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The COVID-19 Long-Term Care situation in Hong Kong: impact and measures

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1. Key points

- Hong Kong is going through the third wave of COVID-19 infection. On 7 July 2020, a total of 14 new cases have been reported across schools, public housing estates, hospital and the first case in a residential care home for older people. An additional 24 confirmed cases have been reported that taking the total number of cases to 1,324 as of 8 July 2020.
- The Government and society responded very quickly and imposed strict policies to stem the spread of virus in community and long-term care facilities, including practice guidelines, financial support and special arrangements on health and social care services.
- Non-Governmental Organisation (NGO) increased use of anti-epidemic measures and information and communication technology to support older people and their family members during the epidemic, including people living with dementia.

2. Introduction

In Hong Kong, because of the experience with the SARS epidemic in 2003, the Government and society responded very quickly and imposed strict policies and practice guidelines to stem the spread of virus in community and in long-term care facilities. The Social Welfare Department issued its first guideline for special arrangements for publicly funded welfare services in response to the COVID-19 on January 28¹. A spike in cases was noted in week of the 23rd March and tighter measures, such as adjustment to non-urgent services, health quarantine arrangements on inbound travellers and requirements to reduce gatherings, were imposed to contain a second wave of infection. The Government announces daily updates with its public service arrangements in response to the outbreak², including helplines for daily necessities and/or food for home confines.

While the outbreak appeared to be under control in June, a total of 14 new cases have been reported on 7 July 2020, including schools, public housing estates, hospital and the first case in a residential care home for older people. Hong Kong are going through the third wave of COVID-19 infection. Worrying about massive community outbreak, the government escalated its containment strategy to launch a review of measures as follows [2,3]:

- Foreign domestic workers will be required to undergo pre-boarding coronavirus screening before flying to Hong Kong. Their employers must arrange 14-day mandatory quarantine in designated hotels upon arrival.
- Arrange the orderly return of residents from higher-risk countries, such as Pakistan, India, Nepal, Bangladesh and South Africa.
- Crew members of aircrafts and vessels entering Hong Kong via the airport will be subject to mandatory COVID-19 testing, in addition to a 14-day medical surveillance upon arrival.
- Review the tightening of social-distancing measures at restaurants and entertainment venues. The restriction on people gathering in groups of more than 50 remains in place.

¹ https://www.swd.gov.hk/en/index/site_pubpress/page_press/act_index/year_2020/

² <https://www.coronavirus.gov.hk/eng/public-services.html>

- Visitations to elderly care facilities, rehabilitation centres and non-acute hospitals will be suspended.

3. Impact of COVID19 on long-term care users and staff so far

3.1. Number of positive cases in population and deaths

According to the daily update of the Government as of 8 July 2020, there have been 1,324 confirmed cases of COVID-19. Among them, 1,167 people were discharged, 138 were still hospitalised and 7 have passed away. For the percentages of confirmed or probable cases by age groups, 17.5% were aged 19 or below, 45.4% were aged 20-39, 23.8% were aged 40-59, 12.2% were aged 60-79, 1.0% were aged 80 or above [1].

3.2. Rates of infection and mortality among long-term care users and staff

In Hong Kong, there have been no frontline health care workers and no nursing home residents infected with the virus until early July 2020. The first infected case was confirmed in a residential care home on 7 July 2020. Four other residents and 4 staff were tested positive from the same residential care home as of 8 July 2020. The Department of Health, Hospital Authority and Social Welfare Department have conducted a site visit immediately to determine if the environment of the residential care home is suitable for on-site quarantine for residents who might have special care needs. After considerations, residents and staff who are close contacts of the confirmed case in the residential care home were arranged for quarantine and medical observation in an isolation facility. The Social Welfare Department would arrange for care workers to attend to the needs of quarantined residents [2, 3, 4].

4. Long-term care policy and practice measures

4.1. Health care services for older people

Non-urgent medical services, such as routine follow-up for chronic illnesses or non-urgent surgery, have been postponed since 29 January 2020. Family members of older patients are encouraged to pick up medications from clinics in lieu of regular follow-up physician visits to reduce the risk of infection. New service arrangement for the 18 Elderly Health Centres were announced on the 17 February 2020 [5].

4.2. Whole sector measures

The Hong Kong Social Workers and Welfare Employees Union conducted a survey in February. It revealed that 25.3% of the respondents did not receive adequate protection measures and face masks from their organisations, and about 10% were required to take unpaid leave or had pay deductions during the epidemic [6, 7]. The Social Welfare Department has set out the following special financial support and anti-epidemic measures in response to the difficulties and needs from social care providers [8, 9]:

- Special allowance to strengthen preventive measures: About 2,800 service units (including all residential care homes for older persons) and 3,000 beneficiary service units (including service providers of the Community Care Service Voucher) will be provided 3 rounds of special allowance for the procurement of personal protective equipment and sanitising items, involving a total expenditure of around HK\$34 million.
- Provision of face masks: All residential care service units (including subsidised, contract, self-financing and private homes) will receive 1 million face masks.
- Special allowance for workforce support: Subsidised residential care homes and home-based care service units will receive a one-off special allowance for workforce support and maintain daily operations (e.g. hiring of temporary staff, relief workers or internal deployment of workforce to work overtime) for staff absence due to self-isolation or quarantine arrangements. It will involve a total expenditure of around HK\$130 million.
- Special allowance for social care providers: Special allowance amounts to 10% of monthly salary with a cap at HK\$4,000 for no less than 4 months (i.e. from February to May) will be provided to around 20,000 staff of 745 subsidised residential care homes who have stayed committed to work during the epidemic, involving an expenditure of around HK\$208 million.

4.3. Care homes (including supported living, residential and nursing homes, skilled nursing facilities)

All residential care services are provided as normal. However, visiting professional services, such as the Visiting Medical Practitioner Service or the Multi-disciplinary Outreaching Support Teams for the Elderly for Residential Care Homes have either ceased or are provided on a limited scale. Some professional services, such as occupational therapy services for people with dementia, can be delivered through IT enhanced methods. Visits by family members, friends, or community members are not allowed unless for compassionate reasons. All volunteering visits have been stopped. Some residential care facilitates use IT channels such as the Whatsapp, Facetime or Zoom to organize virtual visits by family members [10].

4.3.1. Prevention of COVID19 infections

Guidelines for Residential Care Homes for Older People [11]:

- Residents newly discharged from hospitals: Staff are advised to pay extra attention to their personal hygiene care, health conditions and body temperature. Residents with fever or respiratory symptoms are required to wear surgical masks and are recommended to continue their existing isolating or cohorting practice.
- Travel outside Hong Kong: Residents and staff are recommended to avoid all non-essential travel and to inform the institution in advance to facilitate arrangements upon return. All people who have travelled overseas in the past 14 days are subject to compulsory quarantine for 14 days upon arrival.
- Visiting arrangement: Visits (i.e., family members, friends, volunteers, etc.) are recommended to be avoided as far as possible and family members are suggested to contact residents or staff by other means (e.g., telephone and video communication).

- **Activity and environment:** Residents are recommended to avoid leaving their room and avoid activities that involve mixing with other residents, for example by having meals in their own room and using a designated toilet. They are advised to put on a surgical mask when need to leave the room and to keep a clear pathway for transfer. Environmental disinfection with 1 in 49 diluted household bleach at least daily for the room and at least twice daily for frequently touched areas. Cleaning staff are advised to wear appropriate personal protective equipment.

Technology:

Local telecommunications companies have sponsored and partnered with some NGOs such as the Evangelical Lutheran Church Social Service to provide video phone calls to replace physical visits to nursing homes, encouraging families and friends to cheer up and provide spiritual comfort for the residents [12].

Temporary isolation wards:

Some nursing homes have introduced ‘temporary isolation wards’ as a safety measure for older people returning from hospital. They can be also used as a temporary visiting room for families [13].

4.4. Community-based care

4.4.1. Government measures and guidance

Day care centres for older have suspended their services but remain open to serve those in special needs, but at a much reduced capacity [10]. For example, a typical day care centre may have the capacity to take care of 60 older adults, but now only take care of up to 20 older adults.

Older people centres that provide active ageing activities and caregiver support services are all closed to the general public, but staff continue report duty to provide urgent support services to older people or caregivers in the community [10]. The centre staff call members by phone regularly, usually weekly, to provide social and emotional support.

All essential home support services such as visiting nurse services, meal deliveries, escort to medical appointments and medication management continue, but providers are given more flexibility on how those services are delivered [10]. For example, re-usable containers were used in meal delivery services before the epidemic, but these have been changed to disposable containers after the epidemic started to reduce the need for cleaning. Other non-essential services, such as bathing and chore services, have been either stopped or delivered at a much reduced capacity.

4.4.2. Responses from the not-for-profit sector

Technology:

The Evangelical Lutheran Church Social Service (a Non-Governmental Organisation (NGO)) has provided tablet computers to 300 frail older people during the epidemic with support from the Hong Kong Jockey Club Charities Trust. It included 79 home sports videos, 21 cognitive training

games and equipment for measuring health index (e.g., blood pressure, heartbeat, steps, sleep status, blood glucose, blood oxygen, weight and body temperature). The system would notify the responsible medical teams and family members if there are signs of abnormality [14].

Sensory stimulating and creative activities:

Some NGOs such as Hong Kong YWCA Elderly Service are using videos to guide sensory stimulating activities at home for maintaining cognitive function and boost moral for older people and their carers at home. Activities include games that target visual, olfactory, tactile, auditory and taste stimulation [15]. Other NGOs such as Christian Family Service Centre has introduced an online 'daily anti-epidemic exercise' for older people and family members during the period of home isolation [16, 17]. Some nursing homes have reported an increased use of art (e.g., colour drawing) to reduce negative emotions of older people who are not able to meet with their families in nursing home [18].

Special emergency support campaign:

Home care organisations such as the Senior Citizen Home Safety Association have launched a special campaign to provide emergency support to older people in the community. A professional team of nurses and social workers conduct risk level assessment, provide counselling and psychiatric referrals, and arrange services such as medication refills, household cleaning and hygiene supplies delivery [19].

Anti-epidemic measures and financial assistance:

Some NGOs, such as Tung Wah Group of Hospitals, Caritas Hong Kong and Po Leung Kuk, has been delivering surgical masks and anti-epidemic packs (e.g., food and disinfection supplies) through its service units, including deprived families and singleton older people in the community. Emergency financial support, contingency supplies and free traditional Chinese medicine treatment were also provided to diagnosed patients and their families with financial difficulties [20, 21, 22].

4.5. Impact on people living with dementia and measures to support them

Some Non-Governmental Organisations, such as the Christian Family Service Centre, have started to offer remote activities and counselling through video links to older people with mild and moderate dementia. Weekly packages of interactive activities ranging from cognitive stimulation to simple arts and crafts are provided, which aim to enhance physical, mental, cognitive and self-management skills abilities during home isolation [23].

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