

Motion Debate on
“Comprehensively improving the public dental out-patient services
and the dental care scheme”
moved by Hon WONG Kwok-hing
as amended by Hon Andrew CHENG Kar-foo
at the Legislative Council Meeting of 19 November 2008
Progress Report

Purpose

This paper briefs Members on the follow-up actions taken by the Administration in respect of the above Motion.

Motion

2. At the Legislative Council Meeting of 19 November 2008, the Motion moved by Hon WONG Kwok-hing as amended by Hon Andrew CHENG Kar-foo was carried:

“That oral health is an important factor affecting people’s health and quality of life, yet many people are not able to receive proper treatment when they have oral health problems; the Government on the one hand promotes oral care among the entire population, but on the other hand the public dental out-patient services and dental care services in Hong Kong are seriously inadequate, resulting in the grassroots who cannot

afford the charges of private dental clinics not being able to receive timely dental treatment even when they have dental diseases, and at the same time, the present dental care scheme remains to be available to primary schools only, this Council urges the Government to provide additional resources to improve oral care for the entire population, the public dental out-patient services and the dental care scheme, including:

- (a) providing public dental out-patient services to members of the public at the medical and health organisations run by the Government in various districts;
- (b) public dental out-patient services must include comprehensive dental treatment, such as dental examination, scaling, extraction, filling, endodontic treatment and crowning, etc, and providing out-reaching dental services for the elderly living in residential care homes;
- (c) setting up a dental care scheme for secondary school students;
- (d) setting up a dental care scheme for the poor elderly aged over 60;
- (e) studying the provision of small dental clinics in elderly health centres; and

- (f) reviewing the policy and goals in respect of oral health, and drawing up an implementation timetable and a detailed plan to comprehensively improve the public dental out-patient services and the dental care scheme; as it takes time to improve public dental out-patient services, the Government should first set up a fund to subsidise the people in need to use the dental services of private or non-profit-making organisations.”

Progress

Public dental out-patient services (parts (a), (b) and (e) of the Motion)

3. The first and foremost way to improve oral health is by prevention. The government’s policy on oral health therefore seeks to raise public awareness on oral health and facilitate the development of proper oral health habits mainly through promotion and education. While our policy is prevention-based, we also provide emergency dental services for the public. Currently, the Department of Health (DH) provides free emergency dental services covering pain relief and teeth extraction through the general public sessions in 11 government dental clinics.

4. Besides, the DH operates Oral Maxillofacial Surgery and Dental Units in 7 public hospitals to provide specialist dental services for in-patients on referral and those with special oral care needs, e.g. people with systemic

diseases and physical disabilities. The DH's Elderly Health Centres conduct health assessment (including preliminary oral health screening) for their registered members and provide them with basic knowledge of oral care.

5. In order to promote oral care among the elderly, the DH's Visiting Health Teams pay visits to residential care homes for the elderly (RCHEs) and day activity centres for the elderly where they organise promotional activities on oral health and give carers and the elderly important tips on oral care. On the other hand, some non-government organisations (NGOs) also provide reasonably priced outreaching oral health services for the elderly in RCHEs. We will continue to encourage more NGOs to provide outreaching oral health services to the elderly in RCHEs.

Setting up dental care schemes for secondary school students and the poor elderly (parts (c) and (d) of the Motion)

6. At present, apart from the free services provided by the government dental clinics with general public sessions, the elderly can also use the reasonably priced dental services provided by some NGOs. In respect of elderly with financial difficulties, under the Comprehensive Social Security Assistance (CSSA) Scheme, CSSA recipients aged 60 or above are given a dental grant to cover the actual expenses on dental treatment.

7. Moreover, starting from January this year, the Government has launched a three-year pilot project to provide 5 health care vouchers, each of \$50 value, to the elderly aged 70 or above per year to meet part of their expenses on private primary care services. This pilot project provides the elderly with an option, allowing them to choose private care services that suit their needs in addition to the public care services. The health care vouchers can also be used for dental services.

8. The Government is open to the proposal of setting up a dental care scheme for secondary school students. When studying the proposal, the Government will draw reference from overseas experience in implementing similar schemes and continue to listen to the views of the dental profession and the public.

Reviewing the policy on oral health (part (f) of the Motion)

9. As to how to further improve public dental services, the Administration will carefully consider the views of all concerned. Our focus now is on primary care services, and additional resources will be provided in the next few years to develop a prevention-based model for primary care services. The Working Group on Primary Care, comprising representatives of the dental profession, service users and relevant sectors, has commenced work. The Working Group will focus its study on how to promote comprehensive primary care services and how to provide subsidies to the public for preventive care

services. Once the Working Group comes up with the preliminary proposals, we will consult Members, the profession and the public and further listen to their views.

Food and Health Bureau

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