

LCQ8: Dental care services for elderly

Following is a question by the Hon Joephy Chan and a written reply by the Acting Secretary for Health, Dr Libby Lee, in the Legislative Council today (May 21):

Question:

In recent years, I have received from time to time requests for assistance regarding the failure of effective interface and co-ordination among different dental support services for the elderly, including cases where some elderly persons, after participating in the Outreach Dental Care Programme for the Elderly (Outreach Programme) under the Department of Health (DH) and receiving free oral check-up, were not being treated on site and only referred to other services due to the nature of their dental problems; but when they subsequently applied for the Elderly Dental Assistance Programme of the Community Care Fund (CCF Programme) for treatments such as the fitting of dentures, they were rejected due to a restriction in the eligibility criteria (i.e. applicants should not have benefited from the Outreach Programme), thus leaving them in the predicament of "no treatment after check-ups". In this connection, will the Government inform this Council:

(1) as there are views that the current situation where elderly persons who have participated in the Outreach Programme but not being treated on site were unable to apply for the CCF Programme has prejudiced their rights and interests, and the gradual enhancement of services provided under the CCF Programme last year has yet to deal with the aforesaid situation, whether the Government will introduce further enhancement measures to put in place a relevant waiver mechanism and approve applications of special cases in the light of the actual situation; if so, of the details; if not, the reasons for that;

(2) of the existing monitoring mechanism for the Outreach Programme, including how the Government ensures that the service quality and follow-up workflow can effectively respond to the actual needs of elderly persons, and whether it has inspected the service records of the outreach teams on a regular basis (e.g. the interface and follow-up of referrals after door-to-door inspection, the level of satisfaction and rate of complaint);

(3) whether at present, elderly persons will be clearly informed by the relevant government departments that they will not be able to apply for CCF when they participate in the Outreach Programme and be required to sign a written statement to confirm their acknowledgement; if not, whether additional measures will be put in place to ensure that elderly persons participating in the Outreach Programme are well-informed, so as to avoid misunderstanding;

(4) whether, in the long run, the Government will promote cross-departmental collaboration among the DH, Social Welfare Department and CCF, so as to

consolidate resources for outreach check-ups and subsidised treatments, e.g. establishing one-stop services from check-up, referral to treatment, so as to achieve seamless interface and avoid repetitive examination, thereby enhancing policy efficiency and users' experience; and

(5) as some elderly persons have relayed that while the Government had emphasised the wider scope of treatments under the Outreach Programme than the CCF Programme, the treatment resources under the Outreach Programme might not be able to meet the demand for on-site treatment in a timely manner, whether the Government will allocate resources to expand the scope of treatment services provided by the outreach teams and provide additional on-site treatment items?

Reply:

President,

In response to the Hon Joephy Chan's question, the Bureau's consolidated reply is as follows:

Elderly persons residing in residential care homes for the elderly (RCHes) or receiving services at day care centres for the elderly (DEs) are generally frail or have cognitive deficiencies and therefore have difficulties in accessing conventional dental care services. The Government implemented a three-year pilot project in 2011 to provide free outreach dental services to these elderly persons. The pilot project was regularised in 2014 and named the Outreach Dental Care Programme for the Elderly (ODCP). The ODCP provides free annual oral care services for elderly persons of RCHes, DEs and similar facilities in the 18 districts of Hong Kong through outreach dental teams set up by non-governmental organisations (NGOs) engaged by the Department of Health (DH). It must be pointed out that these services are not limited to oral check-ups but its scope includes the following examinations and treatment services:

(1) oral check-ups;

(2) scaling, personalised oral care plans for the elderly persons and provision of medication for dental pain relief (if necessary);

(3) free and comprehensive dental treatments will be provided to the elderly persons on-site at RCHes/DEs if further curative treatments are necessary. The treatments include tooth fillings, tooth extractions, X-ray examinations, denture, removal of dental bridges or crowns, root canal treatment, and the provision of dental bridges or crowns;

(4) if further curative treatments cannot be provided on-site at the RCHes/DEs due to practical constraints (such as limitations in venue space of the RCHes or DEs, or unable to meet infection control requirements), the outreach dental team will arrange the elderly persons to receive the required treatment at NGOs' dental clinics; and

(5) provision of oral care training to caregivers of RCHes/DEs, and promotion of the oral hygiene information to the elderly persons, their family members

and caregivers.

Besides, for treatments that could not be carried out on-site, the Government will subsidise the NGOs to provide transport and escort services to facilitate the elderly persons to receive treatments at NGOs' dental clinics. In case the oral health conditions of an elderly person change and require further dental treatments after oral check-up, arrangements can be made with the respective NGO through liaison by RCHE/DE.

Regarding the monitoring of the ODCP, the DH reviews the implementation and effectiveness of the ODCP through surveys, which include verification of eligibility of service users, satisfaction level of services provided by the NGOs, and suggestions on improvements of the ODCP services. The results of the past interview surveys indicated that the RCHEs/DEs interviewed are satisfied with the ODCP. In addition, the DH also arranges on-site inspections by professionals (including dentists) and examines the oral conditions of elderly persons randomly selected to ensure that the services provided by the NGOs meet the standard.

The Government has increased the resources and been promoting and encouraging RCHEs/DEs to participate in the ODCP. In 2024-25 service year, nearly 90 per cent of RCHEs/DEs participated in the ODCP. From 2024-25, the number of NGOs participating in the ODCP has increased to 11 and a total of 25 outreach dental teams have been set up, and over 50 000 elderly persons residing in RCHEs or receiving services at DEs received the aforementioned dental care services within the year.

The ODCP and the Elderly Dental Assistance Programme (EDAP) funded by the Community Care Fund (CCF) are two completely different programmes designed for different target groups. The ODCP is a programme designed to provide comprehensive examination and treatment services to frail elderly persons residing in RCHEs or receiving services at DEs who have difficulty in accessing conventional dental care services. The EDAP with funding from the CCF, mainly provided free removable dentures and related dental treatments to low-income elderly persons when launched in 2012. It was subsequently enhanced in the third quarter of 2024 to allow eligible elderly persons to receive dental services stipulated under the EDAP, i.e. dental examinations, scaling and polishing, tooth extractions, tooth fillings, etc, even they are unfit for denture fitting.

The objective of establishing the CCF is to provide assistance in a more focused manner to people facing financial difficulties, in particular those who fall outside the social safety net or those who are unable to benefit from other assistance programmes. In view of the objective of establishing the CCF and along with the principle of effective use of public resources, since the EDAP was launched in 2012, the beneficiaries have all along excluded the elderly persons who have benefited from the ODCP or those currently receiving Comprehensive Social Security Assistance (CSSA) under the Social Welfare Department. These requirements have been clearly stated in the EDAP promotional pamphlets and the application forms.

It must be pointed out that aside from targeting different groups, the

EDAP limits on the number of subsidised services and the services provided are not continuous in nature. Under the EDAP, eligible elderly persons can receive services at a maximum of two times. To receive the service for the second time, the elderly persons must have reached the age of 75 and have not received the dental service under the EDAP within the past five years. In contrast, the ODCP is a regularised programme with a broader treatment scope, which includes all service items under the EDAP, and eligible elderly persons can receive ODCP services annually. As such, elderly persons who received ODCP services will not be referred to the EDAP and the issue of "no treatment after check-up" as raised in the question does not exist.

To safeguard the oral health of the public, the Chief Executive announced in the 2022 Policy Address to conduct a comprehensive review of the dental services provided or subsidised by the Government. The Working Group on Oral Health and Dental Care (Working Group) was set up in end-2022. In response to the final report of the Working Group published in end-2024, the Government has adopted the oral health policies that:

- (1) Oral health is an integral component of general health. The Government's oral health policies aim to enable all Hong Kong citizens to improve their oral hygiene and lifestyles conducive to both oral and overall health levels;
- (2) Through publicity, education, promotion and development of primary oral health and dental care, the Government facilitates all Hong Kong citizens to manage their oral health, and put prevention, early identification and timely intervention of dental diseases into action with the objective of tooth retention; and
- (3) The Government provides appropriate oral health and dental care services targeting underprivileged groups with financial difficulties and special needs, ensuring these groups have access to essential dental care services.

Under the Government's Oral Health Action Plan, the ODCP, the EDAP together with the dental grants under the current CSSA Scheme all play a role in focusing the provision of dental care services to underprivileged groups who have difficulties in accessing dental services. To further strengthen the relevant services, in addition to the continuation of the provision of the free emergency dental treatment to the general public through allocation of a fraction of the existing service capacity of the DH's government dental clinics (generally referred to as General Public sessions), the DH will implement the Community Dental Support Programme on May 26 this year to enhance dental services to the underprivileged groups including the elderly persons with financial hardship, and it will supplant the EDAP within 2026. With the major premise of optimising the use of public resources, the Government will consider various factors in providing dental services to different underprivileged groups as appropriate and to tie in with the oral health policies.