



This survey is conducted to ensure and improve the quality of the chartered bus service. Your valuable opinion is highly appreciated!

1. Except driver and school representative, there shall be a bus escort accompanying school children on the way back to school (or Central Pier). Was there any bus escort in the bus trip you took?

Yes throughout the whole trip No / Part of the trip*. When and where did the escort depart?

2. Bus escort shall assist your school children in boarding and alighting the bus. Did he/she do this? (Please don't answer if there was no escort)

Yes No

3. On the way back to school, was there any incident that induced injury to or might have threatened the safety of the school children e.g. traffic accident, speeding, and careless driving etc.?

No incident Had incident. Please describe: (Car Reg. No. _____)

4. Was there any delay on the arrival time back to school?

No delay Had delay (_____ minutes)

Scheduled time to leave Clinic:	_____
Actual time leaving Clinic:	_____

What was the cause of the delay (if applicable)?

Traffic Wrong route Delay in clinic Other: _____

5. Other Comments (e.g. performance of driver and escort, condition and cleanliness of bus):

* Delete as appropriate

Please fax this form to _____ or mail back to our clinic. Thank you for your co-operation!

School Name: _____

Name of School Representative on Bus: _____

Signature: _____ Contact Telephone (Day): _____

(For Clinic use only)		
Appointment Date: _____	AM / PM	Appointment No: _____
Bus Trip: _____	Reviewer: _____	Date: _____
Follow-up Action (if any): _____		



Statement of Purposes

Purpose of Collection

1. The personal data are provided by patients and clients with whom the Department of Health (DH) interacts in the delivery of the services, and other related activities. The personal data provided will be used by DH for validation of authenticity of identity for the following purposes:
 - (a) Proof of eligibility;
 - (b) Providing services including but not limited to clinical service, dental laboratory service, appointment arrangement and notification and client relation matters;
 - (c) Record of test results / examination / investigation / treatment for continuation of care or reference by other medical professionals;
 - (d) Consent for particular treatments/tests;
 - (e) Tracking of payment;
 - (f) Suspected outbreak investigation;
 - (g) For notification of tuberculosis or other diseases reportable / notifiable for public health purpose;
 - (h) Tracing defaulters for follow-up / treatment;
 - (i) Record of enrolment / management;
 - (j) For preparing statistics and accounting reports, epidemiological surveillance, carrying out research or teaching purpose; and
 - (k) Audit purpose.

The provision of personal data is voluntary. If you do not provide sufficient information, we may not be able to prove your eligibility for specific service/activities and cannot provide service/assistance to you or even the service / assistance may still be provided, you will be charged at the non-entitled person (usually higher) rate.

Classes of Transferees

2. The personal data you provide are mainly for use within DH but they may also be disclosed to other Government bureaux/departments or relevant parties for the purposes mentioned in para. 1 above, if required. Apart from this, the data may only be disclosed to parties where you have given consent to such disclosure or where such disclosure is allowed under the Personal Data (Privacy) Ordinance.

Access to Personal Data

3. You have a right of access and correction with respect to personal data as provided for in sections 18 and 22 and Principle 6 of Schedule 1 of the Personal Data (Privacy) Ordinance. Your right of access includes the right to obtain a copy of your personal data. A fee may be imposed for complying with a data access request.

Enquiries

4. Enquiries concerning the personal data provided, including the making of access and corrections, should be addressed to:

Clerical Officer, School Dental Care Service
Rm. G8, G/F, MacLehose Dental Centre, 286 Queen's Road East, Wan Chai, HONG KONG
Telephone: 2892 2157 Fax: 2575 8162