

**For Discussion on
13 May 2022**

Legislative Council Panel on Health Services

**Dental Care Services, Review of Oral Health Goals and
Relevant Staffing Proposal**

PURPOSE

This paper briefs Members on the Government's dental care policy, the provision of dental care services for persons with special dentistry needs and the latest update on the review of the Oral Health Goals of Hong Kong. In addition, Members' views are sought on the proposed creation of a permanent Consultant post as part of the Government's efforts in enhancing special dental services to the community.

DENTAL CARE POLICY

2. Proper oral health habits are key to the effective prevention of dental diseases. In this regard, the Government's policy on dental care seeks to raise public awareness of oral hygiene and oral health and encourage proper oral health habits through promotion and education. In accordance with the prevailing policy, apart from promotion, education, publicity and prevention, the Government has placed its focus on provision of emergency dental services for the public through General Public Sessions and dental care for those people with special needs, especially persons with intellectual disability who have special dentistry needs and the elderly with financial difficulties. In recent years, the Government has launched a series of targeted initiatives to address the needs of the above groups. Moreover, the Oral Health Education Division (OHED) of the Department of Health (DH) has implemented oral health promotion programmes targeted at different age groups and disseminated oral health information through different channels to enhance oral health of the community.

SCHOOL DENTAL CARE SERVICE

3. At present, the OHED administers a "Brighter Smiles for the New Generation" Programme to help children in kindergartens and nurseries establish good tooth-brushing and smart diet habits. Apart from this, "Brighter Smiles Playland" is specifically designed for 4-year-old children to help them learn good oral care habits through interactive games and activities. So far, a total of 839

kindergartens and nurseries have joined the programme. As for primary school students, the DH has introduced similar programmes, namely the “Bright Smiles Mobile Classroom” and “Bright Smiles Campus” Programmes to promote oral health on a school-based and outreaching approach. A total of 119 primary schools have participated in the programmes. The DH will continue to encourage more kindergartens, nurseries and primary schools to actively participate in oral health education activities and programmes organised by the DH.

4. In addition to the above, primary school students in Hong Kong, as well as students aged under 18 years old with intellectual disability and/or physical disability (such as cerebral palsy) studying in special schools, can join the School Dental Care Service (SDCS) of the DH to receive annual check-up at a designated school dental clinic, which covers oral examination, basic restorative and preventive treatment. SDCS also helps educate students on the importance of maintaining good oral hygiene and preventive care at an early stage. In the past three school years, over 94% of primary school students (i.e. more than 330 000 primary school students studying in ordinary or special schools) have participated in the SDCS each year.

5. To sustain the efforts built up in primary schools, the OHED has launched a school-based programme named “Teens Teeth” for secondary schools since 2005. Under this programme, senior secondary students are trained to promote and educate lower-form schoolmates about the importance of oral health care and hygiene on a peer-led approach (i.e. train-the-trainers).

EMERGENCY DENTAL SERVICES

6. Apart from oral health promotion and prevention, the Government also provides emergency dental services for the public and special oral care service for in-patients and patients with special oral health care needs:

- (a) Free emergency dental treatments (generally referred to as “General Public (GP) sessions”) are provided by the DH through designated sessions in 11 government dental clinics. Dental service under the GP sessions include treatment of acute dental diseases, prescription for pain relief, treatment of oral abscess and teeth extraction. The dentists will also provide professional advice based on individual needs of patients. To improve the disc allocation arrangement at the dental clinics with GP sessions, the DH has explored improving disc allocation procedure in GP sessions by providing “self-service kiosks” service with a view to avoiding overnight queues, especially for the elderly. However, after testing and trial in two dental clinics, various operational difficulties were encountered and the

result was not promising. The DH will continue to review and explore ways to improve the operation of GP service.

- (b) Specialist oral maxillofacial surgery and dental treatment are provided by the DH's Oral Maxillofacial Surgery & Dental Clinics (OMS&DC) in seven public hospitals for hospital in-patients, and patients with special oral health care needs and dental emergency needs. Such specialist services can be provided through referral by the Hospital Authority (HA) or private practitioners, etc. OMS&DC will arrange appointments for patients according to the urgency of their conditions. Those with emergency needs, such as cases of dental trauma, will be provided with immediate consultation and treatment. In addition, the HA also provides dental services in four public hospitals, where in-patients, patients with special oral healthcare needs and patients with dental emergency needs under referrals can receive oral maxillofacial surgery and specialist dental treatments by the HA.

DENTAL CARE SUPPORT FOR THE ELDERLY

7. In recent years, the Government has launched a series of initiatives to provide elders with special needs to receive dental care support services, including the Outreach Dental Care Programme for the Elderly and the Community Care Fund (CCF) Elderly Dental Assistance Programme. Besides, the Elderly Health Care Voucher Scheme allows Hong Kong elderly persons aged 65 or above to use the vouchers for private dental services. Details are outlined in the ensuing paragraphs.

(a) Outreach Dental Care Programme for the Elderly

8. In 2011, the Government launched a three-year pilot project to provide basic dental care (covering oral examination, scaling and polishing, and emergency dental treatments) for elders residing in residential care homes for the elderly (RCHes) or receiving services in day care centres for the elderly (DEs) through subventing outreach dental teams set up by non-governmental organisations (NGOs). Having regard to the experience gained, the Government converted the pilot project into a regular programme (entitled "Outreach Dental Care Programme for the Elderly" (ODCP)) in October 2014 to continue with the provision of outreach dental services for eligible elders with expanded scope of dental treatments covering fillings, extractions and dentures, etc. The eligibility of beneficiaries was also expanded to cover those residing in similar facilities (e.g. Nursing Homes for the elderly registered under the DH). Under the ODCP, a total of 23 outreach dental teams from 10 NGOs have been set up to provide free

outreach dental services for elders in RCHEs, DEs and similar facilities in the territory. Between October 2014 and January 2022, the number of attendances under ODCP was about 296 200.

(b) Community Care Fund (CCF) Elderly Dental Assistance Programme

9. The Elderly Dental Assistance Programme with funding provided under the CCF was launched in September 2012 to provide free removable dentures and related dental services (covering oral examination, scaling and polishing, fillings, tooth extractions and X-ray examination) to low-income elders who are users of the home care services subvented by the Social Welfare Department (SWD). To enable more needy elders to benefit from the programme, the CCF has expanded the programme by phases in September 2015, October 2016, July 2017 and February 2019 to cover elders who are recipients of Old Age Living Allowance and aged 65 or above. The scope of subsidy under the programme was further expanded from July 2021 so that eligible elders in need of treatment can receive more targeted dental services in relation to fitting of removable dentures. The newly included treatment items cover the removal of bridges or crowns and the provision of root canal treatment. The targeted beneficiaries were also expanded to allow elders aged 75 or above who received dental services under the programme at least five years ago to receive free removable dentures and related dental services for a second time. The programme has also been extended to September 2023 and the number of target eligible elders will increase to about 640 000. As at end of March 2022, a total of 590 private dentists and 70 NGO dental clinics have participated in the programme, around 107 400 applications were received (including around 700 elders applying for a second time under the programme). Applicants of around 93 400 cases have the required dental treatment completed. Applicants of the remaining cases are receiving dental treatments at various stages.

(c) Elderly Health Care Voucher Scheme

10. The Government has implemented the Elderly Health Care Voucher (EHCV) Scheme to provide subsidies for elderly persons aged 65 or above to choose private primary healthcare services that best suit their health needs in their local communities. EHCVs can be used for healthcare services, including private dental services. Currently, each eligible elderly person is provided with an annual voucher amount of \$2,000. There is no restriction on the number of years that one may carry forward the unspent voucher amount subject to an accumulation limit of \$8,000, providing flexibility for choosing suitable services.

DENTAL CARE FOR PEOPLE WITH DISABILITY

11. At present, people with disability can enjoy the dental services provided by the DH to the public. They can make use of the free emergency dental treatments provided at the GP Sessions of the 11 government dental clinics and the specialist oral care services provided on referral basis by the DH's OMS&DC in seven public hospitals and HA's OMS&DC in four public hospitals (see paragraph 6 above). In addition, the dental clinic operated by Hong Kong St. John Ambulance also provides free and comprehensive dental services to people with intellectual disability and other patients with special needs.

12. Noting that concerted efforts from parents and schools are necessary to facilitate children with intellectual disability to take care of their oral hygiene themselves, the OHED has been conducting a special oral health promotion programme named the "Dandelion Oral Care Action" (the Dandelion Programme) since 2005 where a train-the-trainer approach is adopted to train and equip school nurses, teachers and parents of the participating special schools with special tooth cleaning skills. The OHED trains at least one school nurse or teacher nominated by each school to be the Oral Health Trainers (OHTs). They will be equipped with certain basic oral care knowledge/technique. The OHTs, in turn, will train all teachers in school and conduct workshops to train the parents to take care of their children at home using the same oral care technique. The long-term goal of the Dandelion Programme is to enable children with intellectual disability to brush and floss their own teeth competently and independently by the time when they leave school. The oral care skill has become part of the self-care curriculum of the schools. Parents who participated on a voluntary basis have found that the tooth brushing and flossing skills of their children have improved. Currently, 29 schools in Hong Kong have subscribed to the Dandelion Programme.

13. Apart from the Dandelion Programme, the Government has further stepped up support measures for students with intellectual disability and/or physical disability (such as cerebral palsy) starting from the 2013/14 school year by allowing these students, who are studying in special schools participating in the SDCS, to continue to enjoy the dental services under the SDCS irrespective of their grades until they reach the age of 18. If necessary, the SDCS would refer these students to the OMS&DC in the seven public hospitals for further dental treatment under sedation or general anesthesia.

Healthy Teeth Collaboration

14. In light of the experience from the “Loving Smiles Service”¹, a new three-year programme named “Healthy Teeth Collaboration” (HTC) was launched by the DH on 16 July 2018. The objective of the programme is to provide free oral check-ups, dental treatments and oral health education for adults with intellectual disability. All NGOs operating dental clinics and providing services to the public were invited to participate in HTC. Under HTC, at least one of the Registered Dentists assigned by the NGO must have received formal/recognised training on provision of dental services for persons with intellectual disability. The training course provided by the Prince Philip Dental Hospital on dental care for persons with intellectual disability is one of the recognised training programmes fulfilling the above requirement.

15. Through five NGO dental clinics participating in the project, namely Christian Family Service Centre Tokwawan Dental Clinic, Haven of Hope S K Yee Hang Hau Clinic, Loving Smiles Special Care Dental Centre, Hong Kong Tuberculosis Association Rusy M. Shroff Oral Health Services Limited and TWGHs Ho Yuk Ching Community Dental Clinic, the Government provides free dental care services including oral check-ups, dental treatments and oral health education to persons with intellectual disability. The scope of dental services include radiographs, preventive treatment, treatment of gum diseases, fillings, extractions (including wisdom teeth), and/or pulp treatment. If necessary, arrangements will be made for such persons to receive dental treatments under sedation or general anaesthesia at a designated collaborating private hospital.

16. The HTC was extended for three years until 15 July 2024. As at end of January 2022, about 3 800 adults with intellectual disability have registered under HTC. Among these persons, about 3 700 have received their first consultation. The Government will keep in review the implementation of the programme and

¹ Over the past few years, the Food and Health Bureau had collaborated with the Hong Kong Dental Association, the Hong Kong Special Care Dentistry Association and the Evangel Hospital to launch a “Pilot Project on Dental Service for Patients with Intellectual Disability” (the Pilot Project) (also known as “Loving Smiles Service”). Adult patients with intellectual disability who had economic difficulties would be subsidised to receive check-up, dental treatment and oral health education in the dental clinics participating in the Pilot Project. The Pilot Project provided dental services supplemented with special support measures such as special anesthetic procedures and behavior management to ease the anxiety of patients with intellectual disability, so as to improve their willingness to cooperate with the dentists and to receive appropriate dental treatment. If necessary, they would be arranged to receive other dental services under intravenous sedation or general anesthesia in the participating hospital. The Pilot Project ended in July 2018 and over 3 000 eligible adult patients with intellectual disability received dental services.

the dental service needs of the adults with intellectual disability, so as to consider how to improve the service and enhance the effectiveness of the service.

Special Oral Care Service

17. Besides, in order to improve the oral health of children with intellectual disability, the DH has set up a Special Oral Care Service (SOCS) in September 2019 in collaboration with the HA at the Hong Kong Children's Hospital (HKCH) for pre-school children under six years old with intellectual disability for early intervention and prevention of common oral diseases. SOCS has also implemented an outreach dental service since September 2019 to provide free onsite dental check-up and oral health education for the eligible children at Special Child Care Centres under the SWD. If necessary, children can be referred to the HKCH for follow-up dental treatment, including treatment under sedation/general anaesthesia.

18. Between September 2019 and January 2022, the number of attendances receiving dental check-up by the SOCS team was about 2 000 and about 400 referrals to HKCH were made.

PEOPLE WITH FINANCIAL DIFFICULTIES

19. As for people with financial difficulties, the Comprehensive Social Security Assistance (CSSA) Scheme provides a dental grant for its recipients to pay for dental treatments services (including extraction, dentures, crowns, bridges, post, post and core, scaling and polishing, fillings and root canal treatment). Eligible CSSA recipients can approach the 73 dental clinics designated by the SWD for dental examination and cost estimation. They may then choose to obtain relevant dental treatments from any registered dentists in Hong Kong, including those of the SWD designated dental clinics. The amount of grant payable will be based on the exact fee charged by the clinic, the cost estimated by the designated clinic or the ceiling amount set by the SWD, whichever is the less.

MANPOWER FOR DENTAL SERVICES

20. Apart from the above services, curative dental care services, such as scaling and polishing and fillings, is provided mainly by the private sector and NGOs in Hong Kong. As at end-March 2022, there are around 2 707 registered dentists in Hong Kong. According to the Health Manpower Survey, about 74% registered dentists worked in the private sector and NGOs. With the continuation of the above dental initiatives by the Government and the aging population, notably the ODCP, the CCF Elderly Dental Assistance Programme and the HTC, it is expected that demand for subsidised dental services, and for that matter dental manpower,

will increase significantly in the coming years. To prepare for the surge in demand for dental service, the Government will further increase the annual intake of University Grants Committee (UGC)-funded first-year-first-degree training places in dentistry from 80 to 90 in the 2022/23 to 2024/25 triennium. It is expected that there will be around 400 dental graduates becoming registered dentists in the coming five years. Furthermore, the Government will provide 10 UGC-funded taught postgraduate places in dentistry in the 2022/23 to 2024/25 triennium to ensure a stable supply of dental specialists. For admission of non-locally trained dentists, the Dental Council of Hong Kong has increased the Licensing Examination for non-locally trained dentists to two sittings a year starting from 2015, and has further improved the arrangement of certain parts of the Licensing Examination and updated its result retention policy and examination admission arrangement, so as to attract more qualified non-locally trained dentists to practise in Hong Kong and contribute to the diversity of the local dentistry workforce.

REVIEW OF ORAL HEALTH GOALS OF HONG KONG

21. The Fédération Dentaire Internationale World Dental Federation (FDI) and the World Health Organisation (WHO) jointly established the first Global Oral Health Goals in 1981 to be achieved by 2000. A review of these goals revealed that, while a majority of population had achieved or exceeded them, a significant proportion of the world's population still does not have the capability to achieve these goals. Therefore, in 2003, FDI and WHO have suggested the concept "*Think globally Act locally*" and considered that it would be more practical for different countries and regions to decide oral health goals that suit their situation. They have also proposed more general directions so as to facilitate regional and local oral health policy development and organisation of various activities in order to achieve to local goals. Hong Kong has established the oral health goals to be achieved by year 2010 and 2025 as early as 1991 and planned for the implementation of the recommendations². The Audit Commission Report No. 68 published in 2017 on provision of dental services has recommended that the oral health goals established in 1991 should be reviewed.

22. Before formulating policies and targets for oral health in Hong Kong, the DH needs to collect pertinent information on the oral health status and related behaviour of the people in Hong Kong for planning and evaluation of oral health programmes, and to plan for future oral health care development. The first community-wide Oral Health Survey (OHS) was conducted in 2001 and the DH

² According to a Medical Development Advisory Committee paper issued in 1991 by the then Health and Welfare Branch of the Government Secretariat, the Government had agreed with the recommendations of the Dental Subcommittee that operational oral health care goals should be established for Hong Kong for the years 2010 and 2025.

undertook to carry out an OHS every 10 years. The OHS 2011 was therefore conducted to collect information on oral health status of the people of Hong Kong and the following round of OHS already commenced in November 2021.

23. The objectives of the OHS 2021 include:

- (a) to assess and update the oral health status of the Hong Kong population by conducting oral examinations among different age groups according to the recommendations of WHO;
- (b) to collect information on demographic background, oral health knowledge, attitude and behavior, motives and barriers on oral care seeking behavior and treatment needs through questionnaire surveys among different age groups in order to correlate with their oral health status; and
- (c) to provide updated oral health data for the DH to support Government policy and oral health goals formulation and plan for future dental services for the community.

24. The DH has set up an expert group in May 2019 comprising representatives from the Faculty of Dentistry of the University of Hong Kong, the Hong Kong Dental Association, the College of Dental Surgeons of Hong Kong and dental experts from the DH. The expert group will review and establish appropriate oral health goals of Hong Kong taking into account the targeted groups included in the 2001 and 2011 OHS and the local situation.

25. As the next step, the DH will set oral health goals for people of different age groups in Hong Kong by making reference to the results of the 2021 OHS. The DH will also explore ways to improve dental care services and recommend possible measures (including publicity and education) for achieving the goals.

CREATION OF ONE PERMANENT CONSULTANT POST IN THE DH

26 The number of persons with disability in Hong Kong (excluding persons with intellectual disability) had increased from 269 500 (prevalence rate 4.0%) in 2000 to 866 500 (prevalence rate 11.6%) in 2020, and the number of persons with chronic medical conditions had increased from 882 700 (prevalence rate 13.0%) in 2000 to 1 799 100 (prevalence rate 24.1%) in 2020. The estimated number of persons with intellectual disability had also increased from 62 800–87 000 in 2000 to 77 000–90 000 in 2020. Some of these persons have difficulties in accessing conventional dental care because the management of these persons requires dentists with special skills in communication and behavioural management, with

ability to collaborate with other social and health care disciplines providing care to persons with disability, and with competence in securing consent for dental treatment under complicated situations. Different modes of dental care delivery ranging from outreach service, conscious sedation in dental clinic to general anaesthesia in hospital should be available to care for these persons with special oral healthcare needs. As oral health is intimately related to general health, the development of equitable dental services to persons with special oral healthcare needs is compliant to Article 25 of the United Nations Convention on the Rights of Persons with Disability, Goal 3 of the United Nation’s Sustainable Development Goal, and the World Health Assembly’s resolution WHA74.5 adopted on 21 May 2021.

27. The development of special dental services involves the recommendation of appropriate overall policy, establishment of suitable dental care facilities, training of dentists and auxiliary dental personnel at different expertise levels, and the liaison with internal and external stakeholders in the above tasks. There is also a need for DH to develop a centre of excellence in special dental services to handle referrals from NGOs under ODCP and HTC. Currently, the Government’s efforts have focused on persons with intellectual disability but there is imminent need to cater for the special oral healthcare needs of persons with mental illnesses and persons with complex medical conditions as well. A dental professional staff at directorate level is required to provide professional advice to FHB and to oversee such developments. As such, we propose the creation of one permanent Consultant post to oversee the development, provision and management of special dental care service for people with special oral healthcare needs.

28. At present, there are 11 directorate posts in the Dental Services of the DH including nine Consultant and two Principal Dental Officer (D1) posts to oversee the Hospital Dental Service, Civil Servants Dental Service, School Dental Care Service, Dental Regulatory and Law Enforcement Office and Dental Service Administration Office. These directorate officers are all dental specialists with expertise in different aspects. We need to strengthen the directorate support in the provision of special dental care service in the community with creation of one permanent Consultant post (designated as Consultant (Community Special Dental Service) (“Consultant (CSDS)”).

29. The existing and proposed organisation charts of the Dental Services of the DH are at **Annexes A and B** respectively. The proposed job description of Consultant (CSDS) is at **Annex C**.

Alternatives Considered

30. We have critically examined whether there is scope for internal redeployment of staff for discharging the tasks of Consultant (CSDS). Having regard to the portfolio and workload of the existing directorate officers in Dental Services, we consider it not operationally feasible without affecting the quality of their work as all of them are fully engaged in their respective duties.

Financial Implications

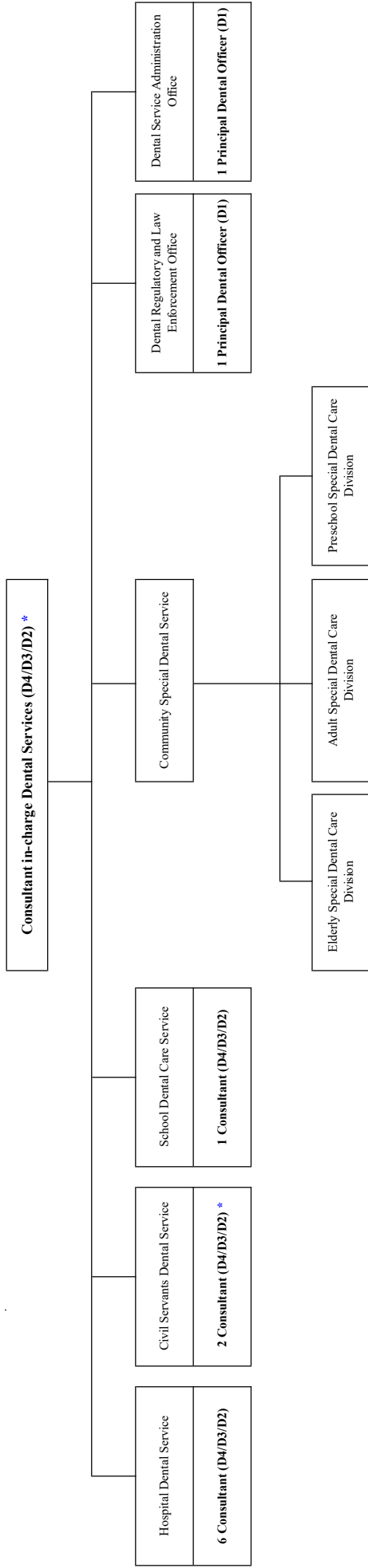
31. The proposed creation of the permanent Consultant (D4/D3/D2) post will bring about an additional notional annual salary cost at mid-point of \$2,500,473 and an additional full annual average staff cost, including salaries and staff on-cost, of \$3,684,000. In addition, this proposal will necessitate the creation of one permanent non-directorate post of Personal Secretary I at a notional annual mid-point salary cost of \$463,140 and the full annual average staff cost, including salaries and staff on-cost, is \$723,000. DH has earmarked sufficient provision in the Estimates of 2022-23 to meet the cost of the proposal and will reflect the resources required in the subsequent years.

ADVICE SOUGHT

32. Members are invited to note the content of this paper and give their views on the proposal for creating one permanent Consultant (D4/D3/D2) post for community special dental service in the DH. Subject to Members' views, we will submit the above staffing proposal to the Establishment Subcommittee for recommendation to the Finance Committee for approval.

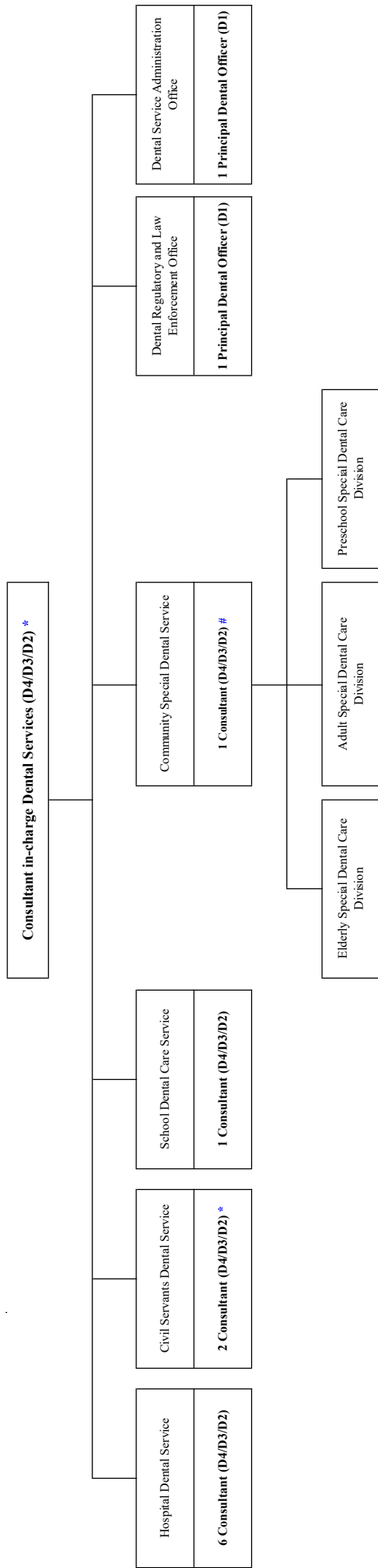
**Food and Health Bureau
Department of Health
May 2022**

Existing Organisation Chart of the Dental Services of the Department of Health



* One Consultant in the Civil Servants Dental Service takes up the role of Consultant in-charge Dental Services in addition to his own duties.

Proposed Organisation Chart of the Dental Services of the Department of Health



Proposed new post

* One Consultant in the Civil Servants Dental Service takes up the role of Consultant in-charge Dental Services in addition to his own duties.

**Proposed Job Description for the post of
Consultant (Community Special Dental Service)**

Rank : Consultant (D4/D3/D2)
Responsible to : Consultant in-charge Dental Services (D4/D3/D2)

Main duties and responsibilities:

1. To oversee the provision and management of the special dental care service and to assess and identify service gaps among the existing special dental care programmes/services including:
 - (a) Outreach Dental Care Programme for the Elderly and Healthy Teeth Collaboration for adults with intellectual disability; and
 - (b) services provided by School Dental Care Service, Hospital Dental Service, Oral Health Education Division in the Department of Health (DH) and the Special Oral Care Service in the Hong Kong Children's Hospital.
2. To provide advice and suggestions to the policy bureau in coordinating dental health programmes and the long term development of special dental services in Hong Kong by making recommendations on appropriate overall policy, establishment of suitable dental care facilities, and training of dentists and auxiliary dental personnel at different expertise levels.
3. To oversee the development of special dental services through liaison with internal and external stakeholders.
4. To co-ordinate and monitor the existing special dental care programmes in the DH and formulate new special dental care service programmes as necessary, and to develop the DH into a centre of excellence in special dental services to handle referrals from these special dental care service programmes.
5. To provide clinical service for patients with special oral healthcare needs.