



**For discussion  
on 24.6.2021**

**AOM-P1668**

## **Hospital Authority**

### **Report on Key Performance Indicators** **(KPI Report No. 50, up to March 2021)**

#### **Advice Sought**

Members are invited to note for information and discussion the quarterly report on Key Performance Indicators (KPI) of the Hospital Authority (HA), covering KPIs of clinical services, human resources (HR) and financial performance for the period ended March 2021<sup>1</sup>. Detailed reports for clinical services, HR and finance performance were submitted to the Medical Services Development Committee (MSDC), Human Resources Committee (HRC) and Finance Committee (FC) respectively at their meetings in May / June 2021<sup>2</sup>.

#### **Background**

2. In this Report, the reporting period is mainly from April 2020 to March 2021, unless otherwise specified. The key observations on the KPI performance are highlighted in the ensuing paragraphs, while the detailed statistical reports are available electronically at the Members' Corner for reference.

3. In view of the emergence of the COVID-19 epidemic in Hong Kong since early 2020, HA has adjusted its services in response to the epidemic along with tightening up infection control measures. During the reporting period from April 2020 to March 2021, there has been a mix of service adjustments and service resumption, and the challenges have been wax and wane.

#### **Key Observations**

##### **Clinical Services (Appendix 1)**

4. With the impact of COVID-19 epidemic on HA's **service volume** across a wide spectrum of services in this reporting period, HA overall was below the 2020-21 estimates for all of the Controlling Officer's Report (COR) service throughput items, including inpatient, outpatient, day hospital, community and outreach services. Reduction in service volume was most noticeable in day hospital services (including rehabilitation day

<sup>1</sup> The last quarterly report on KPIs (up to December 2020) was submitted to the Board through circulation on 25 March 2021 via Administrative and Operational Meeting Paper No. 1643.

<sup>2</sup> Via HRC Paper No. P657 discussed on 11 May 2021; MSDC Paper No. P632 discussed on 7 June 2021 and FC Paper No. 893 discussed on 25 May 2021.

and palliative care day attendances, geriatric day attendances and psychiatric day attendances) and psychiatric outreach attendances, with more than 40% negative variance against both the 2020-21 estimates and the 2019-20 service throughput.

5. With the continuing easing local epidemic situation, services have been gradually resumed to normal activity levels as compared to the corresponding statistics of 2019, i.e. before the COVID-19 epidemic. Service throughput for most items in the first quarter of 2021 was higher than that in the same quarter of 2020, except for geriatric day attendances and psychiatric day attendances, where more stringent infection control measures have been taken in day hospitals for the respective groups of vulnerable patients.

6. With a view to minimising the impact on patients, HA has adjusted its service model where practicable to continue to serve patients. Some services were provided with the use of video conferencing technologies where the activity might not be fully captured under COR / KPI reporting. For example, psychiatric consultation services were provided through telemedicine consultations. Allied health staff followed up on patients' progress via phone or video calls, or providing videos of rehabilitation exercises to patients through HA's rehabilitation mobile application under "HA Go", so as to allow patients to continue with their scheduled home training programmes. For stable specialist outpatient (SOP) clinic patients who required rescheduling of follow-up appointments, drug refill services were arranged according to their needs. On the other hand, to support the service adjustments, HA has expanded the service scope of some of the existing Public-Private Partnership Programmes and launched new public-private collaboration initiatives, with a view to diverting suitable patients from public hospitals to receive treatment in the private sector<sup>3</sup>.

- *Waiting time for Accident & Emergency (A&E) services*

7. HA's overall **percentage of A&E patient attendances seen within target waiting time** for Triage I (critical) and II (emergency) met the targets. For Triage III (urgent) and IV (semi-urgent), HA overall fell short of the targets by 9.7% points (80.3% vs. target 90%) and 3.4% points (71.6% vs. target 75%) respectively. Compared with prior year, there were increases of 3.2% points and 4.4% points respectively for Triage III and IV in meeting the target waiting time.

- *Waiting time for SOP new case bookings*

8. All clusters met the target overall **median waiting time for first appointment for Priority 1 and Priority 2 cases** within two weeks and eight weeks respectively.

9. On the **90<sup>th</sup> percentile waiting time for Routine new case bookings**, amongst the eight specialties being monitored, lengthening in waiting time of Ear, Nose & Throat (ENT), Medicine (MED) and Ophthalmology (OPH) for HA overall was observed when compared with prior year. HA overall's waiting time for ENT, MED,

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<sup>3</sup> The newly developed PPP Programmes under COVID-19 pandemic included Neonatal Phototherapy Service; Radiation Therapy Service; Caesarean Section Service; Trauma Operative Service Collaboration Programme; Breast Cancer Operative Service Collaboration Programme; Cystoscopy Collaboration Programme and Oesophago-Gastro-Duodenoscopy Collaboration Programme. More information was included in the latest regular update to the Board on PPP Programmes at its meeting on 24 September 2020 via AOM Paper No. 1597.

OPH and Orthopaedics & Traumatology (ORT) was above 100 weeks, at 102 weeks, 134 weeks, 127 weeks and 114 weeks respectively.

- *Waiting time for elective surgery*

10. In response to COVID-19 epidemic, HA has adjusted non-emergency and non-essential services to conserve manpower and resources in managing emergency cases. Some elective surgeries have been postponed. For total joint replacement (TJR), **waiting time at 90<sup>th</sup> percentile for patients receiving the treatment of TJR** was 55 months for HA overall, which was lengthened by four months when compared with prior year.

- *Disease specific quality indicators*

11. While HA has adjusted non-emergency and non-essential medical services during the COVID-19 epidemic, emergency and essential treatments to patients are maintained. For example, for colorectal cancer and breast cancer which mainly require essential surgical treatment, their respective waiting time at **90<sup>th</sup> percentile for patients receiving first treatment after diagnosis** (October 2019 to September 2020, with January to September 2020 affected by COVID-19) was both at 70 and 67 days respectively, which was six days and 10 days shorter than that in prior year.

12. For other diseases specific quality indicators, such as stroke, hip fracture, diabetes mellitus, hypertension and cardiac services, etc., variances in KPI performance of disease specific quality indicators against prior year were generally within 5% range of normal fluctuation.

- *Day and same day surgery services*

13. The **rates of day surgery plus same day surgery** for Surgery, ORT and OPH for HA overall were 54.6%, 51.9% and 62.6% respectively. Respective variances against prior year were within 5% range of normal fluctuation. As non-emergency services (e.g. elective surgeries) have been rescheduled with regard to the development of the COVID-19 epidemic, the number of surgeries and number of day surgery plus same day surgery in current period were both decreased by more than 10% when compared with prior year.

## **Human Resources (Appendix 2)**

14. As at 31 March 2021, HA had a **staffing position** of 88 651, which represented a growth of 4.9% when compared to prior year. The workforce in all staff groups had increased and the greatest increase was “Others” staff group<sup>4</sup> (+7.3%). As for the **attrition (wastage) rate** of full-time staff, the HA overall rate (rolling from April 2020 to March 2021) was 8.2%, in which the “Others” staff group had the highest rate (11.2%).

15. During the reporting period, the HA overall **average sick leave days taken per staff** was 6.6 days, which represented a 14.3% reduction when compared with prior year. The average sick leave days taken per staff had decreased by 24.1% in “Allied Health” staff

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<sup>4</sup> Staff group of “Others” includes management/administrative staff as well as other supporting staff, e.g. clerks, secretaries, workmen, operation assistants, executive assistants, etc.

group. The proportion of staff taking long sick leave ( $\geq 50$  days) in HA had slightly decreased (2.3%).

16. During the reporting period, the HA overall **number of injury on duty (IOD) cases per 100 fulltime equivalent (FTE) staff** had decreased from 4.5 cases to 3.9 cases when compared with prior year. “Allied Health” staff group had the lowest rate (1.7 cases), whereas “Supporting (Care-related)” staff group had the highest rate (6.3 cases). As for the number of IOD leave days per 100 FTE staff, HA overall was 64.8 days, representing a decrease of 5.7 days. All staff groups had a reduction of IOD leave days per 100 FTE staff when compared with prior year and “Supporting (Care-related)” staff group had the most significant improvement (-21.2 days).

17. During the reporting period, the **total training days attended by permanent and contract full-time and part-time staff on headcount basis** were 208 335.9 days and the **average training days per staff** were 2.5 days. Among the various staff groups, the total training days and average training days per staff attended by Nursing staff group were the highest, at 117 134.7 days and 4.3 days respectively, while those by “Others” staff group were the lowest, at 16 687.7 days and 0.7 day respectively. It is the first year of reporting and thus, comparison with the figures of prior year is not available.

18. In view of the unstable COVID-19 epidemic worldwide, all overseas training activities scheduled in 2020-21 were suspended as staff safety is the top priority of considerations over service and training needs. A number of non-essential local training activities were cancelled or deferred to adhere to the social distancing measures. The impact of COVID-19 epidemic on training activities, in particular for overseas training, might continue for some time in 2021-22. The total training days and average training days per staff in 2021-22 might also be affected.

## **Finance**

19. For the full-year financial operating results for 2020-21, it may be subject to further changes while the audit fieldwork is now being conducted by HA’s external auditor. After the review by the external auditor, the Audited Financial Statements for 2020-21 will be presented to the HA Board later in 2021.

## **Way Forward**

20. With the continuing easing local epidemic situation, services have been gradually resumed to normal activity levels as compared to the corresponding statistics in 2019, i.e. before the COVID-19 epidemic. HA will continue to closely monitor the development of the epidemic situation, support the Government’s overall infectious disease prevention strategy and suitably adjust the scale of service provision when necessary.

**Report on Key Performance Indicators - Clinical Services**  
**For reporting to the Administrative and Operational Meeting in June 2021**  
**(KPI Report No. 50, up to March 2021)**

\*\*\* The figures serve as comparison/reference only. They are not pledged performance/target of the Hospital Authority. \*\*\*

Reporting Period : 2020/21 (unless specified) for Service Growth in response to Population Change & Ageing Effect ;

1.4.2020 - 31.3.2021 (unless specified) for other items

**Special note**

Figures of current year / period presented in this report are provisional. Figures of prior year / previous period have been revised after data reprocessing and may be different from those presented in the reports earlier.

**Rounding of figures**

There may be a slight discrepancy between the variance and the change derived from individual items as shown in the tables due to rounding.

**The following symbols are used throughout the report**

- Figures equal zero

N.A. Not applicable

§ Figures within 0 and 0.5 (for Service Capacity only) / within 0% and 0.05% / within 0%pt and 0.05%pt

		Current Year	Estimate		Prior Year	
		2020/21	2020/21	Variance	2019/20	Variance
		A	B	C = (A - B) or (A - B) / B	D	E = (A - D) or (A - D) / D
<b>Service Growth in response to Population Change &amp; Ageing Effect</b>						
<b>Service Capacity</b>	* No. of hospital beds (overall)	29 850	29 851	- 1	29 435	+ 415
(as at 31 Mar 2021)					(as at 31 Mar 2020)	
	* No. of geriatric day places	703	703	-	669	+ 34
					(as at 31 Mar 2020)	
	* No. of psychiatric day places	889	889	-	889	-
					(as at 31 Mar 2020)	
<b>Inpatient Services</b>	<b>No. of inpatient discharges and deaths</b>					
	* Overall	961 913	1 198 870	- 19.8%	1 109 302	- 13.3%
	* General (acute and convalescent)	942 093	1 177 400	- 20.0%	1 088 745	- 13.5%
	<b>No. of inpatient patient days</b>					
	* Overall	7 526 203	8 555 000	- 12.0%	8 167 243	- 7.8%
	* General (acute and convalescent)	6 001 197	6 946 000	- 13.6%	6 570 417	- 8.7%
	* No. of day inpatient discharges and deaths	675 650	720 600	- 6.2%	683 477	- 1.1%
<b>Accident &amp; Emergency (A&amp;E) Services</b>	* No. of A&E attendances	1 640 453	2 203 000	- 25.5%	2 048 039	- 19.9%
	<b>No. of A&amp;E first attendances</b>					
	* triage I ( Critical cases )	22 926	22 200	+ 3.3%	22 335	+ 2.6%
	* triage II ( Emergency cases )	48 718	52 000	- 6.3%	52 011	- 6.3%
	* triage III ( Urgent cases )	608 300	748 600	- 18.7%	711 744	- 14.5%
<b>Specialist Outpatient (SOP) Services</b>	* No. of SOP (clinical) first attendances	743 011	846 000	- 12.2%	776 166	- 4.3%
	* No. of SOP (clinical) follow-up attendances	6 730 465	7 168 000	- 6.1%	6 865 554	- 2.0%
	* Total no. of SOP (clinical) attendances	7 473 476	8 014 000	- 6.7%	7 641 720	- 2.2%
<b>Primary Care Services</b>	* No. of general outpatient attendances	5 568 248	6 218 000	- 10.4%	5 815 680	- 4.3%
	* No. of family medicine specialist clinic attendances	313 063	322 600	- 3.0%	307 614	+ 1.8%
	* Total no. of primary care attendances	5 881 311	6 540 600	- 10.1%	6 123 294	- 4.0%
<b>Allied Health Outpatient Services</b>	* No. of allied health (outpatient) attendances	2 510 446	2 941 000	- 14.6%	2 654 470	- 5.4%
<b>Day Hospital Services</b>	* No. of rehabilitation day and palliative care day attendances	33 429	107 600	- 68.9%	84 253	- 60.3%
	* No. of geriatric day attendances	37 525	152 600	- 75.4%	129 963	- 71.1%
	* No. of psychiatric day attendances	45 285	230 400	- 80.3%	194 417	- 76.7%
<b>Community &amp; Outreach Services</b>	* No. of community nurse attendances	900 059	909 000	- 1.0%	886 315	+ 1.6%
	* No. of allied health (community) attendances	26 276	36 000	- 27.0%	33 153	- 20.7%
	* λ No. of geriatric outreach attendances	732 985	750 000	- 2.3%	679 527	N.A.
	* No. of geriatric elderly persons assessed for infirmary care service	1 629	1 850	- 11.9%	1 697	- 4.0%
	* No. of psychiatric outreach attendances	158 772	319 100	- 50.2%	269 705	- 41.1%
	* ω No. of psychogeriatric outreach attendances	67 983	104 600	- 35.0%	93 411	N.A.

Blue > 5% above estimate / prior year

Green > 5% below estimate / prior year

**Remarks:**

\* COR item

λ Starting from 2020-21, the overall service model for Community Geriatric Assessment Team (CGAT) and Visiting Medical Officer (VMO) in HA has been streamlined. The indicators for the number of geriatric outreach attendances and number of VMO attendances are consolidated. Figures of prior year refer to CGAT attendances delivered before service re-organisation. Comparison against prior year is not applicable.

ω Starting from 2020-21, the number of psychogeriatric outreach attendances has no longer included attendances arising from consultation liaison services. Figures of prior year including attendances arising from consultation liaison services are provided for reference only. Comparison against prior year is not applicable.

Current period (R50)								Previous period	
HKEC	HKWC	KCC	KEC	KWC	NTEC	NTWC	Overall HA	Overall HA	
Apr 2020 - Mar 2021								Apr 2019 - Mar 2020	Variance
								A	B C = (A - B) or (A - B) / B

Quality Improvement

Waiting Time for Accident & Emergency (A&E) Services		% of A&E patient attendances seen within target waiting time									
*	triage I (critical cases : 0 minute, 100%)	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	+\$
*	triage II (emergency cases : < 15 minutes, 95%)	97.3%	98.7%	95.4%	99.3%	98.5%	95.7%	99.1%	97.7%	97.7%	-\$
*	triage III (urgent cases : < 30 minutes, 90%)	82.9%	87.6%	72.7%	74.7%	86.8%	76.8%	85.6%	80.3%	77.1%	+ 3.2%pt
	triage IV (semi-urgent cases : < 120 minutes, 75%)	64.6%	85.2%	71.3%	53.7%	82.4%	76.7%	63.4%	71.6%	67.1%	+ 4.4%pt
Waiting Time for Specialist Outpatient (SOP) New Case Bookings		Median waiting time (weeks) for first appointment at specialist outpatient clinics (SOPCs)									
*	Priority 1 (P1) cases	<1	<1	<1	<1	<1	<1	<1	<1	<1	-
*	Priority 2 (P2) cases	6	4	4	6	4	5	5	5	5	-
<b>Ear, Nose and Throat</b>											
	% of P1 cases at SOPCs with waiting time within 2 weeks	99.4%	99.1%	98.4%	99.6%	98.6%	98.3%	99.0%	98.8%	98.8%	+\$
	% of P2 cases at SOPCs with waiting time within 8 weeks	94.9%	97.8%	98.9%	98.4%	96.1%	95.3%	96.8%	96.7%	96.6%	+\$
	90 <sup>th</sup> percentile waiting time (weeks) of Routine cases at SOPCs	106	86	148	97	106	92	79	102	97	+ 5.2%
<b>Gynaecology</b>											
	% of P1 cases at SOPCs with waiting time within 2 weeks	99.7%	98.3%	98.7%	98.9%	91.5%	99.0%	97.3%	98.4%	98.3%	+ 0.1%pt
	% of P2 cases at SOPCs with waiting time within 8 weeks	98.4%	97.6%	98.4%	98.7%	97.8%	97.2%	79.6%	97.3%	98.4%	- 1.2%pt
	90 <sup>th</sup> percentile waiting time (weeks) of Routine cases at SOPCs	41	60	37	93	63	83	73	73	81	- 9.9%
<b>Medicine</b>											
	% of P1 cases at SOPCs with waiting time within 2 weeks	98.6%	97.6%	92.0%	96.9%	97.4%	98.1%	97.4%	96.9%	97.4%	- 0.5%pt
	% of P2 cases at SOPCs with waiting time within 8 weeks	98.0%	97.9%	97.6%	96.2%	97.3%	97.8%	97.6%	97.4%	97.1%	+ 0.3%pt
	90 <sup>th</sup> percentile waiting time (weeks) of Routine cases at SOPCs	106	114	111	149	115	133	118	134	130	+ 3.1%
<b>Ophthalmology</b>											
	% of P1 cases at SOPCs with waiting time within 2 weeks	99.3%	99.8%	99.4%	99.6%	99.9%	99.0%	98.7%	99.3%	99.3%	-\$
	% of P2 cases at SOPCs with waiting time within 8 weeks	98.5%	99.5%	98.9%	97.7%	98.7%	98.4%	98.3%	98.6%	97.8%	+ 0.8%pt
	90 <sup>th</sup> percentile waiting time (weeks) of Routine cases at SOPCs	76	60	134	129	118	76	65	127	123	+ 3.3%
<b>Orthopaedics and Traumatology</b>											
	% of P1 cases at SOPCs with waiting time within 2 weeks	98.4%	97.2%	99.5%	99.4%	99.3%	99.1%	98.8%	99.0%	99.0%	+\$
	% of P2 cases at SOPCs with waiting time within 8 weeks	95.6%	98.7%	99.4%	98.1%	98.2%	98.5%	97.7%	98.0%	97.6%	+ 0.4%pt
	90 <sup>th</sup> percentile waiting time (weeks) of Routine cases at SOPCs	117	74	139	115	103	121	97	114	124	- 8.1%
<b>Paediatrics and Adolescent Medicine</b>											
	% of P1 cases at SOPCs with waiting time within 2 weeks	95.4%	97.1%	99.5%	99.1%	98.8%	96.4%	97.4%	98.8%	98.8%	-\$
	% of P2 cases at SOPCs with waiting time within 8 weeks	94.2%	96.5%	99.0%	97.9%	97.2%	94.5%	96.0%	96.8%	96.3%	+ 0.5%pt
	90 <sup>th</sup> percentile waiting time (weeks) of Routine cases at SOPCs	15	16	17	51	18	26	29	26	38	- 31.6%
<b>Psychiatry</b>											
	% of P1 cases at SOPCs with waiting time within 2 weeks	100.0%	99.8%	100.0%	100.0%	99.5%	99.6%	99.8%	99.7%	99.2%	+ 0.5%pt
	% of P2 cases at SOPCs with waiting time within 8 weeks	99.2%	99.9%	99.8%	99.8%	99.1%	99.5%	99.9%	99.6%	99.3%	+ 0.3%pt
	90 <sup>th</sup> percentile waiting time (weeks) of Routine cases at SOPCs	34	72	34	94	80	99	64	89	100	- 11.0%
<b>Surgery</b>											
	% of P1 cases at SOPCs with waiting time within 2 weeks	97.7%	96.9%	98.7%	98.7%	96.7%	95.5%	97.3%	97.3%	97.2%	+ 0.1%pt
	% of P2 cases at SOPCs with waiting time within 8 weeks	96.9%	99.5%	92.5%	98.4%	96.8%	96.2%	75.0%	93.2%	92.8%	+ 0.3%pt
	90 <sup>th</sup> percentile waiting time (weeks) of Routine cases at SOPCs	75	101	86	112	64	78	122	84	86	- 2.3%

Blue > 5% / 5%pt above previous period

Green > 5% / 5%pt below previous period

Remark:

\* COR item

Current period (R50)								Previous period			
HKEC	HKWC	KCC	KEC	KWC	NTEC	NTWC	Overall HA	Overall HA			
Apr 2020 - Mar 2021											
								A		B	C = (A - B) or (A - B) / B

Quality Improvement (continued)

Waiting Time for Allied Health Outpatient (AHOP) New Case Bookings	Occupational Therapy	Current period (R50)							Previous period		
		HKEC	HKWC	KCC	KEC	KWC	NTEC	NTWC	Overall HA	Variance	
	% of P1 cases at AHOP clinics with waiting time within 2 weeks	97.7%	98.1%	98.0%	97.8%	98.4%	99.1%	99.0%	<b>98.4%</b>	97.8%	+ 0.6%pt
	% of P2 cases at AHOP clinics with waiting time within 8 weeks	98.2%	94.4%	96.8%	98.2%	94.8%	98.6%	96.5%	<b>97.0%</b>	95.1%	+ 1.8%pt
	90 <sup>th</sup> percentile waiting time (weeks) of Routine cases at AHOP clinics	19	29	19	30	24	25	15	<b>25</b>	26	- 3.8%
	<b>Physiotherapy</b>										
	% of P1 cases at AHOP clinics with waiting time within 2 weeks	98.6%	98.3%	97.3%	98.6%	98.5%	97.9%	97.9%	<b>98.1%</b>	98.1%	-§
	% of P2 cases at AHOP clinics with waiting time within 8 weeks	98.6%	98.4%	94.4%	97.6%	96.8%	96.6%	96.7%	<b>96.7%</b>	96.4%	+ 0.3%pt
	90 <sup>th</sup> percentile waiting time (weeks) of Routine cases at AHOP clinics	38	23	30	33	39	32	30	<b>34</b>	39	- 12.8%

**Blue** > 5% / 5%pt above previous period

**Green** > 5% / 5%pt below previous period

		Current period (R50)							Previous period		
		HKEC	HKWC	KCC	KEC	KWC	NTEC	NTWC	Overall HA	Overall HA	
		Apr 2020 - Mar 2021							A	Apr 2019 - Mar 2020	B
<b>Quality Improvement</b> (continued)											
<b>Waiting Time for Elective Surgery</b>	<b>Total Joint Replacement</b>										
	Waiting time (months) at 90 <sup>th</sup> percentile for patients receiving the treatment of total joint replacement	68	50	34	51	51	56	67	55	51	+ 7.8%
	<b>Benign Prostatic Hyperplasia</b>										
	% of patients provided with surgery within 2 months for P1 patients (Jan - Dec 2020)	87.4%	69.8%	25.9%	32.7%	57.1%	52.6%	36.6%	53.3%	84.0%	- 30.7%pt (Jan - Dec 2019)
	% of patients provided with surgery within 12 months for P2 patients (Apr 2019 - Mar 2020)	100.0%	88.5%	96.9%	65.8%	86.3%	80.0%	61.5%	85.1%	96.9%	- 11.8%pt (Apr 2018 - Mar 2019)
<b>Waiting Time for Diagnostic Radiological Investigations</b>	<b>CT</b>										
	% of urgent cases with examination done within 24 hours	99.5%	99.6%	99.2%	97.5%	98.8%	99.3%	99.5%	99.1%	99.2%	- 0.1%pt
	Δ Median waiting time (weeks) of P1 cases	4	6	9	14	2	<1	4	4	5	N.A.
	Δ Median waiting time (weeks) of P2 cases	16	51	27	39	25	25	30	26	26	N.A.
	Δ 90 <sup>th</sup> percentile waiting time (weeks) of Routine cases	132	181	164	185	201	172	214	183	164	N.A.
	<b>MRI</b>										
	% of urgent cases with examination done within 24 hours	100.0%	87.3%	96.7%	97.7%	94.3%	98.4%	93.8%	96.3%	97.4%	- 1.2%pt
	Δ Median waiting time (weeks) of P1 cases	1	<1	16	4	1	5	3	4	5	N.A.
	Δ Median waiting time (weeks) of P2 cases	12	10	63	55	18	23	24	25	26	N.A.
	Δ 90 <sup>th</sup> percentile waiting time (weeks) of Routine cases	64	121	189	82	111	132	72	124	116	N.A.
	<b>Ultrasonography</b>										
	% of urgent cases with examination done within 24 hours	99.0%	96.7%	95.2%	96.5%	94.8%	94.2%	95.0%	95.5%	94.5%	+ 1.0%pt
	Δ Median waiting time (weeks) of P1 cases	3	1	1	<1	1	3	<1	1	2	N.A.
	Δ Median waiting time (weeks) of P2 cases	23	15	41	39	65	30	24	26	26	N.A.
	Δ 90 <sup>th</sup> percentile waiting time (weeks) of Routine cases	125	101	154	170	250	161	111	168	155	N.A.
	<b>Mammogram</b>										
	Δ Median waiting time (weeks) of P1 cases	2	2	1	<1	1	1	1	1	1	N.A.
	Δ Median waiting time (weeks) of P2 cases	14	24	19	58	15	75	13	34	25	N.A.
Δ 90 <sup>th</sup> percentile waiting time (weeks) of Routine cases	104	186	187	158	197	114	70	185	184	N.A.	

**Blue** > 5% / 5%pt above previous period

**Green** > 5% / 5%pt below previous period

**Remark:**

- Δ The data coverage of KPIs on waiting time for diagnostic radiological investigations has been refined with effect from April 2020 to exclude cancelled appointments from the calculation. Figures of previous period(s) straddling April 2020 with rolling 12-month data under different data coverages are not reported. Comparison against previous period(s) is not applicable.



## Quality Improvement (continued)

Access Block  
MonitoringNumber / percentage of patients with access block time more than [4 hours, 12 hours] <sup>N1</sup>**Exception Reporting**Hospitals with **more than 5% of patients with access block time above 4 hours will be listed.**

Their number and percentage of patients with access block time more than 12 hours will also be shown.

## Current period

Jan - Mar 2021

	No. / % of patients with access block time more than 4 hours		No. / % of patients with access block time more than 12 hours	
	No.	%	No.	%
Alice Ho Miu Ling Nethersole Hospital	781	13.6%	-	-
Caritas Medical Centre	895	9.1%	5	0.1%
Kwong Wah Hospital	1 062	13.1%	40	0.5%
North District Hospital	526	9.1%	-	-
Prince of Wales Hospital	1 248	9.8%	-	-
Queen Elizabeth Hospital	6 252	37.3%	1 745	10.4%
United Christian Hospital	2 335	24.2%	703	7.3%

## Previous period

Oct - Dec 2020

	No. / % of patients with access block time more than 4 hours		No. / % of patients with access block time more than 12 hours	
	No.	%	No.	%
Alice Ho Miu Ling Nethersole Hospital	800	13.8%	-	-
Caritas Medical Centre	1 648	17.2%	19	0.2%
Kwong Wah Hospital	1 196	14.8%	90	1.1%
North District Hospital	893	14.2%	-	-
Prince of Wales Hospital	1 766	14.0%	1	0.0%
Queen Elizabeth Hospital	5 470	31.8%	1 779	10.3%
United Christian Hospital	1 281	12.5%	197	1.9%

**Remark:**

N1 Hospitals with admission ward managed by same clinical team of AED are excluded from KPI reporting.

Current period (R50)								Previous period		
HKEC	HKWC	KCC	KEC	KWC	NTEC	NTWC	Overall HA	Overall HA		
Apr 2020 - Mar 2021								Apr 2019 - Mar 2020	Variance	
								A	B	C = (A - B) or (A - B) / B

Quality Improvement (continued)

<b>Access to General Outpatient Clinic (GOPC) Episodic Illness Service</b>	<b>GOPC quota availability (for elders) (%)</b>	100.0%	99.9%	99.9%	98.4%	98.2%	100.0%	99.3%	<b>99.3%</b>	95.9%	+ 3.4%pt
<b>Appropriateness of Care</b>	<b>Standardised admission rate for A&amp;E patients (%)</b>	45.4%	44.3%	38.6%	35.5%	39.4%	39.1%	32.8%	<b>38.4%</b>	35.3%	+ 3.2%pt
	* <b>Unplanned readmission rate within 28 days for general inpatients (%)</b> <i>(Mar 2020 - Feb 2021)</i>	10.2%	9.7%	10.5%	11.2%	12.5%	10.3%	11.6%	<b>11.0%</b>	10.6%	+ 0.3%pt <i>(Mar 2019 - Feb 2020)</i>
<b>Breastfeeding Rate</b>	<b>Breastfeeding rate on discharge (%)</b> <i>(Mar 2020 - Feb 2021)</i>	91.7%	90.5%	82.9%	69.2%	82.6%	88.3%	79.9%	<b>83.3%</b>	83.8%	- 0.6%pt <i>(Mar 2019 - Feb 2020)</i>
<b>Infection Rate</b>	<b>MRSA bacteraemia in acute beds per 1 000 acute patient days</b>	0.1809	0.1361	0.1598	0.1248	0.1954	0.1356	0.1736	<b>0.1595</b>	0.1561	+ 2.2%

**Blue** > 5% / 5%pt above previous period

**Green** > 5% / 5%pt below previous period

**Remark:**

\* COR item

	Current period (R50)							Previous period	
	HKEC	HKWC	KCC	KEC	KWC	NTEC	NTWC	Overall HA	Overall HA
	Apr 2020 - Mar 2021							A	Apr 2019 - Mar 2020

Quality Improvement (continued)

Disease Specific Quality Indicators	Stroke	Hip Fracture	Cancer	Diabetes Mellitus	Hypertension	End Stage Renal Disease	Mental Health Services	Cardiac Services		
% of acute ischaemic stroke patients received IV tPA treatment	6.1%	7.4%	13.1%	11.8%	13.7%	11.3%	15.0%	<b>12.0%</b>	10.5%	+ 1.4%pt
% of patients indicated for surgery on hip fracture with surgery performed ≤ 2 days after admission through A&E	74.4%	79.0%	35.7%	48.9%	53.4%	60.5%	69.2%	<b>57.4%</b>	59.8%	- 2.4%pt
Waiting time (days) at 90 <sup>th</sup> percentile from decision to treat to start of radiotherapy (RT) for cancer patients requiring radical RT	28	28	28	N.A.	28	33	28	<b>28</b>	31	- 9.7%
Waiting time (days) at 90 <sup>th</sup> percentile for patients with colorectal cancer receiving first treatment after diagnosis (Oct 2019 - Sep 2020)	55	87	67	62	73	76	78	<b>70</b>	76	- 7.9%
Waiting time (days) at 90 <sup>th</sup> percentile for patients with breast cancer receiving first treatment after diagnosis (Oct 2019 - Sep 2020)	52	53	73	43	71	80	65	<b>67</b>	77	- 13.0%
Waiting time (days) at 90 <sup>th</sup> percentile for patients with nasopharynx cancer receiving first treatment after diagnosis	50	55	63	N.A.	53	62	59	<b>60</b>	61	- 1.6%
% of diabetes mellitus patients with HbA1c < 7%	55.3%	56.1%	60.9%	54.7%	51.8%	54.2%	60.1%	<b>56.2%</b>	52.4%	+ 3.8%pt
% of hypertension patients treated in GOPCs with blood pressure < 140/90 mmHg	73.5%	77.7%	83.1%	71.9%	72.5%	69.8%	74.9%	<b>74.7%</b>	78.4%	- 3.7%pt
% of end stage renal disease patients receiving haemodialysis treatment (as at 31 Dec 2020)	28.0%	33.1%	28.6%	26.2%	29.9%	24.6%	21.8%	<b>27.1%</b>	26.3%	+ 0.8%pt (as at 31 Dec 2019)
Average length of stay (LOS) (days) of acute inpatient care (with LOS ≤ 90 days)	29.2	33.6	29.2	35.2	30.1	31.4	30.4	<b>30.3</b>	30.8	- 1.6%
% of compulsory psychiatric admissions under the Mental Health Ordinance via AED for patients receiving active Personalised Care Programme care	1.3%	2.0%	1.0%	1.8%	1.8%	1.7%	2.1%	<b>1.7%</b>	1.9%	- 0.1%pt
% of acute myocardial infarction patients prescribed with Statin at discharge	92.8%	90.4%	88.1%	91.4%	88.3%	86.3%	89.9%	<b>89.1%</b>	87.7%	+ 1.4%pt
% of ST-elevation myocardial infarction patients received primary percutaneous coronary intervention	24.9%	51.7%	77.8%	41.2%	15.8%	38.2%	25.4%	<b>40.8%</b>	36.6%	+ 4.3%pt

**Blue** > 5% / 5%pt above previous period  
**Green** > 5% / 5%pt below previous period

Current period (R50)								Previous period		
HKEC	HKWC	KCC	KEC	KWC	NTEC	NTWC	Overall HA	Overall HA		
Apr 2020 - Mar 2021										
								A	B	C = (A - B) or (A - B) / B

## Efficiency in Use of Resources

Capacity and Throughput of Specialist Outpatient (SOP) Services	Throughput for SOP services / Waiting list management	Current period (R50)								Previous period		
		HKEC	HKWC	KCC	KEC	KWC	NTEC	NTWC	Overall HA	Overall HA	Variance	
		Apr 2020 - Mar 2021										
										A	B	C = (A - B) or (A - B) / B
	<b>Ear, Nose and Throat</b>											
	No. of SOP first attendances per doctor	574	478	711	592	518	646	722	<b>610</b>	657	- 7.1%	
	No. of SOP follow-up attendances per doctor	2 980	2 331	2 612	2 232	1 516	2 280	1 962	<b>2 221</b>	2 502	- 11.2%	
	Growth of waiting list against throughput (%)	11.1%	- 2.1%	24.1%	14.0%	16.5%	14.4%	- 8.3%	<b>10.6%</b>	4.8%	+ 5.9%pt	
	<b>Gynaecology</b>											
	No. of SOP first attendances per doctor	161	123	146	213	229	203	127	<b>168</b>	181	- 7.1%	
	No. of SOP follow-up attendances per doctor	904	1 082	974	1 082	692	612	620	<b>852</b>	912	- 6.6%	
	Growth of waiting list against throughput (%)	- 2.0%	2.0%	4.1%	- 3.8%	- 1.6%	- 1.1%	- 11.1%	<b>- 1.4%</b>	- 7.0%	+ 5.6%pt	
	<b>Medicine</b>											
	No. of SOP first attendances per doctor	60	72	63	75	59	77	55	<b>66</b>	70	- 6.5%	
	No. of SOP follow-up attendances per doctor	1 607	1 487	1 344	1 060	1 747	1 380	1 479	<b>1 444</b>	1 518	- 4.9%	
	Growth of waiting list against throughput (%)	2.3%	12.5%	8.5%	29.5%	29.8%	16.0%	9.2%	<b>16.0%</b>	6.7%	+ 9.3%pt	
	<b>Ophthalmology</b>											
	No. of SOP first attendances per doctor	559	507	517	614	666	559	730	<b>593</b>	658	- 9.9%	
	No. of SOP follow-up attendances per doctor	5 094	5 045	5 732	4 368	5 919	4 555	6 213	<b>5 311</b>	5 650	- 6.0%	
	Growth of waiting list against throughput (%)	- 1.0%	- 2.6%	10.9%	- 1.2%	- 6.0%	- 0.3%	- 11.1%	<b>- 1.5%</b>	- 3.3%	+ 1.8%pt	
	<b>Orthopaedics and Traumatology</b>											
	No. of SOP first attendances per doctor	201	187	169	218	147	207	166	<b>183</b>	206	- 11.3%	
	No. of SOP follow-up attendances per doctor	1 421	1 267	1 385	1 398	1 324	1 264	1 355	<b>1 340</b>	1 464	- 8.5%	
	Growth of waiting list against throughput (%)	- 6.1%	- 0.1%	- 8.2%	- 8.5%	9.6%	- 18.6%	2.5%	<b>- 5.5%</b>	- 7.7%	+ 2.3%pt	
	<b>Paediatrics and Adolescent Medicine</b>											
	No. of SOP first attendances per doctor	21	47	25	61	66	37	37	<b>39</b>	47	- 18.6%	
	No. of SOP follow-up attendances per doctor	375	449	371	549	464	386	537	<b>428</b>	519	- 17.7%	
	Growth of waiting list against throughput (%)	3.0%	- 6.5%	- 6.2%	- 6.3%	- 7.3%	- 7.3%	- 36.1%	<b>- 9.3%</b>	- 3.0%	- 6.3%pt	
	<b>Psychiatry</b>											
	No. of SOP first attendances per doctor	70	87	60	114	121	86	65	<b>88</b>	93	- 4.8%	
	No. of SOP follow-up attendances per doctor	2 120	2 075	1 758	2 484	2 779	1 888	2 016	<b>2 193</b>	2 267	- 3.3%	
	Growth of waiting list against throughput (%)	0.4%	4.8%	0.6%	9.6%	6.8%	6.1%	11.7%	<b>6.7%</b>	- 4.9%	+ 11.6%pt	
	<b>Surgery</b>											
	No. of SOP first attendances per doctor	178	123	180	224	186	214	195	<b>185</b>	200	- 7.6%	
	No. of SOP follow-up attendances per doctor	1 284	1 180	1 039	1 146	1 108	936	1 007	<b>1 083</b>	1 173	- 7.6%	
	Growth of waiting list against throughput (%)	- 1.8%	7.0%	4.5%	14.9%	14.1%	0.7%	1.5%	<b>6.0%</b>	0.2%	+ 5.9%pt	
<b>Operating Theatre (OT) Utilisation</b>	<b>Ratio of scheduled to expected elective OT session hours (%)</b>	102.3%	97.6%	94.3%	99.1%	97.0%	96.8%	99.6%	<b>97.6%</b>	97.4%	+ 0.1%pt	
	<b>Utilisation rate of scheduled elective OT sessions (%)</b>	96.3%	98.4%	96.6%	89.9%	90.8%	99.9%	93.9%	<b>95.7%</b>	96.2%	- 0.5%pt	

Blue	> 5% / 5%pt above previous period
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Green	> 5% / 5%pt below previous period
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Current period (R50)								Previous period				
HKEC	HKWC	KCC	KEC	KWC	NTEC	NTWC	Overall HA	Overall HA				
Apr 2020 - Mar 2021												
								A		Apr 2019 - Mar 2020	B	Variance C = (A - B) or (A - B) / B

**Efficiency in Use of Resources** (continued)

<b>Bed Management</b>	<b>Inpatient bed occupancy rate (%)</b>											
	*	Overall	77.5%	67.8%	78.2%	86.4%	82.2%	79.4%	81.5%	<b>79.3%</b>	86.0%	- 6.7%pt
	*	General (acute and convalescent)	78.4%	66.5%	78.4%	87.2%	86.0%	80.1%	90.8%	<b>81.0%</b>	88.9%	- 7.9%pt
	*	Average length of stay (days) for general inpatients	5.9	5.7	7.2	6.4	5.6	6.7	6.6	<b>6.4</b>	6.1	+ 5.0%
<b>Day and Same Day Surgery Services</b>	<b>Rate of day surgery plus same day surgery (%)</b>											
		Surgery	58.1%	38.0%	35.5%	77.9%	61.1%	59.6%	61.1%	<b>54.6%</b>	56.6%	- 2.0%pt
		Orthopaedics and Traumatology	60.6%	22.8%	34.1%	87.7%	52.9%	64.7%	44.5%	<b>51.9%</b>	50.5%	+ 1.4%pt
		Ophthalmology	54.4%	40.5%	82.0%	89.7%	72.7%	67.6%	26.4%	<b>62.6%</b>	67.1%	- 4.5%pt

**Blue** > 5% / 5%pt above previous period

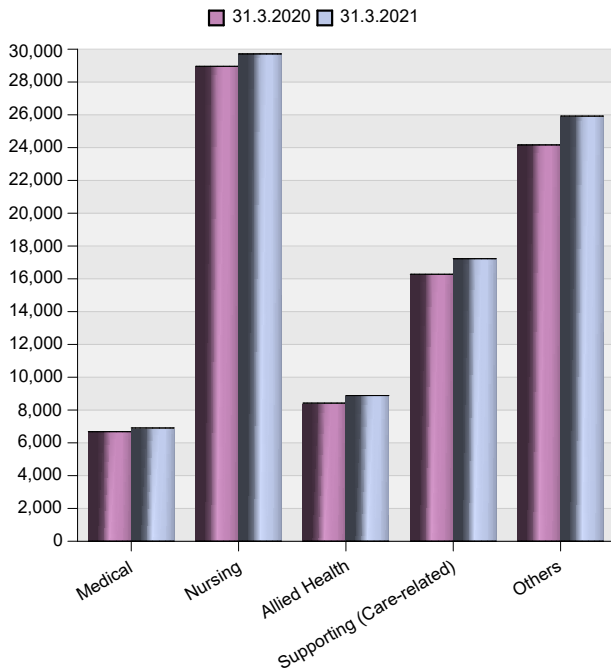
**Green** > 5% / 5%pt below previous period

**Remark:**

\* COR item

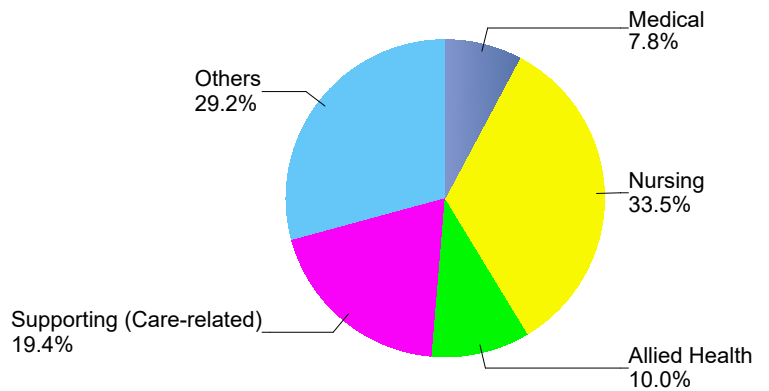
Staff group	Prior year	Current year	COR Revised Estimate as at 31.03.2021 <sup>(2)</sup>	Variance from			
	31.03.2020	31.03.2021 <sup>(1)</sup>		COR estimate		prior year	
	A	B		D = B - C	D / C	E = B - A	E / A
Medical <sup>(3)</sup>	6,681	6,904	6,881	+ 23	+ 0.3%	+ 223	+ 3.3%
Nursing	28,957	29,715	29,580	+ 135	+ 0.5%	+ 758	+ 2.6%
Allied Health	8,420	8,884	8,880	+ 4	+ 0.0%	+ 464	+ 5.5%
Supporting (Care-related)	16,278	17,227	42,570	+ 577	+ 1.4%	+ 949	+ 5.8%
Others	24,166	25,920				+ 1,754	+ 7.3%
<b>Total<sup>(4)</sup></b>	<b>84,501</b>	<b>88,651</b>	<b>87,911</b>	<b>+ 740</b>	<b>+ 0.8%</b>	<b>+ 4,150</b>	<b>+ 4.9%</b>

Blue >3% **above** COR estimate/prior year  
Green >3% **below** COR estimate/prior year

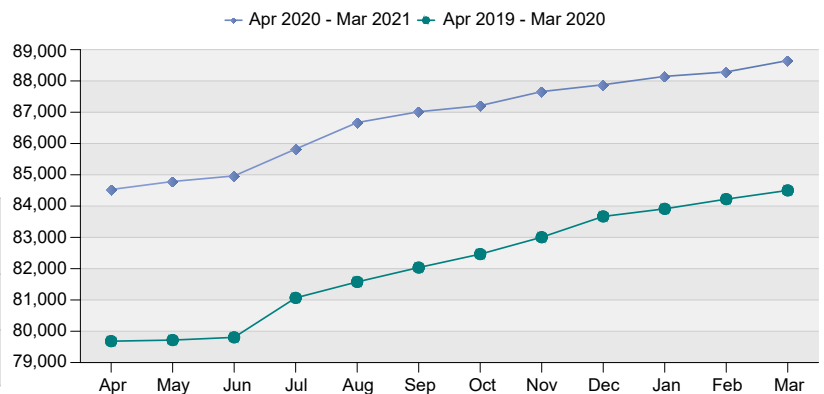


	Medical	Nursing	Allied Health	Supporting (Care-related)	Others
Prior Year 31.03.2020	6,681	28,957	8,420	16,278	24,166
Current Year 31.03.2021	6,904	29,715	8,884	17,227	25,920

Distribution % by Staff Group (as at 31.03.2021)



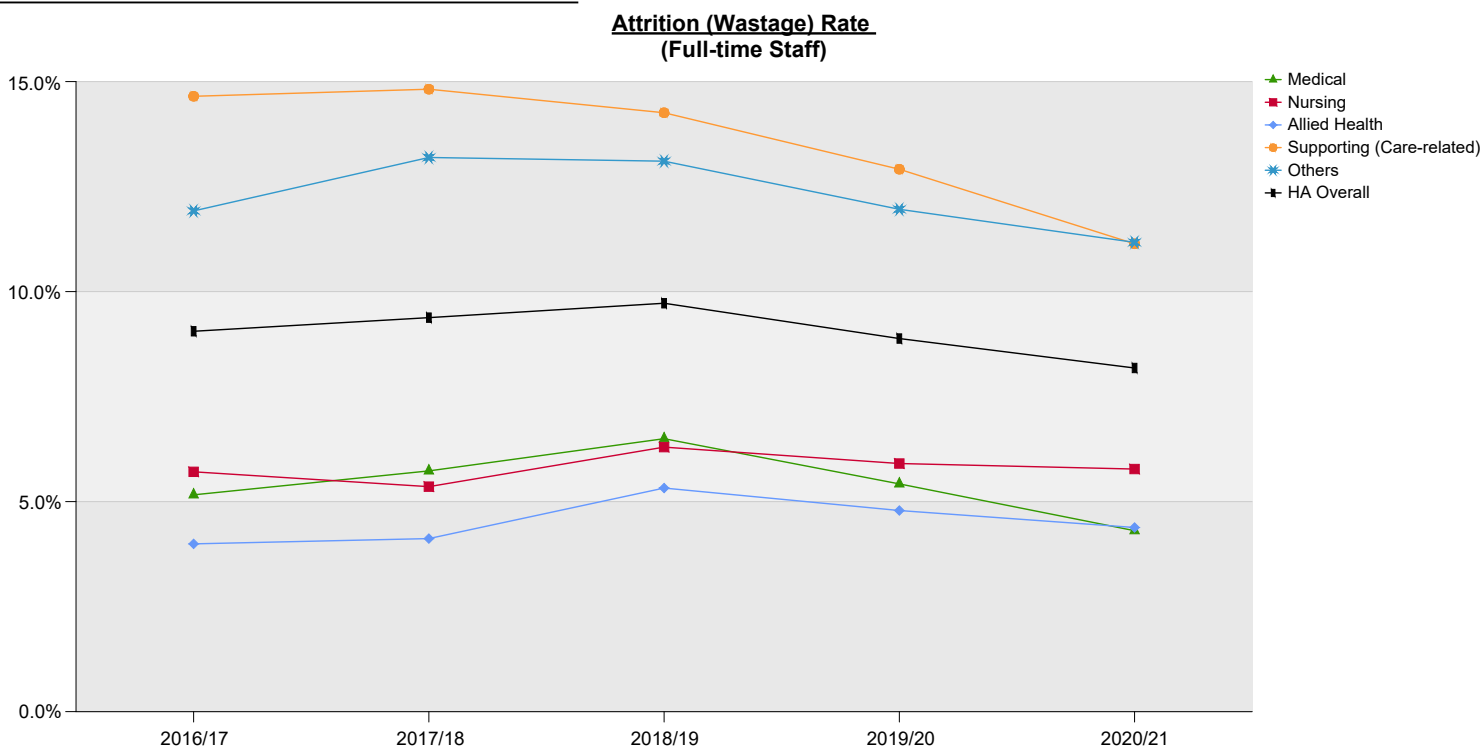
HA Total



Remarks:

- (1) Provisional data for reference only. The data will be updated in the following month to include any backdated transactions
- (2) Grouping is based on COR
- (3) Medical staff group includes Intern & Dental Officers
- (4) Individual figures may not add up to the total due to rounding

## Attrition (Wastage) Rate (%)<sup>(1)(2)</sup> by Staff Group



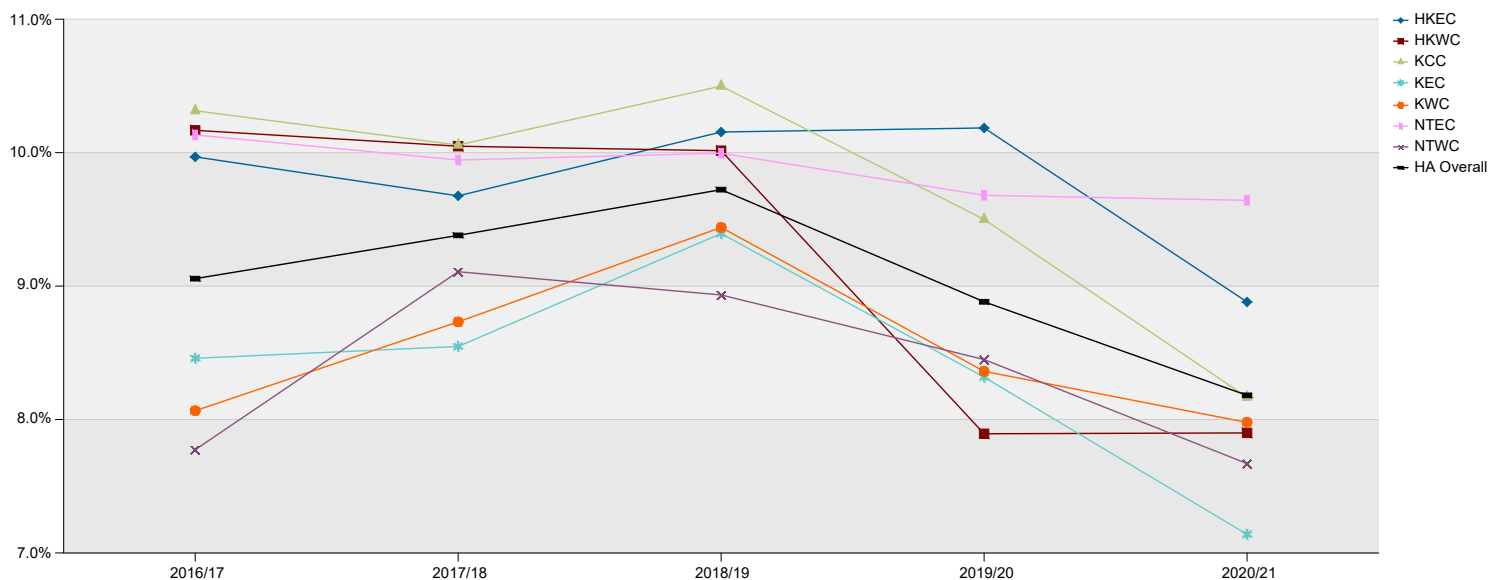
Staff Group	Full-time <sup>(5)</sup>					Part-time <sup>(5)(6)</sup>				
	2016/17	2017/18	2018/19	2019/20	2020/21 (Rolling from Apr 20 to Mar 21) <sup>(4)</sup>	2016/17	2017/18	2018/19	2019/20	2020/21 (Rolling from Apr 20 to Mar 21) <sup>(4)</sup>
Medical <sup>(3)</sup>	5.2%	5.7%	6.5%	5.4%	4.3%	18.3%	29.4%	24.3%	15.6%	11.5%
Nursing	5.7%	5.4%	6.3%	5.9%	5.8%	13.1%	16.0%	15.6%	15.7%	15.0%
Allied Health	4.0%	4.1%	5.3%	4.8%	4.4%	21.4%	22.2%	15.4%	13.9%	8.3%
Supporting (Care-related)	14.6%	14.8%	14.3%	12.9%	11.1%	17.1%	14.9%	14.5%	17.0%	10.2%
Others	11.9%	13.2%	13.1%	12.0%	11.2%	19.3%	14.1%	38.5%	28.3%	31.4%
HA Overall	9.1%	9.4%	9.7%	8.9%	8.2%	17.4%	23.5%	21.0%	16.4%	13.9%

### Remarks:

- (1) Attrition (Wastage) includes all types of cessation of service from HA for permanent and contract staff on Headcount basis
- (2) Since April 2013, attrition (wastage) for the HA full-time and part-time workforce has been separately monitored and presented i.e. Full-time Attrition (Wastage) Rate and Part-time Attrition (Wastage) Rate respectively
- (3) Medical staff group includes Intern & Dental Officers
- (4) Rolling Attrition (Wastage) Rate = Total no. of staff left HA in the past 12 months /Average strength in the past 12 months x 100%
- (5) Under situation where the total count of staff left HA in the 12-month period is higher than the average strength in the period, the attrition (wastage) rate will be higher than 100%
- (6) "N/A" will be displayed when the average staff strength (part-time) is ≤ 3 staff

## Attrition (Wastage) Rate (%)<sup>(1)(2)</sup> by Cluster

**Attrition (Wastage) Rate  
(Full-time Staff)**



Cluster	Full-time <sup>(4)</sup>					Part-time <sup>(4)(5)</sup>				
	2016/17	2017/18	2018/19	2019/20	2020/21 (Rolling from Apr 20 to Mar 21) <sup>(3)</sup>	2016/17	2017/18	2018/19	2019/20	2020/21 (Rolling from Apr 20 to Mar 21) <sup>(3)</sup>
HKEC	10.0%	9.7%	10.2%	10.2%	8.9%	15.6%	25.1%	22.8%	18.0%	16.8%
HKWC	10.2%	10.0%	10.0%	7.9%	7.9%	18.3%	25.1%	25.3%	21.0%	17.5%
KCC <sup>(6)</sup>	10.3%	10.1%	10.5%	9.5%	8.2%	13.5%	15.3%	24.7%	19.1%	9.3%
KEC	8.5%	8.5%	9.4%	8.3%	7.1%	17.1%	22.3%	15.0%	14.6%	13.4%
KWC <sup>(6)</sup>	8.1%	8.7%	9.4%	8.4%	8.0%	13.6%	32.7%	21.5%	8.5%	11.4%
NTEC	10.1%	9.9%	10.0%	9.7%	9.6%	21.2%	15.0%	17.8%	19.4%	20.3%
NTWC	7.8%	9.1%	8.9%	8.4%	7.7%	23.0%	38.0%	15.7%	11.1%	10.3%
HA Overall	9.1%	9.4%	9.7%	8.9%	8.2%	17.4%	23.5%	21.0%	16.4%	13.9%

### Remarks:

- (1) Attrition (Wastage) includes all types of cessation of service from HA for permanent and contract staff on Headcount basis
- (2) Since April 2013, attrition (wastage) for the HA full-time and part-time workforce has been separately monitored and presented i.e. Full-time Attrition (Wastage) Rate and Part-time Attrition (Wastage) Rate respectively
- (3) Rolling Attrition (Wastage) Rate = Total no. of staff left HA in the past 12 months / Average strength in the past 12 months x 100%
- (4) Under situation where the total count of staff left HA in the 12-month period is higher than the average strength in the period, the attrition (wastage) rate will be higher than 100%
- (5) "N/A" will be displayed when the average staff strength (part-time) is ≤ 3 staff
- (6) KWH, WTSH and OLMH have been regrouped from KWC to KCC wef 1 April 2017. Reporting based on new clustering arrangement started from 1 April 2017. Figures under prior period are based on old clustering arrangement. All manpower information for KCC and KWC before and on / after 1 April 2017 are therefore not directly comparable



## Resignation Number and Rate

Staff Group		No. of resignations					Resignation rate			
		2020			2021	Previous period	Current period	Previous period	Current period	Variance from previous period % pt
		2Q	3Q	4Q	1Q	(Apr19 - Mar20)	(Apr20 - Mar21)	(Apr19 - Mar20) %	(Apr20 - Mar21) %	
Doctor	Senior Staff <sup>(1)</sup>	19	17	22	38	142	96	5.1%	3.3%	- 1.8
	Junior Staff <sup>(2)</sup>	9	29	16	26	105	80	3.3%	2.4%	- 0.9
	<b>Overall</b>	<b>28</b>	<b>46</b>	<b>38</b>	<b>64</b>	<b>247</b>	<b>176</b>	<b>4.1%</b>	<b>2.8%</b>	<b>- 1.3</b>
Nursing	Senior Staff <sup>(3)</sup>	13	20	32	27	52	92	0.9%	1.4%	+ 0.5
	Junior Staff <sup>(4)</sup>	213	200	279	284	1,027	976	5.1%	4.7%	- 0.4
	<b>Overall</b>	<b>226</b>	<b>220</b>	<b>311</b>	<b>311</b>	<b>1,079</b>	<b>1,068</b>	<b>4.1%</b>	<b>4.0%</b>	<b>- 0.1</b>
<b>Allied Health <sup>(5)</sup> Overall</b>		<b>33</b>	<b>68</b>	<b>56</b>	<b>74</b>	<b>204</b>	<b>231</b>	<b>2.5%</b>	<b>2.7%</b>	<b>+ 0.2</b>
<b>Supporting (Care-related) Overall</b>		<b>219</b>	<b>321</b>	<b>263</b>	<b>301</b>	<b>1,327</b>	<b>1,104</b>	<b>8.5%</b>	<b>6.7%</b>	<b>- 1.8</b>

### Remarks:

- (1) Doctor Senior Staff include permanent and contract full time staff in the rank group of Consultant, Associate Consultant and Senior Medical Officer
- (2) Doctor Junior Staff include permanent and contract full time staff in the rank group of Medical Officer/Resident and Medical Officer (Specialist)/Resident (Specialist)
- (3) Nursing Senior Staff include permanent and contract full time staff in the rank group of Chief Nursing Officer, Nursing Consultant, Department Operations Manager, Senior Nursing Officer, Ward Manager, Nursing Officer and Advanced Practice Nurses
- (4) Nursing Junior Staff include permanent and contract full time staff in the rank group of Registered Nurse, Enrolled Nurse, Midwife, Student Nurse
- (5) Allied Health includes radiographers, medical technologists/ medical laboratory technicians, occupational therapists, physiotherapists, pharmacists, medical social workers, etc

## Sick Leave <sup>(1)(2)</sup>

### (A) Average sick leave days taken per staff

Staff Group	Previous period	Current period	Variance from previous period
	Apr 19 - Mar 20	Apr 20 - Mar 21	
	A	B	$C = (B - A) / A$
Medical	3.3	3.0	- 9.1%
Nursing	8.4	7.3	- 13.1%
Allied Health	5.4	4.1	- 24.1%
Supporting (Care-related)	9.5	8.2	- 13.7%
Others	7.9	6.6	- 16.5%
<b>HA Overall</b>	<b>7.7</b>	<b>6.6</b>	<b>- 14.3%</b>

### (B) % of staff with sick leave taken ≥ 50 days

Staff Group	Previous period	Current period	Variance from previous period
	Apr 19 - Mar 20	Apr 20 - Mar 21	
	A	B	$C = B - A$
	%	%	% pt
Medical	0.9	1.0	+ 0.1
Nursing	2.8	2.7	- 0.1
Allied Health	1.4	1.1	- 0.3
Supporting (Care-related)	3.0	2.8	- 0.2
Others	2.4	2.1	- 0.3
<b>HA Overall</b>	<b>2.4</b>	<b>2.3</b>	<b>- 0.1</b>

Blue > 5%pt above previous period

Green > 5%pt below previous period

#### Remarks:

- (1) Include sick leave for full time HA staff on permanent & contract terms of employment, Civil Servants & subvented staff. Exclude sick leave for temporary & part-time staff.
- (2) Exclude EC (employee compensation) sick leave.

## **Injury on Duty**

### **(A) No. of IOD cases per 100 FTE staff**

Staff Group	Previous period	Current period	Variance from
	Apr 19 - Mar 20	Apr 20 - Mar 21	previous period
	A	B	C = B - A
Medical	5.1	4.5	- 0.6
Nursing	4.7	4.1	- 0.6
Allied Health	1.6	1.7	+ 0.1
Supporting (Care-related)	7.1	6.3	- 0.8
Others	3.2	2.9	- 0.3
<b>HA Overall</b>	<b>4.5</b>	<b>3.9</b>	<b>- 0.6</b>

### **(B) No. of IOD leave days per 100 FTE staff <sup>(1)</sup>**

Staff Group	Previous period	Current period	Variance from
	Apr 19 - Mar 20	Apr 20 - Mar 21	previous period
	A	B	C = B - A
Medical	7.8	5.9	- 1.9
Nursing	59.5	57.8	- 1.7
Allied Health	16.6	13.2	- 3.4
Supporting (Care-related)	139.7	118.5	- 21.2
Others	72.9	69.9	- 3.0
<b>HA Overall</b>	<b>70.5</b>	<b>64.8</b>	<b>- 5.7</b>

**Remarks:**

(1) As per audit recommendation, with effect from June 2011 report, all leave days taken in the reporting period will be counted, regardless of the year in which the IOD took place.

## Training Day <sup>(1)(2)(3)(4)</sup>

### (A) Total Training Days

Staff Group	Previous period	Current period	Variance from
	Apr 19 - Mar 20	Apr 20 - Mar 21	previous period
	A	B	C = B - A
Medical	N/A	24 249.6	N/A
Nursing	N/A	117 134.7	N/A
Allied Health	N/A	24 112.4	N/A
Supporting (Care-related)	N/A	26 151.6	N/A
Others	N/A	16 687.7	N/A
<b>HA Overall</b>	<b>N/A</b>	<b>208 335.9</b>	<b>N/A</b>

### (B) Average Training Days per Staff

Staff Group	Previous period	Current period	Variance from
	Apr 19 - Mar 20	Apr 20 - Mar 21	previous period
	A	B	C = B - A
Medical	N/A	3.4	N/A
Nursing	N/A	4.3	N/A
Allied Health	N/A	2.8	N/A
Supporting (Care-related)	N/A	1.6	N/A
Others	N/A	0.7	N/A
<b>HA Overall</b>	<b>N/A</b>	<b>2.5</b>	<b>N/A</b>

### Remarks

- (1) Include Permanent and Contract staff on headcount basis
- (2) Include training activities with reference to the prevailing Human Resources policies of HA
- (3) Exclude eLearning, on-the-job training and fellowship training organised by HKAM for HA doctors (records not available within HA)
- (4) Provisional data for reference only. According to Training Data Governance Framework, training organizers are allowed 3-month time to include any backdated transactions. The training KPI will be finalized on 1 Jul every year and reported in the next reporting year.