



未來醫院

Future Hospital

編者的話

踏入2015年，多間公立醫院的重建、擴建或新建工程進行得如火如荼，新醫院有甚麼新亮點？醫管局服務如何切合未來需求？今期的封面故事（頁2至7）帶你先睹為快。

以數碼圖像取代傳統X光硬片的「數碼圖像技術」已在公立醫院實行。這項歷時多年的浩瀚工程，令臨床服務的安全度及效率進一步提升，亦為醫管局節省大筆公帑。從舊到新，同事如何排除萬難，成功推行新技術呢？第10至12頁的專題報道為你細細道來。

送馬迎羊，醫管局新春長跑又響鑼，有沒有方法跑得更快更好？封底專題介紹如何加強肌肉耐力，陪你應戰！《協力》祝各位跑手跑出好成績，並祝各位同事羊年吉星拱照、人人喜氣「羊羊」！

From the editor

The year ahead will see the continuation of redevelopment, expansion and building projects at various public hospital sites. This issue's cover story, which begins on page 2, scoops some of the highlights and explains how they will help the Hospital Authority enhance healthcare services for the people of Hong Kong.

The challenging job of replacing hard-copy films with digitalised images across the HA network was finally completed last year. The switch has not only increased patient safety and diagnostic accuracy, but will also result in a significant saving of funds over the long term. Find out how HA colleagues successfully conquered this daunting task in a special feature that begins on page 10.

With the year 2014 behind us, the Chinese New Year of the Goat is fast approaching, which means HA's annual New Year Run is just around the corner. If you hope to put in a strong performance or improve on your personal best, turn to the back page for some top tips from HA experts!

Finally, *HASLink* would like to take this opportunity to wish all colleagues a happy and healthy Chinese New Year and much good fortune in the Year of the Goat!

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醫院新趨勢 Building for future

為配合社會對醫療服務的需求，多間公立醫院先後展開大規模的重建、擴建或新建工程，《協力》今期從建築、科技、環保和服務模式四方面，與大家一同看看新醫院有甚麼新元素，令未來的醫院服務，更貼合病患的需求。

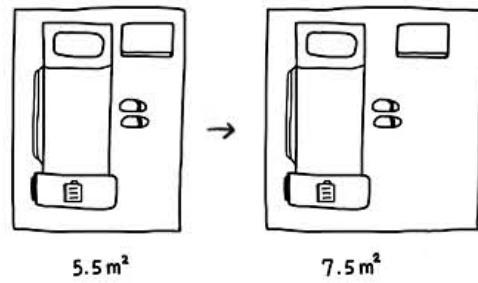
To address the evolving healthcare needs of the Hong Kong community, several Hospital Authority hospitals have initiated redevelopment, extension or new construction projects in recent years. In this issue of *HASLink*, we examine how architectural design, technology, eco-friendliness and service delivery are all playing a role in ensuring such projects meet the expectations and requirements of patients and other stakeholders – both now and in the future.

建築篇 Architectural Design

從「高瘦」到「肥矮」 ‘Short and stout’ in fashion for hospitals

現時的醫院外型仿如美女，大多直立高挑；但未來有機會「肥矮」地橫向發展，從理想去看，每層樓的面積大一些，可以安排相關部門例如手術室和深切治療部，X光診斷和麻醉科等在同一樓層；樓層少些，亦方便醫護人員盡快步行抵步，為病人診斷。與此同時，樓層少了，升降機也可減少，騰出的空間可作其他用途。

While lifestyle magazines may tell us that the ‘ideal’ body shape is tall and slim, the perfect profile for a hospital is quite the opposite – short and stout. A larger floor plate and fewer floors make journeys between critical areas such as operating theatres and intensive care units, as well as to and from high-traffic departments such as X-ray and anaesthesiology more efficient and convenient for patients and staff. Fewer floors also means fewer lifts – freeing up valuable space can be used for other purposes.



床位加闊 More room between ward beds

探過病的讀者，也許覺得公立醫院的病床空間非常擠迫，現時每張床連四周空間，平均約為5.5平方米左右，現時的大部份醫院未來會逐步將病床的空間增至7.5平方米或以上。為提升防感染能力及病人的舒適程度，希望未來的床位空間可再加闊。手術室的面積，部份日後亦會增加至120平方米，到時大型醫療儀器如電腦斷層掃描機、磁力共振機等，都可一併放入手術室內。

Limited space between beds in wards can make movement difficult for visitors and HA staff alike. Many of hospital upgrade and expansion projects now underway include ward designs that will help HA meet its objective of gradually increasing the space for each bed from the current average of 5.5 square metres (sqm) in most of its existing hospitals to over 7.5 sqm. HA also aims to increase the floor area of operating theatres, with some up to 120 sqm to accommodate medical equipment such as CT scanners and Magnetic Resonance Imaging (MRI) machines.



室內設計路路通 Interior design: form and function

病人在陌生地方接受治療，人生路不熟，心情容易緊張。新醫院在室內設計加添心思，例如可將牆壁塗上不同顏色，代表不同部門或樓層；甚至以卡通圖案代替地上的顏色指示線，既可讓病人放鬆心情，亦讓訪客容易找到想去的地方。

Greater emphasis is being placed on the role of interior design in helping worried patients feel more at ease and in making hospital complexes easier to navigate. The walls of various units and departments may be painted different colours to help patients and visitors identify their current and/or intended location, while various patterns and interesting graphics may gradually be used to replace the traditional ‘lines’ often used to guide visitors around hospital corridors.



「分粒」上落更快捷 The express line to healthcare services

部分醫院的新大樓，仿似高級寫字樓實行「分粒」，部分電梯只到達某幾層，方便疏導人流。例如威爾斯親王醫院住院主樓暨創傷中心，樓高12層，訪客電梯超過十部，當中兩部只停一至五樓，可前往繳費處、藥房、急症科病房、手術室等，其餘的電梯則可到達各層，上落更快捷。

To enhance the efficient movement of people, certain lifts in newer hospitals only serve specific ‘high-traffic’ floors – an arrangement that is common in commercial buildings. In the 12-storey Main Clinical Block and Trauma Centre at Prince of Wales Hospital, for example, two of the 10 lifts only serve the first to fifth floors, which are home to busy departments such as the shroff, the pharmacy, the emergency medicine ward, the operating theatre, the intensive care unit and the burns centre.



保私隱 防感染 Improved privacy protection and infection control

為保障病人私隱並加強感染控制，新大樓設計會盡量分隔病人與訪客使用的空間。例如香港兒童醫院，將興建專供運送病人的橋樑聯繫兩座大樓，但訪客則不能進入；而北大嶼山醫院的每個病格（六張病床為一病格），皆設有獨立洗手間和浴室。

To enhance infection control and patient privacy, a number of new and redeveloped hospitals are incorporating separate passages for patients and visitors into their designs. At Hong Kong Children's Hospital (HKCH), for example, a footbridge for the exclusive use of patients will be built to link the two medical towers. At North Lantau Hospital, each six-bed cubicle will have its own toilet facilities.

科技篇 Technology

手機App掌握資訊 Harnessing the power of mobile assistance

醫管局已推出「e藥通」手機App，讓市民排隊攞藥更輕鬆，隨時隨地知道藥劑部／藥房的取藥進度。未來醫院將有更多應用程式，提供醫療服務即時資訊、產婦需知、醫院部門位置、提醒及記錄病人吃藥、覆診日期等。

The free 'TouchMed' app for smartphones enables patients to check the real-time status of their prescriptions at HA pharmacies. More mobile apps to support and supplement public healthcare services are in various stages of development, covering issues as diverse as advice for pregnant women, patient appointment and medication reminders, and suggested routes between departments and other locations within hospitals.



醫療系統更安全 A safer healthcare system

至於住院病人，醫院採用住院病人藥物輸入系統，令開藥、派藥、吃藥更準確安全。醫管局也善用收集到的病人數據，找出有高危疾病的人士，盡早診治。

The In-patient Medication Order Entry System in use in HA hospitals is designed to ensure medications are prescribed, dispensed and administered in a safe and efficient manner. Meanwhile HA is making use of patients' data to help identify 'high-risk' patients at an early stage and ensure that they receive appropriate treatment.

高速連接 全面覆蓋 Upgrading the healthcare IT highway

新興建的公立醫院更會提升科技的基建設施，以香港兒童醫院為例，有90個獨立房間安放網絡儀器及佈線系統，又設有足夠數量的數據端口供用家使用，其主幹網絡以高達40 Gbps將各工作站互相連接，速度冠絕公立醫院。

該院的無線網絡覆蓋範圍，更由現時一般醫院的臨床範圍增至會議場地等。同時，又增加裝置網絡介面，讓醫療系統或醫療儀器可以接上醫管局總部的醫療信息系統，互換資料。

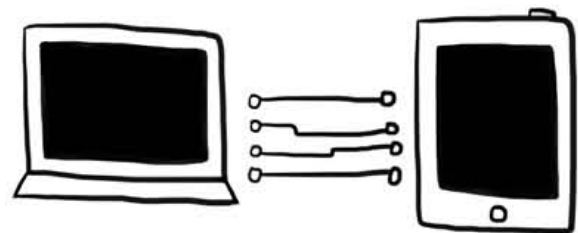
該院的無線電話轉換系統(PABX)的佈線系統及數據佈線系統將被整合為一個綜合佈線系統。

有異於傳統PABX佈線系統，此綜合佈線系統可以由建築物擁有者控制，它還可配合未來語音技術的發展。

The construction of new hospitals includes infrastructure that reflects the growing importance of IT in delivering high-quality healthcare services. The construction plan for HKCH, for example, includes 90 rooms that have been designated to house the hospital's network equipment and cabling system. The planned number of fixed data ports has been calculated to meet projected user requirements and the network backbone that interconnects individual workstations will run at a maximum speed of 40Gbps – the highest among all HA hospitals.

Wireless network coverage at HKCH will extend beyond clinical areas to include meeting venues and other strategic locations. A large number of network interfaces will be installed to connect medical systems and devices to the network to enable data interchange with HA's corporate IT systems.

Cabling for the Private Automatic Branch Exchange (PABX) outlets and data outlets at HKCH will be integrated into one structured cabling system. Unlike traditional PABX cabling systems, this structured cabling system can be managed by the building owner. It also caters for potential future developments in voice technology.



環保篇 Eco-friendliness

綠茵處處 Environmentalism as patient therapy

新建的醫院建築物都有一定比率的綠色元素，例如天台花園或復康花園。北大嶼山醫院的復康花園，除了以植物綠化環境外，園內遍栽香草，以香氣紓緩患者病情，既配合政府2010年推出的環保條例，亦有助病人身心靈的治療。

In line with relevant regulations issued by the Government in 2010, all new hospitals now designate a certain proportion of their gross floor area as 'green zones'. The rehabilitation garden at North Lantau Hospital is filled with fragrant herbs that create a beautiful and relaxing environment for patients.



服務模式篇 Service delivery

重組服務，可以有效利用現有資源，提升協同效應。為配合香港兒童醫院在2017年落成，未來的兒科會採用「軸輻模式」運作，即地區醫院提供第二層服務，包括緊急護理、跟進治療及社區護理。香港兒童醫院擔任第三層診治中心，專收複雜、罕見及需要跨專科治理的兒科轉介個案。新醫院和地區醫院緊密合作，組成完善的專科服務網絡，為市民提供更佳服務，同時推動高質素科研、培訓人才。



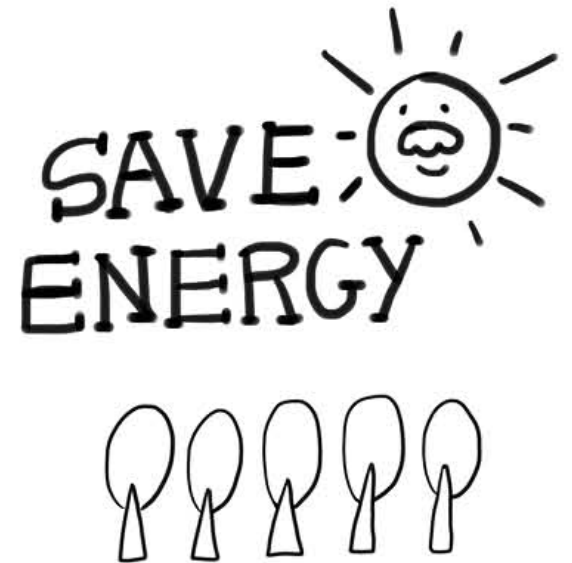
慳油節能 Saving lives saving energy

為了環保，醫管局亦加強需求管理，21間醫院已更換92部新型無油式製冷系統，省油之外，機組轉速更快，效率自然更好。另外，醫院又會陸續轉用變頻式摩打升降機、高效能的T5光管。

在能源供應方面，新醫院將會在天台安裝太陽能發電板，利用日照節能減碳。雅麗氏何妙齡那打素醫院則試行「電熱聯供」的新嘗試，使用回收垃圾堆產生的天然氣電力，善用再生能源。

HA's environmental efforts include both demand-side and supply-side initiatives. Improved energy efficiency is being achieved through steps such as the installation of 92 oil-free air-cooled chillers in air-conditioning systems across 21 hospitals, a gradual shift to using 'variable voltage, variable frequency' motor drives to power hospital lifts and the replacement of standard fluorescent bulbs with higher efficiency T5 fluorescent lamps in general lighting.

A number of hospitals have installed rooftop solar panels with the aim of reducing energy costs and carbon emissions. Other renewable energy efforts include the piloting of a combined heat and power system at Alice Ho Miu Ling Nethersole Hospital which uses low-cost gas produced by the decomposition of rubbish at local landfill sites.



New service models are being introduced to make optimal use of existing resources and generate synergy. For example, following the scheduled opening of HKCH in 2017, HA's paediatric services will operate using a 'hub-and-spoke' model, with HKCH serving as a tertiary referral centre for the treatment of complex and rare conditions that require multi-disciplinary management, while paediatric departments in regional hospitals will provide secondary services such as emergency care, follow-up treatments and community paediatric care. This model will foster close collaboration between HKCH and regional hospitals to create a specialist network that will also facilitate increased clinical research and innovation in paediatric healthcare.

基層醫療服務: 病人接觸醫療系統的首個層面，包括醫生門診、保健和預防疾病等基本醫療服務。

第二層醫療服務: 包括急症和療養住院服務、日間手術、專科門診和急症室服務等。

第三層醫療服務: 高度複雜和昂貴的醫院護理服務，通常需使用先進技術和涉及多個專科的專業知識，例如處理罕有疾病、重傷、器官移植、腦部放射外科手術等。

Primary healthcare services include general outpatient clinics, health promotion and disease prevention initiatives. These services are considered an important first point of contact between healthcare providers and the local community.

Secondary healthcare services include acute and convalescent inpatient care, day surgery, specialist outpatient care, and accident and emergency services.

Tertiary healthcare services include highly complex and costly hospital care, usually involving the application of advanced technology and multi-disciplinary specialised expertise, such as handling complicated and/or relatively rare or unusual medical conditions, catastrophic injuries or illnesses, organ transplants and neurological surgery.

醫院的秘密 Hospital secrets



醫院的建築和運作都很複雜，醫院背後，有哪些鮮為人知的秘密？現在逐一為你揭開。

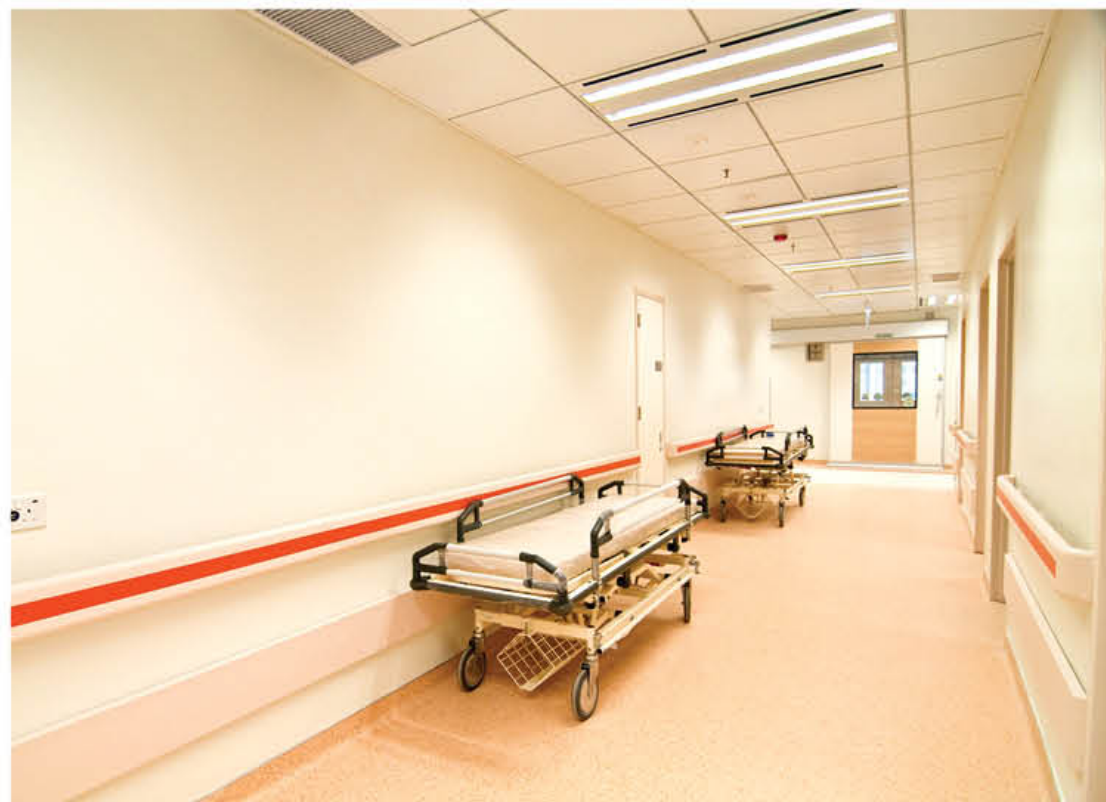
The construction and operation of a hospital is a complex undertaking that involves many hidden considerations. HASLink lifts the curtain to reveal some lesser known facts about hospital buildings in Hong Kong.



醫院是「發水樓」？ Structural design – supersize me

大部分醫院的運作樓面面積，即一般稱為「實用面積」，大約只有總樓面面積的三成。其餘空間，用於樓宇特殊結構和放置不同的儀器系統，確保達到高水平的衛生要求。走廊寬闊度，比一般樓宇闊兩至三倍，方便輪椅、病床和儀器往來；升降機亦要寬敞，最少可容納一張病床和兩名醫護人員。

In most hospitals, the net operational floor area is only about 30% of the total floor area. The remaining area is eaten up by the structure of the building itself and by equipment and systems that help ensure a high standard of hygiene. Hospital corridors are two to three times wider than those in general buildings to allow for the easy movement of wheelchairs, hospital beds, trolleys and medical equipment. Lifts must also be larger to accommodate at least one hospital bed accompanied by two medical workers.



停電無有怕 Powerful systems for back-up power

新醫院大樓均配備兩個獨立的電源，即使其中一個電源發生問題，另一個亦可即時補上，提供可靠而穩定的電力。重要地點如手術室和資訊科技伺服器室，還設有蓄電池運作的不間斷電力系統，確保這些重要地點無懼意外，正常運作。

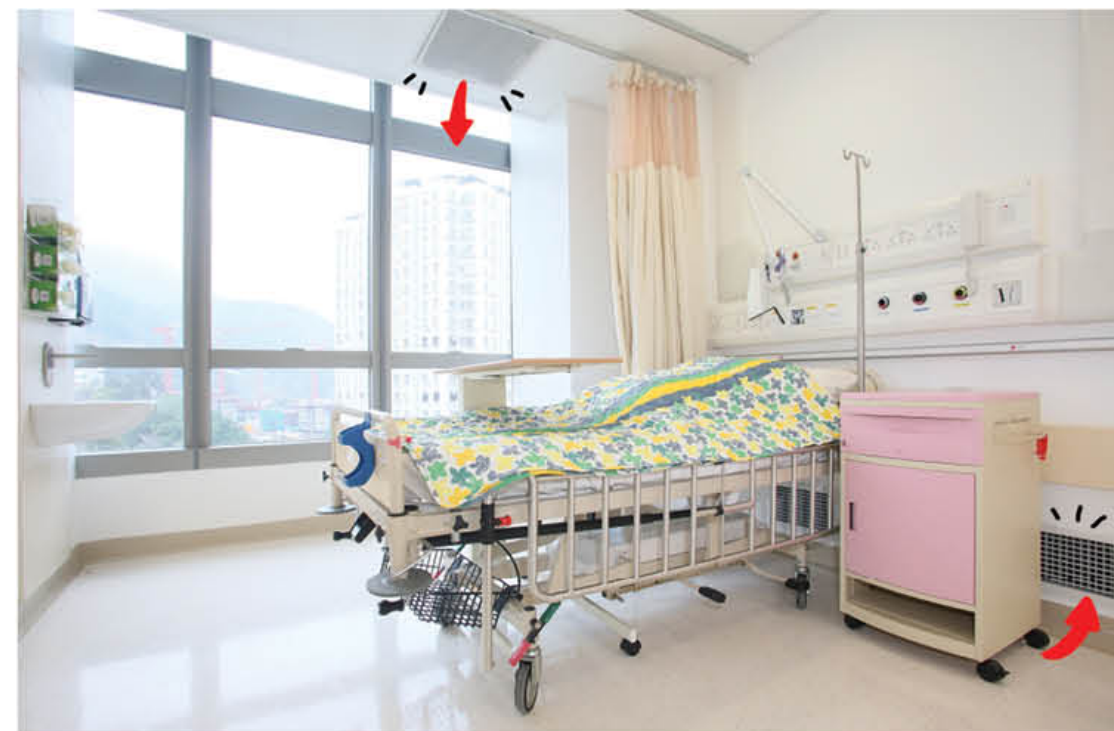
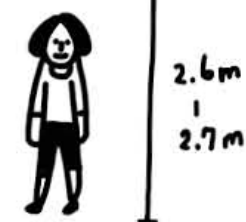
A reliable and stable power supply is a vital part of hospital operations. To minimise the risk of a major disruption in the energy supply, electricity companies in Hong Kong permit hospitals to have two separate back-up supplies so that an alternative is always immediately available in the event of a power failure. In areas such as operating theatres and IT server rooms, uninterruptible power supply systems that use storage batteries ensure that critical systems and equipment will remain functional in the event of a catastrophic failure in mains electricity.



特高樓底 Raising the roof on medical care

手術室、磁力共振掃描室、X光化驗室等的樓底，在假天花下的高度達3米或以上，以供放置大型儀器。一般病房的天花，也有約2.6米至2.7米高，較一般住宅樓宇為高。

The ground-to-ceiling height in a typical hospital ward is between 2.6 and 2.7 metres – which is higher than an average residential buildings. While in the operating theaters, MRI rooms and X-ray rooms, this increases to at least 3 metres to accommodate large equipment.



最緊要通風 Airtight infectious disease measures

病房主要使用循環通風系統，若是傳染病隔離病房，則會用「負壓」及「全鮮風」的單向風模式，即透過高位出風，低位排氣，避免細菌積聚在病房角落或散播至其他地方。瑪嘉烈醫院傳染病中心，就是使用這種先進的通風系統。

Most hospital wards use a recirculating ventilation system. However, in isolation wards – such as those in the Infectious Disease Centre at Princess Margaret Hospital – ‘negative pressure’ and ‘100% fresh air intake’ systems are used. These systems have the exhaust outlet in a much lower position relative to the supply vent to facilitate the unidirectional flow of air to help avoid the accumulation or diffusion of infectious and highly communicable diseases.

逃生出口特別多 Making a quick exit

病人大多行動不便，所以醫院的走火距離比寫字樓短三分之一，比住宅則短一半。難怪醫院的每一層都有很多逃生出口，防煙門也多，一間大醫院隨時有幾百扇防煙門！

As many patients may find it difficult to move around easily or without assistance, the longest permitted distance from a ward or other patient area to a fire escape in a hospital is one-third shorter than that required in office buildings and half that required in residential buildings. So the next time you're in hospital – as visitor or patient – you'll know there is always a fire exit nearby in case of emergency!



「小魔怪」與瑪麗護士的牽繫 QMH nurses share lasting bond with NICU 'little monster'

「身上很多手術疤痕吧，看來都是不能忘記我們的了。」周錫鈿當年在媽媽懷孕27周時早產，做過了多個大手術，身上這些「彪炳」印記，卻牽繫著她與瑪麗醫院初生嬰兒深切治療病房護士的一段情誼。

顧問護士李韻明及梁雪芳在瑪院初生嬰兒深切治療病房共事逾20年，照顧過無數早產嬰。今年剛滿19歲的錫鈿當年因為愛夜哭，她們暱稱她「小魔怪」。訪問當日，周太和兩位護士看著舊照話當年時，錫鈿沒大反應，但不停摸著手腕上的疤痕。

周太多年來都有帶女兒回來探望，就是希望她記住病房內的人和事。「雖然不幸，但禍中得福。希望藉我們的經歷鼓勵家長和病房醫護。」周太說，當年錫鈿留院五個多月，她長駐病房照顧，和護士們建立了深厚的信任和友情，互相分擔開心、難過的時刻。她說護士是很重要的溝通橋梁，每天醫生帶來的壞消息，她們都會細心解釋，還不時教授照顧小貼士。

李姑娘說：「我們的工作，很多是重覆的例行任務。天天餵奶、換片，很容易忘記了自己身為護士的價值。媽媽和小朋友的探望，令我們可以重溫自己工作的意義。餵奶其實好重要，早產嬰最需要增磅，見到他們肚仔脹脹，就是成績！」

梁姑娘說，「要照顧的其實不只是早產嬰，更是一個家庭。雖然見不到這些嬰兒日後成長的過程，但每當這些長大了的病人親來探望或看到他們的照片，都是我的收穫，是好好的鼓勵。」

病房處處見到感謝卡，也就是前線同事辛勤努力的源動力！❤



▲ 錫鈿與媽媽（左一）特別於聖誕節前夕，到瑪麗醫院探望顧問護士李韻明（左二）及梁雪芳（右一）。Jasmine and her mother (first from left) share a warm pre-Christmas reunion with nurse consultants Ming Lee (second from left) and Tomcy Leung (first from right) in the NICU at Queen Mary Hospital.



▲ 剛出生的錫鈿只有578克。現在她身體十分健康，去年中學畢業，現正於加拿大上大學。Jasmine weighted just 578 grams at birth. She graduated from high school last year and is now a healthy young woman enjoying life as a freshman in Canada.



▲ 家屬送上的感謝卡，處處可見。'Thank-you' cards from grateful families decorate the NICU wards.

"You left here with so many 'permanent reminders' – it's not likely you'll ever forget us!"

Born prematurely at just 27 weeks, Jasmine Chau spent her first few months in the Neonatal Intensive Care Unit (NICU) at Queen Mary Hospital (QMH). During her time in the unit, she underwent many operations that saved her life but left her with multiple scars. However, these scars also mark the lifelong friendships she now has with the NICU nurses.

Nurse Consultants Ming Lee and Tomcy Leung have cared for countless 'early arrivals' over the past 20 years. The pair recall that Jasmine – who is now 19 – was a restless baby and her frequent tears earned her the affectionate nickname 'little monster'.

With Jasmine's mother Mrs Chau and the two nurses busy reminiscing, the former NICU resident appeared distracted. But her frequent touching of the surgical scars on her wrist told a different story.

Mrs Chau says that her trusting friendship with the NICU nurses was forged through the ups and downs they experienced together during Jasmine's five-month stay in the NICU. She is grateful for the advice by nursing staff as she struggled to deal with bad news delivered by the doctors, and for their patience and support in helping her connect with her baby.

Mrs Chau often returns to the NICU with her daughter to exchange memories and more recent news with staff. "Jasmine had a tough start but, thanks to the expertise and care of those working in the NICU, she

has grown up to enjoy a rich and rewarding life. I hope our experience will offer hope to other parents and let ward staff know that their hard work is greatly appreciated."

"Our job can feel quite routine at times and it's easy for us to dismiss the value of repetitive tasks such as changing nappies and bottle feeding," says Ming. "Being visited by mothers and their happy, healthy 'babies' – even many years later – is a great reminder that our work has a tremendous impact on people's lives. For example, feeding is actually a crucial task in the NICU as premature babies usually severely underweight. Whenever we see a little plump tummy, we need to value it as a small but important achievement," she adds.

Tomcy echoes Ming's sentiments, noting that "there is a whole family behind each of our premature babies who also need our compassion and care. Receiving a visit or photo from one of our former 'precious treasures' is a great reward and a tremendous encouragement".

And while the nursing pair may sometimes undervalue their work, that's certainly not the case among the many families whose lives they have touched – as demonstrated by the vast array of colourful 'thank-you' cards that decorate the NICU wards! ❤

「威院一路通」 助你輕鬆到埗 Mobile app makes navigating PWH easier

到醫院探病或治療時迷路常有發生，除了找詢問處問路，現在到威爾斯親王醫院的病人及訪客更可以手機應用程式「帶路」。

市民下載「威院一路通」後，只需用手機在該院三個主要出入口掃描二維條碼，再輸入需要搜尋的醫院大樓及設施，程式便會顯示圖文並茂的建議路線。

負責開發威院首個手機應用程式的資訊及傳訊服務總經理蔡小慧說，這手機程式由行政、義工服務、病人聯絡、社區關係、資訊科技同事的合力創新而成。大部份的路線設計由醫院義工及同事提供，上月已完成測試，當中更有年長的義工參與。

這個免費程式不只可在院內使用，病友或他們的照顧者亦可安坐家中搜尋位置及路線，程式還備有公共交通指南，協助市民選擇到威院的交通安排，透過定位服務，更可找到點對點的行車路線，方便市民安排行程。到埗後如仍然迷路，就可以用二維條碼再找尋路線，省卻不必要的張羅。

「威院一路通」尚在試行階段，備有中英文版本，現可用於iPhone; Android 版本會於今年四月推出。❤



◀ 「威院一路通」邀請了長者義工參與測試，之後更由他們向市民簡介。Senior volunteers were invited to test the PWH easyGO app and receive training on how to promote its use to members of the public.

◀ 「威院一路通」手機應用程式圖標。PWH easyGO app icon.

A new mobile phone app is helping patients and visitors take fewer wrong turns in their travels around the large Prince of Wales Hospital (PWH) complex.

PWH easyGO requires users to scan the QR code located at any of the three main entrances and then enter the block or facility they wish to find. The app will provide a suggested route with both text descriptions and photos to help guide users to their destination.

The accuracy of the routes provided by PWH easyGO – the first mobile app to be developed in-house at the hospital – reflects the collaborative efforts of PWH colleagues who provided the route data and patient groups who tested it, says Christine Choi, Chief Manager of Information and Communication Services at PWH, who led the app development team.

In addition to providing navigation assistance within PWH, the app also offers a public transportation index and a GPS-based point-to-point driving route search function to aid people when travelling to the hospital. If visitors find themselves confused on arrival at the hospital, they simply need to scan an entrance QR code, enter their desired destination and they'll soon be on their way.

A pilot at the moment, this app is available for iPhone (in both English and Chinese) with its Android version to release in around April. ❤

急症室伊波拉演習 添心理輔導 Ebola drill include staff counselling

為確保公立醫院有效處理懷疑患有伊波拉病毒病人自行到急症室求診的情況，醫院管理局於上月中在博愛醫院急症室進行新階段演練，亦特別提供心理輔導予相關前線同事，令同事對流程及措施更加熟練。

演習約兩個小時，模擬有一名本港男子，剛從西非馬利回港，出現發燒、嘔吐和腹瀉等徵狀，自行到急症室求診。演習測試了運送懷疑感染病人的程序、感染控制措施、臨床醫護程序及穿著



穿著合適保護裝備的醫護人員，正準備沿指定獨立運送路線，從分流站把男子送到急症室內的負氣壓病房。Frontline colleagues in personal protective equipment follow a designated pathway when transferring the 'suspected Ebola patient' from triage to a negative pressure room.



保護裝備的指定步驟等等。更特別加入心理支援測試，安排臨床心理學家及感染控制組人員輔導，減輕前線同事的不安情緒和擔心。

博愛醫院急症科副顧問醫生劉柱良說，希望演習給同事更多實戰經驗，確保可達致早發現、早隔離、早確診，減低社區傳播的風險。❤

臨床心理學家及感染控制護士模擬為曾處理懷疑個案的同事提供心理輔導。Clinical psychologists and an infection control nurse counsel colleagues who handled the 'suspected Ebola patient'.

As part of the Hospital Authority's efforts to ensure its hospitals are prepared to handle Accident & Emergency (A&E) walk-in patients suspected of having Ebola Virus Disease (EVD), a simulation exercise was held at Pok Oi Hospital (POH) last month. The exercise highlighted the importance of providing psychological support to frontline colleagues.

The scenario involved a local man who, on experiencing symptoms including fever, vomiting and diarrhoea following a recent trip to Mali in West Africa, had gone to POH's A&E Department for assistance. Critical processes tested during the two-hour drill including transfer arrangements, infection control measures, clinical procedures and donning of personal protective equipment. The exercise also included the participation of clinical psychologists and infection control team members tasked with providing counselling support to frontline staff.

POH's AED Associate Consultant, Dr Terry Lau, said the simulation would help minimise the risk posed by EVD by ensuring colleagues are well equipped to rapidly detect, isolate and diagnose any potential cases of the disease. ❤

硬片變軟片 醫管局數碼圖像計劃刷新技術

自2014年下半年，全港所有公立醫院主要臨床服務範圍包括病房已全面實行「數碼醫療圖像技術」。這項於2009年展開規劃以數碼圖像(軟片)取代傳統X光片(硬片)的工程，不但成功改善臨床服務，更為醫管局每年節省開支約5000萬元及在各醫院逐步騰出X光片的存放空間。以瑪嘉烈醫院為例，直至2012年6月該計劃已為醫院騰空約3,000平方呎的空間以供改善服務用途。

向來破舊立新都要面對重重阻力，究竟執行計劃的同事，怎樣排除萬難去全面推行這項新技術呢？

新方法解決舊問題

一直參與計劃的資訊科技及醫療信息主管張毅翔醫生表示：「此計劃共動員總辦事處和各醫院計劃小組逾300位跨部門同事，規模龐大，內容複雜。執行計劃的團隊從制定計劃以至分階段推行，一直與各臨床專科單位共同磋商研究、了解同事的需要、重視他們的意見，確保日常運作順利。」以往推行臨床服務改善計劃的經驗，前線同事一般都怕“行先死先”。相反，此計劃早期推出時，醫院及同事都表達很想爭取盡快試用這項新技術。同事對計劃的「非典型」反應，主要有賴瑪嘉烈醫院、東區尤德夫人那打素醫院及北區醫院率先推行先導計劃的成功，加強同事的信心及減輕他們對改善臨床工作流程帶來影響的擔心，大大有助計劃在全港公立醫院推行。

要改變同事日常工作模式及習慣，難免遇到一定阻力。幸而大部份醫護同事沒有因此放棄並努力作出嘗試，一起解決問題。例如在計劃推出初期，手術室同事發現流動式圖像工作站接收不到無線網絡訊號，跟進多次不果。總辦事處和醫院計劃小組專家實地抽絲剝繭後，發現原因是手術室含鉛房門擋住無線網絡訊號。這次實地考測的經驗，促成了總辦事處和醫院計劃小組專家往後逾百次到多間醫院，共同盡力為同事解決問題。

以往X光片送到病房後，醫生會收到紙條提示X光片已送達病房。執行數碼圖像計劃後工作流程簡化，沒有了紙條提示醫生，故醫生不知軟片是否已送到病房圖像工作站。有見及此，負責同事在圖像工作站的臨床醫療管理系統（CMS）上特別開發了一個小軟件，讓醫生可以在病房圖像工作站查閱軟片是否已到達。

計劃推行同時亦衍生一些驟眼看來可能和計劃無明顯關係的枝節。比如涉及病人資料私隱問題，執行數碼圖像計劃的同事也都一併處理，盡力解決。



負責計劃的資訊科技及醫療信息主管張毅翔醫生。
Dr Cheung Ngai-tseung, Head of Information Technology and Health Informatics Division and leader of the filmless project.

另一挑戰就是醫科學生也需要在教學醫院學習時用到醫療圖像，因而衍生一系列問題。比如：學生能否及懂得使用醫護同事的日常工作系統？為解決這些問題，要在技術上先為學生們設下特有的權限，又為同學安排教育工作坊，讓他們學會正確使用系統及清楚使用系統時應負的責任。

下一站 手術室

推行手術室數碼圖像計劃的其中一項挑戰，就是項目執行及管理。這看似是個小難題，但手術室乃醫療重地，每年一般只有一次空檔供「大執」，所以進行改動工程前必須小心部署，以免影響服務。其次就是醫療安全，既要確保網絡覆蓋度及穩定性，又不可干擾其他醫療儀器，因此進行手術室改動工程前，必須進行風險評估及詳細規劃。

整個手術室數碼圖像計劃預計2018完成，在前線及後勤同事的共同努力下，抱著破舊立新、互相合作的精神，大家都期待這個近十年的數碼圖像任務順利完成！

HA Filmless Project: the hard task of moving to a soft-copy medical film system

In the second half of 2014, the Hospital Authority completed the full implementation of a filmless digitalised medical imaging system in all public hospital medical wards. Initiated in 2009, the filmless project has not only improved clinical services, but has also cut medical imaging costs by HK\$50 million a year and freed up considerable physical space that can now be put to better use. For example, nearly 3,000 square feet of space up to June 2012 is already made available in Princess Margaret Hospital.

Transitioning away from any well-established system is always a challenging task. *HASLink* spoke with members of the project team to find out how they overcame the complexities and complications to achieve success.

Another challenge for the team was handling the spin-off projects that were required as a result of the development of the main digitalisation project. These projects were managed with the same level of professionalism and care as the central initiative, particularly where they involved sensitive issues such as the use of personal data and patient privacy.

The training of medical students in teaching hospitals posed one such challenge. Their need to use medical images resulted in a series of issues, including whether they should be allowed access to an operational clinical system being used by frontline staff. The project team took a two-pronged approach to the problem. First, they established limited access rights for student users. Second, they hosted workshops to provide instruction and guidance on appropriate and responsible use of the system and of the handling of sensitive patient data.

Looking ahead: operating theatres

The filmless initiative will soon be implemented in operating theatres (OT). This stage of the project will introduce a new level of complexity as the needs of surgeons go beyond just high-quality images for diagnosis to include customised post-image processing and computing tools that will allow them to undertake precision analysis or add notes directly onto the images as part of pre-surgery preparations.

As part of a hospital's critical services infrastructure, OTs can generally only accommodate one overhaul a year, which must be carried out with a high level of efficiency and precision to minimise the disruption to life-saving services. Medical safety is also a major concern, with the project team needing to develop infrastructure that will provide a stable wireless network with good coverage while at the same time ensuring that it will not interfere with medical equipment in the OT.

The filmless project for operating theatres is scheduled to conclude in 2018. Through the tireless efforts of back-office and frontline colleagues working together as one team, the conclusion of this decade-long undertaking to transition from old to new will mark a major milestone in HA's development and its ability to provide quality services.

Staff participation essential for success

"The complicated nature of this huge undertaking required considerable cross-disciplinary support and collaboration. The 300-people-strong project team included colleagues from Head Office and all HA hospitals," explains Dr Cheung Ngai-tseung, Head of Information Technology and Health Informatics Division and leader of the filmless project. "From day one, the project team worked closely with all clinical specialist units. Understanding their actual needs and gathering their input was essential to ensuring the smooth daily operation of the system upon its implementation."

Calls for staff to participate in the planning of previous clinical services improvement projects had often received a lukewarm response. In contrast, the filmless project attracted enthusiastic involvement from HA hospitals and frontline colleagues. In part, this was due to the success of a pilot project at Princess Margaret Hospital, Pamela Youde Nethersole Hospital and North District Hospital, which helped ease staff concerns over the possible impact of the change on the established clinical workflow by clearly demonstrating the benefits and strengths of the filmless system.

The support provided by colleagues across the board was crucial in rolling out the pilot scheme framework across the entire HA network. In just one example, during the early stages of the project a mobile viewing station inside operating theatre could not locate the wireless signal. After several failed attempts to resolve the issue, specialists from Head Office and project team members came to the hospital to investigate. They realised that the lead-lining contained within the operating theatre doors was blocking all wireless network signals. This event triggered over 100 trips to different hospitals by the project team to work with frontline staff to solve specific or unusual issues they had encountered.

Under the old system, doctors received paper notes to inform them that their patients' hard-copy films had arrived at the wards. With the elimination of paper documentation under the new filmless system, an alternative means of notification was needed. The team's solution was to develop a special module for the Clinical Management System which would electronically alert doctors about image arrivals via image viewing stations.

數碼圖像有幾好？

The benefits of digitalised medical images

張毅翔醫生說：「數位放射儀器拍攝的X光圖像，可儲存於電子系統，透過網絡，傳遞至不同醫院部門。醫護人員更可以在醫院各處不同的圖像工作站，透過臨床醫療管理系統（CMS）同時閱覽。亦可在系統屏幕上調校圖像大小，令臨床診斷更快更精準。」新增的電子存片倉不但簡化工作程序，亦能節省金錢、減少診斷時間及儲存空間。配合計劃加設的無線網絡覆蓋，可整合及同時支援數碼圖像技術和其他病人服務系統（如住院病人藥物輸入系統），大大提升醫療效益，方便日常管理。

計劃推行後，所有公立醫院的整體X光片用量現時已銳減至原來總用量的10%或以下。現時病人由完成X光檢查，至X光圖像送達醫生的圖像工作站流程更快捷，安全及有效率。以往每年有約5%的X光片因運送或儲存途中而遺失，現已不再有此情況。現時，每個醫院聯網都備有完善的後備「圖像儲存及通訊系統（PACS）」及專責管理的同事，醫護人員可因應病人需要於圖像工作站選取所需的X光圖像。❤

“Medical images are acquired, stored, transmitted and displayed digitally for simultaneous multi-location access and analysis across hospitals and departments using the Clinical Management System,” explains Dr Cheung. “Medical staff can access and work on the same images simultaneously using different viewing stations. The use of digitalised films improves accuracy and speed in clinical diagnosis by, for example, enabling staff to zoom in on or magnify images and examine them in detail.”

Films can now be easily integrated into other medical systems (such as the In-patient Medication Order Entry System), which has helped enhance clinical efficiency and the management of patient needs. It has also ended the problem of an average of five per cent of all physical films being lost due to manual mishandling.

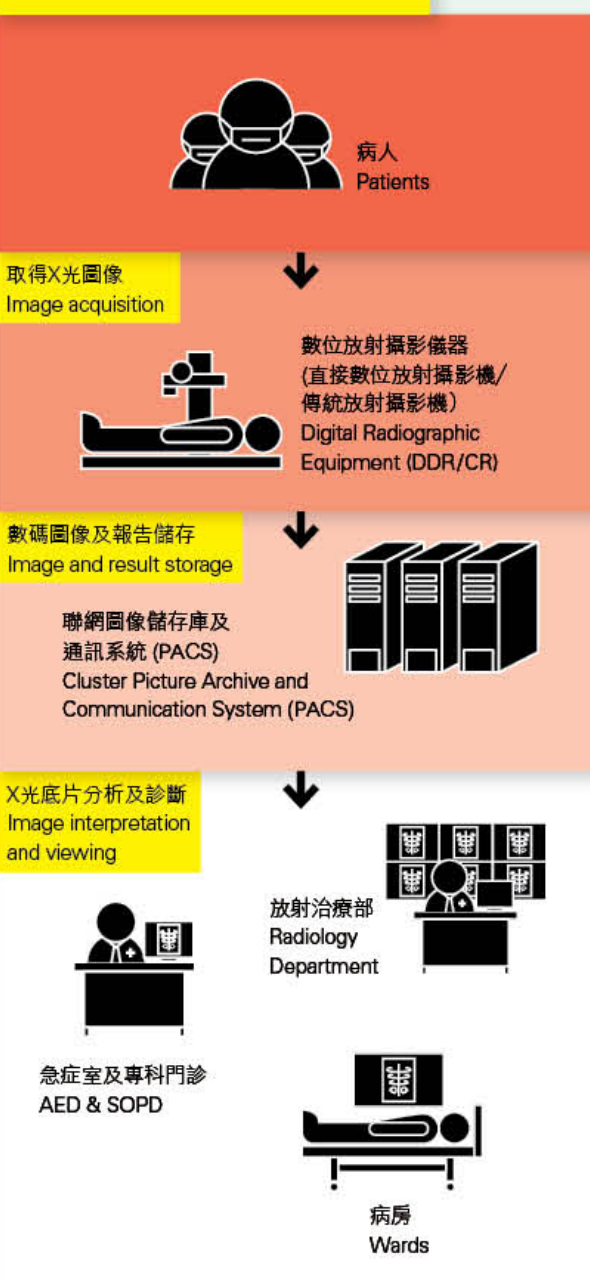
Following the conclusion of the filmless project in all medical wards late last year, the use of physical films across all HA hospitals is now less than 10 per cent. The new simplified workflow has made the process of medical imaging – from the moment of x-ray to image delivery – faster, safer and more efficient.

To ensure that medical staff still have access to patients' existing medical images when needed, each cluster has its own back-up Picture Archiving and Communication System (PACS) and a specific team that monitors its use. ❤

傳統硬片 Before Filmless



數碼軟片 After Filmless



透過臨床醫療管理系統（CMS），醫生可於數碼圖像工作stations上看到九種醫療圖像，包括X光片、電腦斷層和磁力共振掃描等。
The image viewing station allows doctors to access nine types of medical images via CMS including X-ray, Computed tomography (CT) and Magnetic Resonance Imaging (MRI).

輪候白內障手術10年變1年 九龍東有妙法

KEC achieves dramatic drop in cataract surgery waiting times using innovative initiatives

救人要分秒必爭，將軍澳醫院的伍何露寧白內障中心為縮短九龍東白內障病人輪候手術的時間，自創招式解難題。且聽中心總監李啟煌醫生如何令每年處理白內障手術宗數由2,500宗增加到5,000宗，病人輪候時間更可由10年變1年。

Wu Ho Loo Ning Cataract Centre at Tseung Kwan O Hospital (TKOH) is demonstrating how 'thinking out of the box' can have a significant effect on treatment efficiency and waiting times. Centre Director Dr Kenneth Li explains how the introduction of new initiatives has enabled his team to double the number of surgeries it completes each year from 2,500 to 5,000. This has drastically cut the average waiting time for cataract patients from 10 years to just one.



在檢查初期，將個案分類，是提升效率的第一步。
The stratification of cataract patients into different surgical cases has been crucial in improving efficiency.



這張可變床的手術椅，既安全又能縮短長者上落時間。
Special chairs that can be transformed into surgical beds are making life easier for older and frail cataract patients.



個案分類

替病人進行手術前，先按10項臨床指標，有系統地將個案分為簡單、困難和複雜。簡單和不住院的手術安排在將軍澳醫院進行，複雜和需住院的由基督教聯合醫院處理。

增設白內障專用手術室

將軍澳醫院原用作儲存X光片的倉庫，改建為兩個專為白內障病人設計的手術室。

高流量方式處理簡單白內障手術 以空間換取時間

手術開始前安排兩間手術室備用，醫生完成第一宗手術後立即前往隔鄰已備用之手術室進行第二宗手術。以此方法減省每宗手術的預備時間，理順各種繁複步驟，在視像系統協助下醫生完全掌握每間手術室備用進度，達至轉用高流量檔期令每節的手術宗數由四宗增至完成最多八宗。

李醫生強調，同事培訓亦非常重要，故中心早於啟用之初，特別舉辦了一次大型的訓練課程，理論和實踐兼備，近年亦加入3D視像教學；又會定期收集同事的意見。不過，他提醒，手術室內同事的分工一定要清晰，人手不要重複。❤

Stratification of patient cases

Using 10 clinical criteria, each surgical case is classified as simple, hard or difficult. 'Simple' cases, involving day surgeries that do not require patients to be admitted, are handled by TKOH, while more complicated cases and those require admission are handled by United Christian Hospital.

Establishment of a designated operating theatre

A room previously used to store X-ray films at TKOH has been converted into two operating theatres that are specially designed in all aspects for cataract patients.

Adoption of a 'high volume' surgical model for cataract procedures, trading space for time

While a doctor is performing surgery in theatre A, nurses will prepare the next patient for surgery in theatre B. The set-up of the theatres enables nurses to keep track of the surgical procedure in theatre A from theatre B (and vice versa) so that they can provide immediate assistance if required. When the doctor finishes in theatre A, he or she can almost immediately start the next surgery in theatre B. This saves a lot of turn-around time and has enabled the average number of surgeries per session to increase from four to eight.

In addition to these initiatives, Dr Li also stresses the importance of training. Since its inception, the Centre has required its staff to complete a comprehensive training course that places equal emphasis on theory and practice. In recent years, 3D teaching has been introduced to further facilitate learning. The Centre also encourages colleagues to offer suggestions and comments as to how patient handling and surgical procedures can be further enhanced. ❤

劉國昌：新人的天地 Andy Lau : A more fulfilling life for a new recruit

「只因想做更多有實效的事。」12月初剛上任的總行政經理（醫院管理局秘書處）劉國昌笑說，從立法會秘書處助理秘書長轉至現職，是因為這裡的工作關乎公眾健康，直接影響生命，更具挑戰和意義。

劉國昌大學主修公共行政，一畢業即入職政府，及後轉至立法會秘書處，轉眼20多年。接受訪問時，他剛上任一周，新環境給他最新鮮的感受是：「同事工作和玩樂都非常投入。在總辦事處的員工論壇上，我看到同事很強的團隊精神，亦是富有人性的團隊；同事工作效率亦奇佳，兩日內新段就將會議紀錄整理好，實在是質優效高。」

「工作時投入，玩樂時要盡情」是劉國昌的人生態度，所以每次放假他都會離港「喇喇氣」，但他盡量不到擠滿遊客的城市，也許這與他在巴黎經歷過的驚險有關：「幾年前，我與太太在當地旅行，在地鐵站被黑人用刀指著肚皮，迫至牆角，我即時在銀包掏出一百歐羅，才保性命。」他最愛在歐洲自駕遊，從大城市走到偏遠的小鎮，感受純樸地道的人情味。❤️



◀ 總行政經理（醫院管理局秘書處）劉國昌（左）不時把握時間與女兒和兒子盡情玩樂，希望給他們一個愉快童年。Chief Manager (Boards and General) Andy Lau (left) cherishes the precious time he spends with his daughter and son.

HA colleagues work together in their desire to get the job done. At the Head Office Staff Forum I recently attended, I already felt a close comradeship with members of my team. They are very compassionate and caring. And they are also very efficient! For example, it only takes

them a couple of days to prepare the minutes taken at various meetings.”

Andy is a great believer in the ‘work hard, play hard’ philosophy. Whenever he can find time he enjoys travelling overseas with his family – although this hasn’t always been a pleasurable experience. “Years ago, my wife and I visited Paris,” he recalls. “One day we were cornered by a man with a knife in a subway station. I gave him a 100 euro note and fortunately he let us go unharmed.” Since this incident, Andy has preferred to take the ‘road less travelled’ by staying away from large, crowded cities and exploring smaller towns and rural settings instead. “We still get to enjoy new places and experiences, but with the additional benefit of more intimate and warm interactions with local people,” he explains. ❤️

“I am looking for positive results from meaningful job,” says Andy Lau, former Assistant Secretary General at the Legislative Council (LegCo) Secretariat and now HA's Chief Manager (Boards and General). Andy explains that his decision to take up the challenging position which he assumed in December last year, reflects his awareness of the vital role that HA plays in promoting the well-being of people in Hong Kong.

A public administration graduate, Andy has some 20 years of public sector experience, beginning his career with the civil service before later switching to the LegCo Secretariat. Despite having only been in his new role a week on the day he spoke with *HASLink*, he was already impressed by the strong team spirit he had witnessed. “Whatever the task or activity,



靈實病房有段「故」 ‘Hope’ more than just a name for HHH patients

盼望病房
1C Hope Ward

醫管局主席梁智仁教授為醫管局掌舵，管大方向之同時，原來對細節同樣觀察入微。話說早排佢去靈實醫院探班，一眼望到靈實個個病房都有一個好特別的名，而唔係常見的一號、二號病房，即刻問個究竟。原來因為靈實係一間好有宗教色彩嘅醫院，於是病房都用咗聖經的內容來命名，所以有叫「良善」，有叫「喜樂」，亦有一個叫「盼望」。呢個「盼望」病房專門照顧舒緩治療科的病人，係大家都希望，這班病人縱使走上人生最後一段路，但希望過的每一天都依然充實。❤️

As helmsman of Hospital Authority, Professor John Leong always pays close attention when charting out the best route forward for the organisation. But his well-developed sense of discovery and excellent eye for details aren't only limited to matters involving the HA 'big picture'.

During a recent 'meet and greet' with staff at Haven of Hope Hospital, he realised that the wards all have uplifting names such as "Goodness" and "Joy". His enquiries into the origins of such positive designations revealed that they are taken from the doctrines of

the Bible due to the hospital's historical religious background.

Many of these names now hold significant additional meaning in the modern-day healthcare context. For example, patients receiving palliative care are based in the 'Hope' ward – a designation that aims to comfort terminally ill patients and encourage them to live each day to the full. ❤️

羊年暖笠笠之選 Bundle up and share the winter warmth



天寒地凍，除咗著多件衫，靚靚頸巾更加少不得！最近有善長向醫管局捐贈一批頸巾，供同事購買自用，所得款項會撥入醫管局員工福利基金，支持員工福利及康樂活動。

頸巾共有六款，三種質地，包括全棉、混羊毛和混馬海毛。做工好用料足，手感柔軟又舒服，真係暖笠笠。經典橫間設計，簡單得嘍又百搭，用嚟襯衫，直情一流。仲要一條只售\$30，真係超值！

由即日起至2月3日同事可傳真或郵遞訂購表格至醫管局職員合作社，或於合作社網上商店認購，認購詳情，請參閱有關電郵和通告。如超額認購，會由人力資源部安排抽簽確定，並作個別通知。獲配售頸巾的同事可於2月16日開始在職員合作社或合作社網上商店辦事處（觀塘）取貨。❤️

Wearing scarf is an easy way to guard against chills during the cold winter season. The Hospital Authority has recently received a donation of scarfs for HA staff's exclusive purchase. All sales proceeds will be contributed to the Staff Welfare Fund.

There are six designs with three materials – cotton, mixed wool and a fabulous mohair mix. Fashionable and functional – a great way to stay warm and cozy in winter!

Attractively priced at just HK\$30 each, colleagues will doubtless be tempted to pick up one to add a dash of colourful mix-and-match style to any outfit on a dull winter day!

From now until 3 February, colleagues can place their orders to the HA Staff Co-op Shop by fax or mail, or through its online store. Please refer to the relevant promulgation. Human Resources Division will arrange to draw lots if there is over subscription. Scarfs will be ready for collection from 16 Feb in the HA Co op Shop or e-Co-op Shop Office at Kwun Tong. ❤️

威院三十嘉年華

PWH turns 30 in carnival spirit

逾200位威爾斯親王醫院同事化身義工，為慶祝院慶三十周年的「醫患同心健康嘉年華」傾力合作。嘉年華在沙田公園舉行，設置不同健康主題的展覽、遊戲攤位及健康檢查，教育市民預防各種疾病的方法和保持健康的生活方式等訊息，吸引大批市民到場享受家庭樂。



▲ 威院前線員工耐心教導小朋友用正確的潔手方法預防流感。
Colleagues explain how good hand-washing helps prevent the spread of influenza.

▲ 巨型吹氣城堡彈床是小朋友的摯愛，當日人流絡繹不絕。
The bouncy castle was a big hit among children at the carnival.

Over 200 colleagues from Prince Of Wales Hospital (PWH) came together at Shatin Park for the 'Healthy Together Carnival' organised to mark the hospital's 30th anniversary. The carnival saw members of the public enjoyed a wide range of health-themed exhibitions, games-booths and health-check stations.

將軍澳醫院生日大派對

TKOH celebrates 15 years with birthday dinner

將軍澳醫院十五歲了！醫院早前舉行慶生晚宴，筵開七十席，醫管局主席梁智仁教授和行政總裁梁栢賢醫生，食物及衛生局局長高永文醫生均親臨致賀。梁教授特別感謝醫院同事不斷努力，令將軍澳醫院在過去十五年，由一間只有約三百張病床發展成現今約六百張病床的醫院，成績令人自豪。

Tseung Kwan O Hospital (TKOH) reached the ripe old age of 15 – choosing to celebrate with a 70-table dinner banquet. HA Chairman Professor John Leong thanked TKOH colleagues for their work to continually improve the hospital's performance, noting that their efforts have enabled TKOH to double its bed capacity to 600 in the past 15 years.



▲ 梁栢賢醫生（左二）、梁智仁教授（右二）等嘉賓，為醫院切生日蛋糕。
Dr P Y Leung (second left) and HA Chairman Professor John Leong (second right) together with other guests cut the birthday cake for TKOH.

明愛醫院開放日賀院慶

Open day tops off CMC 50th anniversary celebrations

明愛醫院以連串活動慶祝五十周年，壓軸的開放日讓公眾有機會參觀醫院不同部門，了解醫院運作，又有實用的工作坊，令大家樂而忘返，同事及親友亦獲邀出席。

A fun-filled open day for the public marked the end of a series of 50th anniversary celebrations for Caritas Medical Centre (CMC). Attendees were offered a glimpse into the operations of various hospital departments and a chance to participate in workshops. Colleagues and their families were invited for the fair.



▲ 參觀者在同事指導下，於急救培訓中心學習心肺復甦法技巧。Visitors practice cardiopulmonary resuscitation (CPR) at CMC's Resuscitation Training Centre under the guidance of colleagues.



醫患同台奏妙韻

HACO makes sweet music with patients

醫管局中樂團成立以來，一直透過音樂表演和鼓樂工作坊等，以大家熟悉的樂韻為病友及同事們送上關懷。早前樂團在文化中心舉行一年一度的「周年音樂會」，今年更首次有病人參與，與樂團同台演出。他們來自伊利沙伯醫院青少年醫療中心，是專注力不足、自閉症或過度活躍症的患者，經過多月的鼓樂訓練，當晚與近2,000名觀眾分享訓練成果，贏得全場雷動掌聲。

醫管局行政總裁梁栢賢當晚亦大展歌喉，高歌一曲《滄海一聲笑》；財務總監錢湘芷彈奏古箏；九龍西醫院聯網總監董秀英醫生演唱《昭君出塞（選段）》及與醫管局大會成員王桂勳合唱《游龍戲鳳（選段）》。音樂會在一片悠揚悅耳的樂曲中，圓滿結束。

The Hospital Authority Chinese Orchestra (HACO) has for many years used music to bring love, care and appreciation to patients and colleagues across HA's network of hospitals and clinics.

The HACO's annual concert at the Hong Kong Cultural Centre this year included participation by patients for the first time. Following several months' training in Chinese drum playing, young people under the care of the Adolescent Medical Centre at Queen Elizabeth Hospital for treatment relating to lack of concentration issues, autism and hyperactivity disorders gave a short performance as part of the evening's programme.

Members of HA senior management also flexed their musical muscles during the event, with Chief Executive P Y Leung, Cluster Chief Executive of Kowloon West Cluster Dr Nancy Tung, and HA Board Member



▲ 九龍西醫院聯網總監董秀英醫生獻唱《昭君出塞（選段）》。
Dr Nancy Tung, Cluster Chief Executive of Kowloon West Cluster, sang a much-loved Chinese song at the HACO event.

Wong Kwai-huen singing Chinese melodies, while Director Finance Clara Chin displayed her talents as a Guzheng player.

The evening's programme was a great success and received a rapturous response from the 2,000 audience.

同事加油 應付冬季服務高峰期

Colleagues maintain service excellence during winter surge

冬季服務高峰期間，前線同事工作倍添忙碌，大部份醫院的內科住院病床使用率均超過百分之一百。醫院管理局主席梁智仁教授較早時特別到伊利沙伯醫院及基督教聯合醫院為同事打氣。

梁智仁分別巡視了兩院的急症室和內科病房等，詳細了解醫護同事的人手安排及病人流量。他向前線同事表示，明白他們工作量大增，並送上點心小吃感謝同事。

醫管局已推出連串措施，包括發放特別津貼、聘用兼職醫護人員等措施，希望藉此增加人手。

The annual 'winter surge' in admissions has seen many hospitals exceed their official inpatient capacity in the past few months. Hospital Authority Chairman Professor John Leong recently visited Queen Elizabeth Hospital and United Christian Hospital to thank frontline staff for their efforts.



▲ 伊利沙伯醫院急症室部門主管黃志強醫生（左二）向梁智仁教授（左三）講述工作情況。
Dr Gordon Wong, Chief of Service (A&E) at Queen Elizabeth Hospital (second left), provides Professor Leong (third left) with an update on how the hospital is handling the seasonal surge in patient numbers.

Professor Leong toured the Accident & Emergency (A&E) department and medical wards at both hospitals to learn more about the staff deployment and patient flow strategies being used to cope with the increase in patients. He asked colleagues to share their views on their workloads and conditions and provided tasty treats to express his appreciation for their tireless dedication to serving the public in the challenging seasonal conditions.

HA has implemented several measures to manage the winter surge. These include providing a special subsidy for colleagues required to work overtime and hiring part-time medical manpower to help ease workload pressure.

防流感 有妙法

Smart ways to stave off the dreaded flu

最近天寒地凍，冬季流感高峰期又到，預防流感，當然是打流感針，更可以食得「醒目」些，適時保養。

由醫管局、非政府機構同大學三方協作的中醫教研中心，建議飲食宜清淡，可用食療，湯水，推薦一款簡單易做的「蘇葉生薑紅糖茶」，等大家在冬春寒冷時，可散寒解表。❤

To stave off the recent spike in flu cases in our city and to protect yourself from this unwelcome seasonal visitor, you are encouraged to enhance your overall health by engaging in good eating habits in addition to having a flu shot.

The Chinese Medicine Centres for Training and Research, a tripartite collaboration among the Hospital Authority, non-governmental organisations and local universities, suggest having a light diet and plenty of soups to help boost health in winter. The Centres also recommend drinking perilla leaf tea with ginger and red sugar to build a good defence against the cold weather. ❤

蘇葉生薑紅糖茶 Perilla leaf tea with ginger and red sugar

材料

蘇葉 (9g) · 生薑 (9g) · 一碗水

製作方法

上述材料同煮10分鐘，去渣，加入適量紅糖，溫服。

Ingredient

Perilla leaves (9g), Ginger (9g), water (250 ml)

Method

Put the two ingredients into water and boil for 10 minutes. Discard the residue and add red sugar to taste. Drink the tea while it is still warm.



預防流感小貼示 Tips for flu prevention

中醫有「冬傷於寒，春必病溫」的理論，每年1至3月香港正值料峭春寒，亦因此成為季節性流感的高發期。要在這乍暖還寒的日子「上工治未病」，上上之策就是防患於未然。

Hong Kong's winter season doesn't just bring 'the cold' – it also sees an annual spike in flu cases in our city. Coming together with the cold spell is the flu spree in winter and early spring. To shield yourself from the biting chill, we share with you the following tidbits.

「虛邪賊風，避之有時」

及時增減衣物，適應溫度變化
Wear climate-appropriate clothing

「食飲有節」

飲食要適時、適量、適溫
Maintain a balanced diet and take meals at regular intervals

「精神內守、病安從來」

保持心態平衡
Take steps to maintain good mental health

「起居有常」

作息有規律，適量運動
Work and rest in moderation and take regular exercise

總之，聽醫生話，保重身體，飲食得宜，有適量運動及足夠休息，自然可增強抵抗力，開開心心過寒冬啦。

In short, the key to safeguard your health this winter is to build a stronger immune system by following doctors' advice on how to look after yourself through means of healthy diets, moderate exercises and good quality rests.

節日工作 雙重快樂

需要輪班，是病房護士生涯的一個部份。哪管是颶風暴雨的日子，抑或喜氣洋洋的節日，我們都要準時出更，堅守崗位。這「使命感」從我第一天穿上護士制服開始，已植根於心，全因為病者無時無刻都需要我們照顧。

在兒童病房工作卻略有不同，這裡節日氣氛特別濃厚。同事會因應節日為整個病房悉心佈置。目的是盡量使病童在住院期間繼續有家的感覺，減少恐懼。與此同時，對於因工作而不能與家人共渡佳節的我們，繽紛的佈置也為緊湊的工作添上新趣。

每年的聖誕，我們這裡都會有各色各樣的精彩佈置及宴會，曾有醫生同事及病童的爺爺一同扮演聖誕老人派禮物，跟病童開開心心過節，使他們即使在醫院，也能感受到節日的歡樂及忘却痛楚和不適；而我們也興高采烈地為他們找個親角度拍照。

農曆新年就更加熱鬧，病房會貼上我們以及病童寫的揮春，雖然不是鐵劃銀鈎，但都是各人最得意的傑作和真誠祝福。每每看到穿得紅燦燦的病童跟我說祝福，加上他們燦爛的笑容，真的甜在心頭，而這些都是驅動我們加倍努力的動力。

我發覺我們這裡的同事很少申請在節日正日放假，也許是因為在節日上班，可以跟可愛的病童和合作無間的同事一起渡過，下班後又可再跟家人慶祝，變成雙重的歡樂。我深信多年來我這個上班模式的，早已得到家人——特別是我的女兒——的體諒及支持。想感受繁忙工作環境中透着的節日氣氛和溫暖，歡迎到兒童病房，細意體驗！❤

文：黃凱欣

東區尤德夫人那打素醫院兒童及青少年科註冊護士

1分鐘自由講 Minute Talk



課程教路 做個好領袖 Learning the art of good leadership

總辦事處培訓及發展組一直為不同崗位的同事提供相關實用課程，且不斷更新內容，務求令大家在自己的專業，發揮所長。

「管理學202」課程系列已有近1,500名同事修畢，最近更新後，將繼續邀請具五年經驗的副顧問醫生、資深護師、一級治療師和一級行政主任或同級修讀。課程為期四天，分設「自我領導」、「員工投入」、「團隊凝聚」、「變革管理」四個單元。新內容加強了切合現況的管理理念、技巧，以及臨床例證等，同時加入技巧領導，

贏取下屬支持，達致團隊共識；變革流程及管理阻力的要訣。

另外，將於今年3月推出「良好病人服務—態度、技巧」支援人員課程，會透過影片和互動的半日工作坊，提升前線同事的服務態度和技巧。同事亦可登入網上學習中心（內聯網 <http://elc> 或互聯網 <http://www.ha.org.hk/haelc>）瀏覽「有效病人溝通實戰劇場」網上學習課程，看同事親身演繹個案，用15分鐘，掌握如何對付難纏的情景，贏取病人信任。❤

To promote continuous learning and enhance the knowledge and skills of Hospital Authority staff, the Training and Development Team at Head Office provides a diverse range of courses and practical training programmes for colleagues at all levels and in all job functions.

Open to Associate Consultants, Advanced Practice Nurses, Therapists I and Executive Officers I or

equivalent who have completed five years of service, the recently revamped 'Management 202' programme, entitled 'Lead Self', 'Engage Others', 'Assimilate Team' and 'Deliver Results', introduces participants to authentic leadership, buy-in approach generating, consensus-building framework as well as process and human resistance management in the change journey. Close to 1,500 colleagues have completed the programme which is run as a series of four one-day training workshops.

A new training programme for supporting staff will make its debut in March. Making use of video presentations and trainer-led discussion sessions, the half-day programme on 'Better Patient Services for Supporting Staff' is designed to enhance the service capabilities of supporting staff, particularly in their interactions with patients.

There are also plenty of opportunities for self-directed learning through HA's e-Learning Centre (Intranet - <http://elc> or Internet - <http://www.ha.org.hk/haelc>), including the 15-minute, video-based 'Better Patient Communication' programme, where clinical staff provide guidance on how to deal with two patient-centred situations frequently encountered by healthcare workers. Don't miss it! ❤



加強肌肉耐力 新春跑快啲!

Get stronger and faster for New Year Run

為備戰醫院管理局新春長跑，同事已加緊訓練。專家說，齋練跑不夠，要同時鍛鍊肌肉耐力及穩定性，才有更好效果！律敦治醫院及鄧肇堅醫院的物理治療師同事，介紹了三個針對核心及下身等肌肉訓練給大家參考，希望同事3月1日再創好成績！💪

Want to improve your performance in the upcoming Hospital Authority New Year Run? The physiotherapists at Ruttonjee & Tang Shiu Kin Hospital advise that just pounding the pavements won't be enough for success. These experts suggest that adding the following three core and lower body strength-training exercises to your training regime could help you cross the finish line with a new personal record on March 1! 💪

前傾跑 雙手靠牆支撐，

手臂伸直，身體向前傾，至腳跟離地，伸直膝蓋。上身保持挺直，慢慢提高左膝至胸口，右腳保持伸直，腳跟離地，然後放下左膝至準備動作，交替右膝。60下為一組，每次3組。可逐漸提速。

Leaning Forward Run

Extend arms at shoulder height, rest hands on wall and lean forward until heels are off the floor and knees are extended. Keep body straight. Slowly bring one knee towards chest, keeping back knee straight. Relax back to starting position and immediately repeat on other side. Complete three sets of 60 alternating repetitions, gradually increasing the alternation speed.

用處：訓練小腿、腿後肌等下肢肌肉力量及控制，可改善跑手步速及步姿。
Benefit: Strengthen the core and even the arms, providing a strong and stable base to power the arms and legs which means better stride, form and speed.



平板支撐

做掌上壓般躺下，手肘屈曲撐起身體，與肩膀對齊，腳趾蹬起，整個身體連下肢成一直線，並收緊腰腹、背、臀及下盆以穩定重心。維持30秒，每次做三組。

Front Plank

From a prone position facing the floor, support your body on your forearms and toes with elbows directly under shoulders and legs together. Ensure your body is aligned from head to heel with a flat back and bottom down. Engage abs, pelvic and back muscles to stable the body. Hold for 30sec. Complete three sets.

用處：透過訓練核心及手臂等多組肌肉，增強全身的耐力及穩定性，有助四肢發力，以改善步幅，步姿及步速。

Benefit: Improve running speed and form by working hips, calves and hamstrings as well as improving control of lower body.



舉腳深蹲

雙腳與肩同寬，腳尖向前，手放腰。屈膝，將臀部慢慢的往下蹲，直至大腿與地面平行。上身保持挺直，膝蓋不可超越腳尖，重心放在腳跟。然後回到準備動作，繼續引體上升至腳跟離地。30秒為一組，做三次。

Toe Raise Squat

Stand with feet hip-width apart, toes pointing forward and hands on waist. Slowly bend knees and drop into a 90-degree squat with a flat back, pausing briefly at the bottom of the squat. Ensure upper body is leaning forward with knees behind toes and weight on heels. Then drive up with your hips and thighs, continuing to rise until you are up on your toes and hold briefly. Repeat this 30-second exercise three times.

用處：提升腿部力量及髖關節彎曲，令跑手有更好表現。亦改善大腿，小腿及足踝等肌肉的肌力、耐力及穩定性。

Benefit: Stronger legs and hip flexors make better runners. The exercise also improves strength, stability and agility of knees, calves and ankles.



提醒你 A heads-up

醫管局羊年新春長跑3月1日在沙田城門河畔舉行。當日還有反斗服裝大比拼，今年新增團體賽，投票選中得勝者有機會獲賞。現場的懷舊小食及兒童天地，大人小孩都可盡情分享！活動更為長期病患籌款，籌款期延至2月27日，歡迎同事繼續慷慨解囊。詳情可瀏覽 <http://ha.home/staff/upload/NYR2015/cover.htm>。

The Hospital Authority's annual New Year Run will take place on 1 March this year at Shatin. To make the race a fun-filled event for the entire family, a Costume Contest, which this year offers a new 'Best Group' category, and a variety of delicious traditional food stalls and a children's activity corner will be held on the day. The race also helps to raise funds for patient services. Donations can be made until 27 February. For more details, visit <http://ha.home/staff/upload/NYR2015/cover.htm>.