

## LCQ8: Prevention and treatment of cancers

Following is a question by the Hon Kwong Chun-yu and a written reply by the Secretary for Food and Health, Professor Sophia Chan, in the Legislative Council today (July 4):

Question:

In 2014, more than 29 000 new cancer cases were recorded in Hong Kong, representing an increase of 32 per cent as compared with the figure of a decade earlier. The incidence rate of cancers among elderly persons (i.e. persons aged 65 or above) more than doubled that among non-elderly persons. In addition, one of every three deaths was due to cancers. Regarding the prevention and treatment of cancers, will the Government inform this Council:

(1) whether it knows the number of colonoscopy examinations conducted in public hospitals, and the average waiting time (and the relevant figures by hospital cluster) for such examinations, in each of the past three years; if such figures are not available, of the reasons for that;

(2) as an overseas medical organisation, after analysing the outcome of relevant studies, has recently pointed out that there is a downward trend in the age of people suffering from colorectal cancer, and the organisation has recommended that the minimum age of people who should receive colorectal cancer screening be lowered to 45, whether the Government will lower the minimum age of eligible participants of the Colorectal Cancer Screening Pilot Programme from 61 to 45;

(3) whether it has considered launching new subsidy schemes for preventing or diagnosing other types of cancers; if so, of the details;

(4) whether it knows, in respect of the waiting time for patients with cancers listed in the table below in each hospital cluster for receiving the first treatment after diagnosis, (i) the median and (ii) the 90th percentile, as well as (iii) the target set by the Hospital Authority (HA) (set out in tables of the same format as the table below); and

Cluster: \_\_\_\_\_

| Cancer            | Waiting time for receiving the first treatment after diagnosis |      |       |
|-------------------|----------------------------------------------------------------|------|-------|
|                   | (i)                                                            | (ii) | (iii) |
| Colorectal cancer |                                                                |      |       |
| Lung cancer       |                                                                |      |       |
| Breast cancer     |                                                                |      |       |
| Liver cancer      |                                                                |      |       |

|                             |  |  |  |
|-----------------------------|--|--|--|
| Prostate cancer             |  |  |  |
| Corpus uteri cancer         |  |  |  |
| Nasopharyngeal cancer       |  |  |  |
| Thyroid cancer              |  |  |  |
| Stomach cancer              |  |  |  |
| Non-Hodgkin lymphoma cancer |  |  |  |

(5) given that when cancer patients cannot take, owing to undesirable side effects, the first-line drugs in the Hospital Authority Drug Formulary and the second-line drugs with safety net coverage (by the Samaritan Fund or Community Care Fund) for cancer treatment, they have to take drugs without safety net coverage at their own expenses, whether the Government will request HA to expeditiously include more second-line drugs (including T-DM1 for treating breast cancer) into the safety net so that cancer patients can receive effective treatment; if so, of the details; if not, the reasons for that?

Reply:

President,

My reply to the various parts of the Hon Kwong Chun-yu's question is as follows:

(1) The Hospital Authority (HA) does not keep statistics on the waiting time for colonoscopy examination in public hospitals in the past three years. The table below sets out the number of colonoscopy examinations conducted in HA clusters in each of the past three years:

| Cluster              | 2015-16 | 2016-17 | 2017-18 |
|----------------------|---------|---------|---------|
| Hong Kong East       | 5 621   | 6 241   | 5 997   |
| Hong Kong West       | 5 058   | 5 306   | 5 067   |
| Kowloon Central*     | 5 335   | 5 369   | 9 044   |
| Kowloon East         | 6 492   | 7 458   | 7 594   |
| Kowloon West*        | 9 623   | 11 870  | 8 328   |
| New Territories East | 10 744  | 11 727  | 11 948  |
| New Territories West | 6 441   | 7 176   | 7 337   |
| Total                | 49 314  | 55 147  | 55 315  |

Note 1:

\* Kwong Wah Hospital, Our Lady of Maryknoll Hospital, Tung Wah Group of Hospitals Wong Tai Sin Hospital and the service units in the districts concerned have been re-delineated from Kowloon West Cluster to Kowloon Central Cluster since December 1, 2016. Reports on services/manpower statistics and financial information for the whole 2016-17 financial year (as

at March 31, 2017) continued to be based on the previous clustering arrangement (i.e. relevant service units still under Kowloon West Cluster). Reports in accordance with the new clustering arrangement started from April 1, 2017. As such, statistics and financial information could not be directly compared with those for previous years.

(2) The Cancer Expert Working Group on Cancer Prevention and Screening (CEWG) was set up under the Government's Cancer Coordinating Committee to regularly review and discuss the latest scientific evidence, local and worldwide, with a view to making recommendations on suitable cancer prevention and screening for the local population.

In response to the increasing healthcare burden arising from colorectal cancer, the Government launched the Colorectal Cancer Screening Pilot Programme (the Pilot Programme) in September 2016 to subsidise colorectal cancer screening for individuals with "average risk" (Note 2) targeted by the CEWG. The Government will regularise the Pilot Programme and progressively extend it in phases from the current group of persons born in the years from 1946 to 1955 (i.e. persons aged between 61 and 70 when the Pilot Programme was launched in 2016) to cover individuals aged between 50 and 75. The Department of Health (DH) is carrying out the related preparatory work and will announce the details in due course. The CEWG will continue to review local and worldwide scientific evidence, including the latest data and scientific evidence, and will revise or update the recommendations on cancer prevention and screening when necessary.

Note 2: Persons with "average risk" refer to individuals aged 50 to 75 who do not have significant family history. The CEWG recommends that they should consult their doctors and consider to undergo colorectal cancer screening.

(3) In examining whether to introduce a population-based screening programme for a specific disease or cancer, the Government needs to make reference to the CEWG's recommendations and carefully consider a number of factors, including the seriousness and prevalence of the disease locally, accuracy and safety of the screening tests for the local population, as well as effectiveness in reducing disease incidence and mortality. The Government also needs to give due consideration to the actual circumstances, such as the feasibility, equity, cost-effectiveness of the screening programme and public acceptance.

Based on the above principles, apart from the Pilot Programme mentioned in part (2), we are also implementing a screening programme for cervical cancer. The DH, in collaboration with the healthcare sector, launched a territory-wide Cervical Screening Programme in 2004 to encourage women to undergo regular cervical cancer screening. To further help low-income women receive cervical cancer screening, a three-year Community Care Fund Pilot Scheme on Subsidised Cervical Cancer Screening and Preventive Education for Eligible Low-income Women was launched in December 2017, under which three service providers, namely the Centre of Research and Promotion of Women's Health of the Chinese University of Hong Kong, the Family Planning Association of Hong Kong and the United Christian Nethersole Community Health Service, reach out into the community to encourage low-income women to

receive free or subsidised cervical cancer screening as well as provide them with health education on prevention of cervical cancer.

In view of the increasing demand on staging imaging for confirmed cancer cases, the HA has implemented since May 2012 the "Project on Enhancing Radiological Investigation Services through Collaboration with the Private Sector" to provide computed tomography and magnetic resonance imaging examinations for selected cancer patients fulfilling pre-defined clinical criteria. The target patient groups of the project have been expanded over the past years to benefit patients of more cancer types. The project currently covers 11 types of cancers, namely colorectal cancer, breast cancer, nasopharyngeal cancer, lymphoma, prostate cancer, stomach cancer, corpus uteri cancer, cervix cancer, head and neck cancer, sarcoma and germ cell tumour.

In fact, risk factors for cancers are closely related to lifestyles. Thus, the DH has been actively promoting healthy diet and regular exercise, and making great efforts to control smoking and educate the public about the harms of alcohol as the primary preventive strategies in reducing the burden caused by non-communicable disease such as cancer on the healthcare system and society. The Government will continue to promote health for all and prevention of diseases, and provide specific health promotion and disease prevention services having regard to the health needs and risks of various age groups and gender.

(4) The HA attaches great importance to the provision of appropriate care for cancer patients, and reviews on a regular basis the waiting time for patients with colorectal cancer, breast cancer and nasopharyngeal cancer to receive their first treatment after diagnosis. The table below sets out the 90th percentile waiting time (Note 3) for such patients to receive their first treatment after diagnosis in the period from 2014-15 to 2016-17:

|                       | 2014-15<br>(No. of days) | 2015-16<br>(No. of days) | 2016-17<br>(No. of days) |
|-----------------------|--------------------------|--------------------------|--------------------------|
| Colorectal cancer     | 71                       | 70                       | 78                       |
| Breast cancer         | 58                       | 63                       | 66                       |
| Nasopharyngeal cancer | 50                       | 50                       | 54                       |

Note 3: The 90th percentile waiting time refers to the number of days between the date when a patient is diagnosed with cancer after pathological examination and the date when the patient receives his/her first treatment. The waiting time of 90 per cent of such cases is shorter than the value indicated.

As for patients with other types of cancer, the HA does not have relevant statistics on the waiting time for their first treatment.

(5) As the major provider of publicly-funded public healthcare services in Hong Kong, the HA attaches great importance to the provision of appropriate

care for all patients, while ensuring an equitable access to and effective use of public resources in the public interest. The HA has an established mechanism to regularly evaluate new drugs and review its Drug Formulary (HADF). In the evaluation process, the HA follows such core values as evidence-based medical practice, rational use of public resources, targeted subsidy, opportunity cost and facilitation of patients' choice, and takes into account the safety, efficacy and cost-effectiveness of drugs and other relevant factors, including international recommendations and practices, advance in technology, disease state, patient compliance, quality of life, actual experience in the use of drugs, and the views of professionals and patient groups.

The Government and the HA understand the financial pressure and burden on cancer patients, as well as the latter's strong aspiration for listing certain new drugs on the HADF and including self-financed items (SFIs) in the subsidy scope of the safety net. Since 2018, the HA has increased the frequency of the prioritisation exercise for including SFIs in the safety net from once to twice a year, so as to shorten the lead time for introducing suitable new drugs to the safety net. The HA will keep abreast of the latest development of clinical treatment and scientific evidence, listen to the views and suggestions of patient groups, and continue to include suitable drugs in the safety net under the established mechanism to benefit more patients in need.

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## **LCQ 9: Change of use of non-domestic units in housing estates under subsidised sales schemes**

Following is a question by Hon Lau Kwok-fan and a written reply by the Secretary for Transport and Housing, Mr Frank Chan Fan, in the Legislative Council today (July 4):

Question:

It has been reported that nine units in Yung Shing Court (YSC) in Fanling, a Buy-or-Rent Option (BRO) estate, originally used as a children hostel, have been left vacant since the social welfare organisation (SWO) concerned moved out in 2006. The Housing Department (HD) intends to change the use of those units as rental housing units. However, the Lands Department has indicated that the owners' corporation of YSC must obtain the consent of all owners before the use of such units may be changed. As it is difficult to get in touch with some of the owners, the matter has been caught in a gridlock, resulting in a waste of housing resources. In this connection, will the Government inform this Council:

(1) of the current total number of subsidised housing units which have been left vacant for more than one year and the average duration for which they have been left vacant, with a breakdown of such units by the vacant period (i.e. more than one year to three years, more than three years to five years, and more than five years); among such units, the number of those which have been left vacant since the moving out of SWOs;

(2) of the required procedure for changing the use of the aforesaid units;

(3) whether the Government has specific solutions to the problem that some units in YSC and other housing estates (if any) have been left vacant for prolonged periods of time; if so, of the details; if not, the reasons for that and whether it will devise such solutions expeditiously; and

(4) whether HD had, before deciding to put a particular public rental housing estate into a subsidised home ownership scheme (e.g. BRO), taken into account the possibility that there might be a need in future to change the uses of certain units in that estate; if so, of the reasons for the occurrence of the situation that some units have been left vacant for prolonged periods of time; if not, whether it will conduct a review and streamline the arrangements for effecting a change in the uses of units, in order to avoid the occurrence of similar situations?

Reply

President,

My consolidated reply to various parts of the question raised by the Hon Lau Kwok-fan is as follows:

In planning for new public housing projects, the Hong Kong Housing Authority (HA) will take into account the relevant Government policies and planning requirements in deciding the provision of various facilities including social welfare premises. During this process, HA will also consider the scales of the projects under planning, the vicinity environment as well as the views of the relevant departments and organisations. Under the prevailing practice, HA will lease social welfare premises to eligible non-government organisations (NGO)s (footnote 1) providing direct services to estate residents at concessionary rent on the recommendation of the Social Welfare Department (SWD).

HA also reviews the usage of non-domestic properties in public housing developments from time to time. Depending on the actual circumstances of individual cases, such as changes in residents' needs, community development, etc., the usage of these facilities may vary. Some organisations may move out due to various reasons. HA will consult SWD as to whether they will reserve the units concerned and nominate NGOs to provide other suitable welfare services. If SWD considers it not necessary to reserve the units for other welfare services, HA will upload information about such units onto HA's website to invite applications from other interested NGOs to provide

services. HA will also share the list with SWD on a regular basis. As mentioned above, HA will, upon the recommendation of the relevant Government departments, lease the social welfare premises to approved NGOs at concessionary rent.

Some of the above-mentioned leasing applications may involve changes of the use of the premises. The required procedures vary for individual cases and depend on the circumstances of the premises concerned. If the premises concerned are held under Government leases, modification of the development conditions in the leases may be required. HA will conduct feasibility studies according to needs of leasing applications.

Regarding the situation in Yung Shing Court, under the relevant conditions in the Government lease, HA is required to provide designated social welfare/educational facilities (including small group home) in the Court. Due to constraints of the actual circumstances, e.g. no separate entrance leading to the external area of the building, the premises being scattered on different floors, headroom of the units not fulfilling the prevailing requirements for small group home and the need for sharing lifts and lobby with the domestic portion, other community and social welfare organisations may have certain concerns when applying to lease this premises. HA has previously considered changing the uses of these units, including public rental housing units, and will continue to review all possible options with relevant departments, such as the Lands Department, SWD, etc., in a proactive manner in order to identify other suitable uses for the relevant units with a view to optimising the use of resources.

As at the end of May 2018, there are six social welfare premises under HA with vacant units. Units in one of these premises has been vacant for less than three years and the signing of tenancy agreement with the relevant organisation is being prepared. Other premises, including the welfare services units in Yung Shing Court, have been vacant for more than five years. HA is either preparing to sign tenancy agreements with the relevant organisations or conducting feasibility studies and consultations with residents for these units.

Footnote 1: Including charitable or non-profit making organisations exempted from tax under section 88 of the Inland Revenue Ordinance.

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## **LCQ3: Use of site reserved for phase two development of Hong Kong Disneyland**

Following is a question by the Hon Andrew Wan and a reply by the Acting

Secretary for Commerce and Economic Development, Dr Bernard Chan, in the Legislative Council today (July 4):

Question:

Some members of the public have suggested the development of transitional housing using a 60-hectare site which has been reserved for the second phase development of Hong Kong Disneyland (Phase 2 site), in order to improve the living environment of more than 200 000 residents in sub-divisions of flat units (commonly known as "sub-divided units"). On the other hand, a Hong Kong-based event organiser signed co-operation agreements with a Dutch floriculture expert last month on the development of a flower-themed garden in Hong Kong, and is considering locating the garden at the Phase 2 site. In this connection, will the Government inform this Council:

(1) of the criteria adopted for vetting and approval of applications for short-term tenancies for the Phase 2 site; whether it has received or approved the application concerning the flower-themed garden;

(2) whether the Government conducted, in the past three years, any study on the construction of transitional housing at the Phase 2 site; if so, of the details and the outcome; if not, the reasons for that; and

(3) given that due to the restrictions imposed by the Deed of Restrictive Covenant signed between the Government and the Hongkong International Theme Parks Limited (HKITP), the permitted land uses of the Phase 2 site do not include residential use, whether the Government will discuss with HKITP amending the Deed to the effect that the provision of transitional housing such as modular housing is a permitted land use of the site; if so, of the details and the expected completion time for the discussion; if not, the reasons for that?

Reply:

President,

In 1999, the Government and the Walt Disney Company (TWDC) reached an agreement to develop the Phase 1 of Hong Kong Disneyland Resort (HKDL) at a reclaimed site of about 126 hectares at Penny's Bay, Lantau Island. Since its opening in September 2005, HKDL has been in operation for nearly 13 years. It is a major component of the tourism infrastructure in Hong Kong and one of the most popular tourist attractions for both local and non-local visitors. It also helps consolidate our position as an international premier tourist destination.

In its first 12 years of operation, HKDL received over 70 million guests. Their additional spending in Hong Kong was around \$166.2 billion, which generated total value-added of \$90.9 billion for Hong Kong's economy, equivalent to 0.35 per cent of Hong Kong's gross domestic product. HKDL also created a total of 232 500 jobs for Hong Kong's economy over the same period, providing considerable job opportunities for frontline workers and the Hong



Kong's tourism industry.

Over the years, HKDL has been strengthening its appeal to visitors through sustained efforts to enrich its attractions and entertainment offerings. Apart from the new ride Iron Man Experience and the new hotel Disney Explorers Lodge launched last year, HKDL has been actively taking forward its expansion and development plan since the second half of last year and various newly built attractions are being launched progressively from this year to 2023.

When the development of HKDL was finalised in 1999, the Government, considering HKDL's further expansion and development in future, agreed to reserve a reclaimed site of around 60 hectares to the east of HKDL for its possible Phase 2 development (the Phase 2 site). The Government understands the concerns of this Council and the general public about better utilisation of land, and thus considers from time to time whether the Phase 2 site can be put to compatible use(s). In fact, the Phase 2 site was used for hosting some short-term activities in the past, such as sports activities and group events.

Last month, there was an announcement in the Netherlands about the plan to develop an European design flower-themed garden in Hong Kong, and that the organisers concerned are considering locating the garden at the Phase 2 site. The Government welcomes this proposal which, if materialised, would not only bring a new attraction for enjoyment by our local community, but would also enrich our tourism offerings, and thereby further enhancing Hong Kong's position as an international premier tourist destination.

My reply to the three parts of the question is as follows:

(1) According to the Option Deed signed in 2000 between the Government and the Hongkong International Theme Parks Limited (i.e. the joint venture with the Government and TWDC as shareholders, "the joint venture"), the joint venture has an Option to purchase the Phase 2 site for taking forward HKDL's further development.

Before the joint venture exercises the Option for the Phase 2 site, the site can be put to short-term uses that comply with the permitted uses as listed in the Deed of Restrictive Covenant (DRC), including recreational, sports and cultural facilities, etc. When considering these short-term uses, we also need to take into account whether such uses are compatible with the use and atmosphere of HKDL.

As at end-June this year, the Government has not yet received any short-term tenancy application from the organisers of the flower-themed garden for developing the garden at the Phase 2 site.

(2) & (3) As mentioned in my reply to part (1) above, before the joint venture exercises the Option for the Phase 2 site, the short-term uses of the site have to comply with various permitted uses as listed in the DRC, including recreational, sports and cultural facilities, etc, but not

residential use (e.g. development of transitional housing). Considering the Option Deed signed in 2000, the Government agrees to reserve the Phase 2 site for HKDL's possible Phase 2 development. We have no intention to change the existing land use arrangements.

In the light of the proposed short-term uses of the Phase 2 site recently received, we will continue to follow up with the relevant parties and make announcement at an appropriate juncture, with a view to further exploiting the recreation, tourism and entertainment positioning in the vicinity of HKDL. This would be conducive to HKDL's on-going development, the Hong Kong's tourism industry as well as the overall economy.

Thank you, President.

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## Special traffic arrangements for race meeting in Happy Valley

Special traffic arrangements will be implemented in Happy Valley today (July 4). The arrangements will come into effect one and a half hours before the start of the first race and will last until the crowds have dispersed after the race meeting.

### A. Traffic arrangements before the commencement of the first race

#### 1. Road closure

Southbound Wong Nai Chung Road between Queen's Road East and the up-ramp outside Hong Kong Jockey Club (HKJC) will be closed except for vehicles heading for Aberdeen Tunnel.

#### 2. Traffic diversions

- Southbound Wong Nai Chung Road between Village Road and the up-ramp outside HKJC will be re-routed one way northbound;
- Vehicles from eastbound Queen's Road East heading for Wan Chai and Happy Valley will be diverted to turn left to Morrison Hill Road;
- Traffic along southbound Morrison Hill Road heading for Happy Valley will be diverted via Sports Road and Wong Nai Chung Road;
- Traffic along Queen's Road East cannot turn right to Wong Nai Chung Road except for vehicles heading to Aberdeen Tunnel;
- Traffic from Cross Harbour Tunnel heading for Queen's Road East will be diverted via the down-ramp leading from southbound Canal Road flyover to Morrison Hill Road to turn right at the junction of Wong Nai Chung Road and Queen's Road East; and
- Traffic from Cross Harbour Tunnel heading for Happy Valley or Racecourse will be diverted via the down-ramp leading from southbound Canal Road flyover

to Canal Road East, southbound Morrison Hill Road, Sports Road and Wong Nai Chung Road.

## B. Traffic arrangements during the race meeting

### 1. Road closure

The following roads will be closed from 35 minutes before the start of the last race:

- The up-ramp on Wong Nai Chung Road outside HKJC leading to Aberdeen Tunnel;
- Southbound Wong Nai Chung Road between Queen's Road East and the up-ramp leading to Aberdeen Tunnel;
- Southbound Wong Nai Chung Road between Village Road and the Public Stands of HKJC;
- Westbound Leighton Road between Wong Nai Chung Road and Canal Road East; and
- Southbound Morrison Hill Road between Leighton Road and Queen's Road East.

In addition, southbound Wong Nai Chung Road between the up-ramp leading to Aberdeen Tunnel and the Public Stands of HKJC will be closed from about 10 minutes before the start of the last race.

### 2. Traffic diversions

The following traffic arrangements will be implemented from 35 minutes before the start of the last race:

- Eastbound Queen's Road East at its junction with Morrison Hill Road will be reduced to one-lane traffic heading for northbound Canal Road flyover;
- Vehicles from Cross Harbour Tunnel heading for Wan Chai will be diverted via the down-ramp leading from Canal Road East, U-turn slip road beneath Canal Road flyover, Canal Road West and Hennessy Road;
- Vehicles from Cross Harbour Tunnel heading for Happy Valley will be diverted via the down-ramp leading from Canal Road East, eastbound Leighton Road and Wong Nai Chung Road;
- Traffic on southbound Morrison Hill Road will be diverted to turn left to eastbound Leighton Road;
- Traffic along southbound Morrison Hill Road heading for Happy Valley will be diverted via eastbound Leighton Road and Wong Nai Chung Road; and
- Traffic along westbound Leighton Road will be diverted to Wong Nai Chung Road.

## C. Learner drivers prohibition

Learner drivers will be prohibited to turn left from Caroline Hill Road to Leighton Road between one and a half hours before the start of the first race and one hour after the last race. In addition, learner drivers will be prohibited from accessing the following roads within the above period of time:

- Shan Kwong Road between Yik Yam Street and Wong Nai Chung Road;
- Village Road between its upper and lower junctions with Shan Kwong Road;

- Percival Street between Hennessy Road and Leighton Road;
- Canal Road East; and
- The service road leading from Gloucester Road to Canal Road flyover.

#### D. Suspension of parking spaces

Parking spaces on southbound Wong Nai Chung Road between Sports Road and Blue Pool Road will be suspended from 11am to 7pm during day racing, from 4.30pm to 11.59pm during evening racing, and from 5pm to 11.59pm during night racing.

Any vehicles found illegally parked within the precincts of the above affected areas will be towed away without prior notice.

Actual implementation of road closure and traffic diversion will be made by the Police at the time depending on traffic conditions in the areas. Motorists should exercise tolerance and patience, and follow the instructions of Police on site.

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## [SLW visits employment and elderly care services in Dublin \(with photos\)](#)

The Secretary for Labour and Welfare, Dr Law Chi-kwong, who is conducting a six-day visit to Ireland, toured employment services and dementia care facilities in Dublin on July 3 (Dublin time) with his delegation.

Dr Law and the Director of Social Welfare, Ms Carol Yip, first met with the Minister for Employment Affairs and Social Protection of Ireland, Ms Regina Doherty, and discussed the employment policies and social welfare systems of both places.

They exchanged views on retirement protection policies in an ageing society. Dr Law was briefed on the development of a defined contribution system to make the retirement protection system more sustainable. Issues related to challenges in labour supply and demand caused by ageing population and technology, particularly artificial intelligence, were also discussed. The Irish government officials shared their experience on the extension of the retirement age, which is currently 66, and will be gradually increased to 68 by 2028. They noted that the average life expectancy in Ireland is about 81.5, slightly lower than that in Hong Kong, which is about 84. The provision of support for people with disabilities in employment was also discussed.

Dr Law and Ms Yip then visited the Alzheimer Society of Ireland along with representatives of the Hong Kong Council of Social Service. The society

works with day care centres, home care services, carer support groups and respite centres to provide dementia-specific care for elderly persons with dementia and support for their families. They also toured facilities in an elderly centre for dementia patients.

Earlier, Dr Law also called on the Chargé d'Affaires of the Embassy of the People's Republic of China in Ireland, Ms Yang Hua, on July 2 (Dublin time) to update her on recent developments in Hong Kong.

He will attend the Joint World Conference on Social Work, Education and Social Development 2018 later today (July 4, Dublin time).

