

Lifesaving services suspended at Lo So Shing Beach

Attention TV/radio announcers:

Please broadcast the following as soon as possible and repeat it at regular intervals:

The Leisure and Cultural Services Department announced today (May 15) that due to an insufficient number of lifeguards on duty, the lifesaving services at Lo So Shing Beach in Islands District is suspended until further notice.

First aid service will be maintained at the beach.

Result of the tenders of the People's Bank of China RMB Bills held on May 15, 2019

The following is issued on behalf of the Hong Kong Monetary Authority:

Result of the tenders of the People's Bank of China RMB Bills held on May 15, 2019

Tender Result

Tender Date : May 15, 2019

Bills available for Tender : Three-month RMB Bills

:
Issuer : The People's Bank of China

Issue Number : BCMKFP19018

Issue Date : May 17, 2019

Maturity Date : August 16, 2019 (or the
closest coupon payment date)

Application Amount : RMB 49,238 million

Issue Amount : RMB 10,000 million

Average accepted Coupon
Rate : 2.87 %

Highest accepted Coupon
Rate
(Bills' Coupon) : 3.00 %

Lowest accepted Coupon
Rate : 2.48 %

Allocation Ratio : Approximately 91.28 %

Tender Result

Tender Date : May 15, 2019

Bills available for Tender : One-year RMB Bills

:
Issuer : The People's Bank of China

Issue Number : BCMKFP19019

Issue Date : May 17, 2019

Maturity Date : May 17, 2020 (or the closest
coupon payment date)

Application Amount : RMB 51,675 million

Issue Amount : RMB 10,000 million

Average accepted Coupon
Rate : 2.96 %

Highest accepted Coupon
Rate

(Bills' Coupon) : 3.10 %

Lowest accepted Coupon
Rate

: 2.68 %

Allocation Ratio

: Approximately 8.19 %

LCQ5: Development of the Chinese medicine industry

Following is a question by Dr the Hon Elizabeth Quat and a written reply by the Secretary for Food and Health, Professor Sophia Chan, in the Legislative Council today (May 15):

Question:

To promote the development of the Chinese medicine (CM), the Government has allocated \$500 million to establish a dedicated Chinese Medicine Development Fund. One of the aims of the Fund is to assist local CM traders in the production and registration of Chinese proprietary medicines. The Government also plans to amend the definition of "proprietary Chinese medicine" in the Chinese Medicine Ordinance (Cap. 549). Regarding the development of the CM industry, will the Government inform this Council:

(1) whether it will amend Cap. 549 to require single CM granules that are supplied to CM practitioners for dispensing a prescription to undergo proprietary CM registration, so as to align the requirements for them with those for compound CM granules and other single CM granules that are sold publicly; if so, of the details; if not, the reasons for that;

(2) given that some CM practitioners have pointed out that as various CMs in a herbal formula, upon being boiled together, may produce new ingredients with therapeutic effects, single CM granules prescribed for the same formulae may not necessarily have the same therapeutic effects, whether the Government knows the reasons why the 18 Chinese Medicine Centres for Training and Research under the Hospital Authority have ceased to prescribe compound CM granules for patients since April 1 last year;

(3) given that the registration requirements of new CM involve prolonged and costly clinical trials and medicinal tests, and the Hong Kong market is of a small scale, whether the Government will consider discussing with the

Mainland authorities the setting up of a mutual recognition system of CM registration between the two places; if so, of the details; if not, the reasons for that; and

(4) whether it will consider conducting clinical medicinal tests in the CM hospital upon its commissioning in future, with a view to promoting the development of the CM industry in Hong Kong; if so, of the details; if not, the reasons for that?

Reply:

President,

My reply to the four parts of the question is as follows:

(1) Currently, products that fall within the definition of proprietary Chinese medicine (pCm) in the Chinese Medicine Ordinance (Cap. 549) (CMO) must be registered with the Chinese Medicines Board established under the Chinese Medicine Council of Hong Kong (CMCHK) before they can be imported, locally manufactured and sold. pCm means any proprietary product –

- (a) composed solely of the following as active ingredients:
 - (i) any Chinese herbal medicines (Chms); or
 - (ii) any materials of herbal, animal or mineral origin customarily used by the Chinese; or
 - (iii) any medicines and materials referred to in subparagraphs (i) and (ii) respectively;
- (b) formulated in a finished dose form; and
- (c) known or claimed to be used for the diagnosis, treatment, prevention or alleviation of any disease or any symptom of a disease in human beings, or for the regulation of the functional states of the human body.

In general, Chinese medicine (CM) granules must be registered with the Chinese Medicines Board before they can be imported, locally manufactured and sold. However, the CMO and its subsidiary legislation also exempt some pCms from registration, such as pCms compounded by CM practitioners (CMPs) for individual patients and pCms manufactured by local manufacturers entrusted by CMPs. CMPs must fulfill their professional responsibility to ensure the safety, quality and efficacy of the compound pCms concerned. On the other hand, single CM granules, when supplied to CMPs for dispensing a prescription to replace any medicinal decoction pieces, fall into the category of Chms specified in Schedule 1 or 2 of the CMO, and are subject to the licensing system for CM traders under the CMO.

The Department of Health (DH) has put in place a stringent regulatory system for Chms and pCms. All registered pCms and the Chms listed in the Schedules to the CMO are within the scope of the DH's market surveillance system. The DH conducts regular inspections on licensed CM traders, takes samples of registered pCms (including CM granules) and Chms from wholesalers and retailers for testing as well as investigations and tests proactively. Therefore, pCms that CMPs purchased from pCm wholesalers/manufacturers and

Chms that CMPs purchased from Chm wholesalers are regulated and monitored under the existing system.

To provide safe and efficacious CMs for patients, CMPs should source supply from reputable licensed Chms wholesalers, and should not purchase Chms of unknown composition or source. If a CMP has conducted himself in a way which has fallen short of the reasonable standards of conduct expected among his professional colleagues in the course of operating business, it may constitute a professional misconduct, and will be dealt with seriously by the CMPs Board and the Disciplinary Committee of CMPs established under the CMCHK.

(2) The Hospital Authority (HA) has established an open and transparent tendering mechanism to procure CM products that meet the statutory requirements and the relevant quality standards from the market for patients' use. The HA will accept tenders for CM products and consider their tender prices on the conditions that the tenderers concerned as well as their products meet the statutory, safety and quality requirements as stated in the invitation to tender.

In addition, CMPs are required to conform with the CM theories and clinical situations of the patients concerned in prescribing suitable CM products. At present, processed Chms and CM granules are available in the 18 CM Centres for Training and Research for CMPs to facilitate their provision of appropriate CM services for patients.

As far as the tendering of CM granules for prescription is concerned, both single CM granules and compound CM granules are among the tender items. The former is a mandatory supply item whereas the latter is optional. Regarding the contract mentioned in the question that has been effective since April 1, 2018, the tenderer selected by the HA under the above-mentioned tendering mechanism has met the requirements specified in the tender. Compound granular products that are not provided by the successful tenderer are optional supply items.

The HA will review tenders for CM products on a regular basis, and will make timely adjustments in response to the market development and clinical service needs.

(3) Hong Kong and the Mainland implement different registration systems for regulating CM products under their respective legal and statutory regulatory framework. Currently, there is no direct mutual recognition arrangement for product registration between the two places. To further promote and encourage CM development in Hong Kong, the Government will explore with the Mainland on how to facilitate the use of Hong Kong registered pCms in the Mainland. The Government will also encourage, fund and support research, registration and development of CM in Hong Kong through the \$500 million CM Development Fund.

(4) Leading and promoting scientific research and development of CM (including pCms) in Hong Kong is one of the main objectives of the future CM Hospital (CMH). The CMH will collaborate with the local universities

(including the three universities with Schools of CM) and also local or educational institutions in other places to promote and conduct evidence-based clinical scientific research (CM and Integrated Chinese-Western Medicine), in-depth studies on CM theories and research on the clinical application of pCms. Facilities including a clinical trial and research centre will be set up in the planned CMH for conducting clinical trials at different stages. Supported by clinical services as well as CM and scientific research talent of the CMH, the centre will serve as a development platform for research on new pCms and enhancing the treatment efficacy of registered pCms.

LCQ1: Manpower development of and professional recognition for information technology industry

Following is a question by the Hon Charles Mok and a written reply by the Secretary for Innovation and Technology, Mr Nicholas W Yang, in the Legislative Council today (May 15):

Question:

Some practitioners of the information technology (IT) industry (including the communications industry) have relayed that the ever-evolving technological development makes it necessary for them to pursue continuing education through multiple pathways in order to stay competitive. They hope that their professional status can enjoy a higher recognition and their advancement paths can be clearer. In 2015, the Task Force on Information and Communications Technology Professional Development and Recognition (the Task Force) established under the Digital 21 Strategy Advisory Committee published a report (the report), putting forward recommendations on the establishment of a unified framework for IT professional recognition (the unified framework). However, the Task Force opined that as members of the industry had not reached a consensus on the implementation details, it would be difficult to implement the unified framework right away. Regarding the manpower development of and the enhancement of practitioners' professional status in the IT industry, will the Government inform this Council:

(1) with regard to the five recommendations made by the Task Force in the report for facilitating various stakeholders in reaching a consensus on the establishment of the unified framework, of the work progress made by the Government in following up such recommendations;

(2) whether it will, in the light of the recommendations of the report, formulate afresh a long-term plan for the manpower development of the IT

industry, with a view to enhancing the recognition for and professional status of the practitioners; if so, of the details; if not, the reasons for that; and

(3) whether it will follow up the matters relating to the establishment of the unified framework, including:

(i) enhancing the proposed framework put forward by the Task Force by drawing reference from international practices and consulting afresh the practitioners in the industry in this regard; if so, of the work schedule (including the target time for completion of the relevant work);

(ii) exploring ways to introduce flexibility to the unified framework to dovetail with the changes in the market's demand for IT professional skills and to encompass novel modes of continuing education so as to ensure that the framework can keep abreast of the time; and

(iii) consulting the business sector afresh on the unified framework, and launching mitigation measures to assist small and medium enterprises in coping with the issue of increase in operating costs that might arise from the unified framework?

Reply:

President,

A consolidated reply to the three-part-question is set out below.

The Task Force on Information and Communications Technology (ICT) Professional Development and Recognition (Task Force) under the then Digital 21 Strategy Advisory Committee was set up by the Government in 2012 to conduct research on establishing a unified professional recognition framework for local ICT professionals (the Proposed Framework). In its report released in September 2015, the Task Force pointed out that as the industry and public had not reached a general consensus on the relevant issues of the Proposed Framework, including the credibility and transparency of the awarding body of the Proposed Framework, impact of the Proposed Framework on the operating costs of small and medium-sized enterprises, whether the introduction of the Proposed Framework would dampen innovation and creativity, and raise the entry barrier for pursuing a career in ICT, etc., it would be very difficult to implement the Proposed Framework. Nowadays, with the rapid development of ICT, the qualification requirements of ICT practitioners in the industry keep evolving with the emergence of new technologies. This adds to the difficulty in setting up a unified professional recognition framework. As such, the Government currently does not have any plan to further follow up on the establishment of a unified professional recognition framework nor to consult stakeholders again on this subject.

In the past few years, the Office of the Government Chief Information Officer (OGCIO) together with relevant government departments and organisations have implemented numerous measures to nurture ICT talent in the

industry with reference to recommendations of the report and the latest development of information technology (IT) and the Internet economy, details of which are elaborated below:

(a) setting up the "Student IT Corner" website to provide students and parents with IT-related information;

(b) setting up the "IT Career Role Models Platform" to provide students with information on IT positions and career prospects in different industries;

(c) organising the annual Hong Kong ICT Awards and establishing the award categories of Startup Award and Student Innovation Award to recognise local start-ups and outstanding ICT inventions and applications made by students;

(d) implementing the Enriched IT Programme in Secondary Schools to provide funding support for secondary schools to organise various types of IT activities to create more opportunities for students to learn about IT outside the school curriculum with an aim to fostering an IT learning atmosphere in schools and cultivating students' interest in IT;

(e) the OGCIO collaborates with the industry and professional bodies to organise conferences, thematic seminars and workshops to promote professional accreditation in information security and enhance IT practitioners' knowledge and skills in information security;

(f) the Cyberport organises the Digital Tech Internship Programme to subsidise and arrange local university students to take up internships in renowned overseas, Mainland and local enterprises or start-ups;

(g) the School of Professional and Continuing Education of The University of Hong Kong (HKU SPACE) launched in 2018 the first part-time Diploma in eSports Science programme at Level 3 under the Qualifications Framework. The Open University of Hong Kong and HKU SPACE will launch an e-sports-related Bachelor programme and a full-time Higher Diploma programme in September 2019 respectively;

(h) the Innovation and Technology Commission launched the Reindustrialisation and Technology Training Programme in August 2018 to subsidise local enterprises on a 2:1 matching basis for their staff to receive technology training covering different technology areas including IT; and

(i) planning to launch the IT Innovation Lab in Secondary Schools initiative to provide a maximum funding of \$1 million to each publicly-funded secondary school in Hong Kong in the three school years from 2019/20 to 2021/22 for procuring IT equipment and organising IT-related extra-curricular activities.

LCQ15: Carrying out alteration works for public rental housing flats

Following is a question by the Hon Andrew Wan and a written reply by the Secretary for Transport and Housing, Mr Frank Chan Fan, in the Legislative Council today (May 15):

Question:

It is learnt that at present, upon receipt of the recommendations from subvented social welfare organisations or healthcare workers (e.g. occupational therapists) of the Hospital Authority, the Housing Department (HD) will carry out alteration works for the facilities in the public rental housing (PRH) units in which the elderly and persons with disabilities reside, so as to facilitate their daily living. In addition, at a recent meeting of the Panel on Housing of this Council, HD officials indicated that upon receipt of the applications from elderly PRH tenants for installation of grab rails or alteration of shower facilities in the toilets of their units, HD would schedule a date for carrying out such works. In this connection, will the Government inform this Council:

- (1) of the current number of elderly PRH tenants awaiting HD to alter the facilities in their units (with a breakdown by PRH estate), and the estimated time, manpower and costs needed for completing the works;
- (2) of the average time taken by HD in the past three years from the receipt of the aforesaid recommendations to the completion of the works concerned, and the procedure involved;
- (3) of the number of applications for alteration of facilities in PRH units that were referred by the Total Maintenance Scheme personnel under HD in the past five years to healthcare workers or occupational therapists for assessment; and
- (4) whether HD will install, free of charge, facilities other than grab rails in the toilets in the units in which elderly PRH tenants reside only upon receipt of the recommendations from occupational therapists; if so, whether HD will relax this requirement by stipulating that as long as the tenant is a "singleton elderly person" or an "all elderly household", or a referral has been made by a social worker, HD will carry out such installation works on the tenant's request, so as to shorten the tenant's waiting time?

Reply:

President,

My consolidated reply to the Hon Andrew Wan's question is set out below:

With the rapidly increasing elderly population in Hong Kong, the Government's policy is to achieve "ageing in place as the core, institutional

care as back-up". The Government is of the view that, with adequate community care and support, many elderly persons with long-term care needs can still continue to age in their own place. To this end, the Government aims to strengthen community care services to enable elderly persons to stay in the community as far as possible so as to lessen their need for institutionalisation.

In view of the above objectives, the Hong Kong Housing Authority (HA) has put in place a set of established policies to provide home modification/adaptation works in public rental housing (PRH) units for elderly and disabled tenants, so as to afford them a suitable environment to carry out daily activities safely and independently. Elderly PRH tenants and other tenants in need (such as wheelchair users) may make relevant applications through their corresponding Estate Management Office (EMO). The duration of home modification/adaptation works depends on their complexity. In general, works can be completed within two to five weeks. HA has not maintained statistics on the home modification/adaptation works carried out in PRH units of elderly tenants.

HA currently installs grab rails in bathrooms and converts the bath tub into a shower area for elderly and disabled tenants free of charge. These works do not require referrals from medical officers, occupational therapists/physiotherapists or social workers. For other modification works, HA will decide whether it is necessary to consult medical officers or occupational therapists/physiotherapists subject to the actual need of a case. With tenants' consent, HA may also refer cases to the Social Welfare Department or medical social workers for professional advice before carrying out specific modification works. HA believes that such arrangement will better meet the tenants' needs. If there is a need for home modification/adaptation works arising from health conditions, tenants may submit applications to EMOs at any time.

Furthermore, under the Total Maintenance Scheme (TMS), HA proactively inspects the in-flat conditions and provides necessary repair services for PRH units aged 10 years or above. HA inspects units in buildings aged between 10 and 30 years every 10 years. For buildings aged over 30 years old, the frequency is increased to every five years. The objective of TMS is to provide preventive repair and maintenance services to tenants. In-flat Inspection Ambassadors and maintenance workers will arrange minor repairs on the spot upon inspection; and will arrange contractors to make appointments with the tenants to follow up on more complicated works.