	2020–21 (Actual) (\$'000)	2021–22 (Original) (\$'000)	2021–22 (Revised) (\$'000)	2022–23 (Estimate) (\$'000)
Personal Emoluments				
- Salaries .....	3,901,056	4,324,508	3,901,974	4,180,988
- Allowances .....	52,032	84,449	82,350	46,418
- Job-related allowances.....	83,037	171,960	124,482	124,743
Personnel Related Expenses				
- Mandatory Provident Fund contribution .....	18,434	15,753	22,107	21,431
- Civil Service Provident Fund contribution .....	233,028	283,452	240,246	282,523
Departmental Expenses				
- Temporary staff .....	343,256	456,538	543,831	670,943
- Specialist supplies and equipment.....	909,101	1,163,498	908,706	1,091,831
- General departmental expenses .....	2,414,673	3,949,943	5,744,229	4,989,401
Other Charges				
- Contracting out of dental prostheses .....	6,219	14,000	9,000	8,840
- Payment and reimbursement of medical fees and hospital charges.....	905,687	1,665,900	1,024,000	1,665,900
- Supply, repair and renewal of prostheses and surgical appliances.....	5,085	5,500	5,600	5,445
- Health Care Voucher Scheme .....	2,150,685	4,047,687	2,674,600	4,375,837
- Vaccination reimbursements .....	187,167	223,613	193,822	198,231
Subventions				
- Subvented institutions .....	329,265	376,585	370,157	374,419
	11,538,725	16,783,386	15,845,104	18,036,950

**5** Gross provision of \$386 million under *Subhead 003 Recoverable salaries and allowances* is for salaries and allowances for civil servants working in the Hospital Authority (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 in HA under the subhead during 2022–23. 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

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### *Capital Account*

#### Plant, Equipment and Works

6 Provision of \$90,728,000 under *Subhead 661 Minor plant, vehicles and equipment (block vote)* represents an increase of \$18,141,000 (25.0%) over the revised estimate for 2021–22. This is mainly due to increase in requirement for scheduled replacement of minor plant and equipment.

#### Subventions

7 Provision of \$5,981,000 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 other minor repair and improvement works, costing over \$200,000 but not exceeding \$10 million for each project. The increase of \$2,359,000 (65.1%) over the revised estimate for 2021–22 is mainly due to increase in requirement for repair and renovation works.

8 Provision of \$2,061,000 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 decrease of \$2,360,000 (53.4%) against the revised estimate for 2021–22 is mainly due to the reduced 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 31.3.2021	Revised estimated expenditure for 2021–22	Balance
			\$'000	\$'000	\$'000	\$'000
<b><i>Operating Account</i></b>						
700		<i>General non-recurrent</i>				
	864	Procurement and Administration of Coronavirus Disease 2019 Vaccines¶.....	14,472,600¶	1,842,268	4,492,283	8,138,049
		Total .....	14,472,600	1,842,268	4,492,283	8,138,049

¶ The approved commitment for the item was \$8,441,300,000. An increase in commitment of \$6,031,300,000 is sought in the context of the Appropriation Bill 2022.