

Overview – A Children’s Specialist Hospital for Hong Kong

Statement of Purpose	<p>To finance, design, build, equip, operate and constantly upgrade a world-class public and private Children’s Specialist Hospital and research institute that meets the future needs of children with serious illnesses in Hong Kong.</p> <p>To provide high-quality specialised services to public patients within or below the limits of current recurrent expenditure on such services.</p> <p>To play a leadership role as a paediatric Centre of Excellence at the apex of an integrated service delivery framework for children’s health care.</p>
Why Hong Kong Needs a Children’s Specialist Hospital: Critical Mass of Expertise and Patients A Shrinking Child Population Emerging Trends Lack of a Policy Framework for Paediatric Health Care A World City?	<p>Children who need specialised services are a “minority within a minority”. Specialised services for this vulnerable group need to able to sustain:</p> <ul style="list-style-type: none"> – Robust clinical governance – Safe and effective clinical skills – A meaningful audit of outcome – 24/7 cover for all inpatient services – Economic viability – Requirements for training and research <p>It is widely recognised that most specialised children’s services require an overall population base of at least 4 million to be viable and provide a critical mass of staff and referrals. These large populations also allow clinicians, nurses and allied health professionals to maintain and develop skills for specialised services.</p> <p>In the last 20 years, specialised services have grown in an ad hoc and fragmented way in Hong Kong. As the child population continues to shrink, sustaining such a system will be impossible, and this means that the planning system needs to be thinking now about the rationalisation and reconfiguration of specialised services for children.</p> <p>On top of this population challenge, planners need to consider other emerging trends. These include:</p> <ul style="list-style-type: none"> – The shift to same day, ambulatory and home care – meaning that inpatients will be critically or chronically ill, have a longer average length of stay, have high technology needs, and require highly-skilled staff working in multidisciplinary teams. – Development and application of technologies – making it easier to treat children with complex medical needs at home, with remote monitoring. – Changing disease patterns in children – a shift away from infectious diseases to non-communicable lifestyle morbidities, requiring long-term chronic disease management. – The impact of better health programmes to prevent diseases such as obesity or smoking, and <i>more effective interventions</i> such as asthma prevention and immunisation. – Enhancements in the transport and communications networks in Hong Kong enabling centralisation of services. <p>Our review of specialised services indicates that the planning framework in Hong Kong appears not to take account of these emerging trends in paediatric health care services. This appears to be for two reasons:</p> <ul style="list-style-type: none"> – First, the lack of a policy framework, dedicated resources for a children’s health care system, and a “whole of government” approach. – And second, unnecessary competition for limited resources and a lack of a partnership approach within and between public and private sectors. <p>This is why, despite debate stretching back over 35 years, Hong Kong still does not have a paediatric centre of excellence as a viable base that ensures maintenance and development of best practice services, and that provides child and family-centric specialised care in a dedicated environment.</p> <p>Today, Hong Kong is the only city among the 20 generally-recognised “world cities” that does not possess a dedicated children’s hospital. Beijing and Shanghai each have two, Guangzhou has one.</p>
Demand for Specialised Children’s Services in Hong Kong	<p>Each year, there are over 150,000 admissions to HA Hospitals involving children <19 years (excluding well babies).</p> <p>At least 24% of these admissions (equal to 36,000) require specialised treatment.</p> <p>With an average number of admissions per patient of 1.56, this equates to roughly 23,000 children in Hong Kong with serious illnesses such as cancer, blood diseases, congenital anomalies and complex syndromes.</p> <p>Current services are split over 13 sites and were not designed with children in mind.</p>

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Salient Features of Our Proposal:	
Summary Concept Statement	<p>The Children’s Cancer Foundation is proposing that a ‘Children’s Specialist Hospital’ be built in Hong Kong, rationalising the current fragmented configuration of paediatric subspecialties into a single specialist hospital at a tertiary level.</p> <p>By combining expertise in one place, this new Centre of Excellence will be at the apex of paediatric health care in Hong Kong, giving children’s health care a higher profile with the Government and in society as a whole, setting standards and advising on policy.</p> <p>For patient care, it will enhance communication and interface amongst the various medical professionals who at different times and different places may be treating the patient. It will work collaboratively with other service providers in the public and private sector on a territory wide basis.</p> <p>The hospital itself will provide integrated specialist care for new borns to 19 year olds with serious illnesses: it will use state-of-the-art equipment; the design and organization will be child- and family-friendly; and it will include an Institute, dedicated to supporting research into child and youth health.</p> <p>It will be a non-profit organization, providing subsidised services under contract from the Government and will also generate new sources of funding, including revenue from private services.</p> <p>The intention is to meet the future needs of children with serious illnesses at a comparable cost to the current model.</p>
Scale of the Hospital	<p>The proposal is for the CSH to eventually have 386 beds. On opening (planned to be in 5 years), the building will house a 210-in patient bed and 30 day bed public hospital for children with tertiary illnesses receiving treatment under public subsidy and a 96-bed facility for private patients.</p> <p>Included in the inpatient services will be a 30-bed neonatal intensive care unit and a 20-bed paediatric intensive care unit.</p> <p>There will also be an integrated ambulatory care centre with a full range of diagnosis- specific outpatient and allied health clinics. An A&E unit will also be part of the plan.</p>
Child and Family Friendly Environment	<p>The hospital will create a non-threatening and happy environment. It will value families’ support and knowledge of their children, acknowledge their role in the decision-making process, and respect their choices.</p> <p>Parents will be able to visit their child anytime. There will be facilities for families on wards, such as fully-reclining chairs next to beds, and a hostel for visitors.</p> <p>Wherever possible, patients will be grouped in inpatient units according to their age and condition. This way, teenagers will be surrounded by those their own age with access to facilities such as computers, while younger children, toddlers and babies will likewise be in environments appropriate for their ages.</p>
Public/Private Professional Working Arrangements	<p>As a core principle of the CSH, no child will be denied medical care on the basis of their family’s ability to pay. Public subsidized beds will account for over two thirds of the service.</p> <p>The proposal also includes a self-funded private section for private paediatricians, accredited to the CSH, to admit patients for secondary and primary care. Private patients requiring tertiary care will also reside in this private section.</p> <p>Private paediatricians will be required, as part of their accreditation to CSH, to work part-time in the subsidised inpatient and/or outpatient services at an agreed pay scale.</p> <p>Also CSH specialist/consultants will be allowed to devote up to 20% of their official working hours to private practice within the CSH. This will be at their discretion.</p>
Location	<p>It is preferable to locate the CSH adjacent to a teaching and/or acute general hospital. After exhaustive review, no such site currently exists which also fits the population distribution and the land area requirements. Two possible stand-alone sites fit the requirements: 1. Tseung Kwan O (將軍澳), 2. Grantham Hospital in Wong Chuk Hang (黃竹坑). Other possibilities include co-location with the redeveloped Prince of Wales Hospital.</p>
Research and Training	<p>An Institute located at the CSH is proposed. It will be dedicated to research into child and youth health, funding, supporting and linking researchers located at universities, hospitals and other research centres across Hong Kong, China and internationally.</p> <p>The proposed plan includes research/training rooms adjacent to patient areas. A section of the hospital will also house laboratories, lecture rooms, study areas and offices to complement the facilities of other academic institutions.</p>

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Organisation and Governance	<p>One suggestion on Organization and Governance in the proposal is for an Independent Foundation with a Board of Governors drawn from Government, medical professionals and non-profit organizations, subject to final funding, subvention and management options.</p>
Costs and Funding	<p>Assuming the Government grants land for the hospital, the capital cost – i.e. construction, fit out and equipment is estimated to be HK\$2.8 billion.</p> <p>A Children's Specialist Hospital Foundation will set up a Corpus Fund to cover capital and financing costs and future capital expenditure for up-grades to facilities. The Corpus Fund will be raised through donations and endowments.</p> <p>The estimated recurrent operating costs for the public services will be HK\$1.5 billion per annum of which HK\$1.4 billion will come from government subvention.</p> <p>It is estimated that HK\$1.4 billion is the money currently spent by the Government on tertiary paediatric care. The difference between subvention and actual costs will be covered by revenue from co-payment, insurance payments, capital utilization charges and profits from private operations, which would be covenanted to the Foundation.</p> <p>Any excess will be contributed to the Corpus Fund.</p>
Key Benefits to Hong Kong	<p>The establishment of such a “cost neutral” hospital is an opportunity for better health outcomes, social and economic gain. Specifically, a Children’s Specialist Hospital will:</p> <ul style="list-style-type: none"> – Act as a pilot scheme for public-private co-operation and interface – Rationalise existing paediatric services – Encourage medical tourism to Hong Kong from the Mainland and the region – Address the need to care for a precious resource, our shrinking child population
Additional Information	<p>Two comprehensive documents are available to further explain our proposal and stakeholder reactions:</p> <p style="text-align: center;">A Children’s Specialist Hospital for Hong Kong (329 pages) <i>Proposal from the Children’s Cancer Foundation to the Health and Medical Development Advisory Committee, June 2005</i></p> <p style="text-align: center;">Children’s Specialist Hospital Stakeholder Survey Summary Report (249 pages) <i>Jointly prepared by Brandstorm Asia and Synovate Healthcare, December 2005</i></p>
Children’s Cancer Foundation	<p>Founded in 1989, the Children Cancer Foundation’s mission is to improve the quality of life for young cancer patients and their families in caring for their physical, psychological and social well-being; to help doctors improve the survival rate of children with cancer; and to assist major public hospitals in Hong Kong upgrade equipment and services in paediatric oncology.</p> <p>Having achieved critical mass in patient, hospital and public services for the child cancer population in Hong Kong, the Foundation’s new initiative is to establish a specialist hospital offering public and private services for children with cancer and other serious illnesses.</p>
Stakeholders in a Children’s Specialist Hospital for Hong Kong	<p>Government, Hospital Authority, Medical Community (Doctors, Nurses, Allied Health), Social Services, NGO’s and other charitable organisations with concern for children, Patients, Parents, Carers.</p>