



# 你好

LEARN



傑出員工、團隊獎及優秀青年獎  
Outstanding Staff & Teams and Young Achievers Award

# 30 個好 LEARN 的故事

## LESSONS OF LEARNING



「你 好 Learn」，  
意思是你愛好學習。

人生是不斷學習的過程。我們從小就被教導勤學的重要性，但往往到投身社會，方體會學習的真正樂趣。今年一眾好學的傑出員工、團隊及優秀青年作出完美的示範。《協力》將他們最精彩的求學過程，匯聚成 30 個關於學習的故事。有人於抗疫戰發揮團結精神、靈活應變守住防線；有人打破自身限制覓出服務新方向；有人刻苦不言敗，從新丁變領袖；也有人遇上良師而定下一生志向。

誠然，在求知的路上，學習氛圍也很重要。醫管局是一個樂於學習的機構，我們總結過往經驗，參考海外醫療機構的做法，取其長棄其短，再轉化為切合本港醫療環境的做法，克服每個挑戰。

如果你「好 Learn」，請你繼續 Learn 足一世；如果你「不夠 Learn」，不妨從今天起，重拾它的樂趣，或者會有意想不到的收穫呢！

“Let's learn.” The words on the cover of this issue reflect our shared passion for learning.

From the cradle to the grave, life is a continuous, unbroken learning journey. We are taught to learn, and learn how to learn since childhood, we experienced the joy and meaning of learning when we grow up. This issue of *HASLink* celebrates the Outstanding Staff, Teams and Young Achievers who never stop learning.

We have brought together 30 stories about their learning experience. Among them, some staff members are united in the struggle against the pandemic, others break through their own limitations to find new directions of service, others work hard and never give up as they transform themselves from novices to leaders, and others have identified their lifelong ambitions with the help of their mentors.

One common thread is that the journey to knowledge requires a supportive environment that nurtures and encourages learning. The Hospital Authority is a dedicated learning organisation that learns from the past, and draws on the experience of overseas medical institutions, studying their strengths and weaknesses and translating them into practices that work perfectly for Hong Kong's healthcare sector.

Learning is a lifelong commitment. If you are hungry for learning, keep it up; if you lose your aspiration for learning, come with us and rekindle it today. It is a love affair that will stay with you and nourish you for the rest of your days.



優異獎得獎名單  
Merit Award List



評選小組  
Selection Panel







05 新冠肺炎病人治理醫療團隊  
COVID-19 Patient Management and Support Team

06 九龍東智 Smart 創新團隊  
Innovative KEC Smart Hospital Team

07 微創外科訓練中心  
Minimal Access Surgery Training Centre

08 梁翠瑩  
Leung Chui-ying

09 廖日和  
Liu Yat-wo

10 杜曉華醫生  
Dr Shaheeda Mohamed

11 高德全醫生  
Dr Ko Tak-chuen

### 火花 /

當工作遇上衝擊，  
就是「撻著」新思維的時候，  
發掘從未想過的另一種可能性。

### Spark /

When you face daunting challenges at  
work, ignite your creativity to light up new  
ideas and possibilities that will help you  
overcome any difficulty.

2019冠狀病毒病襲港期間，港島東一度成為「重災區」。東區尤德夫人那打素醫院隨即召集婦產科、外科、骨科及兒科等多個部門的醫護同事輪流到內科病房幫忙，至今已逾千人參與。不論是同事還是病患之間，大家由陌路人變成親密戰友，一起齊心打好這場仗。

隊長兼該院傳染病科顧問醫生龍國璋及一眾成員表示，「雖然參與抗疫的同事來自不同部門，但大家目標一致，拼盡全力去完成以病人福祉為先的使命。同時，這也是同事互相學習的寶貴機會，如疫情期間接收不少兒科確診病人，本身照顧成人的內科同事幸得兒科同事幫忙，才不至於『手忙腳亂』，而兒科同事則能從內科同事身上學到如何照顧年長病人。」

同事變戰友，而病人亦在患難中見真情，「團隊很重視『家庭』文化，會盡量安排同一個家庭的確診者入住同一病格，互相照顧。即使是『落單』（即只有自己住院）的患者，我們都會靈活安排床位，如今年初有幾名小女孩確診入院，我們便找來另一個年長幾歲的確診女生與她們同住，好讓她照顧妹妹們，各人出院時更依依不捨。另有婆婆因『怕鬼怕黑』，不敢住單人病格，最後有幾位年輕女病人主動提出與她同住，經評估後，我們同意這安排，幾位女病人更為婆婆餵湯、剪指甲。病患由互不相識變得熟絡，是我們意想不到的。」

對於團隊獲獎，龍國璋坦言：「開心，但最想團隊可以解散，因這代表疫情完結，大家生活重回正軌」。他深信，即使疫情減退，團隊所建立的默契也不會消散。

During the COVID-19 outbreak, Hong Kong East was once the 'hardest hit area'. Over 1,000 colleagues from various departments of Pamela Youde Nethersole Eastern Hospital, including Obstetrics and Gynaecology, Surgery, Orthopaedics and Paediatrics, took turns to lend a helping hand to the Medical wards. Among both colleagues and patients, everyone has gone from strangers to comrades-in-arms, fighting the pandemic together.



傑出團隊  
Outstanding  
Team

新冠肺炎病人治理醫療團隊  
東區尤德夫人那打素醫院  
COVID-19 Patient Management and  
Support Team  
Pamela Youde Nethersole Eastern Hospital



## 最想解散的團隊

## The team willing to be disbanded

The team leader Dr **Lung Kwok-cheung**, who is also a Consultant of Department of Medicine and his team members have this to say, "We come from different departments, but we are all united in our mission to put the well-being of our patients first. And it is a good opportunity for colleagues to share their experience. For example, the Medical wards received many confirmed patients aged from a few months to a few years. We were not overwhelmed only with the help of Paediatrics colleagues. Of course we reciprocated by showing how to care for older patients which we are good at."

Colleagues become comrades, while the patients see love in times of adversity. "The team attaches great importance to the 'family' culture. We try to arrange COVID-19 patients from the same family to stay in the same cubicle so that they can take care of each other. For patients who are 'solo' (i.e. being admitted to the hospital alone), we will arrange beds flexibly. For instance, a few little girls were admitted to the hospital earlier this year. So we asked another older girl to stay with these younger ones and take care of them. When they were discharged from the hospital, they were a little sad to leave each other.

Another old lady did not want to stay in a single cubicle as she was scared of ghosts and the dark. In the end, some young female patients volunteered to stay with her. After assessment, we agreed to this arrangement and the ladies even fed her soup and helped cut her nails. We were surprised that the patients went from being strangers to friends."

Dr Lung was pleased to receive the award, but he wished the team could be disbanded because it means the end of the pandemic, and everyone's lives return to normal. He is convinced that even if the pandemic subsides, the rapport that the team has built will go on.



團隊名單  
Team List





(相片由受訪者提供 Photo provided by interviewee)



傑出團隊  
Outstanding Team

九龍東智 Smart 創新團隊  
九龍東醫院聯網  
Innovative KEC Smart Hospital Team  
Kowloon East Cluster



團隊名單  
Team List

這支團隊三位隊長和近 50 位來自不同醫院、不同部門的同事，雖然甚少面對面相見，但不時相約在線上「度蹺」，共同帶領聯網醫院邁向「智慧醫院」。

將軍澳醫院麻醉科及手術室顧問醫生**鄭鴻佳**說，突如其來的新冠疫情成為催化劑，加快聯網發展智慧醫院的步伐。在 2019 冠狀病毒病爆發初期，九龍東醫院聯網率先推行遙距診症先導計劃，為在家病人提供視像檢查和診症，減低醫護和病人的感染風險；團隊亦率先在手術室引入第五代流動通訊服務 (5G)，讓手術室外的資深醫生能透過手機和平板電腦等流動裝置，即時掌握手術細節和提供指導。

去年底，基督教聯合醫院出現院內群組爆發，團隊亦即時「智對」疫情。副醫院行政總監**謝萬里**醫生形容當時情況來得很急，但團隊愈危急就愈把握機會發揮，包括在兩小時內設計好電子表格，方便同事輸入個人資料後製作條碼，列印成貼紙黏在測試樣本樽，減省實驗室工序，加快測試；另外，又在流動採樣站設直播，讓同事直擊現場情況，待人流較少才到場檢測，減省排隊時間。

九龍東醫院聯網幾年前已開始建立智慧文化，聯網行政事務總經理**湛偉民**形容，Smart 是一種流動、變化萬千的概念：「所以我們堅守的理念是 G-E-M，Get everybody moving，每個人都要動起來，以同理心了解病人和同事所需，透過新科技惠及更多同事和病人。」

## 線上見！ See you online!

This team comprises three team leaders and nearly 50 members from different hospitals and departments. Although the team members seldom meet face-to-face, they meet online from time-to-time and gradually lead the cluster hospitals moving towards a ‘smart’ era.

Dr **Cheng Hung-kai**, Consultant in the Department of Anesthesia and Operating Theatre Services at Tseung

Kwan O Hospital, says that the COVID-19 pandemic has accelerated the development of ‘smart hospital’ in the cluster. At the beginning of outbreak, the Kowloon East Cluster pioneered the implementation of telecare to provide examination and consultation services for patients at home, thereby reducing the risk of infection for both healthcare workers and patients. The team was also the first to introduce the fifth-generation mobile communication services (5G) in the operating theatres, allowing senior doctors outside the operating theatres to provide guidance in real time through mobile phones or tablets.

At the end of last year, United Christian Hospital (UCH) experienced a COVID-19 outbreak in ward. Dr **Tse Man-li**, Deputy Hospital Chief Executive of UCH, recalls the urgent situation at the time. The team tackled the challenges with their quick wits. For example, they designed an electronic form within two hours to facilitate colleagues to input their personal information and create barcodes, which can be printed as labels for the specimen bottles by themselves, thereby streamlining the workflow of COVID-19 testing in laboratory. Meanwhile, a live broadcast was set up at the mobile testing area, allowing colleagues to understand the queuing situation on-site so that they could choose a suitable timeslot to conduct the test.

The smart culture has been developed in Kowloon East Cluster for a few years. **Terence Cham**, Cluster General Manager of Administrative Services, explains ‘Smart’ is a dynamic and vibrant concept: “We strongly believe that we should Get Everybody Moving (G.E.M.), which means everyone should step forward to understand the needs of patients and colleagues and hence provide solutions by adopting new technologies.”



## 微創訓練靠堅持 Dogged persistence drives the development of minimally invasive training

(相片由受訪者提供 Photo provided by interviewee)

90 年代初，外科手術仍以傳統開腔手術為主導，大家對微創手術還是很陌生。微創外科訓練中心首任主管李家驊醫生當年已洞悉微創手術是大勢所趨，在醫管局和醫院管理層支持下，於 1995 年成立微創外科訓練中心。

現任中心主管**鄧宗毅**醫生憶述，早期的微創外科訓練在一間細小的房間進行，只有基本配置，每個培訓課程都有數十人擠擁著圍觀，可見大家對微創手術培訓的關注，以及學習這項新技能的熱誠。2007 年，中心得到雅麗氏何妙齡那打素慈善基金會的支持，得以擴展並配置「結合腹腔鏡及內視鏡微創手術訓練室」及電腦模擬高端設備。2017 年，中心進行翻新工程，設置更先進的儀器及視頻設備，並加設機械人手術訓練，以配合各專科培訓發展。而新成立的「臨床模擬手術訓練室」，亦開展跨專科的模擬培訓，以提升團隊溝通及協作技巧。

中心多年來一直與海內外同儕開展交流項目，促進微創技術的發展，培育及凝聚外科專才，同時亦加強本港在國際上的角色。至今，中心舉辦了 450 個培訓課程，逾 16,000 人次參與，當中七成為本地醫護，三成是來自海外醫療機構。

前人的貢獻為中心奠定了先導者的角色，然而，在開創外科培訓新領域的過程中，仍有不少挑戰，包括如何持續提升課程質素、協調團隊成員間的步伐、人才流失和資源配對等問題。憑著團隊堅定的信心，難題逐一擊破。今日團隊獲得佳績，足證昔日的堅持是正確的。

In early 90s, when minimally invasive surgery was newly introduced to the medical field, surgeons predominantly adopted conventional open surgery. Dr Michael Li, Founding Director of Minimal Access Surgery Training Centre, had the foresight that minimally invasive surgery (MIS) would be the dominant trend and subsequently established the centre in 1995 with the support from Hospital Authority and the management of the hospital.

Director of the Centre, Dr **Tang Chung-ngai** recalled when the Centre was first established, the minimal access surgery training was conducted in a small room with very basic equipment. Nevertheless, every training session attracted over dozens of participants, who showed keen interest in this revolutionary trend. Thanks to the support from Alice Ho Miu Ling Nethersole Charity Foundation, the Centre was expanded and installed with EndoLap Operating Room (EndoLap OR) and advanced computer simulation equipment. Its renovation followed in 2017 to facilitate the provision of various surgical trainings with state-of-art devices and video equipment, as well as robotic surgical training. With Simulation Operation Room (Sim OR) in place, cross-disciplinary simulation training is also provided to improve team communication and coordination.

The Centre has been engaging in various local and overseas exchange programmes to promote the development of MIS and nurture young surgeons. With such opportunities, Hong Kong is playing a more pivotal role under the international spotlight. The Centre has so far organised around 450 training courses for over 16,000 participants, among which 70% are local healthcare workers, while the remaining are from overseas medical institutions.

The contribution from predecessors in pioneering MIS has laid important cornerstones for subsequent development. Yet, the challenges arisen in the course of the Centre’s development, including sustainable quality teaching, team coordination, people management and resources allocation, could only be overcome with the team’s unwavering determination. What the team has accomplished by far most strongly testify to the team’s hard work and perseverance over the years.



傑出團隊  
Outstanding Team

微創外科訓練中心  
東區尤德夫人那打素醫院  
Minimal Access Surgery  
Training Centre  
Pamela Youde Nethersole  
Eastern Hospital



團隊名單  
Team List



# 憶苦，石頭成翡翠

## Grow through tough times

翡翠，經過琢磨變得晶瑩通透，正如人生，要經歷衝擊，才會成長、成熟、成大器。

護士出身的**梁翠瑩**，90年代完成助產士課程後，便在1993年加入東區醫院當婦產科「開荒牛」，其後在1996年協助該院開展半私家病房服務，直至2003年「沙士」爆發，半私家病房轉型為「沙士」病房，她帶著團隊走到抗疫前線。「沙士」過後，半私家病房沒有重開服務，翠瑩被安排至急症內科病房工作。

突然「空降」到內科擔任護士長，難免被人質疑其能力，翠瑩坦言，「我在內科工作的三年，最難忘首三個月的苦日子，最大得著是學懂畢生受用的人事管理技巧。」面對苦日子，她緊記「用心」和「承擔」來跨過難關。「我記得當年的午飯時間，全用來『刨熟』病人的『牌板』，足足有一年沒有吃午飯；又試過徹夜不眠細閱新型號呼吸機的說明書，當醫生提問如何使用時，唯我能即時作出正確示範。」翠瑩肯學肯做，以行動證明自己有能力帶領團隊向前走，同事也逐漸接受這位「外行人」。

2007年，翠瑩重返婦產科協助開展私家病房的服務，到2020年再次帶著團隊迎戰2019冠狀病毒病。回首過去，在內科工作的歲月是翠瑩人生的轉捩點，昔日在陌生環境下的磨練，造就了她今日成為同事眼中的「優秀領袖」，家人眼中的「晶瑩翡翠」。



**傑出員工**  
Outstanding Staff

**梁翠瑩**  
病房經理（婦產科）  
東區尤德夫人那打素醫院  
**Leung Chui-ying**  
Ward Manager (Obstetrics & Gynaecology)  
Pamela Youde Nethersole Eastern Hospital

Jade cannot glisten without being pondered and one cannot grow without pain.

After graduating as a nurse and the completion of a midwifery programme in the 90s, **Leung Chui-ying** joined in 1993 as one of the trail blazers for the Department of Obstetrics & Gynaecology of Pamela Youde Nethersole Eastern Hospital. In 1996, she participated in the establishment of semi-private wards, which were later used for hospitalising SARS patients when Hong Kong was hard hit by SARS in 2003. Chui-ying therefore led her team to combat the deadly virus. After the SARS outbreak, the semi-private wards were not re-opened so Chui-ying was assigned to support the medical emergency ward.

Her deployment as a nursing officer in medical ward gave rise to many doubts over her capability. “The first three months during my three years at the medical ward were the most challenging to me. However, I have acquired a valuable asset – the gist of people management.” Although days were tough, she remained steadfast and committed to overcome the challenges. “I used to skip lunch for a whole year just to familiarise myself with the patients’ clinical details. I had also once spent my nights to read over the user manual of a new model ventilator. When the doctor questioned how to use it, I was the only person who could operate it properly”. With an eagerness to learn, Chui-ying had proven herself a capable leader and eventually earned the respect from her colleagues.

In 2007, Chui-ying returned to the Department of Obstetrics & Gynaecology to commence the provision of private wards. Till 2020, she combated COVID-19 at the frontline with her team. Looking back, her days at the medical ward was a turning point of her life, where she emerged stronger from the new environment, and became a reliable leader among her colleagues and the pride of her family.



## 協調病床的藝術 The art of bed coordination



**傑出員工**  
Outstanding Staff

**廖日和**  
高級護理主任（中央護理部）  
威爾斯親王醫院  
**Liu Yat-wo**  
Senior Nursing Officer (Central  
Nursing Division)  
Prince of Wales Hospital



作為全港最繁忙醫院之一的威爾斯親王醫院，其急症室病人等候轉送病房的時間，曾一度需時超過24小時。面對床位不足的難題，四年前從該院外科調任中央護理部的高級護士長**廖日和**重新檢視入院流程，擔起「病床統籌」的重任，帶領團隊統一協調全院約1,700張病床的運用。

大規模調配病床的難度可想而知，廖日和稱最重要是思維改變，「換位思考很重要，由以往各人只管理自己病房幾十張床的角度，擴展至『共享』整間醫院病床的思維出發。首先要安排各部門病房委派一名護士為『病床分配協調員』，在指定時間到急症室主動『撈症』，監察病房『空位』實況，適時作出相應安排，盡量減省病人在急症室等候轉送病房的時間。去年，我們逾九成病人都已經可在四小時內轉送病房。」

大家齊心一致解決困境，除因為院方支持外，成功推動和建立團隊精神亦是關鍵。「我們設了交流計劃，安排同事們到急症室工作，從中感受到病人等候的苦況，回到自己部門後，每當有需要跨部門調配病床，他們都會主動提出支援，反映計劃有助我與各部門同事加強溝通。」他坦言，以往身在病房工作，直接照顧病人很快便有滿足感，但現時參與規劃工作，才明白許多部署未必即時可見成效，但亦讓他體會到設立所有系統和機制都應以病人為中心，同事堅守執行，和加強部門間的溝通和協調，最終就能幫到更多病人。他相信，「無論在甚麼崗位工作，終極目標都是以病人福祉為先。」

As one of the busiest hospitals in Hong Kong, many patients of Prince of Wales Hospital once had to wait for more than 24 hours before being transferred to wards for further treatment from the Accident and Emergency (A&E) Department. Faced with a shortage of medical beds, **Mr Liu Yat-wo**, the Senior Nursing Officer who has been transferred from Surgery Department to Central Nursing Division, took up the role of ‘central bed coordinator’ four years ago to lead his team to coordinate the utilisation of some 1,700 beds in the hospital.

Deploying hospital beds on a large scale is no easy task. Mr Liu says changing the mindset is essential, “It’s important to think from others’ perspective. We changed the mindset of our colleagues from taking care of a few dozen beds

in their own ward to being willing to share the beds of the entire hospital with one another. We first appointed a nurse from each ward as the ‘bed coordinator’, who would go to the A&E at designated times to proactively pick up patients, monitor the actual number of vacant beds in their ward and make timely arrangements accordingly. This has greatly shortened the time for transferring patients. Last year, we were able to transfer over 90% of A&E patients to wards within four hours.”

In addition to the hospital management’s unwavering support, promoting and building team spirit is also one of the keys to success. “We have launched an exchange programme to arrange ward staff to work at A&E for some time so that they can better understand patients’ situation. As a result, communication between various departments have been improved and colleagues are more willing to offer help when the need for inter-departmental deployment of beds arises,” Mr Liu says he enjoyed working in the ward to take care of patients previously as it brought immediate job satisfaction. Now that he is involved in planning and coordinating work, which sometimes does not yield immediate results. Yet, he realises that as long as the relevant systems and mechanisms are developed and implemented according to patient needs, supplemented with good communication and coordination between departments, more patients will surely benefit in the end. Mr Liu believes that no matter where we work, the ultimate goal is to promote the well-being of patients.



# 一眼洞悉白血病

## Saving life in Ophthalmology

醫者除了想救治病人，亦要有求知欲才會保持熱誠。熱愛研究新事物的**杜曉華**醫生經常參加國際會議了解同行發展，幫助提升醫院的服務質素。她把這個學習氛圍帶進醫院，與團隊定期開會，討論國際文獻以及複雜個案，讓年資淺的醫生開眼界，「一個醫生能接觸的病人有限，但若與其他醫生互相交流和學習，大家可以進步得更快，惠及更多病人。」

杜醫生專長醫治視網膜病變，她說眼科在這十年間發展很快，需時刻緊貼新技術發展，如她過去兩年與團隊參考歐美和新加坡等地的經驗後，引入「3D玻璃體視網膜手術」，醫生只需戴上特製3D眼鏡，便可透過大螢幕觀察病人眼底狀況，黃斑部位影像更清晰、立體，令手術更加精準，成功率亦能提高，同時新技術所用的光源強度較傳統手術低，可減低對病人視網膜感光細胞的損害或毒性。

杜醫生說，眼科不止治理眼睛的問題，既要掌握手術技巧，亦要通曉內科，是一門複雜學科，不斷吸收新知識尤為重要。她分享最近遇到一名男病人因持續視力模糊前來求醫，「當下察覺他可能患的是白血病，而非眼睛問題，於是立即送他去急症室，檢查發現其白血球指數超出常人很多倍，傍晚隨即與血科同事一起診症，病人其後確診白血病，並接受緊急治療，減低白血球指數。慶幸我們及早發現，才能即時對症下藥，他康復得很快。我對這件事印象很深刻，經驗無價，眼科其實也能『救命』。」



**傑出員工**  
Outstanding Staff

杜曉華醫生  
顧問醫生（眼科）  
香港眼科醫院  
**Dr Shaheeda Mohamed**  
Consultant (Ophthalmology)  
Hong Kong Eye Hospital



The passion of a doctor does not only rely on the motivation to treat patients, but also the thirst for knowledge. With the desire to gain new exposure, Dr **Shaheeda Mohamed** attends international conferences to get a first-hand view on the development of ophthalmology and apply such knowledge to advancing hospital service quality. To cultivate a positive learning attitude among her colleagues, regular team meetings are held to exchange opinions on literatures and complex cases, as well as to inspire junior doctors. “There is a limit to the number of patients a doctor can treat. However, through exchange of ideas and mutual learning, we are able to learn more proficiently and benefit our patients significantly as a result.”

As an expert in vitreoretinal diseases, Shaheeda has noticed the remarkable development of the technology in ophthalmology in the recent decade, signifying the need to keep up with the times. Just two years ago, she and her team introduced 3D vitreoretinal surgery after referring to the practice in Europe, America and Singapore. The reinvented surgical technology allows the eye surgeons to operate on the eye, especially the retina, at high resolution enabling fine details to be visualised and enhancing the success of complex vitreoretinal surgeries. The surgeon wears 3D glasses and views the digitally enhanced image of the eye on a large 3D screen, therefore enhancing the surgical precision. Comparing to conventional surgical approach, this new introduction also reduced the light intensity that minimises damage or phototoxicity to the photoreceptor cells.

As Shaheeda explains, ophthalmology exhibits complexity as it involves not only treatment to the eyes, but also surgical skills and profound knowledge in medicine. Applying such knowledge and skills is without doubts essential and satisfying for ophthalmologists. Recently, she had a male patient who sought help due to persistent blurry sight. Examination of his eyes revealed bilateral extensive cellular infiltrates of the retina. “I suspected that these were leukaemic infiltrates, and referred him immediately to the Accident & Emergency Department.

His white blood cell count was found to be many times higher than normal, and due to a team effort working with the haematologist that evening, he was then diagnosed with leukaemia and started on emergency treatment to lower the white blood cell count. He would not have promptly received treatment if we had been unable to identify his condition at such an early stage. He recovered well and is very grateful to us. This remains a valuable lesson to me that, being an ophthalmologist can actually save someone's life.”

## 資源「再造」的思維 The thinking of re-engineering resources

As the year advances, what we expect in medical services and how we train our people have been almost different from the way we did 30 years ago. Dr **Ko Tak-chuen**, who joined the Ophthalmology in Hong Kong East since 1990, believes that public hospital services must be tailored to the specific and prevailing circumstances. Dating back to the time when he devoted to the medical field, hospital beds were constantly in grave needs, whereas ambulatory care is broadly welcomed nowadays. The conventional approach to continuously providing more beds and strengthening manpower should no longer be the only solution. Additionally, making the best use of the currently available resources, or in other words, ‘re-engineering’ resources, is equally important.

Progress should not be made in only how we provide service, but also the way we think. “During my internship, I used to follow mentors and learn from the way they perform an operation. Nowadays, junior doctors would research for complex cases online and ask questions, thus I have to keep learning to achieve mutual learning goal with them.”

Dr Ko also puts emphasis on teamwork by valuing the opinions of his colleagues and thinking outside the box. Taking the Ophthalmology Service Enhancement Programme in the Hong Kong East Cluster as an example, “I was proposing that the Pamela Youde Nethersole Eastern Hospital and Tung Wah Eastern Hospital (TWEH) shall arrange day surgery for the patients with cataract and follow up hospitalised cases separately. However, my frontline team instead advised TWEH to be fully in charge of scheduling the surgery for patients from both hospitals. With the support from our administration and IT team, this suggestion can help prevent repetitive or missing follow-up cases as well as the redundancy in the manpower deployment, and to streamline the operation. In my opinion, their suggestion is more feasible, having considered that I may lack the hand-on experience of being at the frontline and getting in touch with the patients. Bearing this in mind, I always value the voice of my colleagues. With everything all set, the programme is expected to be implemented in the third quarter this year.”



**傑出員工**  
Outstanding Staff

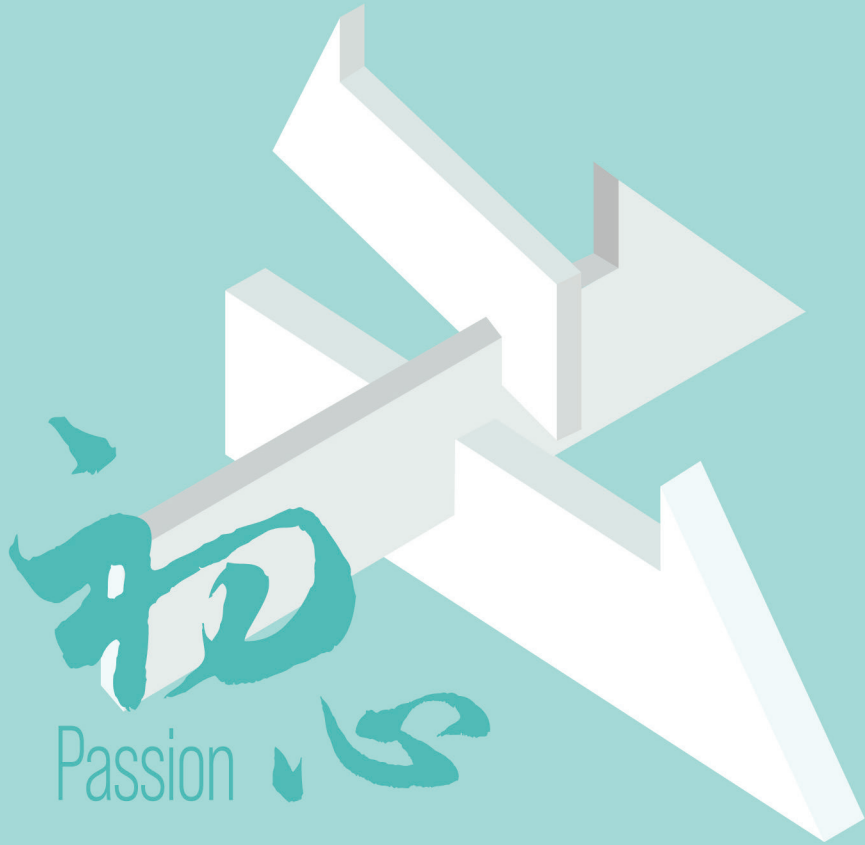
高德全醫生  
顧問醫生（眼科）  
東區尤德夫人那打素醫院 / 東華東院  
**Dr Ko Tak-chuen**  
Consultant (Ophthalmology)  
Pamela Youde Nethersole Eastern Hospital /  
Tung Wah Eastern Hospital

時代進步，無論是服務需求、還是人才培訓，30年前後截然不同。1990年加入港島東眼科的**高德全**醫生認為，服務模式要因時制宜，譬如從前公立醫院一床難求，30年後的今天，日間服務成為新趨勢，故不能只停留於「加床加人」的階段，還要思考如何將有限資源發揮最大的作用，這就是資源「再造」。

服務模式要改進，人的思維也要進步。他說：「以前我學醫是師徒制，做手術時多數跟師傅的做法；不過，現今的年輕醫生都會自行在網上找案例，主動提出疑問，我也要不斷學習，才能與他們有交流，達至教學相長。」

高醫生亦很重視團隊合作，聆聽不同崗位同事的意見，以突破固有思維。以他負責統籌的港島東眼科服務優化重整計劃為例，「我本來提議東區尤德夫人那打素醫院和東華東院各自安排合適的白內障病人進行日間手術和處理住院個案，但前線同事卻主動提出由東華東院統一負責兩間醫院的病人排期安排，加上行政和資訊科技同事的支援，可避免出現重複或遺漏跟進個案的混亂情況，並減省人手重疊和令流程更順暢。我覺得這個方法比我的還好，因為我未必很了解最前線運作，所以聆聽同事意見是很重要的，計劃預計在今年第三季實施。」





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NTEC Lung Cancer Multidisciplinary Team
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Dr Joseph Chung
- 17 戴秀雲  
Tai Sau-wan

**初心 /**  
職場上，無論走到哪個位置，  
都要向著初心方向進發，為病人多走幾步。  
無私的付出，總會有人看在眼裡，銘記於心。

**Passion /**  
No matter what your position is, it's only by keeping  
the fire of passion burning that you can go the extra  
mile for patients. Your selfless dedication will be  
imprinted on one's mind forever.



## 足球精神 領軍抗疫 Football spirit leads the fight against the pandemic

2021  
AWARD  
傑出團隊  
Outstanding  
Team  
港島西醫院聯網新冠疫症抗擊團隊  
港島西醫院聯網  
HKWC COVID-19 Combat Team  
Hong Kong West Cluster



團隊名單  
Team List

2019冠狀病毒病爆發初期，瑪麗醫院內科榮譽顧問醫生孔繁毅教授帶領的「港島西醫院聯網新冠疫症抗擊團隊」就如先頭部隊，他和團隊幾個醫護「打頭陣」進入病房為病人採樣、抽血、做鼻咽拭子樣本測試等，以增加其他醫護的信心，讓大家相信只要佩戴合適個人防護裝備，在負壓病房可以安全地照顧病人。

「整個團隊都是來自不同專科、自動請纓加入的同事，我們就像一支球隊，有領隊出謀獻策、有醫護守住防線、也有前鋒進行臨床研究。大家都知道我是利物浦球迷，它的隊歌 *You'll never walk alone*，正好代表我們的團隊精神，哈哈！」提起愛隊，孔教授笑得眯起了眼睛。身旁的瑪麗醫院內科譚永輝醫生也被逗笑了，他說，一年多的抗疫經歷，最感動是有幾位深切治療部的重症病人，透過團隊提出的三聯療法和「恢復血漿」醫治後，康復出院。

孔教授強調，「沙士給予我們很多實戰經驗，這廿年來我們一直努力裝備，不但加強了病毒測試，亦透過觀察病毒指數、病毒抗體何時產生、發炎指數，配合肺部X光片，提高診斷準確度，讓我們能夠把握治療的黃金時刻。」

團隊未來會進一步研究有助預防疫症的疫苗，包括購入海外疫苗及研發港大噴鼻式疫苗，繼續與民同行。

During the early phase of the COVID-19, Professor **Ivan Hung**, Honorary Consultant of Department of Medicine at Queen Mary Hospital (QMH), was leading the HKWC COVID-19 Combat Team to fight against the virus at the forefront. He and his colleagues set examples by being as the first team to collect specimens, draw blood and perform nasal and throat swabs on patients, with a determination to reassure other healthcare workers that it is safe to handle COVID-19 patients in negative pressure rooms so long as they have donned proper personal protective equipment.

“All our members are specialists who volunteered to be part of the team. We are like a football team. We have a leader who makes the planning, medical experts to safeguard the patients' lives, as well as strikers to perform clinical research. I am a huge fan of Liverpool F.C., and being in this team reminds me so much of their motto — you will never walk alone”. Professor Hung cannot hide his smiling face as he speaks of his favourite soccer team. Dr **Anthony Tam** from Department of Medicine of QMH is also amused by his keen sharing. Recalling their year-long journey battling the COVID-19, Dr Tam finds it most remarkable that a number of critically ill patients admitted to the Intensive Care Unit have fully recovered after receiving triple therapy and convalescent plasma treatment.

Professor Hung emphasises, “The practical experiences accumulated from SARS have greatly enhanced our preparedness over the past 20 years. We have been stepping up efforts in refining virological tests and enhancing the accuracy of diagnosis through close monitoring of the cycle threshold (Ct) value, the time that antibody developed, inflammatory markers as well as the chest radiograph. All such hard work would ensure we give the best treatment at the most appropriate timing.”

In the future, the team will further study on COVID-19 vaccines, including those imported from other countries as well as the intranasal vaccine being developed by the University of Hong Kong. The team will continue to walk with Hong Kong citizens in this battle against the virus.



「多謝你，伴我  
走過抗癌旅程！」  
“Thank you for helping me  
through the cancer journey”

肺癌是本港的頭號癌症殺手，香港癌症資料統計中心於2018年錄得逾3,800人死於肺癌，新增患者數目逾5,600人。由跨院跨部門組成的新界東醫院聯網肺癌多元團隊，旨在為肺癌病人提供最適切的個人化治療方案。

威爾斯親王醫院外科榮譽顧問醫生吳士衡教授及隊員均形容，「每個肺癌病人也不同，肺癌的腫瘤形態千變萬化，所以我們制定治療方案，就好比下棋，行一步想三步……即使是第四期肺癌病人，我們仍會盡力尋求新方法幫助他們，陪著他們一同戰勝病魔。」

多元團隊的醫生來自腫瘤科、外科、內科、病理科、麻醉科及放射科，最大特色是科研與治療並重，他們每月舉行會議討論和跟進特別案例，過程中經常會探討最新研究結果，然後用於臨床「實戰」，隊員每次開會時都學到新事物，交流不同專科如何應對同一案例，保持在行醫生涯中終身學習的態度。

護士及專職醫療同事在肺癌護理中的角色同樣重要。2018年，團隊設立專科護士門診，由專科護士為病者及家屬講解治療須知，物理治療師則介紹手術前後的復康過程，藉以完善一條龍的肺癌服務。資深護師周燕翎表示，「病者和家人知道患癌後會很擔心，若肺癌個案一開始由專科護士門診跟進，有助更深入了解病患所需和安撫他們情緒。每當有病人出院時跟我說『你好像陪我走完整段路，多謝你！』，都令我有很大滿足感呢！」

Lung cancer has long been the leading cancer killer in Hong Kong. According to the Hong Kong Cancer Registry, there were over 3,800 deaths from lung cancer and over 5,600 new cases in 2018. Members from the Lung Cancer Multidisciplinary Team from New Territories East Cluster share the vision to provide the best personalised care for lung cancer patients.

“Each lung cancer patient is different. The presentation and progression of the cancer are very variable. Treating lung cancer is like a chess game, we always need to think ahead,” says the team. “Although we may not be able to cure patients who presented at the more advanced stage of the disease, we strive to look for novel treatment options to control the disease and improve their quality of life,” adds the team leader, Professor **Calvin Ng**, Honorary Consultant of Department of Surgery at Prince of Wales Hospital.

Doctors in the team come from many different specialties, including oncology, surgery, medicine, pathology, anesthesiology and radiology. Monthly meetings are held to discuss and follow up complex cases. The most advanced and pioneer research findings are often incorporated in the management for these cases, providing new hope for patients. The meeting is an invaluable opportunity for the team members to gain new exposure and understand how to look at the same disease from other specialties’ point of view, while maintaining the motivation to learn throughout their medical career.

Nursing and allied health colleagues also play a very important role in lung cancer care. In 2018, a nurse clinic was set up to provide lung cancer care services to the patients and their families. Patient and family counselling and treatment information are provided by specialty nurses while physiotherapists arrange prehabilitation and rehabilitation to improve the outcome of lung cancer surgery. Advanced Practice Nurse **Chau Yin-ling** says, “The patients and their family would inevitably feel anxious about the diagnosis. If we follow up the cases at the nurse clinic from the beginning, we can understand more about their needs and concerns, and provide appropriate emotional support to them. I am exceptionally encouraged every time when the patients are discharged and thanked me for accompanying them during the fight against lung cancer.”



團隊名單  
Team List



傑出團隊  
Outstanding  
Team

新界東醫院聯網肺癌多元團隊  
威爾斯親王醫院 / 雅麗氏何妙齡那打素醫院 / 北區醫院  
NTEC Lung Cancer Multidisciplinary Team  
Prince of Wales Hospital /  
Alice Ho Miu Ling Nethersole Hospital / North District Hospital

一顆不言敗  
的求知「心」  
Stay hungry for learning

In cardiology, the list of heart disorders is extensive that requires advanced minimally invasive surgery and intervention. With over 30 years of experience in nursing, **Cecilia Chan** has accumulated proficiency in handling complex heart disease cases. Nevertheless, this does not stop her from gaining new exposures. She used to spend every night reading literatures regarding the latest treatment techniques and clinical know-how, and the motivation that keeps her thriving for knowledge stems from the eagerness to pursue excellence.

“There is too much to learn about cardiology. You will find yourself lagging behind once you stop learning. Thanks to my stubbornness, I would overcome whatever challenges brought to me and I definitely would not want to be looked down on.” In 1995 when Cecilia was still a registered nurse, she had already been involved in the establishment of the first Cardiac Ambulatory Centre in Hong Kong at Queen Elizabeth Hospital. At the Centre, patients could receive ambulatory care services such as high-risk cardiac interventional treatment as day-patient, which helps relieve the pressure on wards. To facilitate the coordination, she had formulated the service protocols for the Centre with reference to different resources. Then, she had worked on the establishment of Nurse-led clinic in 2008, where cardiology cases such as patients taking anticoagulant, or heart failures patients would be managed by specialist nurses. Since 2018, the primary percutaneous coronary intervention (PPCI) has been made available 24/7 with her team’s effort.

In retrospect, Cecilia believes every challenge she has endured through had been pushing her limit, that makes her tougher and stronger. In the Cardiology Department, doctors are the mastermind. Hoping to become their right-hand person, she equips herself with sufficient clinical knowledge such as the cardiology procedure details and principles of the operation. “You will find it easier to make decisions and explain the case to the patient as long as you gain a deeper understanding of the case”. In her remarks, Cecilia considers it important for a person to get out of their comfort zone to embrace challenges and strive for excellence.



傑出員工  
Outstanding  
Staff

陳妙貞  
顧問護士（心臟科）  
伊利沙伯醫院  
Cecilia Chan  
Nurse Consultant (Cardiac Care)  
Queen Elizabeth Hospital

心臟科病症複雜，各種先進的微創手術、介入治療不斷更新。入行三十載的陳妙貞擁有豐富護理經驗，處理複雜的心臟病症時亦游刃有餘。話雖如此，她的求知精神不減反增，每晚自發閱讀國際文獻，吸收最新臨床知識及嶄新治療技術，如斯勤奮只因三個字：不服輸。

「心臟科太多新事物要學，一停下來便會跟不上；加上我是個倔強的人，多困難的任務也想把它做好，不想被人小看。」1995年，陳妙貞仍是註冊護士，已經在伊利沙伯醫院參與籌備全港首間心臟科日間中心，為病患提供高風險的心臟介入治療日間服務，以減輕病房壓力。為此她四處搜集資料，制定中心的服務守則。此後日間中心發展日漸成熟，她繼而在2008年規劃由護士主導的護士診所，專門處理如需服用薄血丸、患有衰竭等心臟病個案，2018年則與團隊開展24小時「通波仔」手術服務。

陳妙貞笑言，每個任務都在挑戰自己極限，可謂練得一身「銅皮鐵骨」。醫生是心臟科的大腦，自己則希望做心臟科的心臟，成為可靠的拍檔，於是她主動研究手術過程和原理等臨床知識，「當你對個案的了解愈深入，便會懂得如何做決定和向病人解釋病情。」她鼓勵大家做人做事都別只守著自己的「安全地帶」，要勇於接受新挑戰，才會進步。



## A devoted journey in three decades

# 三個十年的使命

行醫33年的整形外科醫生鍾漢平認為，行醫者的第一個十年是學習、受訓；第二個十年專注一個範疇深造；第三個十年傳授所學，好好回饋社會。

回顧過去，鍾醫生最大的學習就是學會見微知著，為病人多走一步。他在1998年加入東華醫院，巡房時發現很多長者病患受盡褥瘡困擾，惟當年醫院資源有限，他便以捐款為病人購入減壓床墊，從治療、預防入手，減低高危人士患褥瘡的機會。自2004年起，他每年與相關醫生、護師、職業治療師及營養師等，為病房、門診及社康護士提供傷口護理課程，加強預防及治理褥瘡的知識。

每個手術背後都有一個故事。鍾醫生憶述，曾經有位面部被火災嚴重燒傷的婦人，經過手術後，身體漸入佳境，惟覆診時卻愁眉深鎖，細心的鍾醫生了解後，始知病人因此無妄之災而失去工作及遭丈夫拋棄，即時從心理層面幫助她度過巨變。他表示：「手術完結代表另一個階段的開始，接下來既要小心術後護理，避免出現併發症，同時亦不能忽略照顧病人的復康及情緒。」

已經完成行醫的第三個十年，鍾醫生仍然致力將自己強項，包括處理燒傷及創傷性傷口、唇顎裂、面部或乳房重建手術的寶貴經驗傳承下去，他說：「以前自己完成手術會有滿足感，但現在看到後輩順利處理複雜的手術，才是我最期待的畫面。」



傑出員工  
Outstanding Staff

鍾漢平醫生  
副醫院行政總監 / 顧問醫生 (外科)  
東華醫院  
Dr Joseph Chung  
Deputy Hospital Chief Executive / Consultant (Surgery)  
Tung Wah Hospital

Working in surgery for 33 years, Dr **Joseph Chung** reviewed his career and concluded: the first decade as a doctor is to learn and undergo training, then moving on to enhance his expertise in a specific field, and eventually to share the knowledge and contribute to the society as one completes a twenty-year journey in his medical career.

In retrospect, the greatest gain for Dr Chung was the essence of observation and the spirit to always put forward for patients, as the saying goes, 'a straw shows which way the wind blows'. Back in 1998 when he joined Tung Wah Hospital, during his ward rounds he realised a number of the elderly patients were suffering from pressure ulcers, however not much assistance could be offered due to the resource constraint. He then used donation funding to purchase and provide pressure relief mattress for high-risk patients in order to prevent them from having bedsores. Moreover, he has been reaching out to relevant doctors, nurses, occupational therapists and nutritionists to jointly provide wound care training since 2004 with a view to passing on the knowledge to prevent and treat pressure ulcers.

Every surgery tells a story. Dr Chung recalled a female patient whose face was severely burnt in a fire, and looked particularly depressed despite the evident recovery of her physical condition. Later it was learnt that she did not only lose her job, but was divorced by her husband. In this light, Dr Chung realised the importance of psychological support for the patient to overcome the ordeal. "The end of the surgery also signifies the beginning of a new chapter in one's life. Although postoperative care is vital for the prevention of complication, the rehabilitation and emotions of the patients are equally important," Dr Chung explains.

Stepping into the fourth decade of his career, Dr Chung is keen to share his expertise and experience in treating burns, traumatic wounds, cleft lip and palate, as well as face or breast reconstruction surgery. "I used to feel the satisfaction from completing a surgery, but now it is even more rewarding to see my juniors succeeding in a complex operation."

是甚麼原因令人打一份工打足27年？戴秀雲的答案是：「這些年一直與優秀的骨髓移植團隊共事，我從他們身上學懂待病如親的態度和相關的醫護知識，持續學習不但令我長知識，也教我保持對工作的熱誠，這是我愛上這份工的原因。」

秀雲1994年入職，負責行政部的清潔工作，數年後，加入造血幹細胞骨髓移植門診部及日間護理中心工作至今，時任上司建議她修讀健康服務助理的課程和考取抽血員資格。「我好感激這位上司不斷鼓勵我持續進修，讓我培養出好學的精神。」她說。

早前，有位患血癌的精神科病人在血科門診等候區大吵大鬧，誓言不抽血，同行父母年紀老邁，有心無力，秀雲本著幫病人的心，即報讀精神健康課程，學習與病人溝通的秘訣。現在，該病人覆診時不再吵鬧，還會乖乖捲起衣袖，讓秀雲抽血。她笑言：「友人說學費有點貴，但我能將所學實踐在工作上，令他合作地抽血和維持門診運作暢順，我覺得物超所值！」

抽血，看似簡單，其實很高危。秀雲記得2003年為「沙士」病人抽血時，心中有些怯，但同時也有一股強大的力量提醒她「我抽血的技術好一點，病人的痛苦就會少一點；我對病人關心多一點，病人的心就會溫暖一點」，堅定的信念教她克服一切的恐懼。



傑出員工  
Outstanding Staff

戴秀雲  
健康服務助理 (內科)  
瑪麗醫院  
Tai Sau-wan  
Health Care Assistant (Medicine)  
Queen Mary Hospital



## An enthusiastic phlebotomist

# 對抽血的熱誠

What keeps your passion in a career for 27 years? Tai Sau-wan says, "I fell in love with my job after all these years working with the outstanding bone marrow transplantation team. They taught me to treat the patients like family, and equipped me with the medical knowledge. It is a journey of continuous learning that keeps me passionate about what I do."

Sau-wan joined the administrative department as a cleaner in 1994. A few years later, she was transferred to the Haematopoietic Stem Cell Transplantation (HSCT) Out-patient Clinic & Ambulatory Care Centre where she had been working until now. In retrospect, her then supervisor suggested her to apply for health care assistant training and obtain the qualification as a phlebotomist. "With the immense encouragement from my supervisor, I have developed a passion for learning. I am truly grateful for that."

Earlier a psychiatric patient, who was diagnosed with leukemia, had made a scene at the waiting area of the HSCT Out-patient Clinic and refused to have his blood drawn. His parents were already in their old age and felt too helpless against the situation. That inspired Sau-wan who then put into action to study a mental health training course to acquire communication skills with patients. Ever since she put her knowledge into practice, the patient had stopped the bawling and would even roll up his sleeve for blood-taking when he came back for consultation. "My friend said the course was a bit costly. Nevertheless, if what I have learned could calm the patient down and facilitate the operation of the clinic, it is well worth it."

The procedure of blood draw is not as simple as it looks. Recalling the SARS epidemic in 2003, Sau-wan honestly felt nervous every time she drew blood with the SARS patients. That said, she stood by her belief and overcame her fear, that is "better techniques would relieve the pain for patients, and more love and care would cheer them up."





# 啟發

## Inspiration



**19** 九龍中醫院聯網新冠肺炎檢測團隊  
KCC COVID-19 Laboratory Testing Team

**20** 威爾斯親王醫院內鏡團隊  
PWH Endoscopy Team

**21** E-fill 覆配易  
Implementation of Drug Refill Services (DRS) in HA

**22** 陶敏之醫生  
Dr Thomas Dao

**23** 麥肇嘉醫生  
Dr Mak Siu-ka

### 啟發 /

學習是一個循環不息的旅程。

你，可以從前人身上學習，然後創出自己的一套；也可以分享智慧經驗，啟發他人。這一種互動，目標只為完善病人服務。

### Inspiration /

Learning is a lifelong journey. Draw inspiration of your own from the commitment and dedication of your colleagues as they care for others, then enlighten others with your wisdom and insights. The ultimate goal is to optimise our patient service.

## 智謀妙法 加快檢測

### Timely tactics to cope with the upsurge in testing volume



傑出團隊  
Outstanding Team

九龍中醫院聯網新冠肺炎檢測團隊  
伊利沙伯醫院 / 香港兒童醫院 / 廣華醫院  
KCC COVID-19 Laboratory Testing Team  
Queen Elizabeth Hospital / Hong Kong Children's Hospital / Kwong Wah Hospital



團隊名單 Team List



2019冠狀病毒病來得既急且快，伊利沙伯醫院（伊院）病理學部即時變陣，集合分子生物學、微生物學及其他病理學部同事，聯同香港兒童醫院的化驗師，組成核酸檢測團隊，應付每日平均逾千個檢測樣本，並從人手、檢測流程和方法作出全新安排。隊長兼伊院臨床微生物學顧問醫生**龍振邦**稱，疫情來得很急，同事只能「邊做邊學」，關鍵是讓不同成員發揮專長，用以下四招應付頑疫。

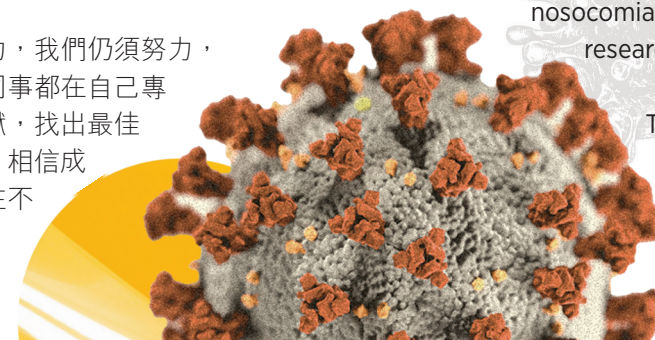
- 培訓人手：協助培訓大量化驗師做核酸測試，由原本只有數位增至約30多位，應付每日龐大的樣本量。微生物實驗室更提供廿四小時核酸測試服務。
- 編寫程式：由於樣本資料格式和包裝不一，團隊自行研發並編寫程式，連接醫院系統和實驗室儀器及硬件，將程序標準化、電腦化及自動化，以提高資料的準確度。
- 實證為本：醫生收集和分析實驗室數據，確認深喉唾液樣本亦能有效地檢測新型冠狀病毒，並將結果刊登於醫療期刊，增強醫護信心，方便收集樣本及減少醫護使用個人防護裝備。
- 分析病毒株：以次世代基因排序技術分析病毒株來源，以分辨是院內感染還是社區感染，有助研究及制定感染控制措施。

滅疫尚未成功，我們仍須努力，但可以肯定同事都在自己專業上作出貢獻，找出最佳的應對方法，相信成功之日，就在不遠矣。

With the rapid onset of the COVID-19 outbreak, the Department of Pathology at Queen Elizabeth Hospital (QEH) immediately adopted different strategy by bringing together colleagues from molecular biology, microbiology and other subspecialties of pathology, as well as medical technologists from Hong Kong Children's Hospital, to form the nucleic acid testing team to cope with a daily average of over 1,000 testing specimens, alongside the new arrangements in staffing, testing procedures and methods. The team leader and Consultant Medical Microbiologist at QEH, Dr **David Christopher Lung**, says that the pandemic was swift and thus colleagues could only 'learn by doing'. Providing the team members the opportunity to bring their expertise into play, they deployed the following four measures to tackle the pandemic.

- Staff training: The number of staff performing nucleic acid testing has expanded from just a few to about 30 to cope with the huge daily testing volume. Round-the-clock testing was provided in the Microbiology Laboratory.
- Programming: Given the various data format and packaging of specimen, the team researched and developed an in-house computer programme to link up the hospitals' systems with the laboratory equipment and hardware, with a view to enhancing the accuracy of data with standardised, computerised and automated systems.
- Evidence-based: Laboratory data were collected and analysed by clinical professionals to prove that deep-throat saliva specimens could detect the SARS-CoV-2 virus, and the findings were published in medical journals. Such evidences can boost confidence among the healthcare staff, make specimen collection more convenient and help reduce the use of personal protective equipment.
- Analysis of viral strains: Next Generation Sequencing service was applied to analyse the sources of virus, so as to distinguish the cases between nosocomial and community infections, and facilitate the research and development of infection control measures.

The battle against the pandemic is still far from over, yet the team remains dedicated in contributing their best efforts and expertise to deal with it, in the belief that we shall overcome it before long.





# 內外同行「鏡」臻完美 Dream team to achieve the best endoscopy services



傑出團隊  
Outstanding  
Team

威爾斯親王醫院內鏡團隊  
威爾斯親王醫院  
PWH Endoscopy Team  
Prince of Wales Hospital



團隊名單 Team List



90年代，大腸癌並非本港最常見的癌症，但其後數年個案驟增，政府遂於2016年推行「大腸癌篩查先導計劃」，資助50至75歲、沒有大腸癌症狀的香港居民每兩年在私營機構接受篩查。

有份參與推動計劃的威爾斯親王醫院內鏡團隊，早已察覺到確診數字趨升，故於1999年開始向政府建議推行預防大腸癌的篩查工作。為了收集更多本地數據，團隊主動在2008年至2012年為逾一萬名市民進行自願性檢查，結果發現有三成健康無症狀的市民患有大腸瘻肉，其中部分屬高風險有機會演變為癌症。最終，有關數據促使政府於2016年在全港推行「大腸癌篩查先導計劃」，藉此提醒市民大腸癌不容忽視，要預防及盡早治療。

另外，團隊同時研究如何以內鏡提供更好治療，隊長兼內鏡中心總監趙偉仁教授參考外國經驗，2004年在本港進行首個內鏡黏膜下剝離術。他形容手術原理好比切「片皮鴨」般把瘻肉清除，好處是創傷性較低。其後，他與團隊將實戰經驗分享至其他醫院，現時醫管局七個聯網均有醫院提供此項手術。

「我們是全港首支包括外科及內科醫護的內鏡團隊，提供更全面的醫療分析。隨著治療技術越趨複雜，現已加入麻醉科成員及病人服務助理。至於內鏡專科護士更因要操作儀器，協助止血及擺放支架，故我們首推內鏡護士24小時當值，為急症病人做好準備。」趙醫生形容，他們就如交響樂團各司其職，在合作中展現絕佳默契。

In the 1990s, colorectal cancer was not the most common cancer in Hong Kong, but the number of cases increased dramatically in the following years. In 2016, the government launched the Colorectal Cancer Screening Pilot Programme, which subsidises asymptomatic Hong Kong residents aged between 50 and 75 to receive screening service in the private sector every two years.

Given the increase in the number of confirmed cases, the endoscopy team at Prince of Wales Hospital envisaged the need of colorectal cancer screening and thus recommended it to the government as early as 1999. In order to collect more local data, the team took the initiative to conduct voluntary screening for more than 10,000 people from 2008 to 2012, and found that 30% of healthy and asymptomatic citizens had colorectal polyps, some of which were at high risk of developing cancer. Eventually, the data prompted the government to launch the Colorectal Cancer Screening Pilot Programme in 2016, with a view to raising public awareness about prevention and early treatment of colorectal cancer.

In addition, the team is also looking for better treatment through endoscopy. Professor **Philip Chiu**, team leader and Director of the Endoscopy Centre, performed the first endoscopic submucosal dissection in Hong Kong in 2004 with reference to overseas experience. He describes that the removal of polyps is like 'slicing the Peking Duck', with the advantage of less invasiveness. Since then Professor Chiu and his team have then shared their experience with other hospitals, and now this operation is being adopted in all seven clusters.

"We are the first endoscopy team in Hong Kong to pioneer interdisciplinary endoscopy services, providing a more comprehensive medical analysis. With the increasing complexity of treatment techniques, anesthetists and patient care assistants have joined the team as well. We are also the first in Hong Kong to introduce on-call endoscopy nursing support for emergency cases, providing essential support in controlling the instrument and bleeding, as well as placing stents." Professor Chiu describes the team as a symphony orchestra, each performing their own duties while working together in perfect harmony.

為減少專科門診病人剩藥及誤用藥物風險，醫管局總辦事處與四個聯網在2017年起推行「覆配易」覆配藥物服務先導計劃，分階段為符合條件的內科專科門診病人整合及覆配藥物，截至去年4月已有約兩萬名病人受惠。團隊形容過程是從實踐中摸索，今日的成果得來不易。

隊長兼高級藥劑師顏文珊及團隊成員解釋，計劃看似簡單，病人或家屬只需按「免診領藥單」上的日期到藥劑部指定櫃檯取藥，但事實上背後涉及跨院、跨部門、跨專業的參與，過程中需不斷按臨床經驗而作出修訂，同時融合新科技元素，為日後發展智慧醫院藥劑服務鋪路，當中包括設立電腦系統以及用大數據分析篩選合資格病人、建立臨床資訊管理系統與藥劑管理系統互通的渠道，還有取藥電子化等。

「覆配易」也加強了藥劑師在跨專業團隊中的角色。在計劃下，有藥劑師每日覆檢即將要覆配的藥單及整合相關病人的藥物，若發現病人曾入院或需更改處方，會致電病人或安排會面作諮詢。成員們稱，「由於醫生診症時間有限，若藥劑師能事前與病人溝通，可分擔醫生診症時要覆核藥物處方的工作量，病人亦更了解正確的用藥資訊，是一個雙贏局面。計劃更創出許多發展機遇，埋下醫療新常態發展的種子，不少同事愈做愈起勁呢！」



# 得來不易的「覆配易」 Endeavours in E-fill

To reduce the risks of drug surplus and drug misuse among specialist outpatients, the HA Head Office and four clusters have jointly launched a pilot programme on 'E-fill' Drug Refill Services since 2017 to consolidate and refill drugs for eligible medical outpatients in phases. As at April last year, about 20,000 patients have benefited from the programme. The team describes the process as an endeavour in continuous improvement and the results today have not been easy to achieve.

Teresa Ngan, the team leader and Senior Pharmacist, and her team members explain that the programme seems simple to execute, as it only requires patients or their families to collect refill medications at designated counters of hospital's pharmacy according to the refill schedules on the prescription slips. In fact, it involves cross-hospital, inter-departmental and multi-disciplinary participation. The process is constantly modified in the light of clinical experience, and technological elements are incorporated to pave the way for the future development of Smart Hospital pharmacy services. These include the setting up of computer systems and the use of big data to screen eligible patients, the establishment of messaging channel between the Clinical Management System and the Pharmacy Management System, as well as the digitalisation of drug collection.

The service has also strengthened the role of pharmacists in multi-disciplinary collaboration. Under the programme, pharmacists will review upcoming prescriptions daily and reconcile the relevant patients' medications. They will call patients or arrange face-to-face consultations if the patients are found to have been admitted to hospital or need prescription changes. The members say, "As doctors have limited time for consultation, if pharmacists can communicate with patients in advance, they can share the workload of doctors in reviewing prescriptions during consultation, and at the same time patients can understand more about use of medication, which is a win-win situation. The programme has also led to many opportunities and planted the seeds for future development under the new normal of healthcare service. So our colleagues are getting more and more engaged in it."



傑出團隊  
Outstanding  
Team

E-fill 覆配易

醫院管理局總辦事處 / 新界東醫院聯網 / 新界西醫院聯網 / 港島東醫院聯網 / 九龍東醫院聯網

Implementation of Drug Refill Services (DRS) in HA  
Hospital Authority Head Office/ New Territories East Cluster/  
New Territories West Cluster/ Hong Kong East Cluster/  
Kowloon East Cluster



團隊名單 Team List



## 遇上恩師的福氣 The blessing of meeting an inspiring mentor

**位**於葵涌麗祖路的下葵涌普通科門診診所，看起來跟其他普通科門診沒兩樣。不過，自2016年開始，**陶敏之**醫生便賦予它一個重要的獨特色：香港首間提供心臟超聲波檢查的普通科門診。

陶醫生加入家庭及基層醫療部五年後，為了更快更準地找出病因，總想為有疑似心臟毛病的病人進行心臟超聲波檢查。礙於沒有相關知識，他便在工餘時間攻讀超聲波理學碩士課程，畢業後幸得部門主管及瑪嘉烈醫院內科部支持，才能到心臟檢查中心邊學邊做。

「時任瑪嘉烈醫院心臟科的蔡致中醫生是我的恩師，他耐心講解病例，將畢生經驗傾囊相授，我才能成為第一批會照心臟超聲波的家庭科醫生。」說起恩師，陶醫生頓了頓，熱淚盈眶，因為恩師三年前不幸因病逝世。「我由對心臟超聲波一竅不通到後來考到國際認可的資格試，恩師給我的指導及鼓勵有很大得著，我決心將他的無私精神傳承下去，現時我在學院及部門診所教授家庭醫生和同事如何運用超聲波檢查腹部及心臟。」

他補充，「以前我們只可以將有需要的病患轉介到聯網醫院，但由2016年起，我們能短時間內在普通科門診為病人進行臨床心臟超聲波檢查，若情況嚴重才轉介至醫院，既可減輕醫院負擔，亦縮短了嚴重病患等候入院檢查的時間。」

陶醫生現正攻讀醫學倫理與法律的法學碩士課程。他願意為病人多走幾步、想學習更多的魄力，大概也是先師身教的成果。

The Ha Kwai Chung General Out-patient Clinic on Lai Cho Road, Kwai Chung, looks just like any other General Out-patient Clinics (GOPCs). However, since 2016, Dr **Thomas Dao** has given it a vital role: the first GOPC in Hong Kong to provide point-of-care echocardiography.

Five years after joining the Department of Family Medicine and Primary Health Care, Dr Dao always wanted to perform echocardiography on patients with suspected heart problems in order to identify the causes more quickly and accurately. To acquire relevant knowledge, he studied for a Master of Science degree in diagnostic ultrasound after work and was supported by the Department Head and the Department of Medicine of Princess Margaret Hospital to learn the skill in the Echocardiography Laboratory.

“Dr Choy Chi-chung, cardiologist of Princess Margaret Hospital at that time, was my mentor. He explained the cases patiently and shared his profound experiences with me. Only then can I become the first group of family doctors who can perform cardiac ultrasound.” Dr Dao wept silent tears when he recalled memories with Dr Choy, who sadly passed away three years ago. “I went from knowing nothing about echocardiography to getting a professional qualification, the guidance and encouragement given by my mentor was rewarding. I am determined to pass on his selflessness and now I share with family doctors and colleagues on how to use point-of-care abdominal ultrasound and echocardiography, both in the College and my department.”

He adds, “In the past, we could only refer patients in need to the cluster hospitals, but since 2016, we have been able to perform point-of-care echocardiography for patients in our GOPC within a short period of time, and refer them to the hospital only if they are seriously ill. This reduces the burden on the hospital and shortens the waiting time for patients with serious conditions to see cardiologists in hospital.”

Dr Dao is currently pursuing a Master of Laws degree in medical ethics and law, and his desire to walk an extra mile for his patients and to learn more is probably the result of his mentor’s example.



**傑出員工**  
Outstanding Staff

**陶敏之醫生**  
副顧問醫生（九龍西醫院聯網家庭醫學及基層醫療部）  
仁濟醫院  
**Dr Thomas Dao**  
Associate Consultant (KWC Family Medicine and Primary Health Care)  
Yan Chai Hospital

**專**注腎科工作34年的**麥肇嘉**醫生，多年來全方位為腎病患者爭取最好的治療。科研方面，他與團隊發表有關透析治療的研究成果，和使用制霉菌素預防腹膜真菌感染的做法均成為國際參考指引。

實戰方面，麥醫生的團隊在2015年引入「腹腔鏡植入術」，為接受腹膜透析的病人植入導管，對比起傳統的剖腹術，好處是傷口較小和成功率較高，此技術為醫管局首例，其他醫院腎科部門亦陸續參考應用。

醫管局多年來積極推動家居「腹膜透析優先」政策，提升患者的自主權及生活質素，讓病人能夠保持正常生活，更能保護剩餘的腎功能。身兼醫管局中央腎科委員會主席的麥醫生和其他委員積極推動完善這政策，盡量提供更多家居透析的選擇，包括擴大自動化腹膜透析的名額，和引入新一代的家居血液透析儀器，讓更多合適的病人能留在他們最感安舒的家中接受治療。

為了讓更多患者透過器官移植重獲新生，麥醫生積極在本港推動器官移植及「腎臟配對捐贈先導計劃」，期望讓願意捐出腎臟但又不適合自己親人的病人家屬得到多一個選擇。他說：「配對池的組合愈多，我們成功配對的機會愈高，期待順利完成一次手術，病人對計劃的接受程度必然提高。」

麥醫生謙稱，醫學知識日新月異，自己必須要持續學習、探索，才能把工作做好。他亦非常珍惜和感激工作「拍檔」們對自己的信任，共同前行。



**傑出員工**  
Outstanding Staff

**麥肇嘉醫生**  
顧問醫生（內科及老人科）  
廣華醫院  
**Dr Mak Siu-ka**  
Consultant (Medicine & Geriatrics)  
Kwong Wah Hospital



## 行無止境的腎科先鋒 Nephrologist pioneer and lifelong learner

With over 34 years of experience in nephrology, Dr **Mak Siu-ka** has strived to offer the best treatment for his patients. Among clinical research, his team’s published results on dialysis therapy and the treatment and prevention of fungal peritonitis have been cited as references in international guidelines.

On the clinical side, his team, being the first unit in Hospital Authority (HA), introduced the implantation of Tenckhoff catheter through a peritoneoscope in 2015. When compared with the traditional mini-laparotomy, this technique performed under local anesthesia, involves a much smaller incision wound and has been associated with a much higher success rate. As such, the methodology has been adopted in some other renal units in recent years.

HA has been adopting the peritoneal dialysis (PD) first policy when continuous ambulatory peritoneal dialysis (CAPD) would allow patients to manage their therapy at home, while at the same time accommodating their daily activities and thus resuming normal life. The benefits of PD in terms of quality of life as well as preservation of residual renal function have received support from the medical literature. Dr Mak has been working with members of the HA Central Renal Committee (CRC) in pursuit of enhancement of this PD-first policy, by promoting the home-therapy recommended peritoneal dialysis first policy in recent years. They aim at enabling more suitable patients to stay on dialysis therapy at home through enhanced provision of automated peritoneal dialysis and home haemodialysis.

With renal transplantation being the best renal replacement therapy, as Chairman of CRC, Dr Mak has been engaged in the local promulgation of transplantation, and in particular the new initiative ‘Paired kidney donation pilot programme’, where the potential life donors in the families are given an additional option, when they are willing but unable to donate their organs to their loved ones. “A big enough donor-recipient pool would be critical to increase the chance of finding matched pairs. We look forward to witness the first successful surgery, that would help augment the acceptance of this programme by all parties”, says Dr Mak.

Dr Mak embraces continuous learning, to match his clinical duties with the ever evolving medical knowledge, and he treasures the trust from his teammates in renal units and medical department.



## 快問快答

## Q&amp;A WITH 13 YOUNG ACHIEVERS

最啟發你的一句座右銘是甚麼？

**Which motto inspires you the most?**

「United we stand. United we work. (團結就是力量)」。我在醫院工作最大的感受是，同事以病人福祉及服務為先，往往願意多走幾步以達致理想效果。在這種團結及和諧氣氛下工作，令人十分安心。

‘United we stand. United we work.’ It is very impressive that colleagues in the hospital often go the extra mile to provide better service and care for patients’ well-being. Working in such a united and harmonious atmosphere is very rewarding.

最想聽到的稱讚是甚麼？

**What is the most important compliment you would like to hear?**

每一個稱讚、意見或批評我都同樣重視。人總會有盲點，所以我珍惜每一位對我的指導，無論是稱讚或批評，都是推動我不斷進步的動力。

I treasure every compliment, comment or criticism. There are always blind spots, so I appreciate all the guidance received, no matter it is a compliment or a criticism, which is no doubt the motivation to keep me growing.

在工作上最不可或缺的一樣物件是甚麼？

**What is the most indispensable item in the workplace?**

智能電話。平日處理公務，如覆電郵、文書工作、找資料等都可用電話解決，而最重要是能夠隨時隨地與各部門同事保持緊密溝通，遇到問題時可即時處理。

A smart phone. I can use it to check and reply emails, compile work document or find information. It helps me stay connected with colleagues at any time so that problems can be handled instantly.

上班第一件事和下班回家第一件事分別是甚麼？

**What is the first thing you do when you are back to office and get home from work?**

上班第一件事是喝咖啡，讓自己從漫長的屯門公路中醒過來。作為「貓奴」的我，下班回家第一件事便是餵貓同「吸貓」，親親牠們，以撫疲憊的身心。

Drinking coffee is the first thing I do when I arrive office, which helps wake me up from the long drive along the Tuen Mun Road. When I get home from work, I will feed the cats first and kiss them to soothe my tired body and mind.

蕭仲怡  
Ada Siu

助理院務經理（行政部）  
葛量洪醫院  
Assistant Hospital Manager  
(Administrative Services  
Division)  
Grantham Hospital

工作中最滿足的事是甚麼？

**What is the most satisfying experience at work?**

最滿足的事就是可以帶領醫院團隊成為癰瘤疤痕冷凍治療的先驅，為複雜疤痕病人提供更有效的治療，解決長久的痛楚及痕癢。同時引入甲狀腺腫瘤射頻消融技術，為病人帶來新穎的微創治療手術。

The most satisfying experience would be leading my team in pioneering intralesional cryotherapy treatment for keloid scars. This is a novel technique which effectively alleviates the unbearable symptoms of pain and itchiness. Moreover, introducing radiotherapy ablation of thyroid nodules brings about a new minimally invasive treatment option to our patients.



林振文醫生  
Dr Jeren Lim  
副顧問醫生（外科）  
基督教聯合醫院  
Associate Consultant (Surgery)  
United Christian Hospital

現在的你與初入行時有何不同？

**How different are you now as compared to the earlier days of your career?**

我剛入行，做事總是戰戰兢兢，害怕犯錯，擔心影響病人安危。幸而，這些年得到團隊互相鞭策和上司的悉心指導，我變得更有自信，悟出熟練的技巧和關心病人兩者兼備，才是治療的王道。

When I just started my career, the fear of making mistakes is overwhelming, especially when patient's well-being is at stake. I am grateful for the encouragement and guidance I received throughout these years which reinforced my confidence. I have learnt that both proficient techniques and empathy to patients are the essence of a professional doctor.

遇到困難時，你如何克服？

**How do you overcome challenges?**

我會抱著積極和冷靜的態度面對問題，聽取朋友和師長的意見，從另一角度分析難題。我視挫折為一份禮物、一項挑戰，從困難中成長，變得更堅強和自信，我深信態度決定勝負。

I would stay positive and calm, meanwhile seek opinions from friends and seniors, which could often give me a fresh perspective on the issue. I view setbacks as a reward and a challenge for me to become stronger and more confident. Attitude is the key to success after all.

最近的一個開心大發現是甚麼？

**What is your latest discovery?**

我喜歡小動物，最近發現只要跟家中的一對十個月大的貓姊弟玩玩毛絨球，落街散散步，時間就會飛逝，果真有「快樂不知時日過」之感！

I love animals and I found that time flies when I play with my 10-month-old sibling cats at home or go for a walk with them.

如果有一項工作上的特異功能，你想要甚麼？

**What kind of supernatural powers and abilities do you want at work?**

讀心術。如果我懂讀心術便可對病人的家庭處境及心路歷程有更深的明白和理解，提供更適切的協助，陪伴他們度過困境。

Mind reading. If I could read patients' mind, I could have a deeper understanding of their family situations and feelings, so that I can provide proper assistance to help them to overcome difficulties.



吳子聰  
Roy Ng

助理社會工作主任（醫務社會服務部）  
香港兒童醫院  
Assistant Social Work Officer  
(Medical Social Services Unit)  
Hong Kong Children's Hospital



遇到困難時，你如何克服？

**How do you overcome challenges?**

我會嘗試站在他人的角度檢視問題，找出問題癥結，然後不斷勉勵自己「跌倒不可怕，重新站起來再試一次」！這也是我育兒之道。

I would take a step back, as well as step into others' shoes, to identify the crux of the problems. Moreover, I stick to my motto, "it is ok to fall, just pick yourself back up and try again" — that is also my way of parenting.

陳錦明醫生  
Dr Albert Chan

副顧問醫生（麻醉及深切治療部）  
威爾斯親王醫院  
Associate Consultant  
(Anaesthesia and Intensive Care)  
Prince of Wales Hospital

如何與同事建立良好關係？

**How do you build a harmonious relationship with your colleagues?**

我有一個簡單的信念——與我共事的同事都是「聰明、能幹、盡心盡力、求進步」的人，我不指責也不找別人的毛病，而是努力了解其背後的原因，再作出指導，藉此與同事建立良好關係。

I believe my colleagues are intelligent, capable, care about doing their best and willing to improve themselves. Rather than finding fault in others, I would adopt a stance of curiosity and explore their underlying frames and reasons, and then engage them in learning conversations.

工作中最滿足的事是甚麼？

**What is the most satisfying experience at work?**

有兩件事會為我帶來滿足感，一是同事的進步，二是治療病人成效佳，如果兩者交織在一起就最完美。我熱衷培訓工作，樂於與其他人共享智慧和經驗，因為一人的能力有限，若果能培訓更多人，受惠的病人就會倍增。

There are two rewarding things in my line of work — staff improvement, as well as good patient outcomes — particularly when they intertwine. I have always been engaged in providing quality training, and sharing of knowledge and personal experiences with colleagues. Having said that, there is a limit to what a single person like myself can do. Thus, maximising the efforts in the staff training and education would mean that more patients will benefit exponentially from our dedication to enhancing the quality and safety of healthcare.

現在的你與十年前有何不同？

**How are you different from the person you were ten years ago?**

以前的我時間比現在多，凡事參與、研究和親力親為，但現在職務繁多，時間有限，故遇到新的職務或研究項目時多了考慮成本效益，或將工作分配給他人處理。

In the past, I used to have more time and would do everything by myself, but now as my workload increases, I have to consider the cost effectiveness of every new project and thus may allocate work to others.

你最近在看的一本書是甚麼？

**Which book are you reading recently?**

我最近在看「有聲書」《Elon Musk: Tesla, SpaceX, and the Quest for a Fantastic Future》。我最深刻 Elon Musk 在創業路上以非一般思維去應對難題，如聘用剛畢業的大學生去自行研發和製造火箭電子零件，取代傳統大型供應商，減低生產成本和加快產品修改速度。這是一本十分有趣的書，值得一看。

I am reading an audiobook *Elon Musk: Tesla, SpaceX, and the Quest for a Fantastic Future* recently. I was very impressed by Elon Musk's unconventional approach to entrepreneurship, such as hiring fresh graduates to develop and manufacture electronic rocket components, replacing traditional large suppliers, in order to reduce the production costs and speed up the product modifications. This is very interesting and worth reading.

如果有一項工作上的特異功能，你想要甚麼？

**What kind of supernatural powers and abilities do you want at work?**

我想人腦可以直接與電腦連繫，不需透過屏幕、聲音、滑鼠和鍵盤來讀取或輸入資訊。

I wish my brain could connect to the computer directly, without having to read or enter information through screens, voices, mouse and keyboards.

最難忘的一次行醫經歷？

**What is your most memorable patient consultation?**

曾替一位患有白內障的婆婆做手術，她在一次術後的定期覆診，突然從籐籃取出一把香蕉，當場撕下兩條送給我以表謝意，令我非常難忘。還有，病人的每句道謝，都是我工作的原動力。

I have once performed a cataract surgery on an old lady and when I conducted a post-operative follow-up with her, she suddenly took two bananas out of her basket and gave me as a token of gratitude. I was so surprised and felt so thankful. Besides, every word of thanks from a patient is the driving force of my work.

在工作上最不可或缺的一樣物件是甚麼？

**What is the most indispensable item in the workplace?**

裂隙燈。它能幫我聚焦檢查眼睛的不同部位，用以處理包括黃斑點、視神經和視網膜血管等問題，以及診斷本港長者常見的失明病因。

Slit lamp. It helps me focus on different parts of the eye and cure problems such as macula, optic nerve and retinal vessels. Also, it is a key tool to diagnose common causes of blindness among the elderly in Hong Kong.



方欣顯醫生  
Dr Benjamin Fang

顧問醫生（放射科）  
瑪麗醫院  
Consultant (Radiology)  
Queen Mary Hospital

現在最想學習的新事物是甚麼？

**What do you want to learn recently?**

人工智能。2019冠狀病毒病的突襲，為各行各業帶來數碼電子化的契機，醫護界亦正將病人護理融入智慧醫院的管理模式。我們要與時並進，學習人工智能是不可或缺，我相信它將為社會帶來一場大改革。

Artificial intelligence (AI). The COVID-19 pandemic has accelerated digitalisation in all walks of life, including the healthcare sector where development of smart hospital is the trend. We need to keep our fingers on the pulse of time, and learn AI, which will bring a revolutionary change to our society.

區自力醫生  
Dr Au Chi-lik

駐院醫生（眼科）  
東區尤德夫人那打素醫院 /  
東華東院  
Resident (Ophthalmology)  
Pamela Youde Nethersole Eastern  
Hospital / Tung Wah Eastern  
Hospital





你最常提醒自己的一句話？

**What is the question that you ask yourself most?**

「我還可以做得更好嗎？」。工作上，我希望達到盡善盡美，所以做決定前，我會問自己的計劃及決定是否最完善，經常提醒自己要「三思而後行」。

“Can I do better?”. I want everything to be perfect at work, so before I make a decision, I will ask myself if I have the best plan and decision. I always remind myself to think twice before I act.

最喜歡醫院哪個地方？

**What is your favourite place in the hospital?**

手術室外的會客室。在我眼中，它是一間多功能的房間，可收看手術直播，向同事偷師、又可在設有先進軟件的工作站作術前規劃，向病人家屬詳細講解。最貼心的是有一張沙發，讓同事在這裡「又電」後，再應付繁忙的工作。

Meeting room outside the operation theatre. To me, it is very multifunctional in which you can watch the live operation and learn from other colleagues. There is also a work station equipped with the state-of-art technology, which facilitates preoperative preparation and explaining operation details to patients' family members. The best part about the room must be the comfy sofa, where colleagues can get recharged before pulling themselves back into hustle and bustle.

你最想感謝誰？

**For whom do you feel the most grateful?**

首先是我的提名人任廣銳醫生，他的遠見和「貼地」想法，循序漸進地為部門奠下穩固基礎，還有傳授手術技巧給我的袁秉宙醫生和陳崇文醫生。當然，少不了我太太，她是我的最強後盾呢！

I would like to start off the list with my proposer, Dr Yam Kwong-yui. His visionary and realistic ideas had set a solid foundation for the progressive development of our department. Moreover, Dr Yuen Shing-chau and Dr Tan Chong-boon have taught me the operation skills. Having said that, I would not be able to make such accomplishment without my wife. She is my unsung hero!

林肇基醫生  
Dr Samuel Lam

副顧問醫生（神經外科）  
屯門醫院  
Associate Consultant  
(Neurosurgery)  
Tuen Mun Hospital



黃卓凝醫生  
Dr Sally Wong

副顧問醫生（病理學部）  
伊利沙伯醫院（現職於香港  
兒童醫院）  
Associate Consultant  
(Pathology)  
Queen Elizabeth Hospital  
(Currently in Hong Kong  
Children's Hospital)

你最喜歡的一套電影是甚麼？

**What is your favourite movie?**

《靈魂奇遇記》。提醒我要懂得感恩現時在工作中仍能找到很多「火花」，保持初心和熱誠。

*Soul*. It reminded me to be grateful for the 'sparks' in my daily work, as well as the motivation and passion of being a doctor.

工作中最滿足的事是甚麼？

**What is the most satisfying experience at work?**

能讓病人的病情有好轉，和改善實驗室工作流程及效率，都令我很有滿足感。譬如疫情期間我與同事們需要「度躉」如何以有限人手，應付快速增長的檢測需求。過程中，我學會處事要靈活變通，才能完善工作流程，令我變得更自信。

I get a lot of satisfaction from making patients feel better, and improving the workflow and efficiency of the laboratory. For example, my colleagues and I had to cope with the rapid increase in demand for COVID-19 testing with limited manpower during the pandemic. I became flexible to improve our laboratory workflow. Those make me more confident.

現在最想學習的新事物是甚麼？

**What do you want to learn recently?**

我想了解木旋的一切，從設計到製作。製作木旋需要透過眼、耳和手與旋轉中的木料交流，並使用手中的車刀仔細刮削木料，方可製成心中想像的形狀，感覺就如要細心聆聽及回應病人所需，才能提供適切治療一樣。

I want to learn everything about wood spinning, from making to using. I would like to communicate with the rotating wood through my eyes, ears and hands, and use the turning tool to shape the wood according to my design. It feels like listening carefully to the needs of the patient in order to provide the proper treatment.

如果有一項工作上的特異功能，你想要甚麼？

**What kind of supernatural powers and abilities do you want at work?**

「分身術」，將自己一分為二。一個「我」可以治療病人，另一個「我」可以研究創新的輔助器材或治療方法，甚或想想如何理順工作流程等，幫助病人和同事更多。

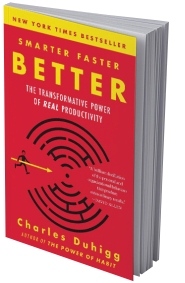
Bilocation, splitting myself into two. One can treat patients, while the other one can research innovative assistive devices or treatments, or think about how to streamline the workflow to help patients and colleagues.

你最近在看的一本書是甚麼？

**Which book are you reading recently?**

《Smarter Faster Better: The Transformative power of Real Productivity》，這本書幫助我反思自己的工作方式，並給我很多啟發，如「敏捷開發」等思維模式，讓我學習如何做事更快更好，實踐更有效的工作及管理模式。

*Smarter Faster Better: The Transformative power of Real Productivity*. The book has helped me to review the way I work and has inspired me a lot, such as the mindset of Agile methodology. I can learn how to work faster and better and practise more effective work and management skills.



如果不做職業治療師，最想做甚麼？

**If you were not an occupational therapist, what would you become?**

農夫！農夫是「大地治療師」，用心照顧農作物，愛惜每個生命。他們和醫護人員一樣，都有著一種堅持不懈的精神。

A farmer! Farmers are 'earth healers' who take care of crops and cherish every life. They share the same spirit of selflessness and dedication as the medical practitioners.

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Wong Shun-yiu

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遇到困難時，你如何克服？

**How do you overcome challenges?**

每當感到無所適從時，我會和太太或朋友分憂，當然最重要是相信自己，運用知識和過往經驗，積極面對難題！記著心態決定一切，人生總有高潮低谷，困境其實都只是人生一點小挫折而已，沒甚麼大不了！

When I get lost, I will share my worries with my wife or friends. The most important thing is to believe in myself and face the problems positively with my knowledge and past experience. I always remind myself that one's attitude determines his altitude in life and life is full of ups and downs. Difficulties are just small setbacks in life.

請舉出一個工作上的習慣。

**Share a habit at work.**

愛整潔，所以每日開工前我會先收拾整理各項物資，包括病床、儀器物品，或是醫療記錄等。在收拾過程中，評估工作的優先次序，盡早完成任務，避免做「死線戰士」。

I am tidy. I pack and organise all kinds of things including patient beds, equipment, and medical records, etc., before starting my work every day. I prioritise my work while tidying up so that I can complete all tasks as soon as possible and avoid being a 'deadline fighter'.

怎樣平衡工作與生活？

**How do you achieve work-life balance?**

懂得 Work Smart，善用時間。以前大部分時間都在學習、進修。現在還會兼顧家庭、陪伴子女成長。

Work smart and make good use of your time. I used to spend most of my time studying and learning, but now I also need to take care of my family and accompany my children.



楊啟宗  
Yeung Kai-jone

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Advanced Practice Nurse  
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Pamela Youde Nethersole  
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現在的你與十年前有何不同？

**How are you different from the person you were ten years ago?**

十年前，我是大學二年級學生，現在我是資深護師。由於醫管局正積極循智慧醫院方向發展，幾年前，我參與了部門自行研發的維生指數自動上傳系統，後來此系統成為醫管局發展維生指數自動上傳系統的雛型，讓醫護運用平板電腦工作，有助提升效率。

Ten years ago, I was a sophomore, and now I am an advanced practice nurse. As HA has been developing with a 'smart hospital' vision, I participated in the development of auto-charting system about patient vital signs by our department a few years ago, which turned out to be the prototype of HA e-vital system. With this system, frontline healthcare workers can use tablet devices at work, thereby bringing greater efficiency.

在工作上最不可或缺的一樣物件是甚麼？

**What is the most indispensable item in the workplace?**

智能電話，覆電郵、找資料、開會、做project，全靠它來處理。

A smart phone. This allows access and reply to emails, enables online research and conference meetings, as well as carrying out projects.

最近學習的新事物是甚麼？

**What have you been learning recently?**

作為醫院的護理資訊統籌，我正修讀護理學博士學位，希望日後以實證為本的方法促進醫院系統電子化和可持續發展。

As the coordinator of nursing informatics, I am currently pursuing a doctoral degree in Nursing, hoping to promote the electronic and sustainable development of the e-system in hospitals with an evidence-based approach.

在醫院內你最喜歡甚麼？

**What do you like the most in the hospital?**

當然是「人」，包括導師、同事和病人，大家都是我的好友和隊友，互相學習，齊齊「on-call 36小時」。有病人在疫情初期，擔心我會受感染，甚至想送外科口罩給我，他們這份情意，我都一一心領。

People, definitely, including mentors, colleagues and patients. They are all my friends and teammates whom we learn and spend our 'on-call 36' together. Some patients even wanted to bring me surgical masks in the early days of COVID-19 pandemic because they were worried that I might get infected. I have always appreciated their kindness.

現在的你與十年前有何不同？

**How are you different from the person you were ten years ago?**

年少輕狂的歲月，我一度很自我中心和喜歡鑽牛角尖。但這些年來在導師及同事們的引領下，我變得更成熟、更全面，唯一不變的，是我仍保持對工作熱誠的那團火。

When I was young, I had been self-centred and easily agitated by many things that did not work out the way I expected. As time goes by, and with the guidance by my mentors and colleagues, I have grown to be a more mature and all-rounded person. What remains the same is my passion for my work.

現在最想學習的新事物是甚麼？

**What do you want to learn now?**

現在最想跟女兒一同學鋼琴，雖已是「大齡學生」，但「有心不怕遲」，而且我肯定這是個難忘的經歷！

I would like to learn piano with my daughter. It might sound a bit old to start, but it is never too late to learn a new thing. I am sure it will be an unforgettable experience!



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Dr Ophelia Shek

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Caritas Medical Centre

你如何減壓？

**How do you de-stress?**

在忙碌生活中留一點空間給自己！我推介做靜觀練習來減壓；也可以做義工，很多醫護到落後國家行醫後，會重燃初心；又或跟醫科生互動，激發創新意念。

Take a moment out of your busy lives. I recommend doing meditation exercises to help reduce stress; volunteering is also a good idea to rekindle your passion, just like some healthcare workers who volunteer to work in developing countries. Interacting with medical students can also ignite your creative ideas.

你最想感謝誰？

**For whom do you feel the most grateful?**

醫學院裡有很多好老師，我十分感激已故的威爾斯親王醫院腫瘤科顧問醫生梁承暉教授，行醫逾30年，他即使患上癌症，仍堅持照顧病人及繼續教學。他就是那麼愛病人、同事和家人，是我的榜樣。

There are many great teachers in medical school. I am very grateful to the late Professor Leung Sing-fai, Consultant of Clinical Oncology at Prince of Wales Hospital, who had been a doctor for over 30 years. He continued to care for his patients and teach even though he was suffering from cancer. He loved his patients, colleagues and family so much and was a role model for me.



楊穎智醫生  
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工作中最擔心的事是甚麼？

**What worries you the most at work?**

自己或團隊會感到倦怠。醫院工作繁忙，相信每位醫護人員都面對過壓力，甚至有點情緒，皆因對自己的要求、擔心手術或治療未如理想，或病人出現併發症等，其實只要用正面心態樂觀面對就可以了。

I or my teammates will burn out. I believe every healthcare worker has faced stress and even emotions, often from the expectations of oneself, worries about unsatisfactory surgeries or treatments, or complications of patients, etc. In fact, we can face it with an optimistic and positive attitude.



顏海狄  
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“I AM STILL LEARNING.” — MICHELANGELO



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