

## LCQ3: Tackling the epidemic and related matters by the Hospital Authority

Following is a question by Dr the Hon Kwok Ka-ki and a reply by the Secretary for Food and Health, Professor Sophia Chan, in the Legislative Council today (May 20):

Question:

Since January this year, there have been successive confirmed cases of coronavirus disease 2019 (commonly known as "Wuhan pneumonia") imported into Hong Kong from the Mainland. In February, several thousand members of the healthcare personnel of the Hospital Authority (HA) went on strike for five consecutive days, demanding that the authorities impose a ban on the entry of all visitors into Hong Kong via the Mainland and adopt measures to reduce their risk of infection, including ensuring an adequate supply of face masks. Moreover, it has been reported that due to the tight supply of personal protective equipment (PPE), some healthcare personnel are requested to reuse their isolation gowns or temporarily keep their used face masks in paper bags for reuse. HA has also repeatedly lowered the requirements stipulated in the infection control guidelines on the protection specifications of PPE that should be used by healthcare personnel when conducting various medical procedures. Regarding HA's tackling of the epidemic and related matters, will the Government inform this Council:

(1) whether it has assessed if HA has contravened Article 27 of the Basic Law (which stipulates that Hong Kong residents shall have the right and freedom to strike, etc.) by issuing letters to the staff members who participated in the strike asking them to explain the reasons for their absence from duty; if it has assessed and the outcome is in the affirmative, how the Government will follow up the matter so as to protect such employees' rights under the Basic Law;

(2) whether it knows the ranks of the officers who made the decisions to repeatedly lower the requirements on the protection specifications of PPE and their justifications therefor; and

(3) whether it knows the quantities of the various types of PPE currently kept by HA and the numbers of days for which the stock can last; the details about HA's procurement of each type of PPE since the epidemic outbreak, including the method, quantity, place of origin and amount of expenditure; whether the Government has supplied to HA or assisted HA in the procurement of the relevant PPE; if so, of the details?

Reply:

President,

Since the outbreak of the novel coronavirus infection, the Government has been closely monitoring the development of the situation and responding comprehensively with decisive and appropriate measures. In accordance with the Government's prevention and control strategies, we have introduced specific measures in the areas of health surveillance, compulsory quarantine, isolation treatment, health declaration, exit screening, reducing cross-boundary flow of people, enhancing "social distancing" locally, supporting various types of frontline staff and provision of protective equipment for the community. We are very grateful for the unfailing contributions from healthcare and frontline staff and will continue to accord priority to meeting their needs for protective equipment, etc.

In consultation with the Hospital Authority (HA) and the Financial Services and the Treasury Bureau, my reply to the various parts of the question raised by Dr the Hon Kwok Ka-ki is as follows:

President, I would like to clarify that our reply is made in relation to coronavirus disease 2019 (COVID-19), not the disease in any other name.

(1) The Government and the HA always take the safeguarding of the health of the public and protection of Hong Kong's healthcare system as the top priority. In response to the industrial action from February 3 to 7, which affected public hospital services, the HA 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 dealing with the epidemic and maintaining emergency medical services. The Government and the HA also repeatedly urged healthcare staff participating in the industrial action to return to work as soon as possible to avoid affecting public hospital services and treatment of patients.

The HA noted that around 7 000 staff had not reported duty as scheduled on various dates during the above period. The HA will gather information from the staff concerned on their individual circumstances and consider the follow-up actions for each case in accordance with the HA's human resources policies and the Employment Ordinance (Cap. 57).

(2) The HA has been following international guidelines and expert advice in providing healthcare personnel with stringent infection control guidelines and training in order to safeguard them from infection at work.

The Central Committee on Infectious Diseases and Emergency Response (CCIDER) of the HA is responsible for providing strategic advice on the management of infectious diseases, infection control and outbreak contingency plans. It also convenes meetings in response to international and local situations of infectious diseases so as to coordinate the relevant contingency measures. Its membership comprises representatives from the Centre for Health Protection of the Department of Health, coordinating committees and central committees of relevant specialties and Head Office of

the HA, as well as the HA's experts on infection control and infectious diseases.

The HA has been closely monitoring the latest situation of the COVID-19 and making reference to international guidelines including those issued by the World Health Organization (WHO) and the Centers for Disease Control and Prevention of the United States. Since the HA had limited knowledge about the pathogen, characteristics and mode of transmission of the novel coronavirus infection at the onset of the outbreak, personal protection equipment (PPE) of higher specifications was used in order to prevent airborne transmission. However, as the outbreak developed, the international community has gained a better understanding of the virus and confirmed that the pathogen (SARS-CoV-2) is mainly transmitted through contacts and droplets. The CCIDER hence revised its recommendation on PPE for the HA after making reference to the latest international recommendations, clinical evidence in literature and local clinical experiences, and having regard to the global supply of PPE.

(3) As at May 15, the PPE stockpile of public hospitals includes approximately 27 million surgical masks, 3.6 million protection gowns, 5.7 million face shields and 2.3 million N95 respirators. At the current usage rate, the stockpile of various protective equipment is sufficient for use for around more than two months.

Following the swine flu pandemic in 2009, the HA reviewed its stockpile of protective equipment by making reference to the depletion of protective equipment during the pandemic period, as well as relevant information available from the WHO. The HA's stockpile of PPE has increased from 42 days to 90 days since then, with a view to building sufficient emergency stock. With the development of the COVID-19 outbreak, the HA has expedited the procurement of PPE in large quantities since January 2020 and increased the stockpiling target to six months. In addition, the HA proceeded with global procurement in late January through the flexible approach of direct purchase, with a view to procuring the appropriate protective equipment soonest possible. The Government Logistics Department has also shared information with the HA and provided it with facilitation to assist it in procuring the necessary equipment. With the Government's assistance, the protective equipment ordered earlier by the HA has arrived at Hong Kong gradually. The Government will continue to closely liaise with the HA and make the best effort to ensure that adequate protective equipment will be provided to healthcare staff for patient care.

Thank you, Mr President.