

# 護齒同行

## HEALTHY TEETH COLLABORATION



協作私家醫院 Collaborating Private Hospitals



播道醫院  
Evangel Hospital

港怡醫院  
Gleneagles Hong Kong Hospital

寶血醫院 (明愛)  
Precious Blood Hospital (Caritas)

 衛生署  
Department of Health

### ● 目的 ●

為智障成年人士提供免費口腔檢查、牙科治療及口腔健康教育服務

### ● 受惠對象 ●

申請護齒同行服務的智障人士（下稱「申請人」）必須符合下列條件：

- 18 歲或以上持有由勞工及福利局發出的殘疾人士登記證（殘疾類別為「智障」或「弱智」）；
- 領取社會福利署綜合社會保障援助、傷殘津貼或醫院管理局醫療費用減免；以及
- 從未受惠於護齒同行牙科服務的人士

### ● 申請方法 ●

- 請致電以下其中一間非政府機構牙科診所登記並預約首次診期：

牙科診所名稱	電話號碼	地址
基督教家庭服務中心 土瓜灣牙科診所	3590 9449	九龍樂民新村 G 座 地下 144 舖
靈實余兆麒坑口診所	2706 0522	新界將軍澳 培成里 8 號地下
盈愛無障牙科中心	2370 2669 5406 3928 (WhatsApp)	香港新界葵涌 祖堯邨祖堯坊地下 E13-15 號舖
香港防癆會勞士施羅 孚口腔衛生服務 有限公司	3553 3535	香港灣仔 皇后大道東 282 號 鄧肇堅醫院社區日 間醫療中心 5 樓
東華三院何玉清 社區牙科診所	2581 0221	香港上環 蘇杭街 95 號 東利商業大廈 8 樓

- 在首次到診時必須出示以下文件正本：
  - 申請人的香港身份證
  - 由勞工及福利局發出的殘疾人士登記證（殘疾類別為「智障」或「弱智」）
  - 受惠資格證明文件：
    - 由社會福利署發出的有效綜合社會保障援助受助人醫療費用豁免證明書；或
    - 由社會福利署簽發的有效傷殘津貼申請獲准通知書；或
    - 由醫院管理局發出的有效醫療費用減免證明書
- 申請人在首次到診時須由根據《精神健康條例》（第 136 章）成立的監護委員會委任的法定監護人陪同，並出示以下文件正本：
  - 合法監護權的證明文件；及
  - 法定監護人的身份證明文件
- 如申請人沒有法定監護人，則可由父母 / 祖父母 / 兄弟姊妹 / 配偶 / 弱智人士服務單位替申請人作出申請並陪同出席首次應診。陪同人士需出示其身份證明文件正本及與申請人關係的證明文件。

### ● 服務內容 ●

非政府機構牙科診所會提供：

- 口腔檢查服務
- 預防性及治療性的牙科治療
- 日常口腔護理教育給智障人士照顧者

如申請人未能在診所透過行為管理接受牙科治療，機構會安排他們到政府指定的協作私家醫院透過鎮靜或全身麻醉接受牙科治療。

## ● OBJECTIVE ●

To provide free oral check-ups, dental treatments and oral health education for adults with intellectual disability

## ● TARGET BENEFICIARIES ●

To apply for the services under Healthy Teeth Collaboration, persons with intellectual disability (“applicant”) must fulfil the following criteria:

- Aged 18 or above holding the Registration Card for People with Disabilities issued by the Labour and Welfare Bureau (under the category of “intellectual disability” or “mental handicap”);
- Receiving either Comprehensive Social Security Assistance or Disability Allowance of the Social Welfare Department or medical fee waiver of the Hospital Authority; and
- Have not benefited from the dental services of Healthy Teeth Collaboration

## ● HOW TO APPLY ●

- Please call one of the following non-governmental organisation dental clinics for registration and booking of first appointment:

Name of dental clinic	Phone number	Address
Christian Family Service Centre Tokwawan Dental Clinic	3590 9449	Shop 144, Block G, Lok Man Sun Chuen, Kowloon
Haven of Hope S K Yee Hang Hau Clinic	2706 0522	G/F, 8 Pui Shing Lane, Hang Hau, Tseung Kwan O, N.T.

Name of dental clinic	Phone number	Address
Loving Smiles Special Care Dental Centre	2370 2669 5406 3928 (WhatsApp)	Shop E13-15, G/F, Cho Yiu Centre, Cho Yiu Chuen, Kwai Chung, N.T.
The Hong Kong Tuberculosis Association Rusy M. Shroff Oral Health Services Limited	3553 3535	5/F, Tang Shiu Kin Hospital Community Ambulatory Care Centre, 282 Queen’s Road East, Wan Chai, H.K.
TWGHs Ho Yuk Ching Community Dental Clinic	2581 0221	8/F, Tung Lee Commercial Building, 95 Jervois Street, Sheung Wan, H.K.

- At the first appointment, the original copy of the following documents should be presented:
  - Applicant’s Hong Kong Identity Card
  - Registration Card for People with Disabilities issued by the Labour and Welfare Bureau (under the category of “intellectual disability” or “mental handicap”)
  - Documentary proof on eligibility criteria:
    - Valid Certificate of Comprehensive Social Security Assistance Recipients (for Medical Waivers) issued by the Social Welfare Department; or
    - Valid Notification of Successful Application of Disability Allowance issued by the Social Welfare Department; or
    - Valid Certificate for Waiver of Medical Charges issued by the Hospital Authority

- Applicant should attend the first appointment with a legal guardian appointed by the Guardianship Board under the Mental Health Ordinance (Cap.136), and present the following original documents:
  - Documentary proof of the legal guardianship; and
  - Legal guardian’s identity proof
- If the applicant does not have a legal guardian, applicant’s parent, grandparent, brother, sister, spouse or rehabilitation service unit may submit application and attend the first appointment with the applicant. The accompanying person should present original of his/her identity proof and documentary proof of his/her relationship with the applicant.

## ● SCOPE OF SERVICES ●

Non-governmental organisation dental clinics will provide:

- Oral check-ups
- Preventive and curative dental treatments
- Education for caregivers on daily oral care

If dental treatments cannot be provided under behavioural management at clinic, arrangements will be made for applicant to receive dental treatments under sedation or general anaesthesia at a designated collaborating private hospital.