

立法會
Legislative Council

LC Paper No. CB(2)352/18-19

(These minutes have been
seen by the Administration)

Ref : CB2/PL/HS

Panel on Health Services

**Minutes of special meeting
held on Monday, 26 March 2018, at 9:30 am
in Conference Room 3 of the Legislative Council Complex**

- Members present** :
- Dr Hon Pierre CHAN (Deputy Chairman)
 - Hon WONG Ting-kwong, GBS, JP
 - Hon Starry LEE Wai-king, SBS, JP
 - Hon CHAN Kin-por, GBS, JP
 - Hon Paul TSE Wai-chun, JP
 - Hon YIU Si-wing, BBS
 - Hon Charles Peter MOK, JP
 - Hon CHAN Chi-chuen
 - Hon CHAN Han-pan, JP
 - Hon Alice MAK Mei-kuen, BBS, JP
 - Dr Hon KWOK Ka-ki
 - Dr Hon Fernando CHEUNG Chiu-hung
 - Dr Hon Helena WONG Pik-wan
 - Dr Hon Elizabeth QUAT, BBS, JP
 - Hon POON Siu-ping, BBS, MH
 - Dr Hon CHIANG Lai-wan, JP
 - Hon CHU Hoi-dick
 - Dr Hon Junius HO Kwan-yiu, JP
 - Hon SHIU Ka-fai
 - Hon SHIU Ka-chun
 - Hon KWONG Chun-yu
- Members absent** :
- Prof Hon Joseph LEE Kok-long, SBS, JP (Chairman)
 - Hon Tommy CHEUNG Yu-yan, GBS, JP
 - Hon Mrs Regina IP LAU Suk-yee, GBS, JP

**Public Officers :
attending**

Dr CHUI Tak-yi, JP
Under Secretary for Food and Health

Miss Amy YUEN Wai-yin
Deputy Secretary for Food and Health (Health) 2
Food and Health Bureau

Dr Sarah CHOI Mei-yee
Head, Primary Care Office
Department of Health

**Attendance :
by invitation**

Mr LEUNG Sai-hong

Health In Action

Miss Karen LAU
Advocacy and Research Coordinator

Ms PONG Oi-lan, Sha Tin District Council Member

Mr LEUNG Kwok-hung

關注葵青區地區康健中心民間連線

Mr WONG Tak-kau
居民代表

Miss LAU Shuk-fan

護老者關注組

Mr LEE Woon-hong
Representative

一邨一護士關注組

Mr MOK Pui-shu
Representative

年長慢性病患聯盟

Ms CHANG Suet-ying
Representative

長者睛彩社

Mr KWOK King-kwan
Representative

長者全民保健關注組

Ms CHEN Muzhen
Representative

長者健康關注組

Mr LIN Wai-kiu
Community Organizer

Society for Community Organization

Miss YUEN Shuk-yan
Community Organizer

Kwai Tsing Safe Community and Healthy City

Mr CHOW Yick-hay
Chairman

Prof Albert LEE

Mr LEUNG Chun-pong

Baptist Oi Kwan Social Service Integrated Community
Centre for Mental Wellness (Kwai Tsing)

Miss LEUNG Lai-wan
Centre in charge

Civic Party

Mr Henry SIN Ho-fai
Executive Committee

Civic Party Kwai Tsing Team

Mr Franco WONG Chak-hang
District Developer of Tsing Yi District

Virtuouslady Club

Miss CHEUNG Lai-ying
委員

Kwan Chung Sub-Divided Flat Residents Alliance

Mr NG Kwan-lim
Spokesperson

Kwai Chung Housing Angel Group

Miss YAU Tze-wei
Spokesperson

女性健康權益關注組

Miss WONG Hoi-lam
顧問社工

葵青婦女關注康健中心小組

蘇寧小姐
成員

Kwai Tsing District Health Centre Concerned Group

Mr WONG Wai
Spokesperson

Democratic Party

Mr HON Chun-yin
Community Officer

Clerk in attendance : Ms Maisie LAM
Chief Council Secretary (2) 5

Staff in attendance : Miss Kay CHU
Senior Council Secretary (2) 5

Ms Priscilla LAU
Council Secretary (2) 5

Miss Maggie CHIU
Legislative Assistant (2) 5

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Dr Pierre CHAN, Deputy Chairman of the Panel, took up the chairmanship of the meeting in the absence of the Chairman who was held up by other commitment.

I. District Health Centre Pilot Project in Kwai Tsing District
[LC Paper Nos. CB(2)827/17-18(03), CB(2)1074/17-18(01) and (02)]

2. At the invitation of the Deputy Chairman, Under Secretary for Food and Health ("USFH") briefed members on the development of the primary healthcare services in the public sector and the latest progress of the setting up of the pilot District Health Centre in Kwai Tsing District ("the pilot DHC"), details of which were set out in the Administration's paper (LC Paper Nos. CB(2)827/17-18(03) and CB(2)1074/17-18(01)).

3. Members noted the background brief entitled "District Health Centre Pilot Project in Kwai Tsing District" prepared by the Legislative Council Secretariat (LC Paper No. CB(2)1074/17-18(02)).

Presentation of views by deputations

4. The Deputy Chairman reminded the organizations and individuals attending the meeting that they were not covered by the protection and immunity provided under the Legislative Council (Powers and Privileges) Ordinance (Cap. 382) when addressing the Panel. At the invitation of the Deputy Chairman, a total of 26 organizations and individuals presented their views on the District Health Centre Pilot Project in Kwai Tsing District. A summary of their views is in the **Appendix**.

Discussion

The Administration's response to the views expressed by deputations

5. Responding to the views expressed by the deputations, USFH and Head, Primary Care Office, Department of Health ("Head, PCO") made the following points:

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- (a) the focus of the community health centres under the Hospital Authority ("HA"), which formed part of the public healthcare system, was on providing medical consultation services for patients with episodic diseases, specific care services by multi-disciplinary teams for chronic patients and patient empowerment services to encourage patients to strengthen their ability in disease management. The pilot DHC would on the other hand be operated by a non-government entity under the concept of a network in terms of physical venues and service providers for the provision of accessible district-based multi-disciplinary primary healthcare services;
- (b) to enable the early set-up of the Pilot DHC for meeting the target of commissioning the services in the third quarter in 2019, rental of premises was an option under consideration;
- (c) the standing Advisory Committee on Mental Health was established in December 2017 based on the recommendations in the Mental Health Review Report published in 2017 to advise the Administration on mental health policies, assist the Administration in developing policies, strategies and measures to enhance the mental health services, and follow up on and monitor the implementation of the recommendations of the Review Report. The Administration would not preclude mental health services from the service scope of the pilot DHC; and
- (d) the use of Health Care Voucher would be allowed at the pilot DHC. The Department of Health would enhance public education on the proper use of Vouchers and the future pilot DHC might provide support for elders on using Vouchers. Separately, measures and procedures for checking and auditing voucher claims were in place to ensure proper disbursement of public monies in handling reimbursements.

Mode of operation

6. Dr KWOK Ka-ki and Mr POON Siu-ping were of the view that the Administration had made little progress in primary healthcare development in Hong Kong in the past two decades. Noting that the pilot DHC would be operated with a brand new mode with the support of non-government entities and service providers practising in the Kwai Tsing District to enhance the provision of primary healthcare services, Mr POON Siu-ping

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was concerned about the governance structure, the manpower requirement and the public funding required to support the operation of the pilot DHC, as well as the levels of fee, if any, to be charged by the private service providers. Dr Helena WONG said that the Democratic Party was in supportive to promoting primary healthcare. She sought elaboration as to whether the pilot DHC would provide one-stop healthcare services at a single centre or multiple access points.

7. USFH advised that a mechanism would be put in place to provide guidance and oversight to the operator of the pilot DHC. In terms of manpower support, the operator of the pilot DHC would need to have a core team of staff. In addition, it had to make use of the local network to procure services from organizations and healthcare personnel serving the district to provide a range of co-ordinated care and support services at multiple access points to meet the specific health needs of the population of Kwai Tsing District. The details of the above would be mapped out in due course. The pilot DHC would be a hub with multiple access and service points, with a core centre serving as its headquarters.

8. The Deputy Chairman opined that the mode of operation of the pilot DHC was to a certain extent similar to the Integrated Community Centres for Mental Wellness ("ICCMWs") which was operated by non-government organizations ("NGOs") with a aim to provide one-stop, district-based and accessible community support and social rehabilitation services ranging from early prevention to risk management for persons with mental health needs in the community under medical-social collaboration. He remarked that statistics revealed that the waiting time for public psychiatric specialist outpatient services had not been shortened following the establishment of ICCMWs in 2010. The governance of individual NGOs was another issue of concern as there had been cases involving wanton use of a large sum of government subvention for remunerating the middle management. He asked if the Administration would review the effectiveness of ICCMWs. USFH took note of the concern and undertook to relay the issue to the Social Welfare Department for consideration.

Scope of services

9. Pointing out the difficulty for patients with episodic illnesses to make an appointment for the next 24 hours through HA's general outpatient clinic telephone appointment system and the long waiting time for new enrolment at the Elderly Health Centres which provided physical health examination for their members, Dr KWOK Ka-ki considered that it was of utmost importance that the primary healthcare services to be provided by the pilot DHC could meet the health needs of the Kwai Tsing population.

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Consideration should be given to providing screening and management of osteoporosis, screening tests for breast, cervical and liver cancer. Pointing out that the ocular health care service provided under the Kwai Tsing District's Signature Project Scheme themed "Enhancement of Community Healthcare" was well received by residents, Dr Helena WONG asked whether eye care services would be provided by the pilot DHC.

10. Dr CHIANG Lai-wan said that the Democratic Alliance for the Betterment and Progress of Hong Kong supported the establishment of the pilot DHC to raise health awareness and promote health management at the district setting. In her view, the pilot DHC should include, among others, free biennial physical check-up for designated age groups, say, people aged 50 or above, for disease prevention and diagnosis for suspected cancer cases to obviate the need of the residents to wait in the long queue for examination in the public hospitals. In addition, those Chinese medicine services which was preventive in nature should be provided at the pilot DHC. Ms Alice MAK remarked that despite the elaboration given by the Administration in its paper and at the earlier part of the meeting, she could not see how the pilot DHC was different from the Community Health Centres of HA. In her view, the pilot DHC should provide dental care and mental health services to fill the service gap in the public healthcare sector, and meet the specific health needs of the population, including the ethnic minorities, of Kwai Tsing District.

11. USFH advised that the objective of the pilot DHC was to, among others, incentivize targeted residents to identify health issues at an early stage, manage designated chronic diseases, and/or continue with their rehabilitation process in the community with the assistance of healthcare service providers in their localities. The Administration was open-minded on the services to be provided by the pilot DHC. In determining the scope of services, due regard would be given to the demographic profile of the Kwai Tsing population which consisted of a greater number of grass-root workers and women, elders, singleton elders and ethnic minorities. The initial plan of the Administration was that the service of the pilot DHC should direct resources to tackle the most prevalent chronic diseases that consume substantial medical resources through identifying the at-risk population and explore how to manage the conditions of these diseases through risk management and early intervention. On the suggestion of providing Chinese medicine services at the pilot DHC, USFH said that a member of the Steering Committee on Primary Healthcare Development, which was tasked to formulate the development strategy and devise a blueprint for primary healthcare services, was from the Chinese medicine sector.

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12. On cancer prevention, Head, PCO advised that a mechanism was put in place under the Centre for Health Protection to regularly review the local epidemiology, latest scientific evidence, as well as local and overseas practices in making recommendations on screening for persons at risk of locally common cancers. On that basis, screening programmes for cervical cancer and colorectal cancer had been rolled out. As regards osteoporosis, the health education currently provided by the Woman Health Service of DH at its Woman Health Centres and Maternal and Child Health Centres covered osteoporosis and fracture prevention. There was, however, absence of adequate scientific evidence to support population based osteoporosis screening.

Premises of the pilot DHC

13. Dr KWOK Ka-ki considered that the pilot DHC should be set up at a permanent site, say by redeveloping the public general outpatient clinic or maternal and child health centres in Kwai Tsing. USFH advised that while rental of premises was a more feasible option to enable the early set-up of the pilot DHC, the Administration would in tandem identify if there was any permanent site available in the longer run.

Engagement with stakeholders

14. Dr KWOK Ka-ki called on the Administration to hold open public consultation meetings to collate views from residents of Kwai Tsing District and major stakeholders on the set-up of the pilot DHC. Mr SHIU Ka-chun expressed a similar view, adding that the public consultation meetings should gauge the views from the NGOs concerned.

15. USFH and Deputy Secretary for Food and Health (Health) 2, Food and Health Bureau advised that the Administration would start meeting with the NGOs concerned and healthcare professionals serving in Kwai Tsing District and consult the Kwai Tsing District Council in April 2018. Separate meeting with residents of Kwai Tsing District to gauge the views would be organized in due course.

16. Mr SHIU Ka-chun was of a strong view that the Working Group on the District Health Centre Pilot Project in Kwai Tsing District which was tasked to provide advice on the planning, implementation and evaluation of the pilot project should include professionals and NGOs from the social sector, patient groups, service users and academia to ensure that the pilot DHC could achieve medical-social collaboration as suggested by the Administration. USFH assured members that individuals sitting on the Working Group had the relevant background. Separately, given that the

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Administration would later identify a non-government entity to operate the pilot DHC by way of tender, representatives from NGOs serving the Kwai Tsing District were not invited to sit on the Working Group.

Way forward

17. On Mr POON Siu-ping's enquiry about the concrete timetable for setting up District Health Centres in all 18 districts, USFH advised that the Administration would first focus its efforts on setting up the pilot DHC, with the timetable for setting up District Health Centres in the remaining districts to be worked out at a later stage.

18. Dr CHIANG Lai-wan requested the Administration to consider setting up the next District Health Centre in Sham Shui Po District which had a great proportion of elders and low-income earners. Consideration should be given to establishing the District Health Centre at the proposed Joint-user Government Office Building located at the junction of Tung Chau Street and Tonkin Street West. USFH took note of the suggestion.

II. Any other business

19. There being no other business, the meeting ended at 12:00 noon.

Panel on Health Services

**Special meeting on Monday, 26 March 2018, at 9:30 am
in Conference Room 3 of the Legislative Council Complex**

**Summary of views and concerns expressed by organizations/individuals on
District Health Centre Pilot Project in Kwai Tsing District**

No.	Name of deputation/individual	Submission / Major views and concerns
1.	Ms PONG Oi-lan, Sha Tin District Council Member	<ul style="list-style-type: none"> LC Paper No. CB(2)1144/17-18(01)
2.	Mr LEUNG Sai-hong	<ul style="list-style-type: none"> A 24-hour general out-patient clinic should be set up in the pilot District Health Centre to be set up in Kwai Tsing District ("the pilot DHC"). The Administration should step up its efforts in tackling obesity which posed health risks for the population.
3.	Health In Action	<ul style="list-style-type: none"> LC Paper No. CB(2)1074/17-18(03)
4.	Mr LEUNG Kwok-hung	<ul style="list-style-type: none"> Evening out-patient services and dental care services should be provided by the pilot DHC.
5.	關注葵青區地區康健中心 民間連線	<ul style="list-style-type: none"> LC Paper No. CB(2)1074/17-18(04)
6.	Miss LAU Shuk-fan	<ul style="list-style-type: none"> LC Paper No. CB(2)1074/17-18(05)
7.	護老者關注組	<ul style="list-style-type: none"> 24-hour outpatient services, one-stop primary care services for the elderly and dental care services should be provided by the pilot DHC.
8.	一邨一護士關注組	<ul style="list-style-type: none"> There should be a nurse stationed at each housing estate to provide nursing service and healthcare advice for the elderly. The Administration should strengthen public education on the proper use of the Elderly Health Care Voucher.
9.	年長慢性病患聯盟	<ul style="list-style-type: none"> The Administration should strengthen the one-stop primary care services for the elderly, including the provision of nursing service and counselling service on the use of medication.
10.	長者睛彩社	<ul style="list-style-type: none"> The deputation expressed concern over the long waiting time for cataract surgeries provided by public hospitals. The Administration should step up its efforts in promoting the proper use of the Elderly Health Care Voucher.
11.	長者全民保健關注組	<ul style="list-style-type: none"> The deputation expressed support for the establishment of the pilot DHC. The pilot DHC should provide health screening and assessment, dental care services as well as eye care services for the elderly.

No.	Name of deputation/individual	Submission / Major views and concerns
12.	長者健康關注組	<ul style="list-style-type: none"> The deputation considered that the pilot DHC should provide primary healthcare services to the residents through local network and case management approach. Apart from service output, the Administration should formulate performance indicators to assess the effectiveness of the pilot DHC.
13.	Society for Community Organization	<ul style="list-style-type: none"> LC Paper No. CB(2)1144/17-18(02)
14.	Kwai Tsing Safe Community and Healthy City	<ul style="list-style-type: none"> LC Paper No. CB(2)1144/17-18(03)
15.	Prof Albert LEE	<ul style="list-style-type: none"> LC Paper No. CB(2)1074/17-18(06)
16.	Mr LEUNG Chun-pong	<ul style="list-style-type: none"> LC Paper No. CB(2)1074/17-18(07)
17.	Baptist Oi Kwan Social Service Integrated Community Centre for Mental Wellness (Kwai Tsing)	<ul style="list-style-type: none"> LC Paper No. CB(2)1074/17-18(08)
18.	Civic Party	<ul style="list-style-type: none"> LC Paper No. CB(2)1144/17-18(04)
19.	Civic Party Kwai Tsing Team	<ul style="list-style-type: none"> LC Paper No. CB(2)1144/17-18(04)
20.	Virtuouslady Club	<ul style="list-style-type: none"> LC Paper No. CB(2)1074/17-18(09)
21.	Kwan Chung Sub-Divided Flat Residents Alliance	<ul style="list-style-type: none"> The deputation expressed support for the establishment of the pilot DHC, and called on the Administration to gauge views from residents in Kwai Tsing District.
22.	Kwai Chung Housing Angel Group	<ul style="list-style-type: none"> The deputation considered that the pilot DHC should provide, among others, dental care services, eye care services, gynaecology services and paediatric services. It was also important to promote the healthcare services provided by the pilot DHC among the local residents, in particular the elderly, ethnic minorities and new immigrants, in Kwai Tsing District. The deputation called on the Administration to gauge views from residents in Kwai Tsing District.
23.	女性健康權益關注組	<ul style="list-style-type: none"> LC Paper No. CB(2)1074/17-18(09)
24.	葵青婦女關注康健中心小組	<ul style="list-style-type: none"> LC Paper No. CB(2)1074/17-18(09)
25.	Kwai Tsing District Health Centre Concerned Group	<ul style="list-style-type: none"> LC Paper No. CB(2)1074/17-18(10)
26.	Democratic Party	<ul style="list-style-type: none"> The deputation expressed support for the establishment of the pilot DHC. It considered that the Centre should be set up at an easily accessible location and provide healthcare services, such as dental care services, eye care services and mental health services, for local residents.

No.	Name of deputation/individual	Submission / Major views and concerns
		<ul style="list-style-type: none">• The deputation called on the Administration to gauge views from residents in Kwai Tsing District.• Stakeholders, including, among others, non-governmental organizations, service users and patients groups, should be engaged in the governance of the pilot DHC.

Council Business Division 2
Legislative Council Secretariat
30 November 2018