

毋忘愛

FORGET THEE NOT

Increasing need and acceptance of dying-at-home is not due to COVID-19 pandemic but creation of a social-medical collaboration system in community

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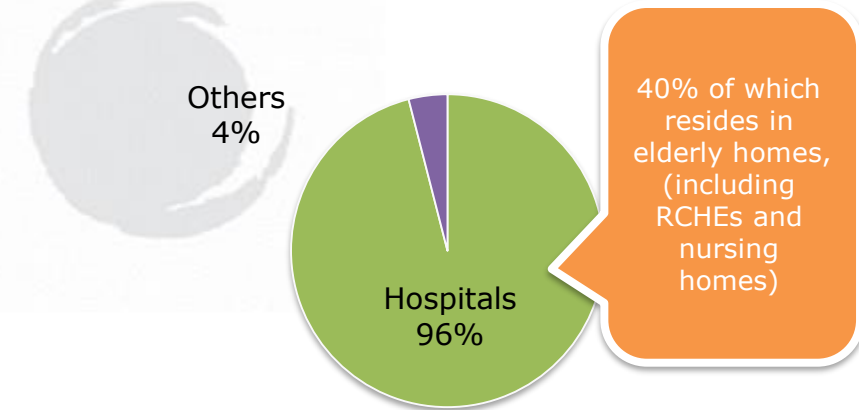
Ageing HK

- 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

Place of death of elderly patients aged 65 or above (2017)



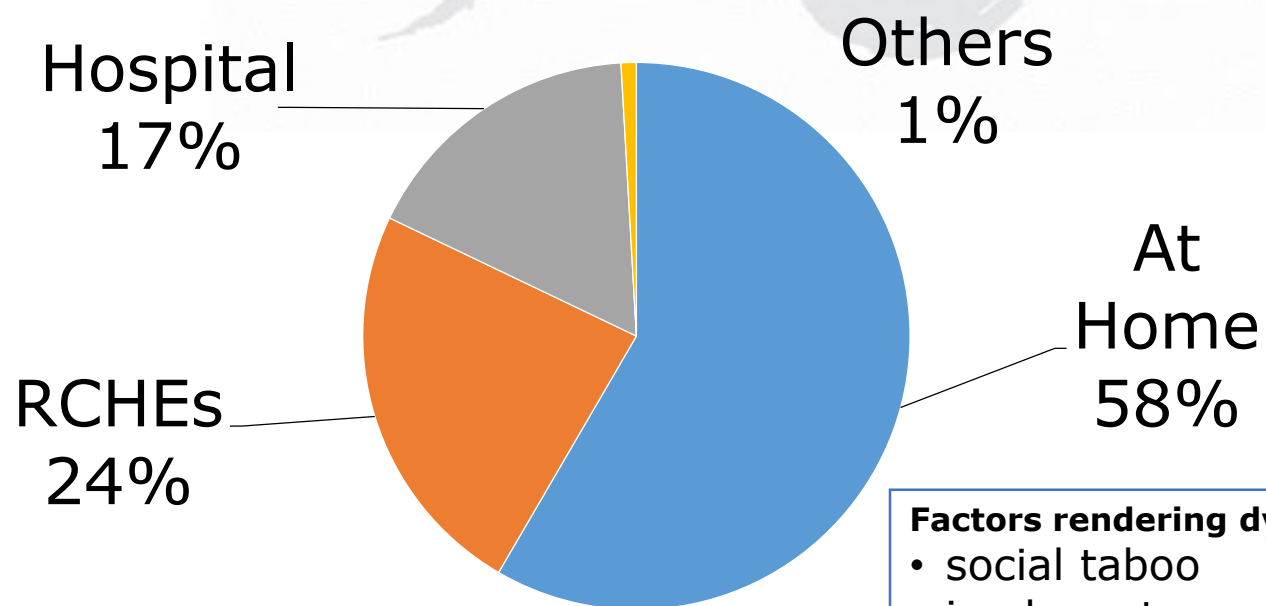
醫院管理局
HOSPITAL
AUTHORITY

2017



食物及衛生局
Food and Health Bureau

If expected to die in a year, the preferred place for end-of-life care of elderly



Factors rendering dying in place difficult

- social taboo
- inadequate medical support to take care of dying persons at home/RCHes

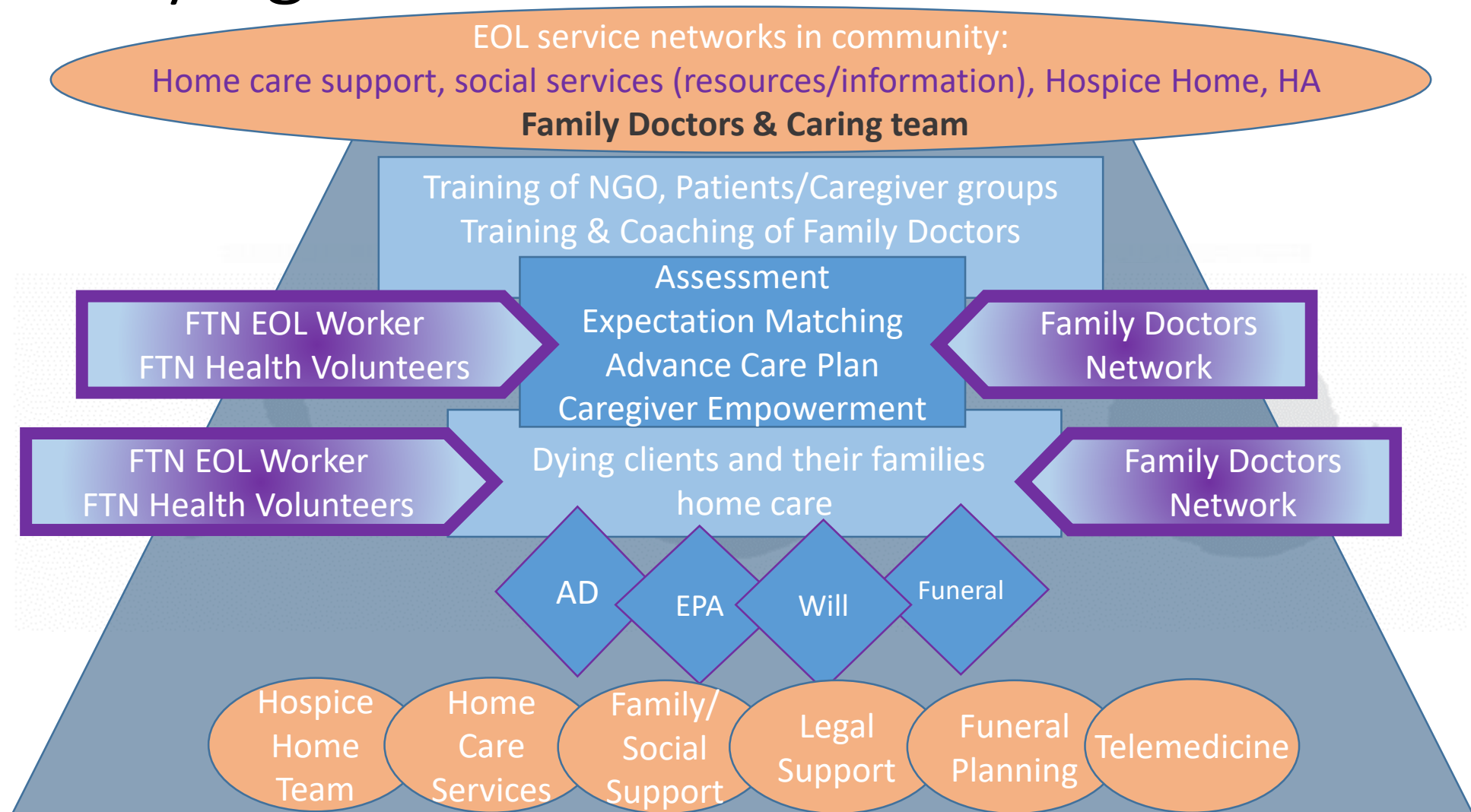
- **19.5%** people still prefer to die at home even they did not receive sufficient support from family/friends/medical/social professionals
- Reasons for not choose home as place of death

Reasons	%
Do not want to trouble family	66.3%
Lack of medical/ nursing professional support	19.5%
Lack of technology support	3.7%
Property price	3.3%
Complexity of procedures/ legal issues	3.2%
Concerns for neighbours	1.9%

Dr. Annie Kwok

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Deliver dying-at-home



Nov 2017 – Apr 2021

47 Dying-at-Home services were accomplished
8 is ongoing

2-99 (mean 75, median 82)

25 (53.2%) were certified at home

10 (21.2%) were supported till dying in hospice home

12 (25.6%) were supported till certified in acute hospital

- ❖ Respect for clients' personal wish
- ❖ Care and accompaniment by family
- ❖ Stay away from acute ward setting
- ❖ Timely support and provision of advices by service team

Primary care Life Journey

Birth

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

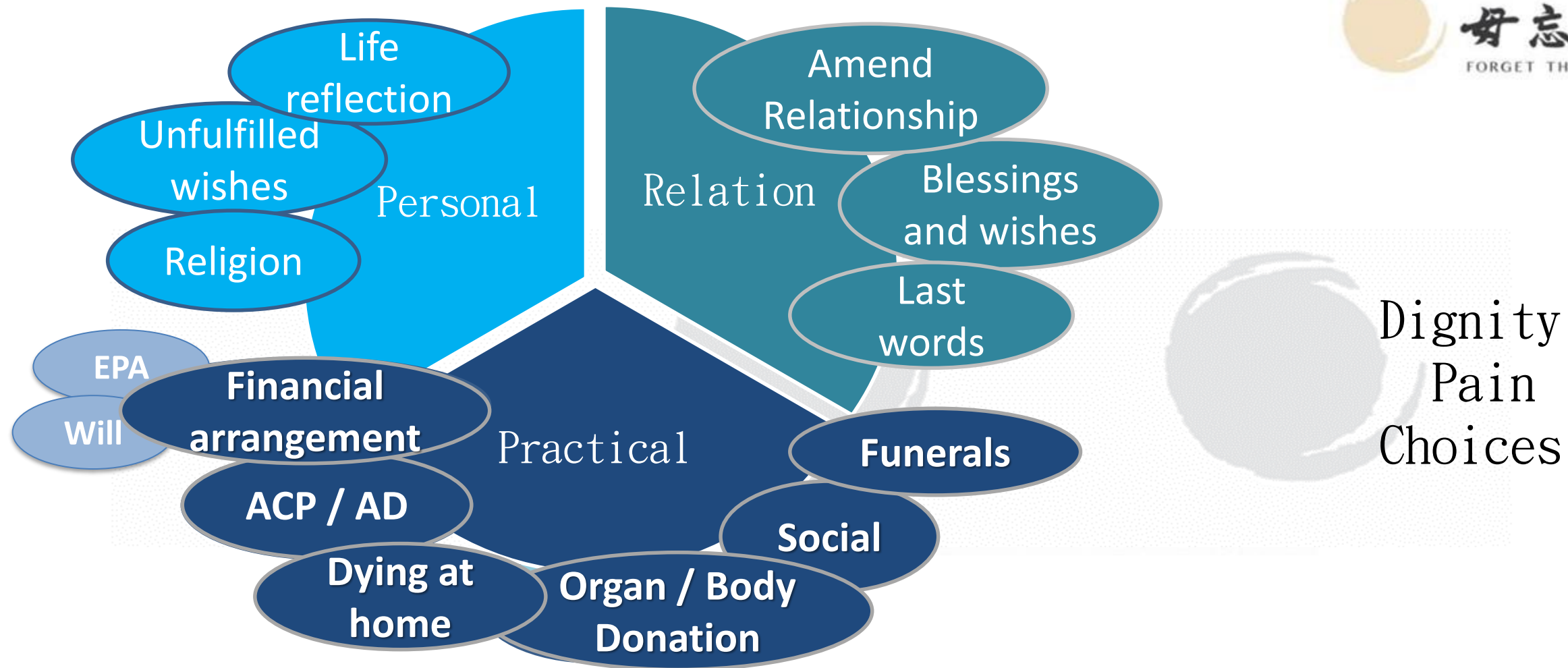
PrePlanning x End-Of-Life

Early Identification &
 Intervention

x

Physical, Mental, Social

Dignified Death



Emanuel, L., Bennett, K., & Richardson, V.E. (2007).
The dying role. *Journal of Palliative Medicine*, 10(1), 159-168

Autonomy (Choices)

Communication – Understanding – Respect

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



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