

**For information  
on 18 February 2020**

**Prevention and Control of  
Novel Coronavirus Infection in Hong Kong**

**PURPOSE**

Further to the submissions to the Legislative Council (“LegCo”) Panel on Health Services on 10 and 30 January 2020<sup>1</sup>, this paper offers a comprehensive update on Government’s response and measures adopted to prevent and control the spread of novel coronavirus infection in Hong Kong.

**LATEST SITUATION**

**(a) Global and Mainland situation**

2. On 30 January 2020, the World Health Organization (“WHO”) declared that the outbreak of the novel coronavirus infection constituted a Public Health Emergency of International Concern. As at 18 February 2020 (9 a.m.), 29 countries/areas in the world (including the Hong Kong Special Administrative Region) have reported more than 72 869 confirmed cases of novel coronavirus infection, including 1 872 death cases.

3. As at 17 February 2020, the number of confirmed cases in the Mainland reached 72 436 (11 741 serious conditions; 1 868 deaths), with that in Hubei Province alone hitting 59 989. For Guangdong Province, the number of confirmed cases reached 1 328 with a combined number of 853 confirmed cases from Shenzhen, Guangzhou and Zhuhai. A breakdown of the caseloads is at **Annex 3**.

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<sup>1</sup> The two information papers submitted to the LegCo Panel on Health Services for discussion on 10 January (LC Paper No. CB(2)468/19-20(05)) and of 30 January (LC Paper No. CB(2)575/19-20(01)) are at **Annex 1** and **Annex 2** respectively.

## **(b) Local situation**

4. As at 17 February 2020 (6 p.m.), Hong Kong has 60 confirmed cases, including one fatal case and two discharged patients. Among them, by place of residence, 53 are Hong Kong residents and seven are residents of the Mainland. Based on epidemiological classification, 15 of them are imported cases and their close contacts, 45 are local cases with unknown source, possibly local cases and their close contacts.

## **STRATEGIES AND PRINCIPLES**

### **(a) Speed, rigour and transparency, building on science and expert advice**

5. The fight against the novel coronavirus has been extremely challenging. The Department of Health (“DH”) received the first notification from the National Health Commission (“NHC”) on 31 December 2019 about a cluster of 27 pneumonia cases with unknown causes (with seven cases being serious). Having consulted the experts, Secretary for Food and Health (“SFH”) met the media and alerted the community to stay vigilant that very evening. DH and the Hospital Authority (“HA”) launched immediately a surveillance system to trace cases of individuals with travelling history to the wet market in Wuhan in the past 14 days. On 4 January 2020, SFH promulgated the Preparedness and Response Plan for Novel Infectious Disease of Public Health Significance (“the Plan”) and concurrently activated the Serious Response Level under the Plan. The first Steering Committee meeting in accordance with the Serious Response level under the plan was held on 6 January 2020, alerting all relevant bureaux and departments in their concerted departmental actions. An inter-departmental response mechanism was instituted.

6. On 7 January 2020, the Chief Executive (“CE”) advised that we should adhere to three principles in meeting this public health challenge – **speed, rigour and transparency**. We would also rely on science and the advice of world-renowned experts in developing our response. The Food and Health Bureau rolled out major prevention and control

strategies including enhancing surveillance, strengthening port health measures, executing measures under the Plan, increasing isolation and testing capacity, and enhancing risk communication both to health care professionals and to the general public.

7. By way of amendment to the Prevention and Control of Disease Ordinance (Cap. 599) (the “Ordinance”) published in the gazette on 8 January 2020, we named “Severe Respiratory Disease associated with a Novel Infectious Agent” as a statutorily notifiable infectious disease. This was necessary to oblige relevant parties – clinics included, to report cases to the Centre for Health Protection (“CHP”) to facilitate surveillance.

8. A delegation led by Under Secretary for Food and Health with two experts from DH and HA was invited by the NHC and the Hong Kong and Macao Affairs Office of the State Council to visit Wuhan on 13 to 14 January 2020. At about the same time upon the return of the delegation, NHC released the genome sequencing of the novel infectious agent, confirming that it was a new strain of coronavirus. The WHO subsequently named the disease as novel coronavirus infection-2019, abbreviated as COVID-19.

9. In view of the increasing number of confirmed cases in Hong Kong, CE elevated Hong Kong’s response level under the Plan from “Serious” to “Emergency” on 25 January 2020. Apart from personally chairing the Steering Committee cum Command Centre to oversee concerted efforts in fighting the disease, CE set up an expert advisory panel, comprising four world-renowned experts with rich experience in public health, epidemiology and clinical aspects to provide professional advice to her and the Government in a direct and timely manner. They are Professor Gabriel Leung, Dean of Li Ka Shing Faculty of Medicine of the University of Hong Kong; Professor Keiji Fukuda, Director and Clinical Professor of the School of Public Health of the University of Hong Kong and former Assistant Director General of the WHO; Professor Yuen Kwok-yung, Chair of Infectious Diseases, Department of Microbiology, Li Ka Shing Faculty of Medicine of the University of Hong Kong; and Professor David Hui Shu-cheong, Stanley Ho Professor of Respiratory Medicine and Director of Stanley Ho Centre for Emerging

Infectious Diseases.

**(b) Containment**

10. In the light of the rapidly-changing infection situation in the Mainland and experts' advice, we have adopted a strategy of “**containment**” with specific measures to achieve **early identification, early isolation** and **early treatment** of the infected as well as measures to significantly reduce population mobility and in-population social contacts. This dovetails with our experience of the 2003 Severe Acute Respiratory Syndrome outbreak which showed that effective measures to control the spread of the infection include early detection of cases and swift control measures such as isolation, quarantine and disinfection were key to preventing outbreaks in Hong Kong.

**KEY MEASURES**

11. All government bureaux and departments, HA, as well as relevant parties, have stepped up their efforts on all fronts in preventing and controlling novel coronavirus infection. An overview of our key measures is set out below. A chronology of major events and measures is at **Annex 4**.

**(a) Strengthening port health measures**

12. As an on-going measure, the Government has imposed body temperature checks for all incoming travellers at all boundary control points. To strengthen surveillance and contact tracing, health declaration arrangement has been implemented at the Hong Kong International Airport (for Wuhan flights and subsequently all China flights) and selected land-based boundary control points since 21 and 24 January 2020 respectively. Since 1 February 2020, the Hong Kong International Airport has implemented body temperature checks for both departing and transit passengers.

**(b) Reducing passenger traffic between the Mainland and Hong Kong**

13. The Government has been actively strengthening immigration control to prevent the spreading of the disease. The series of measures, as detailed below, are designed to reduce the flow of people between the Mainland and Hong Kong having regard to the seriousness of the COVID-19 infection. The measures also allow relevant departments to focus resources on control points which remain in service through redeployment, thereby strengthening the health checks of travellers. Specific initiatives include –

- (i) **Entry restriction for Hubei and related travels:** except for Hong Kong residents, all residents of Hubei Province and persons who have visited the Hubei Province in the past 14 days have, since 27 January 2020, been restricted from entering Hong Kong until further notice;
- (ii) **Flight cuts:** flights to and from Wuhan of the Hubei Province have been indefinitely suspended since 24 January 2020. As at 16 February, the number of flights arriving from the Mainland has dropped nearly 90%;
- (iii) **Rail service cuts:** the services of the Hong Kong section of the Guangzhou-Shenzhen-Hong Kong Express Rail Link and the Intercity Through Train have been suspended since 30 January 2020, and the services of Lo Wu and Lok Ma Chau Spur Line since 4 February 2020;
- (iv) **Cuts in land-based cross-boundary transport:** on land-based cross-boundary transport, following the suspension of passenger immigration service at the passenger clearance hall and car lanes of relevant boundary control points (“BCPs”), cross-boundary transport services (except cross-boundary goods vehicles) using Sha Tau Kok and Man Kam To BCP, as well as the Lok Ma Chau BCP have been suspended since 30 January and 4 February 2020 respectively;
- (v) **Cuts in cross-boundary ferry services:** services at China

Ferry Terminal and Tuen Mun Ferry Terminal have been suspended since 30 January 2020, and that at Hong Kong-Macau Ferry Terminal has also been suspended since 4 February 2020, and customs, immigration and quarantine services at the Kai Tak Cruise Terminal and the Ocean Terminal have also been suspended since 5 February 2020;

- (vi) **Consolidation of BCPs:** on 3 February 2020, the Government announced that cross-boundary passengers by land or by sea were converged to Shenzhen Bay BCP (“SBP”) and Hong Kong-Zhuhai-Macao Bridge (“HZMB”) Hong Kong Port with effect from 4 February 2020. Following the Government’s announcement on 5 February 2020 of the 14-day mandatory quarantine arrangement with effect from 8 February 2020 (the details of which are provided in paragraph 16 below), regular cross-boundary coach services for HZMB to/from Guangdong have been suspended since 8 February 2020, while those between Hong Kong and Macau, as well as HZMB shuttle services have maintained limited services. For SBP, cross-boundary coach services have also been suspended since 8 February 2020 except for limited chartered services. The Hong Kong International Airport will maintain regular services. All land-based cargo clearance remains normal; and

- (vii) **Travel restrictions:** the Mainland authorities have agreed to the Government’s request to suspend the issuance of endorsements in all 49 cities under the Individual Visit Scheme, including the “one trip per week” endorsement, on top of the earlier suspension of all tour groups to Hong Kong.

14. These initiatives have been very effective in reducing the passenger traffic between the Mainland and Hong Kong. The number of passengers arriving at Hong Kong had dropped significantly by around 90% from 217 065 on 26 January 2020 (before the implementation of the above initiatives) to 23 393 on 16 February 2020. The number of passengers arriving at Hong Kong via control points other than the Airport<sup>2</sup> had dropped even more – by around 99% from 175 942 on 26

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<sup>2</sup> Excluding the Airport, there are nine land/rail control points and four

January 2020 to 2 473 on 16 February 2020. Among the 23 393 passengers arriving at Hong Kong on 16 February 2020, 87% were Hong Kong residents (20 325 passengers), 3% were Mainland residents (749 passengers) and 10% were visitors from other places (2 319 passengers).

**(c) Tightening the legal framework**

15. The Government published in the Gazette on 8 January 2020 an amendment to the Ordinance to include “Severe Respiratory Disease associated with a Novel Infectious Agent” in Schedule 1 of the Ordinance to make it a statutorily notifiable infectious disease. Through the Prevention and Control of Disease (Amendment) Regulation 2020 and the Prevention and Control of Disease Ordinance (Amendment of Schedule 1) Notice 2020, DH is vested with statutory powers to, among other things, put the contacts under quarantine and isolate the infected patients, etc.

16. For the purpose of preventing, combating and alleviating the effects of the public health emergency triggered by novel coronavirus, the Chief Executive in Council approved and arranged gazettal of the following Regulations on 7 February 2020 -

(a) the **Compulsory Quarantine** of Certain Persons Arriving at Hong Kong Regulation (Cap. 599C). This subjects all persons having stayed in the Mainland for any period during the 14 days preceding arrival in Hong Kong, regardless of nationality and travel documents used, to a compulsory quarantine for 14 days, with the exception of exempted persons (such as cross-boundary goods vehicle drivers and crew members of goods vessel). A breach of the quarantine requirements would be an offence liable to a penalty of a fine at **level 4** (\$25,000) and imprisonment for **six months**; and

(b) the Prevention and Control of Disease (Disclosure of Information) Regulation (Cap. 599D). This empowers a

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cross-boundary ferry terminal control points. Following the suspension of passenger clearance services at various control points, from 5 February 2020, only the HZMB Hong Kong Port and the SBP are still in service.

health officer to require a person to disclose or furnish any information relevant to the handling of a state of the public health emergency, such as travel history. The relevant power is extended to other medical practitioners who would have encountered a person involved in such public health emergency. It would be a criminal offence for any person to provide **false or misleading information** to the health officers/medical practitioners concerned, liable to a penalty of a fine at **level 3** (\$10,000) and imprisonment for **six months**.

17. As at 17 February 2020, a total of 10 395 persons who have been to the Mainland in the past 14 days preceding arrival at Hong Kong are subject to compulsory quarantine, including 9 163 Hong Kong residents and 1 232 non-Hong Kong residents. The quarantine arrangements are risk-calibrated, taking into account of practical constraints including the difficulty in securing suitable and adequate quarantine facilities. Among them, 8 749 have opted for home quarantine. Those Hong Kong residents who do not have any residence in Hong Kong would be quarantined at two temporary accommodations managed by the Leisure and Cultural Services Department, namely, Sai Kung Outdoor Recreation Centre and Tso Kung Tam Outdoor Recreation Centre. As at 17 February 2020, 144 persons are being quarantined at these two Centres.

**(d) Improving facilities and services**

18. Other than isolation facilities to be provided by HA for the treatment and handling of patients and suspected cases of COVID-19 infection, quarantine facilities must also be provided to guard against the spread of the infection.

19. As at 18 February 2020 (noon), 937 isolation beds were being used in the public hospitals with occupancy of around 32%. HA will continue to closely monitor the situation and allocate resources to mobilise the other isolation beds when required. Should there be a widespread community outbreak, HA would consider activating designated clinics to alleviate the pressure on hospitals and Accident and Emergency Departments. In addition, the HA has extended the “Enhanced Laboratory Surveillance” scheme to conduct tests to all

pneumonia inpatients and strengthen infection control and isolation arrangements to tie in with the extended coverage.

20. To facilitate the medical surveillance of contacts who may have been exposed to the risk of contracting the new virus but who are nonetheless asymptomatic, quarantine facilities have to be in place. Currently, there are four quarantine centres, namely the MacLehose Holiday Village, the Lei Yue Mun Park and Holiday Village, the Po Leung Kuk Jockey Club Pak Tam Chung Holiday Camp and the Heritage Lodge at the Jao Tsung-I Academy. As at 18 February 2020 (9 a.m.), 122 out of 150 units are being occupied.

21. To increase the capacity of the quarantine facilities, about 450 temporary units of modular housing are being constructed at three of the existing quarantine facilities (namely MacLehose Holiday Village, the Lei Yue Mun Park and Holiday Village and the Po Leung Kuk Jockey Club Pak Tam Chung Holiday Camp) and in Sai Kung Outdoor Recreation Centre. For the aforesaid mentioned modular units, construction of the first batch of around 100 units would be completed by end-February and could be used upon the provision of appropriate logistics supplies. Chun Yeung Estate, Fo Tan will be used as the fifth quarantine centre. Representatives from relevant bureau/departments have met with the residents and villagers in the neighbourhood on 8 February and members of the Sha Tin District Council on 9 February and attended a special meeting of Sha Tin District Council on 10 February to explain the relevant arrangements and justifications.

22. On hospital fees, the original HA fee-charging policy, which was to waive the charges for Non-eligible Persons (“NEPs”)<sup>3</sup>, served a public health strategy to avoid a situation where patients suffering from infectious disease evade tests due to their high cost and spread the disease in the community. However, as Hong Kong has entered a key stage in

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<sup>3</sup> Only patients falling into the following categories are eligible for the rates of charges applicable to “Eligible Persons”:

- holders of Hong Kong Identity Card issued under the Registration of Persons Ordinance (Chapter 177), except those who obtained their Hong Kong Identity Card by virtue of a previous permission to land or remain in Hong Kong granted to them and such permission has expired or ceased to be valid
- children who are Hong Kong residents and under 11 years of age; or
- other persons approved by the Chief Executive of the HA.

Persons who are not Eligible Persons are classified as NEPs.

its efforts in preventing the disease, in order not to create an incentive for persons infected by novel coronavirus to come to Hong Kong for medical care because of the fee waiver, the Government has requested the HA to adjust its fee-charging policy and to charge all NEPs the relevant fees starting from 29 January. The HA has started charging NEPs who met the novel coronavirus reporting criteria from 29 January 2020 in accordance with the prevailing fees and charges mechanism for NEPs.

**(e) Enhancing “social distancing” to prevent spread of the disease**

23. To reduce social contacts in the community, the Government has extended the Chinese New Year holidays of secondary schools, primary schools, kindergartens, child care centres and special schools thrice, with class resumption not earlier than 16 March 2020 (whilst universities and tertiary institutions were asked to consider, and had reacted positively to, extending the date of class resumption). Special work arrangement for government employees has been introduced from 29 January 2020 and extended to 23 February 2020 tentatively. Emergency and essential public services, as well as basic and limited-scale public services, are being provided. The Government has also appealed to other employers to make flexible work arrangements for employees in order to reduce contacts among people. Public events organised or sponsored by the Government that will attract a large number of people will continue to be cancelled by the Government.

**(f) Efforts to support front-line healthcare staff**

24. We are grateful to all front-line healthcare staff and other personnel committed to these disease prevention and control efforts. We will continue to fully support front-line healthcare staff. Although the global supply of personal protective equipment (“PPE”) remains tight, the Government and the HA are committed to protecting the safety of healthcare staff, and will accord priority to their needs. The HA has expedited the procurement of protective equipment and adjusted elective services to focus resources on fighting the epidemic. On 1 February 2020, the HA has also introduced a special rental allowance for staff working in high risk areas with temporary accommodation needs. Various hotlines have been set up for staff’s enquiries including supply

issues of PPE, laundry and linen, human resources, N95 respirator fit tests, critical incident psychological services, staff accommodation and special rental allowance.

**(g) Increasing supply of surgical masks**

25. The Government will continue to spare no efforts in sourcing surgical masks globally, increasing local production, liaising with mask suppliers in the Mainland and seeking assistance from relevant authorities to help supplies reach Hong Kong, with a view to meeting the needs of healthcare workers and other personnel providing services to the public, as well as stabilising the market supply. Since January 2020, the Government Logistics Department (“GLD”) has resorted to all possible means and channels to make direct procurement of masks and other protective items, bypassing tendering procedures on account of the urgency. As long as the items on offer meet the technical specifications and are at the prevailing market price, the Government will make immediate direct purchase. There is no question of “the lowest bid wins”. Other than supporting healthcare workers, the Government also appeals to private and charitable organisations to donate surgical masks to the underprivileged, and stands ready to play a facilitation role with financial resources and co-ordination.

26. The supply of masks is very tight throughout the globe, and some jurisdictions have imposed export controls. As such, full and timely delivery of the ordered items remains a challenge. The GLD has a limited stock of about 12 million masks at the moment. Together with the stock kept by individual departments and production by the Correctional Services Department, the current stock can last for about two months for meeting the needs of government departments. The Government will continue to accord priority to healthcare personnel, and frontline staff participating in quarantine-related work, execution of quarantine orders and maintenance of essential public services.

**(h) Residents of Hubei Province in Hong Kong**

27. Residents of Hubei Province have been restricted from entering Hong Kong since 27 January 2020. For those Hubei residents who have

already entered Hong Kong, they are only allowed to stay in Hong Kong for seven days in general and should have left. On 29 January 2020, the Government announced that it would reach out to hotels through the hotel industry and the Hong Kong Tourism Board to contact travellers from Hubei Province and also contact students from Hubei returning to Hong Kong through the tertiary institutions. From 29 January 2020, the Immigration Department (“ImmD”) started to inspect all hotels and guesthouses in Hong Kong, with a view to locating those Hubei residents still remaining in Hong Kong, for registering their contact information and providing them with relevant health advice. Starting from 31 January 2020, CHP, together with ImmD, started to approach those Hubei residents still remaining in Hong Kong, for arranging their staying in the quarantine camp or, if they displayed no symptom of the disease, leaving Hong Kong as soon as possible.

28. The ImmD had completed inspections of 1 837 hotels and guesthouses by 7 February 2020. During the period, a total of 55 Hubei residents were identified. At the time, 31 left Hong Kong on their own, 10 left Hong Kong with the assistance of the Government, and four stayed at the quarantine camp at Lei Yu Mun Park and Holiday Village (all have now completed quarantine). For the remaining ten Hubei residents, no quarantine was required as they had departed Hubei for more than 14 days (eight of them had thereafter left Hong Kong).

#### **(i) Hong Kong residents in Hubei Province**

29. As of 17 February 2020, the Government had received over 1 200 requests for assistance in relation to the novel coronavirus, involving about 2 400 Hong Kong people in Hubei Province. As public transport services in the relevant places have been suspended completely, the Government has arranged for delivery of medication to Hong Kong residents in need. The Government has been making necessary assessments and plans regarding the operation to bring Hong Kong people stranded in Hubei back to Hong Kong, including assessing the risk on public health and the practicality of the operation in a thorough and prudent manner. We have to avoid cross-infection among the returnees on their way back to Hong Kong, and to ensure that there would be sufficient facilities for returnees to undergo 14-day quarantine upon their

arrival in Hong Kong.

**(j) Showing care to those affected**

30. In the course of preventing and controlling the spread of novel coronavirus infection, it is important to show care to those affected. Public education and engagement is also necessary. In this regard, the Home Affairs Department (“HAD”) and the District Offices (“DOs”) have been providing the following services –

**(i) Hotline services**

As home quarantine may bring inconvenience to the people affected, HAD and DOs have set up 37 telephone hotlines to serve those returning from Hubei since 4 February 2020, those stranded on the World Dream Cruise from 6 to 8 February 2020, and those returning from the Mainland since 8 February 2020.

**(ii) Support at the District Level**

Taking into account the situation of individual districts, DOs have distributed sanitary packs to residents in need (e.g. families of Hong Mei House), and enhanced cleansing operations of streets, canopies, and three-nil buildings to improve environmental hygiene. HAD has appealed to public-spirited organisations/persons to donate cleaning products and masks for distribution to those in need. With the positive responses received, HAD has matched the mask donations to the donors’ targets, mainly high-risk patients (e.g. the elderly and pregnant women) and medical workers through HA, as well as elderly and needy households through the major charities.

**(iii) Public education and engagement**

HAD has duly disseminated CHP’s advice to different sectors related to its work, including the property management,

building management, hotels and guesthouse sectors, owners' organisations, Mutual Aid Committees, and ethnic minorities. We have also engaged the property management sector in drawing up measures to support their frontline cleansing and security workers in the fight against the disease. Given the wide public interface of the transport sector, the Home Affairs Bureau / HAD, together with the Transport and Housing Bureau / Transport Department, also helped promote messages on fight against the disease with the taxi / minibus trade. Through engagement with these stakeholders, we hope to raise public awareness and preparedness in the fight against the disease.

**(k) Risk communication and transparency**

31. Risk communication is key to managing the public anxieties during this critical period. Apart from daily briefings (normally at 4:30 p.m.) by the CHP and HA senior representatives on the number of cases (suspected, confirmed or under investigation), relevant contact tracing, quarantine, etc., the latest situation of the novel coronavirus infection in Hong Kong and the most updated health advice could be found at the dedicated webpage: ([www.chp.gov.hk/en/features/102465.html](http://www.chp.gov.hk/en/features/102465.html)). Press conferences are also held by senior officials to announce major government decisions and measures, as well as to update the public on major developments in combating the virus.

32. As of 16 February 2020, production of four TV Announcements in the Public Interest ("APIs") to promote personal and environmental hygiene has been completed. The dedicated webpage was set up on 3 January 2020 and there were more than 4.2 million page views for the thematic webpage. As of 16 February 2020, a total of 236 Facebook posts and 20 Government notifications relevant to the COVID-19 infection have been issued respectively. Two phases of advertising campaign have also been rolled out since January and all relevant online and offline media placements have been covered to maximise the awareness, including TV, printed materials, public transports, outdoor and digital media. CHP has also continuously updated relevant stakeholders of disease status and solicit their support to disseminate health messages to their respective

members and partners. Health education materials are translated and made available to nine ethnic minorities, namely Bahasa Indonesia, Tagalog, Thai, Hindi, Nepali, Urdu, Bengali, Sinhala and Vietnamese.

**(l) Anti-epidemic Fund**

33. As announced by CE on 5 February 2020, the Government would set up the Anti-epidemic Fund (“the Fund”) in order to enhance the capability of government bureaux and departments as well as other relevant parties in combating the epidemic and provide assistance or relief to enterprises and members of the public hard hit by the present novel coronavirus epidemic. We will seek LegCo Finance Committee’s approval of the relevant proposal on 21 February 2020.

**(m) Tapping on technology**

34. The Government actively makes use of technology to assist the prevention and control of the epidemic situation. Relevant efforts include –

- (i) The Office of the Government Chief Information Officer (“OGCIO”) has earlier launched the “Novel Coronavirus Infection Local Situation Map Dashboard” which makes use of Government’s open data to enable the public to know about the latest epidemic situation more quickly and comprehensively;
- (ii) OGCIO assists government departments in using information technology solutions, one being the electronic wristbands developed by the Logistics and Supply Chain Multi-tech R&D Centre, to prevent and control the epidemic situation. It also supports compulsory home quarantine with the use of communication technologies to monitor the locations of people under quarantine;
- (iii) In order to facilitate the setting up of more mask production lines in Hong Kong, the Hong Kong Productivity Council has actively contacted the industry to provide technical support. The Hong Kong Science and Technology Parks Corporation also actively provides facilitation for making available factory space that meet the required standards;

- (iv) A mask manufacturer has earlier used the patented nanofibrous technology of the Nano and Advanced Materials Institute to produce a highly breathable mask that is capable of killing bacteria. In response to the demands of the community, the enterprise will increase its production of masks in Hong Kong; and
- (v) In view of the short supply of disposable masks, the Government is exploring technology applications in relation to mask reusability.

## **SPECIFIC INCIDENTS**

### **(a) “World Dream” cruise**

35. The Government was notified on 4 February 2020 of confirmed cases of novel coronavirus infection involving eight travellers from the Mainland who took the World Dream cruise from 19 to 24 January 2020. The cruise ship has berthed at Kai Tak Cruise Terminal on 5 February 2020. All passengers and crew members were not allowed to disembark until health quarantine measures are completed by DH. Since some crew members might have had direct contact with these travellers, upon experts’ advice, the Government decided to conduct tests on novel coronavirus for 1 800 odd crew members on board on 8 February 2020. On 9 February 2020, DH completed tests on the novel coronavirus for over 1 800 crew members and confirmed that all samples were tested negative for the novel coronavirus. All passengers were allowed to disembark right way, with facilitation for immigration and other procedures.

### **(b) Suspected outbreak at Hong Mei House, Cheung Hong Estate**

36. On 10 February 2020, the 42<sup>nd</sup> confirmed case was found to be residing at the same A07 unit of Hong Mei House, Cheung Hong Estate as the 12<sup>th</sup> confirmed case, albeit on different floors. Upon an immediate site investigation arranged in the evening of 10 February, with the kind participation of experts, DH noted that the possibility of disconnected vent pipes without proper sealing triggering the spread of

the virus could not be ruled out. For the protection of public health, and on the advice of Professor Yuen Kwok-yung, DH decided to trigger an evacuation for all the A07 units that evening. About 100 residents from the 30 plus households were transferred to quarantine centres immediately.

37. Following the incident, the Food and Environmental Hygiene Department and the Housing Department conducted thorough cleaning and disinfection for the building. The Housing Department has also completed inspection of the vent pipes of all the 34 A07 units and found that vent pipes of nine units have been disconnected and / or not properly capped. The Housing Department has already undertaken rectification work. DH also organised a health talk for residents of Cheung Hong Estate to give health advice on the prevention of pneumonia and respiratory tract infection to residents.

38. On 15 February 2020, DH completed tests on the novel coronavirus for the concerned residents and confirmed that all samples were tested negative for the novel coronavirus. The residents were released from the quarantine centres on the same day.

**(c) Hong Kong residents on the “Diamond Princess” cruise ship**

39. As at 18 February 2020, a total of 454 confirmed cases have been identified among the passengers on the “Diamond Princess” cruise ship docking in Yokohama, Japan. There are around 350 Hong Kong residents on board, including 260 holding a HKSAR passport and around 90 holding a foreign passport. Among them, around 44 have been infected of the novel coronavirus. The Government is arranging chartered flights to take the Hong Kong residents under quarantine on board the Diamond Princess back to Hong Kong free of charge soonest possible after they are permitted to disembark. Taking into consideration the potential risk on public health, the persons concerned will be arranged to stay at quarantine centre for 14 days upon their arrival in Hong Kong. Meanwhile, the Government will continue to provide practical assistance to the Hong Kong residents including provision of necessary medication.

## **WAY FORWARD**

40. The fight is on-going. The Government is standing as one in our determination to serve the community during this critical period. We appeal to the community to observe good personal hygiene, wash hands frequently, wear a mask when needed, observe social distancing principles, and accommodate short term inconveniences caused by measures needed to be introduced for the prevention and control of the new virus in Hong Kong. The Government will continue to monitor the global and mainland situation, and the latest scientific evidence in combating this disease. With the active participation of experts based in Hong Kong, we have confidence that we are moving in the right direction.

## **ADVICE SOUGHT**

41. Members are invited to note the contents of this paper.

**Food and Health Bureau  
Department of Health  
Hospital Authority**

**February 2020**

**For information  
on 10 January 2020**

**Legislative Council Panel on Health Services**

**Administration's Measures in response to the Emergence of  
a Cluster of Pneumonia Cases in Wuhan of Hubei Province**

**Purpose**

This paper sets out the Government's latest measures in response to the emergence of a cluster of pneumonia cases in Wuhan of Hubei Province.

**Background**

2. Regarding the cluster of pneumonia cases recently identified in Wuhan of Hubei Province, the National Health Commission ("NHC") announced that a number of viral pneumonia cases with unknown cause had been identified since last December through disease surveillance. Fever was the main symptom while a few had presented with shortness of breath.

3. According to the latest information, there were a total of 59 cases, with no fatal case in the Mainland (as of 5 January 2020). At present, all the patients are receiving treatment in isolation, with 163 close contacts put under medical surveillance. So far none of them have developed abnormal symptoms such as fever. The tracing of close contacts is still ongoing.

4. Epidemiological investigations reveal that some patients are business operators at a local seafood market in Wuhan. Up till now, no evidence of definite human-to-human transmission has been observed and no healthcare workers have been infected. While the causative pathogen and cause of infection are still under investigation, respiratory pathogens such as influenza viruses, avian influenza viruses, adenovirus, Severe Acute Respiratory Syndrome and Middle East Respiratory Syndrome, have been ruled out as the cause.

## **Prevention and Control Measures**

5. The Centre for Health Protection (“CHP”) of the Department of Health (“DH”) continues to maintain close liaison with the NHC and closely monitor the latest development of the clustered cases in Wuhan. The CHP will timely update the surveillance criteria and testing strategies in accordance with the latest situation. Generally speaking, the Government has put in place a series of preventive measures on various fronts as set out below.

### ***Enhancing Surveillance***

6. The CHP has enhanced surveillance since 31 December last year. Given the latest situation, the CHP revised the criteria for surveillance on 3 January 2020 to widen the scope. Doctors are requested to report to the CHP if they encounter patients with a fever and acute respiratory symptoms or pneumonia symptoms, who had visited Wuhan (regardless of whether they had visited markets or seafood markets) within 14 days prior to the onset of the illness. The patients will receive treatment in isolation in public hospitals and medical tests as necessary. The CHP will also follow up on such cases, including conducting an epidemiological investigation. The CHP and the Hospital Authority (“HA”) collaboratively launched an electronic reporting platform (eNID) on 6 January for real-time monitoring of reported cases under enhanced surveillance in terms of clinical information, epidemiological information and test results.

7. “Severe Respiratory Disease associated with a Novel Infectious Agent” refers to a cluster of pneumonia cases of unknown aetiology started in Wuhan of the Mainland in December 2019, with serious clinical condition in some of the cases. It is a respiratory disease caused by a novel pathogen with potential significant public health impact, e.g. with the possibility to cause widespread epidemics, causing significant morbidity and mortality in the community. The novel pathogen causing the disease which may or may not have the property of efficient human-to-human transmission could be an unknown pathogen or a known pathogen that is not known to cause disease in human before but has subsequently changed its property and become capable of causing disease in human. The disease may have the potential to

lead to international spread and public health emergency and pose major public health risks in terms of serious disease burden, morbidity and mortality. Effective from 8 January 2020, “Severe Respiratory Disease associated with a Novel Infectious Agent” has been added as a scheduled infectious disease to Schedule 1 of the Prevention and Control of Disease Ordinance (Cap. 599). Any suspected cases must be reported to the CHP for investigation and follow-up.

### ***Liaison with Mainland Health Authorities***

8. As early as 2005, a Co-operation Agreement on Response Mechanism for Public Health Emergencies was signed between the Government of the Hong Kong Special Administrative Region and the Mainland’s former Ministry of Health and the Secretariat for Social Affairs and Culture of the Government of the Macao Special Administrative Region. The Agreement was updated in 2018. The CHP has maintained close liaison with the NHC under the established mechanism to notify one another of surveillance data on infectious diseases, emergency public health incidents and responses to major infectious diseases.

### ***Enhancing Port Health Measures***

9. The Port Health Division (“PHD”) of the CHP has been conducting health surveillance measures at all boundary control points (“BCPs”). Thermal imaging systems are in place for temperature screening of inbound travellers. Since 1 January 2020, the PHD has adopted the following enhanced port health measures in response to the cluster of pneumonia cases in Wuhan, Hubei Province:-

- (a) immediate referral of inbound travellers with relevant symptoms and travel history to public hospitals for treatment in isolation and follow-up;
- (b) advised the MTR Corporation, the Airport Authority Hong Kong and relevant airlines to enhance cleaning and disinfection of high speed trains and aircrafts arriving Hong Kong from Wuhan. Cleaning and disinfection at the Hong Kong West Kowloon Station (“HKWKS”) of the Guangzhou-Shenzhen-Hong Kong

Express Rail Link and airport terminal buildings have also been stepped up;

- (c) put in place additional thermal imaging system in the Hong Kong International Airport (“HKIA”) for dedicated temperature screening of travellers arriving in Hong Kong from Wuhan since 3 January 2020;
- (d) deployed additional manpower to enhance temperature screening for inbound travellers at the HKWKS since 3 January 2020. A health post was set up at the arrival hall on the same day so that travellers with relevant symptoms and travel history can seek assistance from the DH;
- (e) since 6 January 2020, conducted additional temperature checks using hand-held infra-red thermometers for all inbound travellers during the period when the two high speed trains with stop at Wuhan arrived Hong Kong (around 7 p.m. to 10 p.m.) to ensure that body temperature of all passengers from these two trains has been checked; and
- (f) stepped up promotion of health messages about the prevention of pneumonia and respiratory tract infections to inbound and outbound travellers through broadcast and distribution of pamphlets, etc. at the HKIA and the HKWKS. Inbound and outbound travellers are reminded to take heed of preventive measures and to maintain good personal and environmental hygiene. They should avoid visiting wet markets, live poultry markets or farms during travel. For those with a fever or respiratory infection symptoms, they should wear a surgical mask, seek medical consultation and report their travel history to their doctor. Moreover, additional manpower will be deployed to enhance temperature screening for inbound travellers and disseminate health messages about the prevention of pneumonia and respiratory tract infections to inbound and outbound travellers at all BCPs.

10. The PHD will continue to maintain close liaison with stakeholders of all BCPs to give timely update on the latest situation and relevant measures.

### ***Timely Conducting of Tests and Release of Test Results***

11. The Public Health Laboratory Services Branch of the CHP is now identifying the causative agent in collaboration with the microbiology laboratories of public hospitals under the HA. The testing methods and test results will be subject to comprehensive assessment of specialists in clinical microbiology and infection based on the epidemiological and clinical history, as well as the relative timing of exposure, symptom onset and presentation to medical care of the patients. Reports will normally be available on the same day upon the receipt of the samples.

### ***Contingency Plans and Drills for Concerted Inter-departmental Actions***

12. In view of the recent development, the Government launched the Preparedness and Response Plan for Novel Infectious Disease of Public Health Significance (the “Plan”) on 4 January 2020, with the Serious Response Level was activated with immediate effect.

13. The Plan sets out the Government’s preparedness and response plan in case of an outbreak of Novel Infectious Disease of Public Health Significance, where a three-tier response level is adopted. Three response levels, namely Alert, Serious and Emergency, will be activated based on the risk assessment of the Novel Infectious Disease of Public Health Significance that may affect Hong Kong and on its health impact on the community.

14. Upon the risk assessment of the cluster of cases of viral pneumonia with an unknown cause in Wuhan reported by the NHC, the Serious Response Level was activated, under which the immediate health impact caused by the Novel Infectious Disease of Public Health Significance on local population is moderate.

15. To enhance the overall preparedness and response for the management of public health crisis, the DH has developed contingency plans

for those infectious diseases of public health significance and regularly conducts exercises and drills to test the readiness of government departments and relevant organisations to cope with the outbreak of major infectious diseases and public health emergencies, with a view to enhancing the awareness, preparedness and ability of the community and healthcare personnel to detect and respond to those cases and preventing the outbreak of the possible epidemics.

16. With a view to testing the Government's capacity to a novel disease, the CHP conducted a public health exercise code-named "Sunstone" in June 2018 for a communicable disease that could be caused by a pathogen currently unknown to cause human disease.

### ***Response Measures in Public Hospitals***

17. On 4 January 2020, public hospitals activated Serious Response Level to tie in with the Government's "Preparedness and Response Plan for Novel Infectious Disease of Public Health Significance". The HA has also implemented a series of response measures to enhance monitoring and infection control in public hospitals and clinics.

18. Frontline healthcare staff would conduct risk assessment on its patients in accordance with the HA's established clinical criteria (i.e. Fever, Travel record, Occupation, Contact history and whether there is Clustering phenomenon). The HA has reminded frontline healthcare staff to pay special attention. Patients with the presentation of fever and acute respiratory infection or pneumonia, who have been to Wuhan within 14 days before onset of symptoms, would immediately be sent to negative pressure isolation room for treatment. Airborne, droplet and contact precautions would be implemented on these cases, and healthcare staff would wear appropriate personal protective equipment with regard to relevant precautionary measures. In addition, laboratory testing services have been enhanced with a view to obtaining testing results as soon as possible for arrangement of suitable treatment for patients. The HA will closely monitor the utilisation of isolation beds in the seven clusters and arrange bed deployment in a timely manner.

19. Under the Serious Response Level, more stringent infection control measures, including restrictions on visiting arrangement, are enforced in public hospitals. Visitors to public hospitals and clinics are required to put on surgical masks and perform hand hygiene before and after visiting patient. As regards personal protective equipment, such as surgical masks and N95 masks, the current stockpile is adequate for three months' consumption. Meanwhile, the HA will maintain close liaison with the suppliers to ensure sustainable supply of protective equipment.

### ***Enhancing Risk Communication, Publicity and Public Education***

20. The DH has issued letters to doctors, private hospitals and Chinese medicine practitioners to alert them of the cluster of pneumonia cases in Wuhan and remind them to pay special attention and refer any suspected case to public hospitals for isolation and laboratory tests. The CHP has maintained close communication with the HA on the matter.

21. In addition, a dedicated webpage<sup>1</sup> has also been set up by the CHP to provide relevant information and health advice. To address public concerns, the CHP will announce the details of cases reported under enhanced surveillance<sup>2</sup> on the above webpage daily to enhance transparency.

22. To increase public knowledge of preventing pneumonia and respiratory tract infections, the CHP has prepared a wide variety of health education materials, such as leaflets, infographics, posters, pamphlets and videos. Letters have been sent to institutions and schools, urging them to strengthen personal and environmental hygiene measures.

23. The DH provides updates and health advice to District Council ("DC") members through 18 DC secretariats, who can further disseminate the information via their own channels.

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<sup>1</sup> <https://www.chp.gov.hk/en/features/102465.html>

<sup>2</sup> [https://www.chp.gov.hk/files/pdf/enhanced\\_sur\\_pneumonia\\_wuhan\\_eng.pdf](https://www.chp.gov.hk/files/pdf/enhanced_sur_pneumonia_wuhan_eng.pdf)

### ***Health Advice***

24. To prevent pneumonia and respiratory tract infections, members of the public should maintain good personal and environmental hygiene at all times. Precautions include:-

- (a) perform hand hygiene frequently, especially before touching the mouth, nose or eyes, after touching public installations such as handrails or door knobs, or when hands are contaminated by respiratory secretion after coughing or sneezing;
- (b) wash hands with liquid soap and water, rub for at least 20 seconds and rinse with water and dry them with a disposable paper towel or by a hand dryer. Where hand washing facilities are not available or when hands are not visibly soiled, clean hands with 70 to 80 per cent alcohol-based handrub as an effective alternative;
- (c) cover the mouth and nose with tissue paper when sneezing or coughing. Dispose of soiled tissues in a lidded rubbish bin and wash hands thoroughly; and
- (d) when having symptoms of respiratory infections, wear a surgical mask, refrain from work or attending class at school, avoid crowded places and seek medical consultation promptly.

### ***Travel Advice***

25. Members of the public should follow the precautions below when travelling outside Hong Kong:

- (a) avoid contact with animals (including game), birds or their droppings;
- (b) avoid visiting wet markets, live poultry markets or farms;
- (c) avoid making close contact with patients, especially those with symptoms of acute respiratory infections;

- (d) do not consume game meat and do not patronise food premises where game meat is served; ;
- (e) keep a close eye on food safety and hygiene, avoid consuming raw or undercooked animal products, including milk, eggs and meat, or foods which may have been contaminated by animal secretions, excretions (such as urine) or contaminated products unless properly cooked, washed or peeled;
- (f) if feeling unwell when outside Hong Kong, especially when having a fever or cough, wear a surgical mask, inform the hotel staff or tour escort and seek medical consultation at once; and
- (g) after returning to Hong Kong, seek medical consultation promptly if having a fever or other symptoms, inform the doctor of recent travel history and wear a surgical mask to prevent the spread of the disease.

## **Way Forward**

26. The Government will continue to stay vigilant, strengthen the surveillance and closely monitor the latest development of the cluster of pneumonia cases in Wuhan. In addition to the ongoing risk assessments, the Government will monitor the effectiveness of the contingency plan and step up public health measures as appropriate. We will also enhance publicity to keep the public informed and alert so that they can take appropriate precautions and response measures where necessary.

## **Advice Sought**

27. Members are invited to note the content of this paper.

**Food and Health Bureau  
Department of Health  
Hospital Authority  
January 2020**

**For information  
on 30 January 2020**

**Legislative Council Panel on Health Services**

**Measures for the Prevention and Control of  
Novel Coronavirus Infection in Hong Kong**

**PURPOSE**

At the meeting of the Legislative Council Panel on Health Services on 10 January 2020, the Secretary for Food and Health briefed Members on the response measures in Hong Kong for the emergence of a cluster of pneumonia cases in Wuhan of Hubei Province. This paper provides Members with updates on the latest situation and measures being taken by the Administration to prevent and control the spread of novel coronavirus infection.

**LATEST SITUATION**

Global Situation

2. On 23 January, the World Health Organization (“WHO”) convened another urgent meeting of International Health Regulations Emergency Committee regarding the situation of novel coronavirus infection in Geneva. The Committee members agreed that the situation was an emergency in China but it had not yet but might become a global health emergency. The Committee would reconvene to discuss whether the situation of novel coronavirus infection constitutes Public Health Emergency of International Concern in ten days or less. As at 9 a.m. on 29 January 2020, 18 countries/regions (including the Hong Kong Special Administrative Region (“HKSAR”)) in the world have reported more than 6 060 confirmed cases of novel coronavirus infection, including 132 fatal cases. Please refer to **Annex I** for details.

Local situation

3. The Government published in the Gazette on 8 January an

amendment to the Prevention and Control of Disease Ordinance (Cap. 599) (the “Ordinance”) to include “Severe Respiratory Disease associated with a Novel Infectious Agent” as a statutorily notifiable infectious disease set out in Schedule 1 of the Ordinance through the Prevention and Control of Disease (Amendment) Regulation 2020 and the Prevention and Control of Disease Ordinance (Amendment of Schedule 1) Notice 2020, thereby vesting the Department of Health (“DH”) with the statutory powers to, among other things, put the contacts under quarantine and isolate the infected patients, etc.

4. Having regard to the outbreak of novel coronavirus in Wuhan of Hubei Province, we have stepped up the surveillance of novel coronavirus since 31 December 2019. Medical practitioners and hospitals are requested to report to the Centre for Health Protection (“CHP”) cases that fulfil the reporting criteria<sup>1</sup> for further investigation. As at noon on 28 January 2020, a total of 529 suspected cases had been reported, in which the patients concerned in eight cases were tested positive for novel coronavirus and 189 patients were in isolation, pending testing results. Please refer to **Annex II** for details.

## **PREVENTIVE STRATEGY AND MEASURES**

5. All government bureaux and departments, the Hospital Authority (“HA”), as well as relevant parties, have stepped up their disease preventive efforts on all fronts. Our strategy on preventing and controlling novel coronavirus infection focuses on the following -

- (a) enhancing mechanism and organisation structure to tackle disease;
- (b) strengthening immigration control;
- (c) minimising risks of virus infection and spreading in local community;

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<sup>1</sup> Under the current reporting criteria, medical practitioners are requested to make a report to the CHP for further investigation if they encounter an individual with fever, or acute respiratory illness, or pneumonia, and who had experienced one of the following within 14 days prior to the onset of symptoms: (a) visited Hubei Province (regardless of whether the individual had visited wet markets or seafood markets there); or (b) visited a medical hospital in the Mainland; or (c) had close contact with a confirmed case of the novel coronavirus while that patient was symptomatic.

- (d) enhancing personal hygiene of the public;
- (e) improving anti-epidemic facilities and services;
- (f) maintaining transparency of information;
- (g) fostering collaboration with the WHO, Mainland and overseas health authorities; and
- (h) allocating sufficient resources for the measures.

Major measures being taken are illustrated below.

*(a) Enhancing mechanism and organisation structure to tackle disease*

6. With a view to formulating relevant strategies and measures according to the development of the disease as soon as possible, the Chief Executive raised the response level under the Preparedness and Response Plan from Serious to Emergency level on 25 January, personally leading a Steering Committee cum Command Centre. There are four Workgroups under the Steering Committee cum Command Centre. The Workgroup on Disease Prevention and Control led by the Secretary for Food and Health is responsible for formulating strategies to manage infected cases and maintaining close liaison with relevant authorities in the Mainland and the WHO. The Workgroup on Responses and Actions led by the Chief Secretary for Administration would coordinate the work of relevant departments in fighting the disease. The Workgroup on Public Participation led by the Secretary for Home Affairs would encourage the community to take part in activities to tackle the virus. The Workgroup on Communications led by the Secretary for Constitutional and Mainland Affairs would make sure that the latest and accurate messages are conveyed to all members of the public and relevant stakeholders speedily and effectively.

7. An expert advisory group is set up under the Steering Committee cum Command Centre to provide professional advice to the Chief Executive and the HKSAR Government. Currently four experts with rich experiences in public health, epidemiology and clinical aspect have been engaged to join the expert advisory group, including Professor Gabriel Leung, Dean of Li Ka Shing Faculty of Medicine of the University of Hong Kong; Professor Keiji Fukuda, Director and Clinical Professor of the School of Public Health of the

University of Hong Kong and former Assistant Director General of the WHO; Professor Yuen Kwok-yung, Chair of Infectious Diseases, Department of Microbiology, Li Ka Shing Faculty of Medicine of the University of Hong Kong; and Professor David Hui Shu-cheong, Stanley Ho Professor of Respiratory Medicine and Director of Stanley Ho Centre for Emerging Infectious Diseases of the Chinese University of Hong Kong.

*(b) Strengthening immigration control*

Travellers from Hubei and Wuhan

8. As the outbreak is mainly found in the Hubei Province at which the situation is getting more severe, and experts have advised that asymptomatic patients would vastly increase the difficulties in disease prevention and control, the Steering Committee cum Command Centre has decided that with effect from 0:00 a.m. on 27 January, residents from Hubei Province and persons who visited the Hubei Province in the past 14 days (excluding Hong Kong residents) will not be permitted to enter Hong Kong until further notice, so as to lower the chance of infected persons entering Hong Kong. To facilitate the implementation of the aforementioned measure, all the self-service clearance channels (i.e. e-Channels) at control points will only be open to Hong Kong residents from 0:00 a.m. on the same day. Non-Hong Kong residents have to use normal immigration counters for immigration clearance. The Government is reaching out to hotels through the hotel industry and the Hong Kong Tourism Board to contact travellers from Hubei and Wuhan, and contacting students from Hubei returning to Hong Kong through tertiary institutions for follow-up by the CHP.

9. Besides, in order to reduce the flow of people between the Mainland and Hong Kong, the Mainland authorities have agreed to the HKSAR Government's request to suspend the issuance of endorsements in all 49 cities under the Individual Visit Scheme, on top of the earlier suspension of all tour groups to Hong Kong.

People returning to Hong Kong from the Mainland

10. Furthermore, the Government urges Hong Kong people to return from the Mainland as soon as possible. All persons returning from the Mainland are advised to stay home for 14 days upon their return as far as possible. Those who need to go out should wear a surgical mask for 14 days.

Hong Kong residents who have visited Hubei Province in the past 14 days should approach staff of the DH's Port Health Division for relevant assessment upon their arrivals. If such persons are found to be asymptomatic, they will be required to wear a surgical mask immediately and self-isolate for 14 days as far as possible. They will also be placed under medical surveillance by the DH. For Hong Kong residents and travellers who had been to Hubei Province in the past 14 days but had returned to or entered Hong Kong earlier, they should call the DH's CHP hotline (2125 1122). Hong Kong residents should also refrain from travelling to places affected by the disease.

11. The HKSAR Government has also suspended all the Mainland exchanges, visits, cultural and sports activities organised by the HKSAR Government.

#### Cross-boundary transport and border control point services

12. In connection with the measures above and further to the indefinite suspension of flights to and from Wuhan of Hubei Province, the following transport services and border control point services will be reduced or suspended with effect from 0:00 a.m. on 30 January –

- (1) on railway services, the services of the Hong Kong section of the Guangzhou-Shenzhen-Hong Kong Express Rail Link ("XRL") and the Intercity Through Train will be suspended;
- (2) on aviation services, Mainland flights will be cut to about half;
- (3) on ferry services, all cross-boundary ferry services to and from the China Ferry Terminal and the Tuen Mun Ferry Terminal will be suspended;
- (4) on land-based cross-boundary transport, cross-boundary coach and shuttle bus services (including the short-haul cross-boundary coach service at Huanggang Port, Yellow Bus and Gold Bus) using the Lok Ma Chau Control Point, the Shenzhen Bay Port and the Hong Kong-Zhuhai-Macao Bridge Hong Kong Port will reduce the service frequency;
- (5) on ports, services of the West Kowloon Station, Hung Hom Station, China Ferry Terminal and Tuen Mun Ferry Terminal control points

will be suspended. The passenger services in Sha Tau Kok and Man Kam To will also be suspended, but the services for goods will not be affected.

13. Not only will the above measures reduce the flow of people between the Mainland and Hong Kong, but they will also allow relevant departments to focus resources on control points which remain in service through redeployment, thereby strengthening the health checks of travellers. In addition, body temperature checks and health declarations for departing travellers have already been implemented in all Mainland ports, including those in Shenzhen. The HKSAR Government will strengthen its joint efforts with the Mainland authorities in disease prevention and control, including putting in place more infrared body temperature checking equipment in the Hong Kong International Airport to implement body temperature checks for departing travellers as soon as possible.

#### Health declaration

14. The DH has imposed a health declaration form system on inbound travellers by air from Wuhan starting from 20 January and extended it to Hong Kong West Kowloon Station since 24 January. Starting from 29 January, the health declaration form system has been further extended to all inbound flights from the Mainland. The e-health declaration system will also be piloted gradually.

15. The Steering Committee cum Command Centre is monitoring the development of the disease and consulting expert advice to study measures that can further reduce the chances of infected people entering Hong Kong.

#### ***(c) Minimising risks of virus infection and spreading in local community***

16. Although there is no local infection case at the moment, with a view to minimising the risk of virus spreading in local community, the HKSAR Government has cancelled/will cancel large-scale events which it organises or arranges and are expected to be attended by many people, including the International Chinese New Year Carnival, the Lunar New Year Cup football tournament and the lantern carnivals organised by the Leisure and Cultural Services Department (LCSD). The HKSAR Government has also reached a consensus with the organiser of the Hong Kong Marathon that the event originally scheduled for 9 February will also be cancelled. In addition, as the

HKSAR Government has to focus on fighting the disease, various types of Chinese New Year receptions hosted by the HKSAR Government, including the one hosted by the Chief Executive in the Government House, have been cancelled. The HKSAR Government appeals to community groups to take public health risks into account in organising any event.

17. To lower the risk of disease transmission among students in schools, the HKSAR Government will extend the Chinese New Year holidays of secondary schools, primary schools, kindergartens, child care centres and special schools so that they will resume classes on 17 February. During the original school days, all schools will keep their school premises open and arrange a suitable number of staff to take care of students in need and continue to handle school matters. As for other schools, including post-secondary institutions, the Education Bureau will maintain liaison with them so as to strengthen anti-epidemic measures. Special work arrangement for government departments has also been implemented starting from 29 January. Except for staff of the departments providing emergency services and essential public services, all other employees of the Government are not required to return to the offices after the holidays in order to reduce the risk of virus spreading in the community.

18. Various government departments has announced closures of a number of public facilities, including sports centres, sports grounds, museums, public libraries, etc. Furthermore, the Social Welfare Department has written to organisations operating subsidised social welfare services, including residential care home and day care centre services, providing them with additional resources to strengthen the cleaning and disinfection of the premises of their service units as well as reminding them to conduct body temperature checks for residents, working staff and visitors. Various Government departments will also step up the cleaning work in public facilities under their purview. The HKSAR Government has also reminded public transport operators and private property management companies to step up cleaning work to prevent the disease from spreading and protect public health.

*(d) Enhancing personal hygiene of the public*

19. The CHP has issued guidelines reminding citizens to be aware of personal hygiene and disseminated health messages to citizens on preventing communicable diseases and maintaining personal and environmental hygiene,

through various channels including Announcements in the Public Interest on both television and radio stations, Facebook page, YouTube channel, newspapers, the “GovHK Notifications” mobile app, health education infoline and media interviews. The CHP has also produced various health education materials, including leaflets, posters, infographics and pamphlets, etc. for dissemination in the community level to enhance promotion. It also maintains close liaison with different stakeholders and keeps them posted of the latest situation and preventive measures. The stakeholders have collaborated with and supported the CHP in spreading health-related messages to the public.

20. The HKSAR Government will proactively increase the supply of masks to ensure sufficient supply to public organisations and facilitate citizens to purchase masks. To meet the future demand for masks in Hong Kong, the Government and suppliers would work together to strive for restoring stable supply in short run. In addition to maintaining close contact with the suppliers, the Chief Executive has personally written to the State Council seeking their assistance in mask supply from the Mainland to Hong Kong. The HKSAR Government will closely monitor the market supply of other hygiene products such as hand sanitizer, alcohol-based handrub and bleach, and will speed up the procurement process as far as possible to ensure adequate supply for government departments in meeting the practical needs of anti-epidemic efforts.

*(e) Improving facilities and services*

21. To tackle the disease, the HKSAR Government will continue to identify suitable places to serve as quarantine centre facilities and other purposes. The two holiday camps under the LCSD, i.e. the Lady MacLehose Holiday Village and Lei Yue Mun Park and Holiday Village, have been reserved as quarantine centres. As at 9 a.m. on 29 January, a total of 36 persons required to be quarantined have been accommodated at the Lady MacLehose Holiday Village. Furthermore, the DH arranged on 26 January preparation of the Po Leung Kuk Jockey Club Pak Tam Chung Holiday Camp as quarantine centre for quarantining asymptomatic close contacts. A full range of support services has been provided by the Government to the quarantined persons to meet their needs, including provision of food, daily necessities and entertainment. To cope with the quarantine need in future, the DH is contacting other non-governmental organisations with a view to borrowing or requisitioning their holiday villages.

22. The CHP has set up a hotline (2125 1122) for the suspected and confirmed cases. The hotline operates daily from 8 a.m. to 9 p.m. including public holidays. Persons who are regarded as close contacts and other contacts of the cases concerned should call the hotline.

23. On public hospitals, as at 9 a.m. on 29 January, 663 isolation beds were being used in the public hospitals with occupancy of around 40%. Hospitals in each HA cluster will continue to closely monitor the situation and allocate resources to mobilise the other isolation beds when required. In addition, the HA expects that rapid testing could be provided in laboratories of public hospitals in early February with a view to ascertaining whether a patient is infected as soon as possible.

24. The HA has prepared for opening designated clinics. If there is community outbreak in Hong Kong or neighbouring region (e.g. Guangdong Province), the HA would consider activating designated clinics in each cluster to support hospitals in handling a larger number of suspected cases or follow-up action in order to alleviate the pressure on hospitals and Accident and Emergency Departments (“AEDs”). Currently, seven designated clinics (one in each cluster) are well-prepared. Designated clinics would generally be responsible for handling mild cases, such that hospitals and AEDs could focus on more severe cases.

25. On hospital fees, the original HA fee-charging policy, which was to waive the charges for Non-eligible Persons (“NEPs”)<sup>2</sup>, served a public health strategy to avoid a situation where patients suffering from infectious disease evade tests due to their high cost and spread the disease in the community. However, as Hong Kong has entered a key stage in its efforts in preventing the disease, in order not to create an incentive for persons infected by novel coronavirus to come to Hong Kong for medical care because of the fee waiver,

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<sup>2</sup> Only patients falling into the following categories are eligible for the rates of charges applicable to “Eligible Persons”:

- holders of Hong Kong Identity Card issued under the Registration of Persons Ordinance (Chapter 177), except those who obtained their Hong Kong Identity Card by virtue of a previous permission to land or remain in Hong Kong granted to them and such permission has expired or ceased to be valid;
- children who are Hong Kong residents and under 11 years of age; or
- other persons approved by the Chief Executive of the HA.

Persons who are not Eligible Persons are classified as Non-eligible Persons.

the HKSAR Government has requested the HA to adjust its fee-charging policy and to charge all NEPs the relevant fees starting from 29 January. With regard to this government policy, the HA announced that they would start charging NEPs who met the novel coronavirus reporting criteria, beginning at 0:00 a.m. on 29 January. The concerned NEPs will be charged in accordance with the prevailing fees and charges mechanism for NEPs. Hospital fees will continue to be waived for “Eligible Persons” who meet the reporting criteria for novel coronavirus.

***(f) Maintaining transparency of information***

26. To enhance transparency, a dedicated webpage<sup>3</sup> was set up by the CHP on 4 January to provide relevant information and health advice on Severe Respiratory Disease associated with a Novel Infectious Agent, including information on the affected countries/areas<sup>4</sup>. Besides, the DH and the HA have been announcing the daily number of cases fulfilling the reporting criteria since 3 January and the latest local situation to the public via daily press conference since 23 January.

***(g) Fostering collaboration with the WHO, Mainland and overseas health authorities***

27. In 2005, a Co-operation Agreement on Response Mechanism for Public Health Emergencies was signed between the HKSAR Government, the former Ministry of Health of the People’s Republic of China and the Secretariat for Social Affairs and Culture of the Government of the Macao Special Administrative Region. The relevant agreement was updated in 2018. The CHP has maintained close liaison with the National Health Commission (NHC) under established mechanism to notify each other of surveillance data on infectious diseases, emergency public health incidents and responses to major infectious diseases. Furthermore, a delegation of the HKSAR Government visited Wuhan on 13 January to participate in a two-day working visit under the arrangement of the NHC to acquire information about the situation of the cluster of pneumonia cases in Wuhan, prevention and control measures as well as clinical management. In the meantime, the CHP will continue to maintain close liaison with the WHO and report to them the latest situation in Hong Kong.

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<sup>3</sup> <http://www.chp.gov.hk/en/features/102465.html>

<sup>4</sup> [http://www.chp.gov.hk/files/pdf/statistics\\_of\\_the\\_cases\\_novel\\_coronavirus\\_infection.pdf](http://www.chp.gov.hk/files/pdf/statistics_of_the_cases_novel_coronavirus_infection.pdf)

*(h) Allocating sufficient resources for the strategies and measures*

28. To ensure effective implementation of the above strategies and measures, the HKSAR Government would render full financial support in meeting any additional resources reasonably required by government departments, the HA and units undertaking related studies in the tertiary institutions, so long as they contribute to anti-epidemic efforts.

**WAY FORWARD**

29. The Government will continue to adopt the three principles in implementing the preventive and response measures, namely (i) making prompt responses; (ii) staying alert; and (iii) working in an open and transparent manner. In addition to the ongoing risk assessments, the Government will monitor the effectiveness of the contingency plan and step up public health measures as appropriate. We will also enhance publicity to keep the public informed of the latest disease situation and appeal to the public to work together in disease prevention and control.

**ADVICE SOUGHT**

30. Members are invited to note the contents of this paper.

**Food and Health Bureau  
Department of Health  
Hospital Authority  
January 2020**

**Countries/areas with reported cases of novel coronavirus infection**  
**(Last updated on January 29, 2020, 9 am)**

All information is based on that notified or reported by the National Health Commission, the Health Commission of Guangdong Province, Health Bureau of Macao Special Administrative Region, Taiwan Centers for Disease Control and health authorities of overseas countries.

- Number of cases in Mainland China: 5974 cases (as of January 28, 2020, 24:00), including 1239 cases in serious condition and 132 death cases.
- Number of cases in other countries/areas: at least 86 cases

**Countries/areas with possible community transmission of novel coronavirus infection**

Country/Area	Number of reported cases
Hubei Province, China	3554 (as of January 28, 2020, 24:00)

**The following countries/areas have reported cases of novel coronavirus infection, but there is so far no evidence of possible community transmission of novel coronavirus infection in these countries/areas**

As of January 29, 2020, 9 am:

Mainland China	Number of cases
Beijing	91
Liaoning	34
Anhui	106
Chongqing	132
Shaanxi	46
Tianjin	24
Fujian	80
Hunan	143
Sichuan	90
Gansu	19
Heilongjiang	31
Jiangxi	109
Guangdong	207
Guizhou	9
Shanghai	66
Shandong	95

Mainland China	Number of cases
Guangxi Zhuang Autonomous Region	51
Yunnan	44
Inner Mongolia Autonomous Region	15
Zhejiang	173
Henan	168
Hebei	33
Hainan	40
Jilin	8
Shanxi	27
Ningxia Hui Autonomous Region	11
Jiangsu	70
Xinjiang Uygur Autonomous Region	10
Qinghai	6

As of January 29, 2020, 9 am:

Other countries/areas	Number of cases
Hong Kong Special Administrative Region	8
Macao Special Administrative Region	7
Taiwan	8
Japan	7
Korea	4
Thailand	14
Singapore	7
Vietnam	2
Nepal	1
Malaysia	7
United States	5
Australia	5
France	3
Canada	2
Germany	4
Sri Lanka	1
Cambodia	1

**Distribution of pneumonia cases of novel coronavirus infection reported in Guangdong Province (as of January 28, 2020, 24:00)**

Areas	Number of cases
Guangzhou	51
Shenzhen	57
Zhuhai	12
Shantou	5
Foshan	18
Shaoguan	4
Meizhou	4
Huizhou	11
Shanwei	1
Dongguan	7
Zhongshan	6
Yangjiang	9
Zhanjiang	7
Zhaoqing	4
Qingyuan	6
Jieyang	4
Heyuan	1
Total	207

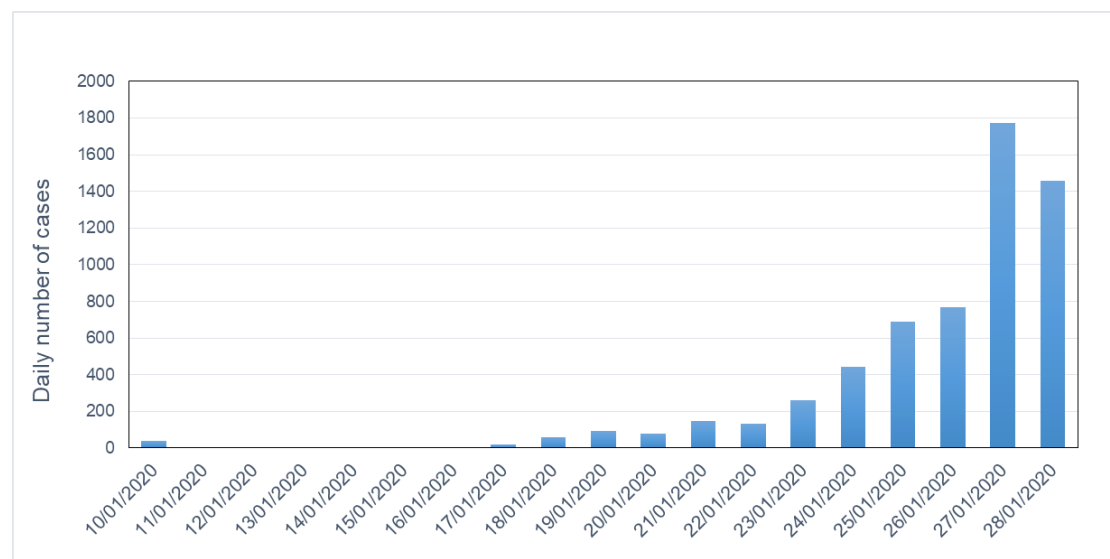


Figure 1 - Daily number of confirmed cases reported in Mainland China since January 10, 2020.

**Latest situation of reported cases of Severe Respiratory  
Disease associated with a Novel Infectious Agent**

Since 31 December 2019 (as of 28 January 2020, 12:00 noon), the Centre for Health Protection (CHP) of the Department of Health has received reports of a total of 529 cases fulfilling the reporting criteria, including 8 confirmed cases and 332 cases which were ruled out as novel coronavirus infection. The remaining 189 cases were still hospitalised for investigation.

Details of confirmed cases of novel coronavirus infection:

Case no.	Date of laboratory confirmation	Gender	Age	Name of hospital admitted	Discharge status
1	23/01/2020	M	39	Princess Margaret Hospital	Hospitalised
2	23/01/2020	M	56	Princess Margaret Hospital	Hospitalised
3	24/01/2020	F	62	Princess Margaret Hospital	Hospitalised
4	24/01/2020	F	62	Princess Margaret Hospital	Hospitalised
5	24/01/2020	M	63	Princess Margaret Hospital	Hospitalised
6	26/01/2020	M	47	Princess Margaret Hospital	Hospitalised
7	26/01/2020	F	68	Princess Margaret Hospital	Hospitalised
8	26/01/2020	M	64	Princess Margaret Hospital	Hospitalised

Remarks:

1. Suspected cases were reported under enhanced surveillance system from 31 Dec 2019 to 7 Jan 2020.
2. “Severe Respiratory Disease associated with a Novel Infectious Agent” has been a notifiable disease, with effect from 8 Jan 2020. Cases were reported as suspected cases of “Severe Respiratory Disease associated with a Novel Infectious Agent” since 8 Jan 2020.

(Last updated on 28 January 2020)

**Countries/areas with reported cases of novel coronavirus infection**  
**(Last updated on February 18, 2020, 9 am)**

All information is based on that notified or reported by the National Health Commission, the Health Commission of Guangdong Province, Health Bureau of Macao Special Administrative Region, Taiwan Centers for Disease Control and health authorities of overseas countries.

- Number of cases in Mainland China: 72436 cases (as of February 17, 2020, 23:59), including 11741 cases in serious condition and 1868 death cases.
- Number of cases in other countries/areas: at least 433 cases

**Countries/areas with widespread community transmission of novel coronavirus infection**

Country/Area	Number of confirmed cases	Number of deaths among confirmed cases
Hubei Province, China	59989 (as of February 16, 2020, 23:59)	1789

**Other countries/areas that have reported cases of novel coronavirus infection:**

As of February 18, 2020, 9 am:

Mainland China	Number of confirmed cases	Number of deaths among confirmed cases#
Beijing	381	4
Liaoning	121	1
Anhui	982	6
Chongqing	553	5
Shaanxi	240	0
Tianjin	125	3
Fujian	292	0
Hunan	1007	4
Sichuan	508	3
Gansu	91	2
Heilongjiang	464	11
Jiangxi	930	1
Guangdong	1328	4
Guizhou	146	1
Shanghai	333	1
Shandong	543	2
Guangxi Zhuang Autonomous Region	242	2
Yunnan	171	0
Inner Mongolia Autonomous Region	72	0
Zhejiang	1172	0
Henan	1257	19
Hebei	302	4
Hainan	163	4
Jilin	89	1

Mainland China	Number of confirmed cases	Number of deaths among confirmed cases#
Shanxi	130	0
Ningxia Hui Autonomous Region	70	0
Jiangsu	629	0
Xinjiang Uygur Autonomous Region	76	1
Qinghai	18	0
Tibet Autonomous Region	1	0

# According to the latest available information

As of February 18, 2020, 9 am:

Other countries/areas	Number of confirmed cases*	Number of deaths among confirmed cases#
Hong Kong Special Administrative Region	60	1
Macao Special Administrative Region	10	0
Taiwan	22	1
Japan^	59	1
Korea	30	0
Thailand	35	0
Singapore	77	0
Vietnam	16	0
Nepal	1	0
Malaysia	22	0
United States	15	0
Australia	15	0
France	12	1
Canada	8	0
Germany	14	0
Sri Lanka	1	0
Cambodia	1	0
United Arab Emirates	9	0
Finland	1	0
The Philippines	3	1
India	3	0
Italy	3	0
United Kingdom	9	0
Russia	2	0
Sweden	1	0
Spain	2	0
Belgium	1	0
Egypt	1	0

\* Excluded asymptomatic cases: Germany (2 cases)

^ 454 cases were confirmed among passengers in a cruise ship

# According to the latest available information

**Distribution of pneumonia cases of novel coronavirus infection reported in Guangdong Province (as of February 17, 2020, 23:59)**

Areas	Number of confirmed cases	Number of deaths among confirmed cases#
Guangzhou	339	0
Shenzhen	416	2
Zhuhai	98	0
Shantou	25	0
Foshan	84	0
Shaoguan	10	0
Meizhou	16	0
Huizhou	59	0
Shanwei	5	0
Dongguan	91	1
Zhongshan	66	0
Yangjiang	13	0
Zhanjiang	22	0
Zhaoqing	18	1
Qingyuan	12	0
Jieyang	8	0
Heyuan	4	0
Jiangmen	23	0
Maoming	14	0
Chaozhou	5	0
Total	1328	4

# According to the latest available information

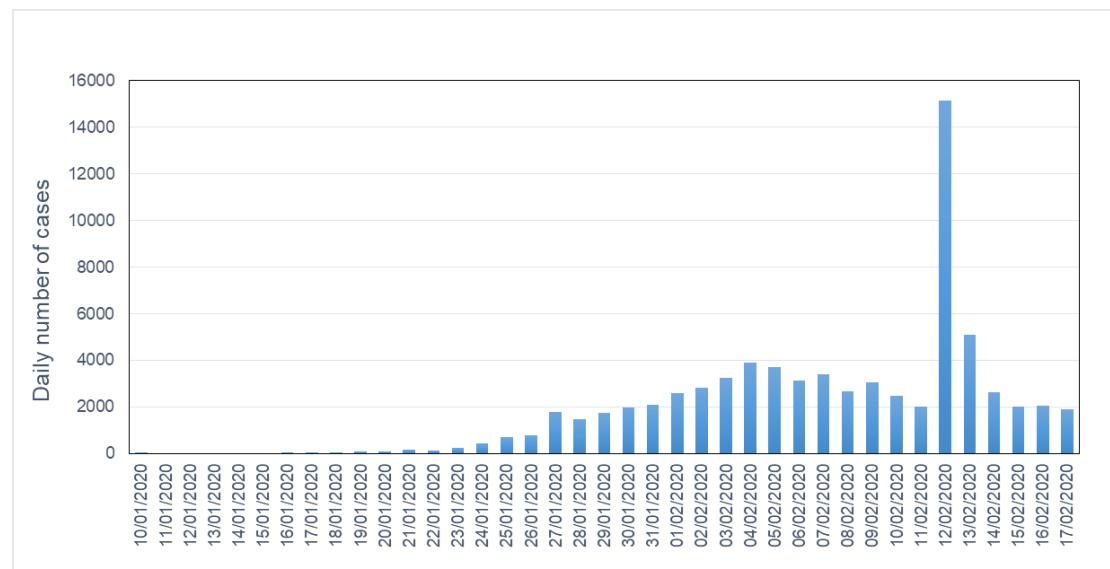


Figure 1 - Daily number of newly confirmed cases reported in Mainland China since January 10, 2020 (including cases based on clinical diagnosis from Hubei Province since February 12, 2020)

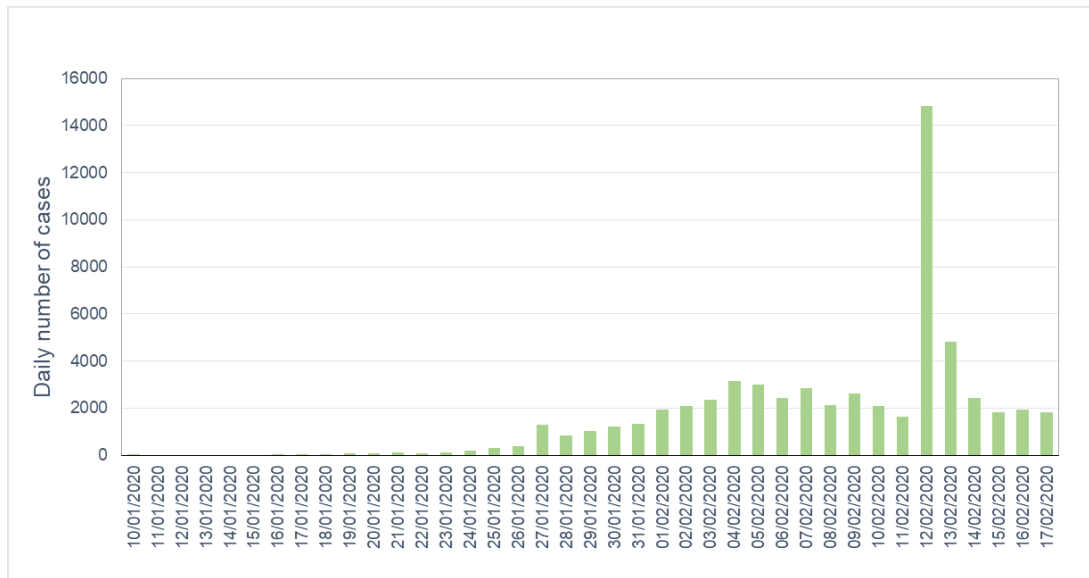


Figure 2 - Daily number of newly confirmed cases reported in Hubei Province since January 10, 2020

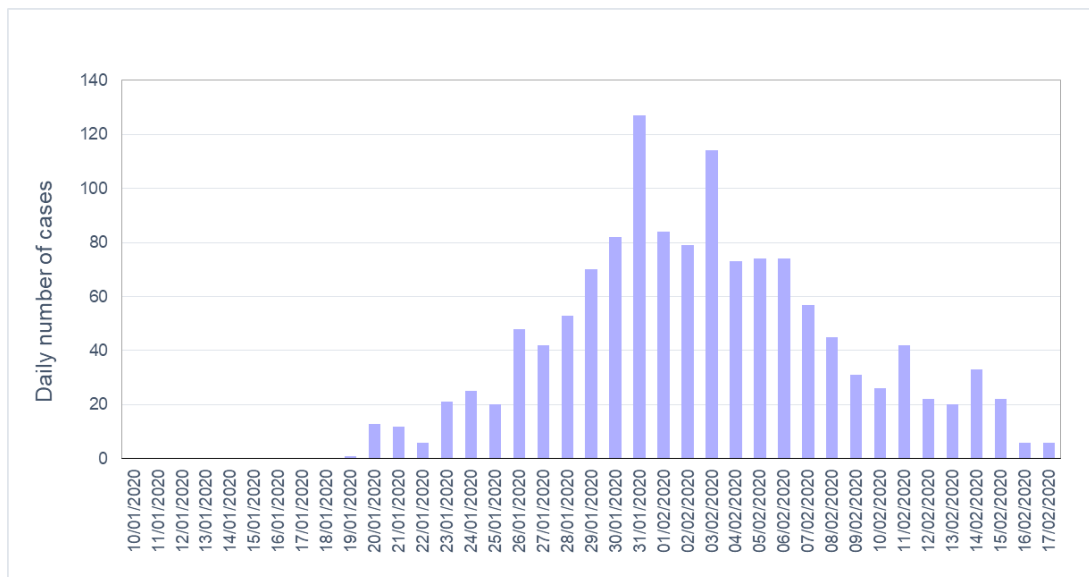


Figure 3 - Daily number of newly confirmed cases reported in Guangdong Province since January 10, 2020

**Chronology of Events in relation to  
the Outbreak of Novel Coronavirus Infection  
(as at 17 February 2020)**

<b>Date</b>	<b>Event</b>
31 December 2019 (Tuesday)	<ul style="list-style-type: none"><li>● The Department of Health (“DH”) received the first notification from the National Health Commission (“NHC”) about a cluster of 27 pneumonia cases with unknown causes (with seven cases being serious) in Wuhan, Hubei Province</li><li>● The Secretary for Food and Health (“SFH”) sought expert advice and alerted the public through media stand-up</li><li>● DH issued letters to doctors and hospitals on the latest situation</li><li>● Health surveillance at the boundary control points (“BCPs”) enhanced. Suspected cases were referred to public hospitals for lab testing and isolation</li></ul>
2 January 2020 (Thursday)	<ul style="list-style-type: none"><li>● SFH chaired a cross-bureaux/departments meeting to examine the prevention measures adopted in response to the cluster of pneumonia cases and to alert them in enhancing cleaning. A media stand-up was conducted after the meeting to provide health advice to the public and appeal to the public to stay alert</li></ul>
3 January 2020 (Friday)	<ul style="list-style-type: none"><li>● The Chief Executive (“CE”) and SFH inspected the BCP at Hong Kong West Kowloon Station of the Guangzhou-Shenzhen-Hong Kong Express Rail Link (“XRL”)</li><li>● SFH met with experts to seek advice on latest situation and risk assessment</li><li>● A dedicated website was launched by the Centre for Health Protection (“CHP”) of DH, announcing the number of suspected cases under the heightened surveillance system</li></ul>

Date	Event
	<ul style="list-style-type: none"> <li>● CHP strengthened port health measures and enhanced health promotion for travellers at all BCPs</li> </ul>
4 January 2020 (Saturday)	<ul style="list-style-type: none"> <li>● The Administration launched the Preparedness and Response Plan for Novel Infectious Disease of Public Health Significance (“the Plan”). In parallel, SFH activated the <b>Serious Response Level</b> with immediate effect</li> <li>● To tie in with the launch of the Plan, the Hospital Authority (“HA”) also announced the activation of the Serious Response Level in public hospitals with immediate effect</li> </ul>
6 January 2020 (Monday)	<ul style="list-style-type: none"> <li>● SFH chaired the first meeting of Steering Committee in accordance with the Serious Response Level under the Plan and engaged experts to review the situation in Wuhan and seek advice on risk assessment</li> </ul>
7 January 2020 (Tuesday)	<ul style="list-style-type: none"> <li>● SFH chaired a cross-bureaux/departments meeting to assess the latest situation and discuss prevention measures</li> <li>● SFH led a press conference to roll out the five major areas of works in preventing the diseases, including port health measures, the Plan, amendments to the the Prevention and Control of Disease Ordinance (Cap. 599), control measures of the HA and risk communications</li> </ul>
8 January 2020 (Wednesday)	<ul style="list-style-type: none"> <li>● “Severe Respiratory Disease associated with a Novel Infectious Agent” was gazetted as a statutorily notifiable disease under the Prevention and Control of Disease Ordinance (Cap. 599) and the Prevention and Control of Disease Regulation (Cap. 599A) starting from 8 January 2020</li> <li>● SFH attended the Legislative Council (“LegCo”) to respond to three urgent questions raised by LegCo Members</li> </ul>

<b>Date</b>	<b>Event</b>
9 January 2020 (Thursday)	<ul style="list-style-type: none"> <li>● SFH chaired a meeting and invited experts to discuss the latest developments of the cluster of pneumonia cases detected in Wuhan, followed by a press conference</li> </ul>
10 January 2020 (Friday)	<ul style="list-style-type: none"> <li>● SFH briefed the LegCo Panel on Health Services on the Government's measures in response to cluster of pneumonia cases</li> </ul>
11 January 2020 (Saturday)	<ul style="list-style-type: none"> <li>● SFH sought advice from experts on the latest situation</li> </ul>
12 January 2020 (Sunday)	<ul style="list-style-type: none"> <li>● NHC announced that it had shared the genetic sequences of the novel coronavirus associated with the cluster of pneumonia cases detected in Wuhan with the World Health Organization ("WHO")</li> </ul>
13 January 2020 (Monday)	<ul style="list-style-type: none"> <li>● Thailand confirmed the first imported case of novel coronavirus infection</li> <li>● The Under Secretary of Food and Health ("USFH"), together with representatives from the DH and the HA, departed for Wuhan to learn about the situation of the pneumonia cases, prevention and control measures and clinical management</li> <li>● HA started the Enhanced Laboratory Surveillance Scheme to conduct testing on pneumonia patients meeting relevant criteria as a measure for more proactive case finding</li> </ul>
14 January 2020 (Tuesday)	<ul style="list-style-type: none"> <li>● SFH chaired a cross-bureaux/departments meeting to review the latest situation and revisit the robustness of the current prevention and control measures</li> </ul>
15 January 2020 (Wednesday)	<ul style="list-style-type: none"> <li>● SFH convened an expert meeting and received report by the Hong Kong delegation that visited Wuhan</li> <li>● A press conference led by USFH was held to report on the working visit to Wuhan to examine the situation</li> </ul>

Date	Event
	concerning the cluster of pneumonia cases
16 January 2020 (Thursday)	<ul style="list-style-type: none"> <li>● SFH chaired the second meeting of Steering Committee in accordance with the Serious Response Level under the Plan</li> <li>● Japan confirmed the first imported case of novel coronavirus infection</li> <li>● CHP revised the reporting criteria of “Severe Respiratory Disease associated with a Novel Infectious Agent” to enhance the surveillance of suspected cases</li> </ul>
17 January 2020 (Friday)	<ul style="list-style-type: none"> <li>● SFH hosted a media stand-up to update the public on the latest situation</li> </ul>
20 January 2020 (Monday)	<ul style="list-style-type: none"> <li>● Korea confirmed the first imported case of novel coronavirus infection</li> <li>● CE joined SFH’s cross-bureaux/departments meeting to receive report on the latest situation and review preventive and control measures</li> <li>● SFH led a press conference to update the public on the latest situation and measures, including enhanced surveillance through extension of health declaration arrangement, the “containment” strategy and health advice on travelling</li> <li>● CHP further revised the reporting criteria of “Severe Respiratory Disease associated with a Novel Infectious Agent”</li> </ul>
21 January 2020 (Tuesday)	<ul style="list-style-type: none"> <li>● Taiwan confirmed the first imported case of novel coronavirus infection</li> <li>● SFH met with experts to review the latest situation in Wuhan</li> <li>● Health declaration arrangement implemented on all inbound travellers by air from Wuhan starting from midnight</li> </ul>

Date	Event
<p>22 January 2020 (Wednesday)</p>	<ul style="list-style-type: none"> <li>● The <b>first highly suspected imported case</b> of novel coronavirus infection was reported in <b>Hong Kong</b></li> <li>● SFH held a media stand-up to update the public on the latest situation</li> <li>● CHP set up a hotline (2125 1122) for contact tracing</li> <li>● Hong Kong residents were strongly advised to avoid all non-essential travel to Wuhan, Hubei Province and stay vigilant</li> </ul>
<p>23 January 2020 (Thursday)</p> <p>[No. of confirmed cases in Hong Kong: 2]</p>	<ul style="list-style-type: none"> <li>● The second highly suspected imported case of novel coronavirus infection was reported in Hong Kong</li> <li>● On the same day, <b>the two imported cases of novel coronavirus infection has been confirmed</b></li> <li>● <b>Quarantine centre</b> at The Lady MacLehose Holiday Village under the Leisure and Cultural Services Department <b>activated</b> and close contacts would be transferred to the village for quarantine</li> <li>● Daily media briefing by CHP and HA started</li> <li>● SFH chaired the third meeting of Steering Committee, with the Chief Secretary for Administration (“CS”) in attendance, in accordance with the Plan. A press conference led by CS was held afterwards</li> </ul>
<p>24 January 2020 (Friday)</p>	<ul style="list-style-type: none"> <li>● The health declaration system was extended to cover the Hong Kong West Kowloon Station of XRL</li> <li>● Flights and high-speed train services between Hong Kong and Wuhan suspended</li> </ul>
<p>25 January 2020 (Saturday)</p> <p>[No. of confirmed cases in Hong Kong: 4]</p>	<ul style="list-style-type: none"> <li>● CE announced <b>activation of Emergency Response Level</b> under the Plan with immediate effect and set up four working groups</li> <li>● CE held a press conference and announced the following strategies: (a) enhancing mechanism and organisation structure to tackle disease; (b) strengthening immigration control, including expanding the arrangements of health declarations by incoming travellers from the Mainland as soon as</li> </ul>

Date	Event
	<p>possible to all BCPs; (c) minimising risks of virus infection and spreading in local community, including extending the Chinese New Year holidays of secondary schools, primary schools, kindergartens, child care centres and special schools so that they would resume classes not earlier than 17 February; (d) enhancing personal hygiene of the public and issuing guidelines; (e) improving anti-epidemic facilities and services; (f) allocating sufficient resources for the strategies and measures</p> <ul style="list-style-type: none"> <li>● To tie in with the Government raising response level to “Emergency”, HA also announced the activation of the Emergency Response Level in public hospitals with immediate effect to implement a series of measures to enhance infection control and focus resources to cope with the epidemic</li> </ul>
26 January 2020 (Sunday)	<ul style="list-style-type: none"> <li>● CE chaired the <b>first meeting of Steering Committee cum Command Centre</b> in accordance with the Emergency Response Level under the Plan</li> </ul>
27 January 2020 (Monday)  [No. of confirmed cases in Hong Kong: 8]	<ul style="list-style-type: none"> <li>● CE chaired the second meeting of Steering Committee cum Command Centre in accordance with the Emergency Response Level under the Plan</li> <li>● Except for Hong Kong residents, residents from Hubei Province and persons who visited the Hubei Province in the past 14 days were <b>not permitted to enter</b> Hong Kong until further notice</li> </ul>
28 January 2020 (Tuesday)	<ul style="list-style-type: none"> <li>● CE chaired the third meeting of Steering Committee cum Command Centre in accordance with the Emergency Response Level under the Plan</li> <li>● Through a press conference, the Government further announced seven disease prevention and control measures: (a) significantly reducing the flow of people between the Mainland and Hong Kong, including reduction and suspension of transport and BCP</li> </ul>

Date	Event
	<p>services; (b) adjusting fee charging policy for Non-eligible Persons by HA; (c) reducing the flow and contacts of people in Hong Kong, including appealing to employers to make flexible work arrangements for employees in accordance with their operational needs; (d) assisting Hong Kong residents in Hubei; (e) reaching out to hotels through the hotel industry and Hong Kong Tourism Board to contact travellers from Hubei province, for follow-up by the CHP; (f) continuing to identify suitable places to serve as quarantine centre facilities and other purposes; (g) worldwide procurement in order to ensure adequate supply for tackling the disease</p>
<p>29 January 2020 (Wednesday)</p> <p>[No. of confirmed cases in Hong Kong: 10]</p>	<ul style="list-style-type: none"> <li>● The Commerce and Economic Development Bureau and relevant government departments met members of local chambers of commerce and the retail industry to learn more about the situation of the supply of surgical masks and problems encountered by importers and retailers</li> <li>● The health declaration system was extended to all inbound flights from the Mainland</li> <li>● The Immigration Department (“ImmD”) reached out to hotels, hostels and guesthouses to contact travellers from Hubei Province and give them relevant health advice</li> </ul>
<p>30 January 2020 (Thursday)</p>	<ul style="list-style-type: none"> <li>● CE chaired the fourth meeting of Steering Committee cum Command Centre in accordance with the Emergency Response Level under the Plan</li> <li>● <b>WHO</b> declared that the outbreak of the novel coronavirus constituted a <b>Public Health Emergency of International Concern</b> (“PHEIC”)</li> <li>● CE met with Expert Advisory Panel to seek their expert advice</li> <li>● SFH attended the special meeting of the LegCo Panel on Health Services to brief Members on the latest</li> </ul>

Date	Event
	<p>situation</p> <ul style="list-style-type: none"> <li>● With effect from 30 January 2020, (1) cross-boundary coach, hire car and private car using Sha Tau Kok and Man Kam To Control Points were suspended due to the suspension of the immigration clearance service; (2) all services of the Hong Kong Section of the Guangzhou-Shenzhen-Hong Kong XRL and Intercity Through Train, and (3) cross-boundary ferry services of China Ferry Terminal and Tuen Mun Ferry Terminal were suspended</li> </ul>
<p>31 January 2020 (Friday)</p> <p>[No. of confirmed cases in Hong Kong: 13]</p>	<ul style="list-style-type: none"> <li>● Through a press conference led by CE, the Government announced measures to further prevent and control the spread of the disease: (a) suspending classes at all schools in Hong Kong with class resumption no earlier than 2 March; (b) special work arrangements for government departments would be extended until 9 February; (c) all Hong Kong residents who have visited Hubei Province in the past 14 days should approach staff of the DH's Port Health Division for relevant assessment upon their arrival and would be arranged to stay in quarantine centres for surveillance; (d) for those Hubei residents who have already entered and were still staying in Hong Kong, DH would also arrange for them to stay in quarantine centres or, if asymptomatic, to leave Hong Kong as soon as possible; (e) enhancing exit screening and health declaration; (f) all-out efforts to support front-line healthcare staff; (g) increasing supply of surgical masks through a multi-pronged approach</li> </ul>
<p>1 February 2020 (Saturday)</p>	<ul style="list-style-type: none"> <li>● Exit screening arrangement introduced in the Hong Kong International Airport</li> </ul>
<p>2 February 2020 (Sunday)</p>	<ul style="list-style-type: none"> <li>● CE chaired the fifth meeting of Steering Committee cum Command Centre in accordance with the Emergency Response Level under the Plan</li> </ul>

Date	Event
[No. of confirmed cases in Hong Kong: 15]	<ul style="list-style-type: none"> <li>● CE wrote to Consuls-General in Hong Kong and CS met them to explain in detail the measures taken by Hong Kong in disease prevention and control</li> </ul>
3 February 2020 (Monday)	<ul style="list-style-type: none"> <li>● CE led a press conference, attended by relevant Bureaux Secretaries and Heads of Department, on the stepping up of control measures. CE appealed to the public that the spread of virus occurred regardless of race, nationality and residency status, and that the flow of people across the border should be reduced as much as possible</li> </ul>
4 February 2020 (Tuesday)	<ul style="list-style-type: none"> <li>● Cross-boundary passengers by land or by sea converged to Shenzhen Bay control point and Hong Kong-Zhuhai-Macao Bridge (“HZMB”) Hong Kong Port</li> <li>● Passenger clearance services further suspended at <b>four control points</b>, namely Lo Wu, Lok Ma Chau Spur Line, Lok Ma Chau and Hong Kong-Macau Ferry Terminal. Cross-boundary coach, shuttle bus, hire car and private car using Lok Ma Chau Control Point were suspended</li> <li>● CE met with Expert Advisory Panel to seek their expert advice</li> </ul>
5 February 2020 (Wednesday)  [No. of confirmed cases in Hong Kong: 21]	<ul style="list-style-type: none"> <li>● A 14-day <b>mandatory quarantine arrangement</b> on all the people entering Hong Kong from the Mainland <b>announced</b>. The new subsidiary legislation was gazetted as Cap. 599C</li> <li>● Customs, immigration and quarantine services at Kai Tai Cruise Terminal and Ocean Terminal suspended</li> <li>● The health declaration system extended to HZMB, Man Kam To (Cargo) and Shau Tau Kok (Cargo)</li> <li>● The Food and Health Bureau (“FHB”) attended the Sham Shui Po District Council to explain the arrangement and justification of using the Jao Tsung-I Academy as quarantine centre</li> </ul>

Date	Event
	<ul style="list-style-type: none"> <li>● CHP's Port Health Division conducted health quarantine work on the "World Dream" cruise where some travellers from the Mainland were confirmed to have been infected with the novel coronavirus</li> <li>● CE led a press conference, attended by relevant Bureaux Secretaries and Heads of Department, to explain the new policy of mandatory quarantine arrangement, amongst others</li> </ul>
6 February 2020 (Thursday)  [No. of confirmed cases in Hong Kong: 24]	<ul style="list-style-type: none"> <li>● The Education Bureau announced two possible options for the Hong Kong Diploma of Secondary Education Examination. Further assessment would be made towards the end of February</li> </ul>
7 February 2020 (Friday)  [No. of confirmed cases in Hong Kong: 26]	<ul style="list-style-type: none"> <li>● The Government published in the Gazette the Compulsory Quarantine of Certain Persons Arriving at Hong Kong Regulation<sup>1</sup> and the Prevention and Control of Disease (Disclosure of Information) Regulation<sup>2</sup>. The two Regulations would be effective on 0:00 a.m. 8 February</li> <li>● CE met with Expert Advisory Panel to seek their expert advice</li> <li>● CS led a press conference, attended by relevant Bureaux Secretaries and Heads of Department, to update the public of the implementation of mandatory quarantine arrangement</li> </ul>
8 February 2020 (Saturday)	<ul style="list-style-type: none"> <li>● A media stand-up by CE was conducted to brief the public on the enhanced control measures</li> <li>● FHB, DH and other relevant government departments</li> </ul>

<sup>1</sup> The Compulsory Quarantine of Certain Persons Arriving at Hong Kong Regulation provides that all persons having stayed in the Mainland for any period during the 14 days preceding arrival in Hong Kong, regardless of nationality and travel documents used, would be subject to compulsory quarantine for 14 days

<sup>2</sup> The Prevention and Control of Disease (Disclosure of Information) Regulation empowers a health officer to require a person to disclose or furnish any information relevant to the handling of a state of the public health emergency, such as travel history. The relevant power is extended to other medical practitioners who would encounter with a person involved in such public health emergency

Date	Event
	<p>had met with representatives from the cruise company</p> <ul style="list-style-type: none"> <li>● DH had earlier taken specimens from symptomatic crew members and passengers of the “World Dream” cruise for test on novel coronavirus. Upon relevant experts’ advice, the Government decided to conduct tests on novel coronavirus for 1 800 odd crew members on board</li> <li>● The Government explained to residents in the neighbourhood on the arrangement for using Chun Yeung Estate as a quarantine centre</li> <li>● CE visited the BCPs and call centres to observe the implementation of the compulsory mandatory arrangement as well as the Public Health Laboratory Centre which tested the specimens of crew members of the “World Dream” cruise</li> </ul>
<p>9 February 2020 (Sunday)</p> <p>[No. of confirmed cases in Hong Kong: 36]</p>	<ul style="list-style-type: none"> <li>● The Public Health Laboratory Services Branch of DH completed tests on the novel coronavirus for 1 800 odd crew members on the “World Dream” cruise. All samples were tested negative for the novel coronavirus. All guests on board disembarked</li> <li>● Representatives from FHB, DH and the Housing Department briefed members of the Sha Tin District Council about the arrangement and justifications of using Chun Yeung Estate as a quarantine centre</li> <li>● CE, accompanied by SFH, visited the Hong Kong International Airport and HZMB</li> </ul>
<p>10 February 2020 (Monday)</p> <p>[No. of confirmed cases in Hong Kong: 42]</p>	<ul style="list-style-type: none"> <li>● CE chaired the sixth meeting of Steering Committee cum Command Centre in accordance with the Emergency Response Level under the Plan</li> <li>● SFH led a press conference to communicate with the public on the mandatory home quarantine measure</li> <li>● The 42<sup>nd</sup> confirmed case was found to be residing at the same A07 unit of Hong Mei House, Cheung Hong Estate as the 12<sup>th</sup> confirmed case, albeit on different floors. Upon a site visit with the advice of Prof Yuen</li> </ul>

Date	Event
	<p>Kwok-yung, CHP observed that the possibility of disconnected vent pipes without proper sealing triggering the spread of the virus could not be ruled out. Evacuation was immediately arranged and about 100 residents from 30 plus households were transferred to quarantine centres. Prof Yuen Kwok-yung joined two media briefings to explain his assessment of the incident</p> <ul style="list-style-type: none"> <li>● Representatives from FHB, DH and the Housing Department briefed the Sha Tin District Council at its special meeting about the arrangement and justifications for using Chun Yeung Estate as a quarantine centre</li> </ul>
<p>12 February 2020 (Wednesday)</p> <p>[No. of confirmed cases in Hong Kong: 50]</p>	<ul style="list-style-type: none"> <li>● Persons under compulsory quarantine who failed to share their real-time locations with their mobile phones at the boundary control points would be requested to wear electronic wristbands with a view to monitoring whether they are staying at the dwelling places</li> </ul>
<p>13 February 2020 (Thursday)</p> <p>[No. of confirmed cases in Hong Kong: 53]</p>	<ul style="list-style-type: none"> <li>● The Government announced that the special work arrangement for government departments would be extended until 23 February in order to reduce social contacts and the risk of the spread of the novel coronavirus in the community</li> <li>● The Education Bureau announced that all schools in Hong Kong would not resume classes before 16 March</li> <li>● CE met with Expert Advisory Panel to seek their expert advice</li> </ul>
<p>14 February 2020 (Friday)</p> <p>[No. of confirmed cases in Hong Kong: 56]</p>	<ul style="list-style-type: none"> <li>● The Government announced that ImmD and the Hong Kong Economic and Trade Office (Tokyo) would assist Hong Kong residents quarantined on the “Diamond Princess” cruise ship</li> <li>● SFH attended a meeting with the Chairperson/Vice-Chairperson of the District Councils to brief them on</li> </ul>

Date	Event
	the latest Government actions in combating the disease and addressing their questions and concerns
15 February 2020 (Saturday)	<ul style="list-style-type: none"> <li>● CE chaired the seventh meeting of Steering Committee cum Command Centre in accordance with the Emergency Response Level under the Plan</li> <li>● The Government announced that it was arranging chartered flight to take the Hong Kong residents quarantined on the cruise back to Hong Kong free of charge as soon as possible after they are permitted to disembark and land.</li> </ul>
16 February 2020 (Sunday)  [No. of confirmed cases in Hong Kong: 57]	<ul style="list-style-type: none"> <li>● CE, accompanied by SFH, inspected anti-epidemic work at various locations including the Junior Police Call activity centre in Pat Heung, the Shenzhen Bay Control Point and the Infectious Disease Centre of Princess Margaret Hospital</li> </ul>