Pilot Public-Private Partnership Programme on Smoking Cessation

Doctor’s Manual

Second Edition
(December 2018)
This Manual provides an overview and operational information on the Pilot Public-Private Partnership Programme on Smoking Cessation (SCPPP) for Enrolled Doctors.

It should be read together with the prevailing documents or information of the SCPPP, including but not limited to “Terms and Conditions of Agreement for the Pilot Public-Private Partnership Programme on Smoking Cessation”, “User manual for Pilot Public-Private Partnership Programme on Smoking Cessation Doctor Module” and “Quick guide for Pilot Public-Private Partnership Programme on Smoking Cessation Doctor Module” accessible via ‘Manual & User Guide’ under ‘User Documents’ in the Electronic Health Record Sharing System (eHRSS), as well as any other information related to the SCPPP issued by the Department of Health or released at the designated webpage of the SCPPP (www.pcdirectory.gov.hk/english/scppp/for_doctor.html).

The content herein may be updated from time to time in light of experience and operational needs. The latest version of this Manual will be uploaded to the designated SCPPP webpage.

Programme Office of the SCPPP
Department of Health
The Government of Hong Kong SAR
December 2018
## Content

<table>
<thead>
<tr>
<th>Annexes</th>
<th>Table</th>
<th>Abbreviations and Interpretations</th>
</tr>
</thead>
<tbody>
<tr>
<td>4</td>
<td>4</td>
<td>5</td>
</tr>
</tbody>
</table>

1. Overview ..................................................................................................................... 6

1.1 Background ........................................................................................................... 6

1.2 Roles and responsibilities of Enrolled Doctors ..................................................... 7

1.3 Major workflow ................................................................................................. 9

1.4 The SCPPP IT System ......................................................................................... 10

2. Enrolment of eligible smokers .................................................................................. 12

2.1 Confirmation of eligibility .................................................................................. 12

2.2 Checking Hong Kong Identity Card ................................................................... 12

2.3 Enrolment in the SCPPP at the eHRSS ............................................................... 13

2.4 Completion of Participant Consent Form ........................................................... 16

2.5 Collection of Participant Consent Form .............................................................. 16

3. Provision of smoking cessation service .................................................................... 17

3.1 First Consultation .............................................................................................. 17

3.2 Second Consultation (within 26 weeks after Quit Day) ..................................... 19

3.3 Third and Fourth Consultations (within 26 weeks after Quit Day) .................... 20

3.4 Follow-up Consultation at 26 weeks after Quit Day (between 26~30 weeks) ... 20

3.5 Follow-up Consultation at 52 weeks after Quit Day (between 52~56 weeks) ...21

3.6 Checking the To-do List ...................................................................................... 22

3.7 Management and notification of adverse drug reactions and incidents .............. 23

4. Accounting procedures ............................................................................................ 24

4.1 Subsidy for consultations .................................................................................... 24

4.2 Submission of subsidy claims ............................................................................. 24

4.3 Payment by the Government ............................................................................... 25

5. Service monitoring and evaluation .......................................................................... 26

5.1 Monitoring of service provision and subsidy claims ........................................... 26

5.2 Opinion surveys .................................................................................................. 26

5.3 Outcome evaluation .............................................................................................. 26

6. Update of information ............................................................................................. 27

6.1 Change of Personal and Practice Information of Enrolled Doctor ....................... 27

6.2 Withdrawal from the SCPPP ............................................................................... 32

7. Frequently asked questions ....................................................................................... 33
Annexes

Annex I  Sample of Participant Consent Form
Annex II  Sample of Adverse Drug Reactions (ADR) Report Form

Table

Table 1  Summary of workflow for change of personal and practice information of Enrolled Doctor in the SCPPP
### Abbreviations and Interpretations

<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Interpretation</th>
</tr>
</thead>
<tbody>
<tr>
<td>ADR</td>
<td>Adverse drug reactions</td>
</tr>
<tr>
<td>DH</td>
<td>Department of Health</td>
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<tr>
<td>eHR</td>
<td>Electronic Health Record</td>
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<td>eHRSS</td>
<td>Electronic Health Record Sharing System</td>
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<tr>
<td>Enrolled Doctor</td>
<td>A Registered Medical Practitioner who has registered in the eHRSS, enrolled in the Primary Care Directory, and attended the refresher course on smoking cessation as specified by the Department of Health, and whose application to enroll in the SCPPP has been accepted by the Government.</td>
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<tr>
<td>HCI</td>
<td>Health Care Institution</td>
</tr>
<tr>
<td>HCP</td>
<td>Health Care Provider</td>
</tr>
<tr>
<td>HKIC</td>
<td>Hong Kong Identity Card</td>
</tr>
<tr>
<td>IT</td>
<td>Information technology</td>
</tr>
<tr>
<td>NRT</td>
<td>Nicotine Replacement Therapy</td>
</tr>
<tr>
<td>OCSSS</td>
<td>Online Checking System of the Eligibility of Non-permanent Hong Kong Identity Card holders for Subsidised Public Healthcare Services</td>
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<td>OS</td>
<td>Operating system</td>
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<tr>
<td>Participant</td>
<td>An eligible person who has been successfully registered to participate in the SCPPP</td>
</tr>
<tr>
<td>PCD</td>
<td>Primary Care Directory</td>
</tr>
<tr>
<td>PO</td>
<td>Programme Office of the SCPPP</td>
</tr>
<tr>
<td>Quit Day</td>
<td>The target day for the SCPPP Participant to totally abstain from smoking, which is discussed and agreed between the Enrolled Doctor and the Participant. It is subject to adjustment during the second consultation (for once only) if the actual quit day is different from the original quit day set in the first consultation.</td>
</tr>
<tr>
<td>SCPPP</td>
<td>Pilot Public-Private Partnership Programme on Smoking Cessation</td>
</tr>
</tbody>
</table>
1. Overview

1.1 Background

1.1.1 To complement existing smoking cessation services, the Department of Health (DH) launched the two-year Pilot Public-Private Partnership Programme on Smoking Cessation (SCPPP) in December 2017 to test a new model of free and opportunistic smoking cessation services provided by private primary care doctors.

1.1.2 The pilot programme aims to improve access to smoking cessation service for smokers who may be hard to reach by other means.

1.1.3 Enrolled Doctors provide opportunistic assessment of the smoking status of their patients, identify motivational factors and barriers to quit smoking, offer smoking cessation counselling and pharmacotherapy (if indicated) for eligible smokers.

1.1.4 Hong Kong residents aged 18 or above who have a valid Hong Kong Identity Card (HKIC) or Certificate of Exemption; and have registered in the Electronic Health Record Sharing System (eHRSS); and are determined and ready to quit smoking, are eligible to participate in the SCPPP (as the Participants). For details, please refer to Section 2.

1.1.5 Enrolled Doctors must fulfill the following requirements:

- being a registered medical practitioner within the meaning of section 2(1) of the Medical Registration Ordinance (Cap. 161) (“Ordinance”);
- hold a valid practising certificate issued under the Ordinance;
- work in the private sector (including universities and non-governmental organisations);
- have registered in the eHRSS (www.ehealth.gov.hk/en/home/index.html);
- have enrolled in the Primary Care Directory (www.pcdirectory.gov.hk); and
- have attended and passed the online refresher course on smoking cessation - “Connecting with Patients for Tobacco Free Living” provided by the Mayo Clinic of the United States.

For details of doctor enrolment, please refer to the “Enrolment Guide for Doctors” and the “Covering Notes for Doctor’s Application”.

6
1.2 Roles and responsibilities of Enrolled Doctors

1.2.1 Enrolled Doctors must follow the requirements as stipulated in the Terms and Conditions of Agreement for the SCPPP and perform the following (but not limited to) roles and responsibilities:

(a) Enrol eligible persons as Participants in the SCPPP and perform all necessary enrolment and registration procedures.
(b) Provide appropriate counseling to Participants to quit smoking and to implement the smoking cessation plan.
(c) Perform clinical assessment for clinical indication and fitness for pharmacotherapy for smoking cessation; and prescribe the appropriate pharmacotherapy for smoking cessation.
(d) Arrange follow-up consultations with Participants for providing assistance and support to Participants for quitting smoking or preventing relapse; as well as for monitoring medication use including adverse effects.
(e) Remind Participants to attend follow-up consultations especially for those who had defaulted the required follow-up.
(f) Exercise clinical judgment and be held fully accountable for the clinical care and management provided to the Participants in relation to the SCPPP.
(g) Keep sufficient stock of pharmacotherapy for smoking cessation at the Health Care Institution (HCI).
(h) Document the consultations and progress in the SCPPP IT System.
(i) Submit Subsidy claims for consultations in relation to the SCPPP according to the required procedures.
(j) Check and act on the [To-do List] as generated by the SCPPP IT System.
(k) Notify DH staff of adverse drug reactions and incidents in relation to the SCPPP according to the required procedures.
(l) Provide information for service monitoring and evaluation as requested by DH staff.
(m) Comply with the instructions by DH staff for collection of signed Participant Consent Forms or other required documents in relation to the SCPPP.
(n) Submit to the Government such information or documents as required by the DH staff from time to time in relation to the SCPPP.

1.2.2 Enrolled Doctors must follow the Code of Professional Conduct issued by the Medical Council of Hong Kong as the standard for locally registered medical practitioners to provide quality health care (www.mchk.org.hk/english/code/index.html).
1.2.3 Enrolled Doctors must ensure that the services provided and clinic practice meet the prevailing clinical, personal data and privacy protection, Information Technology (IT) security and other standards stipulated in the prevailing or updated guidelines or Ordinances, such as (but not limiting to):

(a) Module on Smoking Cessation in Primary Care Setting under the Hong Kong Reference Framework for Diabetes Care in Adults in Primary Care Settings & Hong Kong Reference Framework for Hypertension Care in Adults in Primary Care Settings
   (www.pco.gov.hk/english/resource/files/Module_on_Smoking_Cessation.pdf)

(b) Related guidelines, Ordinances or information released in the website of the Office for Regulation of Private Healthcare Facilities

(c) Pharmacy and Poisons Ordinance (Cap. 138) and other regulations in the control of medicines (www.drugoffice.gov.hk)

(d) Personal Data (Privacy) Ordinance
   (www.pcpd.org.hk/english/data_privacy_law/ordinance_at_a_Glance/ordinance.html#1);

(e) Baseline IT Security Policy (S17) and IT Security Guidelines (G3)

(f) Public-Private Partnership Programmes for Healthcare Services - Corruption Prevention Guide for Service Providers
   (https://cpas.icac.hk/UploadImages/InfoFile/cate_43/2017/fe651e90-a6a3-4294-828f-44f863e2c80e.pdf)
1.3 Major workflow

**Enrolment of eligible smokers with eHRSS account**
- Confirmation of eligibility criteria
- Checking Hong Kong Identity Card
- Input HKIC information in the SCPPP IT System
- Obtain indefinite sharing consent (if not yet built)
- Completion of Participant Consent Form

**First Consultation**
- Set the “Quit Day” \( \text{Note 1} \)
- Arrange follow-up consultation \( \text{Note 2} \)

**Second Consultation (within 26 weeks after Quit Day)**
- Preferably within 12 weeks
- Confirm or amend the “Quit Day” (for once only)
- Document as the actual “Quit Day” in the SCPPP IT System

**Third Consultation (within 26 weeks after Quit Day)**

**Fourth Consultation (within 26 weeks after Quit Day)**

**Follow-up Consultation at 26 weeks after Quit Day (between 26~30 weeks)**
- Quit rate at 26 weeks documented in the SCPPP IT System will serve as an evaluation indicator
- Only face-to-face consultation is subsidised

**Follow-up Consultation at 52 weeks after Quit Day**
- This is optional and not subsidised

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**Note 1:** “Quit Day” refers to the target day for the SCPPP Participant to totally abstain from smoking, which is discussed and agreed between the Enrolled Doctor and the Participant. It is subject to adjustment during the second consultation (for once only) if the actual quit day is different from the original quit day set in the first consultation.

**Note 2:** Reminders will be issued to the Enrolled Doctor in To-do List if the following follow-up consultations are not recorded in the SCPPP IT System as scheduled:
- Follow-up for first-time Champix\(^\circledast\) (varenicline) prescription within one week
- Second consultation preferably within 12 weeks
- Follow-up consultation at 26 weeks after Quit Day
- Follow-up consultation at 52 weeks after Quit Day
1.4 The SCPPP IT System

1.4.1 The SCPPP IT System which rides on the eHRSS is designated for the operation of the SCPPP.

1.4.2 Key functions of the SCPPP IT System:
   (a) To enroll Participants
   (b) To search and retrieve records of enrolled Participants
   (c) To maintain consultation records
   (d) To generate “To-Do List” as a reminder for Enrolled Doctors to facilitate timely follow-up actions
   (e) To generate list of Participants under the care of Enrolled Doctors of the same Health Care Provider
   (f) To submit and process subsidy claims
   (g) To input and submit update of profile information of Enrolled Doctors (upon vetting by DH)
   (h) To provide data for quality assurance, service monitoring and evaluation

1.4.3 System requirements:
For System Requirements of the eHRSS, please refer to the eHRSS website at www.ehealth.gov.hk/en/ehr_related_information/faq/system_requirements.html.

1.4.4 Enrolled Doctors must implement appropriate IT security measures in order to use the SCPPP IT System in a secure and safe manner, such as:
   (a) Minimum password strength with at least 9 mixed-case alphanumeric characters and to avoid using password of common structures;
   (b) Changing password at least every 90 days and disabling the "remember your password" setting;
   (c) Prohibiting the use of the same set of password in alternative accounts;
   (d) Regular verification of device operating system (OS) and browsers OS for updates to the latest edition;
   (e) Ensuring timely update of device OS and browsers OS upon the availability of new patch and testing their performances;
   (f) Regular (e.g. weekly) scanning devices using Anti-virus programme to ensure no computer virus, network worms, Trojan horses, logic bombs, spyware, adware or backdoor programs have been found;
   (g) Enabling real time anti-virus protection and definition updates.
1.4.5 Access to the SCPPP IT System:
Enrolled Doctor can access the SCPPP IT system by login to the eHRSS (www.ehealth.gov.hk), and then through the following ways:
(a) Click [SCPPP Programme] under [Quick Links – Clinical], or
(b) Choose [Clinical] on the eHRSS menu bar, then click [SCPPP Programme]

1.4.6 The “User manual for Pilot Public-Private Partnership Programme on Smoking Cessation Doctor Module” and “Quick guide for Pilot Public-Private Partnership Programme on Smoking Cessation Doctor Module” can be viewed and downloaded at ‘Manual & User Guide’ under ‘User Documents’ in the eHRSS.
2. Enrolment of eligible smokers

2.1 Confirmation of eligibility

2.1.1 The Enrolled Doctor must confirm eligibility of the smoker to enroll as a Participant in the SCPPP, according to the following criteria:

(a) being a Hong Kong resident who is 18 years old or above; and

(b) holds a valid Hong Kong Identity Card (HKIC) within the meaning of the Registration of Persons Ordinance (Cap.177) [except those who obtained their HKIC by virtue of a previous permission to land or remain in Hong Kong granted to them and such permission has expired or ceased to be valid]; or a valid Certificate of Exemption within the meaning of the Immigration Ordinance (Cap.115); and

(c) has registered in the eHRSS with an active account; and

(d) agrees to give indefinite sharing consent for the eHRSS to the Associated Health Care Provider (HCP); and

(e) is a smoker, who is determined and ready to quit smoking; and

(f) has never joined the SCPPP before.

2.2 Checking Hong Kong Identity Card

2.2.1 The Enrolled Doctor has to check the original HKIC of the smoker and ascertain whether the person is the bearer of the identity document.

2.2.2 The Enrolled Doctor has to check the eligibility of non-permanent HKIC holders to ensure that validity period of stay has not expired on the date of receiving services under the SCPPP, according to the following procedures:

(a) check the HKIC symbol i.e. the first alphabet denoting the residential status (as shown below);
(b) If the smoker's HKIC symbol has “C” or “U”, the Enrolled Doctor has to call the Programme Office of the SCPPP (PO) (telephone: 3576 3658) during office hours (i.e. Monday to Friday from 9 am to 1pm and 2pm to 5:45 pm except public holidays) for verification of eligibility to join the SCPPP through the Online Checking System of the Eligibility of Non-permanent Hong Kong Identity Card holders for Subsidised Public Healthcare Services (OCSSS) in the DH.

(c) For those smokers with HKIC bearing “C” or “U” symbol which are confirmed valid through the OCSSS checking, they are eligible to proceed further for enrolment in the SCPPP.

2.2.3 No payment will be made by the Government if the Enrolled Doctor did not confirm the eligibility status of smokers who had “C” or “U” symbol on the HKIC before enrolment.

2.3 Enrolment in the SCPPP at the eHRSS

2.3.1 If the smoker has not yet registered in the eHRSS, he/she has to complete the eHRSS registration before enrolment in the SCPPP. For details, please refer to the website of eHRSS at www.ehealth.gov.hk/en/home/index.html.

2.3.2 Input HKIC information of Participant with active eHRSS account:
(a) Click [Participant Enrolment/Search Enrolled Participant];
(b) Insert the smoker’s HKIC into the card reader (this is the recommended and default means of input; if the smoker has already registered in the eRHSS with an active account, the page for SCPPP enrolment will be shown directly);
(c) Manual input by selecting [Enrol Participant by Personal Identity] is allowed only if the chip of the HKIC is found faulty, use of card reader is not feasible, the smoker is a holder of Certificate of Exemption, or for other justifiable reasons;
(d) Then click “Continue”.

13
2.3.3 Obtain indefinite sharing consent for the eHRSS (if not yet built) and input the means of consent:

(a) Inserting HKIC into the card reader; or
(b) Participant providing his/her access key; or
(c) Signing the Sharing Consent Form
2.3.4 Input of the HKIC symbol and confirm verification of the eligibility:

2.3.5 Input of consent for being approached for research related to the SCPPP.

2.3.6 Once the above information has been inputted, the button “Print Consent Form” will be enabled.
2.4 Completion of Participant Consent Form

2.4.1 The Enrolled Doctor has to explain to the smoker and ensure his/her understanding of the followings:
   (a) scope of services subsidised by the SCPPP;
   (b) the content of the Participant Consent Form including but not limited to the Undertaking and Declarations, the Statement of Purpose;
   (c) DH staff may contact the Participant for service monitoring and evaluation.

2.4.2 Samples of the Participant Consent Form (Annex 1) are available at the SCPPP webpage (www.pcdirectory.gov.hk/english/scppp/for_public.html) for reference and facilitating the explanation of the content during enrolment.

2.4.3 The Enrolled Doctor then prints out TWO identical copies of the Participant Consent Form for checking and signing by the smoker.

2.4.4 SCPPP Participant No. will be automatically generated by the SCPPP IT System and it serves as the reference number of the enrolment.

2.4.5 Both copies of the Participant Consent Form must be signed.

2.4.6 If the smoker is illiterate but mentally fit to make consent, he/she can put a thumbprint on the space as signature. The process has to be witnessed and certified by a clinic staff or an accompanying relative.

2.4.7 One copy of the signed Participant Consent Form should be kept by the Participant; the other signed copy should be kept in safe custody by the Enrolled Doctor in order to be collected by DH staff on regular basis for monitoring purpose.

2.4.8 Once the smoker is enrolled into the SCPPP and has signed the Participant Consent Form, the Enrolled Doctor has to complete the enrolment procedure by clicking [Confirm Enrolment]. Thereafter, the enrolled smoker is referred to as “Participant” and the Enrolled Doctor can proceed to create the First Consultation Record by clicking [Go to Consultation].

2.5 Collection of Participant Consent Form

2.5.1 The Enrolled Doctor should instruct clinic staff to keep ALL Participant Consent Forms in safe custody for protection of personal data.

2.5.2 DH staff regularly visit the clinic(s) of the Enrolled Doctor for collection of the hard copies of ALL signed Participant Consent Forms with prior arrangement and informing the list of Participants involved.

2.5.3 The Enrolled Doctor or clinic staff has to sign acknowledgement of collection of the forms during the visit.
3. Provision of smoking cessation service

3.1 First Consultation

3.1.1 After the completion of enrolment, the Enrolled Doctor can create the First Consultation record and provide smoking cessation counselling:

(a) Confirm that the informed consent have been obtained and signed;

(b) Assess smoking status, past quit attempts, motivational factors and perceived barrier(s) to quit smoking;

(c) Set an agreed realistic “Quit Day”

- “Quit Day” refers to the target day for the Participant to totally abstain from smoking, which is discussed and agreed between the Enrolled Doctor and the Participant. It is subject to adjustment during the Second Consultation (for once only) if the actual quit day is different from the original quit day set in the first consultation.

- The “Quit Day” can be on or after the First Consultation date.

(d) Prescribe pharmacotherapy if clinically indicated

- Nicotine Replacement Therapy (NRT) gum, patch, lozenge and Champix® (varenicline) are subsidized under the SCPPP, for up to 12 weeks in total.

- Only one type of medication is allowed for each consultation.

- The dosage regime is predefined and should be selected according to individual clinical condition.

(e) Discuss with the Participant on an agreed follow-up date for the Second Consultation within 26 weeks after the Quit Day

- Follow-up for first-time Champix® (varenicline) prescription must be within the first week of initiation of medication to assess for any serious side effects, as overseas reports suggest its association with psychiatric symptoms including depression and suicidal ideation. Maximum duration of first-time Champix prescription is one week.

- Second consultation within 12 weeks after the Quit Day to provide timely counselling and support is recommended.

- Reminder will be issued to the Enrolled Doctor in “To-Do List” if there is no follow-up consultation record saved in the SCPPP IT System after one week from the first Champix prescription or 12 weeks after the First Consultation.
3.1.2 Steps for subsidy claim after data input in the SCPPP IT System (all consultation records must be entered within three calendar days of consultations):

(a) [Save Draft] to save the input (further editing is allowed before submission of subsidy claim);

(b) [Save and Submit] to save the record and submit subsidy claim;

(c) Check the box “I declare that the submitted information in the payment claim is true and correct”;

(d) [Proceed to Submit] to submit the finalised consultation record and related subsidy claim;

(e) [Print Summary] to print out hard copy of the consultation record for documentation purpose.
3.2 Second Consultation (within 26 weeks after Quit Day)

3.2.1 The Second Consultation aims to assess the progress and to provide timely counselling and support to the Participant for smoking cessation and preventing relapse:

(a) Assess the smoking status in the past seven days.
(b) Confirm the “Quit Day”
   - Amend it if the Participant actually have quitted smoking on a date later than the date previously agreed during the First Consultation.
   - Record the actual Quit Day in the Second Consultation record. It must be either the same or before the Second Consultation date for any subsidy claim(s) to be made. It will not be modifiable after submission.
(c) Assess the use of pharmacotherapy including drug compliance and reasons for non-compliance, adverse effects etc.
(d) Change type of pharmacotherapy if indicated (only allowed during consultations within 26 weeks after the Quit Day).
(e) Discuss with the Participant on an agreed follow-up date.

3.2.2 Steps for subsidy claim after data input in the SCPPP IT System are the same as the First Consultation (Section 3.1.2).
3.3 Third and Fourth Consultations (within 26 weeks after Quit Day)

3.3.1 The Third and Fourth Consultations may be conducted within 26 weeks after the Quit Day to monitor the progress and provide smoking cessation counselling to the Participants.

3.3.2 The workflow and record are similar to the Second Consultation, except that the actual Quit Day is prefilled as the one set during the Second Consultation and cannot be edited.

3.3.3 Next Follow-up Consultation should be scheduled at 26 weeks after the Quit Day, not later than 30 weeks.

3.4 Follow-up Consultation at 26 weeks after Quit Day (between 26~30 weeks)

3.4.1 Follow-up Consultation at 26 weeks after the Quit Day (allowed between 26~30 weeks) aims to document the 26-week quit rate, as well as to provide additional counselling and support.

3.4.2 No NRT or Champix® prescription is allowed from 26 weeks after the Quit Day onwards, to minimize the risk of abuse.

3.4.3 Face-to-face consultation between 26~30 weeks is subsidized after data input and submission of subsidy claim in the SCPPP IT System.

3.4.4 If face-to-face consultation cannot be conducted, follow-up by phone or other means is recommended and should be inputted in the SCPPP IT System, though not subsidised.
3.4.5 If there is no record of follow-up by the Enrolled Doctor after 30 weeks after the Quit Day, the PO will follow up the Participant and input the information in the SCPPP IT System. The consultation record completed by PO will be marked with “SCPPP Programme Office” and can only be viewed (not edited) by the Enrolled Doctor.

3.5 Follow-up Consultation at 52 weeks after Quit Day (between 52–56 weeks)

3.5.1 Follow-up Consultation at 52 weeks after the Quit Day (allowed between 52–56 weeks) aims to document the 52-week quit rate.

3.5.2 Although this follow up at 52 weeks is not subsidized, the Enrolled Doctor is still strongly recommended to follow up the Participant by phone call or during consultation, and input the smoking status/ quitting progress in the 52-week consultation record in the SCPPP IT System.

3.5.3 If there is no record of follow-up by the Enrolled Doctor after 56 weeks after the Quit Day, PO will follow up the Participant and input the information in the SCPPP IT System. The consultation record completed by PO will be marked with “SCPPP Programme Office” and can only be viewed (not edited) by the Enrolled Doctor.
3.6 Checking the To-do List

3.6.1 The To-do List serves to remind the Enrolled Doctor to follow up the Participants or other outstanding tasks:

(a) Verify eligibility with DH for Participants whose HKIC card symbol is “U” or “C”
   – the records will appear in the To-do List once the First Consultation is submitted
   – payment for subsidy claim will only be proceeded after the verification and manual removal of the record from the To-do List
(b) Follow up within one week of first time Champix® prescription to assess for compliance and possible adverse effects;
(c) Follow up Participants within 12 weeks from the First Consultation;
(d) Follow up Participants at 26 weeks after the actual Quit Day;
(e) Follow up Participants at 52 weeks after the actual Quit Day, either by phone or face-to-face consultation;
(f) Submit saved consultation record.

3.6.2 For (b) to (e), the records will appear in the To-do List if the follow up is not recorded in the SCPPP IT System by the scheduled date.

3.6.3 Actions for (b) to (e):
   – Arrange and record the follow up in the SCPPP IT System (submit by clicking the “Consultation Note” icon), or
   – manually remove the record from the To-do List by ticking the box [Done] and [Save] after completing the task.
3.7 Management and notification of adverse drug reactions and incidents

3.7.1 The Enrolled Doctor has to monitor the use of pharmacotherapy especially for any adverse drug reactions (ADR), in particular to psychiatric symptoms associated with Champix® (varenicline).

3.7.2 The Enrolled Doctor has to exercise clinical judgment and manage any ADR accordingly. Cessation of medication or switch to another form of pharmacotherapy should be determined according to individual clinical indications.

3.7.3 ADR should be documented in the consultation record.

3.7.4 ADR can be reported to the Drug Office of DH online or by paper form for surveillance purpose (Annex II).


3.7.5 A duplicate copy of the completed DH ADR Report Form should be sent to PO by fax (3583 4549) or email (pco@dh.gov.hk) for notification, with the SCPPP Participant No. written in Section (A) Patient Information – Patient initials or ref. no of the ADR Report Form.

3.7.6 Apart from ADR, the Enrolled Doctor has to notify DH of any significant incidents affecting the safety and privacy of SCPPP Participants, and to undertake investigation and remedial measures as appropriate.

3.7.7 Any enquiries on the SCPPP by the media or other sources must be reported to DH.
4. Accounting procedures

4.1 Subsidy for consultations

4.1.1 A maximum of five consultations and 12-week course of pharmacotherapy are subsidised under the SCPPP (including the First to the Fourth Consultations within 26 weeks and the Fifth Consultation at 26 weeks after the Quit Day to assess the quit rate).

4.1.2 Subsidy for Consultations:
   (a) First to Fourth Consultation: HK$257 per session
   (b) Face-to-Face Fifth Consultation to assess 26 week quit rate: HK$214

4.1.3 Subsidy for Pharmacotherapy (up to a maximum of 12 weeks):
   (a) NRT lozenges: HK$200/week
   (b) NRT gum: HK$230/week
   (c) NRT patch: HK$230/week
   (d) Champix®: HK$270/week

4.1.4 Follow up consultations not conducted in person (face-to-face) or additional encounters with the Participants by the Enrolled Doctor are not subsidised by the Government.

4.2 Submission of subsidy claims

4.2.1 All subsidy claims must be submitted through the SCPPP IT System of the eligible duly completed and recorded consultations, as follows:
   (a) [Save and Submit] to save the record and submit subsidy claim;
   (b) Check the box “I declare that the submitted information in the payment claim is true and correct”;
   (c) [Proceed to Submit] to submit the finalised consultation record and related subsidy claim.

4.2.2 Enrolled Doctors can view the payment statements processed and the payment status via [Payment Claim] function in the SCPPP IT system.
4.3 Payment by the Government

4.3.1 The Government will process and settle submitted claims on a monthly basis.

4.3.2 Claims for subsidy by the Enrolled Doctor for the services provided in a particular month will be settled within 30 calendar days after the last day of that month (i.e. the payment cut-off day).

4.3.3 After the Government completes the payment process, the Enrolled Doctor will be informed through the SCPPP IT System by an inbox message and payment statement.

4.3.4 The Government has no obligation to pay the subsidy to the Enrolled Doctor if the consultations and services provided are not eligible for subsidy claims. For details, please refer to the “Terms and Conditions of Agreement for the SCPPP”.
5. Service monitoring and evaluation

5.1 Monitoring of service provision and subsidy claims

5.1.1 In order to safeguard the use of public money, DH regularly monitors the service provision to ascertain whether the claimed transactions did take place and to ensure that they were properly supported and paid accurately.

5.1.2 The Enrolled Doctor must ensure fulfillment of the requirements for the provision of services under the SCPPP before submitting the subsidy claims.

5.1.3 The Enrolled Doctor has to inform the Participants that DH staff will conduct telephone follow up with them for service monitoring, opinion survey and other support and advice as appropriate.

5.2 Opinion surveys

5.2.1 Opinion surveys will be carried out to gauge feedback from the Participants and Enrolled Doctors.

5.2.2 Enrolled Doctors will be contacted by email and/or phone for opinion surveys.

5.3 Outcome evaluation

5.3.1 Quit rate at 26 weeks and 52 weeks after Quit Day will be assessed as part of the evaluation of the SCPPP.

5.3.2 The Enrolled Doctor should record the results in the consultation record in the SCPPP IT System to facilitate the capture of the indicators.
6. **Update of information**

6.1 **Change of Personal and Practice Information of Enrolled Doctor**

6.1.1 Depending on the type of personal and practice information to be changed or updated, the Enrolled Doctor should submit request for change of information in one of the following ways:

(a) to eHR Registration Office by phone or email,
(b) via login to the eHRSS account,
(c) via SCPPP IT System or
(d) written request to PO by email.

Table 1 summarises the means and steps to change each of the personal and practice information.

6.1.2 For change of bank account information which is related to payment of subsidy to the bank account of the Enrolled Doctor or his Associated HCP (as the case may be), the Enrolled Doctor must submit the change request via the SCPPP IT System at least 2 weeks before the last day of each month (the payment cutoff date) for processing and approval by PO. If the change request is submitted less than 2 weeks before the last day of each month, the payment of subsidy might not be proceeded in the subsequent month.
### Table 1. Summary of workflow for change of personal and practice information of Enrolled Doctor in the SCPPP

<table>
<thead>
<tr>
<th>Information to be changed</th>
<th>Means of request submission</th>
<th>Steps</th>
<th>Supporting document(s) to be submitted to PO</th>
</tr>
</thead>
<tbody>
<tr>
<td>(i) Doctor’s contact number</td>
<td>to eHR Registration Office by phone or email</td>
<td>- Phone: 3467 6230&lt;br&gt;- Email to <a href="mailto:ehr@ehealth.gov.hk">ehr@ehealth.gov.hk</a></td>
<td>N/A</td>
</tr>
<tr>
<td>HCP’s correspondence address</td>
<td>via login to the eHRSS account</td>
<td>- Use the “Update Own Account” function in eHRSS</td>
<td>N/A</td>
</tr>
<tr>
<td>HCI’s telephone number</td>
<td>via SCPPP IT System</td>
<td>- Copy of address proof (e.g. public utility bill)</td>
<td>N/A</td>
</tr>
<tr>
<td>(ii) Doctor’s email address</td>
<td>via login to the eHRSS account</td>
<td>- Use the “Update Own Account” function in eHRSS</td>
<td>N/A</td>
</tr>
<tr>
<td>(iii) Doctor’s correspondence address</td>
<td>via SCPPP IT System</td>
<td>- Duly signed and completed Appendix A² and Appendix B³ of transaction documents for enrolment&lt;br&gt;- Certified true copy of bank correspondence&lt;br&gt;- Copy of address proof of the HCP</td>
<td>N/A</td>
</tr>
<tr>
<td>Doctor’s fax number</td>
<td>via SCPPP IT System</td>
<td>- Duly signed and completed Appendix A² and Appendix B³ of transaction documents for enrolment&lt;br&gt;- Certified true copy of bank correspondence&lt;br&gt;- Copy of address proof of the HCP</td>
<td>N/A</td>
</tr>
<tr>
<td>Relationship between parties</td>
<td></td>
<td>- Duly signed and completed Appendix A² and Appendix B³ of transaction documents for enrolment&lt;br&gt;- Certified true copy of bank correspondence&lt;br&gt;- Copy of address proof of the HCP</td>
<td>N/A</td>
</tr>
<tr>
<td>Personal particulars of HCP in-charge</td>
<td></td>
<td>- Duly signed and completed Appendix A² and Appendix B³ of transaction documents for enrolment&lt;br&gt;- Certified true copy of bank correspondence&lt;br&gt;- Copy of address proof of the HCP</td>
<td>N/A</td>
</tr>
<tr>
<td>(iv) Removal of HCP/HCI</td>
<td>written request to PO by email</td>
<td>- Email: <a href="mailto:pco@dh.gov.hk">pco@dh.gov.hk</a></td>
<td>N/A</td>
</tr>
</tbody>
</table>

---

1. Enrolled Doctor should ensure that the HCP/HCI has registered with the eHRSS and the HCP has been affiliated with the doctor according to the guidelines from eHR Registration Office.
2. Appendix A of the transaction documents for enrolment is the Application Form for doctors ([www.pcdirectory.gov.hk/english/files/SCPPP_Appendix_A_Application_Form__SAMPLE.pdf](www.pcdirectory.gov.hk/english/files/SCPPP_Appendix_A_Application_Form__SAMPLE.pdf))
3. Appendix B of the transaction documents for enrolment is the Authorisation Form for Payment of Subsidy to a Specified Bank Account ([www.pcdirectory.gov.hk/english/files/SCPPP_Appendix_B_Authorisation_Form_for_Payment__SAMPLE.pdf](www.pcdirectory.gov.hk/english/files/SCPPP_Appendix_B_Authorisation_Form_for_Payment__SAMPLE.pdf))
6.1.3 On-screen workflow for submission in SCPPP IT System:

Enrolled Doctors can view their personal particulars, HCP & HCI information and bank information via [My Profile] function in the SCPPP IT system.

Click [My Profile] in the menu bar.

Click [Personal Particulars], [HCP & HCI] or [Bank Information] to view the corresponding information under each tab page.

Click [Edit] to update information.
Select the appropriate tab page

Click [Next] to edit [HCP & HCI] or [Bank Information] tab page.
Click [Save Draft] to save the changes tentatively.
Click [Cancel] for not saving any edited information.

Click [Submit] to submit the changes to SCPPP Programme Office.
After submitting amendment request, you may view the amendment status or cancel submitted amendment under [My Profile].

After clicking [View Detail], the amendment made will be highlighted in blue.

**Amendment status is updated as here.**

Click [Cancel Submission] for cancelling previous submitted amendment. Click [View Detail] for the details of submitted amendment.

**Click [Print Appendix A and Appendix B] for printing an updated enrolment form (apply to amendment status: Pending for vetting).**

Click [Edit] to continue the amendment (apply amendment status: Drafted). Click [Back] to leave the page [View Detail].
6.2 **Withdrawal from the SCPPP**

6.2.1 Under the two-year SCPPP, Enrolled Doctors have to follow up the Participants for up to 1 year after actual Quit Day.

6.2.2 Under unforeseen and exceptional circumstance (such as cease to practice in Hong Kong) where an Enrolled Doctor needs to withdraw from the SCPPP, 14 days’ prior written notice to the Government is required, either by post or email.

6.2.3 Before withdrawal from the SCPPP, the Enrolled Doctor has to discuss with the Participants under his/her care on the follow up plan and inform PO during the submission of withdrawal request.

   (a) Follow up by another Enrolled Doctor is preferable.
       – The Participants can visit any Enrolled Doctor after the effective date of withdrawal of the original Enrolled Doctor.

   (b) If the Participants are not taking any pharmacotherapy and strongly decline follow up by another Enrolled Doctor, they should be informed that DH staff will follow up them at 26 week and 52 week by phone for assessment of smoking status.
7. Frequently asked questions

7.1 Is there any restriction on type or brand of pharmacotherapy for the Participants?
The pharmacotherapy to be subsidised under the SCPPP include Champix and NRT gum/patch/lozenges. They must be registered pharmaceutical products with the Drug Office of DH. The list of registered pharmaceuticals for smoking cessation is available in the database at the website of Drug Office. (https://www.drugoffice.gov.hk/eps/do/en/consumer/search_drug_database.html)

7.2 Can a family member or carer enroll for the eligible smoker?
No. The Enrolled Doctor has to check the original HKIC of the eligible smoker to ascertain the identity. Under normal circumstances, the eligible smoker has to insert his/her HKIC into the card reader by himself/herself for the enrolment.

7.3 Is it compulsory to deliver all the Second, Third and Fourth Consultations?
Follow up consultations are important for assessing the progress and providing timely counselling and support to the Participants for smoking cessation and preventing relapse. Under the SCPPP, the Second, Third and Fourth Consultations within 26 weeks after the Quit Day are fully subsidised. Enrolled Doctors should base on individual clinical needs to determine the appropriate follow up plan.
- First-time users of Champix must be followed up within one week to assess for adverse side effects.
- The Second Consultation within 12 weeks after the Quit Day is recommended, during which the “Quit Day” is confirmed or adjusted if the actual Quit Day is different from the original one set in the First Consultation.
- The Third and Fourth Consultations can be arranged to follow up the progress where indicated.

7.4 Can the Enrolled Doctor charge co-payment from the Participant?
Under the SCPPP, the Government fully subsidise the smoking cessation service including enrolment, a maximum of five consultations and 12-week course of pharmacotherapy (including the First to the Fourth Consultations within 26 weeks and the Fifth Consultation at 26 weeks after the Quit Day to assess the quit rate). The Enrolled Doctor must not charge any co-payment fees for the enrolment and smoking cessation services under the SCPPP on top of the Government subsidy.

7.5 Whom may the Enrolled Doctor contact for questions concerning the SCPPP?
Enrolled Doctor may contact the PO by the following means:
Telephone No.: 3576 3658
Fax No.: 3583 4549
Email Address: pco@dh.gov.hk
Address: Primary Care Office, Department of Health
Room 1008, 10/F, Guardian House
32 Oi Kwan Road, Wan Chai, Hong Kong
Participant Consent Form (Sample)

戒煙服務計劃參加者編號：00000001
(date filled by the system)

衛生署戒煙服務公私營協作先導計劃
參加者同意書

注意：請用黑色或藍色筆填寫此同意書，在簽署此同意書前，請先閱讀“承諾及聲明”部分。

參加者個人資料

| 中文姓名： 陳小文
| 英文姓名： CHAN SIU MAN |
| 香港身份證號碼： B123456(7) |
| 電子健康紀錄互通系統編號： 9684-0274-7626 |
| 出生日期： 1946年01月01日 | 性別： 男 |

本人確認已登記使用電子健康紀錄互通系統，本人現同意參加戒煙服務公私營協作先導計劃（“先導計劃”）。

本人同意研究機構就戒煙相關的研究與本人聯絡，為此，本人同意並授權政府向相關研究機構披露本人的姓名和聯絡電話號碼。

本人不同意研究機構就戒煙相關的研究與本人聯絡。

本人已閱讀及完全理解此同意書（包括“承諾及聲明”部分），本人同意當中所載參加者的義務和責任及收集個人資料目的。

參加者簽署（如不懂讀寫，請印上指模）：

登記日期： 2018年08月01日

如參加者不懂讀寫，不須填寫此欄

見證人姓名：
見證人香港身份證號碼：
見證人簽署：

參加先導計劃的醫生：

陳小文
9876543211

(2017年10月版本)

Samples of the Participant Consent Form are available at the SCPPP webpage (www.pcdirectory.gov.hk/english/scppp/for_public.html)
Annex II

Adverse Drug Reactions (ADR) Report Form (Sample)