

9 The Way Forward



Keep momentum of reform
Modernise workforce and care delivery
Continuous improvement



901 Two years into launching Doctor Work Reform, the Steering Committee was glad to learn that HA had made great strides in improving its doctors' working conditions and ensuring the quality and safety of patient care in public hospitals. Greater workforce flexibility had been developed in various disciplines, while the roles of health carers were modernised with improved operational efficiency and patient safety. Despite the limited scale of implementation and the daunting challenges encountered in the pilot phase, the work reform strategies were proven effective and had laid a solid foundation for delivering better and more efficient healthcare services in public hospitals. These strategies should be implemented, irrespective of any work hour targets in the organization; and HA should capitalise on the success attained in various work reform programmes in order to further optimise the total workload, improve the work-life balance of its healthcare staff and provide better and safer health services for the community.

902 As there would be rising demand for workforce reform in the healthcare sector, HA should keep the momentum of launching effective work reform strategies, coupled with regular performance management, and continue its workforce reform by extending non-medical carers' roles to substitute doctors' technical tasks in care delivery. Community-based and ambulatory care, along with enhanced public-private partnership, should also be developed in order to manage the rising workloads in public hospitals. Yet, to attain greater success, it required not only leadership at the top, but also the concerted efforts at the frontline and the continued support of all stakeholders.

903 The Court of Final Appeal’s judgment on doctors’ claims surely had bearings on the off-site call systems for specialists on rest days and statutory / public holidays. It provided the corporate management with a golden opportunity to recognise the dedicated work of frontline doctors in delivering quality patient services. Yet, revamping doctors’ on-call systems, while complying with the court requirement for giving genuine day-offs for on-call duties without restrictions, should take into account patient safety and good use of public money. HA should keep in close liaison and communication with doctors at all levels in order to arrive at practicable solutions without compromising the quality and safety of patient care in public hospitals.

THE STEERING COMMITTEE’S RECOMMENDATIONS

904 The Steering Committee put forward the following recommendations in relation to the way forward of Doctor Work Reform in HA:

- a) HA was recommended to keep the momentum of reform, roll out effective work reform strategies to other public hospitals in phases and continue its various service rationalization initiatives in order to improve doctors’ work-life balance and ensure the quality of patient care, taking into account the “People First” culture, patient safety, prudent use of public money, rationality, operational practicability and service sustainability.
- b) HA was recommended to continue developing a flexible workforce with extended roles to meet the evolving healthcare needs of the society, reinforcing risk management through protocol-based care and technology-based pathways, as well as fostering teamwork among the healthcare professionals in order to deliver quality and safe care in public hospitals.
- c) HA was recommended to extend its scope of community and ambulatory services with improved system support and expand its public-private partnership programmes in order to reduce avoidable admissions and workload in public hospitals and manage patients in a safer, more convenient and cost effective manner.
- d) HA was recommended to keep track of doctors’ working conditions and introduce pragmatic work arrangements in the light of different clinical specialties’ readiness and operational practicability in order to gradually attain the continuous work hour targets of 16 hours on weekdays and 24 hours at weekends and holidays in the long run.

- 904 e) HA was recommended to keep in close liaison and communication with stakeholders at all levels in revamping its on-call systems while not compromising the quality and safety of patient care in public hospitals. Collaboration with the HKAM should also be continued in monitoring the effects of reduced work hours on doctors' specialist training.