

立法會
Legislative Council

LC Paper No. CB(2)1095/15-16(08)

Ref : CB2/PL/HS

Panel on Health Services

**Information note prepared by the Legislative Council Secretariat
for the meeting on 21 March 2016**

Healthcare services for elderly with hearing impairment

Hearing impairment affects people's daily lives, as well as the physical, psychological and social well-being. There are three main types of hearing loss, namely, (a) conductive loss which is caused by abnormality in the pathway conducting sound waves from the outer to the inner ear; (b) sensorineural loss which is impairment in sound transmission from the inner ear to the brain and the central nervous system, and is more common in the elderly population due to degeneration; and (c) mixed hearing loss which is a mixture of (a) and (b). According to a survey on persons with disabilities and chronic diseases conducted by the Census and Statistics Department in 2013, there were about 117 600 persons aged 65 or above who perceived themselves as having long-term difficulty in hearing, or were using specialized hearing aids or rehabilitation tools at the time of survey.

2. The subject of healthcare services for elderly with hearing impairment has not been discussed by the Panel on Health Services. A written question concerning the provision of healthcare services for elderly people with hearing problems was raised by Prof Hon Joseph LEE at the Council meeting of 24 February 2016. The question and the Administration's reply are in the **Appendix**.

Press Releases

LCQ5: Provision of healthcare services for elderly people with hearing problems

Following is a question by the Professor Hon Joseph Lee and a written reply by the Secretary for Food and Health, Dr Ko Wing-man, in the Legislative Council today (February 24):

Question:

According to a report released by the World Health Organization last year, about one-third of elderly people (i.e. persons aged 65 or above) are suffering from disabling hearing loss. It has been reported that some merchants, knowing well that the continuous increase in the elderly population will bring about enormous business opportunities, have set up audiology centres to offer hearing tests and sell hearing aids to elderly people. Due to a lack of regulation, some audiology centres sell hearing aids at fluctuating prices, and have not employed any audiologist or audiology technician, with the work of conducting hearing tests, drafting reports on hearing tests and fitting hearing aids for elderly people being entrusted to salespersons only. As a result, some elderly people have bought unsuitable yet expensive hearing aids, with their hearing impaired rather than improved. In this connection, will the Government inform this Council:

(1) whether it has compiled statistics on the current number of elderly people with disabling hearing loss in Hong Kong; if it has, of the relevant figures; if not, the reasons for that, and whether it will compile such statistics; whether it has any targeted policy in place to provide assistance for such elderly people; if it does, of the details; if not, the reasons for that;

(2) whether it knows if general outpatient clinics of the Hospital Authority (HA) will arrange hearing tests, audiological treatment and fitting of hearing aids for elderly people seeking consultations at such clinics; if such services will be arranged, of the specific procedure and the average waiting time for these three types of services at present; if not, the reasons for that;

(3) whether it knows the current respective (i) ratios of audiologists and audiology technicians to the population, and (ii) numbers of these two types of personnel employed by HA and the Department of Health; whether it has assessed if there are now sufficient numbers of these two types of personnel in Hong Kong; if it has and the assessment outcome is in the negative, whether it has specific policies and measures in place to address the problem; if it does, of the details; if not, the reasons for that; and

(4) given that quite a number of elderly people lack the financial means to buy hearing aids, which are sold at a price ranging from as high as several thousand to several tens of thousand dollars, whether the authorities have plans to offer subsidy to elderly people, and whether the costs for hearing tests and hearing aids will be included (with no upper limit) in the scope of application of the Elderly Health Care Voucher Scheme to enhance the safety and quality of life of elderly people; if they do, of the details; if not, the reasons for that?

Reply:

President,

My reply to the questions raised by Professor Hon Joseph Lee on the provision of healthcare services for elderly people with hearing problems is as follows:

(1) and (2) According to a survey on persons with disabilities and chronic diseases conducted by the Census and Statistics Department in 2013, there were about 117 600 persons with hearing difficulty aged 65 or above. The definition of "persons with hearing difficulty" includes those who perceived themselves as having long-term difficulty in hearing or using specialised hearing aids or rehabilitation tools at the time of survey.

Patients under the care of the general out-patient clinics (GOPCs) of the Hospital Authority (HA) can be categorised into two major types, namely chronic disease patients with stable medical conditions (such as those with diabetes mellitus or hypertension etc.) and episodic disease patients with relatively mild symptoms (such as those suffering from influenza, cold and gastroenteritis). For patients with hearing difficulty, GOPC doctors will refer them to the ear, nose and throat (ENT) specialty for follow-up according to their clinical conditions and needs.

The ENT specialty of HA provides appropriate assessment and treatment for persons with hearing difficulty. In 2015, HA provided audiological services to a total of about 8 000 inpatient audiology attendances and 80 000 outpatient audiology attendances. HA does not maintain statistical record on the waiting time for audiological assessment and remedial treatment services. The median waiting time for hearing aid prescription and fitting services is nine weeks.

(3) There are currently 29 audiologists and audiology technicians under HA. They provide timely hearing tests and treatment according to the diagnosis made by ENT specialists and the needs of patients. At present, the Department of Health (DH) employs four audiologists in Child Assessment Service and Student Health Service to provide audiology-related services. HA and DH will review the manpower requirement from time to time having regard to the service demand.

The Government conducted a Health Manpower Survey on healthcare personnel in 2009. According to the survey, the responding institutions employed a total of 62 audiologists and 50 audiology technicians. As the data collected from the survey may not represent the total number of audiologists and audiology technicians in Hong Kong, the statistics on the ratio of audiologists and audiology technicians to the total population are not compiled.

(4) Under the Elderly Health Care Voucher Scheme, eligible elders can use health care vouchers to pay for healthcare services provided by healthcare professionals enrolled in the scheme, including hearing assessment services provided by enrolled doctors. However, health care vouchers cannot be used solely for purchasing products such as medication or medical equipment. As audiologists and audiology technicians are currently not subject to statutory registration, the vouchers cannot be used for services provided by them.

HA provides, through the Samaritan Fund (SF) safety net, financial assistance for needy patients who have met the specified clinical criteria and passed the means test to meet the expenses for designated Privately Purchased Medical Items or new technologies required in the course of medical treatment which are not covered by the standard fees and charges in public hospitals and clinics. The items supported by SF also include hearing aids, and the replacement of external speech processors of cochlear implants and other accessories. Needy patients who have met the specified clinical requirements will be referred to SF for financial assistance.

Ends/Wednesday, February 24, 2016
Issued at HKT 18:14

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