



**HKU
Med**

LKS Faculty of Medicine
School of Nursing
香港大學護理學院

**2023 International Symposium on Quality Primary Health Care Development in the New Era towards
Universal Health Coverage
4-5 December 2023, Beijing**

PHC reform and development in Hong Kong SAR, China

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The University of Hong Kong



4 December 2023

Acknowledgements

- Prof MF Ren, Peking University
- Peking University Health Science Center
- The Department of Primary Health of National Health Commission
- WHO Representative Office in China

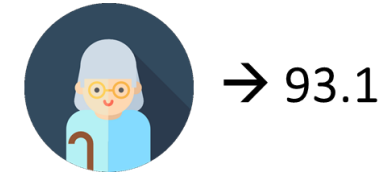
Outline

- (1) Primary health care development in Hong Kong: A New Journey
- (2) District Health Centres (DHCs), Primary Healthcare Blueprint
- (3) The HKU Primary Health Care Academy

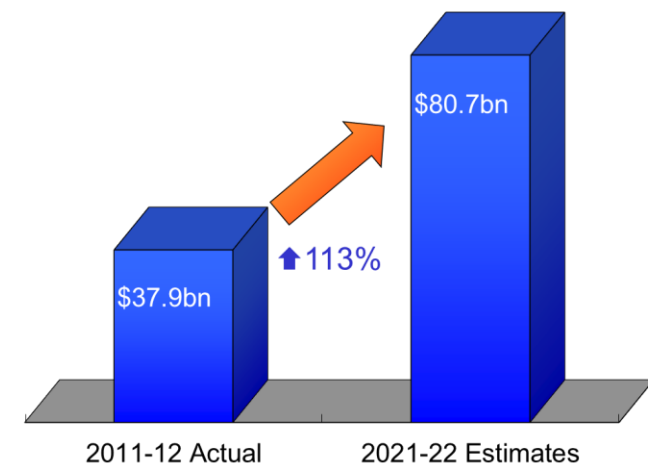
Challenges to Hong Kong health care system

- Ageing population
- Growing burden and complexity of chronic diseases
- From 2010/11 to 2019/20, the average annual growth rate of public health expenditure (5.6%) exceed that of nominal GDP (4.9%)
- Keep increasing public expenditure to fund public hospital system is **NOT sustainable**

Projected life expectancy (2066)* (at birth)

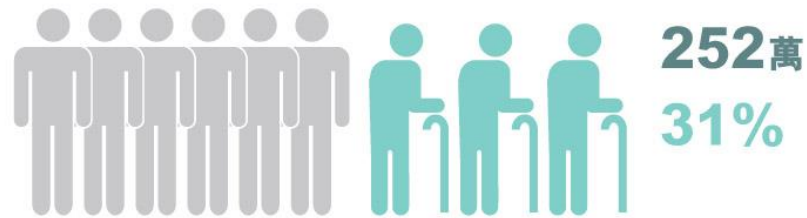


Government subventions to HA



Challenges to Hong Kong health care system

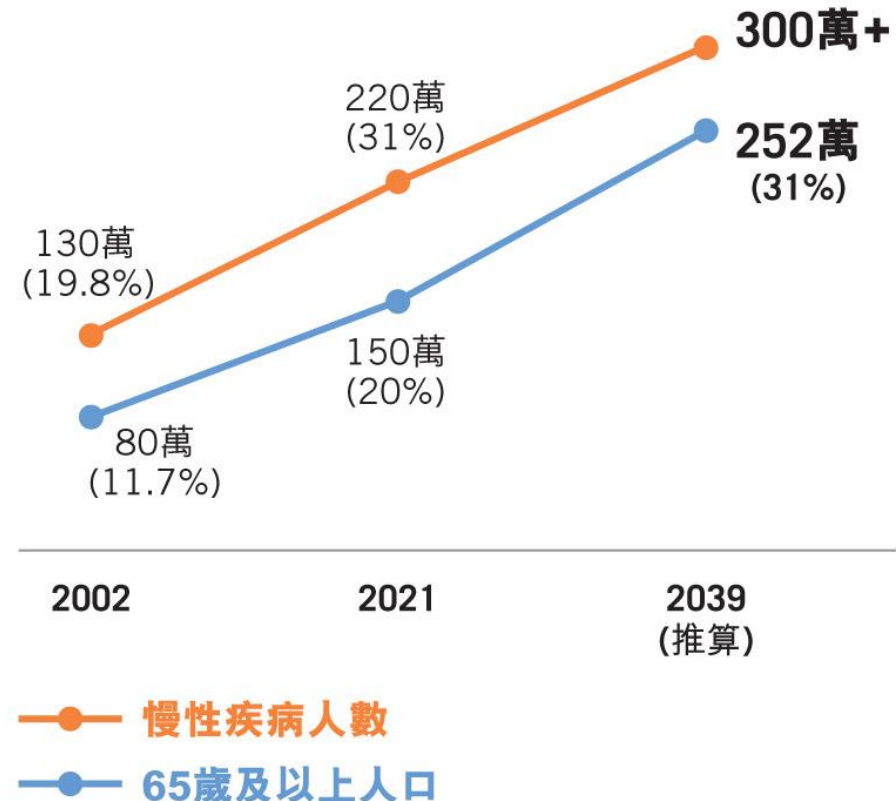
65歲及以上人口 (2039年預測)



慢性疾病病患人數 (2039年預測)

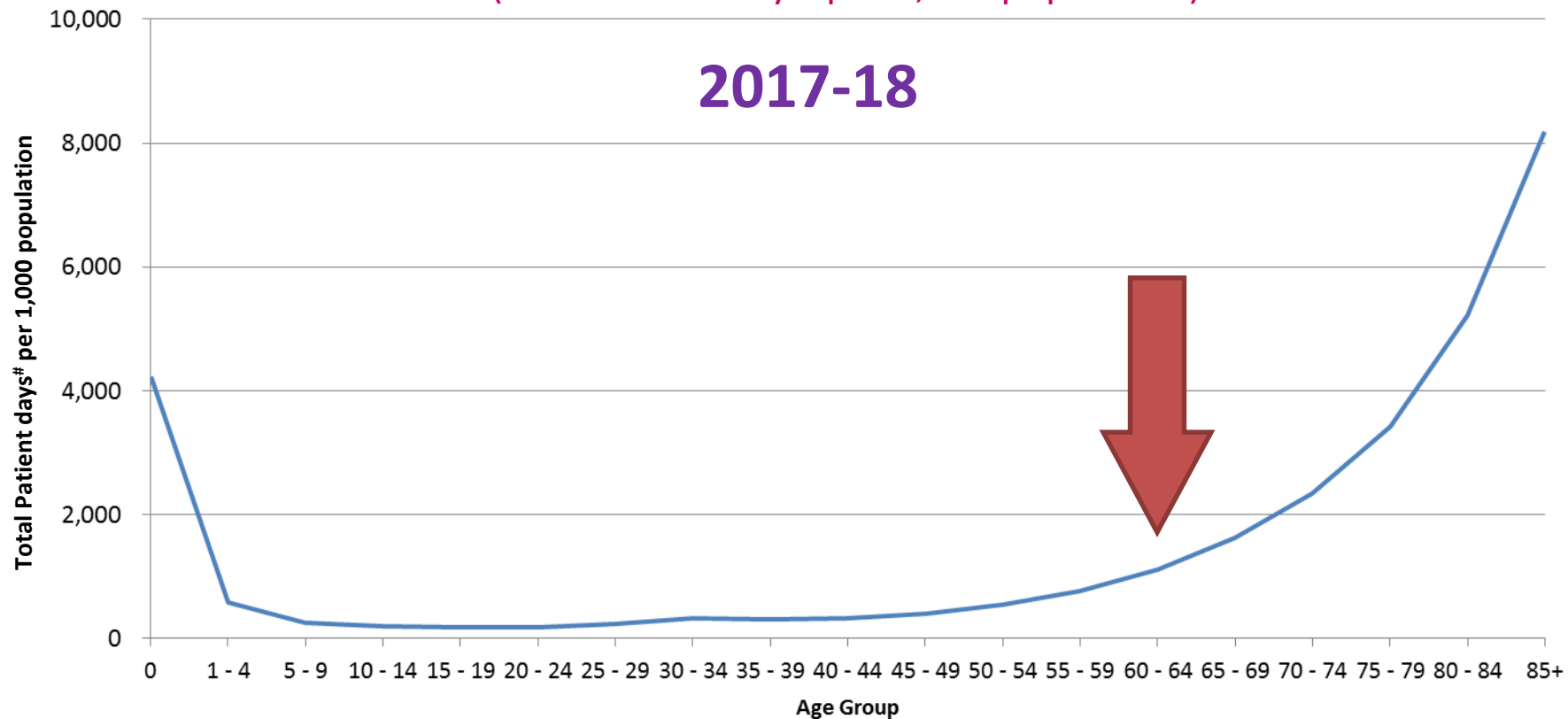


65歲及以上及慢性疾病人數趨勢



Ageing population in HK and its Impact on public health care services utilization

Inpatient Service Utilization Rate in Hospital Authority
(Total Patient days# per 1,000 population)



Remarks:

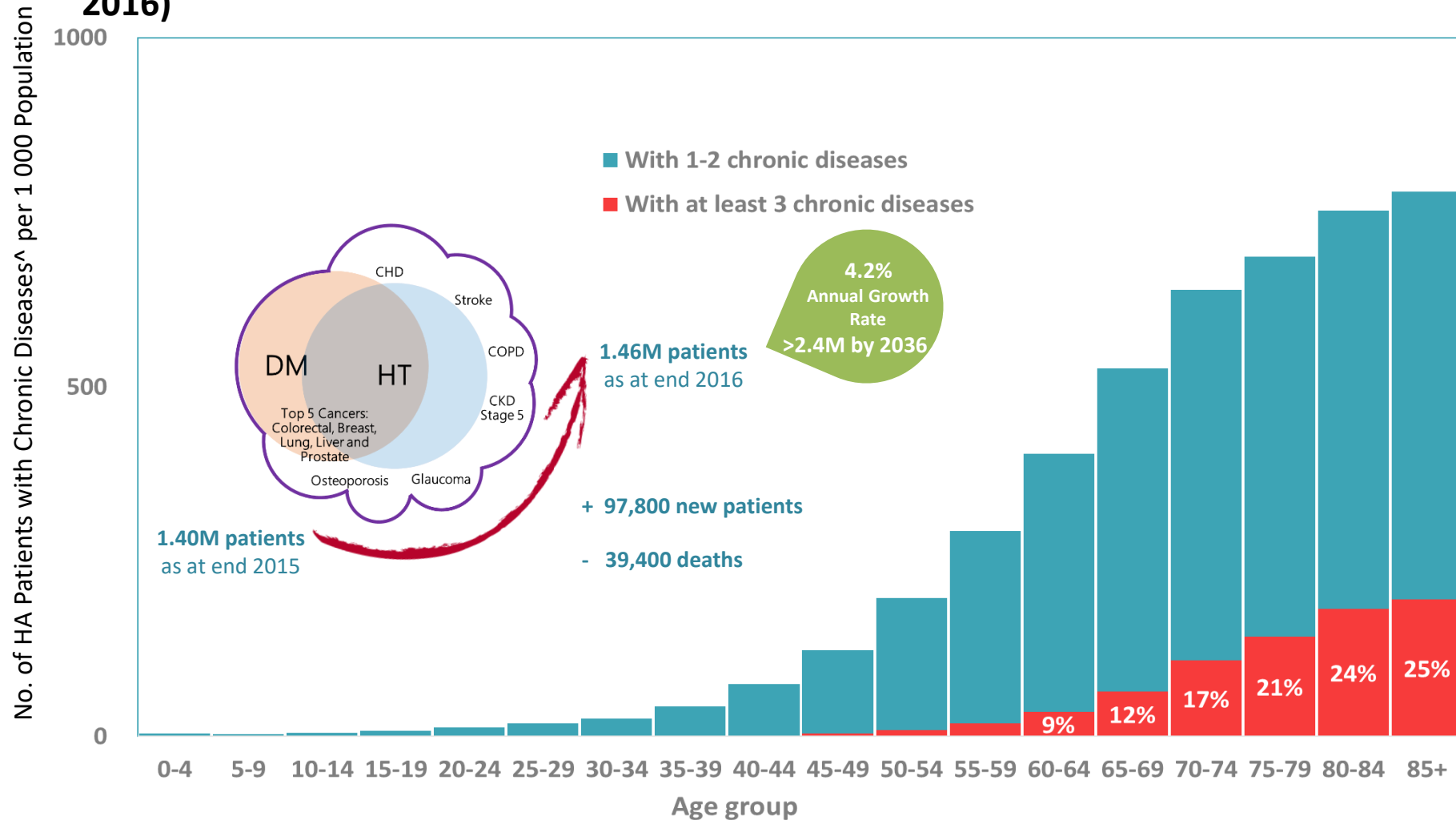
Patient days for general specialties (acute & convalescent) only.

Figures at age 0 refer to patient days (exclude Nursery) per 1000 known births.

Source: Hospital Authority Statistics & Workforce Planning Department

Increasing disease complexity

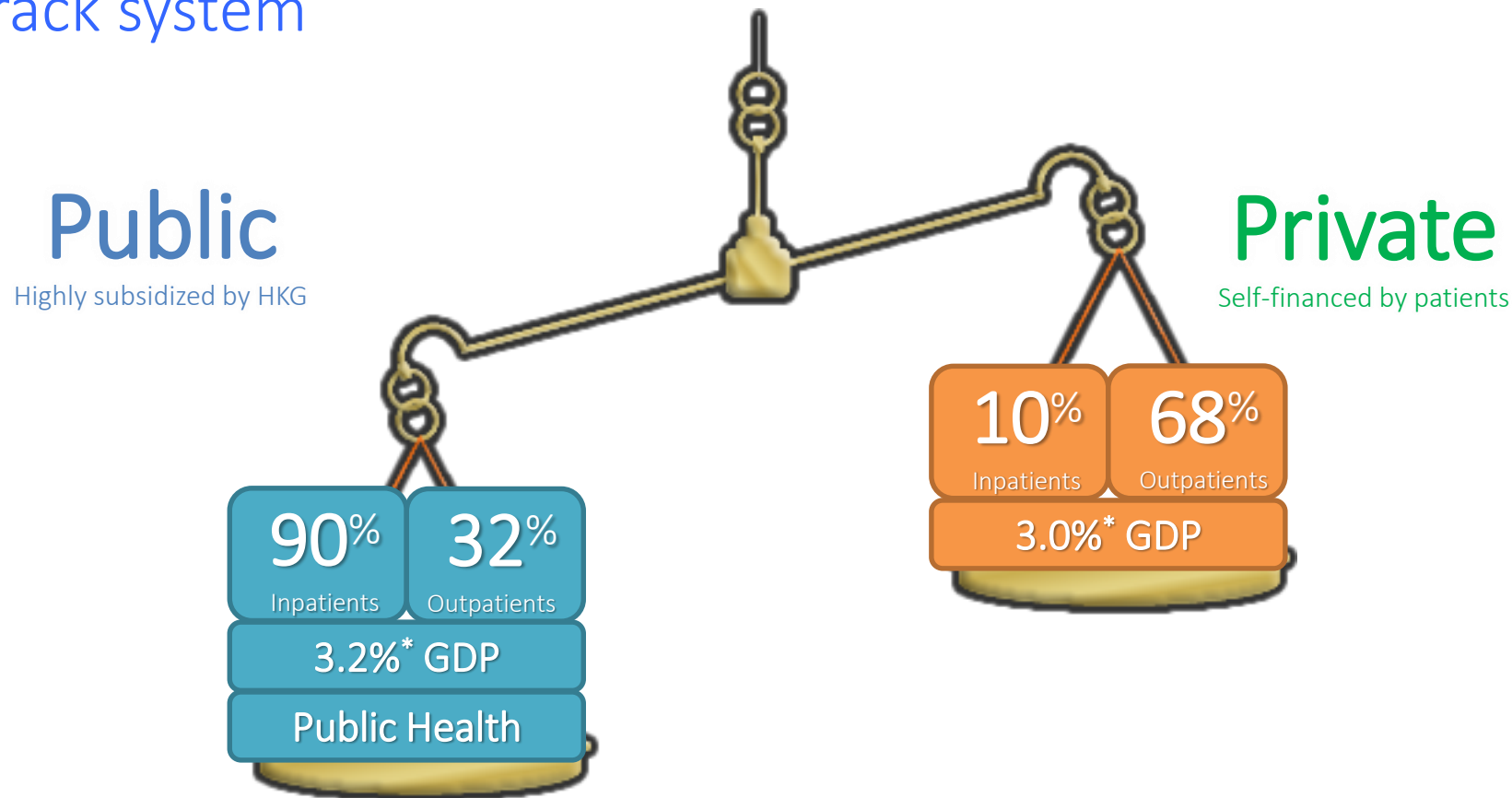
No. of Hospital Authority (HA) Patients with Chronic Diseases[^] per 1 000 Population (End 2016)



[^] Based on 13 selected chronic diseases
Source: Hospital Authority Statistics & Workforce Planning Department

HK health care system

- Twin-track system



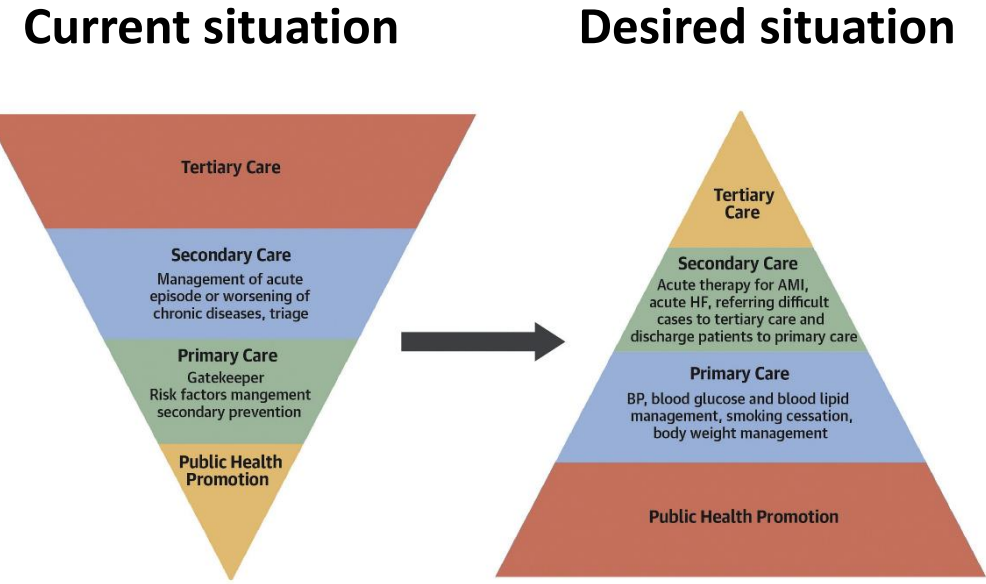
* Total health expenditure as a percentage of GDP (at current market prices)

Source:

- 1) Hong Kong's Domestic Health Accounts (HKDHA) 2016/17 from Food and Health Bureau
- 2) Inpatient (Secondary & Tertiary care) share: Public/private share by Inpatient Bed Days Occupied in 2017, HA and Dept of Health
- 3) Outpatient (Primary care) share: Thematic Household Survey Report No. 63, Census and Statistics Dept (data collected during October 2016 to January 2017)

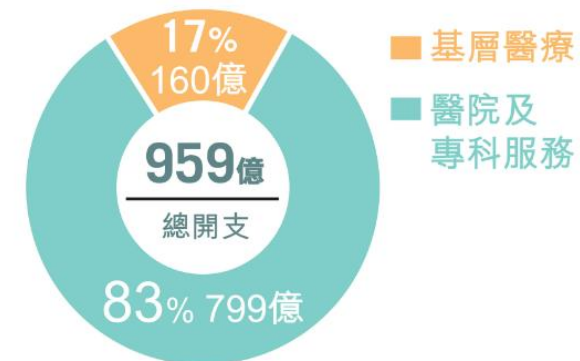
Urgent need to flip the inverted pyramid of our healthcare system

- Shifting the emphasis of the present healthcare system and people’s mindset from treatment-orientated to prevention-focused by strengthening the **primary healthcare system**

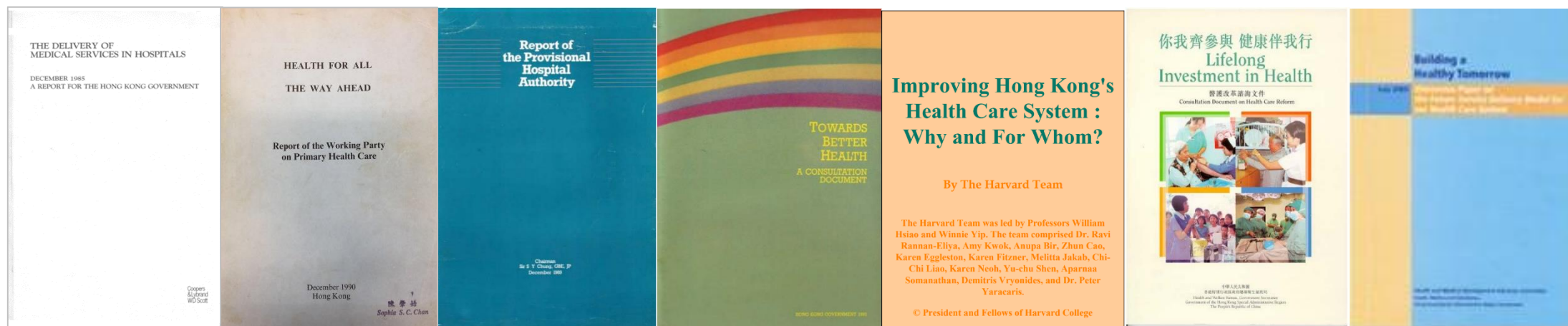


“Primary health care can meet **90%** of a person’s health needs throughout their lifetime” (WHO)

2019/2020 香港公共醫療衛生開支



The HK Government have been working hard on improving the health care system for ages



1985

1990

1993

1999

2000

2005



2008

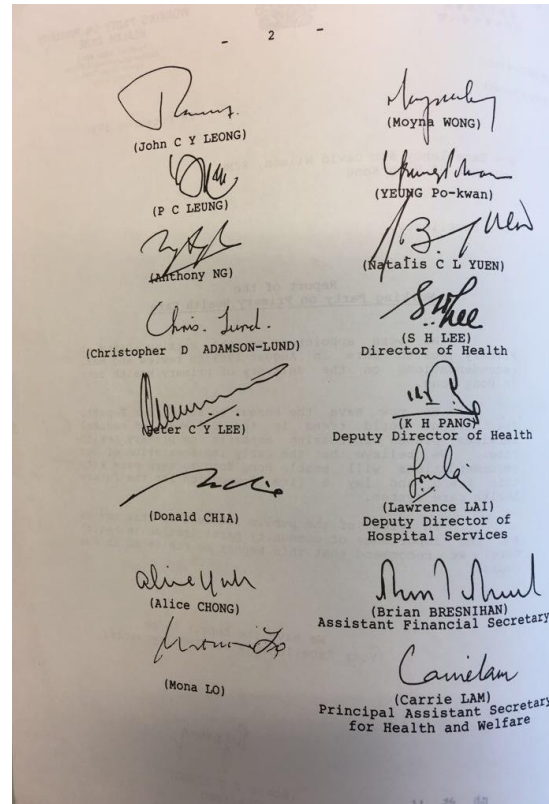
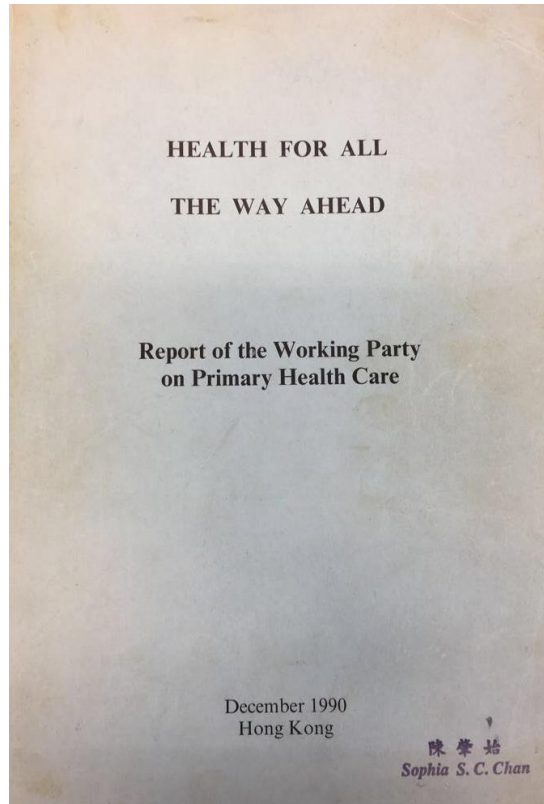
2010

2011

2018

2022

My journey in primary health care



Master Thesis: Reorienting the Basic Nursing Curriculum to Primary Health Care in Hong Kong: The Way Ahead (1991)

Policy Address 2017

A clear and strong commitment on PHC



The Hong Kong Special Administrative Region of the People's Republic of China
The Chief Executive's 2017 Policy Address



一起同行 擁抱希望 分享快樂
We Connect for Hope and Happiness

Primary Healthcare

156. Together with Professor Rosie Young and other members of the Working Party on Primary Health Care, I set out a blueprint for the delivery of primary healthcare in the early 1990s.

157. As a matter of fact, a comprehensive and co-ordinated primary healthcare system will enhance overall public health, reduce hospital re-admission and rectify the situation where accident and emergency service is regarded as the first point of contact in seeking medical consultation. The Government is determined to step up efforts to promote individual and community involvement, enhance co-ordination among various medical and social sectors, and strengthen district-level primary healthcare services. Through these measures, we aim to encourage the public to take precautionary measures against diseases, enhance their capability in self-care and home care, and reduce the demand for hospitalisation.

158. We will set up a steering committee on primary healthcare development to comprehensively review the existing planning of primary healthcare services and draw up a development blueprint. The Committee, comprising healthcare professionals, academics, non-governmental organisations and community partners, is tasked to advise on the Government's strategy on the development of primary healthcare services. Its work will include drawing up a model for district-based medical-social collaboration, using big data to identify the areas of medical care services requiring in-depth study, establishing a framework to implement measures on disease prevention in a more systematic manner (e.g. vaccination), disease screening and identification (especially chronic diseases such as stroke) and strengthening scientifically proven service provision and policy-led development work.

159. To further illustrate the effectiveness of medical-social collaboration, I have asked the Food and Health Bureau to set up a district health centre with a brand new operation mode in Kwai Tsing District within two years. The Government will provide funding for the centre according to the needs and characteristics of the district, with a view to enhancing public awareness of disease prevention and their capability in self-management of health through public-private partnership, providing support for the chronically ill as well as relieving the pressure on specialist and hospital services. The planned district health centre will make use of the local network to procure services from organisations and healthcare personnel serving the district so that the public can receive necessary care in the community. Kwai Tsing District Council made use of the \$100 million provided by the Government in 2013 for district-based signature projects to launch a number of healthcare services in collaboration with local associations and non-profit-making organisations, and has built a solid foundation for the further extension of district-based primary healthcare services. With the experience gained from the pilot scheme, we will progressively set up district health centres in other districts.

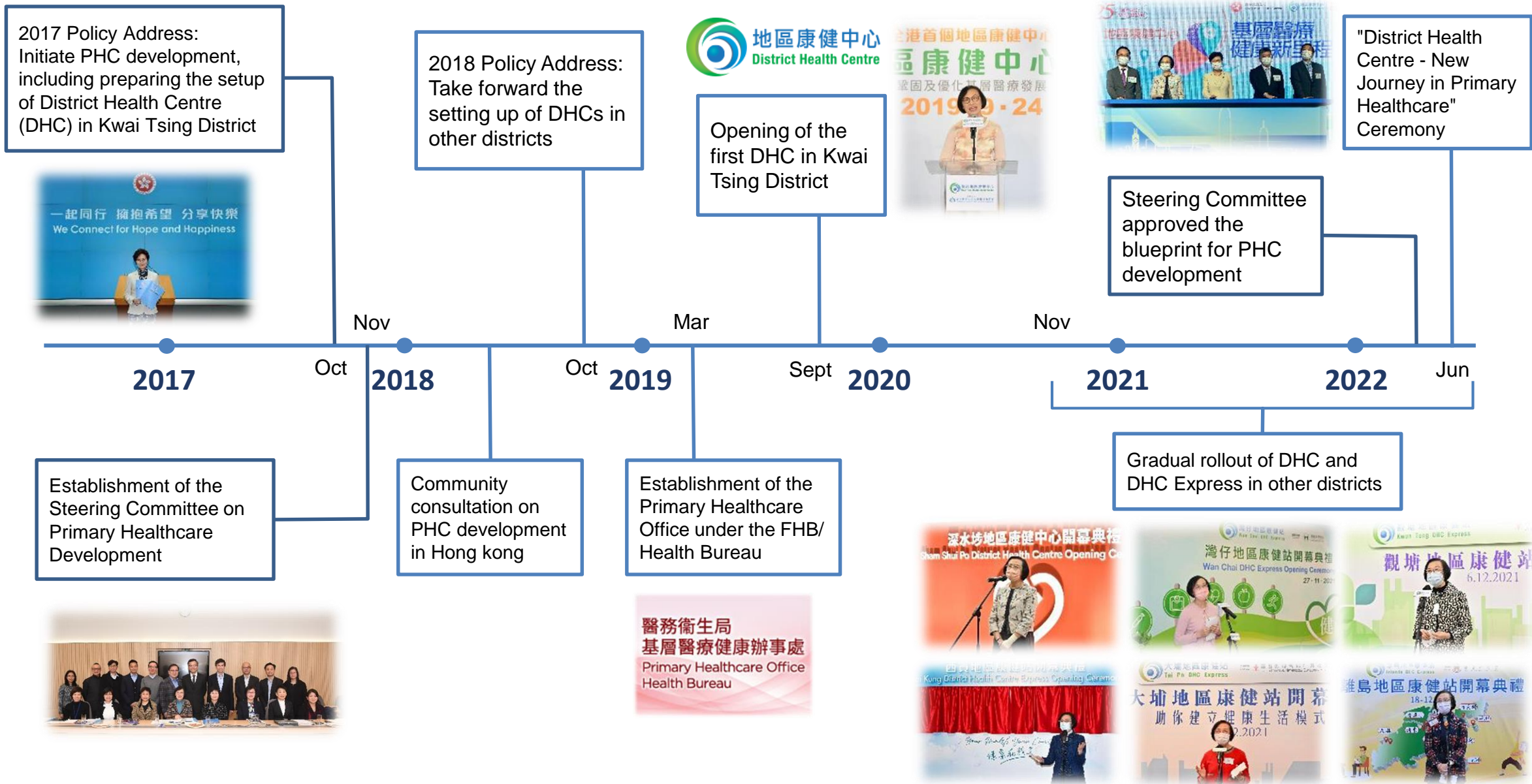
Mandate:

Setting up 18 District Health Centre Networks

- Steering Committee on Primary Healthcare Development
- Develop District Health Centre Network in all 18 districts
- Blueprint for the development of primary care services in HK
 - Community-based (地區為本)
 - Medical-social collaboration (醫社合作)
 - Public-private collaboration (公私合營)



Milestones of PHC development in Hong Kong



Chief Executive announcing a new journey in Primary Health Care development in Hong Kong (15 June 2022)



政府近年積極發展基層醫療，計劃於年內全數落成各區的地區康健中心或地區康健站，扭轉市民現時「重治療、輕預防」的觀念。隨著人口老化、醫療需求急增等問題逐漸冒起，地區康健中心成為本港基層醫療發展的重要基石之一，中心不但透過健康教育及倡議工作來提升全民健康，更以慢性疾病管理來預防重症，務求成為市民健康的第一層保障，大幅減輕公營醫療系統的負擔。

地區康健中心年內遍佈十八區 冀全面扭轉「重治療、輕預防」現象

紓緩醫療系統壓力 籲全港市民開展健康新里程

地區康健中心引領基層醫療新里程

一直以來，政府投放大量資源在公營醫療系統上，然而目前醫療服務以治療為主，加上市民因未能辨別適合的醫療單位而依賴醫院服務，導致公營醫院負荷過重。食物及衛生局局長陳肇始教授形容設立地區康健中心是本港基層醫療發展的新里程，在「地區為本」、「醫社合作」、「公私合營」的三大策略指引下，地區康健中心不但聯繫區內不同的持份者，甚至起了整合政府已有醫療資源的作用，透過建構具有社區特色的服務網絡，全面提升市民的生活質素。



▲ 食物及衛生局局長陳肇始教授, JP

「地區康健中心屬於公營醫療體系的一部分，我們期望可協調不同基層醫療健康服務單位，配合有效的地區資源運用，無縫銜接醫療與地區機構，為市民帶來以地區為本的社區基層醫療服務，長遠減輕公營醫療系統的壓力。」

在現時醫療系統下，近半使用者為慢性病患者。為長遠減輕公營醫療系統的壓力，政府正積極建立地區為本的社區基層醫療系統，促進公私營策略性合作，同時統整各區市民的健康數據來理順醫療服務，以制訂訂衛生政策，令資源得以更有效地投放。

藉地區為本的多元服務 成為區內「健康樞紐」

十八區地區康健中心以「預防為主、地區為本」，按照各區的人口特徵、健康風險等因素來提供疾病預防、自我管理、社區復康、照顧支援等多種基層醫療健康服務，讓市民得到適切的健康護理，提升健康質素。

食物及衛生局基層醫療健康辦事處處長蔡宇恩醫生指：「以葵青地區康健中心為例，我們會先參考該區的男女比例、吸煙人數等人口資料，再與營運機構商討，從而針對當區服務需要的條款設計相關服務。例如區內有較多長者面對關切問題，該中心便會在該方面投放資源，如開設強健關節的運動課程及防跌指導，對症下藥。」

作為公營醫療體系的一部份，地區康健中心聯繫不同的政府部門，如：社會福利署、衛生署、食物安全中心，更以「公私合營」的模式，由政府牽頭與區內的社區機構、私營診所、家庭醫生合作。為方便附近的市民，除了主中心外，當局亦開設了多個附屬中心，積極令康健中心成為區內的「健康樞紐」。

直達節目

地區康健中心 - 基層醫療健康新里程

- 日期 2022年6月15日 (星期三)
- 時間 下午3時至4時15分
- 播放頻道 港台 TV32 及 香港電台第二台 現場直播

如市民欲了解更多關於地區康健中心的資訊，可瀏覽以下網址：
<https://www.dhc.gov.hk/>



「醫社合作」含雙重意義 康健中心創造「公私合營」協同效應

「醫社合作」是地區康健中心的一大綱領。林正財醫生指，「醫社合作」中的「社」包含兩重意義——「社區」和「社區」。「社區」是指，香港每個社區看似一樣，實際上大有不同；居民結構、年齡、種族、生活習慣等皆有分別，因此各區康健中心會因應地區而調整服務，導致資源最優分配。至於「社區」，即是鼓勵社區機構參與各區康健中心的營運，因為社區機構服務內容廣泛，接觸市民的層面夠廣，可觸及弱勢社群以及本來甚少關注健康的市民，有效傳遞預防疾病的訊息。



▲ 基層醫療健康辦事處處長蔡宇恩醫生, JP



▲ 基層醫療健康辦事處處長蔡宇恩醫生, JP

全港各區人口數以十萬，協調不同醫療人員，為市民提供適切護理，自然成為地區康健中心的一大難題。梁偉俊教授分析，以市民常見的需求原因——肌肉骨痛病症為例，患者經過家醫生的診斷後，基層醫療團隊中的中醫師、物理治療師和職業治療師等都擔當為患者治療和康復的重要角色。展望未來，梁教授寄語地區康健中心能夠避開在地區私營的私人執業醫生、中醫師和職業治療師，構建一個具規模的社區基層醫療健康網絡，一併發揮力量以促進市民的健康。

以預防為目標 關顧病人身心 達致全人醫治

地區康健中心惠及普羅市民，對於家庭醫生而言，設施和服務亦讓市民得到貼身照顧，因而樂見當局致力發展基層醫療。

李國輝醫生表示，本港市民通常只會於身體不適的時候約見醫生，而忽略日常保健，例如無煙無酒、低鹽低脂的飲食習慣等等，在預防疾病的關鍵作用。因此，地區康健中心的工作重點以配合家庭醫生，扭轉市民「重治療、輕預防」的觀念為目標，務求從源頭降低市民患病的風險。地區康健中心歡迎市民免費登記為會員，市民只要成為會員，便可享受中心提供的服務，健康時可以接受健康教育，了解有關健康的生活方式，亦可以每年接受健康風險評估，而在生病時也能得到持續、全面及以實際為本的護理。在社會層面，這亦可以逐漸減低慢性疾病對醫院的負擔。

除了提供多元化的服務，地區康健中心的護理主任亦承擔著重要的角色，因應市民的需要，協調由中心或社區網絡提供的合適服務。



▲ 基層醫療健康辦事處處長蔡宇恩醫生, JP



▲ 區內醫療健康辦事處處長蔡宇恩醫生, JP

黃金月教授表示，護理統籌主任的職責有如協助運動員訓練的教練，會為會員設立清晰而可行的目標，如飲食和體能活動計劃等，同時要求病人重視自己的身體狀況和進度，協助病人找出改善健康狀況的源動力，並鼓勵病人克服障礙。透過這種互動的恆常交流，可以減低會員患上慢性疾病的風險，讓慢性病患者亦可降低引致併發症的機會，讓護理人員與患者一起並肩同行。

Primary Health Care development in Hong Kong: National and International support

2022年6月15日，在即将迎来香港回归祖国25周年之际，国家卫生健康委主任马晓伟视频出席香港特别行政区“地区康健中心—基层医疗健康新里程”典礼并致辞。香港特区行政长官林郑月娥出席并致开幕辞，世界卫生组织等有关国际组织代表、香港特区政府有关部门负责人及香港有关专家代表等约600人，以线上线下结合方式出席。

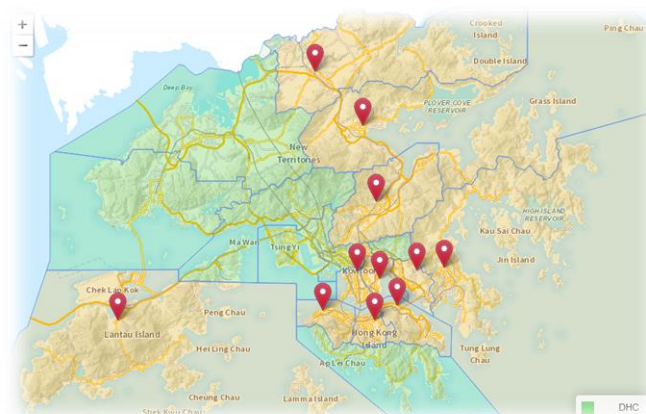
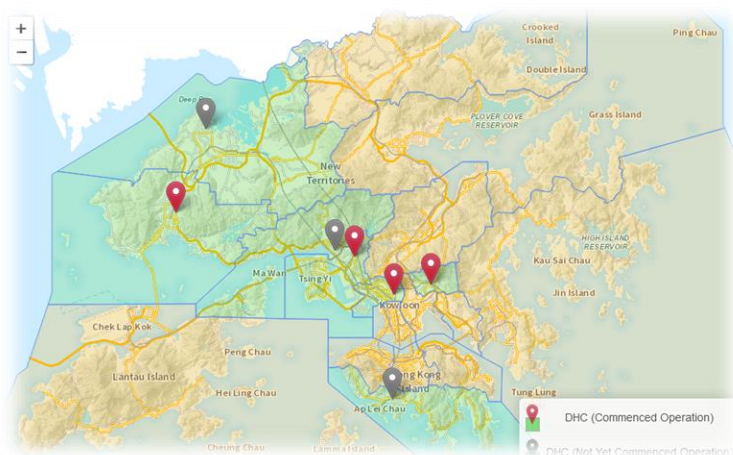
马晓伟积极评价香港医疗系统改革发展成就。他表示，过去5年来，香港特区政府坚持预防为主的健康理念，致力发展基层医疗健康服务，在全港范围内开设地区健康中心，提升市民个人健康管理能力，取得良好成效。在抗击新冠肺炎疫情过程中，香港基层医疗服务体系亦发挥了重要作用。马晓伟简要介绍内地基层医疗卫生服务工作进展，希望未来与香港业界继续加强卫生健康领域交流合作，并将一如既往积极支持香港医疗体系发展。



DHC and DHC Express in all 18 districts in Hong Kong

| District Health Centres (DHCs) | | |
|--------------------------------|--|----------------|
| Kwai Tsing | Kwai Tsing Safe Community and Healthy City Association | September 2019 |
| Sham Shui Po | St James' Settlement | June 2021 |
| Tuen Mun | Evangelical Lutheran Church of Hong Kong | May 2022 |
| Wong Tai Sin | Hong Kong Sheng Kung Hui Welfare Council Limited | July 2022 |
| Yuen Long | Pok Oi Hospital | October 2022 |
| Southern | Aberdeen Kai-fong Welfare Association Limited | October 2022 |
| Tsuen Wan | Yan Chai Hospital Board | December 2022 |

| DHC Express | | |
|----------------------------|---|----------------|
| Sai Kung | Haven of Hope Christian Service | September 2021 |
| Central and Western | The Hong Kong Society for Rehabilitation | October 2021 |
| Wan Chai | Methodist Centre | October 2021 |
| Eastern | The Hong Kong Society for Rehabilitation | October 2021 |
| Yau Tsim Mong | The Lok Sin Tong Benevolent Society, Kowloon | October 2021 |
| Kowloon City | The Lok Sin Tong Benevolent Society, Kowloon | October 2021 |
| Kwun Tong | United Christian Medical Service | October 2021 |
| North | Hong Kong Young Women's Christian Association | October 2021 |
| Tai Po | United Christian Medical Service | October 2021 |
| Sha Tin | The Hong Kong Society for Rehabilitation | October 2021 |
| Islands | The Neighbourhood Advice-Action Council | October 2021 |



DHC and DHC Express in all 18 districts in Hong Kong



District Health Centres (DHCs)

- DHCs are set up in all 18 districts in Hong Kong with a brand new operation mode to promote primary healthcare services to (1) enhance the public's health status, and (2) relieve the pressure on public hospitals
- **Key functions of DHCs:**



A service / resource hub



Health promotion



Disease prevention and screening



Chronic disease management



Community rehabilitation

Key features of DHCs

1 Community based services

- Convenient location of Core Centre and Satellite Centres

2 District based services

- Scope of DHC service based on the needs and the characteristics of the district

3 Public private partnership

- Appointment of a DHC Operator (a non-governmental organization) through open tender
- Purchase of services from private service providers
- Foundation of a network

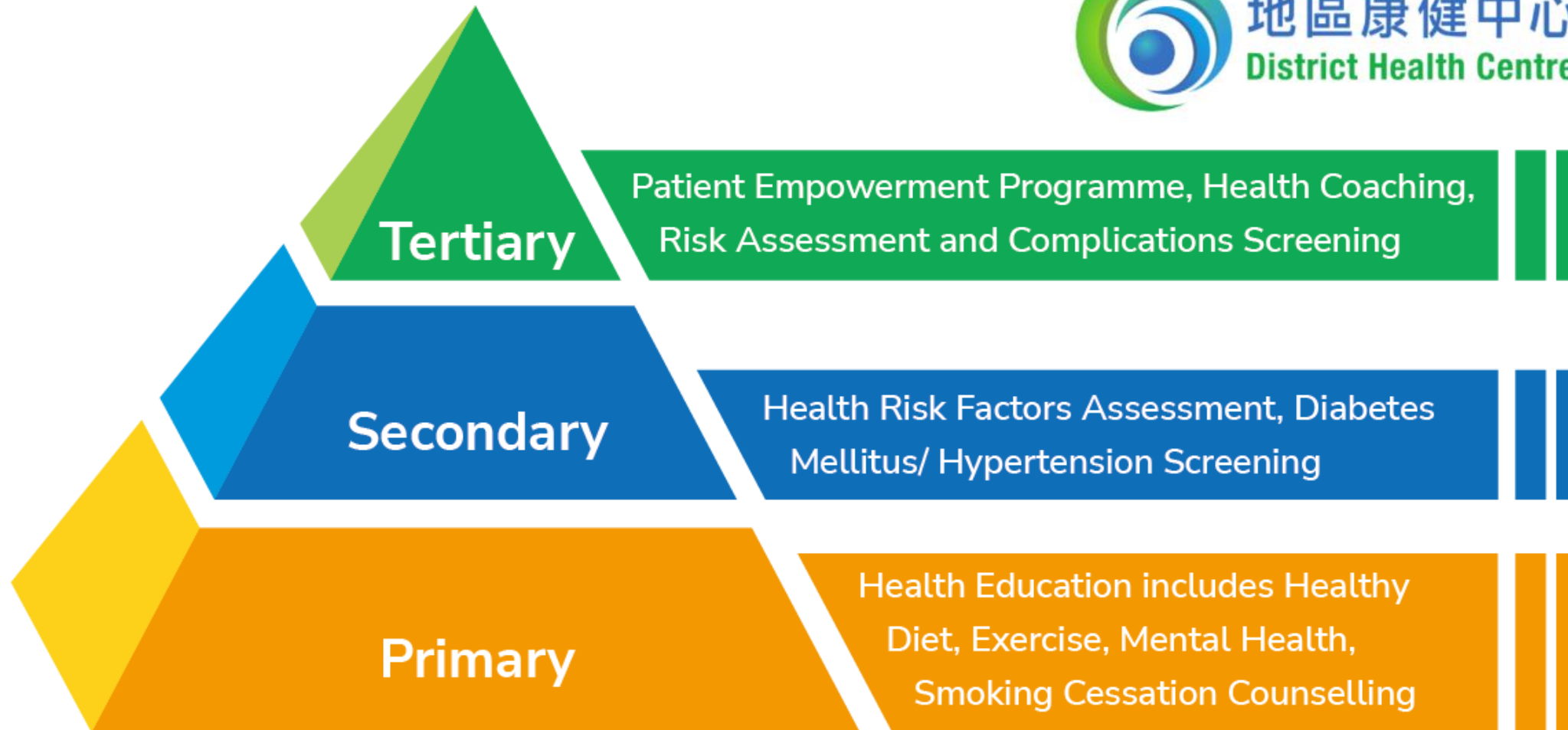
4 Medical social collaboration

- Members of the core team include:
 - Executive director
 - Chief care coordinator (Nurse)
 - Care coordinator (Nurse)
 - Physiotherapist
 - Occupational therapist
 - Dietitian
 - Pharmacist
 - Social worker
 - Administrative staff
- Multidisciplinary care approach

5 Outreach service



Scope of Service of DHC



Scope of Service of DHC



Health Promotion

- Healthy Diet*
- Physical Activity*
- Weight Management
- Fall Prevention
- Smoking Cessation*
- Alcohol Consumption*
- Sleep Hygiene
- Mental Well-being



Health Assessment

- Health Risk Factors Assessment
- Screening for Diabetes Mellitus/Hypertension



Chronic Disease Management

- Diabetes Mellitus
- Hypertension
- Musculoskeletal Disorder (Low back pain or Degenerative knee pain)



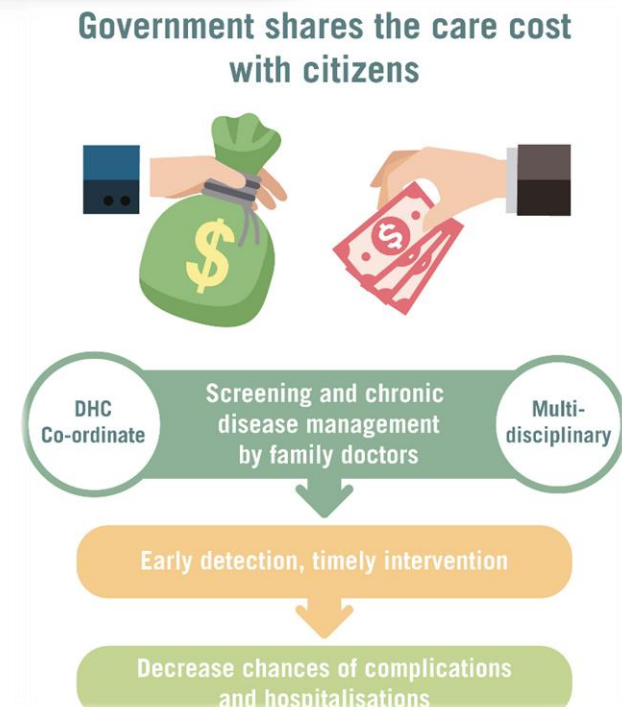
Community Rehabilitation

- Hip Fracture
- Post-Acute Myocardial Infarction
- Stroke

* The four major risk factors for NCDs

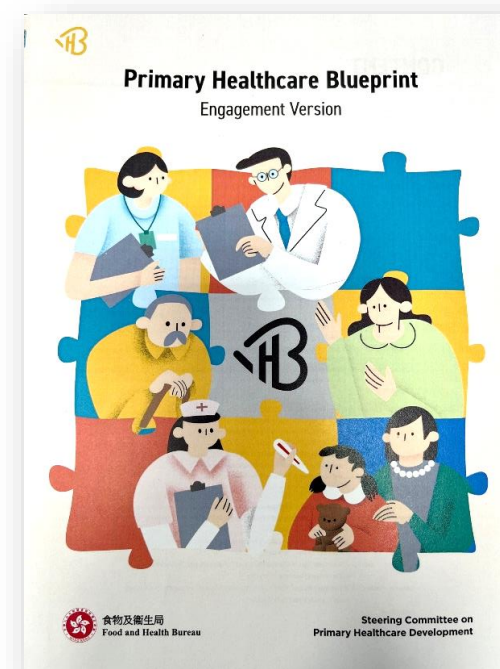
CE's Policy Address 2022 on PHC

- Publish the **Primary Healthcare Blueprint**
 - Maps out the next steps toward establishing a PHC system
- Establish the **Primary Healthcare Authority**
 - Co-ordination and governance of PHC service provision
- Launch the 3-year **Chronic Disease Co-Care Pilot Scheme** under DHCs
 - Refer patients at high-risk of DM & HT to private health care services
- Enhance **Elderly Health Care Voucher Scheme** to cover PHC services



Primary Healthcare Blueprint

- The blueprint aims to address the software and systemic aspect of our healthcare system
- **Five proposed areas of healthcare reform:**
 1. Develop a community-based PHC system
 2. Strengthen PHC governance
 3. Consolidate PHC resources
 4. Reinforce PHC manpower
 5. Improve data connectivity and health surveillance



Key Recommendations

- Establish System**
 - Develop a community-based primary healthcare system
 - Promote "Family Doctor for All"
 - Enhance the management of chronic diseases
- Strengthen Governance**
 - Establish the Primary Healthcare Commission
 - Introduce the Primary Care Register system
 - Enhance the referral mechanism between family doctors and specialist or hospital services
- Consolidate Resources**
 - Utilise private healthcare services through strategic purchasing
 - Enhance Elderly Health Care Voucher and other subsidised services
 - Co-ordinate land resources and facilities for healthcare in the community
- Reinforce Manpower**
 - Reinforce primary healthcare manpower
 - Enhance primary healthcare training
 - Strengthen the role of primary healthcare professionals
- Improve Connectivity**
 - Establish a one-stop electronic healthcare services platform
 - Promote e-Health as personal health account
 - Analyse health data for policy making

慢病共治計劃 | 醫衛局強調價格透明 料將有數百醫生參與足夠應付

社會

更新時間：09:53 2023-09-26



政府將於11月中推出「慢性疾病共同治理先導計劃」，為期3年，目標資助45歲或以上、未有已知糖尿病或高血壓病歷的香港居民參加，以共同付費（Copayment）形式去私營市場篩查及治療服務。基層醫療健康專員彭飛舟重申，目標可以篩查20萬人，希望越來越多，不會為參加人數設上限。

彭飛舟在電台節目上表示，45歲以上人士患糖尿病或高血壓的風險大增，患心臟病的風險，隨著過了45歲之後，亦將會大幅提升，從40至44歲的1.1%升至65至74歲的44.5%；現時45歲以上人士，有3成患糖尿病或高血壓，1成7人屬隱性患者，推算未來10年本港將多100萬人患慢性疾病，希望市民透過計畫進行篩查，及早預防並治療。計劃是透過「一人一家庭醫生」和由地區康健中心或地區康健站統籌的跨專業公私營協作模式，資助市民在私家診所及早診斷和治療慢性病，並配合地區康健中心服務，更有效管理慢性疾病。

Chronic Disease Co-Care Pilot Scheme (Nov 2023)

Scheme objectives:

- Provide convenient **screening services** for **diabetes mellitus (DM)** and **hypertension (HT)**
- Provide tailored **health management plan** for participants to control chronic disease risk factors
- Prevent chronic diseases and reduce complications
- Practice “Family Doctor for All”

Eligibility of scheme participant:

- Hong Kong residents aged 45 or above *
- No known history of DM/HT, nor related symptoms



Scope of service provision

Screening services:

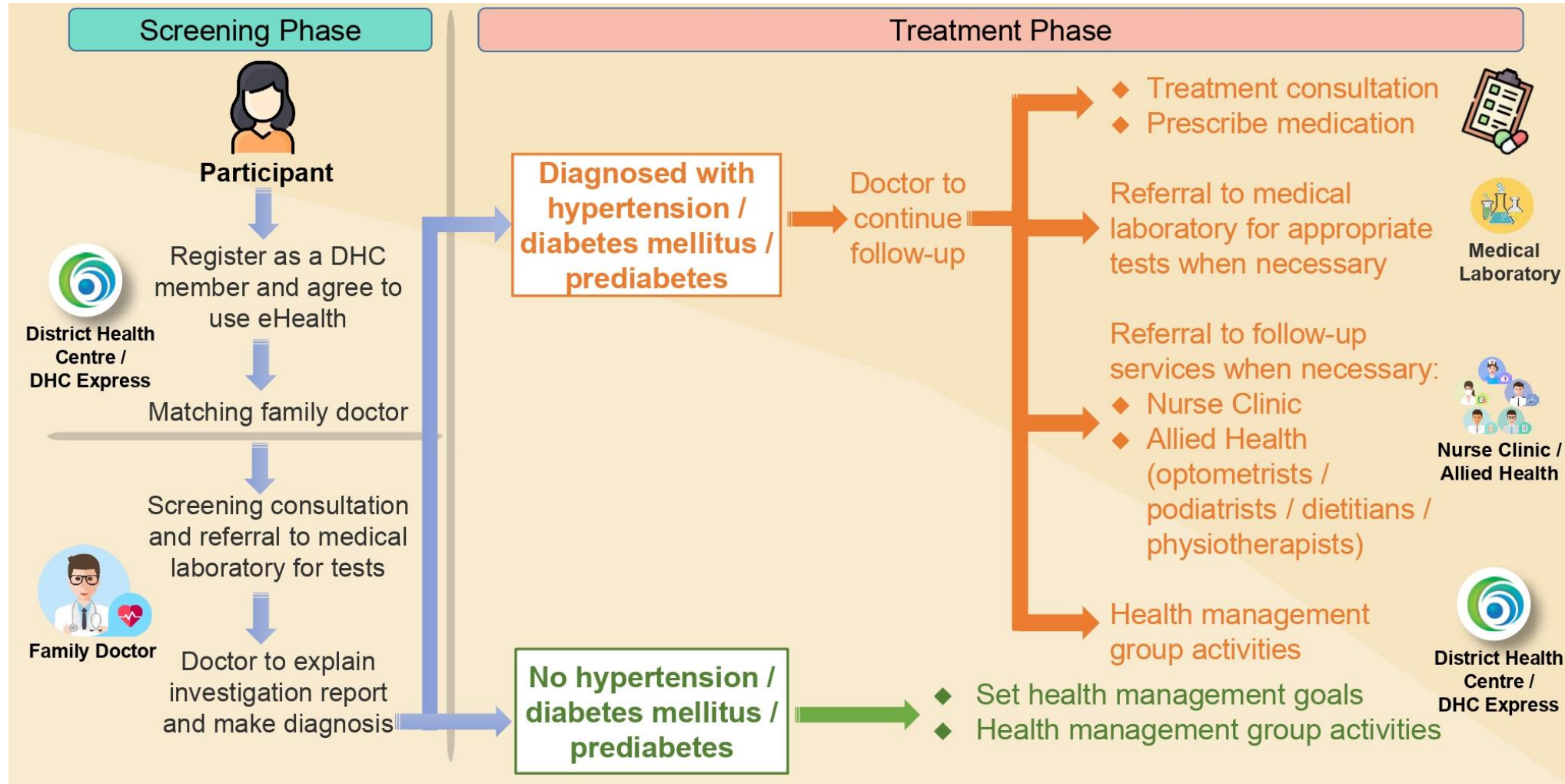
- Family Doctor to perform assessments and arrange investigation for screening
- Blood test(s) will be conducted at a designated medical laboratory

Family Doctor to explain investigation report and diagnosis, and formulate appropriate health management plan

Health management plan:

- Family Doctor will provide a maximum of **six subsidized consultations** annually to scheme participants diagnosed with HT and/or DM
- Maximum of **four subsidized consultations** annually to scheme participants with prediabetes, while providing necessary medications and arranging tests and examinations as required
- DHC/DHCE will arrange **nurse clinic follow-up** and/or allied health services according to Family Doctor's referral and condition of scheme participants

Service flow of Chronic Disease Co-Care Pilot Scheme



The HKU Primary Health Care Academy (PHCA): A New Initiative 2023

Background

With the Azalea (1972) Endowment Fund's generous support, The University of Hong Kong (HKU) Primary Health Care Academy (PHCA) is being set up in February 2023 with Professor Sophia Chan as the Director. The HKU PHCA is a platform committed to generating evidence and disseminating knowledge of primary health care (PHC) as well as incubating the next generation of health care professionals in PHC for universal health coverage and the sustainable development of a healthy society in Hong Kong.



Professor Sophia Chan
Director, HKU PHCA

Mission and Objectives

The HKU PHCA strives to advance the sustainable development of PHC locally, regionally, and internationally. It contributes to addressing the health challenges brought about by an ageing population and the increasing prevalence of chronic diseases, facilitating the government's new journey in PHC development, improving the overall health of the public, and enhancing their quality of life.

Through the provision of a platform for innovative research, advanced training, testing evidence-based services, policy discussion, and knowledge exchange, the HKU PHCA aims to **(1) enhance the knowledge and practice of nurses and other health care professionals in PHC; (2) promote innovation research and testing evidence-based models of care on chronic disease prevention (primary, secondary, and tertiary) and management in the community to enhance the effectiveness of PHC services; (3) strengthen health care professionals' capacity on providing effective PHC services through effective training models; and (4) enable policy dialogue and advocacy locally, nationally, and internationally.**

Four Pillars of Activities

Pillar 1: Developing innovative and evidence-based research to inform policy making

A series of technology-based, proactive, and personalised intervention research is conducted covering PHC interventions, big data analytics for health surveillance, and rehabilitation interventions for COVID-19. Randomised controlled trials, clinical data, and other appropriate methodologies are adopted to generate research evidence and rigorously analyse the effectiveness of different interventions in a bid to explore a more accessible, sustainable, and scalable PHC development model as well as produce scientific evidence for policy making.

Pillar 2: Imparting professional knowledge and experience to build capacity in the health care professionals

Professoriates and teaching staff from the various departments and schools of HKUMed are invited to provide advanced PHC courses leveraging teaching technologies such as simulation, virtual reality, and robotics. By imparting professional knowledge and experience to educators, nurses, and other health care professionals or students as well as acting as an advisor to other institutions, the HKU PHCA provides professional advice and training relevant to PHC aiming to build capacity in the health care professionals and develop effective training models putting knowledge into practice.

Pillar 3: Delivering evidence-based services to play an exemplary and leading role

The HKU PHCA collaborates closely with PHC professional organisations, District Health Centres, and District Health Centre Expresses to identify the service needs of different groups at an early stage and implement pilot service models. By providing health coaching on various groups, e.g. long COVID patients and smoking cessation for youth/women/other target groups, the HKU PHCA delivers early intervention support services to those in need in the community and plays an exemplary and leading role.

Pillar 4: Convening global experts for PHC discussion to create sustainable impact

The HKU PHCA organises seminars, forums, and leadership summits to bring together renowned experts, academics, and industry leaders from around the world to discuss PHC development and share best practices and experiences. By building connections with the World Health Organization and other international leaders in PHC, the HKU PHCA facilitates global conversations and collaboration in order to navigate change and create sustainable impact to strengthen PHC development at the local, regional, and international levels.



**The University of
Hong Kong
Primary Health
Care Academy**

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The HKU Primary Health Care Academy
The University of Hong Kong, 5/F, Academic Building
3 Sassoon Road, Pokfulam, Hong Kong

The HKU Primary Health Care Academy (PHCA)

- With the generous donation from the Azalea (1972) Endowment Fund, the HKU PHCA was set up in February 2023, with Prof Sophia Chan as Director.
- The HKU PHCA is a platform committed to **generating evidence** and **disseminating knowledge of PHC** as well as **incubating the next generation of health care professionals** in PHC



**HKU
Med**

LKS Faculty of Medicine
School of Nursing
香港大學護理學院

**HKU
PRIMARY HEALTH CARE ACADEMY**
香港大學
基層醫療健康教研中心

Mission of the HKU PHCA

- Striving to **advance the sustainable development of PHC** locally, regionally, and internationally
- Contributing to **addressing the health challenges** brought about by an ageing population and the increasing prevalence of chronic diseases
- **Facilitating the government's new journey in PHC** development, **improving the overall health of the public**, and enhancing their quality of life

The HKU Primary Health Care Academy (PHCA)

Pillar of activities



Research

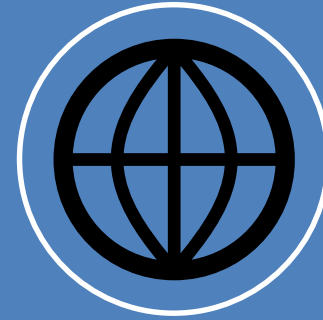
- Innovative PHC intervention
- Big data analytics for health surveillance
- COVID-19 rehabilitation



Education and capacity building



Evidence-based services



National and international collaboration



Knowledge exchange and advocacy

Course in ADAPT: Advances in Drug Allergy & Penicillin Testing

Unlocking future therapeutic options and clinical benefits through understanding and dealing with drug allergies, especially penicillin, in your primary care practice

Course Highlights

- Taught by international faculty from Hong Kong and Australia
- Focus on penicillin allergy de-labeling
- Practical skills in clinical drug allergy and safe drug allergy testing
- Designed for frontline healthcare professionals, especially general practitioners, family medicine physicians and nurses
- Physician (ADAPT-P) and nursing (ADAPT-N) streams available
- In-person teaching at HKU
- Co-led by HKU, the University of Western Australia and the Hong Kong Institute of Allergy

Prerequisites & Requirements

- Active clinical practitioners given priority (public or private sector, clinic or hospital-based)
- ADAPT-P: Registered Medical Practitioner (MCHK)
- ADAPT-N: Registered Nurse (HKNC)
- 100% in-person attendance required for certification

What you Get

- Knowledge and skills in drug allergy diagnosis and assessment enhanced
- Changes in clinical practice
- CME/CE points pending
- Certificate awarded upon completion of all course questionnaires and assessments

2023
Sep OR Nov
23-24 | 4-5
12 day intensive course

COURSE DIRECTORS
Dr Philip Lu, HKU (HKU) | Prof. Michaels Lucas (UWA)

COURSE TUTORS
Dr Jack Hong (HKU) | Dr Susan Kwan (HKU) | Dr Elaine Ho (HKU) | Dr Wendy Chung (HKU)
Dr Sandra Chiu (HKU) | Dr Katelyn Chan (HKU) | Dr Lisa Chan (HKU)

4823 3844 | phca.platform@hku.hk
Primary Health Care Academy
The University of Hong Kong
Pokfulam Road, Pokfulam, Hong Kong

Seminar

GLOBAL HEALTH: CHALLENGES FOR THE FUTURE

Abstract

Non Communicable Diseases pose a global and also local challenge to healthier lives. Their reduction is one of the targets of the Sustainable Development Goals set for 2030.

This seminar will explore the health benefits which could be achieved by addressing the challenges of Non Communicable Diseases by addressing climate change and the role that primary care can play.

12 Oct 2023
16:30-17:30 (HKT)

REGISTER NOW

Boardroom, 1/F, Daniel & Moyce Yu Administration Wing, Faculty of Medicine Building, 21 Sassoon Road, Pokfulam, H.K. or via Zoom

HOST
Prof. Sophia Chan
Director, HKU Primary Health Care Academy
Senior Advisor, President's Office
The University of Hong Kong

QR CODE

CNE POINT PENDING

(852) 3910-3441 | phca@hku.hk | hku_phca

Newsletter

PRIMARY HEALTH CARE

ISSUE ONE | NOVEMBER 2023

Contents

- Welcome Message
- Our Advisors
- Four Pillars
- Event Highlights
- Congratulations
- What's New

Welcome Message

I'm delighted to welcome you to the inaugural issue of our newsletter. With the Azalea (1972) Endowment Fund's generous support, The University of Hong Kong (HKU) Primary Health Care Academy (PHCA) is being set up in February 2023.

The HKU PHCA is a platform committed to generating evidence and disseminating knowledge of primary health care (PHC) as well as incubating the next generation of health care professionals in PHC for universal health coverage and the sustainable development of a healthy society in Hong Kong.

Our Vision and Objectives

The academy is more than just an institute; it's a mission-driven platform committed to the sustainable development of Primary Health Care (PHC) in Hong Kong and beyond. We aim to address the pressing health challenges of an ageing population and the rising prevalence of chronic diseases. Our work is aligned with the government's vision for PHC development, and we are dedicated to enhancing the overall health and quality of life for the public.

Four Pillars

To achieve our objectives, we focus on four pillars:

- Developing innovative and evidence-based research to inform policy making
- Imparting professional knowledge and experience to build capacity in the health care professionals
- Delivering evidence-based interventions to play an exemplary and leading role and enable policy advocacy
- Convening global experts for PHC discussion to create sustainable impact

As we embark on this exciting journey, we invite you to engage with us. Whether you are a healthcare professional, a policy-maker, or someone passionate about healthcare, there is a place for you at HKU PHCA. Thank you for being part of our community. Together, we will shape the future of Primary Health Care.

[Click to learn more about Primary Health Care Focus at HKU](#)

陳肇始倡明年煙稅75%「年年加」 任內構思2030全禁煙「大膽目標激發更多」

專訪 香港政府衛生局局長陳肇始，在中央政策組會議中，向政府官員提出未來五年煙草政策建議，包括將煙草稅增加75%，並將煙草稅增加至75%。陳肇始表示，他將在任內構思2030全禁煙「大膽目標激發更多」。

任內構思2030全禁煙「大膽目標激發更多」

陳肇始在專訪中表示，他將在任內構思2030全禁煙「大膽目標激發更多」。他認為，煙草是導致全球疾病和死亡的主要原因之一，政府應該採取更強有力的措施來減少煙草消費。他建議將煙草稅增加75%，並將煙草稅增加至75%。他還建議政府採取更強有力的措施來減少煙草消費，包括加強對煙草廣告的監管，以及加強對煙草銷售的監管。

關注組加稅數據 稱吸煙率跌幅未增

香港煙草關注組表示，煙草稅增加75%後，吸煙率跌幅並未增加。關注組表示，煙草稅增加75%後，吸煙率跌幅並未增加，這與政府的目標相悖。關注組認為，政府應該採取更強有力的措施來減少煙草消費，包括加強對煙草廣告的監管，以及加強對煙草銷售的監管。

不認同瑞典「另類吸煙產品」代替最近無煙 陳：可取之處

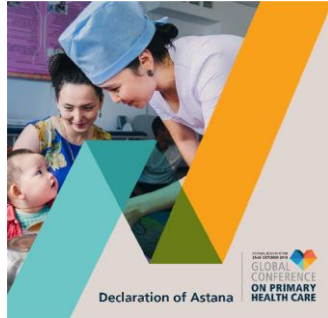
香港政府衛生局局長陳肇始表示，他不認同瑞典的「另類吸煙產品」作為無煙煙草的替代品。陳肇始表示，瑞典的「另類吸煙產品」雖然不含焦油和一氧化碳，但仍含有尼古丁，這可能會導致煙癮。他認為，政府應該採取更強有力的措施來減少煙草消費，包括加強對煙草廣告的監管，以及加強對煙草銷售的監管。

不同政策建議對控煙諮詢內容取態

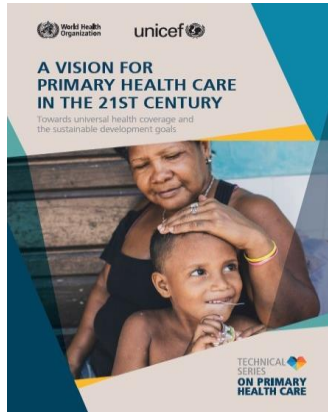
| 政策建議 | 諮詢取態 | 建議建議 | 諮詢取態 |
|------------|------|------------|------|
| 增加煙草稅 | 支持 | 加強對煙草廣告的監管 | 支持 |
| 加強對煙草銷售的監管 | 支持 | 加強對煙草銷售的監管 | 支持 |
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| 加強對煙草銷售的監管 | 支持 | 加強對煙草銷售的監管 | 支持 |



From declaration and vision to implementation



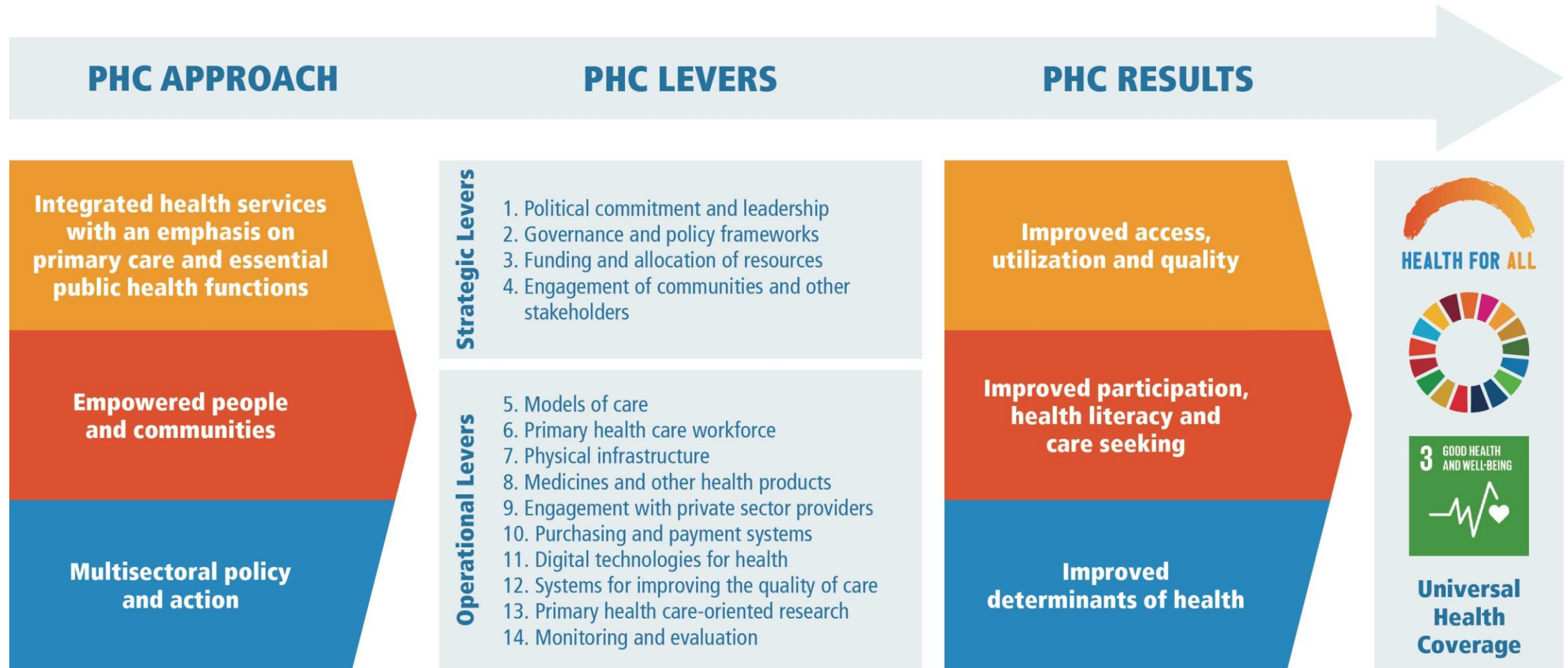
PHC comprehensive approach: 3 components



In 2019, through World Health Assembly (WHA) resolution ([WHA72.2 resolution on PHC](#)), Member States:

- Welcomed the Declaration of Astana, reinforcing commitments to strengthen a PHC approach for accelerated progress on UHC & SDGs
- Called upon WHO to:
 - Develop an operational framework for PHC to support country efforts to translate this vision into action
 - Develop a measurement framework to support monitoring progress in PHC strengthening
 - Report regularly to WHA on progress made in strengthening PHC globally

Operation Framework for Primary Health Care



Key messages

- PHC provides the **ultimate solution** to achieve a **more sustainable health care system** for HK
- In Hong Kong, the DHCs provided the **key infrastructure** for delivering PHC in the community
- The **PHC Blueprint** provide the necessary policy tools to enable its sustainable development
- The Government is rolling out various chronic disease management co-pay plan as a strategic purchasing initiative
- The **PHC reform** in Hong Kong is unprecedented and its development presents a new journey in Hong Kong
- **Education** and **capacity building** should be provided to the health care professionals and the public to embrace and navigate this change process together
- The **HKU PHCA** is a platform committed to **generating evidence** and **disseminating knowledge** of PHC as well as **incubating the next generation of health care professionals** in PHC.

Questions and Thoughts Welcome

THANK YOU

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