

LCQ22: Primary healthcare services

Following is a question by the Hon Holden Chow and a written reply by the Secretary for Food and Health, Professor Sophia Chan, in the Legislative Council today (December 16):

Question:

To shift the emphasis of the present healthcare system and people's mindset from treatment-oriented to prevention-focused, the Government plans to set up full-fledged District Health Centres (DHCs) or interim DHC Expresses of a smaller scale in all of the 18 districts across the territory, with a view to strengthening district-based primary healthcare services, as well as encouraging the public to maintain a healthy lifestyle and enhancing their capability in self-care and home care, thereby reducing the need for specialist services and hospitalisation. In this connection, will the Government inform this Council:

(1) of the respective numbers of members of Kwai Tsing DHC who have been provided with (i) basic health risk assessment and (ii) screening services for diabetes mellitus and hypertension, together with the number of patients with diabetes mellitus or hypertension who have been covered by the Chronic Disease Management Programme, since the DHC commenced operation in September last year;

(2) of the respective current numbers of persons suffering from post-acute myocardial infarction, stroke and hip fracture who are receiving community rehabilitation services provided by Kwai Tsing DHC;

(3) given that the Government plans to set up, within its current term, DHCs in seven districts (namely Kwai Tsing, Sham Shui Po, Wong Tai Sin, Tsuen Wan, Yuen Long, Tuen Mun and Southern District) and DHC Expresses in 11 districts, of the progress and other details of the work of setting up these facilities (including site selection), as well as the specific dates on which these facilities will be set up; and

(4) whether it will consider expanding the scope of the disease screening services of DHCs to cover cervical cancer, breast cancer and colorectal cancer?

Reply:

President,

My reply to the various parts of the question raised by the Hon Holden Chow is as follows:

(1) and (2) 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 establishment of DHCs is a key step in a bid to shift the emphasis of the present healthcare system and

people's mindset from treatment-oriented to prevention-focused.

DHC services focus on primary, secondary and tertiary prevention. DHC members identified as high-risk individuals through basic health risk assessments will be arranged to attend health risk management activities by care co-ordinators according to their assessment results and needs. Patients diagnosed with hypertension, diabetes mellitus or musculoskeletal disorder (including osteoarthritic knee pain and low back pain) may join the DHC Chronic Disease Management Programme developed by the Government based on reference clinical protocols. Meanwhile, the Community Rehabilitation Programme under the DHC also provides support to patients who are referred by the Hospital Authority with history of stroke, hip fracture and/or myocardial infarction and have already completed their rehabilitation programmes at hospitals, whilst still in need of continuous care and rehabilitation in the community.

The first DHC in Kwai Tsing District commenced operation in September 2019. As at September 30, 2020, the Kwai Tsing DHC has 7 214 registered members. The attendances at relevant services/activities provided by the Kwai Tsing DHC are detailed below:

Health Risk Assessment and Screening	Attendance
Basic health risk assessment	6 586
Screening for diabetes mellitus/hypertension by network doctors	949

Chronic Disease Management Programme	Number of Cases
Diagnosed with diabetes mellitus/hypertension by network doctors	16
Joined the Chronic Disease Management Programme for patients diagnosed with diabetes mellitus/hypertension	16

Community Rehabilitation Programme	Attendance
Post-myocardial infarction	177
Hip fracture	77
Stroke	32

(3) Following the service commencement of the first DHC in the Kwai Tsing District in September 2019, the Government has plans to set up DHCs in six districts within the term of current Government in a bid to enhance district based primary healthcare services. In September this year, the Government entered into service contracts with operators of the Sham Shui Po (SSP) and Wong Tai Sin (WTS) DHCs, with commissioning dates scheduled in June 2021 and

June 2022 respectively. The core centre of the SSP DHC will be located on the second floor of the retail facilities in Shek Kip Mei Estate Redevelopment Phase 6, and that of the WTS DHC at the Diamond Hill Public Housing Estates Phase 1 (Public Housing Development).

The other four DHCs will be set up in Southern District, Tsuen Wan, Tuen Mun and Yuen Long. The Government is actively identifying suitable rental premises for their core centres with a view to commissioning by the end of June 2022.

At the same time, with a view to commencing DHC Express services in 2021, we have just completed the invitation of proposals for providing DHC Express services in 11 districts which are currently under assessment. It is our target to set up DHCs or DHC Expresses in various scales in all 18 districts within the current-term Government with a view to establish a prevention-focused primary healthcare system in the long run.

(4) Currently, the Government has implemented cervical cancer and colorectal cancer screening programmes. In 2004, the Department of Health (DH) launched the Cervical Screening Programme to encourage women to have regular screening so as to reduce the incidence and mortality rates of cervical cancer. Launched in September 2016, the Colorectal Cancer Screening Programme subsidises asymptomatic Hong Kong residents to undergo screening in three phases. The first and second phases cover persons aged 61 to 75 and those aged 56 to 75 respectively. The third phase, commenced in January 2020, has further extended the coverage to those aged 50 to 75. Faecal immunochemical test screening is arranged for participants by enrolled primary care doctors.

Separately, based on the latest recommendations of the Cancer Expert Working Group on Cancer Prevention and Screening of the Cancer Coordinating Committee on breast cancer screening, the Government will adopt a risk-based approach for breast cancer screening. The DH will provide breast cancer screening service for eligible women having regard to their risk of developing breast cancer.

DHC has been actively complementing the cancer screening programmes implemented by the Government. DHC provides basic health risk assessment for the members of the public which includes identification of risk factors associated with cancers. For members of the public who are eligible for participating the territory-wide cervical cancer and colorectal cancer screening programmes, DHC will provide professional advice, co-ordination and referral to doctors enrolled under respective screening programmes for screening and enable them to receive early necessary treatment. In addition, DHC conducts health promotion on preventing risk factors associated with cancers, which includes unhealthy diet, inadequate exercise, alcohol consumption and smoking behaviour, etc. For persons identified with these risk factors, DHC also provides health programmes to help them mitigate these risky behaviours in order to stay healthy and lower their risk of cancer.