

Enriching Knowledge for the Health Management and Social Care

Curriculum Series :

Social Care and Social Welfare

Learning and Teaching References

- 1 Personal Needs and Development across Lifespan
- 2 Health and Well-being
- 3 Physical Well-being – Healthy Body
- 4 Mental Well-being – Healthy Mind
- 5 Social Well-being – Inter-personal Relationship
- 6 Healthy Community
- 7 Caring Community
- 8 Ecology and Health
- 9 Building a Healthy City
- 10 Healthcare System
- 11 Social Welfare System
- 12 Medical and Social Care Professions
- 13 Health and Social Care Policies**
- 14 Social Care in Action
- 15A Health and Social Care Issue – Ageing Population
- 15B Health and Social Care Issue – Discrimination
- 15C Health and Social Care Issue – Domestic Violence
- 15D Health and Social Care Issue – Addiction
- 15E Health and Social Care Issue – Poverty

Booklet 13

Health and Social Care Policies

September 2016

S4 – Concepts and Framework

Booklet (1) Personal development

Booklet (2) Health and well-being



S4 – Holistic Health

Booklet (3) Physical

Booklet (4) Mental

Booklet (5) Social



S5 – Macro Level

Health Management

Booklet (6) (8) (9) (10)

Social Care

Booklet (7) (11)



Round-up : Booklet(13) Health and Social Care Policies

Learning Targets

Values and Attitudes

- Respect ideological and cultural differences

Knowledge

- Understand that health and social policies may be determined by various factors
- Understand conflicts and tensions in the health and social care context
- Analyse possible crises resulting from these tensions and disagreements and explore possible solution(s)

13.1B Policy Instruments

Topic 3 – Responding to the Needs in the Areas of Health (care, promotion and maintenance) and Social Care

- *3C Implementing health and social care policies*
- *3C4 Instruments of policies:*
 - *taxation*
 - *legislation*
 - *promotion*
- *To identify instruments of policies*

Policy Instruments

Instruments	Purpose	e.g. Air Pollution	e.g. Employment of Mentally-ill Patients
legislation			
taxation / economic incentive			
promotion/ education			

Process and Cycle of Public Policy Making

Stage	Work

13. 1 A Policy Objectives

Topic 3 – Responding to the Needs in the Areas of Health (care, promotion and maintenance) and Social Care

- ***3B Developing health and social care / welfare policies***
 - **3B2 2. Comparison of policies between Hong Kong and other regions / countries (e.g. United Kingdom, United State of America)**
- ***To compare health and social policies in Hong Kong with other regions /countries***

13.2 Health and Welfare Policies in Hong Kong

Topic 3 – Responding to the Needs in the Areas of Health (care, promotion and maintenance) and Social Care

- ***3B Developing health and social care / welfare policies***
 - **3B1 Health and social care / welfare policies in Hong Kong**
 - ***To compare health and social policies in Hong Kong with other regions / countries***

13.3 Comparison of Policies between Hong Kong and other Countries

Topic 3 – Responding to the Needs in the Areas of Health (care, promotion and maintenance) and Social Care

- ***3B Developing health and social care / welfare policies***
 - ***3B2 2. Comparison of policies between Hong Kong and other regions / countries (e.g. United Kingdom, United State of America)***
- ***To compare health and social policies in Hong Kong with other regions /countries***

Policy Objectives *(Refer to Booklet 10,11)*

	Welfare States	Market Oriented Countries
Rationale	<p><u>Health care system</u></p> <ul style="list-style-type: none"> Everyone is entitled to reasonable access to health care, regardless of the ability to pay <p><u>Social welfare system</u></p> <ul style="list-style-type: none"> Social welfare is an integrated institution in the society and is used for resources reallocation 	<ul style="list-style-type: none"> Individual needs should be satisfied by the private market and family <p><u>Health care system</u></p> <ul style="list-style-type: none"> Allocation of resources according to consumers' willingness to pay <p><u>Social welfare system</u></p> <ul style="list-style-type: none"> Only when these break down should social welfare institutions come into play and then only temporarily
Policy objectives	<p><u>Health care system</u></p> <ul style="list-style-type: none"> To provide universal services for all people To provide access to a comprehensive range of health services <p><u>Social welfare system</u></p> <ul style="list-style-type: none"> To provide social services on a universal basis outside of the market and based on individual needs. 	<ul style="list-style-type: none"> To minimize government intervention <p><u>Health care system</u></p> <ul style="list-style-type: none"> Government only provides assistance to the low-income individuals and families <p><u>Social welfare system</u></p> <ul style="list-style-type: none"> and dependence on welfare

Hong Kong – Mixed model

	Welfare states	Market-oriented countries
<u>Health care system</u>	<ul style="list-style-type: none"> Essential health services are available with reasonable access regardless of the ability to pay 	<p>but private health services are available to those who can afford either to pay or with insurance coverage</p>
	<ul style="list-style-type: none"> To ensure no one in Hong Kong is deprived of medical care because of lack of means; 	<p>at the same time emphasizing individual responsibility for the maintenance of his or her own health</p>
<u>Social Welfare system</u>	<ul style="list-style-type: none"> Government has played the roles of policy-making, resources distribution and service monitoring 	<ul style="list-style-type: none"> Welfare services only aim to assist people and families in need
	<ul style="list-style-type: none"> Due to increasing reliance on government funding, most of the non-governmental organisations choose to be in line with government social welfare policy 	

Features of service provision

	Welfare States	Market Oriented Countries	Hong Kong
<u>Health care system</u>	<ul style="list-style-type: none"> e.g. National Health Service (NHS) - Public hospital services- free of charge for all citizens/ Fully subsidized primary health care services/ Medicine to be paid at a flat rate for each prescription (UK) 	<ul style="list-style-type: none"> Private Insurance / e.g. supplemented by Medicaid and Medicare(USA) 	<ul style="list-style-type: none"> The public sector is the predominant provider of secondary and tertiary care. Individuals cover a small percentage of the cost for public hospital services. A large proportion of primary care is mainly provided by private sector through out-of-pocket payments and/or health insurance
<u>Social Welfare system</u>	<ul style="list-style-type: none"> Universal Coverage and Insurance: e.g. Benefits from National insurance to protect an individual from birth to death(UK) 	<ul style="list-style-type: none"> e.g. Federal Social Insurance (USA) The funding of social security is from the tax on the employers of enterprises and business Company and private insurances are important parts 	<ul style="list-style-type: none"> The parties participating in social welfare include government, non-governmental organisations, families, charitable organisations and private sectors

Health Policy

	Hong Kong	USA	UK
Primary health services	<ul style="list-style-type: none"> Mainly provided by private sector. Patients who cannot afford private sector services can use subsidized public services. The Department of Health is responsible for safeguarding the health of the community through promotive, preventive, curative and rehabilitative services. 	<p>Private Insurance A majority of the population relies on private insurance as their sole means of health care cover. Under such a system, the level of access to health care services is determined by the level of insurance cover which an individual can afford to purchase, and contributions are based not only on the ability to pay but also an individual's health risk assessed by the insurer.</p>	<p>National Health Service (NHS) Fully subsidized by public monies, patients receive primary health care services provided by <u>private medical practitioners free of charge.</u></p>
Hospital services	<ul style="list-style-type: none"> Cost of Public hospital services mostly covered by government Fees and charges for private hospital services are covered by out-of-pocket payments and/or health insurance. 	<p>Medicare Health insurance coverage to people who are aged 65 and over, or who meet other special criteria</p> <p>Medicaid Health insurance to low-income people of all ages</p>	<p>Public hospital services for eligible persons are free of charge unless they choose to be treated as private patients</p>

Welfare Policy

	Hong Kong	USA	UK
Social Security	<ul style="list-style-type: none"> • Safety Net : provide financial or material assistance such as Comprehensive Social Security Assistance (CSSA) Scheme to meet the basic and special needs of the members of the community • Universal : Mandatory Provident Fund 	<ul style="list-style-type: none"> • Safety net: temporary assistance for needy families (Social Security Act) • Provisions include: Retirement Benefits, Unemployment benefits, Disability benefits (and Supplemental Security Income) • Funding comes from the tax paid by employers and the benefits are provided to the employees. Social security relies on the development of the market economy • Funding mainly comes from the community, companies and individuals 	<p>Universal and comprehensive protection:</p> <ul style="list-style-type: none"> • Universal : benefits are available for people of working age, for pensioners, for families and children, and for disabled people and their carers • Comprehensive : Each of the residents of the United Kingdom, even as a foreigner living in Britain, has a National Insurance number since birth. It guarantees protection as early as they are in the wombs. They enjoy a certain degree of social security when they are going to school, being ill, being employed or unemployed, in their widowhood, having dependent children, being elderly and retired, until death.

13.4 – 13.5 Reasons for Policy

Topic 3 – Responding to the Needs in the Areas of Health (care, promotion and maintenance) and Social Care

3B Developing health and social care / welfare policies

- 3B3 Differences in policies in different countries based on:
 - Local economy – economic conditions affect the amount of resources to be allocated
 - Global economy and world financial organisations e.g. World Bank
 - Social context e.g. famine
 - Private-public debates and tensions e.g. privatization of health and care services
 - Social value and political concerns e.g. smoking policy
 - Cultural understandings of health and social care and its implication on policies
- *To understand that health and social policies may differ among countries due to various reasons and factors*

13.4 Factors Contributing to the Differences in Policies

	USA	UK	HK
Local Economy			
Global economy and world financial organisations			

13.4 Factors Contributing to the Differences in Policies

	USA	UK	HK
Social context			
Private-public debates and tensions			
Social Value			

13.4 Factors Contributing to the Differences in Policies

	USA	UK	HK
Political concerns			
Cultural understandings of health and social care and its implication on policies			

13.5 Demands for new policies

- **Emerging problems**
 - Examples : Booklet 6 - Outbreak of a disease / Booklet 7 – Family problems)
- **Changing needs of individuals, families and communities**
 - Examples : Booklet 7 – Family changes/ Booklet 8 – Pollution/ Booklet 11 – Integrated family services
- **Increasing demand for services**
 - Examples : Booklet 10 – Ageing population: healthcare reform
- **Improving effectiveness or efficiency**
 - Examples : Booklet 10 – Healthcare reform / Booklet 11 – Privatisation and Lump-sum Grant
- **Reducing inequalities**
 - Examples : Booklet 8 – Developed and developing countries / Booklet 11 – Welfare states

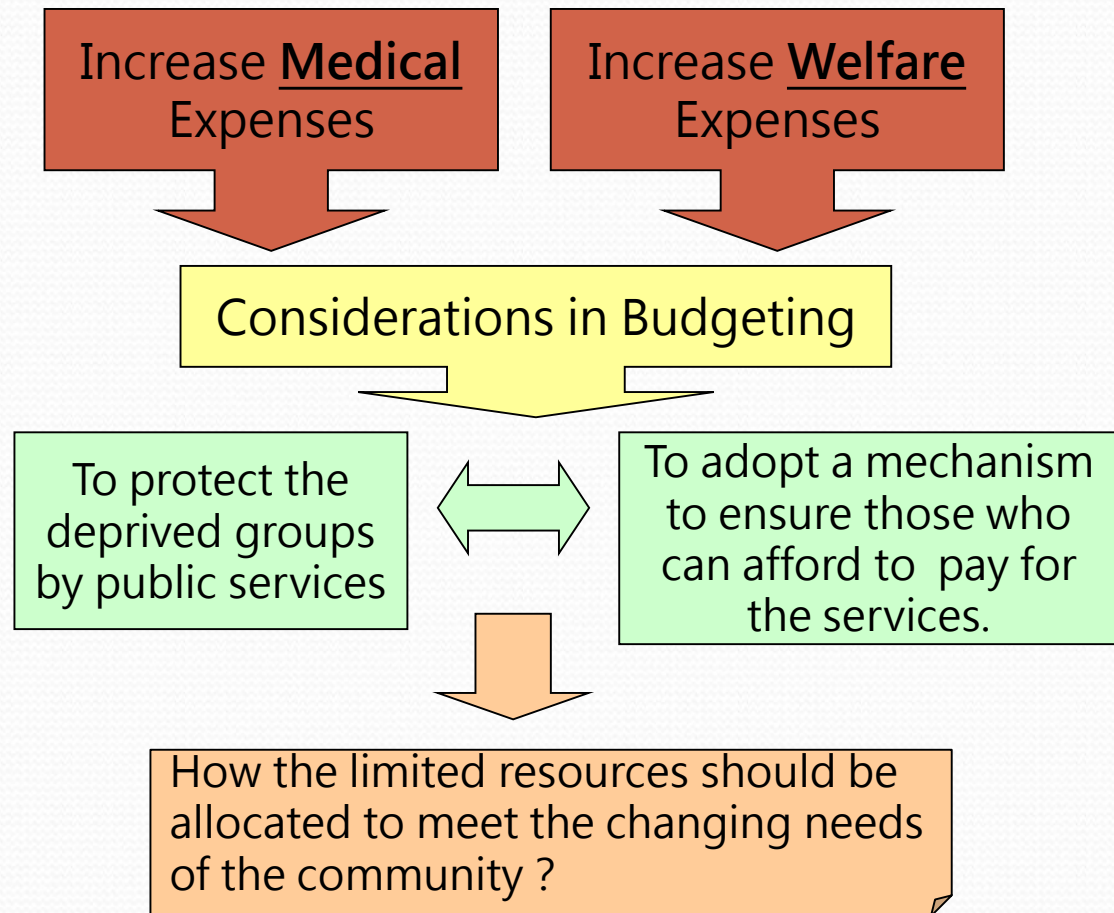
13.6 Resources Allocation

Topic 2 - Health and Social Care in the Local and the Global Contexts

- *2D Developments in the health and care industries*
 - *2D3 Allocation of resources to different parties*
 - *2D5 Priorities of resource allocation to related parties and organisations*
- *To analyse the viewpoints or issues from different perspectives*
- *To understand that value judgments may vary among different individuals or parties*

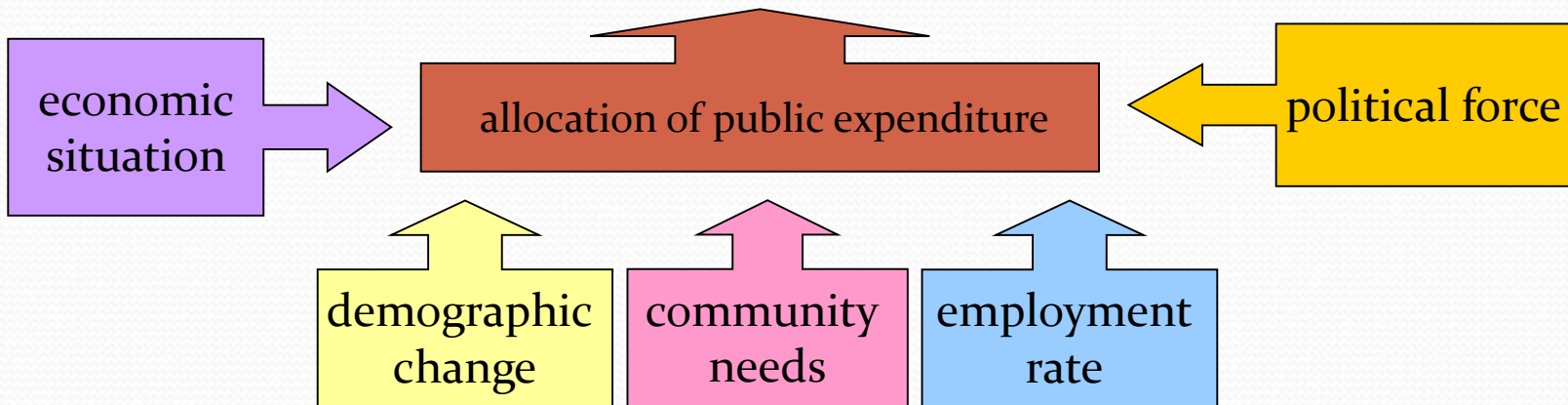
Concept : Resources Allocation

- Public Expenditure



Concept : Resources Allocation

- Allocation of Public Resources



Concept : Resources Allocation

□ Within Health and Social Welfare

▣ healthcare system

- Primary care vs Secondary / Tertiary Care
- Private vs Public

▣ social welfare system

- Different groups: which group should be the most disadvantaged that needs more support and care? The elderly? The family? The youth? The lower income ones? The unemployed ones? The disabled? The women?

▣ organisations /agencies

- balance the costs within organisations : staff cost, facilities and equipment investment, quality of services maintenance, services expansion to meet the increasing needs of the clients etc.