

**Chief Executive's Speech at the Hospital Authority  
Convention 2013 – 15.5.2013  
Striving for the cure for healthcare challenges**

Minister Sun, Dr Ko, Mr Wu, distinguished guests, colleagues, ladies and gentlemen – good morning.

I am delighted to welcome you to the 2013 Hospital Authority Convention and I am certain that the information, inspiration and new connections you will gain over the next two days will prove highly valuable. I also trust the Conference will provide you with further insight into HA's operations, including key accomplishments and our plans for development as we move ahead.

I open my speech today with a quote "*The physician should not treat the disease but the patient who is suffering from it*" from a philosopher to emphasise what should be obvious – that caring for people throughout their journey of life is at the heart of everything we do. But in today's increasingly complex healthcare sector, this can sometimes be easy to forget.

I want to speak to you this morning about how HA is working to address the current and future challenges we face in upholding our core value of people-centred care.

Over the past 22 years, HA has grown and developed to become a leading public healthcare system providing comprehensive medical services. Through an extensive network of 41 hospitals and institutions, 47

specialist outpatient clinics and 74 general outpatient clinics, our dedicated team of more than 63,000 staff fulfil around 90% of Hong Kong's secondary and tertiary medical needs using just 2.4% of our city's GDP – a reality that is admired by governments and healthcare administrators around the globe.

However, as is often said – size isn't everything, it's performance that counts! Here too, we can be proud of our contribution in supporting Hong Kong's excellent health-related indicators, which are among the best in the world.

But in our fast-changing social landscape, the challenges of providing affordable, high-quality medical services become greater every year.

24,000 - Based on 2012 statistics, that's the average number of specialist outpatient attendances HA will handle in the next 24 hours. That's 8.9 million attendances a year.

1.5 million patient discharge episodes, 2.2 million A&E attendances, 5.7 million primary care attendances and 1.9 million community outreach visits.

And it is likely that these numbers will continue to grow.

But it's not just the rising volume of patients, we are also facing increasing complexity of medical needs.

Realities such as our aging population, the growing incidence of chronic diseases and the recurrent threat of emerging infections such as novel coronavirus and H7N9 are placing greater demands on our resources in an environment of escalating costs, rapid scientific and technological change, and rising expectations of patients and their families as regards service delivery.

By 2021, Hong Kong's population is expected to reach 7.7 million – an increase of 510,000 compared with 2012. The number of over-65s is forecast to rise by 470,000 during the same period.

With the bed requirement for elderly patients currently nine times that of non-elderly ones, HA will require an extra 2,600 beds to meet the projected service demand a little under a decade from now. But beds are just infrastructure - they do not treat people. The opening of an additional 2,600 beds will require 800 more doctors, 2,700 new nurses and 1,000 extra allied health professionals. These figures have not included the current shortfall or other activities caused by and related to the increased bed number.

The service need will continue to escalate and we project the demand for additional 6,600 new beds ten years further on in 2031. We need to address all these challenges, especially manpower requirement so as to bridge across the gap to 2031.

It is appropriate at this point to offer my sincere gratitude to the Hong Kong Government for its

continuing support in again increasing its recurrent budget allocation to HA. This year's recurrent provision is \$44.4 billion – an increase of 5.9% over the previous year.

We are also thankful for the Government's actions to assist with the smooth progress of redevelopment, modernisation and expansion plans for our hospitals and other facilities. This year will see the completion of the new North Lantau Hospital Phase 1 and redevelopment work at both Tseung Kwan O Hospital and Caritas Medical Centre. Our longer-term plans include the construction of a hospital in Tin Shui Wai and a Centre of Excellence in Paediatrics and the redevelopment of Queen Mary Hospital, Kwong Wah Hospital and Kwai Chung Hospital.

But even with strong Government support, our resources are not unlimited. We must therefore seek new ways to efficiently deploy our assets to the greatest benefit of the community. Further, while working to address immediate needs, we must ensure that we also serve long-term sustainability.

The challenges ahead are daunting, but we should not feel overwhelmed. Since joining HA in 2007, I have been consistently impressed by the dedication and vision of the entire HA team in working to provide service excellence and find solutions in our mission of Helping People Stay Healthy.

## **HA People: Our Lifeblood**

If improved community health and well-being is the heart of HA's operations, then our people are its lifeblood. HA staff are more than just employees or service providers – they are the ambassadors, relationship builders and knowledge base of our organisation. Our colleagues' professionalism and passion are a large part of why we rank among the best public healthcare providers in the world.

It is no secret that the accelerating growth in need for our services is placing increasing and more complex demands on our staff, and serious manpower shortages have occurred in certain high-pressure areas.

This has negatively affected morale and, if left unaddressed, is a major risk to our operations. The recruitment, retention and motivation of talented manpower remains one of our greatest challenges.

While human resource management is an ongoing task, we have made solid progress in addressing some of the most critical issues. One important way in which we have done this is through better communication between management and staff, and among frontline colleagues in different departments and teams. This has helped us identify the worst pinch points and understand how we can improve on what we are already doing well.

Attrition rates among doctors have stabilised following the opening up of more promotion opportunities across all specialties and enhancing the

honorarium scheme for doctors in departments facing acute staff shortages. We have improved the part-time employment scheme with good results. In the past year, we have hired 272 part-time doctors. For specialties in serious need, we have recruited non-local doctors under limited registration, with the Medical Council approving 13 since 2012.

A series of measures were implemented to improve the nursing and allied health manpower situation. In the past two years, in addition to normal intake we have recruited an additional 700 nurses and 160 allied health professionals to fill the gaps created by long-unaddressed workload pressure. We will recruit extra 200 nurses and 120 professionals and supporting staff for allied health service this year.

We are committed to enhancing training opportunities and facilitating career progression for our professionals. Last year, over 1,000 nurses attended specialty training courses. More than 500 nurses and 200 allied health professionals were promoted. We also sponsored 103 nurses and 57 allied health professionals to undertake overseas training.

To relieve the workload of frontline professionals, we have recruited more than 2,600 supporting staff in the past two years. We have also implemented the reduction of conditioned work hours for supporting staff from 45 hours net to 39 hours net per week.

We realise that there is much left to do and that manpower demand will continue to exceed supply for a number of years to come. But we have made a good start in easing the worst of the shortages and improving employee morale and trust.

## **An Open and Accountable Organisation**

In addition to efforts to address human resource, we have also taken significant strides in enhancing corporate governance and the management of risk.

HA is a public statutory organisation that receives the majority of its funding from the Government. It is therefore imperative that we not only work to ensure our resources are used to the greatest benefit of the people of Hong Kong, but that we are also highly accountable and transparent with respect to our decision-making processes and how our systems operate in practice.

Our efforts to improve transparency include our public release in April this year of waiting times for ear, nose and throat specialist outpatient services and cataract surgeries – a move that proved controversial among a number of internal and external groups. However, the first step in resolving a problem is to acknowledge it exists. Improved awareness of system weaknesses encourages the generation of input and ideas for solving them.

In the past year we have made substantial progress in the establishment of an enterprise-wide risk

framework that – for the first time – provides us with a holistic view of our organisational risk profile. This new structure is already enabling us to better identify and concentrate on those risks that pose the greatest threat to our operations, facilitating the improved deployment of our resources.

Our integrated risk analysis system is the foundation of our efforts to identify major risks and implement appropriate mitigation measures as part of our annual planning process.

We must understand the needs and concerns of stakeholders to appropriately allocate resources. We gather information from a broad range of groups, including HA committees and staff. Patient feedback is also actively solicited in our annual planning.

We must not just consider the potential risks we face today, but also those that may emerge in the future. We have enhanced our systems for analysing trends in data and Government statistics and strengthened relationships with external health professionals and international peers to make our forecast modeling more robust.

Our systems have identified a number of high-rated risks currently facing HA. Several of these – particularly the shortage of experienced doctors and the succession risk at the senior management level – entail additional steps to improve human resource management as discussed earlier in my speech. We will



continue with recruitment and retention initiatives for doctors this year and establish an Executive Leadership Programme to groom young talent for future senior management positions.

External risks such as the demand created by the aging population, the rise in chronic illnesses and potential impact of seasonal surges or future outbreaks of infectious disease are quite obvious. We are implementing measures to improve our capacity to mitigate the impact of these risks by increasing throughput and the number of inpatient beds, and reinforcing our crisis response systems.

Other initiatives planned for this year include improvements to systems for managing drug prescription, dispensing and administration, and enhancements to quality assurance involving IT-based clinical systems.

## **Service Development: The Compelling Case for New Ways of Thinking**

In a health system as large and complex as ours and with the unique needs of every patient, there are no simple solutions. And while ongoing improvements in manpower management and corporate governance are crucial to success, they are far from the only essential ingredients.

In 2012, an average of 80,000 people a day received service from HA. The aging population and increased incidence of chronic illnesses are placing greater strain on certain services. The number of patients with complex medical problems that require integrated care and close collaboration between multiple units or healthcare professionals continues to rise.

These changes are creating a pressing need to reassess existing systems of service delivery and resource allocation. But what does this mean in practical terms?

Well, first, we can no longer rely solely on traditional healthcare models if we are to continue to provide high standards of medical care.

Second, our decisions and actions cannot and should not take place in a vacuum. We must build stronger relationships with internal and external stakeholders to identify the issues of most pressing need and concern.

Third, providing sustainable healthcare means we must also be mindful of the long term. It is not enough to fight current fires or even look a year or two ahead. We must also assess Hong Kong's likely healthcare needs 10, 20, even 50 years from now, and set priorities and goals that most equitably ensure positive outcomes for those we serve now and for future generations.

We must broaden our focus from traditional inpatient and narrowly vertical models of medical treatment to include those that make increased use of ambulatory and preventive care. To reduce pressure on resources, we will expand and enhance healthcare models that minimise avoidable hospitalisation and allow for more outpatient treatments while still ensuring high-quality medical care.

Improvements to diagnostic services, particularly for high-risk patients, will enable us to make increased use of day surgeries or procedures and reduce the need for more complex treatments at a later stage.

That said, hospitalisation will continue to be the most appropriate course of action in many cases and inpatient treatments will remain a significant part of our operations for the foreseeable future.

As we look ahead to these future aspirations, we must continue to strengthen our foundation to provide a solid base for long-term development. In the next 12 months, we will take new steps to consolidate our services and to address areas of most pressing need.

To better manage the realities of the aging population, illnesses that require cross-discipline care and high demand in geographical areas such as the New Territories West and Kowloon East clusters, we will add 287 new beds in 2013-14.

We will enhance the treatment of life-threatening diseases by expanding the emergency percutaneous coronary intervention service, providing a 24-hour thrombolytic service, rolling out a fast-track transient ischemic attack clinic programme and enhancing haemodialysis services.

Elderly patients will be more effectively served through measures to strengthen the treatment of certain degenerative diseases, including age-related macular degeneration, osteoporotic fractures and advanced Parkinson's disease.

To improve patient throughput and waiting times, we will set up new case clinics and conduct additional doctor sessions to manage an additional 13,000 specialist outpatient cases, and increase the general outpatient clinic quota by 18,700 attendances. We will explore the potential for expanding our recently established cross-cluster patient referral scheme.

We will invest \$812 million in new equipment this year to help enhance the effectiveness and safety of our services. We will extend the coverage of the Filmless project to operating theatres. We will also use IT to further reinforce medication safety, including as part of the Inpatient Medication Order Entry (IPMOE) system to support clinical workflow.

Building on our previous success with public-private partnerships, we will strengthen external relationships with qualified medical service providers to

increase our capacity for cataract surgeries, radiological imaging services and haemodialysis.

Strengthening our manpower resources in terms of numbers will remain a key initiative. We will also take steps invest in the development of our employees' knowledge and skills to support efficient and effective service delivery.

## **The Human Heart of Improved Health**

While the journey towards high-quality medical service is a never-ending one, it has a clear purpose: to improve the life journey of every individual under our care.

Our journey will remain a challenging one, with many twists and turns that are beyond our control.

Enhanced systems and integrated planning will help us assess total needs and facilitate resource allocation as we strive to keep moving forward. But we should never lose sight of the fact that success lies beyond the numbers and statistics. To echo the sentiments of my opening quote, the heart of our business is serving people.

To provide quality care, we will need to make more investments in facilities, technology and skills development. But above all this, it is our people who are the cornerstone of our success.

It is particularly poignant in this 10th anniversary year of the SARS outbreak to reflect on the central importance of human interactions in everything we do. The selfless actions of HA staff during those dark times is a shining example of the professionalism and passionate service that can be found throughout our organisation every single day. I am proud to be part of such an outstanding team.

We will work harder to honour not only the extreme cases of unwavering staff commitment and courage, but also the many small acts of compassion and kindness that enhance that all-important human element of the patient experience.

We will continue with practical steps to support our everyday heroes by improving working conditions, increasing training opportunities and recruiting additional staff. We have made good progress in developing a systematic process for succession planning and will take more actions to enhance both career advancement and knowledge development flows.

A wide range of HA-supported leisure and sport activities will build better team spirit and boost morale by helping our people and their loved ones to strike a healthy balance between the work and play elements of their lives.

I urge all members of the HA family to help drive positive change by speaking up, sharing their expertise and building closer collaborative ties. We will facilitate

these actions by strengthening channels for staff engagement and encouraging open communication – with older generations passing down their skills and wisdom to less experienced colleagues, and younger staff injecting fresh perspectives and ideas.

Through the dedication of staff past and present, and the strong support of the Government and our community, we have taken great strides in a little more than two decades.

With continued commitment and close collaboration, I am excited at the thought of what we can still accomplish in working to safeguard the health and promote the well-being of the people of Hong Kong.

In closing, I must offer my sincere thanks and appreciation to the Secretary for Food and Health, Dr Ko Wing Man and his teams in the Bureau; our Chairman, Mr Anthony Wu; and to all the members of the Board and the Hospital Governing Committees for their wise guidance and support, which has played an invaluable part in our progress.

To our staff, I wish to borrow from Mother Teresa in saying that when we work hard all day, we can “feel that what we are doing is just a drop in the ocean. But the ocean would be less because of that missing drop”. Every one of you is a vital drop in our ocean. And without you we would be empty and dry. Never forget how important you and your efforts are to our success.

With your help, we will continue to make solid progress with reinforcing our service platform as we strive to overcome present and future challenges and provide quality medical care for the people of Hong Kong. Thank you.