

**Legislative Council Motion Debate on
“Policy on Nursing Manpower” on 20 June 2007
Progress Report**

At the meeting of Legislative Council on 20 June 2007, the following motion moved by Dr Hon Joseph LEE Kok-long, as amended by Dr Hon Fernando CHEUNG Chiu-hung, was carried:

“That, despite the increasing demand for health care services in Hong Kong in recent years because of the continuous ageing of the population, the Government has failed to work out a long-term plan for nursing human resources, resulting in a significant shortage of nurses over the years, and the lack of promotion prospects in public hospitals has led to low morale and persistent wastage of nurses; moreover, the Hospital Authority has recently projected that the number of nurses would still fall short of the demand in the coming years; and it is even more difficult for the social welfare sector to recruit nursing staff due to the implementation of the Lump Sum Grant (LSG) subvention system, thus seriously affecting the quality of elderly and rehabilitation services; in view of the above factors, this Council is worried that the quality of nursing services in public hospitals and in the social welfare sector will decline and therefore urges the Government to expeditiously implement the following measures to maintain the quality of nursing services in Hong Kong:

- (a) devising a comprehensive and long-term plan for nursing human resources for general and psychiatric services as well as for the social welfare sector, including a comprehensive survey on the manpower demand for nurses;
- (b) immediately conducting a comprehensive review of the LSG subvention system implemented in the social welfare sector, and ensuring that sufficient nursing staff can be recruited in the market by organisations providing elderly and rehabilitation services with a view to enhancing service quality;

- (c) formulating an appropriate manpower ratio between nurses and clients of nursing care for public hospitals as well as for elderly and rehabilitation services;
- (d) allocating more resources to the training of nurses and increasing the places for degree programmes on nursing;
- (e) improving the pay and promotion prospects of nurses in public hospitals and in the social welfare sector to curb the wastage of nurses; and
- (f) facing up to the problem of ‘de-nursing’, in particular the common practice of assigning health workers to undertake certain nursing duties in the social welfare sector, and ensuring that nursing services are provided by nurses to clients of nursing care.”

Progress

2. To maintain the quality of our health care services and to foster the sound development of our health care system, a sufficient supply of professional human resources is indispensable. Therefore, the Government’s overall policy is to ensure that the supply of nursing manpower largely corresponds to our long-term demand, and at the same time, to upgrade local nursing education to degree level.

Nursing manpower planning, allocating more resources to the training of nurses and increasing the places for degree programmes on nursing

3. The Government makes projections on long-term manpower demand from time to time to gauge the demand for nursing programme places. When making manpower projections, we would take into account the views of major employers of nurses, such as the Hospital Authority (HA), the Department of Health, the Social Welfare Department (SWD) and private hospitals.

4. In the 2007/2008 academic year, the University Grants Commission (UGC)-funded institutions and the Open University of Hong Kong will provide a total of about 710 nursing first-year-first-degree undergraduate places, 30 senior year places for nursing undergraduate programmes and 110 nursing higher diplomas places. In view of the great demand for nurses from the public and private medical organizations as well as the social welfare sector, we plan to recommend the UGC to further increase the number of publicly funded places for first-year-first-degree programmes. The final intakes will however depend on such factors as the capacity of the institutions, students' inclinations and the enrolment situation. In addition, funding has already been allocated to the HA to organize in the coming three years three additional classes of higher diploma nursing programmes, with each class comprising around 110 students. The class for this year will start in September, and students are now being recruited. Recruitment of students of the subsequent class will start in July next year. In response to market demand, some private hospitals have run or are preparing to run nursing training programmes.

5. As for welfare organisations, we will commission the HA again to organize three more rounds of enrolled nurses training programmes for the social welfare sector in December 2007, 2008 and 2009. Graduates of the programmes have to work in the social welfare sector for two years. These programmes will provide a total of 330 additional places for enrolled nurses. That would help the social welfare sector, especially residential care homes for the elderly (RCHEs), alleviate the problem of shortage in nursing manpower by recruiting and retaining enrolled nurses who graduate from the programmes.

Formulating an appropriate manpower ratio between nurses and clients of nursing care for public hospitals as well as elderly and rehabilitation services

6. At present, the HA uses a set of specialty-based ward-manpower indicators to assess its nursing manpower demand. On top of the indicators, the HA will also take into account the number of ward beds, occupancy rate, special nature of wards, as well as the conditions of patients and their health care needs. A set of auxiliary tools has also been developed to assess the health care needs of patients. The HA employ the tools to divide

patients into four groups according to the level of health care required. This will be followed by an assessment of the overall nursing dependency level of the patients of a certain ward, which is to be used as a reference for the nursing staff establishment. The HA will review and fine-tune these manpower assessment tools from time to time.

7. Meanwhile, the manpower ratios of the RCHEs are determined on the basis of the minimum manpower requirements for various types of RCHEs as specified in the Residential Care Homes (Elderly Persons) Regulation. For those providing subvented residential care home services under service contracts or the Enhanced Bought Place Scheme agreements, the manpower ratios between nurses and clients of nursing care are also clearly set out in their contracts or agreements. As to the manpower ratios of the residential care homes for persons with disabilities, reference can be drawn from the Code of Practice for Residential Care Homes for Persons with Disabilities formulated in 2002.

Improving the pay and promotion prospects of nurses in public hospitals and the social welfare sector to curb the wastage of nurses

8. The HA has established taskforces to research into the reform of the nursing grade structure. Frontline staff are adequately involved in such taskforces. This year, the HA plan to recruit full-time nurses and part-time nurses to ease the pressure on its nursing manpower. To attract more resigned nurses to re-join the public hospital workforce to serve the public, the HA will offer more attractive employment terms based on part-time nurses' seniority. In the past six months, the HA have recruited 50 more registered nurses to provide service on part-time basis.

9. As far as improving the remuneration and working environment for nurses are concerned, the HA have launched a series of measures to attract and retain nurses since last year, which include offering eligible nurses permanent appointments; hitherto a total of 207 registered nurses on contract terms have been offered permanent appointment this year. The HA have also introduced flexible continuous night shift to reduce nurses' frequency of night shifts, and have offered cash allowance in lieu of accrued annual leave.

10. In addition, the HA will strengthen the professional development and training for nurses, enhance the professional development prospects for nurses and curb the wastage of nurses through improving promotion prospects. The HA will provide a two-year mentorship scheme to newly graduated nurses, as well as subsidized training to registered nurses and enrolled nurses taking conversion courses. The HA will also provide serving nurses with the opportunities to pursue advanced or specialty courses.

11. In the 2006/07 financial year, the HA have promoted over 160 registered nurses to the rank of Advanced Practice Nurse, and have offered a specialty certificate programme and a professional competence enhancement programme to 333 and 6,238 serving nurses respectively. These programmes can enhance the clinical nursing knowledge of nurses and upgrade their professional qualifications. Each year, the HA will also facilitate some 150 enrolled nurses who have successfully completed the conversion programmes to become registered nurses. Upon their conversion to registered nurses, enrolled nurses will have better promotion prospects.

Facing up to the problem of 'de-nursing'

12. Health care service has all along been provided to patients on a team basis through the cross-discipline cooperation of different professions. Duties under the purview of the nursing profession are performed by nurses with professional qualifications. Senior nurses are also required to supervise and coordinate the work of nursing staff and other clinical supporting staff in wards and in the nursing teams. Depending on operational needs, the HA will recruit supporting staff to aid the work of nurses. In the last financial year, the HA have employed some 170 ward stewards and supporting service assistants to share such duties of nurses as clerical work, checking and accepting of supplies, and assisting patients with respect to hygiene needs, feeding and bed-making. This policy enables nurses to focus on their professional nursing work, which in turn alleviates the workload of the frontline nurses and improves the quality of services. Nevertheless, those supporting staff will not perform any health care duties which have to be undertaken by professional nursing staff.

13. Furthermore, in October 2005, the SWD issued an updated version of the Code of Practice for Residential Care Homes for the Elderly, which detailed the duties of the Health Workers (HWs). A revised HWs' training course was introduced in April 2006 with improvements to the course contents, minimum entry requirements and performance assessment. While the trained HWs can provide the RCHE residents with general care services, special nursing procedures such as the use of catheters or feeding tubes must still be carried out by nurses.

Immediately conducting a comprehensive review of the LSG subvention system implemented in the social welfare sector

14. The LSG subvention system has been implemented in the social welfare sector since 2001. To date, 164 organizations have joined the system voluntarily, which accounts for 99% of the entire amount of subventions. The Government believes that through implementing the LSG subvention system, the organizations concerned can formulate their own corporate governance to provide quality and efficient social services, thereby better meeting the needs of society. The organizations can decide on the service units' staffing arrangements, having taken into account such factors as their own human resources management policies and service demands. The SWD, as the provider of funding support, also constantly monitor the service quality of the organizations to ensure the proper use of public resources.

15. Under the overriding principle of upholding the LSG policy, the Government will study how to perfect the implementation details of the subvention system. The Director of Social Welfare will soon convene a Lump Sum Grant Steering Committee meeting to discuss with members and social welfare sector representatives how to implement LSG arrangements more effectively, as well as relevant improvement measures.

Food and Health Bureau

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