

葵青安全社區及 健康城市協會

KWAI TSING SAFE COMMUNITY
AND HEALTHY CITY ASSOCIATION

20th 周年紀念特刊
Anniversary Commemorative Publication





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深耕細作 20 載 「安健葵青」護民康 20 Years of Deep Plowing and Careful Cultivation "Safe and Healthy Kwai Tsing" Protects People's Health



葵青安全社區及健康城市協會（下稱本會）在社區深耕細作 20 年，由一個統籌世界衛生組織的「安全社區」及「健康城市」計劃的機構，一步一腳印走出基層醫療服務之路，過程全賴醫療、社福及地區界別人士共同付出，令有限的社會資源獲得最大化發展，造福葵青區居民。

回首廿年扎根之路，協會屢創先河，既創造了傷害監察系統，成功識別出地區高危之處以作改善；又勇於提出新嘗試，結果葵青區的「社區重點項目」沒有大興土木，而是為地區健康服務奠下基礎，讓居民獲得便捷的基層醫療服務。為進一步成為葵青居民的健康守護者，協會更於 2019 年成為全港首個地區康健中心的營運機構。

協會如今茁壯成長，猶如一棵根深葉茂的大樹，在葵青區廣設服務點，形成枝葉豐盛的網絡，默默護蔭居民。展望未來，協會將繼續秉持創會初心，致力建立安全環境、推廣公共健康、匯集地區資源，期盼「安健葵青」的理想得以持續發展。

After 20 years of deep plowing and careful cultivation, the Kwai Tsing Safe Community and Healthy City Association (KTSCHCA) has gone on the path of primary healthcare services step by step from an apparatus that coordinated the World Health Organization's Safe Community and Healthy City programs. During this process, thanks to the joint contributions of people from the medical sector, social welfare, and the district, the development of the limited social resources can be maximized to benefit Kwai Tsing residents.

Recollecting 20 years of rooting, the association has repeatedly created precedents. It not only created an Injury Surveillance System, which succeeded in identifying high-risk areas for improvement but also dared to propose new attempts. As a result, Kwai Tsing's Signature Project Scheme did not go in for large-scale construction but built the foundation of district health services and provided residents with convenient primary healthcare services. In order to further become Kwai Tsing residents' health guardians, the association became the operator of Hong Kong's first District Health Centre in 2019.

The association has now grown up strong and sturdy, like a big tree with deep roots and luxuriant leaves. It has set up widely scattered service points in Kwai Tsing, forming a network with rich branches and leaves, silently protecting residents. Looking forward to the future, the association will continue to uphold the original purpose of its founding, striving to create a safe environment, promote public health, and pool district resources, with the hope that the ideal of a Safe and Healthy Kwai Tsing can continue to develop.



葵青安全社區及健康城市協會二十周年誌慶

弘揚安健
卓獻社區

財政司司長陳茂波





葵青安全社區及健康城市協會二十周年誌慶

安健葵青 造福於民

葵青安全社區及健康城市協會
顧問委員會主席梁智鴻





葵青安全社區及健康城市協會二十周年誌慶

醫社攜手 廿載耕耘

香港大學榮休教授和名譽臨床教授楊紫芝



葵青安全社區及健康城市協會二十周年誌慶

弘安倡健
績著功宏

醫務衛生局局長盧寵茂





葵青安全社區及健康城市協會二十周年誌慶

功濟廿載
績著葵青

民政及青年事務局局長麥美娟





葵青安全社區及健康城市協會二十周年誌慶

植根葵青
福澤流芳

勞工及福利局局長孫玉菡





葵青安全社區及健康城市協會二十周年誌慶

弘康衛社
維健護城

警務處處長蕭澤頤





葵青安全社區及健康城市協會二十周年誌慶

安民健社
廿載功宏

消防處處長楊恩健





葵青安全社區及健康城市協會二十周年誌慶

扶
鄰
澤
眾
匡
社
惠
民

衛生署署長林文健





葵青安全社區及健康城市協會二十周年誌慶

同心同德 惠澤社群

葵青民政事務專員鄧顯權





葵青安全社區及健康城市協會二十周年誌慶

同心同德惠澤社群
和衷協力與民同行

醫院管理局行政總裁高拔陞





葵青安全社區及健康城市協會二十周年誌慶

崢嶸歲月 博施濟眾

九龍西醫院聯網總監羅振邦



葵青安全社區及健康城市協會二十周年誌慶

安全社區健康城
樂民融和國昌盛

葵涌醫院行政總監阮家興





葵青安全社區及健康城市協會二十周年誌慶

助鄰扶弱 同心健民

社會福利署荃灣及葵青區福利專員黃少芬



葵青安全社區及健康城市協會二十周年誌慶

身心安健 樂聚葵青

葵青區議會主席盧婉婷





葵青安全社區及健康城市協會二十周年誌慶

共建典範 尚志匡群

葵青區撲滅罪行委員會主席葉長春



葵青安全社區及健康城市協會二十周年誌慶

安健可風 匯才獻社

葵青區防火委員會主席潘志成





葵青安全社區及健康城市協會二十周年誌慶

群策群力 共享安康

葵涌（中南）分區委員會主席朱麗玲



葵青安全社區及健康城市協會廿周年誌慶

廿載承擔 惠益社群

葵涌東北分區委員會主席徐錦全





葵青安全社區及健康城市協會二十周年誌慶

社區合力 廣弘安健

葵涌（西）分區委員會主席劉美璐



葵青安全社區及健康城市協會二十周年誌慶

社區深耕 無私細作

青衣（東北）分區委員會主席羅競成



葵青安全社區及健康城市協會二十周年誌慶

職安同倡 安健共享

香港國際貨櫃碼頭有限公司
和記港口信託屬下機構



緣起 Origin

葵青安全社區及健康城市協會（下稱協會）於過去 20 年在葵青區匯集資源、建立網絡，結合推動「安全社區」及「健康城市」計劃，逐步發展發出「醫、福、社」跨專業模式服務居民，除了有效運用社區內的醫療及福利資源，更善用社會資本，讓居民「病有所醫」、防患未然。葵青安全社區及健康城市協會的工作不但獲得國際認可，以社區為本的服務方向更被香港政府採納，政府的地區康健中心試點計劃委託協會為營運機構，結果為日後的基層醫療發展奠下基礎。

回首從前，葵青區是首個結合「安全社區」及「健康城市」運動的中國地區，早在 2000 年 10 月，葵青區議會牽頭成立的葵青安全社區及健康城市督導委員會在世界衛生組織及本港的職業安全健康局協作下，展開「安全社區」計劃，其後於 2002 年展開「健康城市」計劃，結果世衛於 2003 年確認葵青為全球第 73 個安全社區。

為持續發展安全社區工作，「葵青安全社區及健康城市督導委員會」演變成 2002 年 8 月成立的葵青安全社區及健康城市協會，目的為葵青區建立安全及健康的生活和工作環境，並訂立 5 大目標：

1. 建立安全環境和文化，以推廣公共健康及社區安全
2. 匯集地區資源和力量，改善公共健康及社區安全
3. 與社區夥伴建立平台，以確保和維持葵青區居民的健康和安全
4. 作為社區平台，讓不同種族、宗教、政治理念、經濟環境等各階層人士獲得健康及安全訊息
5. 與世衛及其他國際機構緊密合作推動安全社區

Over the past 20 years, the Kwai Tsing Safe Community and Healthy City Association (KTSCHCA), by pooling resources, building networks, and introducing safe community and healthy city programs, has gradually developed a medical-welfare-community trans-profession model to serve residents. Apart from making good use of medical and welfare resources in the community, KTSCHCA has also put social capital to better use, thus enabling residents to have access to medicine when sick and take preventive measures. KTSCHCA's work has not only won international recognition, its community-based service direction has also been adopted by the Hong Kong Government, which commissioned KTSCHCA as operator of its District Health Centre pilot scheme, resulting in laying the foundation for future primary healthcare development.

Looking back, Kwai Tsing District was the first district in China to integrate safe community and healthy city campaigns. As early as October 2000, the Kwai Tsing District Council took the lead to set up the Kwai Tsing Safe Community and Healthy City Steering Committee, which launched a Safe Community Program with strong support from the World Health Organization (WHO) and Hong Kong's Occupational Safety and Health Council (OSHC), followed by a Healthy City Program in 2002. Subsequently in 2003, WHO accredited Kwai Tsing as the 73rd Safe Community.

In order to sustain the development of a safe community, the Kwai Tsing Safe Community and Healthy City Steering Committee evolved into the Kwai Tsing Safe Community and Healthy City Association in August 2002, with a view to create a safe and healthy environment for life and work. Its five objectives are as follows:



▲ 葵青安全社區及健康城市協會致力在社區推動基層醫療發展。

協會以3人手牽手的標誌作會徽，這徽號的歷史比協會還要悠久。早於協會誕生前，葵青安全社區及健康城市督導委員會舉辦葵青安全社區徽號設計比賽，得獎作品理念源自奧林匹克運動精神，以3人行、手牽手的概念，顯示地區夥伴互相協調的重要性，務求達到社區健康及安全的目標。隨著協會成立，葵青安全社區徽號被用作會徽，一直沿用至今。



協會成立初期，曾與瑪嘉烈醫院推出傷害監察系統先導計劃，及後在職業安全健康局的資助下，協會聯同香港理工大學及瑪嘉烈醫院設計「意外傷害監察系統」，為區內受傷個案建立資料庫，詳細記錄及評估受傷原因、過程及地點等。「意外傷害監察系統」其後更發展成電子地圖，方便監察及改善情況，結果於2009年獲香港資訊及通訊科技獎。

另外，協會於2002年推出「安全及健康屋邨計劃」，實地巡查屋邨環境、長者及傷殘人士安健設施等，並進行安全健康教育、風險評估及家居安全評估等，以加強家居安全和健康。

上述安健計劃逐步於2004年推廣至區內各層面，包括「安健學校」、「安健院舍」、「安健醫院」及「安健工作間」等。

1. Create a safe environment and culture for promoting public health and community safety;
2. Pool community resources and efforts to improve public health and community safety;
3. Construct a platform with community partners to ensure and preserve the health and safety of Kwai Tsing District residents;
4. Act as a community platform for people from all walks of life such as different ethnic groups, religions, political philosophies and economic environments to access health and safety information;
5. Work closely with WHO and other international organizations to drive a safe community.



▲ 葵青安全社區及健康城市協會不時舉辦健康檢查日，為居民的健康把關。

KTSCHCA uses a logo of three people holding hands as its emblem, which has a history longer than KTSCHCA. Before KTSCHCA was inaugurated, the Kwai Tsing Safe Community and Healthy City Steering Committee's first task was to organize a competition on the design of a Kwai Tsing safe community logo. The notion of the award-winning piece originated from the spirit of the Olympic movement. The concept of three people walking hand in hand signifies the importance of district partners coordinating with each other in achieving community health and safety. Since KTSCHCA's establishment, the Kwai Tsing safe community logo has been used as its emblem.

為建立地區服務網絡，協會於 2004 年在青衣長青邨開設「青衣社區健康中心」，內設運動設施和自助健康檢查儀器，並有健康安全資訊站，既可舉辦活動聚集居民，亦可用作社區服務網絡的集中點和義工訓練及服務中心。

在地區為本的發展過程中，協會發現跨界別的協作，比各界別單一運作更為有效，因此發展出「醫、福、社」服務模式。在「社區投資共享基金」的資助下，協會、瑪嘉烈醫院社康護士及社工於 2005 年合作推出「一屋邨一護士計劃」，為荔景邨和長青邨的長者和長期病患者提供支援服務，結果減少了入院人數。

Soon after its inauguration, KTSCHCA launched an Injury Surveillance System pilot scheme together with Princess Margaret Hospital (PMH). Subsequently, with OSHC's funding, KTSCHCA joined with the Hong Kong Polytechnic University and PMH to design an "Accidental Injury Monitoring System," and set up an injury database in the district, which records and assesses in detail the reason, course and spot of each injury, etc. The System later developed into an electronic map, which facilitates monitoring and improvement, and won a Hong Kong Information and Communications Technology Award in 2009.

Meanwhile, KTSCHCA launched a "Safe and Healthy Estate Scheme" in 2002 to strengthen home safety and health by inspecting the estate environment, inspecting safety and health facilities for the elderly and the disabled, etc., as well as undertaking safety



▲ 眼睛健康是葵青安全社區及健康城市協會關注的項目，因此不時為居民提供眼睛檢查。

and health education, risk assessment and home safety evaluation, etc.

The aforesaid safety and health scheme was gradually expanded to various sectors in the district including Safe and Healthy Schools, Safe and Healthy Elderly Homes, Safe and Healthy Workplaces, etc.

To form a district service network, KTSCHCA opened a Tsing Yi Health Centre in Tsing Yi's Cheung Ching Estate in 2004. Inside are sports facilities, self-help health inspection equipment as well as a health and safety information station. Activities may be held here to assemble residents. It could also serve as a concentration point for community service networks and a training-cum-service centre for volunteers.

Having found that cross-sector collaboration was more effective than sectors operating individually during the process of district-based development, KTSCHCA developed the medical-welfare-community service model. With funding from the Community Investment & Inclusion Fund (CIIF), KTSCHCA worked with PMH community nurses and social workers to launch a "One Estate One Nurse Scheme" in 2005, which provided support to the elderly and chronic patients in Lai King Estate and Cheung Ching Estate, resulting in a reduction of hospital admissions.



▲ 葵青安全社區及健康城市協會協助學校推動「安健學校」。



▲ 葵青安全社區及健康城市協會致力推動健康社區網絡發展。

在青少年工作方面，協會於 2009 年成立專責輔導青少年的「QK 部落」，以關顧和不標籤化為發展重點，配合體識能評估，及早介入出現身心發展問題的個案，提供輔導或治療。

協會以地區為本、跨界協作的服務模式歷年獲各界稱許，政府於 2017 年宣布為了在基層醫療服務中體現醫社合作成效，以葵青為試點推出地區康健中心，經過公開投標後，協會於 2019 年獲食物及衛生局委託為葵青地區康健中心的營運機構，籌辦全港首間地區康健中心。

經過 20 年深耕細作，協會在葵青區發展出完善的服務網絡，遍及大窩口、荔景、石籬、葵聯、長亨及長青等，部份服務網絡已撥作葵青地區康健中心的附屬中心及服務點，務求在便利的地點為居民提供健康評估、慢性病管理及社區復康等服務。

除了地區康健中心，協會在大窩口社區中心設有大窩口社區健康資源中心，目前正為新型冠狀病毒康復者提供免費中醫診療；協會亦正透過牙科車營運流動牙科診所，最新服務對象為不獲政府牙科保健服務的中學生。在公營醫療系統及地區康健中心以外，協會致力為區內居民提供彈性而貼身的服務，務求達至「安健葵青」的理想。

Regarding work on youngsters, KTSCHCA established in 2009 a QK Blog with the specific responsibility of counseling youngsters. The emphasis was on caring and non-stigmatizing, coupled with physical fitness assessment, and early intervention in cases manifesting physical and mental development problems by providing counseling or treatment.

KTSCHCA's district-based, cross-sector collaboration service model has received widespread praise over the years. In 2017, the government announced that in order to demonstrate the effectiveness of medical-social cooperation in primary healthcare services, it would introduce a District Health Centre in Kwai Tsing for trial. Following open tendering, KTSCHCA was appointed by the Food and Health Bureau in 2019 as operator of the Kwai Tsing District Health Centre to establish Hong Kong's first District Health Centre.

After 20 years of diligent efforts, KTSCHCA has developed a comprehensive service network in Kwai Tsing District covering Tai Wo Hau, Lai King, Shek Lei, Kwai Luen, Cheung Hang and Cheung Ching, etc. Part of the service network has been allotted as subsidiary centres of the Kwai Tsing District Health Centre and service points in order to provide services like health assessment, chronic disease management and community rehabilitation at locations convenient to residents.

Other than District Health Centres, KTSCHCA runs a Tai Wo Hau Community Health Resources Centre in the Tai Wo Hau Community Centre, which is currently providing free Chinese medicine diagnosis and treatment for those who have recovered from Covid-19; KTSCHCA also operates a mobile dental clinic through a dental vehicle, with secondary students without government dental health services as its latest service targets. Apart from the public medical system and District Health Centres, KTSCHCA strives to provide a flexible and customized service to residents with a view to achieve the ideal of a Safe and Healthy Kwai Tsing.

發展里程碑 Milestone

萌芽 Germination



2002 年 1 月
January 2002

位於瑪嘉烈醫院的「社區健康資源中心」啟用，並成為葵青安全社區及健康城市協會秘書處

The Secretariat Office at the PMH Community Health Resource Centre started operations

2002 年 8 月
August 2002

葵青安全社區及健康城市協會成立

Kwai Tsing Safe Community and Healthy City Association was established



2003 年 3 月
March 2003

世界衛生組織確認葵青區為全球第 73 個「安全社區」
Kwai Tsing was designated as the 73rd Safe Community by the WHO



2004 年 11 月
November 2004

位於長青邨的「青衣社區健康中心」開始運作

Tsing Yi Community Health Centre was established in Cheung Ching Estate



2004 年 10 月
October 2004

葵青區成為世界衛生組織西太平洋區域「健康城市聯盟」創會會員

Kwai Tsing became one of the founding members of the Alliance for Healthy Cities in the Western Pacific Region of the WHO



2007 年 12 月
December 2007

成立「安全促進及傷害預防中心」

Kwai Tsing Safety Promotion and Injury Prevention Centre was set up



2009 年 6 月
June 2009

協會獲葵青民政處支持成立
青少年健康資源中心「QK 部
落」

With Support from Kwai Tsing
District Office, QK Blog was
officially opened



2010 年 1 月
January 2010

協會與慶祝成立 35 周年的瑪嘉烈醫院為 5,857 人提供心肺復甦訓練，被列入「世界健力士紀錄大全」

5,857 people joined CPR training together which broke the Guinness World Record



2013 年 1 月
January 2013

協會為成立 10 周年舉辦
研討會

The Kwai Tsing Safe
Community and Healthy
City Association held a
conference in celebration of
its 10th anniversary



2010 年
2010

葵青區獲「健康城市聯盟」頒
發「健康城市先導者」獎項
Kwai Tsing was awarded the
Pioneers in Healthy City Award by
the Alliance for Healthy Cities



2008 年
2008

葵青獲「健康城市聯
盟」頒發「健康城市創
新發展獎項」

Kwai Tsing was awarded
the Healthy City
Innovative Development
Award by the Alliance for
Healthy Cities



2009 年
2009

協會與瑪嘉烈醫院研發的傷害監測系統
獲「香港及亞太區資訊科技獎」

Injury Surveillance System was awarded
the HK ICT and Asia Pacific ICT Awards



2014 年 6 月
June 2014

職業安全健康局確認葵青區為本港首個獲認證的「安全社區」

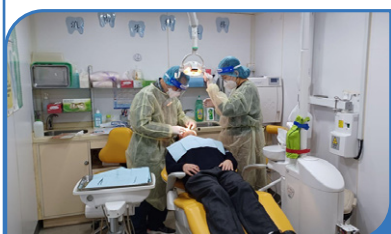
Occupational Safety and Health Council designated Kwai Tsing as the first local Safe Community



2017 年
2017

協會為成立 15 周年舉辦「基層醫療民間高峰會 - 初衷、持續、發展」

The Primary Healthcare Summit was held in commemoration of the 15th anniversary for the Association



2014 年 -2023 年
2014-2023

協會獲區議會「社區重點項目」支持，為居民提供健康服務，包括流感疫苗注射、眼科檢查、牙科護理及健康評估等

With the support of the Signature Project Scheme of the District Council, the Association provided district-based healthcare services, including influenza vaccination, eye examinations, dental care and health evaluations



2016 年
2016

葵青區獲「健康城市聯盟」頒發「健康城市 - 卓越醫療系統」獎項

Kwai Tsing was awarded for its Good Health Systems by the Alliance for Healthy Cities



2018 年
2018

設於瑪嘉烈醫院「社區健康資源中心」的協會秘書處（總辦事處）遷至荔景邨日景樓

The Secretariat Office at the PMH Community Health Resource Centre moved to Yat King House in Lai King Estate



2018 年
2018

葵青區獲「健康城市聯盟」頒發「健康城市 - 卓越行動」及「健康場域與非傳染病防治」獎項
Kwai Tsing was awarded for the Progress of Healthy Cities with Strong Action and Healthy Settings and Non-communicable Diseases Control by the Alliance for Healthy Cities



2023 年
2023

協會為成立 20 周年舉辦「基層醫療民間高峰會 - 願景、發展、挑戰」

The Primary Healthcare Summit was held in commemoration of the 20th anniversary for the Association



2019 年
2019

經投標後於 3 月獲食物及衛生局委任為葵青地區康健中心的營運機構，9 月於葵青開設全港首間地區康健中心

After the bidding process, the Association was appointed as the first operator of the District Health Centre in Hong Kong by the Food and Health Bureau in March, and in September, the first DHC was opened in Kwai Tsing



2021 年
2021

葵青區獲「健康城市聯盟」頒發有關疫下使用遠程醫療獎項
The Association was awarded the Use of Mobile Healthcare and Tele Machine Service by the Alliance for Healthy Cities

轉眼耕耘二十載 創會主席周奕希話當年 Founding Chairman Mr. Chow Yick-hay Talked about Those Years 20 Years of Toiling in a Blink of an Eye



▲ 葵青安全社區及健康城市協會創會主席周奕希，為「安健葵青」的理想默默耕耘 20 年。

葵青安全社區及健康城市協會（下稱協會）轉眼創會 20 年，創會主席周奕希表示協會的故事始於區議會推動「安全社區」計劃。起初的工作只聚焦於國際安全社區的認證工作，其後結合了「健康城市」運動的元素，沒料一轉眼便在社區耕耘 20 年。回首歷年發展，2003 年 SARS 疫症令港人人心惶惶，但周奕希在難關中看見機遇，洞悉到社區團結的力量，因而一直堅持不懈，帶領協會扎根社區，使今日的協會服務愈來愈廣泛，並在本港的基層醫療服務佔上一顯著的席位。

「在『安全社區』及『健康城市』計劃發展一年多後，有一個問題引發思考，就是如何持續推動這些計劃，因此萌生成立非牟利組織的念頭。」協會在 2002 年誕生。周奕希指出，協會成立初期即遇上大挑戰，正當世衛確認葵青區為全球第 73 個「安全社區」之時，香港正爆發起 SARS。

SARS 爆發後，市民人心惶惶，醫院禁止探訪病人，「大家都十分害怕，但當時亦有很多人願意為社會承擔。」周奕希憶述，當年獲善款數百萬元，因此展開向醫院員工致贈水果和湯包

In a blink of an eye, the Kwai Tsing Safe Community and Healthy City Association (KTSCHCA) has been formed for 20 years. Founding chairman Chow Yick-hay said KTSCHCA's story originated in the Safe Community Project promoted by the District Council. Initially, work was focused on promoting that project, which was later combined with the Healthy City element. Unexpectedly, he has toiled in the community for 20 years. Reviewing developments of the past years, the SARS epidemic in 2003 made Hongkongers anxiety-ridden. But Chow saw opportunities in difficulty. He felt the power of community solidarity. Therefore, leading the association, he all along persevered unremittingly to root in the community. As a result, KTSCHCA's services have increasingly expanded and occupied a prominent position in Hong Kong's primary healthcare services.

"After the Safe Community and Healthy City projects had developed for more than one year, one issue triggered my thinking, that is, whether the District Council could continue to promote these projects after the elections and changing terms. Therefore, sprang the idea of setting up a non-profit organization to sustain development." KTSCHCA was born in 2002. Chow pointed out that soon after its setup, KTSCHCA faced a big challenge. As the World Health Organization accredited the 73rd Kwai Tsing District as a Safe Community, SARS broke out in Hong Kong.

After SARS had broken out, citizens were anxiety-ridden. Hospitals banned patient visits. "Everyone was very scared, but at that time, there were also many people willingly committed to society." Chow recalled receiving several million dollars in charity donations that year, more than enough to buy fruit and soup packages for hospital staff. At one time, they also planned to prepare video patient

等關懷行動，又一度計劃在荔景籌備視像探病，讓病人家屬透過視像電話看望住院的病人。在那個撥號上網的年代，他笑言視像探病計劃是十分先進的概念。

不過，SARS 來得快，去得亦快，社區視像探病計劃尚未推出，疫症已完結。經歷過一呼百應團結各界抗疫的日子，協會邁向新一頁，「起初只是推動『安全社區』及『健康城市』計劃，預算計劃完了便結束，但 SARS 給我很大啟發，讓我們認識到社區健康的重要性，必須繼續幹下去。」

為推廣社區安全及社區健康，協會設立了一個「示範單位」，「那時在瑪嘉烈醫院有社區健康資源中心，設有公屋裝置，推廣家居安全，又有舊傢俱，幫助訓練認知障礙病人。」周奕希指出，這些項目在當時都是新鮮事物，葵青區在這方面可算是先鋒，內地機構也遠道來取經，並參照在內地設立類似單位。



▲ 瑪嘉烈醫院內的社區健康資源中心曾設「示範單位」，內有公屋裝置，推廣家居安全，又有舊傢俱，幫助訓練認知障礙病人。

另方面，協會亦致力透過研究改善社區安全，並發展出於 2009 年榮獲「香港及亞太區資訊科技獎」的「傷害監測系統」。「為了記錄受傷入院者的資料，當時在急症室透過電腦及使用電子地圖來分析。」周奕希形容這是「標誌性工作」，能有系統地分析出多人受傷的地點，並先後在葵青、深水埗、將軍澳等地區使用，從而改善行車路彎位、單車徑和遊樂場安全設施。

visits in Lai King, which would allow patients' family members to visit hospitalized patients through video calls. During that era of dial-up internet access, he joked that the video patient visit program was a very advanced concept.

However, SARS came fast and went fast. Before the community video patient visit program was launched, the epidemic had ended. Having experienced days of overwhelming responses to calls of uniting all walks of life to fight the epidemic KTSCHCA strode to a new page. "At first, it was just promoting Safe Community and Healthy City, expecting to finish when the projects ended. But SARS gave me a lot of impetus, and made us continue to work."

In order to promote community safety and community health, KTSCHCA decided to set up a "show house." At that time, there was a community health resource center in Princess Margaret Hospital. There were public housing installations inside to promote home safety, and there was old furniture to help train patients with cognitive impairment." Chow pointed out that these projects were all new at that time. The Kwai Tsing District could be counted as being in the vanguard of this sector. Even mainland institutions came to learn from afar and followed on its heels to set up similar units in the mainland.

On the other hand, KTSCHCA also strove to improve community safety through research, and developed an Injury Surveillance System, which won the HK ICT Award and the Asia Pacific ICT Alliance Award in 2009. "In order to record the information of those who were hospitalized due to injuries, a part-time nurse was employed at that time to station at the Accident and Emergency Department, and a computer was bought for analysis." Chow described this as "signature work", capable of systematically analyzing spots where many people had been injured. It has been used in Kwai Tsing, Sham Shui Po, Tseung Kwan O, and other areas to improve road curves, cycle tracks, and playground safety facilities.



▲ 葵青安全社區及健康城市協會與瑪嘉烈醫院研發的傷害監測系統獲「香港及亞太區資訊科技獎」。

協會的工作一直連繫社區、醫院和地區各持份者，周奕希指出 SARS 後開始構思推動基層醫療服務走入社區，後來獲社區投資共享基金資助，與瑪嘉烈醫院推出一屋邨一護士計劃，「那就是俗稱邨姑的服務，我有十分強的信念，護士應走進社區。」

周奕希指出，以往基層醫療服務不足，尤其需

KTSCCHA's work has been linking up the community, the hospital, and the district. Chow said that they began to think about introducing healthcare services in the community. Later, with funding from the Community Investment and Inclusion Fund, the One Estate One Nurse Project was launched jointly with Princess Margaret Hospital. "That was the estate nurse. I have a very strong belief that nurses should enter the community."

Chow pointed out that in the past when primary healthcare services were inadequate, the community network and social capital were especially needed to promote community health, to let nurses follow up on patient cases in the community, build up relations with district residents, solve problems involving minor illnesses in the community, and refer those in need of welfare to social workers for follow up. He said candidly that cross-sector cooperation was not easy, but they also tried to break through sector barriers, eventually

要社區網絡及社會資本推動社區健康，好讓護士在社區跟進病人個案，與街坊建立關係，在社區解決小病問題，遇上有福利需要者，則轉交社工跟進。他坦言，跨界別合作不容易，但亦嘗試打通界別限制，結果孕育出「醫、福、社」合作服務模式，一屋邨一護士計劃更成為護士課程的教材。

gestating the medical-welfare-social cooperative service model. The One Estate One Nurse Project has even become teaching material for the nursing curriculum.

In the recent 10 years, KTSCCHA further expanded primary healthcare services. "KTSCCHA's 10th anniversary seminar invited Mrs. Carrie Lam Cheng Yuet-ngor (the then Chief Secretary). When I was giving the welcome speech, I asked her on the spot whether the Signature Project Scheme (SPS) could be changed from construction projects to developing community services instead. Unexpectedly, she responded with strong support right away, saying not necessarily construction, developing community services was permissible." Mrs. Lam's one promise made the Kwai Tsing District develop a distinctive Signature Project.

In 2013, the government reserved 100 million dollars for each district to implement SPS. The Kwai Tsing District chose to provide diversified

時至近 10 年，協會進一步拓展基層醫療服務，「協會 10 周年研討會邀得（時任政務司司長）林鄭月娥出席，我臨場在致歡迎辭時問她社區重點工程計劃可否不興建工程，改為發展社區服務，豈料她隨即回應十分支持，可以發展社區服務。」林太的一句承諾，令葵青區發展出不一樣的「社區重點項目」。

政府在 2013 年為每區預留 1 億元推行「社區重點項目計劃」，葵青區選擇提供多元的社區健康服務，包括設立社區健康中心作疾病預防、牙科服務、眼睛健康檢查等，而協會正是計劃的關鍵性伙伴團體，周奕希亦代表葵青區多次出席立法會申請撥款，結果葵青區成為 18 區首個獲得立法會撥款的地區。

協會扎根社區，以人為本，由推動「安全社區」計劃，發展成為「社區重點項目計劃」的關鍵性伙伴團體，再進一步拓展成為全港首間地區康健中心的營運機構。周奕希認為每一步都走得不容易，葵青地區康健中心更在試驗中成長，幾經努力下，目前發展漸上軌道，未來更希望成為社區基層醫療服務的領頭羊。

領頭羊默默向前，辛勞了 20 年的周奕希先生尚未停步，對協會的未來仍有滿腹大計，期盼繼續致力在葵青區推動基層醫療發展，造福區內居民。

community health services including disease prevention, dental services, eye examinations, etc. KTSCHCA was a partner group of the scheme. Chow, representing the Kwai Tsing District, also attended Legislative Council meetings many times to fight for appropriation. As a result, Kwai Tsing became the first among 18 districts to have funds allotted by Legco.

Rooted in the community, the people-oriented KTSCHCA started by promoting Safe Community, developed to become an SPS partner group, and further expanded to be the operator of Hong Kong's first District Health Centre. Chow believed that each step was not easy. The Kwai Tsing District Health Center has grown through experiments. With much effort, the current development is gradually on track, and it hopes to become the leader of primary healthcare services in the future.

The leader is moving forward silently. Having worked hard for 20 years, Chow has yet to stop. He still holds big plans for KTSCHCA's future. He hopes to continue striving to promote primary healthcare development in Kwai Tsing and benefit residents in the district.



▲ 協會 10 周年研討會邀得時任政務司司長林鄭月娥（左二）出席，周奕希（右二）臨場問她社區重點工程計劃可否不興建工程，改為發展社區服務，豈料她隨即回應十分支持，最終葵青區發展出不一樣的「社區重點項目」。

見證安全社區誕生 創會副主席李志強感滿足

Founding Vice Chairman Lee Chi-keung Alan witnessed the birth of a safe community



▲ 葵青安全社區及健康城市協會創會副主席李志強表示，葵青區獲確認為安全城市後，即在區內豎立牌子。

由化工公司走進區議會，再創立葵青安全社區及健康城市協會（下稱協會），協會副主席李志強見證葵青區內設施一步步改善，輪椅無法通達的地方加了斜道，長者常用之處亦加了扶手欄杆，結果意外少了，街坊生活也更便利。李志強坦言，每次改善設施都可減少受傷，並改善街坊生活，滿足感油然而生。

李志強與協會主席周奕希於 90 年代初並肩在葵青擔任區議員，後來獲悉世界衛生組織推動安全社區計劃，便以區議會的名義參與，大概在 2000 年啟動工作，「我負責工作委員會，處理取認證的工作，那時召集了油庫、化工廠、巴士公司等，許多公司一起合作。」

按照世衛的要求，李志強說當時選定了交通安全、工業安全及家居安全作為提升安全的範疇，「那時去碼頭、油庫參觀，研究石油化工業如何提升安全，又與警方合作，每兩個月訂出報告，羅列葵青區交通意外地點、意外種類、成因等，是司機問題，還是機件問題？哪裡意外最多？哪裡是黑點？詳細列出交通黑點，又在有需要地方加紅綠燈、斑馬線。」

From a chemical company to a district council, then founding KTSCHCA, Vice Chairman Lee Chi Keung Alan has witnessed gradual improvements to facilities in the Kwai Tsing District: where wheelchairs could not access, ramps have been added; and handrails have been added to places frequented by the elderly. As a result, there are fewer accidents, and residents enjoy more convenience in their life. Lee said every improvement to facilities reduces injuries and improves district residents' lives; a sense of satisfaction thus arises spontaneously.

Lee and KTSCHCA Chairman Chow Yick Hay worked side by side as district board members in Kwai Tsing in the early 90s. Later, learning that the World Health Organization was launching a safe community project, they joined under the name of the district board, and started working around 2000. "I was responsible for the working committee, dealing with tasks of getting accreditation. At that time, I convened oil depots, chemical plants, bus companies, etc. Many companies worked together."

Based on the requirements of WHO, Lee said they picked traffic safety, industrial safety and home safety as arenas to improve safety at that time. "We visited piers and oil depots to study how to enhance safety in the chemical industry. We also cooperated with the police, and produced a bimonthly report listing locations of traffic accidents in Kwai Tsing, the types of accidents, causes, etc. Was it the driver's fault, or a mechanical problem? Where did accidents occur most often? Where were the black spots? Traffic black spots were listed in detail. Traffic lights and zebra crossings were added where they were needed."

To encourage citizens to obey traffic regulations in crossing roads, Lee recalled holding "Safe Pedestrians Elections." Policemen and members of the relevant working committee were deployed at traffic black spots. "Receiving a certificate was

為了鼓勵市民過馬路時遵守交通規則，李志強憶述當時曾舉辦「安全行人選舉」，由警員及相關工作委員會委員駐守交通黑點，「例如葵興斑馬線，按正確交通燈過馬路的，便頒獎給他，一張證書，已令人好開心，以後會看著交通燈過馬路。」

「世衛要求兩年內將意外率改善 30%，最初要做個基數，然後在交通、工業及家居逐一推出改善計劃，結果兩年後真的做到了。」李志強稱，葵青區獲確認為安全城市後，相關工作交由當時新成立的葵青安全社區及健康城市協會持之以恆。

協會因應社區狀況推出創新而又實用的安全計劃，「當時家居意外佔最多，不少人跌倒、有火警、弄傷手腳等，好多時在家居環境發生，因此與瑪嘉烈醫院合作，在該院開設社區健康資源中心，其中一部份裝修得像公屋，有防倒瀉餐具，有安全傢具，教育市民如何防範家居意外；另設模範廚房，可開設班組教健康煮食；又有 Memory Corner，放了舊傢俬，讓患有認知障礙的長者回憶舊時，以控制病情。」

除了推動安全社區發展，協會亦致力提升基層市民的健康，「住私樓的人有好多方法改善生活，我希望公屋都可以，因此在長青邨租了兩個社福單位，並籌得幾十萬元資助，成立屋邨會所。」李志強口中的「屋邨會所」是 2004 年開設的「青衣社區健康中心」，內有跑步機等健身器材，又有按摩椅，並備有自助血壓檢測儀器，方便街坊保持運動和監測健康情況。



▲ 2004 年開設的「青衣社區健康中心」位於長青邨。

a delightful surprise for anyone who crossed the road at Kwai Hing Zebra Crossing according to the correct traffic light. That guy would observe the traffic light while crossing the road in future."

"WHO requires a 30% improvement in accident rate within two years. At first, base figures had to be recorded and improvement plans introduced in traffic, industry and home one by one. At the end, we really achieved two years later." Lee said that after Kwai Tsing District was recognized as a safe city, related work was handed over to the then newly-founded KTSCHCA to pursue in the long term.

In response to circumstances in the district, KTSCHCA launched innovative and practical safety plans. "At that time, most accidents happened at home. Many people fell down, fires broke out, hands and feet were injured, etc. These often happened in the domestic environment. Therefore, we cooperated with Princess Margaret Hospital by opening a community health resources centre there. Part of it was furnished like public housing, with tip-proof tableware and safe furniture, to educate citizens how to prevent accidents at home; a model kitchen was also set up for classes to teach healthy cooking. And there was a Memory Corner with old furniture for cognitively impaired elderly people to reminisce about old days in order to keep their disease in check.

Apart from promoting the development of a safe community, KTSCHCA also strives to improve the health of grassroots citizens. "There are many ways for private housing occupants to improve their lives. I hope those in public housing can do too. Therefore, we rented two community welfare units in Cheung Ching Estate and raised several hundred thousand dollars in subsidies to establish an estate clubhouse." The estate clubhouse Lee mentioned was the Tsing Yi Community Health Centre, opened in 2004 and furnished with fitness equipment such as treadmills, massage chairs and self-help blood pressure detection devices, which would enable district residents to keep doing exercises and monitor health conditions.



▲「青衣社區健康中心」內有跑步機等健身器材，又有按摩椅，並備有自助血壓檢測儀器，方便街坊保持運動和監測健康情況。

在社區推動健康計劃，不但造福街坊，對李志強來說也有意外得著，「有次同街坊量度血壓，順道為自己量度，豈料有 160 幾。」當時年僅三、四十歲的李志強身兼兩職，既要在化工公司上班，不時要出外公幹，又要肩負區議員的職務，每日只睡 5、6 小時，生活壓力十分大。他本來沒有任何病徵，從沒想過自己那麼年輕便出現高血壓，幸及早發現和求醫。

看著社區環境逐步改善，李志強感覺十分滿足，「以前來入住的，個個都是新婚夫婦，現在個個都七老八十，年青夫婦沒有太多需要，只需購買日常所需，但對老人家來說，一級六吋，無法踏上去就是無法外出。」

展望未來，李志強期望協會工作「貴精不貴多」，面對高齡人口，目前最重要是提升市民健康，持續協助市民預防疾病，並加強與學術機構合作研究，推動具有啟發性的服務，繼續締造安全又健康的葵青社區。

Promoting health programs in the community has not only benefited district residents but also brought Lee some unexpected gains. "I once measured blood pressure for district residents, and took the opportunity to measure my own. The reading was 160 plus to my surprise." Aged in his 30s at that time, Lee took on two jobs, both working at a chemical company, overseas occasionally, and taking on the responsibilities of a district councilor. He slept only five to six hours per day and was under a lot of stress. He didn't have any symptoms beforehand, and he never thought he would develop high blood pressure at such a young age. Fortunately, he found out early and sought medical treatment.

Seeing gradual improvements to the community environment, Lee has a strong sense of satisfaction. "In the past, all those who moved in were newlyweds. They are now more than 70 or 80 years old. Young couples do not have too many needs other than daily necessities. But for elderly people, if a step is six-inch high and they can't step on it, they simply can't go out."

Looking forward, Lee stressed the importance of quality rather than quantity as far as KTSCHCA's work is concerned. In view of the old-age population, it is most important at present to enhance citizens' health, continuously help them prevent diseases, strengthen cooperation with academic institutions on research to promote inspiring services, thus continuing to create a safe and healthy Kwai Tsing community.



▲李志強積極參與協會工作，致力推動健康活動。

創先篩查視網膜病變 造福糖尿病人 Pioneer in Diabetes Retinopathy Screening

葵青安全社區及健康城市協會（下稱協會）自2005年12月開始與香港理工大學視光學系開創先河，合辦「糖尿病視網膜病變篩選檢查服務」，為區內糖尿病人盡早識別早期視網膜病變，並及早作轉介和治療。

服務於2006年5月全面推展，糖尿病患者先由家庭醫生轉介到荔景「社區結合保健中心」，然後只需繳付80元，便可由視光師作視網膜檢查，並進行眼底拍攝。病者獲取相片及報告後，可交予醫生作進一步診斷。

截至2012年9月，共31,781名糖尿患者透過此項計劃檢查，當中22.13%被診斷出現輕微至中等程度的糖尿病視網膜病變，少於1%為嚴重個案。中心除提供檢查服務外，亦是教育培訓場地，病者的數據亦提供予日後研究。

The diabetes retinopathy screening service was a joint venture with the School of Optometry at the Hong Kong Polytechnic University from December 2005. Its purpose is to provide early detection of eye problems and prevent blindness in later stages for people with diabetes in Kwai Tsing.

The service was fully operational as of May 2006. Clients were referred by Family Physicians to the Lai King Integrated Clinic for retinal photography. Each client only needed to pay \$80 and receive a photograph and report from the optometrist for further follow-up.

As of September 2012, a total of 31,781 patients had used the service. Of these, 22.13% were found to have mild to moderate diabetic retinopathy, while less than 1% were severe cases. The clinic not only provided the public with retinal assessment services, but also served as a training site for healthcare professionals. The data collected from this clinic would be analyzed and used as a reference for future research.



葵青區率先研發「傷害監察系統」

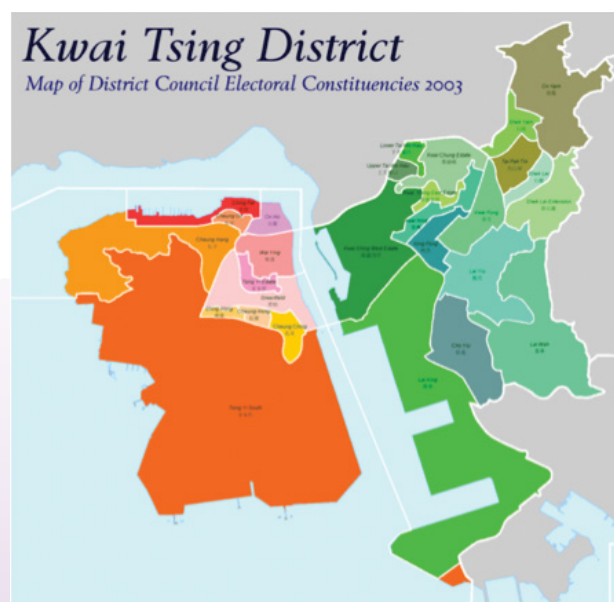
Kwai Tsing District Took the Lead in Developing Injury Surveillance System

早於 2003 年 9 月，瑪嘉烈醫院已率先依據世衛及疾病控制及預防中心的指引，試行分析急症室求診個案。及後，葵青安全社區及健康城市協會（下稱協會）聯同香港理工大學和瑪嘉烈醫院，在職業安全健康局的資助下，成功設計一套「傷害監察系統」。

在 2006 年獲得葵青區議會和葵青民政事務處協助，新一代「傷害監察系統」附設電子地圖，分析和整合瑪嘉烈醫院急症室求診個案，並以地圖綜合顯示個案發生的地點。分析結果有助政府部門及志願團體制訂預防意外的政策。該系統廣獲本地和國際稱許，除了在 2009 年榮獲「香港資訊科技獎」，亦得到亞洲科技獎項。

As early as September 2003, the Princess Margaret Hospital had already taken the lead in analyzing emergency room cases in accordance with guidelines from the World Health Organization and the Centers for Disease Control and Prevention. Subsequently, the Kwai Tsing Safe and Healthy City Association, together with the Hong Kong Polytechnic University and the Princess Margaret Hospital, successfully designed an Injury Surveillance System with funding from the Occupational Safety and Health Council.

With the assistance of the Kwai Tsing District Council and the Kwai Tsing District Office in 2006, the next generation Injury Surveillance System was equipped with an electronic map to analyze and integrate emergency room cases from Princess Margaret Hospital, and to display the occurrence locations of cases on the map. The analytical results helped government departments and volunteer organizations formulated accident prevention policies. The system had been widely praised both locally and internationally and was awarded the "Hong Kong ICT Awards" in 2009 and recognized with an Asian technology award.



QK 部落關顧青年 周鎮邦醫生倡議不標籤

QK Blog Cares about Youth

Dr. Chow Chun-bong Advises against Labelling



▲ 周鎮邦醫生在協會 10 周年研討會上匯報「QK 部落」的工作。

青少年的身心健康是健康城市不可缺少的一環，葵青安全社區及健康城市協會（協會）於 2009 年成立專責輔導青少年的「QK 部落」。部落幕後功臣、協會董事周鎮邦醫生表示，「QK 部落」透過「醫、校、社」合作篩查，過程中致力避免標籤效應，並盡力保障學生私隱，結果讓他們放心透露難以啟齒的吸毒、性行為及抑鬱等問題。

為支援學校推行「健康校園」政策，協會聯同葵涌醫院和瑪嘉烈醫院於 2009 年 9 月成立青少年健康資源中心，名為「QK BLOG (QK 部落)」，QK 既代表「Queen」及「King」，也意味「Quit K 仔」。「QK 部落」起初設於長青邨社區中心，後來遷至荔景邨日景樓，中心設有體適能設備，配合計劃為學生評估。

「我一直好關心青少年問題，最好方法在學校做，因為他們要返學，在學校就可以覓得需要幫忙的學生。」本身是兒科專科醫生的周鎮邦一直關注青少年問題，因此致力參與「QK 部落」的工作。他指「QK 部落」廣獲支持，除了馬會、禁毒基金等資助，還有不少社福機構及學校支援。



▲ 「QK BLOG (QK 部落)」的 QK 既代表「Queen」及「King」，也意味「Quit K 仔」。

Young people's physical and mental health is an indispensable part of a healthy city. In 2009, the Kwai Tsing Safe Community and Healthy City Association (KTSCHCA) launched QK Blog, dedicated to counseling young people. According to the blog's behind-the-scene hero, KTSCHCA Director Dr. Chow Chun-bong, by means of medical-school-community cooperation in screening, striving to avoid any labelling effect during the process and safeguard students' privacy, the QK Blog has succeeded in making youths feel at ease enough to disclose unmentionable problems such as drug abuse, sex and depression.

To help schools implement the "Healthy Campus" policy, KTSCHCA joined forces with Kwai Chung Hospital and Princess Margaret Hospital in September 2009 to set up a youth health resources centre called QK Blog. QK not only stands for Queen and King but also means "Quit Ketamine". QK Blog, initially set up in the Cheung Ching Estate Community Centre, was later moved to Yat King House, Lai King Estate, and installed with physical fitness equipment to tie in with plans to evaluate students.



▲「QK 部落」於 2009 年開幕，周鎮邦醫生（左一）、「QK 部落」醫務總監趙莉莉醫生（右三）和協會主席周奕希（右一）與一眾葵青區議員，包括現任民政及青年事務局局長麥美娟（左三）一同見證服務起步。

「那時要處理吸毒，要我們找吸毒的學生出來，我話『唔好咁』，找他出來等如標籤了他，說他吸毒，這樣做不行。」深明青少年心態的周鎮邦想出妙計，以問卷篩查，除了直接問學生有否吸毒、抽煙，還評估學生的精神健康及體適能情況，「加了問開不開心、肥胖，又問生活質素。」

為取得青少年的信任，周鎮邦說篩查過程十分尊重他們的私隱，他們承認吸毒等問題後，不會轉告學校，因此學生都放心透露心事，「問卷取得一堆數據後，會讓學生去 QK 中心評估，除了吸毒，還有肥仔，有些是不開心，亦有抽煙、性行為。」

周鎮邦表示，學生到中心會接受醫護評估，如發現嚴重抑鬱者會轉介醫院精神科跟進，其他情況輕微則交由社工跟進。

「治療方面不是直接告訴學生要去治療，而是搞些活動給他們參與。找到肥仔出來，就給他們營養和運動知識，重新學體適能，又有儀器玩，有趣一點。」周鎮邦稱，肥胖學生在校較少機會參與體育活動，因此特別與學校溝通，讓體胖學生也多運動。

除了身心健康，周鎮邦說「QK 部落」後來還會為學生提供生涯規劃，「我在瑪嘉烈醫院工作，獲得護理部門支持，安排學生來探訪醫院，向他們介紹醫院運作，介紹不同職系，不是說要他們做醫生、護士，只是讓他們了解一下不同行業。」

"I have been very concerned about adolescent problems. The best way is to do it in schools, because adolescents have to go to school. Students who need help can be found in schools." Being a pediatrician himself, Dr. Chow has been concerned about adolescent problems so he is committed to participating in work on QK Blog. He said QK Blog had received popular support. Apart from subsidies from the Jockey Club, the Beat Drugs Fund etc., it was backed by numerous social welfare organizations and schools.

"At that time, we were dealing with drug abuse. We were asked to seek out students who took drugs. I said, 'Better not.' Identification is equivalent to being labelled as a drug addict. It won't work." Dr. Chow, who has a deep understanding of adolescents' mentality, thought of a clever plan to screen with questionnaires. In addition to asking students directly whether they took drugs or smoked, their mental health and physical fitness conditions were also evaluated. "Questions on whether they were happy or overweight were added. We also asked about their quality of life."

In order to gain youths' trust, Dr. Chow said their privacy was well respected during the screening process. After they confessed to taking drugs, their school would not be notified. Therefore, students would rest assured to reveal their minds. "Having got a heap of data from the questionnaires, we would ask the students to go to the QK centre for evaluation. Not only drug abusers, there were also fat boys; some were unhappy, some smoked, some engaged in sex."

Dr. Chow said students would be evaluated by medical staff when they came to the centre. If they were found to be severely depressed, they would be referred to the psychiatric department of a hospital for follow up. Other minor cases would be handed over to social workers for follow up.

"As for treatment, we don't directly tell the students to receive treatment. We'd organize activities for them to participate in. We seek out fat boys to give them nutrition and sports knowledge. Let them re-

協會除了走進學校協助有需要的學生，也聯同學校及地區人士改善社區環境，「荔景山有好多山路，又住了許多老人家，怎麼辦呢？有區議員找學校、學生走遍整個山，那處黑暗、那處輪椅無法到達，全都找出來。」周鎮邦表示，市民遇意外入醫院，醫護問其意外地點，未必會知實際情況，但協會聯同學校及地區的力量，卻可向政府反映，逐步改善社區環境。

參與協會工作多年，周鎮邦坦言健康教育及預防疾病的工作半點不容易，「取得資金提供服務，就要講服務數字，但有些東西無法數出來。你推動健康，叫人減肥，最後要好多年才會見到成果，今日做的工作，要十年、廿年後才見到結果。」

即使成果並非立竿見影，周鎮邦始終樂見協會持續推動安健社區的工作，「人在社會老有所養，老有所依，才可在社區開心生活。」



▲「QK 部落」為學生提供戶外康體活動，以強身健體。

learn physical fitness, and play with equipment. This is more interesting." Dr. Chow said there were fewer opportunities at school for fat students to take part in sports activities so they specifically communicated with schools to let fat students do more exercises.

Apart from physical and mental health, Dr. Chow said QK Blog also offered career planning for students later. "I work at Princess Margaret Hospital. With the support of the nursing department, we arranged for students to visit, introducing to them how a hospital operated and staff in various positions. We did not ask them to become doctors, nurses; just to let them learn about different trades."

Besides entering schools to assist students in need, KTSCHCA also joins forces with schools and local people to improve the community environment. "There are many mountain roads on Lai King Hill and many elderly people live there. What should we do? Some district councilors got in touch with schools, had students walk over the entire hill to seek out all the locations which were dark, inaccessible to wheelchairs." Dr. Chow said, when residents were admitted to hospital after accidents, medical personnel who enquired about the accident locations would not necessarily know the actual circumstances. But KTSCHCA, working together with schools and the local community, could reflect the situation to the government and gradually improve the community environment.

Having worked with KTSCHCA for many years, Dr. Chow admitted that health education and disease prevention was not easy at all. "After obtaining funding to provide services, you've got to tell service figures. However, there is something that cannot be counted. You promote health, ask people to reduce weight. In the end, it takes years for the accomplishments to show. It takes 10 to 20 years for the result of the work done today to become visible."

Even though results are not immediate, Dr. Chow is delighted to see KTSCHCA continuously promote work towards a safe and healthy community. "People can live happily in the community only when the elderly are taken care of and have someone to depend on."

「社區重點項目」奠基層醫療服務基礎 Signature Project Scheme Laid the Foundation for Primary Healthcare Services

2013年《施政報告》宣布推出「社區重點項目」計劃，為每區預留一次性一億元撥款，支援區議會各自提出的發展計劃，以回應地區需要或彰顯地區特色，並在地區達致明顯和長遠成效。作為計劃的伙伴團體，葵青安全社區及健康城市協會（下稱協會）竭力推動社區健康服務，為葵青區的基層醫療發展奠下基礎。

協會自2014年10月開始推行「葵青社區重點項目」計劃，在過去近9年透過跨專業、跨部門的「醫、福、社」協作模式，在葵青區為居民提供專業及優質的基層醫療服務，並開設5間社區健康中心，以便為居民進行健康評估。



▲「葵青社區重點項目」計劃下的新冠康復者中醫診療提供一條龍服務，包括診症、執藥、煎藥及送藥上門，深受居民歡迎。

「葵青社區重點項目」計劃起初訂立六大發展範疇：

1. 眼睛檢查、眼科醫生診症、白內障手術資助
2. 中醫診所、護士諮詢、物理治療
3. 健康評估、健康教育
4. 愛心探訪改善家居、安全環境資助
5. 流感疫苗注射
6. 為葵青居民提供優質、專業的愛心服務

The 2013 Policy Address announced the launch of the Signature Project Scheme, under which one-off funding of \$100 million was earmarked for each district to support their respective development projects that respond to district needs or highlight district characteristics, and achieve visible and long-term results in the districts. As a partner organization of the project, the Kwai Tsing Safe Community and Healthy City Association (KTSCHCA) was committed to promoting community health services, laying the foundation for the development of primary healthcare in Kwai Tsing.

KTSCHCA has been implementing the Kwai Tsing Signature Project since October 2014. Over the past nine years, the association has been providing professional and quality primary healthcare services to residents in Kwai Tsing through a multi-disciplinary and inter-departmental "medical, welfare and social" collaboration model, and has set up five district health centres to facilitate health assessment for residents.

The Kwai Tsing Signature Project initially set out six major development areas:

1. Eye examination, ophthalmologist consultation, cataract surgery funding
2. Chinese medicine clinic, nurse consultation, physiotherapy
3. Health assessment, health education
4. Caring visits and funding for improving home safety
5. Influenza vaccination
6. Quality and professional services for Kwai Tsing residents

As public needs for healthcare services changed, the association continued to innovate. Starting in February 2023, KTSCHCA has been providing mobile

隨著市民對醫療服務需求的轉變，協會不斷推陳出新，於 2023 年 2 月起為不受政府牙科保健計劃保障的中學生，提供流動牙科服務，派出牙科車到校園，免費為學生檢查牙齒、洗牙及補牙，務求在社區為基層醫療服務補漏拾遺。

此外，「葵青社區重點項目」計劃亦協助葵青居民應對 2019 冠狀病毒疫情，於 2022 年 10 月起免費為新冠康復者提供中醫診療，以紓緩咳嗽、失眠、氣喘及記憶力轉差等長新冠後遺症。有別於坊間的中醫診療，協會的長新冠中醫診療提供診症、執藥、煎藥及送藥等一條龍服務，患者診症後只需安坐家中，便可收到預先包裝的藥湯，結果服務大受歡迎，協會亦因應需求與葵青民政事務處磋商擴大服務量，由原本服務 1,500 人次增加至 3,696 人次。

「葵青社區重點項目」計劃預計會於 2023 年年底完結，葵青民政事務專員鄧顯權在計劃的服務宣傳片表示，這個計劃是地區基層醫療服務的先鋒，葵青民政事務處會繼續與伙伴機構做好地區工作，並繼續支持基層醫療服務。



▲ 為了解新冠康復者中醫診療服務，葵青民政事務專員鄧顯權親自上門送藥。



▲ 葵青安全社區及健康城市協會透過「葵青社區重點項目」為非受資助居民，提供流感疫苗注射服務。



▲ 「葵青社區重點項目」計劃為區內低收入家庭的學童，提供免費近視控制眼鏡驗配服務。

dental services to secondary school students, who are not covered by the government's dental care program. Its dental clinic visits school campuses to provide free dental checkups, scaling, and fillings for students in order to fill in the gaps in primary healthcare services in the community.

In addition, the Kwai Tsing Signature Project has also helped Kwai Tsing residents cope with the 2019 coronavirus epidemic by providing free Chinese medicine consultation to recovering Covid patients from October 2022 onwards to alleviate Long Covid after-effects such as cough, insomnia, asthma, and memory loss. Unlike other Chinese medicine clinics in the community, the association's Long Covid Chinese medicine clinics provide one-stop service of consultation, prescription, decoction, and delivery of medication. After the consultation, the patient can simply sit at home and receive the pre-packaged medicine soup. As a result, the service was so well received that the association negotiated with the Kwai Tsing District Office to expand the service capacity from the original 1,500 to 3,696 visits.

The Kwai Tsing Signature Project is expected to be completed by the end of 2023. Kwai Tsing District Officer Mr. Huggin Tang said in the promotional video of the project that the project is a pioneer of district primary healthcare services and the Kwai Tsing District Office will continue to work with partner organizations to do a good job in the district and continue to support primary healthcare services.

重點服務數據

項目	計劃目標	累積服務量
社區健康中心 (2015 年 1 月至 2021 年 3 月 31 日)	健康評估	116,100 人次
	護士諮詢站	9,978 人次
	痛症管理中心	9,879 人次
流感疫苗注射 (2015 年 1 月至 2021 年 3 月 31 日)		18,612 人次
外展健康檢查及健康諮詢服務 (至 2018 年 3 月完成)	健康檢查	70,000 人次
	簡單眼睛健康評估	30,000 人次
	護士健康諮詢	20,000 人次
	藥物諮詢	15,000 人次
新冠康復者中醫診療服務 (2022 年 10 月至 2023 年 8 月)		2950 人次 (截至 2023 年 6 月 30 日)
中學生流動牙科服務 (2023 年 2 月至 8 月)		超過 436 人次 (截至 2023 年 6 月 3 日)

Key Service Data

Projects	Target	Cumulative Service Volume
District Health Centers (January 2015 to March 31, 2021)	Health assessment	116,100 visits
	Nurse Consultation Points	9,978 visits
	Pain Management Centre	9,879 visits
Influenza vaccination (January 2015 to March 31, 2021)		18,612 visits
Outreach Health Screening and Health Consultation Services (completed by March 2018)	Health screening	70,000 visits
	Simple Eye Health Assessment	30,000 visits
	Nurse Health Consultation	20,000 visits
	Medication Consultation	15,000 visits
Chinese Medicine Service for Covid Survivors (October 2022 to August 2023)		2950 visits (As of 30 June 2023)
Mobile dental services for secondary school students (February to August 2023)		436 visits (As of 3 June 2023)

營辦首間康健中心 試點開荒拓服務 Operating the first District Health Centre Brand-new operation mode to expand services



▲ 葵青安全社區及健康城市協會在葵青營辦全港首間地區康健中心，時任特首林鄭月娥到場主持開幕禮。

葵青安全社區及健康城市協會（下稱協會）致力推動以地區為本的健康服務，在過去 20 年來，在醫療、社福及地區等各界合作伙伴支持及協作下，累積了豐富經驗，並共建緊密的地區網絡。為進一步拓展服務，協會於 2019 年參與政府的試點計劃，在葵青區營辦全港首間地區康健中心，成為推動基層醫療發展的開荒牛。

The Kwai Tsing Safe Community and Healthy City Association (KTSCHCA) is committed to promoting district-based health services. Over the past 20 years, with the support and collaboration of medical, social welfare and district partners, it has accumulated abundant experience and built a close district network together. In order to further expand its services, the association took part in the government's pilot scheme in 2019 and ran the first District Health Centre in Hong Kong in Kwai Tsing District, becoming a pathfinder in promoting primary healthcare development.

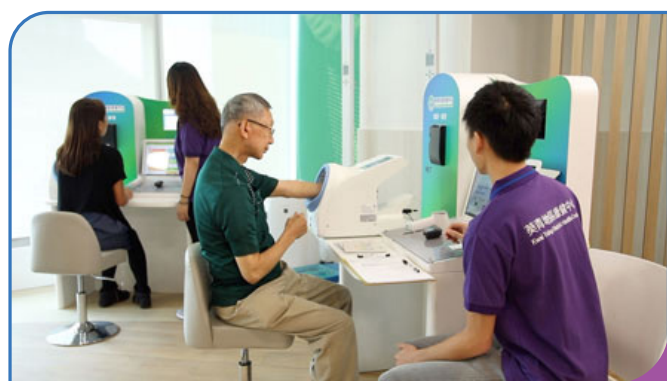


▲ 葵青安全社區及健康城市協會在葵青營辦全港首間地區康健中心，政府官員不時到訪參觀。

In her 2017 Policy Address, the Chief Executive asked the Food and Health Bureau to set up a District Health Centre in Kwai Tsing District within two years to enhance district-based primary healthcare services, with a view to progressively set up District Health Centres in other districts with reference to the experience of the pilot scheme. After open tendering, KTSCHCA was appointed by the Food and Health Bureau in March 2019 to operate District Health Centres, and services began in mid-September that year.

行政長官在 2017 年《施政報告》公布，要求食物及衛生局於兩年內在葵青區設立地區康健中心，加強以地區為本的基層醫療健康服務，並因應有關試點計劃的經驗，逐步在各區設立地區康健中心。經過公開投標後，協會於 2019 年 3 月獲食物及衛生局委任為地區康健中心的營運機構，並於同年 9 月中起投入服務。

葵青地區康健中心以醫社合作、公私營協作及地區為本為原則，旨在加強公眾對疾病預防的意識、提升公眾對個人健康管理的能力，以及為慢性病患者提供支援。為方便居民接受服務，葵青地區康健中心以葵涌九龍貿易中心為主中心，並於長青邨、長亨邨、荔景邨、葵聯邨、石籬（二）邨及大窩口邨設立附屬中心，務求在葵青區不同角落建立完善的服務網絡。



▲ 葵青地區康健中心設有健康監測儀器，供會員使用。

為推動「重預防、治未病、早治療」的基層醫療發展方向，葵青地區康健中心提供一站式、跨專業及個案管理的服務，有關服務大致分為三層：

第一層：以健康推廣、自我健康管理，以及社交支援為主軸，為所有會員提供健康班組活動、講座、心理及社交支援服務、健康大使培訓等；

第二層：透過健康風險評估識別健康風險關注點，訂定個人化健康管理計劃，並特別注重高血壓和糖尿病等慢性病篩查；

第三層：慢性疾病管理，包括高血壓、糖尿病、腰背痛及膝關節痛症等。

Through district-based medical-social collaboration and public-private partnership, the Kwai Tsing District Health Centre aims to enhance public awareness of disease prevention and their capability in self-management of health, and provide support for the chronically ill. To facilitate residents' access to services, the Kwai Tsing District Health Centre comprises a core centre at the Kowloon Commerce Centre in Kwai Chung and subsidiary centres in Cheung Ching Estate, Cheung Hang Estate, Lai King Estate, Kwai Luen Estate, Shek Lei (II) Estate and Tai Wo Hau Estate, striving to establish a comprehensive service network in different corners of Kwai Tsing District.

To promote the primary healthcare development approach of "emphasis on prevention, preventive treatment, and early treatment", the Kwai Tsing District Health Centre provides one-stop, cross-disciplinary and case management services, which are roughly divided into three levels:



▲ 葵青地區康健中心設有健身設施，由物理治療師指導會員使用。

1. The first level: health group activities, seminars, psychological and social support services, health ambassador trainings, etc. are provided for all members, centering on health promotion, self-management of health, and social support;
2. The second level: identify health risk concerns through health risk assessments, devise personalized health management plans, and pay special attention to screening chronic diseases such as hypertension and diabetes mellitus;

完成首3年合約期後，協會兩度獲延續葵青地區康健中心的營運合約，最新營運合約期延至2025年9月16日。隨著醫務衛生局（前身為食物及衛生局）於2022年底公布《基層醫療健康藍圖》，提出進一步發展以地區康健中心服務模式為基礎的地區為本、家庭為中心的社區醫療健康系統，各地區康健中心將統籌由家庭醫生及跨專業支援的健康篩查及慢性病管理。

葵青地區康健中心就《基層醫療健康藍圖》提出的發展方向，積極配合政府準備「慢性疾病共同治理計劃」，盼助市民及早發現糖尿病及高血壓等慢性病，並在地區以跨專業公私營協作模式介入，以減少對專科和醫院服務的需求，達致協會成立的理念，在葵青區與各界攜手共建「健康城市」。

3. The third level: management of chronic diseases including hypertension, diabetes mellitus, back and lower back pain and knee joint pain, etc.

On completing the first 3-year contract, KTSCHCA's operating contract of the Kwai Tsing District Health Centre was twice extended. The latest operating contract period has been extended to September 16, 2025. At the end of 2022, the Health Bureau (previously the Food and Health Bureau) announced the Primary Healthcare Blueprint, which proposed to further develop a district-based and family-centered community healthcare system based on the district health centre service model. District health centres will coordinate health screening and chronic disease management backed up by family doctors and cross-disciplinary professionals.

In light of the development direction put forward by the Primary Healthcare Blueprint, the Kwai Tsing District Health Centre has actively cooperated with the government in preparing the Chronic Disease Co-Care Pilot Scheme, hoping to help citizens detect chronic diseases such as diabetes mellitus and hypertension as early as possible. It hopes to operate through multi-disciplinary, public-private collaboration, and reduce the demand for specialist and hospital services, thus achieving the concept of KTSCHCA's establishment, and joining hands with all walks of life in Kwai Tsing District to build a "healthy city".



▲ 葵青安全社區及健康城市協會在葵青營辦全港首間地區康健中心，立法會議員曾到訪參觀。



▲ 葵青地區康健中心推出多種班組活動，照顧會員的身心健康。

流動牙科診所穿梭社區補漏拾遺 Supplement with Mobile Dental Services

牙齒護理是基層醫療服務不可缺少的一環，但公營牙科服務供不應求，私營牙科服務收費昂貴，未必人人都能負擔定期牙科護理的開支，基層市民尤其難獲牙醫診療。葵青安全社區及健康城市協會（下稱協會）為此出動牙科車穿梭葵青區，為居民提供便捷的流動牙科護理。

協會的牙科車由 13 噸中型貨車改裝而成，面積約為 165 平方呎。牙科車麻雀雖小，五臟俱存，內有牙科儀器、手術牙椅及消毒櫃等，配備可支援牙科檢查、洗牙、補牙、脫牙、照 X 光等服務，以流動牙科診所形式服務居民。

為了方便使用者上落，牙科車的車側和車尾分別設有扶手梯級及輪椅升降板，長者或輪椅用者要進出牙科車都可暢通無阻。

Dental care is an integral part of primary healthcare services. However, public dental services are in short supply and private dental services are so expensive that not everyone, especially grassroots citizens, can afford regular dental care. In view of the situation, the Kwai Tsing Safe Community and Healthy City Association (KTSCHCA) dispatched a dental vehicle to shuttle through the Kwai Tsing District to provide residents with convenient mobile dental care.

KTSCHCA's dental car, converted from a 13-ton medium-duty goods vehicle with an area of about 165 square feet, serves residents in the form of a mobile dental clinic. Although small, it is fully equipped with dental instruments, a surgical chair and disinfection cabinets, etc., sufficient for services such as dental examinations, scaling, fillings, extractions, and X-rays.

To make it easier for users to get on and off, steps with handrails and a wheelchair lifting plate are available on the side and rear of the dental car, which is thus readily accessible to elderly and wheelchair users.



▲ 葵青安全社區及健康城市協會擁有的牙科車，可深入社區不同角落服務居民。



▲ 牙科車設備齊全，並可供輪椅上落。

在流動牙科服務發展策略上，協會以補漏拾遺為目標，照顧不受公營牙科服務保障的市民。政府的學童牙科保健服務以小學生為對象，但學生升中後便無以為繼，不再受公營牙科服務保障，協會因此於 2022 至 23 年度透過「葵青社區重點項目」的資助走進中學，為中學生提供免費牙齒檢查及洗牙等服務，從而培養良好的牙齒護理習慣。

展望未來，協會將繼續因應社會需求提供服務。有見不少長者要通宵輪候政府牙科診所的診症名額，即使牙患嚴重仍難以尋求服務，協會正考慮擴大服務對象至長者，以回應社會需求。

As for the development strategy of mobile dental services, KTSCHCA aims to fill in gaps and pick up missing items, and take care of citizens who are not covered by public dental services. The government's School Dental Care Service is targeted at primary school students, but discontinues after students have entered secondary school, when they are no longer covered by public dental services. Therefore in 2022-23, with funding from the "Kwai Tsing Signature Project", KTSCHCA entered secondary schools to provide free dental check-ups and scaling services for students, so as to cultivate good dental care habits.



▲ 中學生不受政府牙科保健計劃保障，流動牙科診所因此為中學生提供口腔檢查及洗牙服務。

Looking ahead, KTSCHCA will continue to provide services in response to social needs. Given that many elderly people have to queue up overnight for the consultation quota of government dental clinics, and even if their dental disease is severe, they still find it difficult to seek services, KTSCHCA is deliberating on expanding its service target to the elderly in response to social needs.

資深義工：「這裡就像我的第二個家」

Senior volunteer: "It's like my second home here."



▲ 義工玉姐長期在「青衣社區健康中心」服務街坊，她已視此為第二個家。

葵青安全社區及健康城市協會自 2004 年起，在青衣長青邨成立「青衣社區健康中心」，為區內街坊提供健康服務。熱心街坊玉姐自中心開幕初期，一直擔任中心義工，為長者量血壓，鼓勵街坊養成健康生活習慣。十多年以來，玉姐見證協會的成長、屋邨的變遷，社區裡的人情味令她一直保持做義工的熱誠，「我在中心認識到很多街坊，找到生活的樂趣，這裡就像我的第二個家」。

玉姐是青衣社區健康中心的第一代義工，一切源於她對中心服務的認同。「以前經常陪媽媽過來量血壓，我發現中心的服務很好，所以我希望成為義工團隊的一員，為服務區內居民出一分力」。

熱心的玉姐平日朝八晚六到中心為街坊量度血壓，她笑言自己由一個經常留在家的家庭主婦，變成「office lady（辦公室職員）」，「好像每日上班，在這裡我認識到很多街坊，他們大時大節都會過來中心打招呼，不用整天在發悶」。除了做義工，玉姐閒時亦會參與聯誼活動，例如參加唱歌班，以及本地一日遊。

現年 65 歲的玉姐對中心常客瞭如指掌，訪問期間，每有街坊到場量血壓或查詢健康服務，即使記不起對方名字，她仍能即時道出街坊

Kwai Tsing Safe Community and Healthy City Association (KTSCHCA) set up the Tsing Yi Community Health Centre in Tsing Yi's Cheung Ching Estate in 2004 to provide health services to residents in the district. Ah Yuk, an enthusiastic resident of the district, has been serving as a volunteer for the centre since the early days of its opening. She measures blood pressure for the elderly and encourages visitors to cultivate healthy living habits. For more than a decade, Ah Yuk has witnessed KTSCHCA's growth and changes to the estate. The human touch in the community has all along sustained her passion for voluntary work. "I've got to know many residents of the district in the centre and discovered the fun of living. It's like my second home here."

Ah Yuk is a first-generation volunteer of the Tsing Yi Community Health Centre. All has originated from her recognition of its services. "I came here very often with my mother to have her blood pressure measured. I found that the centre provided very good services so I wanted to become a member of the voluntary team and contribute to serving residents in the district."

Ah Yuk is so enthusiastic that she measures blood pressure for residents from 8am to 6pm at the centre. She said in a joyful tone that she has turned from a stay-home housewife to "an office lady." "It's like coming to work everyday. Here I've got to know many residents of the district, who would come to greet me during major festivals. I won't feel bored the whole day." Other than working as a volunteer, Ah Yuk also joins social activities such as a singing class, and one-day local tours when she is free.

Aged 65, Ah Yuk knows the centre's regular visitors very well. During the interview, whenever some residents arrived to have their blood pressure taken or ask about health services, she could tell which building the visitors resided in, even if she could not recall their names. "She lives in Ching Tao House (Cheung Ching Estate). This one lives in Ching Chung House."

所住大廈，「她居住（長青邨）青桃樓，這個街坊是住在青松樓」。

翻開玉姐的相簿，照片根據年份、日期排序。縱使忘記了當日活動詳情，但看到當年並肩作戰的義工朋友，玉姐仍津津樂道。她說，以前經常會到瑪嘉烈醫院進行義工探訪，歷年獲得多個義工嘉許獎項，言談間，玉姐的臉多了一份自豪及喜悅。

長年駐守「青衣社區健康中心」的玉姐，除了助人，也有助自身健康。她笑言自己以前身型屬「肥嘟嘟」，在中心所接觸的健康資訊越來越多，因此下決心改善飲食，由以往多肉少菜，到現在變成多吃蔬菜，結果清減不少。

中心職員黎姑娘說，玉姐逢星期一至六都會到中心擔任義工，「玉姐會同老友記傾偈，老街坊入到來差不多全部都認識她」。玉姐逐漸成為中心的「生招牌」，黎姑娘表示，「好多時街坊之間討論，應該到什麼中心尋求社區健康服務，大部分邨內街坊都會建議去『玉姐那個中心』」。玉姐既是中心的精神支柱，更是定海神針，街坊們每見玉姐即倍感安心。

黎姑娘非常感謝玉姐的無私付出，更盛讚她的工作能大大減輕職員的負擔，「玉姐對量血壓、度高、磅重這些基本常識相當熟悉，樂於與街坊分享健康心得。她亦會幫忙疏導中心人流，指示街坊掃描『安心出行』二維碼，以及派發宣傳單張等，讓職員可以專注工作」。

日復日為街坊量血壓，工作看似簡單，貢獻卻不少，玉姐十分重視這職責，且一直不言休，期望可繼續來當義工，「直至身體條件不允許，做到無得做為止」。



▲義工玉姐常為街坊量血壓，並記錄數據，她已成為「青衣社區健康中心」的生招牌。

In Ah Yuk's photo album, photos have been ordered chronologically. Even if she might forget details of a certain activity, she still enjoyed recalling her volunteer friends who worked side by side then. She said she used to visit Princess Margaret Hospital as a volunteer very often and had been presented with many volunteer recognition awards over the years. While chatting, pride and joy showed on her face.

Having stationed at Tsing Yi Community Health Centre for years, Ah Yuk has not only helped other people but also benefited her own health. She joked that she used to have a "chubby" body shape. As she got in touch with more and more health information in the centre, she was determined to improve her diet. Her previous diet of much meat and few vegetables has now changed to more vegetables. As a result, she has slimmed down a lot.

Ms Lai, a staff member of the centre, said Ah Yuk came to work as a volunteer at the centre from Monday to Saturday. "Ah Yuk would chat with seniors. Almost all elderly residents of the district who come here know her." Ah Yuk has gradually become the centre's "living signboard." Ms Lai said, "Oftentimes when residents discuss which centre they should go to seek community health services, most within the estate would suggest going to 'Ah Yuk's centre.'" Ah Yuk is both the centre's spiritual pillar and tide control pillar. Residents would feel at ease whenever they see her.

Immensely thankful to Ah Yuk for her selfless contribution, Ms Lai also complimented her on reducing a lot of burden on the staff. "Ah Yuk is very familiar with the basics of measuring blood pressure, height and weight. She is happy to share her health tips with residents in the district. She also helps to ease the flow of people in the centre, instructs visitors to scan the QR code of "LeaveHomeSafe" and distribute promotion pamphlets etc., thus enabling staff members to focus on work."

The task of measuring blood pressure day in day out looks simple but means remarkable contribution. Ah Yuk takes this responsibility very seriously. She never talks about retiring and looks forward to continuing her voluntary work. "Until my health conditions do not allow me, I will work until I can't."

峰會匯聚醫福祉智慧 承傳研討共交流 Aggregating Medical-Welfare-Social Wisdom Inheriting the Tradition of Discussing and Exchanging

為推動本港的基層醫療發展，葵青安全社區及健康城市協會（下稱協會）除了在葵青區提供醫療服務，亦致力促進醫護知識交流，為醫療政策集思廣益，並建立研討的傳統，每逢重要會慶年度都會舉辦研討會，以匯聚醫療界、福利界及地區人士等，為基層醫療政策的發展凝聚民間及專業智慧。

經歷了起初 10 年的深耕細作，協會 10 周年研討會以「結伴參與 共建和諧 安健社區」為題，總結推動安健社區的經驗；時至協會成立 15 周年，政府計劃拓展基層醫療服務，並成立地區康健中心，協會以「基層醫療民間高峰會 - 初衷、持續、發展」為題，探討本港基層醫療發展願景。

踏入協會 20 周年會慶，適逢政府推出《基層醫療健康藍圖》（下稱《藍圖》），18 區的地區康健中心及地區健康站亦已陸續投入服務。協會秉承傳統於 2023 年 2 月 11 日舉辦「基層醫療民間高峰會 - 願景、發展、挑戰」，既回顧過去的基層醫療發展，亦展望未來願景。

今次高峰會榮獲推動本港基層醫療發展的始祖、香港大學榮休教授和名譽臨床教授楊紫芝任主禮嘉賓，並邀得協會顧問委員會主席梁智鴻醫生在討論環節擔任主持。

In order to promote primary healthcare development in Hong Kong, the Kwai Tsing Safe Community and Healthy City Association (KTSCHCA) not only provides healthcare services in Kwai Tsing District but also strives to promote medical knowledge exchange and draw on collective wisdom to absorb useful ideas for medical policies. Its practices have gradually formed a tradition of holding seminars on milestone anniversaries which bring together people and experts from the district, medical and welfare sectors to aggregate folk and professional wisdom for developing a primary healthcare policy.

After intensive cultivation for the first 10 years, KTSCHCA's 10th anniversary seminar, with the theme of "Working Together to Develop a Harmonious Safe and Healthy Community," summarized the experience in promoting a safe and healthy community; by the 15th anniversary, as the government planned to expand primary healthcare services and set up District Health Centres, KTSCHCA held a "Primary Healthcare Nongovernmental Summit - Original Intention, Sustainability, and Development" to discuss the vision of primary healthcare development in Hong Kong.

KTSCHCA's 20th anniversary celebration coincided with the government's launch of the Primary Healthcare Blueprint (hereinafter referred to as the Blueprint). District Health Centres and DHC Expresses have also been put into service one after another in the 18 districts. Adhering to tradition, the association held the "Primary Healthcare Nongovernmental Summit - Vision, Development, Challenges" on February 11, 2023, which not only reviewed primary healthcare development in the past, but also looked forward to the future vision.



▲ 楊紫芝教授（中）為基層醫療民間高峰會任主禮嘉賓，並回顧了本港過去 30 年的基層醫療歷程。

楊紫芝教授早在 1990 年領導基層健康服務工作小組發表《人人健康，展望將來》報告書，為日後基層醫療政策提供指引。回首逾 30 年發展，楊教授在高峰會開幕致辭時先為香港醫療系統把脈，由傳染病的監測和控制，談到非傳染病的預防，並帶出電子病歷及家庭醫生為病人進行潛在疾病篩查的重要性，以及缺乏基層醫療醫生所衍生的挑戰。

The summit was honored to have Professor Rosie Young Tse-tse, Emeritus Professor and an Honorary Clinical Professor at the University of Hong Kong and forerunner of Hong Kong's primary healthcare development, as the guest of honor. Dr. Leong Che-hung, Chairman of KTSCHCA's Advisory Committee, was invited to host the discussion session.

As early as 1990, the "Health for All, The Way Ahead" report, which guided the development of the future healthcare policy, was issued by the Working Party on Primary Health Care led by Professor Young. In the opening speech of the summit, Professor Young looked back on more than 30 years' development. She first took the pulse of Hong Kong's medical system, starting from the monitoring and control of infectious diseases to the prevention of non-communicable diseases. She drew attention to the importance of electronic medical records and family doctors in screening patients for latent diseases and challenges stemming from the lack of primary healthcare doctors.



▲ 基層醫療民間高峰會匯聚醫學專家、地區代表及福利界人士，就基層醫療發展交流意見。



▲ 基層醫療民間高峰會邀得醫學界及醫療融資的專家一同集思廣益，參與的講者包括梁智鴻醫生（左起）、雷操爽教授、羅振邦醫生、林哲玄醫生、楊紫芝教授、陳肇始教授、卞兆祥教授，以及阮博文教授。

In 2019, Hong Kong began to set up District Health Centres. Professor Young said, "Now that District Health Centres have been established, all primary healthcare and rehabilitation services can be linked up. We have done a lot of work, but very slowly, bit by bit, like "squeezing toothpaste." The Blueprint released at the end of 2022 proposed to establish a comprehensive management structure to supervise and support public and private medical service providers to provide primary healthcare services in the community. Professor Young would be glad to see developments. However, she felt that many challenges existed, including changing the culture of "going to a specialist for minor illnesses" and dealing with expensive private medical expenses, etc. In future, statutory government agencies would have to tackle these one by one and promote collaboration by doctors in both public and private sectors.

直至 2019 年，本港開始設立地區康健中心，楊教授說：「現已增設地區康健中心，所有基層醫療、復康服務可連繫起來，我們已做了很多工作，但做得好慢，一點一點做起來，好像『擠牙膏』。」2022 年底公布的《藍圖》提出建立一個全面管理架構，以督導和加強公私營醫療服務提供者在社區提供基層醫療服務，楊教授樂見其成，但她認為當下仍面對不少挑戰，包括要改變「患小病去看專科」的文化、處理昂貴的私營醫藥費等，未來需要法定的政府機構逐一下功夫，並推動公私營醫生合作。

承接楊教授的回顧，香港大學護理學教授、校長辦公室資深顧問、食物及衛生局前局長陳肇始亦話當年。正當楊教授於九十年代出任基層健康服務工作小組主席之時，前特首林鄭月娥女士為該小組擔任秘書，陳教授則是碩士生，並以《人人健康，展望將來》報告書作論文。直至 2017 年，林太出任特首，陳教授當上局長，昔日未完的使命得以再續。

陳教授於 2017 至 2022 年執掌食物及衛生局期間，推動在 18 區設立地區康健中心，並孕育及完成《藍圖》。她憶述當初的構思，地區康健中心是一個資源中心，除了提供服務，亦擔當健康教練、公共衛生倡導者的角色，協調醫療、社福及各公私營單位，以令社會資源最大化。

《藍圖》當初草擬時，計劃五大發展方向，陳教授指出當中包括建立社區基層醫療系統、加強基層醫療服務管理、整合基層醫療健康資源、規劃基層醫療人手，以及改善數據互通及健康監測。上屆政府構思的改革由本屆政府來延續，陳教授喜見今天的成果，並對《藍圖》抱有極大期望，盼可為未來發展勾畫策略性路線圖。

Following Professor Young's review, Sophia Chan Siu-chee, University of Hong Kong's Professor of Nursing, Senior Advisor to the President's Office and former Secretary for Food and Health, also talked about those years. When Professor Young served as chairwoman of the Working Party on Primary Health Care, former Chief Executive Mrs. Carrie Lam Cheng Yuet-ngor served as secretary of the party. Professor Chan was then a master student and wrote a thesis on the report "Health for All, The Way Ahead". Then in 2017, Mrs. Lam became the Chief Executive, and Professor Chan became the bureau chief. The unfinished mission of the past could thus continue.

In charge of the Food and Health Bureau from 2017 to 2022, Professor Chan promoted the establishment of District Health centres in 18 districts, and gestated and completed the Blueprint. She recalled the initial idea of the District Health Centre being a resource hub, which would not only provide services, but also assume the role of a health coach and public health advocate, coordinating medical care, social welfare, and various public and private units to maximize social resources.

When the Blueprint was first drafted, five major development directions were planned. Professor Chan pointed out that these include developing a community-based primary healthcare system, strengthening primary healthcare governance, consolidating primary healthcare resources, reinforcing primary healthcare manpower, and improving data connectivity and health surveillance. The reform conceived by the previous government is being carried on by the current government. Professor Chan was delighted to see today's results, and held great expectations for the Blueprint to serve as a strategic roadmap for future development.

未來願景 Future Vision

葵青安全社區及健康城市協會（下稱協會）以打造「安全社區」和「健康城市」為起點，一路走來 20 年。協會將繼續秉承「醫、福、社」跨專業協作的宗旨繼往開來，扎根葵青社區為居民服務，並盼因應社會轉變及最新需求規劃服務，以助居民在人口老化的社會獲得優質的健康服務支援，推展基層醫療服務，打造「安健葵青」。

有別於 20 年前，香港人口急速老化。據統計處的人口普查，隨著戰後嬰兒踏入晚年，本港 65 歲及以上的長者人口佔整體人口比例由 2001 年的 11%，升至 2021 年的 20%，即每 5 名香港人就有一人是長者。《香港人口推算 2020-2069》更推測，撇除外籍家庭傭工，2039 年的長者人口比例會升至 33%，即屆時每 3 名香港人就有一人是長者。

支援居家安老

長者比例持續上升令安老院舍及公營醫療系統不勝負荷，2022 年爆發的第五波新型冠狀病毒疫情更曝露院舍及公立醫院的崩潰狀態，無法妥善照顧所有染疫長者，以致死亡人數急升。

面對上述困境，未來老齡人口難以完全倚賴院舍及公立醫院來照顧，居家安老將是無可避免的出路。協會長年扎根社區，未來盼可肩負協助長者居家安老的使命，在社區提供各項健康支援。



The Kwai Tsing Safe Community and Healthy City Association (KTSCHCA), which started by building a safe community and healthy city, has come a long way in 20 years. The association will continue to uphold the tenet of "medical, welfare, social" interdisciplinary collaboration, carry on the past and forge ahead into the future, take root in the Kwai Tsing community to serve residents, look forward to planning services in response to social changes and the latest needs, in order to help residents obtain high-quality health services support in an aging society, and promote primary healthcare services to create a Safe and Healthy Kwai Tsing.

Unlike 20 years ago, the Hong Kong population is aging rapidly. According to the census of the Census and Statistics Department, as post-war babies entered their later years, the proportion of those aged 65 and above in the entire population in Hong Kong has risen from 11% in 2001 to 20% in 2021, that is, one in every five Hongkongers is a senior. Hong Kong Population Projections 2020-2069 has even inferred that, discounting foreign domestic helpers, the proportion of the elderly population in 2039 would rise to 33%, that is, one in every three Hongkongers would be a senior by then.

Support for Caring the Elderly at Home

As the proportion of the elderly continues to rise, elderly homes and the public medical system are being strained beyond capacity. The fifth wave of the Covid outbreak in 2022 exposed the condition of how the elderly homes and public hospitals were breaking down, incapable of properly caring for all the infected seniors, resulting in a rapid rise in deaths.

Faced with the abovesaid plight, it will be difficult for the elderly population to fully rely on nursing homes and public hospitals for care in the future. Caring for the elderly at home will be an inevitable

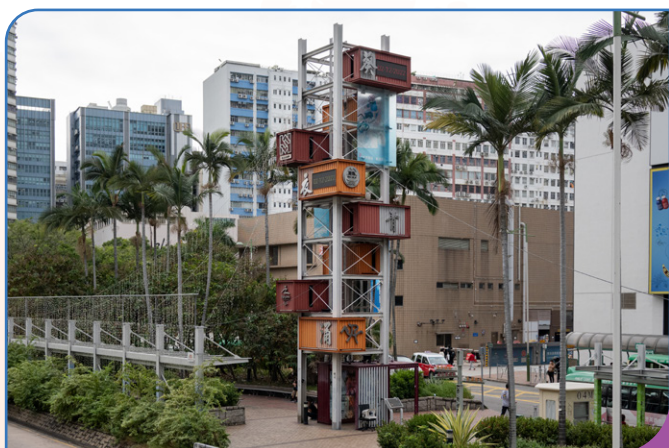


除了協助長者管理長期病，協會盼未來服務亦可推廣「治未病」，教育市民預防疾病的重要性，以及提倡重點疾病的篩查，以助市民病向淺中醫，務求培育健康長者，讓他們在社區安享晚年。

多元健康服務

隨著人口老化，政府的醫療政策有所調整，2022 年底公布的《基層醫療健康藍圖》提出進一步發展基層醫療。協會作為首間地區康健中心的營運者，將繼續竭盡所能配合政府要求，在葵青地區康健中心發展以預防為重、以社區為中心的體制，務求成為統籌基層醫療服務的樞紐。

除了政府規劃的基層醫療服務，協會轄下各單位會以回應社會最新需求為己任，在地區康健中心的服務以外，提供多元化的地區健康服務，以達補漏拾遺的目標。



way out. KTSCHCA has been rooted in the community for many years. In the future, it hopes to shoulder the mission of assisting the elderly to age at home and provide various health support in the community.

Apart from helping the elderly manage chronic diseases, the association hopes that future services will also popularize the "prevention of diseases", educate citizens on the importance of disease prevention, and advocate the screening of major diseases, thus helping the public to start treatment when the disease is at an early stage, striving to cultivate healthy seniors to live out their old age in the community.

Diversified Health Services

As the population ages, the government has adjusted its medical policy. The Primary Healthcare Blueprint unveiled at the end of 2022 has proposed to further develop primary healthcare. As the operator of the first District Health Centre, the association will continue to do its utmost to meet the government's requirements and develop a prevention-focused, community-centered system in the Kwai Tsing District Health Centre, striving to become a hub for coordinating primary healthcare services.

Besides the primary healthcare services planned by the government, the various units under KTSCHCA will take responding to the latest needs of society as their own responsibility, and provide diversified district health services in addition to District Health Centre services, in order to achieve the goal of filling in the gaps.



Bring the network advantage into full play

After 20 years of development, the association has set up widely scattered service points in the district, covering Lai King Estate, Tai Wo Hau Estate, Kwai Hing, Shek Lei (II) Estate, Kwai Luen Estate, Cheung Hang Estate, Cheung Ching Estate, etc. At the same time, the association has a mobile dental clinic, which can provide mobile services in different locations. In the future, the association will continue to study the feasibility of expanding service points in order to introduce more convenient district health services.

發揮網絡優勢

協會經歷了 20 年發展，在地區廣設服務點，遍及荔景邨、大窩口邨、葵興、石籬（二）邨、葵聯邨、長亨邨、長青邨等。同時，協會備有一輛牙科醫療車，可深入不同地點提供流動服務。協會未來會繼續研究拓展服務點的可行性，以便推出更多便捷的地區健康服務。

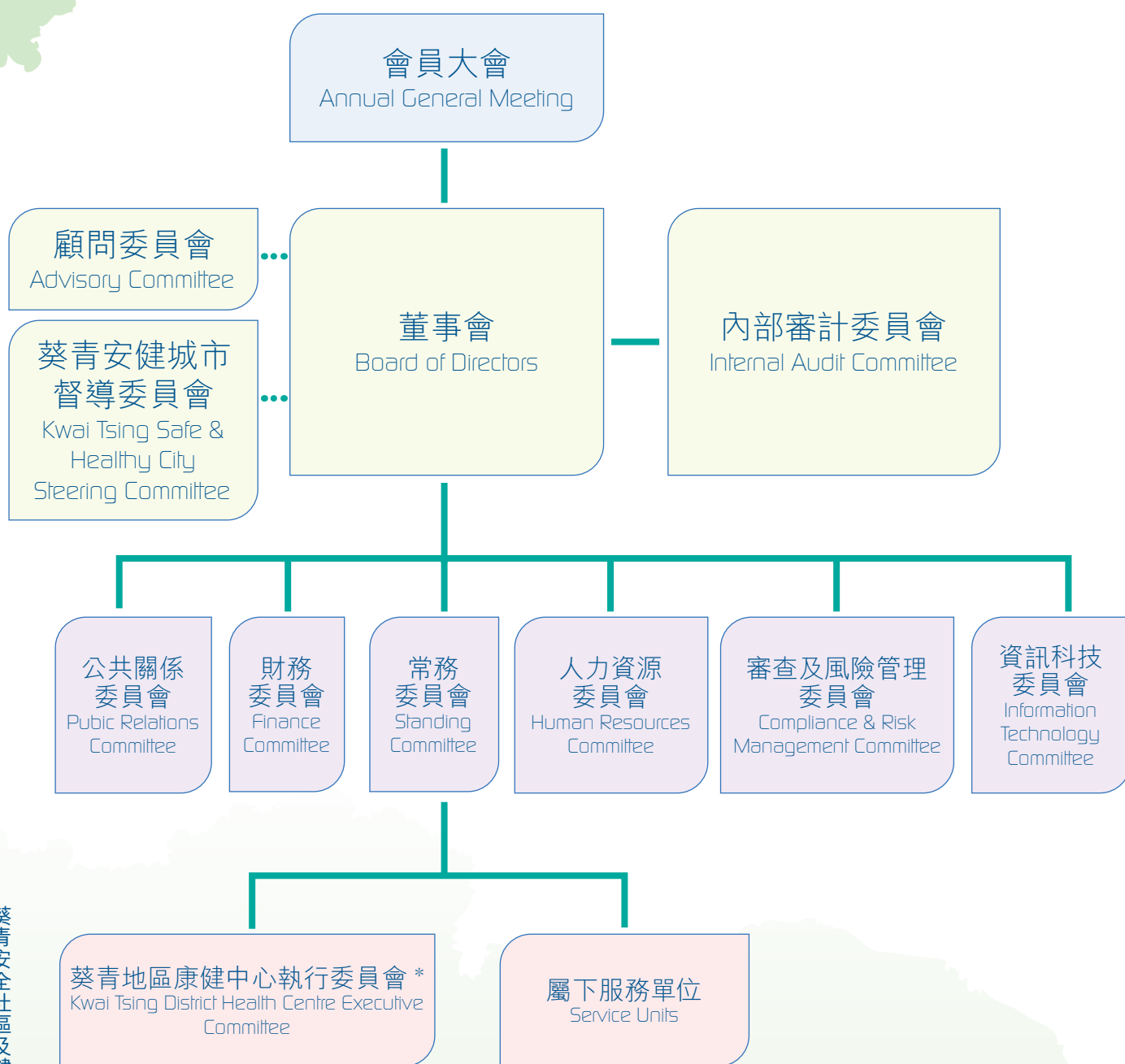
展望未來，協會將繼續發揮網絡優勢，連繫醫學界、社福界及地區人士，以善用社會資源，推動葵青區進一步發展為「安全社區」及「健康城市」。



機構管治架構圖

Chart of Corporate Governance

葵青安全社區及健康城市協會 管治架構圖



* 由葵青安全社區及健康城市協會代表及基層醫療健康辦事處代表出任聯合主席

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葵青安全社區及健康城市協會
Kwai Tsing Safe Community and Healthy City Association

中國香港新界葵涌荔景邨日景樓低層二樓一號舖

Shop No.1, LG2/F, Yat King House,

Lai King Estate, Kwai Chung, N.T., Hong Kong, China

電話 Tel: (852) 2436 3363 傳真 Fax: (852) 2370 1027

電郵 Email: office@ktschca.org.hk

網址 Website: <http://www.ktschca.org.hk>

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出版年期 Publication Year : 2023