

香港藥學會
The Pharmaceutical Society of Hong Kong
Kowloon G.P.O. Box 73552, Yau Ma Tei, Kowloon, Hong Kong.
Society's Fax: (852) 2376-3091
E-mail: pharmacist@pshk.hk
Website: <http://pshk.hk>

28 November 2017

Budget Consultation 2018-2019

The Pharmaceutical Society of Hong Kong (PSHK) submits our view on Budget Consultation:

Primary Healthcare Development

In the latest policy address, the Government has highlighted the development of primary healthcare development. PSHK supports putting more resources into primary care, and would like to emphasise the importance of inter-professional collaboration and especially the involvement of pharmacists in the provision of primary care services. PSHK urges the Government to increase the accessibility to pharmaceutical care at community level.

Drug-related problems due to misuse, inappropriate prescribing and drug interactions have led to hospital admissions and adverse reactions, reducing the cost-effectiveness of drug therapy and disease management. Pharmacists early interventions to provide more detailed education to chronic patients and long-term monitoring can reduce these unintended drug-related problems. Yet, current pharmacist expertise is under-utilized, especially for community pharmacists who are more accessible by the public. Financial barriers to access to pharmacist consultation is one of the hindering factors. Making better use of public and private resources and providing subsidy to patients for pharmacist consultation can alleviate the problem. This can be achieved by the following two initiatives:

1. Public Private Partnership (PPP) programme

To address the imbalance in public and private healthcare resources, a series of Public Private Partnership programs in healthcare have been rolled out. PSHK suggests that there is also a pressing need to put into action for the development of PPP for pharmacy services.

The quality of pharmaceutical care under the current system is suboptimal. An audit report on HA's drug management revealed that the average prescription length for Specialist Out-patient clinic (SOPC) has increased by 7.8 days (10.2%) from 76.4 to 84.2 days during 2011-12 to 2015-16. This has led to problems such as tremendous amount of drug wastage. PSHK commissioned the University of Hong Kong to conduct a descriptive study in 2013 measuring the quantities of obsolete drugs (drugs no longer required by patients) from old aged homes in a delegated community pharmacy which serves 3,020 senior residents in 2012. It was found that from September 2012 to January 2013, the drug wastes amount to about 170,000 unit items of oral solid drugs, 80 litres of liquid drugs and 5 kilograms

of external preparation drugs which was estimated to value at HK\$96,924. It was projected that a substantial monetary loss of HK\$5.8 million is generated annually from senior citizens living in old aged homes. Much more wastage would be expected when the elderly living at homes are included.

Although public healthcare resources are tight, human resources in the community are under-utilized. The implementation of PPP by outsourcing the dispensing and supply of repeat prescriptions to community pharmacies could solve the heavy public burden and make fuller use of the highly trained pharmacy professionals. For instance, the deployment of repeat prescriptions scheme allows patients with stable clinical conditions to obtain drugs on monthly basis from community pharmacies. Patients can choose to obtain medications at their convenient time and location, and enjoy more frequent and thorough medication therapy management from community pharmacists. This can lower the cost generated from drug-related problems and drug wastage, and allow the HA to focus on secondary and tertiary healthcare services.

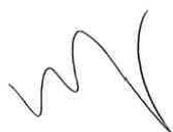
2. Health Care Voucher scheme

The Government has taken initiatives to alleviate the burden of medical expenses on elderly on primary care, such as extending the Health Care Voucher (HCV) coverage to elderly aged 65 or above, and increasing the annual voucher amount. PSHK suggests the government to also extend the coverage of HCV to community pharmacists, who play an important role in primary healthcare and can provide a broad range of health care services.

For example, chronic patients with hypertension, diabetes etc. are recommended to perform home monitoring which can facilitate healthcare providers to assess their disease management. However, many patients cannot afford the blood pressure or blood glucose monitors, and especially the test strips or lancets which require refill. PSHK would suggest the coverage of HCV for the provision of blood pressure, blood glucose etc. monitoring service by community pharmacists as part of the therapy management.

By allocating funding and resources for the PPP programme and the HCV programme of pharmacy services, pharmacists' role in primary care can be enhanced. Patients will be encouraged to seek advice from community pharmacists for their medication therapy, and utilize the health service provided in the community. This can also relieve the workload of public systems and improve the quality of pharmaceutical care provided. Ultimately, cost-effectiveness of disease management of our health care system could be improved by reducing cost generated due to preventable hospital admissions, adverse drug reactions and drug wastage.

Yours sincerely,



Philip CHIU
President
The Pharmaceutical Society of Hong Kong