

毋忘愛

FORGET THEE NOT



End-of-Life Care Services Should Be a Pillar of District Health Centers in Hong Kong as Future Primary Care Development in order to Raise Quality of Death and Dying

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Ageing HK

- HK's population will increase to 8.2M in 2043
- 75% of HK elders suffer from ≥ 1 chronic conditions and trend is on the rise
- Most people die in hospitals. In 2014, ~46,000 registered deaths in HK, of which 90% presented to HA facilities..... We currently have about 360 palliative care beds across HA network.
- Palliative care coverage for cancer patients in HA was $\leq 70\%$ in the 2012-13 review WHO recommendation is 80%
- Non-cancer patients.....

Most important elements of 'good death'

- Familiar surroundings
- Good pain management
- Preservation of personal dignity
- Respect for personal choice & preferences
- Company of loved ones and friends



醫院管理局
HOSPITAL
AUTHORITY

2017



Chronic Illnesses

	35-44	45-54	55-64
hypercholesterolemia	6.8%	12.7%	25%
hypertension	4.7%	13.1%	28%
diabetes		3.6%	7.7%
Cardiovascular diseases	2.7%	8%	16%

Lifestyle Practices and

Health Status

Daily alcohol drinking

Inadequate aerobic physical activity
(by WHO's recommendations)

Inadequate daily fruit
and vegetable intake
(less than 5 servings per day)

Overweight and obesity (BMI \geq 23.0)

Male

Female

Both
Sexes

4.3%

1.4%

2.8%

48.8%

62.2%

55.9%

84.2%

74.8%

79.2%

48.2%

30.5%

38.8%

二零一四至二零一五年度
人口健康調查報告書

衛生署
衛生防護中心
監測及流行病學處
二零一七年

Primary care Life Journey

Birth

Dignified Death

Parenting

Establish Healthy Behaviour

Social Capital

Make

Living - Occupational Health, stay healthy

Learn to be carer (offsprings, parents, partners, yourself)

Socially Active, Participative, Keep Learning

Accommodate

PrePlanning x End-Of-Life

Early Identification &
 Intervention

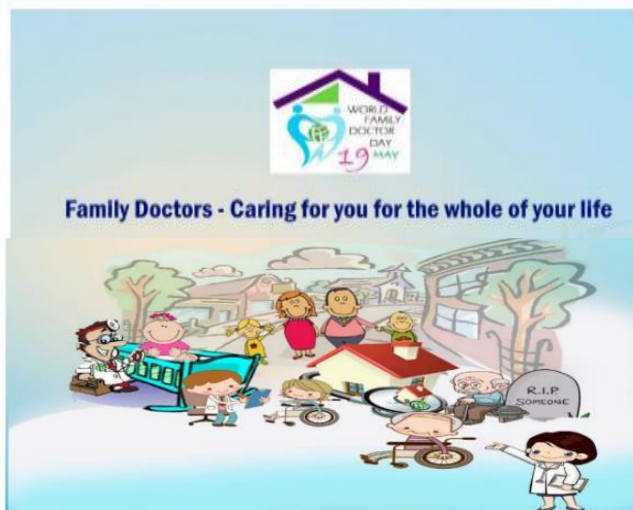
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Physical, Mental, Social

Primary care Life Journey

Birth

Cradle to Grave?



Who
can
keep
you be
Healthy

Dignified Death

Ageing
In Place

Dying
In Place

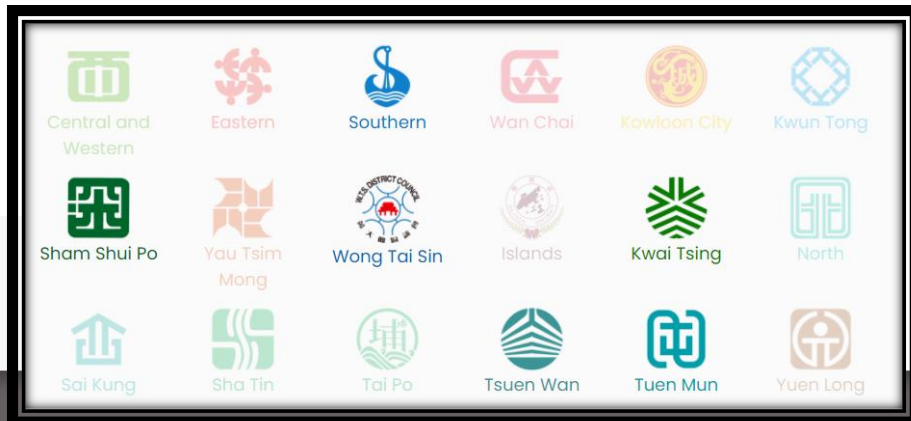


Food and Health Bureau

The Government of the Hong Kong Special Administrative Region



Key Functions



A service / resource hub



Health promotion



Disease prevention and screening



Chronic disease management



Community rehabilitation

Core team of SSPDHC

深水埗地區康健中心服務團隊 (核心團隊成員)

- Care Coordinator (Nurse)
- Nurses
- Social Workers
- Physiotherapists
- Occupational therapists
- Dietitian
- Pharmacist



- 護士
- 社工
- 物理治療師
- 職業治療師
- 營養師
- 藥劑師



Network service providers including Medical Practitioners, Chinese Medicine Practitioners, physiotherapists, occupational therapists, dietitians, optometrists, podiatrists and speech therapists must enrol in the eHRSS. Clinical information will be shared in the eHRSS to ensure continuity and coordination of care.



- Care Coordinator (Nurse)
- Nurses
- Social Workers
- Physiotherapists
- Occupational therapists
- Dietitian
- Pharmacist



Life events trigger points

Health status change

- Hospitalization
- Increased Clinics / Medical Attendances
- Increase in medication intake
- Fall / frequent falls / fractures due to fall
- Memory deterioration
- Diagnosed Cancer
- deteriorating social life
 - Eyesight
 - Musculoskeletal
 - Caregiver limitation
 - Financial

Primary Health Care

- Care Coordinator (Nurse)
- Nurses
- Social Workers
- Physiotherapists
- Occupational therapists
- Dietitian
- Pharmacist



Socio-medical
Collaboration

Integrated Care

Ageing In Place



Dying In Place



道 謝

道 愛

道 歉

道 別



毋忘愛相信每個生命都有獨特和值得肯定之處

喪禮是讓先人的愛及精神
永遠留傳於後人心裡成為生命動力
繼續積極人生



www.forgettheenot.org.hk



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