

LCQ19: Issues relating to novel coronavirus epidemic

Following is a question by Dr the Hon Chiang Lai-wan and a written reply by the Secretary for Food and Health, Professor Sophia Chan, in the Legislative Council today (February 26):

Question:

In recent months, the novel coronavirus epidemic has continued to spread and it has been confirmed that the virus is capable of human-to-human transmission. Up to the present, tens of thousands of confirmed cases have been recorded on the Mainland, and the number of confirmed cases in Hong Kong has also been on the rise. On the issues relating to the epidemic, will the Government inform this Council:

- (1) of the latest measures to cope with the occurrence of community transmission in Hong Kong;
- (2) whether it knows the effective methods currently known for treating the infection of the virus; whether it has exchanged with the Mainland authorities the experience in treating the patients concerned; if so, of the details; if not, the reasons for that;
- (3) as recently a number of healthcare staff of the Hospital Authority (HA) have taken sick leave, gone on strike or resigned, of the new counter measures put in place by the authorities to ensure that there is sufficient manpower in hospitals to deal with the epidemic;
- (4) whether it knows the types and other details of those non-urgent services which HA has reduced in order to deal with the epidemic;
- (5) whether it will consider invoking section 3 of the Reserved Commodities Ordinance (Cap 296) to (i) specify face masks as a reserved commodity, as well as (ii) coordinate the procurement of face masks and control the storage, distribution and prices of such items, so as to avoid panic hoarding of face masks by members of the public which exacerbates the shortage of such items; whether it will provide face masks and antiseptic items for free to the grass-roots people in need; if so, of the details; if not, the reasons for that;
- (6) whether it will, by following the practice of the Macao Government, set up a dedicated webpage and require retailers to report, on a daily basis, on their real-time stock of face masks on the webpage, so as to facilitate the purchase by members of the public;
- (7) as the Government has appealed to those members of the public returning to Hong Kong from the Mainland to self-isolate for 14 days as far as possible

upon their return to Hong Kong, whether it will issue guidelines on whether employers may regard those employees who are absent from work due to self-isolation as having taken leave, or deduct the salaries of such employees; and

(8) given that the Occupational Safety and Health Ordinance (Cap 509) stipulates that employers must, so far as reasonably practicable, ensure the safety and health at work of the employees, whether it will require (i) employers to provide sufficient infection-protection supplies (e.g. face masks and antiseptic liquid) to employees at work, and (ii) cleansing service contractors to provide protective clothing for frontline workers; if not, of the reasons for that?

Reply:

President,

Since the outbreak of COVID-19, the Government has been closely monitoring the development of the epidemic situation. Guided by the three key principles of responding promptly, staying alert to the situation and working in an open and transparent manner, and having regard to experts' advice and opinions, we have responded comprehensively with decisive and appropriate measures. According to the Government's prevention and control strategies, we introduced a host of specific and practicable measures in the areas of health surveillance, compulsory quarantine, isolation treatment, health declaration, exit screening, reducing people flow between Hong Kong and the Mainland, enhancing "social distancing" and supporting frontline healthcare staff, etc.

In consultation with the Hospital Authority (HA), Commerce and Economic Development Bureau, Financial Services and the Treasury Bureau, Labour Department and Policy Innovation and Co-ordination Office, my reply to the various parts of the question raised by Dr the Hon Chiang Lai-wan is as follows:

(1) To prevent a large-scale community outbreak in Hong Kong, the Government has adopted a strategy of "containment" of the virus to achieve early identification, early isolation and early treatment of the infected.

First of all, since February 8, 2020, the Government has issued quarantine orders to all persons entering Hong Kong from the Mainland, including Hong Kong residents and visitors from other places. These persons are required to stay at home or other accommodation for a 14-day compulsory quarantine.

Furthermore, the Government will continue to strengthen "social distancing" measures, as well as personal hygiene and environmental hygiene measures so as to minimise the risk of the further spread of the novel coronavirus infection locally.

At the same time, for early detection of cases of novel coronavirus infection, the HA has implemented the "Enhanced Laboratory Surveillance

Programme" since mid-January 2020 to conduct tests for novel coronavirus infection on pneumonia patients meeting the relevant criteria, and has further expanded by phase to cover all in-patient pneumonia cases. With a view to further enhancing the surveillance, prevention and control strategy in Hong Kong, since February 19, 2020, the HA has expanded the "Enhanced Laboratory Surveillance Programme" to cover outpatients. Deep throat saliva specimen testing will be arranged for patients seeking medical attention at Accident and Emergency Departments and General Out-patient Clinics with fever and respiratory symptoms or mild pneumonia to help with the early detection of mild cases in the community and provide a better understanding of the epidemiological situation.

(2) At present, public hospitals mainly provide supportive treatment for patients diagnosed with the coronavirus infection, including oxygen therapy, intravenous fluid infusion, and empirical antibiotics for secondary bacterial infection. Extracorporeal Membrane Oxygenation life support machine will be used where necessary. The HA has a group of experts to conduct assessments according to the clinical conditions of diagnosed patients for providing suitable patients with combination antiviral therapy, such as protease inhibitor, interferon and ribavirin. The efficacy and the possible side effects of the medications are closely monitored. These drug treatments are formulated in accordance with the experts' understanding of the coronavirus infection. The experts will make reference to the latest research data and make adjustments as appropriate.

(3) With regards to the earlier industrial action, the Government and HA have been urging healthcare workers participating in the industrial action to return to work as soon as possible to avoid affecting public hospital services and patient treatment. The HA has also activated the Major Incident Control Centre to closely monitor the operation of public hospitals and to deploy manpower and adjust non-emergency services with regard to service needs, with a view to focusing resources on management of the epidemic and maintaining emergency medical services.

(4) In view of the latest development of the epidemic situation, the HA announced on February 15, 2020 to adjust non-emergency and non-essential medical services significantly in the four weeks starting from February 17, so as to focus manpower and resources on providing care for the most critical patients and responding to the epidemic. Specific measures include:

- (i) except for emergency and essential treatment, non-emergency services such as elective surgeries will be postponed;
- (ii) specialist outpatient clinics will contact patients with stable conditions to reschedule their appointments and arrange drug refills for them according to their conditions; and
- (iii) except for emergency and essential examinations, non-emergency examinations such as routine endoscopy will be rescheduled.

The HA expects that the service adjustments can substantially reduce the flow of people in hospitals and allow public hospitals to focus on providing emergency services and managing the epidemic. The HA will closely monitor the

manpower and service situation of public hospitals and make timely adjustments.

(5) and (6) For the supply of surgical masks, the Government has been adopting a multi-pronged approach to procure surgical masks globally through different channels and means. These include the Government Logistics Department procuring directly from suppliers and through referrals from the Hong Kong Economic and Trade Offices and from individual sources in order to secure the supply of masks and other protective items as soon as possible to meet the Government's operational needs. At the same time, the Government prioritises the distribution of surgical masks of the Government stock in accordance with the risk level. Priority is given to healthcare staff and personnel providing care services (including front-line healthcare staff, nursing staff in institutions, healthcare personnel in private clinics); and personnel who provide essential services and who are required to have contact with the public at work (such as those providing public transport, emergency services, immigration services). In addition to imports, the Government strives to explore prospects of local production. The Correctional Services Department (CSD) has also increased its production volume. The Government is maintaining close contact with members of local chambers of commerce and the retail industry and collaborating with the relevant Mainland Authorities to facilitate clearance so as to speed up the delivery of masks to the market.

Given experts' assessment that the virus may last for a period of time and that there are confirmed cases in various countries and regions, the demand for surgical masks has risen sharply, causing difficulties in procurement. As the supply of surgical masks is tight in the short run, the Government considers that it is more pragmatic to strive to increase supply of surgical masks and manage the demand. The Government currently does not have any plans to mandatorily control the supply and prices of surgical masks through legislation, because this could be counterproductive, rather than addressing the problem at source, i.e. inadequate supply.

In response to private organisations and groups' donation/plans of donation of masks and disinfection products to the Government and non-governmental organisations recently, the Labour and Welfare Bureau and Social Welfare Department will contact the relevant organisations in accordance to the wishes of the donors. The Government also encourages private and charitable organisations to donate surgical masks to the underprivileged, and stands ready to play a facilitation role with financial resources and coordination.

(7) Since February 8, 2020 0.00am, in accordance with the Compulsory Quarantine of Certain Persons Arriving at Hong Kong Regulation (Cap 599C), the Department of Health (DH) has required all persons entering Hong Kong from the Mainland, or from other places but have visited the Mainland over the past 14 days, including Hong Kong residents, Mainland residents and other visitors, to be subject to mandatory quarantine for 14 days upon their arrival. Any person concerned who leave accommodation without permission may commit a criminal offence. The Employment Ordinance (Cap 57) has no statutory requirement regarding leave or wage arrangements for employees who undergo

self-isolation. Nonetheless, the Government encourages employers to be considerate and show understanding to such employees' situation and make flexible arrangements.

(8) Under the Occupational Safety and Health Ordinance (Cap 509), employers must, so far as reasonably practicable, safeguard the occupational safety and health (OSH) of their employees at work. Therefore, each employer has the duty to conduct risk assessment of the work of his/her employees, and based on the result of the assessment, provide them with the necessary equipment to safeguard their OSH.

Cleansing service contracts are normally contracts that rely heavily on the deployment of non-skilled workers. For these service contracts, the four major procuring departments, namely the Food and Environmental Hygiene Department (FEHD), Leisure and Cultural Services Department, Government Property Agency and Housing Department (HD) (on behalf of the Housing Authority), normally require contractors to comply with the relevant laws of Hong Kong (including the requirements of the Occupational Safety and Health Ordinance) and specify in the service contracts that adequate and suitable personal protective equipment (PPE) should be provided to the workers. The four major procuring departments have also enhanced communication with their contractors, asking the latter to provide sufficient PPE such as masks to their workers. Departments will also provide relevant working guidelines to their contractors, with reference to the "Health Advice on Prevention of Severe Respiratory Disease associated with a Novel Infectious Agent in Workplace" issued by the Centre for Health Protection of the DH.

In general, equipment and masks required for the work of the cleansing workers should be provided by the contractors. Considering the difficulties of the contractors in sourcing these supplies for the protection of the cleansing workers delivering public services, the Government has decided to reserve the 700 000 additional masks produced by the CSD each month for free distribution to the cleansing workers employed by government service contractors. The FEHD and HD have started distributing masks to cleansing workers on February 17, 2020, with priority given to those who are responsible for cleaning public toilets, public markets, refuse collection points, streets and public housing estates.

Lowering the minimum eligible age for the HKMC Annuity Plan to 60

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

With regard to the enhancement measure of the Hong Kong Mortgage Corporation Limited (HKMC) Annuity Plan (Plan) announced by the Financial

Secretary in the Budget, the HKMC Annuity Limited (HKMCA), a wholly-owned subsidiary of the HKMC, announces today (February 26) the lowering of the minimum eligible age for the Plan from 65 to 60 with immediate effect. Interested parties can call the HKMCA's customer service hotline at 2512 5000 or visit the website (www.hkmca.hk) to arrange an appointment.

The Executive Director of the HKMCA, Mr Raymond Li, said, "The Plan has helped around 7 000 senior citizens turn approximately HK\$4.4 billion of their savings into a life-long stream of fixed and guaranteed income to support a hassle-free retirement. This enhancement will help more senior citizens' retirement planning through transforming their assets into a life-time income stream."

2020 Voter Registration Campaign Launched

The 2020 Voter Registration Campaign has been launched today (February 26). The campaign aims to remind registered electors to update their registration particulars with the Registration and Electoral Office (REO) in a timely manner and to encourage eligible persons to register as electors.

Change of registration particulars

The REO attaches great importance to the accuracy of the register of electors. If there are any changes in registration particulars of registered electors (individual or body electors), the electors concerned should, using the specified form, notify the REO on or before April 2 in accordance with the electoral law. Otherwise, the relevant changes in registration particulars will not be reflected in the final registers (i.e. final registers for geographical constituencies, functional constituencies and Election Committee subsectors) to be published in July this year.

Electors applying for a change of registered address are required to submit address proof at the same time to facilitate the REO in verifying the electors' address information. Electors who are registered tenants of public rental housing under the Housing Department or the Hong Kong Housing Society are exempted from the requirement of submitting address proof when they apply for change of registered addresses.

When applying for replacement of a Smart Identity Card, a registered elector may choose whether to give consent for the Immigration Department (ImmD) to transfer their personal particulars to the REO for verifying particulars on the registers of electors. As the verification and follow-up process takes time to complete, the REO recommends electors, when they give

consent for the ImmD to transfer their personal particulars to the REO, to submit the specified forms for the applications for change of particulars as well, so as not to miss the statutory deadline of April 2 for change of registration particulars.

After verifying the relevant information, if the REO finds that the principal residential addresses of electors are different from those recorded in the registers of electors, the department will issue letters to the electors to request them to provide address proof for verifying and completing the applications for change of registered address. The REO reminds registered electors who have received letters from the REO to read the letter as soon as possible and follow the letter's instruction to respond before the deadline.

Encouraging eligible persons to register

The REO encourages Hong Kong permanent residents who hold an identity document, have reached age 18, are ordinarily residing in Hong Kong and have yet to register as an elector, to submit new registration applications using the specified form by the statutory deadline of May 2 so that they can be included in the final registers to be published in July this year and be able to vote in election(s) (including the Legislative Council General Election to be held this year). When registering as an elector, the person will also become an elector in the District Council (Second) Functional Constituency, commonly known as the "Super District Council".

The REO calls on electors to provide their telephone numbers and email addresses to the REO when submitting their applications so that the REO can contact them more promptly and efficiently if necessary. By doing so they may also receive election mail from candidates via email.

The Announcements in the Public Interest of the Voter Registration Campaign will run on television, radio and the Internet from today. Promotional messages will also be displayed on popular websites, in mobile applications, at bus stops, in MTR stations and other means of public transport. Promotional items such as banners and posters will also be placed at the exterior of government buildings and in all districts to encourage eligible persons to register as electors.

Members of the public can check at any time their registration status and registration particulars by logging into the Online Voter Information Enquiry System (www.voterinfo.gov.hk) or calling the REO hotline (2891 1001).

Application forms for new registration and change of registration particulars can be obtained from the REO, the District Offices and the management offices of public housing estates. They can also be downloaded from the voter registration website (www.voterregistration.gov.hk). Completed forms can be submitted to the REO by post (13/F, Kowloonbay International Trade and Exhibition Centre, 1 Trademart Drive, Kowloon Bay), by fax (2891 1180), by email (form@reo.gov.hk) or via the REO e-Form Upload Platform (www.reo-form.gov.hk).

The REO urged members of the public to submit applications for change of registration particulars, and new registration as early as possible. For enquiries, please call the REO hotline at 2891 1001.

LCQ11: Issues relating to relaunching Tenants Purchase Scheme

Following is a question by Hon Wilson Or and a written reply by the Secretary for Transport and Housing, Mr Frank Chan Fan, in the Legislative Council today (February 26):

Question:

The Hong Kong Housing Authority (HA) implemented since 1998 the Tenants Purchase Scheme (TPS) for tenants of 39 selected public rental housing (PRH) estates to buy the flats in which they lived at discounted prices. Although TPS was terminated in August 2005, existing and new tenants of TPS estates may still buy the flats in which they live. According to the results of a questionnaire survey targeted at PRH tenants conducted by the Democratic Alliance for the Betterment and Progress of Hong Kong in July last year, 87 per cent of the respondents supported the relaunch of TPS. Among them, 76 per cent even indicated that they would buy the flats in which they lived should TPS be relaunched. On the other hand, the Chief Executive indicated in last year's Policy Address that the Government would propose that the HA make active preparations to accelerate the sale of about 42 000 flats that remain unsold in the 39 TPS estates, and would invite the HA to seriously look into the relaunch of TPS when there was more certainty on the overall public housing supply. In this connection, will the Government inform this Council:â€‹

(1) given that the list prices for TPS flats are set by reference to the adjusted replacement costs, of the details of the relevant calculation methods (including the various considerations and their relevant benchmarks);

(2) given that the existing unsold TPS flats are currently on average priced at about 20 per cent of their assessed market values, whether the HA, in relaunching TPS, will (i) draw reference from such list price (if so, of the criteria adopted and the justifications for that), and (ii) maintain the current arrangement of offering a special credit, i.e. existing tenants who purchase their flats within the first two years of launch of the TPS estates, or new tenants who purchase their flats within two years from commencement of their tenancies, may enjoy a full credit for the first year and a halved credit during the second year respectively; if so, of the details; if not, the reasons for that;

(3) of the following details of the studies on TPS which had been conducted by the Government when it announced the nine measures concerning housing polices (including the termination of TPS) in November 2002:

- (i) considerations for selecting estates for inclusion in TPS;
- (ii) the progress (including the anticipated completion date(s)) and results of the studies;
- (iii) whether the inclusion of the 30 estates listed in the table below in TPS falls within the scope of the studies; if so, of the progress (including the anticipated completion date(s)) and results of the studies; and

District	Name of estate	Year of intake	Progress and results of the studies
Eastern	Siu Sai Wan Estate	1990	
	Yiu Tung Estate	1994	
	Hing Tung Estate	1996	
Southern	Ma Hang Estate	1993	
Wong Tai Sin	Tsz Man Estate	1994	
	Choi Fai Estate	1995	
Kwun Tong	Lok Wah (North) Estate	1985	
	Tsui Ping (South) Estate	1989	
	Kwong Tin Estate	1992	
	Ko Yee Estate	1994	
Sham Shui Po	Lai On Estate	1993	
Shatin	Lee On Estate	1993	
	Chung On Estate	1996	
Sai Kung	Hau Tak Estate	1993	
	Ming Tak Estate	1996	
North	Wah Sum Estate	1995	
	Ka Fuk Estate	1995	
Yuen Long	Tin Yiu (I) Estate	1992	
	Tin Yiu (II) Estate	1993	
	Tin Shui (I) Estate	1993	
	Tin Shui (II) Estate	1993	

Kwai Tsing	Shek Lei (I) Estate	1985	
	Kwai Fong Estate	1987	
	Kwai Shing (East) Estate	1989	
	Cheung Hang Estate	1990	
	Shek Lei (II) Estate	1994	
	On Yam Estate	1994	
	Shek Yam (East) Estate	1996	
Islands	Ngan Wan Estate	1988	
	Kam Peng Estate	1996	

(iv) of the estates, other than the aforesaid estates, which fall within the scope of the studies;

(4) as the Chief Executive and the Secretary for Transport and Housing have respectively pointed out that consideration would be given to relaunching TPS when there is "more certainty" on the overall public housing supply and such supply "can largely meet the public's demand", whether the Government has set specific and quantifiable indicators in this regard; if so, of the details; if not, how it determines whether the overall public housing supply meets the aforesaid requirements; and

(5) as the results of a study conducted by a think tank have indicated that the relaunch of TPS will bring substantial benefits to society (e.g. encouraging employment and stabilizing family relationships, reducing the disadvantage of household splitting by PRH tenants arising from Well-off Tenants Policies which in turn leads to an additional demand for housing, and enabling existing PRH units to accommodate an additional population of 140 000), whether the Government has conducted studies on the benefits that the relaunch of TPS may bring to society; if so, of the results; if not, whether it will conduct such a study?

Reply:

President,

Our reply to Hon Wilson OR 's question is as follows:

(1) The Hong Kong Housing Authority (HA) launched the last phase of Tenants Purchase Scheme (TPS) estates in August 2005. Currently, tenants living in the 39 TPS estates may still opt for purchasing the rental flats in which they reside. Using the Adjusted Replacement Cost (ARC) approach, TPS flats are priced based on the current replacement cost, including building costs, project management cost, funding cost, and the land cost payment to the Government, with adjustment for age and location. At present, if sitting

tenants of TPS estates choose to purchase the flats in which they reside, the average list prices under the ARC approach range from around \$11,000 per square metre to \$22,000 per square metre, representing average discounts of around 82 per cent to 86 per cent of assessed market value.

(2), (4) and (5) The Chief Executive's 2019 Policy Address proposed that the HA make active preparations with a view to accelerating the sale of the around 42 000 unsold flats in the 39 TPS estates, so as to further address the home ownership aspirations of public rental housing (PRH) tenants. In this regard, we will soon consult the Subsidised Housing Committee of the HA to consider endorsing the freezing of recovered rental flats from TPS estates, with a view to putting up these flats for sale. We will also consider the sales arrangements of recovered flats, including buyers' eligibility criteria, pricing, and alienation restrictions, etc. In the long run, aside from putting up recovered TPS flats for sale, we also need to draw up other proposed measures to expedite the sale of the remaining TPS flats, including the rental flats the sitting tenants of which are unwilling to purchase.

As for re-launching TPS (i.e. to extend TPS estates beyond the existing 39 estates), as pointed out in the Chief Executive's 2019 Policy Address, re-launching TPS will reduce the number of PRH units available for allocation in the short term, which will inevitably lengthen the waiting time for PRH applicant families. Given the current acute PRH supply shortage, from the perspective of effective use of housing resources, it is difficult to re-launch TPS at the moment. Although we have not set any concrete indicators, when the overall public housing supply can largely meet the public's demand and after consulting the relevant stakeholders, we will explore the feasibility of re-launching TPS and the relevant arrangements, including the relevant pricing mechanism, where applicable, in due course. The Government will continue to work closely with stakeholders, striving to increase land supply and achieve the housing supply targets set in accordance with the Long Term Housing Strategy, and expediting the construction of public housing, so as to effectively address the long-term housing needs of low-income tenants.

As for the impacts of re-launching TPS on the society, it depends on a multitude of factors, including the then social conditions (e.g. household size), economic environment, and the supply and demand factors of domestic property market etc., which would be difficult to assess at the moment. The question suggests that the Well-off Tenants Policies (WTP) induces household splitting, which in turns increases housing demand. According to the prevailing policy on PRH housing splitting, the HA would only consider household splitting applications by PRH tenants under circumstances when there are serious conflicts among family members or other reasonable compassionate grounds. Furthermore, for the tenant household which applies for household splitting, both the main and splinter households must satisfy the income and asset limits for PRH application and must not possess any domestic property ownership in Hong Kong. Therefore, if a PRH tenant household is required to pay extra rent or vacate its unit under WTP, its household splitting application would not be approved.

(3) Due to the changes in the macroeconomic environment, in accordance with the Government's repositioned housing policies in 2002, the HA decided in the same year that no more TPS flats would be rolled out after the launch of TPS Phase 6, which had already been announced at the time. Hence, after the launch of TPS Phase 6B in August 2005, the HA has not rolled out more TPS estates.

According to the criteria for selecting estates for sale under TPS back then, the HA would consider the age, geographical distribution, maintenance condition, and the financial capability of the tenants of the estates, so as to select suitable estates to be put up for sale for each phase of TPS among various PRH estates.

LCQ18: Support for children with special needs

Following is a question by the Hon Leung Che-cheung and a written reply by the Secretary for Food and Health, Professor Sophia Chan, in the Legislative Council today (February 26):

Question:

At present, children under 12 years old suspected to be suffering from developmental disorder may, through referral by various channels (including the Maternal and Child Health Centres, the Hospital Authority, doctors in private practice and psychologists), receive clinical assessment service provided under the Child Assessment Service of the Department of Health, and be subsequently referred for receiving follow-up services (including specialist medical services, education and training). It has been reported that the waiting time for those two types of services has lengthened in recent years. In this connection, will the Government inform this Council:

(1) of the number of children waiting for the assessment service at the end of each of the past three years;

(2) of the number of children who were assessed in each of the past three years as suffering from developmental disorder, with a tabulated breakdown by the type of follow-up services to which they were referred; in respect of each type of the follow-up services, the current (i) average waiting time and (ii) average duration for using such services;

(3) of the new measures put in place to shorten the respective waiting time for (i) the assessment service and (ii) the follow-up services; and

(4) regarding the children from families with financial needs who urgently

need the assessment service or the follow-up services, whether the Government will consider distributing service vouchers to such children, through setting up a fund, for such children to obtain the relevant services provided by the private sector, so that they may receive the required services as early as possible; if not, of the reasons for that?

Reply:

President,

In consultation with the Education Bureau, the Labour and Welfare Bureau, the Department of Health (DH) and the Hospital Authority (HA), I provide a consolidated reply to the question raised by Hon Leung Che-cheung as follows:

(1) The Child Assessment Service (CAS) of DH, which has seven Child Assessment Centres (CAC) in Hong Kong, provides comprehensive assessments and diagnosis for children under 12 years of age who are suspected to have developmental problems. After assessment, follow-up plans will be formulated according to the individual needs of children. Children will be referred to other appropriate service providers for training and education support. While children await assessment and rehabilitation services, CAS will provide interim support to their parents to facilitate the development of the children.

The number of newly referred cases received by the CAS in 2017, 2018 and 2019 are 10 438, 10 466 and 9 799 (provisional figure) respectively. All new cases of the CAS were seen within three weeks after registration. Due to continuous increase in the demand for services provided by the CAS and the high turnover rate and difficulties in recruiting doctors to the CAS, CAS has adopted a triage system to ensure that children with urgent and more serious conditions are accorded with higher priority in assessment. As the assessment unit of the CAS comprises different professionals and the waiting time for their respective services is different, the actual waiting time depends on the complexity and conditions of individual cases. DH does not maintain the number of children waiting for the assessment service at the end of each year.

(2) and (3)

Assessment services

The number of newly diagnosed cases of developmental conditions in the CAS in the past three years are as follows:

Developmental conditions	Number of newly diagnosed cases		
	2017	2018	2019 (provisional figures)

Attention / Hyperactive Problems / Disorders	2 855	3 284	3 579
Autism Spectrum Disorder	1 716	1 861	1 891
Borderline Developmental Delay	2 371	2 637	2 926
Developmental Motor Coordination Problems / Disorders	2 124	2 338	2 367
Dyslexia / Mathematics Learning Disorder	507	534	510
Hearing Loss (Moderate to profound grade)	71	85	65
Language Delay / Disorders and Speech Problems	3 585	3 802	4 300
Physical Impairment (i.e. Cerebral Palsy)	40	48	42
Significant Developmental Delay / Intellectual Disability	1 311	1 566	1 493
Visual Impairment (Blind to Low Vision)	38	28	20

Note: A child might have been diagnosed with more than one developmental condition.

The number of cases referred by the CAS to pre-school and school placement for training, remedial and special education in 2017, 2018 and 2019 are 14 294, 17 359 and 18 011 (provisional figure) respectively. Breakdown figures by the type of follow-up services are not available.

Noting the increasing demands for the services provided by the CAS, DH has started preparing for the establishment of a new CAC with a view to strengthening the manpower support and enhancing service capacity to handle the rising number of referred cases. As an interim measure, a temporary CAC commenced operation in January 2018. Besides, the Government has newly created 22 civil service posts in the CAS from 2019-20 onwards. Save for some supporting staff, nurses and allied health professional staff have started to report for duty since mid/late 2019 to assist in handling the work relating to the CAS. DH anticipates that the capacity of the CAS would be gradually improved after the strengthening of manpower.

To further enhance the service, the CAS worked closely with Family Health Service (FHS) of the DH in streamlining the case referral arrangement. From 2018, the FHS has directly referred children with mild language delay to HA speech therapy clinic for therapy while the CAS will provide interim support to their parents, such as talks, workshops, training

programmes, etc.

Follow-up services

Specialist services

The specialist services of HA, including but not limited to psychiatric and paediatric services, comprise healthcare professionals in various disciplines and provide early identification, assessment and treatment services for children and adolescents in need. The multi-disciplinary professional team, involving doctors, clinical psychologists, nurses, speech therapists, occupational therapists and medical social workers, provides a range of appropriate treatment and follow-ups for children and adolescents, including in-patient service, specialist out-patient service, day rehabilitation training and community support services, according to their clinical conditions, with a view to enhancing their speech and communication, sociability, emotion management, problem solving, learning and life skills.

Similar to the CAS of DH, the Child Assessment Centre of the Duchess of Kent Children's Hospital (DKCAC) under HA also provides assessment to the children attending kindergartens on Hong Kong Island, which is the referral catchment area of DKCAC, to ascertain the level of their physical fitness, cognition skills, language ability, self-care abilities and behavioural development. Children with specific learning difficulties and behavioural problems will be referred to paediatric departments of HA for treatment and follow-ups. The multi-disciplinary professional team also provides parents and carers of the children in need with information on the respective developmental problems so as to enhance their understanding of the symptoms and treatment needs of their children. The professional team also maintains close communication with related organisations, such as early training centres and schools, to provide support according to the developmental needs of the children. HA does not maintain statistics on waiting time for follow-up services in respect of cases referred to HA due to developmental conditions.

Education related services

As regards education related follow-up services, schools should comply with the "intervention before assessment" strategy to provide students with appropriate service. With reference to the assessment information provided by the CAS and after understanding the students' performance in various aspects like learning, emotion and behaviour, schools will provide the students with school-based support such as quality teaching, additional group or individual training and counselling, curriculum and assessment accommodation, etc. Where appropriate, schools will refer the students in need to the school-based educational psychologists (SBEPs) or the school-based speech therapists (SBSTs) according to the school-based mechanism for further support. In general, students referred to the SBSTs by schools will receive assessment and follow-up services within one to two months. For SBEPs, about 80 per cent of the cases referred by schools were assessed within two months and about 10 per cent were within two to three months.

Some cases with a longer waiting time for assessment were due to special circumstances. For example, parents requested to defer the assessment or assessment had to be held up pending the students' medical treatment.

Pre-school rehabilitation services

In 2018-19, the average waiting time for respective types of subvented pre-school rehabilitation services is as follows:

Types of subvented pre-school rehabilitation services	Average waiting time (month)
Early Education and Training Centres (EETCs)	16.6
Integrated Programme in Kindergartens-cum-Child Care Centres	12.6
Special Child Care Centres (SCCCs)	18.4
On-site Pre-school Rehabilitation Services (OPRS)	Not applicable (Note)

Note: The average waiting time is computed on a financial-year basis (i.e. April 1 of a year to March 31 of the next year). As OPRS was regularised in October 2018, statistics for the 2018-19 full year are not available.

Generally, children concerned will be released from pre-school rehabilitation services prior to primary schooling. As different applicants have started waiting for and receiving services at different ages, the duration of receiving services varies from one case to another. The Social Welfare Department (SWD) has not maintained statistics on the duration of pre-school children receiving pre-school rehabilitation services.

The Chief Executive has announced in the 2019 Policy Address and Policy Address Supplement that the Government will provide over 1 200 additional service places in SCCC and EETCs in 2019-20 to 2021-22, and a total of 3 000 additional OPRS places in the 2020/21 to 2022/23 school years. To enable pre-school children with special needs to receive support as soon as possible, the Government will keep in view the demand and supply of various types of pre-school rehabilitation services and the manpower supply of professionals concerned, and provide additional service places as appropriate to shorten the waiting time.

(4) Eligible children waiting for subvented pre-school rehabilitation services may apply to SWD for training subsidy under the Training Subsidy Programme for Children on the Waiting List of Subvented Pre-school Rehabilitation Services for obtaining self-financed pre-school rehabilitation services provided by recognised service providers as early as possible.