

LCQ3: Vaccination against Coronavirus Disease 2019

Following is a question by Dr the Hon Cheng Chung-tai and a reply by the Secretary for Food and Health, Professor Sophia Chan, in the Legislative Council today (August 25):

Question:

Recently, the Government has tightened the anti-epidemic requirements. With effect from September 1, all employees of the Government, the Hospital Authority (HA), residential care homes for the elderly and for persons with disabilities as well as kindergartens, primary and secondary schools are required to take virus tests outside working hours at their own expenses regularly if they have not been administered the Coronavirus Disease 2019 vaccines (the vaccines); all personnel who may come into contact with inbound travellers are subject to compulsory vaccination; and face-to-face classes may resume fully only if the vaccination rate among schoolchildren has reached 70 per cent. Some members of the public have criticised that such requirements are de facto forcing the relevant personnel to get vaccinated, that the vaccines' efficacy in preventing the infection of mutant strains is doubtful, and that it is difficult to obtain compensation in the event of post-vaccination adverse reactions. In this connection, will the Government inform this Council:

(1) as the Patients' Charter of HA provides that patients have the right to accept or refuse any medication, investigation or treatment, whether it has assessed if the aforesaid anti-epidemic requirements have violated the medical ethics that people's right to make their own decisions about their health should be respected;

(2) as some affected employees have indicated that they would rather quit their jobs than take the risk of getting vaccinated, and some parents are worried that their children's growth and health will be affected by vaccination, whether the Government had considered beforehand if such anti-epidemic requirements would aggravate the manpower shortage faced by the healthcare and elderly service sectors, as well as the impacts of such requirements on schoolchildren's development; and

(3) given that the relevant expert committee has so far not confirmed a single case where there is a causal relationship between vaccination and death and that, as at the 23rd of last month, the authorities granted compensation under the indemnity fund for vaccines for only six applications, whether the Government has assessed the impacts of such situations on public willingness to get vaccinated?

Reply:

President,

My consolidated reply to various parts of the question raised by Dr the Hon Cheng Chung-tai is as follows:

The COVID-19 pandemic has ravaged the world and has a huge impact on the healthcare system as well as people's daily lives in Hong Kong. With concerted efforts from the public and healthcare workers, Hong Kong has basically achieved the target of "zero local cases". However, with resurgence of cases and rapid spread of the more contagious Delta mutant strain around the world, we cannot afford to let down our guard.

Vaccination is the strongest and most effective measure to curb the epidemic. The vaccines administered in Hong Kong, namely Comirnaty and CoronaVac, are highly effective in preventing severe cases and deaths arising from COVID-19. People who are vaccinated are effectively protected from serious complications and even deaths after infection. As at August 24, over 3.98 million people, i.e. 59.1 per cent of the local population eligible for COVID-19 vaccination, have received their first dose of vaccine. Given the threat posed by the mutant strains, it is essential that we work together to further improve the vaccination rate.

The Government announced earlier that all civil servants and government employees, as well as all staff of the Hospital Authority (HA), residential care homes for the elderly (RCHE), residential care homes for persons with disabilities (RCHD), secondary schools, primary schools, nurseries, kindergartens and special schools, are required to be vaccinated. With effect from September 1, save for those who are unfit to receive COVID-19 vaccination because of medical conditions supported by a medical certificate, those who have not received their first dose of vaccine are required to undergo regular polymerase chain reaction-based nucleic acid tests at their own expense. In addition, the Government has also requested the Airport Authority and designated quarantine hotels to speed up vaccination arrangements for their staff, arrange vaccinated staff to work, and at the same time strengthen testing arrangements for vaccinated staff.

The aforesaid arrangements were made on public health grounds with the aim of protecting our healthcare system and building an anti-epidemic barrier for our society. People who are required to be vaccinated under the relevant arrangements are those whose job involves frequent contact with the public and physically vulnerable or susceptible persons, as well as those who have a higher chance of coming into contact with infected persons. To expedite vaccination of these frontline personnel who are engaged in the provision of essential social and livelihood services, thereby giving them better protection and preventing the spread of the virus in the community, we consider it necessary to implement the said arrangements. In fact, the vaccination rates of these groups of personnel have been on a steady rise since the launch of the vaccination programme. As at mid-August, the first dose vaccination rates among civil servants, HA doctors and RCHE/RCHD staff were over 88 per cent, 95 per cent and 70 per cent respectively. As at mid-July, the vaccination rate of school staff reached around 47 per cent, and if

we include those who had plans to get vaccinated, the rate is close to 70 per cent. In addition to encouraging vaccination among staff members, the HA has been providing COVID-19 vaccination for long-stay patients on a pilot basis starting from mid-June. The vaccination is voluntary and no vaccines will be administered to the patients unless they or their guardians have given consent. This arrangement does not violate the Patients' Charter. As for students, according to the data provided by the drug manufacturer, the protection for persons aged 12 to 15 is significant upon completion of two doses of the Comirnaty vaccine. The level of antibodies developed in them is higher than that in adults, with 100 per cent efficacy against the disease. In order to create a safe learning environment, I appeal to parents to arrange for their children to get vaccinated as soon as possible.

At the macro-level, we notice that when evaluating or adjusting the anti-epidemic policies, the international community has shifted its focus from infection control to vaccination progress. Some countries/economies such as the United States, the United Kingdom, France and certain European Union countries have even taken or are considering taking legislative action to mandate vaccination for personnel of certain high-risk groups or occupations, such as healthcare workers and staff of elderly care homes. In Hong Kong, the current administrative arrangements for vaccination of particular groups are relatively flexible. Individuals who choose not to receive vaccination for personal reasons still have an option to undertake regular testing at their own expense in lieu of vaccination.

Some members of the public have expressed doubts and concern about the vaccines. In this connection, I would like to provide the following figures for reference. As at August 15, the Department of Health received around 5 140 reports of adverse events (0.08 per cent of the total vaccine doses administered), with the vast majority of them being minor cases. Among the death cases concerning vaccinated persons, 33 involved vaccination within 14 days before the persons' death (0.0005 per cent of the total vaccine doses administered) and none of them was associated with the vaccination. Moreover, among those cases already reviewed by the Expert Committee on Clinical Events Assessment Following COVID-19 Immunisation (the Expert Committee), no unusual pattern has been identified so far. The Expert Committee will continue to closely monitor the relevant situation and collect data for assessment. Should there be any unexpected serious adverse events following immunisation with COVID-19 vaccines, the \$1 billion indemnity fund will provide a lump-sum payment as financial support to the affected individual on condition that there is certification by a registered medical practitioner of the event and the Expert Committee cannot rule out that the event is not associated with the administration of the vaccine. As regards promotion and education, we answer public enquiries about the vaccines through, for example, informative programmes and pre-vaccination consultation services so that members of the public would feel at ease about getting vaccinated.

Finally, I appeal to those who are not yet vaccinated, especially senior citizens, chronic patients and other immunocompromised persons who face a higher chance of death after COVID-19 infection, to get vaccinated as soon as possible for better self-protection before the next wave strikes Hong Kong.

Thank you, President.