



香港社會醫學學院
HONG KONG COLLEGE OF COMMUNITY MEDICINE
founder College of the Hong Kong Academy of Medicine
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ADMINISTRATIVE MEDICINE

Part I Examination

Thursday 5 June 2025

14:30 – 16:00 (1½ hours)

Paper IB

Candidates must answer all parts of these questions

Style, clear grammatical English and legibility will be taken into consideration by the Examiners. Answers should be written in a form appropriate to the audience specified in the question.

The weighting of marks for each part of the question is shown in parentheses.

**DO NOT OPEN THE PAPER UNTIL THE
INVIGILATOR INSTRUCTS YOU TO BEGIN**

7. Hong Kong has seen major changes in the local health system in the past 35 years since the Hospital Authority (HA) was established on 1 December 1990 under the Hospital Authority Ordinance. It is a statutory body under the governance of its board and is under the monitor of the Secretary for Health of the Hong Kong Government.

Since then, the HK Health System has evolved and developed into the current state.

Public Sector Dominance: 90% of inpatient care is provided by the HA through the management of its 43 public hospitals and specialists clinics. Services are heavily subsidized with minimal user fees. In 2003, the General Outpatient Clinics of Department of Health were transferred to the authority.

Private Sector Mainly Market driven: Private hospitals/clinics cater to ~15% of inpatient care and ~70% of outpatient services, often used by those seeking faster access or luxury amenities.

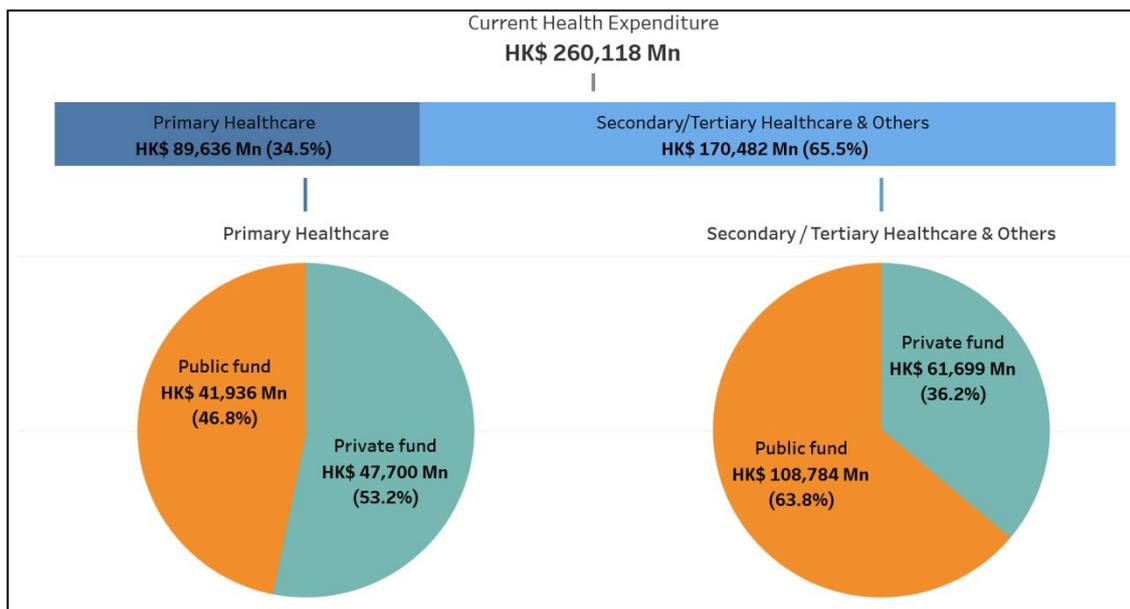
Primary Care Gaps: Fragmented primary care with limited gatekeeping; heavy reliance on hospital outpatient clinics and emergency departments (EDs) for non-urgent care.

Public Health: The setup of the Department of Health and its Centre of Health Protection provides strong infectious disease control (e.g., COVID-19 response) and preventive services (e.g., vaccination programs).

The below figures are extracted from the HK's Domestic Health Accounts 2022/23 website (<https://www.healthbureau.gov.hk/statistics/en/dha.htm>)

Figure 1 Total Primary Healthcare at Current Prices

QUESTION CONTINUES



The Primary Care Blueprint for Hong Kong, released by the Hong Kong Special Administrative Region (HKSAR) government in December 2022, outlines a strategic roadmap to transform the city's healthcare system.

- 1) Please discuss the core strategies of the Primary Care Blueprint. **(6 marks)**

- 2) If you are the officer responsible for driving stakeholder engagement, please describe the key stakeholders that you would involve and explain how you would engage them.

(4 marks)

QUESTION CONTINUES

8. Please answer the following questions:

1) In healthcare financing, patients are often required to contribute out-of-pocket payment at the point of services. The following are common forms of out-of-pocket payment:

(a) Deductible

(b) Co-payment

(c) Co-insurance

Discuss their definitions and impacts on healthcare services based on the following table:

(6 marks)

	Definition	Impact on healthcare services
Deductible		
Co-payment		
Co-insurance		

2) According to the Domestic Health Account 2022/23, the household out-of-pocket payment made up 27% of the current health expenditure in Hong Kong. This is significantly higher than the WHO recommended level of 20%. How would the relatively high level of household out-of-pocket payment affect the accessibility and affordability of healthcare services in Hong Kong?

(4 marks)

QUESTION CONTINUES

9. The Hong Kong Government has announced the establishment of an Institute for Medical Advancement and Clinical Excellence (IMACE) as announced in the Chief Executive's Policy Speech, to be an independent professional platform for developing evidence-based clinical protocols and devising service quality and efficiency standards for the public and private health sectors.

The Secretary for Health has invited Founding Members from seven institutions: the Hong Kong Academy of Medicine (HKAM), the Department of Health, the Hospital Authority, the Primary Healthcare Commission, the Faculty of Medicine of the Chinese University of Hong Kong, the LKS Faculty of Medicine of the University of Hong Kong, and the Hong Kong Private Hospitals Association. Thereafter the IMACE may invite other professional members and experts for specific deliberations. For expediency at the initial stage, Government would fund HKAM to provide support and kick start the work of IMACE as soon as possible. A nominee from HKAM would act as the Convenor of meetings. Otherwise, the IMACE should not be under the jurisdiction of the HKAM. To uphold the principle of professional autonomy, the Government will also not join discussions in the IMACE.

Apart from providing a reference for healthcare personnel, the relevant clinical guidelines and standards can also serve as public education tools to facilitate citizens' understanding of the healthcare services they may need in the event of different illnesses. Furthermore, the IMACE can make recommendations to the Government on implementing policy initiatives on driving clinical excellence and improving practice quality. The IMACE may also be conferred power to drive change.

QUESTION CONTINUES

Question

A range of organization options is possible for IMACE to take up:

- a) As an **Advisory Body** to the Health Bureau, or
- b) As an independent **Society** registered under the Societies Ordinance (Cap.151), or
- c) As a **Company Limited by Guarantee** subject to the Companies Ordinance (Cap.622),
or
- d) As a **Statutory Body**

Please choose TWO out of the four organization options above that may be suitable for IMACE to adopt. For each option, briefly explain the nature of such organization (**1 mark**). Then comment and explain on the advantages and disadvantages of such option in fulfilling the following objectives:

- Image of independence, and ability to function independently **(1 mark)**
- Proper governance and accountability in the use of public funds **(1 mark)**
- Fulfill Government policy timeline and start work as soon as possible **(1 mark)**
- Authority in recommending and enforcing guidelines **(1 mark)**

(5 marks total for each option)

QUESTION CONTINUES

10. Please answer the following questions:

1) The Institute of Medicine (IOM) defines six key domains of healthcare quality.

a) List the six domains, **(1 marks)**

b) Define FOUR of these domains **(2 marks)**

c) Provide a real-world example of how each of the four domains in (b) can be measured or improved in a Hong Kong healthcare setting.

(2 marks)

2) The Donabedian Framework is often used to assess the success of quality improvement programs.

a) Define the three domains of the Donabedian Framework in healthcare quality assessment. **(1.5 marks)**

b) Provide one example of each **(1.5 marks)**

c) Demonstrate or explain how they could be used together to evaluate the effectiveness of a single chronic disease management program. **(2 marks)**

END OF PAPER