LCQ2: Enhancing the services provided by District Health Centres

Following is a question by Dr the Hon David Lam and a reply by the Secretary for Health, Professor Lo Chung-mau, in the Legislative Council today (June 26):

Ouestion:

The Government set up the Kwai Tsing District Health Centre (DHC), the first DHC in Hong Kong, in 2019, and subsequently set up DHCs or District Health Centre Expresses (DHCEs) in various districts across the territory. These facilities have been serving the public for nearly five years. However, some members of the public have relayed that apart from health promotion programmes and the Chronic Disease Co-Care Pilot Scheme, they do not know much about other services provided by DHCs and DHCEs. In this connection, will the Government inform this Council:

- (1) whether it has reviewed in a timely manner the roles and functions of DHCs in primary healthcare services, such as medication management, vaccination and rehabilitation treatment, as well as the effectiveness of their services provided in collaboration with various private healthcare service providers in the community; if so, of the details; if not, the reasons for that;
- (2) whether it has upheld the role of DHCs as case managers and service providers for patients discharged from public hospitals for rehabilitation in the community; and
- (3) whether it has plans to effectively link up healthcare service providers in the community and members of the public through DHCs, so as to introduce diversified healthcare services for members of the public; if so, of the details of the newly introduced service items; if not, the reasons for that?

Reply:

President,

Many thanks for the questions raised by Dr the Hon David Lam. Although the first District Health Centre (DHC) was established in Kwai Tsing District in September 2019, the development of the Kwai Tsing DHC was hugely affected as a result of its active effort in combatting the COVID-19 epidemic during the global outbreak that lasted for nearly three years since 2020.

However, with the improved epidemic situation, the Government released the Primary Healthcare Blueprint in December 2022, setting out a series of initiatives, including to further develop a community-based and familycentric community primary healthcare system based on the DHC model.

The Government successfully set up DHCs and interim DHC Expresses of a

smaller scale in all districts across the city by the end of 2022, thereby attaining the interim goal of DHCs and DHC Expresses covering all 18 districts. We are continuing to take forward the plan of establishing DHCs in all districts across the city, including the preparation of upgrading the three DHC Expresses in Central and Western District, Yau Tsim Mong District and Eastern District into DHCs by 2025. By then, more than half of the 18 Districts in Hong Kong, in other words 10 Districts, will have DHCs in place to serve members of the public. Each DHC will set up several satellite centres/service points to expand public reach.

The DHCs mainly provide health promotion, health risk factors assessment, disease screening, chronic disease management and community rehabilitation services, etc. Following the resumption of normalcy after the epidemic, we launched the Chronic Disease Co-Care Pilot Scheme (CDCC Pilot Scheme) in November 2023 to provide targeted subsidies to citizens for screening and management of chronic diseases in the private healthcare service sector under a co-payment model. After its launch, 45 000 citizens have participated in the Scheme as at June this year and nearly 40 per cent of those who have completed screening were diagnosed with hypertension, prediabetes (Note) or diabetes mellitus. The Scheme also establishes a network with family doctors in the community and supports participants in receiving long-term follow-up.

The DHCs foster the promotion of the "Family Doctor for All" concept, and such a role has been further enhanced after the implementation of the CDCC Pilot Scheme. We noticed that the number of DHC members has significantly increased following the launch of the Scheme. The number of new DHC members per year increased for about 36 times, from only about 2 900 in 2019/20 to about 106 400 in 2023/24. To date, the number of DHC members has reached 263 400. From the commencement of operation of the first DHC in September 2019, the service attendance has accumulated to 1 550 000 as at the end of March 2024. Detailed figures are set out in Annex. The Government commissioned the Chinese University of Hong Kong to conduct a monitoring and evaluation study on the DHCs, and the report showed that DHC members were content with the services of the DHCs and were also of the view that the services have helped enhance their health awareness. All of these reflect that DHCs have been gradually building a primary healthcare service network which begins to take shape in the community, thanks to the support from the Legislative Council Members, healthcare professionals and the community who are dedicated to primary healthcare services all along.

Serving as the community primary healthcare resource hub, DHCs act as co-ordinators of primary healthcare services in the community and case managers. In this regard, the DHCs will enhance its services in three aspects.

First is the establishment of a network of multi-disciplinary service providers. DHCs will co-operate with a wider range of healthcare professions to provide the public with more diversified services. For example, firstly, DHCs, in collaboration with the Hong Kong Jockey Club Charities Trust, kick-started the community pharmacy project in mid-June this year, allowing members of the public to opt for drug consultation and dispensing services in

the community. Secondly, as regards mental health, three DHCs will launch a pilot programme this year to provide members of the public with mental health assessments for early follow-up and referral for high-risk cases in collaboration with community organisations. Thirdly, as regards Chinese medicine (CM), DHCs will continue to establish a service network with CM practitioners and provide personalised CM services under a co-payment model. Fourthly, as regards community rehabilitation, DHCs have established referral mechanisms with various clusters of the Hospital Authority, and DHCs will provide rehabilitation and follow-up services for referred patients with stroke, hip fracture or post-acute myocardial infarction. The accumulative service attendance of the community rehabilitation programme was around 34 000 as at March 31 this year. In 2023/24, DHCs have arranged more than 210 vaccination sessions, and will persist in their efforts in promoting influenza vaccination. In addition, the Strategic Purchasing Office will also procure nursing and allied health services from the private healthcare sector to support DHCs' function of serving as a community primary healthcare hub in various service areas.

Besides, strengthening community ties is also a highlight of DHCs. DHCs in various districts have established regular co-operation with nearly 1 000 community organisations. The Government also held briefing sessions in April this year to introduce primary healthcare services to about 200 District Council members and will work with community service partners and organisations, including District Services and Community Care Teams, to jointly promote primary healthcare. Furthermore, DHCs have started collaborating with the operators of transitional housing and will visit 35 transitional housing projects this year to provide residents with health risk assessments and health education activities, etc.

The third aspect is about promoting the concept of people-centered disease prevention. DHCs provide whole-person primary healthcare services and attend to individuals' health needs at different stages of lives, as well as to provide comprehensive guidance on disease prevention and health advice having regard to ones' needs at their different stages of lives based on the Hong Kong Reference Framework for Life Course Preventive Care in Primary Healthcare. DHCs will further enhance the depth and breadth of services. To tackle the pattern that male adults are less likely to take the initiative to participate in preventive primary healthcare services, such as the CDCC Pilot Scheme, DHCs will proactively reach out to more male groups by actively cooperating with different sectors to promote related services. We will also gradually integrate the primary healthcare services under the Department of Health, including Woman Health Centres and Elderly Health Centres, into DHCs.

We will continue to review and respond to the needs of the community and strengthen the services of DHCs, so as to optimise the community healthcare system.

Thank you, President.

Note: Prediabetes with glycated haemoglobin level of 6.0 to 6.4 per cent or fasting plasma glucose level of 6.1 to 6.9 mmol/L