Legislative Council Panel on Health Services

Progress Report on

Preventive Measures Against the Spread of Enterovirus Infections

Purpose

This paper briefs Members of the Legislative Council Panel on Health Services on the actions taken by the Administration in July 1998 to prevent the spread of enterovirus in Hong Kong.

Background

2. In the special meeting of the Legislative Council Panel on Health Services (Panel) held on 17 July 1998, the Administration reported that an Interdepartmental Working Group on Enterovirus Infection (Working Group) had been set up in early July this year to better coordinate measures to prevent the spread of enterovirus in Hong Kong. In view of the fast development of the issue, Members requested Health and Welfare Bureau to submit a progress report to

the Panel as soon as the Working Group has held its second meeting on 22 July 1998.

Actions taken

3.1 Since the Working Group had its first meeting on 7 July 1998, various departments, including Department of Health (DH), Hospital Authority (HA), Education Department (ED), Social Welfare Department (SWD), Urban Services Department (USD), Regional Services Department (RSD) and Information Services Department (ISD), have put extra efforts in implementing actions agreed in the meeting. Special attention was paid to child care centres, kindergartens, swimming pools and children playgrounds. Details are described as follows:

Child Care Centres

3.2 Since Hand, Foot and Mouth Disease (HFMD) mainly affects children under the age of 5, DH has inspected all child care centres (a total of 383) to ensure that the hygiene standards are maintained at a high level. Health advice, on prevention of enterovirus infections in particular, was given during the inspections.

- 3.3 SWD has also arranged 2 briefing sessions for staff of child care centres on 14 and 16 July 1998. Staff from DH assisted by providing on site health education and answering questions. The 2 sessions were well attended by some 370 staff of child care centres.
- 3.4 To ensure that the hygiene condition in child care centres is maintained, SWD has redeployed its staff and re-scheduled their visits so that visits to these centres will be stepped up.

Kindergartens

- 3.5 DH has inspected more than 55% of a total of some 770 kindergartens. Health advice was also given. However, since most of the kindergartens have closed for summer vacations, the rest could only be visited when they recommence the academic session in mid August.
- 3.6 On 15 July 1998, ED has already sent to kindergartens, primary and secondary schools pamphlets on HFMD, which were supplied by DH. School principals were requested to make photocopies of the pamphlets and distribute them the soonest possible to students as well as parents of younger students. Past experience showed that school principals are usually cooperative. ED also plans to distribute the latest version of the pamphlet and poster to schools in late August this year.

3.7 ED arranged 2 briefing sessions for staff of kindergartens on 28 July 1998. Each of the sessions was well attended by some 300 persons. Staff of DH were present to give on-site health education on enterovirus. Another 2 briefing sessions of the kind are planned to be held for staff of primary schools on 5 Aug this year before school recommences. Knowing that some teaching staff may not be available in Hong Kong for the above mentioned briefing sessions, ED plans to hold a few more sessions in early September this year.

Swimming Pools

- 3.8 Staff of USD and RSD have strictly implemented the hourly sampling of the public pool water, ensuring that the free residue chlorine level is maintained at a level sufficient to kill the virus. Staff also strictly prohibit persons with obvious skin diseases to enter the pool areas.
- 3.9 As regards private swimming pools, both USD and RSD have sent to all pool licensees advisory letters and leaflets on HFMD in mid July 1998. Private pool licensees are requested to take hourly water samples using a specialised instrument to ensure that the prescribed free residual chlorine level is maintained, and to keep relevant records for inspection by Health Inspectors. Inspection to licensed swimming pools has been stepped up from once per month to

once every 2 weeks. A complete round of inspection to all licensed swimming pools has been completed.

3.10 In addition, colour photos on some obvious HFMD symptoms will be provided to private pool licensees before early August 1998 so that they may choose to place these photos at prominent places in the pool area as a warning. 2 special health talks were arranged on 18 and 23 July 1998 for staff working in both public and private pools, and they were attended by some 330 persons.

Children Playgrounds

- 3.11 Since mid July 1998, both USD and RSD have started to clean balls in ball pools within the departments' children's playrooms with detergent and water at least once a day. All articles will be disinfected at once if they are found to be soiled by the users.
- 3.12 Visits by staff of USD and RSD to places of public entertainment with ball pools have now been stepped up from once every 3 months to once every 2 weeks. We have recently learnt that some entertainment centres had purchased machines to facilitate the washing of these balls.

Surveillance

3.13 We have maintained to be vigilant in monitoring the trend of the disease in Hong Kong. HA has been closely monitoring hospital admissions due to HFMD and/or complications associated with enterovirus infections. The sentinel surveillance system, originally formed by the public hospitals in Hong Kong, DH's 63 General Out Patient Clinics and 16 General Practitioners, has been strengthened by 10 additional General Practitioners. More General Practitioners are being invited to join our efforts.

Public Education

- 3.14 The best preventive measure against enterovirus infections is to practise good personal hygiene. We therefore attach great importance to public education which enables the public to know more about the disease.
- 3.15 In July this year, we targeted at the general public by revising leaflets and posters on HFMD. These new leaflets and posters are available at various public places including DH clinics, HA Accident and Emergency Departments, District Offices, USD and RSD facilities, schools and child care centres. So far, more than 60,000 copies of the leaflets have been distributed.

3.16 The automated hotline on HFMD maintained by the Central Education Unit of DH

also received good response. We have received some 4,200 calls from the public in July 1998.

DH has further enhanced its health education programme by setting up on 27 July 1998 a new

hotline service (2833 0112) dedicated to provide information on enterovirus infections.

3.17 Starting from the last week of July 1998, ISD has launched new TV and radio APIs

(Announcement of Public Interest) to educate the general public on the prevention of

enterovirus infections.

Latest Position

4. As at 31 July 1998, DH has recorded a total number of 34 confirmed and 8 suspected

cases of enterovirus 71 infection since the surveillance system was set up in mid June this year.

All patients have recovered except for a 34 year-old man who is in satisfactory condition in

hospital.

Health and Welfare Bureau

31 July 1998

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