

For information

SARS Expert Committee

Setting up of An Organisation for Disease Control in Hong Kong

Purpose

On 5 May 2003, the Chief Executive announced that the Government has begun to study establishing a Centre for Disease Control & Prevention (CDC) – like organisation in Hong Kong to fight and prevent infectious diseases. The Hong Kong Jockey Club (HKJC) Charity Fund has in principle pledged \$500 million to support the Government's effort to establish this organisation and to support medical research, training of the professional staff as well as the civic education area. This paper seeks Members' advice on a number of strategic issues relating to the setting up of this Organisation for Disease Control in Hong Kong (The ODC).

Overview

2. The existing disease control mechanism has so far been effective in containing the spread of the common infectious diseases including tuberculosis, influenza and cholera. However, as an international city and the hub of international traffic, Hong Kong is at a high risk of being affected by emerging infectious diseases like SARS.

3. The ODC will be a new public health infrastructure for consolidating existing diseases control strategies and addressing new challenges. It will not only have the professional knowledge and competence in combating infectious diseases, but also the administrative skills and statutory power to co-ordinate various government departments and the community in taking appropriate measures to prevent and control diseases and in combating outbreaks. The scale of the ODC will reflect the magnitude of risk faced by Hong Kong as an international city, and will be organised in the context of the structure of the Hong Kong Special Administrative Region Government.

A Proposed Framework

4. In the design process, we made reference to the CDCs of a number of foreign countries, including the CDC of the USA and the National Public Health Institute of Finland. We consider that the Finnish model particularly relevant, in view of a similar population size, economic development level and education standard.

5. We suggest the major functions of the ODC should be-
- To conduct comprehensive public health surveillance on infectious diseases;
 - To establish evidence and develop strategies on the effective control of infectious diseases;
 - To establish partnership with the health care professions, community, academics, Government departments, national and international authorities in the control of infectious diseases;
 - To develop and review contingency plans and to respond effectively to outbreaks, emerging and re-emerging infectious diseases;
 - To develop, support, implement and evaluate programmes on the prevention and control of infectious diseases;
 - To develop research agenda and support applied research on the prevention and control of infectious diseases;
 - To build capacity and develop professional expertise on infectious diseases; and
 - To act as the Government's advisor on infectious diseases.

Initially the ODC should focus on communicable diseases. However, in the long run, it should also cover other non-communicable diseases including cancer.

6. We suggest that **the Organisation for disease control in Hong Kong should be set up within the Government**. This is a natural choice as many core functions of a CDC, e.g., collecting sensitive data from patients or their family members/close contacts for medical surveillance purpose, liaising with other governments and participating in international forums, as well as requiring health care institutions to comply with its directives, could not be performed effectively by non-government entities.

7. Initially, we propose that the initial setup of the ODC should include the following four functional branches, each of them responsible for a

specific area in infectious disease prevention and control (an organisation chart of the future ODC is at Annex A)-

- (a) Public Health Laboratories;
- (b) Surveillance & Epidemiology Branch;
- (c) Prevention & Control Programme Branch; and
- (d) Applied Research & Development Branch.

In addition, the ODC should also set up a number of Advisory Committees which will serve as dedicated forums of knowledge exchange and allow the ODC to seek professional advice from local and overseas leading experts. The major functions proposed for these four branches are summarised in Annex B.

8. In addition to having the ODC, the successful control of infectious disease outbreaks could not be achieved without the co-ordinated input from other government departments. Making reference to our recent experience with SARS, we propose that a **multi-disciplinary “Emergency Response & Communication Unit” (ERCU) should be set up within the Health, Welfare & Food Bureau (HWFB)** to co-ordinate and steer emergency actions across relevant Government bureaux, departments and agents¹. The ERCU is not activated during non-outbreak times, but once a major outbreak occurs, the ERCU should be set up within a minimal time period with co-opted members from HWFB, ODC and other relevant government bureaux, departments and agents. In other words, members of the ERCU are not full time staff but are only called when an outbreak occurs.

Interfaces of the ODC...

... with other functions of the Department of Health (DH)

9. The future ODC will be a part and parcel component within the Government, and it will work closely with other DH functions to achieve this objective. The public health services under the DH, for example, will support provide disease control activities and contribute valuable surveillance data to the ODC, and the Central Health Education Unit will provide support on ODC’s publicity campaigns.

¹ During the recent SARS outbreak, HWFB had set up a similar “Inter-departmental Action Co-ordination Committee on SARS” under the chairmanship of the Permanent Secretary for Health, Welfare & Food. This Committee, which composed representatives of over 26 policy bureaux and departments, had played a significant and effective role in co-ordinating, formulating and implementing emergency actions across the Government to control the disease.

... with the Health Care and Hospital Sector

10. Our experience in combating SARS revealed that there is an urgency to improve the mechanism for preventing and controlling nosocomial infections. The ODC will work closely with HA and the private sector to improve their alertness and preparedness against infectious diseases, and to ensure that a common standard and the best practices in infection control will be adopted by the hospitals and other health care institutions (both public and private). However, day-to-day infection control measures would continue to rest with the management of the hospital/institution as part and parcel of their operational responsibilities.

11. The ODC will also liaise with the local medical profession, the Hong Kong Academy of Medicine, as well as other corresponding organisations overseas and in the Mainland responsible for disease control and prevention, to organise professional development activities in disease control. The staff of the ODC could be attached in outposts in hospitals and other institutions to ensure cross-institution sharing of expertise and in executing diseases surveillance and control functions. Reciprocal cross-posting arrangements could also be considered for professional staff in other services to work in the ODC.

12. The recent SARS outbreak has fully demonstrated the importance of information technology in health surveillance, case investigation and contact-tracing. The ODC will assist in the development of a new central mechanism linking all stakeholders to strengthen vigilance in surveillance, efficient reporting, and management of infectious disease outbreaks. While combining the strength of the existing information infrastructure, it should also bridge any gap that could obstruct the smooth transmission of critical surveillance data from the health care institutions to the public health authority.

... with the academia

13 The ODC will interact actively with the academia. Collaborative projects would be developed and implemented. The ODC will focus on applied research (i.e., downstream research rather than upstream studies) such as studying the ways to improve vaccination coverage for a communicable disease in a defined population, or developing new or better laboratory tests for rapid diagnoses.

... with the overseas authorities

14. The ODC will form global partnership with the World Health Organisation and its collaborating centres and laboratories, overseas CDCs, academics, as well as epidemiology and surveillance networks. The ODC will also liaise with the Mainland authorities to explore the feasibility of setting up an infectious disease database and information platform within the Pearl River Delta Region, as well as to participate in regional forums like the APEC and ASEAN.

... with the local community

15. The ODC will become a one-stop communication desk for the community to know more about infectious diseases. It will set up a Community Resource Centre to enhance the awareness and understanding of the general public on infectious diseases. Dedicated website and other communication channels will be set up, and public education campaigns on infectious disease prevention will also be conducted. Community leaders would be invited to serve on relevant forums to capture the views of the public in important issues.

Financial Implications

16. While the ODC will be funded by redeployment of existing Government recurrent resources as far as possible, we will make use of the \$500 million grant from the HKJC for the set up cost of the new Organisation, which will include meeting the expenditure for development of information technology, setting up and maintenance of publicity and communication initiatives, professional development programmes, and special projects initiated by the ODC on the prevention and control of infectious diseases.

17. Our local universities, through their highly competent and diligent research teams, had made invaluable contribution to our successful control of SARS. We will continue to foster close partnership with our local universities in the prevention and control of infectious diseases. Where relevant, applied research projects will be commissioned by the ODC using the block grant from the HKJC. In addition, the HWFB has set up a \$450 million fund as a competitive research grant to support research studies on infectious diseases. These studies will be subject to a two-tier peer review mechanism, and only those with high scientific merits will receive funding. It is anticipated that the projects approved under this fund, in particular the more advanced and upstream ones, will help to advance the work of the ODC.

Implementation Timeframe

18. Subject to Members' advice, we will conduct further examination on the corresponding organisations overseas, including the CDC in the US and the Health Protection Agency in the UK before finalising our proposal. Subject to incorporation of further views, we propose to set up a Provisional ODC by the end of 2003. This Provisional ODC will be a preparatory body responsible for a number of tasks which must be done for the ODC to operate at its full capacity. These tasks include review of existing legislation, assessment of human and financial resources, training and recruitment of experts for the ODC, and establishment of collaborative arrangements with the health care sector, academics and overseas authorities. We expect these tasks will take about 12 months before completion, hence the formal inauguration of the new Organisation should be by the end of 2004. During the transitional period, the Government would combat any infectious disease outbreak and maintain prevention and control programmes with the existing mechanism under the HWFB and DH.

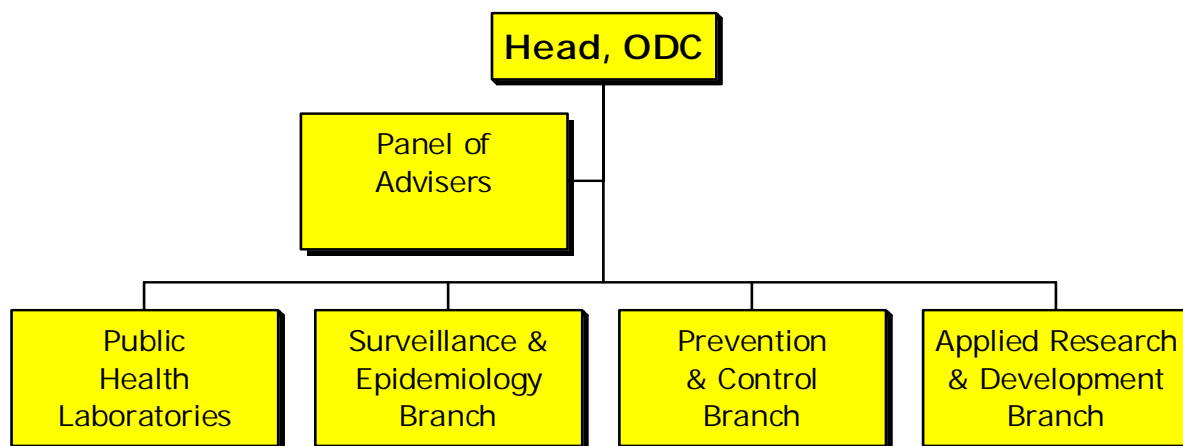
19. A Panel of Advisers will be set up under the HWFB to steer and monitor the preparatory work of the Provisional ODC. We will invite leading international and local experts, in particular those who have WHO/CDC experience, to participate in this Panel. After the inauguration of the new Organisation, this Panel of Advisers could continue to serve as a committed forum for the ODC to seek professional advice.

Advice Sought

20. Members' advice is sought on the followings-
- whether the proposed functions of the ODC stated in paragraph 5 of this paper should be adopted;
 - whether the proposed set up of the ODC and the ERCU as recommended in paragraphs 6 and 8 be adopted;
 - whether the proposed interface between ODC and other sectors, as outlined from paragraphs 9 to 15, should be adopted; and
 - whether the proposed implementation timeframe as recommended in paragraphs 18 and 19 should be adopted.

Health, Welfare & Food Bureau
August 2003

Proposed Organisational Structure for the ODC



**Proposed Major Functions for
the Four Functional Branches of the Organisation for Disease Control in
Hong Kong (ODC)**

<p>Public Health Laboratories</p> <ul style="list-style-type: none"> ➤ Provide pathology service for disease surveillance and control ➤ Develop infection control standards and work closely with the health care sector (both public and private) to monitor the standards ➤ Conduct and promote applied laboratory research on disease prevention and control ➤ Provide laboratory support to outbreak investigations 	<p>Surveillance & Epidemiology Branch</p> <ul style="list-style-type: none"> ➤ Develops and maintains an effective Public Health Surveillance System with the application of appropriate state-of-art information technology ➤ Networks and communicates with overseas authorities on infectious disease epidemiology ➤ Gathers first-hand infectious disease intelligence from strategic partners to facilitate early warning of disease outbreak ➤ Undertakes epidemiological assessment and disseminates reports to relevant people and institutions ➤ Coordinates emergency response
<p>Prevention & Control Branch</p> <ul style="list-style-type: none"> ➤ Coordinates programmes on disease prevention and control (e.g., HIV/AIDS/STD programmes, as well as public education campaigns) ➤ Develops contingency plans and operational protocols to enhance damage control and enhance preparedness. ➤ Operates resource centres relating to infectious diseases, e.g., the ODC Community Resource Centre and the Red Ribbon Centre. 	<p>Applied Research & Development Branch</p> <ul style="list-style-type: none"> ➤ Coordinates applied research within the ODC and in collaboration with other institutions ➤ Manages the ODC Research Fund and coordinates other funding for infectious disease research ➤ Facilitates training programmes in infectious disease prevention and control for the local health care professionals. ➤ Organises scientific forums for enhancing communications among professionals