

LCQ19: Assisting residential care homes in coping with epidemic

Following is a question by the Hon Tang Ka-piu and a written reply by the Secretary for Labour and Welfare, Dr Law Chi-kwong, in the Legislative Council today (June 8):

Question:

During the fifth wave of the coronavirus disease 2019 (COVID-19) epidemic, over 50 per cent of the fatal cases were from residential care homes for the elderly (RCHEs) and residential care homes for persons with disabilities (RCHDs), whilst more than 95 per cent of the fatal cases were elderly persons aged 60 or above. In this connection, will the Government inform this Council:

(1) of the numbers of residents confirmed to have contracted COVID-19 in (i) RCHEs, (ii) RCHDs and (iii) other residential care homes (RCHs) from January to May this year and, among them, the numbers of deaths and their percentages in the numbers of people in the RCHs, with a breakdown by the District Council district where such RCHs were located;

(2) of the monthly number of ambulance calls received by the Hong Kong Fire Services Department from January to May this year and, among them, (i) the respective numbers of residents and staff members involved who were in need of treatment, (ii) the number of people suspected to have been infected with COVID-19, and (iii) the number of people sent to hospital for treatment;

(3) of the respective current numbers of residents who have recovered from COVID-19 in various types of RCHs; whether it will provide additional resources and support for RCHs, so as to help them take proper care of recovered patients who have experienced long-term after-effects; whether it will introduce Chinese medicine service and proprietary Chinese medicines to RCHs in assisting in rehabilitation treatment, and whether it will issue to RCHs guidelines for using Chinese medicine and provide them with support, so as to encourage residents to use proprietary Chinese medicines to cope with the epidemic;

(4) whether it will formulate a specific timetable for the residents of various types of RCHs to "Get All Three Doses", and draw up a contingency plan to cater for an outbreak of the epidemic in RCHs; if so, of the details; if not, the reasons for that;

(5) whether it will subsidise RCHs in using high-efficiency air filtering devices or technology (such as anti-bacterial nano filter applicable to air-conditioning system), so as to further enhance the epidemic prevention capability of RCHs; and

(6) whether it will store up a certain amount of anti-epidemic items,

protective equipment and medicines, and formulate for RCHs crisis management mechanisms that are graded subject to the severity of the epidemic, such as implementing close-loop management for staff members of RCHs and community isolation of infected residents, so as to facilitate the Government to assist RCHs in preventing and controlling the epidemic with central support; if so, of the details and the number of items to be stored; whether the "inter-departmental task force on enhancing capabilities of residential care homes in fighting against the epidemic" set up by the Government will prepare and release the relevant reports to the public after examining the work and capabilities of RCHs in respect of epidemic prevention and control, so as to let members of the public know the improvement measures to be introduced by the Government to RCHs?

Reply:

President,

In consultation with the Food and Health Bureau (FHB), the Security Bureau, the Civil Service Bureau, the Social Welfare Department (SWD), the Department of Health (DH) and the Fire Services Department (FSD), a consolidated reply to the question raised is as follows:

(1) According to the information provided by the Hospital Authority (HA), between January 1, 2022 and May 25, 2022, 52 775 residents who lived in residential care homes for the elderly (RCHEs) and residential care homes for persons with disabilities (RCHDs) had been infected by COVID-19. Among them, a total of 4 996 residents passed away.

A breakdown by district on the number of RCHE and RCHD residents infected by COVID-19 between January 1, 2022 and May 25, 2022 is tabulated below (the percentages of infected residents out of the number of RCH residents as at January 2, 2022 are in brackets):

District	RCHE	RCHD	Total
Central and Western District	1 625 (70 per cent)	130 (60 per cent)	1 755 (70 per cent)
Eastern District	2 982 (78 per cent)	330 (57 per cent)	3 312 (75 per cent)
Islands District	440 (57 per cent)	90 (70 per cent)	530 (59 per cent)
Kowloon City District	4 604 (77 per cent)	478 (61 per cent)	5 082 (75 per cent)
Kwai Tsing District	4 108 (71 per cent)	1 558 (74 per cent)	5 666 (72 per cent)
Kwun Tong District	3 240 (75 per cent)	730 (55 per cent)	3 970 (70 per cent)
North District	1 482 (48 per cent)	293 (32 per cent)	1 775 (44 per cent)

Sai Kung District	904 (48 per cent)	386 (57 per cent)	1 290 (50 per cent)
Sham Shui Po District	3 537 (75 per cent)	884 (70 per cent)	4 421 (74 per cent)
Sha Tin District	1 785 (60 per cent)	659 (48 per cent)	2 444 (56 per cent)
Southern District	2 134 (64 per cent)	862 (47 per cent)	2 996 (58 per cent)
Tai Po District	1 723 (61 per cent)	220 (34 per cent)	1 943 (56 per cent)
Tsuen Wan District	2 459 (74 per cent)	255 (61 per cent)	2 714 (73 per cent)
Tuen Mun District	3 071 (75 per cent)	1 800 (69 per cent)	4 871 (72 per cent)
Wan Chai District	774 (60 per cent)	30 (43 per cent)	804 (60 per cent)
Wong Tai Sin District	2 222 (70 per cent)	227 (58 per cent)	2 449 (69 per cent)
Yau Tsim Mong District	2 859 (83 per cent)	294 (69 per cent)	3 153 (81 per cent)
Yuen Long District	2 804 (63 per cent)	796 (51 per cent)	3 600 (60 per cent)
Total	42 753 (69 per cent)	10 022 (58 per cent)	52 775 (67 per cent)

A breakdown by district on the number of RCHE and RCHD residents infected by COVID-19 and passed away between January 1, 2022 and May 25, 2022 is tabulated below (the percentages of death cases out of the number of RCH residents as at January 2, 2022 are in brackets):

District	RCHE	RCHD	Total
Central and Western District	232 (10 per cent)	0 (0 per cent)	232 (9 per cent)
Eastern District	294 (8 per cent)	0 (0 per cent)	294 (7 per cent)
Islands District	56 (7 per cent)	0 (0 per cent)	56 (6 per cent)
Kowloon City District	560 (9 per cent)	0 (0 per cent)	560 (8 per cent)
Kwai Tsing District	502 (9 per cent)	1 (0.05 per cent)	503 (6 per cent)
Kwun Tong District	373 (9 per cent)	0 (0 per cent)	373 (7 per cent)
North District	141 (5 per cent)	0 (0 per cent)	141 (4 per cent)

Sai Kung District	83 (4 per cent)	0 (0 per cent)	83 (3 per cent)
Sham Shui Po District	462 (10 per cent)	3 (0.2 per cent)	465 (8 per cent)
Sha Tin District	189 (6 per cent)	0 (0 per cent)	189 (4 per cent)
Southern District	217 (7 per cent)	1 (0.05 per cent)	218 (4 per cent)
Tai Po District	164 (6 per cent)	0 (0 per cent)	164 (5 per cent)
Tsuen Wan District	277 (8 per cent)	0 (0 per cent)	277 (7 per cent)
Tuen Mun District	352 (9 per cent)	14 (0.5 per cent)	366 (5 per cent)
Wan Chai District	82 (6 per cent)	0 (0 per cent)	82 (6 per cent)
Wong Tai Sin District	256 (8 per cent)	0 (0 per cent)	256 (7 per cent)
Yau Tsim Mong District	357 (10 per cent)	3 (0.7 per cent)	360 (9 per cent)
Yuen Long District	373 (8 per cent)	4 (0.3 per cent)	377 (6 per cent)
Total	4 970 (8 per cent)	26 (0.2 per cent)	4 996 (6 per cent)

The figures on the emergency ambulance calls from RCHEs and RCHDs between January and May 2022 are tabulated below:

Month	Number of emergency ambulance calls originated from RCHEs and RCHDs (Note 1) (Number of emergency ambulance calls related to COVID-19)	Number of patients hospitalised for treatment in response to emergency ambulance calls from RCHEs and RCHDs
January	8 391 (44)	8 115
February	8 132 (3 224)	7 574
March	10 725 (8 738)	9 869
April (Note 2)	6 958 (1 835)	6 671
May (as at May 30) (Note 2)	6 263 (1 274)	6 047

Note 1: The FSD does not maintain the breakdown among the number of residents and staff involved in the aforementioned cases of emergency ambulance calls. Hence, the figures requested cannot be provided.

Note 2: These figures are provisional. The FSD generally needs one to two months' time to consolidate the data and records to come up with exact figures.

(3) Supported by the FHB, the HA took the lead in mobilising Chinese Medicine Practitioners (CMPs) and launched the Chinese Medicine Services for RCHE programme through community Chinese Medicine (CM) service providers such as local universities, the CM sector, CMP organisations, and non-governmental organisations (NGOs). Telemedicine or outreach CM services are provided to infected RCHE residents under the programme. The service concerned has recently been further expanded to cover CM rehabilitation consultation so that the recovered RCHE residents can receive treatment at their RCHEs. From the launch of the service in February till May 30, over 240 RCHEs have joined the programme, with over 10 300 sessions of consultation conducted. The Mainland CM expert group of the Central Authorities has, during their earlier visit to Hong Kong, prepared a set of CM anti-epidemic plans for clinical application, covering the use of proprietary Chinese medicines at home, CM diagnosis, CM rehabilitation, and CM prevention and treatment, for reference by the CM sector and members of the public.

According to the Centre for Health Protection of the DH, between January 1, 2022 and May 25, 2022, there were 47 779 residents of RCHE or RCHD who were infected with COVID-19 and eventually recovered.

(4) The Government mobilised the medical sector to form outreach teams to provide health assessment and vaccination service for RCH residents as soon as possible. Since April 2021, visiting registered medical practitioners and outreach vaccination teams have visited RCHEs and RCHDs by phases to provide vaccination for their residents. As at June 5, the outreach services has administered over 110 000 doses of vaccines to RCHE and RCHD residents, the first dose vaccination rate of RCHE and RCHD residents has reached 88 per cent, and that for the second and third dose have reached 71 per cent and 20 per cent respectively. All RCHs have already been paired with medical institutions/organisations or visiting registered medical practitioners for vaccination services. Relevant medical teams will continue to provide vaccination for RCH residents according to the latter's vaccination schedule.

In addition, the SWD has required, from March 14, 2022 onwards, all persons newly admitted to RCHEs and RCHDs for long-term abode (i.e. excluding emergency or respite residential services) must have received at least the first dose of a COVID-19 vaccine in order to be admitted to the RCH, unless he or she possesses a COVID-19 Vaccination Medical Exemption Certificate issued by a doctor to prove he/she is medically unsuitable for vaccination. Newly admitted residents who have only received the first dose of a COVID-19 vaccine are also required to complete COVID-19 vaccination within the specified period, counting from the day when the first dose of the vaccine is received, in order to continue to reside in the RCH.

(5) With a view to improving ventilation of RCHs to cope with the epidemic, the SWD launched the Time-limited Programme on Enhancing Infection Control and Ventilation of Residential Care Homes in December 2020, whereby technical engineering teams were arranged to conduct ventilation assessment on private

and self-financing RCHs as well as contract RCHs operated by private operators and make improvement recommendations. For NGOs operating subvented or contract RCHs, the SWD provided a special subsidy for them to implement similar measures in their RCHs by themselves. To dovetail with the above programme, the Hong Kong Jockey Club Charities Trust disbursed a one-off allowance to RCHs, subsidising RCHs to purchase equipment (including high-efficiency air purifiers and particulate absorbing filters) so as to improve ventilation of RCHs. Under the fifth wave of the epidemic, the Government has been conducting another round of ventilation assessment of private RCHs since April 2022. The Trust will subsidise RCHs in need again to purchase equipment that improves air quality.

In addition, to assist RCHs in fighting against the fifth wave of the epidemic, the SWD disbursed the sixth round of special grants to RCHs to purchase personal protective equipment (PPE) or disinfection materials, or to be used on other anti-epidemic measures in accordance with their needs.

(6) The Government has taken various measures to assist RCHs to fight against the epidemic, including distributing PPE, such as surgical masks, N95/KN95 masks, protective face shields, goggles, gloves, gowns, etc.; setting up holding centres to take care of elderly persons with caring needs and in stable conditions; requesting RCH staff to conduct regular nucleic acid tests; and disbursing special allowance for manpower support to RCHEs and RCHDs. The Government will also store up PPE items for RCHs in accordance with the development of the epidemic.

In addition, since February 2022, the SWD has distributed over 20 million sets of COVID-19 Rapid Antigen Test Kits (RAT kits) to RCHEs and RCHDs for use by all staff and residents free of charge. The SWD will continue to procure sufficient quantities of RAT kits through the Government Logistics Department and distribute them to RCHs in due course.

The Government has set up an inter-departmental task force led by the Labour and Welfare Bureau in March 2022 to examine the means to improve RCHs' capabilities in fighting against the epidemic. The task force is considering a number of measures to enhance RCHs' overall capabilities in fighting against the epidemic and coping with a possible sixth wave of epidemic, such as improving ventilation of RCHs to reduce the risk of transmission within RCH, strengthening infection control in RCH, improving the communication between RCH and government departments, and enhancing the co-ordination among government departments. The SWD will brief and explain the measures proposed by the task force to the sector, in order to secure their support and co-operation. The task force will announce its work progress as and when appropriate.