

Summary Table of Actions



Strategy 1

Heightening Awareness

Actions and activities		Action party
1.1 Enhance awareness campaign for the general population		
1.1.1	Observe World Hepatitis Day on 28 July each year	DH & NGO
1.1.2	Reach the general public through activities for health education and promotion with impact-based evaluation	DH & NGO
1.1.3	Disseminate health messages through mass media and social media	DH
1.2 Conduct targeted education for key populations, patients and their service providers		
1.2.1	Develop education materials tailoring to the specific needs of the target populations	DH
1.2.2	Integrate education and training for viral hepatitis prevention with HIV/STI prevention programme	DH
1.3 Conduct professional training for healthcare workers		
1.3.1	Prepare information materials for increasing awareness of healthcare workers for screening populations at increased risk of HBV or HCV infection	DH
1.3.2	Conduct professional training programme for healthcare workers for capacity building regarding the management of patients with chronic hepatitis	DH, HA & PHCC
1.4 Build a supportive environment		
1.4.1	Review and update the website of Viral Hepatitis Control Office as an information hub for viral hepatitis	DH
1.4.2	Collaborate with the communities, including District Health Centres and other non-governmental organisations, to hold health promotion activities	DH, PHCC & NGO

Strategy 2

Tracking Health Sector Response

Actions and activities		Action party
2.1 Estimate burden due to chronic viral hepatitis		
2.1.1	Update the HBV and HCV situation according to the results of the Population Health Survey	DH
2.1.2	Estimate the number and fraction of incident liver cancer cases and liver transplants attributed to HBV and HCV infection	DH & HA
2.2 Monitor trends in hepatitis B and C over time		
2.2.1	Continue surveillance of viral hepatitis in specific adult communities	DH
2.2.2	Assess the patterns of new HCV infection in at-risk populations	DH & HA
2.2.3	Analyse and disseminate the latest epidemiological information in annual surveillance report	DH
2.3 Make measurement for the Local Indicators		
2.3.1	Review and update the list of Local Indicators in view of the latest local and international developments	DH & HA
2.3.2	Review and enhance the measurement of the Local Indicators	DH & HA
2.3.3	Adopt a consistent and sustainable approach for the measurement for the year 2025	DH & HA
2.4 Evaluate the progress towards elimination of mother-to-child transmission of HBV		
2.4.1	Conduct evaluation on the robustness of the health systems to sustain triple elimination	DH
2.4.2	Collect and collate relevant data for assessing the elimination status of MTCT of HBV	DH

Actions and activities		Action party
2.5 Strengthen information exchange regarding prevention and control of viral hepatitis		
2.5.1	Share the experience of the implementation of the Action Plan in regional and international meetings	DH & HA
2.5.2	Contribute data to the WHO for reporting the progress of viral hepatitis elimination	DH
2.5.3	Keep in view the advances in prevention, care and treatment of hepatitis B and C	SCVH

Strategy 3

Preventing New Infections

Actions and activities		Action party
3.1 Stop mother-to-child transmission of hepatitis B		
3.1.1	Continue existing MTCT preventive measures, including universal hepatitis B vaccination, administration of hepatitis B immunoglobulin, universal antenatal screening for HBsAg and maternal antiviral prophylaxis	DH & HA
3.1.2	Monitor and maintain high coverage of the preventive measures	DH & HA
3.1.3	Evaluate the coverage of post-vaccination serologic testing	DH & HA
3.1.4	Review the development of MTCT prevention strategies and assess their applicability in Hong Kong	DH & HA
3.2 Prevent healthcare-related transmission of hepatitis B and C		
3.2.1	Screen all donated blood in a quality-assured manner	HA
3.2.2	Conduct infection control training for healthcare workers	DH & HA
3.2.3	Review and update the local guidelines on post-exposure management for blood-borne pathogens (HIV, HBV and HCV)	DH
3.3 Reduce risk and disease burden in key populations		
3.3.1	Intensify accessibility and availability of package of interventions	DH

Strategy 4

Expanding Access to Screening, Care and Treatment

Actions and activities		Action party
4.1 Enhance focused risk-based testing services for viral hepatitis		
4.1.1	Continue offering viral hepatitis testing among clients in DH settings, who are assessed to be of a higher risk of infection	DH
4.1.2	Formulate strategies with recommendations on expanding access to hepatitis B testing and subsequent care	SCVH
4.1.3	Establish the implementation plan and resource implications for risk-based hepatitis B screening in primary care or community settings outside DH clinics	PHCC
4.1.4	Pilot risk-based hepatitis B screening programme in primary care or community settings	PHCC
4.1.5	Review the uptake of viral hepatitis testing and linkage to care	DH & PHCC
4.2 Enhance management of adults with chronic HBV infection in primary care		
4.2.1	Engage policy makers and relevant stakeholders for primary healthcare provision	DH, HA, PHCC & Health Bureau
4.2.2	Develop a service model in primary healthcare settings for management of stable CHB cases including bi-directional referral between primary care physicians and specialists	DH, HA & PHCC
4.2.3	Review and revise the information resources to facilitate hepatitis B management by primary care physicians	DH, HA & PHCC
4.2.4	Promulgate the revised information resources to primary care physicians	DH, HA & PHCC
4.2.5	Utilise the network of services from community pharmacies, laboratories and other healthcare providers for supporting hepatitis B management in primary care settings	PHCC & DHC

Actions and activities	Action party
4.2.6 Estimate the service needs regarding the management of hepatitis B patients in secondary care and evaluate the related resource implications	DH, HA & PHCC

4.3 Establish linkage to care for people with hepatitis C

4.3.1 Identify individuals who have tested positive for HCV for appropriate management	HA
4.3.2 Provide DAA treatment for patients with viraemic HCV infection	HA
4.3.3 Monitor the number of patients who have received DAA treatment	HA

4.4 Promote HCV testing and linkage to care among people who inject drugs

4.4.1 Identify methadone users who have been infected with HCV	DH
4.4.2 Enhance linkage-to-care for HCV treatment among methadone users	DH, HA & NGO
4.4.3 Assess the HCV treatment coverage for methadone users with positive HCV test result	DH & HA

4.5 Promote HCV testing in persons in custody

4.5.1 Evaluate the findings and effectiveness of the pilot HCV screening programme for persons in custody, and plan the way forward according to the recommendations	DH, Correctional Services Department and the academics
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