

CPCE Health Conference 2017

HEALTHCARE DELIVERY AND FINANCING REFORM –

Implications for Business, Healthcare Providers and Patients

Parallel Session: B02

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Procurement Management in the Private Elderly Home

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Population

- In Hong Kong, the current population has almost reached at 7.4 million.
- The population growth rate will be 0.6% in the forthcoming years.
- By 2043, population in Hong Kong will be speculated to reach a peak of 8.22 million.

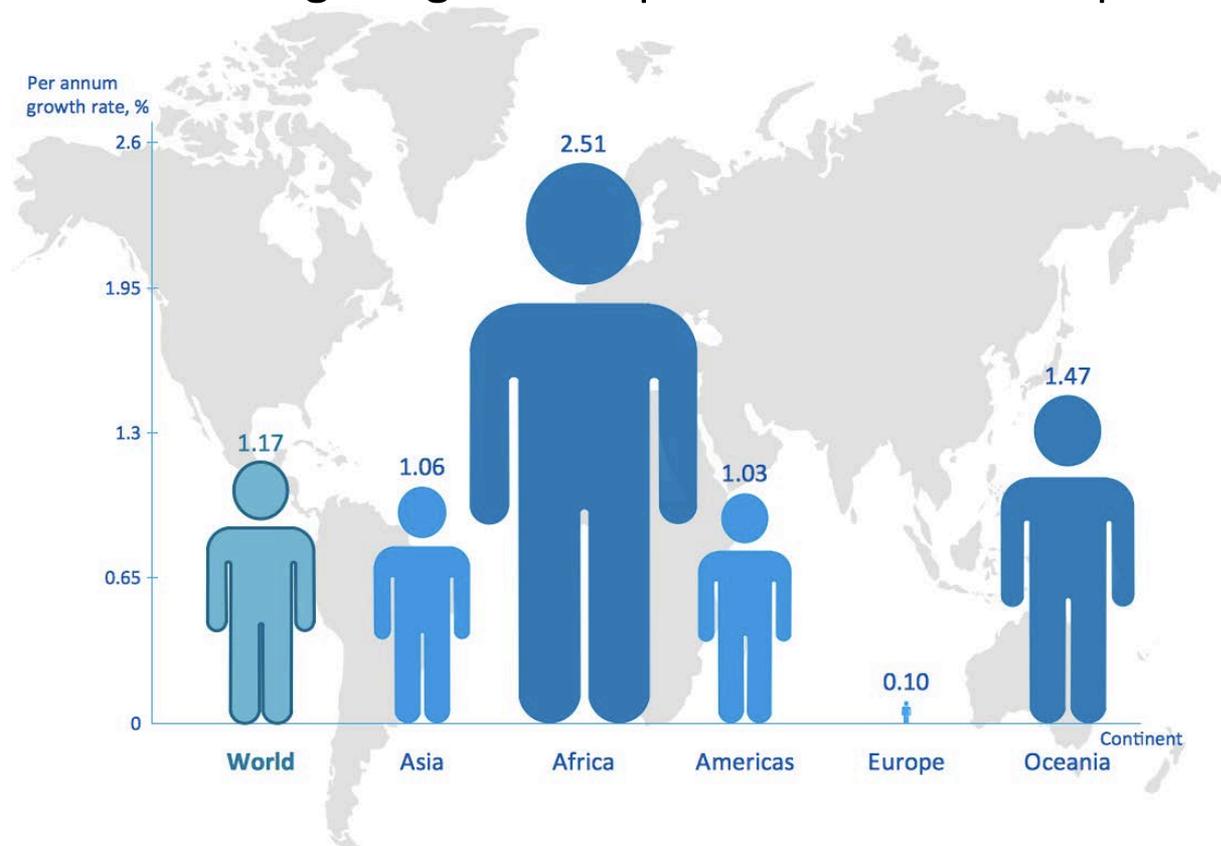


Photo: <http://www.conceptdraw.com/samples/resource/images/solutions/GRAPHS-AND-CHARTS-Picture-graphs-Population-growth-by-continent-Sample.png>

Expectation of Life by Sex (1971 – 2064)

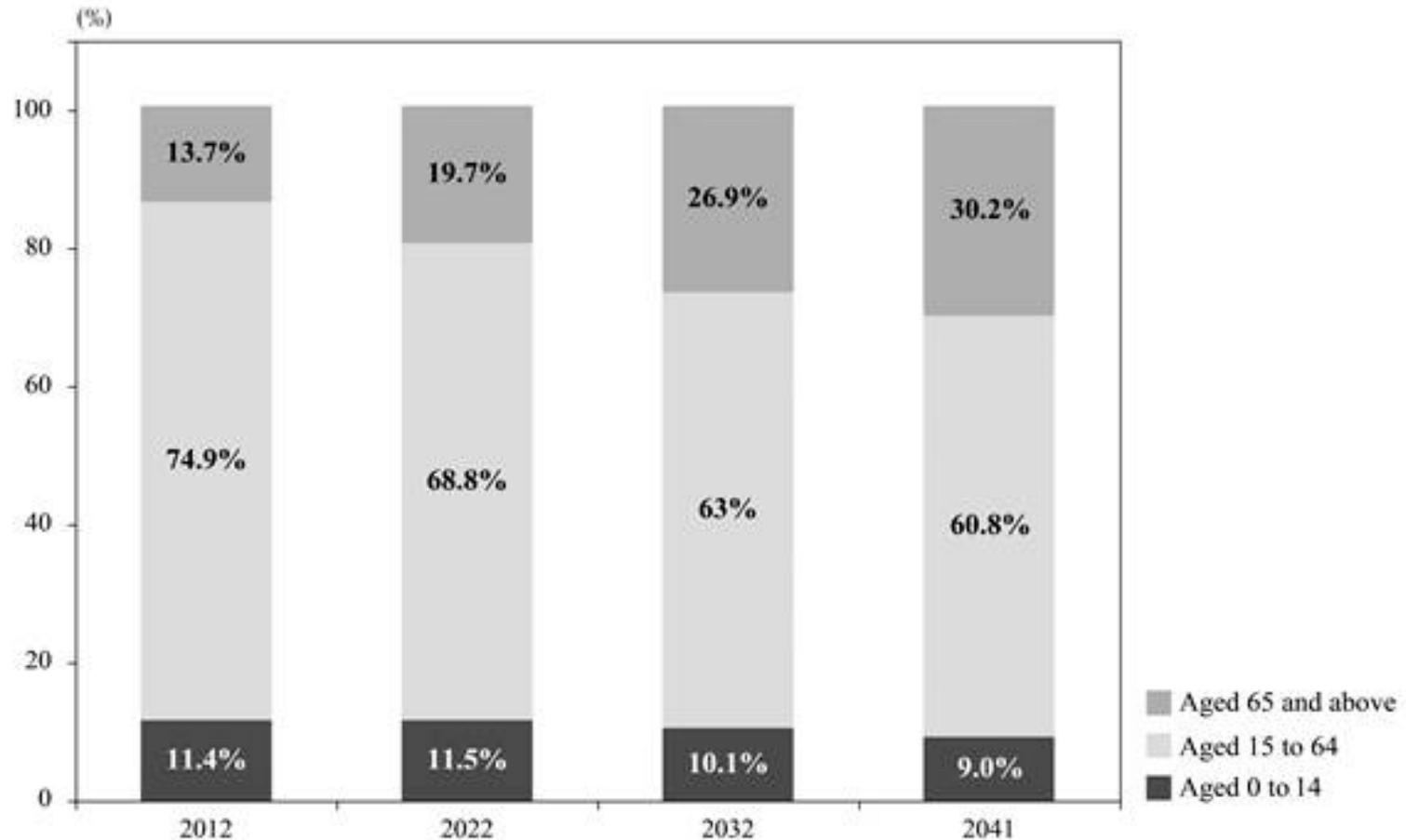
實際數字 Actual			推算數字 Projected		
年 Year	男性 Male	女性 Female	年 Year	男性 Male	女性 Female
1971	67.8	75.3	2015	81.4	87.0
1972	67.7	75.4	2016	81.6	87.2
1973	68.5	75.9	2017	81.7	87.3
1974	69.1	76.3	2018	81.9	87.5
1975	70.1	76.8	2019	82.1	87.7
1976	69.6	76.2	2020	82.3	87.9
1977	70.1	76.7	2021	82.5	88.1
1978	70.6	76.7	2022	82.6	88.2
1979	70.6	76.9	2023	82.8	88.4
1980	71.6	77.9	2024	83.0	88.6
1981	72.3	78.5	2025	83.1	88.7
1982	72.6	78.4	2026	83.3	88.8
1983	72.3	78.4	2027	83.4	89.0
1984	73.2	79.0	2028	83.5	89.1
1985	73.8	79.2	2029	83.7	89.2
1986	74.1	79.4	2030	83.8	89.4
1987	74.2	79.7	2031	83.9	89.5
1988	74.4	79.9	2032	84.1	89.6
1989	74.2	80.0	2033	84.2	89.8
1990	74.6	80.3	2034	84.3	89.9
1991	75.2	80.7	2035	84.4	90.0
1992	74.8	80.7	2036	84.5	90.1
1993	75.3	80.9	2037	84.6	90.2
1994	75.7	81.5	2038	84.7	90.3
1995	76.0	81.5	2039	84.8	90.4
1996	76.7	82.7	2040	84.9	90.4
1997	77.2	83.2	2041	85.0	90.5
1998	77.4	83.0	2042	85.1	90.6
1999	77.7	83.2	2043	85.2	90.7
2000	78.0	83.9	2044	85.2	90.8
2001	78.4	84.6	2045	85.3	90.9
2002	78.5	84.5	2046	85.4	91.0
2003	78.5	84.4	2047	85.5	91.1
2004	79.0	84.8	2048	85.6	91.2
2005	78.8	84.6	2049	85.7	91.2
2006	79.4	85.5	2050	85.8	91.3
2007	79.4	85.4	2051	85.9	91.4
2008	79.4	85.5	2052	86.0	91.5
2009	79.8	85.9	2053	86.0	91.6
2010	80.1	86.0	2054	86.1	91.7
2011	80.3	86.7	2055	86.2	91.8
2012	80.7	86.4	2056	86.3	91.8
2013	81.1	86.7	2057	86.4	91.9
2014	81.2	86.9	2058	86.5	92.0
			2059	86.5	92.1
			2060	86.6	92.2
			2061	86.7	92.3
			2062	86.8	92.3
			2063	86.9	92.4
			2064	87.0	92.5

Source: Hong Kong Life Tables (2009 – 2064), Census and Statistics Department, HKSAR

2012 to 2041 Population Chart (Age Group)

Chart 4

2012 to 2041 Population by age group



- HKSAR 2013 – 14 Budget

- Residential care home for the elderly
(RCHE)
- Situation in Hong Kong

Balanced scorecard to assess RCHEs



Supplier Evaluation Approach

- Step 1: identify a problem
- Step 2: identify decision criteria
- Step 3: allocate weights to the criteria
- Step 4: develop alternatives
- Step 5: analyze alternatives
- Step 6: select an alternative
- Step 7: implement the alternative
- Step 8: evaluate decision effectiveness

Residential care home for the elderly (RCHE)

- **A series of problems:**
 - Gain advantages over loose government regulations and control
 - A lack of professionals
 - Poor quality assurance systems
 - Insufficient campus facilities management
 - Extremely lack community support
 - Drug use and medication management



Drug use management and medication concerns in RCHEs

- **Medications** play an expanding role in **elderly health care**.
- People are more likely to develop **one or more chronic illnesses** with advancing age.
- Moreover many of the **elderly persons suffer from co-morbid conditions and disabilities** that necessitate multiple medications or polypharmacy
- Medication use in older adults is also more likely to be associated with **safety concerns**.

Chemical Restraint

- Chemical restraint **should not** be applied in the absence of medical advice.
- Chemical restraint refers to the **use of medications for the purpose of restraint**. Response to dosing of the medication is very variable.
- Overdose may result in serious complications. **If a registered medical practitioner prescribes drugs with chemical restraint effects for other purposes, close monitoring is required**

Regulations and Code of Practice for Elderly Homes Drug Management

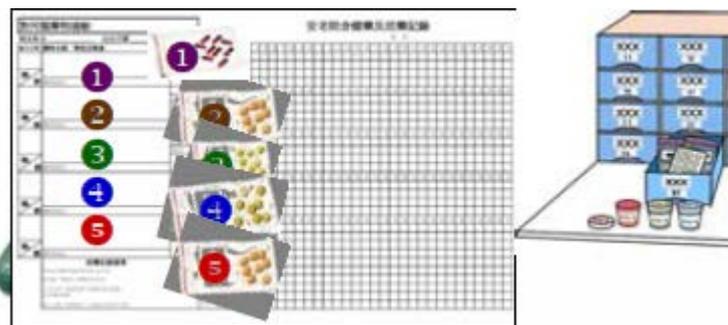
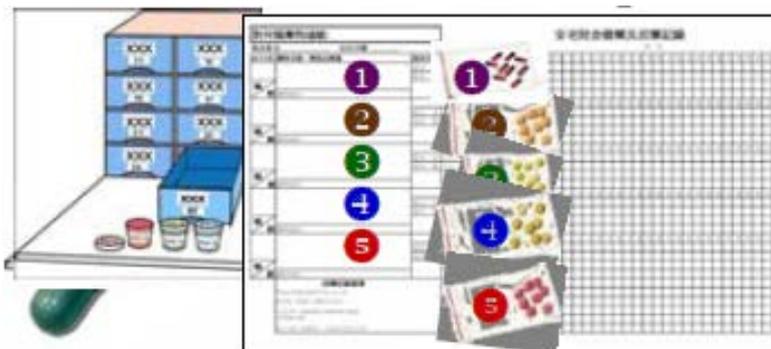
- The Code of Practice for Residential Care Homes (Elderly Persons) was revised in October 2005 with full implementation in January 2006 to further raise the service quality of RCHEs
- To further enhance the drug management capacity of RCHEs, an Operational Manual on Drug Management in RCHEs 2007 was produced through the joint efforts of the Department of Health, Hospital Authority and SWD.

Regulations and Code of Practice for Elderly Homes

Drug Management

- Drugs records:
 - Regular prescription drugs
 - Over-the-counter drugs
 - Chinese medicine
 - Special drugs
- A medication administration record and prescription from the registered Chinese herbalist provided by the family members should also be kept

Three Checks and Five Rights



- <http://www.swd.gov.hk/>

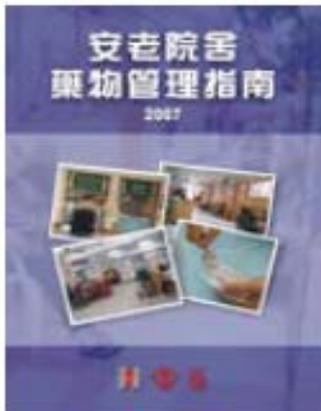
Government Measures

- To perfect the procedure for dispensing medicines at RCHEs and enhance their employees' awareness of medicine safety
- SWD has revised the entry requirements **and course contents of the curriculum** for HWs.
- The curriculum has also been beefed up, with the course contents and training hours on drug management enhanced (**doubled from six hours in the past to 12 hours**). Also, **drug management has been made a compulsory examination subject.**

Government Measures

- The Skills Upgrading Scheme for the elderly care services has launched a course on "**Applied knowledge of medical terms and drug nomenclature**" for serving HWs.
- DH and HA formed an inter-departmental task group to compile the "**Working Guidelines for RCHE Staff - Drug Safety Protocol**".
- To further enhance the drug management capacity of RCHEs, an **Operational Manual on Drug Management** in RCHEs 2007 was produced through the joint efforts of the **Department of Health (DH), Hospital Authority (HA) and Social Welfare Department (SWD)**.





DH, HA & SWD: Operational Manual on Drug Management in RCHEs (2007)

Drug Storage and Management

- In accordance with **Section 33** of the Residential Care Homes (Elderly Persons) Regulation, **all medicine and drugs shall, to the satisfaction of the Director of Social Welfare, be kept in a secure place.**
- **Medicine should be clearly labelled and kept in a safe and locked place, and administered properly by a nurse or health worker.**

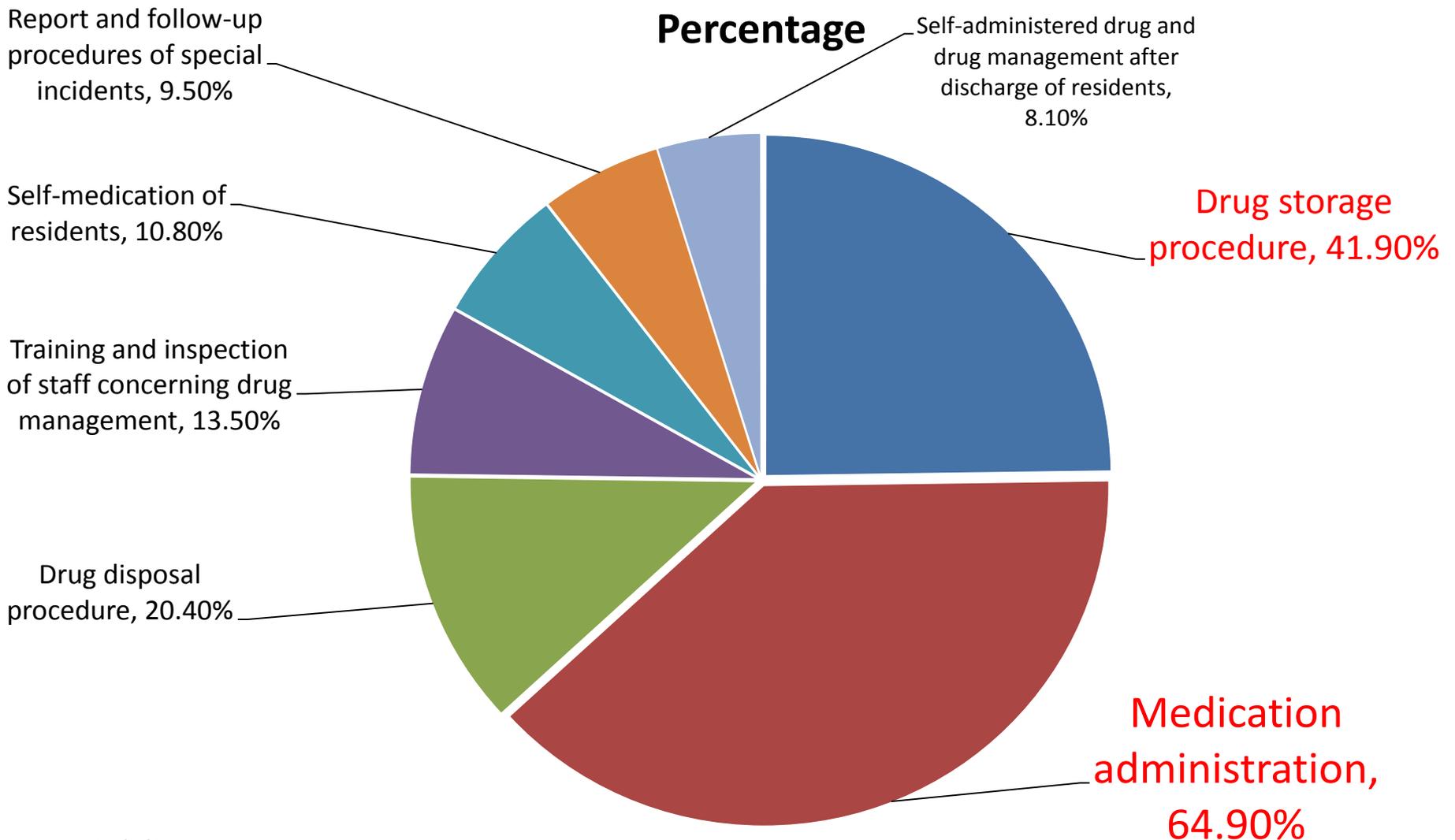
Drug Storage and Management

- Nurses, health workers and any staff of the home must follow the prescriptions and advice of registered medical practitioners, and **should not dispense any medicine to residents on their own opinion and/or diagnosis.**
- Health worker to administer and supervise the intake of medicine by **residents**

Cases and problems observed

- Suspected case of mixing and wrongly placed of medicine cup (2010)
 - http://orientaldaily.on.cc/cnt/news/20100716/00176_029.html
- Suspected case of administration and medication error, giving extra medicines (2008)
 - <http://hk.apple.nextmedia.com/news/art/20081116/11851874>

Residential Aged Care Accreditation Scheme (2005-2012, no. of RCHES: 74)



Suggestions

- The Health, Welfare and Food Bureau, SWD and DH liaise in closer connection with HA, the various associations representing the local pharmacist profession and the RCHE sector.
- More mass briefings to brief the sector of the Guide and drug knowledge in order to enhance their drug management skill.
- The course content, training hour and entrance qualification of Health Worker trainees to be further strengthened.
- Further improve the flow and procedure for drug management in RCHEs

Optimize model from foreign practice, case 1:

NICE Guidance

- Care home providers should have a care home medicines policy, which they review to make sure it is up to date, and is based on current legislation and the best available evidence. The policy should include written processes for:
 - sharing information about a resident's medicines, including when they transfer between care settings
 - ensuring that records are accurate and up to date
 - identifying, reporting and reviewing medicines-related problems
 - keeping residents safe (safeguarding)
 - accurately listing a resident's medicines (medicines reconciliation)
 - reviewing medicines (medication review)
 - ordering medicines
 - receiving, storing and disposing of medicines
 - helping residents to look after and take their medicines themselves (self-administration)
 - care home staff administering medicines to residents, including staff training and competence requirements
 - care home staff giving medicines to residents without their knowledge (covert administration)
 - care home staff giving non-prescription and over-the-counter products to residents (homely remedies), if appropriate.

References

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<http://www.info.gov.hk/gia/general/200605/17/P200605170183.htm>

<https://www.nice.org.uk/Guidance/SC1>

- Thank you.
 - Q&A
- - The End -