## Hong Kong West Cluster 2014/2015 Annual Plan

#### **Introduction**

1. This paper aims at introducing to members of District Council the Annual Plan of Hong Kong West Cluster (HKWC) for 2014/2015.

## **Background**

- 2. Hong Kong West Cluster comprises seven hospitals:
- Queen Mary Hospital (QMH)— A regional acute hospital and teaching hospital of the Li Ka Shing Faculty of Medicine of The University of Hong Kong as well as a tertiary and quaternary referral centre for advanced technology services such as liver, heart and lung, and bone marrow transplants.
- Tung Wah Hospital (TWH) The oldest hospital under the medical division of the Tung Wah Group of Hospitals. It provides acute and extended care, ambulatory and day surgery services. Specialized services include Ear, Nose and Throat (ENT), breast and renal.
- Grantham Hospital (GH) The hospital provides specialist service in palliative medicine and acute geriatrics. It is the major referral centre for the comprehensive management of adult heart and lung diseases in Hong Kong.
- The Duchess of Kent Children's Hospital at Sandy Bay (DKCH) The hospital provides specialist services in paediatric orthopaedics, spinal surgery, paediatrics neurology, neurorehabilitation and developmental paediatrics. It serves child patients throughout the territory.
- Fung Yiu King Hospital (FYKH) An extended care hospital providing geriatric services, rehabilitation and convalescence for medical and orthopaedic patients, and a community outreach service through its Community Geriatric Assessment Team.
- MacLehose Medical Rehabilitation Centre (MMRC) The centre provides comprehensive rehabilitation programme.
- Tsan Yuk Hospital (TYH) A community family health centre.

- 3. HKWC also comprises one satellite institution which is David Trench Rehabilitation Centre and six General Out-patient Clinics at Sai Ying Pun, Aberdeen, Ap Lei Chau, Kennedy Town, Tung Wah Hospital and Central District Health Centre.
- 4. The catchment area of HKWC covers Central and Western and Southern districts of the Hong Kong Island with a population of around half a million. The Cluster is also serving the whole population of Hong Kong through its tertiary and quaternary services such as transplant services and paediatric cardiac surgery, and one-third of its acute services are provided to patients residing outside HKWC.
- 5. The Cluster has a total of 3,135 beds, including 2,853 for acute, convalescent and rehabilitation care, 200 for infirmary care and 82 for psychiatric care as at 31 March 2013.

## **Major Challenges**

- 6. **Ageing Population, Ageing Facilities** The elderly population in the Southern and Central & Western districts are at a higher percentage compared to the whole territory. The demographic shift implies demand for increasing service capacity, which is however met with space limitations and dispersed facilities in the aged and outdated HKWC hospital buildings.
- 7. **Expectations for Sufficiency and Accessibility** 60% of the users of HKWC hospital services are from the Southern and Central & Western districts and they expect the long-serving and trusted HKWC services to be sufficient and accessible for their care. But the expectations for extensive, state-of-the-art services cannot be met without coordinated care, skilful hands and apt technologies.
- 8. **Diverse Roles and Partnership** HKWC hospitals are characterised by a diverse spectrum of parent organisations making indispensable contributions and carrying with them many historical, cultural and traditional differences. Meanwhile, the Cluster's unique association with the Li Ka Shing Faculty of Medicine of the University of Hong Kong has generated opportunities. Academia footprints are ubiquitous in each and every hospital in HKWC, and

HA staff members in there hospitals are likewise conversant with the trinity roles of service, education and research. The increased number of medical students as hospital citizens will nevertheless entail even more space and better facilities. With greater linkage and integration of all players, we shall further strengthen our services that are well aligned, better coordinated and conducive to achieving excellent clinical outcomes for our patients.

## **Major Initiatives in 2014-15**

- 9. HKWC major initiatives for 2014-15 are as follows to align with the corporate objectives:
- Allay staff shortage by recruiting additional nurses and allied health professionals, as well as patient care assistants to relieve the workload of clinical staff.
- Increase service capacity for high demand life threatening diseases, including end-stage kidney disease, cancer, stroke and blood diseases, by enhancing technologies, care coordination, transplantation, and long-term ventilator care.
- Increase surgical capacity for eye procedures and orthopaedic surgery by increasing the capacity of operating theatre services
- Improve management of chronic diseases by enhancing endoscopy, Computerised Tomography (CT), lung function laboratory, and rheumatology services.
- Develop safer service models by further rolling out the surgical instrument tracking system, phasing out the re-use of Single Use Device (SUD), and strengthening specimen tracking system for anatomical pathology laboratory service.
- Increase the capacity for service with growing demand by enhancing geriatric services.
- Adopt modern technology in the provision of transplant-related laboratory support and other surgical technique
- Provide integrated care and enhance community support for children with special-care need with case management model.
- Improve inter-hospital clinical operation by enhancing Cluster's transportation service.

#### **Targets**

10. Targets of HKWC for 2014/2015 are in line with corporate strategic directions as listed below:

# **Allay Staff Shortage and High Turnover**

- Recruit additional nurses to alleviate the nursing manpower shortfall in hospital wards
- Recruit additional allied health professionals to cope with increased workload and enhance support for patients requiring multi-disciplinary care and rehabilitation.
- Recruit additional patient care assistants to share out simple clinical tasks and relieve the clerical workload of allied health professionals

## **Better Manage Growing Service Demand**

- Increase surgical capacity by opening 10 additional operating theatre sessions per week in DKCH for orthopaedic surgery
- Further enhance and consolidate the specialist eye services by relocating the eye services from QMH to GH, and setting up three operating theatres in GH for eye procedures
- Reinforce endoscopy service in QMH by strengthening the nursing support for on-call and emergency endoscopy cases
- Expand the capacity of CT services in QMH and provide an additional
  3 000 examinations per year
- Enhance the lung function laboratory service in QMH to provide 150 additional tests
- Decongesting QMH medical wards through diverting geriatric patients to FYKH and GH

- Enhance the accessibility of pharmacy services by extending the weekday pharmacy service by two hours in TWH and GH; and recruiting additional dispenser grade staff for SOPC pharmacies in the Cluster
- Enhance transplant services in QMH through strengthening the adult ICU care of potential organ donors, improving the pre-phase service for liver transplant patients and enhancing day care service for Haemopoietic Stem Cell Transplant (HSCT) patients
- Improve acute stroke management by implementing 24-hour thrombolytic service for acute ischaemic stroke patients in QMH
- Increase the capacity of renal replacement therapy for patients with end-stage renal disease by providing hospital haemodialysis treatment to two more patients, home haemodialysis treatment to six more patients and home automated peritoneal dialysis treatment to three more patients
- Provide four designated beds to support the care of ventilator dependent neuro-spinal patients in MMRC
- Provide case management service to patients with complicated breast and colorectal cancer; and enhance care coordination of orthopaedic tumor services
- Strengthen mental health services by providing recovery oriented treatment programmes for patients in the psychiatric wards
- Strengthen the nurse-led clinic in QMH for improving the care of rheumatology patients through effective case triaging

#### **Ensure Service Quality and Safety**

• Enhance the quality and safety of medication use for paediatric patients by rolling out the paediatric clinical pharmacy services to DKCH

- Install MALDI-TOF Mass Spectrometry in QMH to speed up microbiological identification for timely diagnosis and treatment
- Implement a barcode-based tracking and archiving system in anatomical pathology laboratories to ensure correct identification of anatomical pathology specimens
- Roll out the surgical instrument tracking system to TWH for supporting the improvement of sterilisation service for operating theatres
- Phase out the re-use of selected types of class II moderate and moderate-high risk Single Use Device (SUD) according to clinical prioritisation
- Adopt Minimally Invasive Surgery (MIS) technique in 70% of the hysterectomy surgeries for suitable gynaecological patients
- Establish breastfeeding support teams in QMH to promote breastfeeding of new-born babies
- Improve laboratory support for transplant services by providing assay for guidance on immunosuppressant dosage for about 220 organ transplant recipients and engraftment analysis for around 200 stem cell transplant recipients

#### **Ensure Partnership with Patients and Community**

 Recruit case manager in QMH / DKCH for the provision of integrated care and enhance community support for children with special-care needs such as those with mental retardation or physical disabilities

# **Ensure Adequate Resources for Meeting Service Needs**

- Extend the outsourced Shum Wan laundry service to TWH and GH
- Enhance Cluster's transportation service to ensure better support for inter-hospital clinical operation

# **Update on QMH Redevelopment Project – Phase 1**

• The phase 1 redevelopment of QMH is conducted in two stages, namely, preparatory works and main works. The preparatory works are mainly for the decanting of existing facilities, equipment and mortuary in Clinical Pathology Building, University Pathology Building and Houseman Quarters to the converted Senior Staff Quarters (SSQ). The conversion works of SSQ have already commenced on 28 July 2014.

The details of QMH Redevelopment Project-phase 1 are attached in Annex 1.

# **Advice Sought**

11. Members are invited to note and comment the above Annual Plan of Hong Kong West Cluster for 2014/15.

# Hospital Authority August 2014

(Received on 27 August 2014)