

(Translation)

**Motion on  
“Improving primary health care”  
moved by Hon LEE Wing-tat  
at the Legislative Council meeting  
of Wednesday, 19 January 2011**

**Motion as amended by Dr Hon Joseph LEE Kok-long, Hon CHAN Hak-kan, Dr Hon PAN Pey-chyou, Hon Miriam LAU Kin-ye, Hon Alan LEONG Kah-kit, Hon CHAN Kin-por, Dr Hon LEUNG Ka-lau and Hon WONG Kwok-hing**

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That, as the World Health Organization affirms in the Declaration of Alma-Ata on primary health care published in 1978 that the definition of health is not merely about the absence of diseases, but also refers to the state of complete physical, mental and social well-being, and primary health care seeks to attain the target of health for all, and the World Health Report 2008 emphasizes once again that primary health care should be positioned to attach equal importance to both prevention and treatment as well as the development of comprehensive health care; however, the health care system in Hong Kong at present is still based mainly on disease treatment and prevention, with a serious shortage of resources for primary health care work, and primary health care work is mainly confined to primary medical care, thereby failing to attain the target of promoting health for all; in this connection, this Council urges the Government to take measures to give effect to the Declaration of Alma-Ata, including:

- (a) to comprehensively improve primary health care and allocate additional resources for primary health care;
- (b) to set up a fund for promoting primary health care reform;
- (c) to formulate a co-ordination mechanism to facilitate full co-operation between relevant government departments and local organizations in making improvements in areas such as labour, education, housing, public facilities and food safety, etc., so as to promote public health;
- (d) focusing on various areas of health, to set ‘Healthy People 10-year Indicators’ and formulate work plans for individual health indicators;
- (e) to promote a campaign on healthy community and, through community organizations and government departments, mobilize community members to take part in planning and improving primary medical care in their communities, and fully utilize community resources to promote residents’ health;

- (f) having regard to the health problems and needs of different population groups, such as elderly persons, women, men, working people, youth and children, to devise various strategies and services and increase resources allocation, with a view to enhancing health education and services for disease prevention and control;
- (g) to make estimates on the resources and manpower required for the provision of primary health care, so as to establish its way forward and related details;
- (h) to enhance the communication, co-operation and co-ordination among medical professionals in the public sector and private sector, with a view to more comprehensively finding out and meeting people's needs;
- (i) to expand health services teams for enhancing health care in schools, residential care homes for the elderly, etc., with a view to further implementing community-based health care and promoting holistic health; and
- (j) to encourage the general public to take part in caring for their own health, so as to strengthen their initiative and self-management in caring for their own health;
- (k) to improve the modes of provision of primary medical care, with a view to providing person-centred and community-based multi-disciplinary team services;
- (l) to improve public primary medical care and provide adequate resources to ensure that the socially disadvantaged and the elderly can more easily receive comprehensive primary medical care and nursing care;
- (m) to increase the amount of Elderly Healthcare Vouchers to \$1,000 and lower the eligibility age to 65;
- (n) to provide elderly persons with public dental services;
- (o) to introduce a cervical cancer vaccination programme and a breast cancer screening programme for the suitable women;
- (p) to provide adequate services to attain the goal of early detection and early intervention, thereby assisting children with learner diversity problems; and
- (q) to launch a colon cancer screening programme for people from age groups with higher risks;

- (r) to promote territory-wide participation so as to forge a consensus on formulating a strategy and direction for promoting health for all;
- (s) to establish a database, and through scientific surveys, to find out the health conditions of people in various districts and groups;
- (t) to conduct exchanges with other cities on the Mainland and overseas, with a view to learning and drawing lessons from their experience in promoting health for all;
- (u) to negotiate and collaborate with neighbouring places to establish a regional framework, so as to resolve the health problems of public concern; and
- (v) to extend the School Dental Care Service to secondary school students, so as to strengthen students' dental health care;
- (w) to explore the provision of appropriate assistance to encourage all people to undergo physical check-up, thereby achieving the targets of upgrading public health and lessening health care expenditure in the long run; and
- (x) to increase allocation of resources to shorten elderly persons' waiting time for day surgery on diseases such as cataract and hernia;
- (y) to make the social environment much healthier through efforts in different policy areas, such as expediting air quality improvement, strengthening the promotion of sports for all and setting maximum working hours, etc.;
- (z) to establish additional health centres for men, elderly health centres and woman health centres, etc., so as to reduce the present waiting time of more than 24 months for elderly health centre services, explore the provision of regular physical check-up for grassroots, and provide a greater variety of vaccination programmes, such as 13-valent pneumococcal conjugate vaccination; and
- (aa) to more actively promote and advocate the importance of mental health among members of the public, increase funding for psychiatric service and set up a mental health council with members comprising medical workers, patients, patients' family members and other stakeholders, and expeditiously formulate a mental health policy, so as to co-ordinate primary mental health services and provide patients with basic, comprehensive, sustained and co-ordinated treatment and nursing care; and

- (ab) to allocate additional resources for members of the public to undergo health risk assessments and distribute health check vouchers to those aged 50 or above, so as to enable them to find out the changes in their physical health and seek early treatment, or to improve their health through physical exercises;
- (ac) to promote public-private partnership and expand the existing health care voucher scheme, so as to assist the elderly and low-income earners in receiving better primary medical care; and
- (ad) to promote health screening programmes which have been medically proven to be effective, such as fecal occult blood test, etc.