

Hong Kong College of Health Service Executives

Newsletter Issue 1 2012/13



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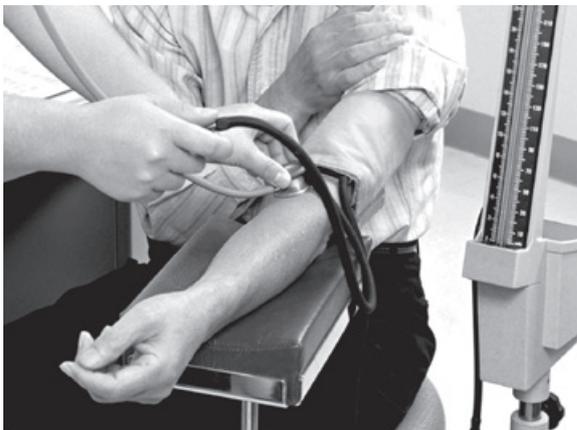
Message from the President

When Can Hong Kong People Find Private Health Care an Affordable Free Choice?

The so-called "dual track" healthcare system (which is used by the Government to mean having a private healthcare sector side by side with the heavily subsidized public healthcare provided mainly by the Hospital Authority) has got rather conflicting comments. Many stakeholders of the healthcare field warn about an obvious imbalance between the two sectors, with the public side shouldering disproportionately heavy workload given the nearly equal GDP percentage in terms of healthcare spending in each sector. On the other hand, high ranking Government officials seem to be satisfied with the present situation, and describe it as "effective" although they also agree that the Government should encourage those who can afford to seek more care from the private sector in order to alleviate the pressure on the public side.



From the experience of Australia which also has dual track healthcare system similar to Hong Kong, private health care provides certain edge over public service, namely shorter waiting time for specialist consultation/operation, better inpatient accommodation in terms of environment, food and privacy, and choice of preferred doctors. Because of these advantages, it is fair for the private sector to charge a fee higher than the “cost” (not the heavily subsidized charge) of the public sector for the same kind of health care. The Australian Government provides incentives to encourage people to buy private health insurance early in order to cover the additional costs charged by the private sector. This may have enlightened the Hong Kong SAR Government to put forth the consultation document “My Health, My Choice” in October 2010.



As mentioned in the consultation document, the Government intends to encourage more people to seek care from private sector by making private health care more accessible and affordable. This is through regulations on both the health insurers and the private healthcare providers (mainly the private hospitals). The regulatory requirements for insurers are relatively mild, and the suggested controlling measures do little to help the elderly or chronically ill people, as insurance premium would still be very high and coverage not adequate for major illnesses. On the other hand, the suggested requirements proposed to be put forth to the private hospitals have triggered a lot of sentiment

on the private side. They consider the requirement to provide more health care based on “packaged charging” unworkable and the setting up of a public entity providing “benchmarking” prices and quality information to “consumers” not acceptable. The ideas of the Government allowing more new private hospitals to enter the market and running more public-private partnership programs are also viewed as unfriendly threats by some private providers.

This resistance from private hospitals touches on the crux of the matter: many Hong Kong people have to rely on the public hospitals for health care because of the prohibitively high and unpredictable charges levied by private hospitals. And the premiums set by health insurers are also directly linked to such charges making the former unaffordable to many people. When facing criticisms on their high charges, the private hospitals defend that their charges only reflect the high costs for running their service while they have little control on the consultation and operation fees charged by doctors.

Although there is little transparency regarding the running costs of the private hospitals, the recent report by the Director of Audit of HKSAR Government disclosed that a few non-profit making private hospitals had transferred huge sum of money from accumulated profit to other related organizations as donations. This may indirectly hint that there is room for reducing their price level given their not-for-profit status granted by the Government. The issue of high consultation fees charged by doctors is a more complicated issue, but my feeling is that at least there should be review on the rather absurd tiered doctor’s fees based on the level of room provision taken by the patient (sometimes reluctantly because of lack of lower tier beds), a feature unique to Hong Kong.

It is a pity that the Government consultation document fails to address the way private hospitals and doctors are charging the majority of private patients (who either pay out-of-pocket or through insurance cover) on a fee-for-service model. A more

patient-fair payment system should be on case-mix basis as practiced by most developed countries. Such system can avoid moral hazard on the provider side and encourage providers to practice cost-effective and evidence-based health care. This will require effort and determination from the Government to spearhead such reform instead of just focusing on using regulated voluntary health insurance as the tool. Case-mix data coupled with cost information have been collected by the Hospital Authority in the recent years, although the purpose is for internal resources allocation among public hospitals. The Government can capitalize on the data to try out case-mix based charging, at least for private patient and non-entitled persons obtaining care from Hospital Authority. When the system becomes mature enough, it can then be used as regulatory requirement for private hospitals. Obviously the process will not be an easy one, and the Government need to steer and

conduct large scale stakeholder consultation and consensus building exercise which inevitably will be difficult and time consuming.

The public health care sector is experiencing mounting workload pressure, prolonging waiting time and high staff attrition rate in recent years. The situation will certainly be aggravated by population aging and economic fluctuation. We are still a long way from having an affordable private health care to people of Hong Kong, the middle class in particular, so that the Hospital Authority can be lessened of its pressure and facing a more sustainable future. The Government should take serious steps to address the issues mentioned in its consultation paper and think of effective measures not limited to voluntary private health insurance alone.

Dr H C MA





The commendations from Awards Committee are as below:

“Our 2012 winner is a person who is recognized as a strong and dynamic leader and is respected for his many achievements. He is known for his ability to both create and manage change and work effectively within a constantly changing health environment. This person’s commitment, work ethic and contribution to ACHSM at an international level have been outstanding. He is a true professional in every sense of the word.

The 2012 Gold Medal Award goes to Dr Hok Cheung Ma from Hong Kong.

Dr. MA has been elected as the President of the HK College of Health Service Executives since 2003. He has also been appointed as the Hospital Chief Executives of Caritas Medical Centre since 2008.

It was through the unflinching effort and networking skill of Dr MA that the Hong Kong Society of Health Service Executives was transformed into the Hong Kong College of Health Service Executives (HKCHSE) in 2004. With his insight, the HKCHSE entered into close partnership with the then Australian College of Health Service Executives and conducted joint fellowship program for both Colleges. Dr. MA was elected as the founding President of HKCHSE at the same year. He has been appointed as Hospital Chief Executive (HCE) of Hospital Authority (HA) of Hong Kong since 1996 and had spearheaded many transformational projects in the public hospitals under his leadership. He is well received by his nursing and allied health colleagues within HA because of his staunch support to the two professions. Indeed he is well known within the healthcare field of Hong Kong for his outstanding leadership and organizational success. He is in his present position as HCE of Caritas Medical Centre since 2008.

Through Dr. MA’s excellent leadership and strong commitment, HK College of Health Service Executives (HKCHSE) has become one of the well represented healthcare professional institutes in HK and Australia. HKCHSE is now having a membership of over 300 with around 100 fellows. With the high dedication of Dr. MA, HKCHSE has been conducting its own Fellowship Program since 2004 and the program candidates number is increasing from 6 students in 2005 to 16 students in both 2011 & 2012.

Dr. MA is always a good role model and sets a brilliant example for his teammates. He is trusted by others to use good judgment when making good decisions. He also skilled at communicating insights and understanding of issues or problems. Dr. MA energizes people to achieve exceptional results and inspires others to high levels of performance and enthusiasm. He always helps his teammates understand the HKCHSE’s vision and objectives so that we can translate them into challenging & meaningful goals.

Dr MA has held the following positions Hospital Chief Executive of Caritas Medical Centre, Hospital Authority of Hong Kong, Cluster Chief Executive Delegate (Human Resources), Kowloon West Cluster, Hospital Authority of Hong Kong, Clinical Service Coordinator (Non-surgical Stream), Kowloon West Cluster, Hospital Authority of Hong Kong, President & Fellowship Program Director, Hong Kong College of Health Service Executives Censor of Administrative Medicine Branch, Hong Kong College of Community Medicine, Hong Kong Academy of Medicine.

Dr MA’s efforts have been recognized with his great success in building intimate linkage between the healthcare leaders of Australasia and Hong Kong and his exceptional passion and leadership in nurturing the future leaders and managers for the healthcare field of Hong Kong.”

Congratulations again! Dr Ma.

Dr CHAN Chi Keung Steve





Prof Peter P YUEN
Dean, College of Professional and Continuing Education
The Hong Kong Polytechnic University



Prof Geoffrey LIEU
Honorary Advisor, HKCHSE



Mr Vishal BALI
CEO, Fortis Healthcare Global

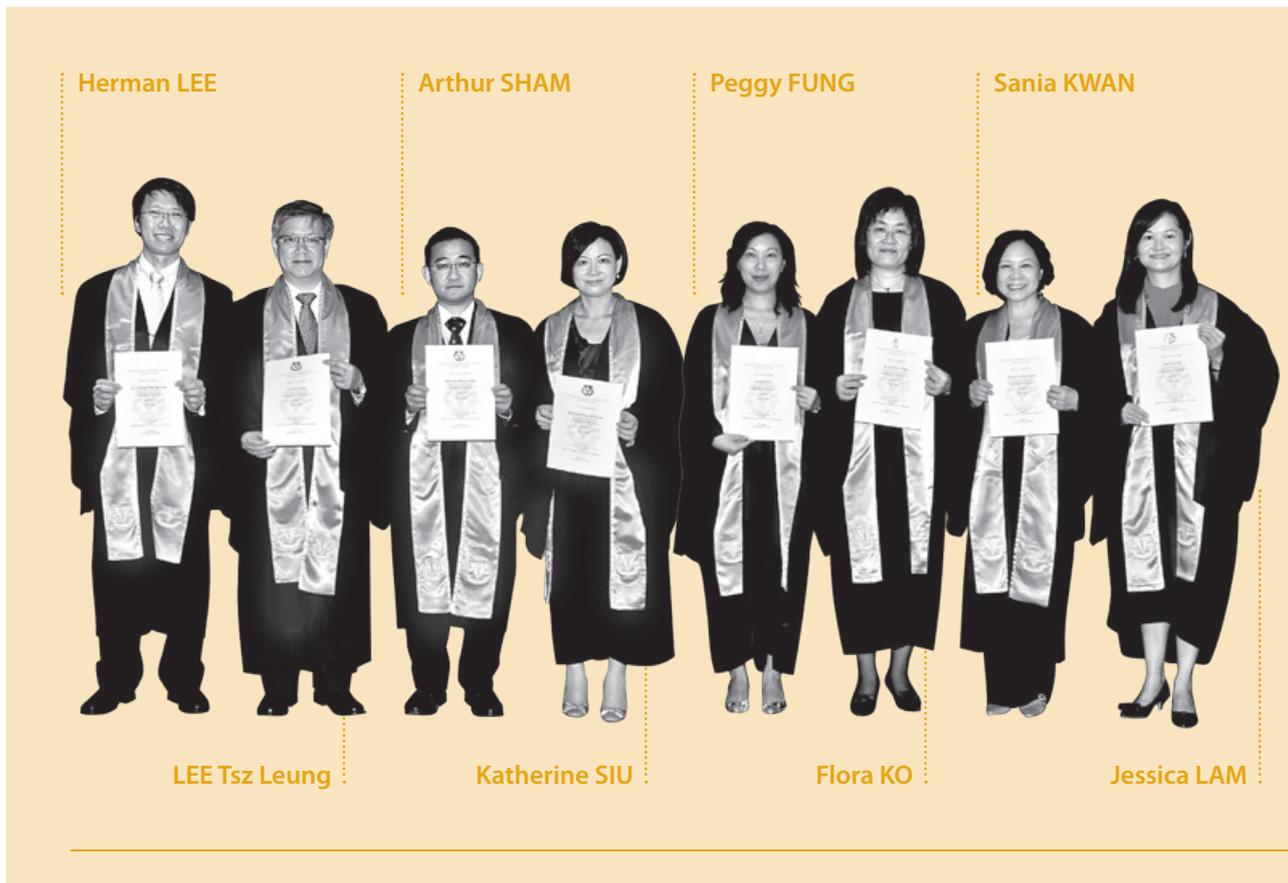




Our New Fellows ▶



Congratulations to the following who passed the recent Fellowship examination and were conferred as fellows of the College at the AGM cum fellowship conferment ceremony





Scarlet SZETO

Sharon WONG

Joyce CHAN

Winnie CHENG



Tammy TAM

WONG Wing Nam

Alice CHAN

Sarah CHEUNG

Bringing Hospital and Community Service Closer to Home ▶



On 17 August 2012, the afternoon of the last day of the ACHSM 2012 International Annual Congress, the HKCHSE delegation team made site visits to Robina Hospital and Robina Health Precinct of the Gold Coast.

Originally built in 2000 as a private hospital, Robina Hospital was acquired by the Queensland Government in 2002. Over the years, the Hospital has been redeveloped and expanded to become the sixth largest hospital in Queensland with 364 beds, offering a wider range of hospital-based in-patient and out-patient health services (e.g. 24 hour emergency service, intensive care, coronary care, general, gynaecology and orthopaedic surgery, general and specialist medicine, mental health, radiology, allied health services, etc.) to meet the local health care needs. It is also a teaching hospital for Bond University and Griffith University of Australia.

Beginning with the Robina Health Precinct service plan in 2007, the 180 square metre Robina Health Precinct is opened to the community in early this year, bringing together a number of essential community health services under one roof to complement the health services of Robina Hospital. The Precinct is also linked to Robina Hospital in the facade and colour scheme.

Robina Hospital



<http://www.health.qld.gov.au/robinahospital/default.asp>

Robina Health Precinct



http://www.health.qld.gov.au/robinahospital/html/rhp_design.asp

Together with Campus Alpha, Robina Hospital and Robina Health Precinct co-locate a hub of health services within 350 metres of each other in the heart of the community of Robina. The Hong Kong Delegation Team is impressed by how the ease of accessibility to a comprehensive range of services is made feasible through this model of health care delivery in a hub. Moreover, the Team also appreciates how the facilities like energy efficient light fittings, sun shading and insulating glass, rain water harvesting for toilet flushing, water efficient fittings and fixtures, motion sensor smart lighting and solar preheated gas hot water are instituted to provide efficiency in an environmental friendly way.

Flora KO



Past and Up Coming Events

Past Events

Clinical Excellence Using Data – Case studies from New Zealand, Australia and Malaysia

Speakers : Trevor READ, Director for Francis Group
Helen TELFORD, Principle for Francis Group
Date : 11 Oct 2012



Health Service Planning – Experience and Foresights

Speaker : Dr FUNG Hong, Cluster Chief Executive,
New Territories East Cluster
Date : 29 Nov 2012



Coming Up Soon!

Members' Night 2013

Date : 22 March 2013 (Friday)
Place : Diamond Room, 5/F, The Cityview, 23 Waterloo Road, Kowloon, Hong Kong

2013 Annual Conference cum Annual General Meeting

Date : 27 July 2013 (Saturday)
Place : Langham Place Hotel, Kowloon, Hong Kong

ACHSM Annual Congress 2013

Dates : 28 - 30 August, 2013 (Wednesday – Friday)
Place : Rydges Lakeside, Canberra, Australia

HKCHSE 2012-13 Fellowship Program Study Group Meeting

Topic	Date
1. Comparative Healthcare Systems/Policies and Reforms	29 Sep 2012
2. Megatrends for Healthcare and Innovations for Care Delivery	13 Oct 2012
3. Financial Management and Health Economics for Healthcare Managers	3 Nov 2012
4. Human Capital Management and Workforce Planning for Healthcare	17 Nov 2012
5. Laws and Ethics for Healthcare	1 Dec 2012
6. Deployment of ICT for Healthcare and the Global e-Health Movement	15 Dec 2012
7. Quality Management and Patient Safety	19 Jan 2013
8. Strategic Planning and Corporate Governance	2 Feb 2013
9. Evidence-based Decision Making	23 Feb 2013
10. Public Health and Epidemiology for Healthcare Managers	9 Mar 2013
11. Operational Management for Healthcare	23 Mar 2013
12. Leadership for Healthcare	13 Apr 2013

All Dual Fellows are welcomed to sit in. Please email to hkchse@gmail.com for seat reservation.
For enquiry, please contact Ms Jan Yiu at 9496 6448.

