



2016



又到毎年公佈「傑出員工及團隊」結果的時候・ 今年評選小組收到23份角逐傑出員工和21份角逐 傑出團隊的提名・經過一輪嚴謹的評選・10個 得獎單位順利誕生。

採訪過程中,可歸納出得獎人擁有「三心兩意」 特質・皆因他們對病人有無限愛心、細心和 耐心,對自己的崗位充滿創意和誠意,心中的 一團火・更足以克服每個挑戰・為病人提供優質

《協力》在此祝賀各位得獎同事・也期盼 「伯樂」明年繼續努力,提名更多「千里馬」 將互助互勵、關愛他人的精神傳揚出去。

另外·醫管局正舉行25周年社區巡迴展覽 (頁20),讓公眾了解我們多年來引入的先進設備 如何使病人獲得妥貼照顧,更讓醫護人員有更多 時間專注臨床護理工作,提升服務質素。

From the editor

The challenging process of judging this year's Outstanding Staff and Teams Award is finally over, with five individual and five team winners selected from a nominee shortlist of 23 individuals and 21 teams.

While the awardees have a diverse range of roles, they all share great compassion, caring attitude, patience creativity and sincerity - the attributes that help them combat every challenges and go the extra mile in providing quality services.

HASLink offers its sincere congratulations to the winners

healthcare services in Hong Kong. To learn more, please

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傑出團隊 Outstanding Teams





肥胖代謝綜合症外科治療團隊 Multidisciplinary Management Team for Patients with Obese Metabolic Syndrome



模範同事 成就美事 Outstanding role models for patient care

傑出員工 Outstanding Staff



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Hong Kong Buddhist Hospital

Head of Human Resources, Hospital Authority

Cluster Chief Executive, New Territories East Cluster

(Winner of the HA Outstanding Staff Award 2015)

梁栢賢醫生 醫管局行政總裁

p.14 Dr Andy Chan Chi-ming

評選小組 Selection Panel

醫管局人力資源委員會主席

Hospital Authority Board Member

Chairman of Human Resources Committee

主席 Chairman

警管局大會成員

Hospital Authority

陳富強先生

造血幹細胞服務團隊

Haematopoietic Stem Cell Service



陳婉儀 p.15 Jenny Chan Yuen-yi



醫管局總辦事處總行政經理 (人力資源)

蕭嘉韻女士

Chief Manager (Human Resources), Hospital Authority Head Office



Ms Katherine Shiu

資訊科技服務大典 - 九龍西資訊科技團隊

新東職戒煙特工隊 新界車擊院聯網



齊鼓掌!一起祝賀新鮮出爐的「2016年傑出員工及團隊」得主。 他們本著敬業樂業的精神、創新求進的思維、大愛無私的關懷,為醫療 服務出心出力,令人敬佩。細閱他們的故事,會發現更多的感動時刻。 Φ

Congratulations to our 2016 Outstanding Staff and Teams Award winners, who have all demonstrated tireless passion, innovation and dedication in taking care of patients. We are sure you will enjoy reading their stories and hope you will join us in commending them on their outstanding achievements!



梁洪寬 p.16 Leung Hung-foon

兒童神經肌肉疾病診療團隊

& Management Team

Paediatric Neuromuscular Diagnostic

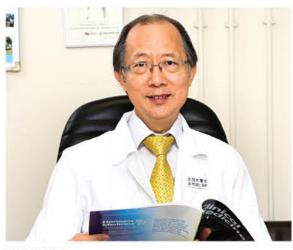


梁承暉醫生 Dr Leung Sing-fai



Tuen Mun Alcohol & Drug Dependence Unit





沈茂光醫生 p.18 Dr Michael Sham Mau-kwong

優異團隊 Merit Teams

深切治療部病人家屬滿意度增進計劃 東區尤德夫人那打素醫院(港島東醫院聯網) ICU Family Satisfaction Enhancement (FAME) Program Pamela Youde Nethersole Eastern Hospital (Hong Kong East Cluster)

IT Service Catalogue (ITSC) Project Team Kowloon West Cluster

NTEC Smoking Counselling and Cessation Team New Territories East Cluster

伊利沙伯醫院結構性心臟病團隊 伊利沙伯醫院(九龍中醫院聯網) OEH Structural Heart Team Queen Elizabeth Hospital (Kowloon Central Cluster)

聯合心,老人骨科齊創新團隊 基督教聯合醫院(九龍東醫院聯網) United Christian Hospital Ortho-Geri Team (UCHOGT) United Christian Hospital (Kowloon East Cluster)

優異員工 Merit Staff

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顧問護師 (泌尿科) 伊利沙伯醫院(九龍中醫院聯網) To Hoi-chu

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一級攝影員

基督教聯合醫院(九龍東醫院聯網)

Photographer I United Christian Hospital (Kowloon East Cluster)

撮合重生希望的媒人 A matchmaker of hopes



港每年有近1,000名血癌、嚴重血病、先天 性代謝系統及免疫系統的病者・對他們來 説,骨髓移植是重牛的一線希望;而香港紅十字會 輸血服務中心的造血幹細胞服務團隊、亦是今屆 傑出團隊之一,每日都努力不懈為這群病者尋找 希望。

團隊是本港唯一為本地和全球血癌和血病病人尋找 合適無血緣骨髓捐贈者的團隊。他們的工作包括 招募骨髓捐贈者、為捐贈者和病人配對、安排捐贈 者捐贈骨髓等。

隊長副顧問醫生梁雅詩稱:「看似簡單的一條龍 服務,其實背後充滿挑戰,如在招募過程中,我們 有口難言,要保持中立,不能如sales般叫人捐 骨髓,但心中當然希望愈多人捐愈好!」

團隊又曾遇到有一名捐贈者在最後一刻遭家人 反對,差點誤了大事。骨髓移植主任馮素婷姑娘 憶述:「曾經有位20多歲的女性骨髓捐贈者 到出門一刻因母親反對,被反鎖在房中,致電 給我們求救。當時我們直接與其母親在電話對話 兩小時,耐性地逐點回應她的疑慮,最後成功 打動了她,支持女兒。」

「香港骨髓捐贈者資料庫」及「香港紅十字會周桃 英臍帶血庫」現儲存10萬多名捐髓者的資料及八千 多袋臍帶血,配對的工作不只限於本港,還會與全 球的骨髓移植中心緊密聯繫,配對合適的骨髓及臍 帶血給本港和其他國家的病者。至今,中心已成功 配對約600宗個案。

中心首次獲醫管局頒發傑出團隊獎,團隊全體人員 興奮不已·但更開心的是可喚起大家對骨髓捐贈的

關注,愈多市民登記捐贈骨髓,就能帶來更多重燃 生命的希望。 🕁

very year, about 1,000 patients suffer from leukemia, serious blood diseases, inborn error of metabolism and immunodeficiency syndromes in Hong Kong. Bone marrow transplantation gives them a hope for new lease of life. The Haematopoietic Stem Cell (HSC) Service of the Hong Kong Red Cross Blood Transfusion Service (BTS) has been selected as one of the outstanding teams and all team members are making every effort to look for hopes with these patients every day.

This team is the only one in Hong Kong that helps patients with leukemia and blood disease locally and abroad to find matched haematopoietic stem cell on unrelated bone marrow. Their responsibilities include recruiting. bone marrow donors, matching donors with patients and making donation arrangements for bone marrow donors.

Dr Jennifer Leung, Associate Consultant and the team's leader, says that "It seems our services are routine and simple, in fact there are full of challenges behind the scenes. In the course of recruitment, we cannot speak up on some occasions and need to maintain a neutral position. We avoid being too 'pushy' as salesmen on recruiting volunteers. What our heart tells is to recruit more volunteers as many as we can.

The team has come across a memorable experience that a bone marrow donor faced strong opposition from her family members at the last moment of making donation. "The mother tried to stop her daughter, who was in her 20s, from donating by locking her up in a room. We received the daughter's call and talked to her mother for two hours. Fortunately, we were able to give reassurance to the mother and she gave full support finally." Carol Fung, the Service's donor coordinator, recalls.



骨髓配對工作在全球推行,圖為新西蘭的代表在港領取合滴的 骨髓回國拯救病人。

Bone marrow matching services are carried out at a global level. This representative from New Zealand's health service received a Hong Kong. bone marrow donation that could save lives in New Zealand.

The Hong Kong Bone Marrow Donor Registry has currently stored more than 100,000 registrations of potential donors and The Hong Kong Red Cross Catherine Chow Cord Blood Bank with over 8,000 units of cord blood. Apart from the work in Hong Kong, the Registry will continue to keep close contact with bone marrow transplantation centres in other countries to find matched haematopoietic stem cells for local and overseas patients. At present, about 600 cases were successfully matched by the Registry .

It is the first time for the BTS to receive this outstanding team award. This is a great encouragement for the Service. All team members are happy to see that more public attention is aroused on bone marrow donations. More citizens register as bone marrow donors, more hopes will be enlightened for saving lives. (†)



我想捐骨髓! A lifesaver's journey



招募

現時收集造血幹細胞捐贈有兩類 一是市民到捐血站被抽取約五毫升的血液樣本; 二是來自臍帶血。以本港的情況,最理想應該有 10,000袋臍帶血的儲存,現時約有8,000袋。

Recruitment

HSC are collected either having five milliliters of blood drawn from the donor or from Cord Blood Units. With the ideal case in Hong Kong being 10,000 bags of available cord blood, there are currently about 8,000 bags in storage.

骨髓捐贈



當醫院遞交搜尋申請文件後,由電腦進行本地及 海外搜索,找出初步脗合的捐贈者,進行第二 階段驗血,最後確定覆驗,確定捐贈者與病人的 白血球組織型高度或完全脗合。

Matching

When the team receives a search request from a hospital, they will use electric bone marrow donor database matching to identify potentially suitable donors. Blood tests will be conducted to find a donor whose human leukocyte antigen typing- matched with the transplant patient.

Bone Marrow Donation



中心聯絡捐贈者,安排醫護向其講解 捐贈的風險和過程,為捐贈者進行詳細身體 檢查及定出具體捐贈安排

Information Session

BTS will contact the donor and arrange medical professionals to explain the process and risks of the donation. A thorough body check and subsequent donation procedures will also be arranged.



捐贈目前有兩種捐贈骨髓方法。

Donation There are two ways to make a bone marrow donation.

四成捐贈者選用此方法。捐贈者 接受全身麻醉,醫生會用特別的 針筒於捐贈者盤骨位置(非脊椎) 抽取「骨髓液」。手術後・捐贈者留 院休息一晚。兩周內可回復正常。

40% donors choose this method. The donor will undergo general anesthesia and two needles will be inserted into donor's pelvis to collect the bone marrow. After the operation, the donor will stay in hospital overnight for observation. In most cases, the donor will fully recover from the procedure within two weeks.



可按捐贈者與受助者的意願。 安排雙方會面。圖為受助者(左) 向捐贈者送上披肩和小花束表謝意

Follow-up arrangements

With the consent of both parties, the donor and the recipient may meet following the transplant procedure. This grateful recipient (left) gave her donor a shawl and a bouquet of flowers to express gratitude.

周邊血幹細胞捐贈

六成捐贈者選用此方法。捐贈者在捐贈前三天需接受白血球生長激素注射 促使骨髓內之造血幹細胞流動至血液外周,才進行收集。捐贈時,捐贈者的 血液會經刺針導管抽取至血液分離機,經分離後採集所需的周邊血幹細胞。 過程需三至四小時,捐贈者即日可回家。一至兩天可回復正常。

Peripheral Blood Stem Cell (PBSC) Donation

60% donors choose this method. In order to obtain enough PBSC for a transplant, the HSC need to be mobilised from the marrow into the blood stream. The donor will receive a Granulocyte Colony Stimulating Factor (G-CSF) subcutaneous injection every day for three days before the donation. During the donation, blood will be moved from a vein in one arm and passed through a tube into a blood cell separator machine. The blood is spun at high speedand the blood cells separate into layers to collect the PBSC. The process may take three to four hours. Donors will be discharged on the same day and, in most cases, will fully recover in one to two days.



香港紅十字會輸血服務中心 (九龍中醫院聯網)

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Hong Kong Red Cross Blood Transfusion Service (Kowloon Central Cluster)

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瘦身塑心 團隊有計 Tackling the weighty issue of obesity



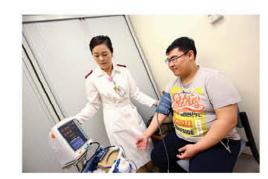


★ | 據世衛組織相關界定,香港公立醫院計算 本港平均每五個成年人中就有一人屬於 肥胖,而過肥通常會引致許多併發症,甚至危害 生命。幸而不少肥胖病人得到威爾斯親王醫院肥胖 代謝綜合症外科治療團隊的守護,成功為身形 及心靈減重。

團隊組建於1999年,由最初四個人發展至現時近 30位成員。外科部顧問醫生黃健鴻説,當年他 赴澳洲培訓時偶見當地減重手術,獲得靈感,返港 後便聯合各科同事不斷鑽研,將減重手術由初期 單一束胃帶,逐步增加至縮胃、胃繞道等五項手 術·更針對性地幫病人減少食量,從根本解決病態 肥胖問題。團隊至今服務了超過1,500名病人。

「我們並非抽脂美容團隊。手術後病人仍然需要 一至兩年時間逐步減重,期間團隊緊密合作,病人 康復服務一項都不能少。」黃醫生說,這個跨部門 團隊不但通過外科手術為病人逐步減重,還輔以 營養學、物理治療等專職治療加快復康,同時幫助 病人心靈減負。

手術後食量少了並不等於食慾減少,病人可能會 眼闊肚窄,如何抵擋心癮呢?團隊的臨床心理學家 就教病友製作減重小卡片,寫上減肥宣言,放在



物理治療師為肥胖病友特別訂做「勁櫈」、「勁床」 足以承受400磅的壓力。 Physiotherapists have built special benches and beds

for obese patients.

銀包顯眼位置,每當購買食物付款前就可提醒自己。

團隊特別成立了「減重病友互助小組」,由同事及 義工組織各種分享會及戶外活動,互相打氣。其中 「交換衫」分享會請來手術後成功瘦身的朋友: 將他們以前穿著的大碼衫褲轉贈給準備做手術的 病友,並分享減重心得。看到昔日40寸褲頭與 現時的「瘦身男女」對比鮮明,病友皆充滿動力。

個別病友接受減重手術後需長時間服藥,團隊護士 同事緊密跟進其身體狀況。「同事定期打電話給病友 詢問康復進展,就算病友幾次沒有覆診,我們都會 繼續聯絡,不會輕言放棄。」黃醫生説。

ocal public hospitals found every five of Hong Kong adults suffer from overweight, according to definition of the World Health Organization. Severe obesity has the potential to create or aggravate multiple complications, some of which entail increased mortality risks. At Prince of Wales Hospital, the Multidisciplinary Management Team for Patients with Obese Metabolic Syndrome is playing a major role in helping obese patients lose weight in a sustainable way by providing physical and psychological support.

Consultant (Surgery) and team leader Dr Simon Wong says it was a training experience in Australia that inspired him to begin developing the service. Historically, the primary type of bariatric surgery available in Hong Kong was laparoscopic adjustable gastric banding. In 1999, Dr Wong formed a four-person team that immediately began working on introducing other types of procedures available, including laparoscopic sleeve gastrectomies and laparoscopic gastric bypasses, which help patients to reduce their food intake. To date, the team has assisted more than 1,500 patients.

"We are not a beauty parlour that provides instant liposuction-based 'fixes'." Dr Wong explains, "Our aim is for a patient's weight loss to be a healthy and sustainable process that occurs over the course of one to two years after surgery. The interdisciplinary nature of our team plays a crucial role in the success of our endeavours." The team's



營養師教煮「有營 私房菜」: 菠菜 **芍十角、**素脂肪帽 片、薑汁撞高鈣奶 總有一款適合病友 Dietitians show patients how to prepare meals that are healthy and delicious.

allied health professionals - including dietitians, physiotherapists and clinical psychologists - are instrumental in the process, particularly as regards psychological and long-term support.

Bariatric surgery can help patients physically reduce their food intake, patients' food addictions and changing behavioural patterns can often be the most challenging hurdle for patients who are battling obesity. One simple strategy that the team's clinical psychologists share with patients is to have them insert a card of weight reduction vows into their purse or wallet to serve as a regular reminder of what they want to achieve.

The team has established the first bariatric patient support group in Hong Kong, which organises a wide range of activities designed to build supportive connections among patients, medical practitioners and volunteers. One initiative of the group has been to encourage patients who have successfully lost weight to donate clothes that are now too big for them to current patients, in part to demonstrate to those who are just beginning their weight-loss journey what is possible with perseverance and time.

The team's research nurses are responsible for following up with post-surgery patients, who usually need to take medication for an extended period of time after their operation. "Our teammates call patients regularly," says Dr Wong.





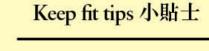
用特製小冊子於術前術後講解注意事項,幫助 逾400磅的病人在手術前調節飲食減輕5%體重。 Provide personalised advice to patients using customised booklets, and help patients weighing more than 400 pounds to reduce their weight by at least 5% through dietary means to reduce the risks of the bariatric surgical procedure.



自製小冊子·制定適合肥胖病人的 病人麻醉後需麻醉師特別監測心肺表現。 運動方案:並由物理治療師親自示範。 Closely monitor patients' condition Provide personalised exercise routines for patients, during surgery, and take appropriate action including through customised booklets. if condition change significantly.



監測病友血糖,必要時調整用藥 Provide care to optimise patient's medical condition before and after surgery.



使用樓梯代替電梯或自動扶手電梯 Use the stairs instead of elevators and lifts.

乘車時提早一個站下車 Get off one stop ahead of destination and walk the rest of the way.

短途以步行代替乘車 If travelling a short distance, walk rather than taking public or private transportation.

多參與户外活動,例如:遠足 Participate in more outdoor activities, e.g. hiking.

多做家務 Do more housework

一邊看電視一邊做運動體操 Do simple bodyweight exercises while watching TV.

尋找你喜歡的活動 Take up a sport.

威爾斯親王醫院 (新界東醫院聯網)

Prince of Wales Hospital (New Territories East Cluster)

Consultant (Surgery) Dr Simon Wong Kin-hung (Team Leader)

Professor, Honorary Consultant (Surgery) Prof Enders Ng Kwok-wai

Associate Consultant (Surgery) Dr Shirley Liu Yuk-wah

Chief of Service (Medicine & Therapeutics) Dr Francis Chow Chun-chung

Associate Professor (Medicine & Therapeutics) Dr So Wing-yee

Associate Professor (Medicine & Therapeutics) Prof Alice Kong Pik-shan

Associate Consultant (Medicine & Therapeutics) Dr Enoch Wu

Nursing Officer, CUHK Ms Candice Lam Chuen-hing, Ms Yung Man-yee

Project Coordinator, CUHK Ms Jenny Ho Nga-ching

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Advanced Practice Nurse (Surgery) Ms Karen Ho Yan-van

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Nursing Officer (Anesthesia and Intensive Care) Ms Leung Ching-han

Department Manager (Dietetics) Ms Phyllis Yau Yin-ping

Dietitian (Dietetics) Ms Ingrid Kan Yuen-man

Consultant (Anesthesia and Intensive Care) Dr Ng Siu-keung, Dr Simon Chan Kin-cheong

Associate Consultan (Anesthesia and Intensive Care) Dr Cindy Tsui Sin-yui

Senior Clinical Psychologist (Clinical Psychology) Dr Alice Kwok Wai-yee

Clinical Psychologist (Clinical Psychology) Dr Mike Wong Tak-po

Senior Physiotherapist (Physiotherapy) Mr Edwin Wu Chun-man

Physiotherapist I (Physiotherapy) Ms Pauline Fong Wai-kuen

Physiotherapist II (Physiotherapy) Ms Chan Hei-man

Assistant Social Work Officer (Health Resource Center) Ms Shannen Chan Tsz-kwan

Social Work Officer (Health Resource Center) Ms Fanny Fong Ching-sze

Queen Mary Hospital and The Duchess of Kent Children's Hospital at Sandy Bay (Hong Kong West Cluster)

.....

Associate Consultant (Paediatrics and Adolescent Medicine) Dr Sophelia Chan Hoi-shan (Team Leader) Clinical Professor (Paediatrics and Adolescent Medicine)

Prof. Virginia Wong Chun-nei

Consultant (Paediatrics and Adolescent Medicine) Dr Stella Chim

Paediatric Specialist (Paediatrics and Adolescent Medicine) Dr Alvin Ho Chi-chung

Research Nurse (Paediatrics and Adolescent Medicine) Ms Amanda Mok

Associate Consultant (Anatomical Pathology) Dr Ronnie Ho Siu-lun

Consultant (Anatomical Pathology)

(港島西醫院聯網)

Dr Tony Shek Wai-hung

Professor (Pathology); Associate Dean (Research) Prof. Leung Suet-yi

Consultant (Clinical Biochemistry) Dr Angel Chan On-kei

Resident (Clinical Biochemistry) Dr Matthew Yeung Chun-wing

Professor (Chemical Pathology) Prof. Lam Ching-wan

Associate Consultant (Radiology) Dr Janice Ip Jing-kun

Chief of Service (Radiology)

Dr Wendy Lam Wai-man

Associate Consultant (Orthopaedics and Traumatology) Dr Evelyn Kuong Yue-ling

Consultant (Orthopaedics and Traumatology) Dr Chow Wang

Dietitian (Dietetics)

Ms Irma Kong

Registered Nurse (Electro-diagnostic Unit)

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Physiotherapist I (Physiotherapy) Ms Maggie Ng Chui-san, Ms Yvonne Yue,

Senior Physiotherapist (Physiotherapy) Ms Alice Chiu

Ms Susanna Choi. Ms Connie Hui

Clinical Psychologist in charge

Mr Brian Ip Clinical Psychologist (Clinical Psychology)

Ms Karen Wong, Dr Connie Leung

Senior Occupational Therapist (Occupational Therapy) Mr Mike Kwan

Occupational Therapist I (Occupational Therapy) Ms Kennis Ha

Ward Manager (Children's Habilitation Institute)

Ms Eliza Wong, MrWong Tsz-ming

Registered Nurse (Children's Habilitation Institute)

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Enrolled Nurse (Children's Habilitation Institute) Ms Yuen Siu-ming, Ms Cheung Wing-hung

Optometrist (Children's Habilitation Institute) Mr Anderson Tam

Assistant Social Work Officer (Medical Social Work Service) Ms Fiona Sui, Ms Karen Cheung



一 童神經肌肉疾病曾被視為奇難雜症,不易 ✓ 確診。10年前・香港的病童如患上非常 罕見的神經肌肉疾病需確診,就要將肌肉組織或 基因樣本越洋送至外國檢測,家人為此支付沉重費 用。港島西聯網一支跨專業團隊應時而生,以專業 精神診療患上神經肌肉疾病的病童。

團隊由瑪麗醫院及大口環根德公爵夫人兒童醫院 多位臨床同事組成。隊長瑪麗醫院兒童及青少年科 副顧問醫生陳凱珊見證了團隊從2009年成立初期 只有基本診斷檢測技術,到現在已掌握多種肌肉 疾病檢測方法的飛躍。

陳醫生説,團隊致力發展對罕有神經肌肉疾病的 檢查。同事透過参考醫學文獻,參加國際性會議及 到外國肌肉疾病科研中心受訓和實地考察,更透過 多年的堅實經驗,將先進服務水準帶回香港。 「團隊工作經常遇上困難,但同事都很用心,透過 大家努力和各方捐贈,成功建立先進的肌肉疾病檢 測方法,實現本地診斷,減少病童家人負擔。」



復康之路一點都不平坦・全賴團隊的同事用心幫助。 小朋友可以舉手高一些、抬腿高一些、都靠同事背後的努力。 Every movement of the patient's arm and leg is a source of great inspiration for the team in their continuing efforts.

團隊透過臨床和專科專業檢測程序為病童確診。 正確診斷配合有效的藥物治療,令患有先天性 肌無力症的孩子,最終可以正常走路、返學; 令患有杜興氏肌肉委縮症的孩子保持肌力、 減少背彎及心肺問題的惡化。準確的基因診斷 可以影響孩子的一生。陳醫生憶起一位十多歲的 患者小詠,她自小患上先天性肌肉病變,走路 都困難。小詠一直擔心自己的病情會惡化,不敢 憧憬長大後的發展。當她透過基因診斷,得知 自己身體狀況穩定,心情放鬆了下來,對將來重燃

除了服藥,病童亦需接受復康治療及訓練。 團隊的治療師、臨床心理學家、營養師、視光師、 醫務社工、護士等有心人悉心跟進每一位病童。 「這個團隊有如一個圓心・圓的中心・就是小朋友與 他們的家人。」陳醫生說。

這個團隊重視研究,與其他醫院開展研究合作, 亦參加全球性的臨床研究·成為亞洲重要的臨床 研究中心。

aediatric Neuromuscular disorders are rare conditions relating to progressive muscle weakness and movement difficulties. Ten years ago, complex diagnostic workup could only be pursued abroad through sending the muscle biopsy or DNA to overseas laboratory, which involved remarkable expenses on families. A group of multidisciplinary professionals has formed the Comprehensive Neuromuscular Diagnostic and Management Programme in the Hong Kong West Cluster - Queen Mary Hospital and The Duchess of Kent Children's Hospital at Sandy Bay, to treat children suffering from this disease.

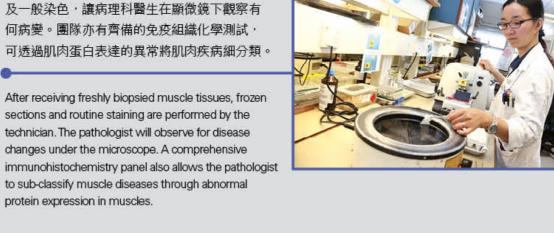
Associate Consultant (Paediatrics & Adolescent Medicine) Dr Sophelia Chan, who leads the team, says she is proud to witness the team has developed from a limited diagnostic testing team in 2009 into a strong troop offering comprehensive neuromuscular diagnostic services.

By continuous learning, training and exchanges with overseas neuromuscular centres, the team has brought on the advancement both in neuromuscular diagnosis and treatment. "With the team's dedication and funding support from various sources, we have established the capability of sophisticated neuromuscular diagnostic testing," said Dr Chan.

The neuromuscular diagnosis is achieved through detailed clinical evaluation. Together with appropriate treatment and training, a child with congenital myasthenic syndrome could eventually walk again and return to school. Children with Duchenne muscular dystrophy after treatment can better maintain muscle power and decrease deterioration in the spinal curvature and pulmonary function. A confirmed diagnosis can affect a child's attitude toward life. Dr Chan remembered a teenage patient Wing Wing who always worried that her disease will intensify with time and dare not think of her future. After knowing her muscle condition is stable and will not deteriorate, she felt relief and

In addition to medical treatment, the team's allied healthcare professionals including physiotherapist, occupational therapist, clinical psychologist, dietitian, medical social worker, optometrist and nurse provide rehabilitation training and support to each affected child and the family." The team is like a closely tied circle, and the children and their families are at the centre of this circle", Dr Chan said.

Through active collaboration with other hospitals and overseas partners, the team has successfully established its status as one of the major centres in Asia.



發現肌肉奧秘

Testing for neuromuscular disease

磁力共振掃描

Magnetic Resonance Imaging (MRI)

小朋友照MRI之前有時會「扭計」,團隊就在

neuromuscular condition. In order to relax children

is set up in front of the Radiology Department.

who are uneasy about having an MRI, a small playroom

MRI scans provide crucial

information about a patient's

透過MRI,醫生可以觀察到病人肌肉組織的病變。

放射科的角落設置小型遊樂場,待小朋友鎮定下來

肌電圖及神經傳導檢查

Nerve conduction study and electromyography (EMG & NCS)

透過檢測,醫生可以找到病因來源(可能是 神經線、神經元、肌肉組織、或神經線與肌肉 接頭之空間)。

The study helps to differentiate the origin of the underlying neuromuscular problem, which can originate from the motor neurons, the nerves, the muscles or the junction between the nerves and muscles.



活組織切片檢測

Muscle biopsies

病理科技術人員將新鮮的肌肉組織進行急凍切片

基因測試 Muscular genetic testing

醫務化驗師用瓊膠電泳分析法將多聚酶鏈 反應後的基因產物分開·及後以基因排序方法 測試基因突變。

Medical technologists of the team use agarose gel electrophoresis to separate products of polymerase chain reaction, before subjecting these products to DNA sequencing to look for gene mutations.



自研候診管理系統 資訊清晰透明度高 QMS provides clear and transparent information





科門診每日要處理大量個案,同事由處理 病人登記、找「牌版」、再叫病人到醫生 房應診,期間既要確保流程暢順,又要與病人交流 對話,工序相當繁瑣。

為使同事有更清晰、更方便的工作流程,基督教聯合醫院在2012年8月開始自行研發「專科門診候診管理系統」。這系統會自動紀錄病人由登記到完成診症的時間,每一個步驟都紀錄在電腦內,一目瞭然。病人也可從實時公佈的診症時段,大概知道自己所需的等候時間。管理層更可在五秒內,將有用的數據整理成圖表,比起過往約需兩星期從不同的系統集合資料,更快更準。

身兼服務總監(資訊科技及電訊)和部門主管 (兒童及青少年科)的隊長陳衍標醫生稱,這個 系統還有一個「貼心」設計。資訊科技同事在研發 之時,多次到專科門科細心觀察,發現健康服務 助理每日要叫3,000個病人名字,叫到聲沙,且 最怕讀錯姓名。他們靈機一觸,借用電腦取代真人 叫名,聲線更動聽,並可以發出粵語、普通話和 英文的讀音,有助減低前線同事的行政負擔,讓 他們可專注照顧病人。

or colleagues dealing with the high number of daily attendances at the Hospital Authority's Specialist Outpatient Clinics (SOPC), the multi-step patient management process is a significant challenge on time and resources.

To help reducing workload pressure on SOPC staff, United Christian Hospital (UCH) began developing an SOPC Queue Management System (QMS) in August 2012.

The QMS records timestamps at key points along the whole patient journey, beginning with registration and ending at the time when the patient sees the doctor. The patients have an idea of the time they have to wait from the real-time announcement of the consultation time-slot being served. The collected data provides valuable information for enhancing workflow processes and making resource allocation decisions.

Dr Bill Chan, Service Director of Information Technology and Telecommunications and Chief of Service (Paediatric & Adolescent Medical Department) at UCH, explains that the QMS is the product of multiple research visits to the SOPC by the IT team to ensure that the system was developed to support the needs of frontline colleagues. One key observation was that Healthcare Assistants were often afraid of mispronouncing patient names when calling them over the clinic's public announcement system, a task they might be required to do as many as 3,000 times per day. The IT team's solution was to develop

a computergenerated voice to make announcement.

Patient names can now be electronically called in

Cantonese, Putonghua and English.

In May 2013, the system was introduced across seven specialties in UCH's SOPC. The success of the system has led to it has been introduced at Queen Elizabeth Hospital and Hong Kong Eye Hospital.

基督教聯合醫院 (九龍東醫院聯網) United Christian Hospital (Kowloon East Cluster)

Service Director (Information Technology & Telecommunications) / Chief of Service (Paediatric & Adolescent Medicine)

Department Operations Manager (Specialist Outpatient)
Mr Tam Wing-sang

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Ms Wong Yin-ling

Dr Bill Chan Hin-biu (Team Leader)

Nursing Officer (Specialist Outpatient)
Ms Yiu Fung-yi, Ms Sin Yuk-hing

Advanced Practice Nurse (Specialist Outpatient)
Ms Wong Pui-shan, Ms Chan Kit-yi, Ms Yeung Ka-man
Ms Lai Yin-yee, Ms Li Chor-man, Ms Tong Suet-yan

System Manager (Information Technology)
Ms Tebby Lee

System Analyst (Information Technology) Mr Dustin Wong

Analyst Programmer II (Information Technology)
Mr. Jackel Ma

系統點運作? How does the QMS work?

病人透過八達通或櫃台 登記後,就可安坐等候區



After registration and payment via Octopus card or at the shroff counter, patients wait in the waiting area.

健康服務助理員定時蒐集 系統印出的登記紙,及將 病人「牌版」送到等候的位置。



The Healthcare Assistants periodically collect the patient registration slips generated by the QMS, and then pick the medical record files of these patients to a designated area.

前線同事只需拿起「牌版」, 掃瞄一下「牌版」上的條碼, 再輸入房號,確定有關資料



Frontline colleagues then scan
the barcode on each file and assign
patients to appropriate consultation
rooms, according to their time
slot, their time of registration and their
subspecialties in the clinic.

按一下鍵,系統會以模擬 人聲的電腦聲音,讀出 病人的名字,請病人到 醫生房應診。不過,通常 骨科病人在登記後需到 其他樓層照X光,故待他 們完成後,會先被叫名收 取預約紙票尾,確保他們 已返回等候區候診, 然後才會往醫生房應診。



Press the 'Enter', QMS announces the patient's name with a virtual voice and the designated consultation room number.

The procedure is somewhat modified for patients who require an x-ray as the x-ray room is on another floor. When such patients return to the SOPC waiting area, colleagues collect the second part of their appointment slip and note that the patient is ready to see the doctor.

港眼科醫院(九龍中醫院聯網)

Hong Kong Eye Hospital (Kowloon Central Cluster)

Deputy Department Operations Manager (ACC & L Block Clinics) Ms Anne Lily Leung

伊利沙伯醫院 (九龍中醫院聯網)

Advanced Practice Nurse (ACC & L Block Clinics)

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Ms Yyonne Chan, Ms Irane Lau

Queen Elizabeth Hospital (Kowloon Central Cluster)

Executive Assistant II (ACC & L Block Clinics)
Ms Y H Leung

Kowloon Central Cluster, Cluster Coordinator (Information Technology) Dr. John Chan Yiu-han

Manager (Information Technology) Mr Hugo Chong

Computer Operator II (Information Technology)
Mr Joe Pang

.

Deputy Hospital Chief Executive (Hospital Chief Executive Office)
Dr Lam Nai-man

Associate Consultant (Hospital Chief Executive Office) Dr Poeman Chan

Ward Manager (Outpatient Service / Triage Unit)
Ms Chiu Wai-yee

Ward Manager (Operating Theatre)
Ms Phyllis Yim

Assistant Hospital Manager (Patient Relations Office) Mr Tony Lam

Hospital Manager (Administrative Services/ Facilities Management & Supporting Services) Ms Alice Chan

醫管局總辦事處 (九龍中醫院聯網) Head Office (Kowloon Central Cluster)

System Manager (Clinical Management Systems Team 6: Patient Management Systems - HKPMI, IPAS, OPAS, IVAS) Mr Dick Lam

IT 三部曲 Patients benefit from three IT enhancement projects

鑑於市民對醫療服務需要日殷,借助資訊科技是其中一個提高效率的途徑,而基督教聯合醫院早於2011年已循此方向發展。

As demand for public healthcare services continues to increase, information technology is playing an important part in enhancing efficiency and supporting colleagues. UCH followed this trend to develop at early 2011.

「出藥一叮」手機應用程式 'Drugs Ready E-Alert Me' mobile app

於2011年推出,深受市民 歡迎,市民只需下載相關 程式,在取藥時輸入 取藥籌號,藥物準備好時

手機就會發出提示, 通知取藥,便利市民。

The app launched in 2011, it will notify individuals when their prescriptions are ready for collection, freeing them from the need to wait in the pharmacy until they are called

專科門診候診管理系統 SOPC Queue Management System

142, 179

今屆的得獎項目·系統於2012年研發·有助減輕 前線同事的行政負擔。

The system won the Outstanding Teams Award this year. It developed in 2012 and helped to reduce the administrative workload of frontline colleagues.

「抽血快證」

'Fast Pass' blood-taking service



今年3月在專科門診的 內科試行,病人可以預約 抽血時間,避免出現 「一係人多到抽唔切, 一係只得兩三人」的情況, 更為善用資源。

The first phase of the service implemented in March this year which supports the more efficient use of resources by enabling patients who need to have blood samples taken to book an appointment in advance, was rolled out for the specialty of medicine at the UCH's SOPC.



飲酒安全十法

認識酒精是危險的

替自己訂下飲酒的上限

避免空肚飲酒

切勿將飲酒養成為習慣

盡量將進飲的時間拉長

淺嚐即止

將酒精稀釋

切勿用酒精來鬆弛神經

切勿用酒精來解決情緒問題

切勿用酒精作為安眠劑



10 tips for drinking responsibly

Understand the potentially adverse effects of alcohol

Set your own limit

Avoid drinking on an empty stomach

Don't drink every day of the week

Have a non-alcoholic spacer between drinks

Sip, don't gulp

Dilute your alcohol

Don't drink to relax

Don't try to drink away problems or challenges

Don't drink in order to sleep better

醫人更醫心 Healing body and soul Tuen Mun Alcohol & Drug Dependence Unit

[一日未死都仲有希望!酒和毒品係戒得到的!]

毒品與酒精害人、影響一生、説的不止危害身體 更可能賠上家庭與事業。專門處理濫藥與酗酒問題的 青山醫院屯門酒及藥物依賴組,面對這些病人時, 除了治療他們身體和精神的健康問題外,更要協助 他們走出困境,展開新生。所以團隊除了醫生、 護士外,職業治療師、社工、臨床心理學家及其他 支援員工的貢獻不可或缺。

「説服酗酒或濫藥病人接受治療並不容易,所以 除了醫生轉介外,診療所也接受註冊社工轉介, 趁病人求助動機強的時候盡快提供協助。每位病人 都有專責的護士跟進,負責統籌整個治療計劃。 由於專責護士熟識病人的背景及明瞭他們的需要

因而取得病人信任,透過互信關係增強病人的 康復機會。|身為「開荒牛」的組長青山醫院 成人精神科部門主管林明醫生説。

他指出,由於不少病人社交背景複雜,例如同時 由感化主任及院外的社工跟進,所以專責護士 剛好成了各方的溝通橋樑,有助制訂最切合病人 需要的治療方案。

毒品或酒的成癮,要徹底治癒,並不容易。林明 醫生表示:「最棘手的是,病人出院後重回 舊日的社交圈子和生活習慣,結果一次又一次 走回頭路。」

為了協助他們重整生活,職業治療師會評估 病人的工作能力,與他們共同制定新的生活計劃 並鼓勵他們參加康復者的互助組織,展開新生活。

青山醫院屯門酒及藥物依賴組早在20多年前成立。 其中物質濫用診療所率先在1995年設立,翌年再 設立全港唯一一間酗酒診療所,專責處理

> 酗酒個案。兩間診療所在20年間,已處 理過超過3,600宗新症,成功率超過 四成·超越一些外國相類似 服務的標準。

另外,團隊也走出社區,參與不少 公眾教育工作,推行培訓及研究,亦從 醫學專業角度提供諮詢,協助社福機構處理 濫藥及酗酒問題。 🗘



我有酗酒問題嗎? Screening test for problem drinking

請回答以下四條問題,如果有兩項 或以上都答「是」,你很有可能已到了 酗酒的地步,需要尋找幫助。

Please answer this 'CAGE' questionnaire. Two 'yes' responses indicate that you may have a problem with alcohol and should undergo a more detailed assessment.

你曾否覺得 應該減少飲酒?

Have you ever felt you needed to Cut down on your drinking?

你曾否因為飲酒而 產生內疚?

Have you ever felt Guilty about drinking?

你曾否因飲酒 被人批評而感到煩惱 "

you by criticising your drinking?

> 你曾否需要在早上 喝酒來鎮定神經才能 開展一日之工作?

Have you ever felt you needed a drink first thing in steady your nerves?

lave people ever Annoyed

the morning (Eye-opener) to

also social workers. Each patient is assigned to a designated case nurse, who serves as a fulcrum of individualised treatment plan, orchestrating liaison work between different parties as many patients may have probation officers or other community social workers taking care of their complicated social problems. This enables case nurses to build rapport with patients and their care-givers, attain deeper understanding of their needs and foster a trusting therapeutic alliance, which is the building block of successful

The road to recovery is often rough and winding. "After leaving hospital in a healthy and clean state, some patients soon return to their previous way of life and meet the same old circle of drug abusing peers. " says Dr Lam. "Sadly, this may pave way to rapid relapse of their addiction again."

Therefore, a key role of the team's occupational therapists is working with the patients on building a more structured, productive way of life that would prevent early relapse. This can be achieved through vocational rehabilitation, programmes on enriching their social life and leisure, as well as self-help groups.

> Established in 1995, TMA&DDU has been regarded as a pioneer of addiction treatment service in Hong Kong. It initially provided services to substance abuse patients through the Tuen Mun Substance Abuse Clinic (TMSAC). With the commencement of service of the Tuen Mun Alcohol Problems Clinic (TMAPC) in 1996, the service expanded to also cover patients with alcohol abuse disorders. So far it is still the only specialised service for alcoholic patients in our public healthcare system. Over the two decades, they have managed more than 3,600 cases, with a success rate of about 40%, which is higher

than certain international standards.

On top of clinical duty, the team is also dedicated to public education, professional training, research and advisory role on public health policy related to drug and alcohol abuse.



Chief of Service Dr Lam Ming (Team Leader)

再次證明,跨團隊合作能使治療成效顯著。

一級職業治療師連允琪和護士長韓予明。

The core members of the team include (from left)

Dr Lam Ming, occupational therapist Pamela Lin and

圖為骨幹成員(左起)林明醫生、

nursing officer Patrick Hon.

"You may break away from the grip of alcohol and drug

Drug and alcohol addiction not only damage one's health -

they also take their toll on a person's life and people around

specialised tertiary treatment unit for patients with alcohol

and substance abuse disorders. In addition to providing medical treatment for associated physical and mental

problems, the unit helps patients return to normal social

role by assisting them in dealing with difficulties in their life

and get their lives back on track. A multi-disciplinary team

consists of psychiatrists, nurses, occupational therapists,

staff joint force to achieve this goal.

social workers, clinical psychologists and other supporting

"It's a challenge to convince drug abuse patients to seek

and Chief of Service of the Department of General Adult

service, we accept referrals not only from doctors, but

help," says Dr Lam Ming, team leader of TMA&DDU

Psychiatry at CPH. "To enhance accessibility of our

Tuen Mun Alcohol and Drug Dependence Unit

(TMA&DDU) under Castle Peak Hospital (CPH) is a

addiction by embracing hope!"

Associate Consultant Dr Tung Chi-kwong,

Dr Yeung Sze-wing

Medical Officer Dr Tang Wing-ki Dr Hariman Keith-wilfred

Department Operations Manager Mr So Chun-kwok

Ward Manager (Special Duty) Ms Poon Mei-ying

Ward Manager Mr Chung Wai-ming

> Deputising Ward Manager Ms Lau Wai-man

Nursing Officer Mr Patrick Hon Yu-ming, Mr Joseph Wong Chi-wa

Advanced Practice Nurse Mr Kenneth Tse Kai-man

Registered Nurse Ms Ivy Cheong Tak-yan,

Ms Koo Wai-wan. Ms Leung Lai-ngor. Mr Tang Sai-shun,

Mr Yuen Chi-wai, Ms Catherine Lee Chi-yin, Mr Tong Wing-ki, Mr Lau Man-kit.

Mr Mok Kin-shing Mr Hui Siu-wing, Mr Cheung Wai-shing, Mr Fung Ka-kit

Mr Choy Siu-wai Enrolled Nurse

Mr Ma Wai-keung, Mr Yan Sing-hung, Mr Chu Suet-hung

Ms Tang Yuk-sim

.

Executive Assistant IIIA Ms Leung Ching-yee, MrTin Kim-Ching

Health Care Assistant Mr Law Chin-chiu, Mr Au Yeung-fai. MrYung Yuk-kwong, Mr Ho Wing-hong,

Mr Cheung Kam-wah, MrTang Kwong-ming

Patient Care Assistant IIIA MrWong Yat-cheung, Mr Li shing-lung, Mr Cheung Chi-heung,

Mr Lee Pak-ho

Occupational Therapist I Ms Pamela Lin Wan-ki, Ms Catherine Li Wai-van. Mr Chong Tak-kwong

Occupational Therapist II Mr Huang Chun-fat, Mr Cheuk Chi-ho

Clinical Psychologist Ms Martina Cheung Sim-ling

Assistant Social Welfare Officer Ms Lau Shuk-fong MrYuen Chun-hong, Mr Ling Wai-haug

團隊自製小冊子・提醒大家絕不可濫藥與酗酒・否則禍害終生。 Various leaflets to alert people to avoid drugs or alcohol abuse, as this may have lifelong consequence

力爭到底全心為人謀福祉 Helping colleagues offer their very best patient care



]理治療對病人有幾重要?「若物理治療做得 **~**」好,病人康復後可以比受傷前的狀態更好, 猶如『重生』。」入行26年的香港佛教醫院高級物 理治療師陳志明博士,扼要道出物理治療的重要性。

陳博士年青時是港隊籃球甲組成員,因一次膝關節 受傷而需進行長達半年的物理治療。在這半年期間 常受痛楚折磨,幸得物理治療師的鼓勵,他才能 與痛同行,並開始對這專業產生興趣。

大學畢業後,從二級物理治療師做起,曾於威爾斯 親王醫院和伊利沙伯醫院工作。陳博士多年來全 心全意為病人謀福祉,如1994年在伊利沙伯醫院與 腫瘤科和麻醉科醫生一起成立「癌症痛症診所」, 致力透過物理治療幫助癌症患者減輕癌病或其治療 引致的痛楚,其後更惠及普通科病人。

直至2008年,由前線變成管理層,擔任佛教醫院物 理治療部部門主管,也是其事業的轉捩點。經過歲月 的磨練,團隊在他領導下由最初的七人增至24人。 今年, 適逢佛教醫院正進行翻新工程, 陳博士成功 為部門爭取更大空間·新的地方將比現時大三倍· 使同事可以更好地發揮,讓病人受惠。

醫院每18個月就會為同事舉辦職安健工作坊,由他 親自教授如何安全及有效地進行體力處理操作和 保護關節:又自製光碟與同事分享易筋經, 八段錦和太極小金鐘的重點招式,提高大家做運動 的興趣,促進身心健康發展。

對病人有同理心,對同事就關心,難怪陳博士兩度 榮獲醫院的傑出員工獎,亦是過往兩隊傑出團隊的 成員之一。今次他更上一層樓,獲醫管局頒發傑出 員工·實至名歸!**♡**



不論爭取資源的過程有多 艱辛,但本著讓同事有更好的 發揮機會,並給病人一個 交代,我願意力爭到底。

Securing additional resources is a challenge, but I will always try my best to enhance the working conditions of my colleagues so they can provide best possible care to needy patients.

In 2008 he was promoted to Senior Physiotherapist and given responsibility for running the Physiotherapy Department at BH. Over the years, his team has grown from seven to 24 staff. To ensure sufficient space for quality patient care, Andy successfully lobbied for the department to be given more space as part of BH's renovation. His efforts were rewarded with a space allocation that is three times larger than before which enhance the working conditions and patient care.

Andy is helping his colleagues stay healthy with tailor-made Manual Handling Operations workshops every 18 months, which teach healthcare workers techniques for minimising the risk of muscle strain or other work-related injury. He has also self-produced VCDs to promote exercise among his colleagues, which features simple Qigong exercises such as Yijinjing,

As a four-time winner of an HA or hospital outstanding award - twice as an individual and twice as part of a team - Andy is a true role model in showing empathy for patients and care for colleagues.



陳博士不時會到大學當客席教授與學生分享臨床經驗 又會到內地提升當地物理治療師的專業水平。 Andy loves to share his clinical experience with university students. He has also visited mainland China to provide professional training to local physiotherapists.



不管工作多繁忙,陳博士也會爭取時間與家人外遊。 Although busy at work, Andy tries to make time to travel with his family.

sports injury might not seem the most obvious A place to find career inspiration. But for Dr Andy Chan Chi-ming, Senior Physiotherapist at Hong Kong Buddhist Hospital (BH) and a Group A player in Hong Kong National Basketball Team during his teenager years, a six-month knee injury rehabilitation programme with a skilled physiotherapist not only took him from despair to hope, but also inspired him to become a healthcare

"Physiotherapy has the potential to give seriously injured patients the opportunity to regain a full and active life."

After graduating from Hong Kong Polytechnic University, Andy began his career as Physiotherapist II and had been working at Prince of Wales Hospital and Queen Elizabeth Hospital (QEH). He was instrumental in the establishment of a Cancer Pain Clinic in QEH with doctors from Department of Clinical Oncology and Department of Anaesthesiology & Operating Theatre Services in 1994, which helped post-treatment cancer patients on pain management. This initiative has since also benefited other types of patients.



猶如命懸於手 不容有失 No room for complacency in life-saving work





▲ 二年如一日,每天清晨踏入造血幹細胞 移植實驗室,瑪麗醫院醫務化驗師陳婉儀 便開始常規處理造血幹細胞樣本,為等待移植的 病人爭取重生的機會。

根據細胞來源和患者血型,已採集的造血幹細胞 樣本,要經過不同處理後才能為病人移植。 陳婉儀為過程中每個環節把關,「在實驗室工作, 眼要利、心要細、手要穩。」陳婉儀説,她每一步 工作都戰戰兢兢,需反覆核對,只因做錯一步, 就會浪費珍貴的血液樣本,無法重新再做。「可能 有人評價我工作『腌尖』,過分執著,但我一定 要盡做到自己的職責。」

每次收到造血幹細胞樣本,陳婉儀都會盡快處理 以便在最短時間內作移植之用。如遇到海外捐獻樣本 tedious, must be completed before HSC products are 於晚上抵達實驗室,為確保樣本新鮮,她二話 不說,即刻著手處理。經過陳婉儀和同事的努力, 該實驗室現時每年可處理近300個造血幹細胞樣本。



平日工作高度緊張,陳婉儀坦言放工後會盡量在家休息, 養足精神。假期則多到倫敦觀光充電。 With an intense workload in the lab, Jenny says she likes to spend her leisure time resting at home or, for longer breaks,

travelling overseas to places such as London

陳婉儀對樣本多於對人,20餘載不減熱情。雖然 不是幫病人做移植的醫生,但她心中有本「救人」 記事簿。「緊張工作後回到家我有時好攰,但回想 一天的工作,我好滿足,好開心!」陳婉儀今年 8月退休,她已經參加了醫管局重聘計劃,著力為 實驗室培養更多人才。

very workday morning for the past 22 years, Medical Technologist Jenny Chan has stepped into the Haemopoietic Stem Cell Transplant (HSCT) Laboratory at Queen Mary Hospital (QMH) for routine processing of Haemopoietic Stem Cell (HSC) product intended for patients waiting for transplants.

Depending on cell source and patients' blood group, various lab procedures, sometimes complicated and ready for transplant. As a key operator in the process, Jenny says that "a keen pair of eyes, a detail-oriented mind and the ability to perform consistently" are just the basic requirements for carrying out lab tasks such as plasma and red blood cell depletion for Bone Marrow harvested products and HSC cryopreservation.

She carefully verifies every step she takes to avoid the unnecessary waste of a single drop of received blood product. "I'm so protective of the product that people might say I am mean! But in transplant work, every drop counts, and I take my responsibilities very seriously," she says.

Jenny does everything she can to maximize the viability and the integrity of the received HSC product. She explains that this can sometimes require working overnight to process HSC product arriving from

陳婉儀 Jenny Chan Yuen-yi

握住包造 血幹細胞樣本, 好似揸住條人命。我不能有 任何錯失,因為無可能隨便 叫人再抽一次骨髓。

When I'm handling a Haemopoietic stem cell product I always remind myself that I'm potentially handling the chance of a new life for a patient - there's no room for carelessness or mistakes.



將已冷藏的造血幹細胞樣本從零下196度的超低溫冷凍罐取出 陳婉儀必須反覆核對病人資料·不容有失。 Jenny Chan cross-checks patient information before removing the HSC products from the ultra-cold cryogenic

overseas. Thanks to the tireless efforts of Jenny and her colleagues, around 300 HSC products are handled at QMH's HSCT lab each year.

More than two decades on from starting work at the lab, Jenny's strong passion for what she does remains unchanged. She says that she is often tired after a busy day, but that she draws great comfort from knowing that her efforts are helping more patients potentially enjoy a new lease on life. Although she is due to retire in August this year, she has signed up for the Hospital Authority's 'retire-and-rehire' programme to help training new lab staff.

持院有道的男人

Innovative 'fixer-in-chief' helps keep PYNEH in peak condition





梁洪寬 Leung Hung-foon

將醫院雜務當是自己家中 的事,減輕醫護同事負擔, 讓他們專心照顧病人。

I see the smooth completion of hospital operational tasks as a personal responsibility. My goal is to free healthcare workers from unnecessary burdens so they can focus on patient care.

位成功男人背後都有一個女人,而一間成功 **上** 醫院背後,就要有位出色的管事,才能把 醫院打理得頭頭是道。總醫院管事梁洪寬(寬哥) 正是東區尤德夫人那打素醫院背後的男人。

寬哥在1985年入職醫院事務署·當1991年醫管局 成立時,覺得這是個能改善本港醫療制度、又能 吸納新思維的機構,所以就轉入醫管局,並於1993 年加入東區醫院,「一腳踢」負責管理清潔部、 院內外運輸、保安部和維修部等約100名員工。

他勇於創新,兩大成就沿用至今:(1)1994年在 病房推行當時行政總經理建議的「預防維修保養 計劃」,每月與支援同事到病房巡查硬件,如門 枱、椅、鎖、燈、水喉和抽風設備等,確保運作 正常,若發現異樣,立即處理,避免日後維修 需時而影響病房服務。(2) 1998年於管事部辦公室 成立一站式支援服務控制室,將清潔、運輸、 保安監控系统、鎖匙管理系統、宿舍管理等支援 服務,集中於管事辦公室。又重新檢視全院的救命 鐘和走火通道的警鐘,提高環境安全。

年底退休的他,回顧半生的工作歲月,寬哥説: 「只要用心工作,做管事都可以是一份好有意義的 工作。最難忘是在2000年2月28日,東座3樓的 精神科病房發現炸彈一事。當時警方評估,要立即 疏散約400名二至四樓的病人和同事,最困難 是要疏散禁閉式病房的精神病人到天台,既不能 坐升降機,又要確保病人不會走失,和處理他們可 能出現的失控行為。幸好,各同事齊心協力, 順利疏散所有人,讓警方引爆炸彈,有驚無險。」

寬哥將青春奉獻給東區醫院,也從東區醫院覓得 一位賢妻。話説寬哥當年因工作關係認識了任宿舍 舍監的太太·最後追求成功·娶得美人歸!

B ehind every hospital, there is a skilled 'fixed-in-chief' who can turn their hand to a multitude of rapid repairs and systems adjustments. Foremost among these multi-talented fixers at Pamela Youde Nethersole Hospital (PYNEH) is Chief Hospital Foreman Leung Hung-foon (Ah Foon).

Ah Foon worked in the Hospital Services Department in 1985 and joined HA in 1991 with the belief that the Hospital Authority was a vital new force for enhancing healthcare in Hong Kong. Later, he joined PYNEH on its opening in 1993, with responsibility for managing around 100 colleagues from cleaning and internal logistics to security and maintenance departments.

A naturally innovative and proactive person, he is particularly proud of two of his early initiatives that are still in place at PYNEH today. Suggested by the General Manager in 1994, the first is a ward-based preventive maintenance system that involves a routine monthly inspection of ward items and installations such as doors, desks, plumbing and ventilation equipment, in order to deal with potential problems before they become major issues. Ah Foon is also the brain behind the establishment of a Central Control Room at the hospital, which serves as a one-stop shop for all supporting services, including cleaning, internal logistics, monitoring



寬哥(黃衣者)熱愛足球,擔任領隊多年,曾帶領球隊獲獎17次。 Ah Foon (in yellow shirt) leads a PYNEH football team that has 17 winners' trophies to its name.



年底退休的寬哥(中排,左)有五位可愛孫仔孫女,太太 (中排,右)是威爾斯親王醫院總醫院管事(支援服務)陳玉冰。 Ah Foon (left, middle row) poses proudly with his five grandchildren and wife Sandi Chan (right, middle row), who is Chief Hospital Foreman (Supporting Services) at Prince of Wales Hospital.

of the security system and the alarm system, the key management system and quarters management.

Due to retire at the end of this year, Ah Foon says, "If you work in wholehearted and sincere way, being a foreman is a meaningful job. My most unforgettable experience was on 28 February 2000 when a bomb was found on the third floor of East Block in the psychiatric ward. Following the instructions of the Police to evacuate, we had to move around 400 psychiatric patients from confinement wards to the rooftop as quickly as possible. This was a huge challenge, as, in addition to being unable to take the elevator and making sure that the patients were accounted for at all times, we had to try to keep everyone's emotions stable. Fortunately, we were successful in our endeavours and the incident was resolved without anyone getting injured."

Ah Foon was lucky enough to also find romantic happiness at PYNEH. In his early days at PYNEH, Ah Foon met his wife, who was a matron of the hospital's staff quarters. The couple has now been married for many years. 🍈



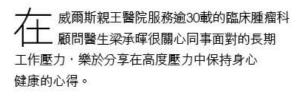
「綠洲」園丁 勿忘初心

Wise words for working with commitments and enthusiasm

梁承暉醫生 Dr Leung Sing-fai

壓力越大,越需要 堅定信念,關心病人。

The greater the challenges we encounter at work, the firmer we should hold onto our belief in taking the best possible care of our patients.



梁承暉説,公立醫院工作繁忙,同事很容易著眼 於個人承受的壓力,但大家亦應該望望周圍, 感受一下其他同事及病人所受的壓力。「同事想 避免被忙碌工作消磨殆盡,可以從家人、朋友、 信仰中尋求支持,調息情緒,嘗試從更闊角度重新 發現醫療工作的價值。」除了該院同事,執教多 年的梁醫生有機會通過醫科畢業生的網絡,了解 當前各醫院不同專科的工作情況。



梁承暉(後排右四)與同事關係融洽,無論與醫護還是文職 同事打交道,有他的地方便有笑聲 Dr Leung (fourth from right, back row) brings

laughter everywhere he goes, with his clinical colleagues and administrative staff saying they greatly enjoy his humorous personality.



梁醫生認為密切的直接溝通可減少誤會猜疑, 使工作流暢。「諮詢其他部門時多進行面對面對 話,比起寫轉介及電話溝通更能衍生出一份 友情。」他認為醫院建立「齊做事、同舟共濟」的 工作氣氛很重要,讓前線同事在忙碌工作中感受到 團隊的力量。

面對現時社會不安,梁醫生形容醫療界是「亂世 綠洲」,因為醫生的核心價值不會變。他説 醫生在「亂世」中堅守崗位,做好這份工,顯得更 為可貴。「在快速工作流程下,同事診症時在忙於 輸入電腦紀錄及開藥之餘,爭取同病人多一些對

Wales Hospital, Dr Leung Sing-fai, Consultant in the Department of Clinical Oncology, has a wealth of experience and advice to share with his colleagues on how to maintain good psychological health in highpressure work environments.

Dr Leung says that when we have a heavy workload it's easy to only focus on our own stress, but we should try to remember that our colleagues and patients are also dealing with pressure and challenges. He encourages medical students and colleagues to draw inspiration for developing resilience and determination from family members, friends and fellow professionals. "Clinicians should keep their occupational value in mind and find ways to avoid burning out," he says.

In an era in which technology makes communication possible without face-to-face encounters, Dr Leung emphasises that the 'human touch' is a valuable tool in working to streamline busy hospital schedules.



梁承暉(前排中)憑著不曾冷卻的熱誠教學,連續六年獲頒 香港中文大學傑出教師獎,至今桃李滿天下。 An enthusiastic educator, Dr Leung (middle, front row) has been awarded a Teacher of the Year Award for six consecutive years from the Faculty of Medicine at The Chinese University of Hong Kong

"Making initial contact with colleagues across departments face to face can build good relationships more easily than communicating by written referrals or telephone calls." Good teamwork in hospitals is vital for ensuring quality healthcare services, he adds.

Dr Leung describes the healthcare sector as a calm haven in socially volatile times, as the commitments of healthcare practitioners never change. He believes that colleagues should offer an unwavering source of comfort and support to people in the community. "It is better to make eye contact with a patient rather than just constantly stare at a monitor during a consultation. People take comfort from every minute that we spend directly engaging with them."

最後的芒果布甸

我曾在某機構擔任外展工作,主力是長者服務。 當時因為有一案主已去世,所以我前往他家中收回 文件及款項。

婆婆(案主太太)與我傾訴:「伯爺公不舒服當日 我陪他喝早茶。他胃口大開·點了自己最喜愛的點 心。之後我同他慢慢逛街。他突然放慢腳步, 原來他看到了麵包店的芒果布甸·我就讓他等我 過去買。」

豈料買完布甸回來,伯爺公突然面青青,嚇到 婆婆馬上叫十字車。伯爺公上車前,婆婆還說: 「你休息一下,我返家拿衫俾你换。」當我到醫院 見到伯爺公被急救中,看到伯爺公好辛苦,我好 難受。這時候婆婆開始眼有淚光,我只可以默默地 聆聽。其實我心底已經好痛。婆婆繼續説:「個天

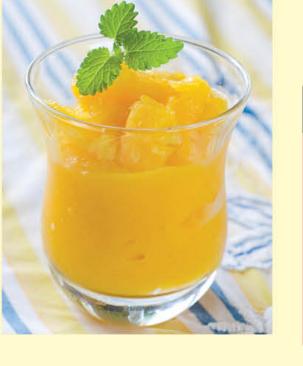
點解要製造呢個遺憾?點解連最後一杯的芒果布甸 都不讓伯爺公好好吃完再走?原本心想去到醫院再

但當時婆婆沒有流淚·望見伯爺公好走·心境突然 平靜。婆婆説:「我以為自己幾十歲人乜都睇化, 點知翌朝訓醒煮早餐的時候泣不成聲,因為我而家 日日只可以煮一份早餐。」

湯國俊

威爾斯親王醫院 感染控制組病人服務助理

文章節錄自「動人故事 • HA」。故事全文: http://ha.home/ha_article/article_display. aspx?article_id=4 • 💠



1 分鐘自由講 Minute Talk



《公療80年代才被引入香港·起步較遲· 性經沈茂光醫生等本地先驅結合本地特點 不斷探索發展,逐漸成熟,照亮末期病人的最後 人生。

現任葛量洪醫院紓緩醫學部顧問醫生主管的沈茂光 胸肺科科班出身,80年代畢業後在香港大學內科部 工作,眼見癌症患者最後階段活得痛苦,心裡很不 安樂。幾年後,沈醫生轉職律敦治療養院,由此開 始他的紓緩醫學生涯。搬到葛量洪醫院之前,他曾 於白普理寧養中心建立第一支紓緩治療隊伍及在南 朗醫院發展紓緩醫學服務。

沈茂光注重幫助末期病人重新尋找人生意義。 「中國人的家庭觀念重・我會開導病人將人生重點



轉移到家人身上。如果他們沒有家人,我們醫護同 事就是他們屋企人。」見盡病人撒手塵寰,沈醫生 總結:愛與關心是紓緩治療的永恆法則。

生命中不能辜負的愛 Love and compassion for the final journey 生命中不能辜負的愛

> 他的愛心曾避免了兄弟仇恨可能造成的終生遺憾。 曾經有位兄長因為不滿弟弟在父親重病時未能盡責 照顧,在父親過身後要即刻領走遺體,讓弟弟無法 見父親遺容。幸好沈醫生平時與病人家屬密切 溝通,知道其中緣由,經過多番勸解,驚險地化解

> 「紓緩治療科同事對待病人的態度,會直接影響 其心情和病情,所以無論任何情況,醫護都要包 容、善待病人」沈醫生説。回憶往事,這番話在他 經歷南朗醫院紓緩病房搬遷時感受最深。

2003年南朗醫院搬遷,原本四層空間共200張 紓緩病床,一下減至葛量洪醫院的48張,同事 亦因此流失了過半。同事初到新院感覺寄人籬下, 士氣受挫,照顧病人時亦明顯受到影響。為此, 沈醫生積極協助同事解讀紓緩治療的意義,建立 團隊精神,幫助同事紓解壓力,最終同事敞開

That palliative care has moved from a near-taboo issue in Hong Kong to an established part of public healthcare services over the past 30 years, due in large part to the dedicated efforts of pioneers such as Consultant i/c in Palliative Medical Unit at Grantham Hospital (GH) Dr Michael Sham.

Trained in respiratory medicine, Dr Sham worked at University Medical Unit in the 1980s. His exposure to the suffering of terminal cancer patients at the hospital led him to an interest in palliative medicine and it quickly became the focus of his career-first at Ruttonjee Sanatorium, then Bradbury Hospice and Nam Long Hospital, and GH since 2003.



沈醫生愛好文學,鍾意寫詩。 他曾在南朗醫院搬遷時,作了 一首藏頭詩《南朗醫院情懷》 勃勵同事投入新院工作。 A keen admirer of poetry, Dr Sham composed a Chinese acrostic poem to commemorate Nam Long Hospital before its incorporation into GH, with the aim of encouraging his colleagues to look forward.

Dr Sham's 'golden rule' for palliative care is to show compassionate love. For patients, this often means helping them focus on what is meaningful and important to them. "I often guide end-of-life patients to focus their thoughts on their families or caregivers," he explains.

沈茂光醫生

Dr Michael Sham Mau-kwong

陪伴病人走人生最後

一程, 紓緩科的同事

絕不可以黑面迎人,

要向病人散播快樂與愛。

Palliative caregivers

should be messengers

of happiness and

compassionate love for patients on their last journey of life.

His golden rule also helps families who lose loved ones. In one example, the elder son of a patient wanted to collect his father's body before his younger brother could see the body as 'punishment' for the latter failing to help care for their father. Dr Sham used compassion and understanding to facilitate communication with the elder brother, which not only avoided an upsetting incident but also helped resolve longer-term resentments.

Dr Sham takes an upbeat approach when interacting with his patients and encourages his colleagues to do the same in the belief that the attitude of a caregiver has an effect on a patient's condition. His greatest challenge in this regard was following Nam Long Hospital's incorporation into GH in 2003, which led to the number of palliative beds falling from 200 to just 48, and a more than 50 per cent cut in related manpower. Aware of the adverse impact this development would have on some of the remaining staff, Dr Sham helped the staff to appreciate the meaning of palliative care and strengthen teamwork, so as to help boost the morale and relieve the stress of his colleagues. 💮

傑出同事 獲贈特別版藍呔藍絲巾 **Outstanding Award winners earn their blues**

今年的傑出員工及團隊成員,均會獲贈25周年 特別版藍色領呔及絲巾留念。設計出自時裝設計 名師鄧達智之手,以代表醫管局願景使命和 核心價值的五隻熊仔為主題,以百分百真絲布料 製造。藍色領呔及絲巾顏色柔和親切。絲巾呎吋較 之前紅色及杏色款大,現可作披肩之用,更易配襯

同事心動想買來自用?請前往醫管局大樓二樓 職員合作社認購。如果醫院或部門訂購 可往「醫管局紀念品一站通網頁」 (http://ha.home/souvenir/)網上訂購。 💠



This year's winners in the Outstanding Staff and Teams Award are among the first people to get their hands on the latest designs in the Hospital Authority's stylish range of 100% silk neckwear. The beautiful new blue tie and scarf are an excellent addition to the collection developed by renowned Hong Kong fashion designer William Tang, who used the HA Bear - which embodies HA's vision, mission and values - as a central design motif. The blue scarf is larger than the existing red and beige options, and can be used as a scarf or a shawl.

Interested colleagues can go to the HA Staff e-Co-Op Shop (2/F, Hospital Authority Building) to purchase the blue collection. Hospital and department purchases can be made using the One Stop Online Requisition for HA Corporate Souvenirs (http://ha.home/souvenir/).

新社區復康中心 投入服務 **New community** rehab centre in service

為了加強聯網醫院及社區復康的聯繫,位於九龍醫院 的「醫院管理局社區復康中心」已於3月23日開始投 入服務,為患有不同疾病或殘障的人士,提供自我照 顧、活動能力、溝通及工作等方面的復康服務。

政府憲報亦公告,由4月8日起,醫院管理局條例中 所指明的「醫院服務」不再包括「復康專科及資源中 心」及「扶輪兒童復康專科及資源中心」所提供的服 務。刊憲是因應從該日起,醫管局已終止管理及營運 位於香港理工大學的「復康專科及資源中心」及位於 薄扶林沙灣徑的「扶輪兒童復康專科及資源中心」。 💠 中心」依循醫管局既定 **收费。锋星期一至五** 上午9:00至下午5:50開放 Fees and charges of the services at CRSSC have been aligned with the gazetted fees and charges in the HA. The service hours are 9:00am to 5:50pm from Monday to Friday.

「醫院管理局社區復康



The Community Rehabilitation Service Support Centre. Hospital Authority (CRSSC), located in the Kowloon Hospital, has commenced service starting 23 March, providing continued rehabilitation services to people with different illnesses or disabilities who have difficulties in self-care, mobility, communication and work.

The Government Gazette announced that, with effect from 8 April, services provided by the Rehabaid Centre

and the Rotary Rehabaid Centre for Children are no longer classified as 'hospital service' in accordance with the Hospital Authority Ordinance. The gazette arrangement was made as the HA has ceased the management and operation of the Rehabaid Centre currently located at Hong Kong Polytechnic University and the Rotary Rehabaid Centre for Children currently sited at Sandy Bay, Pokfulam, effective from 8 April.

患者陳計錞見到沈醫生最開心,因為可以同他好似朋友般聊天。 Seeing Dr Sham is a high point in the day for Kai-shung.



社區巡迴展:科技優化病人服務

Roving exhibition celebrates past and present HA service innovations

今年是醫管局25周年,回顧這四分一世紀,同事 憑著以人為本和創新精神,不斷更新硬件和軟件的 配套,為本港醫療發展帶來重大變化。

單是病床的數目由逾21,000張增至逾27,000張; 市民到急症求診數目由130萬人次大幅增至220萬 人次,專科門診就診人次則由近390萬人次增至 近720萬人次。

另外,同事利用先進科技,自行研發多個臨床和 非臨床的系統,如「e藥通」手機流動應用程式、 住院病人藥物處方系統、數碼圖像技術和臨床醫療 管理系統等,讓市民得到優質的醫療服務。

想了解更多嗎?歡迎到場參觀「醫院管理局25周年 社區巡迴展覽」(見表)或瀏覽 http://www3.ha.org. hk/ha25/index.aspx。展期由4月中至7月底,已於 樂富商場和何文田商場展出。♥️

As the Hospital Authority looks back on its first 25 years of service, there have been many developments in the technology, techniques and infrastructure which help continually improve patient health in Hong Kong.

For example, the number of patient beds has increased from 21,000 to 27,000. The number of attendances at accident & emergency departments and specialist outpatient clinics increased from 1.3 million and 3.9 million respectively to 2.2 million and 7.2 million.

In addition, a wide range of advanced medical technologies have been introduced to enhance service quality, such as the 'TouchMed' mobile app, the In-patient Medication Order Entry System, filmless technology and the Clinical Management System.

The 'HA 25th Anniversary Community Roving Exhibition' began in mid-April and has already been on display at Lok Fu Plaza and Homantin Plaza. If you are interested in visiting the exhibition to learn more about HA's use of technology in medical services, please see the table for upcoming venues and dates or check the website http://www3.ha.org.hk/ha25/index.aspx for further details.



大會在開展禮當日派發健康宣傳單張, 又有攤位遊戲和小丑扭汽球,吸引不少街坊參觀。 Game booths, balloon artist and health information leaflets at the launch ceremony were well received by members of the local community.

展覽日期及地點 Exhibition dates and locations

日期 Date	地點	Location
30/4 — 6/5	藍田啟田商場	Kai Tin Shopping Centre (Lam Tin)
14/5 — 20/5	葵涌石籬商場二期	Shek Lei Shopping Centre Phase II (Kwai Chung)
28/5 — 3/6	鴨脷洲利東商場	Lei Tung Commercial Centre (Ap Lei Chau)
11/6 — 17/6	馬鞍山頌安商場	Chung On Shopping Centre (Ma On Shan)
9/7 — 15/7	天水圍天澤商場	Tin Chak Shopping Centre (Tin Shui Wai)
16/7 — 22/7	筲箕灣愛東商場	Oi Tung Shopping Centre (Shau Kei Wan)



活動開展禮由(左起)醫管局大會成員 葉永堂、醫管局主席梁智仁教授、食物及 衞生局局長高永文、領展資產管理有限公司 行政總裁王國龍,和醫管局代理行政總裁 張偉麟醫生主持。

The launch ceremony was officiated by (from left) HA Board Member Charlie Yip Wing-tong; HA Chairman Professor John Leong Chi-yan; Secretary for Food and Health Dr Ko Wing-man; Chief Executive Officer of Link Asset Management Limited George Hongchoy; and HA Deputising Chief Executive Dr Cheung Wai-lun.