



**Minutes of Hospital Authority Board Meeting  
held on Thursday 24 June 2021 at 3:50 p.m.  
in Conference Hall, 2/F, HA Building, 147B Argyle Street, Kowloon**

Present :

Mr Henry FAN Hung-ling, SBS, JP	(Chairman)
Mr Thomas CHAN Permanent Secretary for Food and Health (Health)	(via web conference)
Dr Constance CHAN Hon-yea, JP Director of Health	(via web conference)
Prof CHAN Wai-yea	
Ms Margaret CHENG Wai-ching	(via web conference)
Mr Duncan CHIU	(via web conference)
Mr Ambrose HO, SBS, JP	(via web conference)
Ms Mary HUEN Wai-yi	(via web conference)
Dr Tony KO Pat-sing Chief Executive	
Mr Daniel LAM Chun, SBS, JP	
Prof LAU Chak-sing, JP	(via web conference)
Mr Raistlin LAU Chun, JP Deputy Secretary for Financial Services and the Treasury (Treasury)1	(via web conference)
Prof Gabriel Matthew LEUNG, GBS, JP	(via web conference)
Dr LEUNG Wing-cheong	
Prof David SHUM Ho-keung	
Prof Agnes TIWARI Fung-yea	(via web conference)
Mr Philip TSAI Wing-chung, BBS, JP	(via web conference)

Ms Priscilla WONG Pui-sze, BBS, JP (via web conference)

Ir Billy WONG Wing-hoo, BBS, JP (via web conference)

Mr Jason YEUNG Chi-wai (via web conference)

Mr Charlie YIP Wing-tong

Miss Margaret CHEUNG (Secretary)  
Head of Corporate Services

Absent with :  
apology  
(\*Out of HK)

Prof Francis CHAN Ka-leung, SBS, JP

Mr David FONG Man-hung, BBS, JP

Mrs Ann KUNG YEUNG Yun-chi

Mr Franklin LAM Fan-keung, BBS

Ms Lisa LAU Man-man, BBS, MH, JP

Mr Ivan SZE Wing-hang, BBS, JP

Dr Thomas TSANG Ho-fai

In attendance :

Ms Anita CHAN  
Director (Finance)

Dr Beatrice CHENG  
Cluster Chief Executive (New Territories  
East)

Dr N T CHEUNG  
Head of Information Technology and  
Health Informatics

Dr K L CHUNG  
Director (Quality and Safety)

Dr Jenny LAM (via web conference)  
Representing Cluster Chief Executive  
(Kowloon Central)

Dr C B LAW (via web conference)  
Cluster Chief Executive (Kowloon West)

Dr Libby LEE  
Director (Strategy and Planning)

Dr Theresa LI  
Cluster Chief Executive (Hong Kong West) *(via web conference)*

Dr C C LUK  
Cluster Chief Executive (Hong Kong East)

Mr David MAK  
Head of Human Resources

Dr Simon TANG  
Cluster Chief Executive (New Territories West) *(via web conference)*

Dr K T TOM  
Cluster Chief Executive (Kowloon East) *(via web conference)*

Dr Deacons YEUNG  
Director (Cluster Services)

Mr Frankie YIP  
Chief Manager (Corporate Communication)

Mr Daniel LO  
Chief Manager (Allied Health)  
[For discussion of HAB Paper No. 311]

Ms Fion LEE  
Chief Manager (Patient Relations and Engagement)  
[For discussion of HAB Paper No. 312]

Dr Maria TANG  
Chief of Service, Department of Medicine & Geriatrics, Shatin Hospital  
[For discussion of HAB Paper No. 314]

Mr Andy LAU  
Chief Manager (Boards & General)

Ms Phoebe LEUNG  
Senior Manager (Boards & Support)

Ms Josephine CHAN  
Manager (Boards & Support)

In attendance : Ms Melinda CHOI  
(Attachees of the Senior Radiographer, Department of Imaging and Interventional  
Corporate Radiology, Prince of Wales Hospital  
Exposure Programme)

Ms M Y LEE  
Department Operations Manager, Cardiac Medicine/  
Department of Ophthalmology/ Palliative Medicine, Grantham  
Hospital

Ms Carol LU  
Senior Finance Manager, Cluster Finance, Kowloon Central  
Cluster

Mr Rico SHUM  
System Manager, Business and Administrative Systems Team 6,  
Information Technology and Health Informatics Division, Head  
Office

Ms Fiona TANG  
Department Manager, Physiotherapy Department, Kwai Chung  
Hospital

Ms Peggy TANG  
Senior Radiographer, Radiology Department, Pamela Youde  
Nethersole Eastern Hospital

**Declaration of Interest**

The Chairman invited Members to declare conflict of interest, if any, arising from the agenda items of, or discussion at, the meeting. There was no declaration from Members.

**Confirmation of Minutes**

2. The draft minutes of the Board Meeting held on 25 March 2021 were confirmed without amendments.

**Matters Arising**

3. There was no outstanding item arising from the minutes of the last meeting.

**Report on Outcomes of the Administrative & Operational Meeting**

4. The Chairman reported that the following matters were discussed or noted by the Hospital Authority (HA) Board at the Administrative & Operational Meeting held on 24 June 2021 :

- i. Membership of The Princess Margaret Hospital Charitable Foundation;
- ii. Proposed Cessation of Staff Allowances and Extra Day Off on COVID-19 and Proposal of a New Special Allowance;
- iii. 2021/22 Annual Pay Adjustment of the Hospital Authority;
- iv. 2020/21 Audited Accounts of the Community Care Fund Medical Assistance Programmes;
- v. Update on COVID-19;
- vi. Progress Update on Hospital Authority Staff Survey;
- vii. Report on Key Performance Indicators;
- viii. Progress Reports of Committees of the Hospital Authority Board; and
- ix. Senior Executive Appointments.

**Annual Report on the Operation of the Community Care Fund  
Medical Assistance Programmes  
(HA Board Paper No. 311)**

---

5. Mr Daniel LO recapped that HA was the implementing agency of the three Community Care Fund (CCF) Medical Assistance Programmes under the supervision of the Food and Health Bureau (FHB), namely CCF Medical Assistance Programme - First Phase Programme; Subsidy for Eligible Patients to Purchase Ultra-expensive Drugs (Including Those for Treating Uncommon Disorders) (UED Programme); and Subsidy for Eligible Patients of HA to Purchase Specified Implantable Medical Devices for Interventional Procedures (MD Programme). In regard to the annual report on the operation of the CCF Medical Assistance Programmes in 2020/21, the number of approved applications for the First Phase Programme, UED Programme and MD Programme in 2020/21 were 2 869, 31 and 118 respectively, and the total subsidy granted were \$642.59 million, \$77.21 million and \$29.07 million respectively. The average amount of subsidy granted per application for the three Programmes were \$223,977, \$2,490,519 and \$246,374 respectively. With the support of the HA CCF Administration Committee, changes in the coverage of the three Programmes in 2020/21 were approved by relevant authorities of CCF, including, amongst others, 10 new drugs for the First Phase Programme and one new drug for the UED Programme. With these changes, the First Phase Programme and the UED Programme covered 33 self-financed cancer drugs and four ultra-expensive drugs respectively as at 31 March 2021, while the MD Programme covered six implantable medical devices.

6. As reported to the Board in June 2020, the Government and HA introduced enhancement measures on the means test mechanism for the three CCF Medical Assistance Programmes in early 2019, i.e. 50% asset protection for drug subsidy applications and redefinition of “household” adopted in financial assessment. From analysing the drug application statistics before and after the enhancement, the results were positive, showing (a) increase in number of approved applications; (b) increase in approved subsidy amount; (c) decrease in patient contribution; and (d) increase in percentage of approved applications with household size of one to two persons. Further refinements on the means test mechanism for drug subsidy were implemented in late April 2021, with a view to easing the financial burden of patients requiring long-term medication. The measures included (a) modifying the calculation of the annual disposable financial resources (ADFR) for recurrent applications; (b) including more allowable deduction items in the calculation of ADFR and adjusting the calculation of income, e.g. by factoring out double pay, bonus, etc. for all applications; and (c) extending the validity period of the financial assessment of recurrent applicants.

7. The Board was also informed that various audits/checks were conducted according to the prevailing mechanism for quality assurance, including (a) clinical audit for ensuring doctor's referrals for CCF assistance were in compliance with the prevailing clinical guidelines; (b) financial assessment audit for ensuring the financial assessment of CCF applications by Medical Social Services Units followed the established guidelines, and (c) post-approval check for detecting and deterring potential fraud and abuse.

**Annual Report on Public Appreciation, Feedback and Complaints Management 2020/21**  
**(HA Board Paper No. 312)**

---

8. Ms Fion LEE briefed Members on the Annual Report on Public Appreciation, Feedback and Complaints Management 2020/21 for the period from 1 April 2020 to 31 March 2021. During the reporting period, a total of 1 524 complaints, 14 697 feedbacks and 39 887 appreciations were received by HA and its hospitals/clinics.

9. Members also noted the progress of the Patient Experience Surveys (PES) projects and follow-up actions undertaken in HA in 2020/21. Besides, HA had adopted a three-pronged approach to build a sustainable complaint management service in HA, viz. building a cluster-based Patient Relations Office structure; developing a competence-based training and development programme; and providing a structured career pathway with grade management. To better support analysis of complaints data and management reporting of performance, further enhancements were planned for the Complaints and Feedback Management System, which was an electronic platform for reporting and managing public complaints and feedback by clusters/hospitals. The work of the Public Complaints Committee during the past year was also reported.

**Progress Report on Strategic Priorities**  
**(HA Board Paper No. 313)**

---

10. Dr Tony KO updated Members on the implementation progress of HA's strategic priorities for the first quarter of 2021 (1Q21). Of the 106 corresponding programme targets for the 19 strategies in 2020-21, 345 individual programmes were planned for completion in 1Q21 (inclusive of 45 deferred from previous quarters), of which 248 programmes were achieved on schedule. Some 29 programmes were partially achieved as they had in principle fulfilled the original intent and/or achieved the major targets, including some service and training programmes impacted by the COVID-19 pandemic. The remaining 68 programmes were deferred, mainly due to the COVID-19 pandemic, manpower availability, etc.

**Cluster Presentation Programme – Restorative Rehabilitation Services on Weekends and Public Holidays for Stroke Patients in Extended Care Setting in the New Territories East Cluster (HA Board Paper No. 314)**

---

11. Dr Maria TANG briefed Members on the restorative rehabilitation services on weekends and public holidays for stroke patients in extended care setting in the New Territories East Cluster (NTEC). In NTEC, a new service model was introduced to provide 365-day rehabilitation services to stroke patients in extended care hospitals, with the service first launched in Shatin Hospital on 1 October 2017 and further rolled out to Tai Po Hospital a year later. Rehabilitation services were significantly enhanced with the provision of uninterrupted, year-round physiotherapy and occupational therapies under the new service model. Assessment by physiotherapists and occupational therapists for newly admitted stroke patients; rehabilitation training for stroke inpatients; and carer training were provided seven days a week. Between 1 October 2017 and 31 March 2021, a total of 1 530 stroke patients received the 365-day physiotherapy and occupational therapy services in extended care hospitals in NTEC. With the timely and uninterrupted rehabilitation services provided, significant improvements in mobility and self-care were observed in over one third of the patients at the time when they were discharged.

12. Members were informed that further value-added services were provided to stroke patients. With the inter-disciplinary collaborative efforts of the stroke rehabilitation team of NTEC, regular talks on Saturdays for stroke patients and carers were arranged to enrich their knowledge on stroke rehabilitation. Medico-social collaborations with community partners offered programmes for stroke patients on Saturdays, such as singing programme and patient sharing session. Dr Maria TANG also highlighted the tele-care provided for stroke rehabilitation during the COVID-19 pandemic. These included supporting stroke patients throughout their care journey through telephone calls, real-time audio-video calls, text messages and video clips; allied health professionals prescribing multimedia rehabilitation programmes through videos and games in the HA Go app for stroke patients to systematically exercise at home or in the community; facilitating virtual visits for stroke inpatients to stay connected with their loved ones under the suspension of visiting arrangements; and pioneering an innovative tele-rehabilitation model for stroke patients discharged from extended care hospitals.

13. NTEC would continue to strive to provide the best seamless rehabilitative care for stroke patients, from hospitals to the community, via the 365-day service model and tele-rehabilitation. Members were pleased to note that very positive feedbacks and



**Action by**

appreciations were received from the patients and their family members on the team's dedication and commitment to patient-centred care. The Chairman thanked the team for their dedicated efforts.

**Vote of Thanks**

14. The Chairman thanked Mr Charlie YIP, who would retire from the HA Board on 1 August 2021, for his tremendous contributions to the HA Board in the past six years.

15. The Chairman also expressed a sincere vote of thanks to Dr C C LUK, Cluster Chief Executive (Hong Kong East), for his invaluable contributions to public healthcare services in Hong Kong in the past 30 years. Dr Luk would start his pre-retirement leave on 1 July 2021 before retirement from HA on 1 November 2021.

**Date of Next Meeting**

16. The next Open Board Meeting was scheduled for Thursday 23 September 2021 at 4:00 p.m. in the Conference Hall, HA Building.

17. There being no other business, the meeting was adjourned at 4:45 pm.

Hospital Authority  
HAB\MINUTES\84  
MC/AL/PL/JC/wm  
30 July 2021