An Overview of the Health Care System in Hong Kong

Life expectancy at birth is projected to reach 82 for men and 88 for women in 2031, one of the longest in the world. This is a remarkable achievement for Hong Kong's health care services. The Government will continue to provide affordable lifelong holistic care to each individual and strive to further improve the health status of the community.

ONE of the cornerstones of the Government's health care policies is that no one should be denied adequate medical treatment through lack of means. The public health care sector provides a range of services and facilities to meet the health care needs of the community.

Organisational Framework

The Health, Welfare and Food Bureau is responsible for, among other matters, the policy formulation and resource allocation for health in Hong Kong. It also oversees implementation of policies to protect and promote public health, to provide comprehensive and lifelong holistic care to each citizen, and to ensure that no one is denied adequate medical treatment due to lack of means. In June 2001, a Research Office was established within the then Health and Welfare Bureau. The goals are to strengthen the Government's research capabilities in health policy matters and contribute to the agenda of maximising health for the people of Hong Kong.

The Department of Health is the Government's health adviser and agency to execute health care policies and statutory functions. It safeguards the community's health through a range of promotional, preventive, curative and rehabilitative services. It also works with the private sector and teaching institutions to protect public health.

The Hospital Authority is a statutory body established in 1990 under the Hospital Authority Ordinance to manage all public hospitals. It provides medical treatment and rehabilitation services to patients through hospitals, specialist clinics and outreaching services.

In December, 10 731 doctors were registered with the Medical Council of Hong Kong and 43 383 nurses were registered with the Nursing Council of Hong Kong. There were 35 134 hospital beds in Hong Kong, representing 5.1 beds per thousand population: 29 505 beds in hospitals run by the Hospital Authority, 2 853 in private hospitals, 2 047 in nursing homes and 729 in correctional institutions. The Department of Health also provided 25 beds for general

out-patient clinics and maternity homes located in the outlying islands.

Health Care Reform

The Health Care Reform Consultation Document, titled 'Lifelong Investment in Health' was released in December 2000. The consultation document stressed the need for recreating a health care system that promotes health, provides Ifelong holistic care, enhances quality of life and enables full human development. It also highlighted the importance of individual participation and responsibility in taking care of one's own health.

The results of the consultation, as well as the Government's proposed way forward, were announced in July 2001. In general, the Government observed that there was an undisputed consensus on the need for reform among different sectors of the community. In the light of the public opinions expressed, the Health, Welfare and Food Bureau has been working closely with the Department of Health and the Hospital Authority to implement the various reform proposals in an incremental approach.

In general, the reform initiatives centred on three main pillars of the health care system — service delivery, quality assurance and long-term financing. Some more straightforward proposals — such as the introduction of Chinese medicine in the public health care system, promotion of the family medicine approach in the general out-patient clinics, further cost containment to control the growth of medical costs, and a comprehensive review of the fee structure for the public health care system — have been implemented or are being implemented.

For more complicated and contentious proposals, such as the introduction of a compulsory medical savings account, further in-depth studies are being conducted with a view to consulting the public again at a later date.

Health of the Community

Health Status

Hong Kong's health indices compare favourably with those of most developed countries. The infant mortality rate, one of the most important indicators of health, has been declining over the past two decades and reached as low as 2.4 per thousand live births in 2002. Maternal mortality ratio has remained low for the past two decades. In 2002, there were only two cases of maternal deaths reported, giving a maternal mortality ratio of 4.2 per hundred thousand live births. Longevity has also improved significantly for Hong Kong people over the years. On average, a baby boy born in 2002 could expect to live 78.7 years and a baby girl 84.7 years. Life expectancy at birth is projected to reach 82 for men and 88 for

women in 2031.

Health problems in Hong Kong are mostly associated with lifestyle-related chronic degenerative diseases. The three leading causes of death are cancers, heart diseases and cerebrovascular disease. Together, they accounted for approximately 58 per cent of all deaths. These diseases affect mainly elderly people and will continue to dominate the mortality statistics as the population ages.

Infectious Diseases

Hong Kong lists 27 statutory notifiable infectious diseases, including three quarantinable diseases, namely cholera, plague and yellow fever. In 2002, 25 412 cases of notifiable infectious diseases were reported, of which 26.2 per cent were due to tuberculosis.

Children in Hong Kong are immunised against tuberculosis, hepatitis B, poliomyelitis, diphtheria, tetanus, pertussis, measles, mumps and rubella. Owing to high vaccine coverage, diseases such as diphtheria and poliomyelitis have been virtually eradicated and the incidence of other vaccine-preventable infectious diseases among children is relatively low.

At the end of 2002, the cumulative number of HIV (Human Immunodeficiency Virus) infection and AIDS (Acquired Immune Deficiency Syndrome) cases reported had exceeded 1900 and 600, respectively. Each year about 200 new cases of HIV infection are diagnosed. Sexual transmission remains the most common mode of the spread of the infection, though in recent years there has been growing concern over reports of HIV infection in injection drug users.

Hospital and Development Programmes

Demand for hospital services remained high in 2002. There were 1 205 551 discharges, 8 809 100 specialist out-patient attendances and 1 206 716 general out-patient attendances. Accident and emergency departments of major public hospitals had 2 425 444 attendances, or 6 645 per day.

The international trend has been to focus on the development of ambulatory and community care programmes. In line with this development, starting from 2001–02, the allocation of public funding for public hospital services has been changed from the facility-based approach to a population-based approach so as to encourage the mobilisation of resources from institutions to community settings. The new funding arrangement has facilitated the further development of the Hospital Authority's ambulatory and community outreach programmes.

Projects in the hospital development programme progressed satisfactorily. Phase I redevelopment of both the Caritas Medical Centre and the Kowloon

Hospital was completed. Several other hospitals were undergoing redevelopment or major refurbishment/remodelling.

Primary Health Care

Family Health

The Family Health Service provides a comprehensive range of health promotion and disease prevention services for babies and young children aged from birth to five years and women aged 64 or below. The service operates through 50 Maternal and Child Health Centres and three Woman Health Centres. Physical examination, immunisation and developmental monitoring are offered to children, while antenatal, postnatal and family planning services are provided for women of child-bearing age at Maternal and Child Health Centres. A new parenting programme was introduced in September. It aims to equip parents with the necessary knowledge and skills to bring up happy and well-adjusted children. About 48 per cent and 95 per cent, respectively, of expectant mothers and newborns attended Maternal and Child Health Centres in 2002. In addition to the three Woman Health Centres, the Woman Health Service has been extended to 10 Maternal and Child Health Centres, providing health promotion and disease prevention programmes to women aged 64 or below.

The government-subvented Family Planning Association of Hong Kong runs eight birth control clinics, three youth health care centres, a mobile clinic and seven women's clubs which provide sexual and reproductive health services, education and information. The services encompass fertility regulation, gynaecological check-up, pre-marital and pre-pregnancy preparation, menopause service, youth counselling and men's health. A Young Men Sexual Health Service was introduced in mid-2002. The association also offers training in family life education and sex education, and organises outreaching activities and publicity campaigns to promote family planning and responsible parenthood.

Student Health

The Student Health Service places emphasis on health promotion, disease prevention and continuity of care. Its 12 student health service centres and three special assessment centres provide free health assessment, health education and individual health counselling to all primary and secondary school students. The Adolescent Health Programme was introduced in the 2002–03 school year to promote psychosocial health in secondary schools. School health inspectors visit schools regularly regarding environmental hygiene and sanitation. School health officers and nurses advise on the control of communicable diseases and organise immunisation campaigns.

Health Promotion

During the year, the Central Health Education Unit underwent restructuring to discharge expanded roles and functions in health promotion. It organised knowledge-based, needs-driven, effective and health promotion actions within and beyond the Department of Health. Through a skilled and committed workforce, the unit provides direction and leadership, information support and resource materials to partners in health promotion.

To promote healthy living within the community, the unit organised a series of promotional and media activities in 2002. These included programmes organised in collaboration with other government departments or non-governmental organisations such as the Healthy Exercise for All Campaign, World Tuberculosis Day, World Health Day, World No Tobacco Day, World Breastfeeding Week, World Heart Day, Mental Health Month and the New Life Campaign for organ donation.

Clinics

At present, the Department of Health operates 59 general out-patient clinics to provide accessible and affordable primary medical and health care to the public. For residents living on outlying islands and in remote areas, clinic service is delivered via mobile dispensaries, floating clinics and helicopters. Under a pilot scheme in 2001–02, five general out-patient clinics were transferred to the Hospital Authority. It is planned to transfer the operation of all general out-patient clinics to the Hospital Authority in 2003. The transfer helps to promote family-medicine based practice, provide a training ground for family-medicine based practice, and enhance the integration of primary and specialist care.

The department also operates 20 methadone clinics, 19 tuberculosis and chest clinics, 11 social hygiene clinics, five dermatology clinics, four clinical genetic clinics, six child assessment centres and other clinic services. About 14 million visits to clinics were recorded in 2002.

Apart from the public service facilities, members of the community may seek medical treatment from the private sector, which includes medical practitioners working in private practices, housing estate clinics and 184 clinics registered under the Medical Clinics Ordinance.

Dental Services

The Dental Service of the Department of Health aims at promoting oral health in the community through promotive and preventive oral health services.

Oral health education and promotion activities were organised throughout the year to enhance the oral health awareness of the community. These activities included outreaching programmes delivered through an 'Oral Health Education Bus' and target-specific programmes delivered through maternal and child health centres, kindergartens and pre-school centres to more than 180 000 pre-schoolers. Readily available information is also provided to the public through the Oral Health Education home page 'Tooth Club' and a 24-hour interactive Oral Health Education telephone hotline.

Preventive services are delivered through the School Dental Care Service which provides annual dental examination and basic dental care to about 436 100 children annually. A 24-hour interactive voice response system is available to provide voice and fax information about the School Dental Care Service and oral health. In addition, the domestic water supply is fluoridated to reduce dental decay.

Specialist oral health services are provided to hospital patients and those with special oral health needs. An emergency dental service is provided to the general public at 11 designated dental clinics.

Health Care for the Elderly

The provision of medical services for elderly patients is a priority area. Geriatric services are provided in all acute and extended care hospitals. Community geriatric assessment teams and psychogeriatric teams provide outreach specialist support to elderly persons living in subvented and private residential care homes as well as to their carers. During the year, 395 034 and 37 404 outreach services attendances were served by the community geriatric assessment teams and psychogeriatric teams, respectively. Public hospitals also provide 567 geriatric day places for elderly patients.

The Department of Health provides Elderly Health Services through 18 elderly health centres and 18 visiting health teams to enhance primary health care for the elderly, improve their self-care ability, encourage healthy living and strengthen family support so as to minimise illness and disability. Elderly health centres provide integrated health service including health assessment, physical check up, counselling, curative treatment, and health education to people aged 65 and above. Visiting health teams reach into the community and residential care settings to conduct health promotion activities for the elderly and to provide training to carers to enhance their health knowledge and skills in caring for the elderly.

Services for the Mentally Ill and Mentally Handicapped

At year-end, psychiatric hospitals provided 3 063 beds while public psychiatric

units of general hospitals provided 1 845 beds. The number of psychiatric day hospital places was increased to 719. Castle Peak Hospital, one of Hong Kong's two main psychiatric hospitals, is being redeveloped.

Community work and after-care units of psychiatric hospitals offer community psychiatric nursing service and domiciliary occupational therapy service to discharged patients. These services, which form an integral element of community psychiatric service, aim to provide continual care, treatment and rehabilitation programmes for discharged patients in their home settings. Not only can these services help patients' social readjustment, they can also educate patients and their families on mental health. Community psychiatric teams and psychogeriatric teams have been set up to provide designated care and rehabilitation programmes to psychiatric and psychogeriatric patients. During the year, 22 803 outreach services attendances were served by the community psychiatric teams. Other complementary rehabilitative services run by government departments and non-governmental organisations include day centres, halfway houses, long-stay care homes, vocational training, selective placement and social clubs.

Severe mental illness, such as schizophrenia and severe mood disorders, often starts i in teenage years and in early adulthood. Early detection and treatment will result in better bng-term treatment outcome and reduce long-term impairment to patients. Four early intervention teams have been set up to assess persons aged under 25 and identify for early treatment those suffering from psychotic problems. As at December, 2 432 persons have been assessed, and 858 persons referred for treatment.

Severely mentally handicapped persons requiring intensive nursing care and rehabilitation services are cared for at the Tuen Mun Hospital (200 beds), the Caritas Medical Centre (300 beds) and the Siu Lam Hospital (300 beds). An outreach team has been established to provide services for severely mentally handicapped persons in the community.

Community Based Nursing Service

The Hospital Authority's Community Based Nursing Service provides post-discharge rehabilitative nursing care and treatment for the sick, the chronically ill, post-natal cases, the elderly, the disabled, and the mentally ill in the patients' homes through a network of community nursing service centres and community psychiatric nursing service offices. During the year, 64 152 patients were served and 792 822 home visits were made.

Specialised community nursing services in the areas of hospice, respiratory, renal, and wound care have been developed to support post-discharged patients in the community. In collaboration with community geriatric assessment teams,

community nurses provide professional nursing care for the elderly in private aged homes.

Port Health

The Port Health Office enforces measures in the Quarantine and Prevention of Disease Ordinance and the International Health Regulations to prevent the introduction of quarantinable diseases into Hong Kong by air, land or sea. No cases of plague or yellow fever were reported during the year.

The Travellers' Health Service, launched in July 2000, provides a 'one-stop' service to outbound travellers that includes immunisation, preventive medication, travel health risks assessment and advice. During the year, 2 198 travellers were served. Timely information on various travel health topics and health alerts is also provided to the public through the bilingual travel health website.

Medical Charges

In the Health Care Reform Consultation Document published in December 2000, one of the strategic directions on health care financing was to revamp the fee structure of Hong Kong's public health care sector, so that the public subsidies could be targeted to areas of most need and inappropriate use and misuse of services could be reduced.

Following a comprehensive review to examine how the relative priorities of services provided may be reflected in the subsidy level and how inappropriate use and misuse of services can be minimised, the Administration announced its decision to revamp the fee structure of the public health care system in November. Except for the new charge for accident and emergency service (which took effect from November 29), all revised charges will take effect from April 1, 2003, after a moratorium on public fees and charges. Following the fee restructuring, charges would continue to be affordable but should also be effective in influencing patient behaviour. Overall, even at the revised fee level, the government subsidy still represents a high level of 96 per cent of costs.

It has always been the Government's fundamental philosophy that no one will be denied adequate medical care due to lack of means. To assist the vulnerable groups in the community, including low income earners, the chronically ill and the elderly, the existing medical fee waiver mechanism would be enhanced in parallel in order to provide effective protection to them.

Smoking and Health

The Tobacco Control Office was set up in 2001 under the Department of Health to coordinate the Government's tobacco control efforts and promote a smoke-free culture in Hong Kong through intersectoral collaboration and community mobilisation.

Recognising the complexity of tobacco control issues, the office has adopted a multi-pronged approach to achieve its goals. One of the priority areas is to assist managers and staff working in statutory no-smoking areas to comply with and enforce the Smoking (Public Health) Ordinance. In 2002, 590 restaurants and 142 shopping malls were visited and the legal requirements explained to managers of these no-smoking areas.

Under the ordinance, tobacco advertisements are prohibited in printed publications distributed in Hong Kong. The office screened 2 100 issues of printed publications and issued 19 warning letters against tobacco advertisements during the year. The office also organises health education activities by itself or in collaboration with other organisations to increase public awareness of the harmful effects of tobacco and second-hand smoke.

On June 21, 2001, the then Health and Welfare Bureau released a public consultation document on the Government's proposed legislative amendments to the Smoking (Public Health) Ordinance. The document invited members of the public to express their views on the proposed legislative amendments, which include measures to expand the statutory no-smoking areas in public indoor areas and to tighten control on tobacco advertising and promotion. The consultation ended in September 2001, with over 10 000 written submission received from different sectors of the community. The results of the consultation were reported to the public in July. The Government is finalising the legislative proposals with a view to reporting back to the Legislative Council's Panel on Health Services in 2003.

The Hong Kong Council on Smoking and Health is an independent statutory body, established in 1987 to acquire and disseminate information on the hazards of using tobacco products, and to advise the Government on matters related to smoking, passive smoking and health.

During the year, the council conducted publicity and community involvement campaigns with particular emphasis on discouraging smoking in public and in workplaces. The council continued its school health education programmes and, during the year, gave health talks to a total 142 primary and secondary schools. The council also operates a telephone hotline to receive enquiries, suggestions and complaints from members of the public on matters related to smoking and health.

In collaboration with the Ruttonjee Hospital, the Department of Community

Medicine and the Department of Nursing Studies of the University of Hong Kong, and the Department of Community and Family Medicine of the Chinese University of Hong Kong, the council set up in August 2000 a Smoking Cessation Health Centre, located at the Ruttonjee Hospital, to provide smoking cessation support services. This centre conducted a total 994 service sessions to help smokers give up smoking during the year.

Training of Medical and Health Personnel

The University of Hong Kong and the Chinese University of Hong Kong provide basic training of doctors. They took in 175 and 151 medical students, respectively, in 2002. During the year, 13 doctors holding professional qualifications obtained outside Hong Kong passed the Licensing Examination conducted by the Medical Council of Hong Kong. Training in dentistry is available at the University of Hong Kong, which produced 55 dentists in 2002.

The Hong Kong Academy of Medicine is an independent statutory body with the authority to approve, assess and accredit specialist training within the medical and dental professions. Its 15 colleges conduct training and examinations to award specialist qualifications to qualifying candidates.

The University of Hong Kong, the Chinese University of Hong Kong, the Hong Kong Polytechnic University and the School of General Nursing of the Queen Elizabeth Hospital of the Hospital Authority provide basic training for Registered Nurses. The three universities recruited 329 nursing students into their four-year general nursing degree programmes in 2002. In addition, the Hong Kong Polytechnic University and the School of General Nursing of the Queen Elizabeth Hospital enrolled 270 nursing students into their three-year higher diploma nursing programmes. During the year, 50 nurses with professional nursing qualifications obtained outside Hong Kong passed the Universal Licensing Examinations for Registered Nurses or Enrolled Nurses conducted by the Nursing Council of Hong Kong.

Government Laboratory

The Government Laboratory offers a comprehensive range of analytical and advisory services to support the Government in upholding its various commitments in the protection of public health.

In 2002, a total of 80 201 tests on a wide range of food samples were carried out for surveillance and for compliance with the statutory standards. Further to the enactment of the Public Health (Animals and Birds) (Chemical Residues) Regulation and the concurrent amendments to the Harmful Substances in Food Regulations, the Laboratory established a new section in April to focus on the

testing of chemical residues in food animal products and live food animals for surveillance and statutory purposes. The Laboratory has also been actively involved in technological exchanges with Mainland counterparts with a view to strengthening technical capabilities in ensuring food safety and protecting public health.

The Laboratory has continued to provide a comprehensive analytical service to ensure the quality of Western and Chinese medicines that constitute an indispensable part of the health care system. In 2002, 39 567 tests were carried out on Western pharmaceutical products for compliance with the international or other acceptable standards in quality and safety; and 41 481 tests were made on proprietary Chinese medicines and herbal medicines for their heavy metal and pesticide residue content, and adulteration with Western drugs or controlled substances. In addition, the Laboratory undertook method development and research work pertaining to the examination of toxic Chinese herbal medicines.

The Laboratory sustained the year-round surveillance of tar and nicotine yield in cigarettes, with results published for public information and affirmation of the data declared by tobacco traders.

Chinese Medicine

The Chinese Medicine Council of Hong Kong, a statutory body established in September 1999, is responsible for devising and implementing regulatory measures for Chinese medicine.

Subsidiary legislation for the registration of Chinese medicine practitioners was enacted in June 2000. By the end of the application period in December 2000, the Chinese Medicine Council had received over 8000 applications for listing as Chinese medicine practitioners under the transitional arrangements. The council announced the names of 7 707 listed Chinese medicine practitioners in December 2001. Assessment of the qualifications of these listed Chinese medicine practitioners for registration was completed in August 2002. The names of the first batch of registered Chinese medicine practitioners (over 2 300) was announced in November. The remaining Chinese medicine practitioners must pass a registration assessment or a licensing examination prior to registration. The Registration Assessment will be conducted in early 2003 and the first Licensing Examination in mid-2003.

Subsidiary legislation for the regulatory control for Chinese medicines, which include licensing of traders of Chinese medicines and registration of proprietary Chinese medicines, was enacted in December. The regulatory systems would be implemented in phases from 2003.

HEALTH

Radiation Health

The Radiation Health Unit of the Department of Health is the Government's adviser on radiation safety and protection. It advises the Government on the protection of public health in the event of a nuclear incident, on the management of radioactive materials and wastes, and the effects on health of radiation exposure. It also serves as the executive arm of the Radiation Board, which is the statutory authority set up under the Radiation Ordinance, to control the import, export, sale, possession and use of radioactive substances and irradiating apparatus. It safeguards public health against ionising radiation through licensing control and inspection of premises where radioactive substances or irradiating apparatuses are present. It also conducts radiation monitoring measurements for occupationally exposed persons.

In 2002, the unit assessed and issued 8 173 licences and permits and provided monitoring service to 8 000 occupationally exposed persons. The average radiation exposure of occupationally exposed persons was 0.09 mSv against an annual statutory limit of 20.

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