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Review of Primary Health Care in Hong Kong

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ABSTRACT

With the low fertility rate over the years and the increasing longevity of people in Hong Kong, it is expected that population aged 65 or above will be as high as 32 percent by mid-2046. Primary health care offers a comprehensive and holistic service package to improve and strengthen primary care and health functions, highlighting the importance of assigning a long-term health partner so as to make better use of healthcare resources and to enhance quality of care. The reform consultation documents, Your Health, Your Life and Building a Healthy Tomorrow, introduce a basic model in which a system is established to register medical professionals, provide subsidies and improve primary care. Primary care adopts an integrative approach involving professionals to deliver a wide range of services comprising of health promotion, prevention of treatment and care for acute and chronic diseases, health risk assessment and disease identification, self-management support, and supportive care for end-stage diseases or disabilities. The Hong Kong Government has put great efforts in interdepartmental and cross-sectoral collaboration to provide professional, high quality and timely services. An example of this is public-private partnership offering healthcare programmes to individuals and the community, and it has proven beneficial in terms of resource allocation and continuation of long-term service packages. In the latest Policy Address, the Government intends to facilitate the partnership and to draw up a blueprint for expansion and provision of primary healthcare services. To achieve total primary care, input of expertise and experience of all stakeholders are desired to establish a quality care system that is within the easy reach of everyone in the community.

KEYWORDS: Primary Care, Hong Kong, Community Health Centre, Elderly Care, Long Term Care

1 INTRODUCTION

The declaration of Alma Ata in 1978 by the World Health Organisation suggested primary health care as the key to achieving 'health for all' and had initiated primary care around the world. Hong Kong enjoys a high standard of medical service that is aligned with the policy of "that no one should be denied adequate health care through lack of means" (Chiu, 2011), having low infant mortality rate and long life expectancy as a result. At present, the Hong Kong Special Administrative Region Government (the Government) allows 17 percent of the recurrent budget for publicly funded health service (Food and Health Bureau, 2015). As a city, Hong Kong people invest about 5.7 percent of the Gross Domestic Product (GDP) in medical and health care. This is very low in the world.

The healthcare system is categorized into three levels: primary, secondary and tertiary level. The primary level focuses on preventive care while the other two levels include specialists and hospital services. With the low fertility rate over the years, Hong Kong will soon be challenged with an ageing population as it is expected that population aged 65 years or above will be as high as 32 percent by mid-2046 (Consensus and Statistics Department, 2017). Hence, primary health care is vital to address the issues arising from the changing demography. This paper reviews the primary care in Hong Kong by looking into its recent developments, the benefits it offers and collaboration among stakeholders. It further explores the improvements made and challenges encountered, and discusses the key strategies moving towards the best world-class system.

2 REVIEW OF THE SERVICES

The healthcare system of Hong Kong is generally commended for its efficiency and cost-effectiveness in comparison to neighbouring Asian countries of similar levels of demographic profiles and economic development, for instance, Taiwan and Singapore, given that it is able to achieve 'a better health outcome' with the limited resources provided (Griffiths & Lee, 2012). With the establishment of the Hospital Authority in 1991, health services have been upgraded in the technical quality of care as well as in health facilities, resulting in a significant advancement in the provision of inpatient care services. On the other hand, the primary care system, which is a significant part of the service delivery model and was "re-initiated" in 2008, offers comprehensive and holistic services to improve and strengthen community care and individuals' health functions. It highlights the importance of making better use of healthcare resources, and the development of a system in which access to primary care doctors for building up long-term health partnership is desirable. Across the border, more than a third of Beijing's permanent residents are covered by family doctor services and the Chinese government has a clear policy to increase the number of qualified general practitioners by improving the training and incentive mechanism (State Council, PRC, 2017, 2018).

2.1 Recent developments in primary care

Building a Healthy Tomorrow, a Government reform paper released in 2005, has suggested five solutions for the provision of better service, including developing a basic model for primary care services, establishing a system for family doctor registration, providing subsidies, improving public primary care and strengthening health functions (Food and Health Bureau, 2005). The development of a basic model for primary care will enable professionals from the private and public sectors to set standards for primary care by evaluating potential health risks, frequent monitoring of patients and encouraging healthy concepts. Doctors are recommended to join the registration system to provide a list to the public, making it easier to search for providers. Moreover, by subsidizing service users with coupons or other means can set a threshold to prohibit others from abusing the service plus it fulfills the main objective of the Government policy - everyone has the right to medical services. This, to some extent, has improved the public primary care by raising awareness of health wellness in addition to incorporating preventive health concepts in the General Outpatient Clinics (GOPCs). In addition, the Department of Health assists in educating the public and sustaining the quality of care, hence building a responsible system and strengthening the functions of the service.

Your Health, Your Life, another Government healthcare reform consultation document in 2008, has announced primary care system as one of its healthcare system focuses (Food and Health Bureau, 2008). Three main problems are raised, viz. the unawareness of the public in preventing diseases, the private sector being the main provider of primary care services and low rate of seeing family doctors. The intention of the document is to alert the public about disease prevention and the reasonably affordable health services offered under primary care. The paper also looks into previous reports and has identified areas that require improvement.

In 2010, *Primary Care Development in Hong Kong: Strategy Document* was published by the Primary Care Office to put forth eight strategies. To begin with, developing a comprehensive care by multidisciplinary teams where users can switch between doctors in private and public sectors without having to repeat the health status as information will be stored in a database, and the choice of doctor depends on patient's medical status. Furthermore, it acknowledges that relationship, information and treatment are the three continuities in building up a healthy primary care system, in which working with other professionals is needed. The inter-sectoral collaboration can improve the availability of quality care and share the reports of the patients through the e-platform, placing emphasis on personcentred care and patient empowerment. These initiatives are beneficial to both the doctors and service users in terms of building a strong relationship, introducing patients with self-care, supporting professional development and quality improvement (Department of Health, 2012).

2.2 Benefits of good primary care

While Hong Kong has been successful in the delivery of high standard service, the system faces some burning issues such as excessive workload, manpower shortage, limited capacity and long waiting times, particularly in the public hospital services. These call for a better coordination of healthcare services and for the development of patient-centred care, to meet the demands and expectations of the community.

Primary healthcare adopts an integrative and multidisciplinary approach that involves healthcare professionals, such as doctors, nurses, dentists, Chinese medicine practitioners, allied health practitioners, and community health practitioners, in the community to deliver a wide range of services comprising of health promotion, care for acute and chronic diseases, health risk assessment and disease identification, self-management support, and supportive care for end-stage diseases or disabilities (Department of Health, 2012). The Hong Kong healthcare system has proven itself to be probably one of the best in the world as the life expectancy for both genders is ranked first in the world (Kong et al., 2015; Centre of Health Protection, 2017). Life expectancy takes into account the changing patterns of health, the improvement of patient and consumer expectations, the increasing of medical cost with the limitation of manpower and charge of clinics in Hong Kong (Information Services Department, 2016).

Given the provision of high-quality services in public hospitals and low charges, the majority of people would visit the GOPCs when they feel unwell. The Primary Care Office has helped to shift patients from the public to private sector and has somewhat reduced the pressure on public hospitals. If more people choose to use the private sector, public services can have more capacity for their work and focus better on other cost-effective and of high-quality services, which are the strengths of the Hong Kong healthcare system. On the strength of delivery of high quality primary care, benefits of better overall health with continuity of care, taking a preventive approach to tackle major otherwise costly diseases, and most importantly, improving accessibility to health information in order to enhance quality of care and life, patient satisfaction and treatment compliance are achievable (Primary Care Office, 2018).

2.3 Public-private partnership

Public-private partnership (PPP), one of the healthcare reform proposals, was launched in 2014 in three districts – Tuen Mun, Wong Tai Sin and Kwun Tong (Chan, 2015). It was well presented in a

two-stage public consultation conducted in 2008, implying the increased interest of the public in the development of healthcare (Food and Health Bureau, 2008). The PPP initiatives are funded by the Food and Health Bureau and monitored by Medical Services Development Committee and Information Technology Services Governing Committee. When the Government first commissioned a study on the healthcare services in 2008, it found that public and private providers should jointly adopt integrated service packages in the long run. Since then, various ways have been explored for the continuity and promotion of PPP programmes in healthcare, namely Cataract Surgeries, General Outpatient Clinic PPP, Hemodialysis PPP, Patient Empowerment and Shared Care.

In a report by Hospital Authority in 2016, these programmes have "achieved the planned objectives and are running smoothly", and resulted in more healthcare choices for individuals and better resource allocation between the public and private sectors (Ho & Fong, 2017) by addressing the imbalance of services and making use of the capacity available in both sectors (Wong et al., 2015). In terms of increasing efficiency and competition, the partnership is more beneficial in the delivery of healthcare services as opposed to the services provided merely by one of the sectors. Specifically, the burden of the public sector is reduced as the service coverage expands further, creating a balance between sectors subsystems as a result (Ho & Fong, 2017). The Audit Commission (2012) has advised the Hospital Authority to consider a mechanism for assessing the development and delivery of healthcare services as such pilot programmes can lead to positive impact on the future overall development of PPP and gain recognition.

3 ENHANCEMENT OF SERVICES

Primary health care system in Hong Kong has progressed over time. It takes time for the change to be in effect as well as to examine the effectiveness of the service. There are challenges in the process. The collaboration between private and public sectors is a potentially effective move to facilitate and strengthen the partnership. The Primary Care Office, under the Department of Health, and Community Health Centre co-operate to train staff for primary care to tackle the ever-increasing community demands for services and the heavy burden arising from chronic illnesses of the ageing population (Chan, 2015). In addition, the Primary Care Directory is, undoubtedly, a convenient method for the public to search for services on the internet. However, the service adopts an 'inclusive approach' to engage as many doctors as possible through voluntary registration instead of having all doctors to participate (Food and Health Bureau, 2010), hence limiting the number of listed medical professionals. People would opt for primary care providers providing services near their home and workplace instead of having the directory to assign a doctor to them. Furthermore, many elderly may not be able to take part in the e-platform due to lack of digital literacy (Godfrey & Johnson, 2009), resulting in overall ineffectiveness of the Primary Care Directory to the public.

Another initiative is the promotion of primary health care by different channels to draw the attention of the public. Publicity through various media, for instance, television, radio programs, advertisements, announcements and online media, has been helpful in providing clear guidelines of the services to the public. An example of the guidelines is the Hong Kong Reference Framework, a reference on comprehensive care that includes international experience of primary care. Furthermore, to provide financial support for the elderly aged 65 years and above, the Government offers Elderly Health Care Vouchers and Elderly Health Assessment Pilot Programme (Sheng Jung Hui Welfare Council Limited, n.d.). Beginning as a pilot scheme in 2009, the Elderly Health Care Voucher Scheme provides elderly vouchers worth \$2,000 per year as an incentive for them to select private healthcare services. By the end of 2014, more than 640,000 elderly had used the vouchers, an increase of service users by 67 percent (Food and Health Bureau, 2015). It is indeed a thoughtful move. However, due to limited understanding of the service, some elderly were unable to take part and some could not take advantage of the scheme because some clinics have not registered in the system (Mui, 2009).

The Elderly Health Assessment Pilot Programme, a two-year programme in collaboration with non-government organizations providing health assessment and consultation for the elderly, was launched by the government in 2013 to promote healthy ageing. It helps the elderly to identify risk factors and potential health issues knowing that as the elderly ages, their health problems increase. It also provides initial health check-up items such as total cholesterol, HDL-cholesterol and resting ECG to assist the elderly in discovering unknown health conditions. However, according to the Community Medical Support Network, only 10,000 people can join the programme due to limited resources, and the sustainability of the programme is merely two years (Chan, 2015).

4 KEY STRATEGIES IN THE JOURNEY TO BECOMING THE BEST IN THE WORLD

The concept of 'health for all' has become the cornerstone in the development of the primary health care. The Government, together with the Department of Health and Hospital Authority, has been undertaking the responsibilities of improving the primary health care and provision of ongoing care and support to individuals and families. However, the local healthcare system needs to solve the disparity and problems in offering sustainable services in the private and public sectors. In spite of having adequate resources and facilities, the public hospitals are stretched with demands and expectations from the public. Over the years, the Government has instituted a number of key strategies to improve service delivery and to maintain the financial sustainability in health care. The Health and Medical Development Advisory Committee has proposed intermediate and long-term planning, such as having school medical services as the base of future health care development. The Government has also been contributing resources to provide health care service in the community (Chan, 2014), making it an ideal healthcare model for other countries.

In the 2008-09 policy agenda, the Working Group on Primary Care was established to strengthen support for the chronic disease patients in both the public and private sectors. The Government has put much effort in the past decade to follow global trend of primary care and therefore, has played an active role. The commitment to improve the healthcare system that meets the views and expectations of the community has enabled the Government to offer an effective primary care at affordable prices.

The *Primary Care Development in Hong Kong: Strategy Document* in 2010 recommended the establishment of a Community Health Centers (CHC) or CHC-like networks in the society. CHC will provide a fast, convenient, better coordinated and more comprehensive primary care to the general public. The CHC includes General Out-patient Clinic Services of Hospital Authority, Elderly Health Centre, Maternal and Child Health Centre and Student Health Service Centre of Department of Health. Furthermore, the CHC may involve the participation of the private sector as it can extend the range of health and other services within a single point-of-access.

In March 2016, the Food and Health Bureau created an Electronic Health Record (eHR) Sharing System, managed by Electronic Health Record Office. eHR provides an information infrastructure for healthcare providers in both the public and private sectors to access to patients' medical records. It provides timely and accurate information and reduces duplication of tests and treatment. People have a better quality of primary care because they can visit private doctors to enjoy the services provided by the sharing system, which helps to alleviate the number of patients in the public sector and thus the waiting time.

In the latest Policy Address (2017) of the Government, in addition to extension of service coverage by 2018 to all 18 districts of the city through the General Out-patient Clinic Public-Private Partnership Programme, a new initiative to develop a Patient Portal, the second stage of Electronic Health Record Sharing System, will be considered to facilitate public-private partnership for better management of health and effective promotion of health education. Moreover, the issue of growing ageing population and insufficient resources to meet the demand for medical services were recognized and solutions were suggested.

As a consequence of the fact that public healthcare services are predominantly hospital-oriented, previous projects have overlooked the need to prescribe home care and community based care services for "meeting the aspirations of the elderly" under the principle of prevention is better than the cure. Fortunately, the Government has pledged to promote individual and community involvement, better coordinated medical and social sectors, and stronger district-level primary healthcare services. The Chief Executive plans to draw up a blueprint together with the Secretary for Food and Health Bureau for the expansion and provision of primary healthcare services, for which a steering committee was set up in November 2017 to evaluate the current and proposed planning of a comprehensive and coordinated primary healthcare service, in which the public is encouraged to take precautionary measures against diseases, with more capability in self-care and home care, ultimately resulting in less demand for hospitalization (The Hong Kong Government, 2017).

With an in-depth study on medical services, a delivery model will be designed to promote a systematic disease prevention through an improved disease screening and identification mechanism. These new measures to be taken by the Government shall aim to enhance public awareness against diseases and to promote home- and self-care by engaging individuals and the community, medical and social sectors teamwork, and by strengthening "district-level primary healthcare services". A new model of the CHC will be established to enhance community health through public-private and multi-disciplinary partnership to reduce the pressure on specialists and hospital services. A pilot district health centre will be set up in Kwai Tsing District in the last quarter of 2019. The District has collaborated with various organizations and constructed a solid foundation because the Kwai Tsing District Council was financed by the Government with \$100 million in 2013 to launch a number of district-based healthcare services (The Hong Kong Government, 2017).

5 CONCLUSION

The purpose of primary health care policy is to promote better health for all in Hong Kong. Primary health care services have improved over the years with a better provision of service. The developments and collaborations among Governmental departments and other stakeholders have led to more benefits to the users through initiatives such as the Primary Care Directory, Elderly Health Care Voucher Scheme, Electronic Health Record Sharing System, etc. In addition, promotion of concepts and guidance to users has been supplemented by financial assistance to the needy.

Public-private partnership has explored and introduced programmes such as Cataract Surgeries, General Out-patient Clinic PPP, Hemodialysis PPP, Patient Empowerment and Shared Care, leading to more health choices for individuals and better resource allocation and utilisation between the public and private sectors. However, the advancement has also brought about challenges. For instance, the community is not fully utilising the services or lacks the knowledge to participate in the schemes designed by the Government.

Although Hong Kong offers the best health services around the world and can achieve its objective - "to provide better health for all" - the system needs time to be fully established and to offer comprehensive services to everyone. Total primary care is feasible and achievable with the active and committed involvement of all stakeholders, regardless of the professions and background, for input of expertise and experience. Given time, quality primary health care services are within the easy reach of everyone in the community in Hong Kong.

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