

**立法會**  
**Legislative Council**

LC Paper No. CB(2)2675/11-12  
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seen by the Administration)

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**Panel on Welfare Services and  
Panel on Health Services**

**Minutes of joint meeting  
held on Monday, 5 December 2011, at 10:45 am  
in Conference Room 1 of the Legislative Council Complex**

**Members present** : Members of the Panel on Welfare Services

- \* Hon CHEUNG Kwok-che (Chairman)  
Hon WONG Sing-chi (Deputy Chairman)
- \* Hon Albert HO Chun-yan  
Hon LEE Cheuk-yan  
Hon CHAN Kam-lam, SBS, JP  
Hon LEUNG Yiu-chung
- \* Hon LI Fung-ying, SBS, JP  
Hon Frederick FUNG Kin-kee, SBS, JP  
Hon Ronny TONG Ka-wah, SC  
Hon Paul CHAN Mo-po, MH, JP
- \* Dr Hon PAN Pey-chyou
- \* Dr Hon Samson TAM Wai-ho, JP
- \* Hon Alan LEONG Kah-kit, SC  
Hon LEUNG Kwok-hung

Members of the Panel on Health Services

- # Dr Hon LEUNG Ka-lau (Chairman)  
Dr Hon Joseph LEE Kok-long, SBS, JP (Deputy Chairman)  
Hon Fred LI Wah-ming, SBS, JP  
Hon CHEUNG Man-kwong  
Hon Andrew CHENG Kar-foo  
Hon Audrey EU Yuet-mee, SC, JP  
Hon CHEUNG Hok-ming, GBS, JP  
Hon WONG Ting-kwong, BBS, JP  
Prof Hon Patrick LAU Sau-shing, SBS, JP  
Hon CHAN Hak-kan  
Hon CHAN Kin-por, JP  
Hon IP Kwok-him, GBS, JP

**Members absent** : Members of the Panel on Welfare Services

Hon TAM Yiu-chung, GBS, JP  
Hon WONG Kwok-kin, BBS  
Hon IP Wai-ming, MH

Members of the Panel on Health Services

Hon Vincent FANG Kang, SBS, JP  
Hon Cyd HO Sau-lan

(\* Also members of the Panel on Health Services)

(# Also member of the Panel on Welfare Services)

**Public officers attending** : Item II

Ms Angela LEE  
Principal Assistant Secretary for Food and Health  
(Health) 2  
Food and Health Bureau

Mrs Angelina CHEUNG  
Principal Assistant Secretary for Labour and Welfare  
(Welfare) 3  
Labour and Welfare Bureau

Miss Cecilla LI  
Assistant Director (Elderly)  
Social Welfare Department

Dr Sammy NG  
Senior Medical & Health Officer (Elderly Health Service)  
Department of Health

Dr Daisy DAI  
Chief Manager (Primary & Community Services)  
Hospital Authority

Ms Margaret TAY  
Chief Manager (Integrated Care Programs)  
Hospital Authority

**Attendance by : Item II  
invitation**

Dementia Carer Alliance

Ms May CHEUNG Yuet-kam  
Vice Chairlady

Mr Jase NG Kwok-wah  
Committee Member

The Salvation Army Carer Association

Ms LI Sau-lin  
Vice-Chairperson

Miss CHAN Man-sing  
Social Worker

St. James' Settlement Kin Chi Dementia Care Support  
Service Centre

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Ms Winnie LUI  
Professional Service Manager

The Hong Kong Council of Social Service

Ms Grace CHAN Man-yee  
Chief Officer (Elderly Service)

Ms Anita WONG  
Convenor of Working Group of Dementia Care

Individual

Prof Helen CHIU Fung-kum

The Hong Kong College of Psychiatrists

Prof Linda LAM  
President

Hong Kong Psychogeriatric Association

Dr Paulina CHOW Po-ling

Civic Party

Ms LAI Man-yin  
Member

Hong Kong College of Physicians

Dr LAW Chun-bon

Jockey Club Centre for Positive Ageing

Miss Florence HO  
General Manager

The Hong Kong College of Family Physicians

Dr Mary B L KWONG  
Vice President

Hong Kong Alzheimer's Disease Association

Ms Elsie CHUNG  
Executive Director

Hong Kong Physiotherapy Association

Ms WONG Yee

Hong Kong Association of Gerontology

Dr Edward LEUNG Man-fuk  
President

Hong Kong Occupational Therapy Association

Miss Nancy TANG Yeuk-man  
Special Interest Group (Dementia Care) Representative

Labour-Welfare Group of Democratic Party

Mr Mark LI  
Member

**Clerk in attendance** : Miss Betty MA  
Chief Council Secretary (2) 4

**Staff in attendance** : Ms Candice LAM  
Senior Council Secretary (2) 4

Miss Maggie CHIU  
Legislative Assistant (2) 4

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**I. Election of Chairman**

Mr CHEUNG Kwok-che was elected chairman of the meeting.

**II. Support for demented elders and their carers**

[LC Paper Nos. CB(2)428/11-12(01) to (07), CB(2)459/11-12(01) to (03) and CB(2)487/11-12(01) to (04)]

2. At the invitation of the Chairman, a total of 16 deputations presented views on the support and care services for demented elders and their carers. The major concerns of the deputations are summarised in the **Appendix**.

Discussion

3. Responding to the deputations' views, Principal Assistant Secretary for Food and Health (Health) 2 ("PAS(H)2") said that through a multi-disciplinary and cross-sectoral team approach, the Administration and the relevant parties in the medical and welfare sectors had been working closely on the provision of various service programmes to patients with dementia, with a view to providing timely diagnosis, treatment and follow-up services as appropriate. Specifically, patients with varying degree of dementia were followed up by the psychiatric department of the Hospital Authority ("HA") hospitals. PAS(H)2 further said that training was provided for professional and care staff of patients with dementia to

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enhance their knowledge of dementia and strengthen their skills in clinical services. In addition, public education had been launched to arouse public awareness and understanding of the disease.

4. Principal Assistant Secretary for Labour and Welfare (Welfare) 3 ("PAS(W)3") advised that an integrated approach was adopted in elderly care services to ensure a continuum of care for elders with long-term care needs including demented elders; that said, a range of support services were provided to demented elders and their carers under this approach. On the suggestion of setting up dedicated service units for demented elders, PAS(W)3 drew members' attention to the pilot study on setting up dementia units in residential care homes for the elderly ("RCHEs") and day care centres conducted in 2000. The findings revealed that it was more desirable for demented elders to be served under an integrated approach which provided a continuum of care. Furthermore, it would not be feasible to identify suitable sites for setting up new dedicated service units for demented elders in close proximity to the service users in every district. In recognition of the mobility needs of demented elders, the Social Welfare Department ("SWD") had enhanced the spatial standards for day care centres by some 20%. The new Schedule of Accommodation had been adopted since October 2010 in the planning of new and reprovisioned centres, which would enable the provision of additional facilities which demented elders could benefit, e.g. multi-sensory rooms. SWD would assist the existing service providers in the acquisition of new/additional premises to meet the enhanced spatial standards and would finance the capital works.

5. PAS(W)3 further advised that as announced by the Chief Executive in his 2011-2012 Policy Address, the Administration would further increase the provision of Dementia Supplement for subsidised RCHEs and day care centres to employ additional professional staff or engage professional services to enhance services for their demented service users as well as support services for their carers. It was noteworthy that the Administration would also implement a pilot scheme on community care service ("CCS") voucher for the elderly in 2013-2014 to encourage the development of self-financing CCS which provided various specialised or tailor-made services for elders residing in the community. To cope with the increasing demand, additional places under the Enhanced Home and Community Care Services and additional day care places would come on stream in 2012-2013. To further relieve the pressure of carers, the Administration had made use of the casual vacancies in 137 private RCHEs under the Enhanced Bought Place Scheme to provide more residential respite places for elders residing in the community.

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6. Dr PAN Pey-chyou noted with concern that of the 64 000 estimated patients with dementia in Hong Kong, only around 10 700 of them were receiving treatment provided by HA. He expressed concern about the provision of services for the remaining demented elders living in the community. In his view, support for family carers of demented elders was far from adequate to relieve their stress in taking care of their elderly family members. Dr PAN took the view that lack of suitable premises for setting up dedicated service units for demented elders was an excuse of the Administration to delay the provision of dedicated service for demented elders. It was incumbent upon the Administration to formulate a long-term policy and action plan to address the problem of dementia in the face of an ageing population.

7. PAS(H)2 clarified that around 10 700 patients with dementia were being followed up by the psychiatric department of HA hospitals. As for elderly patients residing at RCHEs, including those suffering from dementia, were supported by HA's outreach service through its community geriatric assessment teams and psychogeriatric outreach teams.

8. PAS(W)3 said that the Administration had plans to provide additional residential care places and CCS places in the coming years. Regarding the long-term planning, following the recommendations of the Elderly Commission in its consultancy study on CCS, the Administration would strengthen CCS such that it would have a more balanced development compared with that of residential care services ("RCS"). Referring to Dr PAN's concern about setting up additional day care centres, PAS(W)3 added that the Administration had earmarked suitable sites for this purpose in new development projects.

9. Mr WONG Sing-chi considered that the enhancement measures put in place to support elders with dementia and their carers were fallen short of the demand and expectation of service users and their family carers. In his view, the Administration should engage the stakeholders and set clear objectives and targets for enhancing the support services.

10. In response to Mr WONG Sing-chi's suggestion, Ms Anita WONG of the Hong Kong Council of Social Service ("HKCSS") considered that the Administration should spearhead the collaboration between the medical and welfare sectors in providing multidisciplinary support services for demented elders. More importantly, the Administration should formulate a long-term policy and plan for the support services for demented elders. She added that a district-based approach should be adopted for setting up service units for demented elders.

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11. Mr Alan LEONG commented that in the face of an ageing population, the Administration should, instead of adopting a piecemeal and fragmented approach, formulate the mid-term and long-term policy and planning for the provision of support services for demented elders. As pointed out by some deputations, the coming five years would be critical for the implementation of various policies to meet the challenges brought by an ageing population, including an increasing population of elders suffering from dementia. Mr LEONG asked whether the Administration had any concrete plan to meet the challenges and demand for support services for demented elders.

12. PAS(H)2 stressed that the Administration had been committing to providing holistic medical and care services to patients with dementia and their carers through the concerted efforts of and close collaboration between the medical and welfare sectors.

13. Mr LEUNG Kwok-hung commented that the Administration had shirked its responsibility to respond to the strong call from the community for a long-term policy for providing support services for demented elders and their carers.

14. Mr CHAN Kam-lam said that deputations had identified a number of inefficiencies of the existing support services for demented elders, such as inadequate resources for residential and community care services for demented elders, lack of professional staff, inadequate training for professionals to enhance their knowledge of treating, diagnosis and handling of persons suffering from dementia, insufficient public education on the disease, etc. Mr CHAN urged the Administration to conduct an overall assessment on the service needs of demented elders with a view to quantifying the areas of deficiencies and formulate concrete improvement measures.

15. PAS(H)2 said that the Department of Health ("DH") had conducted studies on the prevalence of dementia, and taken various corresponding measures to enhance assessment and health education regarding early recognition of dementia features. Senior Medical & Health Officer of DH added that DH supported professional training for service providers and conducted health education programmes to raise community awareness of the disease as well as organised courses for RCHE personnel and family carers on knowledge and skills in caring for demented elders.

16. Mr LEUNG Yiu-chung considered that the issues of concern raised by deputations and the Administration's response were not something new.



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While he agreed that the Administration had provided a range of support services for demented elders, the crux of the matter was whether adequate and timely support services had been provided to the service users. In his view, the Administration should identify the target group of service users by making an accurate projection on the number of demented elders, and then formulate specific policy and set targets for service provision in the next five years.

17. PAS(H)2 said that based on available statistics, DH estimated that 9.3% of elders aged 70 would be suffering from dementia, and therefore it was projected that over 60 000 elders were suffering from dementia.

18. PAS(W)3 said that while adhering to the policy objective of "ageing in place as the core, institutional care as back-up", it was difficult to set specific targets for various service provision. That said, the Administration had endeavoured to increase the provision of RCS and CCS places for the elderly who had long-term care needs, including those suffering from dementia. Having regard to the difficulties in identifying suitable sites for RCHEs, PAS(W)3 said that SWD had maintained close contact with relevant government bureaux and departments in order to reserve suitable premises and sites for welfare service facilities at the planning stage of new development or redevelopment projects. Assistant Director (Elderly) of SWD said that the District Social Welfare Officers would assist in identifying vacant and suitable sites at the district level.

*[To allow sufficient time for discussion, the Chairman directed that the meeting be extended for 15 minutes beyond the appointed time.]*

19. Prof Patrick LAU declared that he had participated in a number of RCHE design projects. To his understanding, the set-up of RCHEs was subject to the height restriction of no more than 24 metres above street level, this had imposed restrictions on site selection and the capacity of RCHEs. Prof LAU called on the Administration to consider relaxing the height restriction so that more premises could be used for operating RCHEs. Prof LAU added that the Administration should take into account the special needs of demented elders and make reference to overseas experience in the design and fitting-out works of service units for persons suffering from dementia.

20. PAS(W)3 said that at present, the special needs of demented elders had already been taken into account in the provision of elderly care services. As regards the height restriction of RCHEs, PAS(W)3 explained that the main purpose of the height restriction under the licensing requirement was to ensure the safety of elders in case of fire or other

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emergencies. The Administration had no intention to amend the licensing requirement at the moment.

21. At the invitation of the Chairman, the following deputations made supplementary views as below -

- (a) Mr Jase NG of Dementia Carer Alliance said that HA should attach more importance to patients with dementia in order to provide more timely and appropriate treatment to delay the functional deterioration of dementia;
- (b) Ms CHAN Man-sing of the Salvation Army Carer Association said that instead of making available information relating to dementia on the website, such information should be disseminated through the community network accessible by the general public and patients with dementia;
- (c) Ms Grace CHAN of HKCSS said that in line with the international trend, the Administration should establish a high-level mechanism to formulate a long-term strategy and action plan to meet the challenges and wide ranging needs of demented elders;
- (d) Prof Helen CHIU said that the Administration had underestimated the population of dementia, as it had omitted those who were staying in RCHEs in making the projection;
- (e) Ms LAI Man-yin of Civil Party appealed to the Administration to enhance the support services for family carers of demented elders, e.g. provision of transport service for demented elders;
- (f) Dr Mary KWONG of Hong Kong College of Family Physicians considered that more resources should be allocated for family medical practitioners to take part in the initial assessment and diagnosis for persons suffering from dementia, so as to enable those persons in need to receive appropriate care as early as possible;
- (g) Ms Elsie CHUNG of Hong Kong Alzheimer's Disease Association said that in the light of insufficient community care services for demented elders, the Administration should provide more support for carers of demented elders, in particular introducing a carer allowance. The Administration

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should also strengthen training for professionals to enhance their knowledge to detect persons suffering from dementia;

- (h) Mr Mark LI of Democratic Party said that the Administration should reinstate the five-year social welfare planning mechanism so as to formulate a long-term plan for the provision of support services for demented elders. To enhance support for demented elders staying in the community, the Administration should assist these persons to carry out home improvement works to suit their special needs in daily life.

22. Dr PAN Pey-chyou shared the view of HKCSS and called on the Administration to formulate a long-term strategic action plan for the provision of support services for demented elders. PAS(W)3 reiterated that the Administration had committed to providing holistic medical and care services for demented elders and their carers.

23. Responding to Mr LEUNG Yiu-chung, PAS(H)2 said that the Administration would continue to update and study the population of dementia. It was worth noting that many demented elders were suffering from other chronic illnesses and were classified under other categories of patients. Nonetheless, the medical personnel would formulate appropriate treatment plans with a view to providing continuous and effective treatment for patients with dementia.

24. In concluding, the Chairman said that members generally considered it imminent for the Administration to formulate a long-term strategy and action plan for supporting elders with dementia and their carers.

**III Any other business**

25. There being no other business, the meeting ended at 1:02 pm.

**Panel on Welfare Services and Panel on Health Services**

Joint meeting on Monday, 5 December 2011

Support for demented elders and their carers

Summary of views and concerns expressed by deputations and individual

No.	Name of deputation and individual	Major views and concerns
1.	Dementia Carer Alliance [LC Paper No. CB(2)459/11-12(01)]	<p>The Administration should -</p> <ul style="list-style-type: none"> <li>● set up dedicated services and support centres for persons suffering from dementia in the 18 districts over the territory, so as to enable those persons in need to receive appropriate care</li> <li>● provide appropriate support and financial assistance for family members and carers of demented elders</li> <li>● provide more training to the relevant professionals to enhance their knowledge of diagnosing and handling of patients with dementia</li> <li>● step up public education to enhance public understanding of dementia</li> </ul>
2.	The Salvation Army Carer Association [LC Paper No. CB(2)459/11-12(02)]	<ul style="list-style-type: none"> <li>● to strengthen the support for family members and carers of demented elders, say, by increasing the respite service, providing more training to carers to enhance their knowledge and skills in taking care of demented elders at home</li> <li>● to enhance public education with a view to detecting persons suffering from dementia in the community at an early stage and facilitating early treatment of the disease</li> <li>● to allocate more resources to increase the provision of community care and support services and residential care services for elders with dementia as well as extend the service hours of day care centres/units for the elderly</li> </ul>

No.	Name of deputation and individual	Major views and concerns
		<ul style="list-style-type: none"> <li>● to set up additional Elderly Health Centres under the Department of Health ("DH") to shorten the waiting time for diagnosis and assessment for elders with dementia</li> <li>● Hospital Authority ("HA") should also shorten the waiting time for receiving assessment and treatment at its memory clinics and psychiatric service for patients with dementia</li> <li>● the Administration should formulate a comprehensive policy on care and support services for demented elders and their carers</li> </ul>
3.	St. James' Settlement Kin Chi Dementia Care Support Service Centre [LC Paper No. CB(2)459/11-12(03)]	The Administration should - <ul style="list-style-type: none"> <li>● recognize the needs of patients with dementia, formulate long-term policy to address the problem of dementia and provide appropriate care and support services for demented elders and their carers</li> <li>● establish dedicated service units for persons with dementia to cater for different needs of persons suffering from varying degree of dementia</li> <li>● enhance the collaboration between healthcare and social welfare sectors for service provision for persons with dementia</li> <li>● provide more training for the relevant professionals to enhance their knowledge of treating, diagnosing and handling of demented persons</li> <li>● step up public education and publicity to enable early detection of persons suffering dementia in the community as well as promote understanding and acceptance of persons suffering from dementia to live in the community</li> <li>● provide care and support services for demented persons aged below 60</li> </ul>
4.	The Hong Kong Council of Social Service [LC Paper Nos. CB(2)487/11-12(01) and CB(2)428/11-12(06)]	<ul style="list-style-type: none"> <li>● A Working Group on Dementia was set up in 2010 to study the needs of patients with dementia and recommended the following 9-strategic action plan -               <ul style="list-style-type: none"> <li>(a) giving priority to include demented elders in the healthcare agenda for the elderly;</li> </ul> </li> </ul>

No.	Name of deputation and individual	Major views and concerns
		<ul style="list-style-type: none"> <li>(b) strengthening public education to enhance public understanding of dementia and remove stigma of the disease;</li> <li>(c) improving early diagnosis and assessment of persons suffering from dementia;</li> <li>(d) providing affordable treatment and drugs for patients with dementia;</li> <li>(e) providing appropriate community care and support services for demented elders;</li> <li>(f) providing adequate care and support services to carers and families of demented elders;</li> <li>(g) developing specialized training programmes on dementia;</li> <li>(h) establishing a database on demented elders to facilitate more in-depth studies and analyses on dementia; and</li> <li>(i) safeguarding the rights of demented elders</li> </ul>
5.	Prof Helen CHIU Fung-kum	<ul style="list-style-type: none"> <li>• the Government had all along lacked a long-term and comprehensive policy to address the problem of dementia, thus making persons with dementia unable to receive appropriate and timely treatment and care</li> <li>• the Administration should allocate more resources for outpatient psychiatric clinics to provide timely treatment for demented elders</li> <li>• the Administration should enhance the support services for carers and families of demented elders</li> </ul>
6.	The Hong Kong College of Psychiatrists [LC Paper Nos. CB(2)428/11-12(03) and (05)]	<ul style="list-style-type: none"> <li>• about 10% of the elderly population were suffering from varying degree of dementia, thus the Administration should formulate long-term policy to ensure that - <ul style="list-style-type: none"> <li>(a) persons suffering from varying degree of dementia would be provided with timely diagnosis and assessment so as to enable those persons in need to receive appropriate care and treatment;</li> </ul> </li> </ul>

No.	Name of deputation and individual	Major views and concerns
		<p>(b) public education would be stepped up to enhance understanding of dementia and acceptance of persons suffering from the disease;</p> <p>(c) carers of demented elders would be provided with necessary support; and</p> <p>(d) community care services for patients with dementia and their carers would be provided according to the severity of the condition of demented elders</p> <ul style="list-style-type: none"> <li>● the Administration should, in the meantime, increase the service provision of day care centres and enhance professional outreach service to pay more visits to demented elders receiving residential home care to follow up their conditions</li> </ul>
7.	Hong Kong Psychogeriatric Association [LC Paper No. CB(2)428/11-12(04)]	<ul style="list-style-type: none"> <li>● psychogeriatric service and medical treatment were essential to prevent the condition of patients with dementia from deterioration. It suggested that the community psychogeriatric service should be enhanced by deploying three additional consultant medical officers to HA's psychogeriatric teams in each district</li> <li>● NGOs and community organisations played an important role to make service referrals as appropriate for persons with dementia and their families</li> <li>● the Administration and HA was requested to expand outreach psychogeriatric service, the service provision of memory clinics and elderly day care centres</li> </ul>
8.	Civic Party	<p>To address the problem of insufficient services for patients with dementia and their carers, the Administration should consider -</p> <p>(a) increasing the provision of subvented residential care services for demented elders;</p> <p>(b) setting up dedicated day care support centres in each of the 18 districts for demented elders and their carers;</p> <p>(c) providing training on caring skills for carers;</p> <p>(d) providing outreach service to demented elders receiving home care; and</p>

No.	Name of deputation and individual	Major views and concerns
		(e) setting up integrated clinics with multidisciplinary services for demented elders
9.	Hong Kong College of Physicians	<ul style="list-style-type: none"> <li>● the Administration had all along lacked a long-term plan to cope with the increasing demand for support services from patients with dementia or a mechanism to collaborate the work of the medical and welfare sectors in providing services for persons suffering from dementia. It was estimated that the number of patients with dementia would be tripled to around 85 000 in 20 years' time. As it took at least five years to develop a system to take care of demented elderly, the Administration should take immediate action to formulate a comprehensive policy to address the problem of dementia</li> <li>● multi-pronged assessment and therapy provided by multidisciplinary professionals were required to tackle the behavioural and psychological problems of persons with dementia</li> <li>● comprehensive care support and services should be provided for patients with dementia such that they could live in the community</li> </ul>
10.	Jockey Club Centre for Positive Ageing [LC Paper No. CB(2)428/11-12(06)]	<ul style="list-style-type: none"> <li>● based on the findings of a study conducted jointly by the Centre and the Hong Kong Council for Social Services in 2010, it was recommended that the Administration should re-open the specialized day care centres for demented elders</li> <li>● to address the mobility needs of demented elders, the Administration should increase the floor area of day care centres</li> <li>● training for both frontline and professional staff should be strengthened to enhance their knowledge of diagnosing and treating persons with dementia</li> </ul>
11.	The Hong Kong College of Family Physicians ("HKCFP")	<ul style="list-style-type: none"> <li>● family medical practitioners assumed a crucial role in the diagnosis and assessment of persons with dementia at an early stage such that appropriate treatment and referral for care services could be provided to these persons, and thereby delaying institutionalization of the demented elders</li> <li>● to address the problem of dementia, HKCFP made the following suggestions - <ul style="list-style-type: none"> <li>(a) setting up a database on patients with dementia;</li> </ul> </li> </ul>



No.	Name of deputation and individual	Major views and concerns
		<ul style="list-style-type: none"> <li>(b) conducting cognitive assessment of the elderly population with a view to detecting persons suffering from dementia in the community at an early stage, and facilitating early treatment of the disease;</li> <li>(c) providing relevant training on dementia for frontline and professional staff; and</li> <li>(d) setting up designated clinics for demented elders in 18 districts to provide support service and medication</li> </ul>
12.	<p>Hong Kong Alzheimer's Disease Association ("HKADA") [LC Paper No. CB(2)487/11-12(02)]</p>	<ul style="list-style-type: none"> <li>• according to Alzheimer's Disease International ("ADI"), about 25% to 50% of the patients with dementia in the developed countries were diagnosed and provided with treatment, whereas the corresponding figure in the developing countries was only 10% or less</li> <li>• in Hong Kong, only around 10% of the patients with dementia were diagnosed or receiving treatment. This was due to a lack of long-term and comprehensive policy to address the problem of dementia and misperception of the public about the disease. HKADA suggested that the Administration should - <ul style="list-style-type: none"> <li>(a) in view of the ageing population, accord priority to formulate an inter-departmental action plan to tackle the problem of dementia;</li> <li>(b) allocate adequate resources for the support and care services for demented elders;</li> <li>(c) enhance public education to arouse public awareness and understanding of dementia;</li> <li>(d) provide training for medical practitioners and healthcare personnel to facilitate early diagnosis and provide timely treatment and follow-up services; and</li> <li>(e) introduce legislation to enable persons suffering from dementia to make advance instruction for medical treatment</li> </ul> </li> </ul>
13.	<p>Hong Kong Physiotherapy Association [LC Paper No. CB(2)487/11-12(03)]</p>	<ul style="list-style-type: none"> <li>• psychogeriatric outreach service team should comprise physiotherapists as they could help to assess elders in the community for early detection of dementia and provide rehabilitation services for patients with dementia</li> </ul>

No.	Name of deputation and individual	Major views and concerns
		<ul style="list-style-type: none"> <li>• operators of residential care homes for the elderly should be allowed to make use of the Dementia Supplement to employ additional professional staff including physiotherapists to take care of demented elders</li> </ul>
14.	Hong Kong Association of Gerontology ("HKAG")	<ul style="list-style-type: none"> <li>• by 2030, 25% of the population would reach the age 60 and above. To meet the increasing number of patients with dementia in the face of an ageing population, the Administration should formulate concrete policy and action plan to enhance the diagnosis, treatment and research studies on dementia. HKAG suggested that the Administration should - <ul style="list-style-type: none"> <li>(a) develop simple assessment tools for frontline staff in the medical and welfare sectors as well as the general public to enable them to detect persons suffering from dementia at an early stage and facilitate early treatment of the disease;</li> <li>(b) provide training to frontline personnel in the medical and welfare sectors to equip them with the necessary knowledge of the disease and strengthen skills in taking care of demented elders;</li> <li>(c) enhance training of medical practitioners and nursing staff on diagnosis and treatment of dementia;</li> <li>(d) provide adequate resources for development of anti-dementia drugs and provision of ancillary equipment and appliances for demented elders;</li> <li>(e) provide advice and support services to patients with dementia and their families to enable demented elders to receive home care; and</li> <li>(f) set up database on persons with dementia to formulate more studies and statistical analyses with a view to formulating long-term policy and service development plan</li> </ul> </li> </ul>
15.	Hong Kong Occupational Therapy Association [LC Paper No. CB(2)487/11-12(04)]	<ul style="list-style-type: none"> <li>• provision of appropriate occupational therapy would prevent the conditions of patients with dementia from deterioration and lessen the stress of carers</li> <li>• the Administration should deploy additional resources to strengthen the provision of occupational therapy, e.g. enhancing training of occupational therapists and increasing establishment of occupational therapist posts</li> </ul>

No.	Name of deputation and individual	Major views and concerns
16.	Labour-Welfare Group of Democratic Party [LC Paper No. CB(2)428/11-12(07)]	<ul style="list-style-type: none"> <li>● it was estimated that there were some 64 000 patients with dementia but most of them were not aware of the disease nor were detected from the integrated service being provided by the Elderly Health Centres</li> <li>● the Administration should provide more resources for early identification and healthcare assessment for persons suffering from dementia; community support services and cognitive training for patients with dementia; skills training and support services for carers and families of demented elders; public education to enhance understanding of dementia; and primary healthcare services and promotion of healthy living</li> <li>● in-depth studies should be conducted to collect more data on the conditions of patients with dementia and the disease</li> </ul>

Council Business Division 2  
Legislative Council Secretariat  
16 August 2012