



Primary Care Development in Hong Kong: Future Directions

HA Convention 2014
8 May 2014

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Outline

- Overview of current local situation
- Challenges to the existing healthcare system
- Strategies to enhance healthcare system
- Primary care development

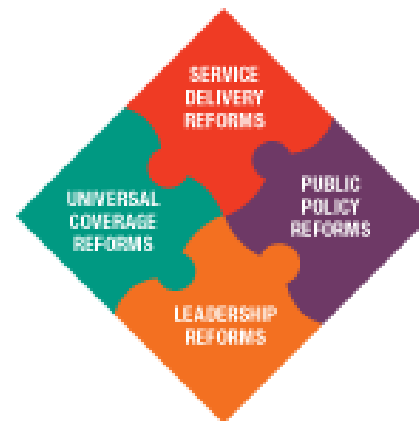
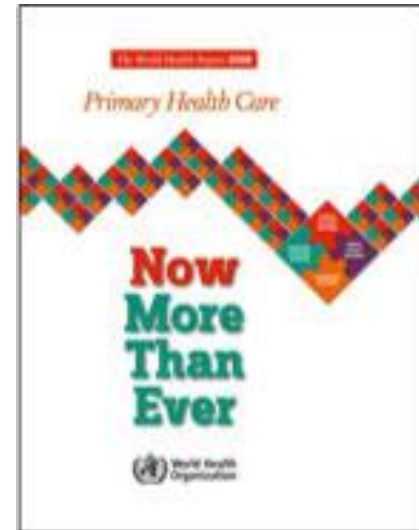
Alma Ata Declaration, 1978

- *Primary health care* is essential health care based on *practical, scientifically sound and socially acceptable* methods and technology made universally *accessible* to individuals and families in the community through their full *participation* and at a cost that the community and country can *afford* to maintain at every stage of their development in the spirit of *self-reliance* and *self-determination*.



Primary health care: Now more than ever (2008)

- *Globalization is putting the social cohesion of many countries under stress, and health systems are clearly not performing as well as they could and should.*
- *People are increasingly impatient with the inability of health services to deliver. Few would disagree that health systems need to respond better – and faster – to the challenges of a changing world.*



Primary Care

- *Primary care is the provision of **integrated**, **accessible** health care services by clinicians who are accountable for addressing a large majority of **personal health care needs**, developing a sustained **partnership** with patients, and practicing in the context of **family and community**.*

Institute of Medicine, 1996

What is primary care in Hong Kong?

Comprehensive

**Patient-
Centred**

Continuing

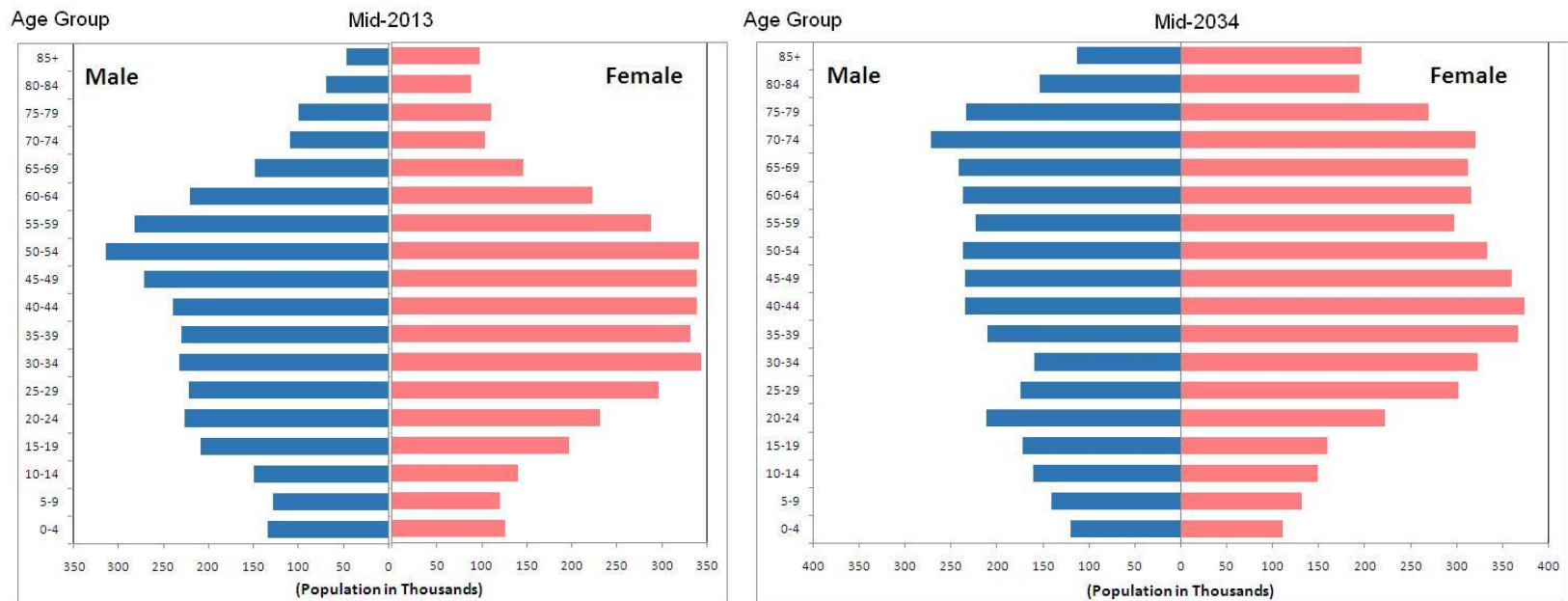
Coordinated

**First point of
Contact**

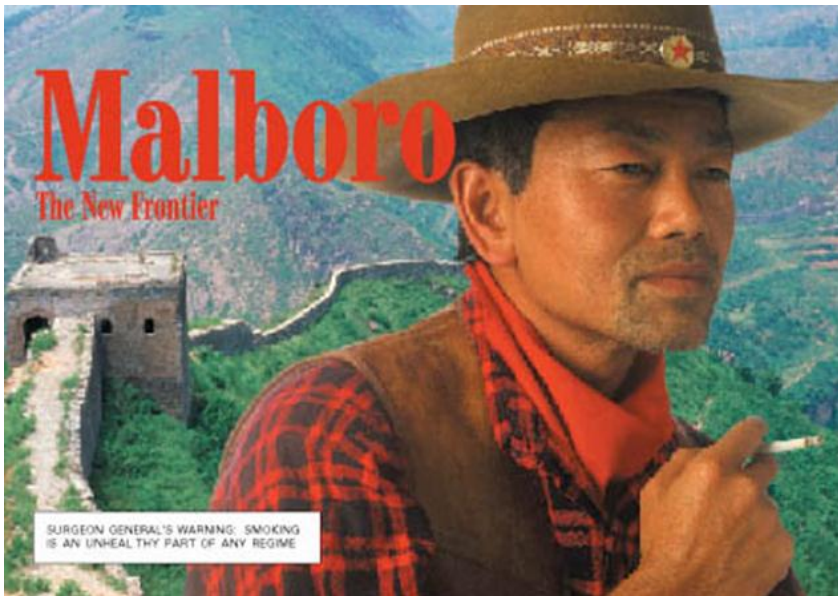
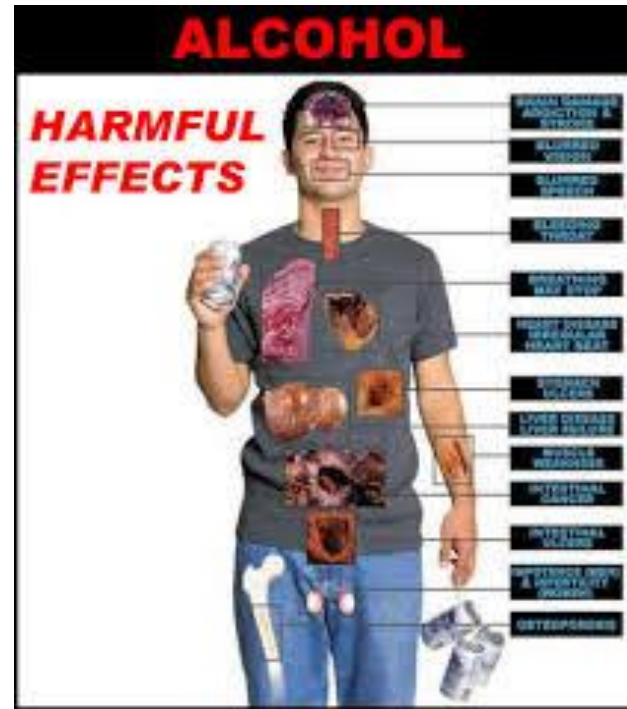
Ageing Population

- Projected mid-year population aged 65 years or above in 2034 will be as high as **27.9%** of the population – i.e. **2.31 million**

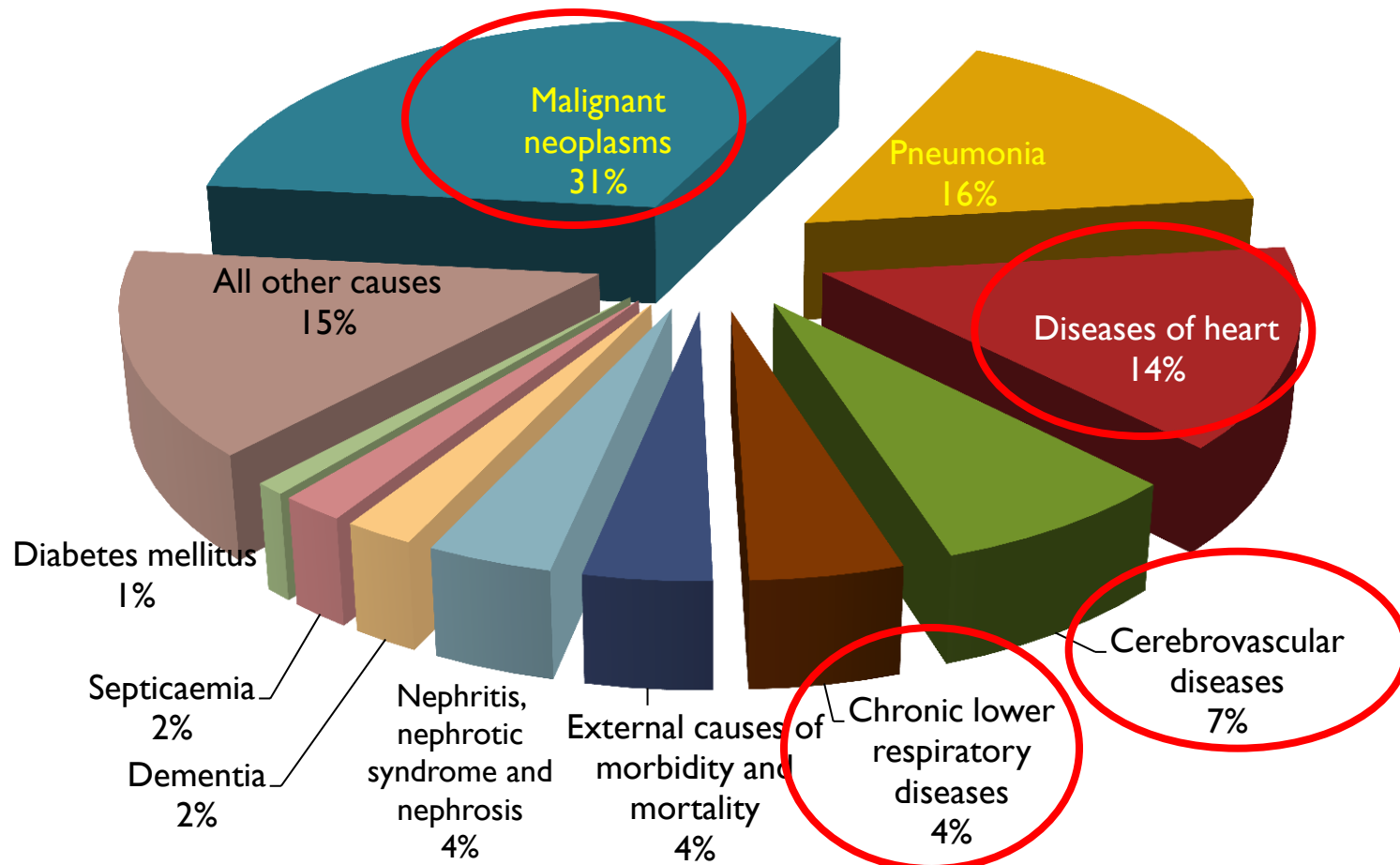
Population Age Pyramid by Projected Mid-year Population 2013 and 2034



(Data source: Census & Statistics Department)



Leading Causes of Deaths in Hong Kong (2012)



(Source: Centre for Health Protection, DH)

- **Modifiable risk factors leading to NCD:**
smoking, alcohol drinking, unhealthy diet and physical inactivity

Heavy Burden from Chronic Illnesses

Persons who had chronic health conditions

Age group	Rate
< 15	9.4 %
15 – 24	11.5 %
25 – 34	11.5 %
35 – 44	17.1 %
45 – 54	27.6 %
55 – 64	45.7 %
≥ 65	73.7 %
Overall	28.1 %

(Source: Thematic Household Survey Report No.50, 2013, Census and Statistics Department)

Heavy Burden from Chronic Illnesses

Prevalence of chronic health conditions

	Percentage (%) [#]
Hypertension	11%
Diabetes mellitus	5%
High blood cholesterol	3.9%
Coronary heart disease	2.0%
Cancer	1.1%
Asthma	0.9%
Stroke	0.6%
Overweight and obesity (BMI_≥23)	36.6%*

(Source: [#]*Thematic Household Survey Report No.50, 2013, Census and Statistics Department*
^{*} *Behavioural Risk Factor Survey 2012, Department of Health*)

Challenges to the healthcare system

Ageing
population

Long waiting
time and
pressure on
public hospitals

Ever-increasing
community
demands for
healthcare services

Heavy burden
from chronic
illness

The Need for Primary Care

- Move **resources** to community setting
- Re-focus efforts on **prevention** and on-going management of chronic conditions
- Primary care: the first level of care at community level
 - Ideally positioned to provide on-going care and to support **individuals / families in control of their health**

Primary care development in Hong Kong

Report of the Working Party on Primary Health Care “Health for All – The Way Ahead” 1990

- Examination of the primary care system in Hong Kong and recommended strategies for enhancing and reforming primary care

Health and Medical Development Advisory Committee (HMDAC) 2005

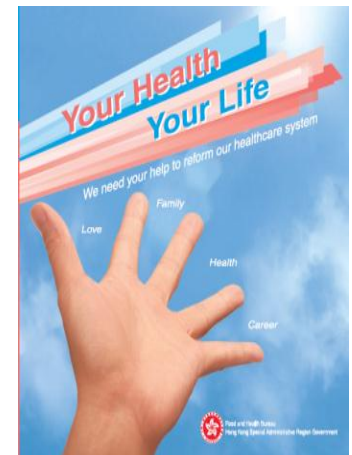
- Reviewed and made recommendations on the service delivery model for the healthcare system, including primary care system

‘Your Health, Your Life’ Consultation Document 2008:

- to enhance primary care through provision of continuing, preventive, comprehensive and holistic healthcare services, by the following initiatives
 - ✓ Developing basic models for primary care services,
 - ✓ Establishing a family doctor register,
 - ✓ Improving public primary care, and
 - ✓ Strengthening public health functions through public-private partnership

Policy Agenda 2008-09:

- Strengthening support for care of chronic disease patients in both public and private sectors
- Establishment of the **Working Group on Primary Care**



Overall Strategy (2010)

- Primary Care Development in Hong Kong: Strategy Document
- Set out benefits of good primary care, the major strategies and pathways of action which help to deliver high quality primary care in Hong Kong



Promoting Primary Care in Hong Kong

1. Strengthen coordination of primary care services
2. Provide guidance to healthcare practitioners and to the public
3. Promote family doctor concept
4. Promote healthy lifestyle and patient empowerment
5. Engage the private sector to alleviate the burden on the public system
6. Publicise and promote primary care concept through different channels
7. Prevent and control non-communicable diseases

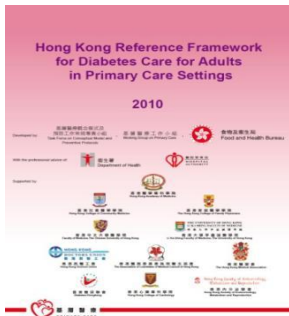
Strengthen Coordination of Primary Care Services

Primary Care Office

- Set up under the Department of Health (DH)
- Support and co-ordinate the development of primary care and implementation of primary care development strategies and actions
- Staff of various disciplines from DH and the Hospital Authority

Provide Guidance to Healthcare Practitioners and to the Public

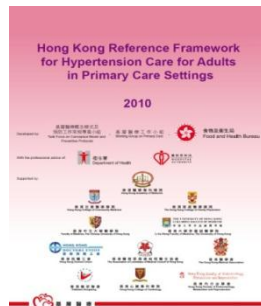
Setting up Reference Frameworks



Reference Framework for Diabetes Care

11 modules completed

Patient version available



Reference Framework for Hypertension Care

8 modules completed

Patient version available



Reference Framework for Preventive Care in Children

Module on Immunisation completed

Next module on Physical Growth and Development to be developed



Reference Framework for Preventive Care in Older Adults

Module on Health Assessment completed

Next module on Visual and Cognitive Impairment to be developed

Promote Family Doctor Concept

Primary Care Directory

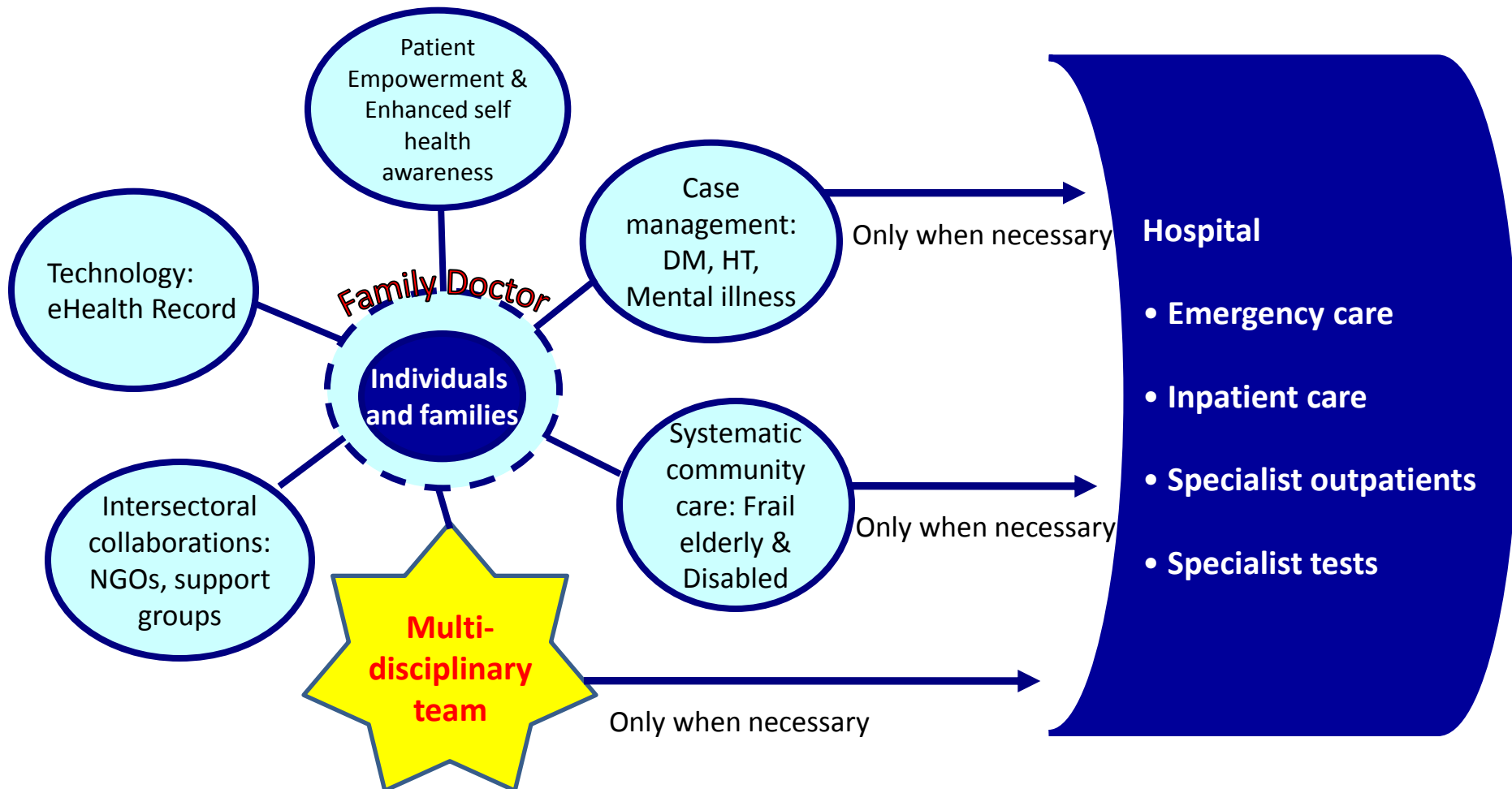
- Promote the **family doctor** concept and **multi-disciplinary** approach
- Easily accessible **electronic database** containing practice-based information of primary care providers
- The doctors, dentists and Chinese medicine practitioners **sub-directories** have been launched
- The optometrists sub-directory is under development
- **Mobile App** version was launched in August 2013



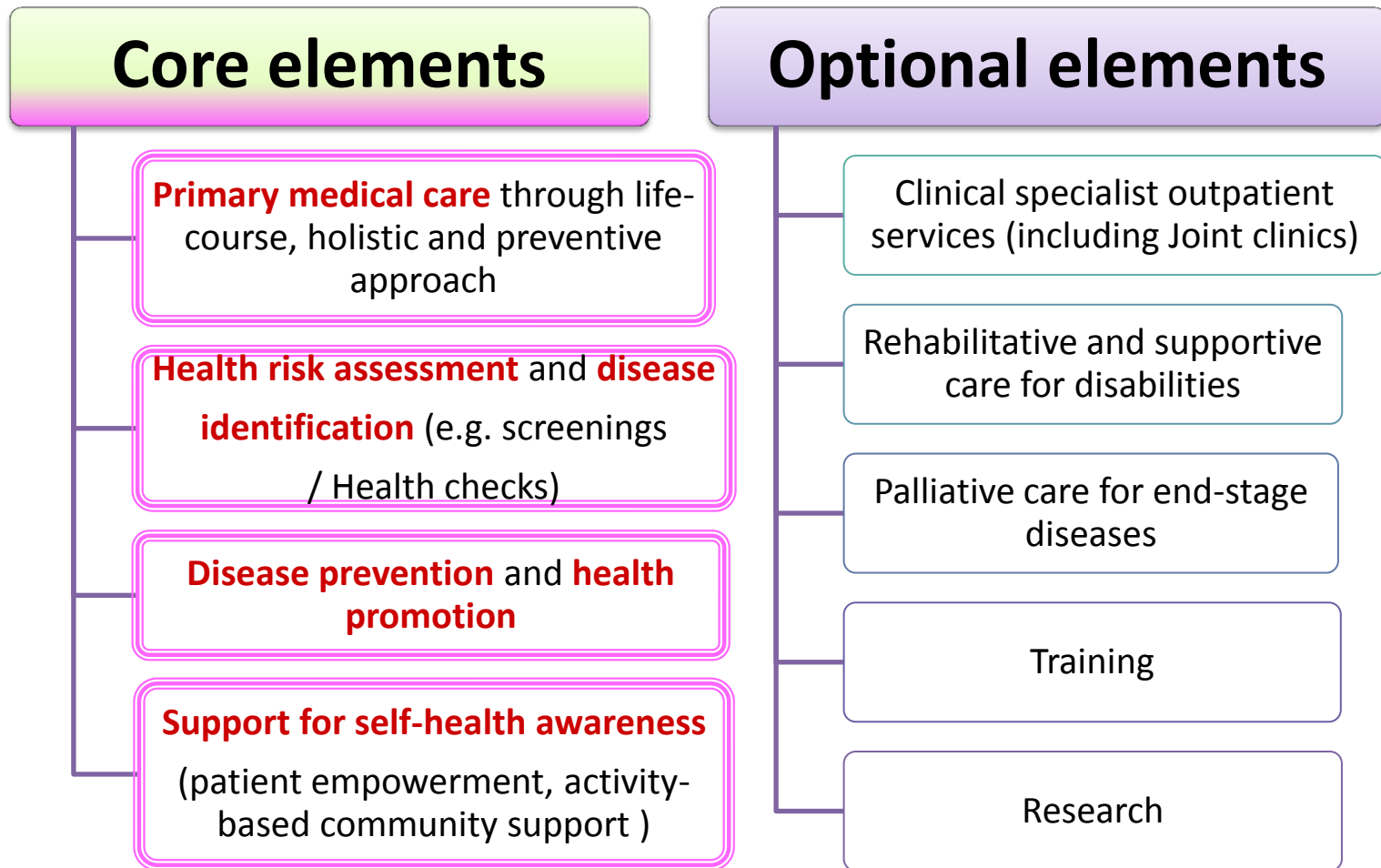
Promote Healthy Lifestyle and Patient Empowerment

Stay healthy in the community

Hospital care only when necessary



Primary Care Services in Community Health Centre (CHC)



Tsan Yuk Community Health Centre Model

Core elements

Primary medical care through life-course, holistic and preventive approach

Health risk assessment and disease identification (e.g. screenings / Health checks)

Disease prevention and health promotion

Support for self-health awareness (patient empowerment, activity-based community support)

Optional elements

Clinical specialist outpatient services (including Joint clinics)

Rehabilitative and supportive services
 Pain management stage diseases

RAMP Clinic

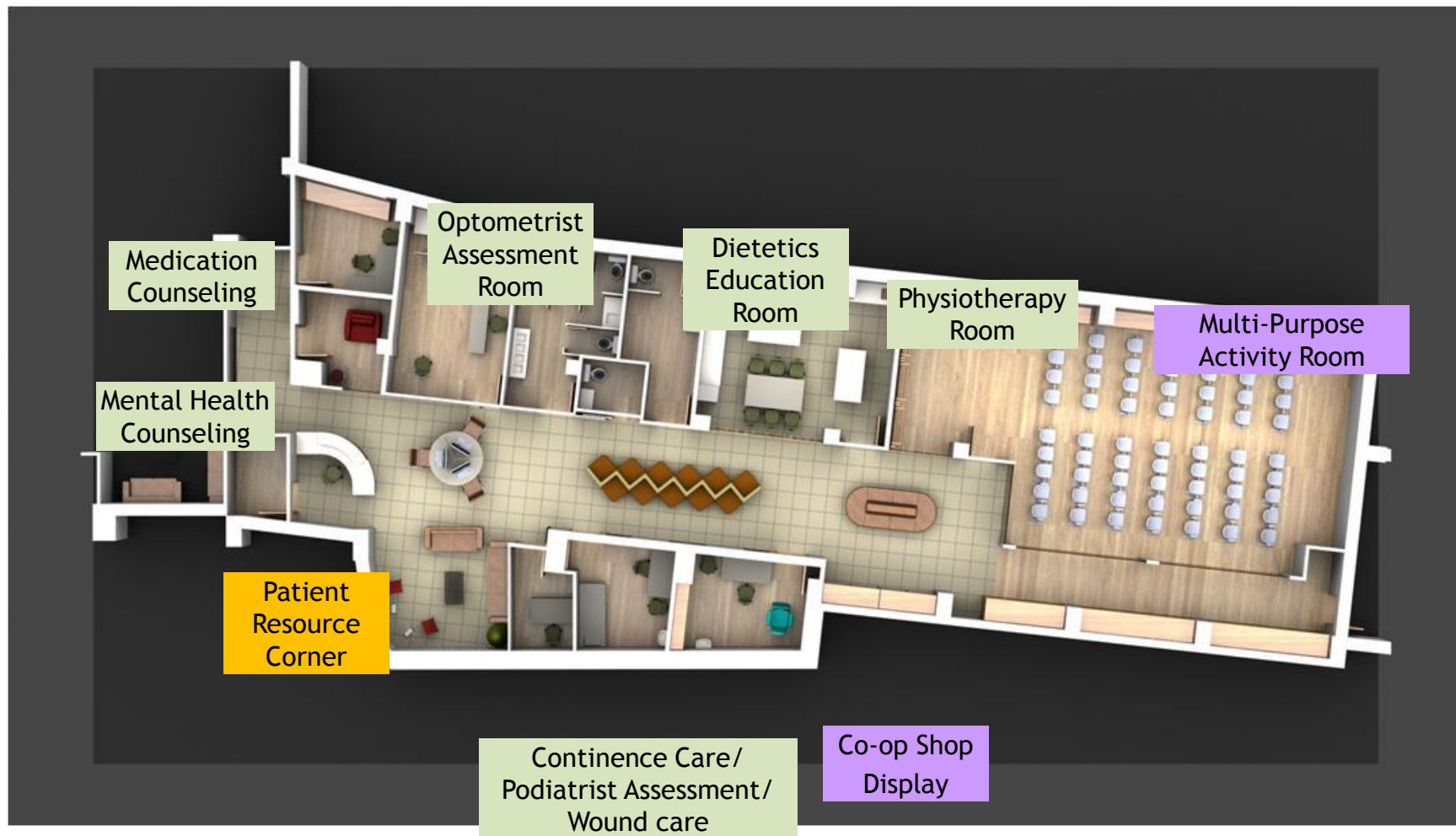
NAHC

Research

RAMP: Risk Assessment and Management Programme

NAHC: Nurse and Allied Health Clinic

Layout in Tsan Yuk CHC



Risk Assessment & Management Clinic (RAMP)



- Adopts a **multi-disciplinary team** approach in caring diabetes and hypertension patients, thereby keeping them **stable in the community**
- Develops collaborations between family physicians and DM specialists fostering seamless diabetic care **interfacing primary and secondary levels**, as well as **capacity building** in primary care

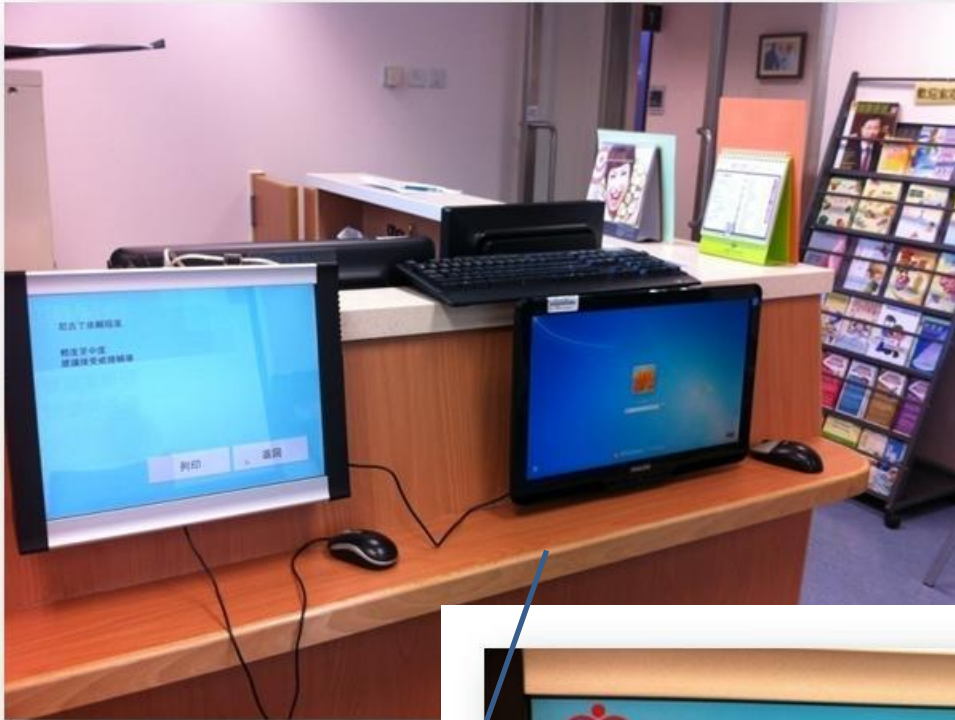


Nurse and Allied Health Clinic

- Nurse Assessment (Case Manager approach)
- Optometrist Assessment: Diabetes Mellitus Retinopathy
- Podiatry Assessment
- Smoking Cessation Counseling
- Body Weight Management
- Dietetics Counseling
- Lifestyle Re-Design (Occupational Therapy)
- Wound Care
- Continence Care
- Fall Prevention
- Integrated Mental Health Programme
- Medication Compliance and Management
- Patient Resource Corner
- Co-op Shop

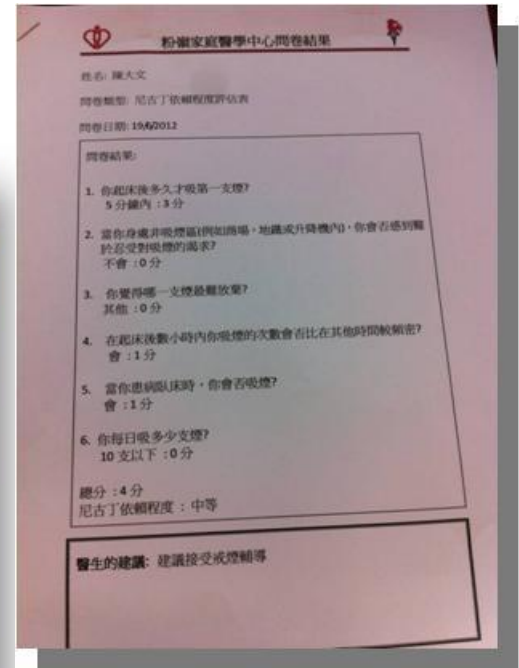
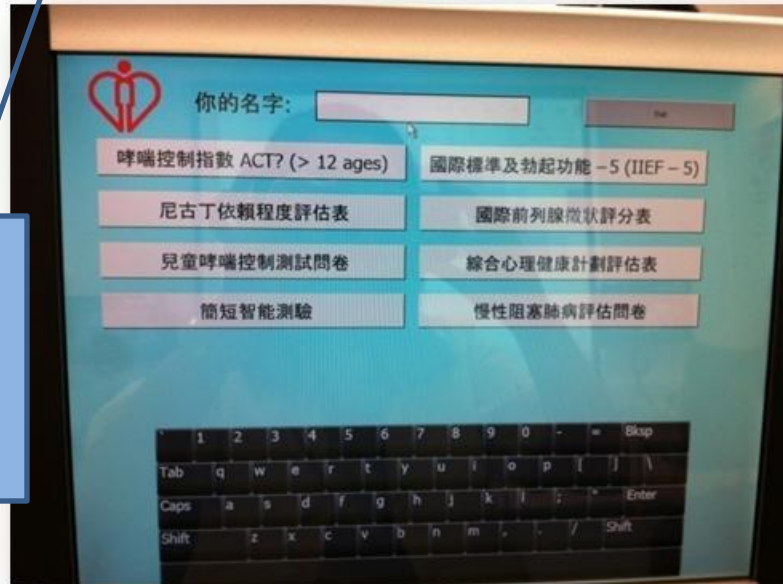


Patient Resource Corner



Clinical calculators to allow patients to do self assessment e.g. International Prostatic Symptom Score, PHQ-9, GAD-7, Asthma control test, COPD assessment test, Fagerstrom nicotine dependence test

Providing computer for accessing Smart-patient website



Engage the Private Sector

Government Primary Care Enhancement Programmes



醫院管理局
HOSPITAL
AUTHORITY

Public  Private
Partnership



Initiatives under Public Private Partnership

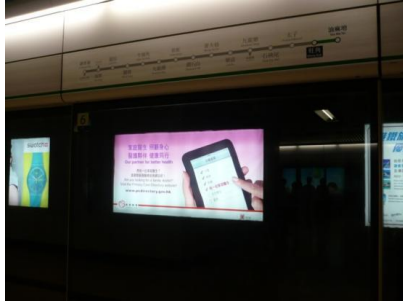
- Elderly Health Assessment Pilot Programme
- Elderly Health Care Voucher Scheme
- General Outpatient Clinic Public Private Partnership Programme
- Patient Empowerment Programme

醫院管理局
「天水圍基層醫療合作計劃」
Hospital Authority "Tin Shui Wai Primary Care Partnership Project"



Publicise and Promote Primary Care

Publicity Activities



Advertisements at mass transport systems



Themed Competition "Primary Care - Family Doctor as Your Health Partner"



Advertisements on Internet



Announcements in the Public Interests (API)

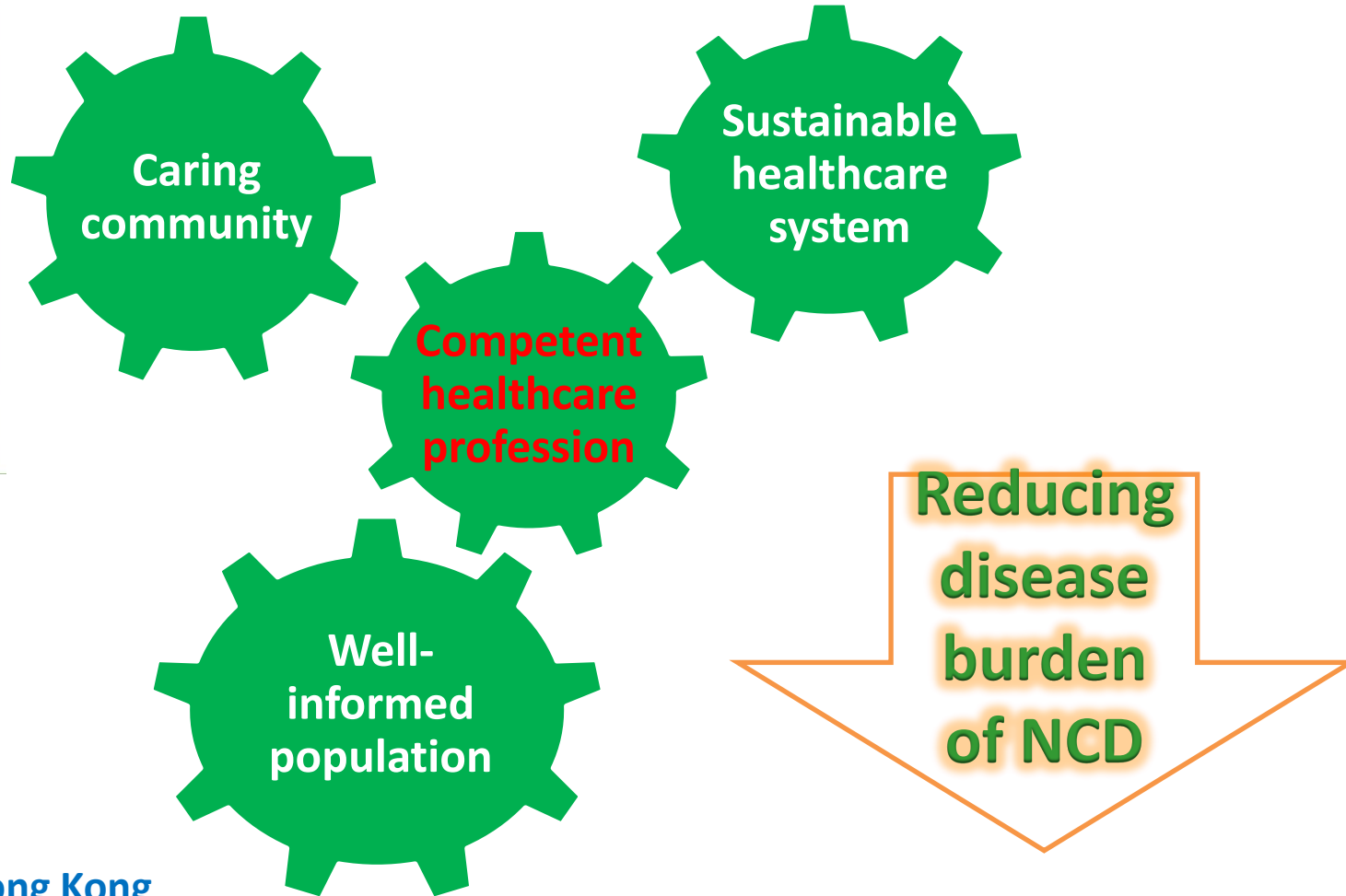
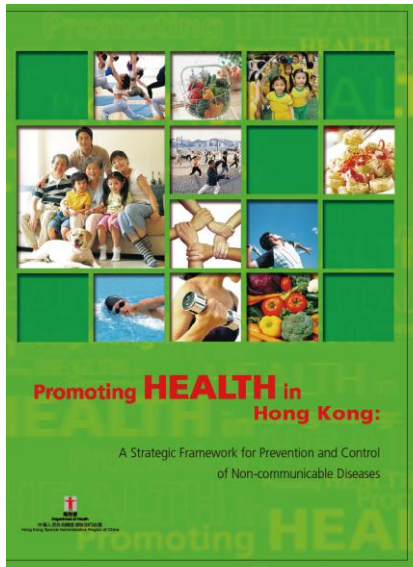


Publicity Materials

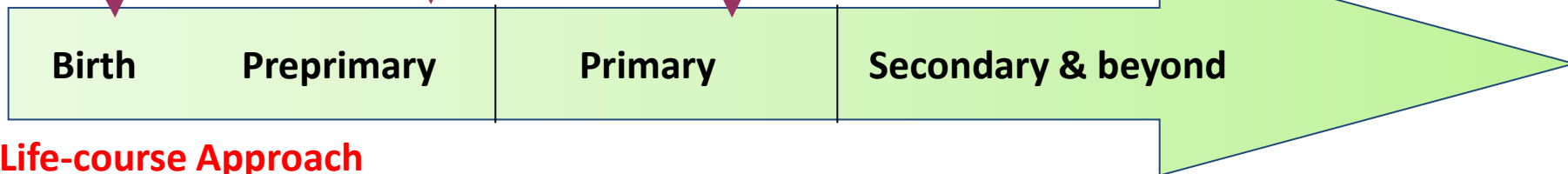
Others: Featured articles, roving dramas, and more...

Prevent and Control Non-Communicable Diseases

Roles of Primary Care Practitioners



NCD Prevention and Control - Implementation



Life-course Approach

Intersectoral Collaboration
for health promotion and
disease prevention

Turning **settings** into
health-friendly ones and empowering
individuals to make healthy choices



Way Forward

- There is a need for further development – challenges
- Resources is needed to support long-term primary care development
- **Hard ware**: Building more CHCs and networks; develop the electronic health record sharing system
- **Soft ware**: evidence based practice and research; engage healthcare professionals and stakeholders in primary care developments; strengthen collaborative efforts among healthcare providers; proactive approach to chronic disease prevention; building a primary care workforce

