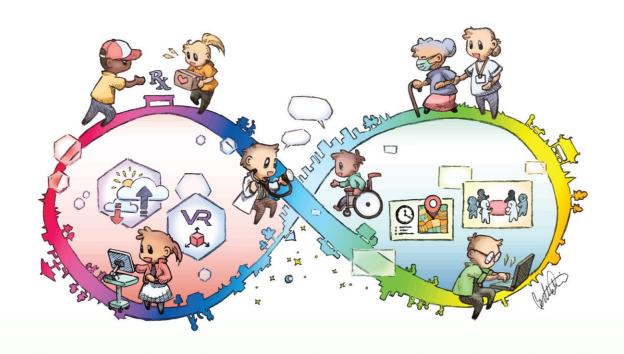
Mindful reflections of a small working group overcoming the barriers of End-of-Life Care (EOLC) at home



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Omega International Health Service, Hong Kong

Background

- End-of-Life Care (EOLC) at home
- Inherently a complex issue
- Difficult to address
- Slow progress in Hong Kong
- Not a unique phenomenon

A small working group

Medical



- Dr Luke Tsang
- Dr Welgent Chu
- Dr Jonathan Lau
- Mutual Support

Counselling psychologist



- Miss Paula Yeung
- Compassionate
- Mutual Learning
- Mutual discussions

Counsellor & Social worker



- Miss Jennifer Wong
- Miss Ming Hui KO
- Hopes & Potentials
- Available & Accessible

The Barriers of End-of-Life Care at Home

Service

Time & incentives
Support & resources
Knowledge & experience gap

Social

Affordability Legal implications Dealing with death

Cultural

Taboo & little discussion
Decreasing property value
Reliance on public facilities

EOLC – a complex issue

Nature

- Healthcare system
- Complex adaptive

Characteristics

- Inertia
- Uncertainties
- Non-linear

Initiatives

- New models of care
- Good evidence for public benefits
- Propelled by medical progress
- Well supported

Innovative Models

- 2009
- Dementia Village
- 'Normalized small scale living ...'
- Inclusion in the society

Netherlands

De Hogeweyk

Compassionate Society

Frome Model

- 2016
- Medical & Social Integration
- Existing GP care

UK

- Increase sense of belonging
- Support for daily routines
- Linkage to community activity

Mindful Reflections



GP - led

People – centric

Community based

Grassroot change

Diversified team

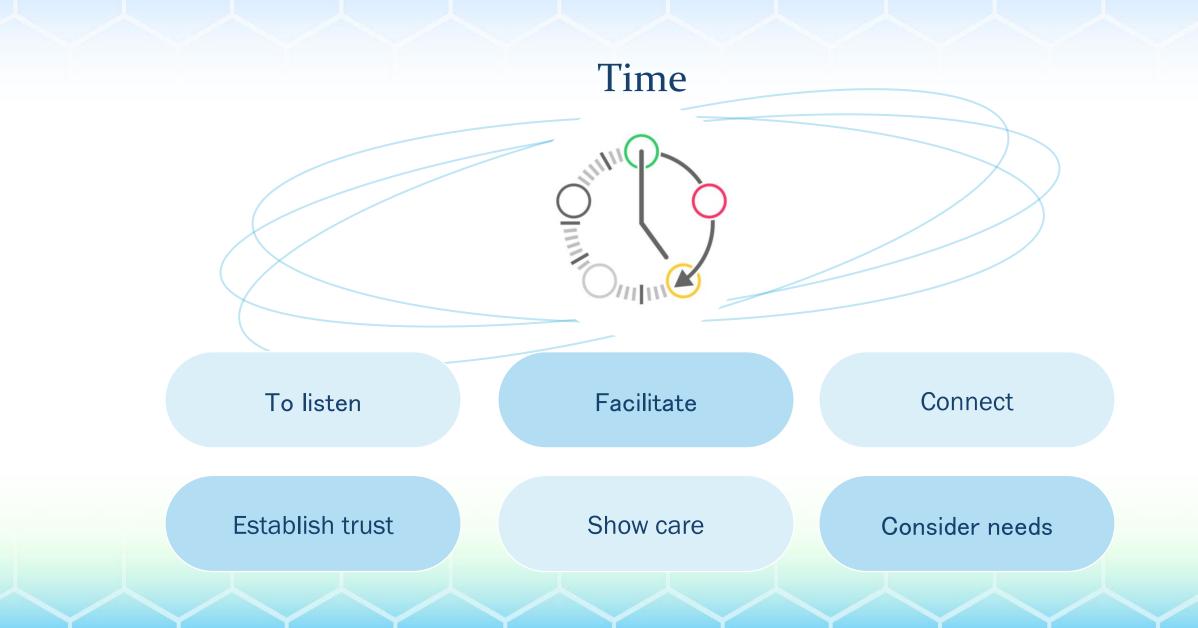
Agile

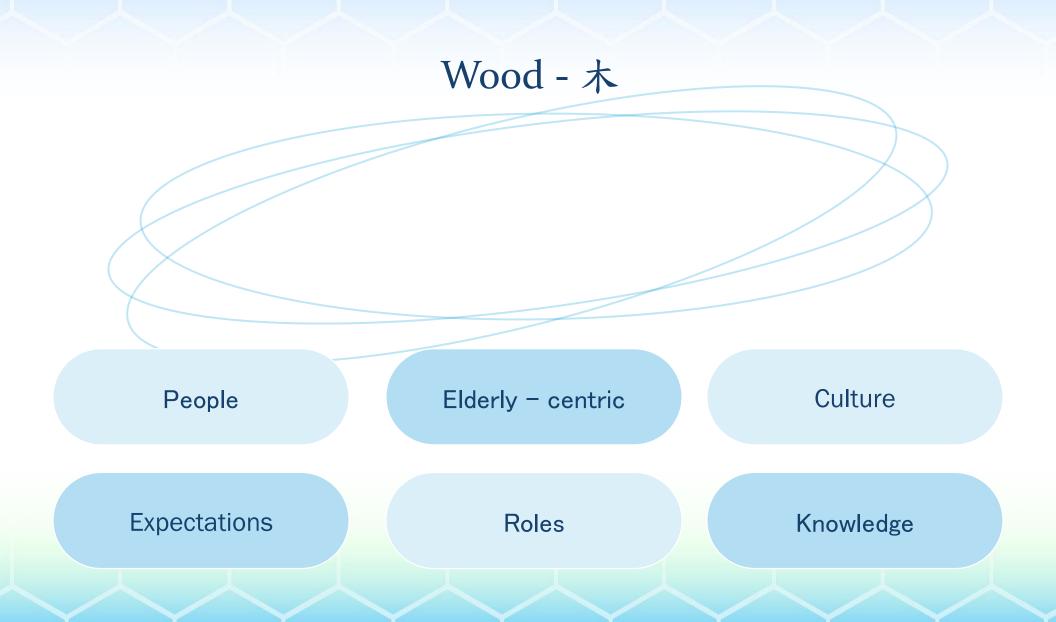
Ongoing learning

Frontline services

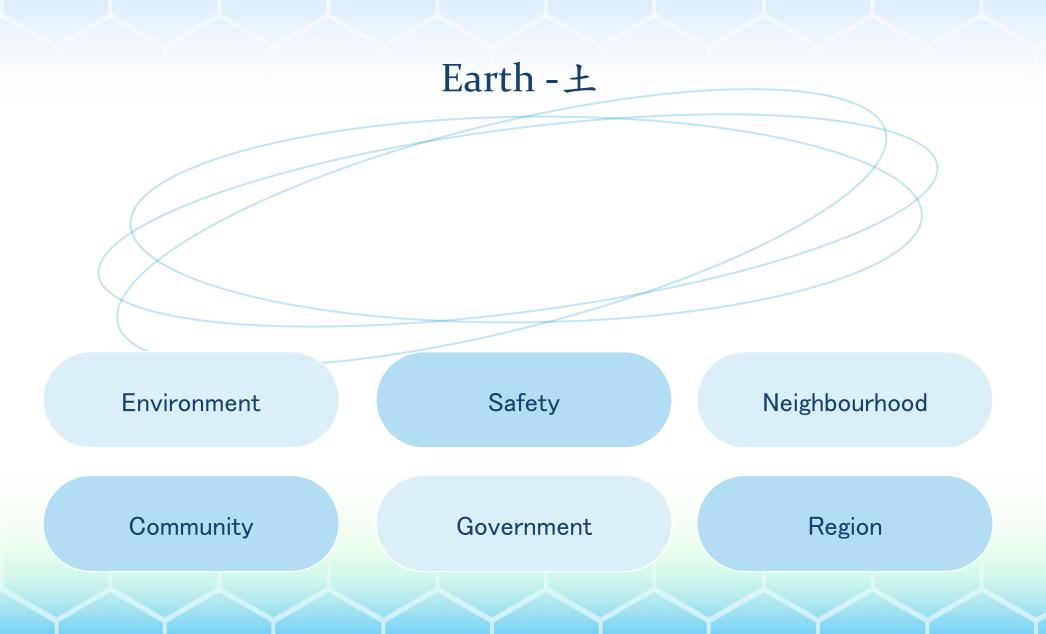
Time + 5E

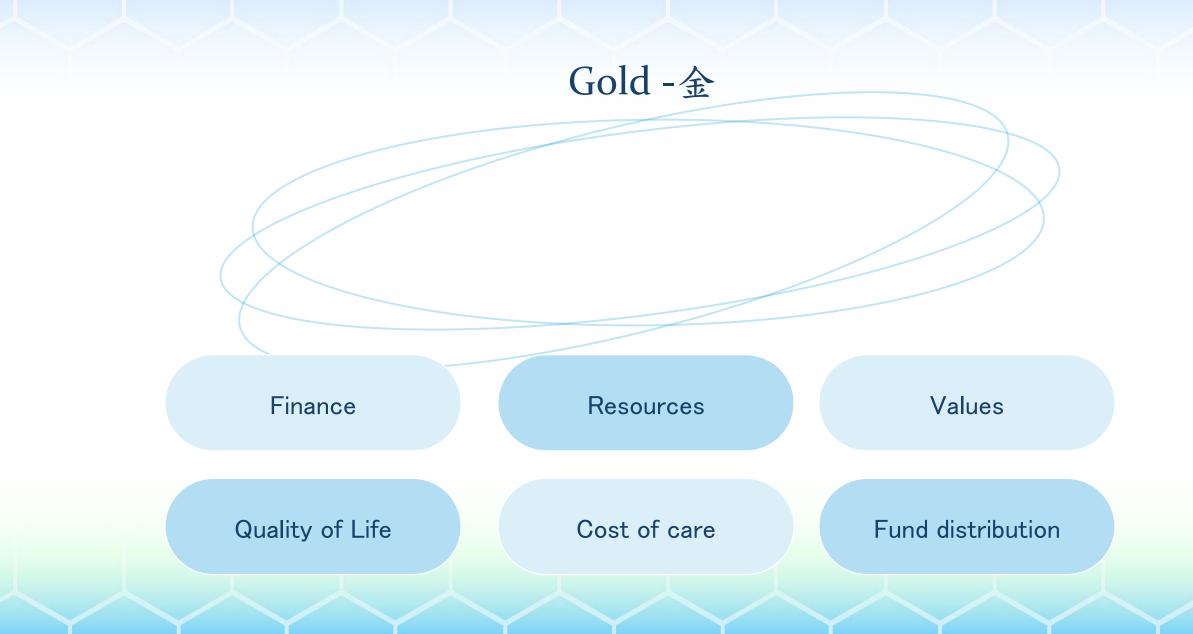
- 5 E = 5 Elements
- Wood Fire Earth Gold Water
- To facilitate decision making
- A communication and exploration tool

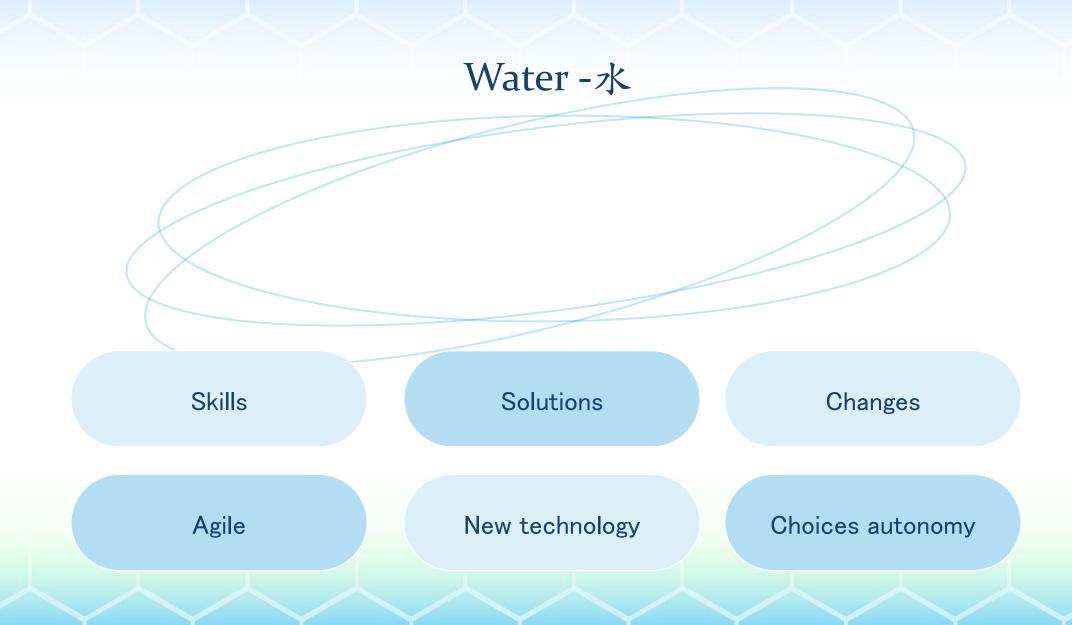












Healthcare starts at home





A Compassionate Village

Dr KC Jonathan Lau 柳坤忠醫生

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