



Primary Care Pharmacy Consortium Online Conference 2021

19 June 2021



**HKU
Med**

LKS Faculty of Medicine
Department of Pharmacology
& Pharmacy
香港大學藥理及藥劑學系



醫護行者 Health In Action



Primary Care Pharmacy Consortium



About this Conference

- After the first conference in June 2019
 - Growing interest in pharmacy services in social welfare sector
 - New service models & collaborations
 - Emerging sector of pharmacy profession
- Aims to address the following questions
 - **Why:** What are the needs? What is the significance?
 - **What:** Service models; Roles and responsibilities
 - **How:** Expectations, experience, and resources.



Defining Primary Care Pharmacy Services

A Hong Kong Perspective

Primary Care Pharmacy Consortium Online Conference 19 June 2021

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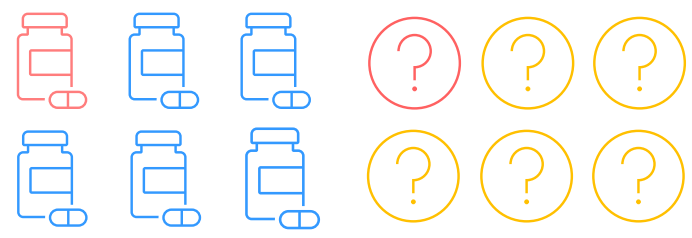
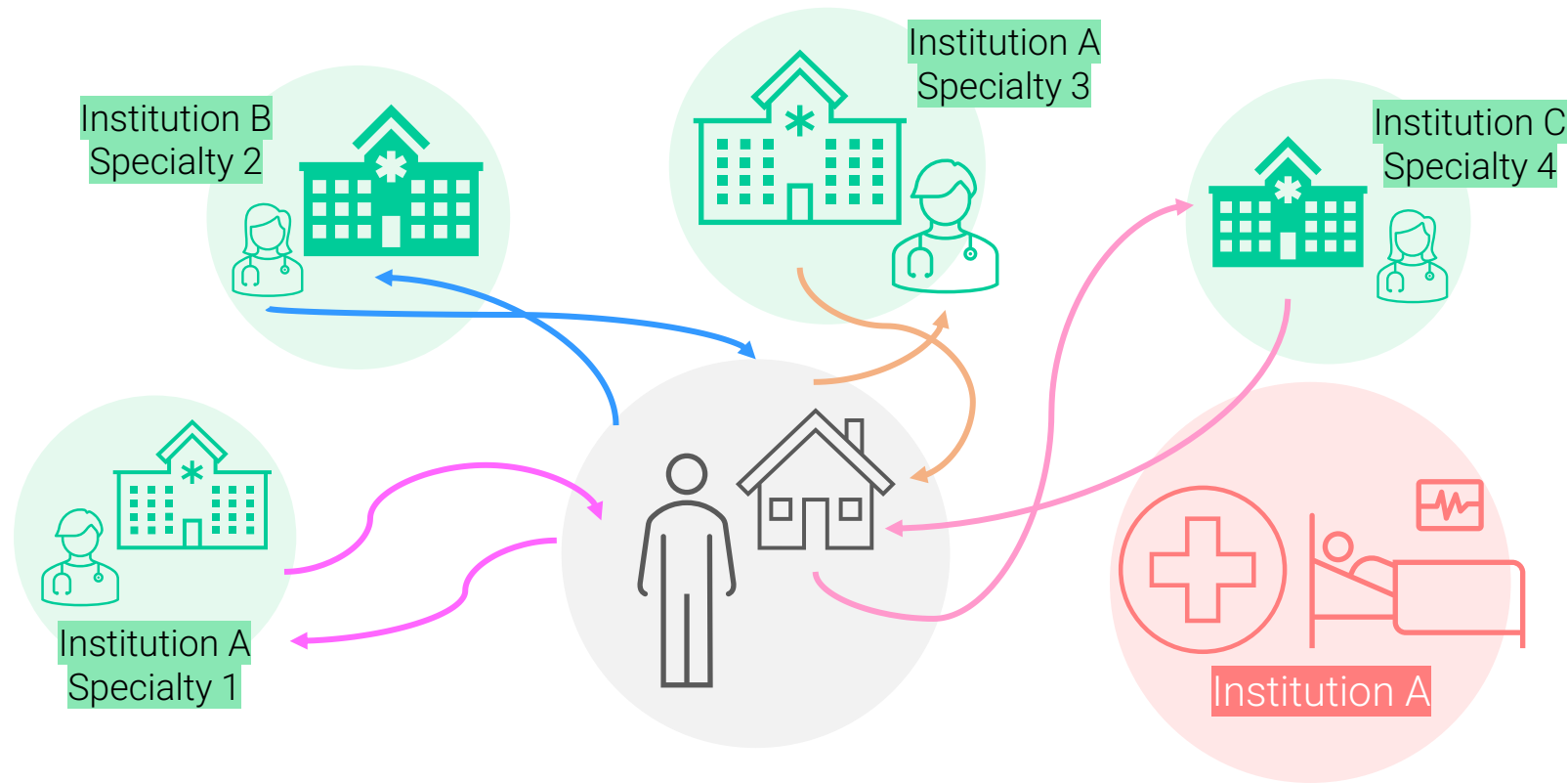
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醫護行者 Health In Action

Patient- Institution-centred Health Sick Care



醫院管理局（醫管局）為優化服務，推行「覆配易」覆配藥物服務先導計劃，透過分期配發藥物，避免病人在家中儲存過量藥物，從而減低誤用風險。藥劑師會定期跟進病人的臨床情況和覆核藥單，加強病人正確用藥的知識，提升藥物安全。

服務流程 Service Workflow

病人診症後，將根據處方日數，分階段配發藥物
After consultation, patients will be dispensed drugs in batches according to the duration of the prescription

覆配藥物前，藥劑師會先覆檢病人的最新情況
Before drug refills, pharmacist will review the conditions of patients



The Hospital Authority (HA) will promulgate a pilot programme on "E-FILL" Drug Refill services to enhance patient service. Under the programme, patients will collect drugs in phases with a view to reducing the risks of storing excess drugs at home and drug misuse. Pharmacists will regularly review patients' clinical conditions and their prescriptions, reinforce patients' drug knowledge for better compliance and enhance medication safety.

病人情況穩定，藥物處方沒有改變或沒有藥物相關問題

For stable patients *without changes* in medications or drug-related issues

醫院會以電話或短訊通知病人如期取藥
Hospital will contact patients via telephone calls or SMS messages to collect drug refills as scheduled

病人曾經求診或入院，藥物處方有變或有藥物相關問題

For patients who have episodes of medical consultations or hospital admissions *with changes* in medications or having drug-related issues

藥劑師會先覆核病人的藥物紀錄及進行藥物評估和整合，有需要時會透過電話跟進病人情況或安排會面

Pharmacists will review patients' drug profiles and perform medication review and reconciliation; and will arrange telephone call follow-up or face-to-face consultation, if required

服務對象

- 服務對象須符合以下條件：
 - 60歲或以上的內科專門診所病人；及
 - 服用多種藥物而覆診期達16星期或以上，及在門診覆診期之間曾多次求診或入院
- 醫院會主動聯絡合資格病人

Target Patients

- Target patient criteria:
 - Aged 60 or above attending Medical specialist outpatient clinics; and
 - Taking multiple drugs with medical consultation interval of 16 weeks or longer, and having multiple medical consultations or hospital admissions in between appointments
- Hospitals will approach eligible patients individually



Waiting Time for New Case Booking for SOPD

專科	1年預約 新症(宗)*	最短時間 (周)	最長時間 (周)
耳鼻喉科	98,957	54(港島東)	99(新界東)
眼科	139,291	63(港島西)	169(九龍東)
婦科	62,109	43(九龍中)	134(新界西)
內科	141,081	93(九龍西)	119(新界西)
骨科	109,628	101(港島東)	158(新界東)
兒科	25,761	14(港島東、港島西)	35(新界西)
精神科	45,902	53(港島東)	134(九龍東)
外科	172,552	51(九龍西)	96(九龍東)

*截至10月31日過去一年宗數

資料來源：醫管局

香港經濟日報. 公院醫生大逃亡眼疾最長等169星期 專科門診最新輪候時間一覽.

<https://topick.hket.com/article/2198971/%E5%85%AC%E9%99%A2%E9%86%AB%E7%94%9F%E5%A4%A7%E9%80%83%E4%BA%A1%E7%9C%BC%E7%96%BE%E6%9C%80%E9%95%B7%E7%AD%89169%E6%98%9F%E6%9C%9F%E3%80%80%E5%B0%88%E7%A7%91%E9%96%80%E8%A8%BA%E6%9C%80%E6%96%B0%E8%BC%AA%E5%80%99%E6%99%82%E9%96%93%E4%B8%80%E8%A6%BD>

Growing Chronic Disease Burden

Chronic medical
conditions in
74.6%



POPULATION

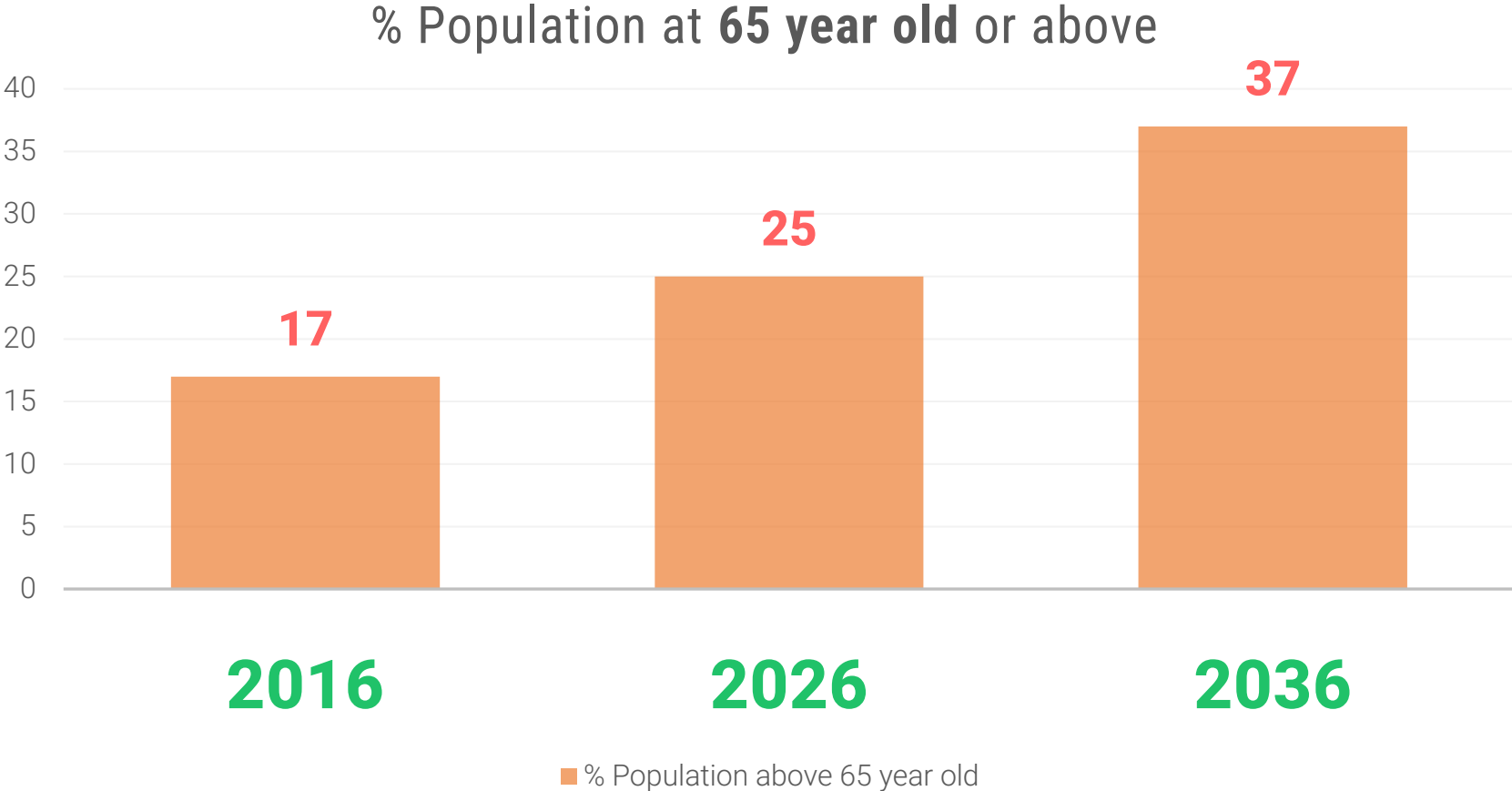
≥ 65

years old

Needs
9 TIMES
More Hospital Beds



Ageing Population

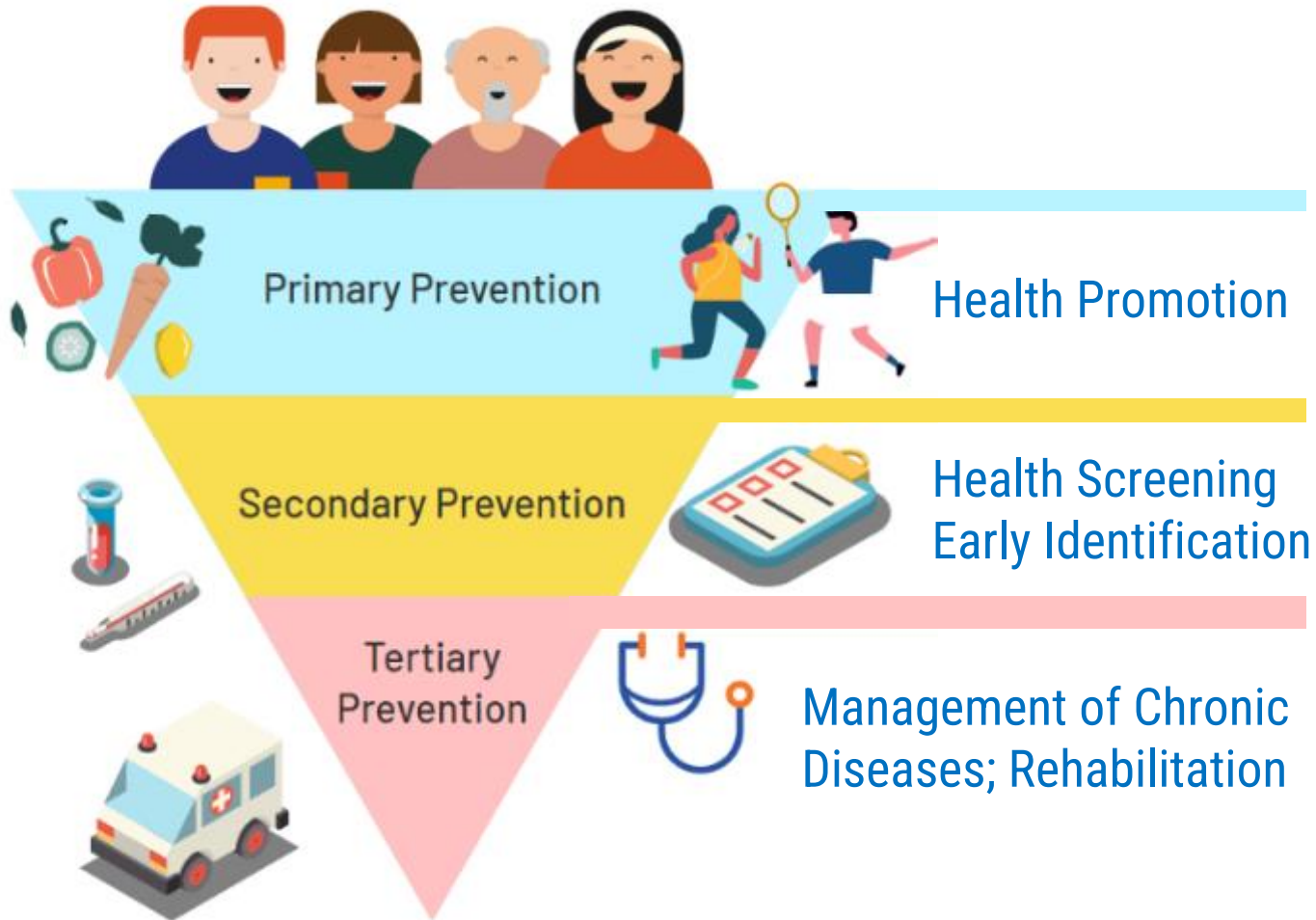


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Treatment >> Prevention

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Primary Care – First Level of Care



Timely management
Continuity of care
Holistic and coordinated support

Keep everyone
Healthy and Active
in the Community.

- Physical Health
- Mental Health
- Social Wellbeing

“

Medicines:

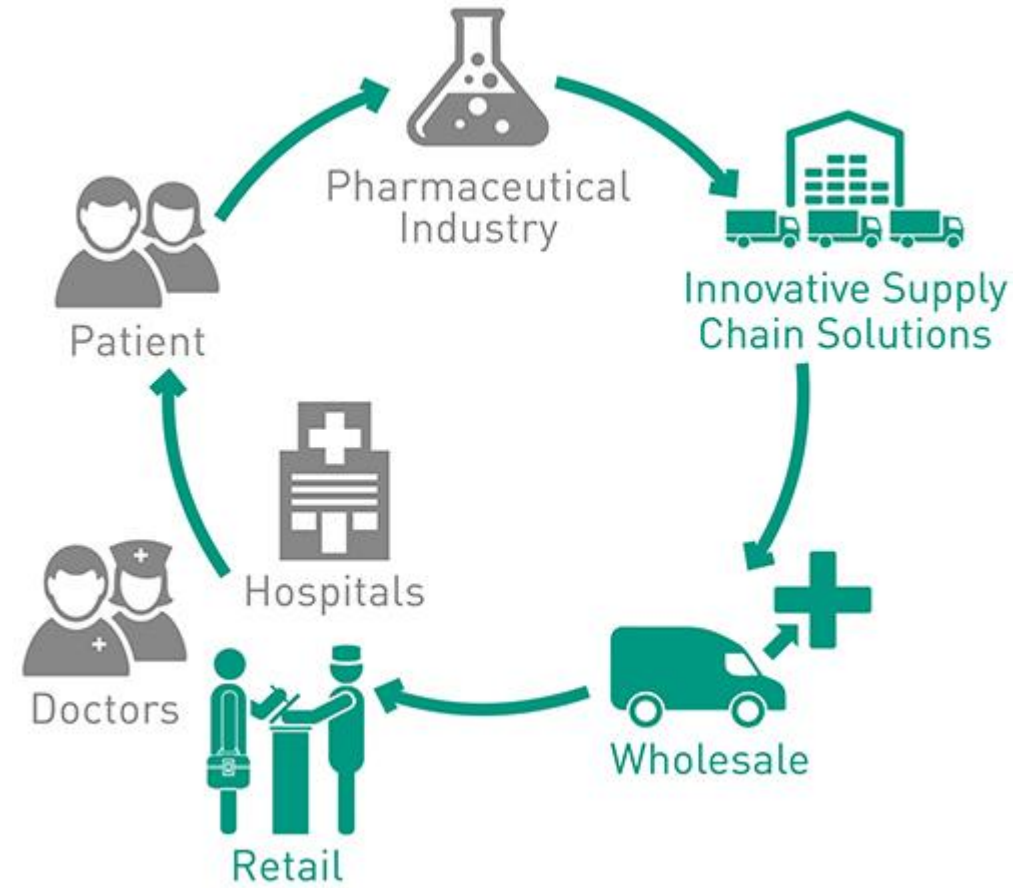
Integral part of healthcare,
Indispensable component
of everyday living.

”

Pharmacists

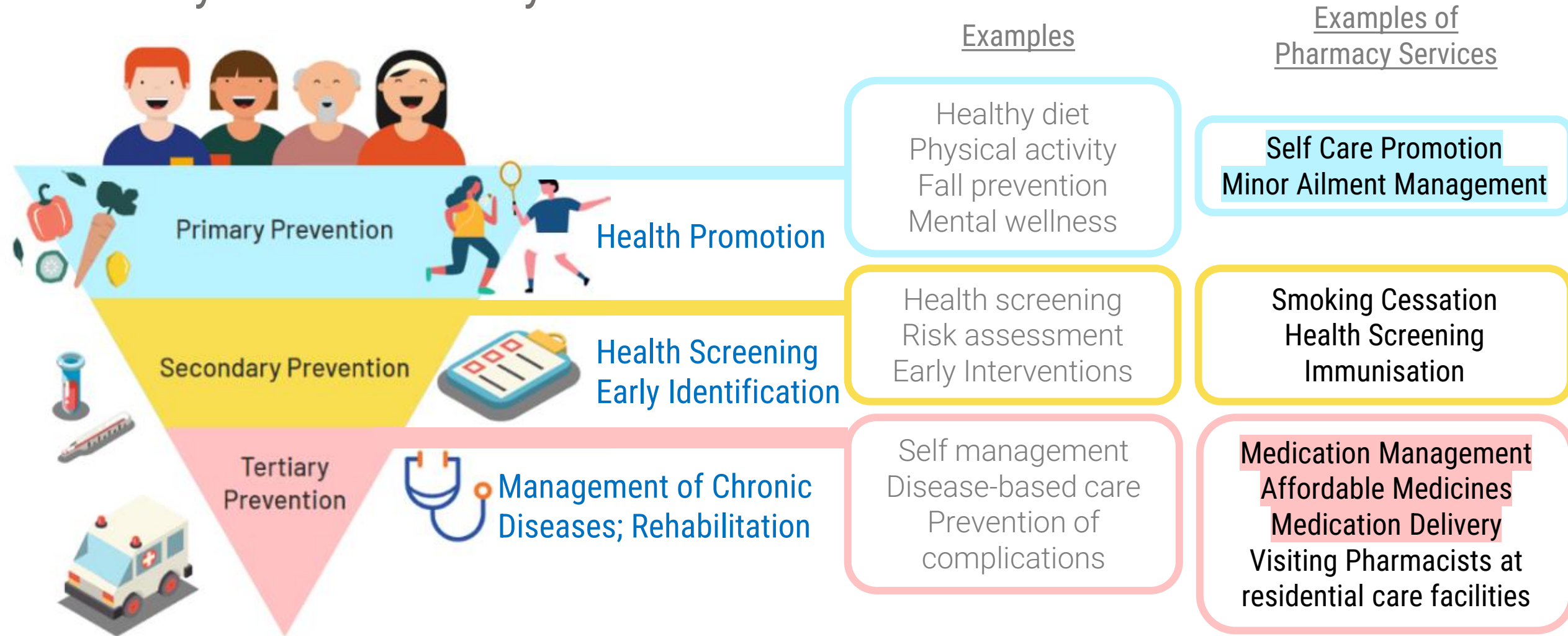
Access, Quality and Safety of Medicines

Bench side research
Manufacturing
Wholesales
Institutions/Retail
Bedside use in patients
Community



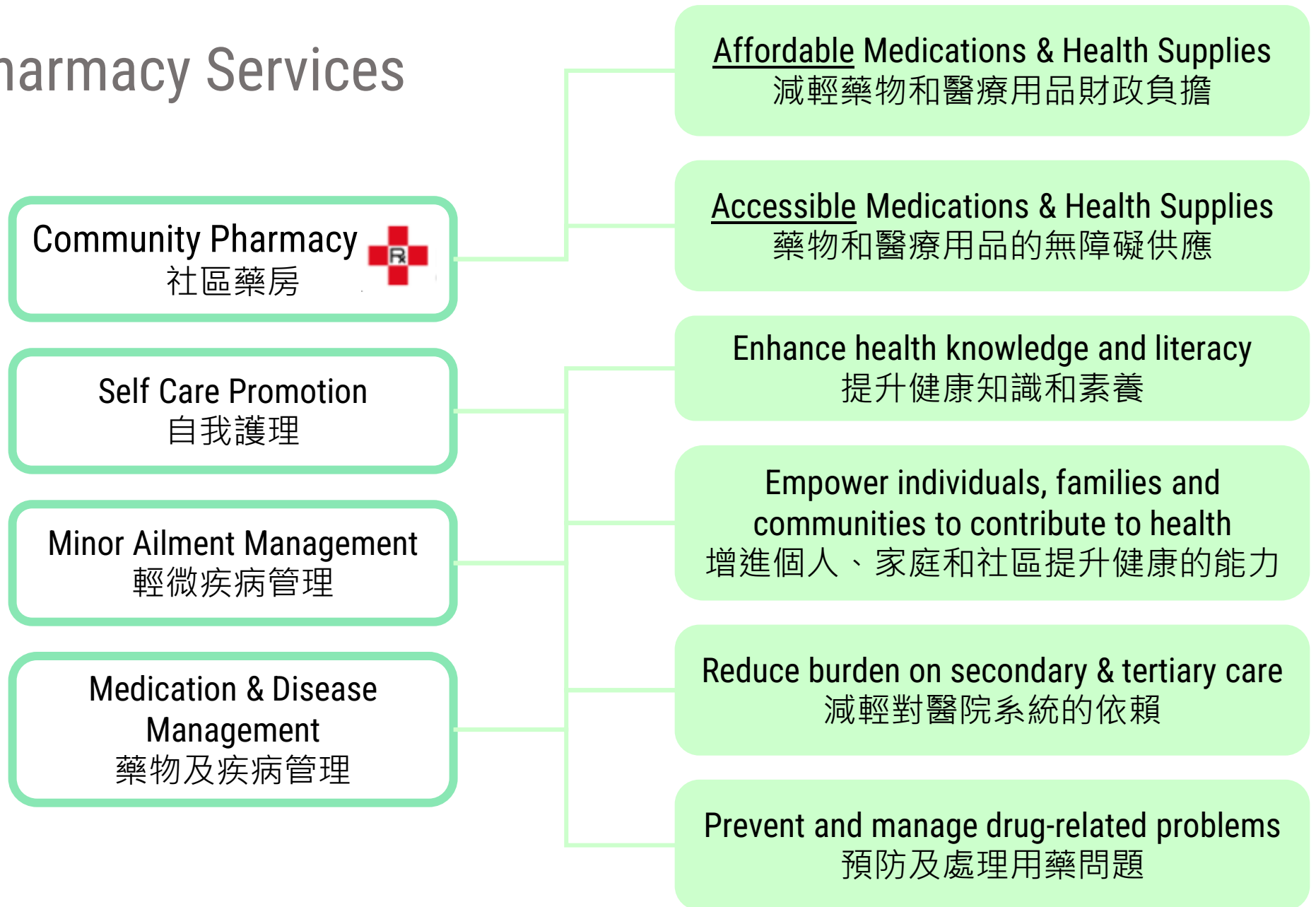


Primary Care Pharmacy



Primary Care Pharmacy Services

Pharmacists 藥劑師



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Primary Care Pharmacy

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Community Pharmacy

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Medical Social Collaboration

醫社合作

Social Medical Symbiosis

社醫共生

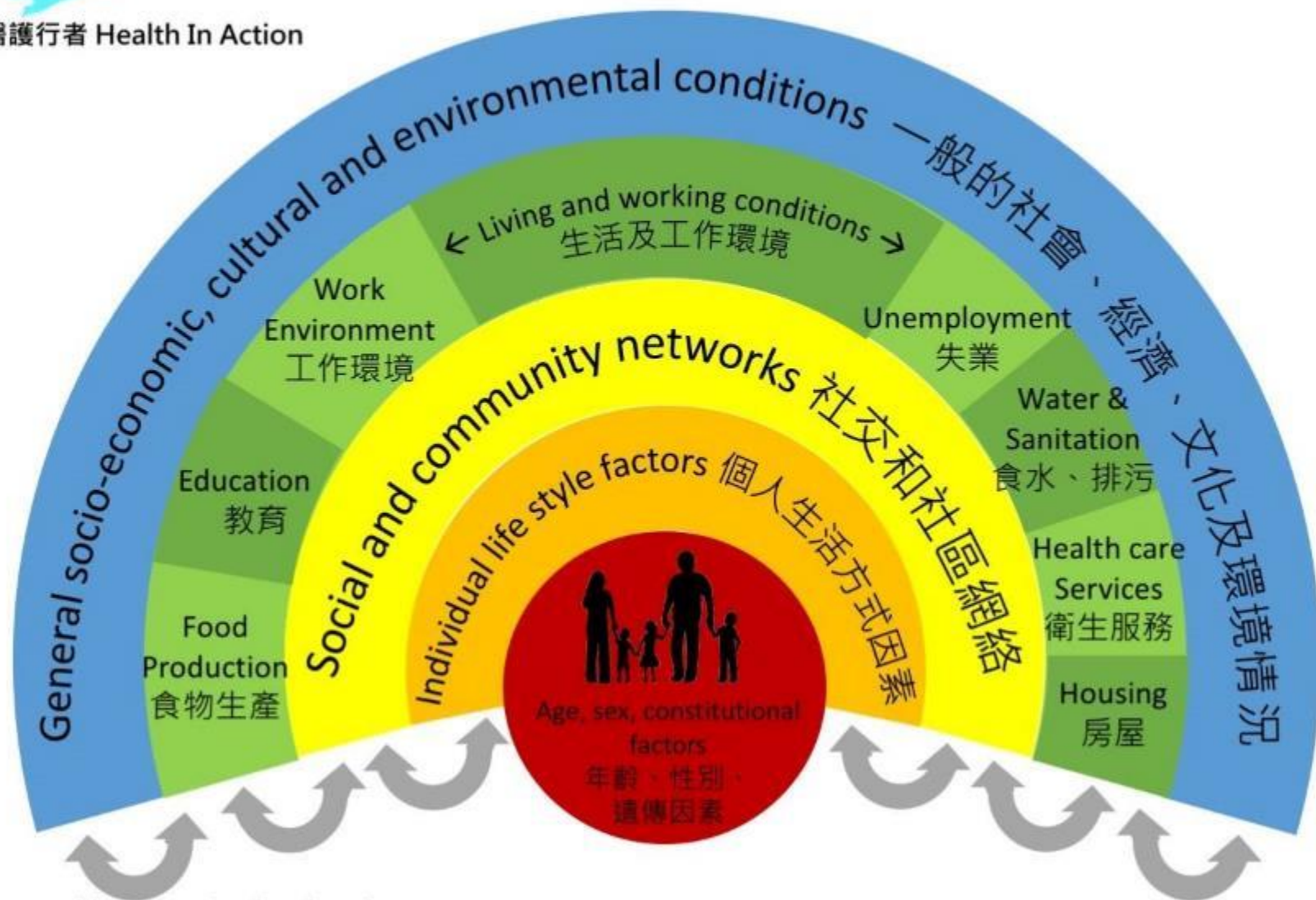




醫護行者 Health In Action

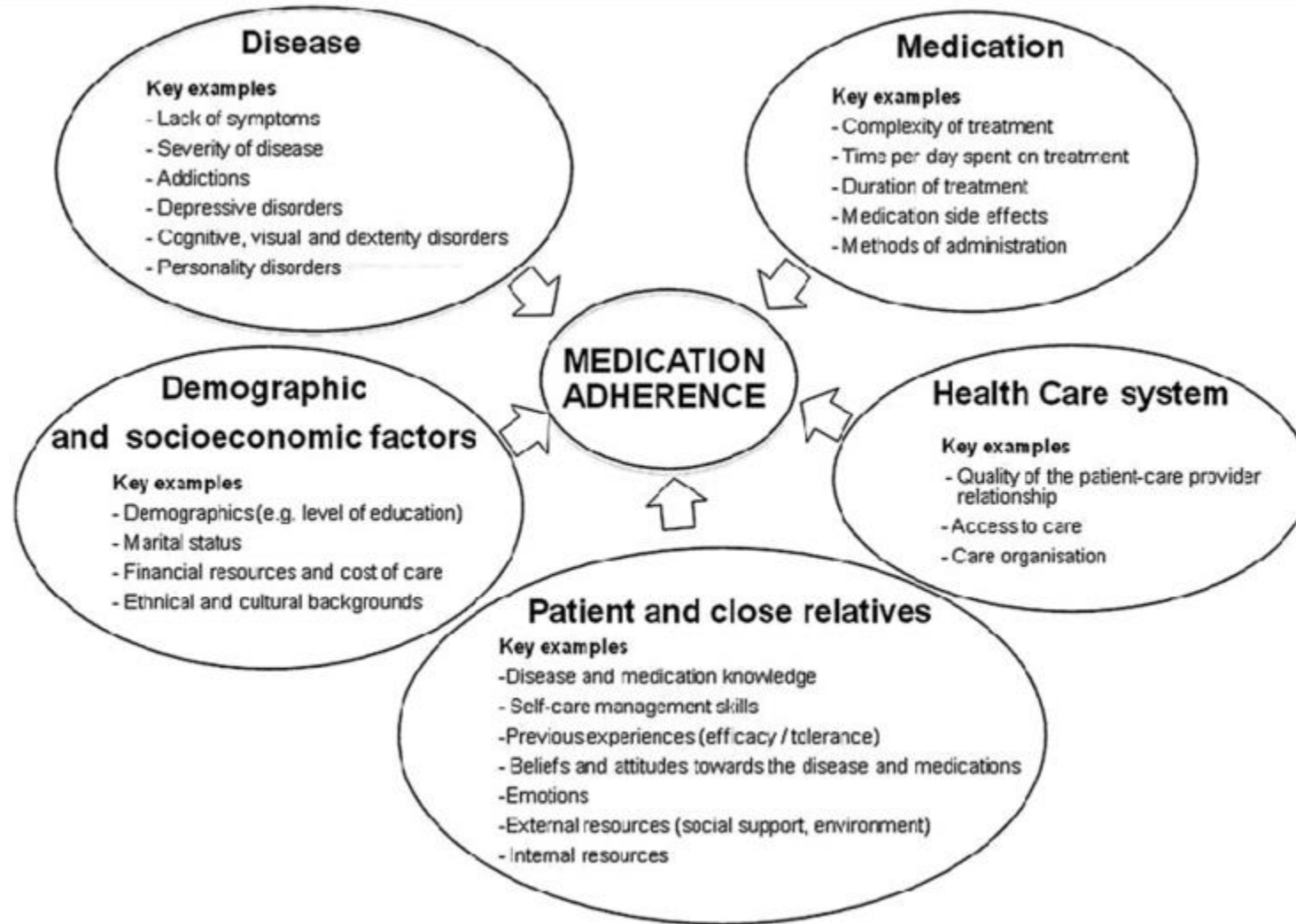
The Social Determinants of Health

健康的社會決定因素



Source: Dahlgren and Whitehead, 1991

Knowledge and literacy determine adherence, but NOT all the time



Health Care System

Home Care

Day Centres

Residential
Care

Specialist
outpatient
clinics

Polyclinics

Family
Medicine
Clinics

General
Practitioners

Hospice

Community
Health
Centres



Aspects of everyday living

Home

Neighbourhood

Workplace

Transportation

Restaurants

Religion

Shops

Leisure and
cultural
facilities

Online social
network

Social Support

Primary Health Care **in** the Community, **through** the Community

Health Care System

Home Care

Day Centres

Residential
Care

Specialist
outpatient
clinics

Polyclinics

Family
Medicine
Clinics

General
Practitioners

Community
Health
Centres

Hospice



Health in every aspects of everyday living

Home

Neighbourhood

Workplace

Transportation

Restaurants

Religion

Shops

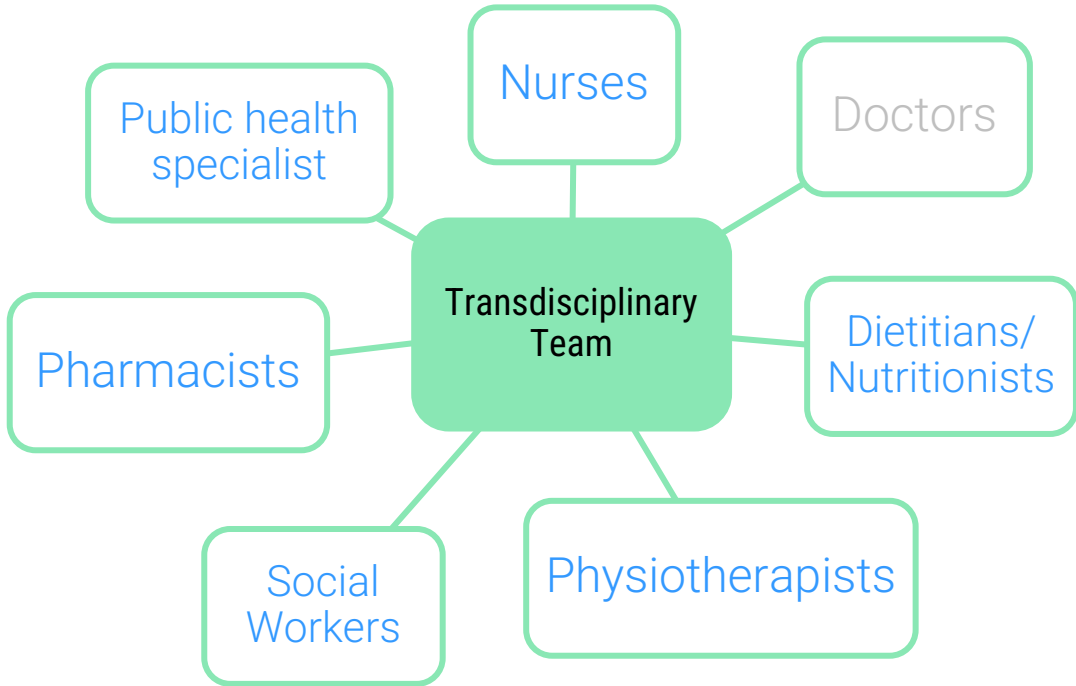
Leisure and
cultural
facilities

Online social
network

Social Support

Transdisciplinary Approach in Primary Care

Transdisciplinarity-transformed Pharmacy Practice

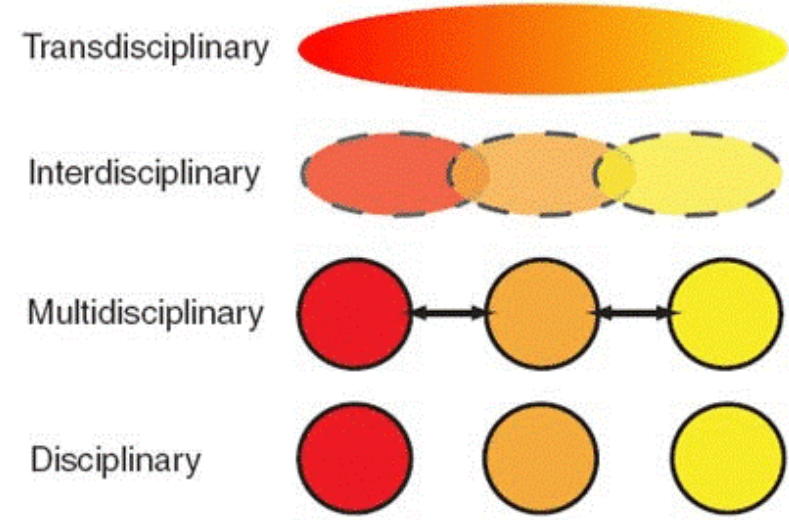


Unified, Holistic and Integrated Care plan

Identical Patient-centred Goals

- Physical Health
- Mental Health
- Social Wellbeing

Shared Responsibilities
Shared Decisions



Goals
Measures

Mutual Learning	Share values	Dissolve Boundaries
Case Conference	Transdisciplinary Meetings	Grand Round

“

From Healthcare to
**Integrated Health
and Social care,**
Community Development,
and Social Changes.

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