



Symposium for Palliative Care

Health Care Policy for Patients Facing Advanced Illness in Hong Kong

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February 2016

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The New Age Of Aging

WE NEED TO START THINKING FURTHER INTO OUR OWN FUTURE. MUCH FURTHER.
BY LAURA L. GARSTENSEN

Something astounding is happening. For most of human history, life expectancy was barely long enough to ensure survival of the species. During the 20th century, a blink of an eye in

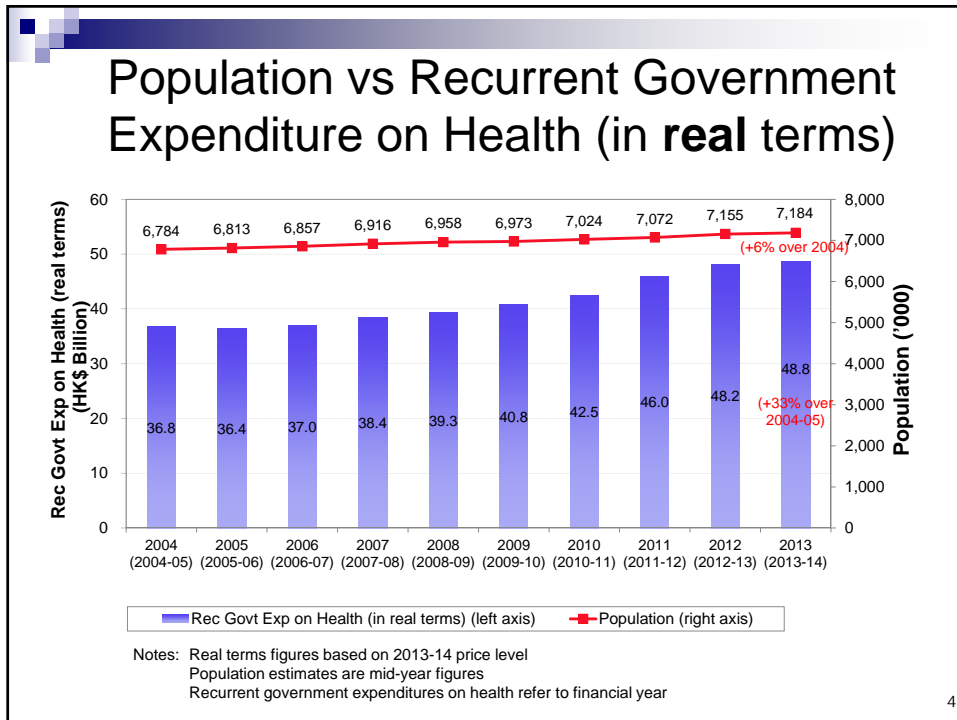
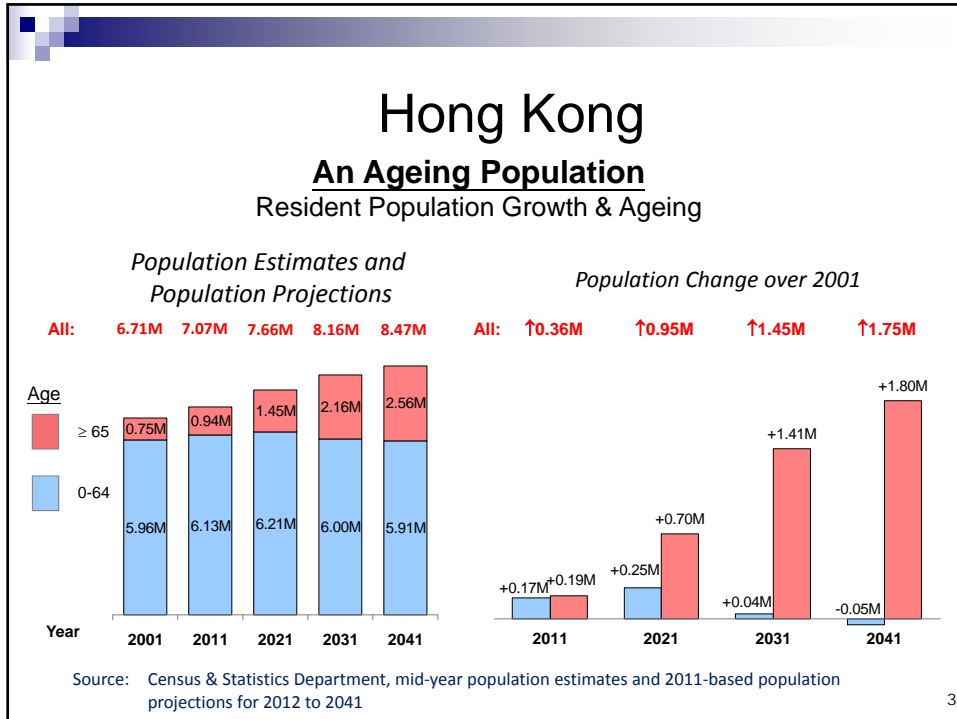
evolutionary terms, Americans began flourishing into their 80s, 90s and beyond. Asked in a recent survey about the prospect of outliving their parents, the majority of Americans said they would like to live 100 years if they could do so in good health. Of course, in the same survey, nearly as many Americans said they want to retire at 64, and most of them said they eat too much and need to lose weight. Hope is wonderful, but hope alone will not get us on our feet in good shape.

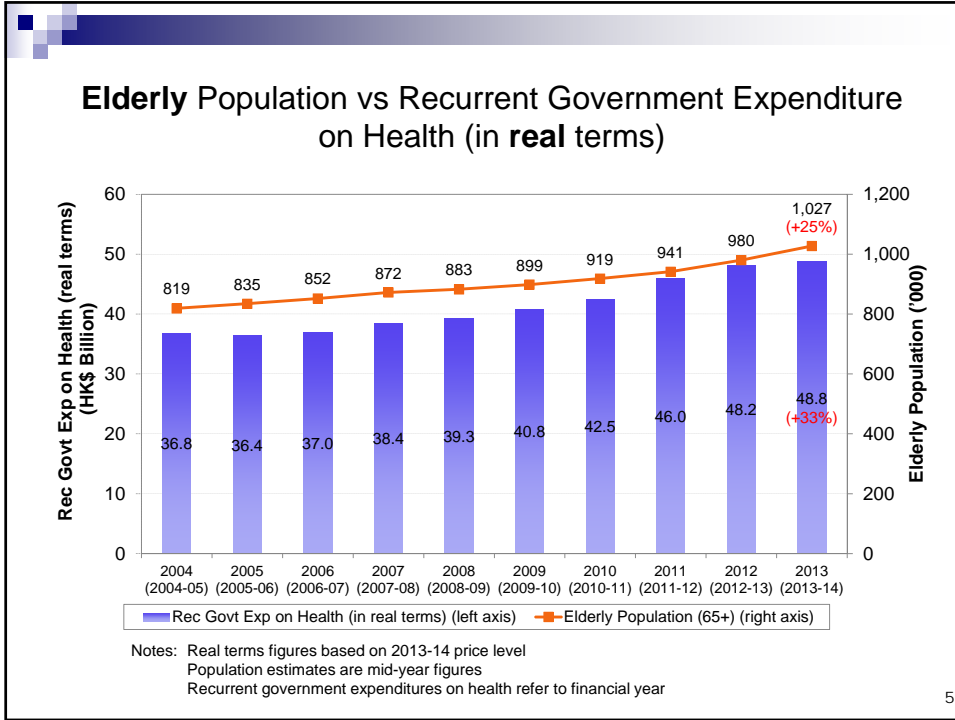
An important first step in creating a culture that supports long life is recognizing that long-term planning doesn't come naturally to humans. Looking to our evolutionary heritage prepared our brains to think clearly about the distant future or, for that matter, to take much notice as the effects of our daily habits—which accumulate

46 TIME February 22, 2016

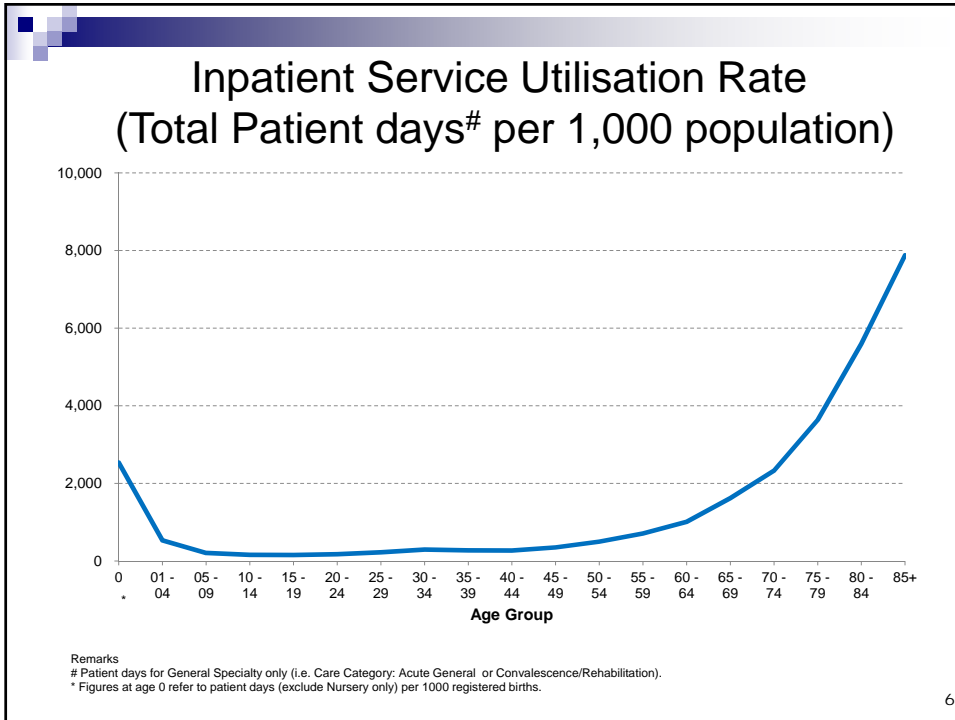
Sources: Time Magazine
(p. 46; Feb. 22 / Feb. 29, 2016)

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HA's Forecast of Demand for Hospital Beds[#]

	Available bed as at 31 Mar 2013 [@]	Bed Requirement Equivalent* 2021 2031	
Expert Scenario			
With clinical inputs, factor in a mild change in service delivery and efficiency gain	21,017	23,700	30,500
Anticipated Shortfall		2,700	9,500

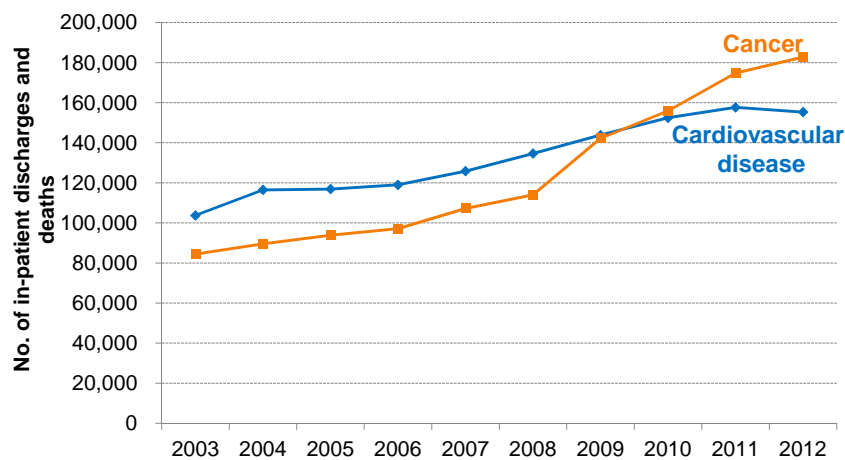
[#] Exclude A&E observation beds, nursery cots and beds for Central Infirmary Waiting List placement.

[@] Include 91 beds which have been confirmed funding for bed opening in 2012/13.

* Derived by IP BDO, DP discharges & deaths and assumed throughput per bed per year.

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How to Cope with Multi-fold Increase in Demand of Patients Facing Advanced Illness



Sources: Hospital Authority and Department of Health

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The Challenges:

- a. Capacity to meet demand
- b. Promote synergy between medical care and elderly services
- c. Quality ageing
- d. How to face “The End”

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(a) Capacity to Meet Demand 10–year Hospital Development Plan

- HK\$ 200 Billion (US\$ 25.7 Billion)
- Development and construction of healthcare facilities is a long process.
- Formulate hospital development plan for the coming ten years to address the long term healthcare need of the population
- Increase hospital beds by around 5 000
- Provide 94 additional operating theatres and other facilities.



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(b) Promote Synergy between Medical Care and Elderly Services

- Integration of medical and elderly services
 - Pilot projects: Lam Tei elderly home
Wan Tsui CHC
Siu Sai Wan CHC
- Community Care Fund proposal: community support programme for dementia patients
- Review of Elderly Services Programme Plan



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(c) Quality Ageing

- The majority of Americans said they would like to live 100 years – if they could do so in good health.



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- The quality and length of life rest squarely on the cumulative effects of our daily habits!



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Primary Care Initiatives:

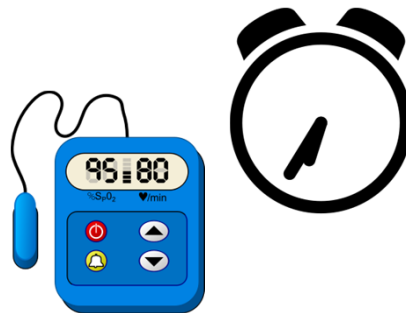
- 18 Elderly Health Centre
- Elderly health assessment scheme
- Elderly dental care programme
- Reference framework
 - Cognitive Impairment module



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(d) “The End!”

- Longevity means more time to plan end-of-life care



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HA Initiatives on Palliative and End-of-life Care in 2016-17:

- To extend Community Geriatric Assessment Teams (CGAT) service of end-of-life care to elderly patients living in Residential Care Homes for the Elderly (RCHes) in Kowloon Central Cluster and Kowloon West Cluster
- To continue training of palliative and end-of-life care to HA staff in palliative care team and other specialties
- To formulate HA strategic service framework for palliative and end-of-life care to better guide the service development in the next 5 to 10 years

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2006 Law Reform Commission Report Substitute Decision-Making and Advance Directives in Relation to Medical Treatment

Recommendation 1

We recommend that the concept of advance directives should be promoted initially by non-legislative means. We recommend that the Government should review the position in due course once the community has become more widely familiar with the concept and should consider the appropriateness of legislation at that stage. That review should take into consideration three factors, namely, how widely the use of advance directives had been taken up; how many disputes had arisen; and the extent to which people had accepted the model form of advance directive.

HONG KONG

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I. TREATMENT

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Quality of Healthcare for the Ageing – Health System and Service Models to Better Cater for an Ageing Population

- FHB commissioned CUHK to conduct a study-
 - How to better integrate health care services for the elderly with chronic diseases
 - Define pressure points in the current healthcare services and identify facilitators and barriers for integrating health services
 - Recommend service models for integration and end-of-life care
 - Recommend changes and measures in the community
 - Pilot the recommended model
- Timeline
 - Two-phased study; commenced in mid-2015 for three years

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Deliverables:

- Review and amend the law to provide clear legal backing for the administration of advance directives
- Hardware support – review and propose new design of elderly homes to support and facilitate provision of palliative and end-of-life care
- Bring a cultural change to society and to the provision of hospital care (Hospital Authority)

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**Ageing is inevitable,
but ageing well is not.**

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The challenge to, and the responsibility of, society (government, healthcare profession, academia) is to find ways to help people remain healthy, functional and productive for as long as they can; and-

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to plan “The End!” well in advance.

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