

# Transcript of remarks by CE at media session (with photo/video)

Following is the transcript of remarks by the Chief Executive, Mrs Carrie Lam, at a media session this afternoon (January 27):

Reporter: Health minister Sophia Chan said this morning that she thinks we have the virus under control, but we have more than 30 untraceable cases and you just announced the extension of social distancing measures and the suspension of face-to-face classes be extended. So do we have the virus under control or not? Second question is, given the strain in resources, complaints about chaotic arrangements and even more cases being uncovered in different housing blocks, what kind of help will Hong Kong be asking the Mainland for? And thirdly, I understand the incubation period of Omicron is shorter, but are authorities shortening the 21-day hotel quarantine also because of the risk of cross-infections at those facilities, which led to the massive outbreak at Kwai Chung Estate? Thank you.

Chief Executive: Of the three questions, the first is I have not watched Professor Sophia Chan's interview. Every time people ask me about a comment made by one of my Principal Officials, I have to be very careful, because sometimes you have to look at the context: under what context that particular comment or description was used. But if you ask me, based on what I have just elaborated on, it's certainly not a situation that would give us the comfort or the assurance that it is under control. We are expecting that, any time, it could have an exponential increase in cases and it could give rise to a massive community outbreak because, as you have rightly pointed out, up till now we still have more than 30 unlinked cases and if each unlinked case represents a silent transmission chain, then it is very risky. And on top of that, our sewage surveillance also does not give us that level of comfort because we are still seeing positive signals from some of the stationary points and the mobile points that we have put in, in terms of the sewage sampling.

But I would suggest you not to put the blame on the Secretary for Food and Health. She is under extreme pressure and workload, and so that comment, if that had been a comment of "under control", I think she wanted to convey the level of confidence in the Government and also in society to combat this latest wave of COVID-19.

About the arrangements, I did confess on previous occasions that for an operation like this, whether in Kwai Chung Estate, where we are actually restricting residents for five days or seven days and supplying three meals a day and clearing up the municipal waste – there is a large amount of municipal waste – and arranging a daily test and answering the hotline, we are not doing the best, but we are improving. We want to improve and make life easier for residents of Kwai Chung Estate, especially those of the three blocks under the "restriction-testing declaration" to have less anxiety. But

as I said, in an operation of this scale and of this complexity, I wouldn't want to comment that my colleagues are deliberately not doing a good job. They have tried. If you have gone down to look at what they are doing, they have tried their very best. We have pooled in colleagues from various departments, so while the Housing Department is the commander, the Home Affairs Department is the major supplier of all these necessities, more than 10 departments are, at any point of time in Kwai Chung Estate, providing support and services to the residents there.

In terms of help from the Mainland, experience tells us that because of a different system and different practices, in fighting COVID-19, the assistance that we have received from the Mainland so far falls into these areas: one is supplying technicians to us so that we could strengthen or increase the testing capacity in the laboratories – we still have to train our own swabbers – they were working in the laboratories, over 500 of them on the previous occasion. Another type of assistance is to supply furniture and equipment. For example, when we first equipped AsiaWorld-Expo into a community curative centre, all the beds came from Shenzhen, because suddenly we had a large demand for all these hospital beds so the stock came from Shenzhen. The third is to build for us the Infection Control Centre under North Lantau Hospital, which now has over 800 isolation beds. These are the areas which experience tells us could be more easily arranged. Whereas, if you say, what about sending us some medical staff? What about sending us some staff to visit Kwai Chung Estate and to do the testing on the spot and meet with residents to provide counselling? That is perhaps far more difficult because of the different systems and the language and so on.

At the moment, I have already requested the Guangdong government to help us again on the testing capacity in the laboratories, based on what I have been told by a couple of testing contractors who have a bigger operation in Guangdong. They asked if we could talk to the Guangdong government and arrange for them to bring some of their capacity in Guangdong or in Shenzhen to Hong Kong to help. That is something that we have asked the Mainland to help.

The shortening of the hotel quarantine period from 21 days to 14 days plus seven-day self-monitoring is purely based on science, because Omicron's incubation period is relatively short. We have, based on this science, already shortened the quarantine period for close contacts of confirmed cases at Penny's Bay Quarantine Centre and other quarantine centres from 21 days to 14 days about a week ago. So there is no logic and no consistency if we still impose the 21 days of quarantine on arrivals. They're not even close contacts, they are arrivals from a country which may have more transmissions and so on. This is only to ensure consistency based on pure science. Thank you.

Reporter: Good evening. There are three questions. The first one is: can you give us a clearer picture on how widespread this "vaccine pass" initiative will be? Will un-jabbed people have enough time to get vaccinated before it's out in place? And second question is how would the Government address the concerns by family members of elderly people who live in residential homes?

Is there any worry that people may accuse the Government of forcing elderly people into getting jabs? Third question is do you think that reducing quarantine periods to 14 days will adequately address business concerns about the negative effects for three-week quarantine that has had on business activities? Thank you.

Chief Executive: Thank you for the three questions. First of all, the "vaccine pass" is to help encourage more people to be vaccinated because the effect of "vaccine pass" is if you have not been vaccinated, you will not be able to enter a lot of premises, or engage in a lot of activities. At the moment, the Cap. 599F covered about 15 categories of premises, like restaurants and gyms and beauty parlours and so on. We are planning to amend Cap. 599F to expand the ambit, so that more indoor premises will be included in the scheduled premises for us to impose this requirement. And beyond the statutory schedule, we can also do it for the government premises, so entry into the Tamar office, into LCSD (Leisure and Cultural Services Department) libraries will from a day onwards be subject to "vaccine pass".

You raised a very valid question, which is whether we will allow enough time for those to get vaccinated so that they could make themselves eligible for entering the premises; the answer is yes. That's why we have to calculate the days very clearly. I mentioned in early January the date of February 24 is to provide six weeks in advance for people to get the jab. In future, we will make sure that when we announce something new, there will be sufficient lead time for those who have not been vaccinated to get vaccinated. Just for argument's sake, we will probably, in time to come, expand this "vaccine pass" requirement from one dose, to two doses, and to three doses. Every time we will allow sufficient time for those who have not taken the second dose or the third dose to be able to take it. At least they have a chance; if the duration is too short, they don't even have a time, then that's not fair. Every time we will make sure that they have enough time to get vaccinated.

For the elderly homes, I hope we can all agree that elderly people are particularly vulnerable. The reason why vaccination makes good sense, especially with Omicron, is that Omicron is highly transmissible. But a lot of literature and experience elsewhere in Hong Kong proved that for somebody who is vaccinated, even if he or she gets infected, the illness will be very mild. That's why up till now, with over 600 confirmed cases in HA (Hospital Authority) hospitals, none are serious or critical. Every one of the 600-plus cases is stable. That's because a lot of them have been vaccinated. I would really make a strong urge and appeal that elderly people or their family members should encourage, accompany and bring their elderly, parents and grandparents to get vaccinated.

At the moment, in residential care homes, the vaccination rate is no good, even with our new scheme called the Assess and Vaccinate Programme. That is, we send in medical teams, the visiting medical officers (VMOs), to do the assessment and then vaccinate if the elderly agrees. The total rate is still 30 per cent. So 70 per cent of the 80 000 residents in the elderly homes and homes for the disabled have not been vaccinated. If a couple of these are infected, the consequences are very serious. So, we will be expanding this Assess and Vaccinate Programme to all the residential homes in

time to come.

And under it, if the elderly is able to make up his mind – he still has a clear mind to say yes or no – then we will ask the elderly after a medical officer has seen him, or her, and tell the elderly lady, "You are fit. You are fit to take the vaccine. No worry." And if she nods her head and wants to get vaccinated, then we will vaccinate. We don't need to go back to the family members, to ask them for permission and so on. But if the elderly person does not have a clear mind, for example, they are senile, then the family member or the guardian will be given an option whether he or she wants this elderly person to be vaccinated. That's how it works.

I have said that the way that we operate the Assess and Vaccinate Programme has produced very good results. For example, in the week that just ended on January 23, we have vaccinated 880 elderly people in homes, whereas half a year ago, for another seven-day week, we managed to do only 240. So a three to four times increase in the rate of vaccination by going for this Assess and Vaccinate Programme, which means that we will need to provide more resources because we need to pay the visiting medical doctors to do all the individual assessment and then the vaccination. But resource is not an issue now; the most important thing is to keep Hong Kong safe.

The final question is about the quarantine period. I have received first-hand information, I have read a lot of reports about the business community's strong reactions to the very stringent rules imposed by Hong Kong on arrivals. But on this occasion, the sort of revision from 21-day hotel quarantine to 14-day hotel quarantine plus seven-day self-monitoring is not because of pressure from anybody. It's just because of science. The science tells us that Omicron has a relatively short incubation period. I think the median duration of an Omicron infection is only four to five days. So 14-day quarantine will be good enough according to my experts. And we have already introduced this reduction of 21-day to 14-day in the Penny's Bay Quarantine Centre and other government quarantine facilities about a week or 10 days ago because of the science. It would look very illogical and inconsistent for us to continue to put arrivals on 21-day hotel quarantine. This is really a matter of consistency in application based entirely on science. But will this satisfy the business community? Definitely not. Because they want seven days or no day of quarantine, which some countries in Europe, fully opening their borders, are doing; but for Hong Kong, that is a very dangerous move because, I said many times, we do not possess the prerequisites for living with the virus. Because the vaccination rate is not good, especially amongst the elderly. I could not stand seeing a lot of old people dying in my hospitals. We will try our very best to raise the vaccination rate. If it reaches a target of 90 per cent, then that is the moment for us to consider some adaptation to our existing policies.

(Please also refer to the Chinese portion of the transcript.)

