



**Keynote address**

**By**

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**Collaboration – The Prescription for Quality Care**

Minister Chen, Dr York Chow, Mr Anthony Wu, honoured guests, colleagues, ladies and gentlemen:

Thank you very much for taking time to join the HA Convention. You have played such an important part in our service, so don't be surprised to find yourself appearing in my powerpoint.

Before I took up this post I was told it is a demanding job, and that, for instance, I have to be "on call" every moment of the day and every day of the year. The first thing I asked for was to have the 24-hour clock in my office to be replaced with a 48-hour one! But I now realise even 48 hours in a day are not enough! The HA faces daunting challenges, and I wouldn't have survived for the past seven months without the sterling guidance of Dr York Chow, our board members and Mr Anthony Wu, and the wonderful support of all my colleagues.

In the next twenty minutes, I'd like to share with you some of the past year's highlights, our plans to face the challenges, and why collaboration is the prescription for quality care.

The Hospital Authority plays a pivotal role in our community. As Hong Kong's major healthcare provider, we make significant contributions, both directly and indirectly, to the health and well being of our city's residents.

Since it was set up 20 years ago, the HA has made all-out efforts to provide accessible, affordable, high-quality, patient-centred healthcare services for Hong Kong. Our achievements have made us the envy of many other countries and regions around the world.

Having said that, a system like ours requires considerable and ever-increasing resources and efficiency. An American comedian said: "A hospital bed is like a parked taxi with its meter running." Hong Kong now spends around 5% of its GDP on healthcare, about half of that spent in the public sector. It may not seem like a lot compared with the OECD countries. However, the fact of the matter is that the HA's total expenditure has markedly increased since 1992. Over 90% of HA's budget comes from the Government, which now accounts for nearly 15% of our total recurrent government expenditure in 2010-11.

How do we use that money? Well, in common with other advanced countries worldwide, Hong Kong faces many factors, such as the growing and ageing population, technology advancement, changing disease

patterns and the community's rising expectations. Demand for healthcare services and our workload have risen considerably over the years. We now need more resources to treat a patient compared with those of 20 years ago. In response, we have been recruiting more staff, opening more hospitals, buying more equipment like CT and MRI, starting new services, and expanding many of our existing ones.

We have also been focusing efforts and resources on enhancing the quality and standards of our services.

Now, while money, technology, medicines and hospital buildings are essential resources for delivering top-notch services, we all know they cannot do it by themselves. The other – most crucial – ingredient we need is people. Patient-centred care requires the input of many different categories of highly professional and dedicated people. Over the last seven months, Chairman & I as well as our Secretary Dr York Chow have been hearing many touching patient-care stories, and we have been hearing what our colleagues do behind the stories. We haven't just heard about them in forums and meetings; we have also experienced them when we have been alongside our colleagues while they go about their daily duties. At the same time, we have learned about their "sleepless nights". But, most importantly, we can also sense the passion that burns within their heart. We know how the passion drives the efforts they make and the price they often pay in their lives to do their best for the community.

Apart from healthcare "hardware" and passion in our hearts, what other

personal attributes are required to deliver what our patients need? I think quality care also depends on effective interpersonal and inter-professional relationships. Such relationships must be based on a clear understanding of each patient's unique needs and a shared vision about how we can satisfy them. The patient journey cuts across specialties and professional groups.

As healthcare professionals, we need to look beyond the walls of our hospitals and establish, nurture and maintain close partnerships with the other stakeholders. Besides patients and their families, they include government departments, NGOs and the community as a whole.

If we successfully nurture and sustain all these relationships, we should be able to create synergy that will allow us to build a healthcare system network that not only delivers services that satisfy Hong Kong's medical needs, but one that enables its residents to enjoy healthier and happier lives.

This brings me to the heart of my theme today: Collaborative care – the Prescription for Quality Care. In a nutshell, it means bringing these individuals, organisations and the entire community together. Everyone in Hong Kong wishes to see healthcare services that constantly improve and fulfil their role in a better and better way. And collaboration is the best way of harnessing and combining all the knowledge and energy that is generated by this heartfelt wish, and turning it into a reality.

What exactly do I mean by collaborative care? Well, it can take many

different forms.

One good example is when medical specialists and primary care physicians collaborate to devise and deliver customised treatment to match the individual needs of each patient.

Another is when nurses collaborate with patients and their families to empower them by teaching them about their diseases and how to manage them.

Or it can simply mean bringing patients together or helping them to collaborate online, so they can share their experiences and give each other valuable moral and socio-psychological support.

The prerequisite for all the examples of collaborative care I just mentioned is effective communication. That means overcoming the barriers which sometimes exist between different types of healthcare professionals. It also requires healthcare professionals to interact better with patients and the community.

One of the critical success factors for collaborative care is an emphasis on cooperation, rather than competition or supremacy. It requires us to share our knowledge and resources with each other, instead of guarding our “professional mystique” in a way that makes our work incomprehensible to the very people who depend on it. That is the only way collaborative care can release its full potential.

Now I'd like to mention some ways in which the HA is already moving towards collaborative care by enhancing collaboration between health carers, patients and other stakeholders.

## **Collaboration with Health Carers**

Everything begins at home. So should collaborative care. If different categories of healthcare professionals can't work closely together within the same healthcare organisation, we won't have much success in collaborating with the other sectors of our society.

In the HA, we know we must think and act more as members of a single team; a team united by a common commitment and responsibility for providing healthcare services that seamlessly cover our patients' evolving needs during every stage of their relationships with us.

The key to success in this area is staff engagement. And effective communication is one of its crucial building blocks. Effective communication generates trust, mutual understanding and mutual respect. Those of us in management roles in the HA recognise our responsibility for maintaining continuous two-way dialogue with all our colleagues. We must therefore always be prepared to express our own personal ideas, and we must always encourage others to do the same. We must encourage the "speak up" culture.

Actually, "corporate listening" has become a catchphrase in our organisation. We know the HA cannot develop and implement good

strategies unless we systematically listen to the insights of our colleagues about how we can do better. Effective listening lets us tap into the huge and profound collective experience, knowledge and wisdom that exists in the HA.

Of course, it's also important to keep our colleagues continuously updated about what we're doing and why we're doing it, so that hopefully they will buy into and support our strategies. In other words, to succeed in this form of collaboration, the HA must be a transparent and accountable organisation. We are trying hard to achieve that, but we aren't there yet. However, if you look back to where we were 20 years ago, we've certainly made considerable progress.

And how are we applying the principle of collaboration with our health carers?

### Collaborative partnerships to address manpower shortage and career development

One area we have focused on in the past year has been the issue of manpower shortage. Our frontline colleagues have expressed great concern about manpower issues, and the extra burdens they have in our hospitals. These issues have undoubtedly affected staff morale, which in turn has increased staff turnover, thereby ramping up the pressure even more and eventually affects our patients. It's a vicious circle.

The vicious circle caused by manpower shortage is something we're determined to break before it becomes a downward spiral.

Our colleagues work with immense dedication. In turn, our goal has always been to ensure they have a reasonable workload, and that they work reasonable hours in reasonable conditions.

We intend to do our very best to recruit and retain the people we need in our workforce. But, unfortunately, we do not have a magic wand to wave so that they suddenly appear out of thin air. Our colleagues have been putting their ideas forward in a very frank manner. We value this feedback, and we have used it to compile a number of measures. They include creating more openings for staff recruitment, enhancing promotional opportunities to retain staff, employing part-time staff, strengthening clinical support services, and offering better support to professionals who are receiving training.

The stability and performance of our supporting staff is also of great importance. We treasure their contribution, and it is our priority to improve their work conditions so that a stable and competent workforce is there to support clinical professionals in the delivery of quality health care services. To this end, we have conducted a comprehensive grade review of our 12,000 supporting colleagues.

## **Collaboration with Patients**

An equally important aspect of collaborative care is partnerships with



patients. To build effective and trusting partnerships, we have to look at things through their eyes, so that we can clearly understand their needs and address them more fully.

In this regard, the conclusion of the Patient Satisfaction Survey last year has been a milestone event in our history. Although such exercises have taken place in other countries, it was the first time one has been conducted on a territory-wide basis in Hong Kong. It will be a valuable assessment of how patients see our services.

To increase the involvement of patients and strengthen relationships between hospitals and communities, we have inaugurated the Patient Partnership in Action Programme. We have also invited patients who have graduated from this programme to serve as partners in local hospital projects and members of the Patient Advisory Committee.

### **Collaboration with Other Stakeholders**

A third area of collaboration I would like to touch on is partnerships with other healthcare service providers in Hong Kong, in the Mainland China, and around the world.

First, I will talk about private-public partnerships. Locally, we have introduced a number of programmes to reach out to private healthcare professionals. These also simultaneously give patients more choices about when and by whom they will be treated. All the programmes aim to achieve “win-win-win” outcomes for patients, the public sector and the

private sector. Some of them are still pilot projects. Others are already well-established and producing clear benefits.

A few examples are:

- The Public-Private Interface-Electronic Patient Record Sharing Pilot Project shares integrated real-time information about patients between the public and private sectors. More than 138,000 patients and over 2000 private healthcare professionals have enrolled in the Project since 2006.
- The Cataract Surgery Programme is a great success. Apart from offering patients the choice of receiving services in the private sector, it indirectly helps the other cataract patients by shortening the waiting time for cataract surgery in public hospitals. Nearly 10,000 people had benefited under the programme, which will continue for five more years from 2011 onwards.
- To cater for the growing demand for haemodialysis service for end-stage renal failure patients, HA implemented a pilot PPP project for three years, starting from March last year.
- As a final example of our interest in collaborating more with the private sector, the HA has conducted a business case study on the government's behalf for a possible new public-private partnership model for Phase 2 of the new North Lantau Hospital, which is now under construction.

#### Collaborative partnerships with academic institutions

Where academic collaboration is concerned, we regard it as our duty to work side-by-side with our colleagues in local universities to develop new methods to treat a variety of illnesses. We are now establishing Phase I clinical trial centres at Queen Mary Hospital and Prince of Wales Hospital. They will facilitate clinical trials and translational research in Hong Kong. While the universities will take the lead in operating the centres, the HA is providing the sites, and we will render appropriate support to them.

We are also working with universities and non-governmental partners to open centres for training and research into Chinese medicine.

#### Collaborative partnerships with other external stakeholders

Partnerships with professional colleagues overseas are of the utmost importance in our ongoing quest to raise the standards of our services.

The successful launch of the hospital accreditation programme has been one of the most significant examples of the gains we can make by maintaining this outward-looking mindset.

Thanks to the efforts of our colleagues, five of our hospitals have so far achieved accreditation, demonstrating that their services comply with world-class standards. The scheme will be extended to fifteen more in the next five years.

#### Collaborative partnerships with Mainland China

An increasing number of Hong Kong people have gone to live, work or retire in the Mainland in recent years, especially in Shenzhen. To ensure they receive continuity of medical care if they need it, we recently signed an agreement for the Hong Kong Patient Referral Project with the Shenzhen Authority. This allows for the transfer of medical records of Hong Kong residents who receive treatment in designated hospitals in Shenzhen when they return to Hong Kong for further treatment at designated HA hospitals.

We also have frequent exchanges with our Mainland counterparts in various areas including professional training and hospital management.

#### Collaborative partnerships with other organizations

Many governmental, non-governmental and community organisations can play beneficial roles in healthcare services. I would like to mention one example we are currently doing in the area of caring for people with mental health problems.

It is the Case Management Programme to support patients with severe mental illness, which collaborates with a number of service providers, particularly the Social Welfare Department. Following its initial success in three districts, it is now being extended to five more.

I hope what I have mentioned and the examples I have given will underline the many opportunities for collaborative care in our community. Our initiatives so far have, I believe, only scratched the surface of all the

potential that exists. Moreover, the results have made it abundantly clear that all of us can benefit from this model.

In conclusion, I would like to reiterate that, no matter how wonderful our hospital buildings, technology, business plans and strategies may be, we must never lose sight of the basic fact that we rely on the dedicated staff who look after our patients 7 days a week, 365 days a year.

Healthcare is based on teamwork between the people in our hospitals, teamwork between the public and private sectors, teamwork between professionals, patients and their families, and teamwork between all these categories of people and everyone else in the community.

“TEAM means: Together, Everyone Achieves More”. Coming together is just the beginning. Staying together is the precondition for progress. Working together makes it possible for us to achieve results. To have quality care, we need collaboration.

The greatest wealth is health. So it's a worthwhile goal for all of us to strive towards, hand in hand.

Thank you.