

LCQ16: District Health Centres

Following is a question by Dr the Hon Pierre Chan and a written reply by the Secretary for Food and Health, Professor Sophia Chan, in the Legislative Council today (March 24):

Question:

Kwai Tsing District Health Centre (KTDHC), which is the first District Health Centre in Hong Kong, commenced operation in September 2019. In addition, the Government is taking forward its plan to construct Wan Chai District Health Centre (WCDHC) at Caroline Hill Road. In this connection, will the Government inform this Council:

(1) of the following information about KTDHC (including its satellite centres):

(a) the respective (i) total operational expenses with breakdowns, (ii) staffing establishment, and (iii) total expenses on remunerations with breakdowns by staff rank, in the two financial years of 2019-2020 (from September 2019) and 2020-2021 (as at the end of February this year),

(b) the (i) service attendance, (ii) number of referrals received from public hospitals, and (iii) number of referrals made to service providers and community partners, in each month since commencement of operation, and

(c) the respective service attendances by (i) obese persons, (ii) patients with hypertension and (iii) patients with diabetes mellitus, in each month since commencement of operation;

(2) of (i) the number of days of temporary closure of KTDHC due to the coronavirus disease 2019 epidemic, and (ii) the details of the work carried out by KTDHC for preventing and combating the epidemic;

(3) of the details of the Government's making use of big data for (i) planning the primary healthcare services needed in Kwai Tsing District, and (ii) enhancing the services of KTDHC; and

(4) as the proposed WCDHC will be built by the developer of the commercial development on the Caroline Hill Road site, and then handed over to the Government, how the Government will ensure the workmanship of the construction works of WCDHC, and of the arrangements and estimated costs for the repair and maintenance of WCDHC upon commissioning?

Reply:

President,

A reply to the various parts of the question raised by Dr the Hon Pierre

Chan is as follows:

(1) The Food and Health Bureau is committed to enhancing district-based primary healthcare services by setting up District Health Centres (DHCs) throughout the territory progressively. The first DHC in Kwai Tsing District commenced operation in September 2019.

The expenditure for 2019-20 and revised estimates for 2020-21 on rental and operating expenses for the service contract of the Kwai Tsing DHC (K&TDHC) are \$43.6 million and \$79.7 million respectively. The staff establishment as at March 31, 2020 and December 31, 2020 are set out below:

Staff Establishment	March 31, 2020	December 31, 2020
Executive Director	1	1
Chief Care Coordinator	1	1
Care Coordinators	6	11
Nurses	3	2
Physiotherapists	2.5	3
Occupational Therapists	1.5	2
Pharmacist	1	1
Social Workers	5	5
Dietitian	1	1
Administrative Staff	8	17
Supporting staff	28	26

The number of network service providers as at March 31, 2020 and December 31, 2020 are set out below:

Professions	March 31, 2020	December 31, 2020
Medical Practitioner	27	40
Chinese Medicine Practitioner	20	33
Physiotherapist	12	15
Optometrist	11	12
Occupational Therapist	1	6
Speech Therapist	1	3
Podiatrist	0	0
Pharmacist	0	0

Dietitian	2	2
Medical Laboratory Service	3	4
Total	77	115

The number of registered members of the K&TDHC as at March 31, 2020 and December 31, 2020 were 2 900 and 11 100 respectively. The attendance of relevant K&TDHC service/activities are set out below:

DHC Service/Activities	September 2019–March 2020 [^]	April 2020–December 2020 (provisional figures) [^]	Cumulative Figures (provisional figures) [^]
Health Promotion/Patient Empowerment Activities/Vaccination	9 000	32 000	41 000
Basic Health Risk Factors Assessment	2 800	8 500	11 300
Screening for Diabetes Mellitus and Hypertension*	100	1 700	1 800
Chronic Disease Management/Community Rehabilitation Programme#	400	2 500	2 800
Total	12 300	44 600	57 000

[^] Figures are rounded to the nearest hundred and may not add up to the total due to rounding.

* Include medical consultation and medical laboratory tests only

Include individualised health care services referred by network medical practitioners/Hospital Authority (HA) only

The Bureau does not maintain other separate breakdown mentioned in the question.

(2) During the COVID-19 epidemic, the K&TDHC suspended face-to-face classes and individual services at its Core Centre and two Satellite Centres at Kwai Chung (West) and Tsing Yi (South West) between February 7, 2020 and March 15, 2020 to accord with the Government direction in strengthening social distancing measures with a view to reducing the risk of the virus transmission in the community. During the period, the K&TDHC continued to serve its members and public through video and telecare platform. The K&TDHC has resumed limited services at its centres since March 16, 2020. During the epidemic, K&TDHC continues to provide services for members and public in Kwai Tsing through various modes of operation in a bid to complementing the Government's effort in fighting the epidemic. The details of its services are set out below:

To demonstrate the function of primary healthcare ecosystem on epidemic prevention in the community, the K&TDHC actively supported people in need by setting up street counters in areas and locations with confirmed cases by distributing anti-epidemic supplies (including surgical masks, hand sanitisers and other information on health related services, etc.) at the site or by post, and address queries from the public. Meanwhile, the K&TDHC has produced videos with anti-epidemic information in different dialects and ethnic minority languages for people with different backgrounds. The K&TDHC has also set up hotlines to provide health education and guidance to the public and promulgated relevant anti-epidemic health information via its social media channels, and has reached out to its members for provision of service via different telecare platforms.

In addition, the K&TDHC and its Satellite Centres have participated in the distribution of deep throat saliva specimen bottles, especially to symptomatic members who work in industries which have frequent contact with people or those in the service industry. The K&TDHC has distributed nearly 7 000 specimen bottles to the targeted groups since the epidemic. Besides, the K&TDHC actively encouraged network doctors to participate the Enhanced Laboratory Surveillance Programme of the Centre for Health Protection under the Department of Health (DH) concerning COVID-19 and provided relevant information of doctors or clinics providing testing within the district at its website for public's reference in order to strengthen community testing.

In terms of the supports provided to the patients who had recovered from COVID-19, the K&TDHC has been providing community supports to recovered patients who return to the community after their condition became stabilised at the referral of the HA in order to manage the impacts caused by the illness, such as weakened bodily functions, impacts on daily life caused by respiratory problem, etc., as well as providing consultations on other diseases and side effects of drugs. Medical professionals would firstly contact the patients by phone to understand their respective situation and needs in order to provide one-stop services by the multi-disciplinary team comprising nurses, physiotherapists, occupational therapists, dietitians as well as social workers. Services included medical and health information, guidance on home exercise, diet recommendations and emotional counselling, etc.

Since the COVID-19 Vaccination Programme commenced, the K&TDHC has enhanced the publicity and education on the Vaccination Programme through different channels (including relevant education seminars offered at the Core Centre, Satellite Centres and in collaboration with the local non-governmental organisations located at the district, as well as live streaming activities on social media platforms, etc.). The K&TDHC also contacted members who were under the priority groups and assisted them in making reservation for receiving vaccines. Information posters and the information on private doctors and clinics who offer vaccinations were displayed at the K&TDHC Core Centre and its Satellite Centres. Furthermore, the K&TDHC is also liaising with the private doctors in the vicinity (including Tsuen Wan, Sha Tin, and Sham Shui Po) who have participated in the Vaccination Programme for collaboration in order to encourage and facilitate members and local

residents to receive vaccination.

(3) In determining the scope of services to be provided by the K&TDHC, the Steering Committee on Primary Healthcare Development (the Steering Committee) examined the findings of four large-scale surveys/data sources to better understand the health profile of the Kwai Tsing population, namely:

- (a) Chronic Disease Virtual Registry of the HA;
- (b) Population Health Survey conducted by the DH;
- (c) Thematic Household Survey conducted by the Census and Statistics Department; and
- (d) The collaborative project entitled "FAMILY: A Jockey Club Initiative for a Harmonious Society" (FAMILY Project) conducted by the School of Public Health of the University of Hong Kong and funded by the Hong Kong Jockey Club.

Since item (d) above contains district-based health data that is most relevant to the DHC, we have consulted the Steering Committee and have agreed to adopt the data of the FAMILY Project as the baseline for the scope of services to be provided by the K&TDHC.

(4) As the works project of the Wan Chai DHC (WCDHC) will be designed and constructed by the developer, it is subject to the regulation of the Buildings Ordinance (BO) (Cap. 123) like other private development projects. Under the BO, the developer is required to appoint an authorised person (AP), a registered structural engineer and a registered geotechnical engineer (collectively referred to as "building professionals") to prepare and submit various types of building plans prescribed by the law for the approval of the Buildings Department (BD). The developer is also required to appoint registered contractors to carry out the relevant works. Upon completion of the development project, in addition to the application for the occupation permit (OP), the registered building professionals and the registered contractors must submit a certificate on completion of the building works to the BD to certify that the works concerned have been completed in accordance with the approved plans and comply with the BO and its subsidiary regulations. Besides, the BD will exercise building control on private development projects in accordance with the BO, including by plan processing and regular inspection of sites with construction works in progress. Upon receipt of an application for OP, the BD officers will carry out site inspection with the AP and scrutinise the supporting documents submitted as required under the BO to ensure that the building works comply with the relevant provisions of the BO and its subsidiary regulations before issuing the OP.

In addition, the Government will scrutinise the design and material submissions from the developer according to the requirements and specifications of "Technical Schedule" appended to the land sale conditions, and carry out inspection prior to the handover to ensure that the overall design and construction quality of the WCDHC fulfill the operational requirements.

Upon completion of the WCDHC subject to the compliance with the above inspection procedures, the WCDHC will be handed over to the Government as a government property. The Government will be responsible for the management and the maintenance of the property. The relevant estimated costs of repair and maintenance works of the WCDHC is approximately \$0.9 million per year.