

LCQ17: Public dental services

Following is a question by the Hon Chan Kin-por and a written reply by the Secretary for Health, Professor Lo Chung-mau, in the Legislative Council today (May 31):

Question:

Since September last year, the Department of Health (DH) has implemented a "preliminary registration" arrangement at some of its dental clinics that provide general public dental services. Those clinics will preliminarily register personal information for persons in the queue subject to their service quotas starting at 12am on the day of providing general public dental services. Those persons can leave the clinics, and return to the relevant clinics at the original disc-distributing time in the morning on the same day to obtain discs and register formally. In this connection, will the Government inform this Council:

(1) of the quotas, the proportions of discs distributed, and the average waiting times of persons in the queue for general public dental services at the various relevant dental clinics since the launch of the "preliminary registration" arrangement, and whether the DH has considered increasing the service quotas to meet the demand; if so, of the details; if not, the reasons for that;

(2) whether it will consider enhancing the "preliminary registration" arrangement, including allowing members of the public to obtain discs through telephone or online platform, so that they need not queue up and wait in person;

(3) given that at present, the DH's walk-in emergency dental services only cover relieving pain and extracting teeth for members of the public and do not cover other oral problems, whether the DH will expand the scope of such services; and

(4) whether it has plans to provide more public dental services in the future; if so, of the details; if not, the reasons for that?

Reply:

President,

The Government's current dental care policy aims to raise public awareness of oral hygiene and health through publicity and education, and to encourage the public to develop good oral hygiene habits. Generally speaking, the need for dental treatment or surgery due to tooth decay and gum diseases can be greatly reduced if good oral hygiene habits are maintained.

Under the current policy, the Government mainly undertakes publicity,

education and promotion of oral health, particularly with emphases on nurturing good oral hygiene habits from an early age and providing the comprehensive School Dental Care Service to children.

Apart from the School Dental Care Service, the Government currently provides or subsidises limited dental services, which mainly include provision of treatment for the public for emergency cases and implementation of measures catering for persons with special dental care needs, especially the elderly with financial difficulties or persons who have difficulties in accessing general dental services. Services provided by the Government for persons with special dental care needs include special oral care services (including the Healthy Teeth Collaboration) for persons with an intellectual disability, as well as dental care support for the elderly under the Outreach Dental Care Programme for the Elderly and the Elderly Dental Assistance Programme funded by the Community Care Fund. Also, elderly persons may use Elderly Health Care Vouchers to receive dental services in the private sector, and persons with financial difficulties may receive subsidy to cover dental treatment expenses under the Comprehensive Social Security Assistance (CSSA) Scheme. These services for targeted groups are not provided by government dental clinics.

On the other hand, under the civil service terms of appointment, the Government is obliged to provide dental benefits for civil servants/pensioners and their eligible dependents. Dental clinics under the Department of Health (DH) are established primarily for fulfilling this obligation. That said, the Government uses a small fraction of the service capacity of the dental clinics to provide free emergency dental treatment to the general public (commonly referred to as General Public or GP sessions). The DH allocates certain sessions each week in its 11 government dental clinics to provide GP sessions for citizens in need, covering services such as treatment of acute dental diseases, prescriptions for pain relief, treatment of oral abscesses and tooth extraction. The dentists will also provide professional advice with regard to the needs of individual patients. Emergency GP sessions only provide limited emergency services which aim at rendering supplementary support on top of the aforementioned prevailing oral health and dental care services provided by the public and private sectors. Under the existing mechanism, elderly persons and CSSA recipients can receive subsidised dental treatment and hence do not need to queue for emergency GP sessions.

The reply to the various parts of the question raised by the Hon Chan Kin-por is as follows:

(1) The GP service sessions, actual maximum numbers of discs for allocation per service session and the utilisation rates of the discs allocated in the 11 government dental clinics of the DH under normal circumstances are set out below:

Dental clinic offering GP sessions	Service session	Actual maximum number of discs for allocation per service session	Utilisation rate of discs allocated (from September 1, 2022, to March 31, 2023)
Kowloon City Dental Clinic	Monday (AM)	42	99.2%
	Thursday (AM)	21	
Kwun Tong Dental Clinic	Wednesday (AM)	42	100%
Kennedy Town Community Complex Dental Clinic	Monday (AM)	42	96.5%
	Friday (AM)	42	
Fanling Health Centre Dental Clinic	Tuesday (AM)	25	99.1%
Mona Fong Dental Clinic	Thursday (PM)	21	97.4%
Tai Po Wong Siu Ching Dental Clinic	Thursday (AM)	21	100%
Tsuen Wan Dental Clinic	Tuesday (AM)	42	99.8%
	Friday (AM)	42	
Yan Oi Dental Clinic	Wednesday (AM)	21	99.7%
Yuen Long Government Offices Dental Clinic	Tuesday (AM)	21	99.8%
	Friday (AM)	21	
Tai O Dental Clinic	2nd Thursday (AM) of each month	16	63.4%
Cheung Chau Dental Clinic	1st Friday (AM) of each month	16	83.9%

Currently, the service capacity of the emergency GP sessions of government dental clinics has been fully used with the utilisation rate of all appointment slots approaching 100 per cent. Since the DH's dental clinics mainly provide dental benefits for eligible persons and only a small fraction

of the clinics' service capacity is used for emergency GP sessions to provide limited supplementary support, it is not possible for the DH to allocate more slots for GP sessions on top of the existing GP sessions. The DH does not collect relevant data on the queuing time of citizens.

(2) The 11 designated government dental clinics provide free emergency dental services for the general public. Citizens in need may queue for discs at the clinics, and those who have obtained a disc can generally receive treatment within the same session (AM / PM) on the same day.

Regarding the arrangement of the GP sessions, the DH has studied the feasibility of telephone booking but found that it might be more difficult for the elderly to obtain a disc via this arrangement. It is also possible that, under the booking arrangement, citizens in need of emergency dental services may not be able to receive treatment on the same day. The DH will continue to explore ways to improve the arrangement.

(3) and (4) The Government established the Working Group on Oral Health and Dental Care in December 2022 to advise the Government on the long-term strategy for oral health and dental care, as well as matters including the enhancement of the scope and mode of public or subsidised services. The Working Group comprises non-official members and ex-officio members for a two-year tenure until the end of 2024.

The first meeting of the Working Group was held in February 2023 to discuss the future work as well as key issues for follow-up. The Working Group was of the view that enhancing the overall level of citizens' oral health should be the objective under which the scope and effectiveness of the existing oral health measures as well as dental care services are to be examined and suggestions be made on the long-term strategic development for oral health and dental care. The Working Group also consolidated the following framework to form the basis for discussion on the enhancement of oral health measures and dental care services:

(a) To determine the service scope of primary dental services suitable for different age groups with the premise of preventing oral diseases and enhancing the oral health of the community in line with the Primary Healthcare Blueprint;

(b) To define different underprivileged groups, groups with special needs and those at relatively higher risks, and review the existing needs and service coverage with a view to providing more targeted dental care services;

(c) To review the manpower resources and related training arrangements of various dental professionals to tie in with the strategic development needs of the overall oral health and dental care; and

(d) To review the complementary arrangements for dental services, including the models and financial arrangements under which services provided or subsidised by the public sector are delivered, as well as the use of electronic health records, with a view to ensuring service efficacy.

The Working Group is advancing its work under the above framework, with the aim to put forward concrete proposals in phases during its term.