



菲 臘 牙 科 醫 院

The Prince Philip Dental Hospital

管 理 局 年 報

ANNUAL REPORT THE BOARD OF GOVERNORS

2021 - 22

香港西營盤醫院道 34 號

34 Hospital Road, Sai Ying Pun, Hong Kong

www.ppdh.org.hk

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菲 臘 牙 科 醫 院

本 院 使 命

- (1) 成為地區之卓越牙科教學、研究及診治醫院；配合香港大學牙醫學院領先培訓牙醫及牙科輔助人員，使其成為有愛心、盡責及具備專業資格的牙科隊伍成員；
- (2) 支援高質素研究及提供設施，以推動本港的牙科持續教育；
- (3) 充分利用現有資源建設良好工作環境，以吸引及激勵員工，在口腔衛生護理界充分發揮潛能；
- (4) 與社區攜手合作，促進市民對牙齒護理之認識及明白其重要性；及
- (5) 與牙科業界緊密合作，為社會上有特別需要的人士提供服務；並與中國內地研究及學術交流方面，更緊密合作。

THE PRINCE PHILIP DENTAL HOSPITAL

MISSION STATEMENT

- (1) To be a Centre of Excellence for dental education, research and dental care in the region; supporting the Faculty of Dentistry of the University of Hong Kong (“HKU”) to take the lead in training of dental and para-dental students to become caring, dedicated and well-qualified members of the dental team;
- (2) To support high quality research and provide facilities for continuing dental education in Hong Kong;
- (3) To fully utilise available resources, creating an environment to attract and motivate staff; maximising their potential within the oral health care environment;
- (4) To promote community partnership in raising the awareness and the importance of dental care; and
- (5) To develop closer collaboration with the private sector for special needs groups, and with Mainland China for research and academic exchanges.

菲臘牙科醫院

2021 年 4 月 1 日至 2022 年 3 月 31 日

管理局之活動報告

簡介

菲臘牙科醫院管理局（下稱「管理局」）是根據 1981 年制定的菲臘牙科醫院條例（第 1081 章）成立，負責營運和管理菲臘牙科醫院（下稱「本院」）。本院為香港大學牙醫學院（下稱「學院」）提供設施，以助其培訓牙醫。此外，本院亦協助訓練其他牙科輔助人員。

2. 管理局的日常事務多由其轄下之「編制及財務委員會」於會議中處理，也透過文件傳閱來審議。由院長出任主席的「策劃委員會」，負責制定本院的主要臨床及教學活動計劃，並就本院策略性的規劃及發展向編制及財務委員會和管理局作出建議，以及監督變革的執行。**附頁甲、乙及丙**分別詳列了管理局、編制及財務委員會和策劃委員會於本報告年度之委員名單。

於本院進行的培訓活動

(I) 學院舉辦之課程

3. 53 名畢業生於 2021 年 12 月成功獲取了牙醫學士學位。在報告年度中有 13 名研究生分別獲頒下列學位：

<u>學位[#]</u>	<u>人數</u>
哲學碩士研究學位	1
哲學博士研究學位	12

[#] 不包括學院轄下先進牙醫學研究所-牙醫專科診所（下稱「牙醫專科診所」）面授碩士課程畢業生。該等課程自 2020 年 10 月起已停止於本院進行授課。

THE PRINCE PHILIP DENTAL HOSPITAL

REPORT ON THE ACTIVITIES BY THE BOARD OF GOVERNORS

for the Year of 1 April 2021 to 31 March 2022

Introduction

The Board of Governors of The Prince Philip Dental Hospital (“the Board”) was established under The Prince Philip Dental Hospital Ordinance (Cap. 1081) enacted in 1981 for the management and administration of The Prince Philip Dental Hospital (“the Hospital” or “PPDH”). The Hospital provides facilities for the training of dentists by the Faculty of Dentistry of The University of Hong Kong (“the Faculty”) and other dental ancillary personnel.

2. Operational matters of the Board are mainly dealt with by the Board’s Establishment and Finance Committee (“the EFC”) at meetings or by circulation of Papers. The Planning Group, under the chairmanship of the Director, sets out the key clinical and teaching activity plans of PPDH, makes recommendations on the strategic development and planning of the Hospital to the EFC and the Board, and oversees the progress of implementation of changes. The compositions of the Board, the EFC and the Planning Group during the year of this Report are listed at **Appendices A, B and C** respectively.

Training Activities in the Hospital

(I) Courses Organised by the Faculty

3. In December 2021, Bachelor of Dental Surgery (“BDS”) degrees were conferred on 53 graduates who had successfully completed their course of study. Meanwhile, 13 postgraduate students obtained their second degrees with the following distribution:

<u>Degree *</u>	<u>Student Number</u>
Master of Philosophy	1
Doctor of Philosophy	12

* Excluding graduates of the taught postgraduate programmes organised by the Faculty’s Institute for Advanced Dentistry - Multi-Specialty Clinic which ceased to be conducted in PPDH from October 2020.

4. 在 2022 年 3 月 31 日，牙醫本科學生有 452 人，其學生人數分佈為：

<u>年級</u>	<u>人數</u>
一年級	81
二年級	78
三年級	76
四年級	73
五年級	69
六年級	75

此外，還有 100 位研究生攻讀下列學位課程：

<u>課程</u>	<u>人數</u>
哲學碩士研究學位	5
哲學博士研究學位	95

(II) 本院獲學院及/或其他機構協助舉辦之課程

5. 一年全日制或兩年日間兼讀制之「牙科手術助理員課程」是本院自 1982 年起在學院協助下所舉辦的課程。由 2015/16 學年起，該課程的資歷名銜已更改為「牙科手術助理員文憑」。於 2021 年 12 月，共有 16 名修畢全日制課程的學員獲頒授相關文憑。在 2022 年 3 月 31 日，有 19 位全日制學員正在攻讀為期一年的課程。

4. As at 31 March 2022, 452 undergraduates were under training for Bachelor Degree of Dental Surgery and the student distribution was:

<u>Year</u>	<u>Student Number</u>
First Year	81
Second Year	78
Third Year	76
Fourth Year	73
Fifth Year	69
Sixth Year	75

In addition, 100 postgraduate students were studying the following degree courses:

<u>Course</u>	<u>Student Number</u>
Master of Philosophy	5
Doctor of Philosophy	95

(II) Courses Organised with the support of the Faculty and/ or Other Organisations

5. The one-year full-time or two-year part-time day release course in Dental Surgery Assisting has been organised with the support of the Faculty since 1982. Starting from the 2015/16 Academic Year, the title of the award has been changed to "Diploma in Dental Surgery Assisting". In December 2021, 16 full-time students graduated with the award of the Diploma in Dental Surgery Assisting. As at 31 March 2022, there were 19 full-time students attending the training of the one-year Diploma course.

6. 自 2002 年 9 月起，本院在香港大學專業進修學院及學院協助下舉辦兩年全日制的「牙科衛生護理高級文憑課程」。在 2022 年 2 月，共有 27 名完成培訓的學員獲頒發有關高級文憑。於 2022 年 3 月 31 日，分別有 35 名及 31 名學員修讀第一及第二學年課程。

7. 此外，本院與香港大學專業進修學院亦由 2016 年 6 月起舉辦一年全日制的「牙科治療高等文憑課程」。於 2021 年末，共有 9 名學員修畢課程並獲頒授相關高等文憑。在 2022 年 3 月 31 日，則有 12 名學員攻讀該課程。

(III) 本院獨自舉辦之課程

8. 本院自 1993 年起舉辦了兩年全日制之牙科工藝課程。由 2015/16 學年開始，該課程的資歷名銜已更改為「牙科工藝高等文憑」。於 2021 年 12 月，共有 13 名修畢兩年制課程的學員獲頒授有關資歷。在 2022 年 3 月 31 日，分別有 15 名及 10 名學員修讀第一及第二學年的課程。

9. 上述各課程於過去三屆財政年度之表現趨勢，包括畢業人數及註冊入學人數，已列載於**附頁丁**。

特殊護理牙科訓練課程

10. 除上述四個學歷頒授課程外，本院亦會應要求開辦一個不涉及資歷頒授的特殊護理牙科課程，課程側重於智障病人的行為管理。此外，本院於報告年度內繼續為參加政府「護齒同行」智障人士牙科服務計劃的非政府機構作出指導及提供所需協助。

6. The two-year full-time course of Higher Diploma in Dental Hygiene has been organised by the Hospital with the support of HKU SPACE and the Faculty since September 2002. In February 2022, 27 students who completed the two-year study were awarded the qualification. As at 31 March 2022, 35 and 31 Student Dental Hygienists were under training for the first and second years of study respectively.

7. The Hospital has also been collaborating with HKU SPACE to organise a one-year full-time Advanced Diploma Course in Dental Therapy since June 2016. At the year end of 2021, there were a total of 9 students who completed the course and were awarded the concerned Advanced Diploma. As at 31 March 2022, 12 students were studying in the course.

(III) Course Organised by the Hospital

8. The two-year full-time course in Dental Technology has been organised by the Hospital since 1993. Starting from the Academic Year 2015/16, the title of the award has been changed to “Advanced Diploma in Dental Technology”. In December 2021, 13 students graduated from the two-year training course with the award of the qualification. As at 31 March 2022, there were 15 and 10 Student Dental Technicians pursuing the first and second years of study respectively.

9. A summary of the performance trend of all courses in the past three financial years including the number of students graduated from and the number of students enrolled in each of the courses is shown at **Appendix D**.

Training in Special Care Dentistry

10. Apart from the four award-bearing courses, the Hospital will, upon request, organise a non-award bearing course on special care dentistry. The course focused on behavioural management of patients with intellectual disability. In addition, the Hospital continued to provide guidance and support to those non-government organisations participating in the Government’s Healthy Teeth Collaboration, i.e. a project on dental services for persons with intellectual disability, during the reporting period.

研究活動

11. 牙醫學院自 2020 年 11 月起於醫院五樓成立一所臨床研究中心，以進行政府資助及非政府資助的研究項目。除了學院病人，醫院病人亦會被邀請參與中心的研究項目。醫院與牙醫學院並於同年 11 月簽署管理臨床研究中心之合作備忘錄。此外，就收回非政府資助研究項目成本費用的細則，牙醫學院亦與政府簽訂了相關協議。

知識交流活動

12. 本院一直以來積極參與不同的國際性牙科會議、講座及研討會，藉以分享知識，與時並進，掌握最新的牙科技術及樹立良好的病人護理典範。於報告年度內，本院繼續鼓勵員工參與香港國際牙科博覽暨研討會，以及香港貿發局香港國際醫療及保健展，亦有透過線上職業講座向本地中學生介紹牙科輔助人員的資訊。因疫情持續，本院今年沒有安排海外知識交流活動，以減少職員和學生感染的風險。展望未來，本院計劃於疫情緩和後恢復參與國際性的會議及論壇。另外，在員工培訓方面，本院積極搜羅及安排不同的面授或網上訓練課程，以提升員工各方面的專業知識及技術水平，包括急救及護理培訓、數碼牙科打印技術、投訴管理、領袖培訓、護理及傷口處理、消毒及除污、化學品處理、醫療事故調解等多個範疇。

參觀本院之人士

13. 為與各界緊密合作，本院過往會接待不同人士並向參觀者展示及講解其設施、服務和課程。惟本院為配合防疫安排，於報告年度內已暫停接受參觀。

培訓活動所診治之病人

14. 在本報告年度，本院新登記或重新登記之教學病人共有 8,758 名，當中包括 7,350 名成人（其中 468 名來自本院自 2021 年 5 月起試行的年青病人計劃，旨在為本科生提供簡單治療個案）及 1,408 名小童。同年度，各部門及單位的總診症人次為 75,608。

Research Activities

11. The Faculty established a Clinical Research Centre (“CRC”) on the fifth floor of the Hospital since November 2020 for conducting government funded as well as non-government funded research projects for which Hospital teaching patients may be invited to participate other than Faculty’s patients. A Memorandum of Understanding on the management of the CRC was signed between the Hospital and the Faculty in November 2020; and an Agreement to recover the costs for non-government funded research was also signed between the Government and the Faculty.

Knowledge Exchange Activities

12. The Hospital has been actively participating in different international conferences, seminars and symposiums for knowledge sharing and to keep abreast of new dental technology and best practices on patient care. During the reporting year under the pandemic, the Hospital continued to encourage staff to participate in the Hong Kong International Dental Expo and Symposium as well as the Hong Kong International Medical and Healthcare Fair of the Hong Kong Trade Development Council. The Hospital also organised online career talks for local secondary school students to provide them with an overview of dental ancillary personnel. In the midst of the ongoing pandemic, no overseas knowledge exchange activities were arranged this year to minimise the risk of infection amongst Hospital staff and students. Looking ahead, the Hospital plans to resume its participation in international forums once the pandemic situation has improved. Additionally, the Hospital endeavoured to source different in-house or online training programmes to enhance the professional knowledge of staff, covering areas like first-aid and medical training, application of 3D printing in digital dentistry, complaint management, leadership development, nursing and wound management, sterilisation and decontamination, chemicals treatment and medical mediation.

Visitors to the Hospital

13. To foster closer collaboration with different sectors, the Hospital used to receive visitors and give demonstrations and briefings on Hospital facilities, services and courses. Nonetheless, the Hospital suspended all visits in the reporting year to tie in with the anti-epidemic arrangement.

Patients Treated under Training Activities

14. During the reporting period, 8,758 teaching patients were newly registered or re-registered at the Hospital, including 7,350 adults (of which 468 came from the Hospital’s Young Patients Scheme first launched in May 2021 to provide simple cases for treatment by BDS students) and 1,408 children. The total number of patient attendances at various clinics and units throughout the period was 75,608.

財務及其他資訊

15. 於 2022 年 3 月 31 日，醫院編制有 367 個職位。
16. 本院根據菲臘牙科醫院條例第 16 條呈交經已簽署與審計的 2021-22 財政年度帳目報表。本年度的總經常開支 219,590,436 元。同年，用於維修工程和設備上之資本總開支為 16,986,534 元，全由政府資本補助金資助。全年總收入共 221,841,914 元，其中包括政府經常資助金 209,692,336 元及其他收入 12,149,578 元。
17. 在本報告年度，本院豁免病人收費總額為 505,945 元。
18. 繼本院管理局通過由 2018-19 財政年度起政府撥款由不敷補助金轉變為酌情補助金模式後，管理局與食物及衛生局簽訂的「行政安排備忘錄」已於 2018 年 4 月 1 日生效，釐定在新撥款模式下政府與本院的關係及各自責任。本院已於報告年內採取相關措施，以符合行政安排備忘錄的規定。

Financial and Other Information

15. The Hospital establishment stood at 367 posts as at 31 March 2022.

16. The signed and audited statement of accounts for 2021-22 is submitted in accordance with Section 16 of The Prince Philip Dental Hospital Ordinance. The total recurrent expenditure for the year was \$219,590,436. During the same period, the total capital expenditure on works and equipment was \$16,986,534 which was fully funded by the Government's capital subvention. The total revenue for the year was \$221,841,914 including the Government's recurrent subvention of \$209,692,336 and other source of income of \$12,149,578.

17. The total amount of patient fees waived for the reporting year was \$505,945.

18. Following the approval of the Board of Governors of the Hospital ("the Board") to change the subvention mode from deficiency grant to discretionary grant from the 2018-19 financial year onwards, the Board and the Food and Health Bureau signed a Memorandum of Administrative Arrangements ("MAA") which sets out the relationship between the Government and the Hospital, and the responsibilities of each party under the new subvention mode with effect from 1 April 2018. The Hospital has taken out relevant measures to ensure compliance with the MAA during the reporting year.

**菲 臘 牙 科 醫 院
管 理 局**

**THE PRINCE PHILIP DENTAL HOSPITAL
BOARD OF GOVERNORS**

2021 年 4 月 1 日至 2022 年 3 月 31 日 – 成員名單
Membership – 1 April 2021 to 31 March 2022

主席 王桂壘先生, SBS, JP Mr. K.H. WONG, SBS, JP
Chairman :

成員 **非公職人員 Non-public Officers**
Members :

陳繼宇博士, MH, JP Dr. J.K.Y. CHAN, MH, JP

劉恩沛女士 Miss Q.F. LAU

謝秀玲女士, JP Ms. N.S.L. TSE, JP

註冊牙醫 (非公職人員) Registered Dentists (Non-public Officers)

傅大全牙科醫生 Dr. E.T.C. FOO

劉建均牙科醫生 Dr. K.K.K. LAU

香港大學成員 Members of the University of Hong Kong

傅立明教授 Professor T.F. FLEMMIG

羅哲基先生 Mr. S.C.K. LO

雷操爽教授
(至 2021 年 10 月 12 日) Professor J.C.Z. LUI
(up to 12 October 2021)

顏慶雲教授 Professor A.H.W. NGAN

黃穎兒醫生
(從 2021 年 10 月 13 日起) Dr. V.W.Y. WONG
(from 13 October 2021)

食物及衛生局副秘書長 (或其代表)
Deputy Secretary for Food and Health (or his representative)

蔡傑銘先生, JP

Mr. K. CHOI, JP

教育局首席助理秘書長 (或其代表)
Principal Assistant Secretary for Education (or his representative)

賴子堅先生

Mr. D.C.K. LAI

衛生署助理署長 (或其代表)
Assistant Director of Health (or her representative)

黃慧敏女士, JP

Miss W.W.M. WONG, JP

衛生署牙科服務主任顧問醫生 (或其代表)
Consultant i/c Dental Services, Department of Health (or his representative)

林德昭醫生, JP

Dr. W.T.C. LAM, JP

當然成員 **菲臘牙科醫院院長 Director, The Prince Philip Dental Hospital**

Ex-officio Members :	湯迅教授 (至 2021 年 6 月 30 日)	Professor P. THOMSON (up to 30 June 2021)
	姚嘉榕教授 (從 2021 年 7 月 1 日起)	Professor C.K.Y. YIU (from 1 July 2021)

菲臘牙科醫院審計主任
Comptroller, The Prince Philip Dental Hospital

黃紉蘭女士

Ms. E.Y.L. WONG

以上所有成員(當然成員除外)是由食物及衛生局局長根據菲臘牙科醫院條例第五條獲行政長官授權委任。

The above Members (excluding ex-officio members) were appointed by the Secretary for Food and Health under the power delegated by the Chief Executive under Section 5 of The Prince Philip Dental Hospital Ordinance.

**菲臘牙科醫院
編制及財務委員會**

**THE PRINCE PHILIP DENTAL HOSPITAL
ESTABLISHMENT AND FINANCE COMMITTEE**

2021 年 4 月 1 日至 2022 年 3 月 31 日 – 成員名單
Membership – 1 April 2021 to 31 March 2022

主席
Chairman : 劉建均牙科醫生 Dr. K.K.K. LAU

成員
Members : **非公職人員 Non-public Officers**

劉恩沛女士 Miss Q.F. LAU

**香港大學財務處處長
Director of Finance, the University of Hong Kong**

盧秀梅女士 Ms. S.S.M. LO
(至 2021 年 9 月 14 日) (up to 14 September 2021)

勞同聲先生 Mr. T.T.S. LO
(從 2021 年 9 月 15 日起) (from 15 September 2021)

衛生署助理署長 Assistant Director of Health

黃慧敏女士, JP Miss W.W.M. WONG, JP

**食物及衛生局首席行政主任 (衛生)
Principal Executive Officer (Health), Food and Health Bureau**

馬美華女士 Ms. I.M.W. MA
(至 2022 年 1 月 23 日) (up to 23 January 2022)

黃雅君女士 Ms. A.N.K. WONG
(從 2022 年 1 月 24 日起) (from 24 January 2022)

菲臘牙科醫院院長
Director, The Prince Philip Dental Hospital

湯迅教授
(至 2021 年 6 月 30 日)

Professor P. THOMSON
(up to 30 June 2021)

姚嘉榕教授
(從 2021 年 7 月 1 日起)

Professor C.K.Y. YIU
(from 1 July 2021)

菲臘牙科醫院審計主任
Comptroller, The Prince Philip Dental Hospital

黃紉蘭女士

Ms. E.Y.L. WONG

**菲臘牙科醫院
策劃委員會**
**THE PRINCE PHILIP DENTAL HOSPITAL
PLANNING GROUP**

2021 年 4 月 1 日至 2022 年 3 月 31 日 – 成員名單
Membership – 1 April 2021 to 31 March 2022

主席
Chairman : **菲臘牙科醫院院長**
Director, The Prince Philip Dental Hospital

湯迅教授 (至 2021 年 6 月 30 日)	Professor P. THOMSON (up to 30 June 2021)
姚嘉榕教授 (從 2021 年 7 月 1 日起)	Professor C.K.Y. YIU (from 1 July 2021)

成員
Members : **私家牙醫 Private Dentists**

陳超余牙科醫生 (從 2021 年 10 月 30 日起)	Dr. S.C.Y. CHAN (from 30 October 2021)
傅大全牙科醫生	Dr. E.T.C. FOO
劉建均牙科醫生	Dr. K.K.K. LAU
廖偉明牙科醫生 (至 2021 年 10 月 29 日)	Dr. H.W.M. LIU (up to 29 October 2021)
余崢崢牙科醫生	Dr. T.T. SHE

香港大學牙醫學院代表
Representatives from Faculty of Dentistry, the University of Hong Kong

M BURROW 教授	Professor M. BURROW
張順彬教授	Professor G.S.P. CHEUNG
梁惠強教授	Professor W.K. LEUNG
王海明牙科醫生	Dr. G.H.M. WONG
張成飛教授	Professor C.F. ZHANG

衛生署代表
Representative from Department of Health

覃光旻牙科醫生

Dr. W.K.M. CHAM

菲臘牙科醫院審計主任
Comptroller, The Prince Philip Dental Hospital

黃紉蘭女士

Ms. E.Y.L. WONG

菲 臘 牙 科 醫 院
THE PRINCE PHILIP DENTAL HOSPITAL
表現趨勢
PERFORMANCE TREND

- (1) 過去三屆財政年度 2019-20 至 2021-22 之畢業人數為：
Number of Students Graduated during the Past Three Financial Years 2019-20 to 2021-22:

學生 Students	2019-20	2020-21	2021-22
牙醫學院本科生 Undergraduates of Faculty of Dentistry	50	51	53
牙醫學院研究生* Postgraduates of Faculty of Dentistry*	13	19	13
牙科手術助理員 Student Dental Surgery Assistants			
- 一年全日制 One-year Full-time	23	19	16
- 兩年日間兼讀制 Two-year Part-time	-	-	-
牙齒衛生員 Student Dental Hygienists	22	33	27
牙科技術員 Student Dental Technicians	16	16	13
牙科治療師 Student Dental Therapists	10	10	9

- * 不包括學院轄下牙醫專科診所面授碩士課程畢業生。該等課程自 2020 年 10 月起已停止於本院進行授課。

Excluding graduates of the taught postgraduate programmes organised by the Faculty's Institute for Advanced Dentistry - Multi-Specialty Clinic which ceased to be conducted in PPDH from October 2020.

- (2) 過去三屆財政年度 2019-20 至 2021-22 之註冊入學人數為：
Number of Students Enrolled during the Past Three Financial Years 2019-20 to 2021-22:

學生 Students	2019-20	2020-21	2021-22
牙醫學院本科生 Undergraduates of Faculty of Dentistry	400	423	452
牙醫學院研究生* Postgraduates of Faculty of Dentistry*	76	89	100
牙科手術助理員 Student Dental Surgery Assistants			
- 一年全日制 One-year Full-time	33	18	25
- 兩年日間兼讀制 Two-year Part-time	-	-	-
牙齒衛生員 Student Dental Hygienists	68	65	67
牙科技術員 Student Dental Technicians	33	24	32
牙科治療師 Student Dental Therapists	10	10	12

- * 不包括學院轄下牙醫專科診所面授碩士課程畢業生。該等課程自 2020 年 10 月起已停止於本院進行授課。

Excluding graduates of the taught postgraduate programmes organised by the Faculty's Institute for Advanced Dentistry - Multi-Specialty Clinic which ceased to be conducted in PPDH from October 2020.

獨立核數師報告和經審核之財務報表
Independent Auditor's Report and Audited Financial Statements

菲臘牙科醫院
THE PRINCE PHILIP DENTAL HOSPITAL

(根據香港法例第 1081 章菲臘牙科醫院條例成立)
(Established under the Prince Philip Dental Hospital Ordinance,
Chapter 1081 of the Laws of Hong Kong)

截至 2022 年 3 月 31 日止年度
For the year ended 31 March 2022

註：本報告內容，如有爭議，以英文版本作準。

Note: In case of discrepancy between the English and the Chinese texts, the English version shall prevail.

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獨立核數師報告

致菲臘牙科醫院管理局

(根據香港法例第 1081 章菲臘牙科醫院條例成立)

意見

我們已審計列載於第 31 至 81 頁的菲臘牙科醫院 (以下簡稱「貴醫院」) 的財務報表，此財務報表包括於二零二二年三月三十一日的財務狀況表與截至該日止年度的收支及全面收益表、資金變動表和現金流量表，以及財務報表附註，包括主要會計政策概要。

我們認為，該等財務報表已根據香港會計師公會頒佈的《香港財務報告準則》真實而中肯地反映了貴醫院於二零二二年三月三十一日的財務狀況及其截至該日止年度的財務表現及現金流量。

意見的基礎

我們已根據香港會計師公會頒佈的《香港審計準則》進行審計。我們在該等準則下承擔的責任已在本報告「核數師就審計財務報表承擔的責任」部分中作進一步闡述。根據香港會計師公會頒佈的《專業會計師道德守則》(以下簡稱「守則」)，我們獨立於貴醫院，並已履行守則中的其他專業道德責任。我們相信，我們所獲得的審計憑證能充足及適當地為我們的審計意見提供基礎。

管理局和管理層就財務報表須承擔的責任

貴醫院管理局 (以下簡稱「管理局」) 須負責根據香港會計師公會頒佈的《香港財務報告準則》擬備真實而中肯的財務報表，並對其認為為使財務報表的擬備不存在由於欺詐或錯誤而導致的重大錯誤陳述所需的內部控制負責。

在擬備財務報表時，管理局負責評估 貴醫院持續經營的能力，並在適用情況下披露與持續經營有關的事項，以及使用持續經營為會計基礎，除非管理局有意將 貴醫院清盤或停止經營，或別無其他實際的替代方案。

管理層負責監督貴醫院的財務報告過程。

INDEPENDENT AUDITOR’S REPORT

TO THE BOARD OF GOVERNORS OF THE PRINCE PHILIP DENTAL HOSPITAL

(Established under The Prince Philip Dental Hospital Ordinance, Chapter 1081 of the Laws of Hong Kong)

Opinion

We have audited the financial statements of The Prince Philip Dental Hospital (the “Hospital”) set out on pages 32 to 82, which comprise the statement of financial position as at 31 March 2022, and the statement of income and expenditure and other comprehensive income, statement of changes in funds and statement of cash flows for the year then ended, and notes to the financial statements, including a summary of significant accounting policies.

In our opinion, the financial statements give a true and fair view of the financial position of the Hospital as at 31 March 2022, and of its financial performance and its cash flows for the year then ended in accordance with Hong Kong Financial Reporting Standards (“HKFRSs”) issued by the Hong Kong Institute of Certified Public Accountants (“HKICPA”).

Basis for Opinion

We conducted our audit in accordance with Hong Kong Standards on Auditing (“HKSAs”) issued by the HKICPA. Our responsibilities under those standards are further described in the “Auditor’s Responsibilities for the Audit of the Financial Statements” section of our report. We are independent of the Hospital in accordance with the HKICPA’s Code of Ethics for Professional Accountants (the “Code”), and we have fulfilled our other ethical responsibilities in accordance with the Code. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Responsibilities of the Board of Governors and Those Charged with Governance for the Financial Statements

The Board of Governors of the Hospital (the “Board”) is responsible for the preparation of the financial statements that give a true and fair view in accordance with HKFRSs issued by the HKICPA, and for such internal control as the Board determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, the Board is responsible for assessing the Hospital’s ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the Board either intends to liquidate the Hospital or to cease operations, or have no realistic alternative but to do so.

Those charged with governance are responsible for overseeing the Hospital’s financial reporting process.

獨立核數師報告

致菲臘牙科醫院管理局 - 續

(根據香港法例第 1081 章菲臘牙科醫院條例成立)

核數師就審計財務報表承擔的責任

我們的目標，是對財務報表整體是否不存在由於欺詐或錯誤而導致的重大錯誤陳述取得合理保證，並出具包括我們意見的核數師報告。我們遵照菲臘牙科醫院條例第 16 條僅對管理局作出報告，除此以外，本報告並無其他用途。我們不會就核數師報告的內容向任何其他人士負上或承擔任何責任。合理保證是高水準的保證，但不能保證按照《香港審計準則》進行的審計，在某一重大錯誤陳述存在時總能發現。錯誤陳述可以由欺詐或錯誤引起，如果合理預期它們單獨或匯總起來可能影響財務報表使用者依賴財務報表所作出的經濟決定，則有關的錯誤陳述可被視作重大。

在根據《香港審計準則》進行審計的過程中，我們運用了專業判斷，保持了專業懷疑態度。我們亦：

- 識別和評估由於欺詐或錯誤而導致財務報表存在重大錯誤陳述的風險，設計及執行審計程式以應對這些風險，以及獲取充足和適當的審計憑證，作為我們意見的基礎。由於欺詐可能涉及串謀、偽造、蓄意遺漏、虛假陳述，或凌駕於內部控制之上，因此未能發現因欺詐而導致的重大錯誤陳述的風險高於未能發現因錯誤而導致的重大錯誤陳述的風險。
- 瞭解與審計相關的內部控制，以設計適當的審計程序，但目的並非對貴醫院內部控制的有效性發表意見。
- 評價管理局所採用會計政策的恰當性及作出會計估計和相關披露的合理性。
- 對管理局採用持續經營會計基礎的恰當性作出結論。根據所獲取的審計憑證，確定是否存在與事項或情況有關的重大不確定性，從而可能導致對貴醫院的持續經營能力產生重大疑慮。如果我們認為存在重大不確定性，則有必要在核數師報告中提請使用者注意財務報表中的相關披露。假若有關的披露不足，則我們應當發表非無保留意見。我們的結論是基於核數師報告日止所取得的審計憑證。然而，未來事項或情況可能導致貴醫院不能持續經營。

評價財務報表的整體列報方式、結構和內容，包括披露，以及財務報表是否中肯反映交易和事項。

INDEPENDENT AUDITOR'S REPORT

TO THE BOARD OF GOVERNORS OF THE PRINCE PHILIP DENTAL HOSPITAL - continued

(Established under The Prince Philip Dental Hospital Ordinance, Chapter 1081 of the Laws of Hong Kong)

Auditor's Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion solely to you, in accordance with section 16 of The Prince Philip Dental Hospital Ordinance, and for no other purpose. We do not assume responsibility towards or accept liability to any other person for the contents of this report. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with HKSA's will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

As part of an audit in accordance with HKSA's, we exercise professional judgment and maintain professional scepticism throughout the audit. We also:

- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Hospital's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by the Board.
- Conclude on the appropriateness of the Board's use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the Hospital's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the Hospital to cease to continue as a going concern.
- Evaluate the overall presentation, structure and content of the financial statements, including the disclosures, and whether the financial statements represent the underlying transactions and events in a manner that achieves fair presentation.

獨立核數師報告

致菲臘牙科醫院管理局 - 續

(根據香港法例第 1081 章菲臘牙科醫院條例成立)

除其他事項外，我們與管理層溝通了計劃的審計範圍、時間安排、重大審計發現等，包括我們在審計中識別出內部控制的任何重大缺陷。

德勤會計師事務所

執業會計師

香港

2023 年 1 月 13 日

INDEPENDENT AUDITOR'S REPORT

TO THE BOARD OF GOVERNORS OF THE PRINCE PHILIP DENTAL HOSPITAL -
continued

(Established under The Prince Philip Dental Hospital Ordinance, Chapter 1081 of the Laws of Hong Kong)

Auditor's Responsibilities for the Audit of the Financial Statements - continued

We communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.



Deloitte Touche Tohmatsu
Certified Public Accountants
Hong Kong
13 January 2023

收支及全面收益表

截至 2022 年 3 月 31 日止年度

	附註	2022 港元	2021 港元
收入			
政府資助金	4	209,692,336	211,364,021
診療收費	5	9,438,671	6,543,554
學費收費	6	2,161,780	2,211,589
其他收入		509,378	1,196,547
利息收入		39,749	262,065
		<u>221,841,914</u>	<u>221,577,776</u>
支出			
員工薪酬及有關費用	7	(139,001,547)	(138,814,012)
其他營運支出	8	(80,588,889)	(70,046,680)
		<u>(219,590,436)</u>	<u>(208,860,692)</u>
年度盈餘及年度全面收益總額		<u><u>2,251,478</u></u>	<u><u>12,717,084</u></u>

STATEMENT OF INCOME AND EXPENDITURE AND OTHER COMPREHENSIVE
INCOME FOR THE YEAR ENDED 31 MARCH 2022

	<u>NOTES</u>	<u>2022</u> HK\$	<u>2021</u> HK\$
INCOME			
Government subvention	4	209,692,336	211,364,021
Patient fees and charges	5	9,438,671	6,543,554
Tuition fees	6	2,161,780	2,211,589
Other income		509,378	1,196,547
Interest income		39,749	262,065
		<u>221,841,914</u>	<u>221,577,776</u>
EXPENDITURE			
Personnel emoluments	7	(139,001,547)	(138,814,012)
Other operating charges	8	(80,588,889)	(70,046,680)
		<u>(219,590,436)</u>	<u>(208,860,692)</u>
SURPLUS AND TOTAL COMPREHENSIVE INCOME FOR THE YEAR		<u><u>2,251,478</u></u>	<u><u>12,717,084</u></u>

財務狀況表
2022 年 3 月 31 日

	附註	2022 港元	2021 港元
非流動資產			
物業、機器及設備	10	32,342,674	16,724,672
流動資產			
存貨		95,293	268,720
應收賬款、預付款項及按金	11	2,605,525	2,662,718
原到期日不超過三個月的定期存款	12	60,000	23,246,299
銀行存款及現金	12	27,717,990	16,326,309
		30,478,808	42,504,046
流動負債			
應付賬款和其他應付賬款		15,403,418	14,097,739
合約負債	13	1,122,019	457,916
累算員工約滿酬金		2,327,631	3,053,473
遞延收入	14	3,023,308	2,761,628
		21,876,376	20,370,756
流動資產淨值		8,602,432	22,133,290
總資產減流動負債		40,945,106	38,857,962
非流動負債			
累算年假		6,889,613	7,613,397
累算員工約滿酬金		1,161,477	583,011
遞延收入	14	4,670,819	4,689,835
		12,721,909	12,886,243
資產淨值		28,223,197	25,971,719

第 31 頁至第 81 頁的財務報表於 2023 年 1 月 13 日獲管理局批准及授權刊發，由下列負責人簽署：

王 桂 壘 先 生

主席
(代表管理局)

STATEMENT OF FINANCIAL POSITION
AS AT 31 MARCH 2022

	NOTES	2022 HK\$	2021 HK\$
NON-CURRENT ASSETS			
Property, plant and equipment	10	32,342,674	16,724,672
CURRENT ASSETS			
Inventories		95,293	268,720
Receivables, prepayments and deposits	11	2,605,525	2,662,718
Time deposits with original maturity of not less than three months	12	60,000	23,246,299
Bank balances and cash	12	27,717,990	16,326,309
		30,478,808	42,504,046
CURRENT LIABILITIES			
Creditors and other payables		15,403,418	14,097,739
Contract liabilities	13	1,122,019	457,916
Accrued gratuities		2,327,631	3,053,473
Deferred income	14	3,023,308	2,761,628
		21,876,376	20,370,756
NET CURRENT ASSETS		8,602,432	22,133,290
TOTAL ASSETS LESS CURRENT LIABILITIES		40,945,106	38,857,962
NON-CURRENT LIABILITIES			
Accrued annual leave		6,889,613	7,613,397
Accrued gratuities		1,161,477	583,011
Deferred income	14	4,670,819	4,689,835
		12,721,909	12,886,243
NET ASSETS		28,223,197	25,971,719

The financial statements on pages 32 to 82 were approved and authorised for issue by the Board of Governors on 13 January 2023 and are signed on its behalf by:


CHAIRMAN
(ON BEHALF OF THE BOARD OF GOVERNORS)

資金變動表
截至 2022 年 3 月 31 日止年度

	儲備 港元
於 2020 年 4 月 1 日	13,254,635
年度盈餘及年度全面收益總額	12,717,084
於 2021 年 3 月 31 日	25,971,719
年度盈餘及年度全面收益總額	2,251,478
於 2022 年 3 月 31 日	28,223,197

STATEMENT OF CHANGES IN FUNDS
FOR THE YEAR ENDED 31 MARCH 2022

	<u>Reserves</u> HK\$
At 1 April 2020	13,254,635
Surplus and total comprehensive income for the year	12,717,084
At 31 March 2021	25,971,719
Surplus and total comprehensive income for the year	2,251,478
At 31 March 2022	<u>28,223,197</u>

現金流量表
截至 2022 年 3 月 31 日止年度

	<u>2022</u> 港元	<u>2021</u> 港元
經營業務		
年度盈餘	2,251,478	12,717,084
調整：		
利息收入	(39,749)	(262,065)
遞延收入撥回	(3,217,924)	(2,651,533)
物業、機器及設備之折舊	7,956,198	3,385,716
營運資金變動前的經營現金流量	6,950,003	13,189,202
存貨之減少	173,427	175,809
應收賬款、預付款項及按金之(增加)減少	(88,658)	256,943
應付賬款和其他應付賬款之增加(減少)	1,305,679	(219,701)
合約負債之增加(減少)	664,103	(843,739)
累算年假之(減少)增加	(723,784)	454,716
累算員工約滿酬金之(減少)增加	(147,376)	483,331
經營業務所得之現金流量淨額	8,133,394	13,496,561
投資活動		
已收利息	185,600	116,214
購置物業、機器及設備	(40,560,734)	(28,410,904)
用於物業、機器及設備之政府資助金收款	20,447,122	18,403,512
原到期日不超過三個月的定期存款之減少(增加)	23,186,299	(23,186,299)
投資活動所得(所用)之現金流量淨額	3,258,287	(33,077,477)
現金及現金等價物之增加(減少)淨額	11,391,681	(19,580,916)
於年初之現金及現金等價物	16,326,309	35,907,225
於年終之現金及現金等價物	27,717,990	16,326,309
指		
銀行存款及現金	27,717,990	16,326,309

STATEMENT OF CASH FLOWS
FOR THE YEAR ENDED 31 MARCH 2022

	<u>2022</u> HK\$	<u>2021</u> HK\$
OPERATING ACTIVITIES		
Surplus for the year	2,251,478	12,717,084
Adjustments for:		
Interest income	(39,749)	(262,065)
Release of deferred income	(3,217,924)	(2,651,533)
Depreciation of property, plant and equipment	7,956,198	3,385,716
Operating cash flows before movements in working capital	6,950,003	13,189,202
Decrease in inventories	173,427	175,809
(Increase) decrease in receivables, prepayments and deposits	(88,658)	256,943
Increase (decrease) in creditors and other payables	1,305,679	(219,701)
Increase (decrease) in contract liabilities	664,103	(843,739)
(Decrease) increase in accrued annual leave	(723,784)	454,716
(Decrease) increase in accrued gratuities	(147,376)	483,331
NET CASH FROM OPERATING ACTIVITIES	8,133,394	13,496,561
INVESTING ACTIVITIES		
Interest received	185,600	116,214
Purchases of property, plant and equipment	(40,560,734)	(28,410,904)
Receipt of government subvention for property, plant and equipment	20,447,122	18,403,512
Decrease (increase) in time deposits with original maturity of not less than three months	23,186,299	(23,186,299)
NET CASH FROM (USED IN) INVESTING ACTIVITIES	3,258,287	(33,077,477)
NET INCREASE (DECREASE) IN CASH AND CASH EQUIVALENTS	11,391,681	(19,580,916)
CASH AND CASH EQUIVALENTS AT BEGINNING OF THE YEAR	16,326,309	35,907,225
CASH AND CASH EQUIVALENTS AT END OF THE YEAR	27,717,990	16,326,309
Represented by		
Bank balances and cash	27,717,990	16,326,309

1. 一般資料

菲臘牙科醫院(以下簡稱「本醫院」)根據香港法例第 1081 章菲臘牙科醫院條例成立，是香港特別行政區政府(以下簡稱「政府」)的補助機構。本醫院的註冊辦事處地址及主要營運地點位於香港西營盤醫院道 34 號。

本財務報表以港元呈報，港元亦為本醫院的功能貨幣。

於年內，本醫院的主要活動為牙醫及牙科輔助專業人員的培訓提供設施。

2. 應用香港財務報告準則(「香港財務報告準則」)的修訂本

於本年度強制生效的香港財務報告準則修訂本

於本年度，本醫院首次應用以下由香港會計師公會(「香港會計師公會」)頒佈，並於 2021 年 4 月 1 日或之後開始之年度期間強制生效之下列經修訂香港財務報告準則，以編制財務報表：

「香港財務報告準則」第 16 號修訂本	與新型冠狀病毒疫情相關的租賃優惠
「香港財務報告準則」第 16 號修訂本	2021 年 6 月 30 日後的與新型冠狀病毒疫情相關的租賃優惠
「香港財務報告準則」第 9 號、	利率基準改革 - 第 2 階段
「香港會計準則」第 39 號、	
「香港財務報告準則」第 7 號、	
「香港財務報告準則」第 4 號及	
「香港財務報告準則」第 16 號修訂本	

此外，本醫院應用國際會計準則理事會轄下國際財務報告準則詮釋委員會(「委員會」)於 2021 年 6 月頒佈的議程決定，該議程決定澄清實體於釐定存貨的可變現淨值時應計入「銷售必要的估計成本」作為成本。

本年度應用香港財務報告準則(修訂本)概無對本醫院本年度及過往年度的財務狀況表現及/或載於該等財務報表的披露資料造成重大影響。

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2022

1. GENERAL

The Prince Philip Dental Hospital (the “Hospital”) is established under The Prince Philip Dental Hospital Ordinance, Chapter 1081 of the Laws of Hong Kong, and funded by the Government of the Hong Kong Special Administrative Region (the “Government”). The address of the registered office and principal place of business of the Hospital is 34 Hospital Road, Sai Ying Pun, Hong Kong.

The financial statements are presented in Hong Kong dollars (“HK\$”), which is also the functional currency of the Hospital.

The principal activities of the Hospital are the provision of facilities for the training of dentists and other persons in professions supplementary to dentistry.

2. APPLICATION OF AMENDMENTS TO HONG KONG FINANCIAL REPORTING STANDARDS (“HKFRSs”)

Amendment to HKFRS that are mandatorily effective for the current year

In the current year, the Hospital has applied the following amendments to HKFRSs issued by the Hong Kong Institute of Certified Public Accountants (“HKICPA”) for the first time, which are mandatorily effective for the annual periods beginning on or after 1 April 2021 for the preparation of the financial statements:

Amendment to HKFRS 16	Covid-19-Related Rent Concessions
Amendment to HKFRS 16	Covid-19-Related Rent Concessions beyond 30 June 2021
Amendments to HKFRS 9, HKAS 39, HKFRS 7, HKFRS 4 and HKFRS 16	Interest Rate Benchmark Reform - Phase 2

In addition, the Hospital applied the agenda decision of the IFRS Interpretations Committee (the “Committee”) of the International Accounting Standards Board issued in June 2021 which clarified the costs an entity should include as “estimated costs necessary to make the sale” when determining the net realisable value of inventories.

The application of the amendments to HKFRSs in the current year has had no material impact on the Hospital’s financial positions and performance for the current and prior years and/or on the disclosures set out in these financial statements.

2. 應用香港財務報告準則(「香港財務報告準則」)的修訂本 - 續

已頒佈但尚未生效的新訂及經修訂之香港財務報告準則

本醫院尚未提早採納下列已頒佈但尚未生效的新訂及經修訂之香港財務報告準則：

香港財務報告準則第 17 號	保險合約及相關修訂本 ²
香港財務報告準則第 3 號(修訂本)	概念框架的提述 ¹
香港財務報告準則第 10 號及 香港會計準則第 28 號(修訂本)	投資者與其聯營企業或合營企業之間的資產 出售或注資 ³
香港會計準則第 1 號(修訂本)	負債分類為流動或非流動及香港解釋第 5 號的 相關修訂本(2020 年) ²
香港會計準則第 1 號及香港 財務報告準則實務報告 第 2 號(修訂本)	會計政策披露 ²
香港會計準則第 8 號(修訂本)	會計估計的定義 ²
香港會計準則第 12 號(修訂本)	與單一交易產生的資產及負債相關的遞延稅項 ²
香港會計準則第 16 號(修訂本)	物業、機器及設備 – 達致擬定用途前的所得款項 ¹
香港會計準則第 37 號(修訂本)	虧損合約 - 履行合約的成本 ¹
香港財務報告準則(修訂本)	香港財務報告準則 2018 年至 2020 年之年度改進 ¹

¹ 於 2022 年 1 月 1 日或之後開始的年度期間生效。

² 於 2023 年 1 月 1 日或之後開始的年度期間生效。

³ 於待定日期或之後開始的年度期間生效。

本醫院管理局(以下簡稱「管理局」)預期，應用所有新訂及經修訂香港財務報告準則於可見將來不會對財務報表造成重大影響。

3. 財務報表的編制基準及主要會計政策

3.1 財務報表的編制基準

財務報表已根據由香港會計師公會頒佈之香港財務報告準則編制。就編制財務報表而言，倘有關資料合理預期會影響主要使用者做出的決定，則有關資料被視為重大。

財務報表按歷史成本基準編制。歷史成本一般根據買賣貨品及服務時所給之代價之公允價值計算。

於批准財務報表時，管理局合理預期本醫院有足夠的資源在可預見的將來持續經營。因此，在編制財務報表時繼續採用持續經營的會計基準。

2. APPLICATION OF AMENDMENTS TO HONG KONG FINANCIAL REPORTING STANDARDS (“HKFRSs”) - continued

New and amendments to HKFRSs in issue but not yet effective

The Hospital has not early applied the following new and amendments to HKFRSs that have been issued but are not yet effective:

HKFRS 17	Insurance Contracts and the related Amendments ²
Amendments to HKFRS 3	Reference to the Conceptual Framework ¹
Amendments to HKFRS 10 and HKAS 28	Sale or Contribution of Assets between an Investor and its Associate or Joint Venture ³
Amendments to HKAS 1	Classification of Liabilities as Current or Non-current and related amendments to Hong Kong Interpretation 5 (2020) ²
Amendments to HKAS 1 and HKFRS Practice Statement 2	Disclosure of Accounting Policies ²
Amendments to HKAS 8	Definition of Accounting Estimates ²
Amendments to HKAS 12	Deferred Tax related to Assets and Liabilities arising from a Single Transaction ²
Amendments to HKAS 16	Property, Plant and Equipment - Proceeds before Intended Use ¹
Amendments to HKAS 37	Onerous Contracts - Cost of Fulfilling a Contract ¹
Amendments to HKFRSs	Annual Improvements to HKFRSs 2018 - 2020 ¹

¹ Effective for annual periods beginning on or after 1 January 2022

² Effective for annual periods beginning on or after 1 January 2023

³ Effective for annual periods beginning on or after a date to be determined

The Board of Governors of the Hospital (the “Board”) anticipate that the application of all new and amendments to HKFRSs will have no material impact on the financial statements in the foreseeable future.

3. BASIS OF PREPARATION OF FINANCIAL STATEMENTS AND SIGNIFICANT ACCOUNTING POLICIES

3.1 Basis of preparation of financial statements

The financial statements have been prepared in accordance with HKFRSs issued by the HKICPA. For the purpose of preparation of the financial statements, information is considered material if such information is reasonably expected to influence decisions made by primary users.

The financial statements have been prepared on the historical cost basis. Historical cost is generally based on the fair value of the consideration given in exchange for goods and services.

The Board have, at the time of approving the financial statements, a reasonable expectation that the Hospital has adequate resources to continue in operational existence for the foreseeable future. Thus they continue to adopt the going concern basis of accounting in preparing the financial statements.

3. 財務報表的編制基準及主要會計政策 - 續

3.1 財務報表的編制基準 - 續

公允價值是指於計量日期市場參與者之間之有序交易，就出售資產所收取之價格或轉讓負債所支付之價格，不論該價格是否可直接觀察或採用另一項估值技術作估計。在估計資產或負債之公允價值時，本醫院會考慮該等市場參與者於計量日期對資產或負債定價時所考慮之資產或負債之特點。於本財務報表中作計量及/或披露用途之公允價值乃按此基準釐定，惟以下各項除外：屬於香港財務報告準則第 2 號「以股份為基礎付款」範圍內之以股份為基礎的付款交易、根據香港報告準則第 16 號「租賃」入賬之租賃交易，以及其計量與公允價值之計量存在某些相似之處但並非公允價值，例如香港會計準則第 2 號「存貨」之可變現淨值或香港會計準則第 36 號「資產減值」之使用價值。

非金融資產的公允價值計量考慮了市場參與者透過使用其資產的最高及最佳用途或透過將資產出售予將使用其最高及最佳用途的另一名市場參與者而能夠產生經濟利益的能力。

就按公允價值交易的金融工具而言，不可觀察輸入資料之估值方法將於隨後期間用於計量公允價值，則估值方法予以校準，因此於初始確認時，估值方法結果與交易價相等。

此外，就財務報告而言，公允價值計量乃根據公允價值計量之輸入變數可觀察程度及公允價值計量之輸入變數對其整體之重要性，並分類概述如下：

- 第一級輸入變數為實體於計量日期可獲得之相同資產或負債於活躍市場之報價（未經調整）；
- 第二級輸入變數為除第一類計入之報價外，根據資產或負債可直接或間接觀察之輸入變數；及
- 第三級輸入變數為資產或負債之不可觀察輸入變數。

3. BASIS OF PREPARATION OF FINANCIAL STATEMENTS AND SIGNIFICANT ACCOUNTING POLICIES - continued

3.1 Basis of preparation of financial statements - continued

Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date, regardless of whether that price is directly observable or estimated using another valuation technique. In estimating the fair value of an asset or a liability, the Hospital takes into account the characteristics of the asset or liability if market participants would take those characteristics into account when pricing the asset or liability at the measurement date. Fair value for measurement and/or disclosure purposes in these financial statements is determined on such a basis, except for share-based payment transactions that are within the scope of HKFRS 2 “Share-based Payment”, leasing transactions that are accounted for in accordance with HKFRS 16 “Leases”, and measurements that have some similarities to fair value but are not fair value, such as net realisable value in HKAS 2 “Inventories” or value in use in HKAS 36 “Impairment of Assets”.

A fair value measurement of a non-financial asset takes into account a market participant’s ability to generate economic benefits by using the asset in its highest and best use or by selling it to another market participant that would use the asset in its highest and best use.

For financial instruments which are transacted at fair value and a valuation technique in which unobservable inputs is to be used to measure fair value in subsequent periods, the valuation technique is calibrated so that at initial recognition the results of the valuation technique equals the transaction price.

In addition, for financial reporting purposes, fair value measurements are categorised into Level 1, 2 or 3 based on the degree to which the inputs to the fair value measurements are observable and the significance of the inputs to the fair value measurement in its entirety, which are described as follows:

- Level 1 inputs are quoted prices (unadjusted) in active markets for identical assets or liabilities that the entity can access at the measurement date;
- Level 2 inputs are inputs, other than quoted prices included within Level 1, that are observable for the asset or liability, either directly or indirectly; and
- Level 3 inputs are unobservable inputs for the asset or liability.

3. 財務報表的編制基準及主要會計政策 - 續

3.2 主要會計政策

來自客戶合約之收益

本醫院於完成(或就此)履約責任時確認收益(即於履行履約責任下相關服務的「控制權」轉讓予客戶時)。

履約責任指一項可明確區分的服務(或一籃子服務)或一系列大致相同之可明確區分的服務。

倘符合以下條件之一，控制權隨時間轉移，收益會隨參考完成相關履約責任之進度確認：

- 客戶於本醫院履約時同時收取及消耗本醫院履約所提供的利益；
- 本醫院的履約創建或增強客戶於本醫院履約時控制的資產；或
- 本醫院的履約未創建對本醫院具有替代用途的資產，而本醫院有強制執行權收取至今已履約部分的款項。

否則，收益於客戶獲得明確服務控制權時確認。

合約負債為本醫院已收（或應收）客戶對價而承擔向客戶轉移服務之義務。

隨時間確認收益：履約責任進度的計量

產出法

採用產出法進行計量履約義務的進度，根據直接計量迄今為止向客戶提供的服務相對於合約中承諾的剩餘服務的價值進行收益確認，這最能反映本醫院轉移服務控制權的履約情況。

作為一種實用方法，倘若本醫院有權收取與本醫院迄今為止已履行義務價值直接對應的金額，則本醫院會按本醫院有權開具發票的金額確認收益。

3. BASIS OF PREPARATION OF FINANCIAL STATEMENTS AND SIGNIFICANT ACCOUNTING POLICIES - continued

3.2 Significant accounting policies

Revenue from contracts with customers

The Hospital recognises revenue when (or as) a performance obligation is satisfied, i.e. when “control” of the services underlying the particular performance obligation is transferred to the customer.

A performance obligation represents a service (or a bundle of services) that is distinct or a series of distinct services that are substantially the same.

Control is transferred over time and revenue is recognised over time by reference to the progress towards complete satisfaction of the relevant performance obligation if one of the following criteria is met:

- the customer simultaneously receives and consumes the benefits provided by the Hospital’s performance as the Hospital performs;
- the Hospital’s performance creates or enhances an asset that the customer controls as the Hospital performs; or
- the Hospital’s performance does not create an asset with an alternative use to the Hospital and the Hospital has an enforceable right to payment for performance completed to date.

Otherwise, revenue is recognised at a point in time when the customer obtains control of the distinct service.

A contract liability represents the Hospital’s obligation to transfer services to a customer for which the Hospital has received consideration (or an amount of consideration is due) from the customer.

Over time revenue recognition: measurement of progress towards complete satisfaction of a performance obligation

Output method

The progress towards complete satisfaction of a performance obligation is measured based on output method, which is to recognise revenue on the basis of direct measurements of the value of the services transferred to the customer to date relative to the remaining services promised under the contract, that best depict the Hospital’s performance in transferring control of services.

As a practical expedient, if the Hospital has a right to consideration in an amount that corresponds directly with the value of the Hospital’s performance completed to date, the Hospital recognises revenue in the amount to which the Hospital has the right to invoice.

3. 財務報表的編制基準及主要會計政策 - 續

3.2 主要會計政策 - 續

政府資助金

政府資助金於可合理確定本醫院將會遵守政府補貼所附的條件及將會收取補貼後方予以確認。

本醫院將政府資助金擬補償的相關成本確認為費用的期間，系統地在收支及全面收益表中確認。具體而言，授出政府資助金的主要條件為本醫院應購買、興建或以其他方式收購非流動資產，並於財務狀況表確認為遞延收入或從相關資產的賬面價值中扣除，然後在有關資產的可用年期內有系統及合理地轉撥至收支及全面收益表內。

作為彌補已產生之開支或虧損，或向本醫院提供並無未來相關成本的即時財務援助而應收之政府補貼相關收入，於其成為應收之期間於收支及全面收益表內確認。與來自政府的經常資助金收入相關的政府資助金於「政府資助金」項下呈列。

僱員福利

退休福利開支

定額供款退休福利計劃的付款於僱員提供服務而有權享有供款時確認為開支。

離職福利

離職福利負債於本醫院無法撤回離職福利要約時及確認任何相關重組成本時(以較早者為準)確認。

短期僱員福利

短期僱員福利按僱員提供服務時預期支付福利之未折現金額時確認。所有短期僱員福利均確認為開支，除非另有香港財務報告準則規定或允許將福利計入資產成本。

扣除已支付的金額後，對僱員應計的福利（例如工資和薪金、年假和員工約滿酬金）確認為負債。

3. BASIS OF PREPARATION OF FINANCIAL STATEMENTS AND SIGNIFICANT ACCOUNTING POLICIES - continued

3.2 Significant accounting policies - continued

Government subvention

Government subvention are not recognised until there is reasonable assurance that the Hospital will comply with the conditions attaching to them and that the subvention will be received.

Government subvention are recognised in the statement of income and expenditure and other comprehensive income on a systematic basis over the periods in which the Hospital recognises as expenses the related costs for which the subvention are intended to compensate. Specifically, government subvention whose primary condition is that the Hospital should purchase, construct or otherwise acquire non-current assets are recognised as deferred income or a deduction from the carrying amount of the relevant asset in the statement of financial position and transferred to the statement of income and expenditure and other comprehensive income on a systematic and rational basis over the useful lives of the related assets.

Government subvention related to income that are receivable as compensation for expenses or losses already incurred or for the purpose of giving immediate financial support to the Hospital with no future related costs are recognised in the statement of income and expenditure and other comprehensive income in the period in which they become receivable. Government subvention relating to recurrent subvention income from the Government are presented under “government subvention”.

Employee benefits

Retirement benefit costs

Payments to defined contribution retirement benefit plans are recognised as an expense when employees have rendered service entitling them to the contributions.

Termination benefits

A liability for a termination benefit is recognised at the earlier of when the Hospital can no longer withdraw the offer of the termination benefit and when it recognises any related restructuring costs.

Short-term employee benefits

Short-term employee benefits are recognised at the undiscounted amount of the benefits expected to be paid as and when employees rendered the services. All short-term employee benefits are recognised as an expense unless another HKFRS requires or permits the inclusion of the benefit in the cost of an asset.

A liability is recognised for benefits accruing to employees (such as wages and salaries, annual leave and gratuities) after deducting any amount already paid.

3. 財務報表的編制基準及主要會計政策 - 續

3.2 主要會計政策 - 續

物業、機器及設備

持有物業、機器及設備作為生產或供應貨品或服務或作為行政用途的有形資產(下文所述的在建工程除外)。物業、機器及設備按成本減去其後累計折舊及其後累計減值虧損(如有) 然後於財務狀況表列賬。

在建工程指在為生產、供應或行政目的而施工過程中仍在安裝的電腦設備，乃按成本減去任何減值虧損然後列賬。成本包括使資產達到能夠按照管理層擬定的方式展開經營所必要的位置及條件而直接產生的任何成本。該等資產按與其他資產相同的基準，於資產可作擬定用途時開始折舊。

折舊按資產(在建工程除外)之估計可使用年期以直線法撇銷其成本減去其剩餘價值計算。估計可使用年期、剩餘價值及折舊方法於各報告期末檢討，任何估計變動的影響按預期基準入賬。

物業、機器及設備項目於出售或當預期繼續使用該資產不會帶來未來經濟利益時，則終止確認。出售或報廢物業、機器及設備項目所產生的任何收益或虧損按出售所得款項與資產賬面值之間的差額釐定，並於收支及全面收益表中入賬。

物業、機器及設備減值

於報告期末，本醫院審閱其物業、機器及設備之賬面值，以釐定是否有任何跡象顯示該等資產出現減值損失。倘存在任何有關跡象，則估計相關資產的可收回金額，以釐定減值損失(如有)的程度。

物業、機器及設備之可收回金額以個別估計。倘無法個別估計可收回金額，本醫院則會估計該資產所屬現金產生單位的可收回金額。

3. BASIS OF PREPARATION OF FINANCIAL STATEMENTS AND SIGNIFICANT ACCOUNTING POLICIES - continued

3.2 Significant accounting policies - continued

Property, plant and equipment

Property, plant and equipment are tangible assets that are held for use in the production or supply of goods or services, or for administrative purposes (other than construction in progress as described below). Property, plant and equipment are stated in the statement of financial position at cost less subsequent accumulated depreciation and subsequent accumulated impairment losses, if any.

Construction in progress, representing computer equipment under installation, in the course of construction for production, supply or administrative purposes are carried at cost, less any recognised impairment loss. Costs include any costs directly attributable to bringing the asset to the location and condition necessary for it to be capable of operating in the manner intended by management. Depreciation of these assets, on the same basis as other assets, commences when the assets are ready for their intended use.

Depreciation is recognised so as to write off the cost of assets other than construction in progress less their residual values over their estimated useful lives, using the straight-line method. The estimated useful lives, residual values and depreciation method are reviewed at the end of each reporting period, with the effect of any changes in estimate accounted for on a prospective basis.

An item of property, plant and equipment is derecognised upon disposal or when no future economic benefits are expected to arise from the continued use of the asset. Any gain or loss arising on the disposal or retirement of an item of property, plant and equipment is determined as the difference between the sales proceeds and the carrying amount of the asset and is recognised in the statement of income and expenditure and other comprehensive income.

Impairment on property, plant and equipment

At the end of the reporting period, the Hospital reviews the carrying amounts of its property, plant and equipment to determine whether there is any indication that these assets have suffered an impairment loss. If any such indication exists, the recoverable amount of the relevant asset is estimated in order to determine the extent of the impairment loss (if any).

The recoverable amount of property, plant and equipment is estimated individually. When it is not possible to estimate the recoverable amount individually, the Hospital estimates the recoverable amount of the cash-generating unit to which the asset belongs.

3. 財務報表的編制基準及主要會計政策 - 續

3.2 主要會計政策 - 續

物業、機器及設備減值 - 續

可收回金額為公允價值減去出售成本與使用價值之較高者。在評估使用價值時，估計未來現金流量會採用稅前貼現率貼現至其現值，該稅前貼現率應反映對貨幣時間價值的當前市場評估及該資產特有的風險(未針對該風險調整估計未來現金流量)。

倘估計資產之可收回金額低於其賬面值，則資產之賬面值將調低至其可收回金額。

倘減值損失其後撥回，則資產的賬面值會增加至其經修訂的估計可收回金額，惟增加後的賬面值不得超出資產於過往年度並無確認減值損失時原應釐定的賬面值。減值損失撥回隨即於收支及全面收益表內確認。

存貨

存貨乃按成本與可變現淨值兩者中之較低值列賬。存貨成本乃按加權平均成本法計算。可變現淨值指存貨估計售價減去所有銷售所需成本。進行銷售所需的成本包括直接歸因於銷售的增量成本和本醫院進行銷售須發生的非增量成本。

金融工具

金融資產及金融負債於本醫院成為該工具合同條文的訂約方時確認。所有常規方式買賣的金融資產概於交易日予以確認及終止確認。常規方式購買或出售金融資產指遵循法規或市場慣例在約定時間範圍內交付資產的金融資產的購買或出售。

金融資產及金融負債初始以公允價值計量，惟與客戶產生合約之應收賬款(初始按香港財務報告準則第 15 號計量)除外。直接歸屬於購買或發行金融資產和金融負債之交易成本在初始確認時計入或從金融資產或金融負債的公允價值扣除(如適用)。

3. BASIS OF PREPARATION OF FINANCIAL STATEMENTS AND SIGNIFICANT ACCOUNTING POLICIES - continued

3.2 Significant accounting policies - continued

Impairment on property, plant and equipment - continued

Recoverable amount is the higher of fair value less costs of disposal and value in use. In assessing value in use, the estimated future cash flows are discounted to their present value using a pre-tax discount rate that reflects current market assessments of the time value of money and the risks specific to the asset for which the estimates of future cash flows have not been adjusted.

If the recoverable amount of an asset is estimated to be less than its carrying amount, the carrying amount of the asset is reduced to its recoverable amount.

Where an impairment loss subsequently reverses, the carrying amount of the asset is increased to the revised estimate of its recoverable amount, but so that the increased carrying amount does not exceed the carrying amount that would have been determined had no impairment loss been recognised for the asset in prior years. A reversal of an impairment loss is recognised immediately in the statement of income and expenditure and other comprehensive income.

Inventories

Inventories are stated at the lower of cost and net realisable value. Costs of inventories are determined on a weighted average method. Net realisable value represents the estimated selling price for inventories less all estimated costs of completion and costs necessary to make the sale. Costs necessary to make the sale include incremental costs directly attributable to the sale and non-incremental costs which the Hospital must incur to make the sale.

Financial instruments

Financial assets and financial liabilities are recognised when the Hospital becomes a party to the contractual provisions of the instrument. All regular way purchases or sales of financial assets are recognised and derecognised on a trade date basis. Regular way purchases or sales are purchases or sales of financial assets that require delivery of assets within the time frame established by regulation or convention in the market place.

Financial assets and financial liabilities are initially measured at fair value except for trade receivables arising from contracts with customers which are initially measured in accordance with HKFRS 15. Transaction costs that are directly attributable to the acquisition or issue of financial assets and financial liabilities are added to or deducted from the fair value of the financial assets or financial liabilities, as appropriate, on initial recognition.

3. 財務報表的編制基準及主要會計政策 - 續

3.2 主要會計政策 - 續

金融工具 - 續

實際利率法為計算金融資產或金融負債的攤銷成本並在相關期間分配的利息收入及利息開支之方法。實際利率為可透過金融資產或金融負債的預期年期或（如適用）較短期間將估計未來現金收入及付款（包括所有支付或收取構成整體實際利率之費用和點數、交易成本及其他溢價或折讓）準確折現至初步確認時的賬面淨值的利率。

金融資產

金融資產的分類及其後計量

滿足以下條件的金融資產其後會按攤銷成本計量：

- 金融資產在以收取合同現金流量為目標的經營模式下持有；及
- 合約條款於指定日期產生之現金流量純粹為支付本金及未償還本金之利息。

所有其他金融資產期以公允價值進行後續計量且其變動計入當期損益。

在下列情況，持有金融資產作交易：

- 收購主要目的是在短期內出售；或
- 在初始確認時，它是本醫院共同管理的已識別金融工具組合的一部分，且近期出現了短期獲利的實際模式；或
- 它是一種未被指定及有效之對沖工具的衍生工具。

此外，為消除或顯著減少會計錯配，本醫院可以將不可撤銷地指定按攤銷成本計量或按公允價值計量且其變動計入其他綜合收益的金融資產為以公允價值計量且其變動計入當期損益的金融資產。

3. BASIS OF PREPARATION OF FINANCIAL STATEMENTS AND SIGNIFICANT ACCOUNTING POLICIES - continued

3.2 Significant accounting policies - continued

Financial instruments - continued

The effective interest method is a method of calculating the amortised cost of a financial asset or financial liability and of allocating interest income and interest expense over the relevant period. The effective interest rate is the rate that exactly discounts estimated future cash receipts and payments (including all fees and points paid or received that form an integral part of the effective interest rate, transaction costs and other premiums or discounts) through the expected life of the financial asset or financial liability, or, where appropriate, a shorter period, to the net carrying amount on initial recognition.

Financial assets

Classification and subsequent measurement of financial assets

Financial assets that meet the following conditions are subsequently measured at amortised cost:

- the financial asset is held within a business model whose objective is to collect contractual cash flows; and
- the contractual terms give rise on specified dates to cash flows that are solely payments of principal and interest on the principal amount outstanding.

All other financial assets are subsequently measured at fair value through profit or loss ("FVTPL").

A financial asset is held for trading if:

- it has been acquired principally for the purpose of selling in the near term; or
- on initial recognition it is a part of a portfolio of identified financial instruments that the Hospital manages together and has a recent actual pattern of short-term profit-taking; or
- it is a derivative that is not designated and effective as a hedging instrument.

In addition, the Hospital may irrevocably designate a financial asset that are required to be measured at the amortised cost or fair value through other comprehensive income ("FVTOCI") as measured at FVTPL if doing so eliminates or significantly reduces an accounting mismatch.

3. 財務報表的編制基準及主要會計政策 - 續

3.2 主要會計政策 - 續

金融工具 - 續

金融資產 - 續

攤銷成本及利息收入

對於以攤銷成本進行後續計量的金融資產，利息收入採用實際利率法計算。利息收入是將實際利率應用到金融資產之賬面總值計算(除其後成為信貸減值的金融資產外)(見下文)。對於後續發生信貸減值的金融資產，自下個報告期起利息收入會將實際利率應用到金融資產的攤銷成本入賬。倘信貸減值金融工具的信貸風險改善，致使金融資產不再出現信貸減值，則利息收入於確定資產不再有信貸減值後的報告期初起按將實際利率應用到金融資產的賬面總值入賬。

金融資產減值

本醫院根據預期信貸虧損模式對根據香港財務報告準則第 9 號須進行減值測試的金融資產(包括應收賬款及其他應收款項、原到期日不超過三個月的定期存款及銀行存款)進行減值測試。預期信貸虧損金額於各報告日期更新，以反映信貸風險自初步確認以來的變動。

全期預期信貸虧損指於相關工具預期年期內所有可能違約事件將產生的預期信貸虧損。相反，12 個月預期信貸虧損(「12 個月預期信貸虧損」)則指預期於報告日期後 12 個月內可能違約事件而導致的部分全期預期信貸虧損。評估乃根據本醫院過往信貸虧損經驗進行，並就債務人特定因素、整體經濟狀況以及對於報告日期的當前狀況及未來狀況預測的評估作出調整。

本醫院一直就來自客戶合約的應收賬款確認全期預期信貸虧損。

就所有其他工具，本醫院計量的虧損撥備相等於 12 個月預期信貸虧損，除非信貸風險自初步確認以來顯著上升，在此情況下，本醫院確認全期預期信貸虧損。是否應確認全期預期信貸虧損的評估乃基於自初步確認以來發生違約的可能性或風險的顯著增加。

3. BASIS OF PREPARATION OF FINANCIAL STATEMENTS AND SIGNIFICANT ACCOUNTING POLICIES - continued

3.2 Significant accounting policies - continued

Financial instruments - continued

Financial assets - continued

Amortised cost and interest income

Interest income is recognised using the effective interest method for financial assets measured subsequently at amortised cost. Interest income is calculated by applying the effective interest rate to the gross carrying amount of a financial asset, except for financial assets that have subsequently become credit-impaired (see below). For financial assets that have subsequently become credit-impaired, interest income is recognised by applying the effective interest rate to the amortised cost of the financial asset from the next reporting period. If the credit risk on the credit-impaired financial instrument improves so that the financial asset is no longer credit-impaired, interest income is recognised by applying the effective interest rate to the gross carrying amount of the financial asset from the beginning of the reporting period following the determination that the asset is no longer credit-impaired.

Impairment of financial assets

The Hospital performs impairment assessment under expected credit loss (“ECL”) model on financial assets (including debtors and other receivables, time deposits with original maturity of not less than three months and bank balances) which are subject to impairment assessment under HKFRS 9. The amount of ECL is updated at each reporting date to reflect changes in credit risk since initial recognition.

Lifetime ECL represents the ECL that will result from all possible default events over the expected life of the relevant instrument. In contrast, 12-month ECL (“12m ECL”) represents the portion of lifetime ECL that is expected to result from default events that are possible within 12 months after the reporting date. Assessments are done based on the Hospital’s historical credit loss experience, adjusted for factors that are specific to the debtors, general economic conditions and an assessment of both the current conditions at the reporting date as well as the forecast of future conditions.

The Hospital always recognises lifetime ECL for debtors from contracts with customers.

For all other instruments, the Hospital measures the loss allowance equal to 12m ECL, unless there has been a significant increase in credit risk since initial recognition, in which case the Hospital recognises lifetime ECL. The assessment of whether lifetime ECL should be recognised is based on significant increases in the likelihood or risk of a default occurring since initial recognition.

3. 財務報表的編制基準及主要會計政策 - 續

3.2 主要會計政策 - 續

金融工具 - 續

金融資產 - 續

金融資產減值 - 續

(i) 信貸風險大幅增加

於評估信貸風險自初始確認以來是否大幅增加時，本醫院比較於報告日期就金融工具發生違約的風險與於初始確認日期就該金融工具發生違約的風險。於作出此評估時，本醫院考慮屬合理及可支援的定量及定質數據，包括過往經驗及在並無繁重成本或工作下可得的前瞻性資料。

尤其是，於評估信貸風險是否已大幅增加時，下列資料會被考慮：

- 金融工具的外在(如有)或內在信貸評級的實際或預期嚴重轉差；
- 信貸風險的外在市場指標嚴重轉差(如債務人的信貸息差及信貸違約掉期價格大幅上升)；
- 預期導致債務人償還其債務的能力大幅減少的業務、財務或經濟狀況的現有或預測不利變動；
- 債務人的經營業績實際或預期嚴重轉差；
- 債務人所在的監管、經濟或科技環境的實際或預期重大不利變動，導致債務人償還其債務的能力大幅降低。

不論上述評估的結果，當合約付款日已逾期超過30日，本醫院會假定信貸風險自初始確認起已大幅增加，除非本醫院具有合理及可支援資料展示相反情況。

本醫院定期監察用以識別信貸風險有否顯著增加的標準之效率，並酌情對其進行修訂，以確保標準能在金額逾期能識別顯著增加之信貸風險。

3. BASIS OF PREPARATION OF FINANCIAL STATEMENTS AND SIGNIFICANT ACCOUNTING POLICIES - continued

3.2 Significant accounting policies - continued

Financial instruments - continued

Financial assets - continued

Impairment of financial assets - continued

(i) Significant increase in credit risk

In assessing whether the credit risk has increased significantly since initial recognition, the Hospital compares the risk of a default occurring on the financial instrument as at the reporting date with the risk of a default occurring on the financial instrument as at the date of initial recognition. In making this assessment, the Hospital considers both quantitative and qualitative information that is reasonable and supportable, including historical experience and forward-looking information that is available without undue cost or effort.

In particular, the following information is taken into account when assessing whether credit risk has increased significantly:

- an actual or expected significant deterioration in the financial instrument's external (if available) or internal credit rating;
- significant deterioration in external market indicators of credit risk, e.g. a significant increase in the credit spread, the credit default swap prices for the debtor;
- existing or forecast adverse changes in business, financial or economic conditions that are expected to cause a significant decrease in the debtor's ability to meet its debt obligations;
- an actual or expected significant deterioration in the operating results of the debtor;
- an actual or expected significant adverse change in the regulatory, economic, or technological environment of the debtor that results in a significant decrease in the debtor's ability to meet its debt obligations.

Irrespective of the outcome of the above assessment, the Hospital presumes that the credit risk has increased significantly since initial recognition when contractual payments are more than 30 days past due, unless the Hospital has reasonable and supportable information that demonstrates otherwise.

The Hospital regularly monitors the effectiveness of the criteria used to identify whether there has been a significant increase in credit risk and revises them as appropriate to ensure that the criteria are capable of identifying significant increase in credit risk before the amount becomes past due.

3. 財務報表的編制基準及主要會計政策 - 續

3.2 主要會計政策 - 續

金融工具 - 續

金融資產 - 續

金融資產減值 - 續

(ii) 違約的定義

就內部信貸風險管理而言，本醫院認為，違約事件在內部制訂或從外界來源的資料顯示債務人不太可能向債權人(包括本醫院)全額支付(未計及本醫院所持任何抵押品)時發生。

不論上文所述，當金融資產已逾期超過90日，則本醫院認定已發生違約，除非本醫院具有合理及可支援資料展示更為滯後的違約準則更為合適。

(iii) 信貸減值金融資產

金融資產在一項或以上事件(對該金融資產估計未來現金流量構成不利影響)發生時變為信貸減值。以下事項為金融資產發生信貸減值，包括可觀察資料的證據：

- (a) 發行人或借款人的重大財困；
- (b) 違反合約(如違約或逾期事件)；
- (c) 借款人的貸款人因有關借款人財困的經濟或合約理由而向借款人批出貸款人原本不會另行考慮的優惠；或
- (d) 借款人將可能陷入破產或其他財務重組。

(iv) 撇賬政策

當有資料顯示對方處於嚴重財困且無實際可收回之期望(例如對方被清盤或已進入破產程序時)，本醫院會將金融資產撇賬。考慮法律意見後(倘合適)，遭撇賬的金融資產可能仍須按本醫院追討程序執行。撇賬構成終止確認事項。任何其後收回之壞賬須在收支及全面收益表內入賬。

3. BASIS OF PREPARATION OF FINANCIAL STATEMENTS AND SIGNIFICANT ACCOUNTING POLICIES - continued

3.2 Significant accounting policies - continued

Financial instruments - continued

Financial assets - continued

Impairment of financial assets - continued

(ii) Definition of default

For internal credit risk management, the Hospital considers an event of default occurs when information developed internally or obtained from external sources indicates that the debtor is unlikely to pay its creditors, including the Hospital, in full (without taking into account any collaterals held by the Hospital).

Irrespective of the above, the Hospital considers that default has occurred when a financial asset is more than 90 days past due unless the Hospital has reasonable and supportable information to demonstrate that a more lagging default criterion is more appropriate.

(iii) Credit-impaired financial assets

A financial asset is credit-impaired when one or more events that have a detrimental impact on the estimated future cash flows of that financial asset have occurred. Evidence that a financial asset is credit-impaired includes observable data about the following events:

- (a) significant financial difficulty of the issuer or the borrower;
- (b) a breach of contract, such as a default or past due event;
- (c) the lender(s) of the borrower, for economic or contractual reasons relating to the borrower's financial difficulty, having granted to the borrower a concession(s) that the lender(s) would not otherwise consider;
- (d) it is becoming probable that the borrower will enter bankruptcy or other financial reorganisation.

(iv) Write-off policy

The Hospital writes off a financial asset when there is information indicating that the counterparty is in severe financial difficulty and there is no realistic prospect of recovery, for example, when the counterparty has been placed under liquidation or has entered into bankruptcy proceedings. Financial assets written off may still be subject to enforcement activities under the Hospital's recovery procedures, taking into account legal advice where appropriate. A write-off constitutes a derecognition event. Any subsequent recoveries are recognised in the statement of income and expenditure and other comprehensive income.

3. 財務報表的編制基準及主要會計政策 - 續

3.2 主要會計政策 - 續

金融工具 - 續

金融資產 - 續

金融資產減值 - 續

(v) 預期信貸虧損之計量及確認

預期信貸虧損之計量為違約概率、違約損失(即違約時損失程度)及違約時風險之函數。違約概率及違約損失之評估乃基於歷史資料及前瞻性資料作出。預期信貸虧損的估算乃無偏見及概率加權的金額，以各自發生違約的風險為權重確定。

一般而言，預期信貸虧損為根據合約到期支付予本醫院之所有合約現金流量與本醫院預期收取之所有現金流量之間的差額，並按於初始確認時釐定的實際利率貼現。

某些應收賬款的全期預期信貸虧損是綜合逾期信息和相關信用信息（例如前瞻性宏觀經濟信息）的基礎上作出的考慮。

對於集體評估，本醫院在制定分組時考慮了以下特徵：

- 逾期狀況；
- 債務人的性質、規模及行業；和
- 可用的外部信用評級。

分組定期由管理層審閱，以確保各組繼續擁有相近信貸風險特徵。

利息收入按金融資產之賬面總值計算，惟倘該金融資產出現信貸減值，則利息收入乃按金融資產之攤銷成本計算。

終止確認金融資產

本醫院僅從資產現金流量的合約權利屆滿時，或向另一實體轉讓金融資產及該資產所有權的絕大部分風險及回報時終止確認金融資產。

於終止確認按攤銷成本計量的金融資產時，資產賬面值與已收及應收代價總和之間的差額會於收支及全面收益表內確認。

3. BASIS OF PREPARATION OF FINANCIAL STATEMENTS AND SIGNIFICANT ACCOUNTING POLICIES - continued

3.2 Significant accounting policies - continued

Financial instruments - continued

Financial assets - continued

Impairment of financial assets - continued

(v) Measurement and recognition of ECL

The measurement of ECL is a function of the probability of default, loss given default (i.e. the magnitude of the loss if there is a default) and the exposure at default. The assessment of the probability of default and loss given default is based on historical data and forward-looking information. Estimation of ECL reflects an unbiased and probability-weighted amount that is determined with the respective risks of default occurring as the weights.

Generally, the ECL is the difference between all contractual cash flows that are due to the Hospital in accordance with the contract and the cash flows that the Hospital expects to receive, discounted at the effective interest rate determined at initial recognition.

Lifetime ECL for certain trade debtors are considered on a collective basis taking into consideration past due information and relevant credit information such as forward looking macroeconomic information.

For collective assessment, the Hospital takes into consideration the following characteristics when formulating the grouping:

- Past-due status;
- Nature, size and industry of debtors; and
- External credit ratings where available.

The grouping is regularly reviewed by management to ensure the constituents of each group continue to share similar credit risk characteristics.

Interest income is calculated based on the gross carrying amount of the financial asset unless the financial asset is credit-impaired, in which case interest income is calculated based on amortised cost of the financial asset.

Derecognition of financial assets

The Hospital derecognises a financial asset only when the contractual rights to the cash flows from the asset expire, or when it transfers the financial asset and substantially all the risks and rewards of ownership of the asset to another entity.

On derecognition of a financial asset measured at amortised cost, the difference between the asset's carrying amount and the sum of the consideration received and receivable is recognised in the statement of income and expenditure and other comprehensive income.

3. 財務報表的編制基準及主要會計政策 - 續

3.2 主要會計政策 - 續

金融工具 - 續

金融負債及權益

分類為債務或權益

債務及權益工具乃根據合約安排的實質內容以及金融負債及權益工具的定義分類為金融負債或權益。

按攤銷成本計量的金融負債

金融負債(包括應付賬款和其他應付賬款)其後採用實際利率法按攤銷成本計量。

終止確認金融負債

本醫院會，及只會於其責任獲解除、取消或屆滿時，才會終止確認金融負債。終止確認的金融負債的賬面值與已付及應付代價之間的差額會於收支及全面收益表內入賬。

4. 政府資助金

	<u>2022</u> 港元	<u>2021</u> 港元
經常資助金	209,935,000	211,743,000
減：遞延資助金	(3,460,588)	(3,030,512)
加：遞延收入撥回	3,217,924	2,651,533
	<u>209,692,336</u>	<u>211,364,021</u>

於年內，從政府得到之經常資助金的 3,460,588 港元 (2021：3,030,512 港元) 與物業、機器及設備相關，已被遞延並於有關資產的估計可用年期按系統基準撥回至收支及全面收益表。

3. BASIS OF PREPARATION OF FINANCIAL STATEMENTS AND SIGNIFICANT ACCOUNTING POLICIES - continued

3.2 Significant accounting policies - continued

Financial instruments - continued

Financial liabilities and equity

Classification as debt or equity

Debt and equity instruments are classified as either financial liabilities or as equity in accordance with the substance of the contractual arrangements and the definitions of a financial liability and an equity instrument.

Financial liabilities at amortised cost

Financial liabilities (including creditors and other payables) are subsequently measured at amortised cost, using the effective interest method.

Derecognition of financial liabilities

The Hospital derecognises financial liabilities when, and only when, the Hospital's obligations are discharged, cancelled or have expired. The difference between the carrying amount of the financial liability derecognised and the consideration paid and payable is recognised in the statement of income and expenditure and other comprehensive income.

4. GOVERNMENT SUBVENTION

	<u>2022</u> HK\$	<u>2021</u> HK\$
Recurrent subvention	209,935,000	211,743,000
Less: Amount deferred	(3,460,588)	(3,030,512)
Add: Release of deferred income	3,217,924	2,651,533
	<u>209,692,336</u>	<u>211,364,021</u>

During the year, recurrent subvention of HK\$3,460,588 (2021: HK\$3,030,512) from the Government relating to property, plant and equipment was deferred and is released to the statement of income and expenditure and other comprehensive income over the expected useful life of the relevant assets on a systematic basis.

5. 診療收費

	<u>2022</u> 港元	<u>2021</u> 港元
教學病人診療收費	6,244,757	4,228,468
私家病人診療收費	3,193,914	2,315,086
	<u>9,438,671</u>	<u>6,543,554</u>

(i) 來自客戶合約之收益分類

服務類型	<u>2022</u> 港元	<u>2021</u> 港元
提供牙科協助服務	<u>9,438,671</u>	<u>6,543,554</u>
確認收益的時間		
隨著時間	<u>9,438,671</u>	<u>6,543,554</u>

(ii) 客戶合約的履約責任

提供牙科協助服務

履約責任隨提供牙科協助服務的時間達成。

所有牙科援助服務的期限均為一年或一年以下。根據「香港財務報告準則」第 15 號，分配至未履行合約的交易價格可不予披露。

6. 學費收費

	<u>2022</u> 港元	<u>2021</u> 港元
牙科工藝訓練	883,596	883,448
牙科衛生護理訓練	679,253	687,498
牙科手術助理員訓練	519,978	553,445
牙科治療訓練	78,953	87,198
	<u>2,161,780</u>	<u>2,211,589</u>

5. PATIENT FEES AND CHARGES

	<u>2022</u> HK\$	<u>2021</u> HK\$
Teaching patient fee	6,244,757	4,228,468
Private patient fee	3,193,914	2,315,086
	<u>9,438,671</u>	<u>6,543,554</u>

(i) Disaggregation of revenue from contracts with customers

	<u>2022</u> HK\$	<u>2021</u> HK\$
Typed service		
Provision of dental assistance services	9,438,671	6,543,554
	<u>9,438,671</u>	<u>6,543,554</u>
Timing of revenue recognition		
Over time	9,438,671	6,543,554
	<u>9,438,671</u>	<u>6,543,554</u>

(ii) Performance obligations for contracts with customers

Provision of dental assistance services

The performance obligation is satisfied over time as dental assistance services are rendered.

All provision of dental assistance service are for periods of one year or less. As permitted under HKFRS 15, the transaction price allocated to these unsatisfied contracts is not disclosed.

6. TUITION FEES

	<u>2022</u> HK\$	<u>2021</u> HK\$
Training of student dental technicians	883,596	883,448
Training of student dental hygienists	679,253	687,498
Training of student dental surgery assistants	519,978	553,445
Training of student dental therapists	78,953	87,198
	<u>2,161,780</u>	<u>2,211,589</u>

6. 學費收費 - 續

(i) 來自客戶合約之收益分類

	<u>2022</u> 港元	<u>2021</u> 港元
服務類型		
提供訓練課程	2,161,780	2,211,589
確認收益的時間		
隨著時間	2,161,780	2,211,589

(ii) 客戶合約的履約責任

提供訓練課程

履約責任隨提供訓練課程的時間達成。

所有提供訓練課程的期限均為一年或一年以下。根據「香港財務報告準則」第 15 號，分配至未履行合約的交易價格可不予披露。

7. 員工薪酬及有關費用

	<u>2022</u> 港元	<u>2021</u> 港元
薪酬	110,519,467	111,183,744
退休福利	9,875,866	10,491,306
約滿酬金	4,063,978	3,724,186
臨時員工薪酬及退休福利	12,211,914	12,124,706
津貼	2,330,322	1,290,070
	<u>139,001,547</u>	<u>138,814,012</u>

8. 其他營運支出

	<u>2022</u> 港元	<u>2021</u> 港元
牙科物料及消耗物支出	21,968,543	16,645,847
維修及保養費用	17,453,129	16,793,122
燃料及電費	8,554,163	7,434,025
租用服務及專業服務費用	17,583,666	18,497,678
物業、機器及設備之折舊	7,956,198	3,385,716
差餉	1,552,000	1,750,000
行政費	1,414,403	1,087,681
保險費	3,409,030	3,362,161
其他支出	697,757	1,090,450
	<u>80,588,889</u>	<u>70,046,680</u>

6. TUITION FEES - continued

(i) Disaggregation of revenue from contracts with customers

	<u>2022</u> HK\$	<u>2021</u> HK\$
Typed service		
Provision of training courses	2,161,780	2,211,589
Timing of revenue recognition		
Over time	2,161,780	2,211,589

(ii) Performance obligations for contracts with customers

Provision of training courses

The performance obligation is satisfied over time as training courses are conducted.

All provision of training courses are for periods of one year or less. As permitted under HKFRS 15, the transaction price allocated to these unsatisfied contracts is not disclosed.

7. PERSONNEL EMOLUMENTS

	<u>2022</u> HK\$	<u>2021</u> HK\$
Salaries	110,519,467	111,183,744
Retirement benefits	9,875,866	10,491,306
Gratuities	4,063,978	3,724,186
Wages and retirement benefits for temporary staff	12,211,914	12,124,706
Allowances	2,330,322	1,290,070
	<u>139,001,547</u>	<u>138,814,012</u>

8. OTHER OPERATING CHARGES

	<u>2022</u> HK\$	<u>2021</u> HK\$
Specialist supplies and consumables	21,968,543	16,645,847
Repairs and maintenance	17,453,129	16,793,122
Fuel, light and power	8,554,163	7,434,025
Hire of services and professional fees	17,583,666	18,497,678
Depreciation of property, plant and equipment	7,956,198	3,385,716
Rates	1,552,000	1,750,000
Administration	1,414,403	1,087,681
Insurance	3,409,030	3,362,161
Other charges	697,757	1,090,450
	<u>80,588,889</u>	<u>70,046,680</u>

9. 稅項

本醫院按香港稅務條例第 88 節獲豁免繳納香港利得稅。

10. 物業、機器及設備

	資本工程 項目 港元	租賃改良 港元	傢俬、 裝置 及設備 港元	牙科設備 港元	電腦設備 港元	在建工程 港元	總計 港元
成本							
於 2020 年 4 月 1 日	-	-	999,434	13,300,461	1,101,587	-	15,401,482
添置	15,373,000	7,280,110	325,838	4,140,674	892,082	399,200	28,410,904
資本工程項目相關的政府資助金	(15,373,000)	-	-	-	-	-	(15,373,000)
於 2021 年 3 月 31 日	-	7,280,110	1,325,272	17,441,135	1,993,669	399,200	28,439,386
添置	16,986,534	17,744,752	649,400	3,826,428	1,353,620	-	40,560,734
資本工程項目相關的政府資助金	(16,986,534)	-	-	-	-	-	(16,986,534)
於 2022 年 3 月 31 日	-	25,024,862	1,974,672	21,267,563	3,347,289	399,200	52,013,586
折舊							
於 2020 年 4 月 1 日	-	-	566,563	6,796,509	965,926	-	8,328,998
年度撥備	-	507,594	256,896	2,426,589	194,637	-	3,385,716
於 2021 年 3 月 31 日	-	507,594	823,459	9,223,098	1,160,563	-	11,714,714
年度撥備	-	3,765,084	467,771	3,189,980	533,363	-	7,956,198
於 2022 年 3 月 31 日	-	4,272,678	1,291,230	12,413,078	1,693,926	-	19,670,912
賬面淨值							
於 2022 年 3 月 31 日	-	20,752,184	683,442	8,854,485	1,653,363	399,200	32,342,674
於 2021 年 3 月 31 日	-	6,772,516	501,813	8,218,037	833,106	399,200	16,724,672

上述物業、機器及設備項目採用直線法按以下年利率計提折舊：

租賃改良	租賃期較短者，或 5 年
傢俬、裝置及設備	3 年
牙科設備	5 年
電腦設備	3 年

於年內，從政府得到與資本工程項目相關的 16,986,534 港元 (2021：15,373,000 港元) 資本資助金已被確認於沖減相關資產賬面值。

9. TAXATION

The Hospital is exempted from Hong Kong Profits Tax under section 88 of the Hong Kong Inland Revenue Ordinance.

10. PROPERTY, PLANT AND EQUIPMENT

	Capital works projects HK\$	Leasehold improvement HK\$	Furniture, fixtures and equipment HK\$	Dental equipment HK\$	Computer equipment HK\$	Construction in progress HK\$	Total HK\$
COST							
At 1 April 2020	-	-	999,434	13,300,461	1,101,587	-	15,401,482
Additions	15,373,000	7,280,110	325,838	4,140,674	892,082	399,200	28,410,904
Government subvention relating to capital works projects	(15,373,000)	-	-	-	-	-	(15,373,000)
At 31 March 2021	-	7,280,110	1,325,272	17,441,135	1,993,669	399,200	28,439,386
Additions	16,986,534	17,744,752	649,400	3,826,428	1,353,620	-	40,560,734
Government subvention relating to capital works projects	(16,986,534)	-	-	-	-	-	(16,986,534)
At 31 March 2022	-	25,024,862	1,974,672	21,267,563	3,347,289	399,200	52,013,586
DEPRECIATION							
At 1 April 2020	-	-	566,563	6,796,509	965,926	-	8,328,998
Provided for the year	-	507,594	256,896	2,426,589	194,637	-	3,385,716
At 31 March 2021	-	507,594	823,459	9,223,098	1,160,563	-	11,714,714
Provided for the year	-	3,765,084	467,771	3,189,980	533,363	-	7,956,198
At 31 March 2022	-	4,272,678	1,291,230	12,413,078	1,693,926	-	19,670,912
CARRYING VALUES							
At 31 March 2022	-	20,752,184	683,442	8,854,485	1,653,363	399,200	32,342,674
At 31 March 2021	-	6,772,516	501,813	8,218,037	833,106	399,200	16,724,672

The above items of property, plant and equipment are depreciated on a straight-line basis at the following rates per annum:

Leasehold improvements	Over the shorter of the term of the lease, or 5 years
Furniture, fixture and equipment	3 years
Dental equipment	5 years
Computer equipment	3 years

During the year, capital subvention of HK\$16,986,534 (2021: HK\$15,373,000) from the Government relating to capital works projects were recognised as a reduction in the carrying amount of the relevant asset.

11. 應收賬款、預付款項及按金

	<u>2022</u> 港元	<u>2021</u> 港元
應收賬款	32,860	13,603
預付款項	2,370,550	2,251,659
按金及其他應收賬款	202,115	397,456
	<u>2,605,525</u>	<u>2,662,718</u>

本醫院給予客戶的平均信用期為 14 天。本醫院未就該等餘額持有任何抵押品。

截至 2022 年及 2021 年 3 月 31 日止年度，本醫院對應收賬款和其他應收款進行了減值評估，並得出結論，預期信貸虧損並不重大，因此，於兩個報告期末，均未對應收賬款和其他應收款項確認減值。

減值評估的詳情載於附註 19。

12. 銀行存款及現金

截至 2022 年 3 月 31 日，原始期限不超過三個月的定期存款 60,000 港元(2021：23,246,299 港元)的年利率為 0.025% (2021：0.05%至 0.8%)。

截至 2022 年 3 月 31 日和 2021 年 3 月 31，銀行存款按市場利率計息，年利率為 0.001%。

減值評估的詳情載於附註 19。

13. 合約負債

	<u>2022</u> 港元	<u>2021</u> 港元
來自客戶之預收款項		
提供牙科協助服務	461,331	457,916
提供訓練課程	660,688	-
	<u>1,122,019</u>	<u>457,916</u>

截至 2020 年 4 月 1 日，合約負債為 1,301,655 港元。

把預計在本醫院正常經營週期內結算的本醫院合約負債分類為流動負債。

11. RECEIVABLES, PREPAYMENTS AND DEPOSITS

	<u>2022</u> HK\$	<u>2021</u> HK\$
Debtors	32,860	13,603
Prepayments	2,370,550	2,251,659
Deposits and other receivables	202,115	397,456
	<u>2,605,525</u>	<u>2,662,718</u>

The Hospital allows an average credit period of 14 days to its customers. The Hospital does not hold any collateral over these balances.

For the years ended 31 March 2022 and 2021, the Hospital performed impairment assessment on trade and other receivables and concluded that the ECL were insignificant, accordingly, no impairment was recognised on trade and other receivables at the end of both of the reporting periods.

Details of impairment assessment are set out in Note 19.

12. BANK BALANCES AND CASH

At 31 March 2022, time deposits of HK\$60,000 (2021: HK\$23,246,299) with original maturity of not less than three months carry interest at market rates at 0.025% (2021: ranged from 0.05% to 0.8%) per annum.

At 31 March 2022 and 31 March 2021, bank balances carry interest at market rates at 0.001% per annum.

Details of impairment assessment are set out in Note 19.

13. CONTRACT LIABILITIES

	<u>2022</u> HK\$	<u>2021</u> HK\$
Advances received from customers		
Provision of dental assistance services	461,331	457,916
Provision of training courses	660,688	-
	<u>1,122,019</u>	<u>457,916</u>

As at 1 April 2020, contract liabilities amounted to HK\$1,301,655.

Contract liabilities of the Hospital, which are expected to be settled within the Hospital's normal operating cycle, are classified as current.

13. 合約負債 - 續

截至 2022 年 3 月 31 日止年度，本醫院沒有就計入年初合約負債的牙科協助服務所確認的收入(2021：26,792 港元)。

截至 2022 年 3 月 31 日止年度，本醫院沒有就計入年初合約負債的培訓課程所確認的收入(2021：797,413 港元)。

14. 遞延收入

遞延收入指從政府得到與物業、機器及設備相關的經常資助金。遞延收入以有關資產的估計可用年期按系統基準撥回至收入。

15. 退休福利計劃

本醫院同時參與根據「職業退休計劃條例」(以下簡稱「ORSO 計劃」)註冊的固定繳款計劃和根據「強制性公積金計劃條例」在香港設立的強制性公積金計劃(以下簡稱「強積金計劃」)。該等計劃的資產與本醫院的資產分開持有，由受託人控制。在強積金計劃成立前已加入職業退休計劃的僱員可選擇留在職業退休計劃內或轉為強積金，而在 2000 年 12 月 1 日或之後加入本醫院的所有新僱員均須加入強積金計劃。

對於強積金計劃的成員，本醫院向該計劃支付相關工資成本的 5%，與僱員供款金額相當。

職業退休計劃的資金每月由僱員和本醫院供款，金額分別為僱員基本工資的 5%和 15%。

收支及全面收益表中確認的總費用 10,372,582 港元 (2021：10,947,373 港元)為應付定額供款計劃(包括 ORSO 計劃和強積金計劃)的供款。

16. 資本承擔

	<u>2022</u> 港元	<u>2021</u> 港元
已簽約但尚未於財務報表中確認的購置物業、 機器及設備的資本支出	<u>598,800</u>	<u>598,800</u>

13. CONTRACT LIABILITIES - continued

No revenue from provision of dental assistance services recognised during the year ended 31 March 2022 that was included in the contract liabilities at the beginning of the year (2021: HK\$26,792).

No revenue from provision of training courses recognised during the year ended 31 March 2022 that was included in the contract liabilities at the beginning of the year (2021: HK\$797,413).

14. DEFERRED INCOME

Deferred income represents recurrent subvention received from the Government relating to property, plant and equipment and is recognised as income over the expected useful life of the relevant assets on a systematic basis.

15. RETIREMENT BENEFIT SCHEMES

The Hospital participates in both a defined contribution scheme which is registered under the Occupational Retirement Schemes Ordinance (the “ORSO Scheme”) and a Mandatory Provident Fund Scheme (the “MPF Scheme”) established under the Mandatory Provident Fund Schemes Ordinance in Hong Kong. The assets of the schemes are held separately from those of the Hospital, in funds under the control of trustees. Employees who were members of the ORSO Scheme prior to the establishment of the MPF Scheme were offered a choice of staying within the ORSO Scheme or switching to the MPF Scheme, whereas all new employees joining the Hospital on or after 1 December 2000 are required to join the MPF Scheme.

For members of the MPF Scheme, the Hospital contributes 5% of relevant payroll costs to the scheme, which contribution is matched by the employee.

The ORSO Scheme is funded by monthly contributions from both employees and the Hospital at rates of 5% and 15%, respectively, of the employee’s basic salary.

The total expense recognised in the statement of income and expenditure and other comprehensive income of HK\$10,372,582 (2021: HK\$10,947,373) represent contributions payable to the defined contribution schemes (including the ORSO Scheme and MPF Scheme).

16. CAPITAL COMMITMENTS

	<u>2022</u> HK\$	<u>2021</u> HK\$
Capital expenditure in respect of the acquisition of property, plant and equipment contracted for but not provided in the financial statements	<u>598,800</u>	<u>598,800</u>

17. 資本風險管理

本醫院管理其資本以確保本持續經營的能力，並保持健康資本比率，支持其營運。本醫院的資本結構包括儲備金。

管理局定期審閱資本結構。為了維持資本結構，本醫院透過政府資助金獲得資金。本醫院整體策略與上一年保持不變。

18. 關聯方交易

就該等財務報表而言，本醫院與政府部門、機構或由政府控制的實體之間的交易被視作關聯方交易。於年內重大關聯方交易主要包括財務報表附註中披露從政府收到的年度經常資助金和資本補助金，以及為本醫院提供各種維修服務和設備銷售而向機電服務營運基金支付的款項，具體如下：

	<u>2022</u> 港元	<u>2021</u> 港元
來自政府的經常資助金	209,935,000	211,473,000
來自政府的資本補助金	16,986,534	15,373,000
從機電工程營運基金購置的物業、機器及設備項目	18,784,032	11,470,200
機電工程營運基金收取的機電維修及其他服務費用開支	11,857,496	12,571,543

此外，本醫院使用的土地和建築物是為政府財產。本醫院並無就使用土地和建築物支付任何租金。

主要管理人員的報酬

本年度關鍵管理層成員的薪酬如下：

	<u>2022</u> 港元	<u>2021</u> 港元
短期員工福利	1,940,700	2,444,415
離職後福利	-	10,500
	<u>1,940,700</u>	<u>2,454,915</u>

17. CAPITAL RISK MANAGEMENT

The Hospital manages its capital to ensure that the Hospital will be able to continue as a going concern and to maintain health capital ratios in order to support its operations. The capital structure of the Hospital comprises of reserves.

The Board reviews the capital structure on a regular basis. To maintain the capital structure, the Hospital obtains funding through government subvention. The Hospital's overall strategy remains unchanged from prior year.

18. RELATED PARTY TRANSACTIONS

For the purpose of these financial statements, transactions between the Hospital and Government departments, agencies or Government controlled entities are considered to be related party transactions. Significant related party transactions during the year principally included annual recurrent and capital subventions received from the Government as disclosed in respective notes to the financial statements and amounts paid to Electrical and Mechanical Services Trading Fund for providing various maintenance services and sales of equipment to the Hospital as follows:

	<u>2022</u> HK\$	<u>2021</u> HK\$
Recurrent subvention from the Government	209,935,000	211,473,000
Capital subvention from the Government	16,986,534	15,373,000
Purchase of items of property, plant and equipment from Electrical and Mechanical Services Trading Fund	18,784,032	11,470,200
Electrical and mechanical maintenance and other service fee charged by Electrical and Mechanical Services Trading Fund	<u>11,857,496</u>	<u>12,571,543</u>

In addition, the land and buildings used by the Hospital are the property of the Government. The Hospital does not pay any rent to the Government for the use of land and buildings.

Compensation of key management personnel

The remuneration of members of key management during the year is as follows:

	<u>2022</u> HK\$	<u>2021</u> HK\$
Short-term employee benefits	1,940,700	2,444,415
Post-employment benefits	-	10,500
	<u>1,940,700</u>	<u>2,454,915</u>

19. 金融工具

(a) 金融工具分類

	<u>2022</u> 港元	<u>2021</u> 港元
金融資產 按攤銷成本	<u>28,012,965</u>	<u>39,983,667</u>
金融負債 按攤銷成本	<u>15,403,418</u>	<u>14,097,739</u>

(b) 財務風險管理目標和政策

本醫院的主要金融工具包括應收賬款和其他應收賬款、原始期限不超過三個月的定期存款、銀行存款和現金及應付賬款和其他應付賬款。各項金融工具的詳細情況說明見各附註。與這些金融工具有關的風險，以及本醫院為降低這些風險所採取的風險管理政策如下所述。管理層管理及監控上述風險，以確保及時和有效地採取妥善措施。

市場風險

(i) 外幣風險

本醫院以港元收取所有收入，且大部分經常支出和資本支出也以港元支付。管理層認為，由於本醫院的大部分交易均以本醫院的功能貨幣計價，因此本醫院面臨的外匯風險極小。

目前，本醫院並無外匯對沖政策。然而，管理層監控外匯風險，並在必要時考慮對沖重大外匯風險。

利率風險

本醫院存在與固定利率銀行存款相關的公允價值利率風險。本醫院還存在與可變利率銀行存款相關的現金流利率風險。目前，本醫院並無利率對沖政策。然而，管理層監控利率風險，並在必要時考慮對沖重大利率風險。管理層認為，本醫院對利率的敏感度不大。

19. FINANCIAL INSTRUMENTS

(a) Categories of financial instruments

	<u>2022</u> HK\$	<u>2021</u> HK\$
Financial assets		
Amortised cost	<u>28,012,965</u>	<u>39,983,667</u>
Financial liabilities		
Amortised cost	<u>15,403,418</u>	<u>14,097,739</u>

(b) Financial risk management objectives and policies

The Hospital's major financial instruments include debtors and other receivables, time deposits with original maturity of not less than three months, bank balances and cash and creditors and other payables. Details of these financial instruments are disclosed in the respective notes. The risks associated with these financial instruments and the policies on how to mitigate these risks are set out below. The management manages and monitors these exposures to ensure appropriate measures are implemented on a timely and effective manner.

Market risk

(i) Currency risk

The Hospital collects all of its income in HK\$ and incurs most of the recurrent expenditures as well as capital expenditures in HK\$. Management considers that the Hospital's exposure to foreign currency exchange risk is insignificant as the majority of the Hospital's transactions are denominated in the functional currency of the Hospital.

The Hospital currently does not have a foreign currency hedging policy. However, management monitors foreign exchange exposure and will consider hedging significant foreign currency exposure should the need arise.

Interest rate risk

The Hospital is exposed to fair value interest rate risk in relation to fixed-rate bank deposits. The Hospital is also exposed to cash flow interest rate risk in relation to variable-rate bank balances. The Hospital currently does not have an interest rate hedging policy. However, management monitors interest rate risk exposure and will consider hedging significant interest rate risk exposure should the need arise. Management considers that the Hospital's sensitivity to interest rates is insignificant.

19. 金融工具 - 續

(b) 財務風險管理目標和政策 - 續

信貸風險和減值評估

信貸風險是指本醫院的對方因違約而導致本醫院遭受財務損失的風險。本醫院的信貸風險主要歸因於應收賬款、其他應收賬款和銀行存款。本醫院未持有任何抵押品或其他信貸增級措施，以覆蓋其金融資產相關信貸風險。

本醫院根據預期信貸虧損模型對金融資產進行減值評估。有關本醫院信貸風險管理、最大信貸風險和相關減值評估(如適用)的資訊匯結如下：

應收賬款

對於來自客戶合約的應收賬款，本醫院採用了「香港財務報告準則」第 9 號中的簡易法，以計算全期預期信貸虧損的損失準備金。本醫院根據應收賬款的逾期狀況，在預期信貸虧損模型下，對應收賬款進行了減值評估。由於預期信貸虧損金額極小，因此未計提信貸損失準備金。

其他應收賬款

對於其他應收賬款，管理層根據歷史結算記錄、以往經驗以及定量和定性資訊，包括本醫院毋須耗費過多成本或努力即可取得的合理可證實持前瞻性資料，定期對其他應收賬款的可收回性進行單獨評估。由於預期信貸虧損金額極小，因此未計提信貸損失準備金。

銀行存款/原始期限不超過三個月的定期存款

由於對方是國際信貸機構給予高信用評級、信譽良好的銀行，且相關銀行的違約概率很小，因此銀行存款和定期存款的信用風險不大，預期信貸虧損金額極小，故未計提信貸損失準備金。

流動資金風險

管理流動資金風險時，本醫院監控及維持管理層認為屬充足的現金及現金等價物水平，以作本醫院經營需要，並減低現金流量波動的影響。所有金融負債均不計息且按需償還。

19. FINANCIAL INSTRUMENTS - continued

(b) Financial risk management objectives and policies - continued

Credit risk and impairment assessment

Credit risk refers to the risk that the Hospital's counterparties default on their contractual obligations resulting in financial losses to the Hospital. The Hospital's credit risk exposures are primarily attributable to debtors, other receivables and bank balances. The Hospital does not hold any collateral or other credit enhancements to cover its credit risks associated with its financial assets.

The Hospital performed impairment assessment for financial assets under ECL model. Information about the Hospital's credit risk management, maximum credit risk exposures and the related impairment assessment, if applicable, are summarised as below:

Debtors

For debtors from contract with customers, the Hospital has applied the simplified approach in HKFRS 9 to measure the loss allowance at lifetime ECL. The Hospital performs impairment assessment under ECL model on trade receivables based on past due status of the debtors. No allowance for credit losses is provided as the amount of ECL is insignificant.

Other receivables

For other receivables, the management makes periodic individual assessment on the recoverability of other receivables based on historical settlement records, past experience, and also quantitative and qualitative information including reasonable and supportive forward-looking information available to the Hospital without undue cost or effort. No allowance for credit losses is provided as the amount of ECL is insignificant.

Bank balances/time deposits with original maturity of not less than three months

Credit risk on bank balances and time deposits are limited because the counterparties are reputable banks with high credit ratings assigned by international credit agencies, and the probability of default of the counterparty banks is insignificant, accordingly, no allowance for credit losses is provided as the amount of ECL is insignificant.

Liquidity risk

In the management of the liquidity risk, the Hospital monitors and maintains a level of cash and cash equivalents deemed adequate by the management to finance the Hospital's operations and mitigate the effects of fluctuations in cash flows. All the financial liabilities are non-interest bearing and repayable on demand.

19. 金融工具 - 續

(c) 金融工具的公允價值計量

管理局認為，財務報表中按攤銷成本計量的金融資產及金融負債的賬面價值接近該等資產及負債的公允價值。

19. FINANCIAL INSTRUMENTS - continued

(c) Fair value measurements of financial instruments

The Board consider that the carrying amount of financial assets and financial liabilities recorded at amortised cost in the financial statements approximate their fair value.

(僅用於管理層資料用途)

菲臘牙科醫院

根據香港特別行政區政府與菲臘牙科醫院之間的《行政安排備忘錄》之資助金儲備計算依據

截至 2022 年 3 月 31 日止年度

根據香港特別行政區政府(「政府」)與菲臘牙科醫院之間簽訂的《行政安排備忘錄》，資助金儲備不得在任何時候超過本財政年度的年度經常資助金的 15%。超出此限制的金額應在本財政年度退還給政府，或從下一年的政府資助金中扣除。

	<u>2022</u> 港元	<u>2021</u> 港元
於年初	27,679,673	23,121,942
年度全面收益總額	2,251,478	12,717,084
遞延收入撥回	(3,217,924)	(2,651,533)
物業、機器及設備之折舊	7,956,198	3,385,716
存貨之減少	173,427	175,809
累算年假之(減少)增加	(723,784)	454,716
累算員工約滿酬金之(減少)增加	(147,376)	483,331
購置物業、機器及設備項目	(20,113,612)	(10,007,392)
於年終	<u>13,858,080</u>	<u>27,679,673</u>
分析如下：		
資助金儲備	<u>13,858,080</u>	<u>27,679,673</u>

(For management information purpose only)

THE PRINCE PHILIP DENTAL HOSPITAL

BASIS OF CALCULATION OF RESERVE FROM SUBVENTION UNDER THE MEMORANDUM OF ADMINISTRATIVE ARRANGEMENTS BETWEEN THE GOVERNMENT OF THE HONG KONG SPECIAL ADMINISTRATIVE REGION AND THE PRINCE PHILIP DENTAL HOSPITAL

YEAR ENDED 31 MARCH 2022

In accordance with the Memorandum of Administrative Arrangements entered into between the Government of the Hong Kong Special Administrative Region (the “Government”) and The Prince Philip Dental Hospital, the level of reserve from subvention shall not, at any one point in time, exceed 15% of the annual recurrent subvention in the current financial year. The amount in excess of the limit should be returned to the Government in the current financial year or deducted from the following year’s government subvention.

	<u>2022</u> HK\$	<u>2021</u> HK\$
At beginning of the year	27,679,673	23,121,942
Total comprehensive income for the year	2,251,478	12,717,084
Release of deferred income	(3,217,924)	(2,651,533)
Deprecation of property, plant and equipment	7,956,198	3,385,716
Decrease in inventories	173,427	175,809
(Decrease) increase in accrued annual leave	(723,784)	454,716
(Decrease) increase in accrued gratuities	(147,376)	483,331
Purchases of items of property, plant and equipment	(20,113,612)	(10,007,392)
At end of year	<u>13,858,080</u>	<u>27,679,673</u>
Analysed into:		
Reserve from subvention	<u>13,858,080</u>	<u>27,679,673</u>
