

The Vision

March 2007

A Children's Hospital for Hong Kong

A Children's Cancer Foundation Initiative



SIMPLY BY PUTTING THE RIGHT RESOURCES IN THE RIGHT PLACE

In 2000, Dr. Margaret Chung (pictured above left) got the shocking news that her 4-year-old son, Zi-on was diagnosed with congenital heart disease requiring an operation to implant a cardiac pacemaker. This shock, however, was only the start of a life-long battle.

In 2002, Zi-on was diagnosed with dyslexia as a result of fetal hypoxia, requiring Margaret to bring her son to The Duchess of Kent Hospital every week for occupational therapy. After only one year the weekly appointments came to an end because of another problem – power failure of the cardiac pacemaker. For this, Zi-on had to be hospitalized in Grantham Hospital for six months for another operation and rehabilitation. Later, when Margaret wanted to resume the occupational therapy for her son's dyslexia, she found that it was impossible because she needed to queue up

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again for a place. She finally secured a place for her son at Lower Kwai Chung Polyclinic after a further six months' wait.

In 2004, Margaret found her son had developed speech and hearing problems and brought Zi-on to The Prince Philip Dental Hospital in Sai Ying Pun for assessment. Zi-on was referred to the ENT Department of Pamela Youde Nethersole Eastern Hospital to have an ENT check-up, where he was diagnosed with enlarged tonsils and adenoids which required both medicine and speech therapy. The therapy was arranged to commence in 2007.

This exhausting experience makes Margaret very supportive of the project to establish a Children's Specialist Hospital, with all resources, services and training centralized in one place. A one-stop paediatric service will also benefit patients with chronic illness since they do not have to get medical check-up and

treatments at different places. In addition, Margaret suggests that the Hong Kong government should reallocate existing medical resources. “Most resources are appropriately spent on adults and the ageing population, however, more attention should be devoted to child patients, especially those below six with developmental problems. Dyslexia is a very good example.”

“Zi-on is very lucky since I can afford the medical fees and give him the best care, however, not all patients have this chance,” says Margaret. She hopes the government will spend more resources on the underprivileged in future, and the building of a Children's Specialist Hospital is a big gesture that will benefit the whole population in the long run.

(Dr. Margaret Chung is a member of the government's Health and Medical Development Advisory Committee and a board member of the Hospital Authority. She is also founder and Honorary Chairperson of the Regeneration Society and a member of the Rehabilitation Advisory Committee.) ■



Passion is the Key to Success for a Children's Hospital

The Vision talks with Ms. Jeannie Cheung

The New Children's Hospital at Westmead in Sydney, Australia, is one of the leading children's hospitals in the world. Ms. Jeannie Cheung - a Clinical Service Executive at the hospital who has worked there for 18 months, assisting the Director of Nursing in planning and special projects - shared her experience with us.

The New Children's Hospital at Westmead provides paediatric emergency and tertiary level services to the community. There are 17 specialty wards, each with between 16 to 25 beds per ward depending on nursing ratio. All tertiary cases are referred here in order to centralize all resources and maintain a comprehensive database for the state of New South Wales. Paediatric departments in general hospitals only handle secondary level cases. Westmead is also the state's Liver Transplant Unit, Burns Unit and Mental Health Unit, and provides consultancy services to other hospitals in the state.

Westmead is the only stand-alone children's hospital in Sydney, and has developed a very clear and complete transition programme from child to adult services. The hospital treats patients aged from 0 to 21, and since most of the cases they receive are related to chronic illnesses, child patients are able to stay in the same hospital being taken care of by the same doctor for long-term

and consistent treatment. Westmead is well-prepared for every transition case, commencing planning for the transition coordination when the patient reaches 14 years of age. In addition, the state runs a very efficient patient retrieval service which allows sick children to be referred and dispatched from hospitals all over the catchment area to Westmead safely.

The hospital has introduced an Outreach Service recently to provide appropriate care after the patients' discharge. The Australian government is committed to providing whatever treatment is necessary to increase survival rates, and now they are expanding these services to community care in addition to in-patient and out-patient services. As part of this programme, Westmead provides comprehensive training for patients and the family on using medical apparatus when patients are ready to be discharged home.

Passion is the key to making a children's hospital a success. "All the staff in Westmead are committed to helping sick kids and to prioritizing their needs," said Jeannie Cheung with a smile of pride on her face. "And it is only when healthcare workers are concentrated in one place to share their knowledge and experience that this passion can become a common quality." ■

“When healthcare workers are concentrated in one place... passion can become a common quality”



ision Facts **METRICS**

7 - volunteers on the Children's Cancer Foundation's Task Force formed in November 2003 to pursue the establishment of a Children's Specialist Hospital for Hong Kong

99,411 - words in the 328-page proposal submitted to government in June 2005

232 - copies of the proposal circulated among stakeholders in government, academia, the medical community, children's charities and others

327 - medical professionals who responded to questionnaires in the stakeholder survey

1,202 - parents in the general population who took part in telephone interviews in the stakeholder survey

73 - individual interviews conducted among academics, medical professionals, children's charities, child patients, and parents

6 - focus groups conducted among parents of seriously ill children

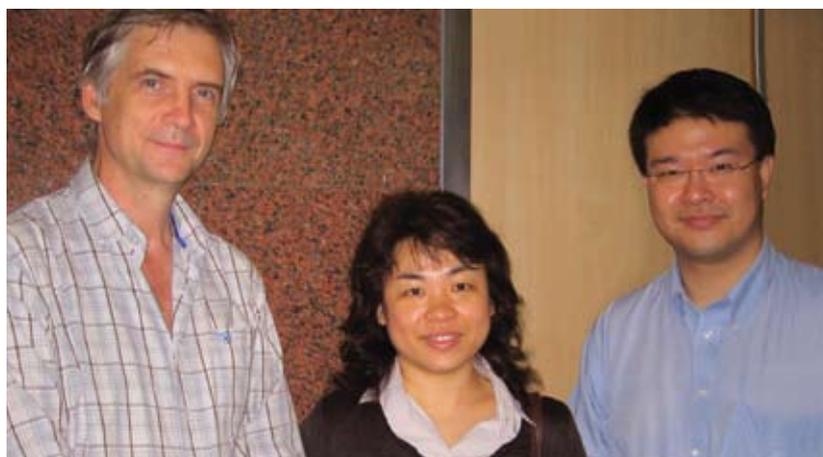
105 - meetings, workshops and forums the Task Force has held with government officials, stakeholders and corporate leaders in Hong Kong

3,951 - people receive each issue of this newsletter

HK\$1.10 - if each member of Hong Kong's population contributed this amount each day for the next twelve months, there would be sufficient money generated to pay for building the Children's Specialist Hospital



Pictured at the forum are Dr. John Yu (left) and Dr. Chan Chok-wan



Dr. Tony Nelson, Dr. Lilian Wong and Dr. Albert Li

PUBLIC-PRIVATE PARTNERSHIP A MODEL THAT WORKS

In November last year, the Hong Kong Paediatric Society and the Children's Cancer Foundation jointly organized a forum on the development of a Children's Specialist Hospital in Hong Kong.

The forum, which was held at Queen Elizabeth Hospital, welcomed Dr. John Yu as the guest speaker. As the former Chief Executive of the New Children's Hospital at Westmead in Sydney, Australia, Dr. Yu is a world-renowned paediatrician and considered one of the pioneers of modern children's hospital development. Around 40 senior paediatricians, medical professionals and others participated in the forum, sharing their thoughts and ideas on the proposed Children's Specialist Hospital.

Dr. Yu shared his experience in the development of children's hospitals in Australia over the past 30 years. He noted that several decades ago, when the Australian government set about redesigning the health care infrastructure, it foresaw the need to integrate children's hospitals into the conceptual framework and planning, with children's hospitals being the reference point for the smaller children's units in district and regional hospitals. The plan also aimed to provide for a continuous link with community child health services.

"The government recently introduced the model of public-private partnership, in which the private sector funded the design and construction of children's hospitals, and managed the facilities under a long-term contract," Dr. Yu commented. "This system has served the needs of children for the past 30 years, and has become part of the infrastructure in Australia." With private sector funding, financial

know-how and management expertise, Dr. Yu believes this model ensures well-equipped and state-of-the-art facilities which are continually updated and upgraded. "Most importantly, such a system allows medical professionals to focus on what they do best – caring for their patients."

According to Dr. Yu, a children's hospital is also an important base for research. "In Australia, research is not concentrated in one or two hospitals: all children's hospitals in Australia have a commitment and contribution towards research." He noted that the network of nationwide children's hospitals - providing in-patient, out-patient and follow-up services - has created a huge research database, with 45% of all children under 14 years old in Australia in the pool. "This has been possible because of the commitment of children's hospitals and unfailing government support," Dr. Yu concluded.

In the ensuing discussion, opinions were wide and varied on location, size, range of services, financing and other practical areas for the proposed Children's Specialist Hospital. Paediatricians in academia, public and private sectors were able to reach consensus on several key areas:

- The current system was not sustainable in the long-term;
- The government should have a clear policy towards children's health and the development of coordinated health care facilities and services;
- A Children's Specialist Hospital is an important component in the development of those services and has been talked about for over 30 years – it is time to resolve this.

“All parties to work together to find a win-win solution”



Dr. Paul Leung, Dr. Tsao Yen-chow and Dr. So Kwan-tong (left to right)

Dr. Chan Chok-wan, immediate Past President of the Hong Kong Paediatric Society and President-elect of the International Paediatric Association concluded the forum by thanking the Children's Cancer Foundation for taking up this important initiative. Noting that paediatricians should "leave the finances to the experts so that we can concentrate on our patients," Dr. Chan appealed to all parties to work together and find a "win-win" solution for the overall good of the profession and the long-term benefit to children's health. "This is the only way to realise the long-cherished dream of every paediatrician for a Children's Specialist Hospital for Hong Kong," he said. ■

Vision Facts

Manpower

To care for patients in the main public wing of the proposed Children's Specialist Hospital will require 249 doctors practising in 19 medical and 10 surgical subspecialties. They will be supported by 458 nurses, 595 allied health and patient contact staff, and 691 administrative and support staff.

Patients in the private wing will be cared for by 248 medical, nursing and patient contact staff, supported by an administrative staff of 91.



A SINGLE MOTHER'S PERSPECTIVE

Siu Ling, mother of Joyce, now ten years old, told us about her hectic experiences over the last nine years since her daughter was diagnosed with epilepsy. As she spoke, her calmness made us wonder where she found her energy.

due to the side effects of the increasing dosage of medication, the doctor never gives an answer. Siu Ling is certain that she would benefit from the exchange of experiences if she were able to meet more parents who have to take care of children with similar problems.

For nine years Siu Ling has run between hospital and home because her daughter, Joyce, needs to be hospitalised regularly whenever her epilepsy relapses. As a result of medication for epilepsy, Joyce also suffers from liver and kidney failure, as well as skin and muscular problems. When Siu Ling asks the attending doctor whether or not all these problems are

She also wishes that services for children suffering with similar rare diseases could be centralised and seen by a single group of doctors, instead of being scattered between various hospitals across Hong Kong.

“I don't mind travelling to another district for a centralised service”

“Then the doctors can share their clinical expertise, and the necessary supporting services such as nutrition, physical training, etc. can be provided as well.”

When Siu Ling learned that a Children's Specialist Hospital is being proposed for Hong Kong, she was overjoyed and very supportive. She expects that as a result more professional help can be provided to Joyce, other child patients and their families.

“At last, I wouldn't have to cramp myself up in a chair when I stay overnight to accompany Joyce in the ward, and I don't mind travelling to another district for a centralised service,” said Siu Ling with enthusiasm.

We hope that Siu Ling's wish will come true, and also that the Children's Specialist Hospital will bring more comfort to single parents like Siu Ling and their children. ■



What should a Children's Hospital for Hong Kong be called?

We invite you to send us your ideas on a suitable name for a children's hospital in Hong Kong.

Providing specialist care for infants, children and adolescents from birth to 19 years old, the proposed hospital could be named after a person, a place, or a fun idea. Children and parents want it to be a place of happiness and healing.

What do you think? Let us know your ideas, and we'll print some of the best in future editions of this newsletter and on our website - www.hkchildren.org.

Mission Facts

Family Facilities

At the Children's Specialist Hospital, family facilities will include fully-reclining chairs next to all beds, kitchen facilities, lounge areas (with access to computers and Internet connections), and bathroom facilities.

Private spaces, such as family consulting rooms and resource centres, will provide comfort, convenience and sanctuary. Play, educational and work support spaces will provide a continuity of lifestyle during the hospital stay.

Contact Us:

c/o **Children's Cancer Foundation**

Room 702, Tung Ning Building, 125 Connaught Road Central, Hong Kong. Tel: (852) 2815 2525 Fax: (852) 2815 5511

E-mail: myviews@hkchildren.org Website: www.hkchildren.org

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